



District of Columbia ICH Executive Committee



April 10, 2018



- . Welcome and Introductions
- Proposed FY19 Budget
- III. HMIS Visibility: Progress Update
- Iv. June Full Council Prep: Understanding System Inflow
- v. Consumer Engagement Strategy Update
- VI. Governance/ICH Administrative Updates
- VII. Department Announcements
- VIII. Summary and adjournment







- . Welcome and Introductions
- II. Proposed FY19 Budget
- III. HMIS Visibility: Progress Update
- Understanding Inflow and Implications
 (proposed topic for 6/12 Full Council meeting)
- v. Consumer Engagement Strategy Update
- vi. Governance/ICH Administrative Housekeeping
- VIII. Department Announcements/Updates
- viii. Summary and adjournment





Proposed FY 19 Budget: Homeless Services



Mayor's Budget Proposal –Overview

Reform System of Care for Families Experiencing Homelessness

- Launch New Short-Term Family Housing
 Support exits from shelter with RRH
- Sustain progressive engagement with new TAH and PSH

Enhance Crisis Response and Connections to Housing for Unaccompanied Adults Experiencing Homelessness

- Expand outreach, daytime services and shelter operations Launch homelessness prevention
- Expand PH opportunities with new RRH, PSH and TAH
 Replace 801 East Men's Shelter
- Develop new PSH designed to meet the needs of senior women experiencing chronic homelessness
- Critical upgrades to LB shelters

Expand Services for Youth and Their Families

- Expand STEP
 Sustain Solid Foundations 1x investments
 Launch 24 Drop In Center
- Add crisis shelter beds for youth
 Add PSH





FY19 New Investments: Families



Launch New Short-Term Family Housing (\$32.2M)

- Provide service-enriched Short-Term Family Housing programs at new sites,
 replacing capacity at DC General (\$10.2M)
- Additional \$22M added to the capital plan for Ward 1, 3, 5, and 6 sites;
 Ward 1 site includes 15 units of PSH for seniors and upgrades to the Rita
 Bright Family & Youth Center (\$22M)

Sustain Progressive Engagement with TAH and PSH (\$3.5M)

- 100 new units of TAH (\$2M)
- ❖ 50 new units of PSH including services (\$1.5M)

Support Exits from Shelter with RRH (\$6.6M)

- 100 new units of RRH to support exits from shelter (\$3.2M)
- Cost adjustment to update cost modeling (\$3.4M)
- Expand use of LRSP to include application fees and security deposits





FY19 New Investments: Unaccompanied Adults



Expand Daytime Services and Outreach (\$2.5M)

- New daytime services including case management
- Outreach staff for individuals living in encampments
- Specialized shelter beds and pilot bed reservation system

Launch Homelessness Prevention (\$875k)

\$875k for new prevention services

Expand Permanent Housing Opportunities (\$34.7M)

- ❖ 250 new units of PSH including services (\$4.5M)
- ❖ 70 new units of TAH (\$1.2M)
- Develop 65 new site-based PSH units designed to meet needs of people experiencing chronic homelessness (\$28M)
- 100 new units of RRH (\$1M)

Shelter Improvements (\$66M)

- Replace 801 East Men's Shelter (\$40M)
- Critical improvements to low barrier shelters (\$17.5M)
- Upgrade New York Avenue Men's Shelter (\$8.5M)





FY19 New Investments: Youth Services



Youth Targeted Investments

- Expand the Strengthening Teens Enriching Parents (STEP)
 program to serve more youth reported missing to police
 (\$1.4M)
- 24 Hour Drop-In Center, 30 new crisis shelter beds, 10 new
 PSH units, 5 additional transitional housing beds (\$1.7M)
- Sustain FY18 expansion for transitional housing units, youth aftercare, and youth shelter beds (\$1.35M)





FY19 New Investments: \$23M Total (Above Baseline)



Program Type	# New Units	DHS Cost	DCHA Cost
Individuals/Singles			
RRH	100	\$1,083,000	
PSH Units & Services	250	\$1,506,000	\$4,467,000
TAH	70		\$1,250,760
Prevention/Diversion		\$875,000	
Admin		\$300,000	
Families			
RRH	100	\$6,600,000	
PSH Units & Services	50	\$531,000	\$1,041,000
TAH	100		\$2,082,000
Admin		\$300,000	
Youth			
24 Hour Drop-In Center		\$500,000	
TAY Youth Shelter		\$660,000	
Transitional Housing	5	\$450,000	
PSH Units & Services	10	\$299,160	
Youth Aftercare		\$504,000	
Youth Shelter Beds		\$630,000	
Admin		\$100,000	
FY19 Total - \$23,178,920	685	\$14,338,160	\$8,840,760

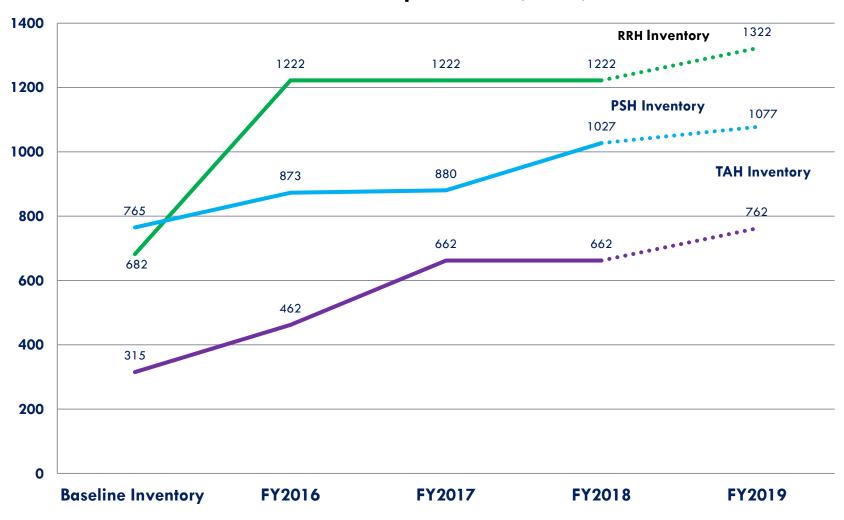




FY16 - FY19 Enhancements: Homeward DC



Families - Actual & Proposed PSH, TAH, RRH Units



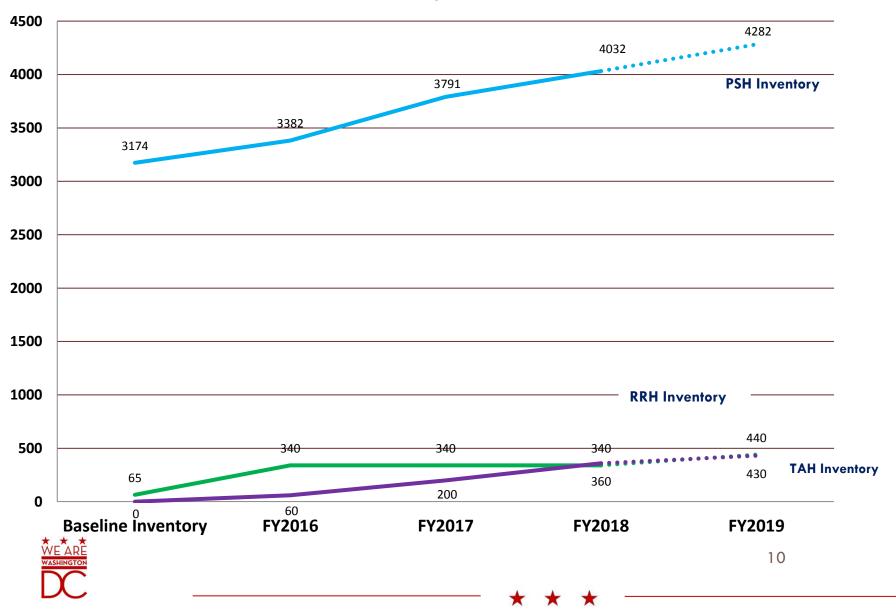




FY16 - FY19 Enhancements: Homeward DC



Individuals - Actual & Proposed PSH, TAH, RRH Units



FY19 Budget: Affordable Housing



- Since entering office, the Bowser Administration has sparked the creation or preservation of more than 10,400 affordable units, which another 2,950 in preconstruction.
- This includes almost 500 new Permanent Supportive Housing (PSH) units funded through the Consolidated Request for Proposals.







FY19 New Investments: Affordable Housing

H O M E W A R D

- \$100M for Housing Production
 Trust Fund
- \$10M for Housing Preservation Fund
 - Goal is to preserve 100% of existing affordable units
 - Anticipate 3:1 leverage of private contributions (raising \$40M)



- > Will help low/moderate income DC residents purchase first home.
- \$55M in capital funds and \$1.9M in project/sponsor based vouchers for the New Communities Program





FY19 Budget: Behavioral Health Priorities



- Enhance clinical direction for treatment services
- Continue cross-agency collaboration to support service delivery and better outcomes
- Identify and implement efficiencies based on realigned structure
- Maximize Medicaid reimbursement
- Increase capacity of forensic services
- Increase integration of primary and behavioral health care





FY19 New Investments: Behavioral Health





- Expand behavioral health services in public schools
- Invest in early childhood prevention, intervention and evidencebased programs



- Fund projected utilization of behavioral health services
- Maintain supported housing
- Fund 10% overall rate increase



- Expand pre-trial forensic capacity
- Fund pre-arrest diversion program to divert from criminal justice system and access treatment





FY19 New Investments: Behavioral Health



Description	Amount	FTEs
Increase capacity for pre-trial forensic services patients at Saint Elizabeths Hospital	\$2,077,149	17
Establish Pre-Arrest Diversion Program to reduce arrest and cycling of low level offenders with behavioral health needs in the criminal justice system	\$1,586,936	10
Expand school based behavioral health services to highest need schools; provide technical assistance to providers	\$3,000,000	0
Increase Medicaid Match	\$7,369,000	0
Align personnel with Fund Source	5,848,000	0
Fund projected fixed costs increase	1,566,000	0







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Background:

- In 2017, ICH approved TCP to begin work to "open" the HMIS – to move away from existing, closed system where providers can only see the clients their agency enters into HMIS to one where HMIS records info can be shared, with client consent, to streamline service delivery
- CAHP system has had sharing (opt-in with an ROI) since it was set up in HMIS, idea is to bring CAHP visibility to scale for the full system







Background:

- Opening HMIS will help solve some system challenges such as:
 - Requiring consumers to give the same information repeatedly at intake
 - Different agencies create duplicate records for the same people
 - Allowing providers to see assessment info (i.e. VI-SPDATs)
 - CAHP has difficulty finding people when matches are made, verifying eligibility or existing service connections







Status Update:

- TCP held feedback sessions (including June 2017 ICH pre meeting) to understand consumer concerns with open system, frustrations with closed system, etc.;
- Established HMIS Users group to get feedback from provider perspective;
- Engaged Abt Associates HMIS TA professional for guidance along the way, followed referrals to other CoCs that have gone from closed to open for advice;
- * TCP began working with vendor of HMIS (Mediware, formerly Bowman Systems) to customize software to reflect community's feedback without losing functionality or creating new visibility problems.







Status Update:

- Progress slowed by delay in release of ServicePoint 6
 (wanted to train users on "new" system and changes to visibility at the same time);
- TCP continuing to work on:
 - Restructure of provider "tree" which will improve visibility some on its own
 - Updating docs paper ROI for consumer consent,
 HMIS SOPs, privacy notice, etc.





HMIS Visibility: Next Steps



- Formal review of docs by TA when complete
- Structure full HMIS similar to CAHP like type providers can see that a record exists but not the full extent of the record unless consumer has given his/her consent to "open" it
 - Building provider groups, e.g. Outreach-LBS-CAHP; VWFRC-Family Programs; etc.
- Once HMIS is open, all users will be able to search to see if a record exists (verified by name, DOB, last 4 of SSN)
 - If provider is within a provider group, will be able to see that a record exists, basic demographic info, program history
 - If a consumer has given consent to open record, provider will open it so that more of the content becomes visible to other providers in group
 - ✓ If consent is revoked, provider closes record accordingly





HMIS Visibility: Next Steps (Cont.)



- No definitive timeline for Version 6 release from Mediware
- Restructure complete in May/June
- Planning more community engagement in summer to inform on coming changes
- Decision on whether or not to move forward prior to V6 by fall, depends on timeline from vendor







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June Full Council Meeting Prep



- Proposed Topic: Deep Dive on System Inflow
- Why does understanding inflow matter?
 - Our work to develop our Coordinated Assessment and Housing Placement (CAHP) System over the last three years has demonstrated that:
 - More housing resources does not automatically translate into a reduction of the number of people experiencing homelessness.
 - Likewise, improved targeting of those housing resources (through CAHP) has made a difference for our most vulnerable neighbors, but the number of people experiencing chronic homelessness each year also remains stubborn.
 - Over 3500 single adults have exited the streets or shelter to permanent housing since 2015, but we have not seen a reduction in the demand for shelter among single adults.
 - Homeward DC is predicated on the notion that increased investment in permanent housing will, in time, generate cost savings in emergency shelter expenditures.





Understanding Inflow



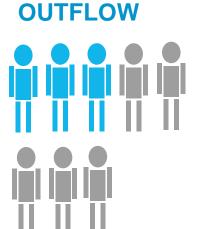
INFLOW

























Preparing the Data Analysis for June



Potential questions:

- What percentage of clients are:
 - ✓ Newly experiencing homelessness?
 - ✓ Returning to shelter from housing?
 - Returning from our inactive list (i.e., disappeared and reappeared?)
- Does inflow change throughout the year (seasonal variations)?
- What do we know about the housing status of clients prior to entering shelter (i.e., evictions versus doubled-up)?
- What percentage of clients appear to be coming to the District from other states?
- Other questions?





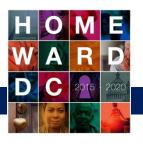


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Consumer Engagement Strategy Update



- Feedback provided at 1/09 and 2/13 ICH Executive
 Committee Mtgs and 3/13 ICH Pre-Council Mtg
- Great input, but little consensus
- * Convening appointed members with lived experience on 4/20 to make final decisions
- Outstanding issues:
 - Meeting Logistics (Time/Location)
 - Consumer stipends
 - Alignment with Youth Advisory Board
 - Facilitation/Administrative Support





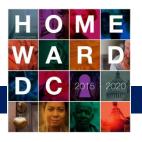


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Governance Updates



- Committee 2018 Work Plans/Priorities (For Awareness)
- Committee Slates (Approval Requested)
 - Housing Solutions
 - Youth Committee
 - Work Group Chairs
- Committees At a Glance (For Awareness)
- Nomination Process -2018 Vacancies (Update)







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