

State Planning Advisory Committee Best Practices for Iowa's Homelessness System

January 23, 2014, 10:00 a.m. – 3:00 p.m.
West Des Moines Learning Resource Center
West Des Moines, IA

Meeting Summary

Committee Members Present

Julie Bockenstedt, Humility of Mary Housing, Inc. & Shelter, Davenport
Michelle Brown, Opening Doors, Dubuque
Jim Cain, Family Promise of Greater Des Moines, Des Moines
Crissy Canganelli, Shelter House, Iowa City; Policy & Planning Committee Co-Chair, Iowa Council on Homelessness
Ronelle Clark, YWCA Domestic Violence Sexual Assault Resource Center and Transitional Housing Program, Clinton
Carrie Dunnwald, Cedar Valley Friends of the Family, Waverly
Heather Harney, HACAP, Hiawatha
Michelle Hoyt-Swanstrom, Iowa Legal Aid, Ottumwa
Nicole Rethman, Domestic/Sexual Assault Outreach Center, Fort Dodge
Mark Sertterh, Shelter House, Iowa City
Tony Timm, Central Iowa Shelter and Services, Des Moines; Policy & Planning Committee Co-Chair, Iowa Council on Homelessness

Members Not Present:

Jeannie Kingery, Northern Lights Shelter for Men & Trinity House of Hope Shelter for Women, Mason City

Iowa Finance Authority Staff

Carolann Jensen
Amber Lewis

SPPG Staff

Stacie Bendixen
Indira Blazevic
Arlinda McKeen

Welcome and Overview of the Day

Arlinda McKeen, SPPG facilitator, welcomed participants and introduced the SPPG staff. Members were asked to introduce themselves and their organizations, and share why they wanted to be involved in this committee and in their work related to homelessness in general. Jeanie Kingery was not able to attend due to weather.

The Iowa Finance Authority staff members introduced themselves. Amber Lewis is the staff lead for the Iowa Council on Homelessness. Carolann Jensen oversees homelessness and housing-related work.

Charge to the Committee and Committee Member Responsibilities

The Iowa Council on Homelessness convened this committee with the following charge:

The State Planning Advisory Committee will recommend standards for outreach programs, emergency shelters, transitional housing, and permanent housing (including permanent supportive housing, rapid rehousing, homelessness prevention, and Housing First). Standards will cover:

- Performance
- Service
- Operations

McKeen outlined other responsibilities of this group. Participating in the four in-person meetings of the committee is important for meaningful collaboration. Members will also be asked to look at materials in between meetings, prepare for discussions with thought, and respond to requests for information. Members are asked to communicate with others in their regions to bring value to this process. The group will operate with a consensus approach to making recommendations.

Time Frame and Scope of Work

The time frame for this work is fairly short. The committee's four meetings and the report on recommendations for standards for performance, service, and operations need to be completed by the end of April. The group agreed that the best way to select dates for the remaining three meetings is for SPPG to send out a Doodle scheduling poll for members to indicate their availability.

Crissy Canganelli, a co-chair of the Council on Homelessness committee directing this work, provided background on the reason for this effort. The state needs to become compliant with federal HEARTH Act expectations, which have recently shifted to an expectation that programs operate based on standards. Those standards are not pre-determined or provided by the U.S. Department of Housing and Urban Development (HUD). Rather than leave each planning body to independently work through this process, the ICH has convened this Advisory Committee to develop standards common to all across the state.

It was acknowledged that the western part of the state is not represented on this group; staff made thorough efforts to recruit members from that area but none were able to accept. This is a gap in contributions to this process that should be kept in mind for future outreach and collaboration. There are special considerations especially related to Pottawattamie County (the Council Bluffs area), which works in a designated planning area with the Omaha metropolitan area.

Members were asked to discuss the benefits of a statewide homelessness system. Discussion notes follow.

- Being from a smaller area, there is a large potential for networking and learning from other areas so we can incorporate those skills and values. A concern from being in a rural area and going into a statewide service is that rural areas tend to get fewer services in the balance; things tend to gravitate toward urban areas with more population.
- It was acknowledged that, although funding is not the direct purpose of this effort, funding considerations are always an undercurrent.
- Jensen noted that, from the perspective of a funder of homelessness services (IFA), having all providers working with the same statewide standards would increase

confidence that funding is being given to organizations serving people well. It will raise the level of service and sustainability, making the funder's job easier. It would also reduce hesitancy about supporting smaller shelters. In summary, a statewide system would improve the equity that rural areas are concerned about.

- It gives us more comprehensive knowledge of the extent of homelessness around the state and the gaps in the service delivery system. It raises awareness of funding sources and resources that might exist in other communities. It strengthens advocacy efforts by increasing the capacity to mobilize on important issues.
- I have wanted to bring best practices to my little agency, and this will raise expectations, raise the bar, and we will be delivering the best services that are out there. We will more effectively help people.
- In addition to concrete benefits of gains in efficiency and learning from each other, there is a tangential benefit that we will professionalize homelessness services, and be perceived as professionals by policymakers and other programs and services. We are currently not seen as professional or important compared to other programs and services.
- You will be able to be more nimble in who you work with as this "industry" is developed.
- Discussions about addressing ingrained bias against the homeless should occur.
- Having benchmarks and standards will help us provide the best services that we can. At a regional level, it can provide guidance to those programs that do not receive HUD funding – their hearts are in the right place but they may not know what to do. They can do the same things we are doing. We collaborate anyway.
- It will simply make our job easier and give clients the best service possible. I tried to form a providers group once just to share best practices; it started but did not sustain. I am excited. We served our first transgender person last week; what are the best practices for serving transgender people, for example?
- Standard practice will improve services to very vulnerable people. It will open doors for communication.
- I hope staff working with clients will have standard basic skills and knowledge, no matter their level and role, or where they are located across the state.
- Staff development is currently done within individual agencies. With standards, resources could be combined to do staff development on larger scales together.
- Many homelessness programs are not equipped to deal with higher needs we are seeing, like mental health. A statewide system can better equip staff to handle these increasing issues.
- To effectively help a person, there needs to be someone who can effectively diagnose the problem and connect with appropriate services.

Summary of Outreach Findings

A document summarizing the outreach sessions conducted in December 2013 was distributed. McKeen reviewed the process that outreach session attendees went through to develop maps of "natural affinity areas" in homelessness services. Before the outreach sessions, SPPG had developed a map showing the most common natural affinities among counties. The map did not draw defined lines between regions, but shading of one color with gradients where they met demonstrated that a county does not always work with the same counties in, depending on the service or need. After the outreach sessions, based on feedback, the map was revised to show five distinct regions of natural affinity for homelessness collaboration. It was proposed that the group operate with this map of regions showing how providers tend to work together, which is based on feedback from the outreach sessions.

A few group members pointed out ways they collaborate with providers in their area that are different from the border reflected on the map. But members acknowledged that everyone could find these variances, which is why the map-drawing exercise was difficult – any map will not be perfect for everyone. The purpose of the regional map was asked to be clarified. For this statewide system planning, it will be helpful to know what areas generally use the same approaches because they collaborate, so input from someone representing that area is representative of others in the area. Also, HUD requires regional planning bodies. The group agreed that this map is reasonable to use for the purpose of this work.

The summary of the outreach sessions lists common populations and characteristics of people served that were identified. A member noted that the issue of race is not addressed in the summary; race was not mentioned in the outreach sessions generally though it may have come up at the North Liberty session. There was a theme of talking about other metro areas in the Midwest that many people come from. Transience of people in the Sioux City area moving in and out of the four tribal reservations and the general community was noted as part of that area's culture. It was asked if youth were discussed; for instance, one member's shelter cannot serve minors. Older youth were identified in the sessions, particularly those who have problems with their families and choose to or must leave their homes. People served are complex and diverse, making serving them a challenge.

Regarding gaps in services, an overall theme identified in the outreach sessions was a shortage of safe, affordable housing. Accessible housing was also mentioned as hard to find. Public and policymaker awareness of the problem of homelessness was also consistently discussed. An additional gap is housing for older people who are on the sex offender registry. An example was given of an older man who needed a nursing home placement, but because he was on the sex offender registry, no facility would take him, and he became homeless. Others agreed that they see this issue.

Another gap is housing for pregnant teens and teen mothers. Many shelters cannot take minors. A member gave the example that a provider geared toward families does not take unmarried couples with a pregnancy, because it would displace a single-father family with children or a two-parent family with children who cannot go to a shelter (when the pregnant couple can). The shelter does not take anyone with children so the shelter sends those families to the family-oriented housing provider. This demonstrates some necessary collaboration that occurs.

Youth aging out of foster care are an issue – many are 19- and 20-year olds. The cash benefit they receive is not enough to afford their own apartment, and even if they can, they face barriers such as landlords seeing them as too much of a risk compared to other potential tenants. There seem to be a lot of these youth. While they are in foster care they do not learn the skills they need to live independently. When they age out they want to cut ties with anyone telling them what to do because they have lived with that their whole lives. Understandably, youth do not always make the best choices – their brains are still developing.

Homeless veterans services were not identified as a significant gap in services in the outreach sessions. Veterans who are medically eligible have lots of opportunities for services. It is the veterans who are not medically eligible (not "recognized" by the Veterans Administration) who have nowhere to go. Eligibility for VA services is very complicated. The Supportive Services for Veteran Families (SSVF) program has narrowed eligibility – it used to be able to serve people not eligible for VA benefits, but that has changed and it now must follow VA medical eligibility. The grant per diem program has changed to a six-month program, decreased from two years; some people need longer to complete a treatment program. The decrease in length of program

availability has occurred because of a looming goal set by the VA that homelessness among veterans will be eliminated by 2015.

Vietnam veterans should still be eligible for SSVF, depending on discharge status, because the 24-month consecutive service requirement applies to those who served after 1980. Family Promise has not served many families with veterans; that is believed to be because many of those families have fallen apart. As a member put it, “We used to take boys out of their family homes and they are homeless when they come back to nothing; now we take men out of family units, they come back to their family units, and it takes a while for that to fall apart – the problems develop later. When a military conflict ends, we forget about the problem.”

The needs of individuals exiting the corrections system were discussed. It is an example of a system that is very well established that has been able to deplete funding sources, and it is not clear what is being accomplished. Iowa’s corrections system has lots of programs to help people transition out, but no decrease is seen in the number of homeless people coming from corrections. Individuals are supposed to have many resources and people working with them to transition, and that is not happening. There are anecdotes of corrections and mental health substance abuse treatment programs releasing people directly to shelters, or “dumping them” because the person has nowhere else to go, and those programs see it as not their problem anymore. People with a criminal record have difficulty getting into permanent housing. They also have barriers to obtaining employment and accessing other systems – it is universally difficult.

Key issues discussed in outreach sessions were summarized, and group members added points to the discussion:

- Funding – it is scarce, there are strings attached, and there is uncertainty about the economy and about unforeseen changes in funders’ requirements. Specifically, limits on using Section 8 funding for rent deposits was mentioned.
- Public policy at all levels – locally, state legislature, federally; public awareness, public official awareness, lack of existing policy about homelessness and system, lack of policy attention and recognition of homelessness as a legitimate issue for economic development, workforce, health, etc. – translate to lack of funding. There is frustration at the lack of organized education or advocacy efforts; no one is pushing for anything, and it will not happen without organized structure and intent.
 - There have been some positive developments, such as payday loan legislation, the shelter fund, and laws protecting domestic violence survivors and educating them on their rights.
 - Many times during outreach sessions, providers commented that people wait too long to seek help, and more could be done for them if they had come to the provider sooner. This is seen as indicating a need for public education on rights and available resources.
- Related public policy issues – Affordable Care Act, Iowa’s mental health system redesign. These are unknowns and could be opportunities and/or threats.
- Collaboration – it is seen as valuable and necessary; this initiative might be able to strengthen it.
 - A challenge for some providers is getting entities involved in helping them achieve goals they must meet to maintain HUD funding when those entities do not benefit from HUD funding. Getting buy-in when potential partners do not have the same financial incentive is difficult.
 - Good information comes from listservs, through which providers share their practices.

- Networking opportunities, such as state conferences, are great opportunities to learn from each other; more of those are needed.
- An example of a non-meaningful interaction was given: A shelter that is starting up or changing direction asked another shelter to send all its policies and procedures to help them establish theirs.
- Concerns exist about helping other services get started because some of the finite amount of money will be split more ways, meaning less for existing providers.
- Centralized intake and coordinated access
 - How will domestic violence shelters and other who are not on HMIS connect with a coordinated system?
 - A lot of rural providers are faith-based, and many of them do not want to get involved in a centralized system; organizers would need to find out what their concerns are and discuss how a coordinated system benefits them. Those providers reluctant to participate had experience with the system when there was little training available on how to enter data and they were being contacted often to correct things. Some faith-based providers express reluctance to use technology. For some, the issue may be having staff to handle it. A lot of data is missing from the overall picture because of lack of participation from these types of providers.
 - Smaller shelters do not have the manpower to participate in data sharing. Some have even had to withdraw from receiving HUD services because they could not keep up with the requirements.
 - It is said to be difficult to complete training and be approved to use Service Point; the intent is to increase standards so the input is quality and less work is needed on the back end to glean useful information.
 - Centralized intake should eliminate some data-related difficulties of small shelters. The benefit of coordinated intake for a small shelter would be that a central intake person would enter a client's information and someone at the individual small shelter would not have to repeat the process.
 - A statewide centralized intake is thought by some to be impractical, because of variance in programs.
- Evaluation and data collection
 - HMIS is not user-friendly now, for providers trying to get information from the system. Some experience strong support when they need help using it, while others do not and believe the level of support depends what continuum they are in.
 - The types of data and reports available from Service Point are limited. A member noted that she copies data in Excel to be able to manipulate it.
 - Different funding sources require different information; a provider may have to input similar information several different times.
- Statewide system infrastructure
- Homelessness services
 - Outreach programs
 - Emergency shelters
 - Transitional housing
 - Permanent housing – including permanent supportive housing, rapid rehousing, homelessness prevention, and Housing First

- Supportive services – child care and transportation are particular issues (areas of need); education, employment and training, financial literacy, problem-solving and life management skills

As this work progresses, this information will be referred to for rationale and context to inform recommendations.

The list of best practices generated in outreach sessions was examined. Areas that stand out as important going forward were discussed. Creating groups of best practices, such as “staff competencies,” was suggested. Admission criteria and staff background checks were suggested as additions to the list.

It was asked if a “standard” is considered a recommendation or a requirement. It was clarified that what this group puts forward will be recommendations to the Iowa Council on Homelessness, and the ICH expects standards to be minimum expectations of providers. Along with standards comes accountability, so the group will need to think about building in accountability and how things will be tracked and reported.

Standards – What and Why

Members were asked to discuss their perceptions of the receptiveness among providers for standards. Some negative or defensive thinking about the coming of standards and a statewide system was perceived during outreach. A forthright discussion of potential resistance and the mindset of those who may be against this is useful to have. Notes from the discussion follow.

- Defining what is meant by “standard” is important. Reaction will be different depending on whether standards are recommended practices or requirements. Some people naturally resist change; some programs have an attitude that they already know what they’re doing and resist others telling them what to do.
- Are there types of services provided that are less prone to acceptance or use of standards? It depends on the size and age of the entity, and at what stage of developing their organization and practices they are. Some resistance may be because they have limited staff and resources to carry out standards.
- Does it make it easier that at this stage that the result of this will be recommendations and not immediate directives? It depends on what changes programs are asked to make and how much education is provided. Some resist change no matter how long you give them to do it. It is important that this group and the Council on Homelessness are well-prepared to answer questions, provide ideas and support others in how they are to implement or meet the standards.
- Different philosophies of case management may be a factor.
- Some of the “best practices” listed in the outreach summary are too specific for statewide standards. The Council on Homelessness will not prescribe what programs have to do, but create guidelines for quality programs and to maintain funding.
- Recommendations for giving weight or “teeth” to the standards will need to be made. Tying it to funding will be important.
- Is it an advantage or enticement to providers to think that some of their peers are getting together to figure this out for them?
 - Some have the attitude that if they are not involved in developing the standards, they will lose points on their application and they will lose funding.
- Should standards be set around the purpose and scope of HEARTH performance measures?

- NOFA (HUD Continuum of Care Notice of Funding Availability) directs programs to be selective or targeted about accepting clients in Continuum of Care programs, rather than accepting on a “first come, first served” basis – for instance, a program should go seek out a family that is chronically homeless when there is a space available for that client type. An example of a standard is how to prioritize who to serve, but it would not go into details such as how long to leave a unit open until it is offered to the next person.

The HUD Performance Measures and Service Priorities for Homeless Assistance Systems document was distributed. It was expressed that HUD guidelines can be unclear. For example, “dedicated to” and “prioritized for” seem to have different meanings but are used confusingly, and that interpretation has large impact on providers’ decisions.

Members also received a handout on Minimum Expectations for Recommended Common Standards, explaining areas of content for performance, service, and operating standards.

Service Standards and additions to the Service Standards categories were discussed.

- Determining “client shares of cost” and determining type, amount, and duration of assistance relates to long-term housing, such as assistance for rental or leasing costs. This category would involve making sure that everyone understands the HUD expectations, and recommending guidelines for areas that are not already specified. Various eligibility criteria and defined standards demonstrate the complexity of figuring these things out. An example of a decision for a standard might be whether personal pay should be allowed and to what extent.
- Having an appeal process for denial of services, removal, or termination of services should be added. A standard could be that there has to be an appeal process, but would not specify guidelines on what it must involve. Basic principles and protocols for an appeal process could be given.
- Working with landlords or using landlord agreements should be added. For example, for ESG, having a landlord agreement is required, and there are a lot of questions about what that should look like. There is some guidance available that could help with developing a standard on this.
- “Informed consent” should be added.

Additions and questions for the **Operating Standards** categories:

- Personnel – level of education, staffing ratios, criminal history
- “Compliance” refers to compliance with funding requirements, with city code, building inspections, etc.
- Human Resources – drug-free workplace, conflict of interest policy, equal opportunity
- Finance – annual audit (type of audit depending on how much HUD funding is received), general bookkeeping
- Confidentiality policies, securing records
- Notice that Service Point is being used
- Elements that would be in Administration category:
 - Governance and structure – having a board of directors
 - HUD requires providers to have homeless or formerly homeless people on their boards. It can be difficult for them to stay on boards; some have found that it works better to have them serve on board committees.
 - Recruiting board members is difficult in rural areas; organizations might have to provide transportation and child care stipends.
 - Many boards meet monthly, some every two months.

- Enroll in SAM system
- Insurance coverage: liability, umbrella, directors and officers. The Nonprofit Resource Guide lays out standards of excellence.
- Bylaws, articles, state filings
- “Meet recommended standards for nonprofit excellence (as provided in the Nonprofit Resource Center’s resource)” could be a standard.
- Annual audit
- Client files and records, storage (how, where, how long to store records). HUD has different standards for different pots of money on how long providers need to keep files.

It was noted that it should be remembered in discussions that there are providers that do not receive federal funding – they may receive get state funding no public funding at all (such as faith-based providers). General expectations of providers, no matter their funding stream, were discussed. For example, “Identify eligibility criteria” could be a standard – the standard would not specify what the criteria should be, but would set the expectation that each provider establish them.

These recommendations for standards could cover requirements for HUD-funded programs, and they could be presented to other providers as helpful models with encouragement to use them. It was suggested to put standards into graduated categories, such as standards that are minimum or basic and standards for a higher level of services (indicators of an “advanced model”).

To help providers implement standards, a checklist for each of the areas was suggested. A clearinghouse or resource list of people with expertise in particular areas that providers can consult would also be useful; this could help make the changes more doable.

Members were asked to communicate with other providers in their regions between meetings during this work. Members should inform others that this group plans to develop recommendations of what all providers should be doing to provide quality service, and gather others’ feedback about those plans. An online survey may be conducted to get feedback on the proposed standards. It will give a sense of how hard it will be to meet these standards. A paper version of the survey can be provided for members to distribute to providers who do not use technology regularly.

HUD Performance Measures

The group reviewed the HUD Performance Measures, which are outcomes or objectives, while a standard would be a statement of what should be done to achieve an outcome.

Members discussed concerns about programs’ varying ability to achieve measures like these, such as clients’ income increasing, due to varying resources. Pressure to meet such measures can result in providers tending to exclude potential clients who may hurt the provider’s performance in relation to the measures. There are many ways to measure success and progress, so ways to show progress that clients did make, even if the performance measure is not met, are desired, but are complicated because benchmarks of progress are different for different types of providers.

Amber Lewis clarified that these performance measures are *system* standards, not expectations for individual programs. The state has defaulted to using these performance measures because nothing else has ever been developed. These high-level performance measures do not really

even apply to individual shelters. The group needs to keep the system standards in mind, but is free to recommend standards for providers that it feels are appropriate.

It is hoped that a more objective process for grant review results from the development of standards. Grant review is currently somewhat subjective and consists of individuals compromising on a score for an application. The existence of standards would help IFA because it would know what to evaluate providers on.

It was asked if standards would vary by geographic area; they would not, because if there was variance there would be no standards. It was suggested to start with a baseline level and make standards more detailed and move the bar up over time. It was also suggested to find out reasonable standards to start with by conducting an assessment that asks providers to identify where they currently are in relation to each of the proposed standards.

Challenges in reaching rural areas that do not have formal systems for homelessness services in place were discussed. In areas without formal services, people may be assisted through churches or law enforcement, or a family or friend telling people where they could go. It will be challenging to disseminate something like a survey in some areas, where there is not a network. In this outreach, SPPG has used other known avenues like community action agencies to reach organizations that deal with these issues where there are not actual homelessness services. It was suggested to go through the statewide association of community action agencies. It is thought to be important to keep momentum with people who are engaged, rather than expending a lot of energy trying to get more and more people involved. This effort will naturally expand as it goes.

Going Forward

The facilitators will bring to the next meeting the expanded list of service and operations standards categories to develop standards within, so the group can start drafting standards in those categories. Between the second and third meetings, staff can probably send out a survey to get feedback on what is developed so far. The handouts given at this meeting will be posted on the Council on Homelessness website, with the categories that this group discussed added to the Minimum Expectations document.

Group members discussed talking with their colleagues and other providers in their regions about priorities for services. One said she would conduct an in-house survey of what is important. Many areas have coalition or collaborative meetings already set up. Members were asked to share the discussions from this meeting and start brainstorming elements of standards.

SPPG will send out the “homework assignment” and links to the resources discussed, such as the Nonprofit Resource Center standards. Members asked that the best practices listed from the outreach sessions be grouped in the performance, service, and operations categories, for working purposes, so nothing is missed.