

Joint Office of Homeless Services Review Findings, Themes and Recommendations

September 22, 2023

- Refresh Project Scope
- Process Steps
- Findings, Themes and Recommendations
- Next Steps



PROJECT SCOPE

Discovery: Assessment and Evaluation of Barriers to the Effectiveness of JOHS and County Response to Homelessness

Through stakeholder interviews and documentation review, seek to identify challenges and barriers to effectiveness.

Development of Recommendations

Findings and insights from the discovery process will inform specific recommendations to address challenges and provide strategic, actionable plans for a successful path forward.

Assist in Implementation Plans and Execution of Future Work

Work with leadership to assist in developing implementation plans and execution.





Discussions with 40+ key decisions makers and stakeholders

- JOHS leaders, city and county commissioners, service providers, Metro, USICH and others
- James Schroeder, Managing Principal at HMA facilitated the interviews using a common set of questions

Foundational document review

- HMA reviewed foundational documents to supporting understanding in the areas of policies and procedures, internal workflows, provider contracts and requirements, application process, and organizational structure
- Documents were reviewed to identify gaps and to assess elements that contributed to barriers identified by stakeholders

Emerging practices scan

- HMA reviewed best practices across the US to support recommendations for the path forward

BUILDING ON AN EXISTING FOUNDATION-HIGH LEVEL THEMES

The work ahead will build on a strong existing foundation

- New county and JOHS leadership are hopeful and enthusiastic to learn from past mistakes, and are committed to change
- Appreciation for the commitment and expertise amongst the staff at the JOHS.
- All participants in this work have a strong commitment to doing what is necessary to better address homelessness in our community
- County and city leaders shared frustrations and concerns but also commented on how they know the city and county must come together on this work.
- Trust is low, but there was also affirmation of the continued commitment to being part of the solution.

DISCOVERY SUMMARY

Themes emerged from stakeholder discussions and the review of foundational documents.
Highlights are outlined on the following slides.

Thematic areas include:

- The Homelessness Response System
- Governance/Leadership
- Provider Payment/Provider Relations
- Housing and Other System Integration
- Communication
- Role, Function and Structure of JOHS
- Coordinated Access/Entry



THEME AREA: THE HOMELESSNESS RESPONSE SYSTEM

Leaders and stakeholders in Portland/Multnomah County lack a shared view of the Homelessness Response System

Highlights

Lack of alignment among elected leaders, county leaders, providers and service and housing providers regarding the appropriate components of the homelessness response system

- Lack of a clear set of **strategies, vision and measurable outcomes**
 - Philosophical **differences and debate** with regards to model and approach
 - **Siloed investments** which often leads to less desired outcomes
 - **Funding** often drives investment, versus a strategy or plan
- **Gaps** were identified in the following areas:
 - Shelter strategy
 - Coordinated BH/SUD supports in housing
 - Medically fragile/medical respite
 - Long term rental assistance

Lack of a cohesive, effective governance of the Homelessness Response System

Highlights

- **Leadership barriers** between city and county
- JOHS staff is **not responsive** to elected representatives in both county and city
- New county chair **will need to work collaboratively** with all county and city commissioners
- JOHS has **unclear structure** for effective strategic decision making and inputs/feedback
- 'Home for Everyone Board' not considered effective, but **a structure to support governance and cohesive leadership** was needed
- Unclear pathway to **utilize/leverage the 11 committee inputs**
- Intergovernmental Agreement (IGA) is **outdated and needs updating**
- **Lack of clarity** for Metro's role and influence

THEME AREA: PROVIDER PAYMENTS

Funding policies and procedures create barriers to provider operations, performance and financial health

Highlights

•Highlights:

- Invoice challenges result in delayed payments to providers. Budget and invoice documents and processes are confusing; invoicing is inefficient and complicated, payment is not timely, sometimes due to minute details.
- Rates no longer cover the true cost of providing services. Rapidly increasing staff and service costs have outpaced the COLA increases.
- Policy caps on contract overhead, salary, and manager/staff ratios diminish provider capacity and organizations' ability to hire/retain
- The JOHS historically does not fully fund programs
- Goal of leveraging outside resources
- Providers must pursue other funds which can delay services
- Significant challenges for organizations where only some of their positions are funded by JOHS-COLA increases

*****Providers are struggling with property insurance rates and renewals**

THEME AREA: PROVIDER RELATIONS

Interviews identified an opportunity for the JOHS to build on their existing role/relationship with service providers

Highlights

- Providers see an **opportunity for the JOHS** to play a much different and significant role in the county:
 - Convener for housing providers to discuss community gaps, solutions, emerging practices, etc.
 - Share best practices
 - Facilitate community strategies and solutions discussions
 - Unifier of housing providers
- NOFO process is not well communicated; there is a lack of transparency in criteria for selection and often the priorities don't match the needs the providers are seeing on the ground

THEME AREA: SYSTEM INTEGRATION

Uncoordinated systems provide fragmented care for shared clients, leading to returns to homelessness and poor outcomes

Highlights

- Housing and BH **remain siloed** within the county and community
- Housing and healthcare **are not well integrated**
- **Lack of understanding** of the new Medicaid benefit within the JOHS and its role in the payment continuum
- Other systems are critical/need to be involved in homelessness response system discussions:
 - Education
 - DMV
 - Food providers
 - Justice/Police
 - Others

Communication issues were a universal concern among interview participants

Highlights

- Inadequate communication has led stakeholders to experience a **lack of transparency**
- Communication is **often reactive**
- **Lack of timely** communication with stakeholders and sometimes finding out news through the media
- **Strategies, priorities and progress** are not well communicated
- Need for **transparent** and **timely** communication
- Providers expressed concern that funding, new requirements, and new strategies are not always discussed prior to implementation
- Communication is uneven across providers, elected representatives and within the JOHS
- Interviewees were often not aware of work underway at the JOHS, highlighting an opportunity to be more transparent

THEME AREA: ORGANIZATIONAL STRUCTURE OF THE JOHS

Rapid growth and change have created structural challenges and the need for realignment

Highlights

- **Lack of role clarity, decision-making** and organizational structure within the JOHS
- Unclear **decision-making authority and processes** often leads to lack of action
- Communication is often **reactive or without enough context**
- Delays and lack of response in requests from elected officials and providers creates internal frustration
- Lack of **defined process and communication** for strategies, priorities and progress
- **Lack of transparency** regarding use and sharing of data
- **Lack of standardization/process** with data requirements confusing and inefficient
- **Lack of structure** for ensuring effective accountability, performance and quality

THEME AREA: COORDINATED ACCESS/ENTRY

Coordinated Access falls short of numerous policy and operational objectives, leading to negative outcomes at the client and system levels

Highlights

- The Coordinated Access tool is ineffective in providing a timely response to needs and is being used more broadly than required.
 - Note: required by HUD COC and developed under extreme resource scarcity/different circumstances*
- Tool does not:
 - Accurately reflect need with regards to racial and ethnic communities
 - Recognize some resources as short term, lowering an individual's score and making them ineligible for services
 - Adequately capture BH needs which leads to individuals being untreated
- Because of the focus on vulnerability, the tool selects the highest acuity clients for programs often ill equipped to support them
- The tool determines who is housed, rather than supporting a wider housing philosophy; a review for equity is required due to the profile of clients being housed

QUESTIONS

ACTION PLAN

THEME AREA: THE HOMELESSNESS RESPONSE SYSTEM-LONGER TERM ACTION

ACTION	Immediate Next Steps	Timing
Align around the key components of the homelessness response system in Multnomah County	<ul style="list-style-type: none"> ▪ "Map" components of the homeless services continuum, which includes outreach, prevention, housing, and more ▪ Cross reference "system design" or "mapping" initiatives in other jurisdictions (e.g., San Francisco) ▪ Facilitate a limited meeting series to align on components as well as big-picture priorities ▪ Build on stakeholder input collected and best practices/lessons learned in peer communities 	<ul style="list-style-type: none"> ▪ Immediately-complete within 60-90 days
Identify gaps	<ul style="list-style-type: none"> ▪ Perform an inventory and gap analysis of existing services and other resources; identify populations not well served and programs needed ▪ Leverage and build on community needs identified through HMA stakeholder interviews (e.g., gap in services for medically fragile and patient discharge) ▪ Borrow gap analysis methodology from peer communities 	<ul style="list-style-type: none"> ▪ Immediately-complete within 90-120 days

THEME AREA: THE HOMELESSNESS RESPONSE SYSTEM (CONTINUED)

ACTION	Next Steps	Timing
Address specific system gaps with new/expanded interventions	<ul style="list-style-type: none"> ▪ Engage in planning sessions to develop strategies, priorities, and plans for addressing the needs and gaps (e.g., medical respite) ▪ Through the planning process, develop an implementation plan including clearly defined, measurable outcome goals 	<ul style="list-style-type: none"> ▪ Immediately-complete within 90-120 days
Identify key needed partners and develop or improve on existing partnerships	<ul style="list-style-type: none"> ▪ Build on the current conversations with Health Share/Medicaid; start to incorporate health systems ▪ Utilize the suggested Immediate action of developing a strategy to address the needs of medically fragile ▪ Incorporate other systems as identified 	<ul style="list-style-type: none"> ▪ Ongoing ▪ Ongoing ▪ Ongoing

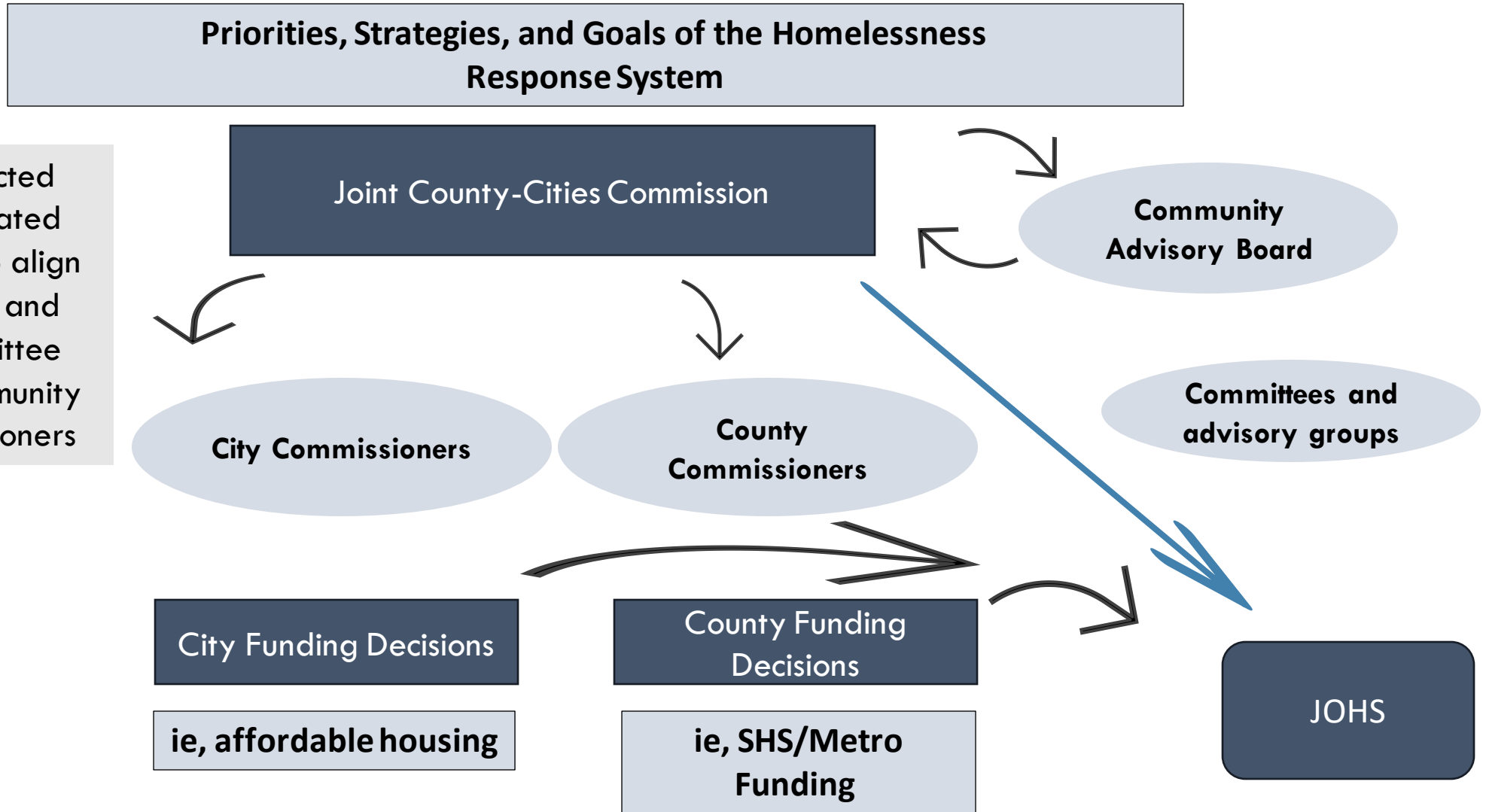
IMMEDIATE NEXT STEPS-HOMELESSNESS RESPONSE SYSTEM-SHORTER TERM ACTION

Immediate Next Steps	Timing
<p>Develop and execute on a community wide shelter strategy</p> <ul style="list-style-type: none">▪ Define the community need and current assets▪ Define pathways to housing and overall model of care for individuals and families who enter the homelessness response system through shelter▪ Strategize around identified needs/gaps in the current system▪ Define roles and identify funding that is consistent with the strategies outlined▪ Align funding▪ Implement	Immediately- complete within 60 days
<p>Develop and execute on a community wide assessment and strategy for addressing medically fragile-including those transitioning from inpatient BH and SUD</p> <ul style="list-style-type: none">▪ See steps above	Immediately- complete within 60 days

THEME AREA: GOVERNANCE OF THE HOMELESSNESS RESPONSE SYSTEM

ACTION	Next Steps	Timing
<p>Reshape the relationship between the city and county through a new governance model of the homelessness response system</p>	<ul style="list-style-type: none"> ▪ Conduct a joint meeting of city and county elected representatives to share and discuss these findings and recommendations ▪ Formally propose a new governance structure through the current IGA discussions and agree to a new structure for Governance. ▪ Differentiate governance over the homelessness response system and leadership over the JOHS ▪ Clearly identify the JOHS as an SME/Partner for both the city and county 	<ul style="list-style-type: none"> ▪ 9/22/2023 ▪ Immediately-Complete on IGA w/i IGA timeline ▪ Immediately ▪ Immediately
<p>Create a community advisory structure that creates clear channels for providing feedback</p> <ul style="list-style-type: none"> ▪ Coordinates existing advisory committees; may consolidate or add new bodies ▪ Defines respective scopes and responsibilities 	<ul style="list-style-type: none"> ▪ Gather feedback on the prior Home for Everyone Board; what aspects should be leveraged, what components were ineffective ▪ Create a replacement for the "Home for Everyone Board" that enables: <ul style="list-style-type: none"> ▪ Input and feedback to city and county Leaders as they determine strategy, policy and funding for the homelessness response system ▪ Effective structure for other advisory committees/bodies to share and provide feedback ▪ Consider key partners in the replacement Home for Everyone Board composition 	<ul style="list-style-type: none"> ▪ Immediately-complete w/i 90 days ▪ Immediately-complete within 90-120 days

THEME AREA: GOVERNANCE OF THE HOMELESSNESS RESPONSE SYSTEM (CONTINUED)



County and cities elected leaders form a dedicated oversight commission to align on strategic priorities and outcome goals; committee structure channels community input to Joint Commissioners

The JOHS serves as a strategic advisor to the Community Board, Joint Commission and City and County Commissioners.

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THEME AREAS: LEADERSHIP OF THE JOHS

JOHS Management

As a county department, the JOHS' operations are managed by county leaders. Priorities and goals determined by the Joint Commission inform JOHS priorities and strategies. Funding priorities are based on the strategies and priorities and any specific requirements tied to the funding source.

County Leadership



JOHS

In accord with priorities, strategies and measurable outcome goals, the JOHS manages contracts, oversees delivery, supports leadership decision-making, convenes and collaborates with system partners, and disseminates best practices

THEME AREA: PROVIDER PAYMENT

ACTION	Next Steps	Timing
Revamp the invoice and payment processes (currently underway)	<ul style="list-style-type: none"> ▪ Continue current work to improve processes ▪ Ensure the work includes assessing how "rigid" the review of invoices needs to be ▪ Leadership must ensure the new invoice and processes are working after new processes are in place (long term) 	<ul style="list-style-type: none"> ▪ Ongoing- complete within 30 days
Assess the existing contracting process	<ul style="list-style-type: none"> ▪ Conduct a process improvement review of contracting to eliminate inconsistencies in contract payment rates across providers 	<ul style="list-style-type: none"> ▪ Immediately- complete within 90 days
Develop a more inclusive process for determining funding priorities prior to releasing funding announcements	<ul style="list-style-type: none"> ▪ Review and adopt “pre-funding best practices” regarding timeline, communication, award criteria and other elements from peer agencies or other industry leaders ▪ Establish a more inclusive process for development of award selection criteria 	<ul style="list-style-type: none"> ▪ Immediately- Complete within 90-120 days

THEME AREA: PROVIDER PAYMENT-NEXT 60 DAYS

ACTION	Immediate Next Steps	Timing
Rebase rates for services	<ul style="list-style-type: none"> ▪ Utilize the process recently done to rebase behavioral health rates as a template for rebasing service rates ▪ Determine what the increases would cost annually and determine viability ▪ Adjust contracts equitably to account for the new service payment rates 	<ul style="list-style-type: none"> ▪ Immediately- complete within 90-120 days
Comprehensive review and redesign of funding policies and processes	<ul style="list-style-type: none"> ▪ Inventory rates across all contracts and identify differences ▪ Re-evaluate the current policy of "partial funding" of services ▪ Re-evaluate caps – indirect cap, ratio of managers/staff, COLA cap ▪ Work on developing payment models that are not exclusively fee for service (learn from healthcare and Medicaid) 	<ul style="list-style-type: none"> ▪ Immediately- complete within 30 days ▪ Immediately- complete within 60 days ▪ Immediately- complete within 90-120 days ▪ Immediately- complete within 90-120 days

THEME AREA: PROVIDER RELATIONS

Action	Next Steps	Timing
<p>Interview participants shared a vision of the JOHS taking a more strategic leadership role as a strategic leader/thought partner with community service providers.</p> <p>Additionally, they also shared a desire for the JOHS to serve as a convener of the services providers to share emerging practices, common themes and a forum to work collaboratively on priorities and funding opportunities.</p>	<ul style="list-style-type: none"> ▪ Determine a time/date and forum for sharing the findings and recommendations from this work ▪ Evaluate existing meetings between the JOHS and the service providers to identify opportunities for broadening/restructuring participation and redefining the goals and outcomes of those meetings ▪ Create a collaborative structure for engaging with providers that provides a forum for providers to share emerging practices, challenges and opportunities ▪ Ensure service providers are well represented in the suggested governance models and changes through this work 	<ul style="list-style-type: none"> ▪ Immediately ▪ Immediately-complete within 60 days ▪ Immediately-complete within 60 days ▪ Ongoing

THEME AREA: HOUSING AND OTHER SYSTEM INTEGRATION

High Level Recommendations	Next Steps	Timing
<p>Identify and develop/further develop key relationships and integration with other key partners and systems.</p> <p>As the homelessness response system of care is defined, key partners must be identified and included in the work.</p>	<p>Within the county:</p> <ul style="list-style-type: none"> ▪ Start by developing better integration between the JOHS and Behavioral Health, as well as other county offices and programs: behavioral health, justice, others <p>With healthcare systems:</p> <ul style="list-style-type: none"> ▪ Adopt emerging best practices around medically fragile ▪ Build out more medical respite capacity in collaboration with health system ▪ Develop housing plans for those transitioning out of inpatient BH/SUD, hospitals <p>With Medicaid:</p> <ul style="list-style-type: none"> ▪ Further develop the relationships and integration with Medicaid/health systems and other key partners (long term) ▪ Clearly identify where the Medicaid benefit fits in the funding of the homeless response system <p>With others....</p>	<ul style="list-style-type: none"> ▪ Immediately ▪ Part of the work recommended earlier; complete within 30-60 days ▪ Ongoing-immediately

THEME AREA: COMMUNICATION

High Level Recommendations	Next Steps	Timing
<p>Develop a proactive and responsive communication strategy</p>	<ul style="list-style-type: none"> ▪ If not already established, develop/refine a communications strategic plan that prioritizes timely and informative communications processes and management 	<ul style="list-style-type: none"> ▪ Immediately-complete within 30 days
<p>Establish effective, timely processes that are sharing clear strategies, priorities and the measurable progress towards achieving key outcomes</p>	<ul style="list-style-type: none"> ▪ Ensure that a communications policy/protocol includes: <ul style="list-style-type: none"> ▪ The process for interfacing with providers, elected representatives, and the public ▪ Proactive communication within the JOHS ▪ Timeframe expectations/requirements for responding to requests from elected representatives, the public, and other stakeholders ▪ Established processes for outcome measure reporting ▪ Provide requirements/context for data shared externally (e.g., data within context, rather than raw numbers) 	<ul style="list-style-type: none"> ▪ Immediately-complete within 30 days
	<ul style="list-style-type: none"> ▪ Data sharing ▪ Incorporate best practices and improvements on current processes 	<ul style="list-style-type: none"> ▪ Immediately-complete with 30 days

THEME AREA: ROLE, FUNCTION, STRUCTURE OF JOHS

High Level Recommendations	Next Steps	Timing
Lack of role clarity	<ul style="list-style-type: none"> ▪ Clarify and document decision-making roles and levels of authority ▪ Evaluate organizational structure and roles after the housing response system of care and governance have been updated 	<ul style="list-style-type: none"> ▪ Ongoing- complete within 30 days ▪ Complete after the Homelessness Response System work
Provider performance and accountability	<ul style="list-style-type: none"> ▪ Define and implement consistent service standards in provider contracts; establish a clear and rigorous monitoring program 	<ul style="list-style-type: none"> ▪ Need to complete some of the other strategic work prior, which will inform this. ▪ Incorporate in the immediate gap work.
Communications capabilities	<ul style="list-style-type: none"> ▪ See previous slide 	<ul style="list-style-type: none"> ▪ Immediately
Develop a system data blueprint	<ul style="list-style-type: none"> ▪ Review systems and collect requirements and workflows related to data across stakeholders and contractors ▪ Create streamlined processes needed to meet requirements and coordinate care while optimizing quality and completeness 	<ul style="list-style-type: none"> ▪ Immediately- complete within 60-90 days

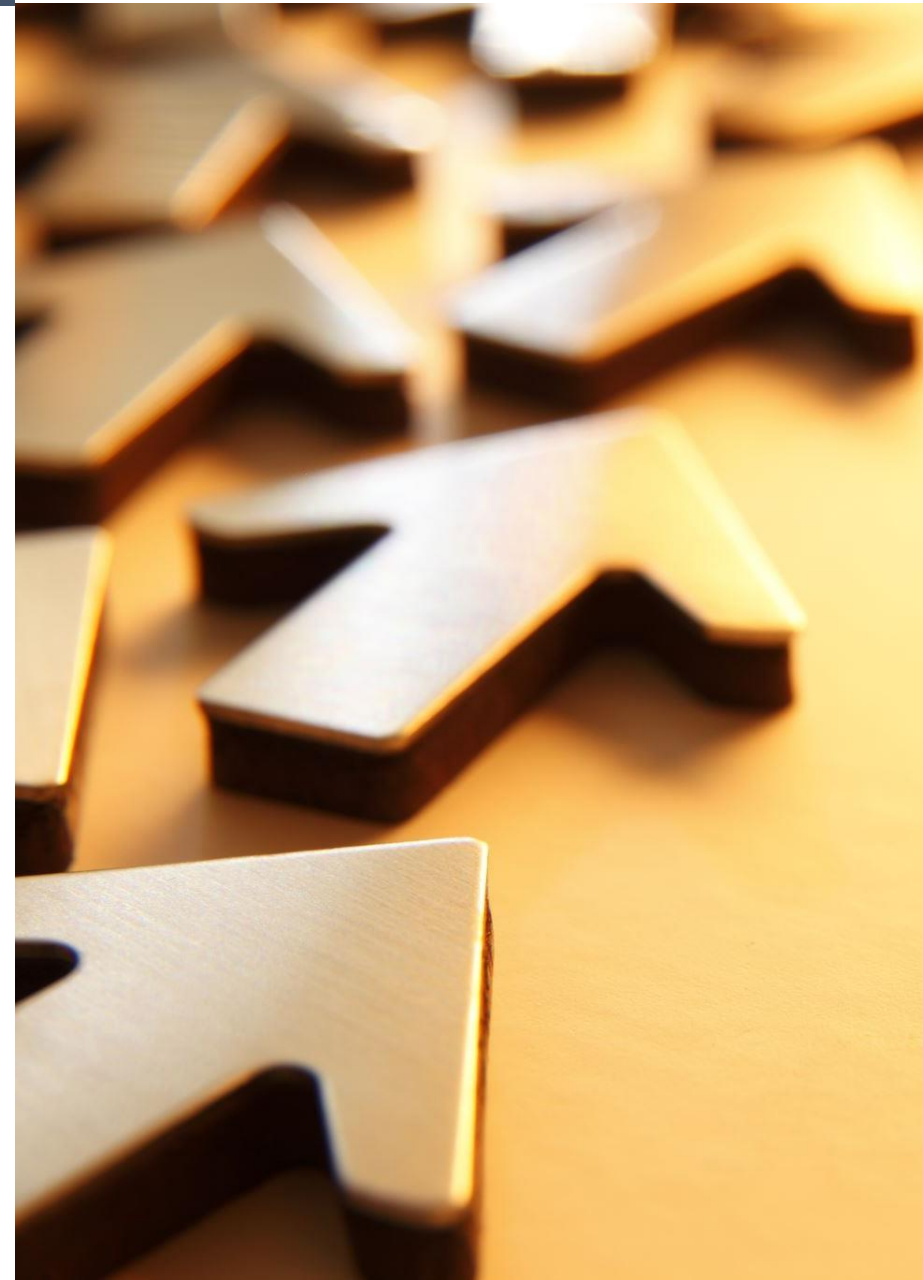
THEME AREA: COORDINATED ACCESS/ENTRY

High Level Recommendations	Next Steps	Timing
<p>Update the policies around the use of Coordinated Access</p>	<ul style="list-style-type: none"> ▪ Determine where and how Coordinated Entry/Access is being utilized ▪ Assess when it is required and when there is flexibility ▪ Review existing policies and procedures to transform the tool so it can capture broader client needs to better support the whole person ▪ Create a more agile assessment that allows other inputs, including case review from a clinician/provider ▪ Avoid requiring that clients regress before receiving additional support ▪ Capitalize on the current processes to revise the tool and take the opportunity to adjust the tool to perform a broader more inclusive assessment that better meets the needs of individuals and our communities 	<ul style="list-style-type: none"> ▪ Immediately- complete within 30 days ▪ Immediately ▪ Immediately- complete within 60 days ▪ Immediately- incorporate into program within 90-120 days ▪ Immediately- incorporate into programs within 90-120 days ▪ Immediately
<p>Further evaluate Coordinated Entry beyond assessment</p>	<ul style="list-style-type: none"> ▪ Further evaluation of the coordinated entry processes beyond the tool would be valuable and likely identify other opportunities for improvement 	<ul style="list-style-type: none"> ▪ Immediately- complete within 90 days

NEXT STEPS: THE PATH FORWARD

Next Steps

- Individual follow up by James/HMA with each City and County commissioner to hear feedback and suggestions on Governance in particular
- Share findings and recommendations with East County cities
- Share findings and recommendations with sub-committee on housing of the Governor's Portland's Central Task Force
- Share findings and recommendations with service providers
- Share findings with the JOHS staff



QUESTIONS