HOUSING and SUPPORTIVE SERVICES NETWORK

Joint Meeting

Strategic Planning and Discharge Workgroup (CoC Board) and

Coordinated and Centralized Assessment System Subcommittee Friday, December 13, 2013 8:30 to 10:30 am

County Public Services Building - Room 105/115 155 North First Avenue, Hillsboro, OR 97123

AGENDA

Chair: Annette M. Evans, Washington County Department of Housing Services Co-Chair: Judy Werner, Lutheran Community Services Northwest

I. Introductions

II. Approve Minutes[Action]

- A) October11, 2013 HSSN Workgroup
- B) November 8, 2013 Coordinated and Centralized Assessment System Subcommittee

III. **Business Items**

- A) "Community Connect" Process and Policy Review prior to Implementation
 - 1. Walk-thru of screening, assessment and referral process using draft policy and forms.
- B) FY2013 2014 CoC Program Homeless Assistance Grant Due 2/3/2014
 - 1. Est. of \$1.7 billion is available for FY2013, with FY2014 funding unknown (60 days after Congress enacts appropriation). The \$1.7 billion is not sufficient to cover the renewals nationwide. Washington County will apply for \$2.6 million for renewal of 15 projects - no new projects.

IV. Workgroup Meeting Schedule – Save the Date

- Friday, February 14, 2014 Joint Meeting Workgroup and CCAS Subcommittee
- Friday, April 11, 2014
- Friday, June 13, 2014
- Friday, August 8, 2014
- Friday, October 10, 2014
- Friday, December 12, 2014

V. Agency Announcements and Open Discussion

VI. Adjournment

Thank you for attending. Questions or comments, please contact Annette Evans at 503-846-4760

JOINT MEETING OF THE

HSSN STRATEGIC PLANNING AND DISCHARGE WORKGROUP

Administrative Board of the Continuum of Care in Washington County

AND THE

COORDINATED AND CENTRALIZED ASSESSMENT SYSTEM (CCAS) SUBCOMMITTEE

Public Service Building Conference Room 105/115 October 11, 2013

Workgroup

Role:

The Workgroup is comprised of public and private representatives of the homeless subpopulations that exist within the CoC geographic region, a formerly homeless consumer representative, and the Emergency Solutions Grant recipient agency. The Workgroup is the jurisdictional CoC Administrative Board, as established by the HSSN Mission and Governance Policy.

Responsibilities:

Perform CoC strategic planning, coordinate with and/or assist in State and local discharge planning, review performance outcomes of HMIS and HUD-funded programs, develop housing and service systems alignment, make funding decisions, and approve the McKinney-Vento Homeless Assistance grant application to HUD.

Subcommittee

Role: Providing the right resources, to the right person, at the right time! The system will:

✓ Screen to determine eligibility for assistance;

✓ Assess for barriers to housing and supportive service needs; and

✓ Refer to resources that assist the individual or family to regain stability in permanent housing.

JOINT ATTENDEES:

Browning, Rose - Good Neighbor Center Evans, Annette - Housing Services, Wash. Co. Fowler, Alisa – Luke-Dorf, Inc.
Galian, Katherine – Community Action Havener, Mark – TVF&R
Hennessey, Jaidra – Housing Independence Knapp, Mona - Luke-Dorf, Inc.
Paget, Rebeccah – Lifeworks NW
Rogers, Pat – Community Action

Schwab, Jack – Good Neighbor Center Sechrist, Lauren - Office of Community Development Smith, Rob – Cascade AIDS Project Stoulil, Vera – Boys & Girls Aid Toevs, Jeremy – Open Door Counseling Center Werner, Judy - Lutheran Community Services NW Wilcox, Kimberly – Sequoia Mental Health Services Inc. Winnie, Lana – Lifeworks NW

Chair: Annette Evans, Public Agency Representative <u>Annette Evans@co.washington.or.us</u> Co-Chair: Judy Werner, Nonprofit Agency Representative jwerner@lcsnw.org

Meeting called to order at 8:30 a.m.

I. INTRODUCTIONS

II. APPROVAL OF MEETING MINUTES

Motion: Approve Workgroup meeting minutes for June 14, 2013 with edits recommended by Mona Knapp on page 3, paragraph 2, to leave the sentence "Mona talked about confidentiality and how this may change with the new Affordable Care Act", and strike the balance of the paragraph as this statement was not connected with Mona's comment.

Action: Judy Werner
Second: Katherine Galian

Vote: Approved - Unanimous

Motion: Approve Subcommittee meeting minutes for September 20, 2013 with edits to page 3:

In the section on Outreach Materials, fill in the blank with Mark's last name "Havener".

 In the section on Training, Alisa Fowler requested the last sentence in that paragraph to read as follows: "Beginning January 2014, all homeless outreach contacts will be entered into HMIS."

Action: Katherine Galian Second: Jack Schwab

Vote: Approved – Unanimous

III. BUSINESS ITEMS

A) Centralized Assessment System Worksession

Annette Evans provided an overview of today's work to finalize the CCAS so that written standards and policies may be drafted, review the revised HMIS screening and assessment tools, and the scoring tool for referral/placement procedure. Community Action has offered to own and maintain the tools, and there was group support in favor of Community Action as the Lead Agency for maintaining the HMIS tools in support of the CCAS.

1. Screening and Assessment System Tools with Scoring Criteria
Katherine Galian provided a handout entitled "Washington County Coordinated
Assessment Tool" that summarizes the scoring criteria. This assessment tool assigns a
score of up to120 points based on level of need in the following categories: Income,
Housing History, Employment, Financial Status, Criminal History, and Health Summary.
Housing placement is based on points to include: ≤35 points is considered low barrier, 35 75 moderate, and 75+ high. Low scores result in referrals to prevention/rapid rehousing,
moderate to transitional housing and/or rapid rehousing with case management, and high
scores to permanent supportive housing.

Katherine took detailed notes of changes, such as adding CAP rent assistance to the list of services. Group discussion focused on the Health Summary scoring, specifically on the "Hospitalization for Substance Abuse/Detox" indicator. Mona, Alisa and others pointed out that detox doesn't necessarily involve hospitalization. Also, some people with severe substance abuse problems refuse to go to detox. So hospitalization is not the right indicator. The group decided to use "residential treatment and/or detox" instead, to more accurately reflect the degree to which a substance abuse problem interferes with maintaining housing or managing chronic health problems.

Mark Havener reported the Affordable Care Act is creating future changes to the EMS system that may include diverting away from the Emergency Room to community clinics. Hospitalization may not continue to be the end point for some of the chronic health conditions.

Katherine Galian reviewed the ServicePoint "Assessment Print Details". Group discussion focused on the Health Summary, specifically on the:

"Number of times in ER in the past 3 months" indicator. Jack Schwab asked about
incorporating urgent care into the indicator. The group agreed to use "Number of
times in ER/urgent care for the above conditions in the past 3 months" instead. This
works because the "above conditions" list is for serious health conditions, which
screens out visits to urgent care for toddler earaches, etc.

2. Coordinated Intake and Referral Process

Annette provided a handout of the housing inventory that will align with the CCAS. The group reviewed program details listed in the "Washington County Centralized Assessment System Program Eligibility" tool, and edits were captured by Annette. An updated list will be available at the next meeting.

Future action items identified included:

- Veteran Programs Pat Rogers will look up referral process to see if it's through CBOC or through the VA hospital, as Community Action administers the Supportive Services for Veteran Families (SSVF) program.
- Jubilee and Project Bloom Annette will call them to see if they agree to align with this new centralized assessment system.
- Katherine may have additional questions for housing programs on eligibility criteria.

Annette reported Melanie Fletcher, HMIS Administrator, is not able to attend the meeting today. She was prepared to provide an overview of how HMIS can be used to track bed/unit availability in homeless programs. Melanie had mentioned to Annette that Shelter Point may be an option. To move this forward, it was recommended that Melanie host a WebEx session to demonstrate how this would work.

Annette provided a handout "Centralized Intake and Coordinated Assessment System, Washington County, Oregon" that outlines the flow of people entering the CCAS. Rob Smith asked how the referral process would work, e.g. will they receive a referral form? Katherine provided an overview of the process to include the screening and assessment data uploaded in HMIS that will be available for the receiving agency, and communication between Community Action and the agency. The HMIS Unique ID will be used during the referral/placement process to provide confidentiality.

3. Data Gathering/Sharing in HMIS

Annette Evans will ask Melanie to update the group at the next meeting on required HMIS MOU language to support the CCAS. Katherine reported on the current shared agreement between many of the provider agencies and explained how HMIS can lock client specific data and only sharing HUD data points.

4. Marketing the System

Annette Evans facilitated a discussion of potential names for the CCAS. Proposed names:

- Housing Solutions No, too similar to Human Solutions
- Community Resource Center No, too similar to Community Resource Orientation
- CARe (Coordinated Assessment and Referral)
- CHARli (Coordinated Housing and Assessment Resource Locator) Concerns with how Veterans might relate, especially Vietnam vets.
- CARLi
- HARLi
- HARi
- HASAP (Housing as soon as possible) No, that name is used by a small agency that does
 housing for people with disabilities
- HOME No, there's another Washington County Home program
- HN (Housing Network) No
- Housing Help No
- Care Oregon No, taken
- HELP (Housing Emergencies Links for People) Like word "link"
- CR Link (Community Resource Link)
- LINK
- Community Link

Motion: Adopt the name "Community Link" for the new CCAS System.

Action: Pat Rogers Second: Vera Stoulil

Vote: Approved – Unanimous

Mona Knapp suggested registering the name with the state as a DBA to protect it.

5. Implement the System (Tentative January 2014)

Annette Evans provided an overview of the major tasks yet to complete prior to implementing the CCAS. This includes: incorporating edits on tools and documentation, develop standards and policy, securing staff to support the screening and assessment activities at Community Action, training for all agency staff using HMIS tools and bed inventory, testing the system, and marketing of the system.

The HSSN Workgroup and CCAS will hold a joint meeting on December 13 to test the process. The CCAS will meet on November 8 to review a proposed implementation plan.

Katherine and Pat asked about the expected volume of calls to Community Link. How many calls will Community Action have to handle on January 1? How many people find their way to the existing system now? Please ask your organization to email Katherine the number of people that call on a given day.

B) FY2013 CoC Program Homeless Assistance Grant

1. Ranking and Rating Process

Based on the June Workgroup meeting and provider agency input, Annette Evans submitted to HUD a request for \$2.6 million. At a recent meeting, HUD shared possible cuts up to 5% due to sequestration.

Annette reviewed two handouts from previous NOFA competitions, to include "Measuring Performance of HUD-funded OR-506 CoC Programs" used for renewal projects and "Washington County CoC Project Evaluation Criteria" for new project scoring. One of the requirements under the HEARTH Act is that we have a written policy for ranking and rating renewal and new projects.

Motion: Adopt the process outlined in the Measuring Performance of HUD-Funded

Projects as the criteria for ranking renewal projects in the NOFA, and the

Washington County CoC Project Evaluation Criteria scoring for selection of new

projects for submittal in the NOFA.

Action: Mona Knapp

Second: Rob Smith

Vote: Approved – unanimous

2. HUD Notice of Funding Available (NOFA) Grant Timeline

Annette reported the FY2013 CoC Program grant is not yet released due to the federal government shut down.

IV. WORKGROUP MEETING SCHEDULE

- A) Friday, November 8, 2013 will be a CCAS meeting to focus on HMIS and MOU pieces with Melanie, identify training, and review a transition plan for implementation.
- B) Friday, December 13, 2013 will be a joint meeting of the Workgroup and the CCAS.

V. ANNOUNCEMENTS AND OPEN DISCUSSION

There were no announcements.

VI. ADJOURNMENT

The meeting adjourned at 10:26 a.m.

Minutes prepared by Amanda McCloskey, Washington County Department of Housing Services

To be added to HSSN Workgroup email list, or the HSSN Coordinated and Centralized Assessment System, contact Annette Evans at Annette_Evans@co.washington.or.us.

COORDINATED AND CENTRALIZED ASSESSMENT SYSTEM (CCAS) SUBCOMMITTEE

Public Service Building Conference Room 105/115 November 8, 2013

Subcommittee

Role: Providing the right resources, to the right person, at the right time! The system will:

- ✓ Screen to determine eligibility for assistance;
- ✓ **Assess** for barriers to housing and supportive service needs; and
- ✓ Refer to resources that assist the individual or family to regain stability in permanent housing.

ATTENDEES:

Browning, Rose - Good Neighbor Center

Bundy, Valerie - Domestic Violence Resource Ctr

Calfee, Bridget -- HomePlate

Evans, Annette - Housing Services, Wash. Co.

Fletcher, Melanie - Housing Services, Wash. Co.

Fowler, Alisa - Luke-Dorf, Inc.

Galian, Katherine -- Community Action

Radke, Lydia - Luke-Dorf, Inc.

Schwab, Jack - Good Neighbor Center

Sechrist, Lauren - Office of Community Development

Winnie, Lana - Lifeworks NW

Chair: Annette Evans, Public Agency Representative <u>Annette Evans@co.washington.or.us</u> Co-Chair: Judy Werner, Nonprofit Agency Representative jwerner@lcsnw.org

Meeting called to order at 8:30 a.m.

I. INTRODUCTIONS

II. APPROVAL OF MEETING MINUTES

Motion: Approve minutes for October 11, 2013

<u>Action:</u> Katherine Galian <u>Second:</u> Lauren Sechrist

Vote: Approved - Unanimous

III. SUMMARY OF SYSTEM DEVELOPMENT ACTION STEPS

Annette Evans provided an overview of accomplishments to date, including a defined access point (Community Action) and the development of a screening and assessment tool with scoring criteria.

IV. SYSTEM DEVELOPMENT ACTIVITIES

1. Review updated Centralized Assessment System Program Eligibility

Annette Evans reviewed recent changes to the housing inventory list (which is the handout called *Centralized Assessment System Program Eligibility*). Changes include updated removal of the 6th Street Interim program and Project Bloom – it was noted these programs do not receive homeless assistance funds. More updates may be coming as Annette and Pat Rogers are meeting with Rick Stoller at the Veterans and Family Center on November 21 to look at how the VA Beds might align. Also, Annette will meet with Gerry Pruyn at Jubilee Transition Homes. This is a fluid document that is subject to change with the addition of future housing programs.

Katherine Galian reviewed a flowchart of how the screening and assessment for the CCAS will work. It's a still a work in progress. The system should work for 90% of folks, but some people will get "churned" – passed back from one step of the process to another, etc. It would be helpful to have a case management team to identify gaps, who is slipping through the gaps. (Expect that 70% of the time there will be no placement available.) Discussion on the formation of an oversight committee to address specific client issues in relationship to the

system process. Please contact Katherine if you're interested in serving on that oversight committee, especially if you're a mental health provider.

She discussed three of the various ways that homeless people can be referred to Community Action: through street outreach, a shelter, or a mental health crisis. The homelessness assessment can be conducted by different parties in those three cases.

- a. <u>Street outreach</u> staff will call the screening hotline (503-640-3263) rather than do the screening themselves, so that the people they find can get scheduled for an appointment with a Community Action housing specialist right away, without the delay of playing phone tag. The screening questions are basic demographics and includes where did you sleep last night. For folks that meet HUD homeless criteria, if they have an immediate need for a place to sleep, Community Action will try to make an immediate placement pending resource availability. Note that shelters are not considered a housing placement, just a place to be while waiting for a housing placement.
- b. Shelter staff will do the full assessment and share the results with the Community Action housing specialist. Shelter staff will arrange for the client to meet with the housing specialist to determine final scoring and make the housing referral/placement with the receiving provider agency. If there is no placement available (likely 70% of the time), they can check back in with the housing specialist, or determine an alternate placement plan, be referred to case management, street outreach, etc.
- c. <u>PATH outreach workers</u> will do mental health crisis and homelessness screening only. They make referrals to mental health agencies for full mental health assessments. Alisa Fowler and Lydia Radke explained how mental health assessment works:
 - First, an agency such as Luke-Dorf or LifeWorks NW gets a phone call from a hospital or PATH about someone who is having a mental health crisis.
 - Then, if insurance clears it, the agency provides an assessment. It takes one to three days to get permission to do an assessment, then one to two days to get data.
 - If there is no funding to do a mental health assessment (e.g. Luke-Dorf doesn't take Medicare so those folks don't get assessments), that means no homelessness assessment will be done and the individual will need to call the screening number. Alisa will create a mental health/insurance eligibility matrix to share with the group.

The group was concerned that this means that some people are turned away and wouldn't get a housing assessment. Lydia added that sometimes assessments are funded by County general fund dollars, but these are going away. Jack Schwab said that with the advent of the Affordable Care Act, theoretically everyone will be eligible for insurance and could be enrolled then and there. Lauren Sechrist asked if they could be signed up for OHP or Medicaid? Bridget Calfee said yes, the mental health crisis line (Washington County Crisis Line) helps them as well. In January we should have a sense of how ACA is implemented. It could mean that general funds now spent on uninsured people may be freed up.

Annette asked about homeless families who have mental health needs, how do those needs get identified? Katherine said they would be teased out in the assessment process.

2. Review HMIS tool for sharing available bed/unit inventory for referral/housing placement Bridget suggested that a Release of Information form be part of the intake process. Katherine said that yes, there will be an informed consent.

There was discussion about MOUs/interagency agreements as a potential solution. Melanie Fletcher suggested using HMIS ID numbers and stripping identifiers out so that there are no

names, etc. As long as there's no identifying data, it's HIPPA compliant. Bridget gave an example of how that sort of conversation sounds. Katherine pointed out that hotline staff don't need mental health data once homeless status is assessed.

Melanie discussed the use of ShelterPoint (an HMIS tool). GNC and others use ShelterPoint, with entries and exits. It's easy to use, and simple to train people to use and run reports. It works a lot like a hotel, motel check-in check-out system. Melanie will set up a webex training.

The big thing is to get everyone converted from entry/exit to using ShelterPoint. To do that, she needs to know what the make-up of your units are, etc. When a user goes in to look at bed lists, ShelterPoint will shows that x number of beds are occupied so you can see if any are available.

However, there are some challenges with using ShelterPoint for this project:

1. It won't work for all the housing inventory on the eligibility list. For example, Shelter Plus Care (SPC) is a dollar model, not based on beds. ESG is also not a static list of units/beds. Annette reported she will work directly with the Assessment Specialist on how the availability of Shelter Plus Care rent assistance.

- 2. ShelterPoint is designed for shelters that serve individuals. With families it's a little more complicated and the data entry flow is not quite as nice. A unit vs. bed issue. The ShelterPoint software vendor may be able to change this.
- 3. For current residents (marked in ShelterPoint as people who are already in beds), they haven't signed releases to share info. We will need to figure out what to do (e.g. VASH, TriHaven) When data sharing is turned on in ShelterPoint their names will show, which requires consent.

The group asked if ShelterPoint would work given these challenges plus the fact that many units don't have much turnover. Alternate option discussed were use of an informal system, stepped conversion of units to Shelter Point as they turn over, etc. There was agreement that it makes sense for short-term programs such as shelters to use it. The end agreement was a goal to convert all beds in the inventory (but not SPC or ESG) to Shelter Point by January 6.

3. Identify staffing needs for screening and assessment activities/ Training of Staff – What resources are needed? Who and when – by 12/13/2013?

Annette discussed the implementation schedule (handout), which she, Katherine and Pat Rogers developed. Rather than wait until funding is available for extra staffing, the plan is to go ahead and start implementing internal process and procedures, as there will be a learning curve, etc. There will be a pilot test in January 2014; this will identify info. needed to finalize system before it goes public. By April there will be messaging and marketing, including wallet cards that fire department requested, in order to emphasize that this is not a housing connections system, for housing crisis only. Implementation is April to June, depending on staffing.

Katherine is trying to figure out the volume of data that will be coming and what the staffing needs will be. She still don't have a solid sense of how many more people may be coming in. Sixty-three people per month come to their Community Resource Orientations but only 15% are literally homeless. The vast majority are doubled up or at risk. Most beds in the CoC are focused on literally homeless. Community Action would like to dedicate 1 FTE to this part, and are structuring staffing so that there is always backup if someone is out sick or on vacation. Right now they can commit .5 FTE.

4. <u>Develop HMIS data reporting for system performance analysis</u>

Melanie will explore reporting options that protect privacy for current residents, and work on HMIS reporting tools – reduction in homelessness, increase in earned income etc.

5. Name the system

Annette led the group through the selection of a name for the CCAS system. Last month this group decided on "Community Link," but it already exists in Washington County. New proposed names:

- Action Link no
- Housing Link no, because it's more than housing, also, housing may not be available
- County Link no
- Service Link no
- CCI no
- WC Partner Link no, sounds like a dating site
- WC Connections -
- WC Links no
- Westside Connections no, used to differentiate west vs. east county, others think of it as the Westside of Portland
- WC System Link no
- Community Connect ok, good because it ties in with project Homeless Connect
- Community Connections no, there's a Community Connection in Portland
- WC Connect yes
- WC Connections no
- Westside Link
- Westside Connect
- Connect no, like a dating site

Annette surveyed the members in the room and support for the name "Community Connect" was unanimous; no formal motion was made.

V. FUTURE MEETING SCHEDULE

Friday, December 13, 2013 will be a joint meeting of the Workgroup and the CCAS.

VI. ANNOUNCEMENTS

There were no announcements.

VII. ADJOURNMENT

The meeting adjourned at 10:15 a.m.

Minutes prepared by Amanda McCloskey, Washington County Department of Housing Services

To be added to HSSN Workgroup email list, or the HSSN Coordinated and Centralized Assessment System, contact Annette Evans at Annette_Evans@co.washington.or.us.