**MAINE STATEWIDE HOMELESS COUNCIL**

**May 11, 2021**

**9:30-12:30**

**Minutes**

**Virtual Location** [**https://meetings.ringcentral.com/j/1494236342?pwd=MHE2NW9vMnV6WWhrNjEzZjlodzZ6dz09**](https://meetings.ringcentral.com/j/1494236342?pwd=MHE2NW9vMnV6WWhrNjEzZjlodzZ6dz09) **Or Telephone: 1(646)3573664**

**Members:** Donna Kelley (WCAP, RII), Cullen Ryan (CHOM, RII), Cheryl Harkins (HVJ, RI), Lauren Bustard (MaineHousing), Alice Preble, (DHHS/OCFS), Emily Flinkstrom (Fair Tide, RI), Josh D’Alessio (PCHC, RIII), and Donna Yellen (Preble Street, RI), Steph Primm (KCHC, Chair)

**Guests:** Betty LaBua (MaineHousing), Tracy Allen (KBH), Scott Tibbitts (MaineHousing), Rota Knott (Tedford), Jenny Stasio (TTD), Bill Higgins (Homeless Advocacy for All), Anna Smith (CSH), Sarah Gallagher (CSH), Chris Bicknell (New Beginnings), Sara Wade (OBH/DHHS), Vickey Rand (CHOM), Erin Kelly (Preble Street), Katie Spencer-White (MMHS), Norm Maze (Shalom House), Boyd Kronholm (BAHS), Noelle Coyne (Safe Voices), Richard Hooks Wayman (VOA), Kate Easter (MCEDV), Kelly Watson (MaineHousing), Ann Martin (HUD), Joe McNally (Milestone), Ginny Dill ( OBH/DHHS), Mike Shaughnessy (MaineHousing), Rindy Fogler (City of Bangor), Abigail Smallwood (City of Biddeford), Aaron Geyer (COP), Mary Cook (PATH), Chris Rector, Lisa McLaughlin (HSA), Shawn Yardley (Community Concepts), Amelia Lyons (Dept. of ED), Kelsey Brown (HUD), Beth Hamm (DHHS), Lincoln Jeffers (City of Lewiston), Tara Hembree (MaineHousing) Awa Conteh (City of Bangor), Michelle Probert (MaineCare) and Marcella McGuire (CSH), Mellisa McEntee,(RGH), Anne Pringle (Friends of Deering Oaks), Steve McDermott (MaineHousing),

**Minutes:** Betty LaBua (MaineHousing) and Scott Tibbitts (MaineHousing)

**Welcome:** Stephanie opened today’s meeting by welcoming everyone in attendance. Cullen motioned to approve April’s minutes. Bill Higgins seconded the motion. April’s minutes were approved.

**CSH Update:** This month’s update highlighted the importance of interweaving health care into the System Redesign at the hub level by having MaineCare’s Michelle Probert and Marcella McGuire from CSH give presentations on Healthcare Integration.

Marcella explained best practices in health home programs, systems need to be in alignment, coordinated and integrated at the person, program and system levels. If homelessness is to be impacted, **policies** must be able to align populations by matching who is eligible for services with who is eligible for housing and by being equitable. Staff should have small caseloads and be community focused versus office based. Furthermore, **practices** should support partnerships between housing and health care entities and provide capacity building in order for agencies to be able to adapt their billing, be HIPAA compliant, train staff, revise policies and be sustainable. With a reminder of how highly complicated the billing is, three administrative models were outlined.

1. SH Provider Bills- Requires significant up front cost and likely changes in IT, staff, and policy and procedures. SH is responsible for maintaining accountability.
2. SH provider partners with another agency for Service Delivery- Requires less upfront costs with less clear accountability.
3. SH Provider submits paperwork to another agency who submits claims- Requires some upfront costs and there are fees charged for the process causing decreases revenue for the agency.

Michele defined the Innovation Accelerator Program (IAP) as a program to improve the health and health care of Medicaid beneficiaries and to reduce costs by supporting states’ ongoing payment and delivery system reforms. In June 2019, MaineCare began hosting monthly meetings with a workgroup comprised of MaineCare, the Maine State Housing Authority, and a broad range of community stakeholders and experts in the field. After evaluating other states’ approaches, the Department and the stakeholder group reached consensus that a Health Home Services Model provides the most appropriate federal authority to enable the group’s goal to offer permanent supportive housing services to individuals experiencing chronic homelessness. The group proposed a State Plan Amendment (SPA) to allow health home providers to develop and maintain clinically effective relationships while delivering an intensive level of core services including the following: comprehensive care management, care coordination, health promotion, comprehensive transitional follow-up care, individual and family support, and referral to community and social support services. The implementation target date of this model is 1/01/22.

Sarah wrapped up today’s CSH update by listing these next steps for convening individual service hubs:

* Hubs with existing structures/coalitions/initiatives should determine how they will adapt to the service hub structure.
* Begin convening locally to have these conversations in advance of the Coordinated Entry proposal to the CoC in July.
* Hubs should discuss how to formalize a lead or co-lead organizations and draw up MOUs.
* The SHC/CoC/MaineHousing will discuss how to support Hubs without an existing structure
* CSH will be following up with additional information including a sample agenda for these meetings.

**Hotel Transition:** The Hotel Transition Task force met for the first time on April 29,2021. In the format of an information gathering, a variety of options were mentioned and numerous angles will continue to be explored to address both the short and long term needs of over 300 people living in hotels. Suggested resources range from Rapid Rehousing, PSHs, EHVs, best practices from other states, individual room rentals, and utilizing home funds for new units. Jenny Stasio will join the task force as a voice for DV survivors and representatives from both General Assistance and municipalities from the hotels’ geographical radius will be invited to be at the table when designing the transition plan.

**Encampments:** The quandary on how best to support the needs of people in encampments while at the same time not creating permanent fixtures and preventing them from growing was addressed in a position statement shared by Cullen. It was decided more conversation is necessary before the SHC creates a formal position statement. Mapping out answers to how best to address encampments will be a topic of the MSN meeting in June and placed on the agenda for next month’s SHC meeting.

**Structure to Keep Redesign Momentum:** MSHA will act as a bridge between CSH and Community Solutions. Stephanie opened the door for the next phase of the system redesign by poising the question ”What structure do we need to construct in order for the implantation of the hubs to be successful?” and by inviting all to think of different opportunities, concerns, long term plans, short term implementation and the role of the SHC. Time will be allocated during June’s meeting to strategize for the facilitated planning session/council retreat in July.

**CES:** Mike introduced Tara Hembree, the new COC Project Coordinator as the person who will oversee the coordination of CES. The CES committee, in partnership with TAC, is currently working on the assessment phase and deciding on an equitable assessment tool. Tools under consideration are based on the following assessment approaches:

* Short, Barrier Focused Approach
* Data Based Approach
* Progressive Engagement Approach
* Research Based Approach

Before implementation, all stake holders and front line workers will be asked to critique the system to the committee. A goal of the committee is to incorporate feedback in order to create a unified system that makes sense to the end users. **Council Updates: Regional Updates Region I-**Emily stated the region is concerned over the increasing numbers of encampments. There was a lengthy discussion over CES, in particular, the assessment tool. The region would like to be visited by the CES Road Show. **Region II-** Ideas were shared regarding staff incentives for inoculation. The hurdles encountered vaccinating a transient population spot lights the need to address homelessness in the state of Maine as a public health crisis. Noelle announced Safe Voices will open a Wellness Center in Farmington consisting of an eight bed shelter, project based apartments, resource rooms and support group space with a targeted January 2022 opening date. **Region III-**Questions on how to service the encampments already established and how to prevent a need for them were the focal points of the meeting. **MSHA:**  Lauren updated the council on the specifications for the new EHVs from HUD by noting a securement date of May 24, 2021, 125% of fair market allowable for rent and available landlord incentives. Maine received 180 vouchers, 99 have been issued to MSHA, the rest divided amongst five Housing Authorities. All effected PHAs will be invited to meet to formulate a plan to best utilize the EHVs. **Legislative Updates:** **Federal-**Cullen started the Federal update by bringing attention to that on 4/28, President Biden released details on his “American Families Plan,” a $1.8 trillion companion bill to the $2.5 trillion American Jobs Plan. Notably missing from the American Families Plan is a proposal to make rental assistance universally available to all eligible households. On 4/23, Senate Republicans released a $568 billion infrastructure proposal in response to President Biden’s $2 trillion American Jobs Plan. The proposal includes no funding to address the affordable housing crisis. Senator Elizabeth Warren reintroduced the “American Housing and Economic Mobility Act” to help address the underlying causes of America’s housing crisis, primarily through robust investments in the national Housing Trust Fund (HTF). Cullen ended the update by announcing HUD withdrew the proposed rule*, Making Admission or Placement Determinations Based on Sex in Facilities Under Community Planning and Development Housing Programs* which would have weakened the Equal Access Rule. **State-** Legislators will consider a supplemental budget to address FY 22 and FY 23 spending, the process will likely happen in May/June and will debate the allocation of funds from the National Rescue Plan Act. Cullen briefed the council on the change in status of: -LD 211-An Act To Support Emergency Shelter Access for Persons Experiencing Homelessness-Passed to be engrossed as amended by the House then the Senate on 4/28, the bill now faces votes for enactment in each Chamber. -LD 48 Resolve-To Require the Department of Health and Human Services To Request a Waiver Relating to Support Services and To Provide Funds To Prevent Homelessness-This bill is now dead. At the 4/9 Work Session the Committee opted instead to send a letter to DHHS asking for report-outs from the Medicaid IAP as this is very closely related to this bill. -LD 360 Resolve-To Reduce Barriers to Recovery from Addiction by Expanding Eligibility for Targeted Case Management Services- This bill is now dead. Katie will send *call to action* emails concerning LD 1478-An Act to Decriminalize Homelessness and LD 1695- An Act To Improve Housing Security by Improving Access to General Assistance.

**Stephanie adjourned the meeting with an invitation for all to attend next month’s council meeting scheduled for June 8, 2021**