

**Siskiyou County Health and Human Services Agency  
Proposition 47 Local Evaluation Plan  
Project Base Camp**

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## Project Background

The Siskiyou County Health and Human Services Agency Behavioral Health Division is the lead service agency for the Proposition 47 program in Siskiyou County to plan and implement the Project Base Camp low-barrier homeless shelter. The shelter is the first of its kind in the County and includes 32 beds for justice-involved individuals with mental illness and/or substance use disorder (SUD). The objective is to provide safe overnight shelter for individuals in the target population and reduce all barriers to accessing services.

Through the partnership with County and community-based agencies, Project Base Camp will be the primary access point to community-based services and will reduce the stigma attached to accessing treatment. Project Base Camp will provide/link to crisis support services, case management, homeless outreach, community service opportunities, and linkage to on and offsite peer support services, mental health treatment, substance use treatment, physical healthcare, and education resources (including trade schools). All supportive services for the target population are focused on trauma-informed and strength-based care to meet the guests “where they are” and build motivation for engaging in long-term service involvement.

The Siskiyou County Proposition 47 Local Advisory Committee (LAC) Membership Roster includes many stakeholders. The committee ensured that all stakeholders for the homeless community were involved, including representatives and leaders from Health and Human Services Agencies (HHSAs), Probation, Siskiyou County Sheriff’s Office, Planning Department, Adult Education providers, the City of Yreka, and community-based organizations (CBO) for mental health and homeless service providers. Many of the service-based stakeholders are members of existing committees in each of the disciplines addressed by Proposition 47, and the LAC would best serve as a platform to distribute program information and make joint decisions between the existing committees. These committees include the Siskiyou Homeless Coalition and the Behavioral Health Quality Improvement Committee. A complete list and participant roles can be found in the tables below.

Table 1. Key Public Stakeholders and Their Roles

Agency	Role
Siskiyou County HHSAs Behavioral Health Division	Lead Agency, outbound referral source for Mental Health assessments and treatment
Siskiyou County Probation	Referral source, resources for group skills training and community-service supervision, completion of needs/risk assessments and data collection
Siskiyou County Sheriff	Referral source, data collection, social justice components
Yreka Police Department	Referral source, data collection, emergency responses
Shasta County Housing Authority	Housing vouchers and other housing leverage resources
Siskiyou County Public Defender’s Office	Referral source, and will utilize the program for assistance with diversion programs
Siskiyou County HHSAs Social Services Division	Registration for social service programs such as Medi-Cal and CalFresh
Siskiyou County Superior Court	Referral source, and the inclusion of MH Diversion program
Siskiyou County HHSAs Substance Use Disorder Services	Referral source, outbound referral source for SUD assessments and treatment

Table 2. Community-Based Partners

Organization	Role
Northern Valley Catholic Social Services (NVCSS)	Contracted CBO to operate Project Base Camp
Siskiyou WORKS	Assist enrolling participants in adult education courses
Karuk Tribe	Provide culturally appropriate services for Native American participants, provide community-based social justice opportunities
Six Stones Wellness Center (NVCSS)	Peer support wellness center that will operate out of the shelter building during the day for additional support
Fairchild Medical Center	Coordinate primary care connections, data collection, referral source
Mercy Medical Center	Coordinate primary care connections, data collection, referral source

The following table details the goals and objectives developed for Project Base Camp.

Table 3. Goals and Objectives

Goals	Objectives
Provide a safe low-barrier shelter for Project Base Camp guests as a tool for immediate stabilization and linkage to appropriate permanent housing options.	<ul style="list-style-type: none"> <li>• Increase the number of sheltered individuals within the target population while utilizing a Housing First approach and the coordinated entry process.</li> <li>• Reduce barriers to accessing immediate shelter.</li> <li>• For individuals not yet ready to access services, increase relationship-building and motivational development.</li> </ul>
For individuals in the target population, Project Base Camp will be the primary access point for county and CBO services to address MH, SUD, physical, educational, occupational, and other functional needs.	<ul style="list-style-type: none"> <li>• Reduce recidivism rates by providing referrals and linkage to case management, mental health, and substance use treatment.</li> <li>• Increase pro-social behaviors by engaging guests in positive activities, peer support, and group services.</li> <li>• Increase protective factors by motivating and referring guests to adult education and trade school opportunities.</li> <li>• Reduce functional impairments associated with mental health and SUD.</li> </ul>
Repair the harm caused by trauma through evidence-based, trauma-informed, and culturally responsive care.	<ul style="list-style-type: none"> <li>• Increase service engagement by “meeting people where they are” and treating all people with dignity and respect.</li> <li>• Increase staff knowledge in utilizing strength-based and motivational interviewing interventions.</li> <li>• Increase the level of perceived safety within the shelter and the community for guests.</li> </ul>

## **Evaluation Methods and Design**

The Siskiyou County Health and Human Services Agency will contract with a research agency that supervises California State University School of Social Work students to evaluate the success of Project Base Camp in attaining its goals. The evaluation will assess the extent to which the program activities are implemented as planned and the impact that these activities have on those participating in the program. As described below, contracted staff will work with HHSA and community partners to collect qualitative and quantitative data and will analyze that data to assess the implementation (fidelity to the proposed model) and outcomes of the program. In conjunction with Siskiyou County HHSA and community partners, contracted staff will identify and/or develop data sources and tools to collect the data necessary to evaluate Project Base Camp. The evaluation team will also provide training and technical assistance to Project Base Camp staff to support the evaluation process.

Project Base Camp will utilize the wealth of knowledge and experience from various public and private community partners to reduce recidivism in Siskiyou County. The program will be coordinated by the Siskiyou County Health and Human Services Agency. Northern Valley Catholic Social Services (NVCSS) is the community-based organization operating the shelter and providing case management services to shelter guests. SUD services will be provided by Siskiyou County Substance Use Disorder Services, and HHSA Behavioral Health Division will provide the specialty mental health care. Up to 32 guests at a time will receive services in the program. If the program is full, referred guests will be placed on a waiting list until a bed becomes available; returning guests will maintain their bed placement so long as they follow the code of conduct.

## **Research Design for the Process and Outcome Evaluations**

The evaluation of the Revive Program will include a process assessment, examining whether the program was implemented as planned, and an outcome assessment, examining whether, and to what extent, the program had the desired impact on program participants. The following sections will be completed by the contracted research agency, which will provide more in-depth overviews of the planned process and outcome evaluation measures.

## **Program Description**

Project Base Camp will utilize a Housing-First Approach with low-barrier access to the shelter to stabilize guests, develop trusting relationships, and connect them to supportive services when they are ready. The project is committed to the following low-barrier practices:

- Access is not contingent on sobriety, income, criminal history, engagement in treatment, participation in services, or other unnecessary conditions.
- Access hours are flexible and predictable, and policies are in place to be flexible for individuals whose work hours are outside of the access hours.
- Individuals are not turned away for having pets or their possessions with them. Safe arrangements for pets within the shelter and safe storage for possessions will be accommodated.
- Guests are welcomed as they are while having clear and simple behavioral expectations that apply to anyone staying at the shelter. These expectations are focused on maintaining a safe environment for all.

Project Base Camp will enroll all guests into the Homeless Management Information System (HMIS) and the Coordinated Entry System (CES) to capture data and link guests to affordable housing opportunities. Once guests have completed the intake documents, they are orientated to the shelter procedures, introduced to staff and volunteers, and provided their bed.

Individuals in the target population have the right to self-determination and should always be treated with dignity and respect. Because each guest has likely experienced stress and trauma, it is critical that staff provide safe, clean, and accommodating conditions. The goal is to connect them back to housing and focus on strengths rather than needs. All staff and volunteers will receive training in trauma-informed care and work effectively and nonjudgmentally with people experiencing justice involvement, homelessness, stress, trauma, mental illness, substance use, or other challenges.

At the time of initial intake, the Project Base Camp Team will ask the guest if they would like to have a referral to any supportive services. If the guest accepts the referral, staff will collaborate with the referral agency to ensure that the guest receives an assessment; assessments may be in-person or through telehealth at Project Base Camp. If the guest declines the referral, staff will continue to build a relationship with the guest and be available for assistance when the guest is ready to accept a referral.

In addition to outside referrals, Project Base Camp will collaborate with other community-based organizations to provide onsite opportunities to engage in supportive services, housing opportunities, educational resources, social activities, and wellness groups.

**Data Collection Procedures – Process Evaluation**

The process evaluation will use the types of qualitative and quantitative measures listed in Table 4 to assess program fidelity. The data and evaluation contractor may adjust these measures as needed.

Table 4. Process Evaluation Measures

Activity	Quantitative Data	Qualitative Data
Mental Health Services	<ul style="list-style-type: none"> <li>• Client fit with eligibility criteria</li> <li>• # of individuals referred for MH services</li> <li>• # of individuals enrolled in MH services</li> <li>• # of MH service hours provided and number of clients served</li> <li>• Demographic information for participants</li> </ul>	<ul style="list-style-type: none"> <li>• Guest’s perception of services provided</li> </ul>
SUD Services	<ul style="list-style-type: none"> <li>• Client fit with eligibility criteria</li> <li>• # of individuals referred for SUD services</li> <li>• # of individuals enrolled in SUD services</li> <li>• # of SUD service hours provided and number of clients served</li> <li>• Demographic information for participants</li> </ul>	<ul style="list-style-type: none"> <li>• Guest’s perception of services provided</li> </ul>
Housing Support	<ul style="list-style-type: none"> <li>• # of participants enrolled Project Base Camp</li> <li>• # of bed-nights</li> <li>• Average length of guest stays</li> <li>• # of guests receiving case management</li> <li>• # of people on the waiting list</li> </ul>	<ul style="list-style-type: none"> <li>• Guest’s perception of and satisfaction with housing and support services provided</li> <li>• Staff perception of engagement in support services</li> </ul>

Community Engagement	<ul style="list-style-type: none"> <li>• # of guests referred to community service activities</li> <li>• # of guest hours spent in recreational and educational activities</li> </ul>	<ul style="list-style-type: none"> <li>• guest’s perception of engagement in community service activities</li> <li>• Staff perception of engagement in community service activities</li> </ul>
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**Documentation and Quality Assurance for Process Evaluation**

\*\*To be determined by the contracted research agency\*\*

**Documentation**

\*\*To be determined by the contracted research agency\*\*

**Quality Assurance**

\*\*To be determined by the contracted research agency\*\*

**Data Collection Procedures – Outcome Evaluation**

The outcome evaluation will use a mixed methods approach, which will be determined by the data and evaluation contracted agency. Table 5 includes the sources of the outcome evaluation measures, and the tables will be updated once the Lead Agency contracts with the research team.

Table 5. Outcome Evaluation Measures

Activity	Quantitative Data	Qualitative Data
Mental Health	Data from Electronic Health Record (SmartCare). Data elements to be determined by the contracted research agency.	Survey Data. Data elements to be determined by the contracted research agency.
SUD	Data from Electronic Health Record (SmartCare). Data elements to be determined by the contracted research agency.	Survey Data. Data elements to be determined by the contracted research agency.
Housing	Data from Electronic Record (HMIS). Data elements to be determined by the contracted research agency.	Survey Data. Data elements to be determined by the contracted research agency.
Community Engagement	Data from Electronic Record (HMIS). Data elements to be determined by the contracted research agency	Survey Data. Data elements to be determined by the contracted research agency.
Recidivism	Data from Electronic Record (Probation). Data elements to be determined by the contracted research agency	Survey Data. Data elements to be determined by the contracted research agency.

**Logic Model**

\*\*To be determined by the contracted research agency\*\*