Meeting Minutes

March 4, 2020 (12:00 pm -1:30 pm)

Primary Care Center 4600 Broadway Sacramento, CA 95820 Conference Room 2020

Moderator: Dr. Farla Kaufman – Chair

Scribe: Sheila Robertson - Staff

Board Attendees: Barbara Law, Jofil Borja, Paula Green, Kathleen Wright, Jack Zwald, Philip Summers, Farla Kaufman, Jennifer Anderson, Jeffrey Rabinovitz, Steve Orkand, Emanuel Petrisor, Annie Tat, Sandy Damiano

Board Members Excused: Dr. Olivia Kasirye (Ex-officio), Christina Slee

Board Members Absent: Peter Beilenson

Guest Speakers: Erin Johansen, Michael Meyer, Rolando Villareal

Guest: Erin Johansen, Hope Cooperative, Michael Meyer and Rolando Villareal – Sacramento County Environmental Management Department

Topic	Minutes
Meeting Opened	Meeting started at 12:02pm
Welcome and Introductions	Dr. Farla Kaufman welcome each board member and guest introduced themselves.
Minutes Review	Minutes from February 5 meeting were approved with minor corrections.
PHAB Vacancies/HIV Health Services Coordinating Council Appointment	Vacancies: PHAB currently has 1 vacancy No Appointments

Primary Health Services Division Update	Dr. Farla Kaufman
Women, Infants & Children (WIC) Adult Correctional Health	 Women, Infants & Children (WIC) Dr. Damiano apologized for missing her WIC Director's Report. Adult Correctional Health This program is now operating under a Consent Decree. Approved by the Federal court in early January. Staffing shortage (providers and nursing) is extremely challenging and it is impacting our access as well as initiatives. Began provision of discharge medication in late December. Initially for sentenced adults with Serious Mental Illness (SMI) and in mid-January to entire sentenced population. This is a complex process and we are still working on overcoming operational challenges. Discharge planning is a multi-step process requiring additional resources. Mental health have been working on linkage to county mental health providers for the SMI population. Began Medication Assisted Treatment (MAT) in late 2019. Providers trained on use of MAT for Alcohol Use Disorder and currently our Medical Director is working on MAT for Opioid Use
	Disorders. This initiative is focused on continuation medication. The provider shortage is impacting all work.

Hope Cooperative

Mission Statement

• Transform the lives of those living with mental health challenges, substance use disorders and homelessness by supporting their independence, promoting their housing stability, and empowering them to make positive changes in their lives.

Resilience Connect Transformation

• Hope Cooperative (formerly TLCS) has been providing mental health and supportive housing services for people with mental health challenges for nearly 40 years in Sacramento County. As a client-driven organization, we are dedicated to the independence and empowerment of individuals with psychiatric and other disabilities. We serve over 6,000 people in our community each year offering a full array of services and supports. Many of our clients are homeless when they begin their Hope Cooperative journey and are now successfully living in a "forever" home. Our 215 dedicated and compassionate staff members are committed to culturally sensitive services that support clients on their path to self-sufficiency.

Awards and Recognition

- 2015 Sacramento Housing Alliance Social Justice award winner
- 2019 Bank of America's "Neighborhood Builder"
- 2020 Downtown Sacramento Foundation JVance Steward Community Service Award

Service and Supports

- Since 1984 Hope Cooperative aka TLCS has owned or operated a variety of residential properties.
- Currently we are housing 163 people
- Cooperative Housing
 - Interim Housing
 - o Individual and Family Apartments
 - o Transition to Rapid Rehousing for Transition Age Youth Experience Homelessness
 - **New Direction** Full Service Partnership serving 320 people with serious mental illness experiencing homelessness using a "whatever it takes" approach.
 - TCORE A moderate intensity program serving 750 people who have interacted with jails and hospitals
 - Regional Support Team a mild to moderate intensity program serving 1100 people with serious mental illness, many of whom are homelessness, at risk of homelessness or housing insecure

- Triage Navigator/MCST Program Staff is embedded in all local emergency departments and with law enforcement agencies. Peer navigators follow clients for up to 60 days to create linkages to community mental health services.
- o **Crisis Respite Center-open** 24/7 serving adults in MH crisis. Guest can stay up to 23 hours as a non-medical alternative to emergency room care.
- Co-occurring Disorders Treatment Program Outpatient substance abuse treatment for people with serious mental illness.
- FSRP An Intensive Case management program serving 90 of the people who have been deemed to be the highest utilizers of county services.
- Clubhouse A membership day program designed to provide supported employment and opportunities for meaningful activity including volunteering, education and social connectedness.

Homelessness in Sacramento

- The 2019 Point-in-Time Count revealed that there are more than 5,000 men and women experiencing homelessness on the streets of Sacramento up 19% in the last 2 years. This includes 1670 who accessed emergency shelter or transitional housing on this night.
 - o 93% were from Sacramento County of Sacramento
 - o 30% of the individuals sleeping outdoors are over the age of 50
 - o 9% identifies as LGBTQ
 - $\circ\quad$ 30% met the definition of chronically homeless
 - o 56% of all people experiencing homelessness are unsheltered, single adults
 - People in families with children represent 20% of all people experiencing homelessness
 - o 8% of individuals are unaccompanied youth mostly transition age youth 18-24
 - o 26 percent have a debilitating cognitive or physical impairment
 - 21 percent have a severe psychiatric condition (such as severe depression or schizophrenia).
 - Eight percent (8%) indicated an ongoing medical condition (diabetes, cancer, or heart disease).
 - Nine percent (9%) reported that their use of alcohol or drugs prevents them from keeping a job or maintaining stable housing. More generally speaking, 60% of respondents reported that they use alcohol or non-medical drugs, but only 15% of these respondents indicated that their use of substances affected their ability to hold down a job or have stable housing.

 Most who indicated having a disabling condition (77%) cited two or more specific conditions; the most common combination was a psychiatric condition with a cognitive or physical impairment.

Homelessness in Sacramento – Who is doing what??

- The Continuum of Care (CoC) Program is designed by the US Housing and Urban Development to promote community-wide to the goal of ending homelessness. Sacramento Steps Forward is the lead agency for the CoC in Sacramento and collaborates with a 25 member stakeholder Advisory Board.
- Hope Cooperative aka TLCS holds the first Rental Assistance HUD grant in Sacramento County managing 195 HUD vouchers. We are active member of the Continuum of Care and our CEO is the Vice Chair of the COC Board
- COC Providers Offer: Rapid Rehousing, Permanent Supportive Housing, Transition to Rapid Rehousing for Youth:
 - o Providers:
 - Hope Cooperative
 - Sacramento Self Help Housing
 - Wind Youth Services
 - Lutheran Social Services
 - Mercy Housing
 - SHRA Shelter Plus Care
 - Next Move
 - Cottage Housing
 - VOA
- The City of Sacramento
 - o Whole Person Care ending soon, to be replaced with?
 - o Sheltering:
 - First Step Communities
 - Capital Park Hotel managed by SHRA
 - X Street coming soon
 - Meadow View coming soon, families
 - Youth Cabins coming soon, transition age youth

The County of Sacramento

- Flexible Housing Pool Serving approximately 600 families with various funding sources providing Intensive Case Management and Property Related Tenant Service.
- Scattered Site Sheltering for Facilities https://dhaservices.saccounty.net/efs
- VOA Shelter
- Behavioral Health Programs Flexible Housing Program: Most adult contracts have funding for prevention, diversion, rent gap etc.

SHRA

- Dedicated Housing Choice Vouchers to Chronically Homeless Individuals
- o Operates Shelter + Care Voucher Program partnering with service providers
- Support development of Subsidized Affordable Housing Units such as "No Place Like Home"

RELEASE FROM HOSPITAL

- WellSpace Health
 - Interim Care Program release to shelter for short term nurse managed respite.
 - T3 Emergency department Navigation to case management
 - Inpatient Navigation: Case management upon discharge
- Question If you are homeless, how do you access help?
- Answer-It's complicated

How to get on the "By Name List"

- Enter an Access Point and complete a VISPDAT-Vulnerability Index-Service Prioritization Decision Assistance Tool
 - 1) HMIS (Homeless Management Information System) Complete Profile and
 - 2) Complete VISPDAT
 - 3) Remain Active in system by receiving a documented service in the last 90 days

ACCESS POINTS

- 211 Make an appointments for Wellness and Recovery South, Sacramento Veterans Resource Center
 - Street Outreach –
 - o Sacramento Steps Forward
 - Downtown Library, Downtown Partnership, Midtown Partnership, Sutter Hospital, One Community Health Midtown)

Sacramento Self Help Housing

- Citrus Heights, Florin-Mack Road Partnership, Elk Grove, Folsom, Rancho Cordova HART).
- DHA –

The GUEST HOUSE

- o The main access point for people with mental health needs who are homeless
- o 600 Bercut Drive, Sacramento, California 95811
 - Walk-ins are accepted Tuesday and Wednesday at 10:00 am and Thursdays at 1:00pm
 - Telephone: (916) 440-1500

Shelters

 Capital Park Hotel, coming soon-all shelters funded by City and County of Sacramento

How Does the Community Queue Work?

- By-Name-List (5,799 People 02/04/20)
 - Is literally homes
 - o Service or contact entered in HMIS within 90 days

• Community Queue (3,586 People)

- o Eligible for By-Name-List
- Has VI-SPDAT

• Priority Queue for PSH (30 People)

- Priority from the CQ for vulnerability and length of homelessness. Priority Queue size is ~2x the anticipated openings for the month.
- PSH Referrals Made
 - Priority Queue client who is eligible for current program opening

What do homeless people think they need?

• #1 ANSWER-AFFORTABLE HOUSING!

- Affordable house 45%
- Provide jobs/training 19%
- o Rental assistance 16%
- Beds at emergency shelters 15%
- \circ Storage for my belongings 9%
- Mental health Services 8%
- Public restrooms 7&
- Food banks 6%

- Pet-friendly services 4%
- Healthcare
- 45% of individuals said Sacramento needs to be provide more affordable housing

WHAT IS NEEDED?

- 1) AFFORDABLE HOUSING progress is being made with NPLH but not near enough and not near fast enough. Our community is not competitive with Tax Credits, the main funding source for subsidized housing due to inadequate local leverage.
- 2) A good system map and gaps analysis
 - **a.** This is in the works with CESH Funding from the state however the vast web is complicated and this work may not be complete when done.
- 3) Coordinated Access Points that the community can find
- 4) ALL programs using the same coordinated entry system including DHA, DBHS, COC etc.
- 5) MORE SUBSTANCE ABUSE TX SERVICES INCLUDING INPATIENT FOR METHAMPEHETAMINES Prop 47 funds?
- 6) Research devoted to Medically Assisted TX for METH

Sacramento County Environment Management Department (EMD) Proposed Five Year Fee Schedule Michael Meyer, Chief, Environmental Compliance Division Rolando Villareal, Deputy Chief, Environmental Health Division

Our Mission: Protect Public Health and the Environment

- Conducted 29,462 Countywide Inspections in FY 2018/2019
- 124 FTE Specially Trained and Registered Environmental Health Specialists and Support Staff
- 34 Environmental Programs
- Special Fund Department 100% Special Revenue Supported
 - Resolution Number 2004-1210

Fee Study

- Comprehensive Analysis
 - o Facilitated by independent 3rd party-Wohlford Consulting
 - Multi-level staff involvement

	Public Health Advisory Board
	Time Study Salaries and Benefits Services and Supplies Supporting Department Services Fee Determination Service Levels Staff Positions Regulatory Requirements Overhead and Support Cost-recovery Rate
	 Technology Paperless Inspections Integration with California Environmental Reporting System Electronic Data Validation
	Streamline
	 Exceptional Time Complex inspections and/or large facilities Excess of allocated permit time Complaint response
Environment Health Division Kelly McCoy, Chief Environmental Health	 Environmental Health Division Food Protection Mobile Food Facilities Cottage Food Program Food Safety Education Recreational Health Tobacco Retailer Program Construction Plan Review Noise

- Employee Housing
- Detention Facilities
- Lead Illness
- Waste Tire Program
- Body Art
- Storm Water
- Smoking Control

Types of Food Facilities

- Restaurants
- Convenience Stores
- Grocery Stores
- Cafeterias
- Coffee Shops
- Bakeries
- Hospitals
- Farmers Markets
- Mobile Food Facilities
- Festivals
- Bars
- Cottage Food Operations
- Commissaries
- Produce Stands
- Caterers
- Swap Meets

In FY 18/19:

- 6,437 Permits issued
- 17,211 Routine food inspections
- 1,688 Re-inspections

Retail Market < 6,000 sq. ft.	T donc realth Ac	avisory board			
 Fee Description Retail Market < 6,000 sq. ft. \$ 619 Restaurant with Bar \$ 1,665 Restaurant \$ 1,292 Food Preparation \$ 1,014 Storm water – Restaurant \$ 83 Proposed Food Program Fee Schedule with a 3 year phase-in Fee Description Current Fee Effective Effective July 2020 Mobile Food Facility Effective July 1, \$ 519 \$ 1,770 \$ 1,312 \$ 1,014 \$ 91 	Proposed Food Program	Fee Schedule			
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