

MARICOPA ASSOCIATION OF GOVERNMENTS  
CONTINUUM OF CARE PLANNING SUBCOMMITTEE  
MEETING MINUTES  
December 12, 2011

Members Attending

\*Theresa James, City of Tempe, Chair  
Greg Boone, Labor's Community Service Agency  
Robert Duvall, Community Information & Referral  
Richard Geasland, Tumbleweed  
+Connie Phillips, Sojourner Center  
\*Nick Margiotta, Phoenix Police Department  
Linda Mushkatel, Maricopa County  
Chela Sullivan for Darlene Newsom, UMOM New Day Center  
Amy Schwabenlender, Valley of the Sun United Way  
+Joan Serviss, Arizona Coalition to End Homelessness  
Kathy Talmadge for Laura Skotnicki, Save the Family  
John Wall, Arizona Housing, Inc.  
\* Diana Yazzie Devine, Native American Connections

Others Present

Donna Bleyle, Arizona Department of Economic Security  
Jenny Day, Basic Mission  
Lisa Miller, UMOM New Day Center  
Milon Pitts, Homeward Bound  
Vicki Ramirez, Recovery Innovations  
Michelle Thomas, Community Information and Referral  
Kim Van Nimwegen, Valley of the Sun United Way  
  
Rachel Brito, MAG  
Margaret Kilman, MAG  
Brande Mead, MAG

\*Those members neither present nor represented by proxy.  
+Present by audio or videoconference.

1. Call to Order and Introductions  
Brande Mead, MAG, called the meeting to order at 2:10 p.m. Theresa James, City of Tempe, Chair, was unable to attend the meeting. Introductions ensued.
2. Call to the Audience  
Audience members were given an opportunity to address the Planning Subcommittee. No comments were made.
3. Approval of November 7, 2011 Meeting Minutes  
Ms. Mead called for a motion to approve the November 7, 2011, meeting minutes. Linda Mushkatel, Maricopa County, made a motion to approve the minutes. Bob Duvall, Community Information and Referral, seconded the motion. The motion passed.
4. Regional Homeless Data overview Update and Recommendations  
Ms. Mead introduced Margaret Kilman, MAG Intern, to provide an update of the Regional Homeless Data Overview. She acknowledged Mr. Duvall and staff for their assistance providing the five-year history of HMIS data. Ms. Kilman said the purpose of the overview is to supplement other important data, such as the point in time count, to be able to provide

more holistic view of the demographics and homeless population in this region. She acknowledged many Committee members have already provided valuable feedback into the process. In October a group of volunteers from the community were brought together to help guide the process and inform the overall project. Using HMIS data from 2006, the goal was to be able to develop a picture of trends from different subpopulations including children and families, chronic population, veterans, youth and single adults. Ms. Kilman advised that the ad-hoc group recommended collapsing some of the HMIS data to create a better story with the data. She shared a draft of PowerPoint graphs presented at the November 30<sup>th</sup> meeting. Ms. Kilman advised feedback was requested from experts within community to develop the graphs and make them available in a usable format. Feedback was requested on the key issues, the narrative, different versions of the graphs and what type of graphic representations.

Now that feedback has been received, the next step is to broaden the scope and ask for more feedback from any other members of the community to help engage in final push to create meaningful narratives. Ms. Kilman noted some feedback was provided on the colors for the graphs and extending each graph to two pages long. The first page would include the graph and narrative about the population; the second page would help inform providers a bit more. Ms. Kilman noted another recommendation was to remove permanent supportive housing and reflect it in a different manner. She requested any additional information or input regarding permanent supportive housing.

Two areas reviewed in HMIS were primary reasons for homelessness and prior living situation. Data in those areas were collapsed into single categories are “Economic” which includes eviction or loss of jobs; and “Other” which includes unknown, does not know or refuse to answer. Ms. Kilman offered to email the graphs to anyone interested in receiving them. She encouraged additional input. Committee members questioned if any of the data includes people from Project Connect. Ms. Kilman responded that the HMIS data does not include those who attended Project Connect events.

Ms. Mead advised since HMIS data was used and does include data from Domestic Violence programs, it is important to include a disclaimer on the final handouts about what the data does *NOT* represent.

Ms. Kilman asked for input or stories that reflect changes in data. She noted veterans as an example, stating that in 2008 they began some much targeted programs. As a result they began to see changes in data. Those are the types of stories staff wants to include in the overview. Ms. Mead asked for clarification on whether feedback to remove the permanent supportive housing numbers is being requested during the meeting. Ms. Kilman noted some subpopulations felt it was meaningful to include the permanent supportive housing numbers, while others did not. She requested anyone with input, please contact her; input was not immediately requested.

Ms. Bleyle commented one of the issues was not to remove permanent supportive housing all together, but to display it separately. She said when looking at the number of chronically homeless or how many suffered from alcoholism or SMI, the picture of who is being helped

is unclear. She added if someone was noted as chronically homeless and they became permanently housed and stay there for ten years, it can appear as though the community is not making progress. She said permanent supportive housing should not be part of the overall homeless numbers but reflected under solutions.

Mr. Duvall added by including permanent supportive housing, it appears as half of the population is coming from shelter and half is coming from places that are not meant for habitation. If the data is split, it will show that most persons in permanent supportive housing are coming from shelter, and those coming from transitional are coming from places not meant for habitation. Another recommendation was made to reflect permanent supportive housing as a separate graph to balance the need coming from shelter and from the streets. Amy Schwabenlender said it creates the ongoing effect that formerly chronically homeless individuals are still homeless. She said this sends the wrong message and stressed people in housing should not be included in the homeless count, but should be used to reflect successes.

Ms. Kilman referenced the McKinney-Vento Renewal Funding FY 2011 graph. Ms. Mead noted a separate graph may be needed to not only show the dollar amount but to show the number of units funded for each type of program. Ms. Mead offered to update the chart to include number of units. A recommendation was made to show program units based on beds separately from dollar amounts. Committee members expressed concern over what information is shared with the media. Ms. Mead said the Continuum will not share data with the media until it has been approved. Milton Pitts, Homeward Bound, recommended including a disclaimer that the data does not include everyone that is homeless in the valley, only those persons in the shelter system.

Ms. Schwabenlender thanked Ms. Kilman and Mr. Duvall for their efforts. Ms. Mead advised Ms. Kilman's internship at MAG has ended however she has committed to stay on until January to help complete the project on a voluntary basis. She commended her for her passion and commitment to the project. Ms. Kilman reviewed next steps, to review feedback, write the narratives and redistribute the data. Having no further input, the Committee moved forward on the agenda.

##### 5. Program Evaluation Model Review

Ms. Mead advised there several ambitious goals outlined within the HEARTH Act that need to be addressed. Achieving these goals is critical to applying for funding from the Department of Housing and Urban Development (HUD). They include such things as duration of homeless episodes, returns to homelessness, the number of people that become homeless and reducing the overall number of homeless individuals. A method for assessing not only community, but also HUD funded and non-HUD funded programs; how they are performing and a standardized way to evaluate performance must be developed. Action is also needed to evaluate current progress, engage in the goals and improve performance.

The Columbus, Ohio program evaluation model was chosen because HUD and the National Alliance to End Homelessness refer to it as a best practice. The model is also being used by other communities. Columbus had great performance outcomes and had much of their

program in place before the HEARTH Act went into effect. It is used as a pay for performance program to support and expand effective programs within the community. Programs are rewarded through additional funding of successful programs. The program also includes a quality improvement intervention plan to provide technical assistance to programs that are not performing to standard. Ms. Mead asked for input from the Committee about their interest in researching the Columbus Ohio program further, and/or possibly adopting the model.

Linda Mushkatel, Maricopa County, expressed support of the program noting it is different because agencies are paid against benchmarks achieved. She said the biggest issue is the community capacity to plan, measure, and survive with this type of model in place. Ms. Mead said implementation of a program such as this would take time and the community in Columbus is different than ours. The Columbus program already has a centralized intake system; pay for performance; and their Continuum is run by a community shelter board which may be the grantee for some of the HUD funding. She noted the Continuum of Care (CoC) is different in that it is set up for programs to have direct contact with HUD when they receive funding. That process may change as HUD implements HEARTH. If MAG becomes a unified funding agency, ultimately, MAG would receive the funding and then distribute it to different programs.

Donna Bleyle, Arizona Department of Economic Security said the most impressive part is that the Continuum would remain at a higher level. However, she questioned what would be the measurements indicative of the Continuum's performance and the capacity of staff available to monitor at a higher level. Additionally, she noted Columbus reports a complete picture of both state and municipal funding while the Continuum has a similar system through HMIS. She added the State is exploring pay for performance for next year. Another concern is the frequency in which providers are being monitored by the County, State and other funders. She said is it important for the County, State and other funders, to come to some agreement on performance standards so as not to drown providers.

Ms. Mushkatel said community agencies, are just now getting comfortable building programs off a logic model. For some agencies, that was a major change. She suggested introducing some of the outcome measures against their own. With regard to sample reports available from the Columbus program, Ms. Mead inquired whether or not there are any Continuum-wide HMIS reports available that the Committee can begin to review. Bob Duvall, Community Information and Referral, said he has more concern over the data elements. He noted reports are not readily available however; they can begin to build them over the next year. The major data elements, things that would normally be collected, are available.

Milon Pitts, Homeward Bound, inquired about a timeline for implementing the new process; who will monitor; and how the Continuum can come to a consensus on what will be monitored. Ms. Mead said setting a timeline may be the first step to implementing a program evaluation model. She suggested discussing a timeline that can be presented to the Continuum of Care in January. She noted HUD does not have a set timeline pending release of HEARTH regulations. Any timeline set by the Committee may then need to be adapted.

Ms. Schwabendlender said it would be beneficial to have more than one example of program models to review. She requested a summary of the Columbus program and components for program evaluation. Ms. Mead advised the National Alliance to End Homelessness and HUD's homeless resource exchange offer other options. She offered to research further and asked for input for other models of interest to the Committee.

Ms. Mead said the work completed by Ms. Kilman on HMIS data has begun to look at some baselines although the information has not been distributed as a community wide report. She summarized the Committee's request and offered to provide an update at the next Planning Subcommittee meeting on January 9, 2012. She asked for input on a potential year-long timeframe for researching other models and the possibility of using portions of those models to develop a plan that will work for the community. There was consensus that a 12 month timeframe would allow for enough time to thoroughly develop an evaluation process.

Kathy Talmadge, Save the Family, said the process to get Save the Family accredited was very similar. The work took a year to complete but transformed the way they do business. She suggested the amount of time to fully engage and maintain a process cannot be minimized. Ms. Mead recommended the first year be focused on specific planning with the Planning Subcommittee serving as the lead in this process. The second year would focus on implementation, data collection, evaluation and assessment. Mr. Duvall said planning for HMIS took approximately six months. He recommended a commitment of one meeting per week as anything less than that will fall short. He added this process will seriously affect every provider. Ms. Schwabendlender suggested assembling a working group to commit to this effort.

John Wall, Arizona Housing, Inc. said another component would include training as it would be intimidating to many providers for the Continuum to roll out a new reporting responsibility. He suggested following up with as much training support and technical assistance as needed when rolling out the new process. Ms. Bleye clarified her prior concern was with providers monitoring providers. She did not intend for providers not to be involved in the process for setting the standards as a community. Ms. Mead agreed adjustments will have to be made as HUD releases the HEARTH Act regulations. Ms. Schwabendlender inquired about centralized intake suggesting it may be a good idea to align the process. It was noted that centralized intake will be a key component to meeting HUD's goals.

Greg Boone, Labor's Community Service Agency, inquired what area has the highest population of homelessness and that also utilizes centralized intake. Ms. Mead offered to research; Philadelphia and Minneapolis were noted as possibilities. Ms. Mead advised with the new ESG regulations; there is a requirement for centralized intake and ESG municipalities to coordinate closely with the Continuum of Care. She noted the Continuum can expect to work more closely with municipalities and the state. Ms. Mead advised she has met with the City of Phoenix but will need to also schedule a meeting with the ESG grantees to begin discussions. Ms. Bleye suggested facilitating a meeting, from the state level, to have an overview of which programs are receiving ESG funding, would be very beneficial.

For next steps and program evaluation, Ms. Mead asked for input on planning for one year focused on intensive research, planning and development. Ms. Bleyle said in light of the previous ESG discussion, this will be a year of planning, but also adapting to what is already in place. She noted projects moving forward at different phases. Ms. Mead advised the centralized intake component of the ESG is on hold until the CoC regulations are released.

Ms. Mead asked for volunteers to form a working group: Kathy Talmalge, Bob Duvall, John Wall, Donna Bleyle, Milon Pitts, Greg Boone and representatives from UMOM, Valley of the Sun United Way, and Tumbleweed, volunteered to participate on the working group. Additionally, it was recommended Wayne Parker, a participant from the Veteran's transitional program and CASS, also be invited to participate. Ms. Mead offered to distribute a meeting invitation for late January. The working group will then set a meeting schedule.

6. 2012 Homeless Street Count Update

Ms. Mead advised the Continuum of Care discussed the 2012 Homeless Street Count at their meeting on November 21. She provided an overview of the discussion. A recommendation was made to not conduct the street count this January, but to organize a working group that would meet on a monthly basis, to pull together information on best practices, and develop a quality improvement plan for a street count at the regional level, methodology being used within all cities and towns, and recommendations for moving forward on annual street count. Ms. Mead said a caveat was that the Continuum follow-up with HUD to determine how this decision will impact the Continuum's score on the application for funding. Ms. Mead advised John Epler recommends that all continuums of similar size conduct an annual count and that all of the continuums of similar size that he works with do conduct an annual counts. He added not doing so would not necessarily have a large impact on the application score because conducting a count this year is not required. Additionally, if the Continuum is able to reflect efforts to improve methodology, it would show the intentions are to have a good process in place.

Ms. Mead advised the decision of the Continuum of Care Committee to not conduct a count this year will remain. A street count coordinator meeting was held with a majority of the coordinators present. All of the large cities and towns were represented. Ms. Mead reported there was great consensus to engage in this planning process and all coordinators wanted the opportunity to review each others' methodology. There was great interest in what can be done differently to improve and developed a standardized methodology for the region.

Ms. Mead advised there was concern expressed by state agencies, DES, a veteran's group and the Coalition over not conducting a count in 2012. She noted they all have statewide goals and use the point in time numbers in determining their outcomes and performance for the state. Ms. Mead offered an opportunity for Committee members to participate in the working group that will be addressing the street count methodology. An email invitation will also be distributed. Mr. Duvall recommended participation for those involved in Project H3 as much of what they have done may be able to be incorporated.

Ms. Bleyle addressed the Committee regarding the decision not to conduct the street count. She said it is important for everyone and the Continuum to recognize that as the Continuum encourages everyone to work closer together, many organizations have come to depend on the information gathered. She added when MAG arbitrarily makes a decision to not do something, it does not just affect MAG members. She used the veteran count as an example stating the Continuum will now have to wait two years to see what changes have occurred. Things such as this are affected and collaboration is broken; including all of the support and assistance received from veterans. She said all this could be lost or the Continuum can be more mindful and perhaps treat the process with more inclusiveness in the future. She noted she, along with other groups cannot attend every meeting and encouraged everyone to stop and think about whom is being affected by the decisions being made.

Ms. Mead clarified this was a decision made by the Continuum of Care, not by MAG. She agreed it is important to consider what other impact decisions may have, not just at the provider level but at the statewide level as well. Mr. Boone noted this gives new opportunity for everyone to come to the table and develop a new process and a clearer picture. He asked Ms. Mead if an email would be distributed to the larger group offering an opportunity to participate in the working group. Ms. Mead confirmed Continuum and Planning Subcommittee member will have an opportunity to participate; she noted street count coordinators are assigned by their municipality. The first meeting will be held January 24, 2012 at MAG at 2:00 p.m.. Ms. Mead said there is a lot of passion around this work and there are hundreds of volunteers engaged in the process. She said the Continuum is doing some really great things already and she encouraged everyone to stay involved as the Continuum does not want to discount any of the work that is being done. Everyone's efforts make a difference.

7. Request for Future Agenda Items

Ms. Mead asked for additional items to be considered for future agendas. Mr. Duvall questioned whether or not centralized intake will be part of the discussion for the Planning Subcommittee. Ms. Mead said it will be a key focus of the Planning Subcommittee and will go hand in hand with program evaluation. Additionally, bringing together other funders is just as important.

8. Comments from the Subcommittee

Ms. Mead asked for comments from Subcommittee members. Amy Schwabenlender advised Ms. VanNimwegen may become the United Way representative or serve as the back-up person on the Planning Committee. She shared dates for future Project Connect events and the need for 400-500 volunteers to staff the Stand Down event in February.

9. Adjourn

The meeting adjourned at 3:37 p.m.