

IN-PERSON COMMITTEE MEETING MINUTES

Thursday June 26, 2025, 11:30AM - 1:30PM

2400 Bisso Lane, Concord (suite #D2)

COMMITTEE PURPOSE:

The purpose of the Oversight Committee is to review and assess the development, implementation, and improvement of the CoC, Coordinated Entry System, HMIS Database, and system outcomes.

HOW TO JOIN THE MEETING VIA ZOOM:

Link to register: https://homebaseccc.zoom.us/meeting/register/tZcsf-

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How to Join the Meeting Via Call-In: 1-669-900-6833 / Meeting ID: 831 8462 0638

TIME	AGENDA ITEM	PRESENTERS
11:30am	Welcome, Introductions, & CoH Roll Call	- Wayne Earl, CoH
(10 min)	a. Welcome	- Juno Hedrick, CoH
	b. Review agenda	- Alex Michel, HB
	c. Introductions & CoH Roll Call	- Jamie Schecter, H3
	d. Mentimeter - Who's in the Room?	
Notes:		
• Int	ros, welcomes, roll call, and Mentimeter activity	
• No	comments	
11:40am	2025 Meeting Logistics	- Wayne Earl <i>, CoH</i>
(5 min)		
Notes:		
Pro	vided overview of meeting logistics	
• No	comments	
11:45am	Public Comment	- Courtney Pal, CoH
(5min)	a. Open period for public comment on items not listed on	- Members of the public
	the agenda.	
Notes:		
• No	comments	
11:50am	Review February 20, 2025 Mtg. Key Takeaways & Approve	- Alex Michel, HB
(5 min)	Meeting Minutes	
	a. Key takeaways from the February 20,2025 meeting:	
	 Approved October 17, 2024 meeting minutes 	
	Identified Oversight Committee Co-chairs	
	Approved 2025 Oversight Workplan	



	 Heard presentation on CoC/CES 101 		
	 Update on CES Assessment Tool Redesign 		
	 Update on Participant Satisfaction Survey results 		
	Reviewed Accountability Corner		
	ACTION ITEM: Approve the meeting minutes from		
	February 20, 2025		
Notes:			
Rol	 Roll call vote to approve Feb. 20, 2025 meeting minutes 		
o Leslie motioned			
o Mia second			
o All members voted yes			
	O Motion passed!		
11:55am	Coordinated Entry Updates	- Mary Juarez-Fitzgerald, H3	
(30min)	a. Prevention Screening Tool updates	- Chela Shuster, Focus	
	b. Assessment tool redesign updates	Strategies	
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Notes:

Prevention Screening Tool updates

- Question: how are we managing determining if a caller is from Contra Costa County or from another County?
 - JS: when they call 211, callers are connected to location where they are currently located, and screening should happen during the call with 211 so that callers are connected to the appropriate county
 - O MJF: Additionally, if/when callers are enrolled in CES, their location is captured; with that said, we don't see it often that people are coming in from different locations.
- Question: Do callers know that their info is being recorded on HMIS?
 - o MJF: Yes
- Question: Will alternative resources still being triaged through 211 for those that prevention triage may not be appropriate?
 - MJF: Yes, 211 will still be able to provide info on other community resources that are available
 - O JS: Also, if providers haven't seen their 211 listing in awhile, they can submit changes themselves, so it is a good idea for providers to check to ensure the info is up to date.
- Question: Regarding the equity piece, when a caller calls, are they being asked their racial identity, otherwise how is this measured? This can be a triggering point and could be a barrier or deter the person calling.
 - MJS: It is asked in the assessment; also the assessments asks about other identities as well, not just racial identity, and persons can decline to share
 - O JS: this is a HUD requirement, so we have to ask



- Question: Could the identifying information collected disqualify them for any resources they apply for?
 - o MJF: No
- Question: Thinking about the work we did last year around points of contacts, and how we may need to shift it this year with these new initiatives. Specifically, how do we prepare for school-related interventions so that we have this correct information so that we are funneling people to the appropriate services and so that we don't create redundancy.
 - O JS: I think on our outreach things won't change too drastically. To access these resources people can call 211, 211 will then do assessment and route them to the appropriate services depending on need. We still want to be providing the same information regarding access; remove redundancy and also target the resources that people need.

Assessment tool redesign updates

- Question: What is the rationale for having the different thresholds for the two different household types?
 - O Claire: Our analysis we are looking at the two household types separately, and thus are building two predictive models, one for adult only households, and one for families; the purpose of setting the thresholds differently is because we are aiming to get about 25% of each of the household types meeting 1 or the other criteria so that the type of predictive analysis were using works effectively. If you have too few or too many people who meet the criteria then the model doesn't make good predictions. After some analysis we found that these thresholds meet the criteria for what we are aiming for.
 - O JS: clarify that for example if the threshold for families was lower, the number of families would have been too low and thus the predictions wouldn't have been as effective; this makes if comparable.
 - O Chela: Additionally, in our stakeholder engagement, we found that there are distinct vulnerabilities between household types and it's important that we look at them separately
- Question: Can you define disability status? What are the various disabilities you're looking at?
 - O Claire: Here we are just looking at whether someone has 1 or more of the various disability conditions listed in HMIS, however when we do the assessment tool, we may sparse out the different disability conditions and treat them differently depending on the data.
 - O JS: for reference the disabling conditions include: physical, development, chronic health condition, HIS/Aids, substance use, mental health
 - O V: Is this self-identifying?
 - JS: Yes, this self identifying
- Comment: The housing assessment is the triggering event that produced the data, but it has been my experience in the field that those suffering with these conditions often are not connected and do



not have these assessments because they are actively struggling with these disabilities, and thus they are not captured in this data so it seems that the data is likely skewed.

- O Claire: Yes, and in predictive model we are looking at inputs that are from HMSI and other data (emergency system utilization, etc.) to try to better capture the systems that households are using but not being tracked necessarily through HMIS to try to build those gaps
- Comment: Because it is self-reported data, a lot of it is likely skewed, for example data around sexual orientation and gender identity.
 - Claire: Yes, absolutely and we'll talk about some of that data shortly
- Question: If you reduce the threshold, does it equalize between the two racial identity groups, because this could be a cliff issue; have you played with lowering the threshold?
 - O Claire: Yes, we've tinkered with threshold, but we settled on 12 for adults, 6 for families because the distribution was fairly equitable across groups at those thresholds, and it was easier to conceptualize with these clean round numbers; the distribution of the numbers doesn't have a clear cliff or cutoff, it is messier
- Question: can you clarify what you mean by female heads of household is that single female household or families lead by female?
 - O Claire: In this analysis we are looking at people who are in adult only and family household types so it includes households where there is only one person who identifies as a female and also households that have 2 adults but who is head of household identified as female, and it includes when a female is assigned head of household w/ children whether there is another adult in the household or not
- Question: Sounds like you're taking considerations in monitoring the gender identity data, what do those considerations look like? Interested because a lot of folks don't self-report.
 - O Claire: Gender-based identities are self-report and they may or may not disclose their gender identity. For the analyst, we are looking people who identify with each gender category separately; right now in HMIS people can identify as various identities and are therefore being captured in both categories; it's safe to say gender identities are under counted because not everyone feels safe to disclose; we only have the data that we have, if folks aren't sharing that identity, we can't monitor how they are self-identifying
 - O JS: we are working to get more robust data set to try to capture some of these discrepancies
- Question: post-period is individual for each head of household?
 - O Claire: Yes, post period starts the day after they complete housing needs assessment
- Question: clarifying number of clients, via head of households, include clients with families?
 - o Claire: yes
- Question: number for household w/ disability?
 - Claire: heads of households in the client cohort is 62% reported 1 or more disabling conditions



	O JS: lower than PIT count. HMIS includes a lot of different t	whos of programs; not overvene is	
	 JS: lower than PIT count, HMIS includes a lot of different types of programs; not everyone is experiencing chronic homelessness and not everyone is experiencing unsheltered 		
	homelessness	xperiencing unsheltered	
	 Comment: disclosing of disabilities could be less reported 	herause of social connotations	
	associated with these conditions.	because of social conflotations	
12:2Enm		- Shelby Ferguson, H3	
12:25pm (15min)	Program Models & Performance Standards Updates	- Shelby Ferguson, H3	
(1311111)	Link to Program Models & Performance Standards		
Notes	Link to <u>Frogram Models & Ferrormance Standards</u>		
	oped this section and will save for the August 2025 Oversight	t work group	
12:40pm	2024 NOFO Application Debrief	- Jamie Schecter, H3	
(10min)			
Notes:			
JS r	eviewed 2024 NOFO application debrief		
• Qu	estion: What does the number (score) actually represent? Hov	w are point deductions decided?	
	O JS: Each section of application is worth certain points, so i	f there is something that does not	
	meet the expectation for that section then we get the poi	nt deductions	
• Qu	estion: For the third area where we lost points on - who is resp	ponsible or aligned to help improve	
tha	t?		
	O JS: It's us, H3 and CoC to ensure that we are building these	e connections; some of it is a	
	capacity issue as well. We're hoping to build capacity so w	ve can get all the important partner	
	into this work!		
12:50pm	YAB Update	- Juno Hedrick, CoH	
(5min)			
Notes:			
	vided an update on YAB activities that occurred during the mo	onth of May	
	o update on activities for YAB in the coming months		
	it has been amazing to see many YAB members going into diffe	erent community spaces as	
ind	ividuals (not as YAB) and it great to see!		
12:55pm (5min)	PIT & Annual Report Update	- Jamie Schecter, H3	
Notes:	1		
	provide brief update		
-	•		
		- Michele Byrnes. HB	
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Notes:			
Notes: • Pro	vided update on 2025 monitoring process		
• JS p	comments 2025 Monitoring Process Update	- Michele Byrnes, <i>HB</i> - Alex Michel, <i>HB</i>	



1:15pm	Accountability Corner	- Jamie Schecter, H3	
(5min)	a. Review 2025 Q2		
Notes:			
• sk	ipped this section and will save for the August 2025 Oversight wo	rk group	
1:20pm	n Adjourn - Courtney Pal, <i>CoH</i>		
(5 min)	a. Review next steps		
	b. Overview of upcoming meetings		
Notes:			
• Re	viewed next steps		
No comments			

Acronym	Definition
APR	Annual Performance Report (for HUD homeless programs)
CARE	Coordinated Assessment and Resource
CCYCS	Contra Costa Youth Continuum of Services
CDBG,	Community Development Block Grant (federal and state programs) and the federal
CDBG-CV	Community Development Block Grant CARES Act coronavirus allocation.
CES	Coordinated Entry System
CESH	California Emergency Solutions and Housing program (state funding)
Continuum of	Continuum of Care approach to assistance to the homeless. Federal grant program
Care (CoC)	promoting and funding permanent solutions to homelessness.
Con Plan	Consolidated Plan, a locally developed plan for housing assistance and urban development under CDBG.
CORE	Coordinated Outreach Referral, Engagement program
COVID-19	Coronavirus
DOC	Department Operations Center
EHSD	(Contra Costa County) Employment and Human Services Division
EOC	Emergency Operations Center
ESG and ESG-	Emergency Solutions Grant (federal and state program) and the federal Emergency Solutions
CV	Grant CARES Act coronavirus allocation.
ESG-CV	Emergency Solutions Grant CARES
FMR	Fair Market Rent (maximum rent for Section 8 rental assistance/CoC grants)
HCD	Housing and Community Development (State office)
HEAP	Homeless Emergency Aid Program (State funding)
HEARTH	Homeless Emergency and Rapid Transition to Housing (HEARTH) Act of 2009
HHAP	Homeless Housing and Assistance Program
HMIS	Homeless Management Information System
HOME	Home Investment Partnerships (CPD program)
HUD	U.S. Department of Housing and Urban Development (federal)



MHSA	Mental Health Services Act
NOFA	Notice of Funding Availability
PHA	Public Housing Authority
PUI	Persons Under Investigation
SAMHSA	Substance Abuse & Mental Health Services Administration
SRO	Single-Room Occupancy housing units
SSDI	Social Security Disability Income
SSI	Supplemental Security Income
TA	Technical Assistance
TAY	Transition Age Youth (usually ages 16-24)
VA	Veterans Affairs (U.S. Department of)
VASH	Veterans Affairs Supportive Housing
VI-SPDAT	Vulnerability Index – Service Prioritization Decision Assistance Tool

EQUITY DEFINITIONS

(adapted from C4 Innovations and approved by COH on 8.3.23)

Term	Definition		
Individual Racism	A person's beliefs and actions that serve to perpetuate racial oppression. This can be conscious and unconscious. This may be externalized or internalized		
Institutional Racism	Policies and practices at the organization (or "sector") level that perpetuate oppression. It involves unjust policies, practices, procedures, and outcomes that work better for white people than people of color, whether intentional or not.		
Interpersonal Racism	The interactions between people - both within and across racial groups		
Microaggressions	Brief, everyday exchanges that send denigrating messages to certain individuals because of their group membership		
Race	A social construct created in the 17th century by white Europeans to justify the enslavement of Africans and the spread of colonialism. Understanding of race as a concept has changed over time, but the outcomes of discrimination based on race remain entrenched in our systems.		
Race Equity Lens	A way of viewing the world in an integrated and holistic manner, taking into account past and present racial injustices and seeking to address them through more equitable practices and structures.		
Racial Bias	Implicit and/or explicit bias that reinforces discriminatory attitudes and behaviors when interacting with people or situations		



Racial Equity	The condition where one's racial identity does not predict their social, health, or economic outcomes. Racial equity is a process of eliminating racial disparities and improving outcomes for everyone. It is the intentional and continual practice of changing practices, systems, and structures by prioritizing the measurable change in the lives of people of color.
Racism	A system of institutional, systemic oppression, and practices of individuals and society that shape cultural beliefs and values that support racist policies and practices.
Structural Racism How these effects interact and accumulate across institutions and across Structural racism highlights how racism operates as a system of power winterconnected, reinforcing, and self-perpetuating components which reinequities across all indicators for success.	
Systemic Racism	infrastructure of rulings, ordinances or statutes adopted by a sovereign government or authoritative entity, whereas such ordinances and statutes entitles one racial group in a society certain rights and privileges, while denying other groups in that society these same rights and privileges because of long-established cultural prejudices, religious prejudices, fears, myths, and Xenophobia's held by the entitled group
White Fragility	White fragility refers to feelings of discomfort a white person experiences when they witness or engage in discussions around racial inequality and injustice. Their engagement in conversations about racism may trigger a range of defensive actions, feelings, and behaviors, such as anger, fear, and silence. These reactive behaviors reinforce continued white dominant culture.

	Member	Affiliation	Attended y/n virtual/in- person	Approve Feb 2025 Meeting Minutes
1	Alejandra Chamberlain (she/her)	Education and Vocational Services Representative	y, in-person	yes
2	Courtney Pal	Affordable Housing Developer Representative	y, virtual	yes
3	Juno Hedrick	Lived Experience Advisor #1	y, virtual (later in person)	yes
4	Leslie Gleason (she/her)	CoC/ESG Program Grantee Representative	y, in-person	motion, yes
5	Mia Fairbanks	Health Care Representative (Healthcare for the Homeless)	y, in-person	motion, yes



6	Verneda Clapp	Workforce Development Representative	y, in-person	yes
7	Wayne Earl (he/him)	Faith Community Representative (Rock Harbor Christian Fellowship)	y, in-person	yes

Oversight Committee CoH Member Roll Call & Voting Record (6/26/2025)

Y = Yes (specify if virtual or in person) // N = No // A = Abstain // Quorum = 4