The Regional Task Force on the Homeless is the homeless policy expert and lead coordinator for the introduction of new models and implementation of best practices for the San Diego Region.

Board Meeting Agenda

AGENDA (Regular Meeting)		
Date: 4-18-19	**Time:** 3:00 PM-5:00 PM	**Location:** County Administration Center (1600 Pacific Highway, San Diego, CA 92101) Rooms 302-303

Agenda Items	Presenter	Page
1. Welcome and Introductions	Councilmember Chris Ward	
2. Non-Agenda Public Comment	Councilmember Chris Ward	
3. Consent Agenda		
a) Minutes from Jan. board meeting	Councilmember Chris Ward	
b) Financials for Jan.	Councilmember Chris Ward	
c) Acting as the CoC: RTFH is designation as Collaborative Applicant and HMIS Lead for 2019 NOFA	Councilmember Chris Ward	
4. Executive Officer & CEO Announcements		
5. Action Items		
a) Adopt HMIS Charter	Jegnaw Zeggeye	
6. Discussion Items		
a) RRH Learning Collaborative – Michelle Valdez	Tamera Kohler	
b) Racial Disparities presentation Pat Leslie/Deme Hill	Pat Leslie/Deme Hill	
7. Closed Session		
a) Identification of any action taken during closed session	Councilmember Chris Ward	
Next Meeting: **Date:** May 16, 2019 **Time:** 3:00-5:00 p.m. **Location:** San Diego County Administration Center, 1600 Pacific Highway, in Rooms 302-303		

Regional Task Force on the Homeless
Governance Board Regular Meeting Minutes
January 17, 2019

Read and Approved: _____
Secretary on behalf of Governance Board

The regular meeting of the Regional Task Force on the Homeless was called to order at 3:00 p.m.

The number of board members required to reach a quorum for this board is 16. A quorum was present at this meeting.

ATTENDANCE
Present:
Ray Ellis
Alexandra Berenter
Sean Karafin
Joel John Roberts
Nathan Fletcher
Chris Ward
Michael Hopkins
Nancy Cannon-O'Connell
Ken Sauder by Proxy
Karen Brailean
Amy Denhart
Susanne Terry
Jeffrey Gering
Karen McCabe
Dimitrios Alexiou by Proxy
Ellis Rose
David Nisleit by Proxy
John Ohanian
Walter Phillips
Laura Trancredi-Baese
Greg Anglea
Andre Simpson
Kathie Lembo
Deacon Jim Vargas
Nick Macchione
David Estrella
Rick Gentry
Peter Callstom by Proxy
Jessica Chamberlain

Absent:
Reverend Rolland Slade
Nancy Sasaki

1. Welcome and Introductions	
• Board Chair, Chris Ward welcomed board and community members to the regular meeting of the RTFH Governance Board.	

2. Non-Agenda Public Comment	
No public Comments.	

3. Consent Agenda		Items Removed from Consent Agenda
a.	Approval of **November 2018**, Board Meeting Minutes	Add Ray Ellis to the signature for HEAP funding to have a second Board Member in Resolution B.
b.	Approval of **November & December 2018** Financial Statements	

Voting	
Motion	Motion by **Karen Brailean** to: Approve the Consent Agenda. Second by **Greg Anglea**.
Yay	29 Members
Nay	No
Recused	No
New Action Items	N/A

4. Executive Officer & CEO Updates
Chris Ward thanks those who are getting involved in our standing Committees and to Ray Ellis and Nancy Cannon-O'Connell respectively for leading the Governance and Evaluation Advisory committees. The 2019 Governance Committee will consist of Ray Ellis the Chair, Tuck Forsyth, Greg Anglea, Stephanie Gioia, Sean Karafin, Deanna Villanueva, Tricia Tasto-Levien and Simonne Ruff. The 2019 Evaluation Advisory Committee will consist of Nancy Cannon-O'Connell as Chair, Susan Bower, Karen Brailean, James Carter, Mary Case, Julie Dede, Amy Denhart, Amy Gonyeau, Pat Leslie, Michael Peddecord, and Robert Seidman.

Chris Ward and Tamera Kohler sent an email to the Board earlier this month stating we will have more frequent communications to stay engaged and informed about the Executive Committee and particularly if there is any new information that is important for the Board to know. Expect more active communications coming from the Chair.

Councilmember Christopher Ward shared is Goals for RTFH. They included the following areas:
Point in Time Count 2019
Community Plan
Data Systems
Charter, By-Law and Policy Improvements
Intergovernmental Roundtable
Community Measurement
Street Outreach
Public Information

New Board Officers were announced:
Vice Chair Karen Brailean
Secretary Deacon Vargas
Treasurer David Estrella

CEO Tamera Kohler: shared updates for RTFH
HMIS system went live January 4th
Hired HMIS expert Simtech, Matt Simmons to create dashboards, data warehouse and data integration.
Completed our HEAP funding application and we received a check from the state for $18.8 Mil. This check has been deposited in our separate account to get a rate of return on a money market account of 1.85 which is significantly above what is being paid in the market currently. All of the return must be rolled back into services and must be spent by the end of the allocation, but this can potentially bring in another $400,000. HEAP applicants will use Zoom Grants.

Chris Ward announced the addition of four more positions to the Executive Committee. We are incorporating the Chairs of some of the committees. Ray Ellis, Nancy Cannon-O'Connell, Walter Philips and Supervisor Fletcher will help us expand the Executive Committee.

5. Action Items

a.

Presentation	**Youth Advisory Board – officially add Ad Hoc committee** *Walter Philips:* RTFH received the largest grant by HUD for the Youth Homeless Demonstration Project. The grant requires that we have a Youth Advisory Board that is a formal body with the CoC. There is a recommendation in your packet with some information to formally adopt the Youth Action Board as a formal task Committee to the CoC. A mantra we hear from our young people is "Not about us without us", and we take this to heart, we do not make decisions without youth being at the table and being a part, and have a critical voice. I want to thank Tamera for pushing forward making sure our youth are a part of the Regional Task Force on the Homeless. We have two youth who have been through the programs and are now employed by RTFH. Best practice is something we have to do, but also something we should be doing. Our youth meet on a weekly basis looking at the community plan that is being rolled out for the Youth Homeless Demonstration Project, and helping guide other funding that comes in. I would like to make a recommendation to formally adopt the Youth Action Board as a formal Task Force of our CoC.
Public Comment	
Board Member Discussion	Joel John Roberts asked What is your definition of youth. Walter Philips stated HUD considers ages 14-25 in the youth category
New Action Items	N/A

Voting:

Motion	Motion by **Walter Philips** to: Approve the Youth Action Board as a formal Task Force of our CoC. Second by **Laura Tancredi-Baese.**
Yay	29 Members
Nay	No
Recused	N/A
b.	

Presentation	**Accept RTFH CoC monitoring process** *Nancy Cannon-O'Connell:* Beginning in 2018 the Evaluation Committee worked with RTFH to develop a comprehensive CoC monitoring program. The purpose is for the CoC provider system to better comply with HUD program requirements and look at performance goals. The request today is for the acceptance of a monitoring model that looks at the compliance of our provider organizations with HUD's requirements. Last year the RTFH team completed a listening process speaking with many CoC grantees and determined this fundamental monitoring step is an essential to the overall goal for lifting the whole community with performance. This year they have produced a CoC program compliance monitoring policy and that is what we are recommending to be accepted today. I am recommending the fine work produced by RTFH staff led by Deme Hill to produce a compliance monitoring policy and program implementation be adopted.
Public Comment	
Board Member Discussion	Ellis Rose stated he didn't hear anything about service users' feedback and where that fits in. The concern is that this in continuously overlooked and want to be sure service users are part of the process. Where does that fit in? Nancy Cannon-O'Connell stated there has been discussion of working with provider organizations in monitoring; to talk about ways of incorporating participant feedback and information about their view of the services. Ellis Rose asked, Will participants be consulted? Nancy; Yes. Greg Anglea asked can we incorporate Ellis' request. Tamera Kohler stated it is not required by HUD monitoring that we are getting participant feedback, but strongly encourage. RTFH will take the recommendation and commit to work to add this to the monitoring tool in the future. Chris Ward asked that we adopt interim policy here today with commitment by Evaluation Committee to bring back to our next board meeting with additional language that will strengthen the policy.
New Action Items	Evaluation Committee to work on adding service user feedback to the monitoring process.
Voting:	
Motion	Motion by **Nancy Cannon-O'Connell** to: Approve the RTFH CoC monitoring process

	Second by **Karen Brailean.**
Yay	29 Members
Nay	No
Recused	N/A

6. Informational Items

a.	
Presentation	**PITC update** *Kat Durant:* The PITC is Friday January 25th. 925 volunteers of which 673 are county employees. We have approximately 95 outreach workers who have agreed to lead our teams of volunteers to engage our homeless people. Still need 100 volunteers for North County sites, and 40 more for Encinitas, Escondido, Vista and Oceanside. This year we will be using thermal imaging as part of the count. Lakeside Sheriff Department will fly helicopters along San Diego River and the 67 freeway. Chula Vista will fly their drones along the Bonita Jungle to aid in counting this year. San Diego Central Police Department already have the latitude and longitude coordinates for thermal imaging flights they have done in the past, and will be verifying those locations. Some of you know we did a pilot of the count just before the holidays in December with Downtown Clean and Safe. I will ask Ali from Downtown Clean and Safe if she wants to comment on her team's experience. *Alexandra Berenter:* Many of you know that San Diego Downtown partnerships Clean and Safe program conducts a monthly unsheltered count in the downtown area since 2012. We are happy to partner on a pilot in December with RTFH. Over two days we had four teams of 304 individuals that went out and surveyed the individuals in our community. Survey was shorter but our teams felt they were able to have a more meaningful engagement with individuals. The biggest take away is that the count moves from having numbers on a map to names of the individuals on a map. With that said we are excited to partner with RTFH for the annual WeAllCount VIP event next Friday.
Public Comment	N/A
Board Member Discussion	-How is the training component going to go? Would you also consider day of training? We have a training video that is emailed as soon as someone signs up. We do some trainings in between, we've had in person trainings on Saturday and webinars. For Outreach, we are having a training breakfast tomorrow at RTFH. -How do you control for any deduplication? --for deduplication we have name and social security number and that is helpful so our team is able to recognize an individual surveyed more than once. Ellis Rose expressed appreciation for meeting with Kat and Tamera and for the time spent hearing his ideas and concerns. Joel John Robert expressed concern if people are hearing about the changes.

	Chris Ward stated work has been done to inform the public and to be transparent, asked Tamera to provide more information.

Tamera Kohler shared that the RTFH has done press pieces with Union Tribune, Voice of San Diego and shared updates to this board, membership meetings and trainings with outreach teams. Piloted this methodology with Clean and Safe in their Dec. count.

Ellis Rose stated: One other aspect, Cars and RV's and I have done outreach in terms of identifying networks so that we can put information out next week about what is going to happen and what they can expect in those mornings.

Kat Durant stated we are going to count people and not vehicles or structures so it is going to be necessary that we engage people that are living in their cars or RV's and talk to them and survey them. The outreach workers are going to lead teams and they will be the ones to do that. The main thing for the people living in RV's is just to verify they do consider themselves homeless before we give them the survey or start with a survey. We also will have notes that we can leave on the vehicle asking them to call in and let us know where they are and we can reach back out to them. We will be collecting their license plate numbers and the site location. So hopefully Saturday and Sunday or later that Friday our outreach teams can speak with them so they can be counted.

Walter Philips shared in addition to the PITC we will be doing the youth PITC at the same time and using the same methodology we had the last two years. |
| **New Action Items** | N/A |
| b. | |
| **Presentation** | **HEAP Update**

<u>Jennifer Yost:</u>
Has met with or scheduled 13 meetings with the 13 jurisdictions, 5 indicating no interests to talk about the priorities to be incorporated into the RFP.
The RFP will be released on January 31st.
Agencies will have a minimum of 30 days to respond
HEAP will be one year contracts with options to renew

In connection with HEAP funding will be 2 initiatives:
A Rapid Rehousing learning collaborative to facilitate a peer-to-peer group on best practices and what is working on each of the provider systems and learning from each other.
Diversion Training by Ed Boyte and the Cleveland Mediation Center

There will be a PPT posted on our website on how to use our grants management system ZoomGrants. There will be 3 types of applications; Single User application the agency themselves apply for, Collaborative applicant; where there is a lead agency and multiple partners and capital projects. |

Public Comment	N/A
Board Member Discussion	Laura Trancredi-Baese asked; do you have a definition of how you describe the difference between minor or major capital projects? Jennifer Yost gave an example: "Major capital would be rehabbing a building to make it a shelter, putting in a push button so your front door is accessible is minor. It comes to the amount of money and work." Chris Ward stated the City of San Diego just adopted the $14 million direct allocation to the city. Focused on permanent housing through rental subsidies, establishing a flexible spending pool, expanding existing storage, family reunifications, safe parking and other programs that we know have immediate impact for those experiencing homelessness
New Action Items	N/A
c.	
Presentation	**City of San Diego Plan Update** Note: Lisa Jones shared the housing commission will be administering the HEAP funds that has come to the city and the RFP is open and an outreach RFP will be out soon. City plan update: The goal is to create an overarching strategic plan that identifies actionable ways to move the needle forward. This plan is a set guiding principles and recommended actions to filter policy decisions through including funding from the state, the county, the federal government. City council will be provided with guidance and a roadmap for how to make those decisions and how to best maximize the resources. It will include a system analysis, of what is currently working within the city. Looking at data outcomes and metrics that are currently available, looking at the gaps and resources and identifying what is successful and needs to scale up what is not succeeding and either needs some mid-course correction or funding needs to be moved elsewhere. A key component is working with the RTFH and with the County representatives to ensure the plan speaks to who we are as a region & that the RTFH and the regional leadership can build upon. We have executed a contract with CSH and Ann Oliva who was the Deputy Assistant Secretary for Special Needs at the U.S. Department of Housing and Urban Development (HUD), where she oversaw a multibillion-dollar portfolio that included HUD's work on homelessness. She has worked throughout the country working on community planning on actionable ways to address homelessness and meet the needs of persons who are experiencing homelessness on our streets and she will be working with us over in the next 6 months. We have a core steering group from key stakeholders that includes representatives from the Mayor's office, Council Member Ward's office, the Regional Task Force on the Homeless (RTFH) and the Housing Commission. Ann Oliva will be out in February to do onsite stakeholder interviews and work with the steering group. Between now and then her team is working on data systems

	analysis and looking at documents that already currently exist in our system. One of the key components that Ann is focused on is lived experience. Data analysis and system analysis is great but we actually have to make sure that the services that we are creating meet the needs of those experiencing homelessness so that our resources that we are developing actually meet the needs and expectations that need those resources.
	Part of the commitment from CSH and Ann is to make sure there is a feedback loop so that as she is gathering and learning about the community she is feeding back what she is learning and what she is seeing the direction she thinks things are starting to shape up into. When the draft plan is expected to come in May it will not be a surprise and it meets the expectations of the community and the council. That it is something that we really want to adopt and move forward. The plan, through a feedback process and input in May, will be finalized in June with the goal to taking it to the city council in July.
Public Comment	N/A
Board Member Discussion	Chris Ward asked how this is not another planning exercise, how is this superior, how are we actually going to translate information into action? Lisa Jones stated this plan is a roadmap with a set of guiding principles and a set of actionable recommendations that funding can be focused on. We do not want a plan that sits on a shelf that looks great on paper but does not give real direction on how to move forward. Greg Anglea wanted to thank the housing commission for looking to do this regionally and thinking about the larger plan and to coordinate with the Task Force. He asked if they will incorporate the outcomes that this body identifies as important and measureable into the plan. Lisa Jones stated the housing commission has followed the guidelines of the Regional Task Force on community standards as far as what metrics and measurements to use. There is going to be specific metrics on how to evaluate what the City funds and it is hoped those should align with the RTFH work and that's really the goal that it is not a standalone plan that it's a plan reflective of where the region should go. Joel John Roberts shared his concern that Focus Strategies is putting together a plan for the region and the housing commission is doing a plan for the city, if that is accurate understanding than how does that work, they are separate plans? Tamera Kohler shared that the Focus Strategies work is being shared with Ann Oliva and will be incorporated into two bodies of work. Ann is familiar with the way that they analyze data. This will continue to align and coordinate our work. The goal is these strategies for the city will be used by the RTFH in supporting our 18 jurisdictions. We also want to share city best practices that will fold up into this regionally robust process. Ann always has a sense of urgency in her work so I would expect that this plan has very actionable objectives we can measure and hold ourselves accountable.
New Action Items	N/A
d.	

Presentation	**SB 1152 Hospital Discharge Plan for Homeless Effective Jan 1** *Judith Yates from Hospital Association for San Diego and Imperial County* As the Hospital Association for San Diego and Imperial Counties, we represent all of the hospitals in the two counties. We work with them on hundreds of healthcare issues and we started talking to them about the homelessness and housing about a decade ago and I can tell you that the way it was discussed back then has substantially changed and now at our last 2018 Board meeting when we started looking at our priorities housing was at the top. I am not an expert on SB1152 but wanted to introduce you to the topic, what the Association sees as its role and serve as a resource. No one has the answers on how we will implement this legislation and every County will do it a little bit differently and every hospital will do it differently as well. It has a two parts, most of the requirements are now effective but there are two larger requirements effective in July. There are many misunderstandings about what this bill is and what it is not. Sadly it does not have any resources connected to it, it is an unfunded mandate for hospitals. The key to this piece of legislation is that the hospitals need to reach out to the service providers in ways that in the past they have not necessarily done and hospitals now take on an activity that they have been less than robust in doing. Hospitals have always had policies and procedures for discharge planning and most of the things the bill points out to do doesn't change. What it does change is the requirement to document that we have reached out to you in some way. What we have tried to do with the hospitals just in the last 3 months is to make sure they have the tools that are already available; 2-1-1, the CIE, the information we've been sharing we have been working very closely with them. This relationship needs to be more robust to ensure the hospitals have the most current and up to date list of services available. Health Homes is a Medical program driven by our manage care plans, a lot of people that are eligible are not enrolled in plans. The lack of placements in the community will be the greatest challenge for hospitals. Many of the hospitals participate in the CES. We have several hospitals who see the bulk of the homeless. The hospital is a delivery service entry point and the closer we can work with service and community based operations the better. If we are the entry point and we have those connections then maybe we can improve what actually happens from the point in time a patient is discharged. It does impact all general acute hospitals, psychiatric hospitals and certain specialty hospitals so basically it is everybody. Karen McCabe, board member and from Scripps Mercy Hospital We are the first hospital that initiated CIE with 2-1-1, we have a variety of relationships with a lot of community based organizations to serve our homeless. Before this legislation we offered our homeless a meal, we gave them clothes and we tried to make placements as need. We are one of the hospitals that had a nurse case manager that worked with the rescue mission with the recuperative care unit which unfortunately is closing this week but what this does for us is it mandates reporting

	and I think it also points out the relationship between homelessness and housing. We have key initiatives in whole person wellness and soon health homes where that linkage with housing is very important. There is a relationship between health and homelessness; health is not just about hospitals it is about the continuum of care and the primary care component. Another requirement for over a decade is the Community Health Needs Assessment that we coordinate with the County; it covers the entire region. Each hospital participates together using outside consultants for the needs assessment each individual hospital uses the needs assessment to develop their plan. I want to emphasize we are speaking to the RTFH to see what kind of opportunities we can do to get you more engaged with the community health needs assessment and Tamera is working with us trying to figure out if there is a possibility of perhaps having a focus group. At the end of this 2019 process we will be more than happy to get back to you with what that assessment tells us about our community which is really what the community tells us about the community.
Public Comment	N/A
Board Member Discussion	*Ellis Rose* stated he really appreciate everything shared because right now it is a hot issue. The number 1 issue for people is being released and they need a special diet and there is no way to meet it. *Karen McCabe* added it is not only a diet its medications that need to be refrigerated. *Greg Anglea* stated, this is one of the best topics that has come up, it's a topic that there is actually a solution to it that hasn't been put forward today and that he wanted to bring to everyone's attention. The issues of special diet and medication management and of a bridge for a place for people to go. There are programs called recuperative care that can do all of this and they do not necessarily require extensive amounts of additional funding. Interfaith Community Services has worked successfully with partners at the VA with North County hospitals and with manage care organizations to fully fund a program that has graduated hundreds of people out of homelessness into permanent housing and having address the medical condition that landed them in the hospital including mental health hospitalizations. We are over prescribed for our current 32 bed facility in Escondido which is gorgeous and anyone is welcome to see it. There is opportunity for any number of providers and groups and the people around this table to create more of this resource. Recuperative care is successful as it's a moment of crisis for the individual who ended up in the hospital; it's a moment of change. This legislation and the stress it adds to it is another crisis we can use to create, approve and effect intervention. So I am excited about that opportunity to do that and to work with the community to make that happen. *Joel John Roberts* asked about CIE and 2-1-1 can John Ohanian explain that a little more? *John Ohanian* explained, CIE is just like 2-1-1, we are nothing without our partners. We are proud that we have 52 organizations that have joined CIE. We call them a trust network because it really takes a lot of trust to be in a collaborative where you are going to share your clients and share information and care coordination. We are

	excited that we hit a mile stone of over 70 thousand clients, 70 thousand San Diegans that have consented into the exchange to have their information shared among the providers (a big moment of trust). To have the Hospital Association take the lead to be the facilitator with the hospitals, to get them on board with CIE as well, so we can make that program to take to the next level. *Chris Ward* asked Karen about conducting the PITC within our hospitals. *Karen McCabe:* Scripps Mercy Hospital both our San Diego campus and our Chula Vista Campus will administer a survey which is going to be a pilot and we are going to make some changes to the current survey to address some of the issues we feel are really relevant to homelessness and healthcare for our population. Karen added historically Scripps has used the rescue mission for recuperative care and unfortunately they are closing their recuperative care unit. They are going to repurpose the floor. We have a partnerships with Catholics Charities where we get hotel vouchers, for some of our clients that are appropriate, for a two week stay so we can stabilize them in terms of them making decisions on whether they want to go back to a family, diversion, or if they can move along the continuum in housing. *Greg Anglea* shared that recuperative care can mean a lot of things and would welcome an opportunity to work with the Working Group, with the leadership or anyone here to really further share the evidence on how this works and the way we can pay for it too and offer that up as a model for anyone else. *Nick Macchione* stated, I think it would lend itself exceptionally well at a future Board meeting to talk about not just recuperative care but also the step down beds the County has done. I think it will be highly informative in this work on how we look at this integrated approach and the issue of folks from the hospital that can step down appropriately. There is quite a lot of work being done in this regard. I hope we can look at an adequate time to have that learning session of what is happening but also other ideas of how we expand this work.
New Action Items	N/A

e. Board Member Comments—Board Members

No February board meeting with NAEH Conference here in San Diego on the same day we normally meet. Board Retreat is March 21st at 1pm, we will discuss Governance updates from Ray so will be doing a deep dive as a board to set us up for success for the rest of the year.

Board members requested a future meeting include a presentation on Recuperative Care Programs as well as CIE.

Ray Ellis shared an update on the Governance Advisory Committee. Held 3 productive meetings and have had two technical experts in the Governance area from HUD, Darlene Mathews and Michelle Williams. We do have the opportunity to address some of the Governance issues and will take a deeper dive on that at the March meeting. If anyone has any questions or feedback or wants to discuss this please reach out to me

and let me know. I am happy to have that conversation with you. The committee's well-staffed and we have good participation but if you would like to join our meeting next month please let us know.

Tricia Tasto-Levien asked if there were any known impacts from the federal government shutdown.

Lisa Jones stated there is no impact yet unless it goes into April or May.

Tamera Kohler stated CoC funded programs are under a contract that was from a previous year so it is not a new budget allocation. Electronic payment system are working so grantees are able to draw that down funds. It is the new funding that we have and anything that is new that we are waiting to get funded that needs someone's signature are the challenges we have.

Sean Karafin shared the San Diego County Apartment Association who is encouraging all of their members to be lenient and work with residents to make sure it does not cause any issues. Maybe it is appropriate for us to articulate that and share that message; if a tenant does not know that they can just contact their landlord and they might be reasonable about it as this is the longest government shutdown in history. I think that is one way to start that conversation.

David Estrella stated the County Housing Authority is similar to the Housing Commission. We did receive confirmation, as to February, for housing assistance payments for Section 8. The only contracts that we've seen are the project based vouchers that are held directly with HUD, I think there are some at risk with our County. Beyond February we don't have any guarantees. We will be able to draw down reserves however those reserves are dependent on how long the shutdown last.

Chris Ward:
I do not see any more Board comments so this meeting is now adjourn. I want to thank you all.

Adjournment

The meeting was adjourned at **4:54PM.** The Board will reconvene for their next regular meeting on April 18, 2019 at 3:00-5:00pm.

REGIONAL TASK FORCE
ON THE HOMELESS
"OUR COMMUNITY, OUR HOMELESS, OUR ISSUES"

RTFH Financial Statements
Period Ending January 31, 2019

Unaudited: For Internal Management Use Only

Regional Task Force on the Homeless
Budget vs. Actuals
Six Months Ended January 31, 2019

	July '18 - Jan '18 Budget	July '18 - Jan '19 Actuals	(Under) / Over	% Variance	Explanation
Revenue					
HUD CoC Grants	$ 1,175,397	$ 1,333,032	$ 157,636	13.4%	
Grants		$ 5,000			State HEAP Grant Received/5k recognized
Local Government Contracts	260,000	$ 169,012	(90,988)	-35.0%	
Other Local Contracts	-	$ 13,650	13,650	0.0%	
Private Donations / Foundations	147,500	$ 345,978	198,478	134.6%	
Membership Fees	3,500	$ 1,103	(2,397)	-68.5%	
ServicePoint Fees	70,450	$ 105,996	35,546	50.5%	
Interest		$ 8,402			
Total Revenue	1,656,847	1,982,174	311,925	18.8%	
Expense					
Salary & Wages	880,000	$ 784,052	(95,948)	-10.9%	
Benefits	175,000	$ 149,041	(25,959)	-14.8%	
Direct Costs					
HMIS	60,250	$ 515,121	454,871	755.0%	Increased expenditures due to HMIS transition costs and the maintenance of two systems
Other Consultants	200,000	$ 203,468	3,468	1.7%	
Software / Subscriptions	14,364	$ 31,779	17,416	121.2%	
Equipment	5,000	$ 677	(4,323)	-86.5%	
Out of Town Travel	9,600	$ 6,442	(3,158)	-32.9%	
Conference Fees	7,500	$ 4,143	(3,357)	-44.8%	
PITC Expenses	7,500	$ 245	(7,255)	-96.7%	
Total Direct Costs	304,214	761,875	457,662	150.4%	
Indirect Costs					
Rent / Storage	45,000	$ 52,723	7,723	17.2%	
Business Insurance	2,333	$ 4,780	2,446	104.8%	
Taxes / Bank Fees	950	$ 2,481	1,531	161.1%	
Phone / Internet	14,500	$ 44,654	30,154	208.0%	
Supplies	3,625	$ 4,431	806	22.2%	
Copier	4,500	$ 4,962	462	10.3%	
Local Mileage/Parking	13,750	$ 10,016	(3,734)	-27.2%	
Membership/Subscription Fees	1,000	$ 500	(500)	-50.0%	
Board Expenses	6,000	$ -	(6,000)	-100.0%	
Staff Expenses	1,250	$ 2,422	1,172	93.7%	
Audit	15,000	$ 14,700	(300)	-2.0%	
Legal	15,000	$ 11,749	(3,251)	-21.7%	
IT	16,000	$ 29,175	13,175	82.3%	
Fundraising	3,000	$ -	(3,000)	-100.0%	
Miscellaneous	750	$ -	(750)	-100.0%	
Total Indirect Costs	142,658	182,592	39,934	28.0%	
Total Expense	1,501,872	1,877,561	375,689	25.0%	
Net Income	$ 154,975	$ 104,613	$ (50,361)	-32.5%	

Regional Task Force on the Homeless
Statement of Financial Position
As of January 31, 2019

	Jan 31, 2019	Jan 31, 2018
ASSETS		
Cash	$ 19,544,149	$ 255,438
Accounts Receivable	650,767	782,443
Prepaid Expenses	20,726	16,888
Inventory - Gift cards	39,948	16,618
Fixed Assets		
Equipment	5,870	5,870
Accumulated Depreciation	(5,870)	(5,870)
Total Assets	$ 20,255,590	$ 1,071,387
LIABILITIES		
Accounts Payable	$ 90,395	$ 11,564
Deferred Revenue	18,816,668	-
Accrued Expenses	-	-
Payroll-Related Liabilities	98,923	37,746
Notes Payable-Lucky Duck	-	-
Total Liabilities	19,005,986	49,310
NET ASSETS		
Unrestricted	627,932	621,620
Temporarily Restricted	621,671	400,457
Total Net Assets	1,249,603	1,022,077
Total Liabilities & Net Assets	$ 20,255,590	$ 1,071,387

Regional Task Force on the Homeless
Statement of Financial Income and Expense
Year-to-Date Through January
2019

	Jan-19	Dec-18	Nov 18	Oct 18	Sep 18	Aug 18	Jul 18	TOTAL
Ordinary Income/Expense								
Income								
5160 · City of San Diego / SDHC - CAHP	11,970	11,059	11,341	3,055	10,637	10,641	10,640	69,342
5220 · County of SD/HCD - CDBG	7,069	48,154						55,223
5260 · County of SD / NRP	9,670	-	-	10,945	-	23,832	-	44,447
5325 · HUD HMIS Expansion - Merge	94,979	21,831	64,446	130,286	59,087	52,067	56,551	479,247
5326 · HUD HMIS Admin Exp - Merge	22,757	23,692	14	-	-	7,717	14,023	68,203
5375 · HUD CES	57,947	42,969	53,758	254,593	35,410	40,905	40,559	526,140
5376 · HUD CES Admin	2,459	4,429	4,670	86	15,398	5,045	4,239	36,327
5382 · HUD CoC Planning 2016	-	23,692	20,566	-	-	-	-	44,259
5383 · HUD CoC Planning 2017	28,566	13,306	18,289	(18,644)	50,037	35,373	51,931	178,858
5386 · State - SDYS OES	4,876	4,882	3,892					13,650
5387 · State - HEAP	5,000							5,000
5530 · Donations	50	51,844	-	6	242	8	-	52,150
5540 · Interest	8,402	-	-	-	-	-	-	8,402
5550 · Foundations	30,317	20,112	151,538	(25,029)	74,416	22,122	20,353	293,828
5575 · Membership Fees	50	300	-	100	200	300	153	1,103
5591 · ServicePoint Support Fees	21,649	14,743	13,921	13,921	13,921	13,921	13,921	105,996
Total Income	305,760	281,014	342,435	369,318	259,347	211,931	212,370	1,982,174
Gross Profit	305,760	281,014	342,435	369,318	259,347	211,931	212,370	1,982,174
Expense								
7000 · Salaries / Consultants	108,315	112,816	104,236	114,451	112,296	116,241	115,226	783,581
7100 · Taxes & Fringe Benefits	25,614	4,779	30,108	20,760	23,346	21,091	23,346	149,044
7200 · Insurance	-	-	32	21	3,493	690	680	4,917
7340 · Banking	503	298	569	473	306	214	118	2,481
7420 · Contract Services	43,211	27,996	27,885	58,098	31,664	42,216	28,023	259,092
7510 · HMIS	86,045	38,578	166,425	149,628	58,004	7,858	7,817	514,355
7620 · Information Technology	35,496	3,722	3,435	4,799	4,010	2,002	3,552	57,015
7710 · Rent/Maintenance	8,116	7,923	7,923	7,923	7,923	7,923	4,994	52,723
7770 · Supplies	2,421	1,508	532	1,050	1,216	1,068	1,444	9,238
7900 · Program Equipment	-	-	-	(253)	1,460	118	118	1,443
8000 · Travel/Transportation	952	1,339	3,355	1,252	1,334	2,434	5,792	16,458
8100 · Board Development/Fund Raising	3,184	2,618	5,988	3,521	1,723	3,226	6,954	27,214
Total Expense	313,855	201,576	350,488	361,721	246,774	205,082	198,064	1,877,561
Net Ordinary Income	(8,096)	79,437	(8,053)	7,596	12,573	6,849	14,306	104,613
Other Income/Expense								
Other Expense								
Reportable Health Coverage	-	-	-	-	-	-	-	-
Total Other Expense	-	-	-	-	-	-	-	-
Net Other Income	-	-	-	-	-	-	-	-
Net Income	(8,096)	79,437	(8,053)	7,596	12,573	6,849	14,306	104,613

REGIONAL TASK FORCE ON THE HOMELESS
BOARD OF DIRECTORS ACTION/INFORMATION REPORT

TITLE OF REPORT:
San Diego CoC 601, Designation of the Regional Task Force on the Homeless as the CoC collaborative applicant and HMIS lead Agency

ADVISORY COMMITTEE NAME: Executive committee	**ITEM TYPE:** ☐ Information ☒ Action	☐ Recommendation/Board Policy ☐ Request to Present at Board Meeting

MEETING DATE: 4/18/2019	**PRIMARY CONTACT:** Chris Ward	**SECONDARY CONTACT:** Karen Brailean

TIME SENSITIVITY:　　☐ No　　☒ Yes (If yes, state deadline and why it's urgent)
Must be completed annually for the NOFA; expected in May of 2019

RECOMMENDATION:
The Board vote to adopt HMIS Chater.

OVERVIEW & BACKGROUND SUMMARY:
24 CFR part 578 governs the Continuum of Care Program (CoC), authorized by Subtitle C of Title IV of the McKinney-Vento Homeless Assistance Act. For each Fiscal Year (FY), HUD requires each Continuum of Care's (CoC) designated Collaborative Applicant to register in advance of applying for funding available under the FY CoC Program Competition. The CoC designates the HMIS Lead in accordance with the CoC program interim rule to manage the CoC's HMIS on its behalf in 24 CFR 578 Subpart B and in accordance to 24 CFR 580.

FISCAL IMPACT:
Designated Collaborative Applicant must register to apply for funding available under the FY CoC Program Competition; 2018 funding awards were just over $21M

FUTURE ACTION NEEDED BY BOARD? If so, by what date?
Renewed on an annual basis

STAFF/AND OR COMMITTEE STATEMENT:
Required action of the CoC Board

SUMMARY OF PREVIOUS COMMITTEE AND/OR BOARD ACTION RELATED TO THIS TOPIC:
N/A

COMMUNITY PARTICIPATION AND PUBLIC OUTREACH EFFORTS:
N/A

IMPACT ON KEY STAKEHOLDERS, PROJECTS, COMMUNITIES, OR SUB-POPULATIONS :
 Designated Collaborative Applicant must register to apply for funding available under the FY CoC Program Competition; 2018 funding awards were just over $21M

CONNECTIONS TO HUD/HEARTH COMPLIANCE:
24 CFR part 578 governs the Continuum of Care Program (CoC), authorized by Subtitle C of Title IV of the McKinney-Vento Homeless Assistance Act. For each Fiscal Year (FY), HUD requires each Continuum of Care's (CoC) designated Collaborative Applicant to register in advance of applying for funding available under the FY CoC Program Competition.

COC BOARD RESPONSIBILITY CATEGORY(S): ☐ Annual Regional Planning ☐ Approve CoC Policies ☒ Manage annual CoC funding application ☒ Designate and operate an HMIS ☐ Develop Coordinated Entry System	☐ Draft written standards for providing CoC assistance ☐ Emergency Solutions Grants Evaluation & Recommendations ☐ Conduct regular/annual CoC Plan (includes Point-in-Time Count) ☐ Fundraise ☐ Other: Click here to enter text.

ATTACHMENTS OR BACK-UP INFORMATION TO REFERENCE:
Click here to enter text.

REGIONAL TASK FORCE ON THE HOMELESS
BOARD OF DIRECTORS ACTION/INFORMATION REPORT

TITLE OF REPORT:
San Diego CoC 601, Adopt HMIS Charter

ADVISORY COMMITTEE NAME: Executive committee	**ITEM TYPE:** ☐ Information ☒ Action	☐ Recommendation/Board Policy ☐ Request to Present at Board Meeting

MEETING DATE: 4/18/2019	**PRIMARY CONTACT:** Chris Ward	**SECONDARY CONTACT:** Karen Brailean

TIME SENSITIVITY: ☐ No   ☒ Yes (If yes, state deadline and why it's urgent)
Must be completed annually for the NOFA; expected in May of 2019

RECOMMENDATION:
The Board vote to adopt HMIS Chater.

OVERVIEW & BACKGROUND SUMMARY:
The CoC designates the HMIS Lead in accordance with the CoC program interim rule to manage the CoC's HMIS on its behalf in 24 CFR 578 Subpart B and in accordance to 24 CFR 580.7

DUTIES OF THE CONTINUUM OF CARE (§ 580.7)

This section provides that the Continuum of Care must designate a single information system as the official HMIS software for the geographic area. A single information system reduces administrative burden, is more economical for Continuums and, most importantly, allows for Continuum-wide collaboration between organizations serving homeless persons and persons at risk of homelessness. The Continuum must also designate the HMIS Lead. The HMIS Lead must be an instrumentality of state or local government, or a private nonprofit organization. The Continuum must review, revise, and approve all policies and plans the HMIS Lead is required to develop. Finally, the Continuum must develop a governance charter and document all assignments and designations consistent with the governance charter.

FISCAL IMPACT:
Designation allow the RTFH to receive funding to maintain and operate the HMIS system and collect fees and contract with the approved vendor Bitfocus in behalf of the CoC.

FUTURE ACTION NEEDED BY BOARD? If so, by what date?
Reviewed and renewed on annual basis

STAFF/AND OR COMMITTEE STATEMENT:
Required action of the CoC Board

SUMMARY OF PREVIOUS COMMITTEE AND/OR BOARD ACTION RELATED TO THIS TOPIC:
N/A

COMMUNITY PARTICIPATION AND PUBLIC OUTREACH EFFORTS:
N/A

IMPACT ON KEY STAKEHOLDERS, PROJECTS, COMMUNITIES, OR SUB-POPULATIONS :
 Each CoC and ESG are required to establish an HMIS system to receive funding and to complete required funding reports.

CONNECTIONS TO HUD/HEARTH COMPLIANCE:
The CoC designates the HMIS Lead in accordance with the CoC program interim rule to manage the CoC's HMIS on its behalf in 24 CFR 578 Subpart B and in accordance to 24 CFR 580.7

DUTIES OF THE CONTINUUM OF CARE (§ 580.7)

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economical for Continuums and, most importantly, allows for Continuum-wide collaboration between organizations serving homeless persons and persons at risk of homelessness. The Continuum must also designate the HMIS Lead. The HMIS Lead must be an instrumentality of state or local government, or a private nonprofit organization. The Continuum must review, revise, and approve all policies and plans the HMIS Lead is required to develop. Finally, the Continuum must develop a governance charter and document all assignments and designations consistent with the governance charter.

COC BOARD RESPONSIBILITY CATEGORY(S):

☐ Annual Regional Planning
☐ Approve CoC Policies
☐ Manage annual CoC funding application
☐ Designate and operate an HMIS
☐ Develop Coordinated Entry System

☐ Draft written standards for providing CoC assistance
☐ Emergency Solutions Grants Evaluation & Recommendations
☐ Conduct regular/annual CoC Plan (includes Point-in-Time Count)
☐ Fundraise
☒ Other: Adopt HMIS charter

ATTACHMENTS OR BACK-UP INFORMATION TO REFERENCE:
See attached HMIS Charter

San Diego City and County Continuum of Care

Homeless Management Information System Governance Charter

HOMELESS MANAGEMENT
INFORMATION SYSTEM
GOVERNANCE CHARTER

Table of Contents

San Diego City and County Continuum of Care Charter

1. **Purpose**

   The San Diego City and County Continuum of Care operates a Homeless Management Information System (HMIS) to record and store client-level information with regard to numbers, characteristics and needs of persons who use shelter, housing and supportive services who are experiencing homelessness within the eighteen (18) cities and unincorporated areas that constitute the San Diego City and County Continuum of Care.

   HMIS is used to aggregate data about the extent and nature of homelessness over time; produce an unduplicated count of homeless persons; understand patterns of service use; and assist the San Diego City and County Continuum of Care to measure the effectiveness of homeless assistance projects and programs.

2. **San Diego City and County Continuum of Care Responsibilities**

   The San Diego City and County Continuum of Care is responsible for:
   - Designating a single information system as the official HMIS software for the geographic area.
   - Designating an HMIS Lead to administer the HMIS.
   - Providing for governance of the HMIS Lead, including:
     - The requirement that the HMIS Lead enter into written HMIS Participation Agreements with each Participating Agency requiring the Participating Agency to comply with federal regulations regarding HMIS and imposing sanctions for failure to comply; and
     - The user license fee, if any, charged by the HMIS.
   - Maintaining documentation evidencing compliance with this part and with the governance charter.
   - Reviewing, revising and approving the policies and plans required by federal regulation.

3. Designations

3.1. HMIS

The San Diego City and County Continuum of Care designates the Clarity software operated by Bitfocus, Inc. as the official HMIS for the San Diego City and County Continuum of Care geographic area.

3.2. HMIS Lead

The San Diego City and County Continuum of Care designates the Regional Task Force on the Homeless (RTFH) as the HMIS Lead to administer the San Diego City and County Continuum of Care HMIS.

4. Responsibilities of the HMIS Lead

The HMIS Lead is responsible for:

- Ensuring the operation of and consistent participation by recipients of San Diego City and County Continuum of Care and Emergency Solutions Grants (ESG) Program funds, along with Federal Partner programs including Substance Abuse and Mental Health Services Administration (SAMHSHA) People Assisting The Homeless (PATH) and Veteran Affairs (VA) Supportive Services for Veteran Families (SSVF) Participating HMIS Agencies, including oversight of the HMIS and any necessary corrective action to ensure that the HMIS is in compliance with federal requirements.
- Develop written HMIS policies and procedures in accordance with §24 CFR 580.31.
- Execute a written HMIS Participation Agreement with each Participating Agency, which includes the obligations and authority of the HMIS Lead and Participating Agency, the requirements of the security plan and privacy policy with which the Participating Agency must abide, sanctions for violating the HMIS Participation Agreement and an agreement that the HMIS Lead and the Participating Agency will process protected identifying information consistent with the agreement.
- Serving as the applicant to the US Department of Housing and Urban Development (HUD) for CoC grant funds to be used for HMIS activities for the San Diego City and County Continuum of Care's geographic area, as directed by the San Diego City and County Continuum of Care, and entering into grant agreements with HUD to carry out the HUD-approved HMIS activities.
- Monitoring and enforcing HMIS compliance by all Participating Agencies with HUD requirements and reporting on compliance to the CoC and HUD.
- Monitoring data quality and taking necessary actions to maintain input of high-

quality data from all Participating Agencies.

- The HMIS Lead must submit a security plan, an updated data quality plan, and a privacy policy to the CoC for approval within six (6) months after the date that any change is made to the local HMIS. The HMIS Lead must review and update the plans and policy at least annually. During this process, the HMIS Lead must seek and incorporate feedback from the San Diego City and County Continuum of Care and Participating Agency. The HMIS Lead must implement the plans and policy within six (6) months of the date of approval by the San Diego City and County Continuum of Care.

5. **Duties of the HMIS Lead**

   5.1. San Diego City and County CoC HMIS Policies and Procedures
   The San Diego City and County Continuum of Care HMIS must adopt written policies and procedures for the operation of the HMIS that apply to the HMIS Lead, its Participating Agencies, and the Continuum of Care. These policies and procedures must comply with all applicable Federal law and regulations, and applicable state or local governmental requirements. The HMIS Lead may not establish local standards for any Participating Agency that contradicts, undermines or interferes with the implementation of the HMIS standards as prescribed in this part.

   5.2. Reporting
   The HMIS Lead shall submit reports to HUD as required.

   5.3. Privacy
   The HMIS Lead must develop a privacy policy. At a minimum, the privacy policy must include data collection limitations; purpose and use limitations; allowable uses and disclosures; openness description; access and correction standards; accountability standards; protections for victims of domestic violence, dating violence, sexual assault and stalking; and such additional information and standards as may be established by HUD in notice. Every organization with access to protected identifying information must implement procedures to ensure and monitor its compliance with applicable agreements and the requirements of this part, including enforcement of sanctions for noncompliance.

5.4. HMIS Standards

The HMIS Lead, in contracting an HMIS vendor, must require the HMIS vendor and the software to comply with HMIS standards issued by HUD as part of its contract.

6. Responsibilities of the Evaluation Committee

The Evaluation Committee will work with the HMIS Lead to:

- Develop, annually review, and, as necessary, revise for Board approval a privacy plan, security plan, and data quality plan for the HMIS, as well as any other HMIS policies and procedures required by HUD.
- Develop for Board approval and implement a plan for monitoring the HMIS to ensure that:
  - Recipients and sub-recipients consistently participate in HMIS;
  - HMIS is satisfying the requirements of all regulations and notices issued by HUD; and
  - The HMIS Lead is fulfilling the obligations outlined in its HMIS Governance Charter and Agreement with the San Diego City and County Continuum of Care, including the obligation to enter into written participation agreements with each contributing HMIS agency.
- Ensure and review HMIS data collection and production of the following reports:
  - Sheltered point-in-time count;
  - Unsheltered point-in-time count;
  - Housing Inventory Chart(HIC);
  - Longitudinal System Analysis (LSA)
  - Annual Performance Reports (APRs) ; and
  - System Performance Measure.

7. Responsibilities of the Participating Agency

A Participating Agency must comply with federal regulations regarding HMIS. A Participating Agency must comply with Federal, state, and local laws that require additional privacy or confidentiality protections. When a privacy or security standard conflicts with other Federal, state, and local laws to which the Participating Agency must adhere, the Participating Agency must contact the HMIS Lead and collaboratively update the applicable policies for the Participating Agency to accurately reflect the additional protections.

8. Joint HMIS Lead - Participating Agency Responsibility for Privacy

The HMIS Lead and the Participating Agency using the HMIS are jointly responsible for ensuring that HMIS processing capabilities remain consistent with the privacy obligations of the Participating Agency.

Regional Task Force on the Homeless
HMIS Clarity User License Fee Structure

Types of User Licenses

HMIS Participating Agencies can purchase two different types of licenses that their staff can use to access San Diego County's HMIS software, Clarity: the Enterprise user license and the Manager license.

- **Enterprise User License:** The Enterprise User License is the standard Clarity user license that is assigned to all users who do not need access to a Manager license.
- **Manager License:** The Clarity Manager license is a license that includes access to agency/program management features and Clarity's data analysis interface, Looker. One user per agency is required to be assigned a Manager license; by default the Manager license will be assigned to the agency's primary HMIS administrator. Additional Manager licenses may be purchased/assigned upon request by the agency.

Fee Structure for Clarity Licenses

	2019 (1/1/2019 – 12/31/2019)	**2020** (1/1/2020 - 12/31/2020)
Clarity Enterprise User License	**Initial Setup Fee:** $175/new user license *For all user licenses added on or before 3/31/2019, the setup fee has been waived to facilitate the HMIS software transition.* **Monthly access fee (to be billed on a quarterly basis):** $25/user license/month *For all user licenses added on or before 3/31/2019, the monthly access fee has been discounted to $16.67/month (the equivalent of the monthly fee for one ServicePoint user license). This discount will apply to the total number of licenses added for each provider prior to 4/1/19 (even if a license is deleted and a new one added in its place) and will only be in effect until the end of the 2019 billing cycle. 2020 rates will apply to these licenses starting on 1/1/2020.*	**Initial Setup Fee:** $175/new user license **Monthly access fee (to be billed on a quarterly basis):** $25/user license
Clarity Manager License	**Initial Setup Fee:** $250/new Manager license *For one Manager license per agency (if added on or before 3/31/2019), the setup fee for the new license has been waived to facilitate the HMIS software transition.* **Monthly access fee (to be billed on a quarterly basis):** $55/Manager license/month *For one Manager license per agency (if added on or before 3/31/2019), the monthly access fee has been discounted to $29.17/month (the equivalent of the total monthly fees for a ServicePoint user license plus an ART Report Viewer license). This discount will apply to one total Manager license per provider (if added prior to 4/1/19) and will apply if a license that was added before 4/1/19 is deleted and replaced with another, as long as the original license was added prior to 4/1/19. This discount will only be in effect until the end of the 2019 billing cycle. 2020 rates will apply to these licenses starting on 1/1/2020.*	**Initial Setup Fee:** $250/new Manager license **Monthly access fee (to be billed on a quarterly basis):** $55/Manager license

Data Quality Incentives

RTFH may provide data quality incentives in the form of HMIS fee discounts. These incentives are not fixed or regular and will be provided and announced on an ad hoc basis. Information on incentives will be shared with providers once confirmed for each billing cycle.

Waiver Policy Statement

Waiver (or reduction) of fees for hardship may be submitted to RTFH and may be granted upon review. Requests for waivers must be submitted prior to the start of the upcoming billing cycle, so by January 1st of the year a waiver is being requested for.

Fees for other Requests

Other requests, including but not limited to custom reporting, data export/import and data integration projects, will be considered on a case-by-case basis. Cost estimates will be developed based upon a statement of work for the requested project.