

Interagency Council on Homelessness

Executive Committee



Meeting Agenda

- **Welcome & Agenda Review (5 mins)**
 - a) Introductions
 - b) Approval of 11/09 Meeting Notes
 - c) Agenda Review & Call for Other Items
- **II.** Discussion Items (45 mins)
 - a) Expanding Employment & Entrepreneurship Opportunities (30 mins)
 - b) Creating Deeply Affordable Housing with HOME ARP Funds (15 mins)
- III. Updates (20 mins)
 - a) 801 East
 - b) Expanding PSH Capacity
 - c) Leveraging Medicaid
- IV. Governance (10 mins)
 - a) Winter Plan & ERSO Voting Slate
 - **b)** Full Council Call for Nominations
- v. Announcements and Reminders (5 mins)
- vi. Summary and Adjournment (5 mins)
 - a) January 11, 2022 from 1:30 3:00 pm





Meeting Agenda

H O M E W A R D D C 2.0 √

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Strategically Partnering w/ DOES & DSBLD

Areas for Collaboration:

- 1. Supporting/facilitating access to existing programming
 - a) Educating providers/case managers of options/programs
 - b) Outreach to interested clients directly
- 2. Understanding structural challenges & barriers to participation
 - a) Based on historical interactions/information
 - b) Learning from the new cohorts accessing programs
- 3. Understanding program outcomes for our clients
- 4. Tailoring/developing programming for our clients





GOVERNMENT OF THE DISTRICT OF COLUMBIA DEPARTMENT OF EMPLOYMENT SERVICES

Presentation to 12/14 ICH Executive Committee

Alan Karnofsky Deputy Chief of Staff, DOES

> THE GOVERNMENT OF THE WINGTON DISTRICT OF COLUMBIA MURIEL BOWSER, MAYOR

Follow Up to 11/09 DOES Discussion

- Discussion highlighted the need to:
 - Identify overlap (clients served in both systems) and track outcomes to better understand the efficacy of services/strategies, including First Source
 - 2. Connect clients to DOES programming, particularly Earn and Learn, Jobs First Pilot, Building Blocks Initiative, and the Transitional Residency Program
 - 3. Learn lessons from current initiatives and successes



Identifying Overlap & Tracking Outcomes

- Starting with readily available data:
 - Source: self-report of housing stability/homelessness experience as part of DOES intake
 - **Programs**: full breadth of programming, including First Source Compliance
 - Scope: intake, successful program completion, job placement, and wage bump (if working in the District)
 - Timing: preliminary data for Feb or March Exec Meeting
- Exploring the possibility of data sharing agreement



Connecting Clients to DOES Programming

- Recovery funded programs to start as soon as Federal funding is available
- Goal: To effectively connect clients
- Resource: DOES Outreach (aka Workforce on Wheels)
 - Is mobile and can visit program sites
 - Orienting clients or case managers on registering and navigating resources/system

• Key Questions:

- Which locations and programs?
- How do we target RRH participants? By training case managers? Or advertising hours at Day Centers?
- If we start with 3 5 locations, what is ideal/strategic?
- What is the timing or cadence that makes sense for our clients?





Entrepreneurship Support From Inno.ED



441 4th Street, NW, Suite 850N Washington, DC 20001 • www.dslbd.dc.gov

Caroline Howe Project Manager, Aspire



Kate Mereand Program Manager, Inno.ED



Contact us at Inno.ED@dc.gov

Find us at <u>www.dslbd.dc.gov</u>

Join us at http://bit.ly/dslbd events







Who is Inno.ED?

The Innovation & Equitable Development Team (Inno.ED) is part of the Department of Small & Local Business Development (DSLBD).

DSLBD is a DC Government agency that supports all small & local businesses in the District.

DSLBD Divisions

- Certified Business Enterprise (CBE)
- Commercial Revitalization
- DC PTAC
- Business Opportunities
- Inno.ED

Inno.ED Programs

- Aspire
- Made in DC
- District Capitalized
- DC Kiva Hub
- Dream Grants
- & more + training & technical assistance





Businesses are as diverse as people.

Entrepreneurship is solving a problem.

Business is only as risky as the risks someone decides to take.







People build businesses they way people build anything else, one step at a time.

Our core, Build a Dream training is centered around the mindset of entrepreneurship, with over 3000 DC residents having taken the 10-

hour course. https://bit.ly/BUILDADREAM





Aspire is business development training and now a funded pitch to

support returning citizen entrepreneurs.

Aspire was our first program, built by stakeholders, around these three community led principles:

- 1. Meet people where they are
- 2. Build a Community
- 3. Build Community Wealth





Inno.ED provides generalized TA to any DC business or entrepreneur on any topic.

Book telephone TA with the Inno.ED team: http://bit.ly/INNO_BOOKING

Join us IN PERSON at MLK Library on Wednesdays: https://bit.ly/TAATMLK









Housing: Entrepreneurship

Connection?

Absolutely.





DSLBD Presentation



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Need for a new housing product



Homeward DC 2.0 documented substantial improvements, particularly for families:

- ✤ 73% reduction in family homelessness between 2016 and 2021.
- * Comprehensive reforms, including replacing a very large shelter with smaller, service-enriched facilities.
- Rapid Rehousing accounted for largest portion of exits.

Progress for individuals has been slower:

- District has more than doubled the PSH inventory between FY'16 and '20.
- However, number of individuals experiencing homelessness has increased even as chronic homelessness began to decrease in FY'19 and '20.
- Characteristics of individuals not matched with PSH:
 - Median age 52; health and other conditions likely to deteriorate the longer homelessness persists.
 - o Inconsistent workforce attachment; 2019 survey indicated average earnings of approximately \$4,000 over a three-month period.
- Drivers of long-term homelessness include:
 - $_{\circ}$ \qquad Lack of resources for prevention.
 - Ongoing shortage of affordable housing in the District.

"Homelessness is the tip of the iceberg with regard to poverty; it is the visible peak atop a submerged crisis of inequity."

The District Responses in FY 2022



The District has allocated funding at historic levels for proven housing tools:

Immediate response:

- Over 3,400 vouchers plus services for people matched with Permanent Supportive Housing (PSH) and TAH.
- Expansions to Rapid Rehousing program.

Longer term production:

* \$400 million in Housing Production Trust Fund, matched with project-based Local Rent Support Program vouchers.

Allocating one-time funding from ARPA to test new housing approaches:

- Individuals currently experiencing homelessness.
- Incomes not sufficient to achieve stable housing without long-term rental assistance (beyond Rapid Rehousing).
- Not matched to PSH; do not have long-term vouchers; not expected to need long-term, wrap-around services.
- Funding sources include HOME-ARP and Fiscal Recovery Funds, both under ARPA.
 - HOME-ARP funds currently made available under the Consolidated RFP (\$16.4MM after administrative costs).
 - Fiscal Recovery Funds (\$31MM) to be offered under a dedicated RFP, with remaining HOME-ARP, in calendar 2022.

Clarifications & Input Opportunities in 2022



All permanent affordable housing development resources are represented in the Consolidated RFP, *but for* the \$31 MM in Fiscal Recovery Funds.

- ✤The RFP will allocate far more resources than have previously been available.
- The RFP sets priorities but *does not exclude* other proposals.
- ✤Organizations should submit their projects by February 15.

While much of the one-time ARPA funds will have been allocated, DHCD is planning for the FY23 budget cycle.

- Housing providers can receive feedback on proposals even if they are not funded with FY22 dollars.
- Presenting DHCD with a viable pipeline demonstrates the need for further investment in PSH production.

Next steps regarding the FY22 allocation of "acquisition funds" (HOME-ARP and Fiscal Recovery):

- DHCD will review proposals submitted under the Consolidated RFP that could use HOME-ARP.
- ICH will facilitate information gathering and input for serving single adults not matched to PSH:
 - \circ $\:$ Surveys and focus groups with clients to better understand needs and preferences.
 - \circ $\;$ Workshops with providers to clarify housing types and operational considerations.
 - All answers to questions from DHCD will come through the Consolidated RFP platform while that process is underway.
- District will consider all input in development of dedicated RFP for deeply affordable housing in 2022.
- Both RFPs (current and next) can allocate funding for acquisition of hotels and other property types.

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801 East Men's Shelter: Case Management & Services





Solicitation Overview

801 East is the first major shelter rebuild for unaccompanied individuals under the District's Homeward DC plan.

Homeward DC has three pillars: preventing homelessness whenever possible, immediate access to dignified emergency housing, and rapid reconnection to permanent housing. Solicitation developed around these pillars.

Project incorporates lessons learned from Short-Term Family Housing program and present the opportunity for providing tailored services designed to make the experience of homelessness as brief as possible.



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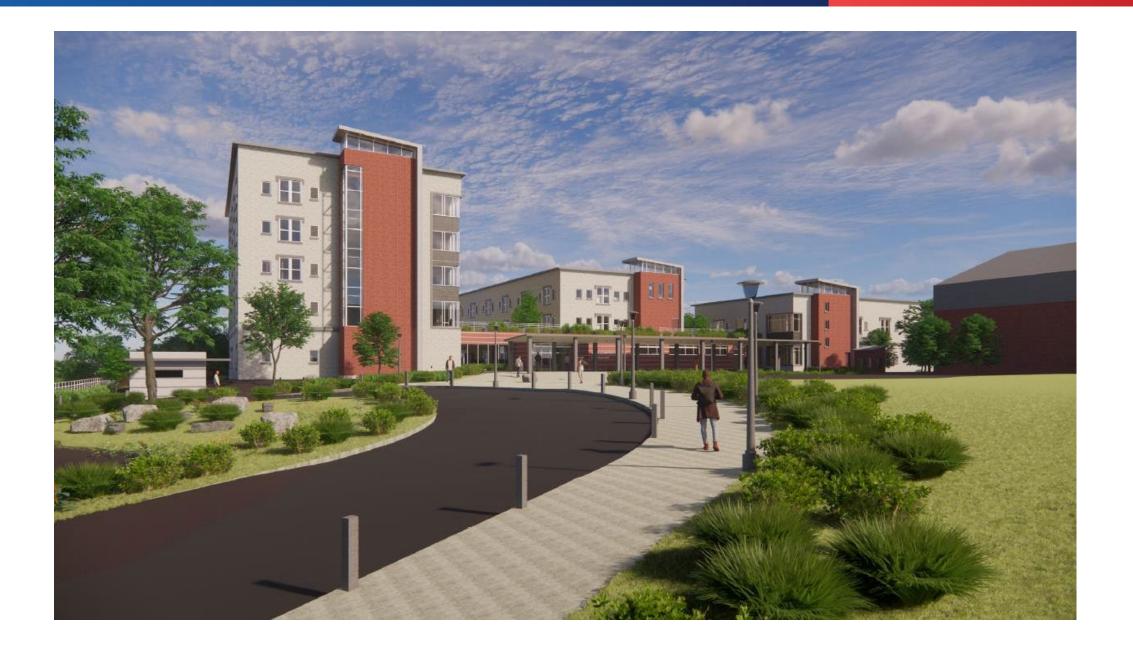
Solicitation Overview contd.

801 East is a new construction project on the campus of St. Elizabeth's. Work on the new facility began in 2020, with substantial completion anticipated by December 2021.

Transition out of the old 801 East Men's Shelter into this new facility and program launch of the services outlined in the solicitation are anticipated in January 2022.



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www.dh25.dc.gov @DCHumanServ

The New Facility

The building includes three shelter wings designed for diversity of needs: 1)192 LBS 2)96 beds employed/in training/employment track; and 3) 44 beds for seniors and those with medical needs

Notable new features:

Promoting increased sense

of safety:

- ✓ sightlines/visibility
- ✓ dorms and floors have separate controlled access

Service enhancements:

- Day program
- Medical clinic
- Housing focused case management
- Commercial kitchen
- Huddle rooms

Promoting sense of *dignity, respect*:

- natural light, beautiful vistas, design aesthetic
- outdoor terraces, community rooms, quiet spaces

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- computer rooms
- personal storage
- no bunk beds



Selected Service Provider

Community Connections was selected to operate as the prime service provider for the new 801E Men's Shelter program.

Community Connections is serving as the prime service provider, coordinating case management services, as well as the Day Center programming.

Community Connections is partnering with Metro Health to operate the Health Clinic and respite beds.

DHS is coordinating onboarding meetings and working with partners to ensure a seamless service transition.

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PSH2 Updates

FSA-Operations Team (CA Team)



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PSH2 Modifications

 To assist with Ramp-Up to meet the needs of the FY 22 match schedule, DHS has proposed modifications to the current PSH-2 contracts.

 Proposed modifications based on provider feedback and FSA's assessment of the PSH program.



Proposed Modification for Case Management

CURRENT HCA requirement	Proposed Modification
Case Manager: two (2) years of experience with a Bachelor's need in human services field. – full detail can be found in section C.7.1.21.2 of HCA	Case Manager: one (1) year of experience with a Bachelor's need in human services field.
Requires six (6) or more years of experience working with vulnerable and marginalized populations, in lieu of the education requirement for Case Managers.	A high school diploma or equivalent, plus two (2) or more years of experience working with vulnerable and marginalized populations, in lieu of the education requirement for case managers.
Currently doesn't allow for professional internship experience to be counted as work experience.	Internships for Human Services Degrees is considered as experience in the field.

Proposed Modification for Case Manager Supervisor

CURRENT HCA requirement	Proposed Modification
Must have a Master Degree, be a Licensed Professional Counselor, Licensed Clinical Social Worker or Bachelor of Science in Nursing. C.7.1.23 of HCA	Must have Master's Degree and either be a Licensed Clinical Social Worker or a Licensed Professional Counselor.
Have a minimum of 3 years of professional experience providing counseling and case management services to individuals/families experiencing homelessness or other related populations.	Have a minimum of two (2) years of professional experience providing counseling and/or case management services to individuals/families experiencing homelessness or other related populations.
Does not allow for a Licensed Graduate Social Worker (LGSW) or Licensed Graduate Professional Counselor (LGPC).	Considers applicants who are a Licensed Graduate Social Worker (LGSW) or Licensed Graduate Professional Counselor (LGPC), if at least one LICSW is already on staff and assigned to the PSHP that can provide supervision to the LGSW or LGPC. •32

Housing Navigation Modifications

CURRENT HCA requirement

Case Managers shall have a **minimum of four (4) monthly face to face** client contacts a month, consisting of one (1) face to face client contact per week during the period spent conducting services and activities to find client housing. **C.7.1.19.2 of HCA**

Proposed Modification

The Housing Navigation Phase, the Provider shall have a **minimum of two (2) face-to-face participant contacts a month**, two face-to-face visits within the same 24 hour24-hour period will be counted only as one (1).

Housing Stabilization Modifications

Housing Stabilization ModificationsProposed ModificationMinimum of four (4) total client contacts a
month. Two (2) of these must be face to face
client contacts, of which one (1) shall be
conducted in the home. The other two (2) client
contacts may be made by telephone, via email or
text. C.7.1.19.3 of HCAMinimum of one (1) face-to-face
participant contact in a month, which shall be
conducted in the home, and one (1) other contact
(telephone, email or text).

monthly contacts from a Provider to a participant at any time based on a client assessment.

Case Manager Supervisor On-boarding Fee

Case Manager Supervisor Onboarding Fee Updates

The District shall provide a "Case Manager Supervisor Onboarding Stipend" in the amount of \$5130 per 125 new participants to assist with costs associated with onboarding newly hired Case Manager Supervisors that will provide services to the clients under the DHS Permanent Supportive Housing Program.

The onboarding stipend shall be paid one time, on a reimbursable basis after the Provider receives a referral of minimum 125 new participants to participate in their PSH program.

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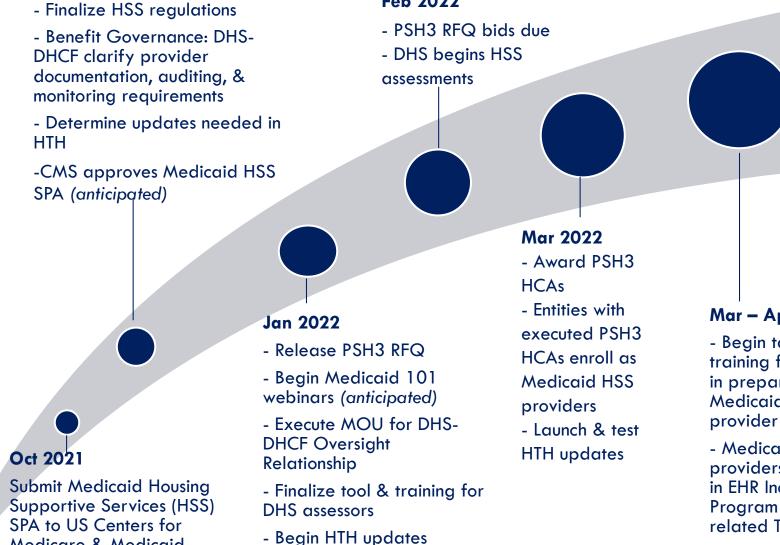
Timeline & Key Milestones

2.0

Dec 2021

Medicare & Medicaid

Services (CMS)



Feb 2022

April 2022 Begin Medicaid HSS benefit

Mar – April 2022

- Begin targeted training for providers in preparation for Medicaid HSS provider enrollment

- Medicaid HSS providers participate in EHR Incentive Program and receive related TA

Forums for Updates

- ✤ ICH Medicaid WG (2nd Wed every month, 3 4:30p)
- Operations Meetings (1st & 3rd Wed every month; 3-4:30p)
 - First meeting held on Nov 3

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- 'Buckets' of operations to focus on
 - ✓ 'Conflict-free' assessments, care plan (ISP) development
 - \checkmark Client choice in who their HSS provider is
 - ✓ IT platforms that support case notes, billing, and computing performance metrics
 - Mapping DHCF enrollment process
 - Understanding the standard components of a claim
 - Crosswalk of standard claim components to HTH fields
 - Creating & testing necessary canned reports
- Provider Capacity Meetings (2nd Thurs of every month starting in January; 11:15a Noon)
 - Staff onboarding to meet CM needs for new housing vouchers
 - > Staff training to deliver housing navigation and housing supportive services
 - Skill building to operate as Medicaid provider and submit Medicaid claims



Project Re-Cap: Service Model

HOUSING NAVIGATION

- Assess client to identify the client's housing preferences & barriers
- Assist client with:
 - obtaining key documents needed for the housing application process
 - the housing application process
 - the housing search process
 - communicating with the DCHA to schedule & finalize the DCHA's unit inspection
 - identifying resources to cover expenses such as security deposit, moving costs, furnishings, adaptive aids, etc.
 - arranging for & supporting the details of the move into housing
 - applying for a Home Health Aid, if needed or desired

<u>Before</u> Client is In Housing

After Client is In Housing

HOUSING STABLIZATION

- Assess for client strengths that could help them thrive in housing
- Provide clear and concise written information about services available to the client
- Provide early identification and intervention for behaviors that may jeopardize housing; Advocate for the client and link the client to community resources focused on preventing eviction
- Educate & train the client on the role, rights, & responsibilities of the tenant & landlord, & how to be a good tenant
- Ensure the client is connected to all benefits he/she is eligible for (e.g. SNAP, SSI/SSDI, VA)
- Understand the client's current connections to health care services and help client connect to needed services
- Assess the client's ability to navigate public transportation.
- Assist client with
 - monitoring their progress toward their housing goals
 - developing& maintaining key relationships with landlords/property managers
 - resolving disputes with landlords and/or neighbors to reduce risk of eviction
 - household budget and in mapping available community resources
 - developing a housing support crisis plan
 - accessing both formal (i.e., access to food), and informal resources (i.e., community or peer support groups)
 - finding and maintaining natural community supports
 - connecting to employment, education, volunteering, and/or other community programming and resources
 - the housing recertification process
 - developing a plan to accomplish ADLs and IADLs
 - scheduling appointments to health care services
 - understanding of follow-up actions after an appointment with a service provider, including their medication and when their next appointment(s) is scheduled

Project Re-Cap: Reimbursement



Monthly Medicaid Reimbursement Rate: \$755

- > Minimum monthly contact thresholds for participating adult
 - Housing Navigation = 2 face-to-face contacts
 - \checkmark Housing Stabilization = 1 face-to-face & 1 other contact
- > Periodic rate validation to ensure rate accurately reflects provider level of effort
- Monthly Locally-funded 'Family' Add-on Rate: \$400
 - Medicaid reimbursable services for HoH
 - Family services transition to PSH3 on same timeline as individuals April 2022
 - Rate based on reported average time providers spend assisting participating adult's custodial minors living in the home

Monthly Billing

- Providers will bill Medicaid for services delivered to the Medicaid-enrolled adult participating Housing Supportive Services
- Provides will bill DHS directly to receive the 'family add-on' rate for the additional time and effort associated with serving the family as a unit



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Winter Plan & Updating ERSO Slate



- * 12/22 ERSO Committee voting on updates to Winter Plan
 - Clarification and updates related to process for calling alerts and services available regardless of alert status
 - Draft language to circulate by CoB 12/15
- Working towards consensus
- In case of a formal vote reviewing ERSO Voting Slate
 - Staff transitions across agencies
 - Reaching out to ensure all agencies have designated representatives



Full Council Call for Nominations

- Opened 11/09, scheduled to close 01/11
 - > 1 response received
 - > 11 Seats to fill (4 Provider, 2 Advocate, 3 Consumer & 2 Private sector)
- * Request to clarify roles and responsibilities of Full Council members from
 - 11/09 Exec Committee and
 - > 12/03 Consumer Engagement Work Group
- Responding to Feedback
 - > 01/11: Providing guidance and developing a plan for recruiting actively amongst leaders of ICH committees/workgroups/special project teams, and working with Consumer Engagement WG to outreach clients at shelters and housing programs



Extending deadline for Nominations to 02/08

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