

Sonoma County Continuum of Care (CoC) Board Agenda for January 26, 2022 1:00pm-4:00pm Pacific Time

Public Zoom Link:

 $\underline{https://sonomacounty.zoom.us/j/99261791880?pwd=djc0b1ZsU1FpOU1kbnJ0UDNOcUhFQT09}$

Phone: 1 (669) 900-9128 **WebinarID**: 992 6179 1880 **Passcode**: 650935

	Agenda Item	Packet Item	Presenter	Time
	Welcome, Roll Call and Introductions		Board Chair	1:00pm
1.	Consent Calendar (ACTION ITEM): • Approve Agenda • Approve Minutes from 12/15/21	-1/26/22 Agenda -DRAFT 12/15/21 Minutes	Board Chair	1:05pm
2.	Coordinated Entry Operator ACTION ITEM - Approve recommendation for Coordinated Entry Operator.	-Executive Summary of CE Operator Recommendation -Written Response to Questions from HomeFirst	CE Committee Chair & CDC Staff	1:10pm
3.	Emergency Solutions Grants – Coronavirus (ESG-CV) Update & Actions • SAVS Sebastopol RV Shelter Update • ACTION ITEM - Approve proposed recommendation for ESG-CV Funding.	- Recommendation from CDC staff as Lead Agency ESG- CV Round 2 Funding	CDC Staff	1:40pm
4.	Sonoma County Human Services Department (HSD) Presentation: Older Adult Housing Needs	-Homelessness Among Older Adults Presentation - Older Adult Housing Needs Presentation	Sonoma County Human Service Department, Legal Aid & the National Coalition to End Homelessness	2:10pm
5.	5 min Break			2:30pm
6.	Word from the Street		Ludmilla Bade	2:35pm
7.	Standing Committee Reports • Coordinated Entry Advisory (CEA) Committee-Update	- Executive Summary for Emergency Housing Vouchers	Committee Representatives	2:45pm

	 Emergency Housing Voucher Update Strategic Plan Committee Homebase update Centralized Housing Locator Function for Sonoma County's Homeless System of Care Open HMIS Discussion Charter & Policy Review Committee Homeless Management Information System (HMIS)/Data Committee Lived Experience Advisory & Planning Board (LEAP) Youth Action Board 			
8.	Staff Report Elections Plan and Timing Point In Time Count Update Shelter Bed Utilization Update Built for Zero Lived Experience Stipend Update	-Executive Summary for CoC Board Election	CDC Staff	3:15pm
9.	Review Agenda for February 23 CoC Board Meeting	-DRAFT 2/23/22 Agenda	Board Chair	3:35pm
10.	Board Member Questions & Comments		Board Chair	3:50pm
11.	Public Comment on Non-Agendized Items		Board Chair	4:00pm

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 Madison.Murray@sonoma-county.org. 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.



Sonoma County Continuum of Care Board Meeting Meeting Minutes

December 15, 2021 1:00 -2:50 pm Pacific Time – Meeting held by Zoom

Recording of Meeting

1. Welcome and Introductions (0:05-:08)

- Ben Leroi, Continuum of Care (CoC) Board chair, called the meeting to order at 1:00 pm. Ben Leroi went over the agenda, clarified Zoom rules around public comment and Brown Act guidelines.
- Roll Call was taken:
 - Present: Supervisor Chris Coursey; Tom Schwedhelm, City of Santa Rosa; Chuck Fernandez, Committee on the Shelterless; Ben Leroi, Santa Rosa Community Health; Margaret Sluyk, Reach For Home; Alena Wall, Kaiser Permanente; Cheyenne McConnell, Youth Community Member; Don Schwartz, City of Rohnert Park; Lisa Fatu, Social Advocates for Youth; Bill Carter, Sonoma County Health Services; Ludmilla Bade, Lived Experience Representative; Stephen Sotomayor, City of Healdsburg Services; Kevin McDonnell, City of Petaluma
 - Absent: Angela Struckmann, Sonoma County Human Services; Jennielynn Holmes, Catholic Charities of the Diocese of Santa Rosa

2. Agenda and Minutes Approval (00:08-00:12)

Public Comment: None at this time.

Chris Coursey motioned to approve the agenda; approve minutes from 11/17/21 with Chuck Fernandez edits to correct Jules Pelican as proxy for Chuck Fernandez; Don Schwartz seconds.

Ayes: Ben Leroi, Chuck Fernandez, Ludmilla Bade, Don Schwartz, Chris Coursey, Alena Wall, Margaret Sluyk, Bill Carter, Lisa Fatu, Cheyenne McConnell, Stephen Sotomayor, Tom Schwedhelm, Kevin McDonnell

Noes: None

Abstain: Ludmilla Bade, has not reviewed. Absent: Angela Struckmann, Jennielynn Holmes

3. Staff Report (0:12-00:24)

Karissa White, Continuum of Care Coordinator, presented on the upcoming 2022 CoC Board Elections and confirmed HUD TA has reviewed the Sonoma County Continuum of Care Charter with one minor

edit. A final draft of the CoC's Governance Charter will be distributed upon completion of the Strategic Planning Committee's approval of a diversity, equity and inclusion statement.

Michael Gause, Ending Homeless Manager, presented the active SAVS Project and Winter Shelter Status.

Jennielynn Holmes arrived at this time.

Public Comment:

None at this time.

4. Word From the Street (00:25-00:38)

Ludmilla Bade presented on local news in Sonoma County in the winter weather. Safe Parking lots are helpful and looking forward to seeing some open up this year. There is a need for basic necessities: trash, bathrooms, charging stations. These can impact the current stereotypes that limit those experiencing homelessness.

Public Comment: Dannielle Danforth Jules Pelican Gregory Fearon

5. Standing Committee Updates (00:39-2:03)

- a. Coordinated Entry Assessment (CEA) Committee: Thai Hilton presented on the implementation group for Shelter Standards and the upcoming review of the Rapid Rehousing (RRH) Standards. A centralized housing location group is being formed to assist in coordinating housing location for the Emergency Housing Voucher (EHV) program. Jennielynn Holmes presented on the Coordinated Entry System RFP responses, applications are available on the CEA Committee webpage.
- b. **Strategic Plan Committee:** Tom Schwedhelm presented on the three work groups. The Coordinated System of Care work group is reviewing DEI, open HMIS system, and housing navigation. Karen Fies reported on the Increasing income work group and the Housing Work Group.
- c. Charter & Policy Review Committee: No Report.
- d. **HMIS Data Committee:** The next meeting will be held on January 10, 2021 to further discuss an open HMIS system. Adam Siegenthaler presented on the updated Homeless Data landing page.
- e. **Lived Experience Advisory Body (LEAP):** Andrew Akufo presented on the current status of the application process and planning activities. Applications are still open, have been distributed, and the prep group will vote on applicants at the January LEAP meeting.

Public Comment: Gerry La Londe Berg Gregory Fearon

6. 5 Minute Break (2:03-2:08)

7. Review Agenda for upcoming Quarterly Membership Meeting on January 20, 2022 (2:09-2:21)

Public Comment:

None at this time.

Cheyenne McConnell motioned to approve the agenda for the Quarterly Membership Meeting; Lisa Fatu seconds.

Ayes: Ben Leroi, Chuck Fernandez, Ludmilla Bade, Don Schwartz, Chris Coursey, Alena Wall, Margaret Sluyk, Bill Carter, Lisa Fatu, Cheyenne McConnell, Stephen Sotomayor, Tom Schwedhelm, Kevin McDonnell, Jennielynn Holmes, Ludmilla Bade

Noes: None Abstain: None

Absent: Angela Struckmann

8. Review Agenda for January 26, 2022 (2:21-2:24)

Kevin McDonnell asked for an update on the Point in Time Count that will be happening the last Friday in January.

Public Comment:

Gerry La Londe Berg

9. Board Member Questions and Comments (2:25-2:29)

Bill Carter will be retiring and Nora Mallonee-Brand will be taking the DHS seat as of the next meeting.

Angela Struckmann arrived at this time.

10. Public Comment on Non-Agendized Items (2:30)

Gregory Fearon

Meeting Adjourned at 3:37 PM



Sonoma County Continuum of Care Board Executive Summary

Item: Recommendation of Coordinated Entry operator

Date: January 11, 2022

Staff Contact: Thai Hilton Thai. Hilton@sonoma-county.org

Agenda Item Overview

On November 2, 2021, the Coordinated Entry Advisory (CEA) committee re-released a Request for Proposals for an operator for the Sonoma County System operator. Two responses were received. One response was received from HomeFirst, an agency from Santa Clara County. Another response was received from the Sonoma County Interdepartmental Multidisciplinary Team (IMDT), a local homeless service provider.

On December 15th the CEA committee met to consider the applications. The committee felt that more information was needed to decide on an operator and requested that both applicants attend a follow-up meeting where they could be asked follow up questions and hear public comment. Both applicants were provided a list of questions and were asked to respond in writing prior to the meeting.

On January 7, 2022, the CEA committee met to interview the applicants. A written response was received from HomeFirst. This document has been included in your packet. Due to the short notice of the meeting and staffing issues, a written response was not received from IMDT. The CEA committee members asked questions of both applicants, heard public comment and then used a scoring matrix to score each applicant. HomeFirst received an aggregate score of score of 88.44 and IMDT received 78.87. All of the responses to the RFP and accompanying materials can be found here: https://sonomacounty.ca.gov/CDC/Homeless-Services/Continuum-of-Care/Coordinated-Entry-Advisory-Committee/Calendar/Meeting-January-07-2022/ The CEA committee voted to recommend to the CoC board that HomeFirst be selected as the new CES operator pending resolution of budget based on funding that can be provided.

Sonoma County Coordinated Entry follow up questions

1. Will you commit to working w/the CoC on a referral process consistent with state Homekey requirements to ensure that there is no conflict of interest between their role as CE provider and Project Homekey operator in Rohnert Park?

It is our understanding that the CES in Sonoma County will only be responsible for the coordination of referrals for housing programs, and there is a separate shelter referral system effort in progress. Since the Homekey project at Rohnert Park is an Emergency Interim Housing program, not a Permanent Supportive Housing project, a conflict of interest would not exist if HomeFirst serves as the CE provider. Regardless, HomeFirst commits to working with local systems to ensure that any conflicts that arise are promptly addressed through fair and equitable processes.

2. Your model for CE appears to rely on providers to perform the actual CE applications, where they would manage the overall program, provide training, track and report data, etc. Is this correct?

Although HomeFirst will not serve as an access point in the proposed plan, we view the work of providers in carrying out the application and assessment activity as one that happens in partnership with the CE provider. As the existing experts in their regions and in their areas of service, partner agencies are in the best position to successfully engage potential program participants. However, as the CE provider, it is our responsibility to provide the training to boost the partnerships skillset and knowledge to carry out the activity. In addition, through the monitoring and evaluation of application submissions, HomeFirst's CE team will be able to offer the guidance and technical assistance to make system improvements. The HomeFirst's CE Manager is also tasked with driving project management sessions with partner agencies to discuss operations, performance and monitoring for continued quality improvement. Additionally, they will be a support in resolving grievance and appeals that when solutions are not found at the access point level. Again, our approach here is one that requires HomeFirst to partner very closely and serve as a support system for our provider partners.

3. Does Home First commit to establish an office in Sonoma County?

HomeFirst is interested in establishing a physical presence in Sonoma County. There are multiple factors that will influence our ability to establish a local office that we need to work through to make this a reality- most critically being the approval of the budget submitted with our CE proposal which includes an 'occupancy' line item that would support the leasing of office space locally. In addition, HomeFirst is interested in expanding it's reach within Sonoma County beyond the Homekey project in Rohnert Park, when the time is appropriate. Establishing additional programming in the County

would offer the opportunity to better leverage resources and make a physical office in the area more cost effective. Lastly, it's important to note, HomeFirst's proposed CE team would not to be co-located with direct services teams in Rohnert Park.

4. How would HomeFirst build relationships with local providers to better understand the needs of the community?

Taking a multiprong approach to build rapport and trust with partners while gathering critical information will include participation in existing efforts, hosting listening sessions, offering training and technical assistance, and holding public meetings for report-outs.

Participation in existing collaborative efforts will be critical to the success of our CE plan. Understanding that systems, committees, and taskforce groups likely already in place, HomeFirst leadership will seek out invitations to those gatherings. Rather than build from scratch, we hope to build upon the successes of the current practices and systems, including those of the current CE provider, Catholic Charities. If selected as the next CE provider, our team will invest time and resources to ensure we have overlap with Catholic Charities prior to their exit as the CE provider.

Second, our team will host Listening sessions with key stakeholders and partner/potential partner agencies. These learning opportunities will focus on obtaining information, input, and feedback to ensure our plans align with the needs of the community. HomeFirst will take a regional and/or service type approach in hosting these listening sessions and craft agendas based on the regional need of each area and the focus of each service type.

As described in more detail within our proposal, another key element in information gathering are the quarterly evaluation presentations to be hosted publicly with all stakeholders. These presentations will serve as report-out on evaluation findings, including successes of the system effort, then seek out input and feedback to identify additional needs.

Last, with information gathered and collected data evaluated, the HomeFirst team will be in a better position to identify training and technical assistance needs and offer these to partner agencies. Taking a collaborative approach to our training and TA, this will offer deeper opportunities to better understand additional community needs.

5. There are numerous by names lists and case conferencing efforts underway; how would you approach reconciling these with CE?

First and foremost, HomeFirst will follow the guidelines and principles of ideal Coordinated Entry, which includes the importance of having a singular by name list. With that in mind, we will engage in a discovery phase to better understand the existing efforts in managing lists including identifying barriers preventing the development and management of a single list. We would then work with our partner agencies to remove barriers and/or identify solutions leading to a consolidated list that HomeFirst, as the CE provider, could take responsibility of.

In addition, as outlined in our proposal, case conferencing is a central tactic in our plan to serve as the CE provider. As previously described, developing and maintaining positive partner relationships will be key to our success and the inclusion of partners in a case conferencing activity when matching referrals to providers will support this effort. Also, HomeFirst will be supportive of post-referral case conferencing efforts taking place either regionally or by service type and would participate in those gatherings if appropriate and desired.

6. Presuming that the CoC's HMIS system (ETO) has mobile capacity, how would that influence their approach with CE?

HomeFirst is intimately familiar with utilizing HMIS mobile options as this is a current practice in our Santa Clara services. Since the CE provider responsibility outlined in our proposal typically begins at point of receiving assessments and applications, the HMIS mobile capacity would not necessarily influence our approach. However, given our agency's experience with the strategy it positions our team to be able to offer training and technical assistance to system partners, as needed. Additionally, monitor irregularities from field-based assessments would offer the opportunity to troubleshoot with partners if irregularities are flagged.

7. Are you willing to sign an agreement (such as a contract) with the CoC which outlines expectations for staffing, reporting, etc.?

Assuming that this agreement or contract is in addition to the service contract we would agree to as the Coordinated Entry provider, yes. As long as the suggested expectations and requirements in this additional agreement are in line with our agency mission and values and are not in conflict with the CE contract scope of work.

8. Are you willing to partner with the Housing Authority on a centralized housing location/navigation system?

HomeFirst is open to partnering with any organization in Sonoma County that is willing to support the effort to end homelessness. With that said, we are interested in better understanding what opportunities for partnering with the Housing Authority look like. HomeFirst currently partners with Santa Clara County's Housing Authority as a contracted provider leading housing navigation interventions for Veterans.

Would the opportunity for partnership in this example be within the proposed CE capacity, or would this be an opportunity outside of this role? Is the request focused on housing navigation activity or database management?

To better answer this question, we would need more information. However, as previously stated, we are very much interested in partnership development with entities such as the Housing Authority.

9. What is their existing outreach strategy for special populations (TAY, LGBTQ+, Individuals w/disabilities, etc.)? What marketing tools do you use (Question #3)?

HomeFirst is aware that special populations are often difficult to reach and therefor underserved in the homelessness service sector. We are prepare to engage in the necessary work to better understand the Sonoma County landscape that currently exists in order to better prepare ourselves to support the CES system in reaching these hard to reach populations.

HomeFirst's organizational structure includes a Marketing and Communications Department led by our Chief Marketing and Communications Officer. This department leads our efforts in developing promotional material such as annual reports, informational bifolds/trifolds and flyers, along with managing the agency's online and social media presence. This department is at the disposal of the proposed CE team and will support with the development of marketing and outreach campaigns. Our team will work with local stakeholders to identify specific needs for local outreach efforts to the specialized populations, seek input from the partners for strategy, and develop the necessary marketing and outreach campaigns.

10. Budget:

- a. If respondent's proposed budget was higher than the roughly \$350,000 currently available, please indicate how much of the additional funding respondent has inhand as matching funds and how much of the additional funding would still need to be raised to achieve full funding of the proposed budget.
- b. If funds still need to be raised to achieve full funding of the budget, please describe how much of this funding will be raised independently by the respondent and how much respondent is expecting the CoC and/or its partners to raise on respondent's behalf.
- c. If additional funding cannot be raised in a timely manner, please describe in detail how this would affect respondent's proposed CES services, including staffing and services provided

HomeFirst did not identify any matching funds within the proposed budget. Our expectation is that our service provision if fully reimbursed by the funder so long as we do not exceed the agreed upon contract amount. If the budget request is not fully available, we are open to exploring options in modifying the budget to match existing available funds and assess the impact of a reduced amount on the service delivery proposal.

Additionally, although we are excited to potentially serve as the CE provider, admittedly, as an out-of-area candidate, we have some work to do in better understanding the current system, it's operation and strategies, strengths and weaknesses and any gaps in service, in order to more accurately identify the necessary financial requirements.

11. COI and Transparency: If the respondent or a separate organizational unit that reports to the same authority as the respondent may receive referrals from the CES, please note the program(s) that may accept referrals from CES. Even if such a conflict does not currently exist, please describe in detail how the respondent will ensure a <u>transparent</u> prioritization, matching and placement system that will not favor any provider, region or population.

HomeFirst does not currently offer any services in Sonoma County that require referrals from the CES, as far as we are aware. In full transparency, with an EIH project approved by the State in Rohnert Park, we are interested in expanding services in Sonoma County beyond the one EIH program. In the event that HomeFirst does offer services requiring referrals from CES, our match-making and case conferencing activity will be fully transparent to ensure referrals are directed to the most appropriate provider, and policies and procedures will be developed collaboratively to ensure fair and equitable practices. Also, case conferencing is a critical component of the referral coordination process in our proposal and serves as a safeguard in situations where conflicts of interest might arise. Last, a conflict-of-interest policy would be drafted in partnership with the CoC.

12. Access Points: Please delineate how many CES Access Points the respondent plans to operate with its <u>own staffing</u> (i.e. not through a partner organization) and proposed location (including if fixed location or mobile access point), hours, and populations targeted (organization of people experiencing homelessness)

HomeFirst's proposal to serve as the County's Coordinated Entry provider does not include service as an access point. In the absence of existing direct service programs in Sonoma County, a fixed location is not an option. If it is desirable for HomeFirst to employ a mobile access point, we would be interested in developing a team-although we did not budget for that in our proposal.

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13. Acuity and Prioritization: Please describe your analysis of the utility of the VI-SPDAT for

- Stratification of clients for eligibility for specific service interventions such as PSH and RRH
- o Prioritization for such a service intervention post-stratification

 Please detail specific options (including quantitative and qualitative data sources that may be recommended) for dynamic prioritization for PSH and how case conferencing may or may not be utilized to support dynamic prioritization, if implemented

HomeFirst is aware of the problems associated with the reliability and validity of the VI-SPDAT with numerous organizations offering evidence of its limitations and deficiencies, including the National Alliance to End Homelessness. Among the mounting body of evidence surfacing nationally, are the tool's limitations in supporting domestic and sexual violence survivors, the observed barriers to people with impaired functional capacity, and the perpetuation of racial and gender bias. This may negatively impact the equitable stratification and prioritization of individuals in Coordinated Entry.

As the CE provider, HomeFirst commits to monitoring the performance of the CES with an equity lens, as well as researching emerging best practices and tools. We also commit to implement changes and improvements based on emerging practices and evidence-based research to ensure that we remain in line and up to date with the most effective and efficient prioritization tools and practices.

Additional protective measures to prevent disparity for the above populations, and participants overall, include Case Conferencing and the use of full SPDAT data as part of HomeFirst's CE referral-making process. Additionally, we understand that Sonoma County currently utilizes version 1 of the VI-SDPAT tool, which we would support the continued use of, given its ability to better include observed vulnerabilities than more recent versions of the tool.

As previously mentioned, HomeFirst intends to carry out the CE provider responsibility in line with ideal CES design as described by HUD. In the presence of barriers within the CES system preventing the prioritization for the most vulnerable, insufficient resources for the number of high-need individuals for example, dynamic prioritization may be appropriate. As the CE provider, HomeFirst supports implementation of dynamic prioritization activity within the system and would implement the strategy paired with case conferencing for transparent decision-making prioritizing the most vulnerable. Housing problem-solving and strategies for self-resolution would be emphasized to support those individuals not prioritized. Working closely with our partners and analyzing available data, the CE team would also aim to predict capacity to inform decision-making.



Sonoma County Continuum of Care Board Agenda Report

Item No: 3

Subject: Recommendation from CDC staff as Lead Agency ESG-CV Round 2 Funding

(ACTION ITEM)

Meeting Date: January 26, 2022

Staff Contact: Michael Gause, Ending Homelessness Program Manager

Michael.Gause@sonoma-county.org

Prepared by: Madison Murray, Administrative Assistant

Madison.Murry@sonoma-county.org

Emergency Solutions Grants – Coronavirus ("ESG-CV") funds are federal funds distributed by the US Department of Housing and Urban Development (HUD) and administered by the California Department of Housing and Community Development (HCD). As such, we refer to them as State ESG-CV funds.

ESG-CV funds must be used to prevent, prepare for, and respond to the coronavirus pandemic (COVID-19) among individuals and families who are homeless or receiving homeless assistance and to support additional homeless assistance and homelessness prevention activities to mitigate the impacts of COVID-19. A primary intent of the ESG-CV funds is to supplement the existing operational budgets of nonprofit organizations and government agencies responding to the critical needs of the community by providing services to prevent, prepare for, and respond to increased demand for services for these populations.

The Sonoma County CoC received an assignment of \$5,777,787 in State ESG-CV funds. Of this, \$202,500 is for administrative costs at the CDC, leaving a total of \$5,575,287 to be allocated to programs and services.

The ESG-CV funds have expenditure deadlines set by the Federal and State governments to ensure that individuals and families receive benefits and services promptly.

To date and as shown in Table 1, if the recommendations in this agenda item are approved, the CoC Board's ESG-CV funds will be allocated as shown below and would meet the applicable deadlines:

Table 1

	Allocatio	ns -	Goals a	nd	Actuals				
Total Sonoma County Co	\$	5,777,787	\$	5,777,787	\$	5,777,787	\$	5,777,787	
Less Administrative Allowance		\$	202,500	\$	202,500	\$	202,500	\$	202,500
Net Al	location for Programs =	\$	5,575,287	\$	5,575,287	\$	5,575,287	\$	5,575,287
Expenditure Percentage			20%		40%		80%		100%
Deadline			7/31/2021		9/30/2021		3/31/2022		9/30/2022
Expenditure Goal		\$	1,115,057	\$	2,230,115	\$	4,460,230	\$	5,575,287
Cumulative Amounts Awa	rded								
- Emergency Shelter (Actu	ual)	\$	1,961,676	\$	4,187,426	\$	4,187,426	\$	4,187,426
- Street Outreach		\$	36,814	\$	36,814	\$	36,814	\$	36,814
- Rapid Rehousing (Actua	I)	\$	101,281	\$	1,294,188	\$	1,294,188	\$	1,294,188
	Total =	\$	2,099,771	\$	5,518,428	\$	5,518,428	\$	5,518,428
	% Awarded (Actual)		37.66%		98.98%		98.98%		98.98%
Remaining to Be Allocated by 9-30-22 =		\$	3,475,516	\$	56,859	\$	56,859	\$	56,859
Deadline met?			MET		MET	W	/ILL BE MET	Г	MET w/1-26 ACTION

On January 13, 2022, the CDC's Ending Homelessness Division staff met with the ESG-CV Ad Hoc Committee ("Committee") to discuss the expenditure of roughly \$56,859 in additional ESG-CV funds. The Committee did not come to a specific funding decision, but asked the staff to come back with a recommendation to the full CoC Board that would reflect the Committee's prioritization of these uses in the below order:

- 1. Housing location services and risk mitigation (such as security deposit assistance) to assist in housing placement of persons who hold Emergency Housing Vouchers (EHVs), including but not limited to a request by Social Advocates for Youth (SAY) that would enhance their EHV and other housing referral programs;
- 2. Reimbursements and assistance to shelter providers that incurred Jan Feb 2022 COVID impacts to shelter operations;
- 3. A request by ISFN that would enhance their Rapid Re-Housing Program.
- 4. Review ESG-CV as a source of funds for warming/cooling assistance if allowed within funding constraints (Note: the CoC's current State ESG-CV plan envisions the use of these funds for Emergency Shelter and RRH only), propose a program or concept that may assist current service providers to stand up warming opportunities in winter or cooling centers in summer.

Staff met following the Committee meeting and recommends that the CoC Board consider the below recommended actions.

RECOMMENDED ACTIONS:

- 1. That the remaining amount (roughly \$56,859) of unallocated ESG-CV be allocated to **Social Advocates for Youth (SAY)** to cover a funding shortfall in SAY's Rapid Re-Housing (RRH) program. This funding falls within an ESG-CV-approved category of Rapid Re-housing, and responds to the CoC' ESG-CV Committee's **top priority.** With these dollars, SAY would be able to provide deposit assistance to their clients who received Emergency Housing Vouchers (EHV), lessening the need for deposit assistance from the current EHV -related funding sources (which are already stretched).
- 2. In regards to the other priorities, the CoC Board recommends to the County and to CDC staff that the County's current allocation of Federal ESG-CV funds may provide an additional opportunity to:
 - a. Fund more housing location services related to the EHV program as the EHV referral committee and others decide on an appropriate and robust Housing Locator and Risk Mitigation program; and
 - Address shortfalls by Emergency Shelter and non-congregate shelter (NCS) providers that had impacts relating to the January – February 2022 COVID (omicron) surge; and
 - c. Consider an additional allocation to ISFN to supplement their RRH program; and
 - d. Study whether Federal ESG-CV dollars may be used to assist with warming or cooling centers, should regulations allow and should one or more willing service providers exist.

Attachment A: Cumulative Allocations by Provider for ES, Street Outreach and RRH (includes today's proposed action)



Attachment A

Cumulative Allocations by Provider (includes 1-26-2022's proposed action)

Organization	Project Title	ESG-CV1	Initial Contract Allocation	ESG-CV2 July Allocation (7-21-21)	ESG-CV2 Sept. Allocation (9-22-21)	ESG-CV2 Jan Allocation (1-26-22)		Total Received by Project
Emergency Shelter								
Community Action Partnership	Sloan House Emergency Shelter	\$0	\$49,013	\$0				\$49,013.26
City of Santa Rosa	Sam Jones Hall Annex	\$651,224	\$0	\$390,533	\$521,881			\$1,563,638.00
Catholic Charities	Family Support Center	\$48,459	\$119,157	\$0	\$174,032			\$341,648.09
Catholic Charities	Sam Jones Hall	\$135,549	\$110,462	\$256,718	\$174,342			\$677,071.00
COTS	Mary Isaak Center	\$118,875	\$243,161	\$47,014	\$33,005			\$442,055.35
Nations Finest	Hearn House	\$72,000	\$0	\$0	\$0			\$72,000.00
Reach for Home	Winter Shelter	\$45,000	\$0	\$0	\$0			\$45,000.00
Social Advocates for Youth	Dream Center Emergency Shelter	\$78,672	\$131,359	\$90,681	\$169,544			\$470,256.30
Sonoma Applied Village Services		\$0	\$0	\$0	\$368,000			\$368,000.00
YWCA Sonoma County	Confidential Safe House	\$5,778	\$37,768	\$0	\$0			\$43,546.10
West County Community Services	West County Navigation Center	\$0	\$115,198	\$0				\$115,197.97
	Total Amounts by Allocation =	\$1,155,557	\$806,119	\$784,946	\$1,440,804			\$4,187,426.07
Street Outreach		40	40	40	400.00			405.011.00
West County Community Services	Total Amounts by Allocation =	\$0 \$0	\$0 \$0					\$36,814.00 \$36,814.00
Rapid Rehousing		**	,,	,	700,02			700,02 1100
Sonoma Applied Village Services	Rapid Rehousing (Housing Voucher Support)	\$0	\$0	\$0	\$0			\$0.00
Social Advocates for Youth	Rapid Re-housing (Housing Voucher Support)	\$0	\$0		\$183,706			\$350,680.00
TLC Child and Family Services	Rapid Re-housing	\$0	\$0	,	\$100,508			\$100,508.00
Interfaith Shelter Network	Rapid Re-housing	\$0	\$101,281	7.	\$100,500			\$101,281.31
Catholic Charities	Rapid Re-housing	\$0	\$0		\$538,370			\$798,578.00
	Total Amounts by Allocation =	\$0	\$101,281	\$370,323	\$822,584			\$1,351,047.31
						Remaini	ng to Allocate =	(\$0)

Older Adult Housing Needs

Sharon Rapport, Corporation for Supportive Housing
Nadia Woodcock, County of Sonoma Adult Protective Services
Ronit Rubinoff and Esther Lemus, Legal Aid of Sonoma County

Housing Insecurity and Adult Protective Services (APS)

■ APS investigates reports of abuse, neglect, and self – neglect among older adults age 60+ and dependent adults, ages 18 - 59.



Home Safe Pilot

- Home Safe Pilot Program launch July 2019
- The Home Safe Program was established from Assembly Bill 1811 to support the safety and housing stability of individuals involved in Adult Protective Services (APS) by providing housing-related assistance for homeless assistance and prevention.
- The 2018-19 CA Budget Act included a state appropriation of \$15 Million General Fund (one time) for Home Safe over a 3 year period from July 2018 through June 2021.
- 25 grantees- Sonoma County received \$680,000 in December of 2018.

Who is Eligible for Home Safe?

Adult Protective Services

- Older Adults age 60 and over
- Dependent Adults ages 18

 -59 with physical or mental limitations that restrict ability to carry out daily activities.



Home Safe Program

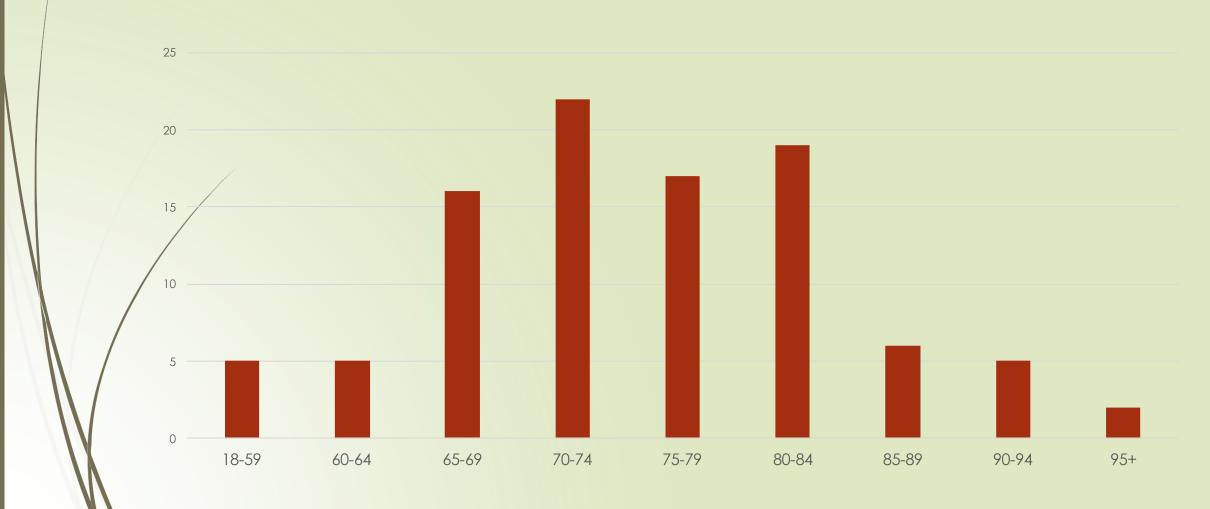
- Meets APS eligibility
- Presents with a housing related crisis related to health and safety

What can Home Safe do?

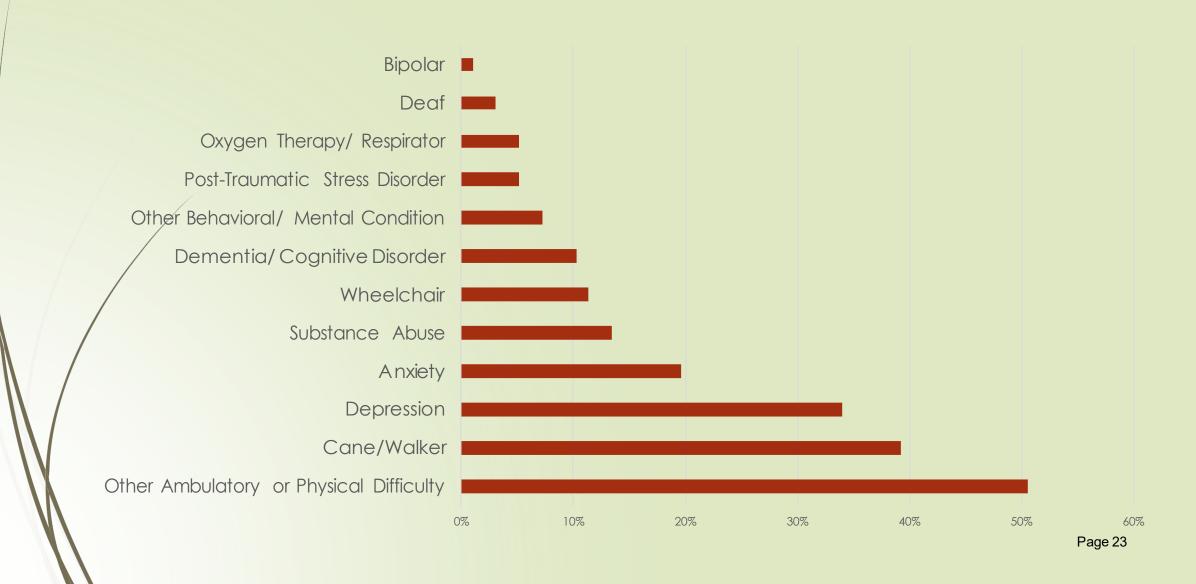
- Goal is to help stabilize client's current housing or if needed search for new housing.
- Home Safe partners with Legal Aid who provides essential legal assistance such as with evictions or restraining orders.
- Home Safe enables APS to provide:
 - ✓ Intensive short term case management
 - ✓ Landlord mediation
 - ✓ Eviction prevention
 - ✓ Short term financial assistance
 - ✓ Housing Options counseling



Home Safe Clients by Age



Home Safe Clients - Medical Conditions



Home Safe Expanded

- State approved extension of Home Safe through June 30, 2024
- Sonoma County APS allocation \$1.34 million FY 2021-2024
- All counties offered some level of funding for this fiscal year;
 counties may opt in or out
- Clients must continue to first meet APS eligibility.





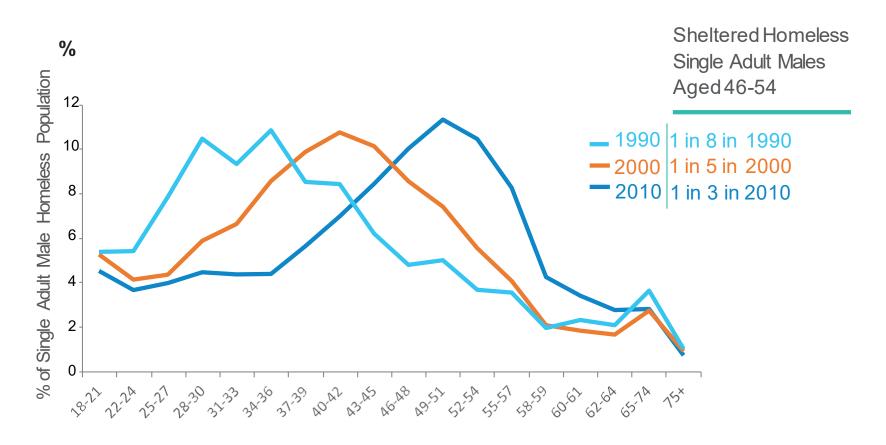
Homelessness Among Older Adults

Sharon Rapport
Corporation for Supportive Housing
Director, California State Policy



A Birth Cohort Phenomenon

Single Adult Male Shelter Users, United States



Aging Adults Experiencing Homelessness

- Older Adults: Higher Risk of Housing Instability & Homelessness
- Average Age of Someone Experiencing Homelessness: Over 50
- "50 is the New 75": A 50-year-old Experiencing Homelessness has Same Physical Conditions of a Housed 75-Year-Old
- Housing Instability: Greater Risk of Requiring Skilled Nursing Care & Long-Term Services & Supports

Homelessness, Especially Among Older Adults, Touches Multiple Systems

• Local services, including shelters, child welfare services, adult protective services, ambulance, etc.

A Los Angeles study showed people experiencing homelessness incur an average of \$2,898/month in

public costs.

Almost half of PE report recent incarceration. People exiting incarceration into homelessness are 7 times more likely to recidivate than people exiting to a home.

Hospitals

45% of frequent hospital users experience homelessness. PEH spend more days hospitalized than housed people with same conditions.

 □ Older adults experiencing The institutional cycle of homelessness

 Nursing **Homes**

Incarceration

The institutional cycle

of homelessness

Interventions for Older Adults Experiencing Homelessness

Housing that is Affordable, Permanent & Independent

Capital Dollars for Housing, like Multifamily Housing Program

Rental Assistance
Programs (New &
Existing) for People
Experiencing
Homelessness

Shallow Rental Assistance for **Targeted** Population at True Risk



Intensive Services to Avoid Nursing Home Admissions/Promote Independence

> Medicare & Medicaid's Program for All-Inclusive Care for the Elderly (PACE)

Medicaid Home & Community-Based Services Benefits

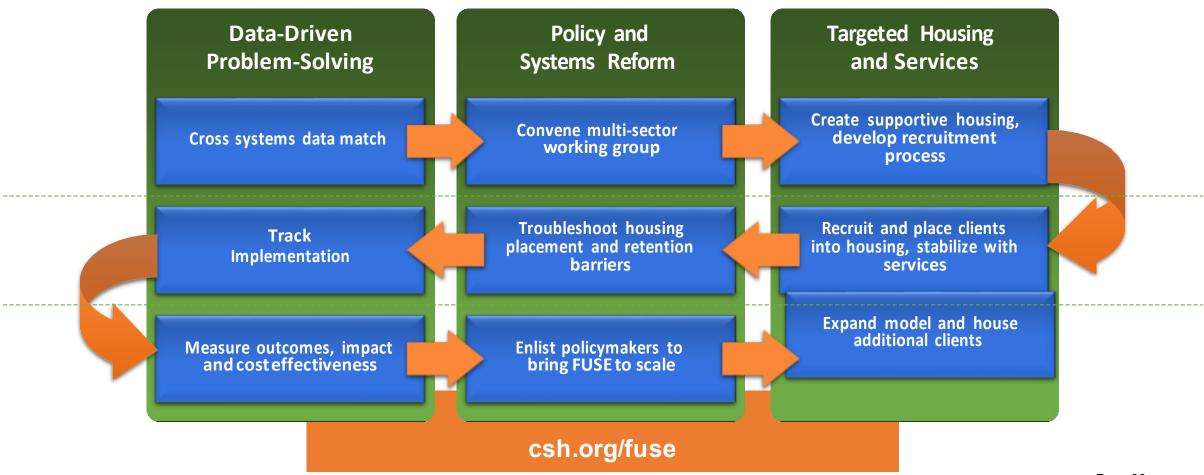
In-Home Supportive Services (California)

Medicaid Behavioral Health Services



High Utilizers

Communities spend millions of dollars to bounce vulnerable people between crisis services. States can create models to help break that cycle, while increasing housing stability and reducing multiple crisis service use.



Thank You!

Sharon Rapport sharon.rapport@csh.org (323) 243-7424



Sonoma County Continuum of Care Board Executive Summary

Item: 7

Date: January 26, 2022

Staff Contact: Thai Hilton Thai. Hilton@sonoma-county.org

Agenda Item Overview

The Emergency Housing Voucher (EHV) program is a collaborative effort of more than 20 agencies in Sonoma County. The Sonoma County and City of Santa Rosa Housing Authorities were awarded 284 vouchers. These vouchers required collaboration between the Housing Authorities and the Sonoma County Continuum of Care. These vouchers were allocated to 6 different subpopulations outlined in the MOU between the CoC and the Housing Authorities.

Referral working groups were formed to refer clients to the Rapid Re-housing at risk and Chronically Homeless subpopulations. The other subpopulations were referred directly to the Housing Authorities. At times, referrals were moved from one subpopulation to another so the amount outlined on the MOU will differ from the total number vouchers that were referred to a specific subpopulation. This was done because certain subpopulations could not find enough clients to refer and other subpopulations had a need.

Attached are 2 sheets that outline how many vouchers were allocated to each subpopulation and a table that outlines all of the agencies that participated in the EHV program, the number of referrals each agency made and what subpopulations they were made to.

You will notice that the total number of referrals in the table is less than 284. This is because the Move on, TAY and Domestic violence subpopulations did not have referral groups rather the agencies made direct referrals to the Housing Authorities. Attempts were made to get this information but it was not received by the referral working groups. Additionally, some of the voucher referrals have not been sent from the working group to the Housing Authorities as the referring agencies have not completed all of the documentation. At this time, the working groups have exhausted all of the referrals. It is possible that there will be future availability of vouchers if there is turn over.

The referral working groups have now shifted their focus to case conferencing and housing location to help these clients find housing.



EHV Agency Referral Count						
Total Number of Agencies Referring	24					
Total Regular Referrals RRH Family	92					
Total Regular Referrals RRH Individual	30					
Total Regular Referrals CH	102					
Total Overage Referrals RRH Family	8					
Total Overage Referrals RRH Individual	1					
Total Overage Referrals CH	8					
Total HHU Referrals	4					
Total PSH Referrals	10					
Total DV Referrals	2					
Total TAY Referrals	14					
Total Referrals to County	140					
Total Referrals to City	131					
Total Overall Referrals	271					



						100	
Agency	Chronically Homeless	TAY	Domestic Violence	Rapid Rehousing at Risk	CH high end medical users	Move On	Number of referrals
Catholic Charities	19	0	0	31	0	10	60
COTS	11	0	0	8	2	0	21
SCHSD	3	0	0	31	0	0	34
IFSN	4	0	0	18	0	0	22
Reach For Home	9	0	0	5	0	0	14
TLC	0	0	0	7	0	0	7
WCCS	8	0	0	12	0	0	20
YWCA	0	0	2	10	0	0	12
The Living Room	0	0	0	0	0	0	4
Dept of Rehab	0	0	0	1	0	0	1
SAY	0	14	0	1	0	0	15
Homes For the Homeless	0	0	0	3	0	0	3
IMDT	19	0	0	0	2	0	21
Petaluma Health Center	7	0	0	0	0	0	7
SR Community Health	4	0	0	0	0	0	4
Downtown Streets Team	11	0	0	0	0	0	11
Wallace House	1	0	0	0	0	0	1
CSN	3	0	0	0	0	0	3
SHARE Sonoma County	1	0	0	0	0	0	1
SAVS	2	0	0	0	0	0	2
Face To Face	5	0	0	0	0	0	5
SC District Attorney's Office	2	0	0	0	0	0	2
UFO	1	0	0	0	0	0	1
Total							271



Sonoma County Continuum of Care Board Executive Summary

Item: 8 Staff Report: CoC Board Elections Plan and Timing

Date: January 26, 2022

Staff Contact: Karissa White, CoC Coordinator, Karissa.white@sonoma-county.org 707-565-1884

Agenda Item Overview

Continuum of Care Board nominations are currently being solicited for five seats that will become vacant in March of 2022. Messaging has been sent out widely, with reminders. Staff encourages community members, providers, and CoC Board members to share this information. Nominations, including the statement of interest form, are due to the CoC Coordinator, Karissa White, by **February 23**rd **at 5:00 pm**.

Five Seats for Nomination:

- One (1) Second Provider: One representative of a homeless services provider different than the one with an appointed seat, as elected by CoC voting members.
- One (1) Licensed Health Care Organization: One representative from a licensed health care organization, as elected by CoC voting members.
- Two (2) At Large: at large seats as selected by voting CoC members; the candidates need not be CoC members themselves.
- One (1) Lived Experience: adult individual currently experiencing homelessness or who has experienced homelessness within five years (at the time of election) prior to the Board election, as elected by the Lived Experience and Planning body if functioning (as determined by the Board) or if not then by the CoC voting membership.

All seats listed above are open for a term of two years, except for the lived experience seat. The individual elected for the lived experience seat will serve out the remainder of the current Board member's two-year term upon resignation.

CoC Board Nominations:

As of January 19th, the Sonoma County Community Development Commission has received five nominations. The following is a breakout of the number of nominations per seat:

Provider: 1 Nomination

Licensed Health Care Organization: 1 Nomination

At Large: 3 Nominations

Lived Experience: 1 Nomination

Voting Member Applications:

As of January 20th, the Sonoma County Community Development Commission has received 23 applications from Sonoma County organizations for voting membership for the upcoming elections on March 2nd. If an organization wishes to apply for voting membership for the upcoming elections, applications must be received by **February 17th by 5:00 pm**.

Elections Timing Summary:

Voting Membership Applications Deadline to Vote: February 17, 2022 by 5:00 pm

CoC Board Nomination and Statement of Interest Forms Deadline: February 23, 2022 by 5:00 pm

CoC Membership Elections Meeting: March 2, 2022 1:00 - 4:00 pm

Lived Experience Advisory Planning Body Application Review and Election: TBD

Questions should be directed to Karissa White at Karissa.white@sonoma-county.org or 707-565-1884



Sonoma County Continuum of Care (CoC) Board Agenda for February 23, 2022 1:00pm-5:00pm Pacific Time

Public Zoom Link:

 $\underline{https://sonomacounty.zoom.us/j/99261791880?pwd=djc0b1ZsU1FpOU1kbnJ0UDNOcUhFQT09}$

Phone:1 (669) 900-9128 **WebinarID**: 992 6179 1880 **Passcode:** 650935

	Agenda Item	Packet Item	Presenter	Time			
	Welcome, Roll Call and Introductions		Board Chair	1:00pm			
1.	Consent Calendar (ACTION ITEM): • Approve Agenda • Approve Minutes from 1/26/21	-2/23/22 Agenda -DRAFT 1/26/21 Minutes	Board Chair	1:05pm			
2.	Staff Report		CDC Staff	1:15pm			
3.	Word from the Street		Ludmilla Bade	1:40pm			
4.	5 min Break						
5.	Standing Committee Reports Coordinated Entry Advisory (CEA) Committee- Update CEA Committee Rapid Rehousing Standards (ACTION ITEM) EHV Update Strategic Plan Committee Charter & Policy Review Committee Homeless Management Information System (HMIS)/Data Committee HMIS Systems Performance Measures Hived Experience Advisory & Planning Board (LEAP). Youth Action Board		Committee Representatives	1:50pm			
6.	Review Agenda for March CoC Board Meeting	-DRAFT 3/_/22	Board Chair	3:00pm			

7.	Board Member Questions & Comments	Board Chair	3:15pm
8.	Public Comment on Non-Agendized Items	Board Chair	3:30pm

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 Madison.Murray@sonoma-county.org. 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.