

# CHITTENDEN COUNTY HOMELESS ALLIANCE (CCHA)

## Strategic Planning Committee Minutes

October 16, 2019, 3:00 – 4:30

### ATTENDEES:

- Stephen Marshall, **Lived Experience**
  - Lacey Smith, **BPD**
  - Jane Helmstetter, **AHS**
  - Travis Poulin, **CVOEO**
  - Steve Lunna, **SSV@UVM**
  - Margaret Bozik, **CHT**
  - Todd Rawlings, **CEDO**
  - Val Russell, **CEDO**
  - Erica Da Costa, **CCHA**
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- Let's update our charter based on the community meeting. Let's add the Veterans' subcommittee. Wait for language from Travis.
  - The Planning Grant invoice has been submitted to CEDO for CCHA.
  - Look for the final version of CCHA monitoring policy & procedures and review it next time. [Found > Click here.](#)
  - Regarding HOP grant findings report, should we discuss it in the Steering Committee meeting as an intro to the HOP presentations?
  - **Jane/AHS:** I just want to take a look at how the HOP money is being spent not as a form of monitoring but in relation to **a phenomenon I've been noticing about the level (complexity and intensity) of need in clients increasing dramatically.** Everyone seems overwhelmed by the level of need. And the staff don't have the support or training they need.
    - **Everyone in the room agrees with these anecdotal findings.**
    - Travis / CVOEO: We have also seen the level of need occasionally exceed our ability to provide. We need something we can give to clients that says "this is what we do, these are the parameters."
    - D.O.C. is finding that some of their partners can't take more referrals because the level of need is so high.
    - STEPHEN: Is this part of a larger change in the system? State/ Federal?
    - This sounds like something for INPUT FOR THE LEGISLATIVE PRIORITIES. We need to say "this is what we're seeing and this is what we need."
    - Should we invite Erhard Manke here to have a conversation about this?
    - We should have some input during the VCEH Legislative Committee meeting (over the phone). This committee is not just Balance of State; it's all of Vermont. In the last 10 years we haven't provided any input into that agenda. Let's get specific about what we're seeing and what should be done about it.
    - Lacey/ BPD: It's widely agreed that one of the top priorities need to be social service dollars.
    - We need support for the support providers. As well as more training. We need clinical support for the service providers themselves.

- We don't necessarily need fully trained MSWs but we need people who have the heart, the support and some training.
- We have a lot of anecdotes about the increase in high needs clients. Let's get the data to support this. Let's look at our PIT numbers or our HMIS numbers.
- Daniel at BoS is applying for a **service only pilot project** – and we should watch it. **This is new even within the HUD world.** They're going to use section 8 vouchers as the social service match. But there are a lot of caveats. And CoC money would provide the services.
- Jane/ AHS: We need to get some funds for training to help the workforce understand how to better handle the clients AND take care of themselves.
- Lacey/ BPD: The positions that they're creating (the new service only pilot project) — **the housing retention coordinators** — those people would be responsible for the HUD documentation. So the documentation burden would sit with, for example, BHA (or other partner agencies). They would gather the documents, but not be responsible for documentation for the services themselves. They would be working with service providers (not providing the services directly) but would be responsible for the HUD specific requirements. The idea is to take part of the burden off the service provider him or herself.
- Jane/ AHS: Where is there an effective model? Anywhere in the world?
  - Denmark. In places like this, people have a right to housing. It's a cultural difference.
- Travis/ CVOEO: Two opioid clinics have opened in Chittenden County in the last 60 days. They've both come to our office asking for referrals: SaVida Health and Path Integrated Healthcare. Both for-profit. Counseling and Treatment specifically for opioid abuse. Savida is a proponent especially of Buprenorphine. They can prescribe it but not distribute it.
  - Lacey: I worked with a woman who paid \$175 month for prescription and doctor time. But Medicaid is still paying for the prescription.
  - They bill Medicaid. Not private health insurance, ONLY Medicaid.
  - What are they tapping into because we have no wait-list in Chittenden County?
  - They are getting people into treatment more quickly. They have connections to the for-profit rehabs and can get people in there more quickly. Out of state mainly.
- Travis/ CVOEO: I had a conversation with someone named David McKay of Rock point Episcopalian church interested in helping out. He's looking to see if he can be assistance.
- **RECRUITMENT OF NEW MEMBERS & LEADERSHIP FOR THE STEERING COMMITTEE**
  - Winooski housing authority has a new director. Let's consider this person.
  - BHA's new director.
  - Could COTS be our representative to the legislature?
  - Steve/ SSVF @ UVM: We need to reach out the hospital even more now that 211 has reduced hours.
  - Stephen: Let's look for leadership even beyond Burlington.
  - Jane/ AHS: There's a movement with Chittenden Accountable Community for Health (CACH) working toward providing healthy community working their hospitals (many Vermont communities have their own ACHs) — representatives include Thomas Moore, Molly and Lindsay at UVM MC — and I wondering if it might be possible to get a grant through the UVM MC to work with a small number of clients to help support the work needed as described above (support and training around super-intensive needs).

- o Travis/ CVOEO: It would help my staff if they just knew who to reach out to for help with the more high needs clients. Our bar is this: are they able to represent themselves around their housing plan? Are they able to hear you? If not, what good are we doing?
    - Lacey/ BPD: At BPD there's a grant to support a case manager around this particular population through the UNITED WAY.
    - Jane/AHS: Teaming with others is so much better.
  - Val/ CEDO: Let's work-on/ revisit housing retention issues ([let's look at our Strategic Plan](#)).
  - Steve/ SSVF: SSVF is about to roll out our new diversion program (RAPID RESOLUTION) to help Vets avoid homelessness. We'll report on how this is working.
  - Lacey/ BPD: The BoS is mulling over becoming a non-profit (5013C). Or being absorbed into an agency. It's very preliminary. This is part of their strategic planning; building the backbone and infrastructure for their CoC.
    - o What grant pays for ANDREA HURLEY'S position at BoS?
      - Their HUD grant pays, in part, for her position at the VSHA (as far as we understand).
  - **Let's look at the HOP grant report sent by Emily at OEO.**
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Please see our website [cchavt.org](http://cchavt.org) to find minutes archives, dates and more.

**Next meeting: 11/20**