



Poverty and Homelessness Board

October 16, 2014

12:00 p.m. – 1:30 p.m.

Lane County Youth Services Serbu Campus

Carmichael Conference Room

2727 Martin Luther King Jr. Blvd.

Eugene, OR

AGENDA

Time	Topic
11:45 a.m.	Arrival and Lunch
12:00 p.m.	Welcome and Introductions <ul style="list-style-type: none">• Preview today's agenda• Self-introduce with your name and organizational affiliation
12:10	Public Comment <p>Individuals who plan to offer comment must sign in with name and contact information prior to beginning of the meeting</p>
12:20	Follow-Up from Previous Meeting <p>Approve Minutes 8/27/14 and 9/18/14 Meetings Voting Policy Continuum of Care Grant Priorities Update PHB Priorities Future TED Talks Committee schedules <i>Information/ Discussion</i></p>
12:40	Focus Topic <p>Update re: Royal Ave Program Susan Ban, Bruce Abel <i>Information/ Discussion</i></p>
1:00	Winter Strategies <i>Information/ Discussion</i>
1:15	Wrap up <p>Summarize board decisions, assignments, and next steps</p>
1:25	Planning the November Agenda What new business should the PHB consider at its November 20 meeting?
1:30 p.m.	Adjourn



Memorandum

TO: Poverty and Homelessness Board

FROM: Pearl Wolfe, Human Services Supervisor

SUBJECT: Prioritization of New HUD Continuum of Care Grant Projects

DATE: October 16, 2014

The 2014 HUD Continuum of Care Grant application was released with an October 30, 2014 deadline for submission. Since it is a web based grant, earlier submission is recommended by HUD; submission target is October 23, 2014. This is a second year application with 12 renewal projects and one Planning Grant. In addition to the renewals, the application allows for the opportunity to apply for two new projects.

- With one of the new projects, we may apply for a permanent supportive housing project that serves chronically homeless persons based on a percentage of the grant's annual renewal amount (\$2,725,549). As HUD grant co-applicants, HACSA and St. Vincent DePaul presented a "new Permanent Housing Bonus Project," Willow Permanent Housing Project.

Willow Permanent Housing Project will provide services to chronically homeless individuals and families. The households may present with one or more of the following disabilities: a serious mental illness, physical disability or chronic health condition, developmental disabilities, substance abuse issues or HIV/AIDS. Housing is subsidized and supported with a program of intensive case management provided by an interdisciplinary team of case managers who have multiple specialties. Case managers assist with planning, coordination, resource acquisition, skill development and emotional support. Program participants will reside in scattered site permanent supported affordable housing through a housing first approach. *Willow Permanent Housing Project will serve up to 27 households with adults only and 6 households with children at any given point in time.*

- We are required by HUD to reduce our renewals by 2% and through reallocation; we could submit a rapid rehousing or permanent supportive housing for chronically homeless individuals and families. Unlike the \$406,055 project, the \$88,580 project is not new funding but is a reallocation project reductions that we are required to take from existing grant projects.

Camas 2 Permanent Housing Project serves 7 households without children and one household with children where there is a history of chronic homelessness and a diagnosis of serious mental illness or a pattern of acute medical care needs. They will reside in scattered site permanent supported affordable housing with a housing first approach. Participants are provided permanent housing in the Eugene/Springfield/Lane County area. Households receive intensive case management to help obtain the skills and income needed for self-sufficiency, self-determination and housing stability. *Camas 2 Permanent Housing Project will serve up to 6 households with adults only and one household with children at any given point in time.*

The Steering Committee was delegated authority to approve the ranking from the previous year and to approve the design and ranking of the new projects. We have provided summaries of all the projects submitted along with a ranking document at the October board meeting as requested.

HUD 2014 GRANT APPLICATION PROJECT RANKING 9-29-14

Project Name	Type	Homeless Population	# of HHs at Point in Time	Outcomes	Grant Amount	RANK	
HMIS	HMIS	N/A	N/A	99.7%	\$98,185	1	Tier 1
LANE COUNTY PLANNING	Planning	N/A	N/A	N/A	\$34,069	2	
CONNECTIONS	TH	Homeless Households With Children	24	93.0%	\$226,452	3	
Vet LIFT	PH	Chronically Homeless Adults- Veterans With Dual Diagnosis of Mental Illness With Substance Abuse	15	96.3%	\$135,409	4	
SHELTER PLUS CARE	PH	Chronically Homeless Adults and Homeless Households With/Without Children With Developmental Disabilities	48	94.7%	\$437,407	5	
LIFT	PH	Chronically Homeless Adults & Homeless Households with Children With Co-occurring Mental Illness and Addictions	18	92.2%	\$258,512	6	
SHANKLE	PH	Chronically Homeless Adults with a severe and persistent mental illness	27	87.5%	\$537,958	7	
EMERALD	PH	Homeless Households With/Without Children with Developmental Disabilities	15	92.5%	\$181,238	8	
Vet LIFT 5	PH	Chronically Homeless Adults- Female Veterans With Dual Diagnosis of Mental Illness With Substance Abuse	3	85.6%	\$43,553	9	
MCKENZIE	TH	Homeless Households With/Without Children & Homeless Youth	42	86.4%	\$521,325	10	
CASCADES RAPID RE-HOUSING	RRH	Homeless Adults who are medically fragile	9	N/A	\$92,465	11	
SVDP First Place Family Project	PH	Chronically Homeless Families	3	N/A	\$35,218	12	
Camas Permanent Housing Project	PH	Chronically Homeless Households with Children and/or Adults with mental health or medical needs	6	N/A	\$69,247	13	
CAMAS 2 Permanent Housing Project	PH	Chronically Homeless Households with Children and/or Adults with mental health or medical needs	8	N/A	\$88,580	14	Tier 2
WILLOW Permanent Housing Project	PH	Chronically Homeless Households with Children and/or Adults with mental illness, physical disability or chronic health condition, developmental disabilities, substance abuse issues or HIV/AIDS	33	N/A	\$406,055	999	bonus project

**Lane County Oregon
Fiscal Year 2014 Grant Application Projects
HUD Continuum of Care Program**

The projects summarized below are included in the 2014 HUD Continuum of Care application. They provide critical services for homeless families and individuals to address the housing and services gap.

The Lane County Continuum of Care Grant renewal projects include:

- 1. Camas Permanent Housing Project**
Camas Permanent Housing Project serves 5 households without children and one household with children where there is a history of chronic homelessness and a diagnosis of serious mental illness or a pattern of acute medical care needs. They will reside in scattered site permanent supported affordable housing through a housing first approach. Participants are provided permanent housing in the Eugene/Springfield/Lane County area. Households receive intensive case management to help clients obtain the skills and income needed for self-sufficiency, self-determination and housing stability. *Camas Permanent Housing Project will serve up to 7 households with adults only and one household with children at any given point in time.*
- 2. Cascades Rapid Re-Housing Project**
Cascades is a rapid re-housing program which will provide rapid rehousing services to single adults who are homeless and medically fragile. Eligible singles will receive case management services to stabilize their situation and stabilize their housing. Case managers identify and build their plan of action with participants including increasing education and training, obtaining more gainful employment, building positive relationships with landlords and neighbors, building savings, building communication skills and accessing community resources. A critical component of this program will be to connect these individuals with health care providers who will help them manage and resolve their health care needs and access medications. *Cascades will serve 9 households with adults only at any given point in time.*
- 3. Emerald Options**
Emerald Options is a permanent housing project providing long-term, community based housing and supportive services to homeless persons with developmental disabilities including disabled individuals and families. *Emerald Options serves 10 households with adults only and 5 households with children at any given point in time. CoC Planning Project*
- 4. Lane County Planning Project**
Lane County Human Services Commission is responsible for the administration of Continuum of Care (CoC) planning. The CoC is responsible for developing a plan that coordinates housing and service system that meets the needs of homeless individuals and families within its geographic area. The plan must be developed using a comprehensive community-based or region-based approach to ending homelessness. The CoC's plan addresses the specific needs of all homeless subpopulations, including, but not limited to persons with substance abuse issues; persons with HIV/AIDS; veterans and their families; the chronically homeless; families with children; unaccompanied youth; persons with serious mental illness; and victims of domestic violence, sexual assault, and stalking.

5. **LANE HMIS**

Lane County Human Services Commission will be responsible for the overall administration of LANE Homeless Management Information System (LANE HMIS) project. Lane County Continuum of Care has participated in State of Oregon's HMIS since April 2005. The LANE HMIS uses ServicePoint HMIS data for budgetary decision-making, grant applications, program performance measurement, and to illustrate the conditions of poverty in Lane County. Lane County-Human Services Division provides agency-level HMIS reports to participating HMIS agencies for similar uses.

6. **McKenzie Rapid Rehousing Project**

McKenzie Rapid Rehousing is a rapid rehousing project which facilitates the movement of homeless individuals and families to permanent housing. Homeless individuals and families may participate in McKenzie Rapid Rehousing up to 24 months and receive supportive services that enable them to live more independently. *McKenzie Rapid Rehousing serves 9 households with adults only and 33 households with children at any given point in time.*

7. **Safe Haven Shankle**

Safe Haven Shankle is a permanent housing project that serves hard-to-reach, chronically homeless persons with a severe and persistent mental illness. Shankle facility consists of 16-bed permanent beds in 8 residential units and also offers 11 scattered site beds in the community. On-site services include basic needs, food, shelter and case management. Individuals successfully move to permanent housing by getting assistance with mental health recovery and connections to the supports they need to create resiliency, self sufficiency and stability. *Safe Haven Shankle serves 27 households with adults only at any given point in time.*

The St. Vincent de Paul (SVDP) Continuum of Care grant renewal projects include:

8. **Connections**

Connections provides transitional housing for homeless families with children. Housing is provided in SVDP owned and managed affordable housing complexes scattered throughout Eugene and Springfield. All complexes have on-site managers, and Resident Services Coordinators provide an additional array of youth activities, homework clubs and tenant education activities. The project is designed to help clients acquire the means move to self-sufficiency. *Connections serves 24 households with children at any given point in time.*

9. **First Place Families Project**

SVDP's First Place Families Project will provide services to promote self-sufficiency for chronically homeless families. The adult head of household must have a diagnosable disability. Participants are provided permanent housing in the Eugene/Springfield/Lane County area. They receive intensive case management to help clients obtain the skills and income needed for self-sufficiency, self-determination and housing stability. *First Place Families Project will serve 3 households with children at any given point in time.*

10. **LIFT (Living Independently Following Treatment)**

LIFT is an inter-agency collaborative project designed to fill an unmet need for services to promote self-sufficiency of chronically homeless individuals and families with co-occurring mental illness and addictions. Participants are provided permanent housing in

St. Vincent de Paul-owned affordable housing complexes in the Eugene/Springfield area. Households receive housing, education, and intensive case management to help clients obtain the skills and income needed for self-sufficiency, self-determination and housing stability. *LIFT serves 6 households with adults only and 12 households with children at any given point in time.*

11. Vet LIFT

The Vet LIFT is a permanent housing project serving chronically homeless veterans with dual diagnoses of a mental disorder with substance abuse. The project addresses the need for permanent housing for homeless individuals with disabilities and their need of skills and resources to obtain and maintain self-sufficiency. Participants are housed in single bedroom apartments and receive an array of supportive services to address the multiple barriers to stability. *Vet LIFT serves 15 households with adults only at any given point in time.*

12. Vet LIFT 5 is a permanent housing project serving chronically homeless women veterans and addresses and addresses their need for skills and resources to obtain and maintain self-sufficiency. *Vet LIFT and serves 3 households with adults only at any given point in time.*

The Housing and Community Services Agency (HACSA) Continuum of Care grant renewal project includes:

13. Shelter Plus Care

HACSA's Shelter Plus Care (S+C) is a tenant-based rental assistance program which provides housing to families and chronically homeless individuals with a mental illness. The majority of the participants have co-occurring substance abuse issues. The goal of the program is to promote clients' independence and help them acquire permanent housing. S+C offers 27 one bedroom units, 17 two bedroom units and 4 three bedroom units. *Shelter Plus Care serves 45 households with adults only and 3 households with children at any given point in time.*

In addition to renewal grant projects, HUD is also allowing for new projects to be included in the 2014 HUD Continuum of Care application. The new projects include:

14. Camas 2 Permanent Housing Project

Camas Permanent Housing Project serves 7 households without children and one household with children where there is a history of chronic homelessness and a diagnosis of serious mental illness or a pattern of acute medical care needs. They will reside in scattered site permanent supported affordable housing through a housing first approach. Participants are provided permanent housing in the Eugene/Springfield/Lane County area. Households receive intensive case management to help obtain the skills and income needed for self-sufficiency, self-determination and housing stability. *Camas 2 Permanent Housing Project will serve up to 6 households with adults only and one household with children at any given point in time.*

15. Willow Permanent Housing Project

Willow Permanent Housing Project will provide services to chronically homeless individuals and families. The households may present with one or more of the following disabilities: a serious mental illness, physical disability or chronic health condition, developmental disabilities, substance abuse issues or HIV/AIDS. Housing is subsidized and supported with a program of intensive case management provided by an

interdisciplinary team of case managers who have multiple specialties. Case managers assist with planning, coordination, resource acquisition, skill development and emotional support. Program participants will reside in scattered site permanent supported affordable housing through a housing first approach. Willow Permanent Housing Project *will serve up to 26 households with adults only and 7 households with children at any given point in time.*

**U.S. Department of Housing & Urban Development
FY 2014 Continuum of Care Grant Application
OR-500 Lane County, Oregon Project List**

PROJECT NAME	BEGIN DATE	END DATE	AMOUNT
Lane County Camas Permanent Housing Project	01/01/16	12/31/16	\$69,247
Lane County Cascades Rapid Re-housing	01/01/16	12/31/16	\$92,465
Lane County/Emerald Options	07/01/15	06/30/16	\$181,238
Lane County/LANE HMIS	07/01/15	06/30/16	\$98,185
Lane County/McKenzie Rapid Rehousing	07/01/15	06/30/16	\$521,325
Lane County/Safe Haven Shankle	01/01/15	12/31/15	\$537,958
Lane County Contracts TOTAL			\$1,534,487
SVDP/Connections	06/01/15	05/31/16	\$226,452
SVDP/ First Place Families Project	01/01/16	12/31/16	\$35,218
SVDP/LIFT	07/01/15	06/30/16	\$258,512
SVDP/Vet LIFT	08/01/15	07/31/16	\$135,409
SVDP/Vet LIFT 5	10/01/15	09/30/16	\$43,553
St Vincent de Paul TOTAL			\$699,144
HACSA/Shelter Plus Care	11/01/15	10/31/16	\$437,407
HACSA TOTAL			\$437,407
Grand TOTAL RENEWALS			\$2,671,038
Lane County Planning Grant	01/01/16	12/31/16	\$34,069
Camas 2 Permanent Housing Project	01/01/16	12/31/16	\$88,580
Willow Permanent Housing Project	11/01/15	10/31/16	\$406,055
GRANT TOTAL with PLANNING GRANT and new projects			\$3,165,673

- St. Vincent DePaul Society of Lane County (SVDP)
- Housing and Community Services Agency of Lane County (HACSA)



Questions about Crisis Respite:

- *Who was served at Royal Crisis Respite?* Individuals experiencing a psychiatric crisis and needing a safe place to stabilize. The program served as a diversion from the Emergency Room and offered post-acute transitions for those leaving the acute psychiatric facility (Johnson Unit).
 - o Majority (85%) were homeless, with little or no income,
 - o Axis 1 diagnosis - psychiatric disability, often PTSD with psychotic features
 - o Experiencing a severe mental health crisis – suicidal, disorganized, symptomatic and may be a danger to self or others.
 - o The psychiatric crisis is triggered by trauma & exacerbated by homelessness.
- *What were the services at Royal Crisis Respite?* Twenty-four seven coverage, room and board, crisis intervention and stabilization for a seven to ten day period of stabilization.
- *What happened?* The loss of state/county general funds for indigent services left an unsustainable hole in the crisis respite budget – 30% of the program's revenue. After a meeting with Trillium leadership that confirmed the county/Trillium decision that crisis respite at Royal was not in their future, ShelterCare chose to close the program. Without county/Trillium support, ShelterCare could not sustain the program.
- *Where do people go now?* They are served by the emergency room, or the jail, or not at all. All of these changes are challenging and tie back to the end of indigent (general fund) grants from the state to the county, and from the county to sub-contractors like ShelterCare.
- The mental health crisis respite program closed on September 15, 2014. The facility is de-commissioned for the present.



What's next for Royal Avenue Facility?

ShelterCare will move the **Homeless Medical Respite** program to Royal Avenue Program Facility later this fall. Homeless Medical Respite currently uses units at Family Housing Program.

- *What is Homeless Medical Respite?* Homeless Medical Respite Program is a partnership between ShelterCare, PeaceHealth and Trillium. The program provides housing and services to individuals who are homeless and recently discharged from the hospital after an acute medical episode. The 30 day post-hospital respite allows individuals to meet their after-care needs, promote healing and create sustainable connections to community resources, medical providers and housing.
- *What is the history of Homeless Medical Respite?* The program is modeled after similar programs in Portland. After several years of planning, the first referral to HMR was in October of 2013. The program began with four designated units and has now grown to offer 12 units at a time. Thirty-nine individuals have been served to date and 31 of those (~80%) have transitioned to safe housing.
 - An analysis of the first 14 patients after eight months of operation suggested that the program saved hospital costs of \$281,000 as measured in reduced length of stay and reduction of re-hospitalizations.
- *Who does Homeless Medical Respite serve?* All HMR participants are homeless, often for many years. Typical medical diagnoses include untreated type 2 Diabetes, amputation of an extremity (toe, leg or hand), cellulitis infection, oxygen machine dependence, heart failure or congestive heart failure, liver failure or liver disease.
- *Why move the program?* The Royal Avenue Program offers several amenities not currently available to the HMR program at Family Housing Program site:
 1. units at RAP are ramped and accessible – those at Family are not and the cost of installing ramps is prohibitive
 2. the on-site kitchen makes meal service more efficient – at Family meals are transported in from other facilities
 3. there is room for expansion at RAP – up to 19, average of 15
 4. the units vacated at Family become permanent supported housing for HMR graduates through utilization of housing grants (Cascades, Shelter Plus Care)
 5. the shared unit layout at Royal is best suited for a short-term program such as crisis respite or homeless medical respite (30-60 days).

MEMORANDUM

TO: Poverty and Homelessness Board

FROM: Steven Manela, Human Services Division Manager

SUBJECT: Winter Response Services for People who are Homeless

Background:

Our Winter Response to assist people who are homeless is through expanding the number of resources available during the winter months. The goal of the winter shelter is to enhance the year round system of housing and services to avert hardship of homeless persons, which may be caused by winter conditions. Through funding from the Cities of Eugene, Springfield and Lane County, state, federal and private foundation funds the County contracts with St. Vincent DePaul of Lane County to provide winter services for singles and families in the Eugene-Springfield metropolitan area. This year with a grant from the Meyer Memorial Trust, we are proposing to provide additional winter warming shelter services for the rural areas of Lane County, through our contracts with Community Sharing and Siuslaw Outreach Service and enhance the metropolitan capacity for families through our contract with St. Vincent DePaul. We are recommending that the Poverty and Homelessness Board hold a special meeting in the next 30 days to discuss a community-wide Winter Response Service Plan and get solicit input and feedback from community members and service providers on how it is working and suggestions for improvements.

Winter Response Services increases service capacity and available resources. These sites would be available in addition to regular homeless shelters and supported housing programs located throughout the County, allowing more people to get out of the cold. The expansion of services and shelter in the winter months is based on needs and available resources and begins on November 1st and ends on March 31st each year. The winter shelter services model provides rapid rehousing rental assistance, placement services, day access center services, and nighttime shelter beds. The rapid re-housing placement component is offered with the goal of moving homeless people from shelter into more permanent housing within 30 days, minimizing shelter stays.

Families

For families, the Interfaith Night Shelter Program provides a clean, safe, and warm facility at night and a daytime services center during winter for homeless people. The program will serve up to 30 persons at any given time. Congregations throughout the Eugene-Springfield provide space, meals, and volunteers. Bedding is provided, and professional staffs supervise the night shelter and day access center 24 hours a day, seven days a week.

The Interfaith Night Shelter is a consortium of more than 30 faith communities offering night shelter, food, recreational activities, and comfort to as many as 10 families per night, throughout the school year. Congregational hosts sign up for one to two weeks each year. More than 1,500 volunteers make this outreach possible!

Each family is required to work on a weekly basis with First Place's Night Shelter Case Manager in making and following an Exit Plan designed to get them back on their feet and again functioning as a contributing member of the community.

Singles and Couples

For singles and couples without children, the Egan Warming Center was started by a coalition of community members representing service providers, nonprofits, faith and social activist communities and local governments that came together in 2008 to ensure that homeless people would have shelter during extreme cold weather. It was named in honor of Major Thomas Egan, a Eugene resident who froze to death during a cold spell in 2008.

Warming centers open when temperatures drop below 30 degrees Fahrenheit. Local faith communities' house guests overnight and people are shuttled to day centers the following morning. The program has one part-time professional staff person, but all other services are provided by volunteers.

Proposed Service Enhancements

With the Meyer Memorial Trust grant we are proposing to make available motel vouchers to homeless families in rural Lane County during inclement weather through our Community Service Centers under contract with Community Sharing in South Lane County and Siuslaw Outreach Services in West Lane County. In the Eugene-Springfield Metropolitan area we will add funding to our Family Homeless Access Contract with St. Vincent DePaul and build in an overflow capacity to house families during inclement weather at the Family Service Center on mats or cots and potentially add motel vouchers as needed.

We look forward to discussing this Winter Response Plan in more detail with the October Poverty and Homeless Board and the community in the next few weeks.

PHB Process/Bylaws Recommendations

Overarching principles:

- Public transparency
- Clarity, consistency and fairness of process
- Staying in accordance with Oregon's Open Public Meetings Law, the Lane Manual, and Roberts Rules of Order

E-voting

Though convenient, e-voting can be perceived as a means to circumvent public comment and participation and should therefore be used sparingly and only under conditions specifically outlined in the bylaws.

Recommendation:

Amend the PHB bylaws to detail the process and circumstances whereby e-voting is allowed. The process should address the means to put forward motions, debate and vote. It shall also address documenting the e-vote and making records/minutes available to the public. The bylaws should also address the limited circumstances in which an e-vote is allowed, such as an emergency or extremely short timeline for a decision to be made.

Gathering input from non-voting PHB and committee members

It is important to gather input from non-voting PHB members and committee members, but equally important to maintain process clarity in public record (minutes) and for the public attending the meeting regarding voting.

Recommendation:

Maintain clarity about who voting and non-voting members of the PHB and PHB committees are. Gather input from non-voting members via discussion and not via any process that could be confused by the public as an official vote, such as hand raising or a verbal aye/no.

Adding non-PHB members to PHB committees

Non-PHB members with expertise in committee focus areas can be an asset to the PHB mission. A clear and fair process should be in place to nominate and approve these individuals.

Recommendation:

Committee members with full membership authority may nominate individuals with expertise related to the committee focus to join the committee. Nominees shall complete a simple application or provide a resume to document this expertise. Through discussion, the committee will select nominees to recommend for addition to the committee. Final nominee(s) will be brought before the full PHB board for approval.

Housing and Shelter Services

Housing and Shelter services specifically for People with Serious Mental Illness:

Service	Location	Agency	Subpopulations	Contact
HOUSING, MENTAL HEALTH SERVICES	177 Day Island Road, Eugene, OR 97401	HACSA Shelter Plus Care		(541) 682-3755
SUPPORTED HOUSING SERVICES	2145 Centennial Plaza, Eugene, OR 97401	LAUREL HILL		(541) 485-6340
HOUSING, MENTAL HEALTH SERVICES	941 W 7th Avenue Eugene, OR 97402	LOOKING GLASS New Roads Access Center	Youth	(541) 686-4310 Main phone
HOUSING, MENTAL HEALTH SERVICES	1062 Main St Springfield, OR 97477	SHELTERCARE Brethren Housing	Serves homeless and non-homeless households	(541) 726-8125
HOUSING, MENTAL HEALTH SERVICES	2988 Oak St Eugene, OR 97405	SHELTERCARE Hawthorn Program	Serves homeless and non-homeless households	(541) 343-4070
HOUSING, MENTAL HEALTH SERVICES	995 W 7th Ave Eugene, OR 97402	SHELTERCARE Riverbend Supportive Community		(541) 302-9195
HOUSING, MENTAL HEALTH SERVICES	1062 Main Street Springfield, OR 97477	SHELTERCARE Shankle Safe Haven		(541) 302-9195

**Homeless housing programs available to the general population including
People with Serious Mental Illness:**

Service	Location	Agency	Subpopulations	Contact
EMERGENCY SHELTER	Physical site Varies Mailing: 456 Hwy 99N Eugene, Oregon 97402	EGAN WARMING SHELTER		(541) 689-6747
EMERGENCY SHELTER	1542 W 1st Avenue Eugene, OR 97402	EUGENE MISSION		(541) 344-3251
EMERGENCY SHELTER	834 Monroe Street Eugene, OR 97402	HOSEA YOUTH SERVICES	Drop In Center: 12- 22 years old	(541) 344-5583

Service	Location	Agency	Subpopulations	Contact
EMERGENCY SHELTER & DAY CENTER	1995 Amazon Pkwy Eugene, OR 97405	ST. VINCENT DE PAUL – First Place Family Center	Families with children under the age of 18.	(541) 342-7728
EMERGENCY SHELTER	1577 Pearl Street Suite 400 Upstairs Eugene, OR 97401	WOMENSPACE	Available to all survivors of intimate partner violence, their children and their support people	(541) 485-8232
HOUSING, SHELTER	969 Hwy 99N Eugene, OR 97402	SHELTERCARE – Family Housing Program	Homeless adults with children under 18.	(541) 689-7156
TRANSITIONAL HOUSING	2890 Chad Drive Eugene, OR 97408	ST. VINCENT DE PAUL OF LANE COUNTY Connections Transitional Housing	Families with minor children living with them. Must be homeless and low-income.	(541) 687-5820 ext. 157
RAPID REHOUSING	(541) 686-4310 Main phone	CATHOLIC COMMUNITY SERVICES McKenzie Rapid Rehousing	Homeless adults with children under 18.	(541) 345-3628 ext. 321
RAPID REHOUSING	941 W 7th Avenue Eugene, OR 97402	LOOKING GLASS McKenzie Rapid Rehousing	Youth	(541) 686-4310
RAPID REHOUSING	969 Hwy 99N Eugene, OR 97402	SHELTERCARE Cascades	Medically fragile adults without children	(541) 689-7156
RAPID REHOUSING	969 Hwy 99N Eugene, OR 97402	SHELTERCARE McKenzie Rapid Rehousing	Homeless adults with children under 18.	(541) 689-7156
RAPID REHOUSING	969 Hwy 99N Eugene, OR 97402	SHELTERCARE – Temporary Housing for Homeless Families	Homeless adults with children under 18.	(541) 689-7156 -
RAPID REHOUSING	1995 Amazon Pkwy Eugene, OR 97405	ST. VINCENT DE PAUL First Place Family Center	Families with children under the age of 18.	(541) 342-7728
RAPID REHOUSING	450 Hwy 99, Eugene, OR 97402	ST. VINCENT DE PAUL Eugene Service Station	Homeless adults without children.	(541) 461-8688
RAPID REHOUSING	1577 Pearl Street Suite 400 Upstairs Eugene, OR 97401	WOMENSPACE Rapid Rehousing	Available to all survivors of intimate partner violence, their children and their support people	(541) 485-8232



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541-682-3798
E-Mail Poverty &
Homeless Programs

Poverty and
Homelessness Board
Plans, Publications &
Reports
Provider Tools
Lane County Continuum
of Care Grant
Submission

Poverty and Homeless Programs



Poverty and Homeless Programs

Lane County Human Services helps the most vulnerable in our community by providing programming in areas of children and youth development, basic needs and housing services, as well as cultural and linguistic accessibility. During calendar year 2013, we assisted 44,541 people of all ages through our poverty and homeless programs and an additional 26,430 individuals through energy assistance services.

Poverty Programs

Our anti-poverty services assist homeless and low-income households find a path out of poverty. The range of services provided includes:

Community Service Centers with four locations in Eugene, Springfield, South and West Lane County: emergency basic needs assistance, homeless prevention services, energy assistance and linkage to mainstream benefits and resources for low income households.

Homeless Access Centers for homeless families, homeless single adults, homeless youth, domestic violence survivors: emergency basic needs assistance, rapid rehousing and linkage to mainstream benefits and resources for homeless households.

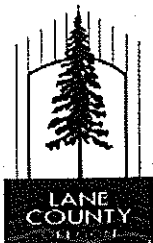
- Early Childhood Programs: parent training, child abuse services
- Hunger Relief Services: food distribution, meal sites, food boxes
- Cultural and Linguistic Access: services for low income Latinos with limited English proficiency

Homeless Programs

Services for homeless individuals, youth and families include: emergency shelter transitional housing and permanent supportive housing programs with support services for people with disabilities.

Other specializing services include:

- Emergency Shelter during extreme weather shelter from November to March to accommodate the need for additional emergency housing when temperatures drop below 30 degrees.
- Runaway and homeless youth ages 17 and under, emergency shelter and family reconciliation services.
- Domestic violence emergency shelter and advocacy services.
- Rapid re-housing rental assistance at Homeless Access Centers.
- Homeless prevention rental assistance at Community Services Centers.



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Poverty and Homelessness Board

Poverty and Homelessness Board Purpose Statement The Poverty and Homeless Board (PHB) is an action oriented group of elected officials, community stakeholders, and individuals who represent low-income and homeless people's concerns.

The purpose of the PHB is to create innovative partnerships and programs that use best practices to reduce poverty and homelessness in Lane County. The PHB will work to generate resources, community and legislative support for housing and services to achieve its goals.

Principles:

Focused and Targeted

A clear focus will be placed on priority populations who are the most vulnerable including the chronically poor and homeless, people with disabilities, children and youth, and veterans

Measurable

Strategies will be developed to make a meaningful impact on priority issues within a set timeline. These strategies will make visible, lasting change for our community.

Evidence Based

The PHB will apply evidence based best practices to achieve our goals. The role of research and evaluation will ensure achieved outcomes and build a process for continuous improvement.

Efficient and Cost-Effective

We will ensure the best use of resources towards our goals and explore new ways of generating funds from state and federal sources. We will challenge ourselves to improve outcomes through efficient collaborative service delivery.

Coordinated Approach

Coordinate with current initiatives including Health Care Reform, Coordinated Care Organization, Early Learning Initiative, Workforce Investment Board, Child Welfare, Juvenile Justice and others.

[Board Members](#)

[Meeting Calendar](#)

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[Continuum of Care Poverty and Homelessness Board Governance Charter](#)

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Lane County Health & Human Services

Poverty and Homelessness Board

Send an email to the Poverty and Homelessness Board. Enter your comments and click on the submit button to contact the Poverty and Homelessness Board. The County uses this contact form to protect your privacy and to help prevent spam.

Your E-mail Address: *

Name: *

Please provide your email address to receive email confirmation of the information provided.

First

Last

Message: *

Maximum Allowed: 1500 characters. *Currently Used: 0 characters.*

Your Commissioner District: *

- ☐ Jay Bozievich - West Lane
- ☐ Sid Leiken - Springfield
- ☐ Pete Sorenson - South Eugene
- ☐ Pat Farr - North Eugene
- ☐ Faye Stewart - East Lane
- ☐ I don't know my Commissioner/District
- ☐ I am not a Lane County Resident

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Poverty and Homelessness Board			
Committees			
Steering			
Members		Staff	
Pat Walsh, Chair		Steve Manela	
Dan Bryant, Vice Chair			
Facilities & Housing Portfolio		End Veterans Homelessness (Ad Hoc)	
Members		Staff	
Jacob Fox		Steve Manela	
Anne Williams		Pearl Wolfe	
Dan Bryant		Amanda McCluskey	
Kitty Piercy			
Pat Walsh			
Paul Solomon			
		Jacob Fox	
Legislative		Strategic Planning	
Members		Staff	
Pat Farr		Steve Manela	
Mary Walston		Stephanie Jennings	
Kitty Piercy			
Anne Williams			
Byron Trapp			
Pat Walsh			
Paul Solomon			
Evaluation & RFP		Service Delivery	
Members		Staff	
Cindy Leming		Pearl Wolfe	
Hugh Massengill		Amanda McCluskey	