



## CoC Advisory Board Minutes

Wednesday, March 8th, 2017 8-9:30 AM

Sacramento Steps Forward, 1331 Garden Highway, Sacramento, CA 95833 - VCR Room (2nd Floor)

**MEMBERS PRESENT:** Joan Burke, Bill Knowlton, Emily Bender, Sarah Bontrager, Katherine Cooley, Cathy Creswell, Lisa Culp, John Foley, Emily Halcon, Jason Henry, Todd Henry, David Husid, Erin Johansen, Patty Kleinknecht, Diane Lampe, Lt. Dan Monk, Jonathan Porteus PHD, Amani Sawires Rapaski, Charles Ware

**GUEST(S):** Cathy White, Tara Ozes, Suzi Dotson, Jenn Fleming, Terrie Light, Lacey Mickleburgh, Kate Hutchinson, Dorothy Landsberg, Christie Gonzales, Wendy Saca-Mertens, Tricia Rosenbaum, Nick Mori, Martin Ross, Cheyenne Caraway, Natalie Silva, Londell Earls

**MEMBERS NOT IN ATTENDANCE:** Beth Hassett, Cindy Cavanaugh, Dion Dwyer, Katie Freeny, Olivia Kasirye MD, Sarah Thomas, Holly Wunder-Stiles

**STAFF:** Ryan Loofbourrow-CEO, Michele Watts-COO, Nick Lee- VP of Operations, Andrew Geurkink, Kimberly Peterson, Mayra Renteria, Gabrielle Salazar

**Call to Order:** Joan Burke, Chair, 8:02am

**I. Welcome & Introductions by:** Joan Burke

**II. Review & Approval of Prior Meeting Minutes:** Motion to accept as presented: Lisa Culp, 2nd Erin Johansen MSC

**III. Chairs Report:**

Joan Burke reported optimism as Measure 8 passed in Los Angeles with more than 2/3 majority. Los Angeles has a 25 cent sales tax that will go towards homeless services and housing subsidies. LA also passed a \$1.2 billion housing bond for homeless housing last fall. This gives encouragement as we look for ways to address homelessness in our own community.

**IV. SSF CEO's Report:**

Ryan Loofbourrow reported that he is waiting to see what comes back from the City and County, and recommendations that come back from SHRA. He recognized a very full agenda and decided to keep his update brief.

**V. New Business:**

**A. Item:** CoC Program Award: 2016 Scores

Michele Watts reported on the FY16 CoC Application, which is the community application component. The score received was 164.75/200, exceeding the median score by just under 10 points and exceeding the weighted median score by just under 5 points. This translates to new project funding for the community as there is a \$77,000 increase in funds. Watts reports that in FY15 we did well, but not as well as this FY16. We have improved and will continue to improve.

There were four sections that the CoC was scored on for FY16:

- Data Collection and Quality - score 26/27
- CoC Structure and Governance - score 44.25/51
- CoC Performance and Strategic Planning - score 77.5/101
- Cross-Cutting Policies - score 17/21

**B. Item:** Coordinated Entry Metrics

Andrew Guerink presented CE data. See Handout.

During the discussion on the CE Metrics, some issues were raised. There was confusion around data of enrollment and housing within the same month. Those who are enrolled in Rapid Rehousing are not necessarily getting housed the same month. This may be why there is a difference in the number enrolled versus the number housed in a certain month. It was noted that we should be making sure we are tracking denials and reasons for denials. Another issue raised, was that there are 321 veterans on by-name list and they do not match the number on the report. In theory, all 321 should have had VISPDAT, and should be counted on this report, but the numbers are different. There was concern around missing people, and reasons why the numbers do not match.

**C. Item:** System Performance Measures

Michele Watts presented the System Performance Measures with assistance from Manjit Kaur. See PowerPoint.

There was discussion around the following:

Prevention and Diversion- page 3, slide 2. It was suggested that we begin to capture the appropriate information so when we do have a Prevention and Diversion program up and running, then we will already have solid data, and clients to funnel into that program.

Graph on Measure 2, page 6- % Returned to Homelessness - (Please see corrected graph)  
The phrase "exit from PH" (Permanent Housing) is misleading. It is known that Permanent Supportive Housing (PSH) has the lowest return to homelessness, but the graph discusses PH, which includes moving in with family, renting a market rate apartment, and other permanent housing solutions. Permanent Supportive Housing (PSH) is a very specific type of Permanent Housing. There were many concerns around this data and it not being clear. Many committee members spoke about their concern that the community can draw incorrect conclusions from this graph. There was talk around altering it to reflect only PSH, but this data is required by HUD; they determine what data to measure. Rapid Rehousing (RRH), PSH, and PH all need to be clear to the community reading these graphs. The good work that we do needs to be reflected. The committee felt deeply concerned about data getting out to the public that is open for misinterpretation. It was recommended that we utilize footnotes to tell an accurate story, or our own data that shows the complete picture to go alongside HUD data. Michele Watts confirmed that we can create a narrative that goes along with this data to explain the fuller picture. It was suggested that the committee look at this data quarterly to figure out how to reflect data better and do it now before we need to report further data to HUD.

Metric 3.2, page 7, slide 2 - Count of Homeless Persons Served During Period - It was noted that the decrease in numbers for 2016 probably has more to do with a loss of shelter beds, not less people needing shelter.

John Foley requested that we move along to next agenda item as we are running out of time. The Advisory Board agreed. The System Performance Measure will be brought back for further discussion in April.

**D. Item:** Approval of Performance Review Committee Mid-Year Rank and Review Tool

Kimberly Peterson from SSF, and Jason from Homebase presented on the 2017 Renewal Project Scoring Tool. See handout.

This tool was approved by Performance Review Committee (PRC), although they had several issues with it and would like to see changes in it before the end of the year.

Jason went over the Threshold Factors. Kimberly Peterson explained that they are still in the process of reviewing the programs and how they did under this category. The Contracts Department has reached out to obtain additional information from a couple programs. In the next couple weeks letters will be sent out to those who met the Threshold Factors.

There were concerns about programs who do not participate in Coordinated Entry (CE), and how they might lose points. Michele Watts reported that projects are required to utilize CE, unless they have not been added to the system yet. TLCS and Shelter plus Care are examples.

#### Experimental Measures:

These measures will be evaluated, but will not be scored. Projects may be scored on the following in the future:

- Cost per household- Looks at if project is cost effective
- Extent of participation in CE

John Foley brought up that his program is going to be the most cost effective, but he worries about how others will be scored. Jason spoke on how projects may be scored by looking at other programs from other areas and try and find an average and seeing how they compare, or from looking at the project that is most costly and that one project would lose points. Neither one of these scoring ideas were very popular with the PRC.

Erin Johansen asked what happens for programs like TLCS who want to be participating in CE, but have not received approval yet. Kimberley Peterson responded that the experimental factors will not be scored until 2018.

#### Agency Capacity:

There is a new factor under Agency Capacity. The project must have regular quarterly drawdowns over the last operating year. This used to be a pass/fail category, but now it is scored. If the project made three drawdowns instead of the four that each program is supposed to, then they will lose points. If they do not make any drawdowns, then they will be disqualified.

Erin Johansen asked a data quality question, wondering when the three day clock begins. Does this mean three working days, or calendar days? Manjit Kaur responded that they are trying to see if it should be three to five days. The way it is measured cannot be altered, but the data quality plan can be updated. Emily Halcon asked if this can come to the Performance Review Committee (PRC). No one wants to be surprised at not meeting standards. Whatever the HMIS Data Committee recommends, Emily requested a breakdown at PRC.

Many board members had concerns around the way their projects would be scored. Michele Watts explained that projects will get feedback on how they scored, and that each project will get the information in time to do something about it. Jason explained that if there are issues, they will bring in the programs and talk to them about what needs to be fixed. It was asked if these standards can be given to the providers now, so they can have feedback and make sure they are in compliance. Kimberly Peterson responded that reports can be pulled and projects can look at their APR anytime in HMIS. Jen Fleming and Suzi Dotson were concerned about how to interpret numbers on the APR. Michele Watts explained that providers can be shown how they will be measured. There is an APR training on March 31st.

If you receive a notice that there are issues with your project, the project will have 45 days to comply and fix what needs altered. If you are notified less than 45 days before the release of the NOFA, then you will not need to have your issues solved by then. You have the full 45 days.

There was discussion around when youth or domestic violence survivors are utilizing transitional housing, then programs serving those individuals should be getting more points. They are serving the vulnerable, high needs clients, prioritizing half or more for placement.

Emily Halcon explained that the PRC was not in agreement on this category. She is hoping that the PRC will go towards a gaps analysis. The gaps analysis would explain that this is the way our system works and it has this type of intervention. It would go on to explain the needs that are not being met by the system. We should be rewarding the programs that fill those gaps. Between the mid-year and the final this should be revised to reward those filling the gaps. If our data is telling us that we are off in the decisions we are making, then we need to listen to the data. Our system should fit our population we serve, not the other way around. This tool, as it is now, is not where Emily wants to land.

It was asked to move approval of this scoring tool until April. Ryan Loofbourrow explained that action had to be taken during that meeting, and it cannot be held off until next month. If it did not get approved, then there would be no mid-year review. It was explained that the scoring can change before the final. The mid-year review is to get feedback from providers, so when final scoring tool comes out we will have a gaps analysis and be able to more fully assess the concerns and adjust the scoring accordingly.

Cathy Creswell explained that it is difficult to give approval when it is unclear how this will play out for some of these programs. John Foley expressed that even though this tool is not perfect, it is a way to raise questions. Michele Watts explained that when the NOFA is released, the final tool will come to Advisory Board for approval. There will be time for programs to improve between the mid-year and the final.

If a program does not score well, or they have incurable deficiencies, then Leadership Committee or Advisory Board will ultimately decide if the program needs to be reallocated. If that happened, then that program would be recommended to

not apply for the NOFA.

Breakdown of the Mid-Year Review process:

- Collect annual performance report from each program
- Send a supplemental questionnaire to each program for additional data not in HUD reports
- Convene a panel of non-conflicted members in the community to look at results
- Discussion about each program, have they met scoring factors and if so why
- Use their discretion to assign a score to each program for each of the scoring factors
- Total up the scores by the panel
- If they have more questions needed, then they ask
- Rank and review comes up with a list that reflects scores that were assigned
- List comes to Advisory Board for approval or modification

Once the Mid-Year Rank and Review Tool is approved, each provider will receive a report to make recommendations on any points that were lost. Michele Watts explained that there is an appeal process as well.

John Foley motioned to accept as presented, Patty Kleinknecht 2nd, MSC.  
No opposed, no abstentions.

**VI. Announcements:** N/A

**VII. Meeting Adjourned:** 10:05am

Prepared by: Gabrielle Salazar, CoC Coordinator