

Review of Navigation Team 2018 Quarter 1 Report

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Seattle Office of City Auditor

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Report Highlights

This report is the second in a series on the City of Seattle's Navigation Team that our office will be producing at the request of Seattle City Councilmember Lisa Herbold. This report assesses the Executive's [Quarter 1 response](#) to the [Navigation Team reporting plan](#), a plan with 14 reporting checkpoints designed to help inform the City Council on the Navigation Team approach.

The City launched its 22-person Navigation Team in February 2017 "to provide outreach to people living unsheltered that is efficient and effective at moving people out of hazardous conditions and onto a path toward health, stability, and permanent housing."¹ This report was reviewed by the Executive and incorporates its input, but the Executive did not provide a formal written response.

What We Found

We identified findings for each of the reporting checkpoints in the Executive's [Quarter 1 response](#) to the [Navigation Team reporting plan](#). Significant findings include:

- The Executive is currently taking important steps to improve the Navigation Team's approach, its data systems, and its financial reporting. However, these improvements will not be fully in place to generate a reliable baseline from which to assess future performance of the Navigation Team until 2019.
- Low shelter bed availability, particularly in enhanced shelters, may limit the Navigation Team's ability to make alternate living arrangement referrals to unhoused individuals.
- 2017 data suggest there are opportunities for increasing use of diversion strategies (e.g., reunification with family/friends) for Navigation Team clients.
- Consistent metrics among homeless outreach providers could provide useful information for refining or revising Navigation Team practices and City service offerings.
- With the July 2018 transition of Navigation Team leadership to the Human Services Department (HSD), the City will need to ensure that HSD has adequate support and resources to implement improvements including: redevelopment of the Navigation Theory of Change and training plan, implementation of trauma-informed care, racial equity analysis, and rigorous evaluation of the Navigation Team.

¹ See Appendix C: Navigation Team Theory of Change.



AUDIT SCOPE

This audit addresses 7 of the 14 reporting checkpoints in the [Navigation Team reporting plan](#):

- 1.1 Analysis of Navigation Team engagement rate
- 1.3 Trauma-Informed Care self-assessment
- 1.4 Evaluation of Navigation Team training
- 2.4 Assessment of opportunities for greater coordination with King County
- 3.1 Report on 2017 baseline data – "Results and Outcomes"
- 3.2 Report on 2017 expenditures
- 3.4 Report on 2017 racial equity impacts

As requested by Seattle City Councilmember Lisa Herbold, our office will also conduct audits on the Executive's responses to the remaining 7 checkpoints in the Navigation Team reporting plan.

AUDIT RECOMMENDATIONS

Based on our audit findings, we developed a set of 30 recommendations that are listed in Appendix B of this report. Our office will report on the status of these recommendations through our annual recommendation follow-up process.

Seattle Office of City Auditor

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INTRODUCTION

Audit Overview

This report is the second in a series on the City of Seattle's Navigation Team that our office will be producing at the request of Seattle City Councilmember Lisa Herbold. This report assesses the Executive's [Quarter 1 response](#) to the Navigation Team reporting plan, a plan with 14 reporting checkpoints designed to help inform the Seattle City Council about the Navigation Team approach. We proposed the reporting plan in our [first report](#) on the Navigation Team, which was published in November 2017.² That same month the City Council passed a Statement of Legislative Intent (SLI)³ directing the Department of Finance and Administrative Services (FAS) and the Human Services Department (HSD) to report on Navigation Team activities in accordance with the reporting plan.

Background

The Navigation Team is an approach developed by former Mayor Murray's administration for addressing the issue of people living unsheltered in Seattle. On January 27, 2017, a [point in time count](#) found that there were 8,476 people experiencing homelessness in Seattle. Of this total, 3,857 people were unsheltered (i.e., they were sleeping in tents, vehicles and RVs, and on the street).

The Navigation Team became operational in February 2017. The 22-person team is "comprised of specially-trained Seattle Police Department (SPD) officers, a supervising police sergeant, an outreach coordinator, an encampment response manager, field coordinators, and contracted outreach providers."⁴

The goal of the Navigation Team is "to provide outreach to people living unsheltered that is efficient and effective at moving people out of hazardous conditions and onto a path toward health, stability, and permanent housing."⁵ The Navigation Team Theory of Change (see below for our description of the Theory of Change approach) specifies that "the City has made the strategic operational decision to deploy the Navigation Team in conjunction with the ongoing encampment cleanup work conducted by the Finance and Administrative Services (FAS) Department."⁶ It is important for the City to ensure that the Navigation Team is an approach that is appropriate and humane as well as efficient and effective.

² [Reporting Plan for Navigation Team](#), November 2017, Seattle Office of City Auditor

³ [Statement of Legislative Intent 242-1-A-1](#)

⁴ See Appendix C: Navigation Team Theory of Change

⁵ *ibid*

⁶ *ibid*

The sections that follow address each of the seven reporting checkpoints in the Executive's [Quarter 1 response to the Navigation Team reporting plan](#). Each section begins with a brief description of our findings and any additional research evidence, leading practices, and emerging issues that support our recommendations.

Limitations: Due to the short timeframe in which we had to conduct our work, our office limited this project to assessing the Executive's [Quarter 1 response to the Navigation Team reporting plan](#). We did not conduct any direct observations of the Navigation Team's work in the field. Also, we did not verify the accuracy and completeness of the information provided by the Executive. We learned from HSD that 2017 Navigation Team data were collected by three separate entities, and each entity each used their own separate system. The three systems did not share a common platform and were not reconciled with one another. We describe in this report the data accuracy, completeness, and consistency issues that we identified during the project, and we describe the Executive's current efforts to improve Navigation Team data systems.

We would especially like to thank Dr. Cody Telep and Katharine Brown of Arizona State University for their help in identifying emerging research. We would like to thank the following individuals for providing comments on an earlier draft of the report: Lee Thornhill, Seattle King County Public Health; Justin Anderson and Kayvon Zadeh, King County Auditor's Office; Shannon Harper, University of Washington West Coast Poverty Center; and Dr. Cody Telep and Katharine Brown, Arizona State University.

This report was reviewed by the Executive and incorporates its input. The Executive did not provide a formal written response for this report.

What is a Theory of Change?

Following a request from City Councilmember Lisa Herbold, the Mayor's Office developed a Theory of Change for the Navigation Team on August 11, 2017 (see Appendix C). A Theory of Change is basically a framework for understanding how a program works. The Theory of Change framework is used by tens of thousands of government agencies, nonprofits, funders, and researchers, including many organizations in Seattle. It can help an organization understand whether a program is effective and can help promote continuous improvement.

In its simplest form, a Theory of Change is a discussion of what change is expected to happen as a result of a specific intervention.⁷ It

⁷ For example, [United Way of King County's Parent-Child Home Program](#) is designed to improve school readiness and academic success of children from low-income families by providing twice-weekly home visits from trained parent

should describe the change that is intended and all of the activities that the program will undertake to produce that change. It should also include short and long-term outcome measures that will indicate whether the intervention is on track for success or if course corrections are needed. Very importantly, a valid Theory of Change must be grounded in research evidence on “what works.”⁸ As in a medical model, you would not want to use a treatment without evidence that it could be effective.

It requires the program to be open to analysis, changes, and course corrections in the spirit of doing “what works.”

To be applied successfully, the Theory of Change framework also requires patience and commitment, as it is an iterative process of systematic data collection and analysis to assess outcomes and make the adjustments necessary to keep the program on track. Moreover, program stakeholders must maintain genuine intellectual curiosity and transparency about how the strategies are working and how they could be continually improved. The Theory of Change framework requires the program to “lay all its cards out on the table” and clearly communicate the thinking behind the program, all the operational details, and all of the data.

As a result of these requirements, a successful Theory of Change requires trust and openness from program stakeholders, and a Theory of Change framework will not work if stakeholders are polarized. However, when applied well, the Theory of Change framework has the potential to shift the conversation from polarized viewpoints to a focus on “what works?” and “is this working?”

To promote continuous improvement and with the goal of learning “what works,” our office reviewed the Executive’s draft Theory of Change and developed our November 2017 [Reporting Plan for the Navigation Team](#). In the November 2017 report, we posed questions about the Navigation Team Theory of Change that fell into three broad categories:

1. Is the **composition of the Navigation Team** appropriate for Seattle’s needs?
2. Are there opportunities for the City to increase the Navigation Team’s effectiveness by incorporating a more **strategic approach**?
3. How might the City better use **data and evaluation** to ensure that the Navigation Team achieves its intended outcomes?

coaches who model educational play. This theory of change clearly identifies the change that is expected (improvement in school readiness and academic success) and the mechanism by which that change will be affected (twice-weekly home visits).

⁸ There are many online resources for developing a Theory of Change, including a guide from the [Annie E. Casey Foundation](#) and a website from the [U.S. Agency for International Development](#).

Our November 2017 report identified a reporting plan with 14 requests for information (i.e., “reporting checkpoints”) that can help inform the City Council’s understanding of the Navigation Team approach. The Executive’s Quarter 1 report addressed seven of these reporting checkpoints, and this report assesses the Executive’s responses.

Exhibit 1. Reporting checkpoints addressed in the Executive’s 2018 Quarter 1 report

Checkpoint #	Request
1.1	Analysis of Navigation Team engagement rate
1.3	Trauma-Informed Care self-assessment
1.4	Evaluation of Navigation Team training
2.4	Assessment of opportunities for greater coordination with King County
3.1	Report on 2017 baseline data – “Results and Outcomes”
3.2	Report on 2017 expenditures
3.4	Report on 2017 racial equity impacts

Source: Executive’s [Quarter 1 response to the Navigation Team reporting plan](#)

2017 as Navigation Team “Pilot” Year

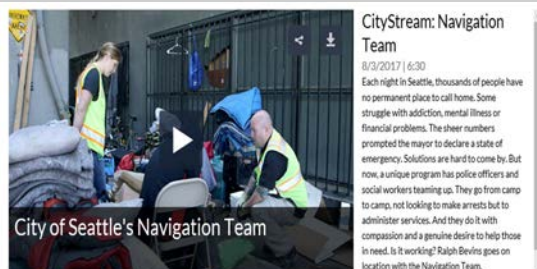
Because tracking and analyzing outcome data is a key element of the Theory of Change framework, it is essential to establish a baseline against which future performance will be measured. We encourage the City to consider the 2017 implementation of the Navigation Team as a “pilot implementation” year rather than the baseline year for assessing future performance.

The Navigation Team was initiated in February 2017 under former Mayor Murray’s administration (see text box below). The Theory of Change for the Navigation Team (Appendix C) was not developed until August 2017, when program operations were already well underway. Moreover, performance and expenditures data collected in 2017 for the Navigation Team were generated from multiple, unconnected data tracking and financial systems and were provided in a variety of formats that could not be reliably reconciled. As a result, neither the Executive (the City Budget Office [CBO], HSD) nor our office independently verified the 2017 data presented in the Quarter 1 response. We describe issues with the 2017 data in greater detail throughout this report.

Development of Navigation Team Approach

The Navigation Team was created in 2017 to respond to an acute humanitarian and public health crisis in the City of Seattle. Cities around the country are struggling to address the complex issue of homelessness, including developing humane and effective approaches for addressing the myriad issues faced by people who are living unsheltered. No city has found the perfect solution to this crisis.

In 2017, the Navigation Team leadership and staff invested considerable time, energy, thought, and commitment into the development and implementation of the approach used by the team. This Seattle Channel video (below) provides a look into the Navigation Team operations in 2017, including the extreme challenges encountered by the team daily.



"Living outside—it's not humane. There's health concerns there with just the amount of mud, and feces, and rats, and garbage. A lot of (the unsheltered homeless individuals) are dealing also with medical conditions that they aren't taking care of, so that adds to it...it's not healthy for people to be living in. We can do better than this." - Sergeant Eric Zerr, Navigation Team

Source: Seattle Channel⁹

Throughout 2017, the Navigation Team worked to refine and improve its practices based on lessons they were learning from the field, input from stakeholders, and information from other jurisdictions. The Executive's [Quarter 1 response to the Navigation Team reporting plan](#) is also a reflection of its commitment to continuous improvement. While acknowledging the City's work in 2017, there is still the need to "do better." We hope the recommendations in this report will offer the City avenues to explore in 2018 and beyond.

Important Improvements Are Underway

The Executive is currently taking important steps to improve the Navigation Team's approach, its data systems, and its financial reporting. Beginning in August 2018, HSD started leading an effort to review and revise the Theory of Change for the Navigation Team. The revised Theory of Change can provide greater clarity about what the Navigation Team is expected to do and how the City will know if it is effective.

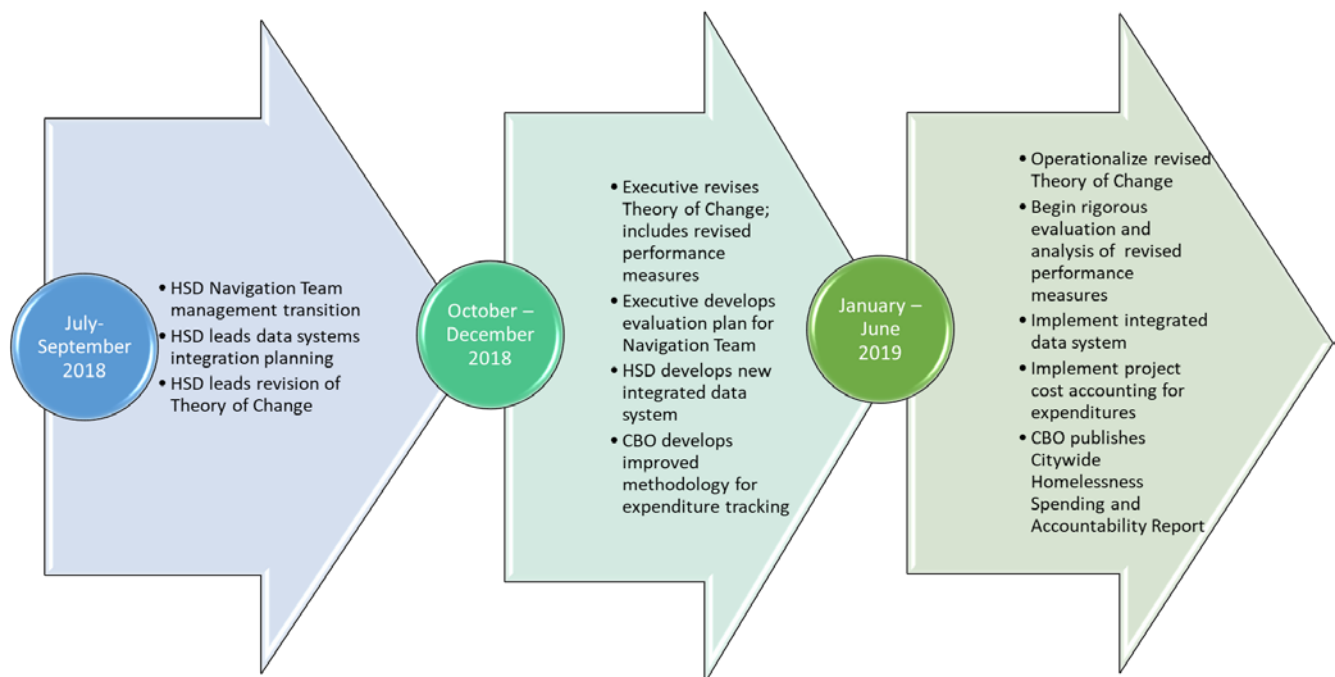
To make sense of the complex reality of street homelessness, the City is going to need accurate detailed information about its current efforts and results. The City also needs to candidly assess the gaps in its current knowledge and maintain a genuine openness and curiosity that promotes continuous improvement. HSD's plan for a revised Theory of Change provides an opportunity to ensure the City proceeds systematically and with as much information as possible. In addition, CBO is currently working to develop a methodology to more accurately track Navigation Team expenditures across City departments as part of a larger effort to track homelessness-related spending Citywide.

⁹ [Seattle Channel, CityStream: Navigation Team, 8/3/17, TV ID: 4051708](#)

Exhibit 2 below provides a summary of the improvements for the Navigation Team that are currently underway or planned for the future. We will address these improvements in greater detail in the following sections of our report.

Given the limitations of systems for consistent tracking of Navigation Team performance and expenditure data for 2017, we would encourage the City to consider the 2017 implementation of the Navigation Team as a pilot year of implementation. Further, while some systems improvements are underway in 2018, the Executive's timeframe suggests that data and expenditures tracking systems will not fully be in place until 2019. As such, 2018 should be considered an extension of the pilot year. The Executive anticipates that sometime in 2019 these systems will allow the City to use Navigation Team data as a reliable baseline from which to assess future performance.

Exhibit 2. Estimated Timeline for the Executive's Planned Improvements to the Navigation Team



Source: Office of City Auditor interviews with officials from HSD and CBO.

CHECKPOINT 1.1: ANALYSIS OF NAVIGATION TEAM ENGAGEMENT RATE

Section Summary

Reporting Checkpoint 1.1 raised questions about the rate at which the Navigation Team can successfully engage with unsheltered individuals, and it requested an analysis of the Navigation Team engagement rates from February 22 through December 2017.

The Executive's Quarter 1 Response provided several engagement metrics for the Navigation Team, including total contacts made, unique individuals contacted, service offers accepted, and number of referrals made to alternative living arrangements. However, our office did not verify the accuracy of these data because of limitations with the data collection systems we discuss below.

Although we were unable to verify the data in the Executive's Quarter 1 Response, we made the following observations based on the general trends we noted in the 2017 engagement data and additional information we reviewed during the audit:

- Low shelter bed availability, particularly in enhanced shelters, may limit the ability of the Navigation Team to make alternate living arrangement referrals to unsheltered individuals.
- 2017 data suggest there are opportunities for increasing use of diversion strategies.
- Consistent metrics among homeless outreach providers could provide useful information (e.g., reasons for refusal) for refining or revising Navigation Team practices and City service offerings.

This section concludes with seven recommendations including ensuring that planned systems improvements are adequately supported, exploring opportunities to increase enhanced shelter capacity and diversion strategies for Navigation Team's clients, and ensuring that Navigation Team metrics are consistent with those tracked by other outreach providers.

Limitations with 2017 Engagement Data

We learned that 2017 data on the Navigation Team's activities were collected by three separate systems maintained, respectively, by the Department of Finance and Administration Services (FAS), the Seattle Police Department (SPD), and REACH, the non-profit organization the

City of Seattle contracted with to help with Navigation Team outreach. These systems did not share a common platform. Consequently, the 2017 data were manually combined.¹⁰ Due to the lack of maturity of the Navigation Team data systems in 2017 and the fact that improvements are underway in 2018 to improve the Navigation Team data systems, our office opted not to independently verify the 2017 Navigation Team engagement metrics.

HSD has begun business process and data-flow analyses for the Navigation Team. HSD officials told us that they will also try to do some manual reconciliations of the three systems beginning with the 2018 Navigation Team data. In addition, HSD is pursuing an updated data system for the Navigation Team in which FAS, SPD, REACH, and other outreach partners can share a common platform, use common data fields, and produce consistent metrics. HSD plans to develop the system to adhere to strict privacy standards and allow for compatibility with the countywide Homeless Management Information System (HMIS). The Executive expects to have this new data system in place in 2019.

Lack of shelter bed availability, especially in enhanced shelters, limits referrals

Through our review of HSD's shelter bed availability data¹¹, we identified a trend of limited numbers of shelter beds that were available daily to the Navigation Team in 2017, particularly in enhanced shelters. The lack of shelter bed availability, especially in enhanced shelters, adversely affects the Navigation Team's ability to make alternate living arrangement referrals.

Enhanced shelters provide 24 hours a day and 7 days a week access and secure storage, allow pets, and offer accommodations for

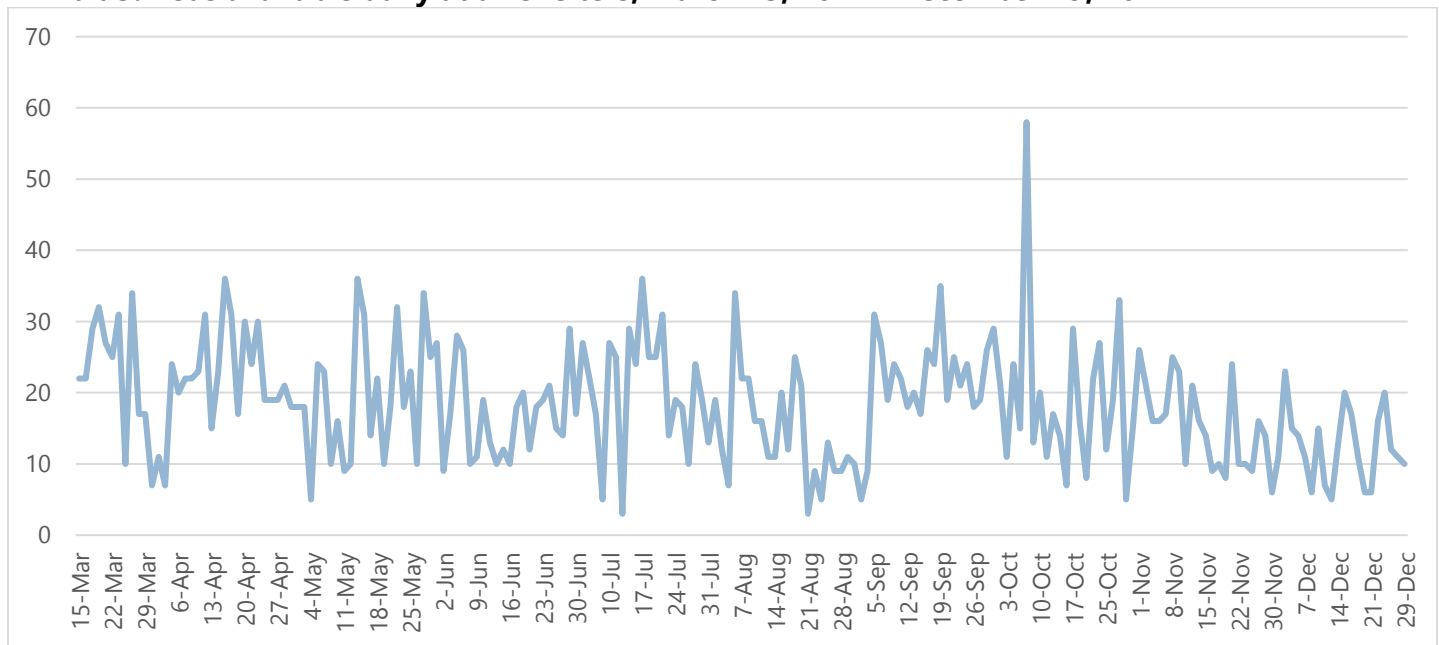
¹⁰ For example, in 2017, SPD used a custom application for tracking Navigation Team clients, REACH used its in-house software, and FAS tracked Navigation Team clients in an Excel spreadsheet. In 2017, the FAS Navigation Team Outreach Coordinator did considerable work to manually combine the data from these separate systems into a single spreadsheet (i.e., the "By-Name List"). In addition, the Outreach Coordinator worked to incorporate information from other outreach organizations (e.g., Metropolitan Improvement District, Urban League, Union Gospel Mission, etc.) into the By-Name List.

¹¹ On June 12, 2018, when the Executive presented their [Quarter 1 response to the Navigation Team reporting plan](#) to the City Council's [Civil Rights, Utilities, Economic Development, and Arts Committee](#), Councilmember Lisa Herbold asked if an analysis could be done that correlated Navigation Team data on acceptance of referrals to alternative living arrangements with number of available beds. Due to data systems limitations, HSD indicated that this analysis was not possible using 2017 Navigation Team data. However, HSD was able to provide our office with the daily counts of bed availability collected by the Navigation Team in 2017. HSD indicated that the data provided was based on what HSD received from shelters each morning by 7am. HSD explained to us that Navigation Team members may get updated availability information throughout the day by contacting shelter providers directly, but the updates are not entered in the system. Consequently, HSD's bed availability data does not include the additional vacancies that the Navigation Team may learn about while in the field. The dataset provided by HSD was missing data for March 31, so that day was not included in our analysis. Also, the dataset included some data that HSD staff recreated from memory in September 2018 for certain periods of time in 2017 around the opening of new tiny home villages and shelters. These include: Myers Way (March), Georgetown (March), Licton Springs (April/May 2018), Navigation Center (July/August 2018), First Presbyterian (September/October 2018).

couples. They also may provide laundry facilities, showers, and access to case management. Because of the services and facilities offered, enhanced shelters reduce the barriers for acceptance of a shelter referral. In other words, referrals to enhanced shelters are generally more successful than referrals to basic shelters. The 2017 data showed that the availability of shelter beds to the Navigation Team was generally very low at all types of shelters, but it was especially low at enhanced shelters.

Exhibit 3 shows the fluctuation in daily available beds at all shelters from March 15 through December 29, 2017 on the days the Navigation Team worked. The data show that there was a daily average of 18 beds available for Navigation Team referrals. This includes 27 days when fewer than 10 beds were available in all shelters.

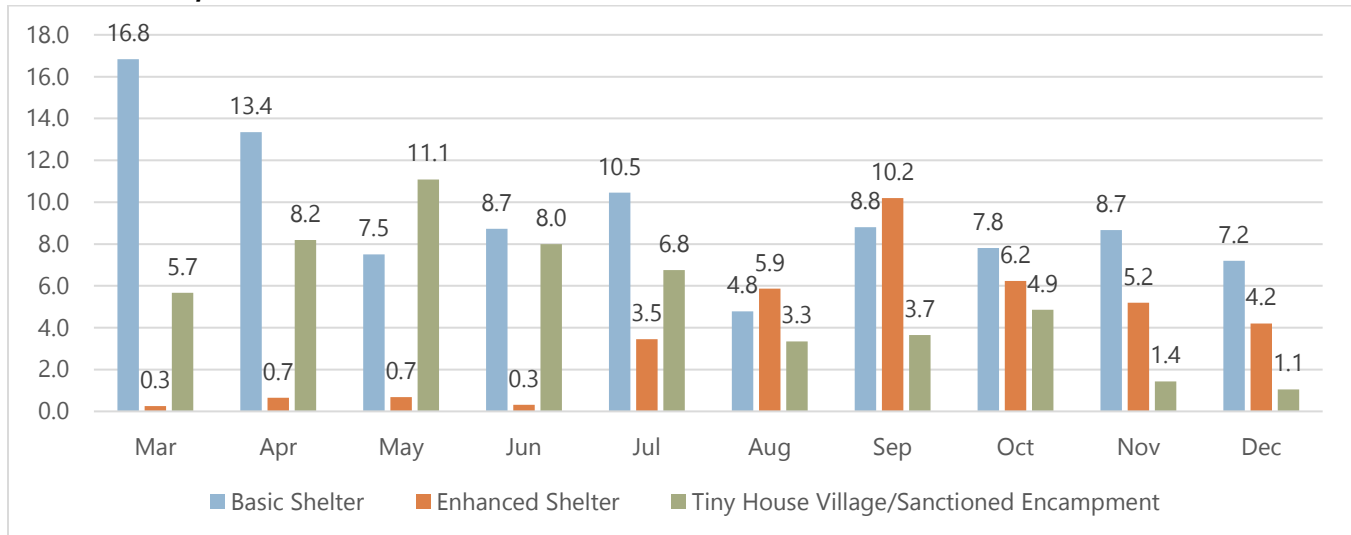
Exhibit 3: Beds available daily at all shelters, March 15, 2017 - December 29, 2017



Source: Office of City Auditor analysis of shelter bed availability data provided by HSD.

Exhibit 4 shows the average daily vacancy rate during the same period by month and by shelter type (i.e., basic shelter, enhanced shelter, and tiny house village/sanctioned encampment). As can be seen in Exhibit 4, there were several months in which availability in enhanced shelters was extremely low, and there were four months in which the average daily vacancy in enhanced shelters was less than 1 bed.

Exhibit 4: Average beds available daily by month and shelter type, March 15, 2017 – December 29, 2017



Source: Office of City Auditor analysis of shelter bed availability data provided by HSD.

The Executive's Quarter 1 report (page 4) shows far fewer accepted referrals to basic shelters than to enhanced shelters and tiny house villages/sanctioned encampments. This was the case even though HSD's bed availability data shows that there were generally more vacancies in basic shelters. The Executive's report indicated that, in 2017, 401 Navigation Team clients accepted referrals to enhanced shelters, 319 accepted referrals to tiny house villages/sanctioned encampments, and about 102 accepted referrals to basic shelters. Unfortunately, as shown in Exhibit 4, the Navigation Team generally had only 4-12 vacancies to offer each day in enhanced shelters or tiny house villages/sanctioned encampments.

The shelter availability data appear to reflect what the Navigation Team staff and leadership have reported anecdotally, that when offers of enhanced shelters are made available to Navigation Team clients, the clients will accept those offers. In other words, the Navigation Team's acceptance rate may have been higher if more beds in enhanced shelters had been available.

Based on our observations, three questions emerge:

- What can the City do to increase slots for Navigation Team referrals in enhanced shelters?
- Should the City consider dedicating or reserving a certain number of enhanced shelter beds for Navigation Team clients?
- Why does the City continue to invest additional resources in basic shelters (e.g., City Hall shelter)?

Options for addressing increased demand for enhanced shelters¹²

Enhanced shelter capacity: Our [November 2017 report](#) offered examples of other jurisdictions that have rapidly deployed new “bridge-to-housing” facilities. In this past year, San Diego has deployed three new bridge-to housing structures serving a total of 700 individuals. Two of the three structures were funded by private philanthropists. In addition, in 2018 to date, the city of Sacramento has secured \$1.3 million in private funding to rapidly deploy three 200-bed bridge-to-housing structures on city land.

Bridge-to-Housing Structures



VVSD Sprung Structures Temporary Bridge Structure

Bridge-to-Housing structures, which are currently used in jurisdictions including San Diego and Sacramento, CA, have electricity, heat, and water. They can be configured to accommodate tens to hundreds of individuals, based on the needs of the program, with bunks and storage, semi-private or private rooms, kitchens, or offices.

Click on the image to go to a video of a structure operated by Veterans' Village of San Diego.

Source: Used with permission of Sprung Instant Structures.

[Sacramento's new “triage” \(i.e., bridge-to-housing”\) shelters](#) are characterized by the following:

- Open and staffed 24 hours every day and 7 days a week;
- Encourage guests who typically do not or cannot access traditional shelters by allowing:
 - Guests with pets, partners, and possessions;
 - Guests with mental health or addiction issues;
 - Guests who have been banned from traditional shelters;
- Provide on-site wrap around services by professional staff;
- Do not exit people to the streets but allow them to stay until a permanent housing opportunity has been identified.

Reserved enhanced shelter beds for Navigation Team: Compass Housing Alliance's [Peter's Place](#) overnight shelter reserves its 46 basic shelter beds (38 for men and 8 for women) for clients of the Navigation Team and the Metropolitan Improvement District (MID) outreach team. Given the high demand and limited supply of enhanced shelter beds, it might be helpful for the Navigation Team to also have reserved access to a number of beds at enhanced shelters. In Portland, OR, for example, the City-run Service Coordination Team¹³

¹² An August 29, 2018 update on the Mayor's plans to increase shelter availability by 25% can be found [here](#).

¹³ See pages 36-37 of the Police Executive Research Forum's June 2018 report [The Police Response to Homelessness](#) for a case study of Portland's Service Coordination Team (SCT). SCT has been evaluated annually by Portland State University. The 2017 evaluation found a 75% reduction in post-program arrests among the 185 clients served in the evaluation period. In addition, for every dollar spent of SCT program costs, the evaluators calculated savings of more than \$13 in reduced crime and justice system costs.

has exclusive access to low-barrier Housing-First shelter beds as well as low-income transitional housing units for its outreach clients.

Recent basic shelter investments: As we explain above, data in the Executive's Quarter 1 report indicate that very few Navigation Team clients accepted referrals to basic shelters. For example, the Downtown Emergency Service Center (DESC) generally offered five basic-shelter-beds each day for Navigation Team referrals. However, during 2017, only three Navigation Team clients accepted referrals to DESC basic shelter beds. Also, only six Navigation Team clients accepted referrals to the basic shelter operated at City Hall in 2017. These data suggest that the City might achieve better results for Navigation Team clients by investing in enhanced shelters or in diversion activities (see section below) rather than expansion of basic shelter capacity (e.g., the recent expansion of the shelter at City Hall).

Opportunities to increase diversion strategies

In 2017, the Navigation Team reported that of the 1,842 individuals they contacted, 17 (less than 1%) were reunited with family or friends. Reunification is one example of a "Diversion"¹⁴ strategy that is used to divert homeless individuals out of the shelter system. We found that several jurisdictions are using a systematic approach to reunification that includes scheduled follow-up to ensure that reunification efforts were successful.

San Diego, for example, has found reunification to be a cost-effective strategy for reducing street homelessness. Between June 26, 2017 and May 1, 2018, the [Downtown San Diego Partnership](#) reunited 696 homeless individuals with support systems across the country at a total cost of \$343,128 (see also textbox below).

The Pierce County, Washington [Center for Dialog and Resolution](#) is actively using diversion strategies, including reunification, to place people from unauthorized encampments directly into housing, and they report a diversion placement rate of 20% of the total unsheltered population. In addition, in 2018, the [Mental Health Center of Denver](#) began to offer reunification services through its 24/7 Walk-In Crisis Center. In the first four months of 2018, they report reuniting 36 individuals with their family/friend support networks. A staff member at the Mental Health Center of Denver commented, "If you look at the cost of homelessness for Denver and then you look at the cost of homelessness on a person's soul, either way you want to look at it, it's a huge savings to be able to send the person back to where they have a place to live and back to people who love them."

¹⁴ Diversion strategies divert unsheltered individuals from the shelter system and place them directly in housing. In addition to reunification with a family or friend support network, diversion strategies include providing mediation to resolve an issue with a roommate or landlord and providing first and last month rent.

Connect Navigation Team clients with City diversion resources

In 2018, HSD entered into contracts with eight provider organizations totaling nearly \$2 million for diversion services.¹⁵ Our office reviewed the contracts and found that none mentioned coordination with the Navigation Team or prioritization of Navigation Team clients for diversion resources.

In addition, the contracts provide very little guidance to provider organizations on who should receive City diversion resources. For example, only one of the contracts specifies that participant eligibility for diversion services is intended for homeless individuals in Seattle. The other seven contracts do not specify that participants must be homeless in Seattle.¹⁶ This current contractual structure means the City might be missing opportunities to direct diversion dollars to those living on Seattle streets, including Navigation Team clients.

The City may want to consider including coordination with Navigation Team or prioritization of Navigation Team clients within some of its diversion contracts. Further, HSD's 2018 diversion contracts do not require follow-up on the status of diversion clients. If the City directs diversion resources to Navigation Team clients, HSD might consider requiring providers to follow-up with diversion clients at intervals (see example from San Diego in text box below) to ensure that the diversion strategies are working for Navigation Team clients.

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Diversion Provider	2018 Diversion Contract Amount
Seattle Indian Health Board/Chief Seattle Club/Mother Nation	\$300,847
Mary's Place	\$600,000
Interim Community Development Association	\$172,840
YWCA of Seattle, King County, Snohomish County	\$238,580
Catholic Community Services of Western Washington	\$171,465
Downtown Emergency Services Center	\$234,060
New Horizons	\$109,159
Solid Ground Washington	\$166,350
Total Amount	\$1,993,301

¹⁶ For example, one HSD-funded diversion provider indicated that their clients may come from as far away as Sequim for diversion services.

“It’s about trust” – Lessons learned from the Downtown San Diego Partnership

The Downtown San Diego Partnership’s Family Reunification Program is designed to reconnect homeless individuals with their families and loved ones across the country. Between June 26, 2017 and May 1, 2018, the [Downtown San Diego Partnership](#) reunited 696 homeless individuals with their support systems at a total cost of \$343,128. The program launched in 2012, and staff members continue to refine and improve their practices. The homeless outreach team tracks reunification clients at 3, 6, 12, and 24-month intervals, and have found that among the clients they can reach (55% of total), 85% are still housed after 12 months. Staff credit several factors for the program’s success:

The program meets an expressed need: More than 15% of those surveyed in the past two years in San Diego’s annual Point in Time homeless count indicated that they would like to be reunited with their families and support systems.

The program has clear expectations: Reunification clients must meet eligibility criteria (e.g., no outstanding legal issues); the intake process includes calls to families; and clients and their support system know that staff will be following up at 3, 6, 12, and 24 months.

The program has earned trust: Staff indicate that their program has built momentum from word of mouth referrals among the homeless, and they believe they have built trust among the homeless population by delivering on their promises. “Some homeless individuals are considered ‘service-resistant’ – this is typically because they have been let down in the past,” says Ketra Carter, Homeless Outreach Team Lead. “We have built their trust by delivering on our promises.”

The program capitalizes on its network: Downtown San Diego’s Clean and Safe program ambassadors work in the same 275 blocks every single day and generate 41% of the referrals to the reunification program; the program has also built trust among service providers, the San Diego Police Department’s Homeless Outreach Team, and their 211 system. These partners also generate referrals to the reunification program.

Source: (Vivas, Alonso and Carter, Ketra; Downtown San Diego Partnership, Clean and Safe Program, Family Reunification, interview with Office of City Auditor staff, July 17, 2018)

Consistent data collection among homeless outreach providers

In 2018, the City is funding a variety of agencies that provide homeless outreach services, all of which track data related to services provided and outcome measures. To facilitate assessment of Navigation Team performance in comparison with that of other agencies providing outreach services, the Navigation Team should gather some of the same data gathered by other City-funded outreach providers to produce performance metrics, including tracking reasons for refusing services.

[HSD’s 2018 Homelessness Funding Awards](#) provided funding for homeless outreach activities to nine different organizations, including Evergreen Treatment Services/REACH, which provides Navigation Team outreach services. Other agencies providing homeless outreach services for the City are:

- Downtown Emergency Services Center/HOST

- Mary's Place
- Neighborcare Health/REACH
- New Horizons (youth outreach)
- Seattle Indian Center
- Seattle Indian Health Board
- Urban League/Street Team
- YouthCare (youth outreach)

In addition to these organizations, Seattle's Law Enforcement Assisted Diversion (LEAD) program provides outreach and case management services. Although LEAD was primarily designed as a crime prevention program for low-level offenders, a [2016 evaluation of LEAD](#) showed that about 82% of the LEAD clients in the study were also homeless (the majority were unsheltered, some were in shelters).¹⁷

With the July 2018 transfer of leadership for the Navigation Team to HSD, the department managing the City's contracts with other homeless outreach providers, the City has an opportunity to ensure that there is more consistency between Navigation Team outreach metrics and the metrics provided by the City's other contracted outreach providers.

Metrics recommended by the Outreach Continuum Planning Workgroup

The 2016 report of the Outreach Continuum Planning Workgroup recommended that outreach providers track their rates of success in reducing the time individuals spend in homelessness, reducing returns to homelessness, and reducing the number of unsheltered individuals.¹⁸ In addition, the workgroup recommended that outreach providers could be required to track the specific instances of services provided including: syringe distribution, Narcan training and distribution, help obtaining ID's, medical and service referrals, etc. In the future, it would be helpful for the Navigation Team to also track and report on measures recommended by the workgroup. This will help the City assess the Navigation Team's performance with that of the City's other outreach providers.

In addition, the [Seattle Office for Civil Right's 2017 Encampment Monitoring Report](#) recommended that the Navigation Team track the reasons that people refuse offers of services and shelter from the Navigation Team. We concur with this recommendation. Understanding more about why people living unsheltered refuse certain types of services and shelter is the type of specific and nuanced information that will help the City improve its efforts to serve this population.

¹⁷ The [2016 evaluation of LEAD](#) showed a 62% increase in participants housed and a 34% decrease in participants who were unsheltered over the course of the study.

¹⁸ In 2016, HSD, King County All Home, and REACH convened a workgroup and established Standards of Care for all homeless outreach providers in Seattle and King County (included in Appendix C – All Home Outreach Continuum Recommendations).

Recommendations

The table below lists our recommendations for Checkpoint 1.1:
Analysis of Navigation Team Engagement Rate.

Checkpoint #	Recommendation
1.1 Analysis of Navigation Team Engagement Rate	A. The City should ensure that HSD has adequate support and resources to implement its planned improvements for accurately tracking and reporting on Navigation Team engagement metrics for 2018 and beyond.
	B. The City should consider opportunities for expanding enhanced shelter capacity, including the bridge to housing approach used in San Diego and Sacramento that can be quickly deployed and incorporates private funding.
	C. The City should consider options for reserving a certain number of enhanced shelter beds daily for Navigation Team referrals.
	D. The City should re-evaluate its recent additional investments in basic shelter capacity and consider reprogramming those resources for enhanced shelters or diversion.
	E. The City should explore opportunities for the Navigation Team to expand its use of diversion strategies including reunification with friends and family.
	F. For 2018 and beyond, the City should explore using metrics for the Navigation Team that are consistent with the other City-funded outreach providers, including tracking reasons for refusing services.
	G. The Executive should provide the Office of City Auditor with the following deliverables described in the Quarter 1 response: <ul style="list-style-type: none"> a. Results from the four focus groups conducted with Navigation Team staff and Licton Springs encampment residents.

CHECKPOINT 1.3: TRAUMA-INFORMED CARE SELF-ASSESSMENT

Section Summary

Reporting Checkpoint 1.3 asked the Navigation Team to complete a Trauma-Informed-Care self-assessment to evaluate how well they incorporate trauma-informed practices, identify areas for organizational growth, and make practical changes using their self-assessment as a guide. In response to this checkpoint, HSD conducted a thorough and systemic self-assessment and developed short and long-term recommendations for incorporating more trauma-informed practices in its work. We concur with HSD's recommendations, and we also make additional recommendations to help HSD improve assessment participation, address training gaps, and continue improvements in providing trauma-informed care.

Traumatic Stress

The prevalence of traumatic stress among people who are homeless is extremely high. Trauma can be associated with childhood abuse and neglect, domestic violence, community violence, and can also be associated with poverty and the loss of home, safety and sense of security. In addition, people of color are disproportionately represented among Seattle's homeless, and they may also experience racial trauma. Racial trauma¹⁹ may result from racial harassment, witnessing racial violence, or experiencing institutional racism.

Traumatic stress exposures have a significant impact on how people think, feel, behave, relate to others, and cope with future experiences. Therefore, it is especially important for the Navigation Team to incorporate the best available trauma-informed practices, address the need for self-care among staff who are subject to vicarious trauma, and take active measures to avoid retraumatizing homeless individuals.

What is a Trauma-Informed Approach?

"If trauma goes unaddressed, people with mental illnesses and addictions will have poor physical health outcomes, and ignoring trauma can hinder recovery. Providing care in a trauma-informed manner promotes positive health outcomes. A trauma-informed approach is defined by the U.S. Department of Health and Human Services Substance Abuse and Mental Health Services Administration (SAMHSA) as a program, organization, or system that realizes the widespread impact of trauma and understands potential paths for recovery; recognizes the signs and symptoms of trauma in clients, families, staff, and others involved with the system; and responds by fully integrating knowledge about trauma into policies, procedures, and practices, and seeks to actively resist re-traumatization."

Source: [SAMHSA website](#)

¹⁹ A growing body of new research has identified effects of racial trauma and recommends guidelines for clinical intervention to address racial trauma. (Bryant-Davis, Adams, Alejandre, & Gray, 2017)(López et al., 2017)

HSD took a comprehensive approach to the assessment

HSD took a thorough and systematic approach to this reporting checkpoint. First, they investigated a number of potential tools to use for the self-assessment, including a [tool developed by the U.S. Department of Health and Human Services' Substance Abuse and Mental Health Services Administration \(SAMHSA\), Homelessness Resource Center](#) that was identified in our November 2017 report. Then, they developed an on-line survey for all Navigation Team staff that included 100 questions that had been drawn from several existing instruments and tailored those questions for the Navigation Team. HSD collected responses from 24 of 37 potential respondents. Finally, based on the survey responses, HSD developed four short-term recommendations and four long-term recommendations (see Recommendation D below) for incorporating more trauma-informed practices in its work. We concur with all of HSD's short- and long-term recommendations.

Incomplete participation in assessment

The [SAMHSA self-assessment tool](#) recommends that the assessment be completed by all the staff involved in the program, including those who provide direct service, administrators, and support staff. The SAMHSA tool indicates that "to create lasting organizational change, all employees should be involved in the process of organizational self-assessment to understand why change is necessary and what it means to be trauma-informed."

HSD offered two different periods in which members of the Navigation Team staff could take the self-assessment. Subsequently, 24 of 37 members of the Navigation Team staff completed the assessment, while 13 potential respondents (35%) did not. It is unfortunate that such a high percentage of Navigation Team staff did not participate in the self-assessment. There might be other ways that HSD could engage these staff members to gather their input. HSD may also want to consider participation in future trauma trainings and assessments as being mandatory for all Navigation Team staff.

Collaboration with King County could help HSD address training gaps

HSD's self-assessment identified training gaps in trauma-informed care. For example, only 38% of the Navigation Team staff who completed the assessment agreed that staff have been trained on the relationship between homelessness and trauma, and 42% reported that they had not received training on vicarious trauma.

Fortunately, several agencies in King County, including Public Health Seattle King County²⁰ and All Home²¹ provide training in trauma-informed care for service providers. Topics include vicarious trauma as

²⁰ For example, King County's Healthcare for the Homeless has a [staff member who provides training in vicarious trauma](#).

²¹ King County's All Home is offering [a two-part training on trauma informed care for homeless organizations](#) in September 2018.

well as specialized training for providers who work with the homeless. The Navigation Team should explore collaborating with King County to address the training gaps identified in the self-assessment.

Follow-up assessments facilitate continuous improvement

The Executive's Quarter 1 Response noted that the self-assessment responses "indicate a range of understanding across the Navigation Team and those who support and impact the team regarding trauma-informed care—it's definition, application in daily work, impact on staff and consumers, and value." Given that 2017 was the first year of operation for the Navigation team, it is not surprising that there is such variation in understanding about trauma-informed care among the staff.

In keeping with the spirit of continuous improvement, it might be helpful for HSD to re-administer the self-assessment after some period (e.g., in 2019). This could help the Navigation Team track their progress in this area and identify other areas that need focused attention. In addition, HSD may want to consider additional self-assessments regarding trauma. For example, the U.S. Department of Justice Office of Justice Programs has developed [an organizational readiness guide for addressing vicarious trauma](#).

Recommendations

The table below lists our recommendations for Checkpoint 1.3: Trauma-Informed Care Self-Assessment.

Checkpoint #	Recommendation
1.3 Trauma Informed Care Self-Assessment	A. HSD should develop a plan to ensure full Navigation Team staff participation in future trainings and assessments related to trauma-informed care.
	B. The Navigation Team should consider collaborating with King County to address the training gaps identified in the Trauma Informed Care Self-Assessment.
	C. HSD should consider re-administering the Trauma-Informed Care Self-Assessment to track progress with Trauma-Informed Care and should consider the use of additional self-assessment tools related to Trauma-Informed Care.
	D. The Executive should provide the Office of City Auditor with the following deliverables described in the Quarter 1 response. These are deliverables associated with HSD's recommended short-term and long-term next steps for trauma-informed practice: <ul style="list-style-type: none"> a. Documentation of any meetings with Navigation Team members and partners to discuss self-assessment results b. Documentation that the Navigation Team has established structured meetings that address trauma for clients and impacts of vicarious trauma on staff. c. Documentation of written policies regarding trauma-informed practices. d. Documentation of clear policies regarding client engagement. e. Documentation of development of training program for the Navigation Team related to the five domains of trauma-informed practice. f. Documentation of the Navigation Team's staff use of SAMHSA resources.

CHECKPOINT 1.4: EVALUATION OF NAVIGATION TEAM TRAININGS

Section Summary

Reporting Checkpoint 1.4 asked the Navigation Team to develop a plan for evaluating the effectiveness of Navigation Team police officer training and to provide information on the training received by the non-police members of the Navigation Team. The Executive's [Quarter 1 response](#) to the Navigation Team reporting plan provided lists and descriptions of trainings that have been delivered to or are planned for the police and non-police members of the Navigation Team.

However, after reviewing the Executive's response, we determined that more time is needed to evaluate the effectiveness of the Navigation Team's police officer training. The Quarter 1 response indicated that the Navigation Team "is actively reviewing and developing a plan to evaluate the effectiveness of training for its Navigation Team Officers," and will "develop a scope of necessary future trainings for the team."

In addition, our office has learned that HSD will be examining the training plan for all Navigation Team members and may identify potential revisions to the plan as part of its leadership transition activities. Therefore, for this Checkpoint, we recommend that the Executive provide a timetable for completion of its planned activities to: 1) develop a plan for evaluation of Navigation Police Officer training, 2) evaluate the effectiveness of the Navigation Police Officer training, and 3) re-examine and revise as necessary the training plan for all Navigation Team members.

Recommendations

The table below lists our recommendations for Checkpoint 1.4: Evaluation of Navigation Team Trainings.

Checkpoint #	Recommendation
1.4 Evaluation of Navigation Team Trainings	A. The Executive should provide a timetable for developing a plan for evaluating Navigation Police Officer training. The timetable should include the parties responsible for developing the plan.
	B. The Executive should provide a timetable for evaluating Navigation Police Officer training. The timetable should include the parties responsible for communicating and implementing the evaluation recommendations.
	C. The Executive should provide a timetable for re-examining and revising the Navigation Team training plan. The timetable should include the parties responsible for these activities.

CHECKPOINT 2.4: ASSESSMENT OF OPPORTUNITIES FOR INCREASED COORDINATION WITH KING COUNTY

Section Summary

Checkpoint 2.4 asked the Executive to 1) assess the degree to which the Navigation Team is following the Outreach Standards of Care, 2) describe the Navigation Team's role in any other efforts to align outreach countywide, and 3) report on any other potential areas of collaboration with King County.

Our review of the Executive's [Quarter 1 response to the Navigation Team reporting plan](#) suggests that there is the need for additional consideration in these three areas. We recommend that the Executive provide a plan for ensuring Navigation Team compliance with the countywide Outreach Standards of Care, investigate opportunities to align outreach practices countywide, and consider opportunities for deeper collaboration with King County, including greater integration of the Navigation Team and medical and mental health services.

Compliance with Outreach Standards of Care is Unclear

In 2016, HSD, King County All Home, and REACH convened a workgroup and established Standards of Care for all homeless outreach providers in Seattle and King County (included in Appendix C). Checkpoint 2.4 asked the Executive to assess the degree to which the Navigation Team is following the Outreach Standards of Care.

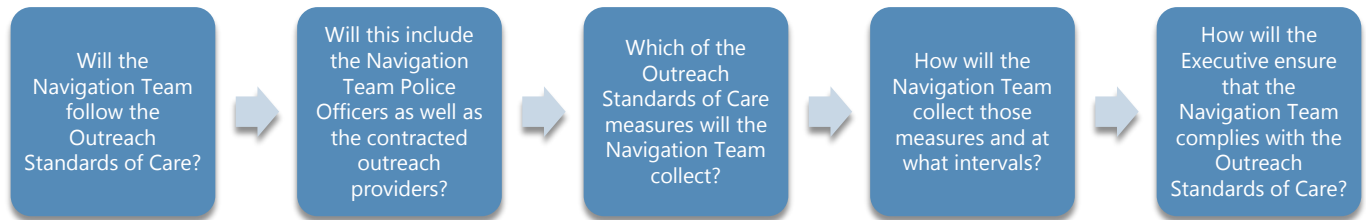
The Executive's [Quarter 1 response to the Navigation Team reporting plan](#) stated that "it is the recommendation of HSD that REACH and YouthCare adhere to the Standards of Care when they are engaging clients in the field." However, the Quarter 1 response did not provide an assessment of the degree to which the contracted outreach providers are already following the Standards of Care. Further, the Quarter 1 response did not indicate whether the Navigation Team's police officers follow the Standards of Care.

Moreover, as we noted under Checkpoint 1.1, the Executive's [Quarter 1 response to the Navigation Team reporting plan](#) did not include reporting on these measures.²² Therefore, it is difficult to ascertain the extent to which the Navigation Team is in compliance with the Standards of Care.

²² The Outreach Standards of Care recommend that outreach providers track their rates of success in reducing the time individuals spend in homelessness, reducing returns to homelessness, and reducing the number of unsheltered individuals. In addition, the Standards of Care recommend that outreach providers track the specific instances of services provided including: syringe distribution, Narcan training and distribution, help obtaining ID's, medical and service referrals, etc.

We recommend that the Executive provide a plan for ensuring Navigation Team compliance with the Outreach Standard of Care. That plan should minimally include the elements in Exhibit 5 below.

Exhibit 5: Recommended elements for plan to ensure compliance with Outreach Standards of Care



Source: Office of City Auditor

Other efforts to align outreach countywide

Checkpoint 2.4 asked the Executive to describe the Navigation Team’s role in any other efforts to align outreach countywide. The Executive’s [Quarter 1 response to the Navigation Team reporting plan](#) acknowledged the limited resources of the three King County outreach programs operating outside the City of Seattle. However, it offered that “increased collaboration and tools to facilitate coordination of services such as diversion and housing access could be valuable to enhance the efficacy of providers in reaching current and possible clients.”

In our discussion of Checkpoint 1.1, we recommend that the City explore opportunities for increased use of diversion strategies, including reunification with family/friend support networks. Diversion is an area in which the Navigation Team might achieve greater efficiency and effectiveness through collaboration with King County and its outreach providers. This might include participating in joint trainings on diversion strategies, using a common set of metrics for tracking diversion outcomes, and participating in a forum for exchanging ideas about what works in diversion.

Therefore, it would be helpful for the Executive to investigate and report on opportunities to increase alignment between the Navigation Team and its King County peers, especially in the areas identified in its Quarter 1 response (i.e., diversion and housing access coordination).

Greater integration of Navigation Team and medical and mental health services

Checkpoint 2.4 asked the Executive to report on any other potential areas of collaboration with King County. The Executive’s [Quarter 1 response to the Navigation Team reporting plan](#) reported that a

finding from its recent focus groups²³ is “the people the Navigation Team engaged responded better when outreach efforts offered by officers included the possibility of nursing or medical care. It was also believed by all that additional mental health professionals are needed as a part of the team’s day-to-day operations.” This suggests that the City should explore greater integration between the Navigation Team and medical and mental health services.

Our November 2017 [Reporting Plan for the Navigation Team](#) described Austin’s homeless outreach team, [HOST](#), which is an explicit collaboration between the City of Austin and Austin-Travis County Emergency Medical Services (EMS).²⁴ Our office interviewed Keith Simpson, of Austin’s HOST team, who indicated that the HOST team can provide medical and mental health services during their outreach work. Simpson indicated that this affords the HOST team greater access to individuals living unsheltered. “The clients have more of a trusted relationship with EMS than with police officers. We are welcomed into the camps where (police) officers see resistance.”²⁵

Austin is also tracking the savings that the HOST team generates by avoiding trips to the emergency room. Simpson offered the example of a diabetic man that the HOST team treated recently. The man had an open sore on his leg that the HOST EMS outreach worker treated immediately as part of the outreach engagement. This avoided an emergency room trip for the individual and addressed his health need before it became worse.

Based on the stated need from the Navigation Team focus groups and the example of Austin’s HOST program, it would be helpful for the Executive to consider opportunities for deeper collaboration with King County, including greater integration of the Navigation Team and medical and mental health services.

²³ The research team from HSD recently conducted three focus groups with Navigation Team field coordinators, REACH outreach team members, Navigation Team Police Officers, and residents of Licton Springs who had been recently referred by the Navigation Team.

²⁴ [Austin’s Homeless Outreach Street Team](#) (HOST) is currently comprised of two police officers, two paramedics, three behavioral health case managers, and one court case manager. In 2017, Austin moved the functional home for HOST from the Austin Police Department to Austin-Travis County EMS.

²⁵ Simpson, Keith, Mobile Integrated Health Care Strategist, Austin-Travis County Emergency Medical Services, interview with Office of City Auditor staff, July 18, 2018.

Recommendations

The table below lists our recommendations for Checkpoint 2.4: Assessment of Opportunities for Greater Coordination with King County.

Checkpoint #	Recommendation
2.4 Assessment of Opportunities for Greater Coordination with King County	<p>A. The Executive should provide a plan for ensuring Navigation Team compliance with the Outreach Standard of Care. That plan should minimally include the elements listed in Exhibit 5:</p> <ul style="list-style-type: none"> • Will the Navigation Team follow the Outreach Standards of Care? • Will this include the Navigation Team Police Officers as well as the contracted outreach providers? • Which of the Outreach Standards of Care measures will the Navigation Team collect? • How will the Navigation Team collect those measures and at what intervals? • How will the Executive ensure that the Navigation Team complies with the Outreach Standards of Care?
	<p>B. The Executive should investigate and report on opportunities to increase alignment between the Navigation Team and its King County peers, especially in the areas identified in its Quarter 1 response (i.e., diversion and housing access coordination).</p>
	<p>C. The Executive should consider and report on opportunities for deeper collaboration with King County, including greater integration of the Navigation Team and Public Health-Seattle and medical and mental health services.</p>

CHECKPOINT 3.1: REPORT ON 2017 BASELINE DATA – RESULTS AND OUTCOMES

Section Summary

Reporting Checkpoint 3.1 asked the Executive to report on the 2017 “Results and Outcomes” measures that they indicated the Navigation Team would be collecting in the Navigation Theory of Change.²⁶

The Executive’s [Quarter 1 response](#) to the Navigation Team reporting plan provided 2017 data for a subset of “Results” (e.g., acceptance of offers to safer shelter, acceptance of a service, decline of all offers). Due to the limitations of the Navigation Team data systems described previously in this report, our office did not verify these results. Further, the Executive’s [Quarter 1 response](#) did not include any metrics for the short, medium, or long-term outcomes described in the 2017 Navigation Team Theory of Change (Appendix C).

HSD indicated that, beginning in August 2018, it will be leading an effort to refine and redevelop the Navigation Team’s Theory of Change. This work will include identifying the results and the short, medium, and long-term outcomes that will be tracked. In addition, HSD has begun reviewing existing sources of data for the Navigation Team, learning about the current systems that are used to capture that data, and exploring options for developing and implementing more streamlined, robust, and accurate data systems and processes for the Navigation Team.

These are important steps and are necessary for improving the Navigation Team’s operations and accountability. Therefore, we recommend that the Executive provide HSD with the necessary support and resources to complete this work, and that HSD provide us with the deliverables related to these steps.

Considerations for refining the Navigation Team Theory of Change

Based on our work on our [November 2017 report](#) and our review of the Executive’s [Quarter 1 response](#) to the Navigation Team reporting plan, we offer the following suggestions for the Executive and HSD to consider in its work to refine and redevelop the Navigation Team Theory of Change.

²⁶ The Navigation Team’s proposed 2017 metrics for “Results” and short-, medium-, and long-term “Outcomes” were included in the Navigation Team Theory of Change, Appendix 5 Logic Model (see Appendix C of this report).

Include input from Navigation Team staff, individuals served, and individuals not served by the Navigation Team – HSD has begun to convene focus groups that include Navigation Team staff members as well as individuals recently referred by the Navigation Team to the Licton Springs camp. These focus groups can also provide useful feedback on the re-development of the Navigation Team Theory of Change. HSD might also consider including input from unsheltered individuals who have not been served by the Navigation Team.

Determine whether the Navigation Team is a people-based or place-based approach or some combination of both – The 2017 Navigation Team Theory of Change (Appendix C) included activities that were focused on individuals (e.g., outreach, connection to services) as well as places (e.g., garbage hauling, fencing). Data-tracking and outcome measures for people-based activities are very different from those for place-based activities.

The City might consider the following questions in determining the Navigation Team approach: Will the Navigation Team continue to combine a people-based and a place-based approach? If so, how will the data tracking and outcome measurement be aligned? HSD is working on developing a new data system for tracking the people-based outcomes of the Navigation Team activities. Who in the City will be responsible for tracking data and outcomes associated with the place-based activities?

Explore the use of tailored strategies for certain segments of the unsheltered population – Some jurisdictions have found that it is effective to use a variety of outreach strategies that are tailored to meet the specific needs of certain segments of the unsheltered population.

For example, in New York City, the Bowery Residents' Committee (BRC) has developed a tailored approach for unsheltered individuals who have jobs or are in job training programs. First, BRC outreach workers identify unsheltered individuals who are employed or employable but cannot find housing. The outreach workers can then place the individual in the 200-bed shelter on the ground floor of BRC's new [Landing Road](#) facility. The Landing Road shelter offers wrap-around services, including job training. The upper floors of BRC's Landing Road facility are home to 135 units of low-income permanent housing. BRC's vertically-integrated approach (outreach to shelter to housing) puts the path out of homelessness in plain sight and can minimize the chances that these employed individuals will fall back into homelessness. As it leads the redevelopment of the Navigation Team Theory of Change, HSD might consider tailored

strategies, including an outreach strategy for clients who are employed or employable.

Explore cost-benefit performance measures – Some potential outcome measures for the Navigation Team might lend themselves to calculating a cost-benefit ratio. For example, Austin’s homeless outreach team, [HOST](#), tracks the costs avoided in expensive emergency room visits when unsheltered individuals receive urgent medical care from a HOST EMS Outreach Worker. The 2017 Navigation Team activities included SPU’s encampment trash removal pilot project. While the SPU trash pilot program does not make unauthorized encampments viable living arrangements in the long term, every ton of trash that was collected through that effort²⁷ avoided costs associated with a more labor-intensive future City clean-up effort. HSD might consider whether certain performance measures can be expressed through a cost-benefit analysis.

Determine how Navigation Team outcome data will be communicated – Our [November 2017 report](#) included two examples of jurisdictions that provide regular reporting of their homeless outreach performance data online. [New York City’s HOME-STAT](#) provides a variety of online public reports, including a daily public dashboard that maps 311 service requests from the public, a weekly dashboard that maps data from HOME-STAT canvassing, and a monthly dashboard that reports on aggregate outcomes, conditions, and performance. [Santa Rosa, California’s Homeless Outreach Services Team](#) (HOST) produces detailed quarterly reports that describe HOST activities and performance measures. HSD might consider what types of Navigation Team performance data it will make available online and at what intervals.

Recommendations

The table below lists our recommendations for Checkpoint 3.1: Report on 2017 Baseline Data – Results and Outcomes.

Checkpoint #	Recommendation
3.1 Report on 2017 Baseline Data – Results and Outcomes	A. The City should ensure that HSD has adequate support and resources to work with all relevant stakeholders to refine and redevelop the Navigation Team’s Theory of Change.
	B. The City should ensure that HSD has adequate support and resources to work with all relevant stakeholders to develop robust systems for tracking the Navigation Team’s results and the short, medium, and long-term outcomes associated with the Navigation Team work.

²⁷ Since January 2017, SPU has hosted the program at 28 locations and collected 547,100 pounds of garbage in the designated areas.

	C. HSD should provide a revised Navigation Team Theory of Change to the Office of City Auditor.
	D. HSD should provide to the Office of City Auditor its plan to develop robust systems for tracking the Navigation Team's results and the short, medium, and long-term outcomes associated with the Navigation Team's work.

CHECKPOINT 3.2: 2017 ACTUAL EXPENDITURES – NAVIGATION TEAM AND ENCAMPMENT REMOVALS

Section Summary

Reporting Checkpoint 3.2 asked for a report on total 2017 expenditures for the Navigation Team, including staffing and related costs as well as expenditures related to encampment removals and cleanups (e.g., trash removal, SPD overtime for traffic directing).

The Executive's [Quarter 1 response](#) to the Navigation Team reporting plan provided a summary table of 2017 expenditures in response to Checkpoint 3.2. Our office requested and received from the City Budget Office (CBO) the back-up documentation used by CBO to create the summary 2017 expenditures table. Due to the variation in formats and in the level of detail in the back-up documentation, we were unable to verify the accuracy of the 2017 expenditures data.

CBO is currently exploring the feasibility of developing a methodology to track Navigation Team costs across all departments as it relates to a broader homelessness spending project. Moreover, in a July 13, 2018 email to City finance managers, CBO indicated that, "Later this year, CBO will be providing additional guidance for how all impacted departments should track (homeless) investments in the financial system beginning in 2019. In addition, we commit to distributing the final Citywide Homelessness Spending and Accountability Report that this information is generating when the end product is completed."

These are important steps that will improve the reliability and visibility of Navigation Team expenditures. Therefore, we recommend that CBO provide us with the deliverables related to these steps.

Recommendations

The table below lists our recommendations for Checkpoint 3.2: 2017 Actual Expenditures.

Checkpoint #	Recommendation
3.2 2017 Actual Expenditures	<p>A. The Executive should provide the Office of City Auditor with the following:</p> <ul style="list-style-type: none"> a. Revised annotated 2018 Navigation Team budget. b. Timetable for implementing a methodology to track Navigation Team expenditures across all City departments.

CHECKPOINT 3.4: REPORT ON 2017 RACIAL EQUITY IMPACTS

Section Summary

Reporting Checkpoint 3.4 asked the Executive to provide an assessment of 2017 racial equity impacts for the Navigation Team.

The Executive's [Quarter 1 response](#) to the Navigation Team reporting plan provided 2017 data on its racial equity impacts. Our office did not verify the 2017 racial equity impacts data provided in the Executive's [Quarter 1 response](#). Although we were unable to verify these data in the Executive's Quarter 1 Response, we made the following observations based on the general trends we noted in the 2017 racial equity data and additional information we reviewed during the audit:

- Navigation Team work is affected by societal structural racism.
- Racial equity data can inform Navigation Team strategies.
- Navigation Team composition has implications for racial equity.

We recommend that the City address the gap in racial equity training for the Navigation Team, continue work on the Racial Equity Toolkit, explore outreach strategies that might be effective for unsheltered individuals who are African American and American Indian, and address racial equity issues in the Navigation Team composition.

"This is no accident..."

A [2018 report on racial inequity in homelessness](#) by the Center for Social Innovation-Supporting Partnerships for Anti-Racist Communities (SPARC) begins by stating, "People of color are dramatically more likely than White people to experience homelessness in the United States. This is no accident; it is the result of centuries of structural racism that have excluded historically oppressed people—particularly Black and Native Americans—from equal access to housing, community supports, and opportunities for economic mobility." Based on data from six communities, including Pierce County, WA, the SPARC report found that African Americans, and American Indians/Alaskan Natives were extremely overrepresented among individuals experiencing homelessness. The SPARC study also found that poverty alone does not explain the inequity. Similarly, a 2011 [study by George Carter of the U.S. Census Bureau](#) found that even when controlling for poverty, poor African Americans were significantly more likely than poor whites to become homeless. Once homeless, African American men remained homeless longer than white men.

Navigation Team work is affected by societal structural racism

The 2017 Navigation Team racial equity data echo the linkage between racism and homelessness that has been found at a national level. Undoing structural racism requires vigilance and long-term commitment. With the Navigation Team, the City has some concrete opportunities to “do better” in addressing and undoing structural racism.

The Navigation Team data reaffirm that homelessness disproportionately affects people of color. The Executive’s [Quarter 1 response](#) looked at the Navigation Team’s 2017 percentage of contacts by race and found “the highest disparities (in Navigation Team contacts) among African Americans and Native Americans.” These data are consistent with racial disparities in homelessness found in the [Seattle/King County 2018 Count Us In Report](#)²⁸ as well as in a recent national study (see sidebar).

These data highlight the urgency of the need for the Navigation Team to continue to address the role of structural racism in its work, and the Executive’s [Quarter 1 response](#) identified two immediate opportunities:

- Address the identified “gap” in race and social justice trainings for the Navigation Team and its leadership.
- Continue to develop and implement the Navigation Team’s Racial Equity Toolkit.

Racial Equity Training: The Executive’s [Quarter 1 response](#) stated that, “the greatest gap of full-team trainings (for the Navigation Team) is in race and social justice.” The Quarter 1 response indicated that FAS and HSD were reviewing potential racial equity trainings, including the [People’s Institute Undoing Racism workshop](#).

This is an important step, and it would be helpful for the City to think broadly about who should participate in the Navigation Team racial equity training. Participants might include field staff as well as leadership from departments (e.g., HSD, SPD, FAS), leadership from other City agencies (e.g., Mayor’s Office, Council, CBO), other stakeholders (e.g. County partners, community organizations, service agencies), and Navigation Team clients. It would also be helpful for the City to ensure that the investment in Navigation Team development around addressing structural racism extends beyond a two-day workshop. The plan for this ongoing investment could be

²⁸ The [2018 Seattle/King County Count Us In report](#) found that when compared to the demographic racial profiles of the county’s general population, the largest disparities were observed among those identifying as Black or African American (27% in the Point-in-Time Count compared to 6% in the general King County population), as Hispanic or Latino (15% compared to 9%), and with multiple races (16% compared to 6%).

incorporated in the Navigation Team's Racial Equity Toolkit (see below).

Racial Equity Toolkit: The Executive's [Quarter 1 response](#) indicated that SOCR will be conducting further analysis of the Navigation Team's 2017 racial equity data. However, SOCR indicated that its role does not include this analysis. Furthermore, given the difficulty in verifying the 2017 data from its multiple sources, it was not clear to SOCR how this analysis would be conducted. SOCR will continue to support the Navigation Team on its Racial Equity Toolkit by providing technical assistance through a liaison from the Race and Social Justice Initiative team.²⁹ Given the role that structural racism plays in the work of the Navigation Team, this work is imperative and urgent. The City should ensure that this work continues, and the results are communicated broadly.

Racial equity data can inform Navigation Team strategies

The Navigation Team's 2017 racial equity analysis identified trends in acceptance of services based on race. For example, the highest rates of acceptance of an alternative living arrangement were by American Indians (65%), LatinX (52%), African Americans (51%), and Asians (48%). These data can help inform more effective Navigation Team strategies, and the exploration of "targeted universalism" strategies.

Outreach to African Americans and American Indians: [HSD's 2018 Homelessness Funding Awards](#) provided funding for homeless outreach activities to nine organizations, including agencies that specifically serve African Americans and American Indians (i.e. Urban League/Street Team, Seattle Indian Center, and Seattle Indian Health Board). These contracts provide an opportunity to more effectively reach and serve unsheltered African American and American Indian individuals. However, it is unclear how these efforts will be coordinated with the work of the Navigation Team. It would be helpful to understand how the City will use these outreach efforts to ensure they yield the best possible outcomes for these marginalized populations.

Targeted Universalism Strategies: A number of other jurisdictions, including [King County All Home](#) and Portland are exploring the incorporation of "targeted universalism" in their homeless outreach approach. "Targeted universalism" was introduced by John A. Powell (lowercase) at University of California Berkeley.^[1] Targeted universalism recognizes that the most marginalized sub-populations are differently situated in their relationship to formal institutions and

²⁹ To learn more about the City of Seattle Racial Equity Toolkit, see the [Seattle Office for Civil Rights Racial Equity Toolkit website](#).

structures and therefore require different systems of support. It would be helpful for HSD to consider how targeted universalism might be incorporated in the redevelopment of the Navigation Team Theory of Change.

Navigation Team composition has implications for racial equity.

The Executive's [Quarter 1 response](#) included a list of the racial identity of each member of the Navigation Team. Currently, the Navigation Team reflects what [SPARC found in its 2018 national study](#) that "the homeless services workforce is not representative of the people it serves." The SPARC study also looked at whether executive leadership was representative of the population served, and whether there were members of the teams who had personally experienced homelessness. These are important considerations for the Navigation Team's Racial Equity Toolkit.

In addition, the Executive's [Quarter 1 response](#) noted that "the impact of police as part of the Navigation Team still has not been studied, nor the perceptions of homeless individuals, especially people of color, concerning the role of law enforcement or their impact on service delivery." The role of police officers on the Navigation Team was raised in our [November 2017 report](#), and we expect that this issue will be addressed in the Executive's Navigation Team Reporting Plan Quarter 2 response under Reporting Checkpoint 1.2 – Organizational Staffing Assessment.

Recommendations

The table below lists our recommendations for Checkpoint 3.4: Report on 2017 Racial Equity Impacts.

Checkpoint #	Recommendation
3.4 Report on 2017 Racial Equity Impacts	A. The City should ensure that HSD has adequate support and resources to address the identified "gap" in race and social justice trainings for the Navigation Team and its leadership. This should be an ongoing investment area for the Navigation Team.
	B. HSD should provide a Navigation Team race and social justice training plan to the Office of City Auditor.
	C. The City should ensure that SOCR has adequate support and resources to continue to work with the Navigation Team on the development of the Racial Equity Toolkit and to implement the Toolkit recommendations.
	D. HSD should provide to the Office of City Auditor an update on the development and implementation of the Navigation Team Racial Equity Toolkit.
	E. HSD should provide to the Office of City Auditor a description of how the Navigation Team efforts will be coordinated with the work of newly contracted outreach providers who specifically serve African Americans and American Indians to ensure the best possible outcomes.

	F. HSD should consider how targeted universalism might be incorporated in the redevelopment of the Navigation Team Theory of Change.
	G. HSD should consider team composition in the Navigation Team Racial Equity Toolkit.
	H. The Executive should address the issue of “impact of police as part of the Navigation Team” in its Navigation Team Reporting Plan Quarter 3 response (Reporting Checkpoint 1.2 – Organizational Staffing Assessment).

OBJECTIVES, SCOPE, AND METHODOLOGY

Background and Objectives

On August 29, 2017, Seattle City Councilmember Lisa Herbold asked the Office of City Auditor to review the Theory of Change for the City's Navigation Team and to identify additional information that the City Council may want to gather on the Team's activities. In response to this request, on November 7, 2017, our office published the [Reporting Plan for the Navigation Team](#) that included a reporting plan with 14 requests for information (i.e., "reporting checkpoints") that can help inform the City Council's understanding of the Navigation Team approach.

On June 12, 2018, the Executive presented their 2018 [Quarter 1 response to the Navigation Team reporting plan](#) to the Council's [Civil Rights, Utilities, Economic Development, and Arts Committee](#), and Councilmember Lisa Herbold requested our office to review and respond to the Executive's reporting checkpoints.

This October 2, 2018 report responds to the Executive's Quarter 1 reporting checkpoints. We will produce additional reports for the Executive's Quarter 2 and 3 checkpoints as they become available. In addition, because this work has been conducted as an audit, our recommendations from this report and our subsequent reports will be tracked in our annual Audit Recommendations Follow-up Report.

Audit Scope and Methodology

This audit was conducted at the request of Councilmember Lisa Herbold for our office to assess the Executive's [Quarter 1 response to the Navigation Team reporting plan](#) which responded to 7 of the 14 reporting checkpoints from the Office of City Auditor's 2017 report, Reporting Plan for Navigation Team.

We conducted this audit using various methodologies, as follows:

- We reviewed the Executive's May 3, 2018 Quarter 1 Response to SLI 242-1-A-1;
- We interviewed officials from HSD, CBO, and SPU;
- We reviewed financial data provided to CBO in support of Executive's 2017 Navigation Team Baseline Data;
- We reviewed recent research on homeless outreach, homelessness among young adults, shelter design, etc.;
- We analyzed data provided by HSD on daily shelter availability in 2017;
- We reviewed the 2018 HSD contracts for outreach and diversion;

- We reviewed information about homeless outreach conducted in other jurisdictions including King County, Austin, San Diego, and Portland, as well as recent case studies of police efforts compiled by the Police Executive Research Forum

We conducted this performance audit in accordance with generally accepted government auditing standards. Those standards require that we plan and perform the audit to obtain sufficient, appropriate evidence to provide a reasonable basis for our finding and conclusions based on our audit objectives. We believe that the evidence obtained provides a reasonable basis for our finding and conclusions based on our audit objectives.

APPENDIX A

References

Bryant-Davis, T., Adams, T., Alejandre, A., & Gray, A. A. (2017). The Trauma Lens of Police Violence against Racial and Ethnic Minorities. *Journal of Social Issues*, 73(4), 852–871. <https://doi.org/10.1111/josi.12251>

López, C. M., Andrews, A. R., Chisolm, A. M., de Arellano, M. A., Saunders, B., & Kilpatrick, D. G. (2017). Racial/ethnic differences in trauma exposure and mental health disorders in adolescents. *Cultural Diversity and Ethnic Minority Psychology*, 23(3), 382–387. <https://doi.org/10.1037/cdp0000126>

Hyperlinks

Websites that are referenced multiple times are listed only on the page on which they first occur.

Page	Website Name / Description	Website Address
1	Quarter 1 Response to Navigation Team Reporting Plan	http://seattle.legistar.com/View.ashx?M=F&ID=6297619&GUID=4ADE588E-C580-4BEE-BD33-F9953D2D9A91
1	Reporting Plan for Navigation Team, Office of City Auditor, November 2017	http://www.seattle.gov/Documents/Departments/CityAuditor/auditreports/NavigationTeamReportingPlan110717.pdf
1	2017 Point in Time Count	http://allhomekc.org/king-county-point-in-time-pit-count/
1	Statements of Legislative Intent 242-1-A-1 (page 42)	http://www.seattle.gov/financedepartment/18adoptedbudget/documents/statementsoflegintent.pdf
2	United Way of King County's Parent-Child Home Program	https://www.uwkc.org/helping-students-graduate/pchp/
3	Annie E. Casey Foundation Theory of Change	http://www.aecf.org/resources/theory-of-change/
3	U.S. Agency for International Development website on Theory of Change	https://usalearninglab.org/lab-notes/what-thing-called-theory-change
5	Seattle Channel, CityStream: Navigation Team	http://www.seattlechannel.org/videos?videoid=x78447
8	Seattle City Council's Civil Rights, Utilities, Economic Development, & Arts Committee, June 12, 2018	https://www.seattlechannel.org/mayor-and-council/city-council/2018/2019-civil-rights-utilities-economic-development-and-arts-committee?videoid=x92046&Mode2=Video
11	Sacramento's "triage" (i.e., bridge-to-housing") shelters	https://www.cityofsacramento.org/City-Manager/Homeless-Coordination/Homeless-Triage-Shelters
11	Video of structure operated by Veterans' Village of San Diego	https://www.sprung.com/structures/municipal-buildings/homeless-shelters/
11	Compass Housing Alliance Peter's Place Overnight Shelter	http://www.compasshousingalliance.org/what-we-do-top/emergency-shelter/peters-place/

Page	Website Name / Description	Website Address
11	Mayor Durkan's plan to increase shelter capacity by 25 percent	https://homelessness.seattle.gov/update-mayor-durkans-plan-to-increase-shelter-capacity-by-25-percent-2/
11	The Police Response to Homelessness	http://www.policeforum.org/assets/PoliceResponsetoHomelessness.pdf
12	Downtown San Diego Partnership	https://downtownsandiego.org/clean-and-safe/
12	Pierce County, Washington Center for Dialog and Resolution	https://centerforresolution.org/
12	Mental Health Center of Denver	https://mhcd.org/family-reunification-program-homeless-denver/
14	HSD's 2018 Homelessness Funding Awards	http://www.seattle.gov/Documents/Departments/HomelessInvestmentsRFP/Copy%20of%202018%20RFP%20Homeless%20RFP%20Funding%20Awards%20by%20Agency.pdf
15	2016 Evaluation of LEAD	http://static1.1.sqspcdn.com/static/f/1185392/27047605/1464389327667/housing_employment_evaluation_final.PDF?token=tPIV8jGCy6%2F25AsphFKADLw7yek%3D
15	SOCR's 2017 Encampment Monitoring Report	http://www.seattle.gov/Documents/Departments/Homelessness/committee/Encampment-Monitoring-Report-2017.pdf
17	SAMHSA website	https://www.integration.samhsa.gov/clinical-practice/trauma#trauma_informed_care
18	Trauma-Informed-Care Self-Assessment Tool developed by the U.S. Department of Health and Human Services' Substance Abuse and Mental Health Services Administration (SAMHSA), Homelessness Resource Center	https://www.air.org/sites/default/files/downloads/report/Trauma-Informed_Organizational_Toolkit_0.pdf
18	King County Healthcare for the Homeless staff member who provides training in vicarious trauma	https://publichealthinsider.com/2017/05/09/nurses-week-focus-on-good-health-for-nurses-promotes-resilience/
18	All Home's two-part training on trauma informed care for homeless organizations	http://allhomekc.org/trauma-informed-care/
19	U.S. Department of Justice Office of Justice Programs Organizational Readiness Guide for Addressing Vicarious Trauma	https://vtt.ovc.ojp.gov/what-is-the-vt-org
23	Austin's Homeless Outreach Team (HOST)	https://www.austintexas.gov/department/homelessness-outreach-team
26	BRC's Landing Road Facility	http://www.brc.org/homestretch-housing

Page	Website Name / Description	Website Address
27	New York City's HOME-STAT	https://www1.nyc.gov/site/operations/projects/homestat/index.page
27	Santa Rosa, California's Homeless Outreach Services Team (HOST)	https://srcity.org/764/Homeless-Outreach-Services-Team-HOST
30	2018 report on racial inequity in homelessness by the Center for Social Innovation - Supporting Partnerships for Anti- Racist Communities (SPARC)	http://center4si.com/wp-content/uploads/2016/08/SPARC-Phase-1-Findings-March-2018.pdf
30	2011 study by George Carter of the U.S. Census Bureau	https://www.huduser.gov/portal/periodicals/cityscape/vol13num1/ch2.html
31	Seattle/King County 2018 Count Us In Report	http://allhomekc.org/wp-content/uploads/2018/05/FINALDRAFT-COUNTUSIN2018REPORT-5.25.18.pdf
31	People's Institute Undoing Racism workshop	https://www.pinwseattle.org/register.php
32	King County All Home Best Practices in Homeless Housing Presentation	http://allhomekc.org/wp-content/uploads/2015/09/AH-Training-Plan2.pdf
32	Seattle Office for Civil Rights Racial Equity Toolkit website	http://www.seattle.gov/civilrights/programs/race-and-social-justice-initiative/racial-equity-toolkit

APPENDIX B

List of Recommendations

Checkpoint #	Recommendation
1.1 Analysis of Navigation Team Engagement Rate	<p>A. The City should ensure that HSD has adequate support and resources to implement its planned improvements for accurately tracking and reporting on Navigation Team engagement metrics for 2018 and beyond.</p>
	<p>B. The City should consider opportunities for expanding enhanced shelter capacity, including the bridge to housing approach used in San Diego and Sacramento that can be quickly deployed and incorporates private funding.</p>
	<p>C. The City should consider options for reserving a certain number of enhanced shelter beds daily for Navigation Team referrals.</p>
	<p>D. The City should re-evaluate its recent additional investments in basic shelter capacity and consider reprogramming those resources for enhanced shelters or diversion.</p>
	<p>E. The City should explore opportunities for the Navigation Team to expand its use of diversion strategies including reunification with friends and family.</p>
	<p>F. For 2018 and beyond, the City should explore using metrics for the Navigation Team that are consistent with the other City-funded outreach providers, including tracking reasons for refusing services.</p>
	<p>G. The Executive should provide the Office of City Auditor with the following deliverables described in the Quarter 1 response:</p> <ul style="list-style-type: none"> a. Results from the four focus groups conducted with Navigation Team staff and Licton Springs encampment residents.
1.3 Trauma Informed Care Self-Assessment	<p>A. HSD should develop a plan to ensure full Navigation Team staff participation in future trainings and assessments related to trauma-informed care.</p>
	<p>B. The Navigation Team should consider collaborating with King County to address the training gaps identified in the Trauma Informed Care Self-Assessment.</p>
	<p>C. HSD should consider re-administering the Trauma-Informed Care Self-Assessment to track progress with Trauma-Informed Care and should consider the use of additional self-assessment tools related to Trauma-Informed Care.</p>
	<p>D. The Executive should provide the Office of City Auditor with the following deliverables described in the Quarter 1 response. These are deliverables associated with HSD's recommended short-term and long-term next steps for trauma-informed practice:</p> <ul style="list-style-type: none"> a. Documentation of any meetings with Navigation Team members and partners to discuss self-assessment results b. Documentation that the Navigation Team has established structured meetings that address trauma for clients and impacts of vicarious trauma on staff. c. Documentation of written policies regarding trauma-informed practices. d. Documentation of clear policies regarding client engagement.

	<ul style="list-style-type: none"> e. Documentation of development of training program for the Navigation Team related to the five domains of trauma-informed practice. f. Documentation of the Navigation Team's staff use of SAMHSA resources.
1.4 Evaluation of Navigation Team Trainings	A. The Executive should provide a timetable for developing a plan for evaluating Navigation Police Officer training. The timetable should include the parties responsible for developing the plan.
	B. The Executive should provide a timetable for evaluating Navigation Police Officer training. The timetable should include the parties responsible for communicating and implementing the evaluation recommendations.
	C. The Executive should provide a timetable for re-examining and revising the Navigation Team training plan. The timetable should include the parties responsible for these activities.
2.4 Assessment of Opportunities for Greater Coordination with King County	<p>A. The Executive should provide a plan for ensuring Navigation Team compliance with the Outreach Standard of Care. That plan should minimally include the elements listed in Exhibit 5.</p> <ul style="list-style-type: none"> • Will the Navigation Team follow the Outreach Standards of Care? • Will this include the Navigation Team Police Officers as well as the contracted outreach providers? • Which of the Outreach Standards of Care measures will the Navigation Team collect? • How will the Navigation Team collect those measures and at what intervals? • How will the Executive ensure that the Navigation Team complies with the Outreach Standards of Care?
	B. The Executive should investigate and report on opportunities to increase alignment between the Navigation Team and its King County peers, especially in the areas identified in its Quarter 1 response (i.e., diversion and housing access coordination).
	C. The Executive should consider and report on opportunities for deeper collaboration with King County, including greater integration of the Navigation Team and Public Health-Seattle and medical and mental health services.
3.1 Report on 2017 Baseline Data – Results and Outcomes	A. The City should ensure that HSD has adequate support and resources to work with all relevant stakeholders to refine and redevelop the Navigation Team's Theory of Change.
	B. The City should ensure that HSD has adequate support and resources to work with all relevant stakeholders to develop robust systems for tracking the Navigation Team's results and the short, medium, and long-term outcomes associated with the Navigation Team work.
	C. HSD should provide a revised Navigation Team Theory of Change to the Office of City Auditor.
	D. HSD should provide to the Office of City Auditor its plan to develop robust systems for tracking the Navigation Team's results and the short-, medium-, and long-term outcomes associated with the Navigation Team's work.

3.2 2017 Actual Expenditures	<p>A. The Executive should provide the Office of City Auditor with the following:</p> <ul style="list-style-type: none"> a. Revised annotated 2018 Navigation Team budget. b. Timetable for implementing a methodology to track Navigation Team expenditures across all City departments.
3.4 Report on 2017 Racial Equity Impacts	<p>A. The City should ensure that HSD has adequate support and resources to address the identified “gap” in race and social justice trainings for the Navigation Team and its leadership. This should be an ongoing investment area for the Navigation Team.</p>
	<p>B. HSD should provide a Navigation Team race and social justice training plan to the Office of City Auditor.</p>
	<p>C. The City should ensure that SOCR has adequate support and resources to continue to work with the Navigation Team on the development of the Racial Equity Toolkit and to implement the Toolkit recommendations.</p>
	<p>D. HSD should provide to the Office of City Auditor an update on the development and implementation of the Navigation Team Racial Equity Toolkit.</p>
	<p>E. HSD should provide to the Office of City Auditor a description of how the Navigation Team efforts will be coordinated with the work of newly contracted outreach providers who specifically serve African Americans and American Indians to ensure the best possible outcomes.</p>
	<p>F. HSD should consider how targeted universalism might be incorporated in the redevelopment of the Navigation Team Theory of Change.</p>
	<p>G. HSD should consider team composition in the Navigation Team Racial Equity Toolkit.</p>
	<p>H. The Executive should address the issue of “impact of police as part of the Navigation Team” in its Navigation Team Reporting Plan Quarter 3 response (Reporting Checkpoint 1.2 – Organizational Staffing Assessment).</p>

APPENDIX C

August 2017 Navigation Team Theory of Change

Navigation Team Theory of Change

August 11, 2017

Homelessness in Seattle

A Growing Problem

The 2017 Point-in-Time Count, locally referred to as *Count Us In*, conducted in King County found that there were at least 5,485 individuals living unsheltered in King County, with 70% or 3,857 people living unsheltered in the City of Seattle.¹ The current crisis is the result of complex social and economic factors including income inequality, rapidly rising rents, the opioid epidemic, mass incarceration and a significantly underfunded mental health system. It is estimated that more than 45% of people experiencing homelessness report having a mental health condition and 36% report substance use disorder.

The structural and institutional racism in the juvenile and criminal justice, education, child welfare, health care, and housing systems has created a stark disparity when it comes to who experiences homelessness. The Count Us In survey found that 55% of people experiencing homelessness identify as people of color (compared with 32% of the general population), with the greatest disparities observed among those who identify as Black or African American, Hispanic or Latino, and Native American.

Public Health and Safety Challenges

The reality of nearly 4,000 people living unsheltered in Seattle impacts not only the health and safety of the individuals but also of the community at large. Encampments often show signs of rodent infestation due to unsecured food and an abundance of nesting material (trash, abandoned bedding, etc.). Lack of sanitation facilities leads to accumulation of human waste and potential spread of disease. The City of Seattle has also seen a recent increase in complaints about trash, needles and illegal dumping on public property. This increase is attributable not only to encampment residents who have limited means to remove garbage, but also to people who are housed and who may find it acceptable to illegally dump unwanted items near encampments or the public right-of-way.

While many people living in unauthorized encampments are not involved in criminal activity, large encampments can attract criminal behavior which both impacts the already vulnerable homeless individuals and the surrounding community. Over the past 6 months, Seattle has seen many fires and violent crimes reported related to unauthorized encampments, including the rape and sex trafficking of at least 3 teenage girls, a woman who reported being held hostage in her tent while being assaulted; reports of shots fired and subsequent victims arriving at Harborview Medical Center with gunshot wounds; multiple RV fires and propane tank explosions under critical roadways.

The Need for a New Approach

Connecting with people living unsheltered with services while addressing critical public health and safety issues is an essential component of the City's homelessness response. Beginning in 2014, the City began to increase resources to add to the capacity for outreach throughout the City and in specific geographic

¹ <http://allhomekc.org/wp-content/uploads/2016/11/2017-Count-Us-In-PIT-Comprehensive-Report.pdf>

Navigation Team Theory of Change

areas. With the growing numbers of unsheltered individuals over the last three years, the need to act with urgency, increase coordination, and geographically disperse teams has become apparent.

Navigation Team Theory of Change

Seattle's Traditional Homeless Outreach Model

Scope and Nature of Outreach

Contracted outreach:

Outreach has been a tool used by providers to develop a trusting relationship with people living outside in Seattle for decades. The relationship development component of outreach is critical to supporting clients to gain access to housing, medical support, mental health support, and basic needs. In 2017, the City is investing \$1.2M in outreach services from seven agencies, a 41% increase over 2015.

ORGANIZATION	TARGET POPULATION	GEOGRAPHIC AREA
REACH	Adults in encampments	Citywide
DESC-HOST	Adults with mental illness	Primarily Downtown
YouthCare	Youth/Young Adults	Downtown/U-district/Capitol Hill
Metropolitan Improvement District	Adults	Downtown/Capitol Hill
Road to Housing	Adults in vehicles	Citywide
Mobile Medical Van	Adults w/ medical needs	Citywide
Kids Plus	Families	Citywide

Despite the increased investment in outreach services, several challenges have emerged in trying to effectively address the needs of people living unsheltered. Outreach providers have historically focused primarily on addressing basic needs and providing harm reduction support. They were neither expected nor resourced to provide people living unsheltered with direct housing or shelter placement. In addition, expected outcomes for outreach had not been defined in a systematic manner across funders. Outreach providers were also not required to participate in the Homeless Management Information System (HMIS) prior to 2017, so the City's capacity to track outcomes has been limited. When shelter options were available for outreach providers to offer, the options have typically had barriers to entry that made them unsuitable or undesirable options for people living outdoors (e.g. overnight only, do not allow couples or pets).

Seattle Police Response:

Seattle Police Department (SPD) has traditionally provided outreach and support services to unsheltered individuals through the routine work of patrol officers, Community Policing Teams, the Crisis Response Team, and the West Precinct's Neighborhood Response Team. These efforts are typically coordinated at the individual precinct level, with SPD Officers making connections with known service providers in their areas. SPD officers also provide precinct-specific resource guides to unsheltered individuals with whom they interact.

Seattle Police Department's Crisis Intervention policy states that the department:

...recognizes the need to bring community resources together for the purpose of safety and to assist and resolve behavioral crisis issues. The Department further recognizes that many people suffer crises, and that only a small percentage has committed crimes or qualifies for an involuntary evaluation. Persons suffering crises will be treated with dignity and will be given

Navigation Team Theory of Change

access to the same law enforcement, government and community service provided to all members of the public.

Providing support to vulnerable and unsheltered populations has long been part of the scope and mandate of Seattle Police Officers, and SPD has invested time and resources in ensuring that officers are equipped to fulfill this part of their mission. In practice, however, officers do not typically have long stretches of time available to build the trusting, individual relationships that are the primary ingredient of a successful outreach engagement. Officers frequently work with a long backlog of calls that require attention, and are regularly called away to respond to more urgent public safety issues.

Addressing Unauthorized Encampments:

The 2008 Multi-Departmental Administrative Rules (MDAR) 08-01 established protocols for clean-up of encampments which involves staff from multiple departments including Finance and Administrative Services (FAS); the relevant property owning department (Seattle Department of Transportation (SDOT), Seattle Department of Parks and Recreation (DPR), Seattle City Light (SCL), Seattle Public Utilities (SPU) or Seattle Center); and SPD acting primarily in a security role. The MDAR protocols required outreach to engage with people in the encampments before clean-up. The Human Services Department (HSD) contracted with Evergreen Treatment Services' REACH team to provide these services. In addition, a team from YouthCare was dispatched in the event people under the age of 25 were known to be at a specific location.

Challenges with Interdepartmental Coordination

With multiple city departments responsible for organizing pieces of the City's response to increasing camping complaints, the orchestration of responses was inconsistent. In monitoring 50 encampment responses between September and December of 2016, the Office of Civil Rights took action in 7 situations when communication issues or lack of interdepartmental/interagency coordination created issues with complying with the 2008 MDARs. Furthermore, the increased need for encampment response activity has also reduced the ability of outreach to engage with people living unsheltered separate from encampment response, leading to a critical need for expanded resources and improved coordination of our response to meet the growing needs of the unsheltered population.

Low Rates of Acceptance of Shelter

The outreach effort dispatched previously as part of the encampment removal process resulted in few people accepting referrals to shelter. REACH made 4,548 contacts with adults (this includes multiple contacts with same individual) between February and December 2016 which resulted in 214 adults verbally accepting a referral to relocate to a safer location. The most commonly stated reason adults declined was a preference to stay in the neighborhood, anecdotally stemming from a desire to stay with the community the person had built in/around the encampment.²

² <http://www.seattle.gov/Documents/Departments/HumanServices/AboutUs/SOE%20Final%20Report.pdf>

Navigation Team Theory of Change

The shelter options presented were generally not the most desirable or suitable for the people being engaged according to responses in the Seattle Needs Assessment.³ The shelter options often had limited hours, no right of return, no place to store belongings, may not have allowed couples to stay together, may not have allowed pets, and/or had sobriety requirements. Outreach was also unable to provide transportation to the shelter, or to confirm that the person referred actually used the bed that night.

In light of the growing homelessness crisis, it became apparent by mid-2016 that the City's traditional street outreach model has been largely ineffective in moving unsheltered individuals out of hazardous conditions and onto a path toward housing. In response, the City undertook a concerted effort to redesign our outreach to unsheltered individuals from the ground up.

³ <http://coshumaninterests.wpengine.netdna-cdn.com/wp-content/uploads/2017/03/City-of-Seattle-Needs-Assesment-Report-Draft-FINAL.pdf>

Navigation Team Theory of Change

Research

Evidence for What Works in Outreach

In Fall 2016, the City of Seattle commissioned a needs assessment to gain insight into the needs and experiences of people living unsheltered to help inform the homeless response effort. In this report, focus group participants shared their challenges in “navigating the system,” including physical, mental and behavioral health, and housing support services. Among several reported barriers, focus group respondents highlighted insufficient outreach as a significant challenge for navigating the system and accessing services.⁴ Research from academic institutions and the United States Interagency Council on Homelessness (USICH) find that targeted homeless outreach teams, such as Seattle’s Navigation Team, increase access to and participation in physical, mental and behavioral health, and housing support services.

Academic research finds that **assertive outreach to individuals experiencing homelessness increases participation in services for unsheltered individuals**. Several studies researching the efficacy of the federal Access to Community Care and Effective Services and Supports (ACCESS) project in New Haven, CT find that individuals experiencing homelessness with substance abuse and/or mental health disorders are less likely to avail themselves to services and treatment. These studies further find that proactive outreach to individuals experiencing homelessness – specifically those suffering from substance abuse disorder and/or mental illness – is effective in connecting people living unsheltered to treatment and services.⁵ Additional research on the Greater Bridgeport Community Mental Health Center’s Homeless Outreach Team (HOT) further highlights the early success of assertive outreach to individuals experiencing homelessness and substance use/mental health disorders.⁶ Although not all persons experiencing homelessness suffer from substance use and/or mental health challenges, a majority of respondents in the City of Seattle Homeless Needs Assessment did report drug use and/or mental health issues. These studies suggest that the City’s implementation of the Navigation Team would increase access to services for individuals experiencing homelessness, especially those struggling with substance use disorder and/or mental health illness.

Reports from the United States Interagency Council on Homelessness (USICH) further support these academic findings. USICH has developed an emerging practices brief that makes recommendations for ending homelessness for people living in encampments. A core tenet of the emerging practices is the need to perform **“intensive and persistent outreach” as the critical front door to the homeless response system**. USICH recommends outreach should include the following strategies to address the needs of people living in encampments:

- Identification of members of an encampment by name and tailoring interventions to their individual needs;
- A consistent presence so that relationships can be formed over time; and

⁴ <http://coshumaninterests.wpengine.netdna-cdn.com/wp-content/uploads/2017/03/City-of-Seattle-Needs-Assesment-Report-Draft-FINAL.pdf>

⁵ <http://www.jstor.org/stable/3767420>; <http://dx.doi.org/10.1080/00952990600754006>;
https://www.researchgate.net/profile/Michael_Rowe6/publication/11338249_Engaging_Persons_with_Substance_Use_Disorders_Lessons_from_Homeless_Outreach/links/5556353908ae6fd2d823606f.pdf

⁶ <http://scholarworks.umb.edu/cgi/viewcontent.cgi?article=1597&context=nejpp>

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- Ability to refer individuals directly into interim options that can be immediately available and that provide a clear path toward permanent housing using Housing First principles.

USICH also emphasizes the importance of maintaining honest and transparent communication by all involved in an encampment response and the value of cross-training among the various partners to both increase coordination and enhance the sensitivity of staff working directly with people experiencing homelessness.⁷

USICH provides further guidance on connecting people living in encampments to services in its report “Searching Out Solutions, Constructive Alternatives to the Criminalization of Homelessness.” **USICH has found that many cities have seen a reduction in the number of people living unsheltered when there is close coordination between police and behavioral health and social service providers.**⁸

Emerging Best Practice Models

Several cities across the country are following USICH’s guidance and implementing homeless outreach teams. For example, San Francisco’s homeless outreach team is a collaboration between the Department of Public Health, Human Services, the Public Library and the non-profit Public Health Foundation Enterprises and is comprised of paraprofessionals, clinicians, social workers, and peers who provide outreach and case management to unsheltered individuals. In other locations like Houston, Oklahoma City, Salt Lake City, Wichita, Colorado Springs, and Lubbock, TX, community policing models inform homeless outreach teams and are comprised exclusively of law enforcement officers. Still other cities, including San Diego, Austin, and St. Petersburg, FL, include a mix of law enforcement and social workers, mental health professionals, and case managers.

In order to inform the development of the Navigation Team, Seattle Police Department staff held discussions with seven police departments⁹ who are regarded as making substantial progress in the national effort to produce positive outcomes in the areas of homelessness, supportive housing, behavioral health, and low-level, persistent offending. All seven jurisdictions have a version of a police department homeless outreach team. In most jurisdictions, the team is multidisciplinary. Teams that are seeing the most success have special training in working with people experiencing homelessness, have deep knowledge of the homeless service system and can access the availability of shelter or interim housing options in real time. Each jurisdiction stressed that any version of a homeless outreach team should be voluntary and staffed by officers committed to this sort of work and training.

Stakeholder Engagement

A variety of stakeholder efforts have taken place over the past year to more deeply understand the needs of persons living unsheltered and to improve the efficacy of outreach efforts. Each of the efforts below, in addition to the experiences and expertise of the Navigation Team members themselves, have

⁷ https://www.usich.gov/resources/uploads/asset_library/Ending_Homelessness_for_People_Living_in_Encampments_Aug2015.pdf

⁸ <https://www.usich.gov/tools-for-action/searching-out-solutions>

⁹ Police Departments of Anaheim, Salt Lake City, Colorado Springs, New York City, Cambridge (MA), San Diego, and Los Angeles; Mayor’s Office of Los Angeles.

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informed the development and practices of the Navigation Team. The applicable learnings from the efforts below are more fully described in Appendix 1.

- All Home Outreach Continuum Workgroup (Winter 2016)
- 2016 Seattle Homeless Needs Assessment (Fall 2016)
- Taskforce on unsanctioned Encampment Clean-up Protocols (October 2016)
- Convening of Behavioral Health Providers (February 2017)

Pathways Home

[Pathways Home](#), release in September 2016, is the City of Seattle’s road map to transform its homeless effort and investments into a person-centered, systemic response to homelessness that invests in models with demonstrated success and addresses racial disparities.¹⁰ Pathways Home also puts ending a person’s experience of homelessness with permanent housing as the ultimate goal of the homeless response system. For people living unsheltered and disconnected from services, the most critical entry point into our homeless response system is outreach. Pathways Home commits to improving the City’s existing outreach effort to ensure that outreach is truly a gateway to housing placement and that people living outside have access to outreach regardless of where in the city they are located.

¹⁰ <http://www.seattle.gov/pathwayshome>

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A New Outreach Model: The Navigation Team

Emerging from the City's research, and in conjunction with the implementation of Pathways Home, the Mayor's Office, HSD and FAS devised a plan to completely reimagine the City's outreach to unsheltered individuals – from the composition of the team to the way success is defined and measured. The result of this plan is the Navigation Team, a multidisciplinary team designed to bring together the ingredients of a successful outreach engagement together under a single, unified organizational structure.

In pulling together these traditionally independent bodies of work, the City hopes that increased collaboration and coordination will lead to an expanded capacity to provide outreach that meets the needs of people living unsheltered.

Navigation Team Goal

The goal of the Navigation Team is to provide outreach to people living unsheltered that is efficient and effective at moving people out of hazardous conditions and onto a path toward health, stability, and permanent housing.

Navigation Team Composition

The team is comprised of specially-trained SPD officers, a supervising police sergeant, an outreach coordinator, an encampment response manager, field coordinators, and contracted outreach providers. These groups work together in the field as a single team to offer individualized services and alternative living spaces to individuals experiencing homelessness.

An organizational chart illustrating the Navigation Team's current structure can be found in Appendix 3 of this document.

Seattle Police Officers:

As indicated above, SPD has long been engaging with and responding to the needs of people living unsheltered as part of their regular duties. Despite this work, SPD was not considered a formal part of the City's outreach to people experiencing homelessness until the creation of the Navigation team. The incorporation of dedicated police officers into the Navigation Team has formalized the role of our police department in outreach, and has significantly increased the number of people directly working to connect people living unsheltered with services they need. The nine police officers currently on the Navigation Team volunteered to work in an outreach capacity with people living unsheltered. They are all certified in Crisis Intervention, and have received training in de-escalation techniques, implicit bias, and harm reduction. A full list of the SPD Navigation Team training is available in Appendix 4.

Outreach Coordinator:

The Navigation Team includes a new Outreach Coordinator position charged with fulfilling the Pathways Home mandate to build the Outreach Continuum. The coordinator is responsible for assembling the package of shelter and services from other social service providers that the Navigation Team can offer to people living unsheltered.

When appropriate, the Outreach Coordinator also requests assistance from partner agencies, including:

- YouthCare
- Metropolitan Improvement District (MID) – Outreach, Case Management & Mental Health Staff

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- Union Gospel Mission (UGM) Outreach team
- Community Mental Health Program and Hope Place
- Harborview – Mental Health
- Law Enforcement Assisted Diversion
- Mary's Place
- Downtown Emergency Services Center HOST Program

The Outreach Coordinator is also a Licensed Mental Health Counselor, bringing valuable mental health expertise to the team. In cases where the team contacts someone who is dealing with mental health challenges, the Outreach Coordinator assumes the lead with that individual, making an assessment, engaging and making the appropriate referral to support the individual's needs.

The Outreach Coordinator is also responsible for the collection and analysis of data and reporting on Navigation Team outcomes. In addition, the Outreach Coordinator oversees a live "by-name" list that tracks the progress of individuals that the Navigation Team has referred to authorized encampments.

In addition, the Outreach Coordinator serves as the City's primary connection point to the broader social service community by chairing the Providers Resource Exchange and Planning (PREP) meeting each month. This venue is designed to facilitate the sharing of resources, coordination for care, and problem-solving of issues related to the unsheltered population in Seattle.

Contracted outreach providers:

The City currently contracts with Evergreen Treatment Service's REACH program to provide seven outreach workers and a supervisor as part of the Navigation Team. These eight outreach providers bring expertise in assessing the needs of people living unsheltered including shelter/housing, mental health, substance use, and physical health needs. Contracted outreach is then able to establish connections to community services that meet the needs of their clients, including providing ongoing support to navigate processes and systems that are often complex.

Encampment Response Manager and Field Coordinators:

The Encampment Response Manager is responsible for managing Navigation Team scheduling, prioritization, logistics, and for providing oversight of encampment clean-ups. The Encampment Response Manager receives and assesses information from the City's Customer Service Bureau (CSB) about locations that may warrant the services of the Navigation Team, and then dispatches field coordinators to inspect reported encampment sites. Field coordinator assessments are then used to determine the schedule and prioritization of outreach and clean-up work across the city. The Encampment Response Manager oversees the Field Coordinators' work with individuals during clean-ups to store personal belongings and later return those items upon request.

The Encampment Response Manager is also responsible for developing safety protocols and training for the Navigation Team. They also provide training for contracted clean-up crews, and work to ensure compliance 2017 MDAR 17-01.¹¹

¹¹ <http://www.seattle.gov/Documents/Departments/FAS/Rules/FAS-encampment-rule-17-01.pdf>

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Coordination of Navigation Team

The Navigation Team model brings an unprecedented level of interdepartmental and interdisciplinary coordination to the City's homelessness outreach and encampment mitigation efforts. This coordination brings with it an increased clarity on roles, responsibilities, and how each piece of the City's response fits together within the context of the broader work.

The Navigation team meets each morning to assess operational priorities and logistical issues for the coming day. This meeting provides space to problem-solve for individuals encountered in the course of the previous day's or week's outreach work. Importantly, the Navigation team also receives daily vacancy information from the low-barrier Navigation Center, traditional shelters, and authorized encampments. Having this information at the beginning of the day allows the Navigation team to approach individuals experiencing homelessness with meaningful offers for relocation in-hand.

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Program Logic

Intensive and Persistent Engagement

The foundation of the Navigation Team's approach is relationship-building through persistent engagement with individuals living unsheltered in Seattle. Not only is the experience of living outdoors highly stigmatized, many people also identify as members of other marginalized communities (communities of color, LGBTQ, undocumented immigrants, people experiencing mental illness, and those with substance use disorder) and have diverse and multicultural needs. Many people living unsheltered have also had negative interactions with the social service system. As a result, many are anxious about reengaging with this system and its services. Establishing (or re-establishing) trust is an essential first step toward moving people onto a pathway toward permanent housing.

An offer of shelter or social services is not usually accepted on the first outreach contact with an individual. The National HealthCare for the Homeless Network (HCHN) has reported that engaging homeless individuals with serious mental illness often requires a sustained effort, and can take up to nine months to move them into the larger service system.¹² On average, the Navigation Team contacts an individual roughly 3 times before an offer for shelter or services is accepted.

The Navigation team's outreach model is focused on building trust with people living unsheltered, with the understanding that a personal relationship can mean the difference between whether an offer is accepted or rejected.

Improved offers of shelter

The City is moving toward more shelter options that better meet the needs of people living outdoors. As an example, the recently opened Navigation Center is a 24 hour, low-barrier program that accommodates couples, pets and people's possessions. In addition, the Navigation center does not require sobriety or an ID for admission and residence. These traditional barriers have significantly impacted the success of past outreach efforts. The Navigation Team is intentionally the sole referral point for people into the Navigation Center, allowing the Team to have a high quality interim housing options in hand when they are working with people in the field. In addition, the Navigation Team has access to daily vacancy information for several shelters and 3 authorized encampments (Georgetown, Myers Way and Licton Springs). While the authorized encampments are not an ideal shelter solution, the 24-hour access and the ability for people to have the privacy and security of a "tiny house" is often a more attractive option than a limited hour shelter. Further, the Navigation Team offers transportation to the shelter/authorized encampment that helps to facilitate the acceptance of relocating.

Contracted outreach providers also have access to flexible funding that allows them to immediately problem-solve with clients, including helping people reconnect with their personal support networks by paying for their transportation home; covering upfront costs to get individuals housed if they have income and can manage rent on their own; and assistance in getting a Washington State ID.

¹² http://www.nhchc.org/wp-content/uploads/2012/02/hh.11_98.pdf

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Alignment to Pathways Home

The Navigation Team has been designed centered on the principles embodied in the Pathways Home policy framework.

Person-Centered: The Navigation Team takes a person-centered approach that puts the diverse and multi-cultural needs of the individuals first. The Team honors the autonomy of an individual and empowers that person to be the expert on their own life while coming along side to support them in accomplishing their goals. Utilizing a harm reduction framework, the Navigation team sees change as happening along a continuum and are supportive of those at different stages in the change process. The Navigation Team actively problem solves with clients when they are in the field and tailors service packages that best fits someone's needs. Further, the Navigation team helps their clients navigate the complex social service system by providing warm handoffs.

Low-Barrier: The Navigation Team does not have any screening criteria or eligibility requirements that would prevent them from engaging with any person who is living unsheltered. This is consistent with the evolving models of service delivery such as the Navigation Center and the Licton Springs Authorized Encampment which do not require sobriety, ID or background checks. The Navigation team believes that traditional barriers perpetuate chronic homelessness.

Housing First: The Navigation Team focuses on helping people living unsheltered move out of hazardous conditions and onto a pathway to housing. There are no pre-conditions for offers of shelter. The Navigation Team also helps connect people with the countywide coordinated entry system for housing.

By Name List: The Navigation Team maintains a live "by name list" of the people they engage with in encampments that serves as a strategic resource to maintain continuity of care and that helps the team develop individualized services for the people over time, with the goal of moving people onto a path to housing.

Performance-based: Under their contract with HSD, the contracted outreach provider is required to enter information about clients into the Homeless Management Information System (HMIS) and is tracking outcomes of clients in accordance with the Pathways Home performance metrics.

Adding Law Enforcement to the Outreach Effort

While police officers have long been a point of first contact for individual experiencing homelessness in our community, they have until recently on only had two options: arrest or simply provide a list of resources on where services and shelter might be found. True connections to services is beyond the capacity of typical officers.

Pairing social workers with police officers has the advantage of adding more robust human services skills and resources to the frequent interactions police are having with the homeless population. This partnership allows police to continue to function in their public safety role, while providing added capacity to connect people with the resources they need. It also allows the officers the focused time to build the trusting relationships so vital to helping someone move toward stability. The Navigation Team has found that some individuals are more responsive to police officers than professional outreach

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workers, and the training of police officers makes them comfortable offering certain services, like transporting unsheltered individuals, that are problematic for outreach staff to provide. Finally, officers have information from police resources that provides a more complete picture of the challenges facing an individual.

Deployment in conjunction with the City's encampment clean-up efforts

The City has made the strategic operational decision to deploy the Navigation team in conjunction with the ongoing encampment cleanup work conducted by the Finance and Administrative Services (FAS) Department under MDAR 17-01.

Encampment cleanups are prioritized by public health and safety hazards they pose to both encampment residents and the broader community. As a result, the City typically encounters the most vulnerable unsheltered individuals, living in the direst of conditions, through this body of work. Given that these vulnerable individuals also represent the Navigation team's highest priority for engagement, the operational decision has been made to join these bodies of work into a unified effort that brings together public health and safety concerns with individualized solutions for unsheltered people in need.

Program Logic Model

The Navigation Team program logic model was built to clearly articulate the connection between the people and resources being devoted to this new approach to outreach, their activities on the ground, and the impact the program hopes to achieve.

The program logic model sees relationship-building and meaningful offers of shelter and services as the foundational pieces of the Navigation Team's work. This foundation builds toward acceptance of the Navigation Team's offers, toward the end goal of efficiently and effectively moving people out of hazardous conditions and onto a path toward health, stability, and permanent housing.

The logic model can be found in Appendix 5.

Program Assumptions

The Navigation Team program logic contains a number of assumptions that should be explicitly stated. These assumptions are divided into two groups, as follows:

- 1. Assumptions about how the Navigation Team's activities produce its desired results**
 - a. Building relationships with unsheltered individuals fosters a level of trust that makes the acceptance of an offer for shelter and/or services more likely
 - b. A meaningful offer for shelter and/or services is one that substantially meets an individual's primary areas of need.
 - c. Offers of shelter and/or services will be accepted at a higher rate when these offers are tailored to meet an individual's set of needs.
 - d. The human service delivery system can be difficult to navigate, particularly for individuals living outdoors. A "warm handoff" to shelter and services on offer can facilitate a smoother transition to accessing these services.
 - e. Some encampments are so hazardous that the harm done by uprooting individuals living in those spaces is less significant than the risks posed by allowing them to stay in extremely unsafe living conditions.

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2. **Assumptions about how the results of the Navigation Team's results build toward near-term, medium-term, and long-term outcomes**
- a. Near-term assumptions -
 - i. Connection to a personal support network can facilitate progress toward a path to permanent housing. (Connections to personal support networks like family and friends may not represent a positive step in all cases.)
 - ii. Barriers to coming inside can be reduced with a tailored offer of services and shelter.
 - iii. Living unsheltered in hazardous encampments presents a range of problems that can be immediately mitigated by simply bringing people to safer physical locations.
 - b. Medium-term assumptions:
 - i. There is capacity in our system to accept the number of people willing to accept meaningful offers to come inside.
 - ii. Living in safer physical locations contributes to the stabilization of individuals previously in crisis.
 - iii. When immediate survival needs are met, individuals gain capacity to enter and sustain participation in programs designed to facilitate progress toward health, stability, and permanent housing.
 - c. Long-term assumptions:
 - i. Bringing people indoors and out of unauthorized encampments will result in an improvement in the public health and safety issues associated with those encampments.
 - ii. Moving people to safer locations creates space for them to successfully participate in programs and services designed to move them toward permanent housing.
 - iii. The Navigation Team meets the needs of individuals who would have otherwise relied on emergency services for assistance.

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Navigation Team Definition of Success

The mission of the Navigation Team is to efficiently and effectively move people living unsheltered **out of hazardous conditions** and **onto a path** toward health, stability, and permanent housing.

The Navigation Team measures its success by the number of offers for relocation and services that are **accepted** and **utilized** by individuals living unsheltered in Seattle. An accepted offer is typically the product of intensive time and energy spent building relationships, understanding each individual's set of needs, and identifying available resources to help meet those needs. In order for an offer of relocation and services to be accepted by an unsheltered individual, it must be seen as a viable opportunity to improve their circumstances.

The tremendous amount of work that goes into building relationships and identifying resources that meet the needs of unsheltered individuals is of central importance to fulfilling the Navigation Team's mission. However, this work alone does not constitute success. For the Navigation Team to be considered successful, an offer of relocation and services must be both accepted and utilized by an unsheltered individual. To ensure that its offers are both accepted and utilized, the Navigation Team will often provide a "warm handoff" to a service provider, including transportation, to facilitate a successful transition.

Data Collection and Analysis

Robust data collection and analysis is a major component of the Navigation Team's work. In collaboration with the Human Services Department and Office for Civil Rights, the navigation team is collecting individual level data on demographics, interactions, offers made, and offers accepted.

Collection of this data will allow the Navigation Team to:

- Understand emergent patterns and trends in the population the Team seeks to serve and tailor its program model accordingly;
- Report on the Team's effectiveness in making offers for relocation and services that are both accepted and utilized; and
- Assess the race and social justice impacts of their work to ensure that equitable service is provided to unsheltered individuals regardless of race, ethnicity, gender, sexual orientation, language, or other factors.

Program Evaluation Plan

The Navigation Team is committed to evaluating the efficiency and effectiveness with which it moves people onto a pathway toward health, stability, and permanent housing. This evaluation work can only be made possible through a robust data collection and analysis effort.

The highest priority questions for this work will include:

- Are those who accept offers from the Navigation Team ending up on a path toward permanent housing?
- Which offers are being accepted, and why?
- Which offers are being rejected, and why?

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- Are the Navigation Team's offers for shelter and services, and associated outcomes, racially equitable?

In addition, the City is actively looking at opportunities to further improve the way data is collected and used by the Navigation team, including enhanced integration of outreach work with the County-wide Homeless Management Information System.

There is currently a plan to add additional capacity to the Navigation Team in the form of a data and evaluation specialist. This position will be tasked with overseeing the Navigation Team's data collection effort, and will be responsible for providing ongoing evaluation of the Team's performance to outcomes.

This ongoing evaluation work will be accountable to both the Human Services data team and the Citywide Performance Team in the City Budget Office.

Early Evidence of Success

The Navigation Team is seeing more success than previous efforts in terms of people accepting offers for services and shelter/authorized encampments. Between February and July 2017, the Team had tallied 3,473 contacts with 1,067 unique individuals. These contacts resulted in 388 referrals to safer living alternatives including 50 people who have moved to the Navigation Center. In comparison, between February and December 2016, previous encampment related outreach made more contacts (4,548) but had less acceptances (214) over a longer period of time. Under the Pathways Home Framework, the City is committed to ensuring that outreach is the front door for shelter services and that shelter is responsive to the needs of people living unsheltered. This is being operationalized in encampment operations, the Navigation Center and new shelter beds coming online in 2017, and will be further enhanced by the Homeless Investments RFP as described below.

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Future Opportunities

There are several opportunities to further enhance the City's outreach effort in 2018 and beyond.

Homeless Investment RFP

HSD is currently accepting applications for its Homeless Investments Request for Proposals (RFP) where outreach is one of the targeted program areas; applications are due on September 5, 2017. The RFP is envisioned as the first opportunity to look at all outreach investments within the framework of Pathways Home to build a true continuum across geographies, needs and populations. The RFP requests proposals that are grounded in the Pathways Home principles of housing first, low barrier services, progressive engagement, and providing participant choice and tailored services in service provision; and that meet the intentions of the outreach program model as described in the Appendix D of the RFP materials.¹³ In addition, the RFP also included funding for Emergency Services and will prioritize those proposals that enhance and coordinate day/night services to provide 24/7 services and support exits to housing.

Technology

Technology, in the form of HMIS scan card technology and mobile data entry, is another outreach enhancement that has seen success in other jurisdictions in increasing data quality. HSD is working with King County to implement a pilot the use of scan cards with a homeless services provider for day center and shelter services. Scan card technology will allow for real time vacancy information to be available to outreach teams. A pilot is currently underway with a homeless services provider for day center and shelter services. Mobile technology for data entry will increase data completeness and ease the burden on outreach providers who are currently entering similar data in multiple systems. Seattle IT has anticipated that mobile technology will be available in the 4th quarter of 2017.

Partnerships

Finally, increasing the Navigation Team's formal partnerships will enhance the level of services the team can offer to people living unsheltered. The Navigation Team sees opportunity in more closely pairing with additional mental health and substance use disorder specialists with their outreach efforts. To truly address the mental and behavioral health needs of people living unsheltered, the barrier of appointment-based treatment needs to be addressed. Harborview, Sound Mental Health and Evergreen Treatment have all expressed interest in exploring how to deepen efforts with the Navigation Team.

¹³ <http://www.seattle.gov/Documents/Departments/HomelessInvestmentsRFP/Appendix%20D%20-%20Homeless%20Housing%20Project%20Models.pdf> page 4-6

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Appendix 1: Stakeholder Input

A variety of stakeholder efforts have been launched over the past year to more deeply understand the needs of persons living unsheltered. Each of the efforts below have informed the development and practices of the Navigation Team.

All Home Outreach Continuum Work Group

All Home convened a group of stakeholders in 2016 to develop a set of outreach continuum recommendations. This group was co-facilitated by a REACH co-director and an HSD strategic advisor and included countywide representation of outreach providers. The result of this work was a set of competencies that outreach providers should be able to access or provide directly and include:

- Assessment and service provision that establishes a trusting relationship capable of addressing the complex and varied needs of individuals living unsheltered.
- Capacity to navigate the homeless housing system and create appropriate referrals/placements.
- Capacity to navigate the behavioral and physical health needs of individuals with a focus on harm reduction strategies.
- Skilled in harm reduction, trauma care, skill based assessments and provider coordination.
- Culturally competent and knowledgeable of unique population needs.
- Data management, documentation and performance/program evaluation.

These standards have been used to inform the development of the Navigation Team, HSD's 2017 Request for Proposals and contractual requirements for outreach providers. The recommendations of the workgroup are included in Appendix 2.

2016 Seattle Homeless Needs Assessment

In addition to service provider engagement, the City conducted a needs assessment of persons living unsheltered to further explore opportunities to improve services.¹⁴ The results of the needs assessment clearly demonstrate areas for improvement. The need for outreach and service providers to recognize the needs for individualized solutions was a dominant theme; participants felt they were seen as 'refusing service' when the service or shelter offer made to them was not one that they felt would be the most effective in addressing their needs.

It also critical to ensure that we have adequate numbers of outreach providers to connect with the vast number of people living unsheltered; only 46% of those living in an unauthorized outdoor location had been contacted at some point by an outreach provider. This is especially important in a landscape where many focus group participants pointed out the challenges of trying to access fragmented and geographically dispersed services with convoluted eligibility processes. Finally, focus group participants identified a desire to have consistent relationships with outreach and case management providers and the need for more people with lived experience of homelessness to be part of the homeless response system.

¹⁴ <http://humaninterests.seattle.gov/2017/03/03/city-of-seattle-2016-homeless-needs-assessment/>

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Taskforce on Unsanctioned Encampment Clean up Protocols

In August 2016, the Mayor convened a community task force to review and make recommendations to improve the City's management of unsanctioned encampments. At about the same time the ACLU and several other organizations proposed legislation that would have provided homeless persons new rights to camp on public property and that would have imposed severe restrictions on the City's efforts to manage and clean-up unsanctioned encampments. In October 2016, when attempts to negotiate a more balanced approach failed and public opinion became highly contentious, the Mayor proposed a comprehensive set of reforms to our management of encampments based on the recommendations of the task force, including:

- Providing better outreach to homeless persons in encampments and on the streets
- Opening new sanctioned encampments and adding new 24/7 indoor shelter capacity
- Creating more compassionate, transparent protocols for cleaning unsanctioned encampments

Emergency Operations Center Convening of Behavioral Health Providers

On February 21, 2017, Mayor Murray activated the Emergency Operations Center (EOC) to accelerate and coordinate the City's response to the homelessness crisis in Seattle. The work at the EOC has been centered around accelerating the work of Pathways Home and implementing the actions outlined in the Bridging the Gap plan to help get individualized services to people living outside, including the launching of the Navigation Team. As such, early in the EOC activation, a group of healthcare providers including substance use disorder services, inpatient and outpatient mental health, mobile medical and clinical outreach met to discuss increased service coordination as a means to increase the impact and efficacy of the Navigation Team. The Navigation team proposed reducing barriers to services in a few critical areas to increase their success with clients in the field:

- Access to a mental health specialist was requested via support for the HOST team.
- Access to Narcan was identified as a critical resource when working in the field.
- Access to same day appointments with med prescribers was requested from Harborview and Sound Mental Health.
- Increased health care services via mobile medical was identified as a possible alternative to in-clinic visits.
- Increased availability or better coordination for access to detox beds on demand for clients who choose in the field to accept.

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Appendix 2: All Home Outreach Continuum Recommendations

OUTREACH CONTINUUM PLANNING WORKGROUP RECOMMENDATIONS



City of Seattle

Edward B. Murray, Mayor

Human Services Department

Catherine Lester, Director

BACKGROUND

The City of Seattle Human Services Department (HSD), All Home and REACH co-facilitated a workgroup during 2016 to review current outreach practices and develop recommendations to create a more defined approach to outreach and case management to people living unsheltered. Outreach has played a significant and important role in *relationship development* and *survival services* to those in need for many years in the City of Seattle and throughout King County. However, historically outreach providers struggle to create the necessary linkages needed to connect those they serve to the housing and other supportive services they need in an immediate fashion. This struggle is part of a systemic challenge resulting in barriers to housing services access as a result of distrust, mistrust and inability to navigate a complex system on the part of people living unsheltered. As well as, lack of resources allocated to outreach providers who are working to connect people living unsheltered with viable and immediate safe alternatives. The role of outreach providers in ending the crisis of homelessness is significant, USICH has published some [lessons learned](#) that highlight much of what is discussed in this report.

It became evident through the development of the Pathway's Home work with [Barb Poppe](#) and [Focus Strategies](#) that persons living unsheltered did not have direct access to the housing and services needed to end their homelessness. Data showed that a range of 23% to 53% of programs are accepting individuals from housed situations. With Coordinated Entry For All and specifically for single adults on the horizon it was critical to begin planning for deeper connections between outreach and housing.

The Outreach Continuum Planning workgroup has met monthly since July 2016 with the objective of **1) assessing and defining what outreach is, 2) development of a standard of practice for all outreach providers, and 3) developing tools for coordination of care particularly to Coordinated Entry for All.**

What follows in this report are clear recommendations provided by members of the workgroup that provide a clear working definition of the purpose of outreach as well as a common standard of care that Providers must adhere to ensure the greatest efficacy in moving those living outside into safer alternatives. However, there is still work to be done by this group in conjunction with All Home and King County to further refine how a By Name List process can support housing navigation services provided by outreach teams and the launch of coordinated entry for single adults anticipated to begin in early 2017.

DEFINITION OF OUTREACH

The Workgroup has developed the following definition: *Coordinated, person centered, and persistent engagement bringing services directly to the people experiencing homelessness who might not seek out services and connect them to permanent housing and necessary supports.*

INVENTORY OF OUTREACH PROGRAMS

King County Department of Community and Human Services (DCHS) conducted a survey of Outreach programs in 2016 and found that 15 programs operate throughout King County. Of those, 7 outreach programs are specifically funded by the City to conduct outreach work. Each of these programs has a target population that they support including individuals with mental illness, individuals living in encampments, young adults living unsheltered, and individuals with significant street presence in the downtown and Capitol Hill areas. Overall, HSD funds roughly 22 outreach positions to operate throughout the City. Considering the vast area these staff must cover and the volume of people they must attempt to engage demand continues to outpace

capacity. At this rate, each outreach provider would have to engage regularly with over 130 people (using the One Night Count numbers of unsheltered) to coordinate access to services.

ORGANIZATION	FTE'S	TARGET POPULATION	GEOGRAPHIC AREA
REACH	8	Adults in encampments	Throughout the City
DESC-HOST	2	Adults with mental illness	Primarily Downtown
YouthCare	4	Youth/Young Adults	Downtown/U-district/Capitol Hill
Kids Plus	2	Families	Throughout the City
Metropolitan Improvement District	3	Adults	Downtown/Capitol Hill
Road to Housing	3	Adults in vehicles	Throughout the City

PROPOSED OUTREACH STANDARDS

The role of outreach should primarily be directed towards ending a person's homelessness. As All Home, the City of Seattle HSD, and King County DCHS work towards systems transformation efforts it is important to identify opportunities for improved service delivery and enhanced systems coordination. While outreach providers operating now within King County utilize many of the following practices, increasing skills and standardizing tools will further enhance the ability of outreach providers to move people living unsheltered with more efficacy.

Assessment and Service Provision Competency

- An outreach provider should be able to establish a trusting relationship with the individual experiencing homelessness.
- An outreach provider should be qualified to conduct and document a reliable assessment of needs of individuals experiencing homelessness which includes, but is not limited to, needs related to: behavioral health, including mental illness or other mental or emotional limitations; substance use and treatment status, and harm reduction measures; physical health, including need for assessment and care by medical professionals; disability; housing; employment; household composition considerations; and geographic considerations.
- An agency deploying outreach providers should have the capacity to train and deploy outreach-based staff such that it can engage clients with intensive and ongoing support, when needed, in order to ensure successful linkages to community services that address the needs that the provider has assessed. Thus a provider's operating model must afford its staff the flexibility to accommodate a broad spectrum of client capability for self-advocacy and navigating the complex processes that often present barriers to sustainable linkages to services.
- Agencies should devote staff time and other resources to ascertaining when a simple referral to services has been insufficient to effectuate a successful linkage to an agency that provides shelter and/or housing; outpatient mental health, substance use, or physical health care services; and/or more intensive inpatient health services such as a hospital or respite care facility. Further, it must also devote staff time and other resources to following up in an intensive fashion to walk with the client through the linkage process, as required.
- An outreach provider should be prepared to attempt to secure shelter/housing services based on what the client determines they want or need.

Housing System Competency

Several comprehensive systems exist that address the critical needs of individuals experiencing homelessness in Seattle. Providers should support people experiencing homelessness to access housing, and to provide effective means to support people to resolve their homeless crisis. A Provider should go beyond simply referring clients to other agencies and should have extensive knowledge and internal processes for assisting clients to access resources.

- Understanding of Coordinated Entry for All (CEA) a federally-mandated King County-wide system that establishes a coordinated, transparent, and equitable system for connecting individuals and families experiencing homelessness to housing interventions such as emergency shelter, rapid rehousing, and permanent housing. Outreach providers participate in CEA by providing housing assessor and navigation services.
- All Housing Assessors are required to complete CEA Housing Assessor Training and once trained, will complete HMIS intake and CEA housing assessment with individuals in need of housing. When possible, the Housing Assessor will connect the individual with a Housing Navigator. Housing Assessors' responsibilities include, but are not limited to the following:
 - Operating as the initial contact for the CEA and communicating eligibility for CEA
 - Exploring resources other than homeless housing programs, such as diversion or employment/education
 - Conducting Housing Assessments
 - Communication with assessed households about next steps and types of resources the household may be referred to
 - Participation in By Name List processes as needed
 - Notifying households about other services/resources, programs they may be eligible for outside of CEA, including housing through BHRD, Section 8, emergency housing, and other community-based resources (employment services, behavioral health, domestic violence services, etc.)
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 - Participation in By Name List processes as needed
 - Notifying households about other services/resources, programs they may be eligible for outside of CEA, including housing through BHRD, Section 8, emergency housing, and other community-based resources (employment services, behavioral health, domestic violence services, etc.)

- Knowledge of emergency shelter programs and housing resources that are not part of CEA – section 8 vouchers, affordable housing resources, motel vouchers, etc...

Behavioral and Physical Health Competency

- When an outreach provider assesses an individual experiencing homelessness as needing access to behavioral and/or physical health services, they should be able to directly refer the person to a licensed behavioral health and/or physical health care services.
 - An outreach provider should be able to verify such services are provided to the individual experiencing homelessness either where the individual resides or at the behavioral health provider's location.
 - When individuals have an existing provider, outreach teams should be able to coordinate care.
- An outreach provider should be trained in harm reduction practices including: safe needle exchange and disposal; carrying and using Narcan and training other individuals to carry and use Narcan; informing individuals of their rights related to drug overdose (e.g. Good Samaritan Law); drug treatment options, including Medication Assisted Treatment (Buprenorphine and Methadone); and focusing on minimizing physical, social and legal harms.
- An outreach provider should execute harm reduction practices where needed and in accordance with the standards set forth by the National Health Care of the Homeless Council.

Training and Safety Competency

- An outreach provider should be trained in best practices of outreach and engagement, including: Engaging in Person Centered Approach, Trauma Informed Care, Motivational Interviewing, Skill Based assessments, and Stages of change/engagement.
- An outreach provider should practice adequate safety and backup for outreach workers in the field always by perform duties in pairs.
- An outreach provider should coordinate with Law Enforcement, First Responders, Designated Mental Health Professional (DMHP), and WSDOT as needed to ensure safety of persons experiencing homelessness as well as outreach providers.
- An outreach provider should be trained in self-care practices related to secondary trauma and burn out which are very real risks associated with this practice.

Cultural Competency

- A provider should have a policy for how they will work with the following groups and any other protected class in compliance with City non-discrimination laws and racial equity principles:
 - Those affected by Domestic Violence
 - People living with physical or intellectual disabilities

- LGBTQ Community
- Distinct racial and ethnic communities, including Immigrants and Refugees
- Youth who have been sexually exploited
- Veterans

Data Management and Documentation Competency

Data management is a critical component of this work, particularly as it relates to documentation of homeless status required by housing providers and federal funding requirements for targeted housing programs. *Regular and consistent documentation of outreach efforts decreases the likelihood of overlooking individuals experiencing homelessness who are most in need, as well as the duplication of services. A systematic approach also allows greater participation from other partners and systems in the community and faster access to a wider variety of targeted and mainstream programs - USICH.* Confidentiality is required when providing direct services to individuals particularly as information pertaining to health status and personally identifying information (PPI). Compliance with federal and state regulations is required in the management of PPI is required for outreach providers.

- An outreach provider shall protect the confidentiality of individuals experiencing homelessness and comply with all relevant laws to such confidentiality. This includes Mandated Reporting, Domestic Violence laws, Run Away laws and any other contracted requirements.
- An outreach provider must collect and enter information in Homeless Management Information System (HMIS) to satisfy contractual reporting requirements in adherence to HMIS performance standards.

Performance Measures

Outreach is a critical component of the network of services designed to support persons experiencing homelessness. It is important to ensure that outreach efforts are measured to ensure that people living unsheltered have access to the housing and services that they need to end their crisis of homelessness.

- Providers must measure and report rates of success in the System Wide Performance Targets established by All Home:
 - Reduction in length of time homeless and increase rates of exits to permanent housing evidenced by: Navigating people living unsheltered into shelter or housing by completing or confirming the completion of a Coordinated Entry for All assessment.
 - Reduction in returns to homelessness evidenced by: linking people living unsheltered to outpatient physical, mental health, substance use treatment, e.g., confirmed attendance at a clinical visit
 - Reduction the number of unsheltered as evidenced by: documentation of homeless status for all clients served.
- Providers may also be required, depending on specific outreach program objectives, to measure specific instances of:
 - Syringe distribution
 - Narcan training and distribution
 - Referrals to medically assisted treatment (MAT) and other substance use treatment
 - Placement in employment
 - Obtaining IDs

- Securing financial assistance, such as public benefits
- Client-centered goal setting related to physical or behavioral health.

TOOLS FOR COORDINATION OF CARE

Ongoing work is needed to develop and maintain coordination between other systems of care and outreach providers. HMIS and CEA are the first two primary tools available for the coordination of services with the homeless housing and services arena. The outreach workgroup will continue to explore opportunities and tools to increase coordination with non-homeless specific providers as Phase II of this work during 2017.

To support providers to develop outreach programs that meet the competencies outlined above and achieve the performance measures additional work is required by the Outreach Continuum Workgroup to ensure seamless connections to and coordination with various systems including:

Law enforcement	Healthcare for the Homeless	WSDOT
Needle Exchange	First Responders	HMIS
CEA	Housing Navigation	Park Rangers
DMHP's	Business Districts	Neighborhood councils
Jails	Hospitals	Courts

NEXT STEPS

Systems transformation planning is underway with All Home, King County DCHS, United Way of King County and the City of Seattle Human Services Department to align investments and performance commitments towards the goal of moving people rapidly into housing. The recommendations from the Outreach Continuum planning group as well as other engagement efforts will help to inform and shape future funding opportunities. HSD is planning now for the release of a competitive funding process during 2017 which will include funding for outreach programs. The awards made in 2017 will be contracted in 2018. While Phase I of this effort focused on competencies required for outreach providers, Phase II will focus on coordination of resources and services that further support ending the crisis of homelessness for people in our community.

Phase II components

- Mobile access to HMIS and CEA
- Communication tools that work across various systems not linked to HMIS
- Refinement of system wide performance targets

OUTREACH CONTINUUM PLANNING WORKGROUP MEMBERS

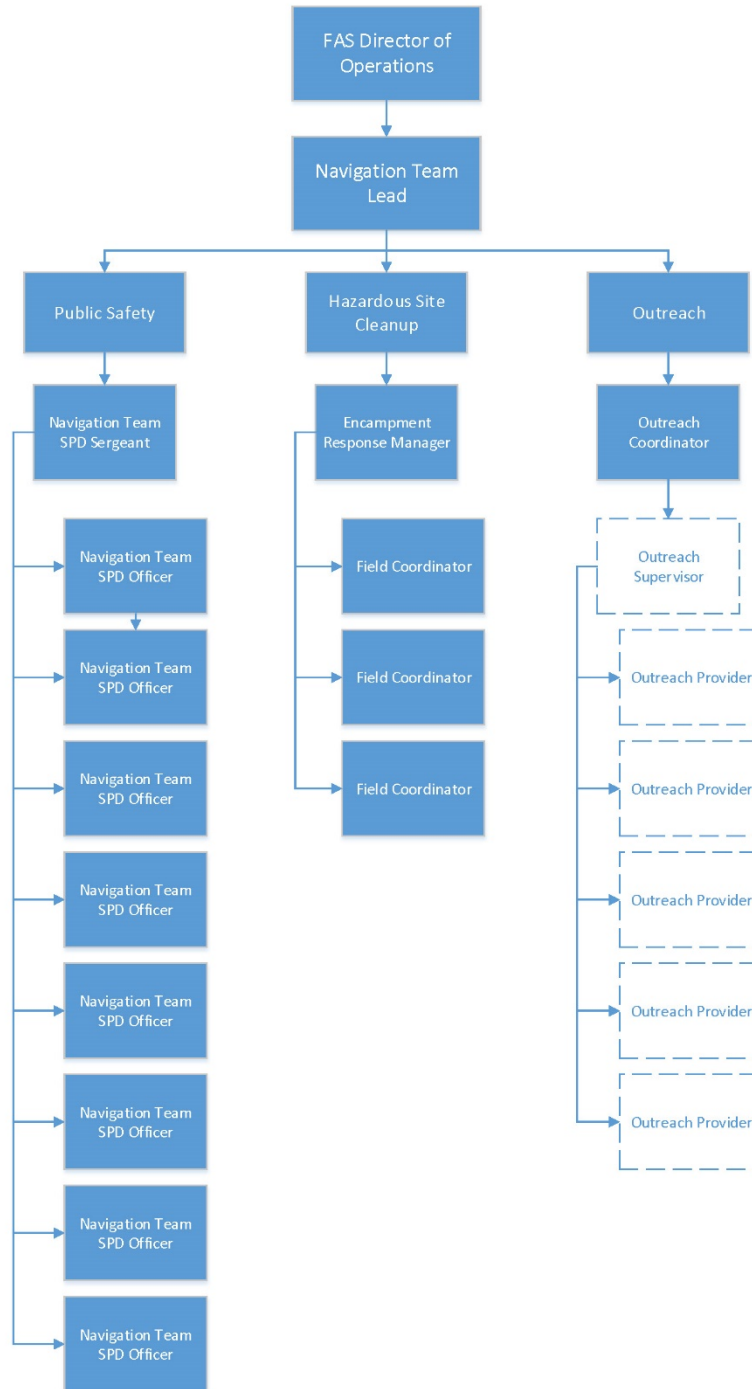
Thank you to the following people for your invaluable insight and commitment to this effort.

Navigation Team Theory of Change

Appendix 3: Navigation Team Organizational Structure

Navigation Team Organizational Structure

August 8, 2017



Navigation Team Theory of Change

Appendix 4: Navigation Team Officer Training

All Seattle Police Officers are required to attend 80 hours of mandatory training each year which incorporates de-escalation, crisis intervention, and harm reduction as standards. Navigation Team Officers have all completed the state certification for Crisis Intervention Training (40 hours). In addition, Sargent Erik Zerr, the lead Navigation Team Officer, is an instructor for several courses relevant to the Navigation Team work, specifically regarding crisis intervention, de-escalation and racial bias. Part of Sargent Zerr's role is to work with the officers to ensure these skills are applied in the field.

The list below includes the training that the Navigation Team Officers have accrued over the past five years:

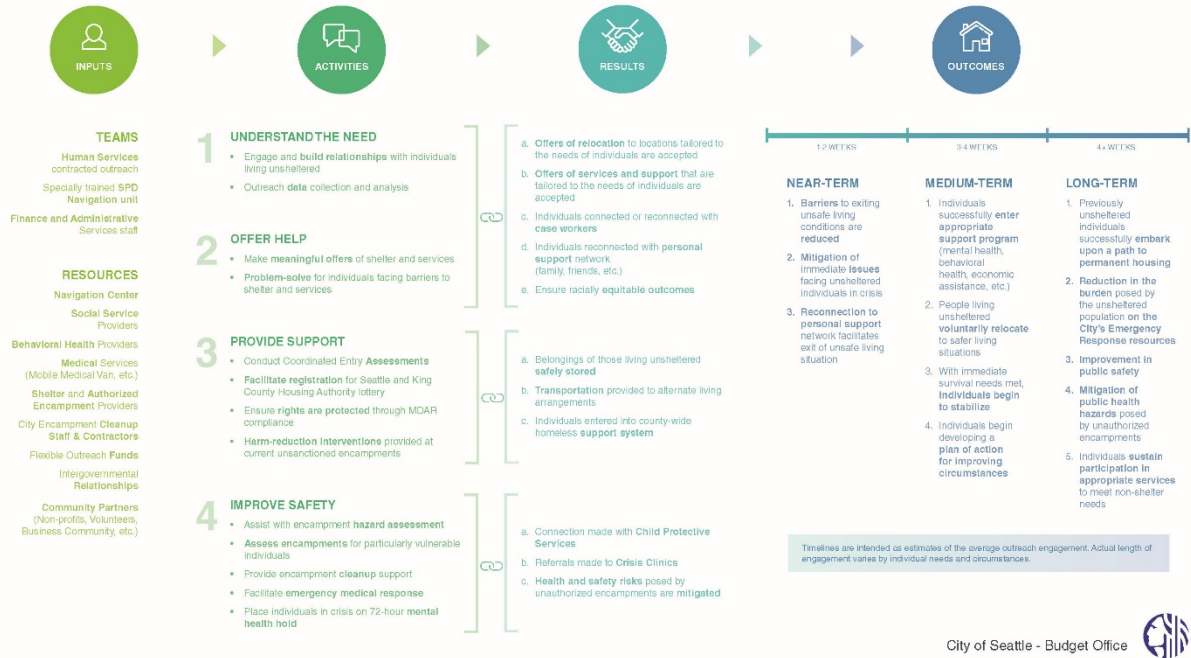
- 40-hour Crisis Intervention Training -- State Certification
- Advanced Crisis Intervention Training – Sargent Zerr, instructor
- Crisis Intervention Training – Sargent Zerr, instructor
- De-escalation and Contact & Cover -- Sargent Zerr, instructor
- Race: The Power of an Illusion -- Sargent Zerr, instructor
- Interacting with Transgender Individuals
- Post-Traumatic Stress Disorder Anti-Harassment and Anti-Discrimination
- Mental Health Contact Report
- Tactical De-Escalation/Firearms Individual Skills
- Perspectives on Profiling
- Family Intervention & Restorative Services
- Threat Assessment and Prisoner Control Recertification
- Less Lethal certification
- Bias-Based Complaint
- Bias Free Policing
- Biased Free Policing and Voluntary Contacts and Terry Stops
- Authorized Force
- Use of Force Core Principles
- Trauma Informed Care
- South Seattle Community College --- Life Skills to Work

Navigation Team Theory of Change

Appendix 5: Navigation Team Logic Model

NAVIGATION TEAM LOGIC MODEL

Our Goal: The City's outreach to unsheltered individuals is efficient and effective in moving people out of hazardous conditions and onto a path toward health, stability, and permanent housing.



Navigation Team Theory of Change

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APPENDIX D

Seattle Office of City Auditor Mission, Background, and Quality

Assurance

Our Mission:

To help the City of Seattle achieve honest, efficient management and full accountability throughout City government. We serve the public interest by providing the City Council, Mayor and City department heads with accurate information, unbiased analysis, and objective recommendations on how best to use public resources in support of the well-being of Seattle residents.

Background:

Seattle voters established our office by a 1991 amendment to the City Charter. The office is an independent department within the legislative branch of City government. The City Auditor reports to the City Council, and has a four-year term to ensure her/his independence in deciding what work the office should perform and reporting the results of this work. The Office of City Auditor conducts performance audits and non-audit projects covering City of Seattle programs, departments, grants, and contracts. The City Auditor's goal is to ensure that the City of Seattle is run as effectively, efficiently, and equitably as possible in compliance with applicable laws and regulations.

How We Ensure Quality:

The office's work is performed in accordance with the Government Auditing Standards issued by the Comptroller General of the United States. These standards provide guidelines for audit planning, fieldwork, quality control systems, staff training, and reporting of results. In addition, the standards require that external auditors periodically review our office's policies, procedures, and activities to ensure that we adhere to these professional standards.

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