

Interagency Council on Homelessness Strategic Planning Committee



25 October 2022



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 (40 mins)

- a) Office of Migrant Services (20 mins)
- b) PIT Plus (20 mins)

III. DHS Updates (30 mins)

- a) DHS Strategic Plan (10 mins)
- b) DHS Peer Case Management Institute (10 mins)
- c) DHS Procurement (as needed)

IV. Governance & ICH Updates (10 mins)

- a) ICH Staffing and Membership (5 mins)
- b) HUD CoC NOFOs (5 mins)

v. Announcements and Reminders (as needed)

vi. Summary and Adjournment (5 mins)

a) Next Meeting: 13 December 2022 from 1:30-3pm (leveraging canceled Executive Committee)





Welcome & Intro Notes



* Intros:

- > Chat intros for attendees: name, pronouns, org, and title/role
- Quick round of hellos from Co-Chairs and ICH staff with formal roles leading or supporting meeting

* Adopting Prior Meeting Notes:

- Automatically adopted unless meeting attendees flag issues
- > Generally, ICH team sends out meeting notes within a week
- Please review as soon as possible and flag any errors/issues
- > If we don't hear back within a week, assuming good to adopt

Call for Partner Updates/Announcements:

> Any significant updates or changes that impact the system





Agenda Review



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Migrant Status Update: Where We Are

Background

- March 2020, Trump admin instituted Title 42 (policy to expel migrants coming over US-Mexico border in theory due to COVID-19 concerns)
- April 2022, Biden admin revokes Title 42
 - In response, Texas (then Arizona) governor began busing migrants to DC in make political statement

Response

- NGOs, volunteers, District staff mobilized to greet migrants and link with services or help with onward travel
- More formal Office of Migrant Services within DHS being stood up now

Volume

- ~50-100 migrants arriving daily from April-June; as many as 300 per day in early August
- DC currently providing temp accommodations for ~154 migrant families (528 individuals)
- Estimated ~100 adult migrants (without minor children) reside in low barrier shelters currently



Migrant Services and Supports Act of 2022

- The Emergency Legislation was passed Sept 21, 2022 by near unanimous vote. Temporary Legislation – Lasts 225 Days.
- Addresses the humanitarian crisis by Creates the Office of Migrant Services under DHS
- This Office will provide tailored services to assist people who arrive here this system will
 operate in parallel to the DC Homeless Services System
- The Bill amends the HSRA definition of a resident for the purposes of receiving homeless continuum of care services.

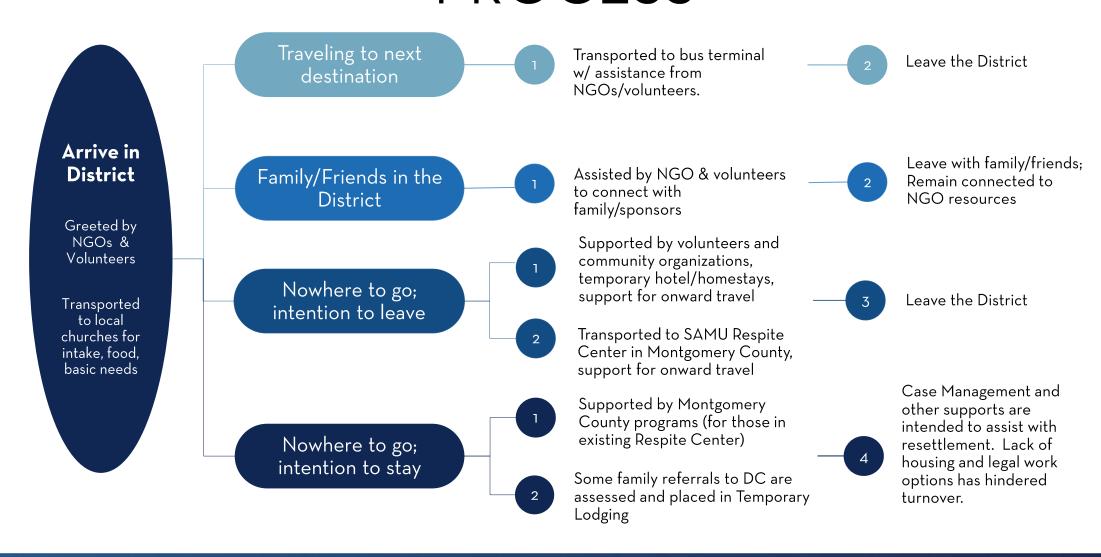


Office of Migrant Services

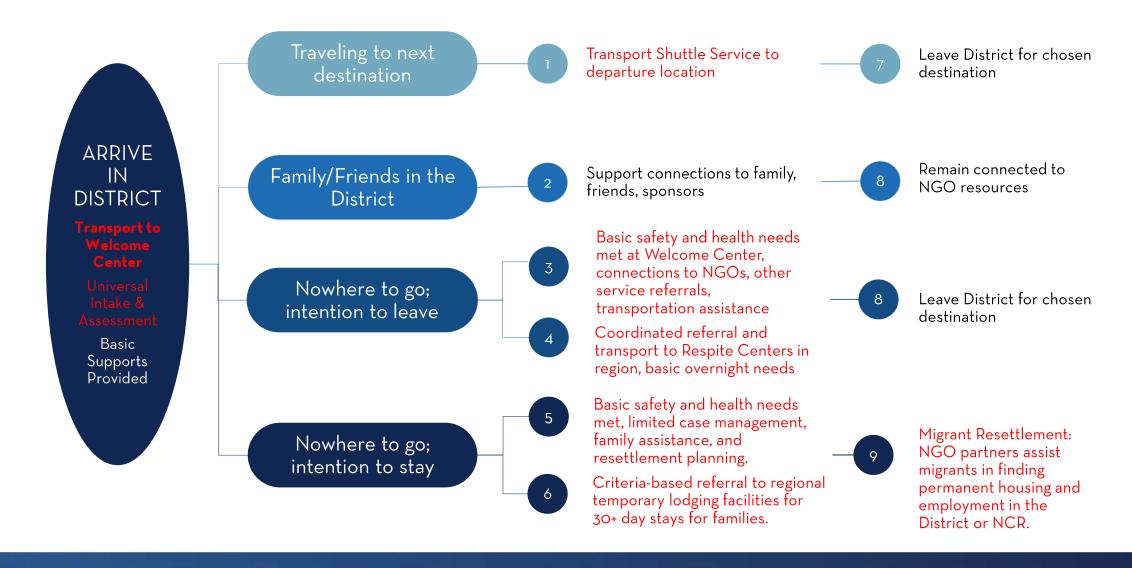
- Contracts, staffing, logistics, buildings, all being established now
- Process (next slides) established and will be refined over time as staff brought in and structures established



CURRENT MIGRANT SERVICES PROCESS



FUTURE MIGRANT SERVICES PROCESS





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Background

- TCP conducted the special survey project, Point-in-Time (PIT) "Plus", in 2019.
- The annual PIT survey is primarily focused on demographics and service needs but does not provide the best opportunity to have in-depth conversations about reason(s) behind one's experience of homelessness, their service use histories, and patterns of housing security/insecurity over time.
- PIT Plus was designed to better understand what led to individuals' experience(s) of homelessness and what could have prevented those experience(s).



Background

• The PIT Plus followed another special survey project, The Women's Needs Assessment, which was conducted in 2017.

• The methodology, approach, and survey instrument were highly influenced by that project, but was broadened to include all single individuals and its focus was on the priority areas for the community at that time.



PIT+ Survey

- To better understand inflow and causation among individuals experiencing homelessness (and to be able to intervene sooner), we wanted answers to questions such as:
 - What caused someone to seek emergency shelter, and what could have altered that path?
 - How many people are experiencing homelessness for the first time each year?
 - When we see short or long breaks in service patterns, where are people going?
 - When people arrive from outside of the District, what factors influenced their decision to seek services here?
- We also wanted to compare and contrast responses to these questions among different groups:
 - Men/Women; Youth/Adults; Vets/Non-vets; Persons with disabling conditions v. those without; and persons entering homeless services system from other systems, i.e. Criminal Justice, Psychiatric, Child Welfare, etc.



PIT+ Survey

Survey sections included:

- Where are respondents currently/usually staying?
- For how long have respondents been experiencing homelessness?
- Have respondents lived or used services outside of the District?
- What are the respondents reasons for seeking (or not seeking) shelter in the District?
- What were the causes of respondents current and first experience of homelessness (if different), and what could have prevented the experience(s)?
- Who comprises respondents' social networks?
- With what health issues are respondents living?
- With what other systems are respondents engaging?
- PIT demographic questions.



Survey Techniques

- To ensure adequate representation among single people who were experiencing homelessness regardless of whether or not they regularly entered shelter, we primarily targeted day or drop-in centers, meal programs, and libraries.
- Recruited surveyors from provider agencies and relied less on volunteers, as the assumption was that folks may feel more comfortable speaking to people with whom they had already established rapport.
- We allowed for an extended timeframe, 10 days, as compared to the single night for PIT.
- Incentive gift cards were of higher value than PIT, as survey could take around 25-30 minutes to complete.



Survey Techniques

 The approach was intended to be one where respondents gave information in narrative format while assessors coded responses while going through the tool together.

Question Types:

- Binary Choice
- Multiple Choice
- "Choose one"
- "Select all that apply"
- Hybrid Open Ended
- Conditional



Planning Questions

Provider Capacity to Implement:

- To conduct a parallel long-form survey in tandem with the annual PIT takes a lot of planning and staff time, how do providers particularly drop-in centers, meal programs, and day services feel about their ability to participate?
- What support would providers need to commit to a week plus of rigorous engagement and surveying of consumers?
- If there are capacity concerns, are there ideas outside of a survey implementation effort that may provide our community better information on single adults?
- Other capacity concerns?



Planning Questions

Survey Focus:

- What questions do we (generally) want to ask?
- Are there priority areas in our current work that we want to highlight in the question set, so that we can have good data to strategic planning purposes?
 - Racial equity
 - Shelter accommodations
 - Health concerns (COVID, Monkeypox, etc.)
 - Perceptions of economic climate and ability to access housing
- What "sub groups" of population would we want to be able to disaggregate data by?
- Other thoughts on making this data collection meaningful and distinct from basic HMIS/PIT information?



Next Steps

- Need to confirm ability to implement a PIT Plus refresh and determine a timeline for planning, implementation, and analysis.
- Assemble a small work group to provide feedback on planning, survey tool questions, time frame for implementation, etc.
- Work with providers to prepare for deployment in January.



TCP Contacts

Tom Fredericksen | Chief of Policy & Programs

TFredericksen@community-partnership.org

Elisabeth Young | Deputy Chief of Policy & Programs

EYoung@community-partnership.org



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Final 5-year goals

- 1. Provide high quality DHS services to individuals, families, and youth using collaborative, person-centered, and forward-thinking processes.
- 2. Implement policy initiatives that address structural barriers to economic mobility; integrate learnings to improve DHS programs and practices so that residents are positioned to grow their economic security.
- 3. Make homelessness rare, brief, and non-recurring in DC through innovative, person-centered and research-based practices that are considered exemplary throughout the nation.
- 4. Become an anti-racist, high performing organization that models inclusion, sustainability, continuous learning, quality, and effectiveness.
- 5. District residents will consistently receive reliable, thorough, and trauma-informed service from a well-trained, well-resourced, and respectful staff.

Feedback Received from ICH

- Need to add respect
 - GOAL: District residents will consistently receive reliable, thorough, and trauma-informed service from a well-trained, well-resourced, and <u>respectful</u> staff.
- Recommend adding safety to the values
 - VALUE: Prioritizing Wellness: We prioritize the <u>holistic well-being</u> of our employees and the DC residents we serve because well-being is fundamental.
- Add trauma-informed to #5
 - **GOAL:** District residents will consistently receive reliable, thorough, and <u>trauma-informed</u> service from a well-trained, well-resourced, and respectful staff.
- Where is LGBTQI?
 - VALUE: A Fair, Equitable Environment: We are an anti-racist organization committed to fostering an environment and practices
 that are transparent, fair, racially equitable and inclusive for all who enter our doors, no matter how difficult or uncomfortable
 it becomes.
- How do we incorporate providers into values & goals
 - VALUE: Quality of Collaborative Service
 - GOAL: Provide high quality DHS services to individuals, families, and youth using collaborative, person-centered, and forward-thinking processes
 - INITIATIVES

Next Steps

- DHS is in the process of taking each goal, mapping it to Homeward DC and other priorities, and developing specific initiatives for each
- All of the initiatives are in development now, but to share a few examples:
 - Building provider capacity
 - Identifying structural barriers to economic mobility and benefit cliffs
 - Connecting residents experiencing homelessness with employment opportunities
 - Identifying and implementing innovative solutions to ending homelessness



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PROGRAM GOALS

01

Recognize and leverage the expertise of individuals with lived experience to be compelling and impactful guides to the homeless services system of care.

02

Create long-term career pathways and financial stability for individuals with lived experience of homelessness

03

Create a new pipeline of quality case managers to serve our most vulnerable neighbors and allow our housing system to grow, with a particular focus on Permanent Supportive Housing Case Management.

**DRAFT ** Program Design

- 1. Eight weeks of classroom training
 - Weekdays from 9am-3pm (Total of 240 hours)
 - Lunch will be provided
 - Classroom breakdown
 - 6 weeks: Human Services/Case Management Skill Development
 - 1 week: Human Services/Case Management Role Play/PSH specific Skills
 - 1 week: Computer Training
- 2. Eighty (80) hours of practicum with a DHS PSH Provider

High Level Timeline

FY23 - Q1&2

Establish Working Group to Develop Program w ICH, UDC, DOES,
 & consultants

FY23 - Q3&4

- Hire Program Manager
- Develop &Implement MOA Agreements

FY24 – Q1&Q2

- Finalize curriculum
- Modify Contract Requirements/Incentives to Support Hiring graduates

FY24 - Q3&Q4

- Launch 1st Cohort
- Employment Support Follow Up

Our Request

- We would like to establish a working group to flesh out the program design and components.
- We are looking for
 - PSH providers (preferred who have hired peers)
 - Organizations that have hired peers
 - Individuals with Lived Experience
 - People with experience in curriculum design
- The Request:
 - Monthly Working Group Meetings
 - Review of Draft Documents in Advance (~1 hour in addition to mtg)
- If interested, reach out to Madeleine.Solan@dc.gov



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- WE ARE WASHINGTON

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ICH Team is Expanding



- ICH is now fully staffed with all 6 FTEs
- ICH Executive Director will be supported by
 - > 3 Special Advisors with population/topic area focus:
 - ✓ Emergency Response & Shelter Operations: Synina Pugh *NEW*
 - ✓ Family and Youth: Jorge Membreño *NEW*
 - ✓ Singles and Veterans: Eileen Rosa
 - Stakeholder Engagement and Comms Support
 - ✓ Director: Donna Harris *NEW*
 - ✓ Graphics Designer: Daisean Foster *NEW*





ICH Full Council Board Membership



MOTA review and submitting appointment legislation

Category	Nominees	
Provider Category (4 seats)	Kelly McShane, Community of Hope Amanda Chesney, Catholic Charities Jorge Membreno, SMYAL Kenyatta T. Brunson, N Street Village	
Advocate (2 seats)	Kate Coventry, DC Fiscal Policy Institute Karen Cunningham, Everyone Home DC	
Consumers with Lived Experience (3 Seats)	Reginald Black, PFFC Michael Coleman Qaadir El Amin, PFFC	
Private Sector (2 Seats)	Dr. Catherine Crosland, Unity Health Care Shellon Fraser, National Housing Trust (NTH)	







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HUD CoC NOFOs



Notice Type	Funding Amount Available	Allowable Projects	Application Status
CoC NOFO	 \$25 Million in Renewing Grants \$4 New Projects/Bonus Projects 	 Renewing existing HUD CoC and YHDP Grants Permanent Housing Bonus Domestic Violence Permanent Housing Bonus 	SUBMITTED TCP (Collaborative Applicant) submitted the full application package to HUD 9/27/22
Unsheltered Supplemental NOFO	14.6 million over 3 years	New projects specifically focused on ending unsheltered homelessness including Street Outreach projects (not otherwise funded under HUD CoC NOFO)	SUBMITTED TCP submitted the full application package to HUD 10/20/22







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