

# Orange County Continuum of Care (CoC) Domestic Violence (DV) Committee December 17, 2024

#### **Meeting Agenda**

- 1. Coordinated Entry System (CES) for Survivors Assessment Recommendation Sarah Jones, CoC Manager, Office of Care Coordination
  - a. Approve revised CES Pre-Assessment Screening and CES Survivor Assessment Tools.
- 2. Domestic Violence Committee Vision Setting Sarah Jones, CoC Manager, Office of Care Coordination and Maricela Rios-Faust, Chair
  - a. Continued discussion related to goals and vision for the Domestic Violence Committee.
- 3. CoC Updates Sarah Jones, CoC Manager, Office of Care Coordination

Next Meeting: To be determined, pending the 2025 CoC Board and Committee Calendar approval.

## **Public Comments**

## **Consent Calendar**

#### **Consent Calendar**

#### **Recommended Action**

- 1. Approve the DV Committee Meeting Special Meeting Minutes from August 27, 2024.
- 2. Approve the DV Committee Meeting Minutes from October 15, 2024.

## **Business Calendar**

## Coordinated Entry System (CES) for Survivors Assessment Recommendation

Sarah Jones, CoC Manager, Office of Care Coordination

#### **CES for Survivors Assessment Changes**

- The Office of Care Coordination, as the CES Lead, received feedback from several CES partners and the CES Administrators recommending updates to the CES Pre-Assessment and Survivor Assessment Tools.
- Recommended edits included adding eligibility requirements to the Pre-Assessment Tool and adding additional assessment and accessibility questions to the Survivor Assessment Tool.
- At the **September 4, 2024**, CES Steering Committee, the Office of Care Coordination presented and received feedback on proposed edits to both tools.
- The Office of Care Coordination held a public feedback period from September 26, 2024 –
   October 9, 2024, requesting written feedback be sent via email to
   CoordinatedEntry@ocgov.com
- The invitation to provide feedback was sent via the CES and CoC email distribution lists, the CoC Board membership, as well as to members of the following CoC committees: Policies, Procedures and Standards (PPS), Domestic Violence (DV) and Lived Experience Advisory.

#### **Feedback Received**

#### **Pre-Assessment Screening Tool**

- Specify that Survivor CES assessments are currently utilized for DV specific Joint Transitional Housing/Rapid Rehousing (TH/RRH) and CoC funded RRH and Permanent Supportive Housing PSH programs only, to avoid frustration and challenges in linking survivors to appropriate resources when receiving referrals from 2-1-1 and/or housing providers.
- Match the Survivors Eligibility on the Pre-Assessment Screening to be the same as the Survivor Assessment Tool to lessen the confusion on repeat questions (if this is needed).
- Add a statement to say that if a survivor is needing crisis support or emergency shelter resources that calling the
   24 hour DV hotlines is the best option.

#### **Survivor Assessment Tool**

- Section 3: Consider adding the number of adults in household as well as the minor children in order to get the total household size (as well as options for client doesn't know/refused)
- Consider if there are other Data Quality elements required for annual performance reporting to HUD (ie. gender, race/ethnicity, etc.) that could be added to the assessment

#### **Updated Pre-Assessment Screening**

## Please see **Item 1. Attachment A** for redlined version, and **Item 1. Attachment B** for clean version.

#### **Pre-Assessment Screening**

The goal of the Pre-Assessment Screening is to help the CES Virtual Front Door and access points identify whether the individual or family **may be or may have been** a victim or survivor of domestic violence (as defined by HUD) so that staff can offer a referral to victim service providers and/or CES for survivors.

- These questions are intended for adults over age 18.
- Questions should be asked in a private one-on-one setting.

#### Introduction

If any urgent safety needs are identified prior to beginning the Pre-Assessment Screening, immediately offer a connection to the local police or a Domestic Violence Hotline. Prior to beginning the Pre-Assessment Screening, provide a brief explanation of the Pre-Assessment Screening.

#### Sample Script

To learn more about your housing situation, I want to ask you some questions about whether you feel safe or are in danger right now. These are questions that I ask everyone because these issues are very common, and I want to ensure that you are connected to services that best fit your individual needs. Based on your answers, I may offer you referrals to specific resources. It is always your choice where you accept a referral to work with another program or continue talking to me about your housing situation. Your answers will not affect your eligibility for housing assistance. You will have the same ability to access housing as anyone else regardless of how you answer these auestions.

Anything you share today remains confidential. I will not call the police or do anything with this information that you don't want me to do. **DISCLOSE ANY MANDATED REPORTER EXCEPTIONS** 

Do you have any questions for me?

#### **Pre-Assessment Screening**

Some people find themselves feeling unsafe at home or the place they are currently staying. Do any of the following apply to you or anyone in your household?

- Currently staying with, trying to leave, or used to stay with someone who threatens you or another family member; OR
- Anyone you stay with or used to stay with has hit, choked, or physically hurt you or a family member: OR
- Anyone you stay with or used to stay with has emotionally, psychologically, or verbally abused you or family member (see page 3); OR
- Anyone you stay with or used to stay with has forced you or a family member to do something sexually that you did not want to do; OR
- Anyone you stay with or used to stay with controls your access to money; OR
- Anyone you stay with or used to stay with controls, monitors, or harms you using any form of technology (social media, text message, email, location monitoring, etc.)

  | Yes | No | Client refused | Client doesn't know | Data not collected

#### If yes, offer help calling one of the 24 hour Domestic Violence hotlines below:

Human Options (877)854-3594 Laura's House (866)498-1511 Interval House (714)891-8121 Radiant Futures (877)531-5522

#### Tenant Self - Assessment

Some people are being forced by others to trade sex in exchange for money, shelter,	or other	items
s this something that is happening to you?		

Yes No Client refused Client doesn't know Data not collected

#### If yes, offer help calling one of the 24 hour Domestic Violence hotlines below:

 Human Options
 (877)854-3594
 Laura's House
 (866)498-1511

 Interval House
 (714)891-8121
 Waymakers
 (949) 250-0488

 Radiant Futures
 (877)531-5522

Some people are being forced by others to trade work in exchange for shelter or other items. Is this something that is happening to you?

Yes No Client refused Client doesn't know Data not collected

#### If yes, offer help calling one of the 24 hour Domestic Violence hotlines below:

#### ATTENTION

Before proceeding, CES for Survivors is only for transitional/permanent housing. If the survivor is interested in getting resources for emergency shelter or other crisis support resources, offer help calling one of the 24 hour Domestic Violence hotlines referenced above.

#### CES for Survivors Eligibility

CES for Survivors is a program that provides potential transitional and/or permanent housing resources to the most vulnerable survivors who are fleeing or attempting to flee domestic violence, dating violence, sexual assault, or stalking. Any information shared will be deidentified and only shared with consent.

- 1. Are you fleeing, or attempting to flee, domestic violence, dating violence, sexual assault, or stalking (as defined by HUD, see definition on page 3)? If YES, continue to the next question. If NO, you are not eligible for CES for Continue to the next question.
- Do you have no other safe place to stay?
   If YES, continue to the next question. If NO, you are not eligible for CES for Supplying.
- 3. Do you have any resources to obtain a safe place to stay? If No, you are eligible to be enrolled in CES for Survivors and can be referred to a Yes No partnering victim service provider. If YES, you not eligible for CES for Survivors.

Is there anything else you would like to share about your safety at home or the place where you're currently staying?

For responses to the eligibility questions that did not meet the requirements for CES for Survivors, please end the assessment and provide a warm hand-off to another CES partnering agency.

CES for Survivors Victim Service Provider Partners include:

WISEPlace Human Options (714) 542-3577 ext 200 (877) 854-3594 Interval House (714) 891-8121 ext 300

Yes No

☐Yes ☐No

#### SURVIVOR ASSESSMENT TOOL

This tool will help determine risk and prioritize resources to the most vulnerable survivors. When used for prioritization, information shared in this assessment tool will be de-identified and only shared with consent.

SURVIVOR INFO	RMATION			
ULL NAME:		UNI	QUE ID:	
VICTIM SERVICE	PROVIDER INFORMATI	ON		
STAFF NAME:		PHONE NUME	BER:	
AGENCY NAME:	ENCY NAME: EMAIL:			
LIGIBILITY REQ	UIREMENT			
//N Does surviv If YES, con //N Does surviv safe place t If NO, cont all eligibility questi	tinue to the next question. or Do you not have any oth tinue to the next question. or Do you lack the have any o stay? inue to the Tenant Self-As ons are "Y", please complet	er safe residence have no or resources to obtain other sessment section. e the assessment below. F		
ENANT SELF - A	SSESSMENT			
	1	2	3	SCORE
Current Housing Situation	Stably housed	Unstable/Temporary housing	Homeless or currently in a shelter-based program	
Other Barriers	0-1 additional barriers	2 additional barriers	3 or more additional barriers	
Support System	Substantial support system	Moderate support system	Low/non-existent support system	
			TOTAL	
	barriers and extenuating cir endation:		referral a high priority per th	e staff's

#### **Updated Survivor Assessment Tool**

CLIENT INTAKE						
Age	18-24 yrs old 25-54 yrs old 55-61	yrs old 62+ yrs Client doesn't know Client refused				
Gende	Woman Non-Binary Questioning Man Transgender Different Identi	Culturally Specific Identity Client Refused  Client doesn't know Data Not Collected				
Race/	Ethnicity (Ethnicity					
	American Indian, Alaska Native, Black, African or Indigenous American, or African Asian or Asian Hispanic/Latin/e/o	Middle Eastern or North African Client doesn't know  Native Hawaiian or Pacific Islander Client Refused  White Data Not Collected				
Socia	l Security Number (optional)					
Veter						
	you or anyone in your household served in the					
	d States Armed Forces (Army, Navy, Air Force, ne Corps, or Coast Guard) or ever called into	No Yes Client doesn't know Client refused				
	e duty as a member of the National Guard or as					
a Res	ervist?					
Does	your household include any minor children?	Yes No Client doesn't know Client Refused				
ls any	one in the household currently pregnant?	Yes No Client doesn't know Client Refused				
Are y	Are you in the process of reunifying with any minor children?					
_	YES, how many?					
Total	Number of minor children (17 or younger) in househ	nold?				
Total	Household Size (Including yourself, how many people	e are in vour household?)				
	R LIVING SITUATION					
111101	Type of Residence 3.917A (Type of living arrangement)	ent on the night before entering this project)				
		SITUATION				
$\Box$						
_	Place not meant for human habitation (e.g., a vehicle, an abandoned building, bus/train/subway station/airport or anywhere outside)					
Emergency shelter, including hotel or motel paid for with emergency shelter voucher, or RHY-funded Host Home shelter						
Safe Haven  INSTITUTIONAL SITUATION						
	Foster care home or foster care group home	Long-term care facility or nursing home				
	Hospital or other residential non-psychiatric medical facility	Psychiatric hospital or other psychiatric facility				
	Jail, prison or juvenile detention facility	Substance abuse treatment facility or detox center				
TRANSITIONAL & PERMANENT HOUSING SITUATION						
_	sidential project or halfway house with no meless criteria	Rental by client, with RRH or equivalent subsidy				
	Hotel or motel paid for without emergency shelter voucher	Rental by client, with HCV voucher (tenant or project based)  Rental by client in a public housing unit				
. –	ansitional housing for homeless persons (including	Rental by client, no ongoing housing subsidy				
Homeless Youth) Host Home (non-crisis)		Rental by client, with other ongoing housing subsidy				
	Staying or living in a friend's room, apartment, or house Owned by client, with ongoing housing subsidy					
_	Staying or living in a family member's room, apartment,  Owned by client, no ongoing housing subsidy					
	house Rental by client, with GPD TIP subsidy	Client doesn't know Client refused				
	Rental by client, with GPD TP subsidy  Client refused  Data not collected					
Per	rmanent housing (other than RRH) for formerly homeless persons					

Please see Item 1.

Attachment C for redlined version, and Item 1. Attachment D for clean version.

HOUSING INTERESTS		
Of the housing oppor the household interes	tunities the household is eligible for, which of the sted in?	following housing types is
provider agency and/or minimum income requir		supportive services. There is no RRH is to increase or maintain
There is no minimum in	d) provides time-limited rental assistance paired with to come requirement for participating in RRH. The goal of p paying rent after the rental assistance ends.  Yes No	• • •
	ing (OPH) includes ongoing rental assistance with tenabusing assistance comes with limited to no supportive se	
		ive ongoing supportive services
	Housing provides ongoing rental assistance with intens ive services is voluntary. Household experiencing chro	0 0 11
Participation in support	ive services is voluntary. Household experiencing chro	0 0 11
Participation in support prioritized for PSH. Permanent Supportive H	ousing Yes No	0 0 11
Participation in supporti prioritized for PSH. Permanent Supportive H Is there anything else w	ousing Yes No  Should know about you or your needs?	0 0 11
Participation in supporti prioritized for PSH. Permanent Supportive H Is there anything else w	ousing Yes No  Should know about you or your needs?	0 0 11
Participation in supporting prioritized for PSH.  Permanent Supportive Has there anything else we accessibility NEEDS food, or anyone in your hamps or wider entrances, and other fixtures.  These questions are about	ive services is voluntary. Household experiencing chro rousing Yes No e should know about you or your needs?  Somousehold, have a disability, you may need accessible how, space for medical equipment or a wheelchair, or special to some common needs. If you have needs not covered by	onic homelessness are primarily  busing. This may mean you need al light switches, electrical outlets,
Participation in supporting prioritized for PSH.  Permanent Supportive Has there anything else was a CCESSIBILITY NEEDS for you, or anyone in your hamps or wider entrances, and other fixtures.  These questions are about the end of the assessment.	ive services is voluntary. Household experiencing chro rousing Yes No e should know about you or your needs?  Somousehold, have a disability, you may need accessible how, space for medical equipment or a wheelchair, or special to some common needs. If you have needs not covered by	onic homelessness are primarily  busing. This may mean you need al light switches, electrical outlets,
Participation in supporting prioritized for PSH.  Permanent Supportive H  Is there anything else we accessibility NEEDS  f you, or anyone in your hamps or wider entrances, and other fixtures. These questions are about the end of the assessment in Do you require a mobility	rousing Yes No  e should know about you or your needs?  nousehold, have a disability, you may need accessible ho, space for medical equipment or a wheelchair, or special to some common needs. If you have needs not covered be	onic homelessness are primarily  busing. This may mean you need al light switches, electrical outlets, y these questions, please list them
Participation in supporting prioritized for PSH.  Permanent Supportive Has there anything else was a CCESSIBILITY NEEDS for you, or anyone in your hamps or wider entrances, and other fixtures. These questions are about the end of the assessment of the priority property of the priority	rousing Yes No  e should know about you or your needs?  shousehold, have a disability, you may need accessible how, space for medical equipment or a wheelchair, or special to some common needs. If you have needs not covered by the saccessible unit due to a physical disability?  accessible unit due to loss of hearing or sight?	onic homelessness are primarily  busing. This may mean you need all light switches, electrical outlets, y these questions, please list them

**Updated Survivor Assessment Tool** 

Please see **Item 1. Attachment C** for redlined version, and **Item 1. Attachment D** for clean version.

#### **Survivor Assessment Tool Guide**

Additionally, following the feedback received during the October 9, 2024 meeting, the Office
of Care Coordination made updates to the Survivor Assessment Tool Guide, to ensure
instructions for the survivor assessments include disclosing any agency mandated reporting
requirements.

#### **Proposed Timeline for Review and Approval**

- **September 4, 2024**: CES Steering Committee
- September 26, 2024 October 9, 2024: Public Feedback Period
- October 15, 2024: DV Committee
- December 17, 2024: DV Committee
- January 2025: PPS Committee
- January 2025: CoC Board for final review and approval

#### **Recommended Action**

a. Approve revised CES Pre-Assessment Screening and CES Survivor Assessment Tools.

## Domestic Violence Committee Vision Setting

Sarah Jones, CoC Manager,
Office of Care Coordination and
Maricela Rios-Faust, Chair

#### **Domestic Violence Committee Vision Setting**

- At the August 27, 2024, meeting, the committee began a discussion related to the purpose, goals and vision for the Domestic Violence Committee.
- Some themes highlighted:
  - Recommendations for resource allocation
  - Advocacy for system change, centering survivors' needs
  - Ideas for service integration
  - Space for learning about work of other community partners serving survivors

#### **Domestic Violence Committee Vision Setting**

- Additionally, the committee discussed the meeting schedule/cadence.
- As written in the committee Governance Charter, the committee will meet quarterly and/or as needed.
- The following schedule is the proposed 2025 meeting schedule:
  - Tuesday, February 18, 2025, from 9:00 a.m. 10:30 a.m.
  - ❖ Tuesday, May 20, 2025, from 9:00 a.m. 10:30 a.m.
  - ❖ Tuesday, August 19, 2025, from 9:00 a.m. 10:30 a.m.
  - ❖ Tuesday, November 18, 2025, from 9:00 a.m. 10:30 a.m.

#### **Domestic Violence Committee Vision Setting**

- The Domestic Violence Committee Governance Charter also states that the committee will align its efforts with the existing Orange County CoC Board vision.
- In November 2024, the Office of Care Coordination reached out to the committee requesting and feedback on the Orange County CoC Strategic Plan, developed by the CoC Vision Ad Hoc in partnership with consultant Aubrey Sitler of AC Strategies.
- The Vision Ad Hoc has some notes and ideas about key collaborators who need to be part of most pieces of the vision work (e.g., people with lived expertise, specific organizations to pull in, etc.) and requested input from the CoC Board, Committees, and Working Group members.
- More information on the Orange County CoC Strategic Plan will be provided as updates arise.

#### **Domestic Violence Committee Vision Setting: Continued Discussion**

- Building off previous discussions, what purpose and role do you see the Domestic Violence Committee having in addressing needs of survivors in Orange County?
- What does the committee seek to prioritize in 2025?



## **CoC Updates**

Sarah Jones, CoC Manager,
Office of Care Coordination

#### **2025 Sheltered Point In Time Count and Housing Inventory Count**

- The Orange County CoC's 2025 Sheltered Point In Time (PIT) Count will be taking place the night of **Monday, January 27, 2025**.
- Orange County United Way's 211OC will be facilitating training for agencies that are required to submit data as part of the Sheltered PIT Count and Housing Inventory Count (HIC).
- If your agency is required to participate in the Sheltered PIT and/or HIC, please note email communication from 2110C and the Office of Care Coordination will be forthcoming.

#### **Upcoming Meetings**

- **CoC Board:** Wednesday, December 18, 2024, from 2:00 p.m. 5:00 p.m.
  - Location: County Administration South (CAS) County Conference Center Rooms 104/106, 601 N Ross St, Santa Ana, CA 92701

#### The Office of Care Coordination is Hiring!

- The Office of Care Coordination is currently recruiting to fill one (1) Staff Specialist Extra Help
  positions to support with CoC and CES projects and initiatives being led by the Office of Care
  Coordination.
- Please note, Extra Help or temporary/seasonal positions are estimated to last six months up to one year.
- The Staff Specialist Extra Help position responsibilities and job duties include, but are not limited to the following:
  - Analyzing, organizing and presenting data through various reporting tools.
  - Knowledge and understanding of the CoC, its structure and policies and procedures.
  - Knowledge and experience using the Homeless Management Information System (HMIS).
  - Knowledge and understanding of the CES.
- If you have any questions pertaining to this recruitment or if you are interested in the employment opportunity, please contact or submit your resume to Aida Lomeli at <a href="mailto:aida.lomeli@ocgov.com">aida.lomeli@ocgov.com</a>.

Please assist us in sharing this employment opportunity with others!

#### **CoC Board Nomination and Election: Timeline**

Date*	Timeline Activity
October 29, 2024	Nomination period opens
November 5, 2024	Nomination period closes
November 13, 2023	Candidate Interest Forms are due; New & updated CoC Board General Membership Forms due
November 15, 2024	CoC Nominating Ad Hoc to recommend candidates for election by CoC General Membership
November 18, 2024	Candidate Meet and Greet; Voting Period Opens
November 27, 2024	Voting period closes at 5:00 p.m.
December 6, 2024	CoC Nominating Ad Hoc to finalize election results; Candidates notified of CoC Board Election results
December 18, 2024	CoC Board Meeting: Selected candidates are presented to the CoC Board for ratification
January 2024	CoC Board seating takes place. Outgoing CoC Board and Board staff will provide training and orientation for incoming CoC Board

## **Next Meeting:**

To be determined, pending the 2025 CoC Board and Committee Calendar approval.

## CoC Board and CoC Committee Materials can be found on the CoC webpage located at:

https://ceo.ocgov.com/continuum-care

For other inquiries, please contact the Office of Care Coordination at <a href="mailto:CareCoordination@ocgov.com">CareCoordination@ocgov.com</a>

