



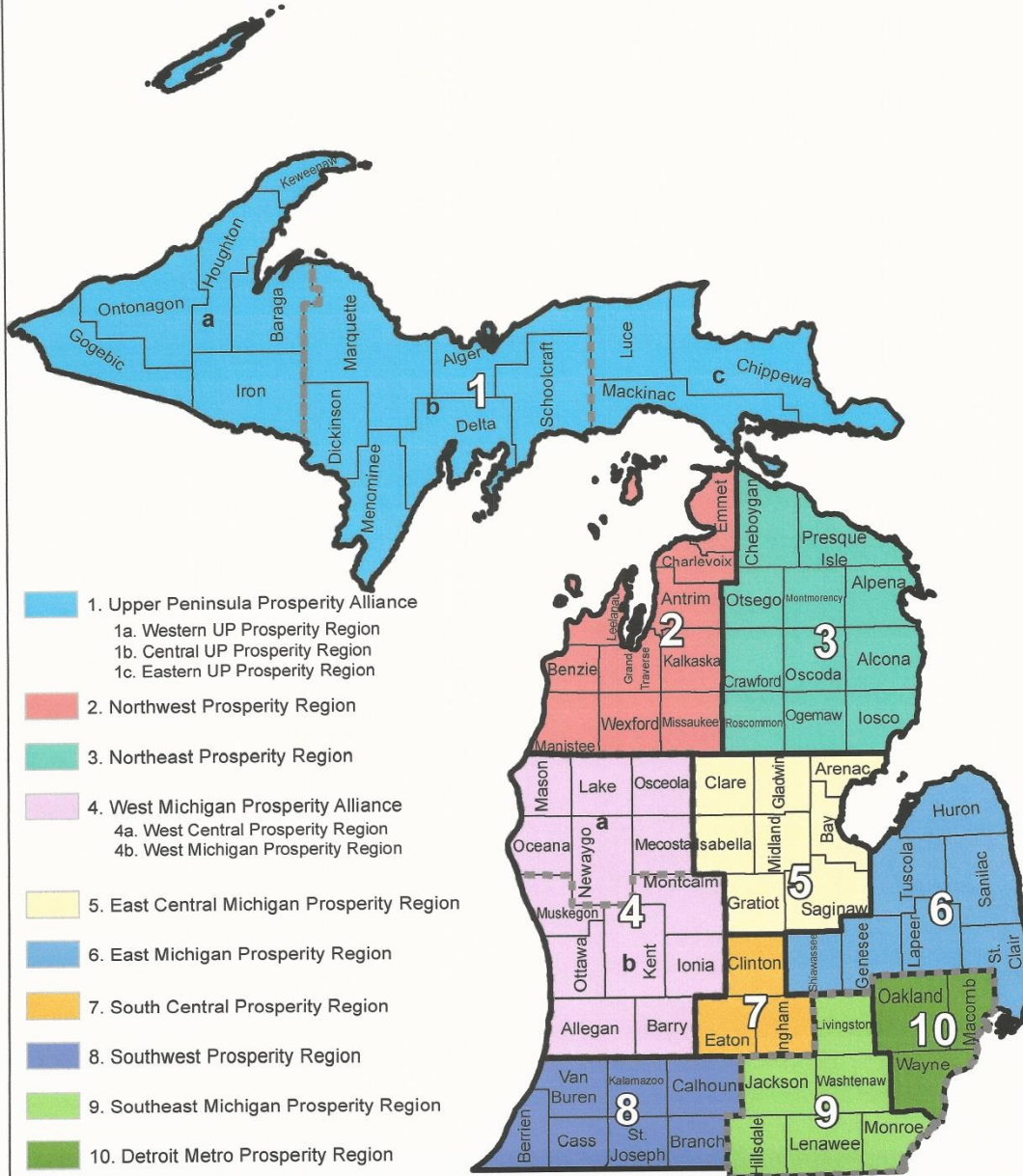
# Northwest Michigan Continuum of Care

## COC MERGER MADNESS- A RURAL COORDINATED SYSTEM

MELODIE LINEBAUGH

TINA ALLEN

# State of Michigan Prosperity Regions



- 1. Upper Peninsula Prosperity Alliance
  - 1a. Western UP Prosperity Region
  - 1b. Central UP Prosperity Region
  - 1c. Eastern UP Prosperity Region
- 2. Northwest Prosperity Region
- 3. Northeast Prosperity Region
- 4. West Michigan Prosperity Alliance
  - 4a. West Central Prosperity Region
  - 4b. West Michigan Prosperity Region
- 5. East Central Michigan Prosperity Region
- 6. East Michigan Prosperity Region
- 7. South Central Prosperity Region
- 8. Southwest Prosperity Region
- 9. Southeast Michigan Prosperity Region
- 10. Detroit Metro Prosperity Region

Service Delivery Regions

# FOUR CONTINUUMS MERGE

Char/Em

2 counties

Charlevoix &  
Emmet

Greater Grand  
Traverse Area

5 counties

Antrim, Benzie  
Grand Traverse,  
Kalkaska, Leelanau

Manistee

1 county

Manistee

Wexford/  
Missaukee

2 counties

Missaukee,  
Wexford

# MAJOR CONCERNS

- Who is going to be the HARA?
- We all get our same amount of money, right?
- We must keep local control!
- Traverse City will take over.
- Why does Grand Traverse get to go directly to HUD?
- We all get our same amount of money, right?

You need an independent Facilitator/Coordinator  
with no ties to any agency!

Goal of the Meeting	Meeting Outcome
Define the roles of the local planning bodies vs. the role of the larger Continuum of Care	Choose Coordinator, How decisions are made, which decisions are made by which body, committee needs and structure, meeting schedules, MOUs, how this COC fits into current Region 2
Define the overall service delivery plan	HMIS and staffing needs, CQI, HARA service delivery and accountability, efficiency/efficacy of local vs. larger body, training/continuous
Design the funding model	HUD and MSHDA funding distribution model (quantity and process), system for funding requests
Develop by-laws and policies	Use earlier discussions/definitions to develop formally written documents
Begin to discuss regional plan to end homelessness	10 year plan for overall COC
To be determined by earlier discussions	Be prepared for merge on October 1st



# WE HAD MORE IN COMMON THAN WE THOUGHT

## Combined

- By-laws
- 10 Year Plan

## Created new

- By-laws
- Policies and Procedures
- 10 Year Plan

### **NWCOC MISSION:**

Work collaboratively to end homelessness by addressing housing issues through a community-based process that develops a comprehensive, coordinated continuum of care to individuals and families who are homeless or at risk of becoming homeless in the community we serve.

### **NWCOC VISION:**

We believe that having a safe, permanent home is a basic human right. Our vision is to end homelessness in the Northwest Michigan region.

### **NWCOC PURPOSE:**

To ensure that individuals and families have access to safe, decent, affordable housing and support services designed to help them become integrated socially and economically into their communities.

### **HOUSING FIRST:**

NWCOC has adopted a Housing First approach as the basis of its service delivery model.

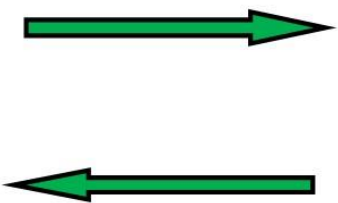
*“Housing First is an approach that centers on providing homeless people with housing quickly and then providing services as needed. What differentiates a Housing First approach from other strategies is that there is an immediate and primary focus on helping individuals and families quickly access and sustain permanent housing. This approach has the benefit of being consistent with what most people experiencing homelessness want and seek help to achieve.*”



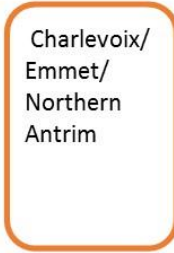
# Northwest Continuum of Care (NWCOC) Structure

**Steering Committee**  
(Essentially Board of Directors)

1 Representative from each of the 10 counties + Chair, Vice-Chair, Secretary=13 Members



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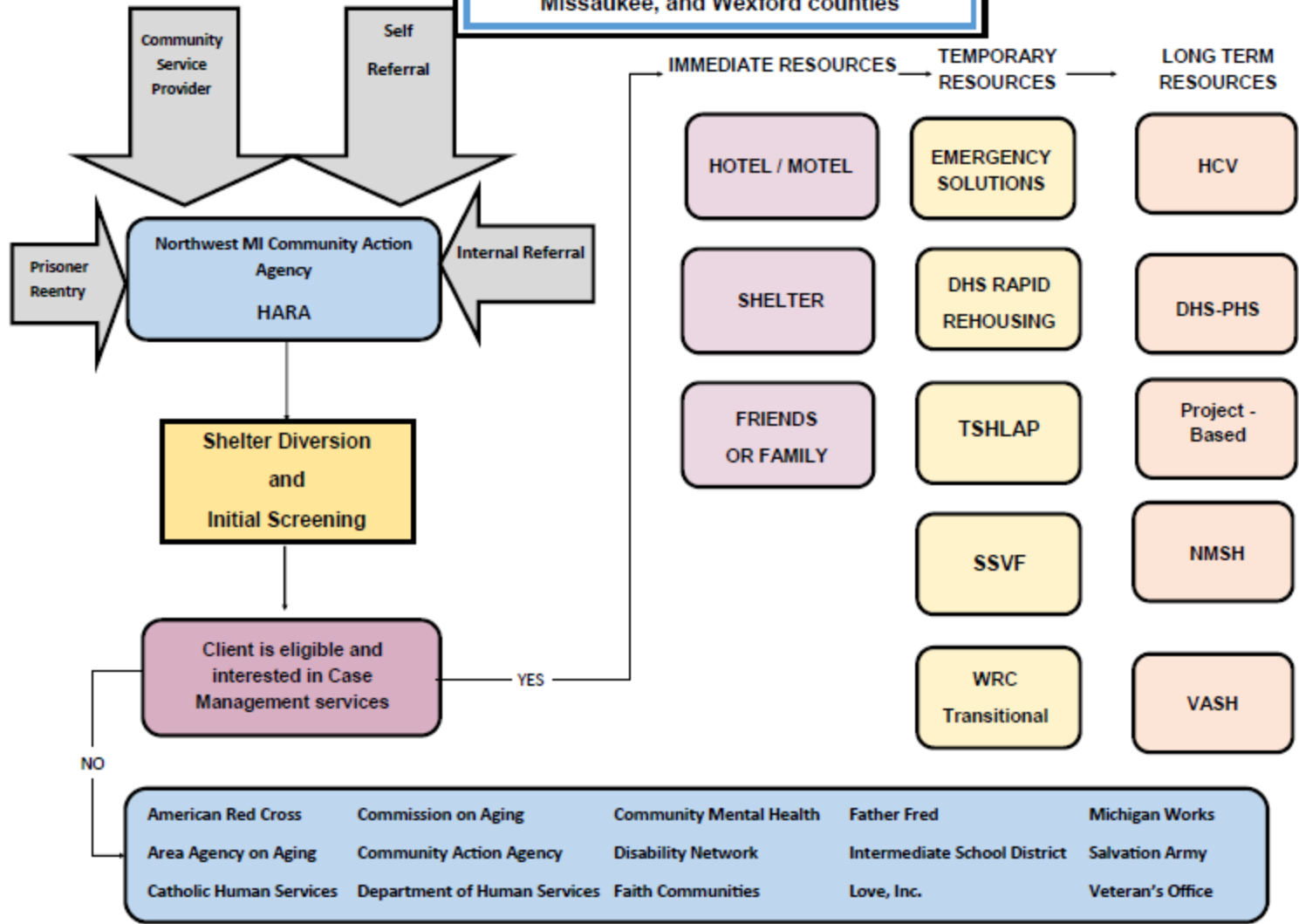
Full NWCOC	Local Work Groups
<b>Policies and Procedures</b> <ul style="list-style-type: none"> <li>• Monitor and recommend changes to by-laws as needed</li> <li>• Monitor and recommend changes to allocation procedures as needed</li> <li>• Monitor and recommend changes to Policies and Procedures as needed</li> </ul>	
<b>Membership</b> <ul style="list-style-type: none"> <li>• Provide annual community invitation for membership</li> <li>• Set goals for membership inclusion at Local Work Groups</li> </ul>	<b>Membership</b> <ul style="list-style-type: none"> <li>• Provides county representatives to NWCOC</li> <li>• Works to meet NWCOC membership inclusion</li> </ul>
<b>Goals/10-Year Plan</b> <ul style="list-style-type: none"> <li>• Oversee annual review /update of 10-Year Plan to End Homelessness</li> <li>• Recommend service areas for targeted analysis at the Local Work Group level</li> <li>• Provide analysis of Best Practices from Local Work Groups to develop overall Policies and Procedures</li> </ul>	<b>Goals/10 year plan</b> <ul style="list-style-type: none"> <li>• Develops action items specific to local needs/services</li> <li>• Interagency Services Team (IST)-Local wrap-around service coordination to maximize resources for consumers</li> <li>• Public Awareness <ul style="list-style-type: none"> <li>▪ Develops and implements marketing tools</li> <li>▪ Serves as the media liaison through its Steering Committee members</li> </ul> </li> </ul>
<b>Data Collection</b> <ul style="list-style-type: none"> <li>• Oversee Homeless Management Information System(HMIS) compliance issues, including training and reporting</li> <li>• Analyze HMIS indicator data to assist with gaps analysis</li> </ul>	<b>Data Collection</b> <ul style="list-style-type: none"> <li>• Homeless Management Information System (HMIS)/Data Analysis/Outcomes -Analyzes data/outcomes to determine local Best Practices to share with NWCOC</li> </ul>
<b>COC Funding Applications</b> <ul style="list-style-type: none"> <li>• Oversee MSHDA Emergency Solutions Grant application for funding</li> <li>• Oversee HUD collaborative application for funding</li> <li>• Oversee any available funding source that directly funds NWCOC projects</li> </ul>	

We know the NWCOC structure.

We're on the same page as to who we are and who we want to serve.

Now, let's take the money out of it and design the best service delivery system we can.

**HARA Regional Workflow  
for Antrim, Benzie, Charlevoix, Emmet, Grand  
Traverse, Kalkaska, Leelanau, Manistee,  
Missaukee, and Wexford counties**



# NEW CENTRALIZED INTAKE FOR ALL 10 COUNTIES

- One phone number
- Need after-hours availability
- Implement the VI-SPDAT
- HARA Assessment

Just how many questions do we ask a person?

- Different shelter/overnight voucher resources
- Assignment to Housing Resource Specialists

## HARA STAFFING PROPOSAL

### **Cadillac Office—Covering Wexford/Missaukee Counties**

2-Housing Resource Specialists—Homeless Prevention

1-Housing Resource Specialist—Supportive Services for Veteran Families (Includes **Kalkaska County**)

1-Full-time AmeriCorps Member

### **Manistee Office—Covering Manistee & Benzie Counties**

1-Housing Resource Specialist—Homeless Prevention

1-Housing Resource Specialist—Supportive Services for Veteran Families (Includes **Mason County**)

### **Traverse City Office—Covering Antrim, Kalkaska, Grand Traverse, Leelanau**

1-Program Manager—10 counties

2-Housing Resource Specialists—Homeless Prevention

1-Housing Resource Specialist—Supportive Services for Veteran Families

1-Program Assistant—Assists the HMIS Administrator and completes reports for all programs

1-Full-time AmeriCorps Member

**2-Intake Specialist—1 New Position\*\* Cover all 10 counties**

**1-HCV Specialist –Cover 10 counties for the Region-- \*\*New Position**

### **Petoskey Office—Covering Charlevoix & Emmet Counties**

1-Housing Resource Coordinator—10 counties

2-Housing Resource Specialists—Homeless Prevention

1-Housing Resource Specialist—Supportive Services for Veteran Families (Includes **Kalkaska County**)

1-Full-time AmeriCorps Member



# HOW DO WE BUILD ONE COHESIVE SYSTEM?

## **We've already started!**

“Build a unified local system that ties together and leverages a complex network of agency programs, housing and service resources and public systems necessary to end homelessness.”

- Starts with Coordinated Access
- Common assessment tool—VI SPDAT/SPDAT
- Share by name list—List from most vulnerable to lowest equity
- Coordinated Services—Housing First—Properly house them quickly
- Sustainable governance structure—NW CoC
- Local efforts and how those might be re-structured through funding priorities—Is everyone involved?

# WHAT IS COORDINATED ACCESS?

## AND ARE WE ALREADY DOING IT?

- Access to people experiencing homelessness, assessment, and referral process for diversion, prevention, shelter, RRH, PSH and/or other housing related services.
- Implemented CONSISTENTLY throughout the entire 10 county region
- Easy to use and well publicized to individuals experiencing homelessness
- **Client centered** NOT agency centered (doesn't matter who did the VI-SPDAT assessment)
- The same forms and assessment processes are used by every program for every client experiencing homelessness
- Coordinated referral process across the CoC
- Accessible info about available housing and services intervention in the CoC

# COORDINATED SERVICES

- ✓ Create regionalized outreach strategies coordinated across organizational boundaries
  - ✓ Utilize regular case conferencing practices to coordinate navigation—ISTs
  - ✓ Engage public systems leaders to request participation for front line staff in coordination strategies—Do we have buy-in from the ED and CEOs?
- Does everyone have a clear and shared sense of where outreach is happening and where it is needed?
  - Who is missing from the table at case conferencing meetings?
  - How are services being coordinated with other public health agencies?

# FUNDING PRIORITIES

## Current/past

- ESG funding is continuing to shift towards serving the hardest to serve
- Street Outreach: survival based street outreach
- Shelter: extensive programming within shelters surrounding life skills training not housing
- Prevention: putting money toward prevention rather than helping people get INTO housing
- Rapid Rehousing: first come, first served mentality. Race to use up funding. 6 months or less. Little to no prioritization of the people we are serving.

## Evidence based

- Find opportunities within the resources we already have. Are we brave enough and strategic enough to keep going?
- Housing-focused street outreach. Prioritized street outreach
- Housing-focused shelter services (Rapid Re-housing)
- “Most people facing eviction will never become chronically homeless.” What is our commitment to housing people?
- Using the SPDAT to guide what housing people need not funding. Prioritization. Using RRH as PSH in our community due to need. Not always appropriate, but better than sleeping outside.

# RE-THINKING FUNDING PRIORITIES

- Why are you doing the work you are doing?
- Permanent Supportive Housing, Rapid Rehousing, and Housing Support Services--are we working in tandem to achieve the Housing First model?
- What's ALREADY available throughout our 10 county area with our service providers?
- Are we coordinating all the resources to work together to house people?
- What gaps need to be filled? And can we fill them through re-investments within ESG?
- Is Emergency Shelter Grant the most appropriate way to fill the gaps?
- What other options do we have?



# SERIOUSLY, WE HAVE TO AGREE ON ESG FUNDING BEFORE WE EVEN GET STARTED?

- All one big pot of money
- DV was removed (Whew, that helped!)
- HARA and Shelter funds only

Figure out how you want your system to work, then look at the money you have to work with. Stick with your service goals!



# A BRAVE NEW WORLD

- HARA Central Intake initiated
- VI-SPDAT Implemented
- After Hours service coordinated
- NWCOC meetings introduce and provide background for those things we need to discuss locally
- Local Work Groups have the in-depth conversations to develop local solutions

You need an independent Facilitator/Coordinator  
with no ties to any agency!

# IT'S BEEN A PIECE OF CAKE... WITHOUT THE FROSTING

- NWCOC meeting structure
- Local Work Group Engagement
- Centralized Intake/coordination with shelters
- After Hours coordination
- Who are we prioritizing and how?
  - Different needs in different areas
  - Different resources in different areas

# OH SO SWEET.....

We are having the conversations in all Local Work Groups that need to be had and are moving us forward!

- Developed local pathways to housing
- Developed very complete list of “housing” resources by location and type
- Work Groups are actually “working”
- Recent workshops could be shared over 10 counties