



# Continuum of Care Board Minutes

8/17/2023

11:00 AM - 1:00 PM

**Attendance:**

Board Members: Laura Golino de Lavato, Patrick Reynolds, Brandi Tuck, Drew Grabham, Mark Morford, Katie Cox, Jessica Harper, Xenia Gonzalez, Jamar Summerfield, Stuart Zeltzer, Cammisha Manley, Christina McGovney, Hannah Studer, Lizzie Cisneros, Skyler Brocker-Knapp, Ian Slingerland, Sherelle Jackson

[Absent – Elise Cordle Kennedy]

JOHS & County Staff: Alyssa Plessner, Malka Geffen

Agenda Item	Discussion Points	Decision/Action
Opening	<ul style="list-style-type: none"> <li>● Land &amp; Labor Acknowledgment</li> <li>● Review Community Agreements</li> <li>● Review Agenda</li> </ul> CoC Lead acknowledged CoC Board's one-year anniversary.	
Provider Presentation: Central City Concern	Sarah Holland shared a presentation about CCC's HUD-funded programs: Madrona Studios, Alcohol & Drug-free Housing, HOPE, and Sunrise Place.	
Annual Charter Renewal Vote	There were no changes to the charter, so the co-chair called for a fist-to-five vote to renew the charter. Fist-to-five: there were six 4s and nine 5s (and two abstentions), so the charter renewal was approved.	
Action Plan Working Groups - Lead/Co-Lead Updates	See presentation slide 9 of 8/17/23 presentation for general updates. <ul style="list-style-type: none"> <li>● Strategy 2.1 Lead is preparing a Doodle poll to schedule a meeting.</li> <li>● Strategy 3.1 Lead is working to schedule the group's first meeting and sent resources to members.</li> <li>● Strategy 1.2 Leads met and Doodled to schedule first meeting on Aug. 29 @ 5:30pm.</li> <li>● Strategy 1.1 Lead will talk with Patrick Wigmore in the first week of Sept.</li> <li>● Strategy 2.2 Lead met with CoC Lead and the Equity Advisory Committee staff and brainstormed about data collection on</li> </ul>	

	focused funds; the group will meet in Sept.	
HUD FY 23 CoC NOFO Follow Up	<p>CoC Lead went through the final funding information on slide 10 of 8/17/23 presentation and answered the following questions:</p> <ul style="list-style-type: none"> <li>● Expanded vs. New Projects viewed more favorably by HUD <ul style="list-style-type: none"> <li>- Neither is viewed more favorably and part of the same pool of money. HUD does not award more points for having more of one or the other. HUD does look favorably on reallocating funds/having a process to reallocate funds.</li> </ul> </li> <li>● How is the CoC Planning Grant utilized? <ul style="list-style-type: none"> <li>- The grant goes to JOHS as the designated collaborative applicant. Increased 3% to 5%, with \$1.5M cap. We have used the grant to pay for FTE on the planning &amp; evaluation team and data team and additional requirements (but does not fully cover FTE).</li> </ul> </li> <li>● Questions around unhoused trans violence and homeless definition <ul style="list-style-type: none"> <li>- Yes, VAWA leaves much interpretation up to the participant. If they are currently housed in a CoC-funded project and are experiencing such violence, they can request an emergency transfer and put at the top of the list for a new housing unit. If they're living in an unsafe situation that is not CoC-funded, they still fall under category 4 of HUD's definition: <ul style="list-style-type: none"> <li>(4) Any individual or family who: <ul style="list-style-type: none"> <li>(i) Is fleeing, or is attempting to flee, domestic violence, dating violence, sexual assault, stalking, or other dangerous or life-threatening conditions that relate to violence against the individual or a family member, including a child, that has either taken place within the individual's or family's primary nighttime residence or has made the individual or family afraid to return to their primary nighttime residence;</li> <li>(ii) Has no other residence; and</li> <li>(iii) Lacks the resources or support networks, e.g., family, friends, and faith-based or other social networks, to obtain other permanent housing.</li> </ul> </li> </ul> </li> </ul> </li> <li>● Is the change in our calculating of retention something that factors into system performance? <ul style="list-style-type: none"> <li>- Yes, part of HUD's system performance measure is (2) the extent to which persons who exit homelessness to permanent housing destinations return to homelessness. Since we are using retention as a measure, we are eligible for the three system performance points.</li> </ul> </li> </ul> <p>New questions/comments:</p> <ul style="list-style-type: none"> <li>● Does the County cover what the planning grant does not? No, it</li> </ul>	

	<p>does not.</p> <ul style="list-style-type: none"> <li>● When do we expect to hear decisions about new or expanded projects? Applicants will be notified of whether they've been selected and ranked by the CAC by Sept. 12. Funding decisions from HUD is anyone's best guess.</li> <li>● HUD funding is important, but the application process is convoluted and a lot of work.</li> </ul>	
<p>Joint Office Director Introduction + Q &amp; A</p>	<p>JOHS Director Dan Field introduced himself to the CoC Board, addressed some efforts taken to stabilize the department, and answered some questions:</p> <ul style="list-style-type: none"> <li>● Do you feel that the JOHS should hold contractors accountable to equity standards? Yes, and we're working on it. The County recently did an audit, and holding providers accountable for the development and maintenance of their equity plan was one of eight findings for our department.</li> <li>● How do you plan to balance the culture with the advocacy-minded staff and the tone you set? When I say we're not an advocacy organization, it doesn't mean we don't bring a strong mission and values to our work or that we won't focus on equity and addressing historic inequities in housing. The goal is to attract mission-driven people who want to work in a way that makes a difference and also remembering that nobody else is responsible for serving as the hub the community counts on, which is why I talk about excellence in procurement and excellence in contracting. Regrounding the staff in that work is part of why I'm here. <ul style="list-style-type: none"> <li>○ A board member said they appreciate that statement because they've been told by people within JOHS previously that they were not able to hold contractors accountable to equity standards.</li> </ul> </li> <li>● Can you tell us about your leadership style? Part of why I'm here to complete the journey of JOHS from an office to a department and build out the infrastructure. Part of that was hiring a talented new Finance leader, who came from the Health department and will create that structure that we need to effectively administer \$300M. The JOHS needs to be structurally sound, and it was a much smaller office, so my leadership style is very collaborative and delegative (if that's a word).</li> <li>● How do you see technology supporting that efficiency? We need to use technology in collaboration with our service providers.</li> <li>● What is the strategy you're thinking about in terms of how much resources we dedicate to housing, shelter, mass shelter, camping, etc. and how are you thinking about developing strategy over time? Part of why I'm here today is that I would like to hear how the CoC Board would like to be a part of that.</li> </ul>	

In addition to this group, we have oversight from Metro and City Council and the State. Within the JOHS, we have five advisory bodies. We have to make sense of the governance table. We'll be developing a comprehensive strategy this fall. As you are doing your work in the work groups, please think about this larger environment and our accountabilities and how you set the JOHS up for success.

- What are your thoughts on the connections between the health system and housing? How can we have a bigger impact on the health of the people we serve with housing? We've got to build relationships with our healthcare partners. With the 1115 waiver, we can really overcomplicate this. I get the idea of launching a pilot project and moving quickly, but there needs to be a long-term plan. So let's not make that mistake when we make huge expansions in our work and use Medicaid dollars to help house people in the short- and medium-term; let's make sure those of us at the housing table are constructive in partnering with them.
- In terms of moving away from direct service and advocacy, do you have a sense of how many of the 100 staff do direct service and what the impacts on them would be? I'm not planning on eliminating positions. Primarily, we provide funding and support to others to do that work, We will always have a supply center. But we're taking multiple funding sources, putting them together, and then distributing those in an integrated fashion, which is something no one else is doing and is the core of what we do, which we need to get right first. Our leadership focus needs to be on operational excellence.
- What are your ideas to help fix the relationships between the health system and people with lived experience, especially those who have used drugs? The healthcare community needs to do a better job of meeting people where they physically are. When I toured The Joyce yesterday I saw the little exam room and they're still trying to get that staffed with a Medicaid provider. It took some time to set up CCC at the TASS site for health services. We don't have a unified strategy of asking healthcare workers to show up and provide care onsite in a culturally respectful and responsive way. It's difficult, but if we can break down some barriers, push through administrative and financial silos, we can start a cross collaboration.
- Thanks and that's exactly right, Dan, and where providers like NWPP see the lack of broadly available health care services. We look forward to working with you to address this integration.