

Interagency Council on Homelessness Emergency Response and Shelter Operations (ERSO) Committee





DON'T FORGET TO HIT RECORD



- Welcome & Agenda Review (5 mins)
 - a) Introduction & Agenda Review
 - b) Adoption of Prior Meeting Notes
 - c) Call for Partners Updates/Announcements
- II. Discussion Items (60 mins)
 - a) Hyperthermia Check-In (20 mins)
 - b) Hypothermia Planning (20 mins)
 - c) Community Plan for the Supplemental NOFO (20 mins)
- III. Announcements and Reminders (as needed)
 - Upcoming Solicitations
 - II. Monkey Pox Response and Protocols
- IV. Summary and Adjournment (5 mins)
 - a) 2 Meetings Proposed for September
 - b) 9/13 from 1:30 3 pm (leveraging Executive Committee timeslot)
 - c) 9/27 from 1 3 pm (regular ERSO Committee timeslot)







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Hyperthermia Check-In



- To review heat alerts and operational modifications since the last ERSO meeting
- To reflect on
 - What worked well?
 - Any barriers and challenges?
 - > Any feedback or recommendations for next year?
- Previously established
 - Vulnerability to HVAC outages
 - Need for Sunday day center services downtown
 - Need for cooling buses at McPherson Square





Alerts Called & Operational Modifications



- \star Since the 7/27 ERSO Meeting:
 - Heat Alerts: 7/28, 8/03, 8/04, 8/10
 - Hot Weather Emergency: 8/05, 8/06, 8/07, 8/08 and 8/09
- Operational Modifications
 - Day Center Services
 - Extra Cooling Site *NEW*
 - Shelter Hotline Transport
 - Expanded Outreach Services
 - Cooling Buses Secured





Day Center Extended Hours & Cooling Site



Center	8/06 (Saturday) Extended Hours	8/07 (Sunday) Extended Hours
801East Day Center	9 am - 6 pm	
Adam's Place Day Center	7 am - 7 pm	
Downtown Day Services Center	10 am — 6 pm	N/A
Church of the Epiphany *NEW*	N/A	11 am - 6 pm

* Feedback:

- Clarification from DHS that the DDSC was only open on Saturday! Pivoted to Church of the Epiphany to utilize space! Not something that is guaranteed but something that is negotiated as needed.
- Data available from Shelter Hotline is currently under analysis by ICH staff. We will be sure to incorporate our analysis and recommendations once hyperthermia season wraps up.
- Shelter Hotline working through data collection challenges including new sites that are coming online and new contacts at different sites to ensure consistent data collection
- > DHS (Bill) collecting data from DDSC: peak census
 - ✓ Weekend of July 30th: Saturday peak was 55 ppl at 2pm, Sunday was 60 ppl
 - ✓ Weekend of August 06: Saturday peak was 70 ppl, Sunday was 2 ppl at Church of the Epiphany (DDSC only open Saturday)





Expanded Outreach Services



Scope of work: providing welfare checks, distributing ice(d) water, and encouraging individuals to take advantage of shelter or cooling buses.

Outreach Team	8/06 (Saturday) Extended Hours	8/07 (Sunday) Extended Hours
Community Connections	10 am to 2/3 pm	10 am to 2/3 pm
DHS Team	9 am to 6 pm	11 am to 6 pm
Miriam's Kitchen	10 am to 2/3 pm	10 am to 6 pm
Pathways	10 am to 6 pm	10 am to 6 pm

Feedback:

- * **Pathways**: these were much needed services; hardest location to engage was McPherson as individuals there are resistant to going to the nearby day center and/or cooling busses, logistics were tricky, lessons learned around preparing with water and Gatorade
- * **Community Connections:** learned a lot. Out of stock on water and Gatorade and ended up assigning someone on the team to do the runs to purchase supplies. Many clients had lots of layers of clothing. Found a lot of people.
- * **DHS**: looked at hot spots from DBH and went to those locations. Also went to McPherson Sq as well. Upwards of 50 ppl that accepted water at McPherson Sq. Food not Bombs were also out there and giving out food and water. Engagements at Minnesota Avenue (from Benning Road up to ????), 25-30 ppl swarming vans in need of water. Came across 2 ppl who had passed out due to overdoses and were able to call for emergency services. Park at 9th and Mass Ave/K and served around 25 ppl.
- Gratitude for this higher level of service over the weekend as these are not the standard outreach hours!
 - **Feedback about spots that were not mentioned:** like Union Station and other areas known to our alternate support networks (e.g. Mutual Aids). Clarification that DHS is stopping at all the locations between the hot spots mentioned in their update.

Peer Engagement: interest in distributing flyers and supporting with COMMS! Is there a role and responsibility for Peers?



Shelter Hotline Transportation



- Clarified and distributed Transportation Plan for the summer, which includes:
 - Scheduled transport for women (am and pm)
 - Scheduled transport for men (am and pm)
 - > Transport to seasonal sites
 - ✓ Which is mainly about hypothermia seasonal sites BUT
 - ✓ Includes Blair, which is currently open year-round

Feedback:

- What did transport numbers look like? Especially during heat emergencies, the hot weather emergency?
- Still considerably low during the hot weather emergency, not much different than a regular emergency. What increases is the number of calls from concerned citizens for welfare checks. Majority of unsheltered residents would rather remain where they are and receive support where they are located.





Cooling Buses Secured



- Dates: weekend of 8/05, 8/06 and 8/07
- Hours: from 9 am until 7 pm
- Locations:
 - ➤ Two (2) Busses at Starburst Plaza → ultimately only used 1 bus at Starburst due to lower utilization
 - > One (1) Bus at New York Ave. Men's Shelter
 - > One (1) Bus at Harriet Tubman Women's Shelter

Feedback:

- Supporting McPherson Square with cooling buses is not possible due to its proximity to the White House
- Question as to whether cooling buses are even needed? Yes, for example, clients at McPherson Square do not want to leave their belongings behind to access a location that is at a more distant location.
- Cooling buses were used at NYA and Harriet Tubman. Buses at Starburst Plaza were not utilized quite as well.
- Shelters at capacity appreciated the additional support/buses at NYA and HT.
- * Monitoring buses: staff and security at shelter locations monitor (round robin) to ensure that buses are secure and clean.







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Hypothermia Planning



- Proposed approach to new and significant concerns
- Proposed timeline/process for reviewing and approving the Winter Plan





Proposed Approach



- Complicated because of
 - Monkey Pox and
 - > Influx of migrants
- How do we acknowledge and approach these unknowns?
 - Acknowledge the risks BUT
 - > Keep the Winter Plan focused on our traditional scope of work, knowing that our system in general (and DHS in particular) has
 - ✓ Done an exemplary job of responding to COVID/medical vulnerabilities over the last two years
 - Extensive experience working with DPR and DGS to bring additional capacity online in the form of rec centers that serve as seasonal or overflow locations
 - ✓ Provided overflow capacity as and when needed to prevent cold weather injury!
- With that in mind, ICH will draft language for an approach for
 - > Updating the Community on plans to address these risks, as they are developed and available
 - > Updating the Winter Plan on any necessary modifications to accommodate and account for
 - √ The role of homeless services and especially
 - ✓ Any specific modifications required to adequately provide protection from cold weather injury.

Feedback:

- We should articulate that homeless services is stretched thin and has limited capacity; need to be clear that accommodating the influx of migrants will be a significant strain on homeless service.
- Appreciation to all the service providers that are working to support the influx of migrants; but we do need to support the individuals that are unsheltered and reluctant to come in —especially as it relates to leveraging FD12s to support those individuals and our outreach teams engaging them.
- Suggestion to create outreach programs to target our longer stayers and hardest to serve.
- Should we put a mechanism across the shelter system to track and understand the number of migrants that are using our system so that we can start to estimate the number of individuals that we might need to accommodate during the Winter.





Proposed Timeline/Process



Step	Timing/Forums	
Distribution of Draft Winter Plan	Ideally CoB 9/06	
1 st Review of Draft Winter Plan by ERSO	9/13 from 1:30 – 3 pm leveraging cancelled Exec Committee meeting	
Distribution of Updated Winter Plan	Ideally CoB 9/21	
Review and Approval of Winter Plan by ERSO	9/28 from 1 – 2:30 pm which is the Sept ERSO Committee meeting	
Review and Approval of Winter Plan by Exec	10/11 from 1:30 – 3 pm which is the Oct Exec Committee meeting	

Feedback

* We are way behind! So appreciate that the plan is aggressive.





Outreach & Comms Strategy

- H O M E W A R D D C 2.0
- How should we adjust our outreach and comms strategies if we don't leverage rec centers this season or how we leverage them is significantly different
 - E.g., No seasonal sites, just overflow as needed

Feedback/Recommendations:

- CEWG is eager to help out with outreach!
- What are the mechanics/logistics of using rec centers as overflow versus seasonal sites? Best to use as seasonal and not as overflow.
- Rec Center staff at the old seasonal sites are supporting with redirecting clients that show up; UPO including those sites as a part of outreach and pick-up; Flyers distributed at DDSC and other important gathering locations.







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Community Plan for the Supplemental NOFO



- Reminder that we have to develop a Community Plan for the Supplemental NOFO
- Updated Process/Plan

Step	Timing/Forum
Community Feedback on Key Discussion Questions	Today's ERSO Meeting
First Draft of Community Plan for ERSO Review and Feedback	9/28 ERSO Meeting from 1 – 2:30 pm
Updated Draft for Executive Review and Approval	10/11 Executive Meeting from 1:30 – 3 pm





Key Discussion Questions



* Topic area:

Current strategy to identify, shelter, and house individuals and families experiencing unsheltered homelessness

Discussion Questions:

- How do outreach teams currently coordinate?
 - ✓ With one another?
 - ✓ With shelters?
 - ✓ With housing providers?
- > What are the gaps in outreach services, particularly for outreach teams that may have different funding sources?
 - ✓ Are outreach teams successful in engaging, building rapport, and (within the appropriate timeframes) SPDAT-ing individuals they encounter in their catchment areas?
 - √ How can we support this conversation as a system?
- How do outreach and shelters coordinate to encourage access and entry into LBS and temporary housing?
 - ✓ Do outreach teams regularly ask clients if they want to go into a shelter?
 - ✓ How can we support this conversation as a system?
- Are outreach and shelter providers successful with referring clients matched to housing to bridge options (including PEPV)?
 - √ How can we support this conversation as a system?





Coordination & Gaps in Outreach



- How do outreach teams currently coordinate?
 - With one another?
 - With shelters?
 - With housing providers?
- Pathways feedback that outreach teams are calling and texting if they have shared clients. Are very available and in communication. Especially with encampment closures as clients are migrating.
- DHS teams works across the teams to coordinate.
- UPO works alongside the street outreach teams as outreach is ingrained in our daily operations. So regularly
 dropping off comfort items. Also, UPO flags vulnerable clients to outreach teams, especially as it relates to
 behavioral health challenges.
- SOAR CMs support the Community Connections Team. Also connected to housing teams and providing support with documentation.
- Feedback from Day Center and non-government funded outreach that coordination has been difficult with staff turnover. So maybe that we need to, as a system, do better transition planning.
- PFFC coordinates with a number of teams and wants to build its capacity to support clients through the housing process, including wellness checks and learning how to adjust to housing. Also work with alternative outreach teams including mutual aids.
- Outreach hours that are convenient to clients versus a 9 to 5 schedule. Question about the follow up especially from CSAs and behavioral health supports.
- What are the gaps in outreach services, particularly for outreach teams that may have different funding sources?
 - Are outreach teams successful in engaging, building rapport, and (within the appropriate timeframes) SPDAT-ing individuals they encounter in their catchment areas?
 - > How can we support this conversation as a system?







Encouraging Access to ES, TH & Bridge



- How do outreach and shelters coordinate to encourage access and entry into LBS and temporary housing?
 - > Do outreach teams regularly ask clients if they want to go into a shelter?
 - > How can we support this conversation as a system?

Feedback:

- Shelter In-Reach is critical for non-HMIS participating shelters in particular.
- DHS team was doing shelter in-reach but lost capacity and has had to shift roles and responsibilities in the system.
- DHS-funded outreach teams are not able to do Shelter In-Reach. It is beyond the scope of their contracts/work.
- Are outreach and shelter providers successful with referring clients matched to housing to bridge options (including PEPV)?
 - How can we support this conversation as a system?







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Understanding the HUD NOFOs



HUD has released two separate but related notices of funding opportunity (NOFO):

- * CoC NOFO: This is the annual funding competition to renew existing HUD CoC Program Grants and to apply for new programs under the CoC Bonus and Domestic Violence Housing Bonus
- Unsheltered Supplemental NOFO: The purpose of this special NOFO is to target efforts to • reduce unsheltered homelessness, particularly in communities with very high levels of unsheltered homelessness and homelessness in rural areas. Through this Special NOFO, HUD will award funding to communities to implement coordinated approaches - grounded in Housing First and public health principles - to reduce the prevalence of unsheltered homelessness, and improve services engagement, health outcomes, and housing stability among highly vulnerable unsheltered individuals and families. HUD expects applicant communities to partner with health and housing agencies to leverage mainstream housing and healthcare resources. \$267.5 million is available for projects as part of the Unsheltered Homelessness Set Aside. The District is eligible for about \$14.6 million.





Timeline: CoC NOFO



Community Input Sessions:

- Fall 2021: NOFO Debrief & Community Input Sessions on Use of Bonus Resources
- Summer 2022: Input Session on Prioritization Framework for Supplemental NOFO to be adopted at 8/09 Executive Committee Meeting
- * 8/12 & 8/18/22: Community Informational Sessions
- * 8/18, & 8/19/22: Project Application Training Sessions
 - \triangleright TCP will add training sessions on 8/22/22 based on demand
- * 8/26/22: Project Applications and Justification Letters Due
- 9/30/22: Consolidated Application Package Due to HUD





Timeline: Unsheltered Supplemental NOFO



Community Input Sessions:

- \gt 7/27/22: ICH Emergency Response and Shelter Operations
- > 8/2/22: ICH Single Adult System Workgroup

Adoption of Community Feedback

- > 8/9/22: ICH Executive Committee
- * 8/12 & 8/18/22: Community Informational Sessions
- * 8/18, & 8/19/22: Project Application Training Sessions
 - \triangleright TCP will add training sessions on 8/22/22 based on demand
- 9/20/22: Declaration of Intention to Apply Due; Submission of Project Application Materials/Justification Letters begins
- * 9/30/22: Project Applications and Justification Letters Due
- Adoption of Draft Community Plan
 - > 10/11/22: ICH Executive Committee
- 10/30/22: Consolidated Application Package Due to HUD







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What You Need to Know About Monkeypox



What is monkeypox?



Monkeypox is a rare, but potentially serious viral illness that can be transmitted from person to person through direct contact with bodily fluids or monkeypox lesions/rash.

What are the symptoms of monkeypox?







Headache



Chills





Exhaustion

Symptoms usually appear 7-14 days after exposure, with range of 5-21 days.

What happens if I think I have monkeypox?

You should see your healthcare provider or local wellness clinic for a health assessment.

How do I get monkeypox?



Monkeypox spreads between people primarily through direct contact with infectious sores, scabs, or bodily fluids. Monkeypox can spread during intimate contact

between people, including sex, kissing, hugging, or talking closely; and touching fabrics and objects during sex that was used by a person with monkeypox, such as bedding and towels. It can also be spread through respiratory droplets or oral fluids from a person with monkeypox.

How can I prevent monkeypox?

- Avoid coming into contact with people recently diagnosed with the virus or those who may have been infected.
- Wear a face mask if you are in close contact. with someone who has symptoms.
- Wash your hands with soap and water or use hand sanitizer, especially after coming into contact with those who are infected - or suspected infected.

For more information about monkeypox, visit: Preventmonkeypox.dc.gov

Monkey Pox (MPX) Update

- DHS issued guidance on 8/4, available HERE
- Please share the DC Health MPX **Factsheet** widely
- DC Health will be joining Shelter Town Hall Mtgs & Training Peer **Educators**
- Setting up vaccination clinics with DC Health for at risk populations



DHS MPX Guidance

For Suspected Cases

- Notify DC Health: 844- 4932652
- Notify DHS & TCP HERE
- CONGREGATE SETTINGS ONLY Call ISAQ Hotline 202-671-3076

Vaccination

- Eligibility Information & Pre-Registration <u>HERE</u>
- Vaccination Clinic Scheduled for 8/31, 9-12 and 3-6pm
 CCNV parking lot – corner of 2nd and D St



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