

Executive Board Meeting May 16, 2024 1:00 pm to 3:00 pm 777 Cypress Ave. Enterprise Conference Room Redding, CA 96001

5/16 - Enterprise Conference Room

Join Zoom Meeting

https://us06web.zoom.us/j/83507778580?pwd=4zr3RtFbidHW3Sg2ChUDBNP6xoJJ5p.1

Meeting ID: 835 0777 8580

Passcode: 523727 1(669)444-9171

Teleconference locations:

Sierra County Behavioral Health 706 Mill Street Loyalton, CA 9611

Del Norte County Health and Human Services 455 K Street Crescent City, CA 95531

Teach I.N.C 112 E 2nd Street Alturas, CA 96101

Lassen County Health and Social Services 1445 Paul Bunyan, Suite B Susanville, CA 96130

Siskiyou County Behavioral Health 2060 Campus Dr. Yreka, CA 96097

Plumas County PCIRC 591 Main Street Quincy, CA 95971

Executive Board Members

Kristen Schreder,County of Shasta, Chair

Sarah Collard, County of Siskiyou, Co-Chair

Grace PoorCounty of Lassen

Cathy Rahmeyer, County of Plumas

Carol Madison, County of Modoc

Sheryll Prinz-McMillan, County of Sierra

Michael Coats, County of Del Norte



To Address the Board: Members of the public may address the Board on any agenda item. Pursuant to the Brown Act (Govt. Code section 54950, et seq.) Board action or discussion cannot be taken on non-agenda matters but the board may briefly respond to statements or questions. You may submit your public comment via email to norcalcoc@cityofredding.org that will be read into the record.

1. Call to Order/Quorum Established/Introductions

2. Public Comments (limited to 3 mins. per comment)

Members of the public will have the opportunity to address the Board on any issue within the jurisdiction of the Board. Speakers will be limited to three minutes.

3. Presentation from Chanita Jackson – Governance Charter Technical Assistance

4. Action Items

I. Approve Meeting Minutes

Board members will review and approve draft minutes from the 04/18/2024 Executive Board Meeting, 04/18/2024 All NorCal CoC Member Meeting

Attachment A - draft 04/18/2024 Executive Board Meeting minutes

Attachment B - draft 04/18/2024 All NorCal CoC Member Meeting minutes

II. Approve Partners II Application

Review and approve Partners II Application submitted by Shasta Community Health Center, per RFP. Attachment C – Partners II RFP Application

III. Approve PIT Coordinator Role and Responsibilities

Review and approve the PIT Coordinator Roles and Responsibilities.

Attachment D – PIT Coordinator Roles and Responsibilities

IV. Approve HHAP 4 NOFA

Review and approve the HHAP 4 Notice of Funding Availability

Attachment E – HHAP 4 NOFA

V. Approve the Letter of Support for Plumas Crisis Intervention Resource Center

Review and approve the Letter of Support for Plumas Crisis Intervention and Resource Center for The Extreme Heat & Community Resilience Program.

Attachment F – Letter of Support

5. Discussion Items

- I. Collaborative Applicant
- II. Collaboration

6. Reports

- I. City of Redding
- II. NorCal CoC Members County Updates

7. Discussion Items for Next Meeting



8. Adjournment

If requested, the agenda shall be made available in appropriate alternative formats to persons with a disability, as required by Section 202 of the Americans with Disabilities Act of 1990 (42 U.S.C. Sec. 12132), and the federal rules

and regulations adopted in implementation thereof. You may contact the City of Redding Housing Division at (530)225-4048 for disability-related modifications or accommodations, including auxiliary aids or services, in order to participate in the public meeting.

Next Executive Board Meetings June 20, 2024 1pm – 3pm Redding City Hall, Enterprise Conference Room



Executive Board Meeting
Draft Minutes April 18, 2024
1:00 pm to 1:30 pm
1644 Magnolia Ave., Aspen Room
Redding, CA 96001

4/18 - Aspen Room (Shasta County Office of Education)

Join Zoom Meeting

https://us06web.zoom.us/j/84089782344?pwd=aa9ZuTYnuCKmi4spIjvOn2TEZa7PBl.1

Meeting ID: 840 8978 2344

Passcode: 854971 1(669)444-9171

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1. Call to Order/Quorum Established/Introductions

Meeting called to order, quorum met.

Executive Board members present: Chair Kristen Schreder, Trish Barbieri, Grace Poor, Carol Madison, and Michael Coats.

2. Public Comments (limited to 3 mins. per comment)

Members of the public will have the opportunity to address the Board on any issue within the jurisdiction of the Board. Speakers will be limited to three minutes.

No public comment.

3. Action Items

I. Approve Meeting Minutes

Board members will review and approve draft minutes from the 02/22/2024 Special Executive Board Meeting, 03/07/2024 Special Executive Board Meeting, 03/21/2024 Regular Executive Board Meeting.

Attachment A - draft 2/22/2024 Special Executive Board Meeting minutes

Attachment B - draft 3/07/2024 Special Executive Board Meeting minutes

Attachment C - draft 3/21/2024 Regular Executive Board Meeting minutes

Motion to approve 2/22/2024, 3/07/2024, and 3/21/2024 minutes made by Carol Madison, seconded by Grace Poor. Vote taken all approved, none opposed. Trish Barbieri abstained from voting, stating she did not attend any other those meetings.

II. Review and Approve Updates to the Homeless Management Information System (HMIS) Authorization to Use and Disclose Confidential Information

Review changes proposed and approved by the HMIS Committee to update adding Sierra County, Siskiyou County, and additional Agencies to the list of participating Agencies, and also update language to modify agencies as needed, which may be retroactive.

 $Attachment\ D-Homeless\ Management\ Information\ System\ (HMIS)\ Authorization\ to\ Use\ and\ Disclose\ Confidential\ Information$

Chair Kristen Schreder and Laura McDuffey started a discussion around the changes made as outlined in the agenda. Trish Barbieri pointed out that she had found some typos and will send those to Shawnna Flanigan to make those corrections. Motion to approve the HMIS Authorization to Use and Disclose Confidential Information with the corrections Trish made by Carol Madison, seconded by Grace Poor. Vote taken, all approved, none opposed.



III. Review and Approve making changes to update the NorCal Continuum of Care Administrative Entity MOU

Review areas of proposed changes, including: Amend the MOU to designate the City Manager or their designee to execute agreements and administer grant funds, amend the end date from 9/19/25 to 9/18/25, amend sections 5.A. and 6.A., amend Exhibit A, and correct grammatical and format errors. Once changes have been made the MOU will come to the Executive Board for approval.

Attachment E – NorCal Continuum of Care Administrative Entity MOU

Chair Kristen Schreder shared recommended changes to be made to the MOU and the reason why. Chair Schreder also shared that once these changes have been made they will be brought back to the Executive Board for review and approval. Motion to approve making changes to the NorCal Continuum of Care Administrative Entity MOU made by Carol Madison, seconded by Trish Barbieri. Vote taken, all approved, none opposed.

IV. Approve NorCal CoC Voting Member and Alternate for Lassen County Attachment D – NorCal CoC Voting Member and Alternate Letter

Motion to approve new NorCal CoC Executive Board member and alternate made by Carol Madison, seconded by Michael Coats. Vote taken, all approve, none oppose.

4. Adjournment

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All CoC member meeting to follow.

Next Executive Board Meetings May 16, 2024 1pm – 3pm Redding City Hall, Enterprise Conference Room



All NorCal CoC Member Meeting
Draft Minutes April 18, 2024
1:30 pm to 3:00 pm
1644 Magnolia Ave., Aspen Room
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4/18 - Aspen Room (Shasta County Office of Education)

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1. Call to Order/Quorum Established/Introductions

Meeting called to order at 1:30. Quorum establish in the spirit of collaboration to move forward with meeting with members from all seven Counties in attendance virtually.

2. Public Comments (limited to 3 mins. per comment)

Members of the public will have the opportunity to address the Board on any issue within the jurisdiction of the Board. Speakers will be limited to three minutes.

No public comments.

3. Collaborative Applicant presentation from Teddie Pierce with Decipher HMIS

Debrief and discussion on the NorCal CoC score, trend and recommendation for improvement.

Attachment A – Presentation

Teddie Pierce presented a detailed presentation on the CoC competition and the scores received (presentation available in the 4/18/2024 agenda). Teddie shared the federal/HUD processes in obtaining the scores and how to make future improvements for the next Collaborative Application due in the fall of 2024.

4. Governance Charter presentation from Chanita Jackson with Technical Assistance Collaborative

Presentation and discussion regarding HUD Technical Assistance with Governance Charter rewrite Attachment B – Presentation

Postponed, moved to the 5/16/2024 Executive Board meeting.

5. HMIS Presentation from United Way of Northern California

Presentation and discussion on HMIS updates, improvement and successes.

Tim Danielson with united Way of Northern California shared information about Coordinated Entry and how to each Agency can assist with cleaning it up. He mentioned how helpful Lassen County and Nation's Finest have been in assisting with Coordinated Entry. Krystal Dalton with Lassen County shared how helpful Tim and the United Way team have been, which has helped them to better assist their clients.

6. Discussion Item(s)

I. HHAP 4 eligible use priories to develop NOFA Attachment C - Eligible Uses Sheet



Chair Schreder shared the need to have each Advisory Board's HHAP-4 priorities to develop the HHAP-4 NOFA. Chair Schreder shared the Shasta Advisory Board's priorities and asked the other boards to send their priorities to Shawnna Flanigan.

II. NorCal CoC (Seven County) PIT Coordinator

Receive input from CoC Advisory Boards, PIT Committee Continue to discuss roles and responsibilities

Chair Schreder shared that the RFP for the PIT/HIC Coordinator is being developed and should be available soon. She also shared the benefits to having a coordinator.

7. NorCal CoC Members – County Updates

Del Norte County

- Their Project Homekey project to turn a motel into studio apartments in going before their BOS at the end of April, it has been three years in the making.
- The Mission Possible micro-village project has started. Mission Possible has started hiring staff to work at the micro-village

Siskiyou County

- Hired a new Homeless Coordinator
- Their mobile shower and laundry service has started. This service has been successful and also helped in their outreach
- Their BHBH draft is complete to lease property from the City of Yreka for \$1 a year to build a tiny home village
- Siskiyou Crossroads, a new Permanent Supportive Housing project starts in may
- Project Basecamp plans have been approved

Modoc County

- Modoc has applied for new funding to support housing initiatives
- Still working on their BHBH contract

Shasta County

- Pathways to Housing currently has 18 clients offering medical respite
 - o They will be expanding to offer Enhanced Care Management in the near future.
 - o They partner with Shasta Community Health Center
- Shasta County is working on the BHBH contract
- Shasta County is conducting homeless street outreach to offer services for future planned encampment clean ups
- Shasta Community Health Center has applied for the Partners II program



8. Adjournment

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Motion to adjourn made by Lesha Schaefer, seconded by Laura McDuffey.

Next Executive Board Meetings May 16, 2024 1pm – 3pm Redding City Hall, Enterprise Conference Room

Proposal to Administer the

Partners II Housing Project

for the NorCal Continuum of Care

Primary Contact: Amber Middleton

Senior Director of HOPE Program amiddleton@shastahealth.org

530.229.5037

Authorized Signatory: J. Brandon Thornock

Chief Executive Officer

bthornock@shastahealth.org



Shasta Community Health Center (SCHC) seeks consideration to apply to administer the Partners II Housing Project for the NorCal Continuum of Care. If chosen for this program, SCHC will utilize our current housing program to leverage funds and ensure complete utilization of resources.

As a Federally Qualified Health Center serving the community for over twenty years, we have a solid reputation of meeting the needs of the vulnerable populations in our community. In 2021, our HOPE Program began delivering intensive case management to at-risk and homeless individuals through our Managed Care Program and the Medi-Cal Transformation Project. In 2022, SCHC formed Shasta Supportive Services, a nonprofit focused on increasing access and resources in Shasta County for permanent supportive housing. Shasta Supportive Services purchased an eleven-unit apartment complex in partnership with Common Spirit and has been transitioning that complex into a permanent supportive housing complex. SCHC is an active member of our local COC Advisory Board, and we have been active participants for Coordinated Entry and HMIS for the last six years, including being a local access point for HMIS and participation in the weekly Coordinated Entry meetings.

If chosen for this project, SCHC will utilize the administrative dollars to hire a Partners II Analyst. Their role will be to make sure there are working agreements with each COC county to not only access the program, but also to ensure that case management is provided. Each county will be allotted a specific number of dollars and vouchers to utilize so that there is access to resources across the board.

SCHC will prepare a report to be reviewed monthly at the COC Executive Board Meeting to promote transparency of resource utilization as well as strengths and areas of strengthening of the program. SCHC will facilitate a monthly meeting with participating counties to review funds and voucher utilization. If a county has been unable to utilize their resources after a quarter, there will be a plan to reallocate resources to counties that have a wait list. Priority will always be given to the highest VI-SPADT (Vulnerability Index – Service Prioritization Decision Assistance Tool) score.

If SCHC is given a voucher for Partners II Housing Project through Coordinated Entry, the housing case management will be provided by the existing team that is delivering housing case management services.

- A. **Coordinated Entry Participation:** Shasta Community Health Center has been an active participant in our Shasta County Coordinated Entry process for the past six years. We have had as many as eight licenses for staff to enter data into coordinated entry and we are an access point for our county. We have been participating in the Coordinated Entry "Friday" meetings for over a year. Our housing project on Reservoir Lane utilizes Coordinated Entry for selection of tenants for that site. If chosen for the Partners II application, we will continue to utilize that system as an access point for all unsheltered or at-risk individuals in Shasta County and follow all guidelines for selection of applicable participants of the program.
- B. **SAM Registration:** We are currently registered with SAM and have been for several years because we are a Federally Qualified Health Center (FQHC) and receive federal funding. We will maintain active registration.
- C. **UEI Number Requirement:** Our UEI Number is WC6HND5TJPC4.

- D. Fair Housing Act: As a FQHC, we are held to federal standards for nondiscrimination. We have been working with Coordinated Entry to place individuals into qualified programs which also support nondiscrimination. We have been working with a local property manager to place individuals from Coordinated Entry into our Reservoir Lane Permanent Supportive Housing Project, this has all been in accordance with the Fair Housing Act. If awarded these funds, SCHC will create a Standard Operating Procedure (SOP) and training for all staff working with this project on the Fair Housing Act and associated regulations. We will also attend training courses as needed.
- E. **Housing First:** SCHC has been practicing in a Housing First framework with our Reservoir Lane property since 2022. We have demonstrated Housing First Principles with our Medical Respite program since 2020, where access to services is not dependent on an individual's participation in services, sobriety, or mental health care. We have participated in yearly trainings offered by our Shasta Advisory Board for our Continuum of Care on Housing First. We recently were awarded HHIP dollars from the City of Redding where we are going to invest in training for staff on Housing First principles. In addition to an ongoing training commitment, SCHC is committed to turning training into action. Please see a copy of our Housing First Guidelines in Exhibit A.
- F. Compliance with Violence Against Women Act (VAWA) Rule: The Violence Against Women Act (VAWA) provides crucial protections and resources for survivors of domestic violence, dating violence, sexual assault, and stalking. When implementing a housing program under VAWA, it's important to ensure compliance with its provisions to effectively support survivors.
 - If awarded these funds, SCHC will develop an SOP that will follow all aspects of the VAWA rule. Training will be provided on a yearly basis and the analyst assigned to the program will do a chart review quarterly for evidence of safety planning, collaboration with service providers, and confidentiality. As a health center, we are bound by HIPPA and 42 CFR, and we have demonstrated strong compliance and management in these areas that we will continue in this new role. Please see our copy of the VAWA Guidelines in Exhibit B.
- G. **Fair Market Rents (FMR):** The analyst assigned to the program will be responsible for working with all seven counties to ensure that Fair Market Rents are followed for all leased property.
- H. Affirmative Marketing and Outreach: Affirmative Marketing and Outreach are essential components of our housing program's commitment to promoting diversity, equity, and inclusion. These guidelines outline strategies to ensure that our program reaches and serves a diverse population, including traditionally underserved communities.
 - SCHC has been an active participant at the Shasta Advisory Board at our local Continuum of Care. If awarded these funds, we will continue to advertise availability at those meetings. SCHC will advertise on our social media platforms and continue to attend the Friday Coordinated Entry meeting to share program updates. We attend over forty community outreach events a year, and we will advertise the program at these events also. Please see a copy of our Affirmative Marketing and Outreach Guidelines in Exhibit C.
- I. Section 3 (The Housing and Urban Development Act of 1968 (12 U.S.C. 1701u)): Not applicable.
- J. Uniform Guidance 2 CFR Part 200: We currently have seven federal grants that we administer.

K. Leveraging Housing Resources: In 2021, Shasta Community Health Center began delivering Cal Aim services in partnership with our managed care plan. A component of that has been housing, transition, and navigation services where we provide intensive case management services to individuals who are unsheltered or at risk for homelessness. SCHC has a long history of advocating for equal access to safe and affordable housing. In 2022, we put that advocacy into action and worked in partnership with Common Spirit to purchase an eleven-unit apartment complex with the goal of slowly transitioning those units to permanent supportive housing units. We have leveraged funds from Shasta County HHSA to remodel those units, making two units ADA compliant. In May of 2024, we are adding housing deposits and housing sustaining services to our housing portfolio. By doing this, we believe we will be able to sustain our success in supporting our clients with getting and remaining housed.

Exhibit A

Shasta Community Health Center's Housing First Guidelines

Shasta Community Health Center (SCHC) follows Housing First Guidelines with all their Medi-Cal Transformation and HOPE Case Management programs. Any housing programs operated by SCHC follow Housing First Guidelines and are supervised by leadership that is trained in understanding the policy and practices of Housing First. SCHC acknowledges that housing is a basic human right and individuals do not need to be "housing ready" to receive housing and support services.

- Each individual that receives housing support will be aided using a client-centered approach that
 recognizes their individual needs, strengths, and barriers to be addressed. Clients will have
 access to case managers and care coordinators that support community collaboration and work
 continuously on housing stability and retention.
- To support this process, case management and care coordination staff will take training that supports motivational interviewing and client focused interactions. Staff will be supervised by leadership familiar with these practices.
- SCHC will pursue funding sources that support rapid re-housing dollars and collaborate with community providers who access these funds so that clients have access to all needed resources to support success.
- SCHC housing services and sites minimize eligibility requirements and barriers to accessing
 housing and support services. Sobriety and treatment requirements for mental health behaviors
 will not be used as a criterion for housing.
- SCHC housing programs and services will follow existing protocols and procedures regarding
 working with clients in a harm reduction focus. Staff will work with clients to reduce the negative
 consequences of substance use and high-risk behaviors, rather than requiring immediate
 abstinence.
- SCHC housing programs and services will follow existing protocols and procedures regarding
 working with clients in a trauma informed practice. Staff will work with clients to create a safe
 and supportive environment that promotes healing and empowerment.
- SCHC housing programs and services will follow existing protocols and procedures regarding
 ongoing evaluation and continuous improvement on all housing programs and housing sites.
 Improvement will be based on data collected and feedback from clients and stakeholders.
- SCHC housing programs and services will follow existing protocols and procedures regarding
 providing culturally competent services to all clients receiving housing services or placed at a
 SCHC housing site. Services will be responsive to the diverse needs of individuals experiencing
 homelessness.

Exhibit B

Shasta Community Health Center's Violence Against Women Act (VAWA) Guidelines

The Violence Against Women Act (VAWA) provides crucial protections and resources for survivors of domestic violence, dating violence, sexual assault, and stalking. As a Federally Qualified Health Center whose mission is to provide high quality health care to our community with compassion and understanding, we are committed to ensuring that survivors of domestic violence, dating violence, sexual assault and stalking have access to necessary protection and resources.

The following guidelines are followed by all SCHC staff members involved with case management, housing assistance, and housing placement.

- 1. Case managers and care coordinators that deliver housing and case management services will attend a yearly training to review the protection, rights, and obligations of housing providers under VAWA.
- 2. Yearly training will be provided to all applicable staff on the signs of domestic violence, dating violence, sexual assault, and stalking.
- 3. All SCHC employees that work with survivors of domestic violence, dating violence, and sexual assault, will respect the privacy of survivors and will not disclose their status as survivors without their explicit consent except as required by law. Any violation of confidentiality will be reported to our Compliance Department through existing protocols.
- 4. SCHC will follow all existing internal procedures on non-discrimination, including against patients who are survivors based on their status as survivors of domestic violence, dating violence, sexual assault, or stalking.
- 5. Any survivor placed in SCHC housing, working with case management, or in a program associated with Coordinated Entry who identifies that they need an emergency transfer plan will be prioritized and placed in an emergency shelter that business day. Permanent changes to housing will be created with client involvement. Plans created will prioritize survivor safety and may involve coordination with local law enforcement and other service providers.
- 6. All SCHC staff will follow existing documentation procedures and guidelines. For patients impacted by VAWA, staff will follow documentation requirements and procedures. Clients who are survivors of domestic violence, dating violence, sexual assault, or stalking will be given pamphlets outlining resources and their rights under the VAWA.
- 7. All SCHC staff who provide direct case management services to individuals will have access to internal and community resources for domestic violence, sexual assault, dating violence, and stalking. SCHC departmental leadership will review available resources on a bi-yearly basis and provide additional training as needed. All clinical staff are mandated reports of domestic violence, sexual assault, and dating violence. Non-clinical staff will seek guidance from their supervisors on any new reports of intimate partner violence and work with law enforcement as needed in a trauma-informed way.
- 8. SCHC staff providing case management services will follow existing procedures regarding creating safety plans. Safety plans will be created with feedback from the patient and based on available resources and the patient's willingness to engage in planning.
- 9. Safety plans for survivors will help them assess for risk and identify strategies for staying safe, including connection to resources, partnering with Law Enforcement, and/or moving.

- 10. SCHC will follow all existing procedures and policies regarding providing accessible services to survivors of violence who have disabilities so that equal access to housing and services is ensured.
- 11. All programs impacted by VAWA will be reviewed quarterly housing program polices and procedures to support ongoing compliance with VAWA requirements. Any deficiencies will be reported to senior leadership with a plan to address.

Exhibit C

Shasta Community Health Center's Affirmative Marketing and Outreach Guidelines

Affirmative Marketing and Outreach are essential components of our housing program's commitment to promoting diversity, equity, and inclusion. These guidelines outline strategies to ensure that our program reaches and serves a diverse population, including traditionally underserved communities.

Purpose: The purpose of Affirmative Marketing and Outreach is to:

- Promote equal access to housing opportunities for all individuals, regardless of race, color, national origin, religion, sex, disability, familial status, or other protected characteristics.
- Reach and engage with underserved and marginalized communities to ensure that they are aware of and have access to our housing program.
- Foster a welcoming and inclusive environment that respects and celebrates diversity.

Target Audience: Identify and prioritize target populations for outreach efforts, including but not limited to:

- Low-income individuals and families
- Racial and ethnic minorities
- LGBTQ+ individuals and families
- Persons with disabilities
- Veterans
- Survivors of domestic violence, dating violence, sexual assault, and stalking
- Older adults
- Youth aging out of foster care

Outreach Strategies: Implement a variety of outreach strategies to effectively reach the target audience, such as:

- Collaborating with local community organizations, social service agencies, faith-based groups, and cultural centers to disseminate information about our housing program.
- Hosting informational sessions, workshops, and community events to educate the public about housing opportunities and resources available through our program.
- Utilizing multilingual materials and language access services to ensure that information is accessible to individuals with limited English proficiency.
- Leveraging digital platforms, including social media, websites, and email newsletters, to communicate with and engage prospective applicants.
- Participating in outreach activities at community fairs, health fairs, job fairs, and other public events to connect with individuals who may benefit from our housing program.

Culturally Competent Communication: Ensure that all outreach materials and communications are culturally competent and sensitive to the needs of diverse populations. This includes:

- Using inclusive language and imagery that reflects the diversity of our community.
- Respecting cultural norms and preferences regarding communication methods and content.

• Providing information in formats that are accessible to individuals with disabilities, such as large print, braille, and audio formats.

Tracking and Evaluation: Regularly track and evaluate the effectiveness of our outreach efforts to assess their impact and identify areas for improvement. This includes:

- Monitoring outreach activities and tracking metrics such as attendance at events, website traffic, and engagement on social media.
- Soliciting feedback from community members and stakeholders to gauge the relevance and accessibility of our outreach efforts.
- Adjusting our strategies and messaging based on feedback and data analysis to better meet the needs of our target audience.

Conclusion: Affirmative Marketing and Outreach are integral to our housing program's mission of promoting fair housing and advancing equity and inclusion. By implementing these guidelines, we can effectively reach and serve a diverse population and ensure that everyone has equal access to safe, affordable housing opportunities.

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	No. of Hours	No.	Total number	
Attachment, 5/16/24 NorCal CoC Meeting Agenda Item	Each	occurences	of hours per	Estimated
DRAFT NorCal CoC PIT Administration Roles & Responsibilities, Proposed Annual Budget beginning 8/1/24	occurrence	per year	year	cost per hour
Responsibilities are year round, less hours for some periods of time after the PIT & HIC are provided to HUD, begin ramp				
up by August.				
PIT Administration				
Facilitate the administration of an annual Sheltered and Unsheltered Point-In-Time Count (PIT) and Housing Inventory				
1 Count (HIC) of homeless persons with the PIT Committee and Advisory Boards. Works with each county's PIT/HIC				
coordinator. Assists with securing donations for participants.	20	6	120	
2 Learns, implements and complies with HUD requirements	2	6	12	
3 Coordinates with all Advisory Boards and PIT Committee to draft and finalizes the PIT survey	3	3	9	
4 Update as needed, complies with and implements the PIT methodology	3	1	3	
5 Work with UWNC HMIS Administrator to finalize PIT and HIC data/reports	6	1	6	
6 Prepares Annual NorCal CoC PIT Report	12	1	12	
7 Serves as the System Administrator of the CountingUs mobile PIT App, trouble shooting issues	8	6	48	
8 Coordinates with City of Redding, Admin Entity to purchase CountingUs mobile App annually	2	2	4	
9 Coordinates and provides training of use of CountingUs	6	6	36	
10 Develop strategies to increase coverage areas for unsheltered count	3	1	3	
Other responsibilities, including PIT Committee				
Chair and facilitate NorCal CoC PIT Committee meetings with published agendas. Provide access to participate remotely in				
PIT Committee hosted meetings (10 hours per mtg prep, attendance, minutes & posting)	10	8	80	
Provides reports and periodically attends and reports to each County CoC Advisory Board meetings. Liaison between PIT				
12 Committee, all CoC Advisory Boards and Executive Board	2	21	42	
13 Help build community awareness inclusive of the needs of all homeless populations marketing?	2	4	8	
	4	1	4	
14 Participate in annual gap analysis (Last completed May 2023)	4	1	4	
SUBTOTAL	83		387	\$ -
Other Admin costs				\$ -
Total costs				Ś
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Homeless Housing, Assistance and Prevention Program-Round 4 Notice of Funding Availability Application

Introduction

The California Interagency Council on Homelessness (Cal ICH) announced the availability of Homeless Housing, Assistance and Prevention (HHAP) Program Round 4 grant funding. HHAP-4 is a \$1 billion grant program authorized by AB 140 (Chapter 111, Statutes of 2021; Health & Safety Code (HSC) § 50216, et seq.), which was signed into law by Governor Gavin Newsom on July 19, 2021. HHAP-4 is established for the purpose of organizing and deploying the full array of homelessness programs and resources comprehensively and effectively, and to sustain existing federal, state, and local investments towards long-term sustainability of housing and supportive services. As an eligible applicant for HHAP-4 funds, the NorCal Continuum of Care (CoC) is seeking project applications through this Notice of Funding Availability (NOFA) Process.

Funding Available

The NorCal CoC region serves Del Norte, Lassen, Modoc, Plumas, Shasta, Sierra, and Siskiyou Counties. This solicitation is for entities interested in offering program services under this funding opportunity within these Counties. Applicants may be public or nonprofit agencies that provide services to prevent, reduce, and end homelessness, and are active members of the NorCal CoC.

Counties	% of 2022 PIT	Total Allocation	50% of Allocation
Del Norte	25.15%	\$526,033.31	\$263,016.65
Lassen	5.55%	\$116,137.23	\$58,068.615
Modoc	0.65%	\$13,663.20	\$6,831.60
Plumas	7.13%	\$149,156.63	\$74,578.315
Shasta	43.44%	\$908,603.00	\$454,301.50
Sierra	0.60%	\$12,524.60	\$6,262.30
Siskiyou	17.47%	\$365,490.68	\$182,745.33
Total CoC	100%	\$2,091,608.66	\$1,045,804.33

Coordination of proposed projects within the local County jurisdiction is encouraged. There is no matching contribution requirement for activities. Providers / agencies selected to receive funding will be required to enter in a funding agreement and expend the initial 50% of the award by May 31,2025. If awarded the remaining 50% of the base allocation by Cal ICH, this funding must be expended by June 30, 2027.

Explanation of Allocation: The total allocation is what the CoC is eligible to receive after the 7% admin and joint project are taken out. However only 50% will be initially dispersed by Cal ICH. Receiving the remaining 50% will be contingent on adequate spend down of the funds by May 31, 2025. The CoC must submit a funding plan for the entire base allocation, but seeks to reiterate that only 50% of these funds will initially be available and should consider this timeline when completing funding plans.

Eligible Activities

Delivery of Permanent Housing

- Rapid Rehousing
- Prevention and Shelter Diversion
- Operating Subsidies Permanent housing
- Operation Subsidies Interim Housing
- Improvement to Existing Interim Housing
- Street Outreach
- Systems Support

For further explanation of eligible use categories and examples, see attachment A.

Application Process and Instructions

The HHAP Round-4 application was filed by December 11, 2022 by the previous Lead Agency for the NorCal CoC, Shasta County Housing and Community Action Agency. Determinations for these applications will be reached through this Request for Funds Process. Additionally:

- Questions may be submitted via email to <u>norcalcoc@cityofredding.org</u>.
- All applicants must submit one (1) electronic copy of Attachment 1: Request for Funds via email to norcalcoc@cityofredding.org by the specified deadline.
- A reference of the Rating and Ranking criteria is outlined in Attachment B

Timeline

Topic	Deadline
Release of Notice of Funding Availability	TBD
Notice of Funding Availability (Exhibit C) due from applicants	TBD
Rating and Ranking	TBD

Resources/Additional Information

Enabling Statute: <u>Bill Text - AB-140 Housing. (ca.gov)</u>

Cal ICH HHAP Grant Program Homepage: https://www.bcsh.ca.gov/calich/hhap program.html

NorCal CoC Webpage: NorCal Continuum Of Care (cityofredding.gov)

Exhibit A

HHAP Eligible Use Category	Explanation and Examples
Delivery of permanent housing and innovative housing solutions	Eligible Uses should be categorized here when costs support the provision of permanent housing Examples: Acquisition of land, building, etc. Improvement or renovation of land or building being used as permanent housing. Maintenance of land or building being used as permanent housing. Services for people in permanent housing programs, so long as the services are trauma-informed and practice harm reduction, to include intensive case management services, assertive community treatment services, critical time intervention services, other tenancy support services, evidence-based employment services, coordinating mental health, substance use, and primary care treatment, or other evidence-based supportive services to increase housing retention.
Rapid Rehousing	 Eligible Uses should be categorized here when the costs support operating rapid rehousing type housing service. This means a tenant-based, time limited, permanent housing program, inclusive of wrap-around services. Examples: Rental subsidies, including to support placement of individuals in CARE Court. Landlord incentives, such as security deposits, holding fees, funding for needed repairs, and recruitment and relationship management costs. Move-in expenses. Services for people in rapid rehousing programs, so long as the services are trauma-informed and practice harm reduction, to include intensive case management services, assertive community treatment services, critical time intervention services, other tenancy support services, evidence-based employment services, coordinating mental health, substance use, and primary care treatment, or other evidence-based supportive services to increase housing retention.
Prevention and shelter diversion	 Eligible Uses should be categorized here when costs support eligible populations access safe alternatives to shelter and/or remain safely housed at their current residence. Examples: Homelessness prevention through rental assistance, rapid rehousing, and other programs. Problem-solving and diversion support programs that prevent people at risk of or recently experiencing homelessness from entering unsheltered or sheltered homelessness.
Operating Subsidies Permanent Housing	Eligible Uses should be categorized here when costs support operations in new and existing affordable or supportive housing units serving people experiencing homelessness. Operating subsidies may include operating reserves (funds held in reserve to cover large, unexpected operating expenses). Examples: Operating costs for programs such as Home key. Operating costs for new or existing residential care facilities, funded by the Behavioral Health Continuum Infrastructure Program or the Community Care Expansion

	 Program. Property tax abatements for both affordable ownership and rental properties that have a similar effect, helping to defray the costs of operating the development so residents can pay lower rents. Subsidies support ongoing operation and availability of permanent housing and/or assisting in management of a building's facilities that can help stabilize or reduce structural decline and serve an important role in broader market stabilization efforts.
Interim Housing	 Eligible Uses should be categorized here when costs support the provision of interim housing. Examples: Acquisition of land, building, etc. Improvement or renovation of land or building being used as interim housing. Maintenance of land or building being used as interim housing. Navigation centers that are low barrier, as defined in Sections 65660 and 65662 of the Government Code. Motel or hotel vouchers. Services provided to people in interim housing, to include trauma-informed and evidence-based intensive case management services, housing navigation, connecting people to substance use or mental health treatment, public benefits advocacy, and other supportive services to promote stability and referral into permanent housing. Youth-focused services in interim housing. Capital funding to build new non-congregate interim housing sites, including for construction, rehabilitation, and capital improvements to convert existing buildings to interim housing.
Improvements to Existing Interim Housing	Eligible Uses should be categorized here when costs support renovation of existing interim housing to improve the quality of the life for people experiencing homelessness who are residing in the interim housing. Examples: Maintenance of an interim housing facility. Minor/major rehabilitation or renovation of an interim housing facility. Minor/major conversion, additions, updates, and/or enhancements that lower barriers and/or increase privacy.
Systems Support	Eligible Uses should be categorized here when the cost supports homelessness services system infrastructure, regional coordination, and/or improves accessibility and outcomes generally, as opposed to specific client(s). Examples: Incorporate regional data into housing needs. Assessments or developing a regional needs assessment. Collaborate on regional housing strategies. Pooling resources to support regional housing initiatives.

Exhibit B Rating and Ranking Criteria

	Component	Explanation	Maximum Points
1	Experience	Applicant has experience in effectively utilizing federal, state, and local funds.	10
		Organization has experience in providing services or utilizing funding with the goal of preventing, reducing, or ending homelessness for their proposed population, and achieving measurable outcomes for their populations.	
2	Organizational Capacity	Applicant has the capacity and readiness to deliver the proposed project.	15
		Applicant has experience with housing program requirements, including but not limited to HMIS data entry, coordinated entry, and housing first principles.	
3	Program Design	Provide an overview of the proposed program activities. Including but not limited to: The target population; Understanding of program requirements The gaps the project will address and the intended outcomes; Planned partnerships; Description of evidence or historical data supporting the efficacy of the proposed program and Plan for implementation	20
4	Impact and Effectiveness	Project serves the goals and priorities outlined in the Local Homeless Action Plan and clearly articulates the intended outcomes of the project on the community and populations of interest. Include plan for measuring and evaluating the project to determine if it is achieving its goals. Describes a robust plan for measuring and reporting those outcomes through the duration of the project and how it will create a population level impact. The project describes planned partnerships or leveraging funds that will maximum the outcomes. Plan for measuring and evaluating the project to determine if it is achieving its goals.	20
5	Funding Plan	Provides detail how organization plans to use the full amount of HHAP funds requested (including youth setaside), what activities the funds will support, how it will complement existing funds. Plan for measuring and evaluating how funds were used to determine if project is achieving its goals	15

6	Equity	Actions that your organization will take to ensure racial and gender equity in service delivery, housing placements, and housing retention and changes to procurement or other means of affirming racial and ethnic groups that are overrepresented among residents experiencing homelessness have equitable access to housing and services. Additional actions that your organization will take to serve those with mental and behavioral health issues and criminal justice involvement.	10
7	System Improvements	Specific and quantifiable system improvements or strategies organization will take to improve the number of people experience homelessness upon exiting institutional settings (examples: jail/prison, behavioral health facilities, foster care). Connecting people experiencing homelessness to all eligible benefit programs. Additional system improvements, if applicable.	10
		Total Points	100

Exhibit C: Notice of Funding Availability Questionnaire Homeless Housing, Assistance and Prevention Program- Round 4

Legal Name of Applicant Or	ganization:		
Contact Name:	Phone:	Fax:	Email:
Agency UEI Number	County:	Agency Tax ID Number:	Total amount of requested funds:
local funds. Describe your o	organization's experientling homelessness for a	ice in providing services or ut	tively utilizing federal, state or tilizing funding with the goal of ation, and achieving measurable
including but not limited to,	an explanation of the		pacity to deliver the project, sources that will be leveraged, and mplementation of housing first

3) Program Design: Provide an overview of the proposed program activities. Including but not limited to:
• The target population;
Understanding of program requirements
The gaps the project will address and the intended outcomes;
 Planned partnerships;
 Description of evidence or historical data supporting the efficacy of the proposed program and
 Plan for implementation
4) Impact and Effectiveness: Describe the goals and outlined in the Local Homeless Action Plan and clearly articulate the intended outcomes of the project on the community and populations of interest. Include plan for measuring and evaluating the project to determine if it is achieving its goals. Describes a robust plan for measuring and reporting those outcomes through the duration of the project and how it will create a population level impact. The project describes planned partnerships or leveraging funds that will maximum the outcomes
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5.a) Funding Plans: Budget Table. Complete the table below with the requested funding, and the cuse categories. Note: Identify what percentage of funds will be utilized toward youth set aside	
Eligible Use Category	Amount
Delivery of Permanent Housing	\$
Delivery of Permanent Housing - Youth	\$
Rapid Rehousing	\$
Rapid Rehousing - Youth	\$
Prevention and Shelter Diversion	\$
Prevention and Shelter Diversion - Youth	\$
Operating Subsidies – Permanent housing	\$
Operating Subsidies – Permanent housing – Youth	\$
Operation Subsidies – Interim Housing	\$
Operation Subsidies – Interim Housing - Youth	\$
Improvement to Existing Interim Housing Improvement to Existing Interim Housing - Youth	\$ \$
Street Outreach	\$ \$
Street Outreach - Youth	\$
Systems Support	\$ \$
Systems Support - Youth	\$
Total	\$
HHAP funds requested (including youth set-aside), what activities the funds will support, how it vexisting funds. Plan for measuring and evaluating how funds were used to determine if project is achieving its go	·

6) Equity: Describe specific actions that your organization will take to ensure racial and gender equity in service
delivery, housing placements, and housing retention and changes to procurement or other means of affirming
racial and ethnic groups that are overrepresented among residents experiencing homelessness have equitable
access to housing and services. Also describe any additional actions that your organization will take to serve
those with mental and behavioral health issues and criminal justice involvement.
7) System Improvements: Describe any specific and quantifiable system improvements or strategies that your
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organization will take to improve:
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Select check boxes below to	certify that	if selected for fu	inding, the agency	s willing to comply with:	
☐Homeless Manage Inform	mation Syst	em (HMIS) data	raguiraments		
☐Compliance with grant to	•	` ′	•	of Funding Availability	
☐Enter into a contract with				•	
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Title					
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For Lead Agency Use Only:	Receive	d by Deadline	Yes / No	Project Funded	Yes / No



May 5, 2024

Dear Governor's Office of Planning & Research:

As the Executive Board Chair of the NorCal Continuum of Care, a program operated by the City of Redding, I would like to offer this letter of support for Plumas Crisis Intervention & Resource Center's application for the Extreme Heat & Community Resilience Program.

I have had the pleasure of working with this agency for several years and find their many services and programs designed to meet the unique needs of rural homeless individuals and families to be outstanding. Their drive to address service gaps and the unmet needs of their county has positioned them as leaders and gamechangers in rural housing development and services. PCIRC has been involved in Continuum of Care work since 2008 and brings a long history to share with partners at our table.

NorCal Continuum of Care covers a seven-county region in Northern California. The Director of Operations of PCIRC sits on the Executive Board of NorCal CoC both regionally and locally through the Plumas-Sierra Continuum of Care.

The development of the North Star Navigation Center and Ohana Village will serve as a model rural program for replication in other rural counties in the State of California.

I am available to answer any questions you may have regarding this partner.

Sincerely,

Kristen Schreder

kristen@kristenschreder.com

NorCal CoC Executive Board Chair