Community Action Pioneer Valley’s Three County CoC

***Special Board Meeting, Project Narrative Presentations Minutes***

2pm**, Thursday, August 6th, 2020. This meeting was held on zoom.**

**Attendees:** Theresa Nicholson, CHD; Phil Ringwood, DIAL./SELF; Pamela Schwartz, WMNEH:; Brad Gordon, BCRHA: Kasey Erickson, DCF; Jane Ralph, Construct; Deb McPartland, Way Finders; MJ Adams, City of Greenfield; Michele LaFleur, Three County CoC; Betsy Shally-Jensen, A Positive Place; Shaundell Diaz, Stavros; Cynthia Ray, MassHire; Mike Hagmaier, Soldier On; Heather Marshall, Elizabeth Freeman Center; Kathy Keeser, Louison House; Rebecca Muller, Community member; Amanda Bubon, Way Finders; Stacy Parsons, North Berkshire School Housing Partnership/DESE McKinney Vento Regional Liaison; Dave Christopolis, Hilltown CDC; Kim Scammon, Greenfield Housing Authority; Andy Klatka, Eliot CHS; Rivers, YAB; D Scott; Sara Cummings; Community Action; Michele LaFleur, Community Action; Keleigh Pereira, Community Action, Brooke Murphy, Community Action

**Minutes:**

1. **Board Updates**

**Approval of Minutes from June** *Minutes approved – MJ Adams motion, heresa Nickolson second*

**Updated Board Slate – Co-chair slot filled, Theresa Nicholson**.

*Theresa becoming co-chair. Motion to accept nomination:*

* *MJ Adams motioned*
* *Second Phil Ringwood*
* *No discussion*

Membership Term End **2020** – Members must contact Keleigh and Brad by August 15th, if possible, will be on the slate for the Annual meeting in September. No contact is an assumption that they will remain on the board. Recommended that Board members consider diversifying the board.

*Note*: Deb, Wayfinders will be stepping down and Melphy Antunes will be taking her place. Keleigh will reach out. *List of expiring two-year terms:*

* *Heather Marshall*
* *Rivers*
* *Mike Hagmaier*
* *Betsy Shally-Jensen*
* *Kathy Keeser*
* *Jay Sachetti*

1. **Project Ranking and Evaluation**

**Brief Report of the Ranking Structure for 2020 Project Ranking,**

**Project Narrative/Presentation Points, next steps after this meeting**

*Keleigh Intro:*

* Not going to go through every single part of ranking- did send list in email describing how projects were ranked this year. Will address some
* Really appreciative of all the project’s participation in site monitoring this year, especially with how COVID made monitoring difficult this year
* Followed process that Hilltown used this year- same tool, process based on what Hilltown did last year
* CoC staff plan to conduct survey about project’s experiences with monitoring this fall to make changes for monitoring and ranking for next year. Want all projects to have a voice in what we do.
* Ranking least favorite part of what we do… unfortunate that some project has to be last and we recognize that this is just a snapshot and not fully demonstrative of the work that folks are doing. Projects are doing amazing work.

*Michele - APR Discussion*

* DHCH identified that the APR report in ETO has errors- which is what we use to determine how projects are using-
* Errors impacted some project measures that we evaluation
  + PIT Count doesn’t correctly tell number of people there
  + Income performance measures on whether or not certain # of people increased earned/non-earned income… this was very unreliable so we gave everyone full points for project stayers
  + # of adult stayers HH
  + # of clients missing annual assessment and social security numbers
* ETO is working on these but we don’t know when they’ll be fixed
* some projects have APRs due in Sept and the COC will be requesting extension if errors not fixed by early September
* For ranking, it was mostly the income performance measure that was an issue
* Co-morbidity, should only be look at adults not whole households but we had looked at whole household so you may see an increase in score

*Projects with capacity issues re entering data*

* Some smaller programs had issues completing data – in some cases could be errors
* Reaching out to technical assistance regarding smaller projects that have capacity issues with entering data

*Keleigh- General Points*

* Used HUD’s tool and adjusted based on local decisions made previously to Community Action coming in
* Inherited tool and chose to follow for this year but this may change once NOFA is released
* We do this as part of the annual funding competition, we are required to rank our projects
* Each year when NOFA is released, may need to make adjustments in ranking
* NOFA release will provide info regarding total funding amount, so tiers are not present here
* Tier 2 folks might be at risk of losing funding
* Ranking is important to projects, so CoC staff recognize that when put at bottom that can feel threatening and we will advocate for those project’s needs

*Other points*

* Reasonable costs- all given full points because calculation isn’t comparable across the board next year will determine formula
* Geographic Coverage- In past, CoC gave points for this. This year, we gave all projects 10 points because we could see value of all projects uniquely serving people in community.
* Participation and Leadership- all projects given 2.5 points for committees and participation but there are 5 additional points to get for chairing a committee. If anyone is interested in getting those points next year, talk to us about chairing a committee.
* For new projects, bed utilization was ranked at 50% instead of 80% since projects were new

*Ranking*

* *HMIS and CE at top based on Three County CoC process, COC cannot perform effectively without these grants.*
* LH PSH has moved from 6, to the top of the group at #3. A Postitive Place also had a big jump in placement from last year at CHD and Dialself’s ranking last year had them placed at the top last year because they were new and therefore not ranked at all.

*Questions*

* At what point does CoC decide to push back against some of the criteria required by HUD? For example, income when expectation can’t be that all program participants work
  + Increase in income is a HUD value. Goal is that if there is increased income they may be able to live on own. this CoC decided at some point was to have the measure be lower. Need to be concerned with competitiveness as a CoC. Find a balance between expectations and competitiveness

1. **Project Presentations, 5 minutes each *(See also project presentation narratives)***

(60) – *Can provide projects with 5 additional points for participation, Board can provide project with additional points if feel changes needed to ranking and points*

*5 discretionary points – Suggestion is at end of meeting we come up with time to come back for brief half hour if any points that need to be considered*

**Hilltown CDC – Village Center Apartments**

Presenters: Dave Christopolis

Notes:

* Have 5 unit PSH program
* Created 6 years ago. At the time created, push to house veterans and there was large number of veterans and VA. Some units dedicated to veterans and some units subsidized with VASH
* Through DHCD some units subsidized through Section 8
* Uses local subsidies to cover the rent and not charge rent to CoC
* Have housed a few families and veterans
* Have had only a few turnovers over time period- partially due to location. Have had full occupancy throughout the time period
* Even when Hilltown was running CoC, project ranked low

Issues with points:

* Each year, same issues come up in terms of how projects get scored
* Some structural problems with the way we have done in the past that put smaller projects at a disadvantage and not sure how we can make that work better

Other Notes:

* Project spent better part of last year transitioning work over to CAPV and didn’t have as much capacity to focus on the project. Heavy lift to make transition
* Staff turnover prior to COVID so unable to hire until about a month ago
* Just about caught up by end of August with billing, paperwork, and client files
* Some of score may be due to transition and capacity
* Feel better about now being able to operate program since transitioned out and staffed

Questions?

* N/A

**Louison House - TH**

Presenter: Kathy Keeser

Notes:

* Background
  + LH started with community efforts around homelessness, TH was very much shelter in early days. Funding started in 90s
  + TH is oldest project
  + 4 years ago had a fire and have spent almost 4 years in another building
  + Moved back to building in middle of COVID
* Because budget is so old, HUD’s money is paying less than 40%
* Have ability to house up to 22 people in the building
* This year with COVID might be a little different

Issues with Points:

* Lost a lot of points about moving to PSH but had a lot of people who moved.
* Issue with ranking. Question the moving to PSH and the comorbidity performance measures.
* Know HUD does not like TH but very important to community and area. Many people do not want to go to other areas for shelter

Comments:

* Michele will address comorbidity with all
* Michele - Exits showing up as issue because of missing exit assessments.
* Keleigh- we are trying to get more info from DHCD since our COC staff do not have access
* COC planning to hire supports for projects data quality needs

Questions:

* Really easy to go in and tabulate small program data elements by hand. As decision makers and rankers we could have that info. Fixing in ETO is separate programs. Challenge to all of us as continuum because if it doesn’t show up in data system, as if doesn’t exist.

**Louison House – PSH – Northern Berkshire**

Presenter: Kathy Keeser

Background Notes:

* PSH started in 2009, started housing in 2010 with 3 units
* Started with 3 individuals, now have 9 units
* All in community, all individual units no shared units
* Found even though units more cost effective, took more time to mediate people living together
* All at FMR or close to it

Issues with Points

* The comorbidities points should be different because knew had over 50% but got no points because kids are included in that

**Cooley - A Positive Place**

Presenter: Betsy Shally-Jensen

Notes:

* Dedicating whatever have to say to program participant who passed away on Sunday. First person who was called, went, and called family was housing advocate. Person was very sick, as many of our tenants are.
  + HIV/AIDS Services and prevention program for four counties
  + Think of how can we expect someone to have an income
* Housing component is one piece, but it’s about services
* Serve Franklin, Hampshire, and Hamden, and parts of Berkshire County
* Community-based and have historical connection to Cooley Dickinson
* First began hospice
* In that way, we are connected to the healthcare system. Community healthcare workers who are connection to community care. Social determinants of health, Food access, employment, transportation, community support
* 40% of health status results of social determinants of health
* Without housing, can’t focus on healthcare
* With PSH, currently have 14 units which was an increase this year from 11
* During COVID, able to house chronically homeless HIV+ person
* Currently house, case management, recovery coaching, connection with clinical care, team up with infectious disease providers, support number of ways
* 7 chronically homeless Latinx households, 3 Latinx households, 3 Black households, ((??XX) of LGBTQ households
* More than half are active substance users- some go back to jail but we hold units for them
* Some have SORIs
* Have senior housing specialist who is a Latinx community health care worker, culturally rooted in community from which she comes
* Rest of HIV/AIDs team: recovery coach, social case manager, peer advocates, and others
* Practice Housing First and Housing Always
* Something new trying to do (other than racial equity lens) is not terminating people. Anytime we feel like we need to, we have to start with we are not going to

Issue with Points:

* Not much turnover
* Issue with way income is given points since many tenants cannot be expected to have income

**Service Net – Shelter Plus Care**

Presenter: Brooke presenting on behalf of Dan Bussler

Notes: (read project narrative submission)

**Wayfinders – Paradise Pond**

Presenter: Amanda Bubon & D Scott

Notes:

* PSH program to help meet need of chronically homeless families with children
* Has 12 apartments in total, 4 are designated for chronically homeless (CoC Funded units)
* Many families have experienced DV
* Recognize need to have supportive services in place to help families move on from programs
* Program refers clients to SerivceNet but do not assess or work with participant to serve goals
* Area going to be working on in upcoming year as bring new position on
* Use CoC grants to help cover costs of operating for 4 PSH units
  + Utilities, insurance, other
* No overlapping subsidies
* Collecting approx. $1,000 on all units
* In terms of performance goals:
  + Has met all goals
  + All current residents remain in program, no leavers from program
  + Program deemed to be reasonable in costs
  + Clients have all files
  + Financial practices certified by CA
* Participants not required to participate in services, which needs to change
* Serve one of priority populations, chronically homeless families
* Deb has been on the board for several years and have Ranking Evaluation
* Way Finders, would like to offer Deb’s Board seat to Melphy Antuna
* Not participated in CE process to date, as have not have any unit vacancies
* Participants have been in several years, some from when program started 13 years ago
* Successfully housed for over 3 years without turn overs in community with great schools
* Biggest challenge is costs of operations for property
* Rent is capped at 30% of income
* Averages out to $250 unit per month gap
* CoC grant essential to bridge the gap

**Construct – TH – Adult Independent Living**

Presenter: Jane Ralph

Notes:

* Appreciate what others have said about smaller programs and data quality
* Challenging to be one of only TH in the community- many folks in the community consider it a shelter
* Difficult to balance community expectations, our own, and HUD’s
* Looking at expanding staff hours to meet expectations more effectively
* Have 10 bedrooms for people of all genders
* Had death in TH recently

Issues with Points

* Missing data for PSH exits: 5 exited to PSH, 6 did not, 3 went on to institutionalization

**Construct – PSH – Project Reach**

Presenter: Jane Ralph

Notes:

* Being one of smaller programs makes it challenging
* 3 PSH beds for individuals of all genders
* Even though goal is that people are able to move on, considers it have been full for whole year because had been challenge prior
* Just found out one of the program participants is ready to move on
* Wonder if we need to have conversation if being a funded partner makes sense so that not being a square peg in a round hole
* Recently hired development director so may reassess how utilize funding

Issues with Points

* Did fill opening with CE but didn’t get points

Questions/Comments:

* Suggestion for CoC to work with other CoCs to discuss how we can keep smaller projects in Continuum

**Dialself Y&C Svs – Joint TH RRH/PSH**

Presenter: Phil Ringwood

Notes:

* Serve YYA 18-24
* Participates in CE, kind of using own list
* Have State (DHCD, EOHHS), federal (HUD, RHY), local
* Geographic area, have programing in Franklin, Hampshire, North Quabbin, and some technical support in Berkshire, Americorp program goes to Hampden County
* 10 bed PSH, TH-RRH
* Have housing support, drop in centers, outreach work
* TH component is run in conjunction with EOHHS TH program
* Primary site for PSH-RRH is utilizing efficiency apartments located primarily in Orange that have combo of MRVP and Section 8 subsidies
* Program funding from CoC is almost exclusively supportive services
* Housing subsidies are from MRVP and Section 8
* Participants have choice to use community-based housing but haven’t seen that yet, right now using housing we already have in program
* Overall, Housing First program but because vouchers are tied to the unit, there are barriers to Housing First approach since need to get through Section 8 and MRVP regulations
* Not focused on chronic homeless, certainly a factor and will adjust someone’s CE score but doesn’t really fit YYA population working with
* TH program, no rent at all- provide living stipends

Issues with Points:

* Don’t have problem, as new program and will work with CoC to address issues

Comments:

* CoC staff found that HUD developed new tool that included Joint Component program, which CoC needed to use for this project’s ranking. We learned there are aspects to newer tool that will be helpful to us next year

**CHD – Three County PSH**

Presenter: Theresa Nicholson

Notes:

* PSH program
* Working with ServiceNet as landlord in Hampshire and Berkshire County
  + Folks we brought on from previous program
* Needed additional units for rest of program
* Been very busy year
* Have 3 full time case managers and supervisor who assist
* Have several shared apartments in portfolio- so do a lot of work around roommate mediation
* Before coming to CoC, have not worked with individuals in PSH before. Had PSH for families so this was new venture for staff
* Really embraced opportunity, embraced challenges
* Had some construction challenges- Had number of units with local landlord in Franklin County to renovated. Very nice units..
* Took 6-7 months to get all units on board
* Have seen some struggles with folks who initially came in- being able to establish tenancy and adhere to rules to guidelines in the lease
* Have had a few folks who needed to move on, were able to transfer folks and move to others
* Model is true PSH funded by HUD, provide folks with as much service as they want- employment, additional resources, a lot of time during COVID bringing people additional food, a lot of folks been compromised medically,
* Really great team in all 3 of regions
* Looking forward to have some settling

1. **Annual Meeting Date and Agenda Planning**

**Date, Registration planning and invites.**

scheduled for 9.29 from 2-4pm, on zoom.

\* invitation and registration link will be sent to the CoC membership, zoom link will follow a week prior to the date, along with the charters, board slate, final YHDP CCP and a draft racial equity action plan for Three County.

\* Agenda – Membership vote on governance charters/board slate, maybe a brief presentation on addressing homelessness in COVID, presentation on racial equity action plan and data, presentation on the CE system and upcoming training series, 2020 PIT county presentation, Presentation on our YHDP Projects, and Three County CoC committee recruitment.

1. **Adjournment**

Brad *Motion to adjourn, second by Andy*

**Attachments forwarded to Board ahead of meeting:**

* Minutes from June meeting
* Updated 2020 Board Slate
* Ranking Details/Preliminary Project Ranking
* Project Narratives