



City Manager's Office

June 18, 2026

To: Honorable Mayor and Members of the City Council

From: Paul Buddenhagen, City Manager 

Re: Homeless Response Team Performance Data Report

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### *Introduction*

This Homeless Response Team (HRT) data report is the third in a series of biannual data reports to the City Council, following the May 12, 2025 and November 7, 2025 memos. The data reports provide consistent outcome measures over time, in line with the recommendation of the City Auditor's July 2025 audit of the HRT. With three reporting periods now available, some outcome measures are beginning to show stability across reports while others continue to vary in ways that likely reflect period-specific cohort composition. The most operationally significant finding in this report is that, with new shelter capacity that the City and County have brought online over the past year, 58% of HRT participants achieved a shelter or housing outcome in this reporting period, with an additional 31% actively engaged with the team but not yet placed.

### *Overview of Homeless Response Team*

The Homeless Response Team is coordinated by the Neighborhood Services Division in the City Manager's Office, which coordinates a multi-departmental effort to address all of the needs and impacts of the people who live in, work or visit the area of a particular encampment. The effort also includes staff from Public Works, Health, Housing & Community Services, City Attorney's Office, Police, Fire and Parks, Recreation and Waterfront, and other departments/divisions as needed.

Concerns about encampments are reported by community members (often through 311), Councilmembers, merchants, or City Staff, including HRT. HRT staff will then assess the site for its impacts, looking at several key domains, including community impacts, public health and safety, and environmental considerations, to decide how and when to address encampment concerns.

Encampments are then prioritized with these factors in mind to determine if an intervention is warranted.

## *Key Takeaways*

### **1. Demographic indicators continue to vary report-to-report, while vulnerability indicators remain consistently high.**

This report represents the third snapshot using the revamped set of HRT outcome measures introduced in May 2025. Some demographic indicators continue to fluctuate from one reporting period to the next. The share of participants self-identifying as female moved from 32% in May 2025 to 48% in November 2025 and 37% in this report. The share self-reporting a substance use disorder moved from 62% to 87% to 79% over the same three reports. These variations most likely reflect the specific composition of who the HRT encountered during each six-month period rather than systemic trends, and HRT staff will continue to monitor them.

What does appear stable, if not rising, across all three reports is the high level of vulnerability among HRT participants. In this period, 97% of HRT participants self-reported having a disability (compared to 89% in November 2025 and 94% in May 2025), and 93% self-reported a mental health disorder (compared to 87% in November 2025 and 81% in May 2025). Physical disability also rose meaningfully, with 76% of participants self-reporting a physical disability this period (compared to 37% in November 2025 and 56% in May 2025), likely reflecting the specific population the team encountered. Across all three reports, HRT participants have consistently reported substantially higher rates of vulnerability than the broader Alameda County homeless population captured in the 2024 federal Point-in-Time (PIT) Count.

### **2. Berkeley remains the largest single source of HRT participants, but inflows from neighboring jurisdictions are increasing.**

Berkeley continues to be the top source of HRT participants on a cumulative basis. However, the most recent six-month cohort shows meaningful inflows from neighboring jurisdictions. Twenty-one new participants in this period self-reported Oakland as their last city of residence prior to becoming homeless, compared to 17 from Berkeley. Sixteen new participants reported Contra Costa County, and 14 reported other California communities.

This regional pattern is consistent with what the HRT has been hearing from participants in the field, and what a recent UCSF evaluation<sup>1</sup> on Berkeley's encampment efforts corroborated: as neighboring cities undertake encampment clearances, displaced individuals are increasingly arriving in Berkeley. The size and composition of Berkeley's

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<sup>1</sup> See: <https://homelessness.ucsf.edu/sites/default/files/2026-03/Berkeley%20RV%20Interim%20Evaluation%20Final%203.31.pdf>

unsheltered population is being shaped not only by local conditions but also by encampment enforcement decisions in neighboring jurisdictions, which are outside the City's control.

3. **More HRT participants have accessed shelter in this reporting period than in the previous report, with most HRT engagements leading to shelter, housing, or continued engagement with the team.**

55% of HRT participants in this reporting period have enrolled in a shelter program at some point during their engagement with the team (Attachment 1, slide 5), a significant improvement from the 25% reported in November 2025. The increase reflects the cumulative impact of new shelter capacity that the City and County have brought online, particularly through the winter relief shelter beds operated by Dorothy Day House, new respite beds brought online by the County, and ongoing openings at encampment resolution funded beds.

Looking at HRT participant outcomes more broadly (Attachment 1, slide 8), 58% of participants in this reporting period achieved a shelter or housing outcome, 31% are actively engaged with the team but not yet placed, and 11% have disengaged from services.

4. **Coordinated Entry assessment rates and PSH eligibility among HRT participants remain strong; PSH placement remains a County-controlled bottleneck.**

91% of HRT participants in this reporting period have received a Coordinated Entry housing needs assessment, comparable to 94% in November 2025 and a significant increase from 60% in May 2025. Of those assessed, approximately 84% scored at or above the threshold for permanent supportive housing (PSH) eligibility (a score of 80 or higher), with the majority concentrated in the 80–99 range.

The HRT continues to identify and engage participants who are most in need of intensive housing support. However, PSH placement decisions are controlled by Alameda County, not the City of Berkeley. The HRT can refer eligible participants to PSH but cannot directly place them into housing. This structural constraint is reflected in the breakdown of sheltered or housed outcomes (Attachment 1, slide 8, right-side chart): of HRT participants who achieved a shelter or housing outcome in this period, 95% are in shelter while only 5% have moved to permanent or temporary housing destinations, comparable to prior reports.

### *Conclusion*

Using State Encampment Resolution Fund dollars (leveraged by Measure P), the HRT opened 4 noncongregate motel programs between 2022 and 2025—an average of one new program per year. This rapid increase in interim housing stock helped move some of Berkeley’s hardest-to-serve unsheltered population indoors. As reported by city staff in September 16, 2025, work session presentation to the City Council<sup>2</sup>, the city faces a significant general fund deficit and existing ERF noncongregate motels face a multi-million dollar fiscal cliff over the coming years. Altogether, as funding priorities shift to addressing funding gaps in current shelter programs, the current fiscal climate will make it challenging to open new shelter programs without additional grant funding or other outside resources. Without expanding shelter and housing capacity, the current rate of HRT placement documented in this report cannot be sustained, and a decline in positive outcomes is likely over time.

All of this speaks to the continued need to partner with and advocate to Alameda County so that Berkeley receives an appropriate share of Measure W sales tax funding to support the continuation of existing programs and development of new ones. City staff are currently engaged with County counterparts in the Measure W administrative planning process, advocating for Berkeley’s needs in the homeless system of care.

### Attachments

1. Homeless Response Team Data Report

cc: David White, Deputy City Manager  
Peter Radu, Neighborhood Services Manager  
Josh Jacobs, Homeless Services Coordinator  
Scott Ferris, Director, Parks, Recreation and Waterfront  
Scott Gilman, Director, Health Housing and Community Services  
David Sprague, Fire Chief, Berkeley Fire Department  
Jennifer Louis, Chief of Police, Berkeley Police Department  
Wahid Amiri, Interim Director, Public Works  
Jenny Wong, City Auditor  
Mark Numainville, City Clerk  
Matthai Chakko, Assistant to the City Manager  
Farimah Brown, City Attorney

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<sup>2</sup> See: <https://berkeleyca.gov/sites/default/files/documents/2025-09-16%20Special%20Item%2001a%20Comprehensive%20Summary%20of%20Berkeley%E2%80%99s.pdf>

# Homeless Response Team

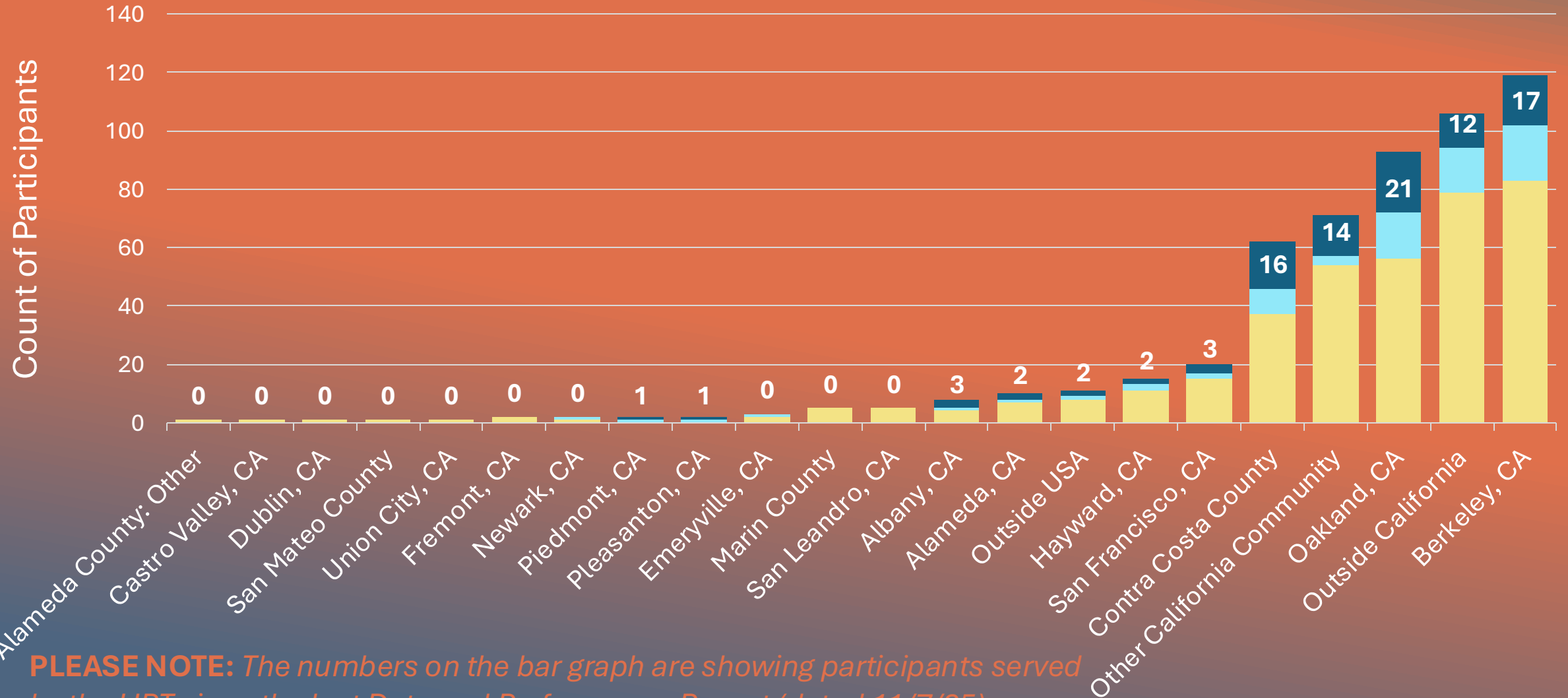
## Performance Data Report

*June 2026*

# Where Are HRT Participants Coming From?

*Self-reported city of residence when becoming homeless*

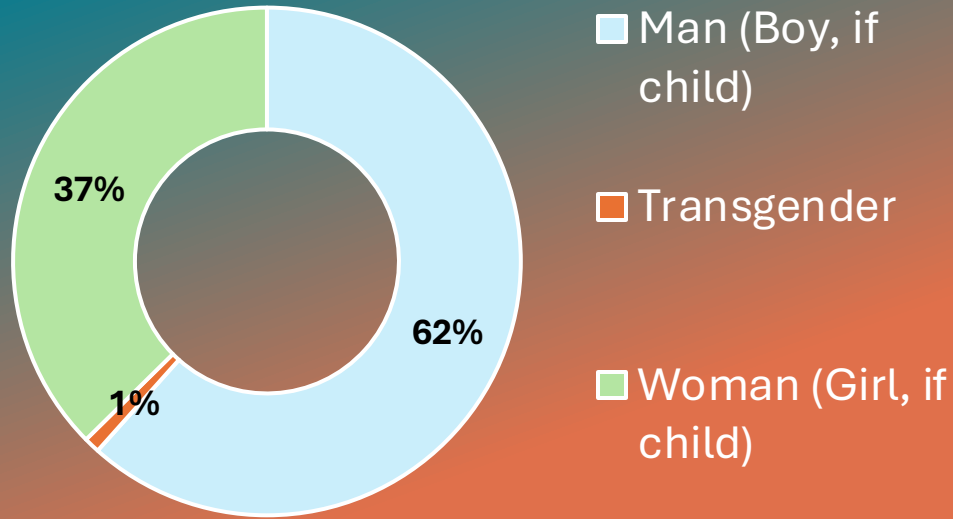
■ Jun 21 - May 25    ■ Jun 25 - Nov 25    ■ Dec 25 - May 26



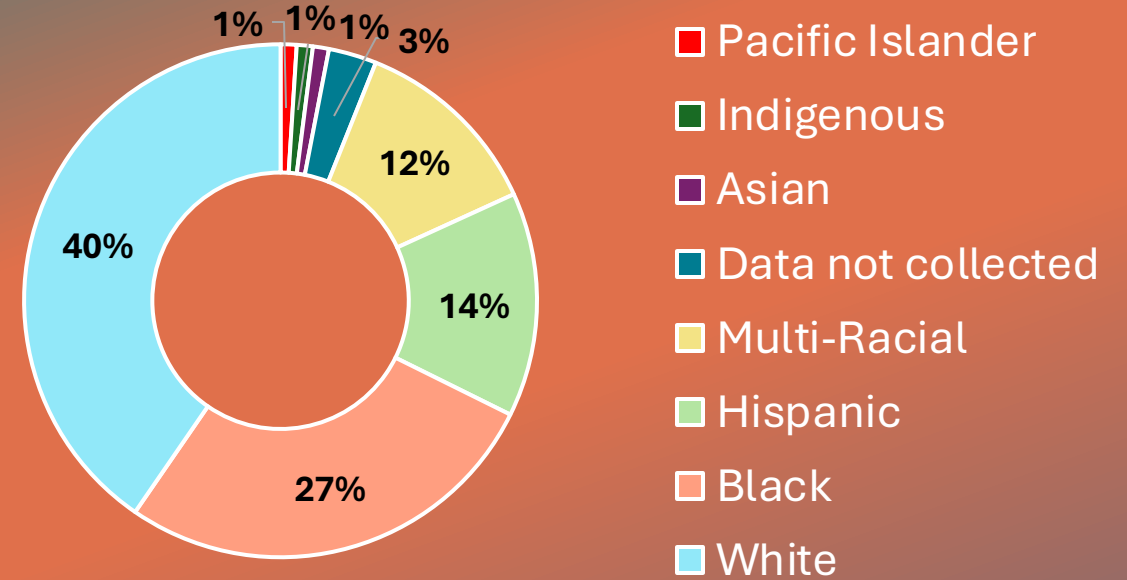
**PLEASE NOTE:** *The numbers on the bar graph are showing participants served by the HRT since the last Data and Performance Report (dated 11/7/25)*

# Gender, Race, and Age Distribution of HRT Participants

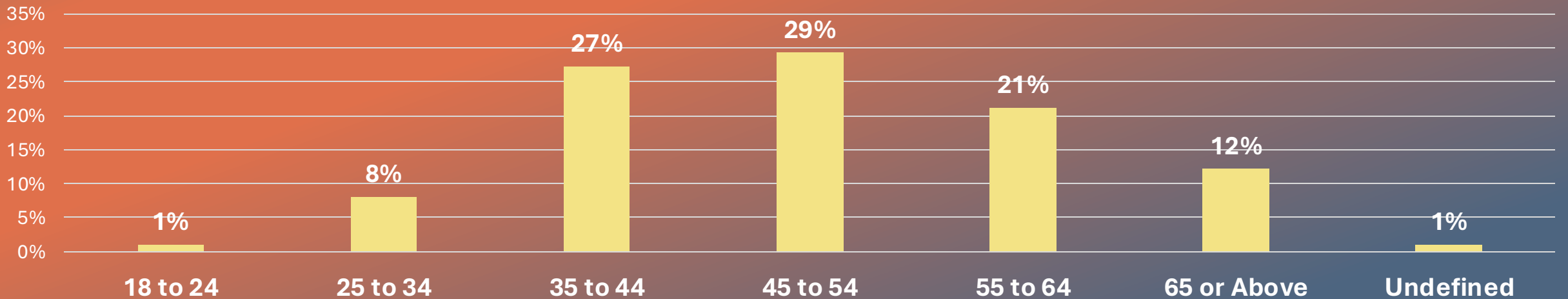
## Gender Identity



## Racial Background

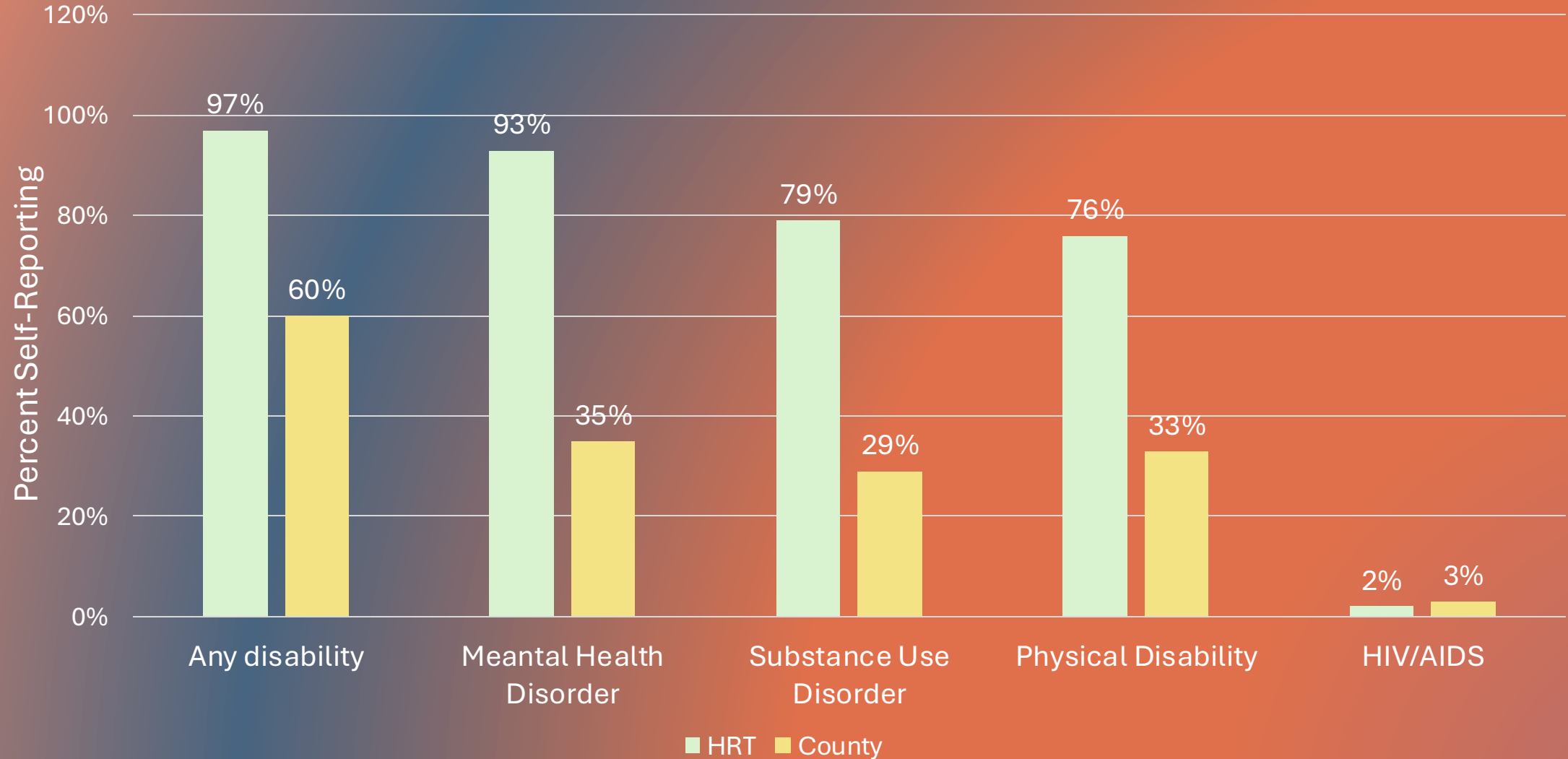


## Age Distribution



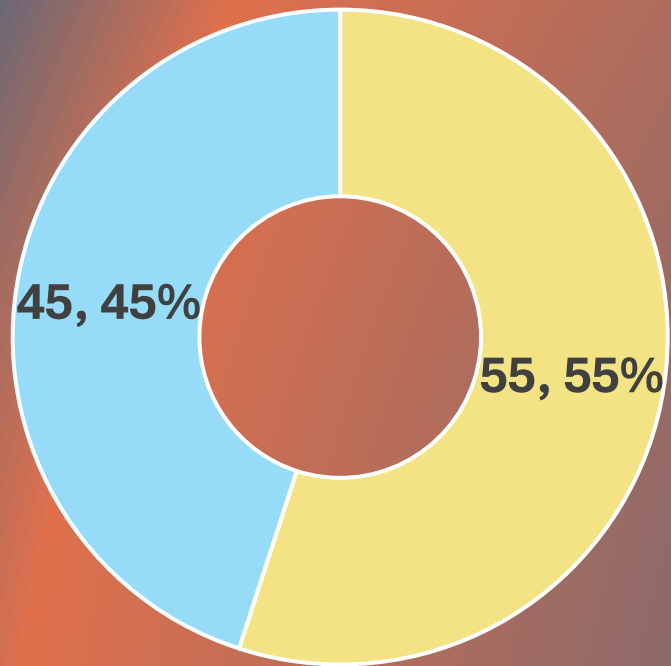
# HRT Serves a Highly Vulnerable Population

*HRT participants are far more vulnerable than Alameda County's homeless population overall*



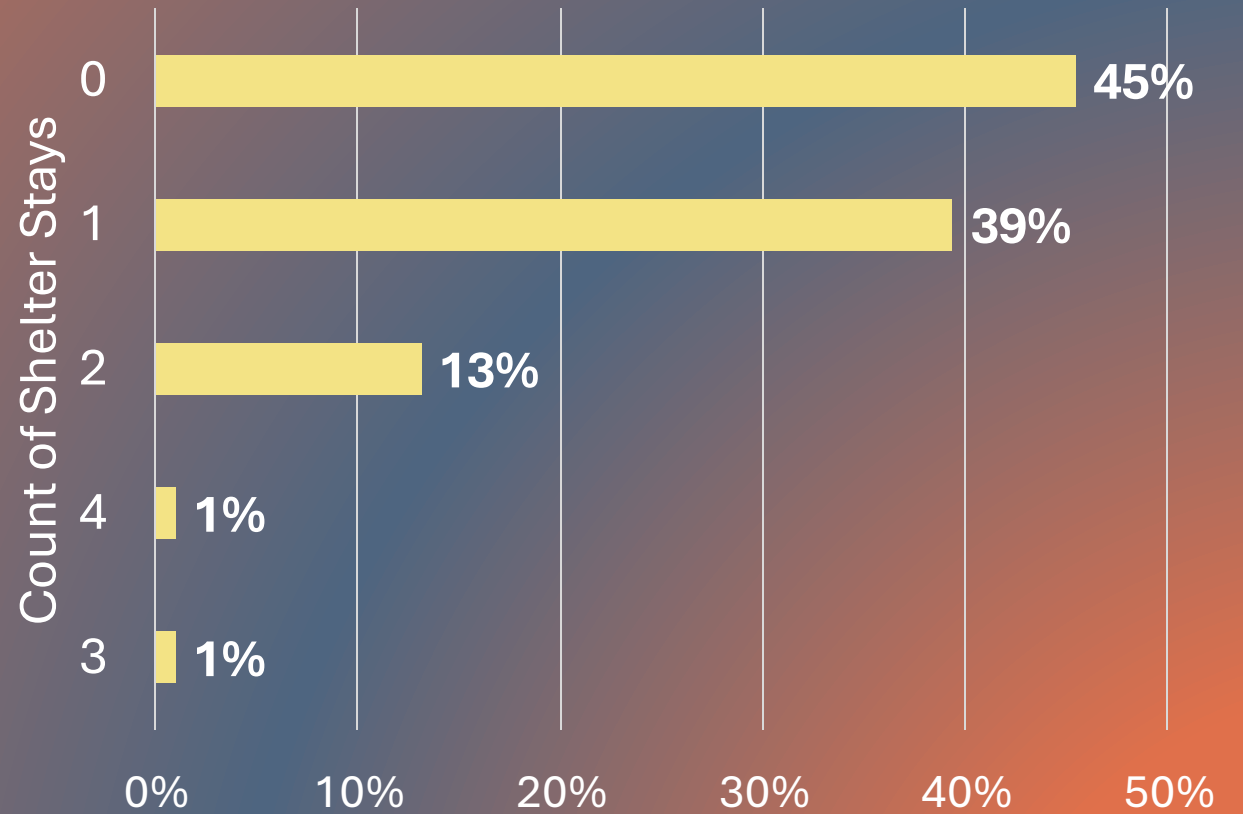
# HRT Shelter Placements

## % of HRT Clients Placed into Shelter



■ Sheltered ■ Unsheltered

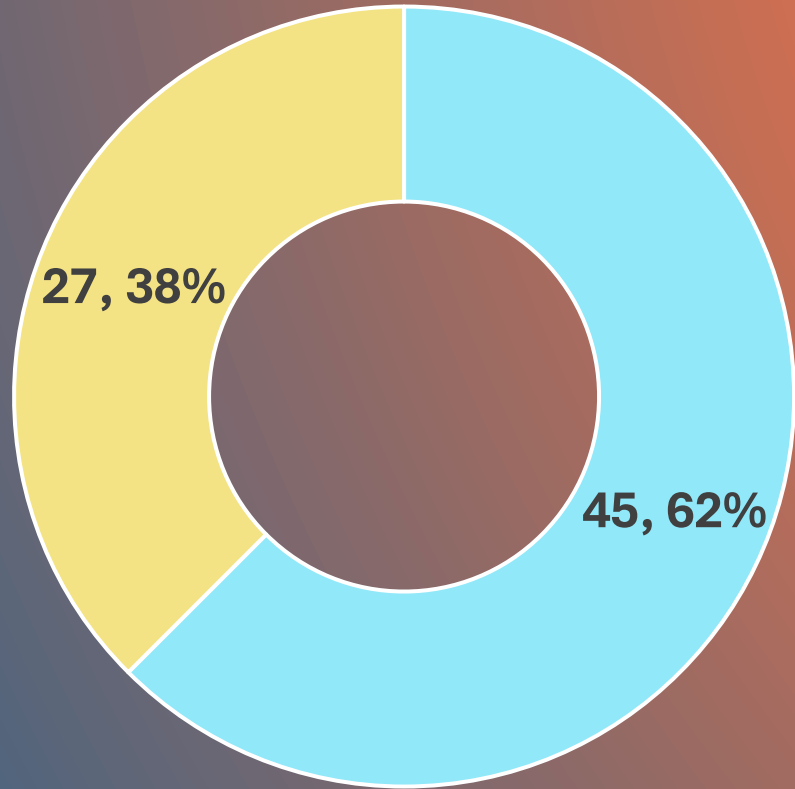
## % of HRT Clients Placed into Shelter



■ % of Clients Enrolled in Shelter

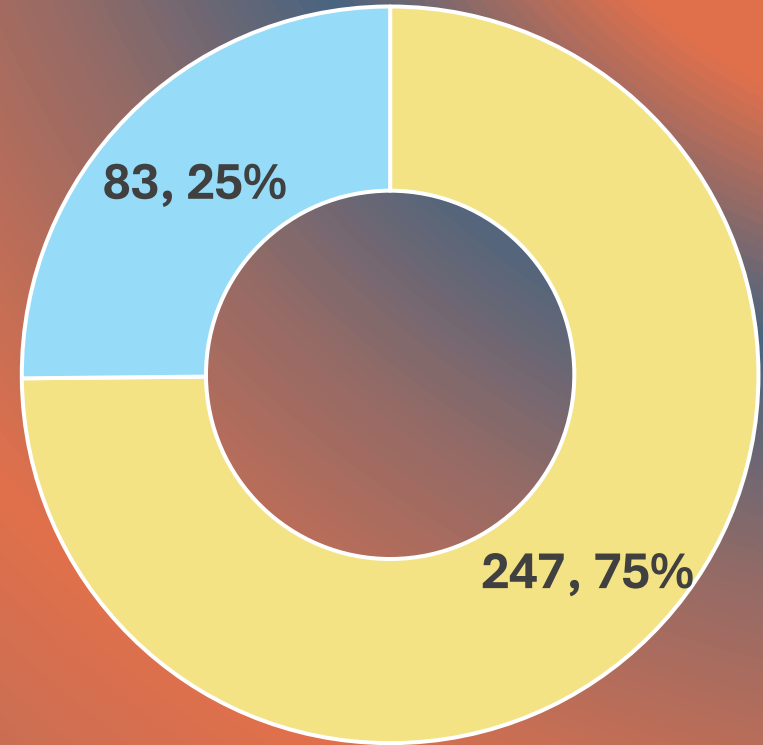
# High Non-Congregate Shelter Placements Despite Limited Capacity

## Shelter Enrollments by Bed Type for HRT Participants



■ Non-congregate beds ■ Congregate beds

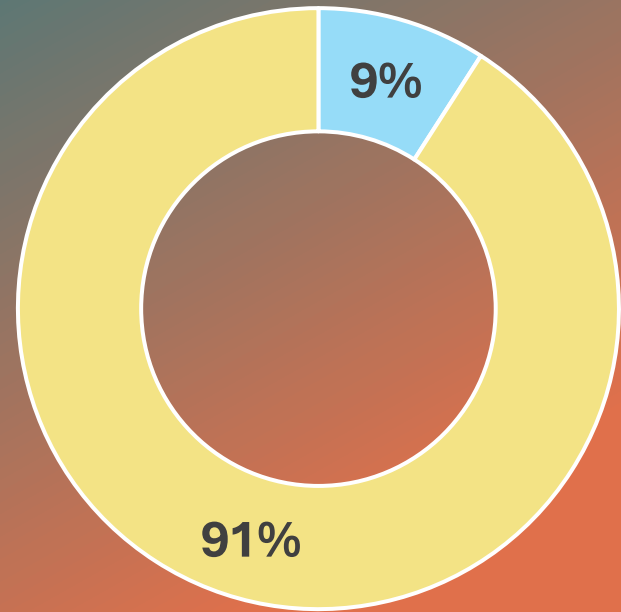
## Shelter Bed Inventory by Type in Berkeley



■ Congregate beds ■ Non-congregate beds

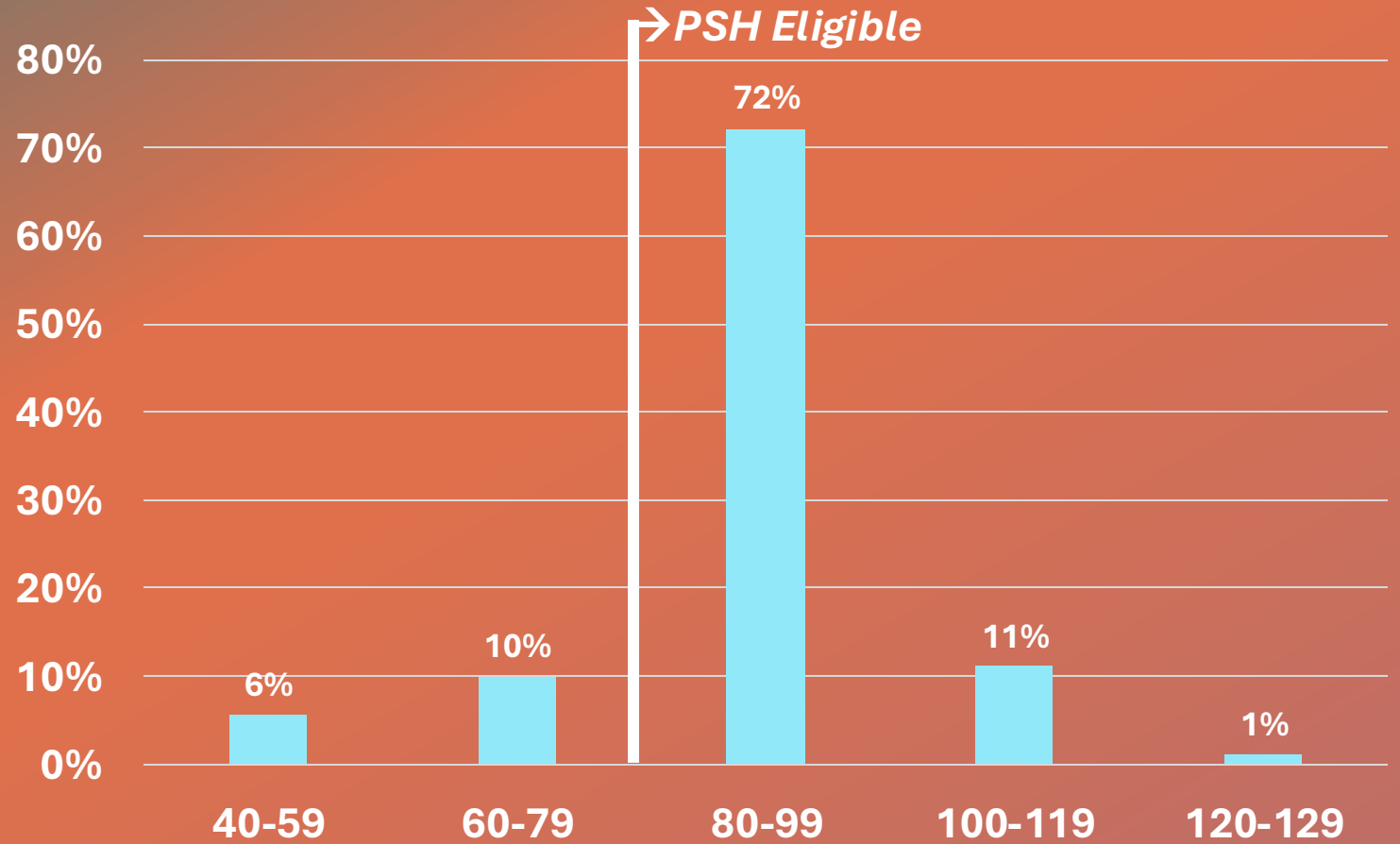
# Most Participants Qualify for Permanent Supportive Housing (PSH)

## % of HRT Participants Assessed for Coordinated Entry



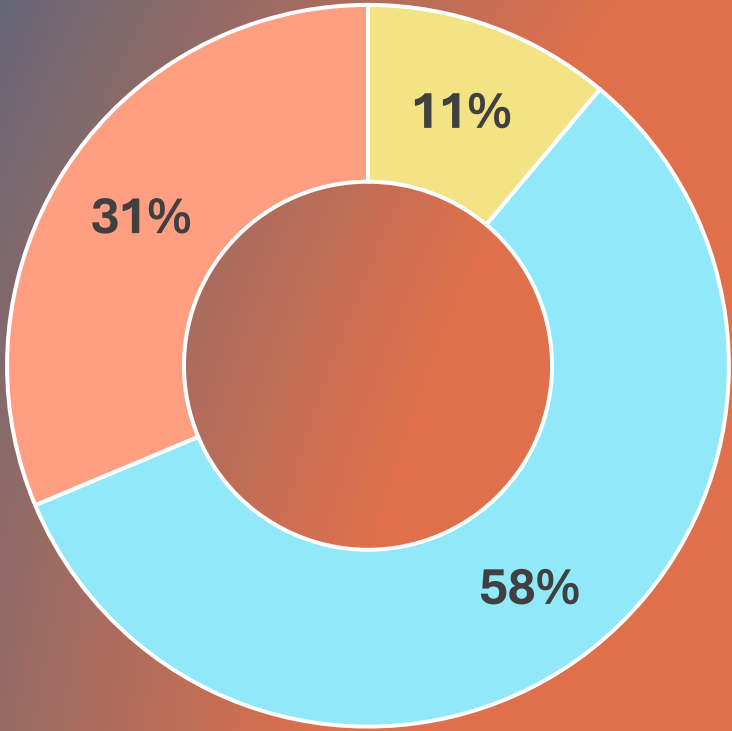
■ Not Assessed   ■ Assessed

## Assessment Score Distribution



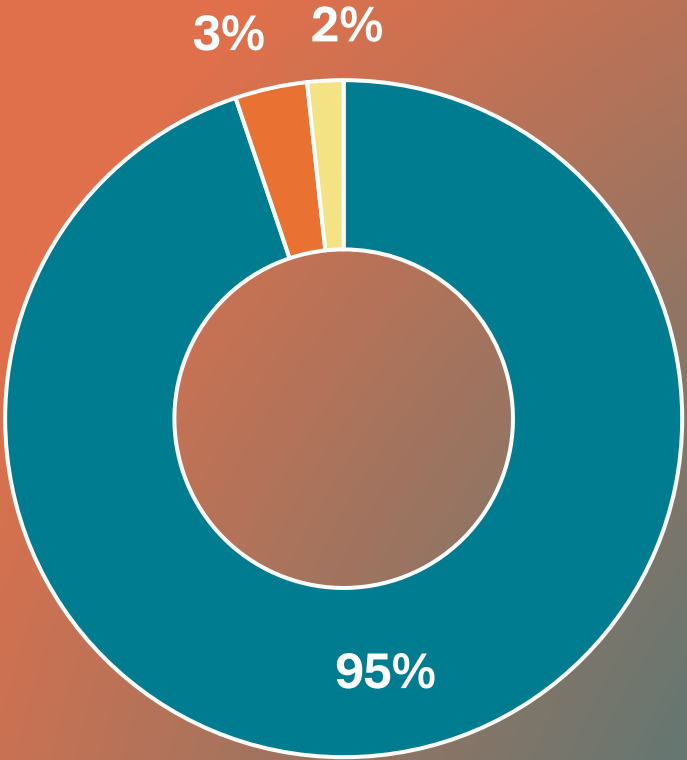
# Most HRT Exits Lead to Housing or Shelter

### HRT Participant Exit Outcomes



- Other / Disengaged
- Sheltered / Housed
- Engaged / not yet placed

### Breakdown of Exit Outcomes for Sheltered/Housed Participants Upon Exit



- Sheltered
- Rental by client
- Staying with family