

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

April 17, 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. & Humility of Mary Shelter, Inc., 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
Nicole Rethman, Domestic/Sexual Assault Outreach Center, Fort Dodge
Jan Rutledge, Iowa Legal Aid, Iowa City
Mark Sertterh, Shelter House, Iowa City
Tony Timm, Central Iowa Shelter & Services, Des Moines; Policy & Planning Committee Co-Chair, Iowa Council on Homelessness

Members Not Present:

Heather Harney, HACAP, Hiawatha
Michelle Hoyt-Swanstrom, Iowa Legal Aid, Ottumwa
Jeannie Kingery, Northern Lights Shelter for Men & Trinity House of Hope Shelter for Women, Mason City

Iowa Finance Authority Staff

Amber Lewis

SPPG Staff

Stacie Bendixen
Arlinda McKeen

Guests

David Eberbach, Institute on Community Alliances
Ehren Wright, Institute on Community Alliances

Welcome

Arlinda McKeen, SPPG facilitator, welcomed the committee members and guests to the committee's final meeting. David Eberbach and Ehren Wright from Institute for Community Alliances, the state's HMIS (Homelessness Management Information System) administrator, were present for discussion on data tracking related to performance standards. Committee members introduced themselves.

McKeen asked for updates or feedback from members' peers in their regions, in general or about the electronic questionnaire that was distributed for providers to indicate where they stand in relation to a sampling of the draft standards. One member noted that both he and a staff member at his organization completed the questionnaire and he discovered that they had different perspectives. Another member reported that a faith-based provider in her area questioned the purpose of these standards.

Performance Standards – Discussion with HMIS Data Staff

McKeen reviewed the committee's charge and the committee's responsibility to review recommended performance standards in relation to data collection to demonstrate performance. The committee's definition of a standard was also reviewed emphasizing that these standards are to be applied at the organization level, rather than at a community or system level. The term "high-performing" has been removed to reduce confusion with existing expectations for high-performing communities.

Discussion on how to identify performance measures began. The committee discussed whether these standards call for qualitative and quantitative measures of performance. One said more qualitative than quantitative; others said it depends on the program. Numbers are sometimes used to measure performance. What is needed for performance measures are ways that organizations can tell how they are doing. Measuring numbers is difficult sometimes, or takes a different shape for different kinds of programs and organizations. For example, a shelter with fewer beds may have a higher turn-away rate. The goal is to identify what is reasonable to track without an undue tracking burden. Eberbach said that the HMIS administrator shares that goal and is sensitive to data tracking responsibilities that agencies already have. McKeen agreed that the goal is to identify data points already being collected that can be used to demonstrate these standards too.

The draft standards for organizational performance were discussed in relation to data collection and performance measures, with the HMIS personnel contributing their perspectives.

Standard 3.1: "Ensure that clients have the opportunity to choose to be off the street." How can that be measured?

- This seems like more of a system standard. It could read like a given organization is expected to accept everyone who asks for shelter. Why are we being evaluated on their decision whether to enter our program or not?
- An organization would not be evaluated on that – the standard is about providing the opportunity to choose to participate.
- An organization cannot ensure that that opportunity exists because there might not be a bed available.
- There was consensus that these were all indicators of a high-performing organization. Quantitative information can also explain performance.
- It could depend on the type of program. For example, for outreach, it could be tracked how the organization assisted the person, such as providing information about where they could find shelter.

- Eberbach: This should not necessarily be an individual agency measure because of how much is out of an agency's control. Turn-aways and capacity are what could be measured on a system level. For outreach, "engagement" may be a better term than giving people the opportunity to be off the street, because an organization cannot accomplish that, so they should not be penalized, but get credit for what they can do.
- In rural areas, there is more emphasis on outreach and connecting with resources because there are not as many actual providers available.
- Eberbach: Some of these things do not apply to Prevention, like if a person is already in housing and they do not need the opportunity to get off the street. Prevention connotes, for example, rental assistance.
- Facilitator: There was extensive discussion that people should have a choice to be on the street or not. The discussion concluded that choice should be respected but they should have the opportunity.
- Why would that apply to my shelter? I do not go out and find people to come into my shelter; they come to me. I do not force people to come into my shelter.
- You are offering the option to be off the street.
- No one can ensure they have the capacity to provide the opportunity to everyone who may choose to be off the street. This is a systems question – is there capacity in the community to meet the need?
- All this first standard says is that opportunities are provided and clients' choice is respected (rather than "organizations ensure that people are off the street").
- The city of Des Moines says they are going to start forcing people to leave their encampments. So they are forced to choose shelter or jail.
- This is a good opportunity to look across organizations and collect information multiple times a year on organizations that provide the opportunity, and what happens with people who choose to take the opportunity, and qualitative information about why some could not be accommodated.
- Could it be more about barriers? Identifying and addressing barriers?
- It comes down to capacity.
- It's a good opportunity to collect information on how many people were not able to be accommodated once they made the choice, to show the unmet need in communities.
- When the domestic violence field went to standards of operation, it started like this. These will grow and change with us. What the domestic violence system learned from data on people that providers were not able to serve showed where the needs were and what resources needed to be developed. We have to learn what we have in our communities.
- This will also show us where assistance in meeting these standards is needed.
- That information could be captured by tracking, on organizational level: how many beds you have, how many beds are full, how many people you turn away, qualitative information on why those people were turned away, and where you referred them.
- Could a standard be "A high-performing agency tracks turn-away information"? It's a given.
- It's not a given for everyone.

- Are there organizations that force people to come in?
 - An anecdote was given about a faith-based organization that brings in prostitutes unwillingly.
- How is it harmful to have language that we as organizations embrace this as a direction to go in?
- Is it a problem if cities are enacting policies that are in conflict with these standards?
- It gives us information to show why these standards are important.
- Quality agencies will understand these. There will always be agencies outside the mainstream who do not feel they need to use these standards.
- Facilitator: The reason to have standards is to articulate what a quality organization looks like. There will be those who do not adopt these practices. For those interested, we are trying to show what needs to happen to make programs work. It should raise all boats.
- Wright suggested changing “clients” to “encounters” or “people” – at this stage they are not clients yet.
- There are a lot of different entry points that we are trying to cover with these standards.
- We understand that we are not at the implementation stage.
- We are not making decisions today about what will be tracked and how to track it.

Standard 3.2: Ensure that clients have basic needs met, e.g. food, shelter, clothing, safety.

- Eberbach: My first thought was that we can track services. Then I wondered if the standard meant that an organization will provide all these things.
- There are some programs that require clients to agree with their beliefs in order to serve them (faith-based providers).
- My shelter does not provide food but we can refer them to where they can get food. We facilitate access to food.
- This is a client-centered set of standards for what organizations should see that clients can access.
- Add “access to” – ensure that clients have access to basic needs.
- Are you measuring this by the referrals and the services provided, or by the fact that at your agency this is your standard operating procedure?
- Measuring whether your clients have this access.
- Both – it helps me demonstrate the unmet need in my community when seeking funding.
- It seems like a lot of work for an agency to start tracking this information.
- Standard revised to “ensure that clients have the opportunity to have basic needs met, e.g. food, shelter, clothing, safety.”

Standard 3.3: Ensure that clients have the opportunity to connect with mainstream resources.

- This one is clearer.
- My agency has struggled with the definition of mainstream resources. We decided that mainstream resources were food stamps, Social Security, things like that. Is health care a mainstream resource? Will agencies not familiar with this terminology know what this means?

- Non-cash benefits.
- This is designed around the HUD categories.
- Non-cash mainstream resources.
- Wright: I saw this as maximizing the quantity of sources of resources available, and the standard about increasing income as helping clients make sure they get the maximum amount they can from each source. It does not seem like this would apply to outreach and prevention.
- My agency's tracking system tracks at point of entry and point of exit.
- Eberbach had concerns about expecting this standard of emergency shelters and outreach programs, because they work with clients for such a short time. It is not something HUD expects. HUD wants people to spend less time in shelter; that is in conflict with doing more with them while they are there. A program should not necessarily be held accountable for increasing a client's income if they are only there for 20 days.
- That is why this standard is about providing the opportunity to connect with resources. The standard is not "ensure clients *receive* resources." This is just about making people aware of what is available and how to access it.
- How do you create a baseline to show when clients have already received resources so you did not need to connect them?
 - Measure the service of doing an assessment to make sure the client is connected to resources. You get to say you ensured they were connected.
- Is mental health care or community, physical health care part of mainstream resources? Are those mainstream resources or basic needs?
 - They are considered mainstream resources. But they are not on the HUD list.
- Facilitator: In the homelessness services industry, are health care and mental health care considered basic needs?
 - No, food, clothing, shelter are considered basic needs; health care, etc. is considered secondary.
- Standard revised to: "ensure that clients have the opportunity to connect with mainstream resources, health care, mental health care, substance abuse treatment, and legal services."

Standard 3.4: Ensure that clients have the opportunity to connect with resources to increase income.

- Cash and non-cash?
- When I think of income I think cash.
- Non-cash income sources are under mainstream resources.
- Earned income is a separate standard.
- Income can include benefits for those who cannot work, such as FIP, child support, and veterans benefits.
- This will be confusing for readers.
- Eberbach: This information is what is collected for HUD anyway from most programs, but not necessarily from emergency shelters.

There was no discussion on standard 3.5: Ensure that clients have the opportunity to pursue earned income through employment, if appropriate.

The three remaining standards are:

3.6: Support clients in their progress toward identified goals.

3.7: Assist clients in managing identified barriers.

3.8: Support clients in achieving financial stability and long-term, safe, housing.

These three relate to case management, so it was decided previously that they do not apply to outreach. It was asked whether these three standards apply to prevention programs. Discussion was held on the applicability of the three final standards to outreach and prevent programs.

Discussion notes follow.

- True prevention models do not do case management.
- Why would outreach programs not help people progress toward identified goals?
- What do we want to set as a standard? I would like to think than an outreach program would help homeless people toward goals such as finding housing.
- In rural areas, outreach looks very different. For example, a person might walk into a church and need help with food or gas.
- Statewide, holding outreach programs to this standard would be difficult because not all operate at that level.
- The most basic goals people may have that outreach could help with (finding shelter, having needs met) seem to be covered by the first two performance standards. If a person gets deeper into goal planning, the services they are receiving would be further along the continuum than outreach. It would be more long-term than what outreach does.
- Making progress toward goals and managing barriers seem like two sides of the same coin – if you are into progressing toward goals it is because you have barriers. Do we need to measure them separately?
- Our outreach workers have longer-term relationships with people where they check back in with people after providing for needs.
 - That sounds more like the first three standards than 3.6.
- Des Moines is somewhat unique in having camps where many homeless people are present long-term and outreach workers can work with them consistently. It is not a typical outreach model.
- Eberbach: HMIS can track goals. There is also a tool called the Self-sufficiency matrix where people can be rated on various factors in self-sufficiency and be placed on a spectrum. It is not clear how barriers would be measured.
- Agree that barriers are the other side of goals – part of working to achieve goals is addressing barriers.
- Facilitator: Progress toward goals and managing barriers were originally together in one standard, and they were separated.
- I like them separate because the client might have goals for what they want to work on that are different from the barriers we see that are preventing them from making

progress. Measuring barriers also gives us a community-wide view of barriers, such as a lack of housing for people coming out of the criminal justice system.

- Considering barriers separately gives you the opportunity to see and record things the client may not recognize.
- Do all providers need to handle that in the same way as a best practice?
- Is it that we want to see specific goals being achieved, or general progress?
- Sometimes client-identified goals are not directly related to addressing immediate barriers that are preventing them from staying off the street. That may be why we separated them into two standards.
- Goals are different when a client is living in a temporary emergency shelter rather than longer-term housing.
- If your client has identified an unrealistic goal, the provider's job is to help them identify and come around to what they should work on right now.
- Sometimes you have to help them resolve their most immediate concern before you can get anything else accomplished. For example, there was a woman in a shelter who needed to ensure her dog was safe and she could visit it before she was ready to address other issues.
- Basically, good programs have a case management component.
- It seems inconsistent that our philosophy at the beginning of the performance standards was all about client choice, and now we are talking about telling clients what we think their goals should be.
- Use the wording "mutually identified goals"?
- I saw this as referring to clients' goals. "Mutually identified goals" gives the provider more authority than I had in mind.
- What about goals that will not directly advance a client toward housing stability?
 - Yes, we have a role in helping with those if it relates to their life stability. An example is a goal of getting a divorce from a spouse the client has been separated from for years.
- The action word used in the goals standard is "support"; the barriers standard is "assist." That is intentional to convey different roles for the provider.
- Standard 3.6 is a "yes or no" – you are or are not giving them the opportunity to make progress toward goals. Assisting with managing barriers is more active.
- Some of it is managing expectations.
- Goals and barriers are intertwined. You usually have to help address barriers in order to make progress toward goals.
- If people come in and want to improve their lives in some way that makes sense, why not support them in doing that? That is a whole-person approach.
- In the services standards there is one about an organization having a code of ethics – using a whole-person approach part of operating ethically?
- Assisting in managing barriers may involve helping address circumstances beyond a client's control, such as finding accessible housing for a person with a disability.
- Are these an organization's goals or a client's goals?
- An organization's goal for a person might be related to religion.

- It was suggested to change the wording of standard 3.6 to “support clients in progress toward *their* identified goals.”
- Leave the language general in the standard about barriers.
- Barriers to what? Housing stability? Helping clients achieve housing stability is the ultimate goal of homelessness services, and barriers to other things like employment and income are also barriers to ultimate housing stability.
- What if a client’s identified goals are unrealistic or not something it is your organization’s mission to help with?
 - An organization can have internal processes for what you record as a goal for the purpose of what the organization is working with the client on. For example, a client may have a goal to earn a master’s degree; the person can have that goal but it would not be tracked by the organization as something they are working with the person on.
- Eberbach expressed concern that agencies are taking on more responsibility than they should to do everything. We are putting more pressure on agencies to do more with no more resources. There are a lot of people cycling through due to factors we cannot fix, such as not qualifying for certain types of assistance. There is concern that the lowest expectation is higher than what is achievable.
- The purpose of this initiative is to set standards for quality programs that organizations should strive for if they do not already meet them. The goal is to raise the quality of services overall.
- My organization may not be always be able to say we meet all the standards that we do meet now, such as 3.8, if my funding is cut and I have to cut services. Then you document it and show the impact to make the case for investing in services to meet demonstrated need.
- 3.8 says programs support clients in “*achieving* financial stability and long-term, safe, housing” – that sounds like that when clients leave my shelter they have secured stability.
- This is also about providing the opportunity.
- Should the standard say “achieving *greater* stability”? That is, the client is in a better situation than they were before after receiving services?
- It is good to end the standards on a high note.
- It says “supporting.” How could we have standards for homelessness programs that do not set the expectation that programs support people toward achieving housing?
- I like “increasing” versus “achieving.”
- Eberbach: This standard as written would require intermittent long-term follow-up and you would need to define “stability.” This standard seems to require a systems change.
- Standard 3.8 should not apply to emergency shelters. Or a different standard could be written for emergency shelters that calls for supporting client in their efforts to obtain housing of their choice. There are people in our program for a week who then go to a motel, because they do not want to be in a shelter and they got their tax refund so they can afford a different situation.

- But how can we not say emergency shelters should contribute to progress toward stable housing?
- “Support clients in increasing financial and housing stability”? Dialogue about whether standard 3.8 should apply to emergency shelters:
 - That is fine as long as it does not apply to short-term shelter. People do not achieve financial stability in 90 days.
 - That is not the intention of this standard (to expect that a client’s situation is fully resolved in a short time period). The overarching approach should be that no matter how long a client is with you, you do have a role in supporting their progress toward stability.
 - This standard should not apply to emergency shelters, but add a standard for emergency shelters about supporting clients in obtaining housing of their choice. It is not the shelter’s responsibility to help clients achieve financial stability and long-term, safe, housing; it is all the other programs’ responsibility.
- This standard is simply about making sure clients do not return to homelessness when they leave your program, no matter what type of program it is.
- I do like “housing stability” instead of “long-term housing.”
- The wording “housing of their choice” is problematic – their choice of housing could be unrealistic. If they cannot afford their desired housing long-term, it is not a good idea to support them in getting there. That situation is not stability. They will cycle back into shelters when they cannot afford their choice.
- “Choice of housing” instead of “housing of choice.” This wording assigns more agency for the client – they have some say in where they are going to live.
- “Affordable housing”?
- We have an aftercare program to follow up with people after they leave us.
- It is true that it is not in the domain of the emergency shelter to put people in permanent housing, but the intention and guiding principle of all homelessness services is to move people toward housing so they are not homeless anymore. That is why we exist. “Client choice in housing” is an unfamiliar concept to me. “Housing stability” means something other than homeless.
- “Housing of choice” is about avoiding the provider telling a client they have to go into a certain housing situation.
- This is about supporting an informed choice
- Should financial stability and long-term, safe, housing be addressed in separate standards?
- As a communication tool, for another provider or the public reading this, “housing stability” says this person’s situation has improved from when they were homeless.

It was agreed to reword standard 3.8 and to exclude emergency shelters from it, and to add a standard applying only to outreach and emergency shelters regarding supporting clients in making informed choices in housing. SPPG will revise the draft performance standards based on consensus reached in this discussion.

To wrap up discussion of the standards related to data collection and measuring performance, McKeen noted that the HMIS providers had been provided a flavor of the standards' focus on clients and the distinctions between types of programs that need to be worked through further. Part of SPPG's responsibility is to work further through the performance standards and measures in collaboration with the HMIS provider. SPPG and the co-chairs will continue to meet with the HMIS provider to work through needs for data tracking related to these standards.

Review of the Committee's Report

Prior to the meeting, the committee had received a draft of the report that will be submitted to the Council on Homelessness as the product of this committee's work. McKeen guided a review and discussion on the draft. The preface gives background and context on the delivery of homelessness services in Iowa. The introduction provides information about this project to develop recommended statewide standards. A revision was noted in the introduction: "Polk County and West Des Moines" is the correct phrasing for one of the Continuum of Care areas. The State Planning Advisory Committee section lists the committee members and describes its charge, role, and process. An introductory page to the standards themselves explains the committee's definition of standards and approach in developing them. It is noted before the lists of standards that operations and services standards apply to all types of programs. McKeen explained that the order of standards categories (operations, services, and performance) was chosen so that the ones read first are those that readers are likely to recognize that they are already doing or can easily accomplish. Preceding the performance standards there is an explanation of the different nature of these compared to the operations and services standards. The performance standards will be modified based on the discussions earlier today.

An implementation section was drafted based on the committee's discussions so far, including a year-long timeline with recommended strategies for implementation. First, the Council on Homeless would need to make a decision to take action on these recommended standards and decide how to approach implementation. For example, the Council could consider phasing in the implementation or doing a pilot, offering trainings, and determining how to use communication tools. The final section describes the committee's process.

Implementation Strategies

McKeen asked for feedback on the draft report and discussion on strategies for implementation. Notes from the discussion on implementation standards follow.

- Providers could be asked to complete an anonymous self-assessment to establish a baseline of where they are in relation to the standards, and a follow-up assessment later to show any progress.
- Providers do not have to adopt these standards, unless their funder makes them a condition of funding.
- There are other ways to instill this kind of systemic thinking, such as trainings.
- The implementation time frame does not include who should be responsible for each step. Should it?
- The decisions on these questions should come from the Iowa Council on Homelessness, not IFA.

- I am excited for the opportunities this should create to talk about what is happening in other parts of the state, even within my region.
- It was decided not to include examples with standards (such as examples of language for a certain written policy called for by a standard), because it could lead providers to think they need to do things the same way the examples show. McKeen suggested the use of Wikispaces websites that allow members to share resources and exchange ideas in a statewide forum; low-cost methods like this to facilitate collaboration could be explored. A train-the-trainer approach could also be used for outreach and information sharing.
- Funds for such implementation efforts could be available if the Legislature approves an appropriation currently being considered.
- It is important to invest in supporting the success of implementation of these standards.
- It is difficult (time and money) for providers throughout the state to come to Des Moines; holding regional gatherings throughout the state would help. Providers want to gain knowledge and are passionate but many do not have enough resources to participate when it involves large amounts of time and travel.
- The executive council of the Iowa Council on Homelessness will review the report and have their questions answered, and if the executive council reaches consensus of support, the recommendations will be presented to the full Council on Homelessness at its next meeting on May 16. If the Council adopts and agrees to move forward with implementation of these recommendations, they will be presented at the statewide homelessness conference in June.
- The Council could give certifications to organizations that meet these standards, similar to the Nonprofit Resource Center model. It would be cumbersome initially for organizations to present documentation to earn certification, like for any type of accreditation, but may be worthwhile.
 - There is some concern about implementing procedures that will require significant time and effort, because that would naturally be easier for larger organizations with established structure to accomplish.
 - Domestic violence providers participate in a model like this. Accreditation like this does lend a lot of credibility. Webinars could be used to deliver training – it does not have to involve travel. The Iowa Coalition Against Domestic Violence would probably be willing to help by providing use of webinar technology. Trainings could involve topics like ethics and how to conduct background checks.
 - Several members said they would volunteer as peer reviewers for a certification/accreditation process.
- Before trainings, and other activities move forward, performance measures should be identified.
- Committee members were encouraged to attend the May 16 Council on Homelessness meeting in person, if possible, to participate in discussion on this work. Travel costs for committee members to attend the Council meeting can be covered.

Responses to Questionnaire on Example Standards

An electronic questionnaire to gauge response from homelessness service providers to the draft recommended standards was sent by email to everyone who attended an outreach forum last fall and others on the outreach lists compiled for this project. Committee members agreed that the questionnaire struck the right tone. Summary results of questionnaire responses were presented. Most of the service standards have the majority of respondents saying they already have them in place. Comments from respondents who said a standard cannot apply to them were shared. It was evident that some respondents chose “cannot apply” for standards they do not currently meet, but it is not the case that the standard actually does not apply. Some comments are seen as demonstrating the need for standards. Overall, it is clear that many providers already meet these standards. The same is true for operations standards – large proportions already meet the standards. Again, the comments show a need for standards and for education about the value of standards and the idea that these were developed as common, broad standards. Another key message to providers will be that these standards were developed by their peers. These standards are things to be excited about and to work toward. And, some providers do not know what to do, so these can be a guide.

The first group of performance standards on the questionnaire were the five that apply to all types of programs. Members discussed how it is human nature to respond defensively to things perceived as directives, and the committee could use the comments to help identify how to approach reassuring peers. Many of the comments are similar to points that came up in the committee’s discussions. The second group of performance standards were the three that apply to all program types except outreach.

Responses to questions about which region(s) respondents are located in, what services they provide, and what types of public funding they receive (if any) were also discussed. There was a good sampling of types of programs and geographic areas, with particularly strong response from northeast Iowa. One-third of respondents to the funding question do not receive any public funds from the sources named.

A member asked to receive the questionnaire results to share with her board.

Open-ended comments at the end of the questionnaire also demonstrated the need to frame these standards as ways to enhance organizations’ resources and help them provide quality services, to counter the perception demonstrated by several comments that having to comply with these standards will take resources away from providing services to homeless people. Conducting outreach that gives providers a chance to ask questions and understand the intent of the standards before trying to train them on implementing the standards will be important. The outreach can convey that these are positive visions for how we want to provide services in this state, and providers are encouraged to do as much of this as they can. Committee members can tell their peers that they felt some of the same concerns at the beginning of this process and have come to view the standards as positives. At the same time, a member expressed, it should also be conveyed that ignoring the standards will probably have consequences in terms of ability to provide quality services and keep pace with other providers.

It was suggested to provide copies of the final report of standards to mayors of communities. United Ways may also adopt standards like these. These can contribute to elevating the homelessness services industry professionally and build more credibility. That was true among domestic violence service providers that went through a similar systems change.

Closing Comments

Committee members who sit on the Council on Homelessness are in a good position to advocate for the report with the full Council. A report incorporating revisions discussed today will be sent as soon as possible to the committee, and committee members will be asked to reply with comments in a short time frame. Then the recommendations will go before the Council on Homelessness executive council and then the full Council for action.