

HEALTH CARE FOR THE HOMELESS/FARMWORKER HEALTH PROGRAM (HCH/FH)

Co-Applicant Board Meeting Agenda

620 Correas Street, Half Moon Bay, CA 94019 (Half Moon Bay Library)

May 8th, 2025, 10:00am - 12:00pm

This meeting of The Health Care for The Homeless/Farmworker Health board will be held in-person at

620 Correas Street, Half Moon Bay, CA 94019 (Half Moon Bay Library)

Remote participation in this meeting will not be available. To observe or participate in the meeting please attend in-person at above location.

*Written public comments may be emailed to rnash@smcgov.org and such written comments should indicate the specific agenda item on which you are commenting.

***Please see instructions for written and spoken public comments at the end of this agenda.**

A. CALL TO ORDER & ROLL CALL	Victoria Sanchez De Alba	10:00am
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B. PUBLIC COMMENT

Persons wishing to address on matters NOT on the posted agenda may do so. Each speaker is limited to three minutes and the total time allocated to Public Comment is fifteen minutes. If there are more than five individuals wishing to speak during Public Comment, the Chairperson may choose to draw only five speaker cards from those submitted and defer the rest of the speakers to a second Public Comment at the end of the Board meeting. In response to comments on a non-agenda item, the Board may briefly respond to statements made or questions posed as allowed by the Brown Act (Government Code Section 54954.2) However, the Boards general policy is to refer items to staff for comprehensive action or report.

C. ACTION TO SET THE AGENDA & CONSENT AGENDA	Victoria Sanchez De Alba	10:10am
1. Approve meeting minutes from: a. April 10th Board Meeting		Tab 1
2. Budget and Finance Report		Tab 2
3. HCH/FH Director's Report		Tab 3
4. Quality Improvement/Quality Assurance Update		Tab 4
5. Quarterly Management Analyst Report		
6. Homestat Report – Management Analyst		

D. COMMUNITY ANNOUNCEMENTS

Communications and Announcements are brief items from members of the Board regarding upcoming events in the community and correspondence that they have received. They are informational in nature and no action will be taken on these items at this meeting. A total of five minutes is allotted to this item. If there are additional communications and announcements, the Chairperson may choose to defer them to a second agenda item added at the end of the Board Meeting.

Meetings are accessible to people with disabilities. Individuals who need special assistance or a disability-related modification or accommodation (including auxiliary aids or services) to participate in this meeting, or who have a disability and wish to request an alternate format for the agenda, meeting notice, or other documents that may be distributed at the meeting, should contact the HCH/FH Community Program Coordinator at least five working days before the meeting at rnash@smcgov.org in order to make reasonable arrangements to ensure accessibility to this meeting and the materials related to it. The HCH/FH Co-Applicant Board meeting documents are posted at least 72 hours prior to the meeting and are accessible online at: <http://www.smchealth.org/smmc-hfhfh-board>



San Mateo County HCH/FH Program Co-Applicant Board Agenda

Community updates	Board Members	10:15am
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E. GUEST SPEAKER

Stanford Community-Based Participatory Research for Health (CBPR Study) - Katherine Najarro and Olimar Bueso
10:30am

F. BUSINESS AGENDA

Request to Approve Updates to HCHF Grants Credentialing and Privileging Procedures and/or Policies and Others	Jim Beaumont	11:05am
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G. REPORTING & DISCUSSION AGENDA

Discussion of Uniform Data System (UDS) Report Updates	Alejandra Alvarado and Gozel Kulieva	11:20am
Federal Updates and Impacts on HCH/FH Program	Jim Beaumont	11:45am

H. ADJOURNMENT

12:00pm

Future meeting: **June 12th, 2025**

Time: **10:00am-12pm**

Location: **500 County Center, COB 3 (Manzanita Hall), Redwood City, CA 94063**

*Instructions for Public Comment During Meeting

Members of the public may address the Members of the HCH/FH board as follows:

Written public comments may be emailed in advance of the meeting. Please read the following instructions carefully:

1. Your written comment should be emailed to rnash@smcgov.org.
2. Your email should include the specific agenda item on which you are commenting or note that your comment concerns an item that is not on the agenda or is on the consent agenda.
3. Members of the public are limited to one comment per agenda item.
4. The length of the emailed comment should be commensurate with the two minutes customarily allowed for verbal comments, which is approximately 250-300 words.
5. If your emailed comment is received by 5:00 p.m. on the day before the meeting, it will be provided to the Members of the HCH/FH board and made publicly available on the agenda website under the specific item to which your comment pertains. If emailed comments are received after 5:00p.m. on the day before the meeting, HCH/FH board will make every effort to either (i) provide such emailed comments to the HCH/FH board and make such emails publicly available on the agenda website prior to the meeting, or (ii) read such emails during the meeting. Whether such emailed comments are forwarded and posted, or are read during the meeting, they will still be included in the administrative record.

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Tab 1

Meeting Minutes

HEALTH CARE FOR THE HOMELESS/FARMWORKER HEALTH PROGRAM (HCH/FH)
Co-Applicant Board Meeting Minutes
455 County Center, Redwood City, CA 94063 (Room 101)
April 10th, 2025, 10:00am - 12:00pm

Co-Applicant Board Members Present	County Staff Present	Members of the Public	Absent Board Members/Staff
- Steve Kraft - Brian Greenberg - Janet Schmidt - Robert Anderson - Suzanne Moore - Victoria Sanchez De Alba (Chair) - Tayischa Deldridge - Francine Dickson-Serafin - Judith Guerrero - Tony Serrano - Gabe Garcia - Steve Carey (Vice-Chair) - Jim Beaumont (Ex Officio)	- Alejandra Alvarado - Gozel Kulieva - Raven Nash - Jocelyn Vidales - Amanda Hing Hernandez - Anessa Farber - Marisol Escalera Durani - Jei Africa - Erick (photographer)	- Cristhian Landaverde, ALAS - Ophelie Vico, Puente - Eva Corral-Camacho - Lucy Pasternak - Excel Interpreting, LLC agent	

A. Call to order & roll call	Victoria Sanchez De Alba called the meeting to order at 10:01 am and did a roll call.
B. Public Comment	Marisol Escalera Durani, Supervisor Mueller's Office Marisol Escalera Durani expressed gratitude on behalf of Supervisor Ray Mueller, extending appreciation to Victoria and Robert for their participation in Farmworker Awareness Week. Supervisor Mueller is thankful for the thoughtful planning and dedication that contributed to the success of each meeting during the week. Christian Landaverde, ALAS Christian Landaverde acknowledged the celebration of César Chávez Week and thanked Supervisor Ray Mueller for his presence at the event. Approximately 200 farmworkers attended the gathering, which was co-hosted by ALAS and San Mateo County. The event highlighted the importance of mental health and recognized the impact of farmworker labor in Half Moon Bay.

	Ophelie Rico, Puente Ophelie Rico reported that the Coastsides Clinic provider has resumed regular visits to Puente, and efforts are underway to hire an additional provider. She also noted that Puente, in collaboration with LifeMoves, is utilizing the intake form developed by the San Mateo Medical Center Foundation to streamline services.	
C. Action to set the agenda and consent agenda.	Approve meeting minutes from March 13th 2025 Board Meeting - Budget and Finance Report - HCH/FH Director's Report - Quality Improvement/Quality Assurance Update	Request to approve the Consent Agenda was MOVED by Tayischa Deldridge and SECONDED by Gabe Garcia APPROVED by all Board members present.
D. Community Announcements	Judith Guerrero, Board Member Judith provided an update on housing units designated for individuals impacted by the Half Moon Bay shooting who were displaced, as well as others displaced by the Task Force or by housing instability. Brian expressed interest in learning more about the selection process for these units, including details on unit costs, land acquisition, and overall criteria. He requested that a representative from the county be invited to present this information to the board for further clarity. Suzanne Moore, Board Member Suzanne shared that ten individuals in Pacifica were recently evicted, noting that this reflects a broader, statewide housing issue. She also announced that the Safe Parking Program in Pacifica has been extended for another year. Additionally, Suzanne circulated an article with staff regarding utilities and financial burdens that are impacting families and leading to housing instability. Tayischa echoed these concerns, citing clients who have faced eviction due to unaffordable water bills. Amanda reminded the board that clients with a primary care provider through San Mateo Medical Center (SMMC) can apply for short-term financial support through the SMMC Health Foundation. Robert Anderson, Board Member Robert met with Supervisor Mueller and participated on the panel for Farmworker Awareness Week. He presented on the range of health services provided by the County of San Mateo and shared information about the role and work of the HCH/FH Board. Following the event, several farmworkers expressed their gratitude directly to him. Francine requested a copy of the talking points Robert used during the panel. Judith suggested that the HCH/FH	

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	Board review feedback from the Farmworker Commission's recent listening session to better understand insights shared by the Coastside Clinic. Tony Serrano, Board Member Tony relayed feedback received via email from a volunteer at St. Vincent de Paul. A client who received assistance noted that the provided bed was moldy and unusable, and that the blankets were worn and also affected by mold. The client had been using old, rolled-up blankets and pillows in the meantime. ALAS staff stepped in to offer support and will be providing clean blankets and pillows, with a new bed scheduled to arrive soon. Gabe provided additional context regarding a recent property purchase by Puente. During inspections, some rooms were inaccessible due to locked doors and were therefore not evaluated. It has since been discovered that these rooms would not have passed inspection. The current priority is to address and resolve these issues to ensure tenant safety and well-being. Amanda suggested that current screening questions may not fully capture the scope of challenges faced by farmworker families. She proposed the board consider adding targeted questions at specific clinics—such as Coastside Clinic—to gather deeper insights, particularly around living and sleeping conditions. Judith added that some families may hesitate to share openly due to fear of CPS involvement or general concerns about safety and privacy.	
E. Guest Speaker Jei Africa, Director of Behavioral Health and Recovery Services	Jei Africa, BHRS Jei Africa delivered a presentation focused on housing and services for justice-involved individuals, highlighting the broad scope of Behavioral Health and Recovery Services (BHRS), which provides mental health and substance use disorder (SUD) treatment for patients of all ages. SUD services primarily support individuals who are uninsured or covered by Medi-Cal, and BHRS works closely with the Health Plan of San Mateo (HPSM) in this effort. The department primarily serves individuals with serious mental illness (SMI), with the main point of entry being the Access Call Center, where initial screenings and referrals are conducted. BHRS operates services across six regional sites—serving North, Central, and South County areas—to minimize the need for clients to travel long distances for care. Staff are involved in a wide range of service areas, including prevention, treatment, school-based programs, jail settings, and street medicine. Upcoming changes under Propositions 36 and 1 are expected to slightly alter the department's organizational structure.	

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F. Business Agenda 1. Approving HCHFH Grants Management Policy: Reviewing and Approving the Updated SMMC Drawdown Procedure	Contracted providers deliver approximately 83% of SUD services and 57% of mental health services. About 15% of BHRS clients are experiencing homelessness. BHRS currently partners with 11 other county agencies, fostering a network of collaboration across the system. Jei emphasized the pervasive stigma surrounding mental illness, presenting data that links stigma to high suicide rates. He underscored the importance of addressing co-occurring conditions, as many clients experience both mental health and substance use challenges, each of which typically has a distinct system of care. BHRS works in coordination with HPSM, which provides care for individuals with mild to moderate mental health conditions, while BHRS focuses on those with more severe needs. The department also collaborates closely with the Human Services Agency (HSA) and contributes to wraparound care, shelter services, and case management. BHRS has supported the funding of several housing units across the county, and Jei highlighted the critical need for supportive services to ensure housing stability for residents. Field-based teams such as HEAL (Homeless Engagement, Assessment, and Linkage) and HOT (Homeless Outreach Team) aim to connect unhoused individuals with appropriate screening and services. Typical program engagement spans approximately nine months. BHRS also operates several crisis service lines that are mobile, field-based, and often supported by volunteers. Jei noted that the average response time for crisis intervention is around 37 minutes, with the entire process typically concluding within 1.5 hours from start to finish. Jim discussed the Boards approval of the following documents: 1) HCHFH Grants Management Policy and Procedure, 2) Updated SMMC Drawdown Procedures (which now include references to Federal Cost Principles, and 3) SMMC Financial Assistance Policy (which now includes specific language on circumstances under which patients' fees are waived). This all derives from the recent Operational Site Visit HCH/FH went through, requesting us to have specific language for each of these three items.
	Request to approve was MOVED by Steve Kraft and SECONDED by Janet Schmidt APPROVED by all Board members present.

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G. Reporting & Discussion Agenda 1. San Mateo County Single Audit Report 2. Discussion of San Mateo County Farmworker Housing Compliance Taskforce Report-Discussion 3. Federal Updates and Impacts on HCH/FH Program	Jim Beaumont, Director Jim informed the board that the county is required to undergo an annual audit for any grant totaling \$200,000 or more. He shared this item for board awareness. The most recent audit, covering the period since June 2024, was completed with no findings. Janet Schmidt, Board Member Janet raised questions regarding the Task Force Compliance document that was shared at the previous board meeting. She expressed interest in streamlining housing efforts through improvements in coastal development and clean water access and inquired about who is responsible for following up on these items. Marisol clarified that Public Works, Building and Planning, and the Department of Environmental Health are the agencies responsible. While a follow-up system is already in place, Marisol offered to arrange for a representative to present a brief overview to the HCH/FH Board. Janet also inquired about the Farmworker Advisory Board. Jim explained that the board was established several years ago, and Judith currently serves on the commission. Janet requested a brief presentation from the Farmworker Advisory Board to learn more about its work and the communities it represents. Jim noted that meetings of the Farmworker Advisory Board occur every other month, on the second Wednesday, and are open to those interested in attending. Jim Beaumont, Director Jim also provided a summary of recent federal health-related updates and their potential implications for the HCH/FH program and County Health.
G. Adjournment	Future meeting: Thursday, May 8th, 2025 Time: 10am - 12pm Half Moon Bay Library 620 Correias Street, Half Moon Bay, CA 94019 The meeting was adjourned at 11:52 am.

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Behavioral Health and Recovery Services

April 2025

Dr. Jai Africa
Director of Behavioral Health and Recovery Services



Health's overarching goal is to increase life expectancy through services that

PROTECT PUBLIC HEALTH		SERVE AS A ROBUST SAFETY NET	
 PREVENT HEALTH PROBLEMS	 MONITOR THE ENVIRONMENT AND PROMOTE A HEALTHY COMMUNITY	 PROVIDE A CONTINUUM OF CARE	 SERVE OUR MOST VULNERABLE RESIDENTS

Agenda

- Provide an overview of Behavioral Health and Recovery Services (BHRS)
- Focus on housing, crisis and justice involved services
- Behavioral Health Commission
- Highlight new initiatives/mandates that BHRS is currently implementing
 - California Advancing and Innovating Medi-Cal (CalAIM)
 - Proposition 1

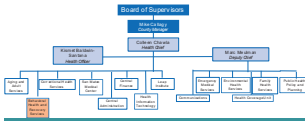


Behavioral Health and Recovery Services

- Provide mental health services for children, youth, adults and older adults
- Substance use treatment primarily for adults
- Primarily aimed at Medi-Cal and uninsured residents in partnership with Health Plan of San Mateo
- Programs to reduce stigma, reach out to marginalized communities, prevent mental illness and substance abuse
- Multiple funding sources – federal, state and local

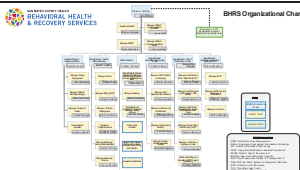


HEALTH Organizational Chart



San Mateo County Health is a 2-230+ employee and 800+ contracted partners.

BHRS Organizational Chart



1

5/2/2025

2

5/2/2025

Behavioral Health and Recovery Services

- Serve about 15,000 clients annually
- Access Call Center (main point of entry) received about 18,000 calls in 2024
- 34 Specialty Mental Health programs
- County staff provide outreach, engagement, treatment and care coordination
- Budget \$340 million
- Approximately 516 staff



Mental Health 34 County Owned and Operated

Specialty Teams offer services across the age spectrum and collaborate with our County Partners

- Elder Mental Health (OASIS)
- In Partnership with Juvenile Justice (JJC - MH)
- Primary Care Interface
- Partnership with Sheriff's Dept (PERT)
- Health Care for the Homeless
- Temporary Crisis Intervention
- Adult Resource Management (ARM)
- Co-Occurring Care Teams between AOD & SUD
- School Based Mental Health (SBMH)
- Youth to Adult Transition (YATC)
- Youth Case Management (YCM)
- Homeless Engagement & Treatment (HET)
- Canyon Oaks Youth Center - STREP
- Forensic MH (Pathways & Service Connect)
- Prio to 3



Behavioral Health and Recovery Services



- Mental health services offered through 6 regional county operated mental health clinics



Facts about Mental Health and Substance Use Disorders

- Prevalence
 - Mental Health America (2024)
 - 23% of adults experience a mental illness in the past year (60 million)
 - 15 youth had at least one MDE in the past year
 - 2022 had the highest number of deaths by suicide (ever recorded in the US)
 - 18% of adults had a SUD in the past year; 77% did not receive treatment
 - 18% of adults and 8.8% of youth still have private insurance that does not cover mental health
 - 340 people for every 1 mental health provider in the US



Behavioral Health and Recovery Services

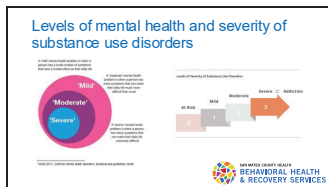
- Mental health and substance use services are offered through a network of contracted community-based providers
 - 83% SUD
 - 57% MH
- 15.3% of clients experienced homelessness
 - 40.1% of clients who accessed AOD services experienced homelessness within 10 days of clients who accessed MH or perinatal health services

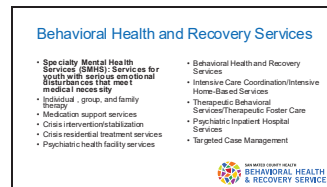


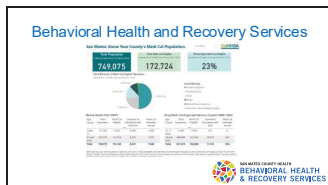
Co-Occurring Conditions

- Importance of integrated treatment
- American Society of Addiction Medicine (ASAM)
 - Some studies up to 80% of individuals with SUD also have another mental health condition
- SAMHSA
 - 2022 survey: 21.5 million adults

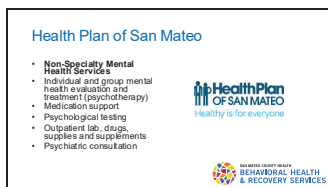


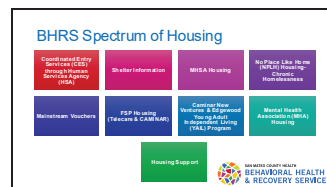











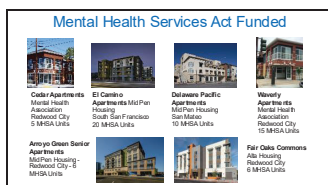


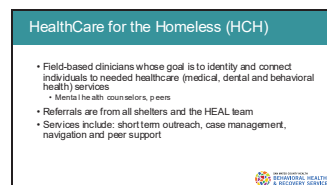
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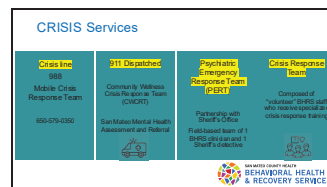
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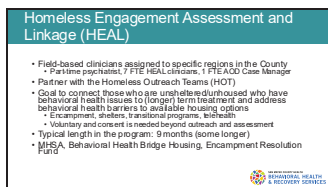
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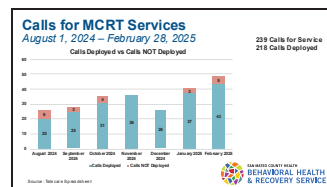












Pertinent Times Related to MCRT Response
September 1, 2024 – February 28, 2025*
198 Deployments

- Average Response Time:** 36.34 minutes
Time between when the call was logged to when providers arrive on-scene.
- Average On-Scene Time:** 47.83 minutes
Total amount of time spent on-scene, at response location.
(Ends at time of transport or when incident is complete.)
- Average Incident Time:** 95.23 minutes
Total amount of time spent from when the call was logged to incident completion.

*Reporting period is different on this slide due to time intervals not being reported until September 2024.



Proposition 1: Behavioral Health Services Act

- Name change to Behavioral Health Services Act (BHSA)
- 30% Housing Interventions
 - At least 15% for chronically homeless with focus on encampments
- 35% Full Service Partnerships (FSP)
- 35% Behavioral Health Services and Supports (BHSS)
 - At least 15% Early Intervention and 5% of this allocation for youth ages 0-25
 - Eliminated local population-based prevention
- Create transparency in fiscal planning and reporting across all behavioral health revenues (fiscal and state) with an emphasis on Medi-Cal billing
- Standardize outcome reporting across all behavioral health programming



Justice Involved Services

Service Context	Pathways	Assisted Outpatient Treatment (AOT)	Community Assistance, Recovery and Empowerment (CARE) Court
Partnership with HSA ABSS Unified Housing Partners	Prebaked outpatient program that services clients from specialty courts and mental health division MHC, Pathways Court, Veterans Court	2 or more episodes of hospitalization under MHC treatment in a consecutive facility in the last 6 months or threatened w/OT or OT for 90 days or more in the last 6 months	San business question and other psychiatric disorders



Shift in the Behavioral Health Landscape

- Focus on behavioral health reform efforts by the Newsom Administration
 - California Advancing and Innovating Medi-Cal
- Coordinated behavioral health delivery system (Managed Care Plans and Behavioral Health Plans)
- Establishing Statewide behavioral health goals
- Compliance on being a "health plan for behavioral health"
- Improved performance and metrics



CalAIM Changes to Behavioral Health

 Easier Access to Care: No Wrong Door	 Simplified Medical Necessity	 Integrated Mental Health and Substance Use Disorder Services	 Payment Reform
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Behavioral Health Trends

- Integrate Mental Health and Substance Use Services
- Focus on Serving the Unhoused and Criminal Justice Involved
- Embed Cross-Sector Approach to Planning
- Maximizing Revenues and Transparency to the Public
- Transparent Reporting of Performance and Client-Level Outcomes
- Implement Evidence-Based Practices to Fidelity
- Focus on Workforce Development – Peer Certification



Behavioral Health Commission

- Purpose
 - Welfare and Institutions Code 5604
 - Advise and make recommendations to county Board of Supervisors and the Behavioral Health Director on matters of behavioral health services to ensure needs are met effectively
 - Review and assess behavioral health needs, service agreements and county performance
 - Participate in planning processes and ensure diverse community representation
- Membership
 - 50% clients or family members of clients
 - 22 total seats = 1 BOS, 2 Youth Commissioners and 19 appointed seats



 **SAN MATEO COUNTY HEALTH
BEHAVIORAL HEALTH
& RECOVERY SERVICES**

Thank you.

Tab 2

Program Budget and Financial Report



SAN MATEO COUNTY HEALTH

**SAN MATEO
MEDICAL CENTER**

San Mateo Medical Center
222 W 39th Avenue
San Mateo, CA 94403
650-573-2222 T
smchealth.org/smmc

DATE: May 08, 2025

TO: Co-Applicant Board, San Mateo County Health Care for the Homeless/Farmworker Health (HCH/FH) Program

FROM: Jim Beaumont
Director, HCH/FH Program

SUBJECT: HCH/FH PROGRAM BUDGET AND FINANCE REPORT

Preliminary grant expenditures for April 2025 total \$265,120. It appears most of the backlogged invoices for services have been processed, bringing us much closer to true actuals. In addition, the expenditures for the year have been updated for the actual drawdown for the first quarter.

All of the above puts us much closer to the actual expenditures to date, and we can begin to realistically discuss where we are for the year. Based on the total year-to-date, we look to be exactly where we need to be. We currently project to spend just under \$3M and our planned budget was just over \$3M. Our Salaries & Benefits are running slightly behind projections for the year, which is appropriate since salary increases occur during the last quarter of the year. Contracts are running slightly ahead of year-end-estimates, which is normal as our contractors invoice for heavier case load counts early in the year, tapering off as we move through the year. In other words, we look very good right now.

This also keeps us in the position to have some carryover through each of the next 2 years to provide for the slight cost of living increases built into most of our contracts.

Attachment:

- GY 2024 Summary Grant Expenditure Report Through 04/30/25



GRANT YEAR 2025

Apr-25

Details for budget estimates	Budgeted [SF-424]		To Date (04/30/25)	Projection for end of year	Projected for GY 2026
<u>EXPENDITURES</u>					
<u>Salaries</u>					
Director, Program Coordinator					
Management Analyst ,Medical Director					
new position, misc. OT, other, etc.					
	725,000	52,696	214,195	705,000	750,000
<u>Benefits</u>					
Director, Program Coordinator					
Management Analyst ,Medical Director					
new position, misc. OT, other, etc.					
	225,000	16,708	68,559	220,000	235,000
<u>Travel</u>					
National Conferences (2500*8)	20,000	2,733	4,709	10,000	12,000
Regional Conferences (1000*5)	5,000		250	2,000	1,500
Local Travel	500			500	250
Taxis	500			500	250
Van & vehicle usage	1,000			1,000	1,000
	27,000		4,959	14,000	15,000
<u>Supplies</u>					
Office Supplies, misc.	10,000		2,490	5,000	2,500
Small Funding Requests					
	10,000		2,490	5,000	2,500
<u>Contractual</u>					
2022 Contracts			56,067	56,067	
2022 MOUs				0	
Current 2023 MOUs	1,000,000		297,909	900,000	1,000,000
Current 2023 contracts	950,000	180,252	325,615	875,000	900,000
---unallocated---/other contracts					
	1,950,000		679,591	1,831,067	1,900,000
<u>Other</u>					
Consultants/grant writer	40,000			35,000	10,000
IT/Telcom	55,000	12,405	34,234	100,000	60,000
New Automation				0	-
Memberships	5,000			5,000	5,000
Training	10,000			5,000	2,500
Misc	5,000	326	7,003	25,000	5,000
	115,000		41,237	170,000	82,500
TOTAL	3,052,000	265,120	1,011,031	2,945,067	2,985,000
<u>GRANT REVENUE</u>					
Available Base Grant	2,858,632		2,858,632	2,858,632	2,858,632
Prior Year Unexpended to Carryover (verified)	333,590		333,590	333,590	
Other					247,155 carryover
HCH/FH PROGRAM TOTAL	3,192,222		3,192,222	3,192,222	3,105,787
<u>BALANCE</u>					
	140,222	Available	2,181,191	247,155	120,787
			Current Estimate	Projected	
					based on est. grant of \$2,858,632
<u>Non-Grant Expenditures</u>					
Salary Overage	10,000	250	3,063	11,000	12,000
Health Coverage	123,000	9,721	40,509	135,000	143,000
base grant prep	0			0	
food	6,000		1,849	6,500	7,500
incentives/gift cards	1,000			1,500	1,500
	140,000		45,421	154,000	164,000
TOTAL EXPENDITURES	3,192,000	275,091	1,056,452	3,099,067	NEXT YEAR 3,149,000

Tab 3

HCH/FH Director's
Report



DATE: May 08, 2025

TO: Co-Applicant Board, San Mateo County Health Care for the Homeless/Farmworker Health (HCH/FH) Program

FROM: Jim Beaumont, Director, HCH/FH Program

SUBJECT: DIRECTOR'S REPORT & PROGRAM CALENDAR

Program activity update since the April 10, 2025, Co-Applicant Board meeting.

Program has successfully submitted requested/required items and had multiple grant conditions cleared. We continue working through the outstanding items and expect to make timely resolution of them. On today's agenda there are Board approval items necessary to document policies, etc., for submission on some of the grant conditions.

HARC Consulting has been retained to provide services for the 2025 Needs Assessment. Activity is expected to ramp up soon.

Both Supplemental Grant Awards are moving forward as we have begun to receive data for the Behavioral Health Services Expansion and there is a tentative plan to initiate twice monthly Sunday clinics at Coastside Clinic.

Program has been working with the Billing Office and the Health Coverage Unit to resolve patients receiving erroneous bills. With the conversion to EPIC, it appears that visits to the HCH/FH funded Dental Clinics on Saturdays at Coastside Clinic and through Sonrisas started receiving bills. As these clinics are fully funded by HCH.FH, the patients are to have no financial responsibility for the services, and only MediCal/Private Insurance should be billed. We are also trying to ensure that anyone who did erroneously receive a bill that it was in error and it can be ignored. We are also endeavoring to ensure that data collection at registration is acting as it should to make sure we identify all farmworkers (and homeless) patients who have visits.

Seven Day Update

ATTACHED:

- Program Calendar





County of San Mateo
Health Care for the Homeless & Farmworker Health (HCH/FH) Program
2025 Co-Applicant Board Calendar
Board meetings are in-person on the 2nd Thursday of the Month 10am-12pm

MONTH	AREA		
	Programmatic	Learning/Conferences	Recognition (Health, DEI, Holidays and Misc.)
JANUARY	- HCH/FH Board Meeting (1/9) - HRSA Operational Site Visit (OSV) (1/14-1/16) - OSV Special Board Meeting (1/15)		• Glaucoma Awareness Month • Cervical Cancer Screening Month • National Human Trafficking Prevention Month • International Holocaust Remembrance Day (1/27) • New Year's Day (1/1) • Martin Luther King Day (1/20) • Inauguration Day (1/20) • Lunar New Year (1/29)
FEBRUARY	- HCH/FH Board Meeting (2/13) - Finance Subcommittee Meeting (2/13) - UDS submission - Review	• National Alliance to End Homelessness Winter Conference: Innovations and Solutions for Ending Unsheltered Homelessness. (Los Angeles, CA – Feb 26-28)	• National Children's Dental Health • American Heart Month • National Cancer Prevention Month • National Wear Red Day (2/7) • Black History Month • World Day of Social Justice • Lincoln's Birthday (2/12) • Valentine's Day (2/14) • President's Day (2/17)
MARCH	- HCH/FH Board Meeting (3/13) - QI/QA Subcommittee Meeting (3/13) - Updated Sliding Fee Discount Scale (SFDS) - Approve		• Colorectal Cancer Awareness Month • Developmental Disabilities Awareness Month • National Doctors Day (3/30) • Lent Begins (3/5) • Daylight Saving Time Starts (3/9) • St. Patrick's Day (3/17)
APRIL	- HCH/FH Board Meeting (4/10) - Strategic Plan Subcommittee Meeting (4/10) - SMMC Annual Audit - Approve	• 2024 Midwest Stream Forum-Agricultural Worker Conference (TBD)	• Alcohol Awareness Month • Sexual Assault Awareness Month • Counseling Awareness Month • National Minority Health Month • Defeat Diabetes Month • National Public Health Week (4/7-4/11) • Lent Ends (4/19) • Passover (4/13 – 4/20) • Easter Sunday (4/20)
MAY	- HCH/FH Board Meeting (5/8) - Finance Subcommittee Meeting (5/8)	• National Healthcare for the Homeless Conference. (Baltimore, MD – May 12-15) • NRHA Health Equity Conference. (Atlanta, GA – May 19-20) • NHRA Annual Rural Health Conference (Atlanta, GA – May 20-23)	• American Stroke Awareness Month • High Blood Pressure Education Month • Mental Health Awareness Month • National Trauma Awareness Month • Asian Pacific American Heritage Month • Mother's Day (5/11) • Memorial Day (5/26)
JUNE	- HCH/FH Board Meeting (6/12) - QI/QA Subcommittee Meeting (6/12) - Services/Locations Form 5A/5B – Approve	• NCFH Agricultural Worker Health Symposium (TBD – May/June2025)	• PTSD Awareness Month • Cancer Survivor's Month • LGBTQIA+ Pride Month • Father's Day (6/15) • Juneteenth (6/19)



JULY	- HCH/FH Board Meeting (7/10) - Strategic Plan Subcommittee Meeting (7/10) - Budget Renewal (Program) Approve			• National Minority Mental Health Awareness Month • Healthy Vision Month	• Independence Day (7/4)
AUGUST	- HCH/FH Board Meeting (8/14) - Finance Subcommittee Meeting (8/14)			• National Breastfeeding Month • National Immunization Awareness Month • National Health Center Week (8/10 – 8/16)	
SEPTEMBER	- HCH/FH Board Meeting (9/11) - QI/QA Subcommittee Meeting (9/11) - Program Director Annual Review	• International Street Medicine Symposium. (Hilo, Hawaii – Sept 9 – 12)		• Healthy Aging Month • National Suicide Prevention Month • Gynecological Cancer Awareness Month • Hispanic Heritage Month (Starts 9/15)	• Labor Day (9/1)
OCTOBER	- HCH/FH Board Meeting (10/9) - Strategic Plan Subcommittee Meeting (10/9) - Annual Conflict of Interest Statement due - Board Chair/Vice Chair Nominations			• Breast Cancer Awareness Month • Depression Awareness Month • Domestic Violence Awareness Month • Health Literacy Month • Patient-Centered Care Awareness Month • Child Health Day (10/6)	• Indigenous Peoples' Day/Columbus Day (10/13) • Halloween (10/31)
NOVEMBER	- HCH/FH Board Meeting (11/13) - Finance Subcommittee Meeting (11/13) - Board Chair/Vice Chair Elections	• East Coast Migrant Stream- Agricultural Worker Conference Forum (TBA)		• American Diabetes Month • National Sexual Health Month • Native American Heritage Day (11/28)	• Daylight Savings Time Ends (11/2) • Veteran's Day (11/11) • Thanksgiving (11/27)
DECEMBER	- HCH/FH Board Meeting (12/11) - QI/QA Subcommittee Meeting (12/11)	• Institute for Healthcare Improvement (IHI) Forum (TBD)		• Seasonal Affective Disorder Awareness Month	• Christmas Eve (12/24) • Christmas Day (12/25) • New Year's Eve (12/31)

BOARD ANNUAL CALENDAR	
Project	Timeframe
HRSA Operational Site Visit (OSV)	January 14 - 16
SMMC Annual Audit - Review	April/May
UDS Submission - Review	Spring
Sliding Fee Discount Scale (SFDS)	Spring
Services/Locations Form 5A/5B – Approve	June/July
Budget Renewal - Approve	July/August/September (Program)– December/January (Grant)
Annual Conflict of Interest Statement	October (and during new appointments)
Program Director Annual Review	Winter
Annual QI/QA Plan – Approve	Winter
Board Chair/Vice Chair Elections	November/December

Tab 4

QI/QA Report



DATE: May 8th, 2025

TO: Co-Applicant Board, San Mateo County Health Care for the Homeless/Farmworker Health (HCH/FH) Program

FROM: Frank Trinh, HCH/FH Medical Director
Alejandra Alvarado, HCH/FH Clinical Services Coordinator

SUBJECT: QI/QA COMMITTEE REPORT

- **2025-2026 Needs Assessment**

- HCH/FH is continuing to plan its upcoming Needs Assessment (NA), throughout the remainder of this year. We have selected HARC as the consultant to contract with for this report, and have begun meeting with them to gather data from various county sources, and to create a timeline of deadlines throughout the year.

- **Library Expansion Project**

- HCH/FH is working with SMMC Communications to create a post for the Heartbeat Newsletter for all SMMC staff to receive notice. All HCH/FH contracted partners have been contacted and notified of this resource as well. HCH/FH will begin receiving survey response updates soon with feedback from multiple county library branches.

- **Operational Site Visit Non-Compliant Follow-Up Items**

- HCH/FH is following up with HRSA representatives to assure that all non-compliant items remains in compliance with the HRSA requirements. HCH/FH is addressing both financial and clinical non-compliant items, many of which have been addressed and the remaining to be addressed by the deadline of June 1st.

Tab 5

Request to Approve Updates
to HCHF Grants

Credentialing and Privileging
Procedures and/or Policies
and Others

DATE: May 08, 2025

TO: Co-Applicant Board, San Mateo County Health Care for the Homeless/Farmworker Health (HCH/FH) Program

FROM: Jim Beaumont, Director
HCH/FH Program

SUBJECT: REQUEST FOR THE BOARD TO APPROVE THE ADDITION OF COMPLEX DENTAL SERVICES TO THE PROGRAM'S SCOPE OF SERVICES (FORM 5A)

In accordance with HRSA requirements, the Board has the authority and responsibility to determine what services, in addition to the HRSA required services, will be provided by the Program. This information is captured on HRSA Form 5A.

As part of the recent Operational Site Visit (OSV) the review team identified that some of the dental services currently provided (oral surgery, endodontics, etc.) should be classified as Complex Dental Services, which is not currently included in the Program's scope of services.

We are requesting Board approval of the addition of the already being provided Complex Dental Services to the Program's scope of services (Form 5A). It requires a majority vote of the Board members present to approve this request.

Tab 6

Quarterly Management Analyst and Homestat Report



DATE: May 8th, 2025

TO: Co-Applicant Board, San Mateo County Health Care for the Homeless/
Farmworker Health (HCH/FH) Program

FROM: Gozel Kulieva, Management Analyst

SUBJECT: Management Analyst Report: Contracts Updates CY 2025 Q1

Contractor Financial Progress Report

The table below provides an overview of the Health Care for the Homeless/Farmworker Health (HCH/FH) Program agreements with eight community-based providers and two County-based programs for Calendar Year 2025. Contracts are for medical care services, behavioral health, dental care services, and enabling services such as care coordination and eligibility assistance.

The following is a summary of HCH/FH Contractor financial performance for CY 2025 Q1.

Contracts & Agreements Overview

Contractor	Services
Abode	Enabling Services: • Medical Care Coordination • Helping to establish medical home • Assisting client with scheduling and attending healthcare appointments • Transportation Assistance • Assisting client with completion and renewal eligibility benefits • Providing health related resources
ALAS Promotores Model	Enabling Services: • Health Navigation Assistance • Health Education Classes • Transportation Assistance
ALAS Behavioral Health Services Expansion (BHSE)	Behavioral Health Services • Comprehensive Mental Health and Substance Use Disorder Treatment Program • Access to Care and Evidence-Based Therapies
Behavioral Health & Recovery Services (BHRS)	Behavioral Health Services: • Homeless Care Coordination (HCH)

Coastside Hope	Enabling Services: • Health insurance Assistance • Care Coordination • Transportation Assistance
Coastside Clinic – Saturday Dental Clinic	Dental Services
Life Moves	Enabling Services: • Care Coordination • Health Insurance Assistance • Outreach & Engagement
Palo Alto University – Behavioral Health Expansion Services	Behavioral Health Services: • Comprehensive Mental Health Treatment Program
Public Health Policy and Planning (PHPP)	Medical Services: • Mobile Clinic • Street & Field Medicine • AOD Counselor
Puente	Enabling Services: • Medical Care Coordination • Health Insurance Assistance • Transportation Assistance
Puente – Behavioral Health Services Expansion (BHSE)	Behavioral Health Services: • Comprehensive Treatment Program Behavioral Health Promotores/Community Health Workers
Sonrisas	Dental Services
University of Pacific (UOP)	Dental Services



SAN MATEO COUNTY HEALTH

2025 Contract & MOU Expenditures

Updated

5/1/2025

Contract	Contract Amount & Target	YTD	% YTD
Abode	\$148,069	\$ 24,095	16%
ALAS	\$ 195,000	\$ 39,300	20%
Care Coordination	200	36	18%
Health Education Classes	50	15	30%
Transportation	40	6	15%
ALAS - Behavioral Health Expansion	\$ 180,000.00	0	0%
BHRS HCH	\$ 90,000	\$ 61,800	69%
BHRS HCH Patients	150	78	52%
BHRS HCH Visits	258		
Coastside Clinic - Saturday Dental Clinic	\$ 70,000	\$ -	0%
Coastside Hope	\$ 137,252	\$ -	0%
Life Moves	\$ 215,000	\$ 98,000	46%
Care Coordination	200	96	48%
Health Insurance Assistance	80	15	19%
Outreach and Engagement (Street Medicine)	136	71	52%
Palo Alto University - Behavioral Health Expansion	\$ 125,000	0	0%
Puente	\$ 170,530	\$ 84,315	49%
Care Coordination	164	97.00	59%
Health Insurance Assistance	190	75.00	39%
Transportation (round trip)	90	40.00	44%
Puente - Behavioral Health Expansion	\$ 170,000	\$ 42,499.98	25%
PHPP	\$ 1,080,000	\$ 231,610	21%
Sonrisas - Base Grant	\$ 123,000	\$ -	0%
Dental Visit	384	75.00	20%
Sonrisas - Measure-K	\$ 123,000	\$ 85,470	69%
University of Pacific (UOP) (non-base grant funding)	\$ 300,000	\$161,179	54%
TOTAL - Base Grant	\$ 2,228,851	\$ 539,120	24%
Measure - K	\$ 123,000	\$ 85,470	69%



TO: Co-Applicant Board, San Mateo County Health Care for the Homeless/
Farmworker Health (HCH/FH) Program

SUBJECT: San Mateo County Homestart Meeting Updates

Date: April 14, 2025 9-11 a.m.
Location: Regional Operations Center (ROC) 501 Winslow St., Redwood City

8/18/2025 9 am 500 County Center
10/20/2025 9 am 500 County Center
12/08/2025 2 pm 500 County Center

9:05 a.m.	Welcome, Introductions & Agenda Review	County Executive's Office
9:05 – 9:35 a.m.	Federal Immigration Issues	County Attorney's Office
9:35 – 9:50 a.m.	Immigrant Services	Office of Community Affairs
9:50-10:05 a.m.	Issuing Voucher Navigation Program	Mental Health Association
10:05-10:20 a.m.	Homelessness Update	Human Services Agency
10:20-10:35 a.m.	Affordable Housing Update	Department of Housing
10:35-10:40 a.m.	Health Dept. Update	Health Dept.
10:40-10:45 a.m.	CEO Update	County Executive's Office
10:45-10:55 a.m.	Future Topics Discussion	All
10:55-11 a.m.	Thank you & Close	County Executive's Office

9-9:05 a.m.	Welcome, introductions & Agenda Review	County Executive's Office
9:05-9:35 a.m.	Federal Immigration Issues	County Attorney's Office
9:35-9:50 a.m.	Immigrant Services	Office of Community Affairs
9:50-10:05 a.m.	Housing Voucher Navigation Program	Mental Health Association
10:05-10:20 a.m.	Homelessness Update	Human Services Agency
10:20-10:35 a.m.	Affordable Housing Update	Department of Housing
10:35-10:40 a.m.	Health Dept. Update	Health Dept.
10:40-10:45 a.m.	CEO Update	County Executive's Office
10:45-10:55 a.m.	Future Topics Discussion	All
10:55-11 a.m.	Thank you & Close	County Executive's Office

- If possible, consider establishing a designated area for federal agents to wait while the executive director/supervisors are notified. Ideally, this area should be separate from public-facing spaces. Please note that you cannot require federal agents to wait in that area if they do not want to.

A. What should I do if I am contacted by a federal immigration agent, including ICE, while at work?

Except in limited circumstances where federal agents have a valid judicial warrant (see Question C):

- You are not required to cooperate with federal agents or answer their questions.
- You may **request** that federal immigration authorities wait in a public space (or in another space that has been designated for federal immigration authorities to wait) while you contact your assigned case director/supervisor.
- You should never attempt to interfere with federal immigration authorities' enforcement activities (including their entering non-public spaces, and you should not attempt to detain anyone who is entering non-public spaces, and you should immediately **notify** your executive director/supervisor or designated immigration response personnel of the situation. The executive director/supervisor or designated immigration response personnel should immediately notify your COB's legal counsel and should **transmit** any documents that have been provided by the federal immigration authorities.
- Do not advise clients or the public (be it on the radio or to respond to federal agents).
- You may, however, provide clients with the following information about them or their community:
 - The name of the community center.
 - The name of the COB.
 - Community Affairs at <https://www.unesco.org/ircsd/how-your-studio-to-have-on-site-for-client-contacts>.

B. What should I do if federal agents present a warrant and request access to non-public areas or records?

REQUEST that the agent wait while you **NOTIFY** your executive director/supervisor or designated immigration response personnel and immediately **TRANSMIT** all documents provided by the agent to the executive director/supervisor or designated immigration response personnel and your CBO's legal counsel. The executive director/supervisor or designated immigration response personnel should contact your organization's legal counsel for further guidance.

1. **County Attorney's Office**
- Guidance on Federal Immigration Enforcement Interactions

- 2. Health:**
 - Guide to Supported Housing Provider Requesting Support from County Health
 - Guide to Interim Housing Partner Requesting Support from County Health
 - Guide to External Partner Requesting Consultation or Support from County Health regarding Unnoused Person(s)
- 3. Presentation Slides**

Definitions

- **Federal Immigration Authorities:** Any agent of the federal government that may be tasked with enforcing immigration law including, but not limited to, agents from U.S. Immigration and Customs Enforcement (ICE).
- **Administrative Warrant:** Authorization issued by an administrative official for specific administrative action. Typically issued by an "Immigration Judge" or "Administrative Law Judge."
- **Judicial Warrant:** Authorization issued by a federal judge allowing specific acts, such as property searches and arrest. Typically issued by a "District Judge" or "Magistrate Judge."
- **Subpoena:** A legal document issued by a government agency requesting documents or evidence.

General Procedures/Recommended Process

Federal immigration officers may appear at your workplace and ask for information, request to be allowed on the premises, or present you with subpoenas or federal warrants, which may be either judicial or administrative. The following are best practices for addressing federal authorities if they appear at your workplace:

- Designate an individual(s) to handle interactions with federal immigration authorities. Ensure this person's contact information is readily available to all staff.

II. Immediate Notification to Department Leadership:

- If federal immigration authorities contact you or arrive at your workplace, **request** that they wait and immediately **notify** your executive director/supervisor or designated immigration response personnel of their presence. The executive director/supervisor or designated immigration response personnel should then immediately inform your legal counsel of the presence of federal agents and **transmit** any warrants, subpoenas, or information requests to them.
- During non-business hours, if available, consider designating a contact person to handle immigration enforcement-related situations. Provide employees with the designated contact's phone number and/or email address.

III. Designated Area for Federal Immigration Agents:

We recognize the essential role that community-based organizations (CBOs) play in supporting San Mateo County residents, including immigrant communities. In light of potential interactions with federal immigration enforcement authorities, we want to provide guidance to help you navigate these situations while safeguarding the rights of your staff and clients.

First of all, we encourage you to consult with your organization's legal counsel or reach out to Legal Aid when faced with immigration enforcement actions. Additionally, the County provides valuable resources on immigrant rights, including "Know Your Rights" materials and a Rapid Response hotline available 24/7, which can be found on the County's website. These resources may be helpful for you and your clients in understanding their rights and available support.

The proposed actions in this guide are summarized in the below Quick Guide:

- **First REQUEST** that any federal authorities wait while you contact the executive director/supervisor or designated point of contact (e.g., an executive director, legal advisor, or other designated personnel). Ask the agents to provide any documents, subpoenas, or requests they may have.

- **Second, NOTIFY** your executive director/supervisor or designated immigration response personnel of presence of immigration enforcement authority/section. If your organization has legal counsel, we strongly encourage you to consult with them for guidance.
- **Third TRANSMIT** any documents provided by federal authorities to your executive director/supervisor or designated immigration response personnel and your organization's legal counsel.



C. What should I do if federal agents present a warrant?

Contact your Community Based Organization's legal counsel and transmit documents for review and further guidance. For your reference, we have attached the following documents to help distinguish between different types of ICE enforcement tools:

1. Judicial Warrants

- Judicial warrants authorize federal agents to conduct searches as specified in the warrant. Employees must comply with the warrant.
- If you are not the person named in the warrant, you should ask them to wait while you inform your executive supervisor. Immediately notify your executive director/supervisor or designated immigration response personnel to report the situation.
- The executive director/supervisor or designated immigration response personnel should notify your legal counsel and provide the documentation from the federal government to your legal counsel.
- Employees can monitor the search to ensure it is limited to the areas or documents specified in the warrant.

2. Administrative Warrants

- Administrative warrants authorize federal agents to arrest the person named in the warrant, so long as the official believes they are in a public area. For example, if the person is located walking down a public sidewalk an administrative warrant would allow their arrest. They do not grant federal agents authority to enter or search non-public areas or access records. The federal agent may wait for the person in a public area to execute the warrant but cannot come into non-public areas. Employees should know: a. You should not tell federal agents to "Please wait here while I get my executive director/supervisor."
- Notify** your executive director/supervisor or designated immigration response personnel immediately. The executive director/supervisor or designated immigration response personnel should notify your organization's legal counsel and **transmit** any documents immediately.
- You must not consent to their presence on the premises.
- You do not need to help federal agents find the person they are looking for, but you may not interfere in their lawful search.
- You may inform federal agents that you will not give them any information.

4472 / (203) NO-MIGRA. Your organization's legal counsel should also be contacted for further guidance.

G. Do staff have to share any of their own information with immigration officials who come to our offices?

- Staff are not required to provide personal information to federal agents unless presented with a valid judicial warrant that specifically requests it.
- Staff, especially those with Deferred Action for Childhood Arrivals (DACA) Asylum Cooperative Agreement (ACA), Lawful Permanent Resident (LPR), or other legal immigration statuses, may decline to answer questions about their name or response personnel immediately if they feel threatened or unsure about their rights in the interaction.
- The executive director/supervisor or designated immigration response personnel should contact the organization's legal counsel for further guidance.

H. May I record federal immigration agents?

- Under California law, recording is allowed in public spaces without the consent of the parties.
- However, if you record any interactions with federal agents, you must make sure not to interfere in the operations of the federal agents or obstruct their actions.

I. Utilize San Mateo County Resources on Know Your Rights & Family Preparedness Plans.

- Direct clients to the San Mateo County website for up-to-date resources on Know Your Rights and family emergency plans in case of ICE enforcement actions.
- Encourage immigrant families to prepare a family safety plan, including legal guardianship arrangements for children and important document storage.
- Remember that the County has this information available in English and Spanish.

J. Promote the San Mateo County Rapid Response Hot Line.

- Rapid Response Hot Line at (203) 666-4472 / (203) NO-MIGRA. The line is available 24/7.
- If someone is detained by ICE during a ride, the hotline will connect them with an attorney for legal representation.
- Encourage clients and staff to save the hotline number and share it within their community.

3. Judicial Subpoenas

- A Judicial Subpoena is a legally binding order issued by a court requiring a person or entity to produce documents, provide testimony, or appear in court. It carries the full authority of the judiciary and failure to comply may result in legal consequences.
- Most employees are not authorized to accept subpoenas issued to specific organizations or to decide whether to comply with those subpoenas. Please determine who in your office is authorized to accept subpoenas and follow your office protocol. Contact your executive director/supervisor and they should contact your organization's legal counsel for guidance as necessary.
- If you are not the person named in the subpoena, you should wait until your executive director/supervisor may ask federal agents to wait while you contact your executive director/supervisor.
- Notify** your executive director/supervisor or designated immigration response personnel immediately to report the situation and pass on the subpoena. The executive director/supervisor or designated immigration response personnel should notify your legal counsel and provide the documentation from the federal government to your legal counsel and **transmit** any documents to determine whether there is a valid subpoena.

4. Administrative Subpoenas

- An administrative subpoena is issued by a government agency (such as ICE, DHS, IRS, or DOJ) as part of an investigation. Unlike judicial subpoenas, they do not carry the full authority of the judiciary and are typically used for obtaining documents or information from businesses or individuals.
- Notify** your executive director/supervisor or designated immigration response personnel immediately to report the situation and pass on the subpoena. The executive director/supervisor or designated immigration response personnel should notify your legal counsel for further guidance and transmit any documents to determine whether there is a valid subpoena.

D. What should I do if federal agents ask for permission to enter or search a non-public area without a warrant?

- Inform federal agents that you cannot consent to their presence in non-public areas.
- Notify** your executive director/supervisor or designated immigration response personnel immediately.
- Do not attempt to interfere with federal agents.

E. What if federal immigration authorities request client's information?

- Federal agents must have a valid judicial warrant or subpoena to access non-public client records.

K. Ensure compliance with laws related to ICE Enforcement & Harboring Prohibitions.

- Do Not Physically Interfere with ICE: Employees and volunteers must not obstruct or physically prevent ICE officers from conducting enforcement actions.
- Do Not Destroy or Alter Documents: Destroying or hiding records to obstruct an investigation can result in criminal charges (18 U.S.C. § 1519).
- Understand Harboring Laws: Knowingly concealing, harboring, or shielding undocumented immigrants from detection may lead to serious penalties under 8 U.S.C. § 1324.
- Contact your organization's legal counsel for further compliance guidance.

By following these guidelines, employees can ensure compliance with applicable laws while maintaining professionalism and supporting their commitment to serving our community.

- Without proper documentation, staff may not provide any information. Instead, inform federal agents that you cannot release any records without authorization. For example:

- "Please wait while I notify my executive director/supervisor."
- The executive director/supervisor or designated immigration response personnel should wait until the executive director/supervisor is able to release any information without a subpoena, warrant or authorization.

- Before allowing access to any client information, immediately **notify** the executive director/supervisor or designated immigration response personnel and **transmit** any documentation presented by the federal agents to your organization's legal counsel for review and further guidance.

F. To what extent can federal agents remain in our parking lots and lobbies, which are generally open to the public?

- Federal agents may remain in public areas, such as parking lots and lobbies, as these are open to the public. However, the department can do the following:

- Monitor** their presence and document it for internal reporting purposes.
- Notify** the executive director/supervisor or designated immigration response personnel to evaluate the situation and determine whether legal authorities need to be contacted.
- Call the San Mateo County Rapid Response hotline at (203) 666-4472 / (203) NO-MIGRA. This hotline is open 24/7.
- If federal agents are in the lobby, the executive director/supervisor should arrive to document any suspicious activity from ICE. If there is an arrest, an attorney will provide legal assistance to those affected.

- If federal agents' presence disrupts operations or causes a chilling effect on clients' access to services, the executive director/supervisor or designated immigration response personnel should call the San Mateo County Rapid Response hotline at (203) 666-4472 / (203) NO-MIGRA. This hotline is open 24/7.
- The executive director/supervisor or designated immigration response personnel should also contact your organization's legal counsel for further guidance.

- If time is of the essence and your attorney is not available, the executive director/supervisor or designated immigration response personnel may politely ask the federal agents to leave. For example:

- "We have noticed that your presence may be causing distress to our clients. May I ask you to relocate?"

- If they refuse, the executive director/supervisor or designated immigration response personnel should call the San Mateo County Rapid Response hotline at (203) 666-

Appendix A: Sample Judicial Warrant – AO 95 (Rev. 11/13) Search and Seizure Warrant

AO 95 (Rev. 11/13) Search and Seizure Warrant

UNITED STATES DISTRICT COURT

for the

In the Matter of the Search of _____
Do not remove this page from the warrant.
or identify the person by name and address _____ Case No. _____

SEARCH AND SEIZURE WARRANT

To: Any authorized law enforcement officer

An application by a federal law enforcement officer or an attorney for the government request the search of the following person or persons located in the following place or places: _____ District of _____

Having the person or persons listed above to be arrested and/or to be searched:

I, the undersigned, do hereby certify that I am a United States District Judge for the District of _____

YOU ARE COMMANDED to execute this warrant on or before _____ (not to exceed 14 days)
□ In the daytime (6:00 a.m. to 10:00 p.m.) □ At any time in the day or night because good cause has been established.

Unless delayed notice is authorized below, you must give a copy of the warrant and a receipt for the property taken to the person from whom, or from whose premises, the property was taken, or leave the copy and receipt at the place where the property was taken.

The officer executing this warrant, or an officer present during the execution of the warrant, must prepare an inventory as required by law and promptly return this warrant and inventory to _____ (United States Magistrate Judge)

□ Pursuant to 18 U.S.C. § 3103(b)(3), I declare that the search and seizure may be conducted pursuant to 18 U.S.C. § 2703 (except for delay of search) and authorize the officer executing this warrant to delay notice to the person who, or whose property, will be searched or seized (unless it is impracticable to do so).
□ For _____ days and/or to extend 30 □ until, the facts justifying the later specific date of _____

Date and time issued: _____ Judge's signature: _____
City and state: _____ Printed name and title: _____

JUDICIAL SUBPOENAS v. IMMIGRATION SUBPOENAS

[illegible]

2.2 Submit Your Request

Health Team	Primary Contact	Contact Information
BHRs (Mental Health)	Talisha Racy	Tracyr@smcpgov.org
BHRs (Alcohol and Other Drugs)	Mary Taylor Fullerton	MTFullerton@smcpgov.org
ADS	Dyshun Beethars	DBeethars@smcpgov.org
PHPP (Clinics)	Amesha Pather	APather@smcpgov.org
PHPP (Pradiges to Wellness)	Cornelli Genetti	CGenetti@smcpgov.org
SMAC	Patient Advocate	HS-SMAC_PatientExp@smcpgov.org

The best way to receive consultation about a specific situation is to start with your routine liaison to SMC Health services; but if you do not have one, start by reaching out to the divisional liaison most likely to be able to direct your request.

Before reaching out, prepare a concise written request marked *Consult requested* and *Confidential* in the headline and in the text that includes:

San Mateo County Health provides a range of services and consultations to support interim housing (shelter) providers who may not have an ongoing connection with Health. You can contact us if you need guidance on supporting a client with a suspected behavioral health, cognitive, or complex medical issue that affects their housing stability.

If the client is already known to County Health, the staff may be unable to share specific information about the client due to privacy regulations health providers must follow. However, Health staff may accept referrals or offer consultations by relaying information to the team most involved with the client so they can work with the client to maintain stable housing.

For any individual experiencing crisis related to their mental health or substance use disorder, call the San Mateo County Mobile Crisis Response Team (MCRFT) at 650-579-0350 for crisis de-escalation and intervention support. A team of two mental health professionals is available 24/7 to provide assistance.

HOW TO REQUEST NON-CRISIS SUPPORT:

SMCH Health has multiple teams specializing in different services. Interim housing providers who already have a routine liaison with staff from one of the following teams or a contact with the treatment team may want to first request support directly from that liaison or treatment team contact. If not, decide which team would be most likely to be able to assist you.

- **Behavioral Health (BHHS):** Mental health and substance use treatment services.
- **Aging and Disability Services (ADS):** Older and disabled adult services.
- **Public Health Policy and Planning (PHPP):** Case Management services (Bridges to Wellness program), street and field medicine teams, disease prevention, wellness initiatives.
- **San Mateo Medical Center (SMHC):** Outpatient, inpatient, emergency medical services; psychiatric inpatient and emergency services.

You can either refer a client for services or request a consultation with a team when you have any questions about where to refer or other concerns about a client that would benefit from a consultation.



Guide to External Partner Requesting Consultation or Support from County Health regarding Unhoused Person(s)

3/12/2025

San Mateo County Health provides a variety of services for unhoused residents in order to help them maintain good health as well as engage in medical, mental health and addiction services to support their recovery. Health teams partner with the Homeless Outreach Teams (HOT) and other field-based teams across the County to address unhoused residents' needs for medical, mental health and addiction services and link unhoused residents to shelter, housing and other supports.

The best way to assure that a consultation request for one of the health teams reaches the most appropriate staff member as quickly as possible and to assure coordination with any existing staff already working with the unhoused person is to use the following process:

San Mateo County Mobile Crisis Response Team (MCRFT): For any individual experiencing crisis related to their mental health or substance use disorder, call the San Mateo County Mobile Crisis Response Team (MCRFT) at 650-579-0350 for crisis de-escalation and intervention support. A team of two mental health professionals is available 24/7 to provide assistance.

Homeless Engagement, Assessment, and Linkage (HEAL): HEAL team provides preventive conditions, with the goals of connecting them to longer term treatment programs as well as addressing any behavioral health barriers to available housing options. HEAL is a short-term program up to 3 months services.

Street and field medicine team: San Mateo County Mobile Clinic provides client-centered medical care to residents and families who are 18 years and older. Mobile Clinic sites are located throughout San Mateo County to improve access to care for the community and aims to provide care for urgent and chronic medical needs, while helping individuals navigate and link to mental health and specialty care.

Adult Protective Services: Conduct investigation of physical, sexual, financial abuse, neglect, self-neglect, or abandonment of individuals 60 years or older or individuals 18-59



1. Making a Referral:

Health Team	Services	How to make a referral
Behavioral Health and Recovery Services (BHRS): Homeless Engagement, Assessment, and Linkage (HEAL) Other Drugs	BHRS IMAT team provides medication-assisted treatment for clients with substance use disorder. Goal of connecting them to longer term treatment programs.	HS_BHRS_HEAL@smcgov.org
Aging and Disability Services (ADS): Health Policy and Planning (PHPP)	Older and disabled adult services including adult protective services and case management. Client services through Bridges to Wellness team.	all IMAT 7 days / week at 650-579-0350. If you have a client who is not taking the call, they will call back that day. • Send a secure email to HS_BHRS_IMAT@smcgov.org • HA_AAS_APS@dot@smcgov.org • Bridges to Wellness Referral Form

2. Requesting a Consultation

The best way to receive consultation about a specific situation is to start with your routine liaison to SMCH Health services but if you do not have one, start by reaching out to the divisional liaison most likely to be able to direct your request.

2.1. Prepare Your Request

Before reaching out, prepare a concise written request marked *Consult requested* and *Confidential* in the headline and in the text that includes:

- **Client Information:** Brief overview of the client, client's current location, and their situation, current barriers that are causing housing instability, and risk factors such as history of self-harm or harm to others.



years-old who are dependent adults. APS will collaborate with the victim, law enforcement, clinical teams, financial institutions, support systems by offering interventions which can reduce/ prevent health/safety risks.

Health Team	Primary Contact	Contact Info
MCRFT	Shirley Chu	650-579-0350, available 24/7
HEAL		HS_BHRS_HEAL@smcgov.org for referrals Schul@smcgov.org for other inquiries
Mobile Team	Anessa Farber, Public Health Clinics Manager	afarber@smcgov.org
Adult Protective Services	Bernhard Valladares (Inmate Sup)	Bvalleda@smcgov.org (650) 715-8221

If the client is already known to County Health, the staff may be unable to share specific information about the client with the referring party due to privacy regulations health providers must follow. However, Health staff may be able to provide consultation and relay information provided by the referring party to the team most involved with the client so they can work with the client to take advantage of housing and other resources that are offered.



- **Specific Request:** Clear description of what support or consultation you are seeking.
- **Timeline:** Any relevant deadlines or desired timeframes for the support.
- **Contact Information:** Name, title, email, and phone number of your primary contact person.

2.2 Submit Your Request

Contact information:

Health Team	Primary Contact	Contact Information
BHRS (Mental Health)	Talisha Racy	TRacy@smcgov.org
BHRS (Alcohol and Other Drugs)	Mary Taylor Fullerton	MFullerton@smcgov.org
ADS	Dykhun Besthears	DBesthears@smcgov.org
PHPP (Clinics)	Anessa Farber	AFarber@smcgov.org
PHPP (Bridges to Wellness)	Christina Genetti	CGenetti@smcgov.org
SMHC	Patricia Advocate / Experience team	HS_SMMC_PatriciaAdvocate@smcgov.org

2.3 Follow-Up

If you haven't heard back after a week, consider sending a follow-up. Health teams may have varying response times depending on their workload and the complexity of your request.



Agenda

- ❖ Welcome, Introductions & Agenda Review
- ❖ Federal Immigration Issues
- ❖ Immigrant Services
- ❖ Housing Voucher Navigation Program
- ❖ Homelessness Update
- ❖ Affordable Housing Update
- ❖ Health Dept. Update
- ❖ CEO Update
- ❖ Future Topics



COUNTY OF SAN MATEO

2

Federal Immigration Issues



County Attorney's Office

3

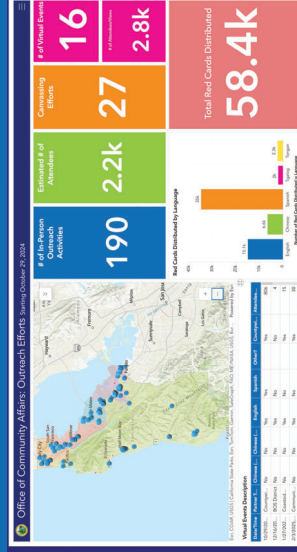
COUNTY OF SAN MATEO

Office of Community Affairs: Immigrant Services

April 14, 2025



Immigrant Services: Our Work by the Numbers



<https://tinyurl.com/OCAoutreach>

Overlay: Current Landscape and Impacts

- Fear of ICE Enforcements
- Increased Risk for Recent Arrivals and Pending Applicants
- Families avoid public systems entirely
- Increase of Know Your Rights Workshops
- Demand for Legal Assistance

Resources Available to Providers

- Know Your Rights Materials
- Rapid Response Hotline
- Preparedness Plans Templates
- Legal Assistance Resources List
- Host/Co-host Presentations / Events



Immigrant Outreach Highlights (Q1)

Residents Attended Events: **9,283**
Materials Distributed: **231,700** red cards, flyers, posters



Rapid Response Network Highlights (Q1)

Rapid Response Hotline Calls: **2,650** (24/7 multilingual support)

Legal Service: **28** - Intervention Assistance
12 -Detained

ICE Verifiers / Legal Observers: **300+** in San Mateo County

Story from our community

In March, a pregnant mother attended an ICE check-in with her two young children. All three were unexpectedly detained.

Our Rapid Response legal team was immediately activated. Attorneys were able to locate the family and provide legal assistance. Emergency housing assistance was arranged for the father, who was not deported, ensuring stability for the family during a traumatic time.

Partner With Us....

- Share Red Cards
- Request Printed Materials for shelter/lobby
- Train Your Staff on Immigrant Rights
- Access SMC RapidResponse.org for resources
- Encourage Accompaniment at ICE Check-in Appointments
- Discuss emergency plans conversations
- Host/Co-host "Rights and Housing Access"
- Follow Us @ SMC_CommAffairs 

Stay Connected!



Mental Health Association of San Mateo County is dedicated to enriching the quality of life for individuals in our community by providing stable housing and supportive services.



HomeStat Presentation
April 14, 2025

HOUSING VOUCHER NAVIGATION PROGRAM (HVP)

- > **Program Goal:** To connect homeless single individuals with case management and support services needed to secure permanent housing opportunities.
- > **Funding:** Started in 2020 with an initial grant from the Department of Housing through their Equity and Innovation Fund. Current funding through June, 2023.



Services Provided Case Management



- > Outreach to all referrals
- > Provide case management to connect and coordinate throughout the process
- > Assistance Completing Applications for Housing and other services
- > Regular Meetings With Applicants to collect required documents for housing applications.
- > Transportation Assistance
- > Referral for Medical, Mental Health, Dental and Social Services
- > Support Connecting To Additional Community Programs
- > Help Completing Forms and Applications For Other Assistance and Programs

Documents Required by Program

- | Rapid Rehousing | Special Notice of Funding Opportunities | Permanent, Supported Housing Subsidy |
|---|---|---|
| <ul style="list-style-type: none">> Photo Identification> Social Security Card> Proof of Income (if any)> Proof of Residency> Chronic Homelessness Certification> Criminal Justice Background printout> Case Summary | <ul style="list-style-type: none">> Photo Identification> Social Security Card> Proof of Income (if any)> Proof of Residency> Chronic Homelessness Certification> Criminal Justice Background printout> Case Summary | <ul style="list-style-type: none">> Photo Identification> Social Security Card> Proof of Income> Proof of Residency> Chronic Homelessness Certification> Criminal Justice Background printout> Disability Certification by Licensed clinician. |



Current Service Goals

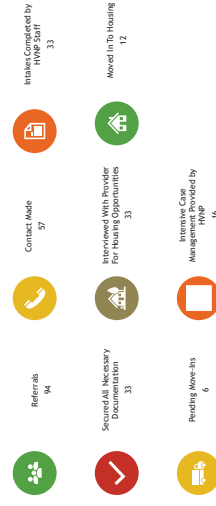
1. Accept up to one hundred and fifty (150) CES referrals for housing opportunities in FY 2023-2024.
2. Outreach will be attempted for 100% of matches within 3 working days.
3. Contact will be made with at least 75 individuals.
4. Of the 75 individuals, at least 54 intakes will be completed.
5. Case management will begin immediately to secure housing for referrals and complete needed applications for housing.
6. For 100% of individuals who complete and submit applications for housing, HVA will provide up to 60 days of case management and support to assist in providing a warm hand-off to next provider.

Referrals Since 2020

- > Referrals:
 - > 457 Since 2020
 - > FY 2020-2021 - 34 (year of COVID)
 - > FY 2021-2022 - 75
 - > FY 2022-2023 - 93
 - > FY 2023-2024 - 160
 - > FY 2024-2025 (through March) - 95

We rely on CES to provide the referrals.

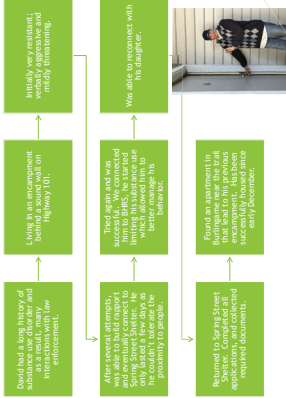
Current Year Outcomes August 19, 2024 - March 2025



Why people don't make it into housing?

- 1. We cannot locate the clients. All the information available is either out of date or phone numbers are disconnected.
- 2. The documents required cannot be obtained in the required time frame, e.g. must be within 10 days for RHI.
- 3. Individual is too unstable/unwilling to attend meetings, provide required information, or agree to complete forms as an example. We continue trying.
- 4. All documents are provided, applications submitted and approved, but the client does not show up. Some providers receive 5 (+) referrals for only one opening.
- 5. All documents are provided, applications submitted and approved, but client disappears.

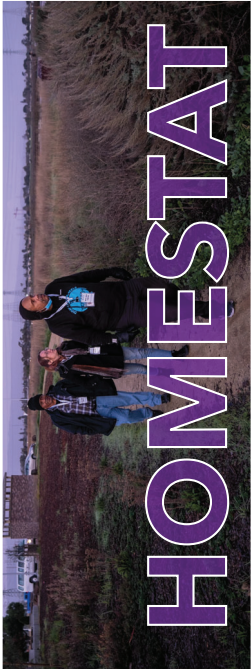
Success Story



Thank you

Jalen Rasoul
jalenr@mhasmc.org

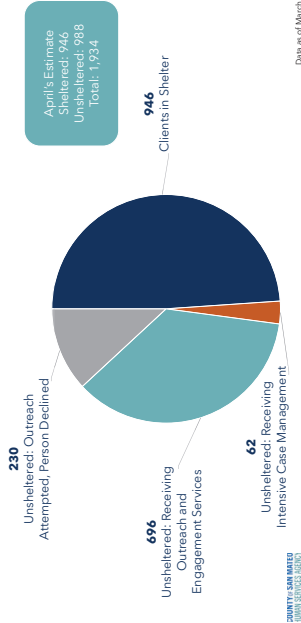
Georgia Peterson
georgiap@mhasmc.org



San Mateo County Human Services Agency
Center on Homelessness
April 2025

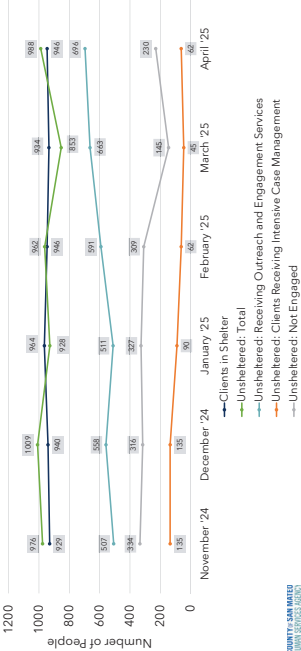


Our Count



San Mateo County Human Services Agency
COMMUNITY DEVELOPMENT
COUNTY OF SAN MATEO
DATE as of March 24, 2025

Our Count: November 2024 - April 2025



City	Our Count				April 2025 Compared to August 2024
	August 2024	February 2025	April 2025	April 2025	
Altaville	0	0	0	0	0
Arroyo	7	5	3	3	-4
Bellmont	7	5	3	3	-4
Bellmont	7	5	3	3	-4
Burlingame	0	6	4	4	-3
Colma	0	1	3	3	3
Daly City	46	41	57	57	11
East Palo Alto	75	64	50	50	-25
East Palo Alto	75	64	50	50	-25
Hill Moon Bay	142	122	97	97	-45
Hill Moon Bay	142	122	97	97	-45
Hill Moon Bay	142	122	97	97	-45
Menlo Park	75	113	131	131	56
Menlo Park	75	113	131	131	56
Menlo Park	75	113	131	131	56
Portola Valley	0	0	205	205	0
Portola Valley	0	0	205	205	0
Redwood City	244	159	166	166	-78
San Bruno	29	15	24	24	-5
San Francisco Int. Airport	0	3	3	3	3
San Mateo	132	93	94	94	-38
South San Francisco	108	97	70	70	-38
Unincorporated**	20	52	70	70	50
North	0	0	2	2	2
Central	0	0	0	0	0
South	8	3	7	7	-1
Woodside	0	0	0	0	0
Total	1,039	942	988	988	-51



COUNTY OF SAN MATEO
COUNTY OF SAN MATEO
COUNTY OF SAN MATEO

Homeless System Data

Shelter Inflow and Outflow
March 15, 2024 - March 15, 2025

1,660
Unique People

1,789
Unique People

Entries
2,294

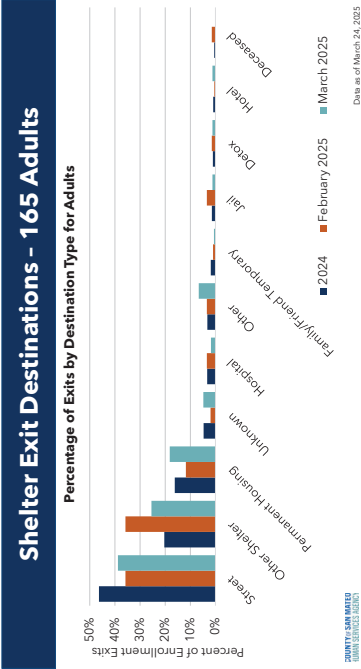
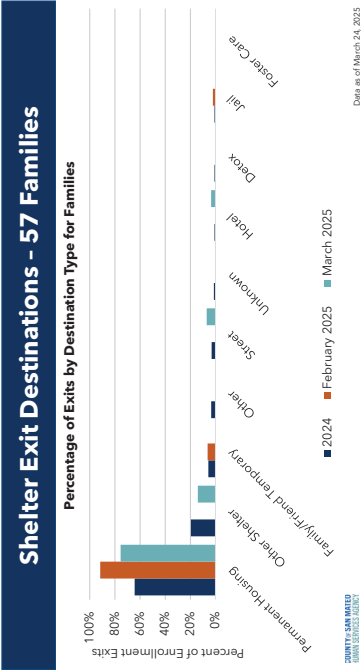
Exits
2,361

Shelter Name	Households Count on March 28, 2025	Total Capacity
Navigation Center	233	240 units
WeHOPE Shelter	63	109 beds
Safe Harbor Shelter	98	105 beds
Pacific Shelter	72	74 units
Coast House	45	51 units
El Camino House	44	44 units
First Step Emergency	36	39 units
Haven Family House	21	23 units
Family Crossroads	14	15 units
Redwood Family House	10	10 units
Daybreak	9	10 beds
Total	645	

COUNTY OF SAN MATEO
COUNTY OF SAN MATEO
COUNTY OF SAN MATEO

Shelter Exit Destinations

COUNTY OF SAN MATEO
COUNTY OF SAN MATEO
COUNTY OF SAN MATEO



Reasons for Shelter Exits

COUNTY OF SAN MATEO
COUNTY OF SAN MATEO
COUNTY OF SAN MATEO

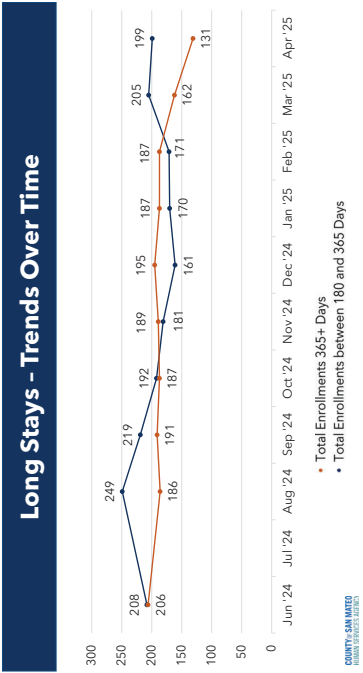
Reasons for Shelter Exits

Exit Reasons: Shelter Exits to All Destinations	Count	Percentage	Exit Reasons: Shelter Exits to the Street	Count	Percentage
Moved into permanent housing	182	25.2%	Unknown reason	128	57.7%
Transferred to another shelter for persons experiencing homelessness	181	25.0%	Non-compliance with program policy (not safety-related)	41	18.5%
Non-compliance with program policy (not safety-related)	139	19.2%	Safety or interpersonal policy violation	24	10.8%
Safety or interpersonal policy violation	65	9.0%	Reached shelter stay time limit	12	5.4%
Reached shelter stay time limit	53	7.3%	Other	12	5.4%
Health related reason	43	5.9%	No longer thought this program could help them	4	1.8%
Other	31	4.3%	Did not obtain TB test results within required timeframe	1	0.5%
Treatment facility	11	1.5%	Total	222	100.0%
Moved into temporary housing	4	0.6%			
Deceased	3	0.4%			
Total	723	100.0%			

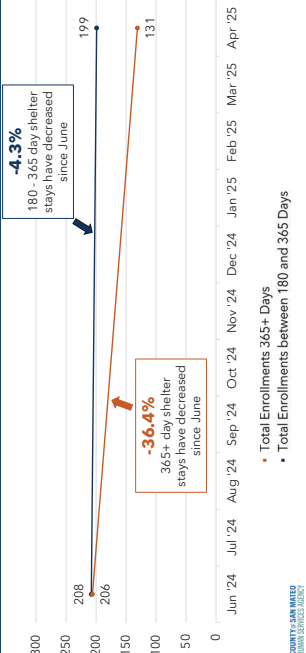
This data is from December 2024 - March 2025. Exits from the Inclement Weather Program are not included in these numbers.

County of San Mateo
COUNTY OF SAN MATEO
COUNTY OF SAN MATEO

Long-Term Shelter Stays



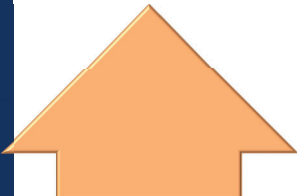
Long Stays - Trends Over Time



Encampment Resolution Fund Grant



ERF Outcomes



Data as of April 2, 2025

COUNTY OF SAN MATEO
COUNTY OF SAN MATEO

ERF Encampment Status

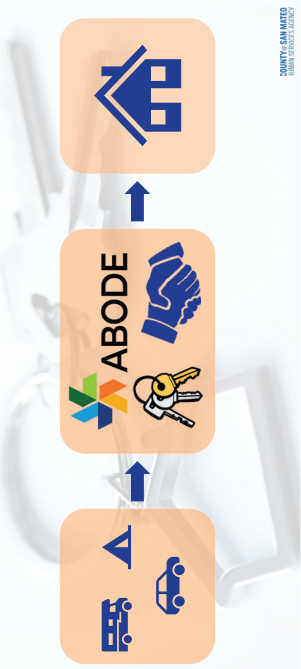


■ Active Encampments ■ Resolved Encampments

Data as of April 2, 2025

COUNTY OF SAN MATEO
COUNTY OF SAN MATEO

ERF Housing Interventions: Abode CalHome Bridge



COUNTY OF SAN MATEO
COUNTY OF SAN MATEO

Thank you!

Questions?

COUNTY OF SAN MATEO
COUNTY OF SAN MATEO

HOMESTART

DEPARTMENT OF HOUSING

ROZEENA JHINNU
MANAGEMENT ANALYST

APRIL 14, 2025

PSH HOMEKEY: PROPERTY STAFFING

SHORES LANDING			CASA ESPERANZA		
POSITION	QUANTITY	FT/PT/ VACANT	POSITION	QUANTITY	FT/PT/ VACANT
Community Manager	1	FT	Support Services Manager	1	1 FT
Lead Desk Clerk	1	FT	Bilingual Senior Case Manager	2	2 FT
Night Desk Clerk	1	FT	Case Manager	1	FT/Vacant
Maintenance Janitor	1	FT	Resident Services Specialist (Front Desk)	3	FT/ Vacant
Weekend Desk Clerk	1	PT	Resident Services Specialist (Front Desk)	3	PT/Vacant
Weekend Night Desk Clerk	1	PT	Property Manager	1	1 FT
Case Manager II	1	FT	Maintenance Manager	1	1 FT
Case Manager II	1	FT/Vacant	Janitor	1	1 FT
TOTAL (FT)		5	TOTAL (FT)		6
TOTAL (PT)		2	CURRENT VACANCIES		7
CURRENT VACANCIES		2			



EVICTIIONS AND EXITS

CASA ESPERANZA

SHORES LANDING

EXITS: MOVE OUTS/EVICTIONS		FEBRUARY 2025 & MARCH 2025		TOTAL Since Initial Lease Up
Evicted/Moved due to Eviction Notice	0	5		
Internal Transfer	0	4		
Relinquished Unit	0	1		
Gave notice	0	7		
Passed away	0	7		
Moved to alternate affordable housing or shelter	0	5		
Moved to hospital or nursing facility	0	3		
Moved to jail/incarcerated	0	1		
Moved in with family members	0	1		



EVICTIIONS AND EXITS

CASA ESPERANZA

SHORES LANDING

EXITS: MOVE OUTS/EVICTIONS		FEBRUARY 2025 & MARCH 2025		TOTAL Since Initial Lease Up
Evicted/Moved due to Eviction Notice	2	8		
Internal Transfer	0	0		
Relinquished Unit	0	2		
Gave notice	0	0		
Passed away	0	1		
Moved to alternate affordable housing or shelter	0	0		
Moved to hospital or nursing facility	0	0		
Moved to jail/incarcerated	0	1		
Moved in with family members	0	0		



INCIDENT REPORTS

Time Period: February 1st - March 31st

CASA ESPERANZA

Number of Incidents:

- ❖ Tier 1 (Critical) Incidents: **7**
- ❖ Tier 2 (Major) Incidents: **24**
- ❖ Tier 3 (Minor) Incidents: **39**

SHORES LANDING

Number of Incidents:

- ❖ Tier 1 (Critical) Incidents: **1**
- ❖ Tier 2 (Major) Incidents: **2**
- ❖ Tier 3 (Minor) Incidents: **0**



ACCESS TO SERVICES/BENEFITS

Time Period: February 1st -March 31st

SHORES LANDING		CASA ESPERANZA	
SERVICES/BENEFITS	QUANTITY	SERVICES/BENEFITS	QUANTITY
Number of residents accessing public services	50	Number of residents accessing public services	80
Number of residents accessing financial services	6	Number of residents accessing financial services	46
Number of residents accessing health services	168	Number of residents accessing health services	42
Number of residents accessing employment services	6	Number of residents accessing employment services	3
Number of residents receiving food assistance	56	Number of residents receiving food assistance	42



GROUP ACTIVITY PARTICIPATION

Time Period: February 1st -March 31st

SHORES LANDING

- ▶ **Activities:** 14
- ▶ **Participants:** 80 (total)

CASA ESPERANZA

- ▶ **Activities:** 11
- ▶ **Participants:** 65 (total)



AFFORDABLE HOUSING PIPELINE

	Completed	Pre-Development	In Construction	Total Units
<30% AMI Units	767	382	286	1,435
Homeless Units	543	306	157	1,006
All Affordable Units	2,875	1,202	862	4,939



PROJECTS BEGINNING CONSTRUCTION

Time Period: February 1st -March 31st

LINC Hill Street

- Belmont
- 37 units (total)
- 18 units for homeless

MidPen Oak Gardens

- Menlo Park
- 62 units (total)
- 60 units for veterans who are homeless or at risk of homelessness

Midway Village Phase 2

- Daly City
- 113 units (total)
- 29 units for homeless who are high-cost health users

PROJECTS BEGINNING CONSTRUCTION

North Fair Oaks

- San Mateo
- 86 units (total)
- 28 units for homeless who are high-cost health users
- 11 units for MHSA
- 2 units for general homeless

Magnolia Plaza

- South San Francisco
- Rehab loan
- 125 existing senior units
- Committed to add 4 homeless seniors referred by County Health as vacancies open






HOUSING VOUCHERS

	Project Based Vouchers	Tenant Based Vouchers	Total
Total Number of Housing Choice Vouchers	1,484	2,848	4,332
New Vouchers in FY 2024 – 2025	0	35	35
Upcoming Vouchers	294	0	294
Total	1,778	2,883	4,661





THANK YOU!

QUESTIONS?



Health Dept. Updates





CEO Updates





Future Topics Discussion



Thank You



April 14, 2025

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