



- i. The County now owns Comfort Inn.

2. Staff Report (Ja’Nai) 2:05 - 2:10pm

- a. Centering Racial Equity Report Executive Summary now available
- b. Interim E.D. Search update
 - i. The selection committee finished second rounds of interview. There will be an update hopefully by next meeting.

3. Urgent Items (Ja’Nai) 2:10 - 2:15pm

- a. None

4. Discussion Items (Fina) 2:15 - 2:55pm

- a. Committee Governance (Ja’Nai)
 - i. C.E. Management Entity MOU update
 - 1. The MOU has a few edits from the county counsel.
 - 2. EveryOne Home is still reviewing it and should be finished soon.
 - ii. Strategic Planning update
 - 1. The retreat planning committee identified a consultant for the racial equity piece.
 - 2. There will be four sessions starting in December and ending in January 2021.
 - 3. There may be changes to the governance charter that may impact SCC’s role/ responsibilities and how it fits with other committees after retreat.
 - 4. Ja’Nai goes over org chart of how committees work together:
 - a. In relationship to HUD CoC, SCC is largely responsible for the emergency housing response system and focused a lot on Coordinated Entry. SCC is officially the policy oversight entity and will work closely with HCSA, the management entity, to draft policies and to be in compliance with HUD and develop coordination with parallel systems.
 - b. Because HUD CoC designated some of its authority to SCC, any major changes would have to go back to HUD CoC.
 - 5. One concern of having SCC underneath HUD CoC is that it sends the message that all SCC does is HUD work. HUD work is important, but it should not drive the work to end homelessness.
 - 6. **It would be helpful to have examples why this structure matters, what are we trying to navigate through this structure right now, and where do we encounter pain points?**
- b. Housing Fast/ Navigation Workgroup update (Jonathan Russell)
 - i. Workgroup was short but productive and looked at the county’s investment in Housing Navigation.
 - ii. Permanent housing exits have stayed at 80% or more over time and thresholds have been within the standard benchmark.
 - iii. Found that this model serves widest breadth of individuals (People on earned income, RRH short term rental assistance, PSH level of need, and with fixed income SSI, etc.). Tension is having all these people in programs that are funded in a way that is difficult to serve all directly.

- iv. Jamie and Jonathan are in the process of drafting concluding outcomes and intending to come with potential recommendations for SCC to look at different target populations within navigation center services with different benchmarks and service structures for each.
 - v. One important thing to discuss is the disparity between shelters and navigation centers in terms of resources and access.
 - vi. San Francisco providers have rapid employment and rapid rehousing models that provide employment support and career development. That is an added resource that can be extremely valuable to help people increase income.
 - vii. **Jonathan will come back to SCC with a formal ask for feedback based on group's findings.**
- c. C.E. Prioritization COVID-19 Amendment (Ja'Nai)
- i. Expanding scope
 - 1. SCC recently approved COVID-19 prioritization amendment.
 - 2. Question for SCC: does this amendment apply to other interventions / resources beyond ESG CV and RRH? In general, do we add a COVID layer to our C.E. prioritization for other resources as well?
 - a. For example, Oakland wants to prioritize people that are high risk for COVID for TH units.
 - b. Members expressed that they thought it would be more than just ESG CV or that it would say "RRH and other resources." The amendment's purpose statement does seem to limit to RRH. There is interest to revise the amendment so that this COVID-19 prioritization can be apply to other non-congregate resources.
 - 3. Suggestions for revision:
 - a. Remove RRH part and add "ESG CV and other resources intended to rehouse those sheltered in Safer Grounds or otherwise impacted"
 - i. Intention was not just RRH but housing in general
 - b. What about "resources intended to assist or rehouse, or otherwise assist or shelter"?
 - c. Or "Resources that provide non-congregate shelters and/or RRH assistance"?
 - i. The concern with using RRH is that it does not speak to the intervention we are using.
 - d. Note that the policy would apply as a mandate for projects that go through CE and a strong suggestion for those that do not.
 - e. **For next steps, we can move forward as the policy states now and during mid emergency meeting, add this revision to the amendment. In the meantime, it can be used without being a formal policy.**
 - ii. Implementation
 - 1. On the call with HUD TA providers, there was discussion of how do we implement this policy given our current assessment wasn't drafted for COVID?

2. There are referral forms that cover the high risk for COVID and homelessness eligibility or Roomkey eligibility. These are the forms that are used in the hotels.
3. How do we apply this to the By Name List to match people to resources?
 - a. Can the staff in the HRC just ask screening questions and if people say yes, they have one of these medical conditions we take their word for it?
 - b. Even though, we did do the matching in the whole BNL in March, how do we update it?
 - i. Problem with that is that we couldn't find people.
4. Not all inclusive but an extra way to check if we have records is from people's health records through using the CHR for verification.
5. Street health teams are still being used to verify medical pieces.
6. We are still a little shy on getting medical verification for people outside of Roomkey.
7. If a provider has access to the community health record, they can do the verification as long as the person is in there/receives health care services from the County.
8. Because we received a waiver due to COVID, currently records from the whole health care system were brought in, not just people who were medi-cal eligible and homeless. Question is how long can we keep doing that?
 - a. Committee is currently reviewing whether to can make it a permanent expansion.
 - b. If we can do that, that covers around 90%, and we don't need verification for age vulnerability.
9. **Lara can check with BACS HRC to find next batch of people, do a quick check, and prioritize who has risk factor and document that.**
10. For places that do not have CHR, they can work with Anna so that health care staff can look up people in the CHR.
11. Health Care for the Homeless/Street Health teams can be deployed for the last ten percent.
12. We can test it out and see how it goes in the next few weeks by working with BACS and have them look people up.
 - a. Lara can circle back with Jamie.
13. **Next step: Meeting between Lara, Kerry, Healthcare for Homeless and SHIE team.**

5. Action Items for Vote (Kate)

2:55 - 3:25pm

- a. Rapid Rehousing Policy/ DV Exceptions (Ja'Nai)
 - i. We do not have a systemwide RRH policy right now and need a written policy given new requirements attached to ESG CV.
 1. Ruby's place recently got HUD DV bonus for RRH funding.
 2. There is no specific policy for CoC funding or survivors.
 - ii. Ja'Nai's recommended process for drafting systemwide RRH policy:

1. Come up with an interim policy for ESG CV
2. If Katharine Gale has capacity, then SCC can ask her to draft interim policy. SCC can have special meeting to approve whatever is drafted with hope that this is an interim that would get folded into systemwide policy.
3. HUD TA provided an example from Chicago and other communities.
4. Ja’Nai asking for approval to start drafting system wide RRH policy. She would consult HUD TA providers and Katharine if she is available.
 - a. Once draft is completed, there would be a small working group to review and provide feedback once or twice before coming back to committee for approval.
 - b. Feedback: Include providers of RRH services in the workgroup for the interim policy and for broader policy and suggest asking Katharine Gale or other consultant to draft policy.
- iii. There is a separate memo for people to understand what is missing from policy and what should be included in the interim ESG CV or systemwide policy to serve Domestic Violence and Human Trafficking survivors.
- iv. Ja’Nai met with Kate (SAVE), Rosa (Ruby’s Place), Tunisia (FLVC) and Dr. Jeffrey Suiter (Building Futures) to determine what to include in the RRH policy that would meet unique needs of survivors and victim service providers. Their recommendations are below:
 - a. VAWA compliance- Emergency transfer plan is required. It would allow clients who are survivor to request to transfer to another unit if they believe they are at risk of further abuse. HUD has created a template form for the request and an addendum. Include confidentiality and share with people that are necessary for transfer request.
 - b. A lease bifurcation policy is also required.
 - c. Incorporate DV best practices such as trauma informed care and survivor/client centered services
- v. For people that work in DV organization, they are not allowed to enter client’s personal identifying information in HMIS but HUD does allow them to generate aggregate non personally identifiable information into a comparable database.
- vi. A lot of the RRH in our system is through CalWORKS, does this process take that funding source and those regulations into account for all RRH policies?
 1. Abode does this for all of their housing including HSD. No barriers.
 2. No barriers for probation.
- vii. This policy should apply holistically across systems of care, not just RRH.
- viii. This discussion came out of Ruby’s Place reaching out asking what the requirements are for providing RRH in the CoC and how do they make sure their program is ready by December and in compliance with federal and local requirements.
- ix. This is coming up especially with CES overall. At Project Roomkey Safer Grounds Alameda, there are several families who won’t have access to RRH or PSH because they can’t be put in a shared database.

- x. Everyone should have access to the same prioritization method they would if they were in HMIS. However, it is more time consuming for DV survivors because providers must figure how to do the assessment and calculate score without entering it in a shared data platform. Liz Varela and Home Stretch are working on it.
 - 1. DV agencies don't feel like this is happening systemwide smoothly and if adding language (i.e. policy) moves in that direction then that is a good thing.
 - 2. We should also make sure the actual practice is playing out wherever people are getting assessed or need access to housing. Suggestion to have a conversation with DV agencies, Home Stretch, and Focus Strategies to make sure we are not missing those opportunities.
- xi. Things to consider are what scope of this policy would cover in terms of intervention in the county and how do we make sure the policy is not constraining.
 - 1. The systemwide policy can be inclusive of RRH-like programs that is value base and don't think the barriers have to come in except when talking about a funding source and those funding source requirement can be articulated to extent that we know them.
 - 2. The systemwide policy should not focus on regulation and restrictions but more on value of the system and as much as possible govern the use of flexible funds.
 - 3. Chicago has an example of a systemwide policy that has flexibility and a chart that listed out specific requirements for each funding source.
- b. Presentation of Recommendation
 - i. Amendments
 - ii. Call to Vote
 - iii. Vote
 - 1. Kate made motion to approve this proposal process for drafting broader policy and then an interim one making sure it includes the DV recommendations.
 - 2. Suzanne seconded.
 - 3. Kate – yes, Suzanne – yes, Kerry – yes, Vivian - yes, Calleene - yes, Fina – yes, Allison – yes,
 - 4. Lara – abstained because she stepped out during conversation
 - 5. Motion passed
- c. Next steps – **Ja'Nai will reach out to Katharine Gale to see if she has capacity or find another consultant, set up working group, and scheduling special meeting to approve the final draft.**

6. Consent Items

- a. None

7. Conclusion (Ja'Nai)

3:25 - 3:30pm

- a. Next Meeting - No meeting in December, but there will be a special meeting on the ESG interim policy.