Minutes for Meeting of the HCCSC’s
Coordinated Entry Committee
August 27, 2019

PRESENT
Amy Dornack   Lisa Snyder
Lisa Waikem    Teresa Ponchak
Joy Brubach    Shirene Starn-Tapyrik
Jennifer Keaton Scott Schnyders
Jackie McDougle Natalie McCleskey
Kim Stanley    Diane Waite
Melissa Terrell Marcie Bragg

Welcome & Introductions
Scott welcomed the committee to the meeting.

Approval of Minutes – June Meeting
Scott asked for a motion to approve of the June meeting minutes that were previously distributed via email. Marcie moved and Shirene seconded the motion. All were in favor of approving the minutes as presented. Motion carried.

COC Board Update
a. Dedicated Plus Beds (AAQ Response)
   Marcie introduced the discussion around an AAQ response received since the last meeting. The question related to whether DedicatedPLUS units could serve only singles/individuals. Currently ACF and SMHA have DedicatedPLUS units. There was also uncertainty about whether any units, dedicated CH as well as non-dedicated, can exclude families with children. Marcie agreed to send a follow up question to the AAQ seeking clarification on how projects with limited bedroom sizes, due to owning those sized units or due to budget restraints on unit sizes, could be required to serve families with children. Marcie indicated that the NOFA had slightly differing language than that included in the AAQ responses and that she would use both sets of language to pose a follow up question. There was also a suggestion about reaching out to Stark County’s Fair Housing staff person, Valerie Watson, for guidance on familial status. It was agreed that we should first follow up with HUD and then take to Valerie if needed.

b. Shelter 10 – Day Out Rule (D2 revisions)
   Marcie reminded the committee that policy changes will be presented to the Board in November and May and that the Shelter 10-day out rule will be presented to the Board at their November meeting. She reviewed the committee-approved language and asked for any feedback. Teresa agreed with the language as approved. There were no other comments. There was some discussion around geographical preferences. It was also mentioned that a lot of folks on a 10 day out go to the H.O.T. location to seek shelter. It was determined last year that the H.O.T. location could not be considered a shelter and it has not been given that designation from the CoC at this point. This may warrant further discussion. Scott indicated
he would speak with Steve Robinson, director of the H.O.T organization, about their desire to seek shelter status and role within the CoC system.

It was noted that the 10-day out rule has been in operation at Refuge of Hope for a long time and works well for placing individuals in need of shelter and limiting the number of no shows.

It was also mentioned and made clear that DV shelters are not included in the requirement to exclude for 10 days. Kim Stanley did not think we needed to add additional language around this.

**Columbus Shelter Board – Conference Call**

At this time the committee called Erin Maus of the Columbus Shelter Board (CSB). The CSB was referred to us by our HUD Rep, Anthony Forte, when we inquired about other successful CoCs in Ohio who are conducting their Coordinated Entry in line with HUD expectations, in particular, that the CE system is completing intake, assessment and determining eligibility.

Erin explained the CSB system and that their system includes a document ready list. However, she shared that providers assist clients with obtaining documentation. Their system sounded quite similar to Starks in many respects such as having a homeless hotline and triage screening via the phone where HMIS data points are entered.

Families are prioritized and are immediately placed in shelter. There is also a face-to-face diversion meeting to try and divert participants from shelter. Singles are often placed on shelter waiting lists as there is an insufficient number of beds for singles. They often wait about three days and during that time work with outreach staff to collect documentation.

Erin explained their Priority Populations and Housing Assistance Assessment Form which is used to determine if RRH is an appropriated referral. They practice Dynamic Prioritization. Often when someone is being referred for RRH they are likely to also need PSH and would be directed to complete a PSH assessment also. If assessment indicates appropriateness for PSH they will be invited to complete the PSH packet. There are separate scoring tools for RRH and PSH and these were developed by their local team. Those in shelter who do not need RRH are provided a “light touch” of assistance via a resource specialist who is stationed within the shelter. All participants create a goal plan – either with RRH staff or shelter staff. Assessment scores are stored on a google doc, not in HMIS. Only people in shelter can be referred to RRH. PSH must prioritize Chronically Homeless. They first look at length of time homeless and clients with 100 days in shelter or more. They conduct case conferences for the most severe cases by meeting about once a week and pulling a monthly report. At any point in time they have a pool of document ready folks. They are offered 2 choices and if they decline they are not eligible for another PSH unit for a year.

They use Coordinated Entry funding for diversion. They pay for prevention from fundraising and local foundations.

They work closely with Fair Housing when developing procedures so have not run into any issues. They require families prove custody before placing in a family unit.
Following Discussion
The Committee discussed the notion of separate scoring tools used by CSB and liked the fact that our tool is uniform. One committee member mentioned that we seem to be ahead of the curve. We would be wise to bring our local Fair Housing Departments to the table when developing new policies.

The Committee liked the idea of shelters helping create Housing Plans from Day 1 with a focus on 30 days for exiting shelter, with possibility for extensions.

Teresa shared that our numbers have gone back up in just the past two weeks:

- 142 PSH active clients – 24 assigned to PSH – 118 left
- 126 RRH active clients – 21 being assisted with RRH placements – 125 left

It is a full time job just managing the list. Diversion efforts are very strong in Stark County. Single women appear to be the largest need again. There are a lot of DV cases arising where parents have lost custody of their children.

There is a lot of variation between agencies regarding how long they have an opening and when it is actually ready for placing someone.

There was discussion about adding another column to the Google Doc for a document ready list. However, there was also feedback that it does not seem that getting people document ready is causing much delay in getting people housed. However, there was still consensus that a document ready list would be helpful and could help speed up our intake processes.

It was shared that there is not a similar parallel system for veterans, as was described by the CBS, where there is systematic data sharing regarding veterans in order to track them and determine best referrals more easily.

HCCSC Strategic Planning Session Follow – Up
Marcie shared that 35 – 40 people, from a variety of agencies and staff positions, participated in the CoC’s Strategic Planning Sessions. The participants reviewed pathways people take to get into various types of housing. HUD allowed Stark County, through Corporation for Supportive Housing, to use the Stella M (Modelling) tool that will not be released nationwide until next year. We also used the Stella P (Performance) tool to assess current needs. The goal of the planning session was to identify the HCCSC’s current state and envision the HCCSC’s ideal state. The Stella P and Stella M tools assisted the HCCSC in determining participant flow in the system and the number of PSH Units and RRH units needed for each subpopulation (veterans, transitional age youth, chronically homeless, families with children and single adults). The System Performance Committee and providers are weighing in before the Board approves of the plan.

Some cross-cutting strategies that were also identified included:
- Use of data
- Affordable Housing
- Increasing employment income
- Fair Housing Education (for staff and clients)
- VA and CoC data sharing
- Youth specific services (particularly in shelter)

National themes are as follows (some overlap the local strategies identified above):
- Racial Equity
- Affordable Housing
- Employment
NAEH National Conference
Seven representatives from Stark County attended the National Alliance to End Homelessness Conference in Washington D.C. in July. There was a robust agenda and the representatives divided up to try to cover as many sessions as possible. Some of the sessions included topics such as:

- The LSA (an annual HMIS report)
- Stella M and Stella P
- Filling RRH vacancies with PSH clients
- Using flexible approaches with clients, building landlord relationships
- Dashboards
- Low Barrier Shelters
- Diversion – pin pointing Emergency Assistance to those “but for” the assistance would be in the homeless system
- Healthcare – funding for housing through Healthcare
- Racial Diversity and Equity

The conference discussed the national need:

- For every 100 veterans there are 75 potential beds
- For every 100 families there are 60 potential beds
- For every 100 singles there are 15 potential beds

QA Update

a. ESG Assistance for current PSH clients
There was discussion around the use of ESG assistance for RRH or PSH clients. The regulations shared and response from Anthony indicated that it is eligible for up to six months of rental arrears but that if someone is in a HUD funded program the program should be trying to work with the landlord and client to do payment plans to avoid the necessity for this resource to be utilized.
Scott asked what other communities are doing around this issue. He also inquired about how many times this is occurring and how much is being sent per client.
Jennifer indicated we could try to pull this data.
Teresa shared that clients may not qualify as well since Prevention requires that clients fall within a certain SPDAT score range to qualify.
We agreed to put this item back on the agenda for next month’s meeting.

b. Intake/Enrollment for Verification of Homelessness (AAQ Response)
There was discussion around what date is considered the intake/enrollment date and that if someone is documented as homeless on that date that they can live in another temporary location (not a literally homeless location) between that date and when they actually move in. The intake/enrollment date is when someone’s eligibility is verified and they are entered into a program that has a vacancy. This may be different from the lease up or move in date which may require some time to locate, prepare or inspect a unit.
It appeared, during discussion that the only uncertainty lay with programs offered by the YWCA and SMHA jointly as they had two separate intake dates. In these cases clients should be informed that they must still be literally homeless upon meeting with SMHA. There was also agreement that this would be a topic for further discussion between the YWCA and SMHA regarding who and when paperwork should/could be completed.

c. Emergency Shelter Work Group Update
The Shelter Workgroup is looking at developing uniform Housing Plans for all clients with a shelter task list for two weeks, 30 days and 60 days. All shelter providers should be sending the same message that shelter is for 30 days with possible time extensions. Amy Bullard, from ODSA, did confirm in a previous meeting that shelters can require that clients make certain progress while in shelter. Encouragement and expectations need to be increased.

Update on Homeless Navigation
The numbers from the hotline were previously shared during the meeting. Teresa also shared that they are currently at full staff.

Old Business
Prioritization Discussion – Need vs. Unit Size
There was further discussion around how cases will be prioritized when there is not an exact unit size match to meet a higher scoring family’s needs. Should the lower scoring but appropriately sized family be referred over the higher scoring family? There was mention of the caveat used in ICAN leases where it states that when a family size is inappropriate for the unit size they will be transferred when the next appropriately sized unit becomes available. Providers shared that the cost burden of turning over units is very high.

There was consensus that the Hotline should still refer the higher scoring family. Providers have the right to reject a referral based on unit size and should document this. If there are no other eligible PSH households then the Hotline would drop down to the RRH list for an eligible (disabled) family.

Adjournment
Meeting was adjourned at 11:35am.

***See back for 2019 Meeting Dates***
Coordinated Entry System Committee
2019 Meeting Schedule

September 24th  8:30 AM   Goodwill Campus
October 22nd    8:30 AM   Goodwill Campus
November 26th   8:30 AM   Goodwill Campus
December 24th   Cancelled – Christmas Eve!!! 😊