



INTERAGENCY COMMISSION ON HOMELESSNESS

OPERATIONS COMMITTEE

Meeting Summary Notes

Wednesday, August 3, 2016

Attendees	Agency	Attendees	Agency
Anderson, Chris	DHCA	Horton-Newell, Amy	ICH Chair
Ball, Kim	DHHS/Special Needs Housing	Kelly, La Sonya	DHHS
Black, Sara	DHHS/Special Needs Housing	Kirk, Sue	Bethesda Cares
Blasco, Anna	NAEH	Lindberg, Meg	PEP
Chapman, Sheryl Dr.	NCCF	Sierra-Koscinski, Sharon	DHHS/Special Needs Housing
Chesney Amanda	Catholic Charities	Sinclair-Smith, Susie	MCCH
Childress-Havell, Aneise	DHHS/ Special Needs Housing	Schiller, Jen	MCCH
Ferework Fuje	Catholic Charities	Soni, Nili	DHHS/Special Needs Housing
Fox-Morrill, Priscilla	Interfaith Works	Todd, Chapman	Zero:2016
Frazier-Bey, Jimmy	City of Gaithersburg	Whitted, Jonathan	Friendship Place
Gandell, Miriam	The Dwelling Place		
Hong, Christine	Interfaith Works		

Introductions

Sara Black convened the meeting and opened with introductions.

Approval of May 25th Meeting Notes

The committee voted unanimously to accept the minutes into record as written.

Update on 2016 NOFA

The application for the annual CoC completion was submitted in November. Highlights of the application process are:

- HUD awarded Montgomery County \$8.1 million.
- The Montgomery County Continuum of Care (CoC) HUD’s collaborative application ranked 176.75 in HUD’s scoring system (Highest Score possible 203; CoC Scored: Highest Score 188; Lowest Score 49.5; Median Score 149.75).
- HUD determines funding based on a ranking system (Tier I and Tier II).
- HUD awarded new funding that will assist about 28 residents experiencing homelessness.
- HUD utilized a new, more competitive award process which resulted in Transitional Housing projects to fare poorly nationally.
 - In 2015 HUD awarded \$170 million for Transitional Housings compared to the \$325 million awarded in 2014.
 - Part of the rationale for not funding Transitional Housing (Tier II) is that research shows that the transitional housing projects are resource intensive without strong outcomes.
 - HUD feels that Transitional Housing is productive when used for youth, people in recovery and people fleeing domestic violence.
- The 2016 Competition is approaching and the Department will convene an allocation committee to prepare for our next collaborative application.

RENEWAL FUNDING	
Project Name	Amount
MCCH Cordell Place	\$139,635
MCCH Seneca Heights PLQ	370,078
HOC McKinney XII	551,417
IW Carroll House	240,396
IW Interfaith Homes	294,150
MCCH Home First 1	141,519
MCCH Hope Housing	531,698
MCCH Home First 2	280,535
The Dwelling Place New Opportunities	144,961
MCCH Safe Haven	842,321
HOC McKinney X (Funding for part of project falls into Tier II)	2,918,794
HOC McKinney III	81,048

NCCF Rapid Re-Housing Demonstration	\$184,126
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RENEWALS NOT FUNDED	
Project Name	Amount
NCCF Family Stabilization Program	\$652,878
City of Gaithersburg Wells Robertson	\$130,690

NEW FUNDING	
Project Name	Amount
MCCH Keys First – New PSH Project	\$825,587
MD-601 Montgomery County Planning Grant	\$44,250

Update on Action Camp

Chapman Todd and Nili Soni provided an update on the Zero:2016 Chronic Homelessness Action Camp that was held on Tuesday, July 19th and Wednesday July, 20th. Action Camp focused on the effort to make Montgomery County one of the first places in the country to effectively end chronic homelessness for all individuals and families. Through this Action Camp, we have identified initial Work Plans for 30/60/90 day actions.

The preliminary Work Plans for the following areas are:

1. Chronic By-Name List
2. Landlord Engagement
3. Speeding Up the Housing Process
4. Housing Development Opportunities
5. "Move Up" Strategy PSH
6. Increasing Subsidies

Note that we also want to do a Work Plan for Diversion, but need to think this through a little bit more so haven't included on this list just yet.

So, the next step is that for those of you that volunteered (or were volunteered!) to take the lead on particular Work Plan items, we will be in touch in the next day or two to discuss the specific draft Work Plan with you, get feedback, and revise accordingly. Then we'll circulate the final version of the Work Plans to this entire email list for review.

Case Conferencing Protocol

Nili Soni, provided an overview on the Case Conferencing Protocol which will be piloted until January, 2016. The goal is to achieve and sustain a well-coordinated and efficient community system that assures homelessness is - rare, brief and non-recurring. As we know, many households without minor children that are experiencing chronic homelessness are difficult to engage and may not be able to complete a VI-SPDAT or Full-SPDAT. The number one goal of case conferencing for the Montgomery County CoC's Housing Prioritization Committee is to ensure that we are able to discuss those households without minor children who do not have a score or where the tool did not reveal the full depth and/or urgency of the situation.

The Housing Prioritization Case Conferencing Team (HPCCT), as part of its regular Case Conferencing meetings, will periodically review cases of households without minor children with high vulnerability (defined below) who are unable or unwilling to complete a VI-SPDAT or Full SPDAT assessment.

Prior to requesting a review with the HPCC Team, the case manager should discuss with their supervisor or clinical director and they in turn will contact their Contract Monitor to review the issues. Based on the assessment, Contract monitor can decide if the case needs a Service Integration meeting or should be brought up to the HPRP Team for appropriate housing resources.

The only guarantee related to the review panel process is that the household without minor children will receive a review. Case review does not mean immediate placement. In some instances, the review panel may determine that the initial score and position on the registry is correct given the severity of other cases. In other situations, the review panel may determine that a higher score is warranted, though immediate placement is still not feasible. In still other situations, the review panel may determine that immediate placement is needed to reduce risk of death.

Case conferencing meetings will be offered monthly on first Wednesdays of the month from 9:30-11 am starting September 7th at 1301 Piccard Drive, 2nd Floor Blue Conference Room, Rockville, MD, 20850.

Update on Medical Respite/Recuperative Care

La Sonya Kelly, provided an update on the Medical Respite Workgroup. The group will be conducting a 60-day data study that will identify gaps in care, and help inform scope of service, level of care, and staffing needs of a medical respite/recuperative care program:

Hospital Data Study:

1. Reason for admission
2. Where the patient originated from (i.e. Mont. Co. shelter, PG shelter, street, ED)
3. Length of stay
4. Where patient discharged to (shelter, streets per their request, transferred to beh. health unit)
5. # of homeless clients who cannot discharge from hospital due to limitations of the homeless shelter (i.e. patient is on oxygen and shelter is not equipped to accept them)
 - a. Specify the specific reason why the patient cannot be discharged to shelter

6. # of high utilizers, their conditions, and # of readmissions (specify if there are patients who return to hospital on multiple occasions, how many times they return, and what conditions they are returning for)

Shelter Study:

- A. Health Care for the Homeless Medical Beds:
 1. Length of stay in Health Care for the Homeless Medical Bed
 2. # of persons referred to Health Care for the Homeless medical beds and denied due to complex medical and/or psychiatric reasons
 3. # of medical bed clients sent to the hospital
 - a. Medical/psychiatric reason client was sent to the hospital (i.e. “vomited”, “emergency petition due to suicidal ideation”)
- B. Emergency shelters/transitional shelters/outreach/safe havens:
 1. # of clients sent to the hospital
 - b. Medical/psychiatric reason client was sent to the hospital (i.e. “vomited”, “emergency petition due to suicidal ideation”)
 2. Length of stay in hospital
 3. # of clients unable to return to shelter after visiting the hospital due to complex medical and/or psychiatric reason
 - c. Medical/psychiatric reason client could not return

- La Sonya shared that it was decided to not include permanent supportive housing in this data study; the primary issue for this program is a stronger need for supportive resources in the home (i.e. home aid) for aging individuals. This may be a follow up conversation after the medical respite workgroup’s data study.

Next Meeting:

Interagency Commission on Homelessness, Wednesday, September 14th 3:30-5:00pm at Rockville Memorial Library-21 Maryland Avenue, 1st Floor Conference Room., Rockville.