

Santa Cruz County Housing for Health Partnership (H4HP) Policy Board Regular Meeting Agenda August 21, 2024; 3 pm

2005 Wharf Road, Capitola - Capitola Library - Ow Family Community Room

Zoom Conference Link: https://santacruzcounty-us.zoomgov.com/j/1607737570

Call-In Number: +16692545252 Webinar ID#: 1607737570

Call to Order/Welcome

Non-Agenda Public Comment

Action Items (vote required) {3:15 – 4:15 pm}

- 1. Accept appointment of Courtney Lindberg, Public Works and Utilities Director, City of Watsonville to the CoC Policy Board
- 2. Approval of Minutes: June 12, 2024, Regular Meeting Minutes
- 3. Approval of CoC FY 2024/FY2025 Local Funding Application, Rating, and Ranking Process
- 4. Approve Service Provider Change for Freedom House Youth Transitional Housing Project and Associated HUD Rapid Rehousing Grants

Information Items (no vote required) {4:15-4:30 pm}

- 5. Lived Expertise Action Workgroups Updates
- 6. Central California Alliance for Health Housing Investments
- 7. Feedback and Grievance Policy Update
- 8. Housing for Health Vendor Pool South County Homelessness Prevention Opportunity
- 9. CoC Community Meeting Event Late September/Early October Housing First Practice

Report/Discussion Items (no vote required) (4:30 pm - }

10. CoC Board Meeting Attendance

Board Member Announcements

Adjournment

Next Meeting: Wednesday, October 16, 2024, 3 pm

The County of Santa Cruz does not discriminate based on disability, and no person shall, by reason of a disability, be denied the benefit of the services, programs, or activities. This meeting is in an accessible facility. If you are a person with a disability and require special assistance to participate in the meeting, please call (831) 763-8900 (TDD/TTY- 711) at least 72 hours in advance of the meeting to make arrangements. Persons with disabilities may request a copy of the agenda in an alternative format. As a courtesy to those affected, please attend the meeting smoke and scent free.

Action Item 1: Appointment of Courtney Lindberg, Public Works and Utilities, City of Watsonville to CoC Policy Board

(Action required) - Robert Ratner

Background

The City of Watsonville has two appointed seats on the Housing for Health Partnership Policy Board according to the Board's current governance charter. One of the City of Watsonville's prior appointments to the Board, Rene Mendez, left his position with the City as their City Manager. On July 9, 2024, the Watsonville City Council passed a resolution, appointing Courtney Lindberg, Public Works and Utilities Director, to the Housing for Health Partnership Policy Board to replace Rene Mendez. Courtney was appointed to serve on the Board through January 2026. A copy of the City of Watsonville appointment resolution is included in the Board packet. Suzi Merriam, Community Development Director, is the other City of Watsonville appointee to the Board.

Recommendation

Accept the appointment of Courtney Lindberg to the Policy Board and welcome her in her new role.

Suggested Motion

I move to approve the appointment of Courtney Lindberg to the Housing for Health Partnership Policy Board.

Attachment

Watsonville City Council appointment resolution

RESOLUTION NO.____(CM)

A RESOLUTION OF THE CITY COUNCIL OF THE CITY OF WATSONVILLE APPOINTING COURTNEY LINDBERG, PUBLIC WORKS & UTILITIES DIRECTOR, TO THE SANTA CRUZ COUNTY HOUSING FOR HEALTH PARTNERSHIP POLICY BOARD

WHEREAS, the U.S. Department of Housing and Urban Development (HUD) initiated Continuums of Care (CoCs) which span all 50 states and 6 United States territories. California is divided into 44 CoCs; and

WHEREAS, CoCs are charged with promoting and implementing evidence-based, best, promising, and emerging practices for preventing and ending homelessness; and

WHEREAS, previously, Santa Cruz County CoC was known as the Homeless Action Partnership (HAP); and

WHEREAS, on June 18, 2021, the HAP Board adopted a new governance charter that outlined a process for establishing a new CoC entity in 2022; and

WHEREAS, the new CoC entity will be known as Santa Cruz County Housing for Health Partnerships; and

WHEREAS, the City of Watsonville has two appointments for a term of two years; and

WHEREAS, the appointees shall serve at the pleasure of the City Council.

NOW, THEREFORE, BE IT RESOLVED BY THE CITY COUNCIL OF THE CITY
OF WATSONVILLE, CALIFORNIA, AS FOLLOWS:

1. Adopting a Resolution appointing members to the Santa Cruz County Housing for Health Partnership Policy Board does not meet CEQA's definition of a "project," because the action does not have the potential for resulting in either a direct

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SWZ _____ TV ____

physical change in the environment or a reasonably foreseeable indirect physical change in the environment.

- 2. That Courtney Lindberg, Public Works & Utilities Director, is hereby appointed and replacing Rene Mendez, Former City Manager, on the Santa Cruz County Housing for Health Partnership Policy Board for the remainder of the two-year term, expiring in January 2026, and shall serve at the pleasure of the City Council.
- 3. That the City Clerk is hereby directed to transmit a copy of this resolution to the Santa Cruz County Housing for Health Partnership Policy Board.

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Action Item 2: Approval of Meeting Minutes

(Action required) – Robert Ratner

Recommendation

Approve the June 12, 2024, Housing for Health Partnership Policy Board Regular Meeting minutes.

Suggested Motion

I move to approve the June 12, 2024, Housing for Health Partnership Policy Board Regular Meeting minutes.

Attachment

June 12, 2024, Housing for Health Partnership Policy Board Regular Meeting minutes



Housing for Health Partnership (H4HP) Policy Board Regular Meeting Minutes June 12, 2024; 3 pm

Call to Order/Welcome

Present: Heather Rogers, Karen Kern, Kate Nester, Mali LaGoe, Mariah Lyons, Shebreh Kalantari-Johnson, Suzi Merriam, Tom Staga

Absent: Fred Keeley, Justin Cummings, Manu Koenig, Terence Concannon

Additions and Deletions to the Agenda: None

Non-Agenda Public Comment

No public comment received.

Action Items (vote required)

1. Approval of Minutes: April 17, 2023, Regular Meeting

Discussion: Discussed that there was a lack of quorum to approve the February minutes and

the note regarding approval of the February minutes requires correction.

Public Comment: None.

Motion: Direct staff to correct approval of February Minutes noted in April Minutes and

approve April minutes with this correction

Motion to Approve: Suzi Merriam Motion Seconded: Kate Nester

Abstentions: Heather Rodgers, Shebreh Kalantari-Johnson, Mariah Lyons,

Board Action: Motion approved {Yes votes- Karen Kern, Mali LaGoe, Tom Stagg, Suzi Merriam}

2. Approval of Local Emergency Solutions Grant (ESG) Policy Manual

Discussion: The County of Santa Cruz and Housing for Health Partnership Continuum of Care

(CoC) received nearly \$10.4 million of Emergency Solutions Grant Coronavirus (ESG-CV) funding during the pandemic and underwent a state audit in the summer of 2023. Discussed that the Audit revealed that our CoC did not have an adequate local ESG policy and procedure manual consistent with state regulation. Mentioned that there were changes to federal regulations during the pandemic which required corresponding adjustments to the state's policy and procedure manual. Discussed the Housing for Health division staff developed a manual to align with the new state requirements. Mentioned that the proposed ESG program manual developed has been approved by the California Housing and Community Development (HCD) Department. This manual applies to agencies that receive ESG funding.

Public Comment: None.

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Motion: Move to approve the CoC ESG Policies and Procedures updated March 2024.

Heather Rogers *Motion to Approve:* Motion Seconded: Tom Stagg Abstentions: None.

Board Action: Motion passed with all members.

3. Approval of CoC Grievance Policy

Discussion:

The CoC Operations workgroup and CoC staff have collaborated to develop a proposed Grievance policy and procedure for programs and services that receive CoC funding or utilize the Homeless Management Information System (HMIS). Discussed that the Grievance policy outlines the process for reporting a policy or legal violation, gross misconduct, or negligence associated with a program. Mentioned that individuals who are not filing a grievance but submitting a complaint or feedback about a program or service can info@housingforhealthpartnership.org or call 831-454-7312. Concerns were raised about clients not being able to make grievances without support. Mentioned that individuals can call the Housing for Health Division (H4H) staff to seek accommodations with submitting grievances. Discussed that CoC staff should establish protocols for programs and services to submit reports on how grievances are reported and resolved. Discussed that the CoC should seek mediation for resolving any conflicts. Mentioned that CoC staff will be responsible for identifying any issues or obstacles that may arise during the implementation of the Grievance

policy.

Appreciate proposal that participants can have a voice. **Public Comment:**

> Mentioned that language used should be consistent, clearly defined, and simple. Recommended to include two board members with lived experience in the CoC and in the ad hoc panel. Suggested there should be training provided for investigations. Mentioned concerns about significant changes in how Santa Cruz and the ad hoc panel, including non-profit organizations, interact with each other and that there should be a discussion or procedure for the ad hoc panel to recommend sanctions or withdrawal of funding. Would like agencies to submit their complete Grievance documentation to the CoC, or at least provide a list of the number of cases and how they are being managed, along with relevant demographic information. He

also suggested the CoC seeks mediation for resolving any conflicts.

No formal motion made. Directed staff to take feedback from today's meeting Motion:

and return to a future meeting with an updated proposal.

Information Items (no vote required):

4. Lived Expertise Action Workgroups – Updates

Discussion: Sheryl Norteye, a staff member of Housing for Health, shared that the first Lived

Expertise Action Workgroups meeting was held in May. Both the general and youth

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groups have onboarded their five members each. Discussed groups are forming with the goal of identifying members of these groups that would participate on the CoC board. Mentioned that all group members have been enrolled in the Lived Expertise Training Academy in collaboration with the National Coalition for the Homeless, and they are expected to complete the training by the end of June. Discussed that the board is currently focused on establishing a regular meeting schedule, transitioning group facilitators, and creating operational guidelines. Mentioned that Goodwill Central Coast has successfully processed the first payroll for the board members. A system has been set up to provide financial and other support to board members as needed.

5. Central California Alliance for Health – Housing Investment Opportunity

Discussion:

Central California Alliance Health announced the launch of the Alliance Housing Fund in May and is currently accepting letters of intent from organizations applying to build, renovate, and/or rehab permanent housing units, recuperative care facilities, and/or short-term post-hospitalization housing units. Mentioned that the deadline for submitting letters of intent is June 30th, and decisions will be made by July 31st. Discussed that The Alliance aims to allocate a one-time investment of \$5 million to establish a revolving Santa Cruz County specific supportive housing loan investment fund with a Community Development Financial Institution (CDFI). Applications are also due on June 30th, and decisions will be made by July 31st. Discussed that the revolving supportive housing loan investment fund could be leveraged by encouraging different jurisdictions to work collectively by annually contributing funds to a housing trust fund, thus enabling them to receive additional state dollars.

6. Housing for Health Vendor Pool – Behavioral Health Bridge Housing Opportunity

Discussion:

The County of Santa Cruz received a Behavioral Health Bridge Housing (BHBH) Grant from the California Department of Health Care Services. The grant will be allocated towards establishing a new low-barrier navigation center and providing services for individuals experiencing homelessness with behavioral health challenges at 2202 Soquel Ave. Mentioned that The Santa Cruz Board of Supervisors has approved a predevelopment contract with LifeArk, a company involved in this initiative, and the developer of the site. Discussed that the current group of approved Housing for Health vendors has been notified of an opportunity to apply to operate the new center and provide services. Responses from vendors to this solicitation are due by June 28, 2024. Mentioned that interested individuals and organizations seeking inclusion in the Vendor Pool list can submit their applications for consideration by June 24th, 2024.



Report/Discussion Items (no vote required):

7. CoC Project Monitoring Update

The Housing for Health Division Staff (H4H) and our CoC consultant have collaborated to develop a comprehensive process for monitoring CoC projects. In 2023, H4H implemented risk assessment tools and processes for ongoing CoC projects that had been operational for at least a year. Discussed that the H4H staff conducted assessments remotely, and focused on gathering information related to spending, performance, and compliance. Mentioned that agencies were provided with a summary of the risk assessment results and requested necessary corrections. Mentioned that the results of the risk assessments were shared with the CoC NOFO rating and ranking committee last year. Discussed that this year, H4H monitoring process, involved in-depth, on-site local monitoring of CoC projects to help them prepare for anticipated HUD audits. Discussed including monitoring of agency grievance policies and procedures as part of this process. Mentioned that H4H staff are considering holding workshops or office hours for agencies experiencing challenges with HUD requirements. Discussed the following projects were selected for onsite monitoring and support: Community Action Board's (CAB) Youth Homelessness Response Team (YHRT), Walnut Avenue Family and Women's Center's (WAFWC), Housing and Employment Program (HEP), and Monarch Services' (Monarch) Domestic Violence (DV) Bonus Project. Mentioned that by the end of the month, each project will have completed a Corrective Action Plan and resolved any identified issues.

8. CoC NOFO Scoring Improvement Memo

Discussion:

Discussed that our Continuum of Care (CoC) participates in a highly competitive annual and national U.S. Department of Housing and Urban Development's (HUD) Continuum of Care funding process. Mentioned that HUD provides a detailed report of CoC scores received in their review process based on data and narrative responses submitted by local CoCs. In 2023, our CoC scored 163 out of 200 possible points. Discussed that most points were lost due to data and system performance data reported out of HMIS. Mentioned that a higher CoC overall NOFO score increases the likelihood of receiving awards for new and bonus projects. Discussed that our CoC received awards for most of our project last year, leading to a steady increase in overall CoC funding because of our success. Our overall CoC score ranked in the top 20% nationally. Discussed involving BitFocus (HMIS vendor) to enhance HMIS-reported data, ensuring accurate and improved annual Rapid Rehousing bed count, and convincing agencies and programs to participate in HMIS to improve our overall CoC scoring. Discussed that the CoC aims to attain smaller point increases from a few improvements in program activities such as racial equity, lived expertise steps, healthcare leveraging, and corresponding changes to narrative responses. Discussed that the CoC needs to work on

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developing a comprehensive domestic violence emergency transfer plan and conduct training with providers to prevent families from being separated when entering an emergency shelter to earn more points. Mentioned that the CoC also recently imported data from the VA's HUD-VASH program into HMIS to improve our system performance and increase our CoC NOFO scores.

9. Preliminary 2024 Point-in-Time (PIT) Count Data

Discussed that the preliminary data is based on matching HMIS data with the survey data collected from all volunteers who participated in the effort to measure the extent of unsheltered homelessness in Santa Cruz County. Mentioned that the total number of homeless individuals on a single night remained relatively consistent with the 2023 count, with an estimated 2.5% increase to 1,850. Discussed that there were reductions in homelessness among families, youth aged 18-24, and veterans, while there was an increase in homelessness among individuals aged 55 and older and those with disabilities, including mental health and substance abuse conditions, as well as individuals who have experienced prolonged homelessness. Mentioned that the rise in homelessness among seniors is a national trend. Discussed that Housing for Health collective efforts have made significant strides in providing housing vouchers, services, and landlord incentives, and facilitating greater collaboration among partners. Discussed that there are concerns regarding the ongoing budget negotiations between the governor's office and legislative office, particularly how the allocation of funding and resources will impact our community. Mentioned that the Point in Time data will be distributed in July and published on the website, accompanied by a press conference. The county board and cities will be informed to prepare for potential inquiries.

Board Member Announcements

No additional announcements.

Adjournment

Next Meeting: Wednesday, August 21, 2024, 3 pm

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Action Item 3: Approval of CoC FY 2024/FY2025 Local Funding Application, Rating, and Ranking Process

(Action required) – Sheryl Norteye, Tony Gardner

Background

The United States Housing and Urban Development Department (HUD) recently released a Notice of Funding Opportunity (NOFO) for its Continuum of Care (CoC) program - FY 2024 and FY 2025 Continuum of Care Competition and Renewal or Replacement of Youth Homeless Demonstration Program Grants (hud.gov) and a permanent supportive housing funding opportunity known as CoC Builds - Continuum of Care (CoC) Builds | HUD.gov / U.S. Department of Housing and Urban Development (HUD). These finding opportunities require that a local funding application rating and ranking process occur as part of preparing a consolidated and comprehensive application for these funding sources. Our FY23 CoC total award was for \$6,014,046 for 16 project grants with 11 different agencies. With the current grant opportunities, our CoC can apply for up to \$6.88M before rent adjustments and service grant Cost of Living Allowances (COLAs). In addition, we can select up to one permanent supportive housing development proposal for up to \$5M in funding.

As part of preparing the application from our CoC, the CoC Policy Board must approve a local application rating and ranking review process. Staff have developed background information and recommendations for this process in the attached powerpoint slide presentation and scoring tools.

Recommended Actions

- (1) Establish a local funding review committee that includes Larry Imwalle, Homelessness Response Manager from the City of Santa Cruz; Heather Rogers, County of Santa Cruz, Public Defender; Carlos Landaverry, Housing Manager, City of Watsonville; Karen Kern, Deputy Director, County of Santa Cruz Behavioral Health Department; one representative from the Lived Expertise Action Workgroup; one representative from the Youth-Lived Expertise Action Workgroup. The committee will be responsible for: (a) reviewing and rating project applications including hearing brief presentations from applicants; (b) developing project selection/ranking recommendations for the overall CoC funding application; and (c) playing a year-round role in improving the project evaluation, review, and selection process. The proposed committee members served in this capacity last year except for the proposed Lived Expertise workgroup participants.
- (2) Approve staff recommended rating criteria for CoC Builds permanent supportive housing project applicants.

- (3) Approve staff recommended adjustments to rating criteria that include: (a) Removing all references and points for Youth Homelessness Demonstration Project (YHDP) project and youth programs since YHDP grant are not competitive this year; (b) Extended a bonus point for programs that agree to serve immigrants and justice involved individuals in their eligible target populations; (c) Eliminated Coordinated Entry System (CES) and Homeless Management Information System (HMIS) project-types as eligible for new grants; (d) Increased possible points for spending all of last year's grant from 5 points to 8 points and decreased the possible points for the ratio of housing/services dollars from 5 points to 2 points; (e) Clarified how CoC will use risk assessments for a possible 3 points if there are no findings or if concrete actions were identified to resolve findings; (f) Adjusted possible point deduction for late APRs from 3 points to 4 points and reduced the deduction for unresolved HUD findings from 4 points to 3 points; (g) Added narrative responses on prior experience questions and added up to 10 points for these responses; (h) Added 1 point for Coordinated Entry System participation; and (i) Increased total points available from 100 to 110.
- (4) Approve staff recommendation to allow the funding review committee to make final selection/ranking decisions for CoC/YHDP NOFO projects to be confirmed by the Board at its next regular meeting on 10/16.
- (5) Approve staff recommendation to have the CoC Policy Board make the final decision on the selected CoC Builds applicant based on review committee recommendations.
- (6) Approve staff recommended language regarding YHDP and Domestic Violence (DV) grant recipients right to request reallocation of current grants within HUD guidelines and restrictions.

Suggested Motion(s)

Staff recommend consideration of each of the above recommended actions for motions made by members of the Board.

Attachments

- PowerPoint Presentation Slides: HUD FY 2024 CoC/YHDP NOFO and CoC Builds NOFO
- CoC Renewal Project Scoring Tool
- CoC New Project Scoring Tool



HUD FY 2024 CoC/YHDP NOFO AND CoC Builds NOFO

Update & Decisions Needed

August 21, 2024, Policy Board Meeting

HUD FY 2024: NOFO Overview

- Annual ritual of rating, ranking, reallocation, and renewal of grants (local process review committee)
- National competition full package of applications + system efforts
- Opportunities to make changes and apply for new funds + chance may lose funding for lowranked projects
- \$6.88M possible (before rent adjustments + service COLAs), for CoC/YHDP projects AND
- \$5M possible under separate CoCBuilds NOFO for one-time acquisition, construction, and/or rehab of new PSH
- Cannot use new funds for shelter, transitional housing only, services only, or homelessness prevention

Current HUD CoC Grant recipients

- 1. County of Santa Cruz Human Services Department (Planning, CES, Youth CES, HMIS)
- 2. County of Santa Cruz Health Services Agency (MATCH PSH)
- 3. Housing Authority of the County of Santa Cruz (Shelter Plus Care PSH)
- 4. Encompass Community Services (Youth Drop-in)
- **5.** Housing Matters (River St. PSH, Harvey West PSH)
- **6. Families in Transition** (First Step RRH, YAAS Youth RRH)
- **7. Community Action Board** (YHRT Youth Response Team)
- **8. Walnut Avenue Family & Women's Center** (DV Bonus RRH)
- **9. Bill Wilson Center** (Youth Shared Housing)
- **10. Covenant House** (New Roots Youth RRH) transition to Bill Wilson Center
- **11. Monarch Services** (DV Bonus RRH)

HUD HOMELESS POLICY PRIORITIES

Priority 1: End homelessness for all persons

Priority 2: Use a Housing First approach

Priority 3: Reduce unsheltered homelessness

Priority 4: Improve system performance

Priority 5: Partner with housing, health, and service agencies

Priority 6: Promote racial equity/address racial disparities

Priority 7: Improve assistance to LGBTQ+ individuals

Priority 8: Engage persons with lived experience

Priority 9: Building an effective workplace (new)

Priority 10: Increasing affordable housing supply

Significant HUD Changes This Year

- 1. Two-year NOFO for FY 2024 and 2025!
- 2. COLAs for Supportive Services and HMIS!
- **3. YHDP projects** do not have to compete renewal or replacement projects
- **4. YHDP reallocation** now allowed YHDP projects can now be reallocated to a new YHDP project with a different recipient
- **5. Reallocations of YHDP and DV Bonus** funds must be used for the same population
- 6. Tier 1 is smaller/only 90% of ARD (was 93%)

New HUD Funding Competitive

\$689,176 for new CoC bonus projects – PSH, RRH, TH-RRH, or CES

\$159,849 for new DV bonus project – PSH, RRH, TH-RRH, or CES

\$5 million for building a new PSH project (see next slide)

+ Any other reallocated funds/poor performers

More About the CoCBuilds NOFO

- Separate one-time NOFO for building new PSH we are integrating it with the CoC/YHDP process/timeline
- Kind of like Project Homekey with encouragement to convert buildings such a motels
- \$5M max available to Santa Cruz County CoC for a single project only
- Funds are mainly for one-time acquisition, construction, and rehab BUT 20% max can be used for renewable services, operations, and HMIS
- 10% max can be used for project admin
- Deadline not till November 21

Funding Review Committee

Local Funding Review Committee (not conflicted)

- Larry Imwalle
- Heather Rogers
- Carlos Landaverry
- Karen Kern
- New: LEAB and Y-LEAB representatives (HUD required)

Committee Role

- Review and rate project applications
- Hear CoC project presentations/Q & A optional, but 2 bonus points incentive to participate. Committee members should be prepared for considerable time to hear *all* (10 to 12?)projects, ½ hour each
- Develop project selection/ranking recommendations
- Year-round role in developing/implementing project evaluation, review, selection process



Regular CoC Rating and Ranking Criteria

Key criteria

- Project type use of \$ for housing = higher score
- Chronically homeless or DV focus = higher points
- Program performance (renewal) or program design (new) housing, income, benefits
- Coordinated entry referral acceptance
- Housing First fidelity
- Cost effectiveness/spending more spending = higher score
- Agency years of experience/capacity including taking action in response to risk assessment finding/narratives of prior experience in key areas
- Leverage mainstream resources
- Equity factors
- Community collaboration and participation



Combined CoC, YHDP & CoCBuilds Process Timeline

- 8/23 Local Public Solicitation of CoC, YHDP, and CoCBuilds applications
- 8/27 & 8/28 Applicant Orientations applications available
- 9/27 Local application deadline (at least 30 days ahead of HUD deadline)
- 10/8 & 10/9 Funding Review Committee orientation, applicant presentations, and *selection/ranking* decisions CoC projects, *recommendation* for CoC Builds project sponsor
- 10/14 Written decisions to applicants (at least 15 days ahead of HUD deadline)
- 10/16 Board meeting/review of CoC ranking decisions & approve CoCBuilds project sponsor
- 10/23 End of appeals period
- 10/28 Web posting/CoC application & ranking priorities (at least 2 days ahead of HUD deadline)
- 9/28 HUD CoC/YHDP deadline
- 11/21 HUD CoCBuilds deadline



Affirm CoCBuilds Scoring Criteria

Key scoring criteria for selecting a single CoCBuilds project

- Development and Leverage Experience more experience and \$ leveraged = higher score
- Supportive Housing Management Experience similar housing and services for homeless households with disabilities
- Implementation Schedule site control and meeting HUD timeliness standards
- Coordinated Entry referral acceptance
- Coordinating with Housing, Healthcare, and Social Service Providers – for up to 50% of development costs or subsidies for up to 25% of units
- Maximizing Rental Assistance Using the maximum 20% for renewable rental assistance (and/or supportive services if needed)
- Property Maintenance Experience
- Rental Housing Management Experience
- Promoting Racial Equity
- Community Integration for disabled persons
- HUD Act Sec. 3 required low income employment/training
- Environmental Justice HUD bonus points (could be αe breaker).

Affirm Rating Criteria Adjustments

- 1. Removed all references and points for YHDP projects and youth since YHDP is not competitive this year
- 2. Extended the bonus point for serving immigrants or justice-involved to include RRH and TH-RRH (not just just PSH)
- 3. Eliminated CES and HMIS as project-type priorities for new grants
- 4. Increased possible points for spending all of last year's grant from 5 points to 8 (and correspondingly decreased possible points for the ratio of housing/services dollars from 5 points to 2 (HUD is instituting a services COLA)
- 5. Clarified how CoC will use risk assessments for a possible 3 points (will receive 3 points of there were no findings OR if they identified concrete actions to resolve findings)
- 6. Adjusted possible point deduction for late APRs from 3 points to 4 (and correspondingly reducing the deduction for unresolved HUD findings from 4 points to 3)
- 7. Added narrative responses on prior experience in key areas to Agency Experience, and added a total of 10 points for these responses
- 8. Added CES participation (1 pt.) to Community Collaboration section
- 9. Increased total possible points from 100 to 110

Approve Decision Process/Rating & Ranking

Options

- **1. Funding Review Committee** to make the *final selection/ranking decisions* for CoC/YHDP NOFO projects to be *confirmed by the Board* at its next regular meeting (10/16)
- 2. H4H Board special meeting held on October 14 or 15 (or earlier) in order to approve the final selection/ranking decisions

Staff preferred – Option 1 (No regular Board meeting in the HUD-required timeframe (approval letters must be sent no later than 15 days before the October 30 HUD deadline) & confirms committee's expanded year-round role in developing/implementing project evaluation, review, selection process

Note-Because the CoCBuilds NOFO has more time, the H4H Board can retain authority to select the project sponsor for these funds at its October 16 meeting



Affirm Reallocation Policy Additions for YHDP and DV Bonus

This year, HUD has clarified that YHDP and DV Bonus renewal projects can be reallocated. Therefore, we are requesting your approval to add the following language to the H4H reallocation policy:

- 1. YHDP renewal grants may be reallocated, in whole or in part, based upon need and/or performance, to one or more new projects with a different recipient. However, any new project thus created must serve a 100% YHDP-eligible population, may only carry out YHDP-eligible program activities, and must include as many units and at least as much rental assistance, operations, and leasing funds as the grant or grants being reallocated.
- 2. DV Bonus renewal grants may be reallocated, in whole or in part, based upon need and/or performance, to one or more new projects with a different recipient. However, any new project thus created must serve a 100% DV Bonus-eligible population and may only include the following DV Bonus-eligible project types: RRH, TH-RRH, or CE.

Suggested Motion

I move to approve:

- 1. The granting of authority to the Funding Review Committee to make final project selection/ranking recommendations to be confirmed by the H4HP Policy Board at its next regularly scheduled meeting (October 16, 2024);
- 2. The CoCBuilds scoring criteria used to competitively score housing development projects and select a single project;
- 3. The adjustments as presented made to CoC project rating criteria used to competitively score projects;
- 4. The YHDP- and DV Bonus-related additions as presented made to the CoC reallocation policy used to guide decisions regarding reallocation of HUD CoC funds; and,

Approve transfer of Covenant House CA (CHC) YHDP grant to Bill Wilson Center (BWC)

- CHC has notified staff that it can no longer can efficiently manage its \$438,368 per yr. Youth RRH grant – HUD allows grant transfers if the CoC approves
- Staff have coordinated and reached an understanding with CHC and BWC to transfer the grant to the latter (highly experienced in serving youth experiencing homelessness)
- Due to the NOFO timing, CHC will apply for the grant this year and will transfer the grant just as soon as the grant is awarded next year

Options:

- 1. Approve transfer of the \$438,368 RRH grants to BWC, including submitting a CoC Board approval letter to HUD and CA HCD Homekey program. BWC assumes the project on day 1 and continues serving the current clients (staff preferred)
- 2. Use competitive RFP to solicit qualified agencies to receive the grant. New agency assumes the project on day 1 and continues serving the current clients Problems: RFP not HUD-required and difficult to accomplish during the needed timeframe
- 3. Use the YHDP reallocation process to reallocate the funds to a new project to a qualified agency (e.g., BWC) Problems: since it would be a brand new grant, it would lead to a 6-month funding gap and the new RRH grant could not serve clients of the existing CHC grant

Santa Cruz County 2024 CoC Renewal Project Scoring Tool

Reviewer:	Check that not conflicted per CoC policy	
Agency/Project:		

No.	Scoring Criteria	Points Possible	Points
1	Housing/Project Type	10 POINTS POSSIBLE	
	Points will be awarded based upon local priority for the following	9 points:	
	housing/project types:	• PSH – 100% CH	
	10 points for:	• PSH – 100% Ded.+	
	(a) Renewal projects of the following types:	• RRH	
	9 points for:	TH-RRH	
	a. PSH serving 100% chronically homeless persons with	1 bonus point:	
	emphasis on the longest histories of homelessness and	PSH immigrants or	
	most severe needs	justice involved	
	b. PSH serving 100% DedicatedPLUS project type with	allowable	
	emphasis on the longest histories of homelessness and	10 points:	
	most severe	● RRH	
	c. RRH for homeless individuals or families, including	◆ TH-RRH	
	unaccompanied youth	◆ CE	
	d. Joint TH and RRH projects	◆ HMIS	
	1 bonus point for:	◆ YHDP	
	Renewal PSH, RRH, or TH-RRH projects serving CH,	5 points:	
	DedicatedPLUS, or other populations that specifically	• PSH – <100% CH or	
	identify immigrants and/or persons with justice system	Ded.+	
	involvement as an allowable client subpopulation	0 points:	
	10 points for:	All other projects	
	e. RRH for homeless individuals or families, including		
	unaccompanied youth		
	f. Joint TH and RRH projects		
	g. —CE projects		
	h. HMIS projects		
	i. YHDP projects.		
	5 points for:		
	(a) Renewal projects of the following types:		
	a. PSH projects <u>not</u> dedicated 100% to chronically		
	homeless or DedicatedPLUS populations.		
	O points for: – All other projects.	40 DOINTS DOSSIDLE	
2	Priority Population Served - Addresses Chronic Homeless, Youth,	10 POINTS POSSIBLE	
	or DV Population(s)	CH population:	
	Projects will receive points based on the percentage of clients	• 10 points – 100% CH	
	served in the application who are experiencing chronic	• 7.5 points – 70-99%	
	homelessness, are youth experiencing homelessness, or are	• 5 points – 50-69%	
	survivors or domestic violence.	• 2.5 points – 25-49%	
		• 1 point – 1-24%	

3	PERFORMANCE MEASURES	O points – 0%. OR DV population: 10 points – 100% DV dedicated O points – <100%. OR YHDP projects: 10 points (CES & HMIS projects will receive 10 points) 20 POINTS POSSIBLE CES, HMIS, and first-year projects without a full year of HMIS data will receive 15 points). YHDP renewal projects will receive 16 points if they completely answer the YHDP.
3A	CoC RENEWAL HOUSING PROJECTS ONLY:	20 POINTS POSSIBLE
3A 1	 For PSH, did you meet the standard in helping leavers and stayers combined retain permanent housing for 7 months or more? HUD and CoC Performance Standard – at least 90% For transitional housing and RRH, did you meet the standard in helping leavers find and move into permanent housing? HUD and CoC Performance Standard – at least 90% Income: For all projects except HMIS, did you meet the standard in helping leavers and stayers combined maintain or increase income from employment AND non-cash benefits from mainstream sources? CoC Performance Standard – at least 75% For all projects except HMIS, did you meet the standard in helping ADULT leavers and stayers combined maintain or increase income from employment ONLY? CoC Performance Standard – at least 25% 	7 Points Available 7 points – 90% or more 3½ points – 80%-89% 0 points - <80% 5 Points Available All Income 2½ points – 75% or more 1½ points – 65%-74% 0 points - <65% Employment Income 2½ points – 25% or more 1½ points – 15%-24% 0 points - <15%
3A 3	 Non-Cash Mainstream Benefits: For all projects except HMIS, did you meet the standard in helping leavers and stayers combined maintain or increase at least one source of non-cash benefits? CoC Performance Standard – at least 50% 	2 Points Available
3A 4	 Program Occupancy (bed utilization): For all projects except HMIS, did you meet the standard in ensuring that average program occupancy met CoC standard. 	 2 Points Available 2 points – 90% or more 1 point – 80%-89%

	CoC Performance Standard – at least 90% for the year	• 0 points - <80%
	,	<u> </u>
3A 5	 Returns to Homelessness: For all projects except HMIS, did you meet the standard in ensuring that leavers did not exit to non-permanent destinations (e.g., shelters, transitional housing, hotels, motels, and the streets)? CoC Performance Standard – no more than 20% Length of Stay: For PSH only, did you meet the standard by increasing the annual average LOS in permanent housing for leavers and stayers combined? – higher LOS average than previous APR year For TH and RRH only, did you meet the standard by decreasing the annual average LOS in TH or RRH for leavers? – lower LOS average than previous APR year 	2 Points Available 2 points – 20% or less 1 point – 21%-30% 0 points - >30% 2 Points Available PSH: 2 points – higher LOS than previous year 0 points – lower LOS than previous year TH & RRH: 2 points – lower LOS than previous year
24	Victim Comice Providers only Cofety	0 points – higher LOS than previous year Not Scored This Year
3A 7	Victim Service Providers only - Safety:Please propose at least one relevant measure of the degree of	NOT Scored This Year
	participant safety that you will commit to using in the future.	
3B	YHDP RENEWAL PROJECTS ONLY:	16 POINTS POSSIBLE
	 The application complete answers to the following questions: Please briefly describe: 1. The project you are operating. 2. The needs identified in the Santa Cruz County YHDP Coordinated Community Plan that this project was designed to meet. 3. The project's current level of success in meeting the needs identified in the Santa Cruz County YHDP Coordinated Community Plan. 4. The qualitative outcomes of the project. 5. The best practices (e.g., positive youth development) used by the project. 6. Any challenges faced in maintaining the project. 	16 Points Available Completely answered: 16 points
4	PROGRAM EFFECTIVENESS	20 POINTS POSSIBLE (CES & HMIS projects will receive 15 points)
4A	Coordinated Entry Participation: The minimum percentage of new clients since 1/1/23 who came from Smart Path CES referral.	10 Points Available 10 points – 95% - 100% from CES referral 8 points – 90% - 94% 6 points – 85% - 89% 4 points – 80% - 84% 2 points – 75% - 79%

		• 1 point – 70% - 74%
		0 points – below 70%.
4B	Housing First Fidelity Assessment:	10 Points Available
	Serving People with the Highest Barriers to Housing:	Housing First approaches:
	To what extent does your project embrace the following Housing	1 point "yes" response
	First approaches?	0 points "no" response
	 Does the project prioritize client selection based on 	Removing housing barriers:
	duration of homelessness and vulnerability?	• 1/2 point per "yes"
	2. Does the project accept all clients regardless of substance	response
	use history, or current use?	0 points per "no"
	3. Does the project accept clients who are diagnosed with, or	response
	show symptoms of, a mental illness?	'
	4. Does the project accept clients regardless of criminal	
	history?	
	5. Does the project accept clients regardless of income or	
	financial resources?	
	6. Does the project use a harm-reduction model for drugs	
	and/or alcohol use?	
	·	
	Removing Barriers to Housing:	
	To what extent does your project eliminate the following barriers to	
	housing?	
	No minimum income	
	2. No required current employment	
	3. No required state issued photo id	
	4. Need not show sobriety (drugs or alcohol)	
	5. OK to have symptoms of mental illness	
	6. Need not have transportation	
	7. No required specific disabling condition (e.g., MH, SA,	
	HIV/AIDS)	
	8. Need not show use medication.	
5	FINANCIAL AND COST EFFECTIVENESS	10 POINTS POSSIBLE
5A	Housing vs. Service Funding: The percentage of <i>program</i> funding	2 Points Available
	(not including admin) proposed to be used on housing activities	• 2 points renewal – 75%
	(acquisition, construction, rehab, and housing operations) vs.	- 100% housing
	percentage funding used on non-housing activities (supportive	activities
	services, services-only operations, and HMIS).	• 1 points renewal – 50%
		- 74%
		• 3 points renewal 70%
		-79%
		• 2 points renewal 60%
		- 69%
		• 1 point renewal – 50%
		99%
		• 0 points – below 50%.
		(CES and HMIS , and YHDP
		SSO projects will receive 2

		points)
5B	Drawdown completeness: The percentage of overall HUD grant drawn down in the most recent completed program year recorded in the most recent APR.	 8 Points Available 8 points – 100% of budgeted funds successfully drawn 7 points – 98% - 99% 6 points – 96% - 97% 5 points – 94% - 95% 4 points – 92% - 93% 3 points – 90% - 91% 2 points – 88% - 89% 1 point – 86% - 87% 0 points – below 86%.
6	AGENCY EXPERIENCE/CAPACITY	10 POINTS POSSIBLE
6A	Agency Years of Experience Number of years of agency experience in implementing the proposed program OR similar program type (e.g., RRH or PSH)	 10 Points Available 10 points – 8+ years 8 points – 5 to 7 years 6 points – 4 to 6 years 4 points – 2 to 3 years 2 points – 1 to 2 years 0 points – below 1 year
6B	Capacity Issues Points will be deducted if in the past year (7/1/23-present): (1) the program had a CoC risk assessment AND did not carry out any actions to correct and risk issue(s) identified, (2) the agency has unresolved HUD monitoring findings in CoC programs, or (3) the agency has been late in submitting a CoC APR.	 10 Pts Deduction Possible 3 points deduction – no action risk issues 3 points deduction – unresolved findings 4 points deduction – late APR
6C	Narrative Responses - Past Experience in Key Areas Please (1) describe your agencies prior experience, and (2) provide at least one example of agency success, in the following key areas: 1. Priority Population Served - Serving clients who are experiencing chronic homelessness, or are survivors of domestic violence 2. Program Design – Operating a similar type of program 3. CES Participation – Accepting and successfully housing program referrals through CES 4. Housing First – Embracing Housing First approaches and removing participant barriers to housing 5. Mainstream Resources – Implementing strategies to help participants access federal mainstream benefits 6. Equity Factors – Implementing agency leadership, governance, and policy changes and assessing and improving participant outcomes with and equity lens	 10 Points Available 2 points – priority population 1 point – program design 1 point – CES participation 2 points – Housing First 1 point – Mainstream resources 2 points – Equity factors
7	Mainstream Resources The number of strategies the program has identified to help clients	7 POINTS POSSIBLE • 7 points – 7 - 8 strategies used

	access federal mainstream benefits, including Medicaid; State Children's Health Insurance Program; TANF (CalWORKS); Food Stamps; SSI; Workforce Investment Act; <i>Employment Income</i> ; Welfare to Work Grant Programs and Veterans Health Care.	 5 points – 5 - 6 used 3 point – 3 - 4 used 2 points – 2 used 1 point – 1 used 0 points – 0 used
8	 Equity Factors Agency will receive one point for each of the following factors that it has implemented OR commits to implement within one year: Agency leadership, governance, and policies: 1. Agency has individuals representing BIPOC in managerial and leadership positions 2. Agency has individuals representing LGBTQ+ in managerial and leadership positions 3. Agency board of directors includes representation from more than one person with lived experience 4. Agency has relational process for receiving and incorporating feedback from persons with lived experience 5. Agency has reviewed internal policies and procedures with an equity lens and has a plan for developing and implementing equitable policies that do not impose undue barriers. 6. Agency has provided at least one staff training since 1/1/21 on enhancing equity for BIPOC and/or LGBTQ+. Program participant outcomes: 7. Agency has reviewed program participant outcomes with an equity lens, including the disaggregation of data by race, ethnicity, gender identity, and/or age 8. Agency has identified programmatic changes needed to make program participant outcomes more equitable for overrepresented races or ethnicities and developed a plan to make those changes 9. Agency has identified programmatic changes needed to make program participant outcomes more equitable for LGBTQ+ persons and developed a plan to make those changes 10. Agency is working with HMIS lead to develop a schedule for reviewing HMIS data with disaggregation by race, ethnicity, and or long the program and or long the persons and or long the persons and or long that the persons and or l	1 point per "yes" response 0 points "no" response
9	Community Collaboration and Participation (3 points possible) To what extent does the applicant agency support the Housing for Health Partnership (H4HP) by: (1) participating in meetings of the H4HP general membership, (2) participating in HMIS by entering client data into HMIS for 100% of its programs that are listed in the 2024 Housing Inventory Chart (HIC); and (3) participating in CES with no housing referral denials except where there is an appropriate reason for denial under an exception listed in the CES Policies and Procedures, section 7.3.5?	3 POINTS POSSIBLE H4HP meeting participation: 1 point: Agency attends 75% to 100% 1 point: Agency attends 51% to 74% 0 points: Agency attends 0% to 74% HMIS participation:

Sub-scores will be determined by H4HP staff based upon appropriate H4HP and documentation for the period from July 1, 2023, to the present time. TOT	 1 point: Has data for 100% HIC 0 points: Has data for less than 100% HIC CES participation: 1 point: Agency receives CES housing referrals and has no inappropriate denials 0 points: Agency does not receive CES housing referrals OR has had inappropriate denials AL 110 POINTS POSSIBLE
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Santa Cruz County 2024 CoC New Project Scoring Tool

Reviewer:	Check that not conflicted per CoC policy	
Agency/Project:		

No.	Scoring Criteria	Points Possible	Points
1	Housing/Project Type	10 POINTS POSSIBLE	
	Points will be awarded based upon local priority for the following	9 points:	
	housing/project types:	New realloc or bonus:	
	10 points for:	• PSH – 100% CH	
	(a) New projects of the following types proposing to use funds	• PSH – 100% Ded.+	
	reallocated (including voluntary or transitional reallocations)	RRH	
	from renewals and/or new project bonus funds:	TH-RRH	
	9 points for:	1 bonus point:	
	a. PSH with rental assistance serving 100% chronically	PSH, RRH, or TH-RRH	
	homeless persons with emphasis on the longest	immigrants or justice	
	histories of homelessness and most severe needs	involved allowable	
	b. PSH with rental assistance serving 100% DedicatedPL		
	project type with emphasis on the longest histories o		
	homelessness and most severe needs	• TH-RRH	
	c. Joint TH and RRH projects	• CE	
	d. RRH for homeless individuals or families, including	◆ HMIS	
	unaccompanied youth	• YHDP replacement	
	1 bonus point for:	New DV Bonus:	
	New PSH, RRH, or TH-RRH projects serving CH,		
	DedicatedPLUS, or other populations that specifically	RRH - Housing 1st	
	identify immigrants and/or persons with justice syste	m TH-RRH - Housing 1st CES – DV focused	
	involvement as an allowable client subpopulation		
	10 points for:	5 points:	
	e. Joint TH and RRH projects	New realloc or bonus:	
	f.—RRH for homeless individuals or families, including	• PSH – <100% CH or	
	unaccompanied youth	Det.+	
	g.—Expansion of CE or HMIS to the extent justified by	0 points:	
	unmet operational costs for these programs, or to	All other projects	
	improve program or administrative efficiency		
	h. YHDP replacement projects.		
	10 points for:		
	(b) New DV bonus projects of the following types:		
	a. RRH projects that must follow a Housing First approa	ch	
	b. Joint TH and RRH projects that must follow a Housing	,	
	First approach		
	c. CES project to meet the needs of DV survivors,		
	demonstrating trauma-informed and victim-centered		
	approach.		
	5 points for:		
	(a) New projects of the following types proposing to use funds		

	reallocated from renewals or CoC bonus funds:	
	a. PSH projects <u>not</u> dedicated 100% to chronically	
	homeless DedicatedPLUS populations.	
	0 points for: – All other projects.	
2	Priority Population Served - Addresses Chronic Homeless, Youth, or DV Population(s) Projects will receive points based on the percentage of clients served in the application who are experiencing chronic homelessness, are youth experiencing homelessness, or are survivors or domestic violence.	10 POINTS POSSIBLE CH population: 10 points – 100% CH 7.5 points – 70-99% 5 points – 50-69% 2.5 points – 25-49% 1 point – 1-24% 0 points – 0%. OR DV population: 10 points – 100% DV dedicated 0 points – <100%. OR YHDP projects: 10 points (DV CES & HMIS projects will receive 10 points)
		will receive 10 points)
3A	NEW CoC HOUSING PROJECTS ONLY – PROGRAM DESIGN	20 POINTS POSSIBLE
3A	NEW CoC HOUSING PROJECTS ONLY – PROGRAM DESIGN Narrative Responses: Housing where participants will reside is fully	, ,
3A		20 POINTS POSSIBLE
3A	Narrative Responses: Housing where participants will reside is fully	20 POINTS POSSIBLE Non-DV projects:
3A	Narrative Responses: Housing where participants will reside is fully described and appropriate to the program design proposed.	20 POINTS POSSIBLE Non-DV projects: 4 points – measurable
3A	Narrative Responses: Housing where participants will reside is fully described and appropriate to the program design proposed. Program design includes provision of appropriate supportive services. Consider: 1. Are the program annual measureable goals appropriate to the	20 POINTS POSSIBLE Non-DV projects: • 4 points – measurable goals
3A	Narrative Responses: Housing where participants will reside is fully described and appropriate to the program design proposed. Program design includes provision of appropriate supportive services. Consider: 1. Are the program annual measureable goals appropriate to the program type and sufficiently challenging?	20 POINTS POSSIBLE Non-DV projects: 4 points – measurable goals 4 points – majority
3A	Narrative Responses: Housing where participants will reside is fully described and appropriate to the program design proposed. Program design includes provision of appropriate supportive services. Consider: 1. Are the program annual measureable goals appropriate to the program type and sufficiently challenging? 2. Will the majority of homeless participants come from the	20 POINTS POSSIBLE Non-DV projects: 4 points – measurable goals 4 points – majority come from streets or
3A	 Narrative Responses: Housing where participants will reside is fully described and appropriate to the program design proposed. Program design includes provision of appropriate supportive services. Consider: 1. Are the program annual measureable goals appropriate to the program type and sufficiently challenging? 2. Will the majority of homeless participants come from the streets, emergency shelters, or other appropriate setting given 	20 POINTS POSSIBLE Non-DV projects: • 4 points – measurable goals • 4 points – majority come from streets or shelters
3A	Narrative Responses: Housing where participants will reside is fully described and appropriate to the program design proposed. Program design includes provision of appropriate supportive services. Consider: 1. Are the program annual measureable goals appropriate to the program type and sufficiently challenging? 2. Will the majority of homeless participants come from the streets, emergency shelters, or other appropriate setting given population served and project type?	20 POINTS POSSIBLE Non-DV projects: • 4 points – measurable goals • 4 points – majority come from streets or shelters • 3 points – outreach
3A	 Narrative Responses: Housing where participants will reside is fully described and appropriate to the program design proposed. Program design includes provision of appropriate supportive services. Consider: 1. Are the program annual measureable goals appropriate to the program type and sufficiently challenging? 2. Will the majority of homeless participants come from the streets, emergency shelters, or other appropriate setting given population served and project type? 3. Is the program's outreach plan sufficient and feasible 	20 POINTS POSSIBLE Non-DV projects: • 4 points – measurable goals • 4 points – majority come from streets or shelters • 3 points – outreach plan
3A	 Narrative Responses: Housing where participants will reside is fully described and appropriate to the program design proposed. Program design includes provision of appropriate supportive services. Consider: 1. Are the program annual measureable goals appropriate to the program type and sufficiently challenging? 2. Will the majority of homeless participants come from the streets, emergency shelters, or other appropriate setting given population served and project type? 3. Is the program's outreach plan sufficient and feasible population served and project type? 	20 POINTS POSSIBLE Non-DV projects: • 4 points – measurable goals • 4 points – majority come from streets or shelters • 3 points – outreach plan • 3 points – supportive
3A	 Narrative Responses: Housing where participants will reside is fully described and appropriate to the program design proposed. Program design includes provision of appropriate supportive services. Consider: 1. Are the program annual measureable goals appropriate to the program type and sufficiently challenging? 2. Will the majority of homeless participants come from the streets, emergency shelters, or other appropriate setting given population served and project type? 3. Is the program's outreach plan sufficient and feasible population served and project type? 4. Are the types and frequency of services appropriate for the 	20 POINTS POSSIBLE Non-DV projects: • 4 points – measurable goals • 4 points – majority come from streets or shelters • 3 points – outreach plan • 3 points – supportive services • 3 points – obtain PH • 3 points – income &
3A	 Narrative Responses: Housing where participants will reside is fully described and appropriate to the program design proposed. Program design includes provision of appropriate supportive services. Consider: 1. Are the program annual measureable goals appropriate to the program type and sufficiently challenging? 2. Will the majority of homeless participants come from the streets, emergency shelters, or other appropriate setting given population served and project type? 3. Is the program's outreach plan sufficient and feasible population served and project type? 4. Are the types and frequency of services appropriate for the population served and project type? 	20 POINTS POSSIBLE Non-DV projects: • 4 points – measurable goals • 4 points – majority come from streets or shelters • 3 points – outreach plan • 3 points – supportive services • 3 points – obtain PH • 3 points – income & live independently
3A	 Narrative Responses: Housing where participants will reside is fully described and appropriate to the program design proposed. Program design includes provision of appropriate supportive services. Consider: 1. Are the program annual measureable goals appropriate to the program type and sufficiently challenging? 2. Will the majority of homeless participants come from the streets, emergency shelters, or other appropriate setting given population served and project type? 3. Is the program's outreach plan sufficient and feasible population served and project type? 4. Are the types and frequency of services appropriate for the population served and project type? 5. Are the strategies to help participants obtain and remain in 	20 POINTS POSSIBLE Non-DV projects: 4 points – measurable goals 4 points – majority come from streets or shelters 3 points – outreach plan 3 points – supportive services 3 points – obtain PH 3 points – income & live independently DV projects:
3A	 Narrative Responses: Housing where participants will reside is fully described and appropriate to the program design proposed. Program design includes provision of appropriate supportive services. Consider: 1. Are the program annual measureable goals appropriate to the program type and sufficiently challenging? 2. Will the majority of homeless participants come from the streets, emergency shelters, or other appropriate setting given population served and project type? 3. Is the program's outreach plan sufficient and feasible population served and project type? 4. Are the types and frequency of services appropriate for the population served and project type? 5. Are the strategies to help participants obtain and remain in permanent housing appropriate for the population served and 	20 POINTS POSSIBLE Non-DV projects: 4 points – measurable goals 4 points – majority come from streets or shelters 3 points – outreach plan 3 points – supportive services 3 points – obtain PH 3 points – income & live independently DV projects: 3 points – measurable
3A	 Narrative Responses: Housing where participants will reside is fully described and appropriate to the program design proposed. Program design includes provision of appropriate supportive services. Consider: 1. Are the program annual measureable goals appropriate to the program type and sufficiently challenging? 2. Will the majority of homeless participants come from the streets, emergency shelters, or other appropriate setting given population served and project type? 3. Is the program's outreach plan sufficient and feasible population served and project type? 4. Are the types and frequency of services appropriate for the population served and project type? 5. Are the strategies to help participants obtain and remain in permanent housing appropriate for the population served and project type? 	20 POINTS POSSIBLE Non-DV projects: • 4 points – measurable goals • 4 points – majority come from streets or shelters • 3 points – outreach plan • 3 points – supportive services • 3 points – obtain PH • 3 points – income & live independently DV projects: • 3 points – measurable goals
3A	 Narrative Responses: Housing where participants will reside is fully described and appropriate to the program design proposed. Program design includes provision of appropriate supportive services. Consider: 1. Are the program annual measureable goals appropriate to the program type and sufficiently challenging? 2. Will the majority of homeless participants come from the streets, emergency shelters, or other appropriate setting given population served and project type? 3. Is the program's outreach plan sufficient and feasible population served and project type? 4. Are the types and frequency of services appropriate for the population served and project type? 5. Are the strategies to help participants obtain and remain in permanent housing appropriate for the population served and project type? 6. Are the strategies to help participants increase their 	20 POINTS POSSIBLE Non-DV projects: • 4 points – measurable goals • 4 points – majority come from streets or shelters • 3 points – outreach plan • 3 points – supportive services • 3 points – obtain PH • 3 points – income & live independently DV projects: • 3 points – measurable goals • 3 points – majority
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	describe a feasible plan to implement a Housing First strategy?	services • 2 points – obtain PH • 2 points – income & live independently • 3 points – safety plan • 3 points Housing First
3B	NEW COORDINATED ENTRY PROJECTS ONLY – PROGRAM DESIGN (DV CES ONLY)	20 POINTS POSSIBLE
	 Narrative Responses: The application clearly describes feasible approaches or plans for all of the following DV CES program design factors: The geographic accessibility of the proposed system for all persons within the CoC's geographic area who are seeking information regarding homeless assistance; The strategy for advertising the project that is designed specifically to reach homeless persons with the highest barriers within the CoC's geographic area; The standardized assessment process proposed (or the process to choose a standardized assessment system); Whether/how the system will ensure that program participants are directed to the appropriate housing and services to fit their needs; and Victim Service Providers only— The strategy for implement a trauma-informed, client-centered approach. 	Non-DV CES projects:
3C	YHDP REPLACEMENT PROJECTS ONLY – PROGRAM DESIGN	16 POINTS POSSIBLE
	 The application complete answers to the following questions: Please briefly describe: The scope of the project and how it differs from the previous YHDP project. The NOFO exceptions the YHDP replacement project is requesting (e.g., housing change from RRH model to host homes). The reason why the YHDP project is being replaced with a YHDP Replacement project. The waivers/special activities, if any, you plan to include in the replacement project. Best practices to be implemented (e.g., positive youth development or trauma informed care). The numerical client outcomes to be achieved. How the project will meet the goals established in our YHDP Coordinated Community Plan. 	Completely answered: • 16 points

4	PROGRAM EFFECTIVENESS	20 POINTS POSSIBLE		
		(CES & HMIS projects will		
		receive 15 points)		
4A	Coordinated Entry Participation:	10 Points Available		
	The minimum percentage of new clients the program commits to	• 10 points – 95% - 100%		
	taking from Smart Path CES referral.	CES commitment		
		• 8 points – 90% - 94%		
		• 6 points – 85% - 89%		
		• 4 points – 80% - 84%		
		• 2 points – 75% - 79%		
		• 1 points – 70% - 74%		
		• 0 points – below 70%.		
4B	Housing First Fidelity Assessment:	10 Points Available		
70	Serving People with the Highest Barriers to Housing:	Housing First approaches:		
	To what extent does your project embrace the following Housing	1 point "yes" response		
	First approaches?	O points "no" response		
	Does the project prioritize client selection based on	Removing housing barriers:		
	duration of homelessness and vulnerability?			
	Does the project accept all clients regardless of substance	• 1/2 point per "yes"		
	use history, or current use?	response		
	3. Does the project accept clients who are diagnosed with, or	0 points per "no" response.		
	show symptoms of, a mental illness?	response		
	4. Does the project accept clients regardless of criminal history?			
	Does the project accept clients regardless of income or			
	financial resources?			
	6. Does the project use a harm-reduction model for drugs			
	and/or alcohol use?			
	Removing Barriers to Housing:			
	To what extent does your project eliminate the following barriers to			
	housing?			
	No minimum income			
	No required current employment			
	3. No required state issued photo id			
	4. Need not show sobriety (drugs or alcohol)			
	5. OK to have symptoms of mental illness			
	6. Need not have transportation			
	7. No required specific disabling condition (e.g., MH, SA, HIV/AIDS)			
	8. Need not show use medication.			
5	FINANCIAL AND COST EFFECTIVENESS	10 POINTS POSSIBLE		
5A	Housing vs. Service Funding: The percentage of <i>program</i> funding	10 Points Available		
	(not including admin) proposed to be used on housing activities	• 10 points – 90% - 100%		
	(acquisition, construction, rehab, and housing operations) vs.	housing activities		

6 6A	percentage funding used on non-housing activities (supportive services, services-only operations, and HMIS). AGENCY EXPERIENCE/CAPACITY Agency Years of Experience Number of years of agency experience in implementing the proposed program OR similar program type (e.g., RRH or PSH)	 8 points – 80% - 89% 6 points – 70% - 79% 4 points – 60% - 69% 2 points – 50% - 99% 0 points – below 50%. (DV CES projects and HMIS and YHDP SSO projects will receive 8 points) 20 POINTS POSSIBLE 10 Points Available 10 points – 8+ years 8 points – 5 to 7 years 6 points – 4 to 6 years 4 points – 2 to 3 years 2 points – 1 to 2 years 0 points – below 1 year
6B	Capacity Issues Points will be deducted if in the past year (7/1/23-present): (1) the program had a CoC risk assessment AND did not carry out any actions to correct and risk issue(s) identified, (2) the agency has unresolved HUD monitoring findings in CoC programs, or (3) the agency has been late in submitting a CoC APR.	 10 Pts Deduction Possible 3 points deduction – no action risk issues 3 points deduction – unresolved findings 4 points deduction – late APR
6C	Narrative Responses - Past Experience in Key Areas Please (1) describe your agencies prior experience, and (2) provide at least one example of agency success, in the following key areas: 1. Priority Population Served - Serving clients who are experiencing chronic homelessness, or are survivors of domestic violence 2. Program Design — Operating a similar type of program 3. CES Participation — Accepting and successfully housing program referrals through CES 4. Housing First — Embracing Housing First approaches and removing participant barriers to housing 5. Mainstream Resources — Implementing strategies to help participants access federal mainstream benefits 6. Equity Factors — Implementing agency leadership, governance, and policy changes and assessing and improving participant outcomes with and equity lens	10 Points Available 2 points – priority population 1 point – program design 1 point – CES participation 2 points – Housing First 1 point – Mainstream resources 2 points – Equity factors
7	Mainstream Resources The number of strategies the program will use to help clients access federal mainstream benefits, including Medicaid; State Children's Health Insurance Program; TANF (CalWORKS); Food Stamps; SSI; Workforce Investment Act; Employment Income; Welfare to Work Grant Programs; and, Veterans Health Care.	 7 POINTS POSSIBLE 7 points – 7 - 8 strategies used 5 points – 5 - 6 used 3 point – 3 - 4 used 2 points – 2 used

		1 point – 1 used
		0 points – 0 used
8	 Equity Factors Agency will receive one point for each of the following factors that it has implemented OR commits to implement within one year: Agency leadership, governance, and policies: 1. Agency has individuals representing BIPOC in managerial and leadership positions 2. Agency has individuals representing LGBTQ+ in managerial and leadership positions 3. Agency board of directors includes representation from more than one person with lived experience 4. Agency has relational process for receiving and incorporating feedback from persons with lived experience 5. Agency has reviewed internal policies and procedures with an equity lens and has a plan for developing and implementing equitable policies that do not impose undue barriers. 6. Agency has provided at least one staff training since 1/1/21 on enhancing equity for BIPOC and/or LGBTQ+. Program participant outcomes: 7. Agency has reviewed program participant outcomes with an equity lens, including the disaggregation of data by race, ethnicity, gender identity, and/or age 8. Agency has identified programmatic changes needed to make program participant outcomes more equitable for overrepresented races or ethnicities and developed a plan to make those changes 9. Agency has identified programmatic changes needed to make program participant outcomes more equitable for LGBTQ+ persons and developed a plan to make those changes 10. Agency is working with HMIS lead to develop a schedule for reviewing HMIS data with disaggregation by race, ethnicity, 	10 POINTS POSSIBLE • 1 point per "yes" response • 0 points "no" response
9	gender identity, and or/age. Community Collaboration and Participation To what extent does the applicant agency support the Housing for	3 POINTS POSSIBLE H4HP meeting
	Health Partnership (H4HP) by: (1) participating in meetings of the H4HP general membership; (2) participating in HMIS by entering client data into HMIS for 100% of its programs that are listed in the 2024 Housing Inventory Chart (HIC); and (3) participating in CES with no housing referral denials except where there is an appropriate reason for denial under an exception listed in the CES Policies and Procedures, section 7.3.5? Sub-scores will be determined by H4HP staff based upon appropriate H4HP and documentation for the period from July 1, 2023 to the present time.	participation: 1 point: Agency attends 75% to 100% 1 point: Agency attends 51% to 74% 0 points: Agency attends 0% to 74% HMIS participation: 1 point: Has data for 100% HIC

 1 point: Agency receives CES housing referrals and has no inappropriate denials 0 points: Agency does not receive CES housing referrals OR has had inappropriate denials TOTAL 110 POINTS POSSIBLE	
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Action Item 4: Approve Service Provider Change for Freedom House Youth Transitional Housing Project and Associated HUD Rapid Rehousing Grants

(Action required) - Robert Ratner

Background

At the June 8, 2022, meeting of the CoC board, the Board approved the transfer of two existing Youth Homelessness Demonstration Project (YHDP) grants from Housing Matters and the Housing Authority of Santa Cruz County to Covenant House to develop an expanded and consolidated rapid rehousing program for youth experiencing homelessness. The grant transfer process was linked with a plan to apply for California Project Homekey funding to establish a youth transitional housing program. The rapid rehousing grants were intended to help support efforts to transition youth from the transitional housing program into permanent housing in the community. Covenant House was selected to be the service provider of the new transitional housing project.

Covenant House has been operating the rapid rehousing services program for youth since the grant transfers took place. The County of Santa Cruz, CFSC, Inc., and Covenant House submitted a collaborative application for Homekey Round 3 funding for a proposed youth transitional housing project at 2716 Freedom Blvd in an unincorporated area of Watsonville. The state awarded \$3.58M of Homekey funds for this project.

Several months ago, Covenant House leadership reached out to Housing for Health staff members to notify them that their organization would not be able to continue providing services in Santa Cruz County long-term due to internal capacity issues operating in multiple California counties. Covenant House asked Housing for Health Division staff to identify other potential providers interested in operating the proposed transitional housing program and associated rapid rehousing grants. Staff reviewed various alternative service provider options with CFSC, Inc., the owner of the proposed transitional housing project site. County staff and CFSC, Inc. identified the Bill Wilson Center (BWC), a current YHDP grant recipient in Santa Cruz County, as the preferred option for the rapid rehousing grants and transitional housing project. A new service provider must be identified quickly to ensure compliance with California Homekey project timelines and expectations.

The CoC board must approve of the following recommended actions to proceed with the proposed service provider changes.

Recommended Actions

(1) Approve a letter for submission to the California Housing and Community Development Department Homekey program unit approving the service provider change from Covenant House to the Bill Wilson Center for the Homekey-funded transitional housing project and the associated HUD rapid rehousing grants (\$428,036/year).

- (2) Approve a letter to the HUD Regional Field Office approving the transfer of the current rapid rehousing grant from Covenant House to the Bill Wilson Center at the end of the current FY 2024 HUD NOFO process.
- (3) Authorize Housing for Health Division staff to work with Covenant House, the Bill Wilson Center, and CFSC, Inc. to complete the steps required to finalize the rapid rehousing grant transfer and Homekey service provider change from Covenant House to the Bill Wilson Center.

Suggested Motion(s)

See above for recommended motions.

Attachments

- Provider change letter to California Housing and Community Development
- Provider change letter to HUD Regional Field Office

County of Santa Cruz



HUMAN SERVICES DEPARTMENT

Housing for Health Division Robert Ratner, Director

1000 Emeline Avenue Santa Cruz, CA 95060 (831) 454-4130 FAX: (831) 454-4642

August 11, 2024

Stephen La Berge CFSC, Inc.

RE: Intent to Commit HUD Continuum of Care (CoC) Rapid Rehousing Funding to Freedom House as part of annual HUD CoC renewal and grant transfer process

Applicant: CFSC, Inc.

Project Name: Freedom House

Project Site Address: 2716 Freedom Blvd., Watsonville, CA 95076

Dear Stephen:

I'm writing to confirm that staff from the County of Santa Cruz Housing for Health Division act as the administrative entity for the CA-508 Watsonville/Santa Cruz City & County Housing and Urban Development Continuum of Care (CoC). In this capacity, we can confirm that the CoC Policy Board directed staff to ensure that the CoC Youth Homelessness Demonstration Project (YHDP) rapid rehousing grants would be linked with the Homekey Round 3 proposed Freedom House youth transitional housing project and would be managed by the Bill Wilson Center as the transitional housing and rapid rehousing services provider.

HUD CoC YHDP grants are now part of the annual HUD renewal process. As part of that renewal process, our staff will ensure that the \$428,036/year of HUD YHDP rapid rehousing funding described and committed in the Freedom House Homekey application will be included in the annual HUD renewal application to support Freedom House operations long-term. Based on prior experience, projects that meet HUD performance expectations and that receive local CoC support are generally renewed on an annual basis.

Sincerely,

Robert Ratner, MPH, MD County of Santa Cruz Director, Housing for Health Division, Human Services Department



August 21, 2024

Alice Walkup, Director
Office of Planning and Community Development
U.S. Department of Housing and Urban Development, San Francisco Office
One Sansome St., Third Floor, Suite 1200
San Francisco, CA 94104

RE: Support for Change-of-Recipient Request of Covenant House California

Project Name: Housing Matters Renewal (Youth Rapid Rehousing)

Project Number: CA1637Y9T082304 Operating Year: 1/1/25-12/31/25

Dear Ms. Walkup:

Best wishes,

I am writing in my capacity as lead staff the Housing for Health Partnership Policy Board (H4H Board), which is the primary decision-making body for the CA-508 Watsonville/Santa Cruz City and County Continuum of Care (CoC).

This is to confirm that the H4H Board fully *supports* changing the above-referenced Youth Rapid Rehousing (RRH) grant recipient from Covenant Housing California (CHC) to Bill Wilson Center (BWC). This change was considered and approved unanimously by the H4H Board at its August 21, 2024 meeting.

This grant transfer will help meet the CoC's goal of increasing YHDP program efficiency and effectiveness, thereby better assisting youth experiencing homelessness. BWC has extensive experience effectively serving the target population, including in Santa Cruz County. As we understand it, there will be no interruption in RRH programming and the level of RRH service will be fully maintained.

Thank you very much for your consideration of this change-of-recipient request. Please do contact me at 831-454-4925 or robert.ratner@santacruzcounty.org if you need any further information.

Robert Ratner

Lead Staff

Housing for Health Partnership Policy Board

Co-Chair

Housing for Health Partnership Policy Board

cc: Alvaro Toledo, HUD CPD Representative Fred Ali, CHC Chief Executive Officer

Information Items 5-9

Item 5: Lived Expertise Action Workgroups - Updates

Housing for Health Division staff and consultants have helped launch two lived expertise action workgroups. The Central California Alliance for Health provided some funding to help launch these groups. HUD Continuum of Care (CoC) planning grant funds will help sustain them. Participants in these groups have gone through employment orientations and are now going through a general orientation and training from the National Coalition on Homelessness. Home Base and Goodwill, Inc. provide support to these groups and their members along with staff from the Housing for Health Division. Members from the youth workgroup provided naming recommendations for the Homekey youth transitional housing project. Both groups are working to identify potential individuals to serve on the CoC Board and to participate in the HUD FY 2024 CoC NOFO funding process. Additional updates will be provided at the Board meeting.

Item 6: Central California Alliance for Health – Housing Investment Opportunities

The Central California Alliance for Health, a local Medi-Cal managed care plan, continues to invest in housing as a health care issue. The Alliance is utilizing earned Housing and Homelessness Incentive Program (HHIP) funding to support the development of new permanent and interim housing opportunities for their members through the "Alliance Housing Fund." Applications for funding for specific projects were due June 30, 2024. More details can be found at this website: Alliance Housing Fund - Central California Alliance for Health (thealliance.health).

In addition to this investment, the Alliance has set aside \$5 million of HHIP funding in Santa Cruz County to establish a revolving supportive housing loan investment fund in partnership with a Community Development Financial Institution (CDFI).

Updates on the status of these resources will be provided at the Board meeting.

Item 7: Feedback and Grievance Policy Update

Based on CoC Policy Board feedback provided at the June 12, 2024, CoC board meeting, Housing for Health Division staff are re-working the feedback and grievance policy shared at the meeting. Staff are conducting more in-depth reviews of policies and procedures from other CoCs and are exploring the staffing and resources needed to implement a more robust process as requested by CoC Board members. Staff will bring the item back to the CoC board before the end of this calendar year for reconsideration of an updated proposal.

Item 8: Housing for Health Vendor Pool – South County Homelessness Prevention Opportunity

In 2023, the Santa Cruz County Board of Supervisors approved the Human Services Department to create a Housing for Health (H4H) <u>Vendor Pool</u> of pre-qualified individuals and organizations interested in contract opportunities related to housing and homelessness. More information about the vendor pool can be found here - <u>Housing for Health Vender Pool (santacruzhumanservices.org)</u>. Individuals

and organizations interested in becoming part of this contract opportunity network can apply to get added to an existing list of approved vendors. Applications for new vendors are due on October 8, 2024.

Approved vendors will have an opportunity to apply for South County Homelessness Prevention funding of \$500,000/year over a three-year period. Applications for this opportunity are expected to be released in early 2025 for a contract that would start July 1, 2025. The application will be soliciting a lead program operator that will coordinate a robust homelessness prevention effort that, at a minimum, will be expected to include housing financial assistance, legal assistance, housing stabilization and transition services, targeted outreach and enrollment based on risk assessments, and robust data and outcome tracking.

Item 9: CoC Community Meeting Event – Late September/Early October – Housing First Practice

Housing for Health Division staff are planning a CoC community meeting for late September/early October that will include a remote presentation from leaders from Finland that will describe their efforts to implement Housing First practices at a national level and the results from this implementation. The event will also include a presentation from the former director of quality improvement and health integration at the Pathways to Housing program in Washington, D.C. Pathways to Housing utilizes a behavioral health evidenced-based practice that provides housing subsidies with intensive behavioral health services for individuals struggling with homelessness and severe behavioral health conditions.

Report/Discussion Item 10: CoC Board Meeting Attendance

(Discussion) – Robert Ratner

Background

The current CoC governance charter articulates the following CoC Policy Board member responsibilities:

"Each member will sign a written set of commitments for serving as a Board member, including:

- a. A code of conduct (CoC Requirement), including agreement to abide by HUD (Title 24 Code of Federal Regulations {CFR} part 578.5) and Policy-Board adopted conflict of interest regulations and recusal processes for the Board, its chair(s), and any person acting on behalf of the Board.
- b. Standards for Board service including expectations for attendance, preparation, and other responsibilities.
- c. All regular Members of the Board shall attend all meetings. A pre-designated alternate may be established. Alternates shall receive and remain informed about all meeting materials but shall only attend when the primary member has an unavoidable reason for not attending.

Board members who fail to uphold their responsibilities may be removed by an action of the Board."

The charter defines quorum as a majority of current appointed members to the Board. The Board currently has 13 appointed members. The Board has six meetings per year and has had one meeting this year without a quorum of members.

Discussion

Housing for Health Division staff are requesting guidance from current Board members on whether to update and clarify attendance expectations within the Governance Charter. Staff are also seeking guidance on when it is appropriate to consider removing a member of the Board for lack of attendance.