

Proposal developed by Immediate Needs Liaison Member Jennifer Friedenbach.

General Comments:

Member	Comments
Brett Andrews	Given where we are with COVID-19, and that fact that most all of these projects are 1) an investment and 2) projects that need time to ramp up, here are my thoughts. Often in the meeting, it is referenced, the will and intention of the voter, and I respect that. It is also the will and intention of that same voter to actually do something with the funds. To that end, while I want these funds to be given considerable thought, and expended within the intention and spirit of the proposition, time is not necessarily on our side. The voters are looking for outcomes – sooner than later! I don't think the voters would support pushing projects out by 2-3 years, given our homeless situation and the conditions on the streets.  I fully support the HSH Proposal.
Julia D'Antonio	I agree with all these amendments and agree with delaying MHSF.
Shanell Williams	I agree with most of the immediate needs liaisons recommendations. Would like to discuss more subsidies for the Bayview.

Proposal regarding HSH's immediate needs request - Accept HSH request with the following exceptions/changes:

1. Fund only phase 1 & 2 housing exits costs in year 1 in this current recommendation. Allow department to provide additional data later to justify further release of funds.

Based on Member Feedback: Liaison Recommendation stands

Member	Comments
Brett Andrews	I support funding all four phases. This project is significant and involves capacity building in the housing space, and could benefit from a public private partnership. Private investors would need to see the full scope of the project outlined before they invest. Short funding undercuts the probability and idea of encouraging these projects to look for, and be successful in securing alternative funding to support the initiatives, which has been communicated a few times in the meetings.
Julia D'Antonio (Vice Chair)	[agree]
Jennifer Friedenbach	Yes, This would allow us time to reassess if strategies are working, make adjustments, find matching funds, and be more strategic.
Shaun Haines	
Julie Leadbetter	

<p>Lena Miller</p>	<p>Recommendations should be made within one week of HSH providing requested information, including data on needs, budget, cost per person, etc. For example, since the department is recommending RRH over Adult Flex Pool subsidies, it is important to clarify how much RRH costs per person and success rate as compared to Adult Flex Pool subsidies.</p>
<p>Cynthia Nagendra</p>	<p>Agree. I support this part of the OCOH proposal for a few key reasons.</p> <ul style="list-style-type: none"> <li>• Funding the first two phases of HSH’s proposal allows OCOH to make immediate and urgent decisions regarding the important needs of people experiencing homelessness in the SIP hotels who need housing resources as well as for those people experiencing homelessness who are <i>not</i> in the hotels.</li> <li>• Providing the city and the committee more time to consider how to fund Phases 3 and 4 to get the best outcomes for people experiencing homelessness and how those recommendations fit into the larger strategic goals of OCOH to prevent and end homelessness for as many San Franciscans as possible ensures that the Committee’s future decisions can be informed by a more detailed, data-driven process of system modeling of how to strategically target investments of the fund in the longer term. This should be accomplished through a comprehensive strategic planning process.</li> <li>• Funding phases 1-4 without more understanding of what changes will happen in the near future and with an absence of more comprehensive data on people’s needs projected in phases 3-4 would tie up a significant portion of OCOH funds, some for several years to come because of long-term investments, without having the time to understand the long-term impacts and costing. OCOH can use a little time to model and create a plan for the funds that reaches agreed upon outcomes such as reducing unsheltered homelessness, reducing returns to homelessness, increasing permanent housing exits, and focusing on racial and other inequities in homelessness and access to housing and services.</li> <li>• OCOH will still provide a proposal for funding for Phases 3 and 4 at the appropriate time after having had Jan – March to conduct stages of the strategic planning process. OCOH will be able to gather existing data to inform multi-year investment strategies supported by alignment across departments on clearly defined outcomes. To make this planning process effective at designing achievable outcomes and a plan on how to reach them, OCOH can work with city departments to develop:             <ul style="list-style-type: none"> <li>○ More comprehensive projections of the needs for different types of housing and services interventions to support successful exits to permanent housing among SIP guests</li> <li>○ Clear modeling of the costs of providing those housing and services interventions;</li> </ul> </li> </ul>

	<ul style="list-style-type: none"> <li>○ Information detailing what proportion of costs are projected to be covered by OCOH Fund resources and what are projected to be covered by other eligible state and federal funding that may come to the system in 2021</li> <li>○ Detailed projections of impact of proposed uses of OCOH Fund resources on availability of OCOH Fund resources in future years</li> <li>○ Analysis of racial equity impact of rehousing activities to date and of the proposed rehousing strategies</li> </ul>
Ken Reggio	Open to recommending approval of funding beyond Phases 1 and 2 if HSH can make clear case that current release is needed in order to plan and implement further phases effectively. Particularly where lease or acquisition of properties is concerned, lead time will likely be needed.
Shanell Williams (Chair)	[agree]

2. Do not put additional funding into problem solving.

Based on Member Feedback: Fund half of the request - \$2 million total into problem solving adjusted for phase 1 and 2 would total \$1 million. Consider adding additional million for last two phases of SIP shutdown in later allocation.

Member	Comments
Brett Andrews	
Julia D'Antonio (Vice Chair)	[agree]
Jennifer Friedenbach	Yes, Longer term solutions should be prioritized. Got word back from DSHS that if they don't have any money added to fund, they will have exiting dollars to use, but no one outside of SIP could access. I am open to small expansion to the fund, maybe half, if it is a one time expenditure.
Shaun Haines	
Julie Leadbetter	
Lena Miller	I disagree with this recommendation and believe that additional funding should be put into problem solving. I would like additional information regarding how many people this will cover, the average amount available to them, etc.
Cynthia Nagendra	<p>If this funding absolutely cannot be found elsewhere, I recommend OCOH funds some amount of these short-term flexible problem-solving funds. It's a short-term investment for OCOH and is only being targeted to 10% of people. (It is worth noting that federal funds, such as ESG CARES Act funds can also be used for problem-solving.)</p> <p><i>When properly targeted to people who can most benefit from a lighter touch intervention, housing problem-solving/diversion in other communities such as Alameda County and Los Angeles as well as here in San Francisco has been shown to help a percentage of people exit homelessness quickly. (It would be helpful to see more data on how this intervention is working in San Francisco and hear from providers who do this work on the ground on their needs.)</i></p> <p>I have included further comments on problem-solving<sup>i</sup> below that don't need to be incorporated for decision-making purposes.</p>
Ken Reggio	If HSH can speak to success of the program to-date, I'd favor adding up to the full amount of the request. If success isn't already demonstrated, I'd favor a more limited amount, maybe half, with further positive recommendation down the road if investment shows success.
Shanell Williams (Chair)	[agree]

3. Change 300 Adult Rapid Rehousing (RRH) placements to Adult Flex Pool subsidies. Ensure any Flex Pool subsidies are on-going, market rate, and include funding for appropriate level of case management.

Based on Member Feedback: Move 150 over to flex pool, (savings of \$3.15 in rapid re-housing, additional cost of 1.7 million in flex pool category), Re-evaluate RRH moving into phase 3 and 4.

Member	Comments
Brett Andrews	
Julia D'Antonio (Vice Chair)	[agree]
Jennifer Friedenbach	Yes, this would maintain a reasonable number of RRH subsidies that have a more realistic chance for success. I am open to increasing number of RRH but only if the length of time is extended or an opportunity to revisit if they are not successful. But very concerned about ability to find landlords willing to rent on short term, and concerned about churning folks back to streets. Do not think 500 is realistic
Shaun Haines	
Julie Leadbetter	
Lena Miller	I think this is a good concept but if it is not accompanied by cost estimates, it is difficult to understand the impact. How much does it cost to fund 1 person under adult flex pool and how much does it cost for RRH. This information will enable us to understand how to evaluate. If 1 Adult Flex Pool costs \$500k and 1 RRH grant costs \$30k, than that is 6 people that we can ensure have a safe place to live compared to 1 person. It would also be good to provide data clarifying the effectiveness of RRH, around the country and in SF.
Cynthia Nagendra	Disagree on cutting this much RRH from the proposal. I absolutely agree that it is important to get more long-term subsidies into the system. However, homeless response systems need as many types of flexible housing options as possible to flow as many people from homelessness to permanent housing quickly and effectively. While it would be ideal if all people who were severely rent burdened could access a long-term housing voucher, this is currently not possible. Also, every person requires PSH to be able to obtain and sustain housing and SF has almost entirely invested in this only intervention. An effective homelessness response system should be laser-focused on obtaining permanent housing for people and this can be done through a variety of housing options (if properly targeted). Veteran homelessness was reduced by over 50% across the country, and even reduced in California's expensive housing market, through a mix of RRH, PSH, and coordinated services. (RRH can also turn over to help new people ever couple of years or less.) Right now, some RRH providers in San Francisco are saying that landlords are coming to them because the rental market is more open than it has been in years. SF should try to lock down as many leases in this market as possible and RRH is an effective way to do that quickly. (I have

	<p>included longer comments on RRH<sup>ii</sup> below but those don't have to be incorporated for decision-making purposes.)</p> <p>San Francisco could create a city-wide rental assistance system that people under a certain income with severe rent burden could access when having a housing crisis.</p>
Ken Reggio	Favor as recommended by Liaison. If HSH shows success with the reduced number of RRH slots, I think OCOH Committee should welcome additional request at later date.
Shanell Williams (Chair)	[agree]

4. Add workforce development to Adult RRH program.

Based on Member Feedback: Liaison Recommendation Stands, however funding changed from \$600K to \$820K each year for 2 years, due to increased number of RRH.

Member	Comments
Brett Andrews	
Julia D'Antonio (Vice Chair)	[agree]
Jennifer Friedenbach	Yes, believe this is key to success of RRH. Currently funded to match with 200 RRH adults.
Shaun Haines	
Julie Leadbetter	
Lena Miller	I agree with this. In order for people to successfully graduate from the RRH program and become independent, they must have viable employment opportunities.
Cynthia Nagendra	I agree that providing linkages to workforce development opportunities in a real way for households as soon as they are engaged in rapid re-housing increases their ability to sustain housing when the subsidy ends. However, I am not clear on whether OCOH can condition how RRH is operated particularly when this capacity may not yet exist. I do think it is helpful to provide funds for workforce development to start this much needed capacity.
Ken Reggio	Favor as recommended by Liaison.
Shanell Williams (Chair)	[agree]

5. Add 20 Flex Pool subsidies for individuals experiencing homelessness in the Bayview who do not reside in SIP hotels.

Based on Member Feedback: Add 20 Flex Pool subsidies for individuals experiencing homelessness in the Bayview who do not reside in SIP hotels.

Member	Comments
Brett Andrews	
Julia D'Antonio (Vice Chair)	[agree]
Jennifer Friedenbach	Yes, key to have equity in proposal to non SIP and there was less access to hotels in Bayview.
Shaun Haines	
Julie Leadbetter	
Lena Miller	I agree with this recommendation.
Cynthia Nagendra	I support adding an increased array of housing resources for people in the Bayview. I may be conflicted to comment on flex pool subsidies.
Ken Reggio	Favor as recommended by Liaison.
Shanell Williams (Chair)	Would like to discuss more subsidies for the Bayview.

6. Change 20 TAY RRH slots to TAY Flex Pool subsidies.

Based on Member Feedback: Liaison Recommendation Stands. Decreases funding for TAY RRH by 20%, adds new category TAY Flex Pool for .42 in year one, .84 in year 2.

Member	Comments
Brett Andrews	
Julia D'Antonio (Vice Chair)	[agree]
Jennifer Friedenbach	Yes, This is a later edition and providers are asking for this for the 24-29 year old group that does not fit into RRH program which is limited to 24 years and under.
Shaun Haines	
Julie Leadbetter	
Lena Miller	I don't agree with this. TAY are the most resilient and able to acquire a skill and a career and eventually exit from homelessness, unless there is a disability or a parent is caring for a child with a disability or another significant life circumstance that would prevent them from joining the workforce and being compensated for their contributions.
Cynthia Nagendra	I support adding an increased array of housing resources for TAY including RRH and flex pool subsidies/PSH. I may be conflicted to comment on flex pool subsidies.
Ken Reggio	Favor.
Shanell Williams (Chair)	[agree]

7. Add 50 Flex Pool subsidies for Families who do not reside in SIP hotels.

Based on Member Feedback: Liaison Recommendation Stands

Member	Comments
Brett Andrews	
Julia D'Antonio (Vice Chair)	[agree]
Jennifer Friedenbach	Yes, key to have equity in proposal to non SIP and there was less access to hotels for families.
Shaun Haines	
Julie Leadbetter	
Lena Miller	I support this recommendation.
Cynthia Nagendra	I support adding an increased array of housing resources for families especially since families did not have as much access to SIP hotels and much of the housing resources now are being directed towards SIP hotel guests.
Ken Reggio	Favor.
Shanell Williams (Chair)	[agree]

8. Do not fund the Homekey grant match using OCOH funds; recommend the department/MYR/BOS use other sources for this cost.

Based on Member Feedback: Liaison Recommendation Stands with additional clarifying language: City to cover with alternative sources, if no alternative sources are identified and program is at risk, Prop C funds may be used.

Member	Comments
Brett Andrews	
Julia D'Antonio (Vice Chair)	[agree]
Jennifer Friedenbach	If city covers this with other sources, we could buy two more hotels. Oakland is buying 8. SF only 2. Certain there is deep commitment to this program and city will come up with match. They can find the money when motivated to do so.
Shaun Haines	
Julie Leadbetter	
Lena Miller	I support this recommendation, only if there have been funds available/set aside in the general budget. If funds to do not exist outside of the OCOH funds, I believe we should match them with the funds. If the Board of Supervisors have already voted this into the general funds budget, I believe that we should not use OCOH funds to support this item.
Cynthia Nagendra	I don't have enough information to understand whether these funds have been appropriated already or not and how to make an informed decision. Perhaps this could also be funded later in some portion if needed.
Ken Reggio	If correct that there is another source for the match, I'd agree with Liaison recommendation. If there is no match available from other City source, then I'd strongly favor use of Prop C funds as match on the Homekey acquisitions.
Shanell Williams (Chair)	[agree]

9. Fund the extension of Safe Sleep program, but do not fund the extension and revenue losses for emergency shelters (Moscone West and RV Site) using OCOH funds; recommend the department/MYR/BOS use other sources for this cost.

Based on Member Feedback: Liaison Recommendation Stands with additional clarifying language: City to cover existing programs with alternative sources, if no alternative sources are identified and program is at risk, Prop C funds may be used.

Member	Comments
Brett Andrews	
Julia D'Antonio (Vice Chair)	[agree]
Jennifer Friedenbach	Yes, There was general fund dollars for this allocated, they did not get expected FEMA. Open to replacing that, but should maximize GF dollars as this does not get ADDITIONAL people out of homelessness, it does not fit OCOH vision. However extension of RRH need to look at whether we want to do the 12 mil year 2, as cost is \$48 k per person per year, and may be better use of that funding then keeping people in tents. It is preferred to traditional shelter and nav, but perm housing is preferred to tents.
Shaun Haines	
Julie Leadbetter	
Lena Miller	Once again I agree with this recommendation as long as funds exist to cover these costs, for example, if there are funds that were already allocated by the Board of Supervisors in the general budget, then those funds should be used to cover these costs and we should preserve as much of the OCOH funding to fundamentally change the infrastructure and stock for housing unsheltered individuals.
Cynthia Nagendra	Agree to extend funding to Safe Sleep programs. Comment: It may be better to <i>not</i> put more people into congregate settings until the pandemic is more under control because of potential outbreaks in congregate shelter settings. Recent shelter outbreaks in San Diego and other communities show it is very difficult to prevent outbreaks in congregate settings, no matter how large. Preliminary research on models of transmission in congregate settings is showing it is very difficult to limit transmission of COVID even under the best circumstances (mask-wearing, testing, tracing).
Ken Reggio	Favor funding the extension of Safe Sleep program; open to funding the RV site from Prop C.
Shanell Williams (Chair)	[agree]

10. Fund a portion of provider pay equity from the OCOH administration allocation; recommend the department/MYR/BOS use other sources for the remainder of this cost. [Comment on portion to be funded.]

Based on Member Feedback: Liaison Recommendation Stands

Member	Comments
Brett Andrews	I support full funding. Many service providers used their PPP loan to provide Hero Pay for as long as they could. It seems pretty straightforward to me.
Julia D'Antonio (Vice Chair)	[agree]
Jennifer Friedenbach	yes, suggestion here is to use accumulated admin cut of Prop C, which is one time. This does not add exits out of homelessness in terms of a housing unit, or a treatment slot or shelter bed so it NOT to take housing tx and shelter away from unhoused people to pay for this.
Shaun Haines	
Julie Leadbetter	
Lena Miller	I agree with this recommendation. I believe all OCOH funding should go to house unsheltered people. Most of the existing congregate settings have been thinned out and this is their business. Most essential workers have not received hazard pay to perform the ongoing functions of their jobs.
Cynthia Nagendra	
Ken Reggio	Favor this year's bonus and open to it coming from Prop C funds, with request that HSH return to OCOH Committee and BOS with wage equity plan for workers in HSH-contracted orgs rather than bonus, to be implemented beginning in FY21-22.
Shanell Williams (Chair)	[agree]

11. Fund the current year (FY20-21) cost of extending leases and contracts at SIP hotels according to the revised rehousing plan; however revisit the FY21-22 SIP extension costs once additional information is available regarding FEMA and additional federal stimulus as possible alternative sources of funding for this cost.

Based on Member Feedback: Liaison Recommendation Stands

Member	Comments
Brett Andrews	
Julia D'Antonio (Vice Chair)	[agree]
Jennifer Friedenbach	Yes, lets extend hotels but get it back if we more funds come in.
Shaun Haines	
Julie Leadbetter	
Lena Miller	I agree with this recommendation.
Cynthia Nagendra	Agree.
Ken Reggio	Open to recommending Prop C funding for FY21-22 as well as current year as contingency if FEMA or other federal or state sources are unavailable.
Shanell Williams (Chair)	[agree]

12. Ensure all referrals for housing assistance are provided by HSH for before the start of Phase 1.

Based on Member Feedback: Liaison Recommendation Stands. In need of clarifying conversation prior to vote.

Member	Comments
Brett Andrews	
Julia D'Antonio (Vice Chair)	[agree]
Jennifer Friedenbach	Yes, this is critical. Flex pool subsidies sitting there because no referrals provided to provider.
Shaun Haines	
Julie Leadbetter	
Lena Miller	I agree with this recommendation.
Cynthia Nagendra	Not enough info to comment.
Ken Reggio	Unclear on meaning.
Shanell Williams (Chair)	[agree]

13. Ensure Safe Sleep residents are offered available housing resources to ensure turnover for others on the streets.

Based on Member Feedback: Liaison Recommendation Stands

Member	Comments
Brett Andrews	
Julia D'Antonio (Vice Chair)	[agree]
Jennifer Friedenbach	Yes this is critical because we want new people to move into camps off the streets.
Shaun Haines	
Julie Leadbetter	
Lena Miller	I agree with this recommendation.
Cynthia Nagendra	Agree. I would assume this means more housing resources need to be brought online from either OCOH or some of the new state or federal funds for this purpose.
Ken Reggio	Favor.
Shanell Williams (Chair)	[agree]

Proposal regarding DPH’s immediate needs request:

1. Recommend to delay releasing the Board reserve to fund the DPH Behavioral Health requests to allow time for further input and development of strategy; request department to bring back immediate needs request for FY20-21 after the Mental Health SF Implementation Working Group has weighed in on the strategies.
2. If you disagree with above delay of releasing DPH Behavioral Health funds, are there specific items from their proposal you would like to see funded now?

Based on Member Feedback: Liaison Recommendation Stands

Member	Comments
Brett Andrews	I support the request to release of \$30.3M of OCOH funding to support the DPH FY 20-21 budget. I have reviewed the proposal thoroughly. I also participated in the Behavioral Health Reform process, and was a part of the development of Mental Health SF. All of the proposed DPH activities (and associated costs) are in line with the series of recommendations of both processes. Even with this significant investment, it is approximately 27% of the funds on-hand. Lastly, a vast majority of the investment is tied to hiring and program expansion which takes time.
Julia D’Antonio (Vice Chair)	I agree with all these amendments and agree with delaying MHSF.
Jennifer Friedenbach	Yes absolutely need to think this through more carefully. Most of the things asked for funding serve non homeless people, or things that are clearly outside of Prop C like training, and locked beds. In addition, only a third of expenditures are beds. This would not allow us to acquire properties. Also some overly expensive models in here, where they could be done more efficiently in other ways. The whole thing is not strategic in terms of the system and figuring out how pieces fit, and how to minimize numbers we can get off the streets.
Shaun Haines	
Julie Leadbetter	
Lena Miller	I agree with this recommendation.
Cynthia Nagendra	Agree.
Ken Reggio	Favor release of that portion of current year funding request that DPH projects will serve persons experiencing homelessness. 50%, 60%, 75%? I expect it will take MHSF Implementation Working Group time to get up and running, and DPH shouldn't delay moving on at least some aspects of the plan. Street Crisis Response Team and MH and SU treatment beds, e.g., shouldn't be put on hold.
Shanell Williams (Chair)	[Agree]

<sup>i</sup> Additional comments on housing problem-solving:

In general, communities that enable the homeless system to provide even a small amount of flexible funds that people can easily and immediately access and that can be used for a variety of activities such as finding housing, moving in with a friend or family member, security deposits, a few months of rental

assistance, funds to fix your vehicle or pay utilities or arrears, move-in costs, and other barriers to obtaining and sustaining housing, can help more people exit homelessness than communities that don't have a variety of flexible housing options and flexible funds readily available as soon as people need them. While it is certainly difficult to pay for and maintain housing in San Francisco because of the high cost of rent, flexible problem-solving dollars can help some people exit homelessness more quickly that may need just 6-12 months of assistance.

**ii Additional comments on rapid re-housing:**

RRH is a flexible, medium-term intervention that can help a percentage of people exit homelessness more quickly. Rather than waiting many years for a PSH placement or not qualifying for PSH because they do not meet the criteria, RRH operated with fidelity to the model – housing/landlord search assistance, rental assistance that can flex up or down up to 2-3 years, and case management and services as needed – can help certain populations who need a medium-term intervention to obtain and sustain housing. For example, the Rising Up RRH for youth is showing positive outcomes. It is true that it has been *very* challenging to make RRH work effectively in San Francisco and the Bay Area because of the housing market crisis. The very real challenges include targeting people who can exit homelessness and sustain housing with a medium-term intervention, finding housing in a difficult housing market when providing limited rental assistance and once housing has been obtained, and supporting the household to be able to sustain their housing after assistance ends. Other Bay Area communities and providers in San Francisco have found ways to incentivize landlords through various methods and we can help to learn those lessons and help San Francisco build the capacity needed to be more successful in such a difficult housing market.

SF could build the capacity to be able to progressively engage people with more support when they need it. Research has shown it is difficult to predict who will be successful in which housing intervention. Multiple studies show that PSH is an effective intervention for people who are chronically homeless that have multiple intensive needs/disabilities, for whom PSH was originally designed. However, research on RRH has also shown that certain households stabilize after being housed in almost every dimension – health, mental health, substance use decreases, education outcomes – and can exit homelessness and not return to homelessness. RRH should also be able to flex up or down. If, after a person is housed through RRH and it is evident that the person needs a more intensive intervention, the system should reserve a percentage of PSH placements for people who need to be transitioned from RRH to PSH.

The other challenge of having people be able to maintain their housing when their income or benefits may never meet the cost of housing could be solved by providing a more shallow long-term ongoing subsidy after RRH ends, such as providing \$500 - \$600 per month to people who only need a rent supplement and not any other services to keep their housing. The VA created a shallow subsidy program for people in the ten highest cost cities and has data on outcomes to show what works and doesn't about this method of progressive engagement.