

California Behavioral Health Planning Council
Housing and Homelessness Committee

Meeting Minutes
October 16, 2025

Council Members present: Susie Baker (virtual), John Black, Jason Bradley, Monica Caffey, Dave Cortright, Erin Franco, Lanita Mims-Beal, Barbara Mitchell, Don Morrison, Danielle Sena, Daphne Shaw, Maria Sierra, Bill Stewart, Arden Tucker

Staff present: Jenny Bayardo, Naomi Ramirez, Simon Vue

Presenters: Cricket Miller, Holly Valdes, Meghan Marshall, Giselle Sanchez

Meeting Commenced: 8:30 a.m.

Quorum Established: 14 out of 16 members

Item #1 Review and Accept October 2025 Meeting Minutes

The Housing and Homelessness Committee reviewed the October 2025 Draft Meeting Minutes. The minutes were accepted by the committee as written.

Action/Resolution

The October 2025 Housing and Homelessness Committee Meeting Minutes are accepted and will be posted to the Council’s website.

Responsible for Action-Due Date

Simon Vue – October 2025

Item #2 Review and Accept Draft 2025-2026 Committee Charter

The Committee shared feedback on the draft 2025-2026 Committee Charter.

Committee members suggested that the Charter should include housing needs for people of all ages, genders, and cultural backgrounds.

There was a suggestion to remove references to the “No Place Like Home” program, since it is set to end soon. Instead, members proposed that the Committee focus on newer efforts, such as housing interventions under the Behavioral Health Services Act (BHSA) and the Behavioral Health Infrastructure Bond. Another suggestion was to monitor changes at the federal level that might affect housing and homelessness policies. There were suggestions to make Housing First a top priority and explore other housing options like HomeShare, a program where people with extra space in their homes rent out a room to someone who needs housing.

The Committee talked about whether housing providers need to follow rules to keep residents safe and who is responsible for making sure they do. It was pointed out that many housing providers do not have formal oversight. Housing itself is not

licensed or certified unless it is a specific type of facility, like an adult residential facility or a social rehabilitation program. If Medi-Cal services are offered, those services must be certified, but the housing part is not. Oversight often depends on where the funding comes from. For example, programs funded by “No Place Like Home” are required to report annually on the services they offer and the number of residents who utilize them. However, in permanent supportive housing, residents cannot be required to participate in services.

Some Committee members were concerned about housing programs that do not offer support services. They said that resident managers often are not trained to handle emergencies and may have to call 911 when problems arise. The Committee shared examples of unsafe living conditions caused by a lack of support and stressed how important it is to include services in housing programs. Members suggested the Committee look into research from other states that questions the Housing First model, to help guide future decisions.

The Committee also talked about how the transition into a housing program can affect a person’s social connections. One member shared research from San Diego, which shows that people who are homeless often have strong social networks. When they move into housing, those connections can be disrupted, which might lead to loneliness or even loss of housing. There was a suggestion for the Committee to find ways to how to maintain and strengthen these social ties as part of housing strategies.

The Committee discussed whether the “No Place Like Home” program should still be mentioned in the Committee Charter. Some members thought it should be removed since the program is near its end. Others suggested the use of more broad language to describe supportive housing programs, so the Charter stays relevant as new programs are created.

The discussion concluded with general agreement on the proposed updates to the Committee Charter.

Public Comment

Barbara Wilson explained that most housing programs do not fall under formal regulatory oversight unless they are licensed under specific categories, such as Adult Residential Facilities, Residential Care Facilities for the Elderly, and Social Rehabilitation Facilities. She noted that housing programs outside these categories lack formal oversight.

Gregory Fearon stated that most housing program funding and oversight come from local Continuums of Care (CoCs), which receive state and federal funds and operate independently with limited oversight. He mentioned a shift where reduced federal funding is causing many CoCs to seek county assistance. In Sonoma County, CoC programs are integrating with the county's behavioral health system.

Item #3 Discussion of the 2025 Housing and Homelessness Committee Activities for the Council’s Year-End Report

Committee members reviewed a draft summary of the Committee’s activities and completed action items in 2025. This summary was provided to inform the Council’s annual year-end report. Daphne Shaw noted that the Patients’ Rights Committee had agreed to have the chair and staff finalize their report. She suggested that this committee do the same.

Action Item: Staff and the Chairperson will finalize the Housing and Homelessness Committee section of the Council’s year-end report for submission.

Public Comment:

Vanessa Ramos from Disability Rights California emphasized the importance of program fidelity, which refers to how closely programs adhere to their original design. She noted that program failures often stem from improper implementation. She highlighted peer support as an example, where untrained peers can lead to different experiences for participants. She encouraged the committee to assess whether staff providing services have adequate training.

Item #4 Housing and Homelessness Committee 2026 Work Plan

The Committee reviewed its 2024-2025 Work Plan and provided input for the development of the 2026 Work Plan.

The Committee talked about Assembly Bill 255, which focused on recovery housing. Although the bill was vetoed, members noted that new state guidance now allows support for recovery housing. They suggested the Committee look into how funding is used, whether recovery housing is included, and how to keep track of this information.

As part of Goal 2 in the Work Plan, the Committee discussed whether to review the performance of the Behavioral Health Bridge Housing program or remove it from the plan, since the program is set to end soon. Members also suggested the need to explore housing options for older adults that include health services.

The Committee also considered whether it would be valuable to monitor legislation related to housing and homelessness and explore advocacy opportunities. While the Committee would not take official positions or engage in advocacy, staff could coordinate with the Legislation and Public Policy Committee (LPPC), which leads efforts on legislation.

Staffing challenges in housing programs were another key topic. Members emphasized the need to strengthen recruitment and retention practices, promote cultural competence, and build supportive work environments. Members suggested a future presentation to explore successful staffing strategies.

The Committee talked about how counties manage housing and support services for people with serious mental illness. To help providers to better access services across different counties and systems, members proposed the idea of a resource guide. This guide would list available programs and help providers understand how to navigate within local systems.

Public Comment

Gregory Fearon emphasized that the Continuums of Care (CoCs) across California counties are at risk under current federal policies. He explained that many programs could lose support if funding disappears. He urged the Committee to pay close attention to this issue. Gregory also suggested that the Committee add “substance use disorder” after “Persons with Serious Mental Illness” For Goal 2.

Barbara Wilson thanked Dave for the suggestion to add HomeShare to the Committee’s work plan. She highlighted ongoing challenges with the coordination of care and funding in the homeless sector. She noted that many providers are unaware of licensed facilities until a crisis arises. Barbara emphasized that, while her county has many forms of shared housing, only licensed facilities receive oversight. This could lead to potential midnight evictions without public transportation options. She emphasized the need to address shared housing, tenant protections, and the safety of elderly parents living with seriously mentally ill adult children.

Item #5 Overview of San Francisco Department of Homelessness and Supportive Housing’s (HSH) Rapid Rehousing Programs

Cricket Miller, Manager of Scattered Site Housing Programs at the San Francisco Department of Homelessness and Supportive Housing (HSH), and Holly Valdes, Director of Housing Programs at the Homeless Prenatal Program (HPP), gave a presentation on San Francisco’s Rapid Rehousing Programs.

Cricket explained that San Francisco offers a variety of housing support, which includes:

- Site-based permanent supportive housing (PSH).
- Scattered-site PSH.
- Rapid rehousing.
- Time-limited housing subsidies.

These programs support various groups, such as adults, families, and young people transitioning to adulthood. Housing subsidies range from \$700 to \$3,000, based on the needs of each household. Cricket shared that the Rapid Rehousing Program provides a standard 24-month subsidy, with the option to extend up to 36 months. The program supports 1,400 households through the following services:

- Support with finding housing.
- Support with moving in and staying housed.
- Case management focused on keeping people housed.

She also shared program results from July 2024 to September 2025:

- 350 households moved into new homes.

- 600 households left the program.
 - Of those, 75 percent moved into permanent housing.
 - Only four percent became homeless again.

Holly Valdes then introduced the Supportive Housing Assistance & Readiness Efforts (SHARE) Program, a Rapid Rehousing initiative in San Francisco developed through a partnership between the Department of Homelessness and Supportive Housing (HSH) and the Homeless Prenatal Program (HPP). She began by describing the Homeless Prenatal Program (HPP), which began in 1989 and now serves over 3,500 families each year. HPP offers:

- Prenatal classes and support groups.
- Health education.
- Mental health services.
- Parenting support.
- Case management.
- Housing assistance, emergency support, and referrals.

Holly explained that SHARE began in 2016 to fill a gap in housing services. SHARE supports 32 to 40 families each year, which includes:

- Pregnant parents and families with young children.
- Families involved with Child Protective Services (CPS).
- Families facing domestic violence or immigration issues.
- Children with special medical or behavioral health needs.

A key feature of SHARE is the on-site behavioral health support offered by HPP. Families can immediately access parenting and peer support groups, as well as connect with onsite therapists without long wait times.

Questions and Answers (Q&A)

Barbara Mitchell asked how people are screened for Rapid Rehousing programs, especially those with serious mental health needs. Cricket explained that San Francisco uses a coordinated entry system that matches housing based on assessment scores and includes those with behavioral health conditions. She noted that fewer participants report behavioral health issues as the data is self-reported.

Arden Tucker asked what support is provided to people transitioning from the streets to housing. Holly shared that their team offers case management and life skills training, such as cooking and using appliances. When asked how long support continues after the program ends, Holly explained that SHARE provides ongoing aftercare services many families return for additional resources or to share updates.

Erin Franco asked how San Francisco measures progress in addressing homelessness. Cricket mentioned the city's "Home by the Bay" Five-Year Strategic Plan, a system-wide approach that involves multiple departments. The plan focuses on:

- Helping people move out of unsheltered homelessness.
- Keeping people housed.
- Making sure services are fair and accessible to everyone.

Cricket also shared a new performance metric: to track how many people return to homelessness within one or two years after receiving services. She explained the “cost per slot” methodology to fund housing programs, which shows the average annual cost per household:

- Family Rapid Rehousing: \$48,200.
- Adult Rapid Rehousing: \$39,600.
- Transitional Aged Youth (TAY) Rapid Rehousing: \$41,600.

Public Comments

Sulma asked whether the data included all services or only those focused on families. She also noted that people with fewer mental health needs moved into stable housing more quickly.

Samantha Tosetti asked why housing assistance is not available for young people under age 18. She shared that she works with transitional-aged youth in a rural community and defines the age range as 12 to 24.

Item #6 California Interagency Council on Homelessness (Cal ICH) Recovery Housing Guidance

Meghan Marshall, Executive Officer of the California Interagency Council on Homelessness (Cal ICH), and Giselle Sanchez, Housing First Specialist, provided an overview of the guidance on Housing First and Recovery Housing.

Meghan explained that Cal ICH coordinates homelessness efforts across the state and works with various state and local partners and stakeholders to integrate and align efforts. It does not run programs or issue grants but aims to make homelessness rare and brief through system integration and accountability.

Giselle described Housing First as an evidence-based model that places housing at the center of recovery and stability. She discussed Senate Bill 1380, which defines Housing First in California with 11 core components and ensures state-funded programs follow these principles. Giselle emphasized that services are voluntary, and substance use alone is not ground for eviction.

Giselle also clarified that recovery housing supports those who opt to stop using drugs or alcohol. The state’s guidance aligns recovery housing with Housing First and shows that both models can coexist when people choose recovery-focused services. The guidance includes four principles:

- Voluntary entry and service choice.
- Care focuses on each person’s needs.
- No evictions for relapse.
- Accountability with compassion.

Questions and Answers

When asked if housing operators can remove someone for using or possessing illegal drugs on-site, especially in a recovery setting, Meghan explained that programs must uphold lease agreements. While relapses or substance use alone is not a reason for eviction, programs can act if rules are broken or safety is at risk. Meghan added that if substance use threatens the recovery environment, a “warm handoff” may help the person move to more appropriate housing.

When asked if the California Interagency Council on Homelessness (Cal ICH) provides guidance on best practices, Meghan shared that they do not give program-level guidance or policies.

When asked about implementation, Meghan explained that it would happen through partnerships with state departments, cities, counties, and communities. She also mentioned the Governor’s recent veto of Assembly Bill 255 and clarified that the guidance was intended to address misunderstandings about recovery housing and Housing First.

Public Comments

Gregory Fearon from Sonoma County shared concerns about the survival of many continuums of care (COC) in California if they lose funding. He noted that some counties, including Sonoma, have moved these programs into their behavioral health departments to maintain services. Gregory asked if there would be guidance for counties on how to handle the potential elimination of the COC system.

Barbara Wilson raised concerns that programs often focus on individuals with both mental health and substance use disorders. Many families with adult children who have serious mental illness, but no history of drug feel these programs do not meet their needs. Barbara emphasized the need for options to stabilize individuals in licensed facilities and then move them to more independent housing. She asked whether there could be an expansion of the voucher process to better support these individuals.

Theresa Comstock, President of the California Association of Local Behavioral Health Boards & Commissions, asked about harm reduction in federally funded programs. She recalled one of President Trump’s executive orders that is against the use of harm reduction.

Zae Asa Illo from Youth Spirit Artworks shared concerns about "front door attrition" in their transitional shelter and drop-in center, where individuals disengage early due to lack of culturally competent care. Zae emphasized the need to improve cultural competency and person-centered care across providers.

Item #7 Presentation Debrief and Discussion

The Committee debriefed on the information presented by the California Interagency Council on Homelessness (Cal ICH) and the San Francisco Department of

Homelessness and Supportive Housing. Committee members also discussed potential next steps.

The Committee talked about how the information from the Cal ICH presentation aligns with the Planning Council's goals and discussed ways to work more closely with Cal ICH. Members pointed out that while Cal ICH gives guidance on recovery housing, developers face real challenges in building these types of homes. These challenges include high costs, limited financial benefits, and time constraints. There was a suggestion to look more closely at these issues to understand why recovery housing is not being built more often.

Members also raised concerns about accountability in recovery housing programs. Some programs say they offer person-centered care, but still follow strict rules that require complete abstinence, which may not work for everyone. There was a suggestion to share this issue with the Legislation and Public Policy Committee for possible advocacy. Members said that recovery housing programs should clearly explain how they operate, what standards they follow, how they measure success, and how many people leave or drop out.

The Committee noted that recovery housing is still a new option in California and offers more support than traditional sober living homes. Since there is not a standard model yet, members suggested that the Committee look for successful examples of recovery housing to help guide future efforts.

Public Comment

Samatha Tosetti thanked the Committee for the helpful information. She highlighted the need for more focus on transitional-aged youth (TAY). She emphasized that these young people are the future and should be a top priority.

Item #8 Wrap-up & Next Steps

Chair-Elect Maria Sierra thanked the Committee for their participation and time. The meeting adjourned at 11:40 a.m.