

Item No:1 (Consent Calendar)Subject:October 26, 2022, CoC Board Meeting AgendaMeeting Date:October 26, 2022Staff Contact:Alea Tantarelli, Alea.Tantarelli@Sonoma-County.org

#### SUMMARY

This staff report presents the October 26, 2022 CoC Board Meeting proposed agenda. The agenda contains all proposed items that will be discussed by the CoC Board. The proposed agenda is attached as Attachment A.

#### **RECOMMENDED ACTION(S)**

Approve October 26, 2022 agenda.



## <u>Attachment A</u> Sonoma County Continuum of Care (CoC) Board Agenda for October 26, 2022 1:00pm-5:00pm Pacific Time

Public Zoom Link:

https://sonomacounty.zoom.us/j/99261791880?pwd=djc0b1ZsU1FpOU1kbnJ0UDNOcUhFQT09

Phone: 1 (669) 900-9128 Webinar ID: 992 6179 1880 Passcode: 650935

	Agenda Item	Packet Item	Presenter	Time
	Welcome, Roll Call and Introductions		Board Chair	1:00pm
	Note: Items 1-5 below are proposed for adoption via one motion as the Consent Calendar.	N/A		
1.	10-26-2022 Agenda (Consent Calendar)	Draft Agenda	Board Chair	
2.	Minutes from 9/28/22 (Consent Calendar)	Draft Minutes	Board Chair	
3.	Summary of Follow-ups from the Previous Meeting(s) (Consent Calendar)	Summary of Follow-ups	Board Chair	1:05pm
4.	New Capital Projects in the Sonoma County System of Care (Consent Calendar)	Summary of new projects	Board Chair	
5.	Built for Zero Update (Consent Calendar)	Built for Zero Update	Board Chair	
6.	Reports from Lead Agency Staff <ul> <li>CoC Board Elections Timeline</li> </ul>	Staff Report for Reports from Lead Agency	CDC Staff	1:25pm
7.	Homeless Service Provider Group Update		Margaret Sluyk	1:45pm
8.	MOU Between CoC Board & Lead Agency (ACTION ITEM)	Staff Report for MOU Between CoC	Board Chair & CDC Staff	1:55pm

		Board & Lead Agency		
9.	Homeless Housing Advocacy & Prevention 4 (HHAP 4) ACTION ITEM: Invite public input, approve HHAP 4 draft	Staff Report for HHAP 4 Draft	CDC Staff	2:20pm
10.	Community Development Block Grant Corona Virus (CDBG-CV) and/or Low and Moderate-Income Housing Asset Fund (LMIHAF) Funding Requests ACTION ITEM	Staff Report for (CDBG- CV) and/or (LMIHAF) Funding Requests	CDC Staff	2:40pm
11.	Word from the Street		Chessy Etheridge	2:55pm
12.	10-minute break			3:05pm
13.	CoC Strategic Planning Presentation	Staff Report for CoC Strategic Planning Presentation	Homebase	3:15pm
14.	<ul> <li>Reports from Standing Committees:</li> <li>Funding &amp; Evaluation Committee</li> <li>Coordinated Entry Advisory (CEA) Committee Action Item: Update Coordinated Entry Policies &amp; Procedures</li> <li>Strategic Plan Committee</li> <li>Homeless Management Information System (HMIS)/Data Committee</li> <li>Lived Experience Advisory &amp; Planning Board (LEAP)</li> <li>Youth Advisory Board</li> </ul>	Staff Report for Updated Coordinated Entry Policies & Procedures	Committee Representatives	4:00pm
15.	<ul> <li>Review Agenda for November CoC Board Meeting</li> <li>CoC Strategic Plan Adoption</li> <li>Lead Agency MOU</li> </ul>	Staff Report for DRAFT Agenda 11/30/22	Board Chair	4:35pm
16.	Board Member Questions & Comments		Board Chair	4:45pm
17.	Public Comment on Non-Agendized Items		Board Chair	4:55pm

PUBLIC COMMENT:

Public Comment may be made via email or during the live zoom meeting. To submit an emailed public comment to the Board email <u>Araceli. Rivera@sonoma-county.org</u>. Please provide your name, the agenda number(s) on which you wish to speak, and your comment. These comments will be emailed to all Board members. Public comment during the meeting can be made live by joining the Zoom meeting using the above provided information. Available time for comments is determined by the Board Chair based on agenda scheduling demands and total number of speakers.



Item No:	2 (Consent Calendar)
Subject:	Meeting Minutes from 9/28/2022
Meeting Date:	10/26/2022
Staff Contact:	Araceli Rivera, Homeless Project Specialist, <u>Araceli.Rivera@sonoma-</u> <u>county.org</u>

#### SUMMARY

This staff report briefly summarizes the September 28, 2022, CoC Board Meeting Minutes. The attached meeting minutes contains all items discussed by the Continuum of Care Board at the September 28, 2022, CoC Board Meeting.

#### **RECOMMENDED ACTION(S)**

Approve CoC Board Meeting Minutes from September 28, 2022.

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## Attachment A



Sonoma County Continuum of Care Board Meeting Meeting Minutes

> Wednesday, September 28, 2022 1:00 – 5:00 p.m. Pacific Time – Meeting held by Zoom

#### Welcome and Roll Call (00:05:17 - 00:06:46)

- Jennielynn Holmes, Continuum of Care (CoC) Board Vice Chair, called the meeting to order at 1:00 p.m.
- Roll Call was taken:
  - Present: Ben Leroi, Santa Rosa Community Health Center; Jennielynn Holmes, Catholic Charities of the Diocese of Santa Rosa; Megan Basinger as proxy for Tom Schwedhelm, City of Santa Rosa; Dennis Pocekay, City of Petaluma; Chris Coursey, Sonoma County Supervisor; Margaret Sluyk, Reach for Home; Chris Keys, Redwood Gospel Mission; Jan Cobaleda-Kegler, Sonoma County Behavioral Health; Chessy Etheridge, Lived Experience Advisory and Planning Board; Kathleen Pozzi, Community Member; Cheyenne McConnell, Youth Community Member; City of Sebastopol; Don Schwartz, City of Rohnert Park; John Moore, City of Cotati; Mark Krug, Burbank Housing; Madolyn Agrimonti, City of Sonoma; Stephen Sotomayor, City of Healdsburg
  - Absent: Una Glass

**A quorum was present.** A minute of silence was observed honoring Kathleen Finnegan, a long-time Sonoma County community advocate and a member of the Coordinated Entry Advisory Committee, who recently passed.

#### 1. Agenda, Consent Calendar, and Minutes Approval (00:09:31 – 00:14:14)

Jennielynn Homes went over the agenda and clarified Zoom rules around public comment and Brown Act guidelines. Don Schwartz requested the Stability Vouchers Commitment Letter item be pulled from the Consent Calendar.

Public comment: None at this time.

Dennis Pocekay moved to approve the Consent Calendar with the suggested removal of the Stability Vouchers Committee Letter item for discussion later; seconded by John Moore.

Ayes: Ben Leroi, Jennielynn Holmes, Megan Basinger as proxy for Tom Schwedhelm, Dennis Pocekay, Chris Coursey, Margaret Sluyk, Chris Keys, Kathleen Pozzi, Jan Cobaleda-Kegler, Chessy Etheridge, Cheyenne McConnell, Don Schwartz, John Moore, Mark Krug, Madolyn Agrimonti, Stephen Sotomayor Noes: None Abstain: None

## The motion passed.

## 2. Stability Vouchers Committee Letter to HUD (00:14:15 – 00:19:42)

Don Schwartz opened the discussion. Rebecca Lane with the City of Santa Rosa provided additional information. Don Schwartz moved to send the letter to HUD of the CoC's intent to work with the PHAs in developing appropriate supportive services for the Stability Vouchers if they are secured; seconded by Madolyn Agrimonti.

#### Public Comment: None at this time.

Ayes: Ben Leroi, Jennielynn Holmes, Megan Basinger as proxy for Tom Schwedhelm, Dennis Pocekay, Chris Coursey, Margaret Sluyk, Chris Keys, Kathleen Pozzi, Jan Cobaleda-Kegler, Chessy Etheridge, Cheyenne McConnell, Don Schwartz, John Moore, Mark Krug, Madolyn Agrimonti, Stephen Sotomayor Noes: None Abstain: None Absent: Una Glass,

#### The motion passed.

3. CoC Board Representation on DHS' Director for Homelessness Interview Panel (00:19:43 – 00:30:16)

Tina Rivera, Director for the Department of Health Services, introduced Roy Dajalos, DHS Assistant Director, who shared the timeline for the recruitment of the DHS' Director for the Homelessness Services Division.

#### Public Comment: None at this time.

Chris Coursey moved to approve the CoC Board Chair and Vice Chair as panelists on behalf of the Coc Board for the Homeless Services Division Director first round interviews; Don Schwartz proposed a friendly amendment that would allow the Chair and Vice Chair to designate someone else if they are not available. Chris Coursey accepted the friendly amendment; motion seconded by Don Schwartz.

Ayes: Ben Leroi, Jennielynn Holmes, Megan Basinger as proxy for Tom Schwedhelm, Dennis Pocekay, Chris Coursey, Margaret Sluyk, Chris Keys, Kathleen Pozzi, Jan Cobaleda-Kegler, Chessy Etheridge, Cheyenne McConnell, Don Schwartz, John Moore, Mark Krug, Madolyn Agrimonti, Stephen Sotomayor Noes: None Abstain: None Absent: Una Glass,

#### The motion passed.

## 4. Reports from Lead Agency Staff (00:30:17 – 01:24:55)

- Karissa White reported that the annual application has been submitted, and she thanked the members of the Committee for their hard work.
- Dave Kiff provided an update on the MOU between the CoC Board and Lead Agency. Andrew Hening has been hired as a part-time consultant to work closely with the CoC Board and city officials to develop the MOU, which he hopes to bring a draft for review at the October meeting. Megan Basinger volunteered Tom Schwedhelm to participate on an Ad Hoc Committee to work with Andrew Hening; John Moore, Don Schwartz, Jennielynn Holmes, and Margaret Sluyk volunteered as well.
- Thai Hilton reported on some of the issues that have come up around supportive services and some potential solutions regarding Emergency Housing Vouchers.

## Public Comment: Dannielle Danforth

## 5. 2022 Point in Time Homeless Count Report (01:24:56 – 01:56:26)

Michael Gause introduced John Connery from Applied Survey Research then shared a detailed presentation on the Point-in-Time Count for 2022. Michael and John answered questions and received feedback from the Board.

Public Comment: Teddie Pierce

6. 10-Minute Break (01:56:43 - 02:10:36)

## A quorum was present.

#### 7. Word from the Street (02:10:37: - 02:25:23)

Chessy Etheridge spoke about the two sides of Section 8 Vouchers and the need for Navigators. Martha Cheever, CDC Leased Housing Manager, explained the lack of Navigators was due to funding.

Public Comment: Lynn Scuri, Dannielle Danforth

## 8. Homeless Service Provider Group Update (02:25:24 – 02:28:19)

Margaret Sluyk reported 50% participation by service providers on providing pay and benefits information, and they will be moving on to the analysis phase.

Public Comment: None at this time.

## 9. Reports from Standing Committees: (02:28:20 – 02:51:41

- Funding and Evaluation Committee: Teddie Pierce reported on their meeting in August. Andrew Hening is developing a spreadsheet that will bring together a concept of who is doing what around system rights and will present the model at the October meeting. Due to Andrew stepping down as Vice Chair, this position is now open.
- **Coordinated Entry Advisory Committee**: Thai Hilton reported the CEA Committee has recently approved the Rapid Rehousing and Permanent Supportive Housing Standards.

Public Comment: None at this time.

Mark Krug moved to approve the CEA Advisory Standards for Permanent Supportive Housing and Rapid Rehousing Programs; seconded by Dennis Pocekay.

Ayes: Ben Leroi, Jennielynn Holmes, Megan Basinger as proxy for Tom Schwedhelm, Dennis Pocekay, Chris Coursey, Margaret Sluyk, Kathleen Pozzi, Jan Cobaleda-Kegler, Chessy Etheridge, Cheyenne McConnell, Don Schwartz, John Moore, Mark Krug, Madolyn Agrimonti, Stephen Sotomayor Noes: None Abstain: None Absent: Chris Keys, Una Glass

## The motion passed.

- **Strategic Planning Committee**: Stephen Sotomayor reported they are currently working with Homebase on the final phase of the strategic planning process as well as the final stages of the stakeholder engagement.
- **HMIS Data Committee**: Daniel Overbury0Howland reported they are continuing its work on updating policies and documentation, which they hope to present to the Board at the October meeting.
- Lived Experience and Advisory and Planning (LEAP) Board: Rebekah Sammet shared most of their members are on standing committees to be able to offer their lived experience perspectives.

Public Comment: None at this time

# Quarterly Membership Meeting Agenda for October (02:51:42 – 02:54:09) Karissa White shared the agenda for the CoC Quarterly Membership on October 20, 2022, that

- CalFresh Application Training for Providers
- HUDs Equal Access Rule Training
- General Continuum of Care and Committee Updates
- Community Updates

include:

Public Comment: None at this time.

Chessy Etheridge moved to approve the agenda; seconded by Madolyn Agrimonti.

Ayes: Ben Leroi, Jennielynn Holmes, Megan Basinger as proxy for Tom Schwedhelm, Dennis Pocekay, Chris Coursey, Margaret Sluyk, Kathleen Pozzi, Jan Cobaleda-Kegler, Chessy Etheridge, Cheyenne McConnell, Don Schwartz, John Moore, Mark Krug, Madolyn Agrimonti, Stephen Sotomayor Noes: None Abstain: None Absent: Chris Keys, Una Glass

#### The motion passed.

#### 11. Review Agenda for October CoC Board Meeting (02:59:10 – 02:57:23)

The draft agenda for the October 26, 2022, was shown. Michael Gause requested an item be added for the Homeless Housing, Advocacy and Prevention HHAP 4 Application update. Jennielynn Holmes suggested moving the Homeless Service Provider Group update to earlier in the agenda.

Public Comment: None at this time.

#### 12. Board Member Questions and Comments (02:57:24 – 02:59:44)

John Moore suggested a different agenda format that would make it easier to reference a particular section of the agenda and all the information involved. He will send an example to Alea Tantarelli.

Public Comment: None at this time.

#### 13. Public Comment on Non-Agendized Items (02:59:45 - 03:00:11)

Public Comment: None at this time.

#### Meeting was adjourned at 3:55 p.m.

Item No:	3 (Consent Calendar)
Subject:	Summary of Follow-ups from the Previous Meeting(s)
Meeting Date:	October 26, 2022
Staff Contact:	Michael Gause, Ending Homelessness Program Manager, Michael.Gause@sonoma-county.org

#### Summary

At the previous meeting, CoC Board members and others asked for the Lead Agency staff to follow up on specific items. Staff summarized responses to present at the October 26<sup>th</sup> CoC Board meeting.

Recommended Action(s)

No recommended Action

#### Discussion

A summary of follow-ups from the previous meeting(s). At the previous meeting, CoC Board members and others asked for the Lead Agency staff to follow up on the following questions or comments.

- 1. Which providers are working with CalAIM? Michael to have met with providers and report back. This is in progress. A meeting with CalAIM will be set up in the coming weeks.
- 2. Engaging CoC Board in Measure O Notice of Funding Availability (NOFA) development The County has not yet made a decision about releasing a Measure O NOFA.
- 3. Housing Voucher Information. Staff was asked to follow up with information that shows (for the Sonoma County Housing Authority and the Santa Rosa Housing Authority) a summary/count by type of voucher by category and the number of vouchers that are not yet assigned as well as assigned but not yet leased. We were asked, too, to include information about how someone obtains a voucher and how the waitlist works.

#### **Voucher Process**

The process for issuing vouchers differs depending on the voucher type. Some vouchers use a waitlist, while others are referral based.

## Regular Housing Choice Voucher (HCV)

#### Sonoma County Housing Authority

Housing Authorities use a wait-list process to distribute vouchers. The Sonoma County Housing Authority (SCHA) uses a lottery system for their waitlist. There are 2,910 vouchers. Every 2-3 years, the SCHA opens their waitlist and accepts applications for the wait list. Applications are accepted for a 1–2-month period. When the application period is closed, the SCHA conducts a lottery where 500 names are selected at random and placed on the wait list. The SCHA then uses that list to make offers of assistance. Once all the individuals on the wait list have been offered service, the process is repeated. Currently the HCV wait list is closed.

<u>SCHA HCV Sub-Programs</u>. Note all the following programs utilize a portion of the SCHA's 2,910 HCVs.

- <u>CE Super Preference</u>. Up to 36 vouchers are available each year through this preference. These vouchers are designated for persons/households who are registered with CE and have a VI-SPDAT score of 7-11. Referrals MUST come through ETO/HMIS from Coordinated Entry.
- <u>Reentry Pilot Program</u>. 15 vouchers per year are available through December 31, 2022. This program provides housing assistance to individuals who are exiting incarceration and face other obstacles, including disabilities, in obtaining permanent housing. Referrals for this program come from Sonoma County Probation Department's contracted supportive services partner.
- <u>Family Unification Program</u>. The SC Housing Authority has been awarded 117 of these vouchers which are for youth transitioning out of the foster care system or for households whose only obstacle to regaining custody of their children is permanent housing. The SCHA partners with the Sonoma County Human Services Department on this program. SCHA receives referrals for the program from Human Services, the contracted supportive services partner.
- <u>Project Based Voucher Program.</u> 624 Project Based Vouchers either committed or in use. Vouchers in this program take rental assistance and apply it to a specific unit. Rental assistance is renewed to the unit when tenants move out with their tenant-based voucher. 307 PBV units under lease, 37 units under construction, 110 existing units coming on line by the end of 2022, 170 units in pre-construction

#### Santa Rosa Housing Authority (SRHA)

The City of Santa Rosa Housing Authority maintains a Waiting List for the general Housing Choice Voucher program. The Waiting List is generally open once every two years for one

month. Applicants are selected and randomly numbered through a lottery at each Waiting List opening. The applicants selected at each waiting list opening are assigned rank numbers which are after those who are already on the waiting list at the time of the opening. Currently the SRHA Waiting List is closed.

#### SRHA Sub-Programs

- <u>Project Based Voucher Program.</u> 399 Project Based Vouchers either committed or in use. 229 in existing projects, 73 in construction, 97 in pre-construction.
- <u>Limited Preference for Coordinated Entry:</u> 25 vouchers set aside specifically for CE referrals. None currently available.

Additional Special Voucher Programs

#### Mainstream Vouchers

The Sonoma County Housing Authority has been awarded 231 of these Mainstream Vouchers. These vouchers are specifically for non-elderly disabled individuals/households who are homeless, at risk of homelessness, or at risk of institutionalization. Referrals for this program come from a variety of supportive services partners including Coordinated Entry. There are currently 206 of these vouchers under lease and 87 voucher holders searching for housing.

#### Emergency Housing Vouchers (EHV)

The Sonoma County Housing Authority has been provided with 153 of these vouchers. The vouchers may only be used for persons experiencing homelessness, at risk of homelessness, victims of Domestic Violence, or survivors of Human Trafficking. There are currently 96 under lease and 69 additional people searching for housing.

The City of Santa Rosa Housing Authority (SRHA) was awarded 131 vouchers, 71 are leased, 28 are searching for housing and 31 are in process.

Currently no referrals are needed for the County or City EHV program.

#### Veterans Affairs Supportive Housing (VASH)

VASH vouchers are intended for homeless veterans. Referrals for these vouchers come to the Housing Authority from the local VA Office. The VA also provides supportive services for the clients of this program.

The Sonoma County Housing Authority has 15 VASH Vouchers. For the SCHA there are currently 12 vouchers under lease and three voucher holders seeking housing.

The SRHA has 419 VASH vouchers. Of those, 371 are leased and three are currently searching for housing.

Program	# of Vouchers	Vouchers Under Lease	Voucher Holders Searching for Housing
HCV	2910	2723	344
Mainstream	231	206	87
EHV	153	96	69
VASH	15	12	3

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And for the Santa Rosa Housing Authority:

Program	# of Vouchers	Vouchers Under Lease	Voucher Holders Searching for Housing
HCV	1496	1268	71
Mainstream	0	N/A	N/A
EHV	131	70	28
VASH	419	371	3

- 4. Housing Heroes Information The Sonoma County Housing Authority (SCHA) in partnership with the Santa Rosa Housing Authority (SRHA) has worked on a "Housing Heroes" Campaign to encourage more property owners to consider renting to persons with Housing Choice Vouchers (HCVs). The SCHA has about 300 house-ready clients who hold vouchers but have been unable to find property owners willing to rent to them. More information about the campaign is <u>here</u>. In short, our clients with housing vouchers:
  - o Bring guaranteed rental payments to property owners
  - Can be excellent tenants, as they both pay rent and know how important it is to follow lease regulations and rules (violations could result in the clients losing their vouchers entirely – a big consequence).

If we as a region are not successful in placing these clients, we all risk losing the vouchers to other regions that may be more successful in what's known as the "lease – up rate."

The campaign continues through the end of the year at least, with new videos and examples of where tenants and property owners have forged good relationships. City CoC members are encouraged to amplify the Public Housing Authority messages in their own social media.

Item No:	4 (Consent Calendar)
Subject:	New Capital Projects in Sonoma County's System of Care
Meeting Date:	October 26, 2022
Staff Contact:	Dave Kiff, Interim Director of the Community Development Commission Dave.Kiff@sonoma-county.org

#### Summary

This item is a summary of pending additions to the System of Care that relate to Project Homekey (Rounds #1 and #2)

**Recommended Action(s)** No recommended Action – Update Only

#### Discussion

In upcoming months, the Sonoma County System of Care will see these additions or enhancements within the interim or permanent housing inventories:

- Rohnert Park's **Labath Landing.** Construction is complete at this interim housing facility, as it plans to start housing up to 60 persons (primarily from the Roberts Lake encampment) as soon as October 24, 2022. Partners are the City of Rohnert Park, Dignity Moves, and HomeFirst.
- Healdsburg's **L&M Village.** Construction is nearly complete at this interim housing site, as it plans to start housing up to 21 persons in November 2022. Partners are the City of Healdsburg, Burbank Housing, and Reach for Home.
- Petaluma's **The Studios at Montero Place.** Construction is underway at this permanent supportive housing site, as it plans to start housing up to 60 persons later in the Fall, 2022. Partners are the City of Petaluma, Burbank Housing, and COTS.
- **George's Hideaway** in Monte Rio. Construction is still in the design and contracting phase for this permanent supportive housing site. It will house 21 persons and should open in Fall 2023. Partners are the County of Sonoma and West County Community Services.

- The Commons in Santa Rosa. St Vincent de Paul and the City of Santa Rosa received Homekey-2 funding for the former Gold Coin motel. This is a relatively recent award, with more details to be determined.
- **Mickey Zane Place.** This County-owned former hotel (the Hotel Azura) in Santa Rosa received Homekey-1 funding and served as an alternative care site for persons medically fragile during the COVID-19 pandemic. It is planned to be converted to permanent supportive housing for up to 44 higher-needs clients. The County recently issued an RFP to coordinate construction of this facility into high-needs PSH (which includes installing kitchen facilities and addressing fire safety needs). DEMA helps operate this facility today.
- Elderberry Commons. This County-owned former hotel (the Sebastopol Inn) in Sebastopol received Homekey-1 funding and served as an alternative care site during the COVID-19 pandemic. It is planned to be converted to permanent supportive housing for up to 42 clients. The County recently issued an RFP to coordinate construction (and later management) of this facility into PSH (which includes addressing fire safety needs). DEMA helps operate this facility today.
- **Caritas Center.** Catholic Charities of Santa Rosa recently opened parts of the \$53.2 million Caritas Center, a key component of the larger Caritas Village in Santa Rosa. Caritas Center includes a drop-in day services center, a medical clinic (open now), a family shelter (with 192 beds), and shelter for homeless individuals, and 38 recuperative care beds. Later, the Caritas Homes component at Caritas Village will add 128 units of low income and supportive housing. Partners are Catholic Charities, Burbank Housing, State HCD (via Homekey and other funds), Santa Rosa Community Health Centers, Providence Northern California, City of Santa Rosa, the Sonoma County CDC, and many others. CC of SR expects to begin housing persons in Fall 2022.

Item No:	5 (Consent Calendar)
Subject:	Built for Zero update
Meeting Date:	October 26, 2022
Staff Contact:	Thai Hilton <a href="mailto:thilton@sonoma-county.org">thilton@sonoma-county.org</a>

#### SUMMARY

Built for Zero (BFZ) is an initiative of more than 90 communities that are developing strategies to measurably end homelessness. Sonoma County is participating in a "Foundations for Results" cohort of the initiative. A local improvement team has been formed. The short-term goal of this group is to develop a real by names list (BNL) for the community. This team has been attending regular meetings to hear about best practices and receive guidance. Additionally, the improvement team met to complete the community score card which outlines the suggested actions to achieve a real BNL. This work revealed that the community has a lot of work to do to achieve the foundational steps of the BFZ initiative.

Currently, the local improvement team is working on a plan to pilot a sub-regional BNL and outreach services in the Sonoma Valley. The improvement team has prepared a BNL template that will be used to develop a Sonoma Valley BNL. Once completed, this effort will expand to other subregions of the county.

#### **RECOMMENDED ACTION(S)**

None



Item No:	6
Subject:	Report from the Lead Agency – CoC Board Elections Timeline & Board Diversity
Meeting Date:	October 26, 2022
Staff Contacts:	Dave Kiff, Interim Executive Director, <a href="mailto:Dave.Kiff@sonoma-county.org">Dave.Kiff@sonoma-county.org</a>

#### SUMMARY

A special CoC Board Election meeting will be held on December 15, 2022 from 1:00-4:00 pm via Zoom to elect CoC Board members to fill three seats: Lived Experience (Transitional Age Youth); Homeless Advocacy Organization; and At Large. All three seats have two-year terms. Additionally, the Lived Experience & Advisory Planning (LEAP) Board will be electing a representative to fill the Adult Lived Experience Seat prior to the January 25, 2023, CoC Board Meeting. Ideally this election would be an opportunity to improve the Homeless System of Care's diversity.

#### **RECOMMENDED ACTION(S)**

None – informational item only.

#### DISCUSSION

The likely election timeline is here:

CoC Board Election Timeline	
CoC Staff to email and post list of CoC voting members by November 1, 2022 and request any	
new applications be received by November 23, 2022. (This is so if there is an issue with voting	
member applications, there is time for it to go to the CoC Board prior to the election)	
CoC Board nominations to be solicited (emailed and posted) by November 17, 2022 (4 weeks	
prior to election) and due on <b>December 7, 2022</b> (7 working days preceding election).	
List of candidates and their applications will be published via the CoC website by Monday,	
December 12, 2022 (3 working days prior to the election)	
Election: Special CoC Membership Meeting: Dec 15, 2022	
<b><u>3</u></b> seats to be voted on by CoC Voting Members:	
1) Lived Experience (Transitional Age Youth)	
2) Homeless Advocacy Organization	
3) At Large (one of the three seats)	

Lived Experience Advisory Board (LEAP) elects new representative for the Adult Lived Experience Seat: **Date TBD** 

First Meeting with newly elected and appointed Coc Board members: January 25, 2023

**About Diversity and Representation on the CoC Board.** Importantly, HUD continues to encourage us to significantly improve the Homeless Response System experience and the housing stability outcomes for Black, Brown, Indigenous, and all people of color. As a reminder from the 2022 Point in Time Count:

- 67% of respondents identified as White
- 25% identified as Hispanic/Latino
- 13% identified as multi-racial
- 8% identified as Black or African American
- 9% identified as American Indian or Alaska Native

And in the general population of Sonoma County<sup>1</sup>....:

- 65.6% identify as White/Non-Hispanic
- 26.5% identify as Hispanic/Latino
- 4.9% identify as Asian or Pacific Islander
- 2.1% identify as Black or African American
- 0.9% identify as American Indian or Alaska Native

As readers can see, Black and American Indian or Alaska Native Sonoma Countians are overrepresented in our homeless population and appear to be underrepresented in leadership positions within the System of Care.

Further, in the pending CoC Homeless Strategic Plan, Strategy 3.7 says to "Eliminate disparities in access, service provision, and outcomes in the Homeless Response System." **Component 3.7g**, a proposed Year 1 Priority, asks that the CoC "Increase the number of BIPOC (Black, Indigenous, and People of Color) individuals on the CoC Board and throughout the System of Care" and to "update the Charter to include designated seats for BIPOC members."

Members of the CoC Board may wish to think about and pursue ways that Lead Agency staff, Board members themselves, and others can achieve greater diversity via this election and other System of Care roles in the months to come.

<sup>&</sup>lt;sup>1</sup> Source: U.S. Department of Health and Human Service, Centers for disease Control and Prevention, National Center for Health Statistics, Bridged-Race Population Estimates 2016; US Census Bureau, ACS 1 Year Est. 2016, Table: B01002B-I

Item No:	8
Subject:	MOU between the CoC Board and the Lead Agency Provider
Meeting Date:	October 26, 2022
Staff Contact:	Dave Kiff, Interim Executive Director, Community Development Commission Dave.kiff@sonoma-county.org

#### Summary

In recent weeks, consultant Andrew Hening has been working with representatives from cities, the County, and the CoC Board to develop one or more Memoranda of Understanding (MOUs) that would outline the roles, duties, and responsibilities of the Lead Agency team who would staff the Continuum of Care and its Board, committees, work groups, and contract obligations (among other things).

The CoC Board directed that Andrew check in with a Board ad hoc committee consisting of John Moore, Tom Schwedhelm, Jennielynn Holmes, Don Schwartz, and Margaret Sluyk. This meeting was set for Thursday, October 20<sup>th</sup>.

#### Recommended Action(s)

No recommended action – Andrew and Dave will give an update on progress to date regarding the MOU/MOUs.

Item No:	9
Subject:	Homeless Housing Advocacy & Prevention (HHAP-4) Draft Application
Meeting Date:	October 26, 2022
Staff Contact:	Michael Gause, Ending Homelessness Program Manager Michael.Gause@sonoma-county.org

#### Summary

In this item, staff requests review of and public input on the State of California Homelessness Housing Advocacy and Prevention (HHAP) 4 Data Tables and application for funds. The application is due November 30, 2022, and the first five data tables are required to be publicly noticed prior to application submission.

#### **Recommended Action(s)**

Review and approve the draft HHAP-4 Data Tables and invite public comment.

#### Discussion

The State of California Interagency Council on Homelessness (ICH) released a Notice of Funding Availability (NOFA) for State Homelessness Housing Assistance and Prevention (HHAP) Round 4 program funding on September 29, 2022. The State has yet to release funding amounts for the Sonoma County Continuum of Care (CoC) and the County of Sonoma, but it the amounts are anticipated to be between \$8.5-9 million total (roughly even amounts).

Previously, the CoC and County of Sonoma received a combined \$8,539,024.26 in funding in 2022 for HHAP-3. Of this, \$4,416,736.69 was allocated to the CoC and \$4,122,287.57 was allocated to the County of Sonoma. As with HHAP-3, the County and CoC will apply jointly for

The linked data tables, goals, and proposed outcomes are required to be publicly noticed and approved by the Continuum of Care Board as the primary applicant. The tables provide a broad overview of current system performance with baseline data from the California HDIS (Homeless Data Integration System) as well as proposed goals and outcomes from utilization of HHAP-4 funds. The goals and outcomes are largely unchanged from HHAP-3 and may be revised prior to submission to the State. Approval of the data tables ensures a timely submission for the Homeless Action Plan and receipt of HHAP-4 funds for FY 2022-2023. CoC HHAP-4 funds (likely

approximately \$4-4.5 million) will be included in the forthcoming Countywide NOFA for homeless funding to be disseminated in FY 2023-2024.

Find HHAP 4 data tables 1-5 here: https://share.sonoma-county.org/link/heiTePYXr2M/

Item No:	10
Subject:	Community Development Block Grant Cares Act (CDBG-CV) and Low-and Moderate Income Housing Asset Fund (LMIHAF) Funding Recommendations
Meeting Date:	October 26, 2022
Staff Contact:	Veronica Ortiz-De Anda, Community Development Associate, 707-565-7520

#### BACKGROUND - CONSOLIDATED PLAN AND ANNUAL ACTION PLAN

The Board of Supervisors approved the Sonoma County 2020 Consolidated Plan on June 2, 2020. The Consolidated Plan is a document required by the United States Department of Housing and Urban Development (HUD) for jurisdictions that receive annual allocations of CDBG, HOME Investment Partnership Program (HOME), and Emergency Solutions Grant (ESG) funding, as well as supplemental CDBG-CV and ESG-CV funds provided under the *Coronavirus Aid, Relief, and Economic Security Act* (CARES Act), and supplemental HOME-ARPA funds provided under the *American Rescue Plan Act*. The Consolidated Plan spans a five-year planning period and lays out local rationales and priorities for the use of the subject federal grant funds to benefit lower-income residents.

For Sonoma County, the entitlement entity that is eligible to receive both the annual and supplemental CDBG, HOME, and ESG allocations is the "Urban County", which is established through a Joint Powers Agreement (JPA) between the County of Sonoma and the cities/town of Cloverdale, Cotati, Healdsburg, Rohnert Park, Sebastopol, Sonoma, and Windsor. The Community Development Commission (CDC) is the designated fiscal agent under the JPA and administers all aspects of the Urban County program using these funds from HUD.

These federal funds are administered according to the HUD regulations and guidelines, which require these funds to be included in each Annual Action Plan (Action Plan) of the 5-year Consolidated Plan, or amendments to the Action Plans. The Action Plan includes funding recommendations for use of CDBG, HOME, ESG and other similar federal funds such as CDBG-CV and ESG-CV.

In addition to the Citizen Participation Plan process required and implemented in the development of the Action Plan or amendments to the Action Plan, the process for making funding recommendations for public services specifically related to homelessness, homelessness prevention and rapid rehousing includes consultation with the Continuum of Care (CoC). The CoC funding recommendations are then considered by the Community Development Committee (CD Committee) and Cities and Towns Advisory Committee (CTAC) for inclusion in the Action Plan funding recommendations to the Board of Supervisors.

In FY 2020-2021 and FY 2021-2022, federal ESG was allocated in conjunction with other local services contracts by the Continuum of Care (CoC). ESG funds were utilized to achieve stable funding with combined sources. In FY 2022-2023, federal ESG was recommended to support homeless shelters and homeless services and will be coordinated with other currently funded homeless services contracts as previously recommended by the CoC. The federal ESG funds were included in the FY 2022-2023 (FY 2022) Action Plan, prepared by the CDC. The FY 2022 Action Plan was approved by the Board of Supervisors on May 10, 2022 and subsequently submitted to HUD for their approval.

#### Low-and Moderate Income Housing Asset Fund (LMIHAF)

LMIHAF set aside funds of up to \$250,000 are associated with the annual allocation for homelessness prevention and rapid rehousing activities. LMIHAF funds are derived from revenue received by the CDC as the Housing Successor entity and can only be used to support homelessness prevention and rapid rehousing services. This program is administered in conjunction with the federal fund sources.

## ACTION PLAN SUBSTANTIAL AMENDMENT

There are CDBG-CV and LMIHAF funds currently available for allocation, which may include public services specifically related to homelessness, homelessness prevention and rapid rehousing. Both funding sources will be distributed through a Notice of Funding Availability (NOFA) process to seek qualified applicants with eligible activities. On August 30, 2022, the CDC published a NOFA, which included \$1.37 million of available CDBG-CV funds and \$250,000 LMIHAF funds. The NOFA can be viewed here: <a href="https://sonomacounty.ca.gov/mid-year-notice-of-funding-availability-(fy-2022-2023">https://sonomacounty.ca.gov/mid-year-notice-of-funding-availability-(fy-2022-2023)</a>.

Applications are due to the CDC office on Thursday, October 20, 2022. If applications are received for CDBG-CV and/or LMIHAF funds, staff will present these to the CoC at its regular meeting on October 26, 2022. An addendum will be made to the agenda accordingly to include any staff reports and application materials for the CoC's review.

CDC staff will prepare funding recommendation summary reports based on the eligibility of the applicant and proposed activities for the CoC consideration and funding recommendations. The CoC funding recommendations will then be considered by the CD Committee and CTAC for inclusion in the FY 2022 Action Plan Substantial Amendment funding recommendations to the Board of Supervisors, after a 30-day public comment period.

Item No:	13
Subject:	CoC Strategic Planning Presentation
Meeting Date:	October 26, 2022
Staff Contact:	Alea Tantarelli, <u>Alea.tantarelli@sonoma-county.org</u>

#### SUMMARY

Strategic Planning Consultant Homebase is presenting the updated Goals, Strategies and Actions for the County-wide strategic plan. These integrate the feedback from the deep dive sessions and previous strategic planning committee sessions. Homebase will also discuss the timeline and next steps for adoption of the plan.

#### **RECOMMENDED ACTION(S)**

1. none

#### DISCUSSION

The Goals, Strategies, and Actions drive the strategic planning process and ensuring these components accurately represent the needs of Sonoma County is pivotal to the success of the plan. Discussion of the timeline and next steps for adoption of the plan confirms that the plan can move forward, and that it will be responsive to local needs as it is finalized.

The Goals, Strategies, and Actions outlined were identified through a comprehensive process of data analysis and stakeholder engagement. Each item listed was directly identified in response to needs that emerged through this process. Some examples of sources include, but are not limited to:

- HHAP 3 data analysis, including racial equity data analysis
- Review of HMIS and HDX data
- Focus groups and interviews with a diverse set of stakeholders representing both those providing support through homeless services, as well as those receiving support through homeless services
- Content-specific Deep Dive Sessions, and
- Strategic Planning Committee meetings and CoC Board meetings

#### ATTACHMENTS:

A: Goals, Strategies, Actions document B: Summary PPT

#### Attachment A

## SONOMA COUNTY COC STRATEGIC PLAN – DRAFT GOALS AND STRATEGIES

	GOAL 1: MORE HOUSING & PREVENTION         Create comprehensive housing interventions, from prevention to permanent housing, to reduce inflow into homelessness and increase pathways to housing stability         Strategy 1.1: Preserve housing for those at risk of homelessness by investing in prevention and problem-solving interventions         Strategy 1.2: Enhance and invest in non-congregate interim housing options         Strategy 1.3: Develop sustainable permanent housing solutions
	GOAL 2: STRONGER SUPPORTIVE SERVICES Build supportive services capacity to meet the complex and diverse needs of people experiencing homelessness in the Sonoma County region Strategy 2.1: Standardize minimum compensation and training. Provide model wellness
	Strategy 2.1:       Strategy 2.1:       Strategy 2.2:       Significantly expand mental and physical healthcare services for individuals experiencing homelessness, including those living in supportive housing         Strategy 2.3:       Improve services dedicated to the unique needs of specific populations         Strategy 2.4:       Coordinate cross sectors of healthcare, behavioral health, and homeless response         Strategy 2.5:       Develop, expand, and coordinate interventions to support those living on the street, in encampments         Strategy 2.6:       Create meaningful pathways to economic self-sufficiency
	GOAL 3: OPERATE AS ONE AGENCY Work across the Sonoma County region to develop shared priorities, aligned investments, seamless coordination and equitable solutions to address homelessness
<b>9</b> -9	Strategy 3.1:Develop a countywide coordinated funding process to use available resources efficiently and effectively to drive local priorities and ensure accountabilityStrategy 3.2:Prioritize funding to entities that align with local priorities to promote equity, center the voices of people with lived experience, and utilize evidence-based practicesStrategy 3.3:Ensure the voices of individuals with lived experience of homelessness are
	<ul> <li>consistently incorporated into planning and evaluating the homeless response system</li> <li>Strategy 3.4: Improve systemwide and project level data collection, performance, and reporting</li> <li>Strategy 3.5: Engage the community in the effort to end homelessness in Sonoma County</li> <li>Strategy 3.6: Improve transparency and effectiveness of the Coordinated Entry System (entry points of the homeless response system)</li> <li>Strategy 3.7: Eliminate disparities in access, service provision, and outcomes in underserved and overrepresented subpopulations in the homeless response system</li> </ul>



#### SONOMA COUNTY COC STRATEGIC PLAN – DRAFT GOALS, STRATEGIES & ACTION STEPS

#### GOAL 1: MORE HOUSING AND PREVENTION.

Create comprehensive housing interventions, from prevention to permanent housing, to reduce inflow into homelessness and increase pathways to housing stability

## STRATEGY 1.1: PRESERVE HOUSING FOR THOSE AT RISK OF HOMELESSNESS BY INVESTING IN PREVENTION AND PROBLEM-SOLVING INTERVENTIONS

		In process / Year 1 Priority	Funding Landscape	Owner (s)
1.1a:	Develop brief and needs-based countywide assessment tool (aka a "prevention version of the VI-SPDAT") for rapid provision of financial assistance to prevent homelessness/evictions.	Year 1 high priority	TBD as to the development of the tool.	Coordinated Entry Advisory Committee w/SoCo HSD.
	Note: Where rapid provision of assistance is warranted, \$\$ should be able to be used by CE Access Points as well. Important to establish benchmarks as well as what's happening now (an inventory of prevention activities) in the county.			
1.1b:	Identify and develop flexible cash assistance grants/short-term subsidies to pay for rental and utility arrears, security deposits that can be kept, move-in expenses, reunification, relocation, and transportation	(in process) Year 1 high priority	Some funding = County BOS has allocated about \$800,000 in ARPA funds for rapid financial assistance.	Lead agency in partnership with So Co DHS, HSD, PHAs.
1.1c:	Leverage 211 to make quick connections for prevention assistance to address time sensitive cases	(in process) Year 1 high priority	County has allocated \$250,000 in ARPA funds to improve the 2-1-1 connection.	Lead agency in partnership with So Co HSD.
1.1d:	Co-locate prevention resources at existing entry points to the homeless response system, including CE access points, shelters, and benefits offices			
	Ensure adequate legal assistance is available to provide eviction prevention services to the average number of granted evictions per month that lacked legal aid support	(in process)		
1.1f:	Develop landlord and family mediation services to preserve existing housing or support reunification			
1.1g:	Offer financial counseling/budgeting classes to support those who are at risk of homelessness or newly housed (attach to those receiving financial assistance)	(in process) Year 1 high priority	Possibly HHAP	Service providers, could do



				coordinated training
1.1h:	Expand housing problem-solving training to support households in identifying choices and solutions to quickly end their housing crisis	Year 1 high priority	Possibly HHAP, Cal-AIM and Cal- AIM capacity building grants	CE Staff (HomeFirst) to lead this training
1.1i:	Seek legal reforms to enhance tenant protections			

## STRATEGY 1.2: ENHANCE AND INVEST IN NONCONGREGATE INTERIM HOUSING OPTIONS

		In process / Year 1 Priority	Funding Landscape	Owner (s)
1.2a:	Prioritize existing and new funding sources to increase existing shelter operations' capacity to create additional private and non-congregate spaces (e.g., privacy barriers, smaller sleeping pods, sober living rooms)	Year 1 high priority	HHAP, HHIP, MHSA (?), city and county discretionary funds.	Lead agency w/DHS, BOS, CoC Board, existing shelter providers
1.2b:	Earmark new funding to develop non-congregate interim housing such as shelters, tiny homes, mobile homes, trailers, RVs Note: Ideally we'd be able to direct EHV holders from these sites to open them up as long as we have supportive services to back up the EHV placements.	Year 1 high priority	County discretionary funds, Encampment Resolution Funds, city discretionary funds.	Lead agency with Board of Supervisors and cities.
1.2c:	Assess the need for medical respite/recuperative care and identify funding to reduce the strain on shelters/interim housing options Note: leverage some level of preference placement for these beds if there is funding from hospitals.	Year 1 high priority	Possible partnership with hospitals/health care system	Partnership with hospitals/health care system
	Scale up (or secure new) Safe Parking sites, inclusive of services, security, and sanitation	Year 1 high priority	County discretionary funds, Encampment Resolution Funds, city discretionary funds.	Lead agency with Board of Supervisors and cities
	Expand pet-friendly interim housing options Increase involvement of people with lived experience in operation, support and outreach at interim housing sites.	(in process) Year 1 high priority	Current funding is County ARPA funds for the WCCS program – expansion would be via HHAP, HHIP.	LEAP Board and WCCS peer support pilot.
1.2g:	Secure appropriate interim housing for families with children and unaccompanied youth			



1.2h:	Require all renewing and newly contracted shelter providers to adhere to Housing First principles and provide Housing-Focused Case Management (must be a funded mandate that includes operations and supportive services)	Year 1 high priority	Lead Agency
	Note: Need to have a discussion & agreement as a System as to what Housing First means.		

#### STRATEGY 1.3: DEVELOP SUSTAINABLE PERMANENT HOUSING SOLUTIONS

1.3a:	Advocate that new housing developments in the	In process / Year 1 Priority	Funding Landscape	Owner (s)
	County include units dedicated to those experiencing homelessness as long as strong supportive services are provided.			
1.3b:	Purchase or master lease non-congregate sites for Permanent Supportive Housing to ensure the County or local governments control housing stock (i.e., Homekey)	Year 1 high priority	HHIP, Homekey, HHAP, Encampment Resolution Fund awards, city and county discretionary sources.	Lead agency, CDC, DHS, city partners.
1.3c:	Continue work to align polices and preferences of Housing Authorities in the County to create "Move On" initiatives that will free up space in supportive housing	(In Process) Year 1 high priority	where available, PHA administrative dollars.	PHAs with CoC Support.
1.3d:	Require supportive housing providers to secure and work with property management companies that will align with Housing First programming and use eviction as the tool of last resort			
1.3e:	Reduce barriers and time taken to secure permits for affordable housing development	(In process)		
1.3f:	Increase funding for capital development given cannot carry debt in permanent supportive housing projects			
1.3g:	Explore leveraging housing vouchers (esp PBVs) to create more supportive housing			PHAs with CoC Support
	Invest in and assign housing navigators to households receiving vouchers (e.g., EHV)			
<u>1.3i:</u> 1.3j:	Increase shared and community housing options Develop a regional strategy to ensure surplus public land be used for permanent supportive housing or for very low-income housing at the lowest thresholds	(In Process)		



1.3k:	Work with local jurisdictions to increase the number of very low income to extremely low- income units required through their inclusionary housing programs and/or regional housing needs allocations that can be accessed for permanent supportive housing	Year 1 high priority	County BOS has allocated \$\$ to Gen Housing to support pro- housing designations across Sonoma County	Generation Housing (Lead) with CDC, BOS, and city councils.
1.3I: 1.3m:	Develop more individual units in conjunction with intensive case management services to safely house individuals who have substance abuse and mental health challenges, have a recent history of harming others, and who want low barrier housing Dedicate an appropriate amount of resources for recovery housing, proportionate to local need/demand.			

#### **GOAL 2: STRONGER SUPPORTIVE SERVICES**

## Build supportive services capacity to meet the complex and diverse needs of people experiencing homelessness in the Sonoma County region

## STRATEGY 2.1: STANDARDIZE MINIMUM COMPENSATION, TRAINING, AND WELLNESS PRACTICES FOR HOUSING AND SUPPORTIVE SERVICE PROVIDERS

2.1a:	Establish minimum compensation needs for front line staff to maintain their own housing stability within the county and increase through amended/new grant awards. <i>Cities may wish to</i> <i>consider Living Wage Ordinances</i> . <i>Note: This may reduce capacity in short-term,</i> <i>especially when done in conjunction with 2.1b. May</i> <i>also conflict with 2.1b. For example, using existing</i> <i>funding sources to increase wages may reduce</i> <i>funding available to reduce case loads.</i>	In process / Year 1 Priority Year 1 high priority	Funding Landscape Funding sources may be HHIP, HHAP, Cal-AIM.	Owner (s) Service Providers Roundtable to coordinate.
2.1b:	Modify case management/staffing caseload ratios based on the acuity of the population served (i.e., higher acuity results in lower caseloads, 1:10 for complex behavioral and health needs, caseloads 1:17 or 1:25 for other program types/care	Year 1 high priority	Existing sources include, HHAP, HHIP, Continuum of Care NOFA; CalAim	Service Providers Roundtable should develop proposals.



	environments) and fund any gaps in staffing that result		
	Note: This may reduce capacity in short-term, especially when done in conjunction with 2.1a. May also conflict with 2.1a. For example, using existing funding sources to modify case loads may reduce funding available to increase wages.		
2.1c:	Provide annual and ongoing training opportunities for free to service providers to equip staff to meet the needs of their complex caseloads, including Trauma-informed care, housing-focused case management, Psychosocial Rehabilitation, and culturally competency		
2.1d:	Create model policies and procedures for service providers that promote staff wellness at the organizational level and fund necessary supports including training, consultation, and time off		
2.1e:	Ensure providers are equipped with safety plans and adequate security personnel to handle emergencies such as violence or medical crisis		

## STRATEGY 2.2: SIGNIFICANTLY EXPAND MENTAL AND PHYSICAL HEALTHCARE SERVICES FOR INDIVIDUALS EXPERIENCING HOMELESSNESS, INCLUDING THOSE LIVING IN SUPPORTIVE HOUSING

		In process / Year 1 Priority	Funding Landscape	Owner (s)
2.2a:	Expand use of multidisciplinary teams for both outreach and housing (including, for example, inRESPONSE and ACCESS Sonoma/IMDT) to provide regular and ongoing roving care to interim housing sites and encampments to ensure continuity of engagement and support across the countywide geography. Consider different model that expands into Assertive Community Treatment (ACT) program	Year 1 high priority	MHSA, Measure O (Category four – Behavioral Health), City funding via MOU that delineates services.	DHS, county safety net teams and city teams.
2.2b:	Fund at least 1 position at all interim and permanent supportive housing sites (dedicated to people experiencing homelessness) that is trained to provide physical health support (e.g., nurse, paramedic)			
2.2c:	Fund at least 1 position at all interim and permanent supportive housing sites (dedicated to people experiencing homelessness) that is trained to provide mental health and substance abuse support (e.g., LCSW, LMFT)			
2.2d:	Increase the availability of detox and substance abuse services, including on site AA and NA groups	Year 1 high priority	Mental Health Services Act	DHS



		funding, Measure O	
2.2e:	Provide ongoing medication management services to residents of shelters and supportive housing sites		
2.2f:	Leverage the requirement in No Place Like Home funding that the County committed to providing mental health supportive services to the tenants of the supportive housing development for at least 20 years		
2.2g:	Ensure accountability with Measure O and its continuity beyond 2030		

# STRATEGY 2.3 IMPROVE SERVICES DEDICATED TO THE UNIQUE NEEDS OF SPECIFIC POPULATIONS

		In process / Year 1 Priority	Funding Landscape	Owner (s)
2.3a:	Develop and ensure system connection with services for those with long term learning disabilities		County ARPA Funds (funds assigned for Front End Assessment implementation)	CoC/Consultant assistance
2.3b:	Develop and ensure system connection with services for older adults who are aging/experiencing dementia	Year 1 high priority	County ARPA Funds (funds assigned for Front End Assessment implementation)	County HSD w/Lead Agency/CoC Board, Public Defender, hospitals; CoC/Consultant assistance
2.3c:	Develop and ensure system connection with services for transitional-aged youth (TAY)		County ARPA Funds (funds assigned for Front End Assessment implementation)	County HSD w/Lead Agency/CoC Board, consultant assistance



## STRATEGY 2.4 COORDINATE CROSS SECTORS OF HEALTHCARE, BEHAVIORAL HEALTH, AND HOMELESS RESPONSE

#### ACTION STEPS

	In process / Year 1 Priority	Funding Landscape	Owner (s)
<b>2.4a:</b> Secure a neutral facilitator to bring County and sector leaders together to align services, funding, and goals	(in process) (possible Year 1 Priority)	County ARPA Funds (Front End Assessment implementation)	CoC/Consultant assistance
<b>2.4b:</b> Create system mapping that guides the path for individuals experiencing homelessness through intake, referral, and placement into the various sectors – with the goal of creating a more streamlined and efficient process	Possible Year 1 priority)	County ARPA Funds (Front End Assessment implementation)	CoC/Consultant assistance
<b>2.4.c:</b> Identify need for care facilities (inc. skilled nursing, memory care, inpatient psychiatric, crisis residential, crisis stabilization & social rehabilitation) based on current capacity			

## STRATEGY 2.5: DEVELOP, EXPAND, AND COORDINATE INTERVENTIONS TO SUPPORT THOSE LIVING ON THE STREET, IN ENCAMPMENTS

		In process / Year 1 Priority	Funding Landscape	Owner (s)
2.5a:	Ensure outreach providers are contracted to provide services with dignity and respect and coordinate subregionally to achieve the goals of Built for Zero (look to Los Guilicos Village, West County Services, COTS shelter)	(in process) Year 1 high priority		CE and BFZ team implementors.
2.5b:	Provide 24-7 locations equipped with bathrooms, laundry, showers, phone charging, and Wi-Fi services			
2.5c:	Identify and support safe sleeping sites, providing daily outreach, case management, CE assessment, and sanitation services			
2.5d:	Coordinate with law enforcement and 211 to establish a policy that ensures nonviolent calls for service are handled by homeless outreach/behavioral health workers			



Draft for Discussion and Public Comment, revised Oct 17, 2022

2.5e:	Identify liaisons/advocates for those living	(in process)	Existing resources	Subregional
	unsheltered to coordinate with law enforcement or	Year 1 high	for those who	Coordinators
	local government entities	priority	already have	in cities
			coordinators	
			(Petaluma, SR, RP,	
			North Co,	
			Sebastopol) but	
			shortfall in	
			Sonoma/Sonoma	
			Valley. Need for	
			financial support	
			in West County	
			(maybe w/County	
			\$\$ support for	
			unincorporated).	

#### STRATEGY 2.6 CREATE MEANINGFUL PATHWAYS TO ECONOMIC SELF-SUFFICIENCY

		In process / Year 1 Priority	Funding Landscape	Owner (s)
2.6a:	Increase resource information for residents to increase income (via 211)	(in process) Year 1 high priority	County ARPA Funding	Sonoma County, 2-1- 1, DHS/EH Team
2.6b:	Establish a peer navigator pilot (to assist with navigation to supportive services/resources	(in process) Year 1 high priority	County ARPA Funding	Lead Agency Team w/key service provider (eg WCCS).
2.6c:	Establish a countywide SSI advocacy program	(in process) year 1 high priority	Possibly Sonoma County's (overall) 5-year Strategic Plan allocations	DHS and HSD
2.6d:	Increase employment and training opportunities for homeless adults	(in process)	Funding TBD – Explore whether Job Link may cover growth costs.	HSD and Job Link.



#### **GOAL 3: OPERATE AS ONE AGENCY**

# Work across the Sonoma County region to develop shared priorities, aligned investments, seamless coordination and equitable solutions to address homelessness

# STRATEGY 3.1: DEVELOP A COUNTYWIDE COORDINATED FUNDING PROCESS TO USE AVAILABLE RESOURCES EFFICIENTLY AND EFFECTIVELY TO DRIVE LOCAL PRIORITIES AND ENSURE ACCOUNTABILITY

#### **ACTION STEPS**

3.1a:	Develop a shared service vision and procurement (consistent with established procurement rules) process when funding opportunities within the	In process / Year 1 Priority	Funding Landscape	Owner (s)
	county that can be received and awarded by multiple jurisdictions (i.e., County, CoC, Housing Authority)			
3.1b:	Task and provide funding for the CoC Board and the CoC Strategic Planning Committee to monitor and report on the progress of Plan implementation and advise the Board of Supervisors and other bodies on how to adhere to the Plan and when to deviate from the Plan based on new information	Year 1 high priority		CoC Strategic Planning Committee via its Coordinated System of Care Work Group
3.1c:	Provide ongoing outreach, coordination, and technical assistance to prospective funding applicants to build confidence and capacity in providers			
3.1d:	Task and provide funding for the CoC Funding and Evaluation Committee with monitoring ongoing, expiring, and new funding sources in order to make recommendations to the CoC Board, CoC Strategic Planning Committee, and the Board of Supervisors	Year 1 high priority		Lead Agency team
3.1e:	Create an annual calendar of funding opportunities and related processes to allow jurisdictions and providers to better plan and coordinate activities	(in process) Year 1 high priority		Lead Agency team.

# STRATEGY 3.2: PRIORITIZE FUNDING TO ENTITIES THAT ALIGN WITH LOCAL PRIORITIES TO PROMOTE EQUITY, CENTER THE VOICES OF PEOPLE WITH LIVED EXPERIENCE, AND UTILIZE EVIDENCE-BASED PRACTICES



		In process / Year 1 Priority	Funding Landscape	Owner (s)
3.2a:	Condition new and renewal funding to homeless services providers on adherence to Housing First and Trauma-Informed care principles. Agree upon what these terms mean (HF and TIC). Consider a modest carve-out for non-HF programs such as sobriety placements. Research and understand what percentage of the system should be non-HF/sober placements.	Year 1 high priority		Lead Agency
3.2b:	Incorporate equity goals into performance measures and invest in programs closing equity gaps, disaggregating data by age, race, ethnicity, and language	Year 1 high priority		Lead Agency to work with County RBA Team
3.2c:	Monitor and provide technical assistance to providers related to incorporating input into service design from people with lived experience			
3.2d:	Ensure that funding opportunities are inclusive of smaller entities that are POC-led or offer culturally- specific services (e.g. allow / encourage collaboration, provide scalable funding, etc.)			
3.2e:	Incorporate peer support into housing programs and services whenever the literature on best practices indicates that it is appropriate.			

# STRATEGY 3.3: ENSURE THE VOICES OF INDIVIDUALS WITH LIVED EXPERIENCE OF HOMELESSNESS ARE CONSISTENTLY INCORPORATED INTO PLANNING AND EVALUATING THE HOMELESS RESPONSE SYSTEM

2.2		In process / Year 1 Priority	Funding Landscape	Owner (s)
5.54:	Provide standing opportunities for input from the Sonoma County Lived Experience Advisory and Planning (LEAP) and (when established) Youth Advisory Boards at CoC Board (including the Strategic Planning Committee) and Board of Supervisors meetings, and by invitation to other meetings regarding available funding awards and service delivery.	(in process) Year 1 high priority		LEAP w/Lead Agency
3.3b:	Create a centralized platform to share up-to-date information for people experiencing homelessness to learn about services (e.g., warming/cooling shelters, portable restrooms, showers, meals, vouchers, etc.), program requirements/timelines (e.g., documentation needed, deadlines), encampment resolutions/police action, and avenues to share input			



3.3c:	Create an ombudsman hotline where concerns about poor or discriminatory treatment by a provider can be reported			
3.3d:	Pay people with lived experience at consultant rates when they effectively serve in the role of consultants	(in process) Year 1 high priority	HHAP, HHIP	Lead Agency

# STRATEGY 3.4: IMPROVE SYSTEMWIDE AND PROJECT LEVEL DATA COLLECTION, PERFORMANCE, AND REPORTING

		In process / Year 1 Priority	Funding Landscape	Owner (s)
3.4a:	Adopt HHAP 3 outcome goals below as strategic plan			
	goals, modify as needed due to annual			
	updates/subsequent HHAP rounds.			
	CoC recommends focusing in particular on metrics 5			
	(returns to homelessness, 4 (time spent homeless),			
	and3 (placements into permanent housing).			
	Consider also reporting on increased income.			
#1a: I	ncreasing the Number of People Served			
	Reducing unsheltered homelessness (10% reduction)			
	educing first time homelessness (3% reduction)			
#3: In increa	creasing moves into permanent housing (10% ase)			
#4: Re	educing the length of time homeless (20% decrease)			
#5: Re	educing returns to homelessness (1% decrease)			
#6: In	creasing successful placements from street outreach.			
3.4b:	County will review progress towards system level			
	goals quarterly and project level goals annually			
3.4c:	Require HMIS participation by all interim and			
	supportive housing providers who primarily serve			
	people experiencing homelessness			
3.4d:	Establish an Open HMIS that allows for providers	(Year 1	TBD, but possibly	DHS,
	across the homeless response system to view client	priority)	can be from CoC	HMIS
	level data to ensure continuity of care.		HMIS grant	Committe
				e to
	Note: Community needs working definition and			propose
	scope of "Open HMIS"). Coordinated System of Care			recomme
	Work Group is working on a housing plan that is			ndations
	attached to agencies' HMIS file. All should agree on			
	using the one plan.			
3.4e:	Ensure adequate funding is made available to			
	purchase HMIS licenses and train staff on a regular			
	and ongoing basis			



3.4f:	Centralize a system to track outcomes expected of grantees			
3.4g:	Initiate process for updating decision makers including the Board of Supervisors and CoC Board on progress and challenges in carrying out the strategic plan and the status of countywide funding sources for homelessness, including HHAP. Regular data review and report out of the three key data metrics quarterly to stakeholders.	In process. Year 1 high priority	Existing CoC Funds	Lead Agency
3.4h:	Invest in project management software (e.g., Gannt Chart Software) to track progress towards Year 1 Plan Implementation Goals	Year 1 high priority	HHAP, HHIP admin share	Lead agency including HMIS w/DHS staff.
3.4i:	Build out implementation steps for remaining action steps (not currently outlined in Implementation Addendum)			

# STRATEGY 3.5: ENGAGE THE COMMUNITY IN THE EFFORT TO END HOMELESSNESS IN SONOMA COUNTY

#### ACTION STEPS

		In process /	Funding	Owner (s)
		Year 1 Priority	Landscape	
3.5a:	Proactive ongoing information pushed out at least annually (but provided regularly) on homelessness			
	and housing that updates residents on the progress made on the strategic plan			
3.5b:	Develop materials to explain the use and success of evidence-based best practices	Year 1 high priority	Lead agency admin resources	Lead Agency
3.5c:	Build a public-facing online dashboard that displays the number of people experiencing homelessness and outcomes related to service interventions and permanent housing efforts	Year 1 high priority	Lead agency admin resources	Lead Agency
3.5d:	Organize regular and consistent opportunities for community support such as calls to action, funding needs, donation drives, job fairs, housing opportunities, shadowing opportunities for interested parties/the public with service providers, etc.			Service providers

# STRATEGY 3.6: IMPROVE TRANSPARENCY AND EFFECTIVENESS OF THE COORDINATED ENTRY SYSTEM (ENTRY POINTS OF THE HOMELESS RESPONSE SYSTEM)

In process /	Funding	Owner (s)
Year 1 Priority	Landscape	



3.6a:	Build a single by name list of all persons experiencing homelessness in the county	(in process) Year 1 high priority	County ARPA funds for implementation of Front End Assessment concepts	BFZ team and subregional coordinators
3.6b:	Assign ownership of a single by names list to a nonconflicted entity	(in process) Year 1 high priority	County ARPA funds for implementation of Front End Assessment concepts	BFZ team
3.6c:	Incorporate existing local and countywide by names lists into HMIS			
3.6d:	Facilitate case conferencing around PSH referrals, prioritization, retention, and service right-sizing. Develop a prioritization hierarchy for placement into supportive housing.	Year 1 Priority	County ARPA funds for implementation of Front End Assessment concepts	CE Provider
3.6e:	Develop a new tool (versus VI-SPDAT) that assesses the vulnerability of persons accessing the system without bias as to race and ethnicity, justice system interactions, or documentation status.	(Year 1 Priority)		CEA Committee, CE Provider (HomeFirst)
3.6f:	The CoC should endorse or authorize a regionwide encampment protocol that determines the relative prioritization of those residing in encampments, defined as chronically homeless, and in other key subpopulations	(Year 1 priority)	County ARPA funds for implementation of Front End Assessment concepts	County (BOS and DHS) with CoC and cities.
3.6g:	Ensure that the Coordinated Entry process maintains a person-centered approach that involves the respectful consideration of the following factors: o Client Choice o Client Needs o Safety Considerations o The Value of Reducing Barriers as Long as Safety Considerations Are Not Overridden o Provider Capacity, Expertise, and Competency	Year 1 high priority	County ARPA funds for implementation of Front End Assessment concepts	CE Provider and CEA Committee

# STRATEGY 3.7: ELIMINATE DISPARITIES IN ACCESS, SERVICE PROVISION, AND OUTCOMES IN THE HOMELESS RESPONSE SYSTEM

	In process / Year 1	Funding Landscape	Owner (s)
	Priority		
<b>3.7a:</b> Track access and outcomes data by age, race,	Year 1 high	Existing CoC	Lead
ethnicity, gender, and sexual orientation	priority	admin sources	Agency



				including HMIS Team
3.7b:	Ensure that BIPOC residents are provided equal services within the homeless response system	year 1 high priority	Existing CoC admin sources	CoC, Lead Agency, Service Providers Roundtable.
3.7c:	Build on Equity-Centered Results-Based Accountability (RBA) framework			
3.7d:	Emphasize Trauma Informed Care			
3.7e:	Accommodate multi-generational households; work to keep households intact			
3.7f:	Continue working with BARHII			
3.7g:	Increase the number of BIPOC individuals on the CoC Board and throughout the system of care. Update the Charter to include designated seats for BIPOC members	Year 1 high priority	Existing CoC admin sources.	Lead Agency
	Note: Build on existing strategies as identified in First Five and Portrait of Sonoma including staff being more direct, mentoring program, mentor CoC to how to create conditions for folks to want to stay. Lead Agency MOU would describe a role for County to encourage BIPOC representation.			



Attachment B

# **Strategic Planning Update**

CoC Board Meeting October 26, 2022



# Outline

- I. Review Updated Goals, Strategies, Actions based on deep dive session feedback
- II. Discussion Year 1 high priorities actions
- III. Discussion Timeline to completion



# Goals, Strategies, Actions



# **Development of Document**

- Goals, Strategies, Actions and priorities were identified through a robust data analysis and stakeholder involvement process including:
  - HHAP 3 data analysis, including racial equity data analysis
  - PIT/HIC/HMIS/SPM data review
  - Stakeholder focus groups and interviews
  - Strategic Planning Committee Meetings
  - CoC Board Meetings
  - Deep Dive Sessions



# Housing and Prevention



**GOAL 1: MORE HOUSING & PREVENTION** 

Create comprehensive housing interventions, from prevention to permanent housing, to reduce inflow into homelessness and increase pathways to housing stability

- **Strategy 1.1:** Preserve housing for those at risk of homelessness by investing in prevention and problem-solving interventions
- Strategy 1.2: Enhance and invest in non-congregate interim housing options

**Strategy 1.3:** Develop sustainable permanent housing solutions

 Please see packet materials for draft action steps and highest year one priorities



# **Stronger Supportive Services**

# **GOAL 2: STRONGER SUPPORTIVE SERVICES**

Build supportive services capacity to meet the complex and diverse needs of people experiencing homelessness in the Sonoma County region



- **Strategy 2.1:** Standardize minimum compensation and training. Provide model wellness practices for housing and supportive service providers
- **Strategy 2.2:** Significantly expand mental and physical healthcare services for individuals experiencing homelessness, including those living in supportive housing
- Strategy 2.3: Improve services dedicated to the unique needs of specific populations
- <u>Strategy 2.4</u>: Coordinate cross sectors of healthcare, behavioral health, and homeless response
- <u>Strategy 2.5:</u> Develop, expand, and coordinate interventions to support those living on the street, in encampments
- Strategy 2.6: Create meaningful pathways to economic self-sufficiency
- Please see packet materials for draft action steps and highest year one priorities



# **Operate as One Agency**

# **GOAL 3: OPERATE AS ONE AGENCY**

Work across the Sonoma County region to develop shared priorities, aligned investments, seamless <u>coordination</u> and equitable solutions to address homelessness

- **Strategy 3.1:** Develop a countywide coordinated funding process to use available resources efficiently and effectively to drive local priorities and ensure accountability
- **Strategy 3.2:** Prioritize funding to entities that align with local priorities to promote equity, center the voices of people with lived experience, and utilize evidence-based practices
- **<u>Strategy 3.3</u>**: Ensure the voices of individuals with lived experience of homelessness are consistently incorporated into planning and evaluating the homeless response system
- <u>Strategy 3.4:</u> Improve systemwide and project level data collection, performance, and reporting
- Strategy 3.5: Engage the community in the effort to end homelessness in Sonoma County
- <u>Strategy 3.6:</u> Improve transparency and effectiveness of the Coordinated Entry System (entry points of the homeless response system)
- **Strategy 3.7:** Eliminate disparities in access, service provision, and outcomes in underserved and overrepresented subpopulations in the homeless response system
- Please see packet materials for draft action steps and highest year one priorities



# Discussion

1) Clarifying questions about Goals, Strategies, or Actions?

2) What resources may be available throughout the community to support the growth of year one initiatives?

3) Any other feedback on this list?



# Next Steps



# **Timeline and Adoption Next Steps**

- Draft plan document to SPS, LEAP and CoC Board on November 10<sup>th</sup>
- Special 3-hour joint meeting of the CoC Board, the Strat Planning Committee, and the LEAP Board for Friday, November 18, 2022 at 9:00 a.m. to Noon.
- The CoC Board will be asked to adopt the final plan at its regular meeting on Wednesday, November 30<sup>th</sup>, 2022.
- Board of Supervisors will be asked to approve the final plan in December





# Sonoma County Continuum of Care Board Agenda Report

Item No:	14. Reports from Standing Committees: Coordinated Entry Advisory Committee (CEA)
Subject:	Updates to Coordinated Entry (CE) policies and procedures
Meeting Date:	October 26, 2022
Staff Contact:	Thai Hilton thai.hilton@sonoma-county.org

## SUMMARY

HomeFirst will regularly provide updates to the Coordinated Entry policies and procedures. Attached is a description of the changes and the rationale for the change. These changes relate to: timeline for completing standardized assessment, discharge from CE, enhanced prioritization and other minor language changes.

These changes were approved by the CEA committee on October 19, 2022

### **RECOMMENDED ACTION(S)**

1) Consider approving the changes to the polices and procedures.

### ATTACHMENTS:

A: Description of proposed changes and rationale for each change.

## Attachment A

Summary:

1) Change: Remove 1 year required timeline for completing the Standardized Assessment Tool (the VI-SPDAT).

Reason: Required updates based on time elapsed are not supported by OrgCode nor the technical assistance running HUD Assessment and Prioritization cohort that Homefirst and CDC staff have been attending. This requirement has also created some confusion among providers in recent months.

 Change: Participants will be discharged from CES programs after 365 days of no contact with the system. They may be added again at any time without being required to recomplete the full CES Assessment.

Reason: The inactive By-Name-Lists are populated with many people who have not had any system contact in over 365 days. For example, 47.5% (678 people) of the inactive individuals list have not had system contact over 365 days. As we move to a Built For Zero approach towards "quality data" we will need to have a better understanding of those who are likely currently homeless in our community. Furthermore, significant data errors are generated as a result of not having ROIs in place for those who have not had contact with the system in years.

3) Change: Enhanced Prioritization: references to the SPDAT have been removed.

Reason: If Sonoma County moves to a new assessment process entirely, the lift required to train Assessors on a separate tool that will be used only temporarily likely is not worth it.

Language changes:

### CES Assessment step 3) Standardized Assessment Tool

- 1) After completion of steps 1 and 2 of the CE Assessment, the Access Points will:
  - a. Collect a new CES ROI;
  - b. Complete the Standardized Assessment Tool. Sonoma County CES utilizes VI-SPDAT, TAY VI-SPDAT, and Family VI-SPDAT, along with a series of local questions, as its Standardized Assessment Tool. The VI-SPDAT is a brief survey that can be conducted to quickly determine whether a client has high, moderate, or low acuity and vulnerability. These are taken into consideration with other

factors to determine housing and services prioritization. The correct Tool to be used is defined as follows:

- i. VI-SPDAT: Used for all single adults over the age of 24 years and 6 months. Couples without children shall each receive a VI-SPDAT;
- ii. TAY VI-SPDAT: Used for Transitional Age Youth between the ages of 18-24 and 6 months;
- Family VI-SPDAT: Used for families with minors who are in custody of the adult(s) more than 50% of the time; this shall only be used for family units with a maximum of 2 adults, and any additional adults shall receive the VI-SPDAT;
- c. Throughout the administration of the Tool, the Access Point shall reference information already gained through previous knowledge, observation, or the rest of the Assessment to assist the participant in answering the questions. If the Access Point already knows the answer to a question, they shall ask permission to use information already gathered in answering the question.
- d. The participant may choose not to answer any or all of the questions on the Standardized Assessment Tool. If this happens, the Access Point shall reiterate the participant's right to refuse to provide any information, but explain that not answering may affect the CES' ability to refer to the most appropriate housing intervention to meet the participant's needs.
- e. The Access Point shall not disclose the score to anyone outside of the CES Release of Information list of agencies, including the participant.
- f. The Standardized Assessment Tool shall be updated if:

 The household continues to experience homelessness 1 year after the Tool was first administered;

- Life changes occur that will significantly impact the score, such as emergency room visits, hospitalizations, learning about a new diagnosis, and involvement in the child welfare system, or juvenile detention center encounters;
- iii. The Access Point assesses that previous answers were incorrect and the household is willing to update them with the correct information.

- iv. To update the tool, the Access Point shall copy the previous HUD Touchpoint and only change the individual answers as needed, rather than readministering the tool in its entirety.
- g.—Any time the Standardized Assessment Tool is updated sooner than 1 year from the previous administration of the Tool, the Access Point shall notify the CES Operator through email of the justification for readministering the tool.

\*\*\*NOTE: All other references to the 1 year re-administration requirement throughout the Policies and Procedures will also be removed if the above change is approved.

## By-Name-List Management and Inactive Policy

A participant shall remain on the active list By-Name-List until they are housed permanently no longer eligible for CES due to homeless status, are outside CoC geographic bounds with no planned date of return within 90 days, they voluntarily request to be removed, or there has been no contact with the system in 365 days. A participant shall remain "active" on the By-Name-List" until there has been no contact with the system in 90 days, they system in 90 days, or all efforts have been exhausted in attempting to contact the participant.

# Procedure:

- Housing Programs CES Cooperating Agencies shall notify the CES Operator when a participant is housed no longer eligible for CES due to homeless status or leaves the CoC geographic bounds with no planned date of return within 90 days, and the Operator shall exit the participant from the CES HMIS program and remove them from the By-Name-List.
- 2) Participants may contact any Access Point or the CES Operator directly and request to be removed from the By-Name-List. If this occurs at an Access Point, the Access Point shall notify the Operator of the request, who shall remove them from the list and the CES HMIS program.
- 3) The CES Operator shall perform weekly data cleaning of the By-Name-Lists and remove from active status any participant who has not had known contact with a homeless program (outreach, shelter, safe haven, transitional housing, safe parking, CES) in the HMIS system for 90 days.
  - a. Wherever possible, the operator shall confirm with collaborative system partners who manage similar lists, including Sonoma County Behavioral Health and the Veterans By-Name-List, that the participant is no longer homeless in the community before making them inactive on the By-Name-List.

- b. Fifteen days before making inactive the Operator shall reach out to known contacts of the participant in HMIS to inform them that participant will be removed if no touchpoint is added.
- c.— The list of potential inactive names shall be presented at CES Case Conference to confirm lack of contact from any provider present, before making inactive.
- d. The Operator shall create an "inactive" tag for the participant when doing so which will remove them from the active By-Name-List.
- 4) The Operator shall add the inactive tag to any participant who has had a housing referral rejected because the community present at CES Case Conferencing has unanimously agreed that all efforts have been exhausted in attempting to contact the participant.
- 5) Any participant removed from the By-Name-List or made inactive may be re-added to the active list at any time with the same Total Prioritization Score when they make contact with the system and choose to be on the list again. They shall not be required to complete the CES Assessment again, though Access Points shall encourage them to update their assessment if significant life changes have occurred do so if it has been over 1 year since the last Standardized Assessment Tool was completed.
  - a. If a participant does not want to complete the Standardized Assessment Tool again but wishes to be re-added to the By-Name-List after being removed or made inactive, the Access Point fielding the request shall notify the CES Operator along with any updated contact information, who shall re-enroll the participant in the CES HMIS program if necessary and add them to the By-Name-List based on the last information known.

### Enhanced Prioritization

Additional documentation of service needs and vulnerability may be collected during the Enhanced Assessment phase of the CES Assessment by trained staff. The documentation provided shall have been created by staff who have the professional ability to do so, e.g. licensed credentials.

The staff collecting the evidence for Enhanced Assessment shall present the evidence in a case presentation at the CES Case Conference. The CES Case Conference shall be utilized to make the final assessment as a community if a participant should be prioritized higher or lower than their Total Prioritization Score based on Enhanced Assessment evidence. Enhanced Prioritization shall follow Community Prioritization Standards, as well as prioritization standards established in HUD notice CDP-16-11 for PSH. For example, a person may score low in Total Prioritization Score, but if an outreach worker presents documented evidence of significant behavioral health and physical health disabilities, a SPDAT assessment in which the mental health, physical

health, substance use, and utilization of Emergency Services sections all scored a 4 each with strong observational evidence, then the community may agree that the evidence presented clearly shows high vulnerability in the two most weighted prioritization standards and therefore should be prioritized for PSH. Conversely, a case may be presented for a PSH referral in which the only evidence for higher prioritization is an ID that shows someone is older than 90. Given the lower weight the community prioritization standards places on "years of age above 65", the community may decide this case should not be prioritized for PSH.

The community present at the CES Case Conference shall also include in the Enhanced Prioritization and Assessment a determination whether the available housing intervention will meet the needs of the participant being presented for Enhanced Assessment and Prioritization. For example, the additional assessment evidence may show that someone who scored a 7 on the Total Prioritization Score actually has very high emergency services utilization and long term mental health service needs, and the community may determine that the service needs will require longer term assistance than Rapid Rehousing can provide. Or, the Housing Mitigation Form (see **Appendix 7**) may show that a participant with a Total Prioritization Score above the RRH range can have their needs met successfully by a RRH program.

# Procedure:

- 1) The Access Point or other provider shall present the additional assessment evidence collected as part of Enhanced Assessment at the CES Case Conference.
  - a. To prioritize a participant for a more intensive housing intervention (in cases where a participant's Total Prioritization Score is too low to capture their true vulnerability and service needs), these may shall include additional documented evidence of vulnerability and service needs and the Enhanced Prioritization Form, or if observational evidence is all that is available, the staff shall complete the SPDAT (tool provided as part of the Access and Assessment training).
  - b. To prioritize a participant for a less intensive housing intervention (in cases where a participant's Total Prioritization Score places them above a housing intervention range that would sufficiently meet their needs), the staff may complete a Housing Mitigation Form (see **Appendix 7**).
- 2) The community shall determine whether the evidence presented places the participant at highest priority for the available housing intervention based on the community prioritization standards.
  - a. The evidence presented must be in alignment with one or more of the community prioritization standards, with prioritization weight also following the standards.

- b. Those present at the CES Case Conference must reach unanimous agreement to finalize any Enhanced Prioritization decision.
- 3) The referral shall be submitted according to the procedures in E. Referral.
- 4) If the referral is not successful for any reason, the participant shall maintain their prioritization status assigned through Enhanced Prioritization. They shall be referred to the next available housing opportunity that targets the assigned prioritization. A separate list shall be maintained by the CES Operator of all participants who have received and been referred according to Enhanced Assessment and Prioritization. Only additional Enhanced Prioritization consensus shall change that participant's prioritization status going forward.

# Sonoma County Continuum of Care Board Agenda Report

Item No:	15	
Subject:	November 30, 2022 CoC Board Meeting Draft Agenda	
Meeting Date:	October 26, 2022	
Staff Contact:	Alea Tantarelli, Alea. Tantarelli@Sonoma-County.org	

### SUMMARY

This staff report briefly summarizes the November 30th, 2022 CoC Board Meeting proposed agenda. The draft agenda contains all proposed items that will be discussed by the Continuum of Care Board at the November 30, 2022 CoC Board Meeting. The draft agenda is attached as **Attachment A**.

### **RECOMMENDED ACTION(S)**

None – an informational item only.



# <u>Attachment A</u> Sonoma County Continuum of Care (CoC) Board Agenda for November 30, 2022 1:00pm-5:00pm Pacific Time

Public Zoom Link:

https://sonomacounty.zoom.us/j/99261791880?pwd=djc0b1ZsU1FpOU1kbnJ0UDNOcUhFQT09

# Phone: 1 (669) 900-9128 Webinar ID: 992 6179 1880 Passcode: 650935

	Agenda Item	Packet Item	Presenter	Time
	Welcome, Roll Call and Introductions		Board Chair	1:00pm
	Note: Items 1-4 below are proposed for adoption via one motion as the Consent Calendar.	N/A		
1.	11-30-2022 Agenda (Consent Calendar)	Draft Agenda	Board Chair	
2.	Minutes from 10/26/2022 (Consent Calendar)	Draft Minutes	Board Chair	
3.	Summary of Follow-ups from the Previous Meeting(s) (Consent Calendar)	Summary of Follow-ups	Board Chair	1:05pm
4.	Built for Zero Update (Consent Calendar)	Built for Zero Update	Board Chair	
5.	Reports from Lead Agency Staff	Staff Report for Reports from Lead Agency	CDC Staff	1:25pm
6.	Homeless Service Provider Group Update		Margaret Sluyk	1:35pm
7.	CoC Strategic Planning Presentation ACTION ITEM: <i>Adopt the CoC Strategic Plan</i>	Staff Report for CoC Strategic Planning Presentation	Homebase	1:45pm

8.	Word from the Street		Chessy Etheridge	2:45pm
9.	10-minute break			2:55pm
10.	MOU Between CoC Board & Lead Agency ACTION ITEM: <i>Approve MOU Between CoC Board &amp;</i> <i>Lead Agency</i>	Staff Report for MOU Between CoC Board & Lead Agency	Board Chair & CDC Staff	3:05pm
11.	<ul> <li>Reports from Standing Committees:</li> <li>Funding &amp; Evaluation Committee</li> <li>Coordinated Entry Advisory (CEA) Committee</li> <li>Strategic Plan Committee</li> <li>Homeless Management Information System (HMIS)/Data Committee</li> <li>Lived Experience Advisory &amp; Planning Board (LEAP)</li> <li>Youth Advisory Board</li> </ul>		Committee Representatives	3:30pm
12.	Review Agenda for November CoC Board Meeting	Staff Report for DRAFT Agenda 1/25/23	Board Chair	4:30pm
13.	Board Member Questions & Comments		Board Chair	4:45pm
14.	Public Comment on Non-Agendized Items		Board Chair	4:55pm

### PUBLIC COMMENT:

Public Comment may be made via email or during the live zoom meeting. To submit an emailed public comment to the Board email <u>Araceli. Rivera@sonoma-county.org</u>. Please provide your name, the agenda number(s) on which you wish to speak, and your comment. These comments will be emailed to all Board members. Public comment during the meeting can be made live by joining the Zoom meeting using the above provided information. Available time for comments is determined by the Board Chair based on agenda scheduling demands and total number of speakers.