



Interagency Council on Homelessness

Emergency Response and Shelter Operations (ERSO) Committee



23 March 2022

Meeting Agenda



- I. **Welcome & Agenda Review (5 mins)**
 - a) **Introduction & Agenda Review**
 - b) **Adoption of Prior Meeting Notes**
 - c) **Call for Partners Updates/Announcements**
- II. **Discussion Items (75 mins)**
 - a) **Reviewing Hypothermia Operations (25 mins)**
 - b) **System Level & Procurement Updates on the Horizon (25 mins)**
 - c) **Shelter Redevelopment (25 mins)**
- III. **Announcements and Reminders (5 mins)**
 - a) **Updates/Changes to SOME's Food Service**
- IV. **Summary and Adjournment (5 mins)**
 - a) **Next Meeting: April 27 from 1 – 2:30 PM**

Meeting Agenda



- I. Welcome & Agenda Review (5 mins)
- II. Discussion Items (75 mins)
 - a) **Reviewing Hypothermia Operations (25 mins)**
 - i. **Reviewing Weather Alerts & Operational Modifications**
 - ii. **Leveraging expertise/experience in COOP to create Operational Playbooks for our Heat and Winter Plans**
 - b) System Level & Procurement Updates on the Horizon (25 mins)
 - c) Shelter Redevelopment (25 mins)
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Reviewing Weather Alerts & Operational Modifications



- ❖ Tues 1/25 – Mon 1/31
 - Cold Weather/Storm System
 - Significant shifts in operations

- ❖ Mon 2/14 – Tues 2/15
 - Cold Weather Alert
 - No operational shifts

- ❖ Week of 2/20
 - Demonstrations and Protests re State of the Union
 - Planning for potential transportation and security issues

- ❖ Sat 3/12 – Sun 3/13
 - Winter Weather
 - **none noted via email so need to confirm. Especially as this was the weekend so wondering if Adam's Day Center was opened or some other adjustment was made to support clients, especially if rec centers were not open all day**

Operation Shifts: 1/28 – 1/31



Cold Weather Emergencies

Activated Tues 1/25 through Thurs 1/27

Reactivated Friday 1/28 through Monday 1/31

- ❖ Transportation:
 - Normal Shelter Hotline Operations
 - Expanded support request from OSSE from Friday through Monday Morning

- ❖ Hours of Operations:
 - DPR Centers open from Fri 1/28 @ 6 pm to Monday 1/31 @ 7 am
 - Blair open 24/7 through the weekend
 - Warming Center (supported by DowntownDC BID) opened Sun 1/30 from 10 am – 4 pm

- ❖ Prep (*assumptions to confirm*):
 - TCP delivered meals, shelter resources, and PPE supplies in advance
 - Security coverage and janitorial services adjusted to accommodate shift in hours

Planning for Potential Disruptions/Operational Shifts



STOU Demonstrations No Weather Emergencies Activated.

- ❖ Planning w/ Clients:
 - Encouraged to remain onsite b/n Wed 2/23 and Wed 3/03
 - Providers expected to keep track of clients entering/leaving program locations
 - Providers to work w/ clients who must leave to create plans for getting to and from the site safely
 - Providers to work w/ clients to ensure 7-day supply of prescriptions and other important medication

- ❖ Expectations for Staff:
 - Must not leave program site until relieved by next shift
 - Shelter in place plans for staff and third-party contractors (e.g. janitorial vendors, maintenance staff, etc)

- ❖ Operations Updates:
 - Rec centers and Adams Place Day Center stayed open
 - Blair stayed open as well.

Lessons Learned for Operational Shifts



- ❖ Ensure that the winter plan calls for/thinks through backup for:
 - Transportation during inclement weather (OSSE as the backup)
 - Ability to use rec centers during the day, especially over the weekend (if at all possible and not disruptive to regularly scheduled activities)
 - Pre-determine “flags” for initiating weekend actions
 - ✓ Building in some “if, then” that prompt staffing and opening of sites so that when the forecast is being predicted, people can start prepping.
 - Systematic issue that might be best to address because some of the weather storm issues were not anticipated/forecasted before Wednesday afternoon:
 - ✓ not a lot of options during the day, especially over the weekends. Need to prioritize having options over the weekend during the day, regardless of alert status.



- ❖ Thinking through communication strategies
 - DHS quickly developed fliers to flag occurrence and distributed to outreach teams
 - To share with unsheltered clients.
 - Including talking point to encourage unsheltered clients to come inside and into shelters
 - Opportunity for Peers to encourage and talk to clients about improvements in shelter
 - Think through rapid-response outreach team that can be mobilized during emergency situations (both inclement weather and incidences of violence/emergency)

Leveraging COOPs for Heat & Winter Operational Playbooks



- ❖ Acknowledging expertise built over the last 2 years!

- ❖ So now,
 - How do we institutionalize lessons learned over last 2 years?
 - How do we evolve from site-specific COOP plans to a system-level COOP?

- ❖ Initial thinking is to roll up facility (site-specific) plans and
 - Create a central repository of plans
 - Review plans for completeness, identify critical gaps in plans, and support providers/programs to fill those gaps
 - Identify the backup resources that are oversubscribed and think through what is the back-up to the back-up

Leveraging COOPs for Heat & Winter Operational Playbooks



Discussion Questions for Providers/Programs

- ❖ What are your pain points when dealing with emergencies?
 - Communication w/ clients?
 - Feedback: rapid-response team for communicating with clients might be appropriate here as well.
 - Feedback: look for clients to specialize in emergency response and participate in the trainings. “Emergency Peers!”
 - Feedback: make sure client trainings are standardized and offered often as our population is transient. Booklets or websites. Speaker topics to introduce at the Day Centers

- ❖ What do you want us to be including and thinking?
 - Feedback: What are the critical services that we’re delivering during hypothermia? Make sure that we’re accounting for all those services in our COOP Plans. Get input from clients on how to best deliver those services to them!
 - Feedback: Adopt a standard format and required topics/areas for plans. Established HSEMA. Guidance from HSEMA (templates, samples)
 - Feedback: Have providers/programs tabletop exercises/drills to test annual/seasonal plans
 - Feedback: Group tabletop exercise so the whole community can learn/think about planning together.
 - Feedback: Need mental health first aid/ trauma informed care! How do we incorporate principles of trauma-informed care in our COOPs.

- ❖ What scenarios do we need to plan for and think about?
 - Food disruptions?
 - Transportation disruptions?
 - Demonstrations and protests? Insurrections and coup d'états?
 - Other?

What bases do you need to be covered?

- Alternative location for program/clients?

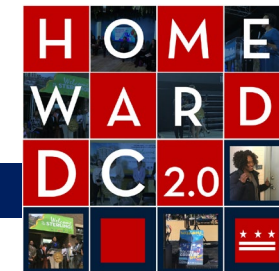


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 - a) Reviewing Hypothermia Operations (25 mins)
 - b) **System Level & Procurement Updates on the Horizon (25 mins)**
 - i. **Unwinding Hypothermia Operations (Immediate)**
 - ii. Right-Sizing COVID Protection Measures (Medium/Longer-Term)
 - iii. Procuring CoC/Shelter Management and Shelter Hotline & Transportation Services
 - iv. Care Coordination Efforts Underway
 - c) Shelter Redevelopment (25 mins)
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Unwinding Hypothermia Operations



- ❖ Still tweaking exact timing (so not exact, changes may be forthcoming)
- ❖ Operations winding down by March 31/April 1st
 - Salvation Army (Men)
 - Trinidad Rec Center (Men)
 - Adams Place Day Center (Men) – just the shelter operations, not the Day Center!
 - CCNV Drop-In Center (Men and Women)
- ❖ Operations winding down by April 15
 - Langdon Rec Center (Men)
 - Sherwood Rec Center (Women)
- ❖ Other (not firm)
 - Blair (Men) (Spring)
 - Pat Handy Legacy (Men) (Summer)
- ❖ Prioritizing connecting hypothermia sites to housing resources
 - Matching chronically homeless clients via CAHP
 - Triaging clients to PEPV and Bridge Housing ASAP
 - Also opening specialized beds at new 801 East facility so looking to connect folks to these beds as well
- ❖ **Lesson Learned:**
 - Hypothermia sites are not staffed with a complement of case management.
 - We don't have a consistent level of engagement related to housing resources/navigation during the hypothermia season to support hypothermia sites. Need to plan for and address this for future Winter Plans.

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Right-Sizing COVID Protection Measures



- ❖ DHS will be leading the planning efforts related to right-sizing COVID Protection Measures
 - The DHS presentation is to make sure that ERSO Committee Members are aware and can join the planning process!

- ❖ COVID protection measures have allowed us to pilot new programs/interventions that we may want to integrate into our vision for our single adult system.
 - We will have a broader conversation about what we envision for our system later, under shelter redevelopment!

Long Term COVID-19 Strategy in Shelter

- 3/14 Meeting on Long-Term COVID-19 Strategy In Shelter
- Entering a new phase of how we manage COVID-19 in low barrier shelter
- We want to continue and build on what's worked – continue testing, vaccination clinics, screening, masks, reduced capacity, ISAQ
- But we need to make changes to reflect the current context:
 - Businesses have re-opened
 - Low community transmission
 - Availability of testing and the vaccine

Long Term COVID-19 Strategy in Shelter (ctd)

Item	Proposed End Date
24-7 Shelter Operations	June 30, 2022
Pre-Packaged Meals	April 30, 2022
On-Site Nurses – Screening	TBD
Isolation & Quarantine Site (Majority FEMA funded*)	TBD – Not Before End of Fiscal Year (Sept 30, 2022)
PEP-V Sites (Majority FEMA funded*)	TBD – Not Before End of Fiscal Year (Sept 30, 2022)

FEMA will continue to reimburse 100% of costs through July 1, then shift to 90% cost sharing.

Long Term COVID-19 Strategy in Shelter (ctd)

- What will continue
 - Regular testing at low barrier shelters.
 - Unity will continue to do testing every two weeks
 - Regular easy access to get vaccinated/boosted
 - Unity will be at every site every two weeks
 - Reduced Capacity
 - Mask Mandate
 - Access to ISAQ

PEP-V Criteria

- The PEP-V criteria includes:

<p>Matched to a permanent housing rental subsidy</p> <p><u>AND</u></p> <p>Be 45 years of age or older*</p> <p>* Previously 55 years or older</p>	<p>---</p> <p>OR</p> <p>--</p> <p>-</p>	<p>Matched to a permanent housing rental subsidy</p> <p><u>AND</u></p> <p>Regardless of age, have chronic health conditions or partake in certain lifestyle choices that increase the risk of serious COVID-related illness**</p> <p>** Additional qualifying conditions were added to previous PEP-V eligibility criteria --- including, overweight and obesity; pregnancy; smoking (current or former)</p>
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See next slide for exceptions

PEP-V Criteria (Cntd)

- Exceptions to the general PEP-V eligibility criteria will be made on a case-by-case basis for persons experiencing homelessness that are extremely vulnerable — Tier 1: Very high priority for immediate placement
- ALL over 70
- Severe conditions at any age:
 - Severe lung disease (e.g. frequent severe COPD exacerbations)
 - Significant physical disability requiring assistance w/ADLs
 - ESRD Cr>4 or on dialysis
 - End stage liver disease
 - Heart failure with EF <30%
 - Significant cognitive disability that limits self-care
 - Severely immunocompromised
 - HIV/AIDS with CD4<350
 - Active cancer treatment/neutropenia
- Contact Christian.Howard@dc.gov for PEP-V Intakes

Long Term COVID-19 Strategy in Shelter (ctd)

- DHS & TCP are putting together a team of people to plan for the end of 24-7 shelter operations, including:
 - Client Communication
 - Client belongings & bed assignment policy
 - Directing clients to services open during the day & transportation
 - Preparing for Hyperthermia alerts
 - How will this change affect other operations (e.g. security, meals)
 - How to continue momentum for vaccinations & getting boosted

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Upcoming DHS Procurements

Name	Summary	Projected Solicitation Date
Continuum of Care / Shelter Management Contract	Provide management oversight for the homeless services Continuum of Care including a network of services providers to provide services to over 10,000 individuals who are homeless or at risk of becoming homeless in the District – including emergency shelter, transitional housing, and permanent housing with supportive services.	Summer 22
Shelter Hotline & Transportation	Manages the shelter hotline for individuals and families who are experiencing homelessness and provides scheduled and unscheduled transportation.	Mid April 22

Continuum of Care / Management Contract

- High Level Considerations
 - What are the key categories of the contract: case management, security, training, food, reporting.
 - What are the essential requirements for each category, building on the feedback from ERSP, Shelter Capacity, and Shelter Conditions.
 - What reports, research, and best practices can we refer to, to guide the requirements? E.g. training report
- To share ideas and input: Madeleine.Solan@dc.gov

Shelter Hotline & Transportation

- High Level Considerations
 - What populations should be included in services? E.g. should youth over 18 be included?
 - How do we ensure there is clear policy and funding to support vehicle maintenance and the purchase of new vehicles?
 - How can we best leverage technology to better understand the # of clients and how we serve them.
 - How can we incorporate flexibility in the requirements so that we are able to fund and adjust when new needs arise.
- To share ideas and input: Madeleine.Solan@dc.gov

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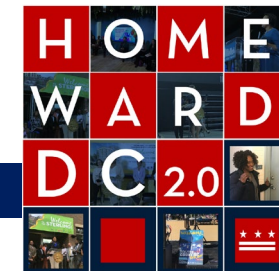
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Partnership w/ DC Hospital Association



- ❖ Workgroup comprised of key points of contact from hospitals and homeless services system to:
 - Address immediate pain points experienced by both hospitals and homeless services;
 - Quantify the flow/cycle of individuals between hospitals and homeless services, including both appropriate and inappropriate use of services;
 - Understand the drivers of inappropriate use and the barriers to delivery of appropriate interventions/uses;
 - Address the drivers of inappropriate uses; and
 - Ensure the appropriate interventions are funded to the scale of the quantified need.

Partnership w/ DBH



- ❖ Small team working on 2 goals,
 1. Create quick/easy tools to support homeless services staff access immediate crisis supports/services
 2. Case conference complex behavioral health clients to establish strategies for preventing crisis

- ❖ Starting at Harriet Tubman LBS (due to proximity of resources at CPEP) and expanding out based on lessons learned and capacity at DBH.

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 - c) **Shelter Redevelopment (25 mins)**
 - i. **Status Update for New 801 East Facility**
 - ii. Redevelopment Efforts Across the System
 - iii. Planning for New York Avenue and beyond (What is our vision for the Single Adult System)
- III. Announcements and Reminders (5 mins)
- IV. Summary and Adjournment (5 mins) ★ ★ ★

New 801 East Status Update



- ❖ Low Barrier Shelter Beds (192)

- ❖ Specialized Beds:
 - Work Beds (96)
 - Senior and Medically Frail Beds (44)
 - Medical Respite Beds (24)

- ❖ Day Center and Services

Redevelopment Efforts Across the System



- ❖ Lots of projects in the works, but timing is hard to pin down due as procurements are underway for services

- ❖ Planned Rehabilitation Projects (tentative start dates):
 - Emery (Spring), Blair (Spring) and Pat Handy Legacy (Summer)

- ❖ Redevelopments:
 - New York Avenue LBS: **architect selection underway**
 - Harriet Tubman LBS and Adam Place LBS

Planning for NYA and Beyond



What is our vision for the Single Adult System?

- ❖ What have we learned from COVID that we want to build into the system (over the longer term)?
- ❖ How should we incorporate the projections from the SAS WG that if we assign all FY22 vouchers by June 2022, we might see a 72% reduction in the number of single adults in our system on any given month?
 - On the family and veteran side, we now have significant vacancies (in fact, on the family side some sites are sitting empty)!

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 - b) **Other?**
- IV. Summary and Adjournment (5 mins)

Updates to SOME's Food Services



- ❖ SOME's food service starting on April 1st.
- ❖ We will continue indoor, hot breakfasts from 7:30-9 am but will provide To-Go Lunches during that time.
- ❖ We have provided indoor, hot lunches for a few months. That will end.

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