

METRO SUPPORTIVE HOUSING SERVICES

Washington County Local Implementation Planning Committee

December 3, 2020; 2 pm – 4 pm

<https://us02web.zoom.us/j/89512537098?pwd=ZmxyR3JlcExtQ2xpQi9yVnJvL00xUT09>

To Join by Telephone: +1 253 215 8782

Webinar ID: 895 1253 7098 Passcode: 993587

AGENDA

Facilitators: Anita Yap, Multicultural Collaborative
Heather Lyons, Corporation for Supportive Housing

- I. **WELCOME** (2:00 p.m.)

Anita Yap
(5 minutes)
- II. **BUSINESS ITEMS**
 - A. **Definitions** (2:05 p.m.)

A review of the final definitions of terms that will be recommended for final approval by the Board of Commissioners. The Committee discussed these definitions at the October 29 meeting.

Heather Lyons
(5 minutes)
 - B. **System Changes** (2:10 p.m.)

At the November 19th LIP Committee meeting several questions related to systems change were presented to the Committee for discussion. Results from this discussion will be presented with the intent of incorporating these comments into the Committee's recommendations that will be forwarded to the Board of Commissioners.

Heather Lyons
(20 minutes)
 - C. **Here Together Letter** (2:30 p.m.)

A facilitated discussion of points raised for Washington County in letter dated November 18 from Angela Martin, Executive Director of Here Together to Chair Harrington (attached).

Katherine Galian
(30 minutes)
 - D. **Community Engagement** (3:00 p.m.)

The Committee will review the results of community engagement activities, surveys and interviews which will inform the development of the Washington County Local Implementation Plan. This will be first part of a series of community engagement activities that will occur as the local implement plan is completed for Metro approval. The final local implementation plan will include ongoing strategies to ensure continuous community input.

Anita Yap
(40 minutes)
 - E. **Committee Issues** (3:40 p.m.)

Anita Yap
(10 minutes)
 - F. **Open Discussion.** (3:50 p.m.)

Anita Yap
(10 minutes)
- III. **ADJOURNMENT** (4:00 p.m.)

Attachments:

- November 19, 2020 Meeting Minutes
- Definitions
- System Changes
- Here Together Letter dated November 18
- Community Engagement Executive Summary

Future Meetings:

- December 10; 2:00 p.m. – 4:00 p.m.
- December 17; 2:00 p.m. – 4:00 p.m.

Additional information on the Metro Supportive Housing Services *Local Implementation Plan* is available online at www.co.washington.or.us/Housing/SupportiveHousingServices/index.cfm

To be added to the Metro SHS LIP Committee email listserv, contact Ally Jamieson, ally_jamieson@co.washington.or.us

Local Implementation Committee Meeting Agreements

- Keep one's video on whenever possible but respect that it isn't always possible due to technology limitations and home situations.
- Use the "Raise Hand" option to ensure the facilitator can manage input in an efficient manner.
- Give everyone an opportunity to speak, but in the interest of time, use Thumbs Up/Thumbs Down feature or chat to indicate agreement when comments are similar.
- Be conscious of and give space for people to speak especially those who don't always voice their opinion (Step Up/Step Back).
- Ideas to share/thoughts to convey may come after a meeting. It's okay to share those thoughts with facilitators via email or another format.
- Lead with racial equity. Facilitator and committee members should be conscious of and raise the issue, if and when they become aware of/observe individual experiences that call attention to systemic patterns.
- Strive to understand someone else's perspective when there is disagreement on an issue. Given the limitations of virtual meetings, Washington County staff will assist the facilitator to be aware of cues conveying disagreement.
- Practice "Safe Space," by not sharing stories or experiences outside of the group.
- Recognize and uplift other communication styles such as those using a circular "storytelling" rather than the more typical linear method
- Listen to understand and be willing to do things differently and experience discomfort, recognizing discussion will not always lead to closure.
- Maintain a virtual "Parking Lot" list of ideas/questions/topics for future meetings.

Revised 9.10.2020

FIST FOR FIVE DECISION MAKING

Voting will be done through the chat box by typing in “Fist,” “One,” “Two,” “Three,” “Four,” “Five.” Consensus would be achieved at a minimum of three fingers and members voting with less than three fingers should expect to voice their concerns.

Fist =	No
One finger =	Additional discussion needed/Suggest changes
Two Fingers =	More comfortable with proposal/Need to discuss minor issues
Three Fingers =	Not in total agreement/Feel comfortable to let it pass
Four Fingers =	Good Idea/Will work
Five Fingers =	Great Idea/I will assist in any capacity



**METRO SUPPORTIVE HOUSING SERVICES
LOCAL IMPLEMENTATION PLAN (LIP) COMMITTEE MEETING MINUTES
NOVEMBER 19, 2020, 2:00 P.M.
Virtual Meeting via Zoom**

The Local Implementation Planning Committee is a 21-member committee convened to advise the Washington County Board of Commissioners on the County's plan to implement the Metro Supportive Housing Services Measure. The purpose of the Committee is to provide strategic planning support and to ensure focus and direction of programs and services in accordance with the Supportive Housing Services Measure.

COMMITTEE MEMBERS PRESENT

Brooks, Bridget – City of Tualatin
Cohen, Megan – City of Beaverton/SWS-Beaverton
Duyck, Ignolia – Virginia Garcia Memorial Health Clinic
Evans, Annette – WC Dept of Housing Service
Galian, Katherine – Community Action Organization
Hartye, Chris – City of Hillsboro
Hille, Marcia – Sequoia Mental Health Services, Inc.
Kalevor, Komi – Housing Authority of WC
McGough, Andrew – Worksystems, Inc.
Pero, David – Forest Grove School District
Salvador, Nelli – Immigrant & Refugee Community Org (IRCO)
Soneoulay-Gillespie, Toc – Care Oregon
Stoullil, Vera – Boys & Girls Aid
Taylor, Rosemary “Rowie” – DVRC
Trinh, John – Luke-Dorf, Inc.

COMMITTEE MEMBERS ABSENT

Curran, Brendan – FG-United Church of Christ
Huggins-Smith, Sarah – SOS Shelter
McCrea, Erroll – WC Sheriff's Office/Jail
Mena, Javier W. – City of Beaverton
Schnitzer, Cole – U.S. Department of Veteran Affairs

STAFF MEMBERS PRESENT

Jamieson, Ally – County Administrative Office
Kuyll, Marni – Health and Human Services
Mazzara Myers, Elizabeth – County Administrative Office
Osuna, Ruth – County Administrative Office
Proctor, Jennie – Office of Community Development
Valencia-Aguilar, Mari – Office of Community Development

Facilitators: Anita Yap, Multicultural Collaborative
Heather Lyons, Corporation for Supportive Housing (CSH)

Meeting called to order at 2:03 p.m.

I. WELCOME

II. BUSINESS ITEMS

A. Needs/Gaps Analysis Review – Gabe Schuster and Ariana Saunders, CSH

Ariana and Gabe discussed diverse sets of data that identify community needs in Washington County, and the limitations of available data infrastructures to capture all community member experiences. Gratitude was expressed for LIP Committee Member participation in sharing additional data to incorporate into the need and gap analyses underway.

B. Regional Response, Ariana Saunders and Heather Lyons

Ariana and Heather discussed the objective to coordinate access to services with partnering jurisdictions and service providers across the region. The need to build capacity for culturally specific organizations in the region was also discussed.



C. System Changes: Part I, Heather Lyons

Heather facilitated discussions to explore elements needed to develop a comprehensive response to homelessness that integrated systems and addressed needs not met in current systems.

D. Open Discussion – Anita Yap
None.

III. ADJOURNMENT

The meeting adjourned at 4:00 p.m.

Minutes prepared by Ally Jamieson, County Administrative Office

To be added to the Metro SHS LIP Committee email listserv, contact Ally Jamieson, ally_jamieson@co.washington.or.us

Local Implementation Plan - Intervention Definitions - 10-21-20

Metro requires “(a)n articulation of programmatic investments planned, including: the types of housing services to be funded to address the gap analysis; including specifically,

- supportive housing,
- long-term rent assistance,
- short-term rent assistance,
- housing placement services,
- eviction prevention, and
- shelter and transitional housing”

The following definitions describe each of these interventions:

Supportive Housing

- Supportive housing is a proven solution for vulnerable people who have complex health needs, including those with mental illness and addictions and who have experienced or are at substantial risk of long-term homelessness. It combines deeply affordable housing with supportive services to help people live with stability, autonomy and dignity.

Long term rent assistance (LRA)

- Flexible rent assistance that is available to support those experiencing or at substantial risk of experiencing homelessness. Long-term rental assistance does not have an end date and can be available as long as the household needs it. It can be tenant or project based. Household should not make more than 30% AMI at the time of application.

Short term rent assistance (STRA)

- Flexible rent assistance meant to serve those at risk of or are recently/episodically homeless. Assistance duration is flexible, but does have a cap. 1 month – 2 years on average and is similar to rental assistance offered in Rapid Re-housing and Prevention.

Housing Placement Services

- Provides help for individuals to identify and qualify for appropriate stable housing. This can include things like housing navigation staff, rental application fees, security deposits, first and last month’s rent, utility connection fees and utility deposits, and fees and fines that would present barriers to housing entry. Depending on the program, it could also include moving costs (like moving company, truck rental, storage costs, etc.)

Eviction Prevention

- Housing relocation, stabilization services, tenancy supports, and/or short to medium-term rental assistance as necessary to prevent the individual or family from moving into homelessness (Shelter, place not meant for habitation, etc.).

Shelter/Transitional Housing

- Emergency shelter services - any facility, the primary purpose of which is to provide a temporary shelter for people experiencing homelessness in general and can be provided for specific homeless populations. Shelter does not require occupants to sign leases or occupancy agreements.
- Transitional Housing typically involves a temporary residence of up to 24 months with wrap-around services to help people stabilize their lives.

Washington County LIP Committee
Emerging Themes for Systems Change from November 19, 2020

The following themes were identified from discussions during the November 19th LIP Committee meeting. Verbal and 'chat' discussions are included in the content of information provided in this review.

Ongoing discussions during the December 3rd LIP Committee Meeting will be facilitated to ensure information was accurately captured and to include any afterthoughts committee members might have during the December 3rd LIP Committee Meeting.

Some Broad Themes

- Coordinate (Integrate) among systems of care (Housing, Health, Homeless Response, Aging, Justice, Economic, etc.). COVID-19 response can help with modeling that.
- Focus on the needs of the houseless population. While housing is critical, it's more than that. Access to resources is also important.
- People and systems should consider a Trauma Informed Care approach as well as Targeted Universalism.
- Commitment to racial equity includes ensuring access, not necessarily co-locating with other services, creating and building capacity for programs and agencies that are culturally responsive and adaptive.
- Review how health systems (CareOregon) do care coordination. Work with them and potentially replicate model.
- Consistent/coordinated data information systems (with the exclusion of domestic violence) would be helpful for following people as well as reporting on outcomes. Across counties, too.

Systems Change Discussion - Details

Question 1: What would an **effective comprehensive service delivery system** look like which addresses the needs of chronically homelessness individuals, is easily accessible, and advances racial equity with a goal of reducing homelessness in Washington County over a ten-year period?

- Need to look beyond the CoC; to be an effective system, need to integrate with all systems of care. Ensure all persons have access to all services in various systems. This will help with racial equity as well. Many people struggle to make that first connection. Also important to think about the work systems sector and the partnerships there and how we can expand even greater
- When doing big systems-design, important to think about Trauma Informed Care (TIC) and a culture of TIC in our system, especially to be mindful of not re-traumatizing people. How are we trauma-informed within providers and with each other as we communicate in different ways and with our varying paradigms and perspectives?
- Housing is a critical social determinant of health and overlaps with so many key services

Washington County LIP Committee: Systems Change Discussion (Cont.)

- (From chat): I think you described what the system looks like in the question. Addresses all the areas described. Collaborative services with health systems, Behavioral Health, economic assistance, jobs etc...
- People should be able to access what they need based on what they need, not based on who they call or who they're interacting with. The burden of navigating that should not fall on people who need different types of assistance; all of that work should be done on the provider side. Need to be able to meet people where they are, physically and cognitively.
- More shelters and transitional housing for both individuals and families in Washington County, more case managers, navigators and street outreach personnel, more permanent supportive housing, and prevention through emergency rent assistance
- I think it would be good if a houseless person would have opportunity and obligation to work certain amount of hours. it would help them to feel ownership of housing and give them an opportunity to contribute, feel they're participating
- A year round shelter for houseless adults is a critical component.
- Long term outcome measures, and culturally competent providers are important considerations.
- Might focus on operationalizing/targeted universalism ([Targeted Universalism Explained](#)). Doing that extra work to make sure we're adapting the system to effectively engage/reach populations it's not currently reaching. Make sure we're getting that feedback from communities; help with true engagement with communities that aren't being served right now
- There are many pieces to this question; many layers. Struggling with the question. When we really think about this community of human being, housing is one piece- but there are other pieces when working with this community. Generational poverty, health, behavioral health, etc.
- Definition of chronic homeless means something; tends to evoke this monolithic group of people. One of the things that came out of the measure is that homelessness looks different in different communities; a person can be homeless across the scope of their life but not meet the definition. Looks very different and can mean many different things. A person could be couch surfing or unsheltered (as examples).
- This group has so many variations; it needs to be cross-sectional. How do we take it apart?
- There is no doubt that housing is critical - critical basic needs need to be met (shelter, food, comprehensive health care etc.), however, all of the "systems" need to collaborate and work together to provide trauma informed and confidential care to our houseless citizens. We need to hire and train diverse individuals who are able to work across systems. Culturally specific and language appropriate services are crucial.
- I think a problem for houseless population would be assistance to maintain housing.
- Need to get people housed. But we also need to make sure other needs are met; food, healthcare, supportive services. And we need to make sure we're providing trauma-

Washington County LIP Committee: Systems Change Discussion (Cont.)

informed care as we do this. Confidentiality is key; people are afraid to get involved in services because they're afraid perpetrators will find them (in DV space). Need to hire culturally diverse people to provide services, and then provide culturally specific, language accessible services. Also need to talk about immigration issues; we don't like to talk about that in Washington County; people are afraid to be deported and we don't like to talk about it.

- Intensive Assessment needs: in both design and practice strong skills, wide scope, and strengths perspective, competency of tools and workers.
- The descriptions point to a "collective impact" structure and maybe even governance model- No wrong door for help with needs- person centered- So many great points!
- Everything is on the table. These questions are meant to generate innovation and enhancements to the current way business is done. Your thoughts or answers to this question or others may not fit perfectly, but your thoughts are important to put on the table.
- Can we make sure we don't limit to collocation of services? Sometimes for culturally specific services co-location may not allow for that.
- To reflect the diversity we will be serving, we need to emphasize training and recruitment of a diverse work force to provide services.
- I think we also get wrapped up in the word chronic when the original language of the measure purposefully stayed away from the word chronic to advance racial equity
- At some point, it might be useful to do a few scenarios describing different people and brainstorm what comprehensive services would look like for each of these diverse individuals as a way to look at things more concretely.

Question 2: How would a **comprehensive service delivery system** that is seamless, coordinated and connected interact with its partners?

- If had the perfect system, would all use the same software to track data (with the exception of DV). We've seen how this can reduce the trauma of retelling a person's story. Having an agency already know details from a story can be helpful in reducing that trauma.
- Through the coordination aspect, determining the capacity of what we need and ensuring that we're always doing continual improvement- which means communication and coordination. We can always do a better job of communicating what our plans are and how we're changing our programs. Would love to do a better job of looking at policy for the houseless system and how people can go back to their communities.
- I agree, all partners should use one system for recording services provided for clients.
- Question from Ruth: how can the county be a better partner? How can we enhance your work?
 - Working across the system with healthcare information will required release of information to protect HIPPA laws

Washington County LIP Committee: Systems Change Discussion (Cont.)

- Need something like a medical records system, with privacy and other protections for the clients?
- Include transport services in conjunction with their case workers/navigators?
- Need a grounding: what do we mean by “the county”? The library? Aging and Disability Services? If had a magic wand, would be something similar to the “Unite Us” (basic description here: <https://uniteus.com/>) platform, but then reality sets in and I think about the PHI issues we’d come across
 - The community: CoC, procurement system, HHS/how we contract or interact with behavioral health systems

Question 3: What would it look like to **work across systems**, not just within the homeless one?

- Working across the system with healthcare information will required release of information to protect HIPPA laws.
- More mindfulness about geographical barriers to access. This adds a lot of stress, on top of hoop jumping.
- Hopeful that Connect Oregon will help once data sharing and HIPPA are figured out.
- A goal for working across systems would be implementing "Collective Medical", as one example
- We are using GetCare system. I can see where a client was served and what services were provided as well as documents saved.
- Public transportation is very challenging for individuals in rural parts of Washington County. At DVRC, we are committed to not be "building bound" when providing many of our services. We are going to take some of our services "on the road" and we will continue to provide remote services to individuals who prefer to receive their services in this manner (we will provide clients with "smart phones" and minutes).
- Building capacity so there is better geographic coverage for services throughout the County.
- Telehealth might help too.
- At some point, it might be useful to do a few scenarios describing different people and brainstorm what comprehensive services would look like for each of these diverse individuals as a way to look at things more concretely.
- Washington County should be building infrastructure that is comprehensive. That has the capacity to meet people where they're at (with outreach on the street and institution) and support their journey (placement, retention, rapid rehousing, diversion, employment services, economic development opportunity, behavioral health, physical healthcare needs, etc.)
- I'm thinking about the justice system and how we work with that system moving forward, knowing the disparate impacts on houseless communities of color. I think helping provide alternatives or build in support for folks that have been justice-involved is an important component of this.

Washington County LIP Committee: Systems Change Discussion (Cont.)

Question 4: Looking at the system from the **perspective** of a homelessness individual, what would prohibit you from accessing stable, supportive housing?

Scenario: severe weather shelter participant, bouncing between all three counties. Elderly, physical disabilities, possible MH issues but not engaging in the MH system; very difficult to find a space for her that worked. Took a lot of time to unravel her care and coordination once she was able to access the severe weather shelter, determine which county held her case. Didn't have the supports she needed and was constantly worrying about where she was going to go and how she was going to get there and navigating the bureaucracy of how she'd pay for her long-term care facility care.

Housing navigator going to where she was helped contribute to change for her. Became the point person, vs the participant having to talk to multiple people and systems. Made the lines of communication clear. Took the bulk of an FTE for three months to navigate the situation.

Comments/questions:

- Systemic challenges: most rent subsidy programs require a LOT of documentation, and that has delayed people accessing housing by weeks to months while we track everything down
- I think these questions are great but are we the appropriate group to be asked or should we be asking people with lived experience.
- Here's a link to a report on the benefits of systems alignment
<https://www.worksystems.org/research/aligning-workforce-housing-systems>
 - Housing integration work has happened for quite some time in Multnomah; now expanding to Washington County. Report funded by Meyer; shows the positive impact of what happens when we work together. People complete training and also stay housed longer.
- Regarding the Worksystems Inc. programs (WSI), we have this year started a partnership with WSI on an "Economic Opportunity Program" targeted to people on SNAP. This was in part developed to assist/support the CoC participants increase earned income. There are many agencies also linking to WSI in this program. We need to include the great work of WSI as they work hard to work in Washington County. These are critical supportive services.
- Each of the health plans have a care coordination team; often play the point person, communicating with different systems.
 - The CCO Health navigators are awesome when we access them over here at ASSIST!
- Here's a link to a report on the benefits of systems alignment
<https://www.worksystems.org/research/aligning-workforce-housing-system>
- Cross-sector collaboration as a result of COVID has helped a lot. Necessity is the mother of invention and I'm seeing this happen in ways it hasn't happened before.

Washington County LIP Committee: Systems Change Discussion (Cont.)

- Housing navigators/care coordinators can be very helpful, but it is important not duplicate services that might already be in place. Too many coordinators is problematic.
- Case conferencing as a best practice
- The Case Conferencing model that is being built right now in Washington County is a great framework in which to build from.
- As part of CCO 2.0, addressing social determinants of health is a key priority so we can build on that and hold health systems accountable.

Applications

The comprehensive information contributed by LIP Committee members during the November 19th meeting have been aggregated and documented. This document will be shared with LIP Committee members during the December 3rd meeting for the purpose of clarifying accuracy of themes reported here and inviting further input for these themes. This information will be used to inform drafting of the LIP.



November 18, 2020

Chair Harrington,

We hope this letter finds you well.

The HereTogether Coalition continues to meet regularly with service providers, advocates and businesses across the region and remains committed to the work ahead.

We recognize that the passage of the Regional Supportive Housing Services measure provides our region with a once in a generation opportunity to address our homeless crisis at a scale that finally has the resources to match the scope of the need. We also recognize that, as a community, we all have a stake in implementing this measure correctly, and a shared responsibility to work together and ensure that we're achieving equitable outcomes.

It is, therefore, incumbent on all of us to take a moment, pause, and ask ourselves what we should be doing differently to serve our communities better — especially for our Black, Indigenous and People of Color neighbors — as we leverage this historic opportunity.

A central goal of the HereTogether coalition has always been to use this investment to end our chronic homeless crisis and at the same time, eliminate racial disparities that create a disproportionate impact on people of color experiencing homelessness.

To better understand the challenges and opportunities we face in achieving this goal, we recently hosted a group discussion with more than 60 individuals representing 50 service providers, advocates and businesses across the region to identify current barriers in the system that, unless addressed outright, could make it harder to prioritize serving those experiencing chronic homelessness and perpetuate inequities for our BIPOC neighbors.

The attached memo outlines the results of those discussions with specific items for each county (though the feedback is important for all three counties to consider as we embark on this journey regionally). The summary below does not reflect a formal position by the coalition. Instead, we are sharing the results of a coalition wide conversation for you to consider as you move forward with developing your initial local implementation plans for this 10 year measure.

Sincerely,

Angela Martin
Executive Director

Multnomah County

Barrier to success: Definitions and Identity

Coalition members flagged that definitions across funding sources (i.e. local, state and federal) do not necessarily align, and can often be too restrictive to provide services, especially to BIPOC community members.

HereTogether Coalition members flagged:

- A lack of data and definitions on what has been happening to date makes it harder to build a foundation for the work going forward.
- Challenges in prioritizing race based on protected class status, and current restrictions with the Coordinated Access system across organizations
- Not yet having an intentional conversation about long term housing models for the chronically homeless population that 75 percent of measure funds are directed toward
- Homelessness looks different in some communities, rigid guidelines pose challenge to addressing these differences.
- Specific barriers to serving the Latinx community:
 - 1. In the adult system of care, there are barriers around adults who do not have accompanying children being able to get a housing placement if they are doubled up or couch surfing. The Homeless Family System of Care on the other hand is less restrictive around the definition of homelessness and allows for families who are doubled up to get housing referrals.
 - 2. VISPDAT assessment tool doesn't account for how the BIPOC community experiences homelessness.
 - 3. There are not enough trusted points of access into the system for BIPOC folks and thus we need to go beyond just Coordinated Access or 211.

Potential Solutions:

- Every program seems to have different definitions around homelessness. While we recognize that the regional government may not be able to solve that, we should not add to the confusion by having multiple definitions for the same status as we implement this program. Definitions for the SHS program should be regionally adopted, and eligibility requirements for this program should be universal across the region.
- Within the definitions recommendation noted above, please be mindful that often BIPOC communities can have household compositions different from dominant culture communities, and we need to ensure that we are not being too restrictive on how funds are spent (e.g. certain funding sources will allow payment of back rent where others will not, some forms of assistance cap rent assistance, and there are often restrictions of unit rent and unit size that don't conform to the composition of a specific household, etc.)
- Prioritize Coordinated Access reforms that help create those definitions and can be better responsive to the new local priorities through the measure.

Barrier to success: Siloing and systems integration

Coalition members raised concerns about the need to ensure we are leveraging this opportunity to dismantle institutional silos across the region that have made coordination difficult over the years. They raised that this new investment was created so that there could be enough flexibility to address the crisis head on.

Here Together Coalition members flagged:

- Housing development and homeless services planning is currently happening in two different silos, which is problematic.
- The critical need for wraparound, supportive services (not just rent assistance) for the most vulnerable. Some critical supportive services, like economic justice and health, are also operating under regulations separate from either housing or homeless services.
- The need for the housing system and homeless services system to be integrated and longitudinal, rather than how it currently stands, which is project by project without a clear collaborative path between developers, providers and government implementers.

Potential Solutions:

- Moving forward, continue to cultivate strong integration between the Metro Affordable Housing Bond and Regional Supportive Housing Services Levy.
- Stick to outcomes and metrics that clearly articulate the need for broad, wraparound support services (beyond just providing rent assistance) for our chronically homeless, and hold ourselves accountable to those outcomes.
- Fully fund providers to be able to make a real impact, especially around where the voters are most concerned: in helping end street homelessness.
- Explore ways to integrate Measure 110 (drug decriminalization) implementation with SHS implementation around removing barriers for those who are justice involved and integrating supportive recovery housing into both measures.
- Ensure there's opportunities for collaboration so that housing providers who have expertise in long term housing models are able to weigh in on best practices at county and regional level and give input as to which models are prioritized for uses of SHS dollars.

Barrier: Providing adequate services to our BIPOC homeless and at risk population

The issue of not having enough culturally specific providers spans all three counties and is one of the key aspects we should be focused on as we work to ensure the coalition's value of prioritizing equitable outcomes for BIPOC neighbors.

Here Together Coalition members flagged:

- Concerns about vulnerable individuals trusting government or related agencies — based on immigration status, for example.

- Mixed status family and public charge rules are now a barrier to services. Need strong clarification on what might trigger things like public charge, and how mixed status families can be served by a variety of service providers.
- Barriers to entry are often based on trust, many people in the communities we seek to serve have had trust broken with the system.
- Major issue attracting and retaining a robust workforce, mostly connected to the lack of compensation for front line workers.
- Achieving equitable outcomes and successfully meeting the needs of the BIPOC community requires capacity investments in culturally specific organizations beyond the service specific funding.
- Reaching folks who are doubling up, taking care of their own, or “invisible homeless” is a concern - Asian, Latinx, immigrant communities especially. We need to ensure we are appreciating nuance in BIPOC communities.

Potential Solutions:

- Ensuring BIPOC voices are prioritized and integrated into all we do.
- Create consistent objective tools and delivery mechanisms to make sure BIPOC is not just a priority in name but throughout delivery.
- Be mindful of manageable caseloads for case managers (e.g. 1:20 for PSH units.) Be mindful too that robust staffing also requires peer support, housing support specialists, employment specialists and building assistants like 24/7 janitorial and front desk staff.
- Create contracts that allow culturally specific orgs to recruit and retain bilingual case managers.
- Lower barrier access, especially when it comes to what documentation/requirements or in-person engagement is necessary to get access to services.
- Cultivate a workforce that reflects the community — pay people well, value lived experience through access to positions and compensation.
- Develop partnerships with job training and job placement services to build that pipeline to jobs at multiple levels (not just entry level).
- Capacity investment needs to be deep and ongoing, not just one-time or simple training offers.
- All service providers need to be increasing the diversity of their workforce and improving their cultural responsiveness.
- Funds to increase capacity for service providers who can build trust and comfort to engage and reach BIPOC populations.
- Create more points of access in the system for culturally and linguistically specific providers.

Washington County

Barrier: Defining Equity

We cannot achieve equitable outcomes for our most vulnerable and communities of color if we are not honest about what we don't yet know.

HereTogether Coalition members flagged:

- It takes a lot of work to build community engagement efforts and engage communities of color and refugee & immigrant communities. Just hiring a consultant does not help build long term capacity.
- There isn't enough staff capacity or knowledge for rent assistance or housing navigation in NGOs, which makes it difficult for specialized providers (like those working in domestic violence) to be able to help their clients secure or stay in long term housing.
- Priority is often focused on those who are already service connected rather than reaching out and engaging new or harder to serve populations. This should be an opportunity to rethink the work we're doing to reach different populations.
- Lack of coordinated entry points - services and systems are siloed.
- There are many language barriers, cultural barriers, to people receiving initial services. Once people have entered the system, there is a lack of supports to stay in, especially for immigrant/refugee communities, many interventions are short term.
- Sense that Washington County is significantly behind and closed off when it comes to being open to community process. For the LIP, there's a feeling of being closed, with a limited number of people with lived experience at tables (and listened to), only those on the LIP can speak.

Potential Solutions:

- Washington County (and the other counties) leverage this as an opportunity to level set what we mean when we say equity. In order to truly do this work, we need to examine our existing infrastructure, policies, procedures.
- Using this as an opportunity to get beyond the federal definitions, which are too restrictive and leave out some community members.
- Provide more entry points to the system that benefit all (i.e. day shelter).
- Balance time and urgency to get this done right.
- Make sure we're building adequate infrastructure within the county to help folks navigate into housing, especially in Domestic Violence and Mental Health sectors.
- Leverage this opportunity by engaging Wash Co's new Chief Equity Officer to address institutional racism on a broad scale (providing training to various county agencies and organizations).

Barrier: Equity in Contracting

HereTogether Coalition members flagged:

- Lack of clear direction of how equity is built into the county procurement processes. There tends to be a lack of proactive engagement to bring in or build new partners. An RFP comes out, if you're not on the list you don't get it because it's based on existing partnerships/relationships and follows a historic path of benefiting "insiders" who know how the system works.
- County has a culture of driving down costs through contracted services.
- Administrative & reporting requirements for county funds serve as barriers to smaller organizations/emerging organizations.

Potential Solutions:

- County should review procurement processes and ensure there are not artificial administrative barriers that make it difficult for small, up and coming organizations to compete for funds.
- Invest in assisting organizations in building the capacity they need to compete for public funds.
- Genuine engagement with organizations and their expertise from county elected leadership to help rebuild the systems in a way that works for the community.
- Workforce requirements that ensure the workforce reflects diversity of community.

Clackamas County

Barrier: Transportation

HereTogether Coalition members flagged:

- With the current, more centralized system, people must travel to Oregon City to access services.
- Public transportation is inadequate, requiring multiple transfers and long delays or no access at all.

Potential Solutions:

- Geographic distribution of services.
- Traveling service providers instead of requiring clients to travel.

Barrier: Coordinated Housing Access

HereTogether Coalition members flagged:

- The current Coordinated Housing Access (CHA) system will not facilitate prioritization of the BIPOC homeless community.
- CHA isn't open 24/7 for intake.
- CHA no longer offering in-person screening services.
- CHA is insufficient for screening "at-risk".

Potential Solutions:

- Recalibrate CHA system to include race.

- Make screenings available outside business hours.
- Allow for multiple points of entry in the system.

Barrier: Coordinating across programs/pots of money

HereTogether Coalition members flagged:

- Definition of homelessness differs across programs. This may cause problems/confusion.
- Misperception that accessing Regional SHS dollars would trigger a “public charge” issue.

Potential Solutions:

- Coordinate and make universal definitions of homelessness.
- Public education, outreach and investment in culturally specific providers to build trust with BIPOC community and educate on “public charge”.

Barrier: Program design/rules

HereTogether Coalition members flagged:

- Rules often designed to meet the needs of providers and/or funders which may be at odds with client needs.
- Providers and funders have been trained toward scarcity. Program design and rules were built with the understanding that there would never be enough to go around. We’ve never had this much money. Our old way of thinking may end up being a barrier that prevents us from the type of system change possible with these resources.
- Federal funds are highly inflexible and come with many layers of bureaucratic reporting requirements. These are more flexible dollars but we may end up making them inflexible because that’s the current system.

Potential Solution:

- Design program requirements starting with client needs.
- Evaluate current rules before applying them to this program.

Barrier: Service Delivery

HereTogether Coalition members flagged:

- There are very few, if any, culturally specific providers in Clackamas County.
- Due to limited access to culturally appropriate services within Clackamas County, BIPOC communities will often turn to service providers outside of the county. Those service providers have difficulty helping their clients access other services within Clackamas. For example, a culturally specific medical provider in Multnomah County shared that it was difficult to help clients find housing in Clackamas.
- There are considerable barriers re: immigration status for Latinx folks. One provider noted that if people have to identify into a system (like CHA or HMIS) that’s perceived as

government they would rather live on the streets. Is there another pathway where people don't have to fully identify (like SSN) or get plugged in in a real identifying way in the system? Even people who are U.S. Citizens who identify as Latinx feel disenfranchised and fearful; This is an example of national issues manifesting locally.

Potential Solutions:

- Make long-term investments to grow organizational capacity for culturally specific and culturally relevant services (including language-specific services).
- Help service providers access referral services across county lines.
- Set realistic outcomes for caseloads for culturally specific and culturally relevant providers.
- Look to OHA CARES Act funding to identify ways to distribute funds that are population-specific rather than individual specific and may reach more communities that are worried about entering their identifying information in a government database.

TriCounty

Barrier: Fair Housing

HereTogether Coalition members flagged

- When tenants have issues with a landlord (i.e. mental health, refusal to rent to BIPOC folks) it isn't often followed up on with fines or resolution.
- Need to prioritize BIPOC; need systemic fix to Fair Housing instead of addressed organization by organization.

Potential Solutions:

- Elevate funding for organizations providing tenant rights advocacy and prioritize training and staff capacity for service organizations providing case management and navigation services, so that frontline staff can flag and address pre-application and screening issues, and flag discriminatory practices or noncompliance with tenant protection laws.

Barrier: Community Engagement

HereTogether Coalition members flagged

- It is often difficult for people with lived experience or currently experiencing homelessness to fully participate in meetings, especially when everything is digital. Even if they have hardware, they may not be able to use it.

Potential Solutions:

- Continue to dismantle those barriers (providing trainings, support, etc) to ensure we are reaching those most impacted by homelessness and poverty when implementing the measure.

Executive Summary

Washington County Supportive Housing Services Bond Community Engagement Preliminary Findings and Recommendations

November 2020



The Metro Supportive Housing Services Bond (SHS), Measure 26-210, approved by voters in 2018, provides Washington County a tremendous opportunity to provide supportive housing services to the county’s most vulnerable for a 10-year period.

Initial engagement with Washington County stakeholders was contracted by the county to inform the Local Implementation Plan (LIP) in adherence with SHS Bond mandates. Community engagement activities took place between September and early November 2020 and consisted of interviews with 75 individuals, 360 focus group participants, and 93 submitted the on-line survey. Previous engagement activities for Washington County’s homeless services programs and other community organizations studies and reports are listed in reference section of this report.

Themes

Emerging themes from community engagement activities demonstrated an opportunity for Washington County and community service providers to develop a robust engagement and governance framework supportive of individuals and families from the BIPOC community.

The following themes reflect survey answers and discussions shared from individuals receiving homeless services in Washington County:

- 1. Responses indicated a significant racial and cultural gap of responsive services for Black and Native American, Native Hawaiian and Native Alaskan priority population.**
- 2. Racism and discrimination from service providers was expressed by Black, Indigenous and People of Color (BIPOC).**

BIPOC struggling with addiction and mental health issues identified these adverse experiences as the cause for additional trauma.

- 3. BIPOC individuals, youth, immigrant and refugees, and others with mental health issues report avoidance of available services.**

The following reasons were reported: program screening definitions are unclear, immigrant and refugee cultural understanding of homelessness isn’t reflected, racism and discrimination, and fear of intrusive government program oversight.

- 4. A significant need for person-centered services was consistently expressed.**

“My people are scared to ask for help because they have been mistreated. It appears no one cares. They have lost hope.”

Over and over people receiving homeless services voiced concerns about lack of a coordinated approach to helping them find and understand eligibility to:

- Secure housing
- Access to mental and physical health supports

- Obtaining adequate documentation
- Financial assistance
- Navigating paperwork
- Transportation
- Language translation
- Response time-delays
- Systemic eligibility activities/requirements

“From the first point of contact in any program serving homeless, that person or program follows the person through the whole system, not just give a phone number.”

5. Community members indicated a lack of available permanent, temporary and transitional housing in the county.

In particular, there is a need for immediate temporary/transitional housing and shelters as people become at risk of being homeless, are stabilized in temporary housing and/or their family status changes, which happens frequently in BIPOC families.

6. Barriers to access housing include:

- criminal records
- bad credit
- unstable rental history
- lack of identification documentation
- addiction and mental health struggles

Recommendations

While there are many efforts and coordination within the county, there are opportunities to provide needed services outside existing programs and a need to develop a robust community engagement program that will inform the program on progress, engagement and removing and/or lowering barriers. There is also a need for governance structure that centers communities of color and those most impacted by homelessness. The following recommendations should be included in the Local Implementation Plan. These recommendations reflect the themes from community engagement and reference those listed above.

- 1. Develop a robust equitable community engagement program that centers empowering BIPOC individuals and families** within the priority population to build trust and relationship to participate in decision-making, establishing goals, outcomes and implementation and evaluation efforts on an ongoing basis.
Themes #1, 3 & 4.
- 2. Develop capacity building program** for the county and service provider organizations that centers racial equity, BIPOC communities and priority populations.
Themes # 1, 2, 3, 4 & 6.
- 3. Develop a governance structure that centers communities of color and people experiencing homelessness for accountability and oversight for implementation of the plan.** This governance structure could take the form of a BIPOC-led oversight and accountability commission and separate technical committees that would report to and implement the commission’s decisions and direction.
Reference: Metro Ordinance and Resolution for Local Implementation Plan development and oversight.
- 4. Provide adequate funding and resource allocation for community engagement, governance, capacity building.** Include in the planned investments a specific percentage for costs to implement priorities across all services. Detailed recommendation on funding percentage described in full report. Allocate

specific funding for capacity building in current culturally based organizations and grow others that specifically serve Black, Native American, Native Hawaiian and Alaskan Native populations.
Themes #1, 2, 3, 4, 5 & 6.

5. **Develop a person-centered system that will provide coordination among service providers, lower or remove barriers.** Consider providing navigators, peer mentors, technology assistance, transportation, pay deposits, etc., and consider mobile units that can meet people where they are and address geographic access limitations.
Themes # 3, 4 & 6.

6. **Coordinate with the affordable housing bond to build permanent shelters and transitional housing with low barriers for access.**
Theme #5.