Mendocino County Homeless Services Continuum of Care Board Meeting Agenda

The meeting will be live streamed to

https://www.youtube.com/channel/UChC4NPHSbnic4f2qXVVosOg/

To participate in public comment, please call (707)703-1292 ** PLEASE MUTE YOUR PHONE WHEN YOU ARE NOT SPEAKING **

Date: Monday, May 18, 2020 Time: 1:30 pm - 3:30 pm

Host Location: Mendocino County Social Services, 747 S. State St., Big Sur Conf Room

A. Call to order

- 1. Verify a quorum is present in order to conduct business (One half of voting members plus one)
- 2. 3 Board Terms have expired. 14 seats are currently active.

B. Public Comment

MCHSCoC welcomes public comment on non-agendized items (Maximum of 3 minutes per speaker and 12 minutes per topic)

C. Approval of Minutes

April 2, 2020 minutes

D. Reports and Presentations

- 1. Updates from Local Jurisdictions
 - a. County of Mendocino (Tammy/Megan)
 - b. City of Ukiah (Sean/Shannon)
 - c. City of Fort Bragg (Tabatha/Sarah)
 - d. City of Willits (TBD)
 - e. Others
- 2. Standing Committee Reports
 - a. Strategic Planning (Dan)
 - b. Shelter & Solutions (Angelica)
 - c. Coordinated Entry/Discharge Planning (Sage)
 - d. Membership Committee (Veronica)
 - e. HMIS / Performance Measurement (Garry/Veronica)
- 3. Ad Hoc Committee Reports
 - a. 2020 PIT Count Ad-Hoc Committee (Veronica)
 - b. 2020 HHAP Ad-Hoc Committee (Dan)
 - c. 2020 ESG Ad-Hoc Committee (Veronica)

E. Board Protocols and Governance

- 1. Notice to MCHSCoC Board from that Mendocino County CoC Lead Agency has been selected for Audit (Megan)
 - a. "The California State Auditor is responsible for conducting audits requested by the Legislature and approved by the Joint Legislative Audit Committee (JLAC). JLAC approved an audit request regarding Continuum of Care agencies to assess best practices related to homeless services. They will therefore be conducting an audit of the county and its relationship with the Mendocino County Continuum of Care."

- 2. Recommended **Action**: Review and Consider Temporary Changes to the Coordinated Entry Prioritization to reflect current community needs due to COVID-19
- 3. Recommend **Action:** Review and Consider Community Development Commission's Changes to their Permanent Supportive Housing (PSH) Eligibility Criteria to incorporate Temporary Changes to the Coordinated Entry Prioritization
- 4. Recommended **Action**: Board to accept nominations for one vacancy and three recently expired Board Terms
 - a. Homeless or formerly homeless TAY currently vacant
 - b. Shelter Representative North/Inland formerly held by Redwood Community Services
 - c. Organization serving the needs of families with children formerly held by Mendocino County Office of Education
 - d. Organization providing Health Care Services to the Homeless formerly held by Mendocino Community Health Clinics (MCHC)
 - e. Open seats will be voted on at the full Membership Meeting scheduled in June.
- 5. Recommended **Action**: Postpone Board Meeting scheduled for June 15, 2020 until June 29, 2020 to allow the 2020 ESG Funding Ad Hoc Committee time to complete their rating and ranking process

F. Funding

- 1. <u>California Emergency Solutions & Housing (CESH)</u> State Funds No Update
- Emergency Solutions Balance of State Grant (ESG BOS) Federal to State Funds (Veronica)
 - a. 2020 ESG Local RFP and Timeline
 - i. RFP Documents can be found at <u>https://handupnothandoutmendo.com/notice-of-funding-availability and https://www.mendocinocounty.org/government/health-human-services-agency/adult-aging-services/mendocino-county-homeless-services-continuum-of-care</u>
 - ii. Extension Approved by State, Ad Hoc Committee. Revised Timeline Included
 - iii. Note: Postponement of the June 15, 2020 MCHSCoC Full Membership Meeting to June 29, 2020 will allow the 2020 ESG Funding Ad Hoc Committee time to complete their review and bring recommendation to the Board
 - b. Coronavirus Aid, Relief, and Economic Security (CARES) ESG Funding
 - i. Recommended Action: Review and Approve 2020 ESG-CV Resolution
- 3. <u>Homeless Emergency Aid Program (HEAP)</u> State Funds No Update
- <u>Homeless Housing Assistance Program (HHAP)</u> State Funds (Veronica)
 a. Standard Agreements will be before the BOS for approval soon
- 5. Family Unification Program (FUP) Federal Funds No Update
- 6. Housing & Urban Development CoC Program Federal Funds No Update
- 7. <u>Housing and Urban Development HMIS Capacity Building Grant</u> Federal Funds No Update
- Other –
 a. COVID-19 Emergency Funding State Funds (Veronica)

- i. Standard Agreements have been submitted
- b. Recommended **Action**: Review and Consider Funding Requests from MCHC, RCS and MCPN related to homeless services during COVID-19 Pandemic

G. Projects

H. Announcements

1.

2.

I. Adjourn

Confirm next meeting date and agenda items

Next Meeting will be held via Zoom and public access will be available at (access information forthcoming)

Dan McIntire – RCHDC (Co-Chair) Organization Representing a Housing Developer	Jacque Williams – Ford Street Project (Co-Chair) Org. Addressing Needs of Persons with Chronic Substance Abuse		
Lisa Judd – Community Development Commission	Carla Harris – Mendocino Coast Hospitality Cntr		
Public Housing Authority	Shelter Representative - Coast		
Diana Clarke – Ukiah Senior Center	Sean Kaeser – Ukiah Police Dept.		
Org. Addressing Needs of Seniors	Organization Representing Law Enforcement		
Judy Albert – Project Sanctuary	Sandra Stolfi – Veterans Administration		
Org. Addressing Needs of Victims of Domestic Violence	Org. Addressing Needs of Veterans		
Grace Peeler-Stankiewicz - MCAVHN	Que B. Anthnoy		
Org. Addressing Needs of Persons with HIV/AIDS	Homeless or Formerly Homeless Individual		
Zenia Leyva Chou – Mendocino Cmty Health Clinics	Lindsey Spencer – Adventist Health		
Org. Providing Health Care Services to the Homeless	Org. Addressing Needs of Chronically Homeless		
Wynd Novotny - Manzanita Services	Sage Wolf – Redwood Cmty Services		
Org Addressing Needs of Persons with Serious Mental Illness	Shelter Representative – North/ Inland		
Karen Lovato	Blythe Post - MCOE		
County of Mendocino Health and Human Services Agency	Organization Serving the Needs of Children		
Amanda Archer - MCYP	Veronica Wilson - HHSA		
Org. Addressing Needs of Unaccompanied Youth or TAY	Collaborative Applicant / Administrative Entity		
Open Homeless or Formerly Homeless Transition-Age Youth	CoC Secretary (non-voting)		

Mendocino County Homeless Services Continuum of Care Special Board Meeting Minutes

Date: Thursday, April 2, 2020

Time: 1:30 pm - 3:30 pm

Location: Meeting Hosted Virtually through Zoom for social distancing, as required by Order of the Health Officer of Mendocino County; Public Access Line: (707) 703–1292

A. Call to order

- 1. Co-Chair Dan McIntire called the meeting to order at 1:33 p.m.
- 2. Roll Call of the Board was taken by Veronica Wilson: A quorum of fourteen board members were present at the time of roll call.
 - In attendance at the time of roll call: Dan McIntire, Lisa Judd, Judy Albert, Grace Peeler-Stankiewicz, Zenia Leyva Chou, S. Wynd Novotny, Karen Lovato, Amanda Archer, Jacque Williams, Carla Harris, Sandra Stolfi, Que B. Anthnoy, Sage Wolf, and Brady Nord (in attendance for Blythe Post)
 - Not in attendance and no alternate present: Diana Clarke, Sean Kaeser and Lindsey Spencer

B. Public Comment

MCHSCoC welcomes public comment on non-agendized items

1. Joanna Olson requested public access to the Zoom meeting, which will be explored for future meetings.

C. Reports and Presentations

- 1. Updates from Local Jurisdiction
 - a. County of Mendocino Tammy Moss Chandler, Director of HHSA
 - Applauds the work of the CoC during the pandemic and appreciates everyone's willingness to work together for our community.
 - Homeless Update Memo to Homeless Ad Hoc Members March 30, 2020
 - Provided to Supervisors Gjerdi and McCowen prior to the March 31, 2020 BOS Meeting, which was cut short unexpectedly and Tammy could not make her presentation. Tammy hopes to present at the next BOS meeting.
 - There are no confirmed or suspected cases of COVID-19 within the homeless community in Mendocino County. Onsite assessments were completed by HHSA staff at all homeless sheltering programs within Mendocino County and early work was done in alignment with various sources of federal and state guidance to minimize the spread of disease and encourage good infection disease prevention.
 - Mendocino Coast Hospitality Center has extended their Emergency Winter Shelter and has ensured that no persons will be exited to the streets from this program during the pandemic.
 - The partnerships between all of the local service providers, Mendocino County has more persons experiencing homelessness placed in motels than any other time in our recent history. Persons being served by the pandemic motel vouchers must be age 65+, have an underlying health condition or have minor children or are pregnant. These persons are being connected to mainstream services that can serve them best.

- All local homeless programs have implemented social distancing practices in how shelter beds are arranged, meals are provided, and many other recommended approaches.
- $\circ~$ The County BOS will be considering the COVID-19 E
- Mendocino County Office of Emergency Services' Interim Response Plan for Isolation and Quarantine
 - This plan is for instances if a case of COVID-19 is found within the homeless community, which at this time has not occurred, but the EOC is ready if it should. There are good connections with local health providers when people call in with concerns. HHSA understands that there are local needs for supplies and is doing its best to support local efforts during a state, national and even global shortage.
- Board Comment
 - Sandra asked if the 4 total cases of COVID-19 in Mendocino County that are reported on the County's COVID-19 webpage is accurate, which Tammy confirmed is accurate
 - Zenia asked if we have met and filled out full bed capacity during this event. Tammy responded that Veronica and Megan are working with all homeless housing providers to support their efforts in filling their bed capacity while still maintaining social distancing. Megan and her team are working on getting all persons that meet CDC criteria as at high risk of contracting the virus into motels as they are working on maximizing bed capacity. Zenia also asked if the Brush Meadows Apartments vacancies could temporarily be used to house homeless persons but Dan explained this could not occur because of the requirements by the tax credits, even during an emergency.
 - Judy asked if the shelter operated in Ukiah would have still have to close on May 1 as planned. Sage said they have been working back with City Staff to see how they can make that happen and it appears promising and should not be too difficult of a process, but it has not been approved yet. Additional funding may be needed to extend operations longer than anticipated.
 - $\circ~$ The Board took a break at this time to adjust for technical issues.
 - Que asked for clarification on eligibility for the motel voucher program, which Tammy explained is based upon the CDC guidance and a behavioral contract that complies with Housing First requirements.
- Public Comment
 - Mo Mulheren shared that Brush Meadows Apartments are full
 - Steve Scalmanini asked about Building Bridges capacity, which he was directed to ask Sage about outside of the meeting.
 - Roseanne Ibarra asked about Mendocino Coast Hospitality Center's operations and if they have enough resources to maintain services. Tammy responded that there is no specific item on this request and Tammy will follow up with Roseanna outside the meeting
- b. City of Ukiah Shannon Riley
 - City of Ukiah is fully operational but their offices are closed to the public. They are taking a cautious approach to interacting with the homeless, despite there not being any suspected or positive COVID-19 cases among the homeless. They are down in numbers (about 60% capacity within their police force) and they will not be able to operate if their numbers decrease any further. They are using

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increased precautions when interacting with the homeless and have marked concerns about the encampment in the clear zone near the airport, particularly around poor hygiene and lack of social distancing. They appreciate the outreach the County did to find people eligible for the motel program, but it did not do much to decrease issues there. A dumpster, port-a-potty and handwashing station have been brought in but the City of Ukiah does not believe this is sufficient for the need in the encampment.

- Board Comment
 - Grace shared MCAVHN is continuing to do outreach and working with the County on motel placements.
 - Que asked about the logistics of the infrastructure materials brought into the encampment. Shannon shared the City provided the dumpster, which they are emptying regularly, but the rest was brought in by the County and she is unable to speak on them. Shannon said the outreach efforts at the encampment by MCAVHN and Nor Cal Christian Ministries is highly appreciated.
- Public Comment
 - John McCowen reported he met with CEO Angelo and the City Manager to gain approval to bring in the port-a-potty and handwashing stations. They were only able to get one handwashing station and hope to be able to bring a second one in, upon its availability. The camp residents are on board with these approaches and are working hard to get the camp cleaned up quickly. He requested MCAVHN install sharps containers in each port-a-potty, which they quickly did. John appreciates the outreach by Nor Cal Christian Ministries and MCAVHN, and City of Ukiah Councilmember Scalmanini is working on providing improved sanitation to keep these items clean. There is a lot of coordination between the County, Service Providers and those at the encampment.
 - City of Ukiah Councilmember Scalmanini shared he is supplying the cleaning materials for the infrastructure.
 - Shannon shared there are a lot of well-intentioned individual dropping off supplies. Some of the items are useful, but construction materials have been brought in and is creating a health and safety issue at the encampment. She requests that service providers keep their eyes and ears open to make sure the items donated are useful and not just creating an additional hazard.
- c. City of Fort Bragg Tabatha Miller, City Manager
 - They too are operational but closed to the public. They have placed an ADA compliant port-a-potty and handwashing station in the parking lot next to City Hall as well as near the City Hall Building. Their DANCO project was approved for tax credits, which is exciting and makes their project viable.
 - Board Comment
 - Carla shared they continue to offer their Winter Shelter and other regular services. They are participating in the motel voucher project and is appreciative of the County and their community partners in making these effort happen. They are stretched, but managing, and are working with the Street Medicine Team to medically assess people in the motels.
 - Public Comment none
- d. City of Willits TBD

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No Update

D. Board Protocols and Governance

- Recommended Action: Board to evaluate how current funding sources for homeless services could be redirected for COVID-19 Emergency Use (applies to CESH, HEAP, HHAP, ESG and CoC Program Funds)
 - a. All CESH funds have been allocated, except for the \$98,000 set aside for HMIS or Coordinated Entry, which we are unsure if it can be used for COVID-19 response
 - b. HEAP funds have been fully committed, except the interest, which is about \$22,000 and can be used for COVID-19 Response
 - c. HHAP has not yet been fully contracted and is already structure in ways that can be used for COVID-19 in the current budget
 - d. CoC Program Planning Grant Funds and ESG can be used for COVID-19 response. The CoC Program Planning Grant is received by HHSA for \$45,000 per year and is already being used for COVID-19 Response. The two ESG recipients, RCS and Mendocino Coast HC, are already using these funds in their current operations and do not need or want to realign funds for COVID-19 response.
 - e. Board Comment
 - Zenia asked about the FEMA reimbursement and how it will be used in conjunction with the COVID-19 Emergency Funds. Tammy responded that the FEMA reimbursement is for 75% of eligible costs, including testing and other needs for this population specific to COVID-19. There may be additional costs that are not eligible for FEMA reimbursement, including supportive services, which we will need to get creative in how we cover these additional costs. Documentation on all services being provided in order to respond to COVID-19 is required for FEMA reimbursement.
 - Carla shared that they have a CESH contract for outreach that they have not yet been able to fully implement. She asked if this contract could be adjusted in order to permit them to be used for COVID-19 and Tammy responded yes and contractors should work back with the County on how to amend the contracts. Jacque shared she believes we need to redirect funds we already have for current needs before we look to additional resources in a documented way so we can keep track of everything we do. Megan shared that if anyone wants adjustments to their contracts they should reach out to her as soon as possible.
 - Sage ask about what ESG allocation the new flexibility allows for use for COVID-19. Veronica pointed out a page included in the packet from HUD that reviews the changes permitted, which does not specify any particular funding period and can be used for any years allocation. Sage reiterated that current ESG funds are in place and supporting essential homeless services and would hope the CoC Board would consider this when exploring reallocation of funds. Sage also asked about using their SAMHSA Finding Home grant contract for COVID-19 and Tammy responded that they have not yet received information that SAMHSA funds could be redirected for COVID-19 as it is a different type of federal program that the other sources discussed.
 - Dan asked for comments from the Board on how to approach the ever changing situations we all are in and how the Board can structure their direction on funding use to take into account the need for flexibility.
 - Judy Albert stated she thinks the agencies that receive these funds know best how to reallocate these funds to deal with COVID-19 response and it would be easiest

for a small group to make these decisions and inform the Board of decisions made. Jacque shared that the scope and duration of contracts were created before the pandemic and she recommends the service providers be able to go back and reassess their needs and their suggestions on how to cover those costs. She agrees with the idea of having a small group making these decisions and wants to make sure we communicate the explanation for these prioritizations to both Tammy and the public.

- Carla is in agreement with moving forward quickly and efficiently, and supports any efforts to realign CESH funding.
- Que recommended creating an emergency fund that community providers can have quick access to in order to help clients in real time. He is also supportive of creating a small group to make COVID-19 response changes to existing contracts.
- Sage made a motion to give the CoC Board Co-Chairs authority to approve any CESH or HEAP contract amendments submitted by current contracts to use funds to address COVID-19. Wynd seconded the motion.
 - Discussion Megan and Veronica will reach out to all current CoC contractors to find out if and how they would like to change their contracts and communicate these requests to the Board Chairs for approval.
 - Public Comment
 - John McCowen shared he is supportive of this decision and that depending on the funding guidelines that a contract amendment may not be necessary, which could further streamline the process.
 - Roll call vote to approve the minutes was taken by Veronica Wilson
 - Yes = Dan McIntire, Lisa Judd, Judy Albert, Grace Peeler-Stankiewicz, Zenia Leyva Chou, S. Wynd Novotny, Karen Lovato, Amanda Archer, Jacque Williams, Carla Harris, Sandra Stolfi, Que B. Anthnoy, Sage Wolf, and Brady Nord
 - Abstained = 0
 - No = 0
 - Motion passed
- 2. Recommended **Action**: Board to evaluate and provide direction on how to use First Allocation of Governor's COVID-19 Emergency Funding for prevention and containment efforts for those experiencing homelessness
 - a. MCHSCoC Allocation = \$152,982.14; County of Mendocino = \$140,747.66; Combined = \$293,729.80
 - b. Grant Agreement Submitted to CA HCFC on March 25, 2020
 - c. Presentation on MCHSCoC's Allocation of \$152,982.14 by Veronica
 - The approval letter has been received and the Board needs to determine the process they will use to decide how these funds will be used. These are emergency funds that must be encumbered by June 30, 2020 and are intended to be used for emergency needs very quickly.
 - Board Comments
 - Wynd suggested that, if they are willing, the Board Co-Chairs could be authorized to have a deadline for service providers to submit their requests and the Co-Chairs then work back with the Cities and County to prioritize the use of funds.
 - Shannon shared that it will be very important for the Co-Chairs to work with the EOC homeless representative to ensure any resources the EOC can

provide are utilized before other funds are used. Tammy responded that coordination with the EOC is ongoing and will be done for this project, but she wanted the Board to understand that the EOC's focus is primarily on isolation and quarantine and she has taken the lead on these type of activities so inquiries should be sent to HHSA, not the EOC.

- Jacque shared a conversation she and Dan had previously. They want to ensure these funds go to the end users and is used to support people experiencing homelessness directly. We all need staff right now but we should look to other pots of money to support so these funds can be used for direct client support. We have a unique opportunity to work with the people in the motels that may not have been otherwise been engaged and we should use this money to directly support them. We need to ensure we are not just temporarily placing people in motels only to discharge them back to the streets or shelters and it is used to support their attainment of permanent housing.
- Que made a motion to give the CoC Co-Chairs the authority to receive and approve funding requests for Governor's COVID-19 Emergency Funding for prevention and containment efforts for those experiencing homelessness funds for COVID-19 response. Lisa seconded the motion.
 - Discussion clarification was request on the motion, which was provided
 - Both Jacque and Dan agreed that their agencies would not be recipients of these funds so there will be no conflict of interest in the decision making
 - Public Comment
 - i. John McCowen supports the motion and believes the funding is flexible enough to be used for permanent housing deposits or to fill gaps that other funding sources do not cover. The flexibility of the motion allowing the Co-Chairs to make these decisions will go a long way in meeting these urgent needs.
 - Jacque shared that FSP may want to apply for some of these funds, but Dan shared that since the funds will not be going to any specific agency but rather to clients through community organizations, that there is no conflict of interest for any agencies involved.
 - o Roll call vote to approve the minutes was taken by Veronica Wilson
 - Yes = Dan McIntire, Lisa Judd, Judy Albert, Grace Peeler-Stankiewicz, S.
 Wynd Novotny, Karen Lovato, Amanda Archer, Jacque Williams, Carla Harris, Sandra Stolfi, Que B. Anthnoy, Sage Wolf, and Brady Nord
 - \circ Abstained = 0
 - No = 0
 - Motion passed

E. Funding Updates

- 1. <u>Emergency Solutions Balance of State Grant (ESG BOS)</u> Federal to State Funds
 - a. Requested Extension until June 30, 2020
 - Deadline extensions will be announced after HCD has given CoC's more time to request extensions, which HCD is concerned about authorizing it as it could delay the issuance of funds and cause them to miss federal deadlines

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- b. Recommended **Action**: Establish 2020 ESG Funding Recommendation Ad Hoc Committee
 - Sage shared that the Homeless Prevention is not a standalone activity and must be included with another activity and can only be 10% of the overall request. Sage also shared that the CoC Board previously established the RRH rate MCHSCoC would use for ESG but is unsure of the amount. Veronica will research this and report at the next meeting.
 - Members that volunteers are: Zenia Leyva Chou, Lisa Judd, Que B. Anthnoy, Dan McIntire, Judy Albert, and Sandra Stolfi

F. Announcements

- 1. Updates from Board Members on methods used to address COVID-19 (limited to 3 minutes per Board Member)
- 2. MCHSCoC HHAP Grant Awarded on March 30, 2020

G. Adjourn

Confirm next meeting date and agenda items Next Meeting date: April 20, 2020 – teleconferencing will be used to facilitate virtual attendance

✓ Dan McIntire – RCHDC (Co-Chair) Organization Representing a Housing Developer	✓ Jacque Williams – Ford Street Project (Co-Chair) Org. Addressing Needs of Persons with Chronic Substance Abuse			
✓ Lisa Judd – Community Development Commission	✓ Carla Harris – Mendocino Coast Hospitality Cntr			
Public Housing Authority	Shelter Representative - Coast			
Diana Clarke – Ukiah Senior Center	Sean Kaeser – Ukiah Police Dept.			
Org. Addressing Needs of Seniors	Organization Representing Law Enforcement			
✓ Judy Albert – Project Sanctuary	✓ Sandra Stolfi – Veterans Administration			
Org. Addressing Needs of Victims of Domestic Violence	Org. Addressing Needs of Veterans			
✓ Grace Peeler-Stankiewicz - MCAVHN	✓ Que B. Anthnoy			
Org. Addressing Needs of Persons with HIV/AIDS	Homeless or Formerly Homeless Individual			
✓ Zenia Leyva Chou – Mendocino Cmty Health Clinics	Lindsey Spencer – Adventist Health			
Org. Providing Health Care Services to the Homeless	Org. Addressing Needs of Chronically Homeless			
S. Wynd Novotny - Manzanita Services	✓ Sage Wolf – Redwood Cmty Services			
Org Addressing Needs of Persons with Serious Mental Illness	Shelter Representative – North/ Inland			
✓ Karen Lovato	✓ Blythe Post Brady Nord - MCOE			
County of Mendocino Health and Human Services Agency	Organization Serving the Needs of Children			
✓ Amanda Archer - MCYP				
Org. Addressing Needs of Unaccompanied Youth or TAY	 ✓ Veronica Wilson - HHSA Collaborative Applicant / Administrative Entity CoC Secretary (non-voting) 			
Open				
Homeless or Formerly Homeless Transition-Age Youth				

COVID-19 Coordinated Entry Emergency Protocols

Addendum to the Coordinated Entry Policies and Procedures

Purpose: In response to the public health and economic crisis caused by the COVID-19 pandemic, temporary changes to the Coordinated Entry (CE) policies and procedures are needed to ensure that the Mendocino County Homeless Services Continuum of Care's (MCHSCoC) CE process is flexible and responsive to new information. The goal of this policy is to:

- Address and mitigate the risk of COVID-19 for the most vulnerable amongst people experiencing homelessness
- Provide guidance for who to prioritize for those resources accessible through the MCHSCoC CE system
- Authorize the CEDP Committee to make and implement adjustments and decisions relating to the CE process

Approval: This temporary policy and procedure was informed by collaborative planning through the MCHSCoC's Coordinated Entry/Discharge Planning (CEDP) Committee, with input from homeless service providers, Mendocino County, HUD Technical Assistance. CEDP Committee meetings are public and public comment was welcomed on the policy.

- Approved by the CEDP Committee on Thursday, May 14, 2020.
- Approved by the MCHSCoC Governing Board on Monday, May 18, 2020

Timeframe: This policy and procedure is a temporary replacement of the prioritization and screening procedure detailed in the current CE Policy Manual. It will be in effect for at least 60 days after the social distancing element of the Mendocino County Public Health order is lifted OR until further action is taken by the CEDP Committee and/or MCHSCoC Governing Board.

Policy/Procedure:

- To respond quickly to the changing needs and information available about the current situation, the MCHSCoC Governing Board has authorized the CEDP Committee to adjust the CE policies and procedures and implement these changes. All changes must be reviewed and approved through the collaborative planning process in the CEDP Committee. The CEDP Committee must provide the MCHSCoC Governing Board with an update at least monthly, summarizing the changes that have been approved and implemented.
- 2. Screening and Prioritizing Individuals and Families Experiencing Homelessness
 - a. CE Screening Tool was streamlined to gather information on an individual/household's homelessness situation, high risk of complications due to COVID-19 based on Centers for Disease Control (CDC) criteria, and universal HMIS data.
 - b. Individuals and households will be enrolled in CE if they are Literally Homeless AND have at least one of the COVID-19 risk factors.
 - c. The CE resources will be prioritized based on the following system:
 - i. Highest priority:
 - 1. 3 or more COVID-19 risk factors (individual or one member of the household)
 - 2. And meets Chronic Homelessness criteria
 - ii. Second priority
 - 1. 1 to 2 COVID-19 risk factors (individual or one member of the household)
 - 2. And meets Chronic Homelessness criteria
 - iii. Third priority:
 - 1. 3 or more COVID-19 risk factors (individual or one member of the household)
 - 2. And meets Literally Homeless criteria
 - iv. Fourth priority:
 - 1. 1 to 2 COVID-19 risk factors (individual or one member of the household)
 - 2. And meets Literally Homeless criteria
 - v. NOTE: In the case of a tie, length of time homeless will indicate who to prioritize.

II. DETERMINATION OF ELIGIBILITY, OUTREACH AND REFERRALS

A. ELIGIBILITY CRITERIA

Wherever possible the housing first philosophy, attached hereto and incorporated herein as Addendum D shall be implemented when determining eligibility for the PSH Rental Assistance Program. CDC will implement and retain Referral/Case management MOUs with agencies who provide supportive services. Any agency with a signed Referral/Case management MOU may refer applicants to CDC. Refer to "Referrals" below for further definition.

As verified and maintained by the participant's service provider an applicant must meet the definition of homeless or chronically homeless as defined in Addendum A and modified by Addendum I, and have one or more of the following three <u>targeted</u> disabilities:

- a. Serious Mental Illness
- b. Chronic alcohol and/or drug abuse;
- c. AIDS or related diseases

Persons with physical disabilities may qualify for the program, even if their disability is not one of the "targeted disabilities".

Additionally, the applicant must be disabled according to the following HUD definition:

"A person shall be considered to have a disability if such person (1) has a physical, mental or emotional impairment which is expected to be of *long-continued and indefinite duration*; substantially impedes his or her ability to live independently; **and** is of such nature that such ability could be improved by more suitable housing conditions."

In the case of a homeless household with more than one member, at least one member of the households must meet the disability criteria.

Disability must be verified by a third party verification and the verifying provider must be licensed in the state to treat that specific disability.

The applicant's service provider must verify, maintain, and certify the eligibility criteria above have been met and submit the certification to CDC. Preference will be given to Chronically Homeless households. Service providers who refer households to the PSH program must verify homelessness status, and must refer Chronically Homeless households before referring other homeless households.

Income Eligibility

Income for the PSH program will be calculated as stated in 24 CFR 5.609 Annual Income and 24 CFR 5.611 Adjusted Income, attached hereto and incorporated herein as Addendum F.

Eligible Households

The following households are eligible to participate in the PSH Rental Assistance Programs:

- 1. Single person households, defined as an unaccompanied adult (age 18 or over or emancipated minors)
- 2. Family households; defined as two or more persons whose income and resources are available to meet the household's regular living expenses.

Live In Aides

Program participants with chronic medical needs may qualify for a Live-In Aide if such a Live-In Aide is determined to be essential for the care and well-being of the participant.

Verification must be provided by a knowledgeable professional such as: a doctor, social worker, or case worker, certifying that the participant requires an attendant to live with them in order to safely manage their medical and healthcare needs. The Live-In Aide must complete an application, and sign a Live-In Aide Certification Form.

Additionally, Live-In Aides must meet the HUD criteria outlined in 24 CFR § 5.403. This definition applies to a specific person (PIH 2008-20):

Live-In Aide means a person who resides with one or more elderly persons, or nearelderly persons, or persons with disabilities, and who:

(1) Is determined to be essential to the care and well-being of the persons;

(2) Is not obligated for the support of the persons; and

(3) Would not be living in the unit except to provide the necessary supportive services.

The CDC) must approve a Live-In Aide who meets all of the criteria if necessary as a reasonable accommodation in accordance with 24 CFR Part 8, to make the program accessible to and usable by the family member with disabilities.

The CDC may not approve an unidentified Live-In Aide, nor a larger unit than the family qualifies for under the CDC's subsidy standards for an unidentified Live-In Aide.

Occasional, intermittent, multiple or rotating care givers do not meet the definition of a Live-In Aide pursuant to 24 CFR Section 982.402(b)(7), which implies that Live-In Aides must reside with a family permanently for the family unit size to be adjusted in accordance with the subsidy standards established by the CDC. Therefore, an additional bedroom for a Live-In Aide should not be approved.

The CDC must consider requests for an exception to the established subsidy standards on a case by-case basis and provide an exception, where necessary, as a reasonable accommodation. The CDC shall document the justification for all granted exceptions. The income of a Live-In Aide is not counted in the calculation of annual income for the participant family pursuant to 24 CFR Section 5.609(c)(5). Relatives may be approved as Live-In Aides if they meet all of the criteria defining a Live-In Aide. Because Live-In Aides are usually not *family* members, a relative who serves as a Live-In Aide would not be considered a remaining member of a tenant family.

CDC Policy Pertaining to Live in Aides

The Live-In Aide, and any family members of the Live-In Aide, must be identified by the family and approved by CDC. The CDC may not approve an unidentified Live-In Aide, nor a larger unit than the family qualifies for under the CDC's subsidy standards for an unidentified Live-In Aide.

CDC presumes that a relative is a household member, not a Live-In Aide. For a relative to qualify as a Live-In Aide, the applicant/participant must show that the care is provided by contract. The family and the Live-In Aide will be required to submit a certification and documentation that shows the Live-In Aide is:

- 1. Capable of providing the required care for the participant;
- 2. Not obligated for the support of the person(s) needing the care;
- 3. Has never been a member of the household while the family was receiving housing assistance, nor has the person made regular financial contributions to the household while the family was receiving housing assistance;
- 4. There is no other reason for the person to live in the unit other than to provide care for the elderly, near-elderly, or disabled family member. The live in aide declarant should have to demonstrate they have a previous residence they left in good standing;
- 5. Intends to maintain his or her finances separately and live independently from the disabled tenant's household; and
 - 6. Receives approval from the owner/landlord.

Written verification will be required from a reliable, knowledgeable professional, such as a doctor, social worker, or case worker, that the Live-In Aide is essential for the care and well-being of the elderly, near-elderly, or disabled family member.

For continued approval, the family must submit a new request, subject to CDC's verification every year during the annual re-certification.

CDC will not approve a particular person as a Live-In Aide, and may withdraw such approval consistent with 24 CFR 982.316(b), if:

- 7. The person commits fraud, bribery or any other corrupt or criminal act in connection with any federal housing program;
- 8. The person commits drug-related criminal activity or violent criminal activity; or

9. The person currently owes rent or other amounts to CDC or to another CDC in connection with Section 8 or public housing assistance under the 1937 Act.

Other Eligibility Requirements

Applicants who are currently receiving rental assistance from any other program do not qualify for the PSH Rental Assistance Program.

Applicants who have previously participated in the PSH Rental Assistance Program may be re-referred and re-apply for the program. For these households CDC may consider the following in making a determination of eligibility:

- 1. Completion of rehabilitation for substance abuse, if applicable;
- 2. Compliance with mental health treatment which eliminates issue for previous program participation termination, if applicable; and
- 3. Former household members, who caused program non-compliance, are no longer in the home.

Applicants in Debt to CDC

CDC will accept referrals for applicants who are in debt to CDC. However, the applicant/participant must enter into a repayment agreement with CDC before a PSH certificate will be issued.

The Housing Choice Voucher Administrative Plan, Chapter XXIV. Repayment Agreements will be referred to when determining the terms of the repayment agreement.

CDC may consider the financial circumstances of the applicant when determining the terms and duration of the repayment agreement. Failure to meet the obligation of the repayment agreement may result in termination from the program. CDC may consider all circumstances before denying an applicant based on this criteria.

B. INELIGIBLE APPLICANTS

Applicants/participants are not eligible for participation in the PSH program if any member of the family is;

- 1. A registered sex offender;
- 2. Has been convicted of manufacturing methamphetamine in an assisted unit;
- 3. Has a recent history of violent criminal behavior which may have threatened the health and safety of another individual (recent history is defined as more than three documented incidents in the previous 12

month period). This criteria will be evaluated on a case by case basis and completion of an anger management course or other such process may be considered; or

4. Has been convicted of arson.

C. OUTREACH

Outreach Policy

CDC is a member of the Mendocino County Homeless Services Continuum of Care (MCHSCoC). CDC participates on committees as identified in the Governance Charter for the MCHSCoC, attends related meetings, and participates in the Point in time count.

Outreach Procedures

<u>CDC</u> staff will make presentations about the CoC Rental Assistance Program at relevant venues (e.g. quarterly Continuum of Care Board meetings, Case Conferencing meetings and other training venues) upon request.

D. REFERRAL

CDC participates in the coordinated entry process. Referrals will be pulled from the By Name List (BNL) as funding is available. ** Note: Because CDC participates in the CoC Coordinated Entry process, CDC has designed this section to mirror that process. Should that process change, and be approved by the CoC Board, CDC will follow the currently adopted CoC Coordinated Entry Process, as approved by the Executive Director. Nothing in this would allow for changes to be made or implemented that are not in compliance with Federal, State, or local laws, or grant conditions outlined by the funding source (The U.S. Department of Housing and Urban Development)

Service providers will be required to enter into a case management agreement with CDC. The case management agency must agree to provide support services to the participant during their housing search, and after suitable housing is located and the client is housed. Case management is necessary to keep clients housed, and avoid a return to homelessness.

Referral process:

- The Front Door agencies for Coordinated Entry will complete a VI-SPIDAT with clients which will determine their placement on the By Name List. When CDC pulls a client from the By Name List, CDC will request the following from the case manager who placed the client on the By Name List (BNL)
 - 1. VI-SPDAT
 - 2. Verification of homelessness
 - 3. Verification of disability

Adopted February 18th, 2016 by resolution 1058-16

- 4. Signed release of information/consent
- 5. HMIS Informed Release and Consent form
- 6. Case plan
- 2. These documents must be submitted in a sealed envelope marked "confidential" to protect client's information.
- 3. Referrals will be date stamped.
- 4. The referral package will be reviewed, and data will be entered into HMIS and the CDC housing software.

Unit Based assistance: SRA units: Case managers will have a maximum of 7 days to bring the referral documents into CDC, signed by the client.

Tenant Based Assistance: TRA Certificates: Case managers will have a maximum of 14 calendar days to bring the referral documents into CDC, signed by the client.

Clients who cannot be located when pulled from the BNL will have three opportunities for housing (name at the top of the BNL) before they are moved to the inactive list

Clients who are contacted, and refuse a housing opportunity three times will have a case conference scheduled to determine what the issues with the presented housing opportunities are for that client. If the issues are resolved, the client can remain at the top of the BNL, however if they are not, the client will be removed from all lists. If the client refuses the next housing opportunity, they will be moved to the inactive list.

Priority Determination

If there are more referrals than funds available the following will be used to determine priority:

1. Veterans will receive priority.

2. **Chronically Homeless** will be processed first and, if eligible, issued certificates. first.

Order of priority within this category is determined by the VI-SPDAT score. Scoring that indicates the most vulnerable will processed first, and if eligible issued a certificate first. If two referrals with the same priority/vulnerability are received around the same time, length of time homeless will be the determining factor, as to which referral is processed first. The referral that indicates the longest time homeless will be processed first.

3. **Homeless** will be processed once all Chronically Homeless referrals have been processed, and all Chronically Homeless referrals have been either issued a certificate or the referral/application has been denied. Order of priority within this category is determined by the VI-SPDAT score. Scoring that indicates the most

vulnerable will be processed first, and if eligible issued a certificate first. If two referrals with the same priority/vulnerability are received around the same time, length of time homeless will be the determining factor as to which referral is processed first, meaning the person experiencing homelessness the longest will be processed first.

CDC may require verification of homelessness status in addition to that provided from the case manager.

Referrals will only be pulled from the BNL through coordinated entry.

CDC May accept referrals directly from Domestic Violence Service Providers and providers who serve people living with HIV or AIDS for their clients who are experiencing homelessness.

E. APPLICATION PROCESS AND VERIFICATION OF ELIGIBILITY

Application Packet

The service provider will assist the applicant with completing CDC's application, and collecting/supplying all necessary documentation. The application packet will include the following;

- 1. Cover Sheet: Includes case manager's business card for easy reference, and any comments from the Service Provider that may affect participation in the Program;
- 2. Program Application;
- 3. Service Provider Agreement between the service provider and the applicant;
- 4. Identification for all adults. CDC must view originals, and will make copies;
- 5. Social Security Cards for all households members- copies will only be accepted if legible, and do not appear to be altered in any way, if either of these conditions are not met, CDC will need to view the originals and make copies for the file.
- 6. Birth Certificate or government document verifying date of birth for minorscopies will only be accepted if legible, and do not appear to be altered in any way, if either of these conditions are not met, CDC will need to view the originals and make copies for the file ;
- 7. Current Income/Asset Verification (copy of benefit letter, check stubs, employer verification, bank statements etc.);
- 8. Chronically Homeless, and preference Verification Form-Must meet current HEARTH act definition;
- 9. Disability Verification Form;
- 10. Notice of the expectation of maintaining a clean and sober environment; and
- 11. Applicant/Participant affirmation that

- 1. Failure to comply with services may result in termination of rental assistance
- 2. Arrests for substance abuse related activity or infliction of harm on another may be grounds for termination of rental assistance.

Once an application is submitted, CDC will determine if additional information is required. CDC will contact the applicant and/or the case manager to notify that additional information is needed to make a final determination of eligibility, if necessary.

The participant and case manager will have ten (10) calendar days from the date of the notice to complete and return all documents not received with the original application to CDC. These documents may include, but are not limited to, the following:

- 1. Third-Party Verification of Income (all household members):
 - 1. For government assistance: a printout or letter from government assistance programs (e.g. TANF, GA, SSI, unemployment, etc.) Verification must be dated within sixty (60) days prior to application.
- 2. For households with earned income: three current consecutive pay stubs or a letter from the employer specifying hourly wage, projected hours worked and monthly earnings
- 3. For households with zero income: a signed "affidavit of zero income."
- 4. For households with Assets: Two current consecutive statements

Eligibility Determination

Once all required documentation has been supplied, CDC will review the information for completeness, and if necessary verify any additional information. CDC will make a determination of final eligibility based on the following factors:

- 1. Signed Verification of Homelessness Form **PLUS** supporting information:
 - 1. For persons living on the streets: signed statement from outreach worker, other organization, or participant attesting to applicant's homeless status
 - 2. For persons living in emergency shelters: signed statement from shelter provider attesting that applicant is residing there
 - 3. For persons exiting transitional housing: signed statement from transitional housing provider attesting that applicant is residing there and was homeless upon entry
 - 4. For persons leaving an institution following short-term stay (30 days or less): signed statement from institution verifying residence of less than 30 days and attesting that applicant was homeless at time of entry
 - 5. For chronically homeless persons: one of the above documents to verify current status and duration of homelessness, plus, if

applicable, a signed statement from the applicant attesting to past homeless episodes

- 6. If applicable, the Verification of Disability Form must be signed by a qualified health care professional trained to make such a determination. Case managers are not qualified to sign the verification unless they are qualified health care professionals.
- Verification of income eligibility. Income of program participants must be calculated in accordance with 24 CFR § 5.609 and 24 CFR § 5.611(a)
- 8. Signed Service Provider Agreement between participant and eligible service provider

Based on the review of the application packet, CDC will make one of the following determinations:

- 1. File is complete and applicant is eligible. CDC will schedule a briefing.
- 2. File is incomplete. If eligibility cannot be determined, CDC will notify the applicant and case manager in writing that additional information is necessary. If the requested information is not supplied within ten (10) calendar days, or an approved extension, CDC will notify the case manager and applicant that the application is denied as outlined in #3 below. (Extensions can be granted on a case by case basis and must be reasonable).
- 3. Applicant is ineligible. The application will be denied and the reasons for denial will be given in writing to the applicant and case manager. If the applicant disagrees with CDC's decision of denial, the applicant may request an informal review of the denial of eligibility within ten (10) calendar days of the notice. The informal review process can be found in Chapter VII. G. of this policy.

F. BRIEFING AND ISSUANCE OF PSH CERTIFICATE

Once an applicant has been determined to be eligible for the PSH Program, CDC will schedule a briefing by contacting the case manager. The case manager will then contact the applicant to confirm date/time of the meeting. The case manager and applicant must attend the scheduled meeting together. If the applicant fails to appear, he/she may be rescheduled for a second briefing. If the applicant fails to appear a second time, the application will be withdrawn, and the applicant will be notified as outlined in #3 above.

A family selected to participate in the PSH program will be provided an oral briefing.

The briefing shall include, but is not limited to, information on the following subjects:

- 1. A description of how the program works and review the CoC policies and program requirements, including participant obligations
- 2. How the applicant's portion of the rent is determined
- 3. The process for securing a housing unit, including where the family may lease a unit, and an explanation of how to request CDC approval to lease a unit.
- 4. CoC Program Agreement, Release(s) of information, CoC Housing Certification, and all other necessary documents.

Contents of the Briefing Packet

When a participant is selected to participate in the program, the CDC will provide the participant with a packet that includes the following information:

- 1. Permanent Supportive Housing Program Participant Obligations
- 2. Permanent Supportive Housing Program Certificate
- 3. Contact sheet
- 4. Security Deposit Assistance maximum calculation sheet
- 5. Things you should know
- 6. Permanent Supportive Housing pamphlet
- 7. Current Fair Market Rents
- 8. Request for Tenancy Approval (RFTA) form
- 9. Lead Based Paint in your Home pamphlet
- 10. A Good Place to Live. Housing Quality Standards
- 11. Landlord Owner guide
- 12. Violence Against Women Act protections
- 13. Housing Discrimination Packet
- 14. CDC's informal hearing procedures. This information shall describe when the CDC is required to give a participant family the opportunity for an informal hearing, and how to request a hearing.

Certificate Issuance

A certificate will be issued to an applicant after the CDC has determined that the applicant is eligible for the program based on information received within the 60 days prior to issuance. CDC should have sufficient funds to house an applicant before issuing a certificate. If funds are insufficient to house the applicant, CDC will wait until it has adequate funds before CDC issues another certificate.

If it is not likely that funds will be available within 30 days, CDC will send the referral back to the referring agency with an explanation that funds are not anticipated to be available within 30 days. If CDC determines that there is insufficient funding after a certificate has been issued, CDC may rescind the certificate.

Role	Organization / Agency	Executive Director	Primary Designee	Alternate Designee	Date Term Began	Term Date End
Collaborative Applicant/Administrative Entity - HHSA (non-voting)	Health and Human Services Agency	Tammy Moss Chandler	Veronica Wilson	Megan Van Sant	n/a	n/a
Homeless or Formerly Homeless Individual	n/a	n/a	Que B Anthnoy	n/a	6/17/2019	6/1/2022
Shelter Representative – Coast	Mendocino Coast Hospitality Center	Carla Harris	Carla Harris	Lynelle Johnson	4/16/2018	3/1/2021
Shelter Representative – North/Inland	Redwood Community Services	Dan Anderson	Sage Wolf		3/18/2017	3/1/2020
Public Housing Authority	Community Development Corporation	Todd Crabtree	Lisa Judd		4/16/2018	3/1/2021
Organization addressing the needs of the Chronically Homeless	Adventist Health	Jason Wells	Lindsey Spencer		6/17/2019	7/1/2022
Organization addressing the needs of unaccompanied or transition age youth (TAY)	Mendocino County Youth Project	Joanna Olson	Amanda Archer	Joanna Olson	4/16/2018	3/1/2021
Organization serving the needs of the Elderly Population	Ukiah Senior Center	Diana Clarke	Diana Clarke	Heather Haydon	6/17/2019	7/1/2022
Organization serving the needs of families with children	Mendocino County Office of Education	Michelle Hutchins	Blythe Post	Brady Nord	3/18/2017	3/1/2020
Organization addressing the needs of individuals with serious mental illness	Manzanita Services	Wynd Novotny	Wynd Novotny	Sharon Govern Sarah Martin	4/16/2018	3/1/2021
Organization addressing the needs of persons with chronic substance abuse	Ford Street Project	Jacque Williams	Jacqueline Williams	Drew lacomini-Hair	4/16/2018	3/1/2021
Organization addressing the needs of Veterans	Veteran's Administration	Jon Johnson	Sandra Stolfi	Will Van Sant	4/16/2018	3/1/2021
Organization addressing the needs of Persons with HIV/AIDS	MCAVHN	Libby Guthrie	Grace Peeler-Stankiewicz		4/16/2018	3/1/2021
Organization addressing the needs of Victims of Domestic Violence	Project Sanctuary	Dina Polkinghorne	Judy Albert	Mary Tindall	4/16/2018	3/1/2021
Organization providing Health Care services to the Homeless	Mendocino Community Health Clinics	Carole Press	Zenia Leyva Chou	Elizabeth Van Vranken	3/18/2017	3/1/2020
County of Mendocino, Health and Human Services Agency	Health and Human Services Agency	Tammy Moss Chandler	Karen Lovato	Jody Johnston	n/a	n/a
Organization representing a local housing developer	Rural Communities Housing Development Corporation	Brad McDonald	Daniel McIntire	Ryan LaRue	6/17/2019	7/1/2022
Organization representing Law Enforcement	Ukiah Police Department	Chief Justin Wyatt	Cptn Sean Kaeser	Lt. Cedric Crook	6/17/2019	7/1/2022

Emergency Solutions Grants Program

2020 Balance of State Allocation

CA-509 Time-Line

WHO	WHAT	WHEN	
California Department of Housing & Community Development (HCD)	Emergency Solutions Grants Program Balance of State Allocation Notice of Funding Availability	Released: February 28 th , 2020	
MCHSCoC Administrative Entity	MCHHSA Staff formerly requested 2020 ESG Application Extension to June 30 th , 2020; Approved for July 10 th , 2020	Submitted: March 20 th , 2020 Approved: May 1 st , 2020	
MCHSCoC Governing Board	Establish MCHSCoC 2020 ESG Ad Hoc Funding Committee to Announce Local Competition and Request for Applications	Released: May 5 st , 2020	
ESG Applicants	ESG Applications due to the review team! Please email your applications to: <u>wilsonv@mendocinocounty.org</u>	Due: 7:00 AM, Monday, June 1 st , 2020	
MCHSCoC 2020 ESG Ad Hoc Funding Committee	Review, rate and rank applications. Prepare recommendations for the Board	Due: 3:00 PM, Monday June 22 th , 2020	
MCHSCoC Board	Discussion and Action on Application Review Team ESG recommendations.	MCHSCoC Special Board meeting, 1:30 PM, June 29 th , 2020	
Lead Agency staff	Upload applicant information to ESG website and snail mail application to HCD	Monday, July 6 th , 2020	
ESG Applicants	ESG Applications DUE to HCD!	Friday, July 10 th , 2020 by 5 PM	

Mendocino County Homeless Services Continuum of Care



Resolution Number 2020-01 Mendocino County Homeless Services Continuum of Care (CA-509)

AUTHORIZING RESOLUTION

A quorum plus one of the Board Members, of The Mendocino County Homeless Services Continuum of Care ("Applicant") hereby consent to, adopt and ratify the following resolutions:

A. WHEREAS the State of California (the "State"), Department of Housing and Community Development ("Department") issued a Notice of Funding Availability ("NOFA") dated **May 2020** under the Coronavirus Aid, Relief, and Economic Security (CARES) Act allocation to the Emergency Solutions Grants (ESG) Program (hereinafter referred to as the "Program," or "ESG-CV"); and

INSTRUCTION: The correct date that the NOFA itself was issued by the Department is required- do not use other dates such as email/listserv announcements, associated memos, etc.,

B. WHEREAS Applicant is an approved state ESG Administrative Entity

C. WHEREAS the Department may approve funding allocations for the ESG-CV Program, subject to the terms and conditions of the NOFA, Program regulations and requirements, and the Standard Agreement and other contracts between Department and ESG-CV grant recipients;

NOW THEREFORE BE IT RESOLVED THAT:

1. If Applicant receives a grant of ESG-CV funds from the Department pursuant to the above referenced ESG-CV NOFA, it represents and certifies that it will use all such funds in a manner consistent and in compliance with all applicable state and federal statutes, rules, regulations, and laws, including without limitation all rules and laws regarding the ESG-CV Program, as well as any and all contracts Applicant may have with the Department.

2. Applicant is hereby authorized and directed to receive an ESG-CV grant, in an amount not to exceed **\$1,410,000** in accordance with all applicable rules and laws.

3. Applicant hereby agrees to use the ESG-CV funds for eligible activities as approved by the Department and in accordance with all Program requirements, and other rules and laws, as well as in a manner consistent and in compliance with the Standard Agreement and other contracts between the Applicant and the Department.

4. Tammy Moss Chandler, Director of Mendocino County Health and Human Services Agency is authorized to execute the Standard Agreement and any subsequent amendments or modifications thereto, as well as any other documents which are related to the Program or the ESG-CV grant awarded to Applicant, as the Department may deem appropriate.

Mendocino County Homeless Services Continuum of Care



PASSED AND ADOPTED at a regular meeting of the Mendocino County Homeless Services Continuum of Care this _____ day of _____, ____ by the following vote:

AYES: _____ ABSTENTIONS: _____ NOES: _____ ABSENT: _____

Signature of Approving Officer Dan McIntire, MCHSCoC Board Co-Chair

Mendocino County Homeless Services Continuum of Care

Staff Report

Meeting Date: Monday, May 18, 2020

Item F8b: Pending funding requests related to Covid-19 response

Narrative

Mendocino County Health and Human Services and the Continuum of Care have jointly received the following requests for additional funding related to responding to the needs of the homeless during the pandemic.

Building Bridges (Redwood Community Services): \$152,741 requested

Funding is needed to expand shelter staffing, including the addition of a Licensed Vocational Nurse on site. This funding request is partially related to additional needs due to the pandemic. Time span: March through June 2020. HHSA has committed to partially funding this request through additional Whole Person Care funding of \$100,000. The Mendocino County Board of Supervisors will consider funding the remaining balance through the County's COVID-19 Homeless Emergency grant.

Remaining balance of need: \$0, pending approval by BOS

Mendocino Coast Hospitality Center: \$78,710 requested

Funding was requested in order to extend the Winter Shelter through May 10, 2020. Time span: April 1 through May 10, 2020. HHSA has committed to partially funding this request through additional Whole Person Care funding of \$30,000. The Mendocino County Board of Supervisors will consider funding the remaining balance through the County's COVID-19 Homeless Emergency grant.

Remaining balance of need: \$0, pending approval by BOS

City of Fort Bragg – Collaborative Application: \$48,736 requested

Funding has been requested for a variety of needs including a new Safe Parking program; support for motel rooms for individuals fleeing domestic violence; extension of the Winter Shelter rooms at Motel 6 Fort Bragg; modest Personal Protective Equipment and supplies. With the exception of the Safe Parking program, all of the identified needs have been funded and/or resolved in some other fashion. It is unclear whether or not the Safe Parking project is still a priority need for the community of Fort Bragg.

Remaining balance of need for Safe Parking program only: \$23,536 (estimate)

MCAVHN: \$18,303

Funding has been requested for staffing support and mileage for MCAVHN staff providing significant case management services to homeless individuals staying in motels as part of the Pandemic Prevention Motel Program. Time span requested: March 16 – May 1. HHSA has encouraged MCAVHN to access the funding they have received through their three-year Outreach and Engagement contract with HHSA for this pandemic-related outreach service. *Remaining balance of need: potentially \$0*

HHSA Advocacy and Collaboration Team: \$80,000 (estimate)

Funding is requested for a flexible <u>Immediate Housing Needs Fund</u>. County HHSA staff and community-based partners are working directly with individuals and families in the Pandemic Prevention Motel Program in an effort to find creative ways to transition them from the motels to a safe location other than the streets. In addition, collaborative partners are working with street-level homeless individuals that do NOT qualify for the Pandemic Prevention Motel Program in an effort to assist them in securing a safer place to live other than the streets or a homeless encampment. The Immediate Housing Needs Fund would be available for direct services such as assisting a homeless individual with a room rental from a friend or family; down payment assistance if traditional Rapid Rehousing funds are not an option; transportation to a family member living in another community; and/or assistance with past due utility payments or similar needs. The Mendocino County Board of Supervisors will consider funding of this project up to \$37,796 through the County's COVID-19 Homeless Emergency grant. *Remaining balance of need: \$42,204, pending approval of partial funding by the BOS*