

August 1, 2019 1:00-2:30

Facilitator:	Casey Gordon			
Meeting Attendees:	Casey Gordon, Beverly Ryskamp, Deanna Rolffs, Lauren VanKeulen, Karen			
	Tjapkes, Vera Beech, Courtney Myers-Keaton, Wende Randall, Brianne Czyzio			
Time Convened:	1:06	Time Adjourned:	2:40	

Approval of Agenda		August 1, 2019		
Motion by:	Beverly	Support from: Deanna		
Discussion	ESG Exhibit 1 will need to be discussed at Steering. Including: approval of			
	VAWA Emergency Transfer Plan, Extreme weather plan (depends on HAP's			
	phone system), and Disclosure of Community Financial Assistance Guidelines			
	(Required Monthly Payment).			
	Courtney recommends tabling #5 (strategic planning) and scheduling a			
	separate meeting before Steering Council			
	Courtney recommends tabling the following topics until the September			
	meeting: Lead agency discussion, KConnect response			
Amendments	Change #4 from "ESG Exhibit 1" to "Coordinated Entry Update"			
	Add items b-d under #6			
	b. Changes to current NOFA from last year's			
	c. HMIS Lead Agency Grantee Update and next steps			
	d. Funding Review Rubrics (last year's)			
	Add #7: Degage Letter of Support			
	Remove: lead agency discussion, KConnect response, options for strategic			
	planning			
Conclusion	All in favor by acclamation with no dissent			
Approval of Minutes		June 27, 2019		
Motion by:	Karen	Support from: Lauren		
Discussion	Casey emailed Brianne a sm	small edit prior to the meeting; this change was made		
Amendments				
Conclusion	All in favor by acclamation with no dissent			
Community Rebuilders Presentation Vera Beech		Vera Beech		
Discussion				

Vera Beech, from Community Rebuilders (CR), attended the meeting to give an update on their new project and ask Executive what they see as the CoC's role moving forward. They have shared their plan for Day One funds with several partners in the community. They are looking to improve access and equity in the ways that families access the coordinated entry system (CES). They have signed a contract with TAV Health, which is now Signify Community.

They have adopted the name GRACE Network to refer to the web-based platform (Signify Community) that allows multiple sectors to share referrals and resources, assess needs, and share information in compliance with protection and privacy laws. They have been working to find partners



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that touch all the Social Determinants of Health sectors and bring them on board. This system is scheduled to launch in October of this year. They will start phase 2 of this process with additional housing partners toward the end of 2019 or early 2020.

Each client who enters the GRACE network system will complete a housing screen and a Social Determinants of Health (SDoH) screen. Organizations can add additional screens as desired. All providers will own the network equally and have access to the outcomes reports in the same way. In Michigan, infant care in Kalamazoo is using TAV-Health. Spectrum Health is considering this system as well. Networks would be able to communicate with each other. No agency is excluded – all organizations' information will be added to the network. However, it will be harder to track agency outcomes until that agency is an official CBO on the network.

Vera stated that she has been clear that the CES is not meeting federal requirements and is not meeting the needs of families. Community Rebuilders does not want to roll out dollars into the community until there is an improved way to access the system for families. In learning from agencies across the country, they identified a web-based answer which is a possibility for this community. The idea is that a family experiencing a housing crisis can access this system on the internet. They will answer about 10 questions that will then get them to a service provider from a broad network. The goal is to get families immediate access to resources in the community. The questions will be in English and in Spanish and will give an idea if whether families are literally homeless or unstably housed and whether they have a safety concern. All who complete the survey will get a solution specialist who will meet with them and address their needs. The goal is to ensure that families who are unstably housed can connect to resources that are pertinent to them (education, childcare, transportation, etc.). Depending on their situation, options for solution specialists will appear. The consumer will be able to choose who they would like to meet with in the community. They can schedule the meeting themselves and are able to get reminders. None of the screening data is transferred or stored. Information will be collected when they meet with a solution specialist.

Solution specialists: The hope is that community diversion specialists will be interested in learning the rapid resolution model and would be interested in feeding into these positions. The hope is that network of providers will do this collectively. The goal is to get families access to resources to stay within their natural supports until they are able to access housing. Solution specialists will have flexibility to have conversations on what can be done to allow families to stay where they are for 30, 60, or 90 days. Families will be able to enter the GRACE network if they want to access additional resources. This system will not replace HMIS. CR will be doing double entries where required. There is a shift in that in the past information has been gathered for HMIS, not collected so that the providers need to know to help the consumer. CR sees tremendous opportunity for the CoC to use this network and platform, but it is up to the CoC to decide. Vera stated that the question is whether the CoC wants to engage, where do they see the overlap, how do they want to partner. If the CoC decided to go in a different direction, CR would still appreciate the opportunity to present to the broader CoC to share about the opportunity and where providers may fit.



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Vera stated that currently, all families are referred to Fulton Manor and a diversion specialist connects them to resources. Vera noted that there is not a clear picture of how the CES works, and this is a concern. According to Vera, CR does not regularly receive many referrals from the CES, and VA no longer uses the CES. Once the new system goes live, it is likely that families will choose to use a web-based system which will lead to the transformation of the system. This is a separate system to access resources in the community that are available to families. All organizations that are open to the public can get referrals. It is up to the CoC to decide how this relates to Coordinated Entry. Vera stated that she does not see this as a separate CES because in her opinion the current system does not have publicly published policies and procedures that are followed.

With the web-based system, both Category 1 and Category 2 families will go through a housing screening and SDoH screening. After the screening they will be referred to resources they are qualified for. Diversion would be part of the process. Beverly asked what kind of housing resources would be available to the solution specialists. Vera shared that he proposed model starts with rapid resolution for families. All resources will be housing-focused with supportive sources. The hope is that providers will say that they provide a specific resource, so they want to be part of the solution specialist team. The goal is to be able to see all of the places in the community where resources are available and where referrals can be made. The system could potentially track the status of each referral and the information and documentation needed for the referral to be successful. Vera stated that how far and how fast can this go depends on how fast the CoC moves.

In October, CR will begin serving families using the web-based system. Agencies who want to be part of the network will be able to join. Courtney asked whether there will be another TAV-Health orientation as this helped her understand how the system works. Vera shared that these trainings can be offered as needed, and to connect with Vera directly to learn more. Within the first 1-3 years, the network should be held elsewhere in the community as CR does not have the desire to hold this network long term.

Deanna shared that partners in the Diversion pilot follow 9 steps that that group decided upon. How would this new system partner and interface with the programs currently doing these steps? Vera responded that Cheryl and Vera have been working together and see a lot of overlap. Cheryl will be pulling agency leaders together to share what is currently happening, as well as what is proposed. Organizations will have a chance to decide whether they want to switch. Lauren stated that it would be helpful to understand how the network of service providers would interface with CES if the CoC chooses not to be involved in the system.

Lauren noted that centralized intake has been more of our community's model. There is an opportunity to create a CES where there are multiple access points that talk to each other but how do we ensure that we are not duplicating? Vera shared that in many communities, United Way funds the network and requires organizations to pay fees to help fund network. Locally, 211 is in discussion at the state level whether there will be a new statewide system. Vera shared that ideally 211 would be a community-based organization (CBO) in the system. When a network provider cannot find a resource,



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they could refer back to 211, or 211 could refer through the network. There could be an opportunity to enhance services in the community.

It was stated that agencies with PSH housing resources are required to work with HAP to provide resources, they cannot bring resources to a different system. Vera stated that when the CES does not meet the federal requirements, agencies would not be required to use it and she feels that the CoC's current CES does not meet federal requirements and is out of compliance.

On the other hand, the CoC could decide that this platform will be used for CES. HAP could have their system on the platform. However, there would have to be some double entry in HMIS. This platform will allow for the coordination and communication of resources as individuals move through the system. There were questions about how other communities have used the platform to which Vera responded that the network was in the health system as a response of high users and the connection to the SDoH. In most cases, hospitals and payee services use this network. There would need to be dual entry for HMIS, but the prioritization could be housed in the system. It would also require additional costs to customize the system. CR plans to use level of risk as a factor as compared to a number (SPDAT). They are working to ensure that workflows developed fit the broadest number of people.

CR is doing beta testing with families who have experienced homelessness throughout the communities. Vera asks that agencies share the information and consider using their space for families to gather. Please reach out to Vera if you have questions about either platform.

Tariffles to gather. Please reach out to vera if you have questions about either platform.			
Action Items		Person Responsible	Deadline
Coordinated Entry Update			
Discussion			
Courtney, Johanna, and Samantha have been undergoing a HUD compliance check with CES. The			
compliance checklist should be completed by the Steering Council meeting with areas where the CoC			
is out of compliance and changes that need to be made.			
Action Items		Person Responsible	Deadline
CoC Program Competition			
Discussion			

Timeline

Courtney prepared a timeline for the Program Competition. A vote on the priority listing would happen at September Steering Council meeting.

HMIS Lead Agency Grantee update:

Heart of West Michigan United Way and Salvation Army have been in conversation around steps to change the HMIS lead agency grantee. According to a conversation with HUD, all that would be required is a formal letter to request a recipient change.

Action Items		Person Responsible	Deadline



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Degage: Letter of Support					
Discussion					
Degage requested a letter of support for their capit	tal campa	ign. Courtney and Casey	will discuss this		
topic via email.					
Action Items		Person Responsible	Deadline		
Extend September's meeting time		Brianne Czyzio			
Add Letters of Support to September Executive age	nda	Brianne Czyzio			
August Steering Council Agenda					
Discussion					
a. Strategic Plan – RFP, rubric, proposed process					
b. Data Presentation					
c. ESG Exhibit 1	c. ESG Exhibit 1				
a. VAWA Emergency Transfer Plan*	a. VAWA Emergency Transfer Plan*				
b. Extreme Weather Plan					
d. Disclosure of Community Financial Assistance Guidelines (Required Monthly Payment)					
e. CoC Program Competition					
a. HMIS Lead Agency Grantee and Next Steps					
Action Items		Person Responsible	Deadline		
August Full CoC Agenda					
Discussion					
Action Items		Person Responsible	Deadline		