



INTERAGENCY COMMISSION ON HOMELESSNESS

Meeting Summary Notes

Wednesday, September 12, 2018

Rockville Memorial Library, 21 Maryland Avenue, Rockville 20850

Members (Present or Represented)

Ahluwalia, Uma
Bohorquez, M. (rep. Brice,
Jonathan)
Chapman, Sheryl
Chesney, Amanda
Harris, Amanda
Horton-Newell, Amy
Kauffman, Louise
Leventhal, Councilmember George
Miller Eneshal
Rock, Shane
Roynestad, Brian
Schuchman, Abe
Seidel, Stan
Sinclair-Smith, Susan
Snuggs, Clarence
Tracey, Brian
Zucker, Senator Craig

Members (Absent)

Crowel, Raymond
Newton, Bridget
Thames, Jeffrey
Wilds, Moses

Guests

Bowman, Betsy
Chery, Kendrick
Cotte Griffiths, Cynthia
Ezrin, Debbie
Fasanelli, Antonia
Grinnell, Jennifer
Hong, Christine
Krakaur, Haifa
Lee, Viola
London, Sharan
Mayo, Cliff
Miller, Jamil R.
Rinker, Roberta
Stone, Mike
Swanda, Troy
Wellington, Janice

Staff

Adhanom, Rozina
Ball, Kim
Black, Sara
George, Leslie
Huggins, Gloria
McMillan, Linda
Sierra, Sharon
Soni, Nili

Welcome | Introductions – Amy Horton-Newell

Amy expressed thanks to Councilmember George Leventhal for his service and leadership on the Interagency Commission on Homelessness (ICH). Commissioners shared their appreciation to Dr. Leventhal for his time, drive, and leadership that helped the ICH to succeed in accomplishing their initiatives.

Interagency Commission on Homelessness Restructure – Eneshal Miller and Jeff Goldman

The Montgomery County (MC) ICH Restructure Workgroup was formed to help make recommendations regarding the ICH restructure. The members of the workgroup are:

Amanda Chesney	Louise Kauffmann
Jill Fox, Coordinator and Facilitator	Amy Horton-Newell
Jeff Goldman	Eneshal Miller
Amanda Harris	Shane Rock

Over the last 4 weeks, the Restructure work group met 4 times by conference calls and established the following goals to:

- Review current legislation and HUD requirements to ensure that ICH is both clear on goals and can achieve our objectives around ending homelessness;
- Make recommendations today (September 12) to the full ICH to change membership, meeting structure, decision making and committee structure;
- Propose concrete recommendations for approval at the December ICH Meeting;
- Have statutory changes in place by September 30, 2019.
- Re-educate everyone about the purpose and structure of the statutes.

The workgroup's focused was on decision making and who reports to whom, membership, meeting structure, and committee structure. The workgroup will continue to work through December to come up with more detailed recommendations. Others are welcome to join the group.

#1 Implement the following practices during the ICH Meetings:

1. Holding ICH Meetings 6 times a year, starting with the 2019 calendar year.
2. Provide training to new ICH members before their first meeting.
3. Review key performance and outcomes indicators at start of every ICH meeting.
4. Carve out 20 minutes for a public-comment period that allow community members to make comments at the start of each meeting before addressing business items on the agenda.
 - Test out new practices over 2 to 3 meetings and make any adjustments; and
 - Promote this new practice and notify public before the next meeting.
5. Establish that quorum of 51% of ICH members must be present to hold a vote on action items which will also need to be incorporated in the governance charter and the statutes.

Question: (*Stan Seidel*) Regarding the increase from 4 meetings a year to 6 meetings and the 51% quorum required to hold a vote, the question was asked about members who do not attend? *Amanda Chesney* asked is the increase to 6 meetings something that can be revisited at the end of the year and will proxies be an option?

Amanda Harris shared that the attendance record shows that 14-17 commissioners attend meetings regularly. The issue of attendance and proxies will be addressed in the Governance Charter (not in the legislation) and the charter will be updated and approved annually. The hope is that if members attend more often, they will feel more engaged.

Susie Sinclair-Smith agreed that increased attendance can lead to commissioners being more involved by not just feeling they attend to receive information but participating in actually shaping the work and making decisions.

Question: (*Clarence Snuggs*) Regarding the issue of training, what type and level of training is being suggested?

Amy Horton-Newell answered that the formal orientation for new members will be reestablished to alleviate the level of confusion about the Commission's mandates and goals. Also, in response to a suggestion from last meeting, a training regarding racial equity will be offered.

Nili Soni shared that work is being done by Betty Lam, Chief of the DHHS Office of Community Affairs, to offer a training program on equity for ICH Commissioners and Providers early next year.

Question: (*Susie Sinclair-Smith*) In terms of performance and outcome indicators, what is the vision of the group of what the indicators and measurements will be?

Amanda Harris shared that outcomes would include updates on ICH initiatives. Also, the Performance Review Committee made recommendations that the Commission focus on 4 of the 7 system performance measures. As the work of the Commission shifts, we will focus on the other measures.

Dr. Sherly Chapman asked that the indicators be separated by sub-populations (single adult and homeless children and their parents) to create a family-focused view.

Eneshal Miller commented that those who fall in between populations should be considered. Many people experiencing homelessness do not have a mental illness, an addiction or have children and these populations are not being served.

***MOTION:** *Dr. Chapman* moved for the Commission to make a decision and a commitment about the priority of distinguishing single adults in the homeless continuum from children and their parents for the purpose of identifying demographics specific for strategic positioning of our resources.

Brian Tracey seconded the motion. All were in favor of the motion. None opposed.

Amanda Harris commented that the Department is expanding Rapid Re-Housing program to address the needs of people who do not fit in specific populations. Also, collecting data is important to us but separating the data into populations is a challenge because many programs serve all types of households (i.e. the Permanent Supportive Housing Program).

George Leventhal added that the challenge is compounded by the fact that there are only two sources of assembling numbers—the Point-in-time Count and HMIS. One provides information once a year and the other only captures data from families who received and/or ask for help.

After a lengthy discussion, *Uma Ahluwalia* suggested to table the motion to allow time to determine what information is needed and how to report on the sub-population from the data available. The Performance Review Committee is responsible for looking at data and outcomes.

#2 - Identify appropriate changes to statute – Amanda Harris

The workgroup incorporated feedback from the ICH survey, retreat, and previous meeting minutes to form recommended changes to the statute. Most salient changes will focus on membership. The Restructuring Workgroup will draft the specific changes to the statute, send the document out via email for a vote from the Commissioners, and then move forward.

#3 - Oversee analysis of committee structure – Jeff Goldman

Feedback will be solicited from committee chairs. Focus will be on membership, responsibilities, roles and the ability of the groups to achieve their goals. This work will be done in September and October. In November the data will be analyzed, circulated to the broader Commission and final recommendations will be presented at the December meeting for a vote by the Commission.

#4 - Conduct annual review of the governance charter – Jeff Goldman

In October, the Restructure Workgroup will review the Governance Charter to identify areas to update and revise. Draft revisions will be sent out to a Committee member, ICH members and the

CoC for comment. The revised document will be presented for approval at the December ICH full meeting. Once the committee structure is finalized, the annual review of the Governance Charter will fall under the work of one of the sub-committees.

#5 – Clarify role and responsibilities of ICH members as governing board for CoC, including creating a code of conduct and conflict of interest policy in compliance with HUD requirements, and establishing ground rules for meetings – Jeff Goldman

In November, draft policies on the code of conduct, conflict of interests and ground rules for meetings will be circulated to the ICH Members for review and feedback. In December, it is hoped that the documents will be ready for approval and finalization.

***MOTION:** *Clarence Snuggs* motioned that the Commission approve and adopt the practices outlined in #1 Recommendation be implemented during the ICH meetings.

All were in favor of the motion. None opposed.

NOFA – Notice of Funding Availability – Allocation Committee Members

Linda McMillan of the CoC Allocation Committee reported that the committee met on August 29 and made funding recommendations and rankings of the proposals that were submitted. *Sara Black* added that the ranking is based on specific questions which form the HUD standardized scoring tool. Each project received a score, then the Allocation Committee met to consolidate the scores. Allocations were made based on the priority to the CoC, leveraged to get the most dollars and project performance. *Kim Ball* added that in addition to scoring, there were discussions when two projects tied in ranking, around gaps and how projects flowed in terms of ranking.

Linda McMillan also noted that the MCCH and McKinney 12 projects have different rankings in Tier 1 and Tier 2 because these two organizations asked to combine their programs. There is a new provider in Tier 1 Pathways DC Project Home.

The reviewers had concerns and questions about the quality of some of the applications because at times the outcome data from HMIS did not match some of the applications. DHHS looked at the each application to ensure consistency. Next year we will ask applicants to use more care in filling out the application; for example, fully using the space to clearly describe the programs (i.e. what they are asking for, who the program serve and what are their outcomes).

Visit the website for more details:

www.montgomerycountymd.gov/homelessness/Continuumofcare.html

Question: What does Tier 1 and Tier 2 mean?

Tier 1 is 94% of the funds available for renewal projects. Projects vetted by the CoC fall under Tier 1 and have met the threshold requirements of HUD and will most likely be renewed. Tier 2 is 6% of the funding plus equivalent funding available for bonus projects. Tier 2 is part of the national competition for funding. Scoring of applications determine which projects are awarded funding under Tier 2. Tier 1 is not part of the competitive process and is based on simple availability of funding from HUD.

Question: Who are the members of the Allocation Committee:

The members of the Allocation Committee are:

Carlos Aparicio, City of Rockville	Garnet J. Nelson, Veterans Administration
Pazit Aviv, Aging and Disability Services	Linda McMillan, County Council
Holly Denniston-Chase, Low Income Investment Fund	Dourakine Rosario, DHHS Office of the Director
Timothy, Goetzinger, Dept. of Housing and Community Affairs	

Montgomery County CoC System Performance – Amanda Harris

Amanda shared HUD’s compilation of the data shared from MC. Highlights from the System Performance Charts:

- According to the 2018 PIT Count, 842 people were found which was a decrease over previous years. This is significant because there was a change in our methodology and we are doing a better job of counting people and there was still a decrease in people counted during the PIT.
- The number of people served has also decreased in the last four years. People served means anyone who touched our system through in-reach, outreach, emergency shelters, safe haven, transitional housing (except those who entered permanent housing).
- The average length of time homeless has decreased (from an average of 144 to 125 days)
- Returning to homelessness has decreased in 2017 6% returned in 12 months and 17% returned in 24 months. A significant decrease from 2016 when there were 17% returning in 12 months and 23% in 24 months. This decrease is directly attributed to the Inside (Not Outside) effort, care coordination, support services including mental health and primary care.
- The chart showed that the number of people entering homelessness for the first time was 68%. It is our hope that as we employ the Diversion Program this percentage will decrease and keep people from entering homelessness for the first time.

After a lengthy discussion, Amanda Harris concluded by reporting that:

- About fifty percent (50%) of renters in MC are housing burdened.
- The Office of Legislative Oversight will soon complete and release a report on evictions and rental subsidies which will help to set priorities.
- The Performance Review Committee will be invited to the December meeting to share their recommendations. The Committee have been combing through this data and trying to determine data relevancy and to how to keep our system is moving in the right direction.

Inside (Not Outside) Update – Chapman Todd

Veterans: Chapman Todd reported that MC has housed 136 Veterans. MC’s functional zero number for Veterans is 6 and we are holding to that number. Another statistic to note is that Veterans are not returning to homelessness.

Chronic Homeless: To date, 392 chronic homelessness individuals have been housed (11 remain on the list). MC has funded Permanent Supportive Housing for 238 individuals.

Presentation: Mark Johnston, National Advisor and Former Assistant Secretary of HUD

Chapman introduced Mark and commented that Mark has been helping the ICH for the last year as our Coach for Community Solutions. Mark presented to help the ICH gain perspective on current successes and discuss challenges that can anticipated looking ahead to our future initiatives.

Mark commended MC on the successes achieved to meet the challenge of ending homelessness. Mark has worked on the issue of homelessness since the Reagan administration. After nationally spending time addressing homelessness through various pilot programs, it was discerned that Veteran homelessness is very different from family or chronic homelessness and that focusing on Veterans could lead to reducing and not just addressing the issue. Research has shown that it is expensive for communities to care for the needs of people living outside (i.e. ambulance costs and lack of quality healthcare). In 2001, the National goal was to end chronic homelessness and in 2008 the goal changed to end Veterans homelessness.

Seventeen years later, there are now 60 cities and/or communities, including MC (out of 3,800) that have ended **Veterans homelessness**. Nationally, there has been a 50% reduction of Veteran homelessness. Among the Built for Zero Movement, which has a stricter definition of what ending Veterans homelessness means, MC is counted as a community that has reached the Built for Zero functional zero goal for ending Veteran homelessness.

Nationally, there have been 3 communities (out of 3,800) that have ended **chronic homelessness**. There are 3 communities trying to join the ranks and MC is one of them. MC is down to 11 chronically homelessness people who are the hardest to serve. MC has taken intentional action to meet the challenge and have a dedicated core of people working to achieve the goal. This morning Mark met with the MC outreach workers, case managers and housing locators to hear their perspective. Every two weeks, Mark has a conference call with MC to discuss the progress (Nili Soni represents the MC and Chapman Todd represents the private sector).

MC's next initiative is to reduce and end family homelessness. Mark noted that it is important to consider a strategic diversion approach for families. Nationally, the statistics show that families tend to self-resolve their homelessness. In cities and/or communities that have an effective diversion strategy, 50-60% of families who come into shelter do not stay the night. Often times a conversation is all that is needed to resolve the situation. Moms with kids do not want their children living in shelter. They find another way. Perhaps, it may involve a case manager calling the landlord to determine a solution or looking to family or friend as a resource. For those who do not self-resolve, the Rapid Re-housing program is the primary vehicle used. Nationally, a high percentage of families experiencing homelessness are permanently housed within 6-12 months of financial assistance. Rapid Re-housing avoids the usually financial assistance for 2 years giving families less incentive to work to quickly get out of homelessness.

Meeting adjourned.