South Bay Coalition to End Homelessness (SBCEH) General Meeting Minutes

Wednesday, June 17, 9:30 am – 11:30 am
Behavioral Health Services (BHS) Training Center
15519 Crenshaw Blvd, Gardena, CA

Attendees: Guest Speakers: Christopher Castillo, Laura James (211); Hosting Agency: Elaine Ruggiero, Yadira Dvran, Raundeu Frank, Michael Harve, Holly Maynes, Co-Chair Nancy Wilcox, Evette Benjamin (City of Gardena), Dan Bradford (Harbor Rock Recovery), Cheryl Castillo (Alliance for Housing and Healing (AHH)), Tracey Duncan (City of Inglewood), Elizabeth Eastlund (Rainbow), Cinder Eller-Kimbell (City of Inglewood), Mary Agnes Erlandson (St. Margaret’s Center), Nyscelle Garcia (Safe Families for Children), Marie Gambon (DPH), Fatima Gardezi (The Children’s Clinic), Latasha Gooch (Divinity Prophet), Tahia Hayslet (Harbor Interfaith Services (HIS)), Julie Han (CSH), Ellen Hong (Center for the Pacific Asian Family), Marcus Hong (All Care One Community Health Clinic), Stephanie Inyama (LAHSA), Roberto Lum (CTHC), Peter Min (Love INC), Nick Rasmussen (Family Promise), Ana Reoyo (DPSS), Jeremy Sidell (PATH), Paul Stansbury (NAMI), Jimmie Simpson (Toberman), Shari Weaver (HIS), Cathy Williamson (DMH), Nancy Wolf (US Vets).

1. Welcome and Introductions. Nancy Wilcox opened the meeting at 9:42 am and everyone introduced themselves.

2. Host Agency Overview. Elaine Ruggiero explained Behavioral Health Services (BHS) has been in operation for 40 years, providing drug and alcohol detox out-service and in-services. It recently opened its Family Health Center in Hawthorne. This center offers the following services: primary care services for the treatment of diabetes, hypertension, cholesterol, flu/cold, cardiovascular disease, pap smears, birth control, breast exams, STD/HIV, pregnancy testing and counseling services for family planning. The clinic also provides pediatric services for vaccinations/immunizations, sick/well child checkups, and sports physicals.

3. Minutes Review and Approval. The approval of the May 2015 minutes was tabled until the July meeting.

4. Featured Speakers: Laura James and Christopher Castillo gave an overview of the “211” program (their briefing is attached – these notes provide a supplement for additional comments made during their presentation). They played a portion of an actual 211 call to demonstrate how the public interacts with their service.

a. They welcome comments and and questions. Please contact them directly at:

   • Laura James, Resource Supervisor, ljames@211LA.org, 626-1326
   • Christopher Castillo, Housing Coordinator, ccastillo@211LA.org, 626-350-1841 x2122
b. “211” is a 24 hours/7 days a week referral service, that is “crisis-centered.” It provides assistance in English, Spanish, with 60% of its staff being bilingual.

c. When clients call this service, through dialog the operators assess the caller’s two most urgent needs and then make regional referrals for services that can help. If the caller has access to the Internet, these referrals are sent via email so he/she has direct links to them; otherwise, it is given verbally over the phone.

d. For families experiencing homelessness, they inquire about the general nature of why they are homeless and if they have any income. A “warm transfer” is then made to the regional Family Solutions Center (i.e., Homeless Family Solutions System lead agency). 211 is able to provide transportation to services and also has access to motel vouchers for families with minor children when this is the recommended intervention.
   i. Its screening criteria include: families with minors or someone who is pregnant; currently homeless or will be in the next 14 days; and whether the family is in crisis.
   ii. It used to look at the assessment screening of the family in HMIS, but that is no longer being done.

e. A demonstration of how to search for resources online was given.
   i. It is best to use a two-stage search: first by keywords, not sentences; once a resultant list comes up then search by zip code to narrow the responses.
   ii. The underlying key word match uses a formal taxonomy, but they have implemented more common use words (e.g., “congregate meal” is the formal listing that would match “meals for seniors”). Another example is “food with pantry.”

f. These are the responses to questions asked:
   i. The average wait time to connect with an operator is 2 minutes.
   ii. Advocates in an agency (like DPSS) are allowed to contact 211 and assist clients on their behalf.
   iii. The funding for motel vouchers has been spent down for the fiscal year.
   iv. 211 is regional, i.e., throughout LA County. There are other 211 services for other counties.
   v. More South Bay area resources are needed to address the needs of our homeless neighbors.
   vi. The 211 database has 50,000 services with 4,400 agencies. There is an online form for agencies to update the information they provide; it is located under the “Service Provider” option and is password protected. It takes 2-3 weeks for these changes to be reflected in 211 referrals.
5. **Coordinating Council (CC) Report-Back.** Tahia Hayslet and Elizabeth Eastlund gave a report from the June Los Angeles Homeless Service Authority’s (LAHSA) meeting (their report is attached).

   a. There was a discussion about the “relocation policy” (second bullet on their handout) because the SPA 8 agency affected by this policy change was not identified at LAHSA’s Coordinating Council meeting. Cheryl Castillo of the Alliance for Housing and Health said she thought it was her agency, but they have not been formally notified by LAHSA.

   b. When the nomination form for the homeless representative to the CC is finalized, it will be distributed to the community.

   c. The community planning that LAHSA is spearheading is for everyone, not just those who receive funding from LAHSA. Please review the attached overview (#4 on this handout); we will discuss it in August at the next LAHSA quarterly meeting.

6. **Committee Reports**

   a. **Advocacy:** Committee Chair Paul Stansbury said our Coalition is advocating for the common interests of all our members, not for one particular area. Thus, an individual agency may advocate for a certain ordinance or piece of legislation that may not reflect the boarder values of the Coalition. He is looking at changing the week this committee meets. If you have interest in joining this group, please contact him at PStans5@aol.com.

   b. **Governance**: Ad hoc Committee Chair Mary Agnes Erlandson reported back on the meeting held on June 5th (see attached notes). She was asked to enumerate the expectations of those who serve on the Board. Those interested in joining this committee can contact her at MAERLANDSON@ccharities.org.

7. **Member Agency Announcements.** The following announcements were made:

   a. Cheryl Castillo of Alliance for Housing and Healing announced an 18-unit permanent supportive housing program in Long Beach. People with HIV/AIDS have priority but chronically homeless individuals can also live there with have a VI-SPDAT acuity of “3 or 4” and who are referred through the Coordinated Entry System.

   b. Mary Agnes Erlandson of St. Margaret’s Center announced the Lennox Family Festival being held on June 26th, where 43 agencies would be providing services

The meeting was adjourned at 11:35 am.

Respectfully submitted by Nancy Wilcox.
2-1-1: A Social Utility For All
People are in need of services but don’t always know what help is available. They feel alone, hopeless and unable to navigate an intimidating County system.

Fortunately, help is just one phone call away.

211 LA County, a 501c3 non-profit agency, answers 500,000 calls annually.
Who We Serve

**Gender**
- 83.7% Female
- 16.3% Male

**Language**
- English
- Spanish
- Mandarin
- Korean
- Arabic
- Armenian
- Cantonese
- Vietnamese
- Tagalog
- Farsi

**Caller Experience**
- 97% of callers were satisfied with the services received when calling 211 LA
- 96% would call 211 LA County again if they needed additional help
- 98% would recommend 211 LA County to others who may need assistance

"211 is a blessing."
- Cynthia, helped by 211

**Demographics**
- 76,000 Families w/ children 0–5 years old
- 17,000 Pregnant women
- 12,500 Veterans
HOW IT WORKS

I can’t pay my rent.
My child is on drugs.
I need food.
I need to find childcare.
I need a place to sleep.

211, yes how may I help you?

Yes, I can connect you with someone who can help.

RENTAL ASSISTANCE PROGRAM
DRUG REHAB CENTER
FOOD BANK
CHILDCARE RESOURCE AND REFERRAL
VOLUNTEER CENTER
Assessment and Active Listening

Open and encouraging questions to understand nature or intent

“Tell me a little bit more about your situation”

Reflection
Empathy
Support

“It sounds like you have been trying very hard to cope with this. I’m glad you called us today”
Actual Shelter Call
Homeless Family Solutions System (HFSS) is a **seamless, cooperative** system of service deliver for homeless and at-risk families throughout Los Angeles County.
Los Angeles Homeless Services Authority

A joint powers authority of the City and County of Los Angeles for the coordination of homeless services in collaboration with other governmental agencies

Provides funding to coordinate assessment for families, rapid re-housing, and crisis housing for the HFSS program
Los Angeles County Department of Social Services

Provides services to the community through a variety of Federal, State, and County funded programs intended to alleviate hardship, promote health, personal responsibility, and economic independence.

Housing Case Managers (HCMs) are co-located within each FSC site to provide families with immediate access to DPSS programs such as Emergency Shelter Services (120), Rental Assistance (RA), Housing Relocation(HR), Permanent Housing (HA), and Emergency Assistance to Prevent Eviction (EAPE).
211 Role in the HFSS

Monday through Sunday from 8am – 10pm

**Warm Transfer** families who meet the basic eligibility criteria to the closest FSC site within their community of origin.
211 Role in the HFSS

Monday through Sunday from 10pm – 8am

Assist families in **dire need** of emergency housing through the use of motel voucher (if available) assistance and referral to the closest FSC site to their community of origin.
Family Solutions Centers (FSCs)

Provide services to homeless families or at-risk homeless families in each service planning area (SPA)

Family Response Teams (FRT) Staff to screen and triage families to most appropriate housing intervention.
Resource Database Contains Almost 50,000 Services/Programs
Finding Resources is EASY!

WELCOME TO THE NEW 211 LA COUNTY WEBSITE!

FIND RESOURCES NOW

SEARCH LA COUNTY
Keyword
Zip Code
SEARCH

GUIDED SEARCH
Housing
Seniors & Older Adults
Food
Clothing & Hygiene
2-1-1 Your One-Stop Resource

- Free and Confidential
- 24 Hours / 7 Days a Week
- Multi-lingual Services
- Hearing Impaired Accessible
- On-line Resource Database
- www.211LA.org
Laura James – Resource Supervisor
ljames@211LA.org
(626) 300-1326

Christopher Castillo – Housing Coordinator
ccastillo@211LA.org
(626)350-1841 ext 2122

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WWW.211LA.ORG
South Bay Coalition to End Homelessness
General Meeting~ Wednesday, June 17, 2015
Coordinating Council update:

The Los Angeles Homeless Services Authority Coordinating Council met on Wednesday June 9th.

Discussion items included:

- Update of the 2015 Continuum of Care Program Competition specifically added language that funds will remain in the most closely related available funding option. See attached handout #1

- Creation of a policy on eligible location of housing and services for continuum of care funds. LAHSA received a directive from HUD- Housing and Urban Development that requires LAHSA to use their COC funding for Los Angeles ONLY. There were 3 agencies of which 1 is in the City of Long Beach with 12 units. "Agencies have until December 31, 2015 to relocate their program" - it was discussed that the language will reflect Dec 31 to have a plan in place to relocate? Agencies have until December 31, 2015 to relocate their program to the City of Los Angeles to be considered for future funding.- See attached draft memo that will be updated to reflect some added language about LAHSA providing Technical assistance to ensure the agencies affected by this policy have support with the relocation of their services to the City of Los Angeles.- See Attached handout # 2

- The Coordinating Council approved the Homeless or Formerly Homeless Representative Nomination form. LAHSA staff to update the form to include the suggested changes. the form will be released shortly.- See attached handout #3

- LAHSA created a Community Planning for Homeless Toolkit (handout # 4). This is a guideline LAHSA hopes to follow to engage the community in a collaborative effort to reduce and end homelessness within Los Angeles. The handout covers the framework, planning instrument, components, planning goals and outcomes and capacity building strategies. Please review and forward any feedback or questions you may have. LAHSA staff will join us on August 19th for a full discussion.

- Finally, there has been much discussion about the homeless numbers. Detailed information to be released by the end of June 2015.

- Save the date: Homeless Count 2016 will take place the week of January 25th, with SPA 8 on January 27th
General:
As the Continuum of Care (CoC) lead agency, LAHSA annually submits the CoC Program application to the US Department of Housing and Urban Development (HUD) on the behalf of the Los Angeles Continuum of Care. In recent years, HUD has created an opportunity for CoCs to apply for new project funding by partially or fully reallocating funds that were previously allocated to renew exist grants within the CoC. Reallocation presents an opportunity for CoCs to move funding from projects that are underutilized, not cost effective, underperforming, or obsolete to create new permanent housing projects.

Procedure:
The Continuum of Care has established the following reallocation policies in the 2015 Continuum of Care Program Competition:

1) Recapture CoC Grant funds from former Supportive Housing Program grants, including Supportive Service Only, Transitional Housing Programs and Permanent Supportive Housing Programs from grants that demonstrate at least three years of underspending of at least 5% of the total annual grant amount, based on lowest amount of underspent funds incurred over the three year period and make such amounts available under reallocation for new permanent supportive housing projects in the 2015 CoC Program Application.

2) Recapture CoC Grant funds from former Shelter Plus Care Program Grants based on Public Housing Authorities identifying funds for reallocation and make such amounts available for new permanent supportive housing projects in the 2015 CoC Program Application.

3) Establish Cost Effectiveness Thresholds for CoC Program Transitional Housing:
   a. Single Adults: $20,000/permanent housing outcome*
   b. Families: $30,000/permanent housing outcome*

   For FY 2015, reallocate CoC Grant funds from Transitional Housing Projects where the 3-year aggregate cost effectiveness exceeds the threshold by more than 33% ($26,700 and $40,000, respectively) and make such amounts available for new rapid re-housing projects for homeless families and transition age youth. LAHSA and the LA CoC will coordinate technical assistance for projects that are near and exceeding the cost effectiveness thresholds that are not reallocated in the FY2015 application.

4) Funds being voluntarily relinquished will remain in the most closely related available funding option.
Policy on Eligible Location of Housing and Services for Continuum of Care Funds

Submitted By: Policy and Planning Department

Approved by Commission on:
Approved by Policy and Planning Committee on:
Approved by Los Angeles Continuum of Care Coordinating Council on:
Date Policy introduced:

Continuum of Care Program Policies

General:
As the Continuum of Care (CoC) Collaborative Applicant, LAHSA annually submits the CoC Program application to the US Department of Housing and Urban Development (HUD) on behalf of the Los Angeles Continuum of Care. There are three additional continuia in the County of Los Angeles – Pasadena, Glendale, and Long Beach. Currently providers may request, and be awarded, funding from multiple continuia to address the needs of their homeless population. This policy is to clearly delineate what is required as a recipient of Los Angeles Continuum of Care funding.

The Los Angeles Continuum of Care established the following policies for applications beginning with the 2015 Continuum of Care Program Competition:

1) Los Angeles Continuum of Care Program funding is to be used for Los Angeles Continuum of Care homeless residents.
   a. Homeless is defined using the Housing and Urban Development (HUD) definition for the Continuum of Care Program Funds.
   b. Los Angeles Continuum of Care is defined by HUD as the County of Los Angeles except for the cities of Pasadena, Long Beach, and Glendale.

2) Housing and supportive services must be provided within the Los Angeles CoC (Los Angeles County, excluding the other continua’s in the cities of Glendale, Lone Beach and Pasadena). The only limited exception is for Domestic Violence programs providing Tenant Based-Rental Assistance and must meet the requirements of the CoC Interim Rules §578.51 (c)(3):

   "(3) Program participants who have complied with all program requirements during their residence and who have been a victim of domestic violence, dating violence, sexual assault, or stalking, and who reasonably believe they are imminently threatened by harm from further domestic violence, dating violence, sexual assault, or stalking (which would include threats from a third party, such as a friend or family member of the perpetrator of the violence), if they remain in the assisted unit, and are able to document the violence and basis for their belief, may retain the rental assistance and move to a different Continuum of Care geographic area if they move out of the assisted unit to protect their health and safety."

3) Current Continuum of Care Program subrecipients are to come into compliance with the above policy by December 31, 2015.

4) Failure to comply with this policy shall result in funds being reallocated as part of the Continuum of Care Program Reallocation process and CoC Competition.
The Los Angeles Homeless Continuum of Care Coordinating Council
Homeless or formerly Homeless Representative Nomination Form

The Los Angeles Homeless Continuum of Care (CoC) Coordinating Council was established by the Los Angeles Homeless Services Authority in 2009 to enhance and empower local community participation in the grant process for McKinney Vento Homeless Assistance Act funding throughout the Los Angeles CoC. Prior to the establishment of the Coordinating Council, the McKinney Vento award process was overseen by Housing Authorities and the Los Angeles Homeless Services Authority with limited community participation and input.

The Council recognizes the importance of valuable input from homeless or formerly homeless individuals. Please nominate an individual that will be able to represent the perspective of homeless persons; and who is able to cognitively and constructively participate in Council discussions and decision making.

I would like to nominate the person below to be a member of the 2015-2016 Los Angeles Homeless Continuum of Care Coordinating Council. S/he will best represent the interest of the following group (select all that apply).

_____ Youth  _____ Chronic/Adult Homelessness  _____ Homeless Families  _____ Domestic Violence  _____ Veterans

Nominee First and Last Name: ________________________________

Current Residence:  _____ Emergency Shelter  _____ Transitional Housing  _____ Permanent Housing

Address: ____________________________________________  City: __________________ Zip: __________________

Phone Number: _____________________________________  Email Address: ____________________________

Please explain the reason why you feel this nominee would be a good representative on the Council

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

Print your name: __________________________________________  Organization: __________________________

Signature: ____________________________________________  Date: _________________________________

Thank you for taking the time to complete this Nomination Form
Los Angeles County Continuum of Care (LA CoC)

Los Angeles Homeless Services Authority is the lead agency for the Los Angeles Continuum of Care.

Los Angeles Homeless Services Authority’s community planning process is in partnership with agencies countywide to reduce and end homelessness within the Los Angeles Continuum of Care. This collaboration will provide the continuum with SPA specific technical assistance in coordinating strategic planning efforts, maximizing and leveraging resources, and developing capacity building strategies to prevent and end homelessness.

Background: LA CoC is a regional planning body that coordinates housing and services funding for homeless families and individuals. To ensure effective planning and implementation, the County is divided into eight (8) geographic areas designated as Service Planning Areas (SPA). While the dedicated efforts of local service providers have contributed to housing thousands of our homeless neighbors, the 2015 Greater Los Angeles Homeless Count reported a 12% increase in the Los Angeles Continuum of Care homeless population. To coordinate and bolster the various initiatives to end homelessness in the Greater Los Angeles, LAHSA has partnered with Technical Assistance Providers (TAP) countywide to create eight (8) TAP Leadership Teams for each SPA to ensure that key communities are supported and encouraged in developing strategic plans, capacity building strategies, system performance measures and outcomes and community ownership. The LA CoC TAP Leadership Team consists of:

LAHSA, Abt Associates, CSH, Community Solutions, and United Way

LA CoC TAP Leadership Framework:
Members of the TAP Team will have assigned roles for coordinating technical assistance services in each SPA. The project manager will be responsible for guiding the TAP Team in its work with local leaders and stakeholders from its inception to execution.

➢ Project Manager
➢ Coordinated Entry System
➢ Family Services
➢ Supportive Services
➢ Transitional Age Youth
➢ Community Engagement

Community Planning Process Instrument:
The Community Toolkit provides an overall framework for the planning process that facilitates and guides communities within the CoC through the five major community planning components; recruitment and stakeholder engagement; regional and countywide assessment; community planning; implementation; and evaluation. LAHSA staff will ensure that each component is completed through a series of planning sessions coordinated in each community throughout the Continuum of Care.

June 5, 2015
Community Planning for Homelessness Toolkit

Components:
- Recruitment & Stakeholder Engagement – Who needs to be involved?
- Regional & Countywide Assessment – What does the community need?
- Community Planning – what is our vision and plan for the community?
- Implementation – What action is needed to implement the plan?
- Evaluation – How are we doing in meeting our goals?

Planning Goals:
- Develop strategic and comprehensive community plan to end homelessness.
- Build broader community engagement in each SPA.
- Engage new stakeholders (e.g., housing developers, public and private investors, property management companies)
- Increase investments regionally
- Increase community participation
- Examine new ways to increase housing stock

Planning Outcomes:
- Increase service capacity
- Increase community ownership & Investment
- Develop regional approaches to ending homelessness
- Help meet federal policy goals:
  - End Chronic Homelessness by the end of 2017
  - End Veterans Homelessness by the end of 2015
  - End Family and Youth Homelessness by the end of 2020
  - Set the path to end all homeless

Capacity Building:
- Data - How to effectively use data available through LAHSA (e.g., HMIS, Homeless Count, Performance Standards, and Monitoring) to better inform programs and services, as well as better advocate for area needs.
- Resource Development - Provide CoC service providers with tools and information on how to best leverage their resources and establish financially sustainable programs.
- Service Coordination & Implementation - Inform service providers about the CES system and how they can partner and connect with their local CES program.
SBCEH Governing Board Creation
Notes from June 5, 2015 Meeting

Attending: Mary Agnes Erlandson, Jeremy Sidell, Nancy Wilcox. Absent: Jaime Garcia

At the initial meeting of this ad hoc committee, several procedural questions were discussed. It was decided this Governing Board committee would make recommendations to the full coalition membership, where it then could be tailored and ultimately approved.

1. There was a general dialog of the creation of the first SBCEH Governing board, to be made up of between 13-17 members, including Board Chair, Vice Chair, Secretary, Treasurer, Coalition Co-Chairs, Standing Committee Chairs (Education, Coordination, Advocacy), and up to eight General Members. The board will meet four times a year.

2. The By-Laws state the board will be elected by “Active Coalition Members.” How do we determine who’s an active member? Suggestion: participated in 5 or more meetings or events per year. Mary Agnes will have a volunteer compile a list of members’ attendance recorded at monthly meetings. Nancy commented that since we just approved the By-Laws, we might want to consider everyone initially active and then keep this higher standard moving forward.

In terms of the membership list, what if an agency sends multiple persons to meetings? Is active membership determined by an individual or agency? Suggestion: have agencies select a point person to represent it, even if he or she can’t always attend meetings (can name a designate). People can also serve as “community members” without an organizational affiliation.

3. It was discussed whether to have a separate nominating committee, or have this ad hoc committee recommend a slate of candidates in the first year and then have open nominations in year two. It was decided to recommend opening up the nominating process to all active coalition members beginning the first year.

4. The following is a suggested timeline, with the month indicating which General Meeting these activities would start:

   a. June 2015: compile the “active” member list

   b. July: Call for nominations from active members (name, agency, position). Utilize Survey Monkey for nominations.
c. August: Devise slate based on nominations. Any 3rd party nominations would be confirmed with the candidate. If not enough nominations were recommended, this committee would recruit potential candidates.

d. Schedule an annual business meeting after proposed board selection to formally vote on this slate.