

Minutes

Supportive Housing Subcommittee Meeting Minutes

July 11, 2017

5:30 – 6:30 p.m.

CABQ Department of Family Community
Services 5th Floor Conference Room

Type of meeting: 15th meeting: New subcommittee member introductions and review of single site project work thus far.

Members Present: Robert Baade, Constance Banuelos, Sister Agnes Kaczmarek, Laura Carlisle, Lisa Domenici, Laura Nguyen, Mark Walch, Elaine Miller

Members Excused: Michelle Valencia-Stark, Jason Vaillancourt (alternate)

Staff Person Present: Cathy Imburgia

Technical Advisors Present: Lisa Huval, Kelley Lee

Meeting Observers: Stepanie Mercer, Pamela Hyde

Call to Order

Meeting called to order at 5:35 p.m. by Robert Baade, Supportive Housing Subcommittee chair.

Discussion to Approve Agenda

Agenda was approved. Lisa suggested that our next meeting agenda start out with discussions on the projects and conclude with updates from the Steering Committee, ABCGC, etc. so we can have more time for the project discussion. All agreed to reflect this change in the next meeting agenda.

Discussion to Approve Minutes

Minutes from the June 13, 2017 meeting were approved, with a clarification that Hanson Scott, who had been a member in attendance at the last meeting, requested a re-assignment to the Community Supports Subcommittee.

Key Items of Discussion

Old Business

A.) Subcommittee Members Welcome/Introductions

- New members were welcomed to the Supportive Housing Subcommittee, with all providing brief introductions on experience. Members also expressed their interest in being engaged with the Behavioral Health Initiative, with many noting lived experience as the primary reason.
- Voting subcommittee members now include: Robert Baade – **Chair**, Constance Banuelos, Michelle Valencia-Stark, Sister Agnes Kaczmarek; and new members: Laura Nguyen, Laura Carlisle, Mark Walch, Lisa Domenici, Elaine Miller, and Jason Vaillancourt (alternate).
- Cathy reported that she is continuing to clarify the Technical Advisors, as several are listed but have not attended a meeting in sometime, if at all. Confirmed TA members thus far include Kelley Lee and Lisa Huval.

Vice Chair Nomination/Election

- Sister Agnes Kaczmarek was nominated by Robert and 2nd by Elaine to be appointed as Vice Chair of the Supportive Housing Subcommittee.
- Robert expressed his interest to main as the Chair of the Subcommittee. All agreed that he should remain in his current role as Chair of Supportive Housing and Steering Committee member.
- It was noted that at the last meeting, attendees asked for a consistent day/time be scheduled for future meetings. It was agreed to continue to hold Supportive Housing meetings the 2nd Tuesday of the month from 5:30-6:30 pm, noting that if needed, meetings may go as late as 7 pm.

A.) Steering Committee Meeting Update

- At the June 15 meeting, new members were welcomed, including Nancy Jo Archer and Kathy Finch from the Community Supports Subcommittee.
- May Mental Health Month event had 400+ attendees.
- The Orientation dates have been set. Regarding the Supportive Housing Subcommittee it was reported that all but one new member attended the Orientation sessions. Those that did attend found the sessions to be valuable and informative.
- The Resource Development Work Group will meet June 20. The group was formed through a Resolution by Commissioner Maggie Hart Stebbins to gain regional perspective on the BHI.
- Election of Officers (Chair and Vice Chair) was postponed until the next meeting.

B.) Subcommittee Projects Underway

Cathy and Robert reported the following:

- Projects currently in discussion by subcommittees include: *Single Site Housing* by the Supportive Housing Subcommittee; *Crisis Stabilization and Response Center*, by the Crisis Services and Community Supports Subcommittees; *Intensive Case Management (ICM)* services for individuals with substance abuse as a primary diagnosis and Transportation Proposal initially passed by City Council for review by Community Supports Subcommittee; and *Awareness, Education and Training* by the Prevention, Intervention and Harm Reduction Subcommittee. The subcommittee suggested revisions to the draft proposal for Education/Training/Awareness. The proposal will include stigma reduction as an intended outcome. It to include training for professionals and community members and interventions to prevent substance abuse.
- RFPs to be released include: CET and Mobile Crisis Teams, a joint city/county RFP for clinicians. These proposals are scheduled to be released over the summer. The Prevention, Intervention and Harm Reduction Subcommittee elected two committee members to the CET procurement evaluation team, Barri Roberts and Mark Clark.
- The Youth Transitional Living RFP is continuing in the proposal evaluation process.

C.) ABCGC Meeting

- ABCGC June 22 meeting was cancelled due to the lack of a quorum.
- There is no meeting in July. Next ABCGC meeting is August 29.

New Business

A.) Continued discussions of the Single Site Housing proposal

- The intent of the project and the Draft Project Proposal to date were discussed so that all members could be brought up to date on what the project is and the status. During the discussions it was noted that we are pursuing a “housing first model” and the definition of “precariously housed” as being not safe to one’s stability.
- On review of the draft proposal, a questions was raised regarding gender specific supportive housing ... a questions that will be further discussed at the next meeting.
- **ACTION:** In preparation for the next meeting, Cathy is to email the Focus Group outcomes document that Kelley presented at the May 16, 2017 meeting. Note: The document is included Attachment 1 of the minutes
- **ACTION:** In preparation for the next meeting, all are asked to be prepared to discuss the following two topics areas for our continuation of the draft project proposal, which are included in Attachement 2:
 - Identify Best Practices
 - Description of Intended Intervention/Logic Mode

Public Comment: None

Next Meeting and Adjourn

a) Meeting adjourned at 6:40 p.m.

Next meeting: August 8, 2017 at 5:30 – 6:30 (or 7:00 p.m., if needed), 5th Floor Conference Room
Department of Family and Community Services | 400 Marquette Ave. NW, Albuquerque, NM 87102

NOTE: Please all Cathy at 302-420-6588 if you need directions or assistance gaining access to the room.

ATTACHMENT 1

Focus Group Summary: Supportive Housing Focus Group

Authors: Craig Pacheco, MBA
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This document is a summary of the focus group held on 4/18/2017. The purpose of the focus group was to help better understand single site supportive housing and multiple site supportive housing. Specifically to gain insight from participants' thoughts and ideas regarding permanent supportive housing, the target population for a single site, admission criteria, service needs of the population, and resources needed to serve the population. The focus group was facilitated by two UNM Institute for Social Research (ISR) staff members. The focus group lasted approximately 90 minutes. A focus group guide was created by UNM ISR with general topic questions that were used to facilitate the conversation. Probing questions were asked to reveal greater detail by clarifying and expanding upon responses. Below is a summary of topics discussed in the focus group by topic:

Permanent Supportive Housing in General

- Barrier in current system is many individuals do not qualify under the HUD definition of homelessness.
- Individuals released from incarceration without proper medication
- Individuals present initially as being able to live independently, but as time goes on they get off their psychiatric medications and/or use substances and get evicted. Hard to get them housed again.
- Definitely needed in Bernalillo County, as there is a shortage of available housing
- Different housing programs have different intake process. This can be challenging.
- Application and housing process generally takes a long time. Can be discouraging.

Target Population

- Individuals with Severe Mental Health, there should be less rules, because the more rules there are the more frustrating it is for those individuals.
- Too much variation in clients that you can't say a particular severity of SMI is appropriate for or will be more successful in single site or scattered site. Not a one size fits all thing.
- Must get individual history of client, such as multiple past unsuccessful attempts at living alone in scattered site.
- Recommended a questionnaire or form to guide or structure a conversation with client to see if the client may be more successful or appropriate for single or scattered site.
 - Past unsuccessful attempts at being housed in scattered site housing
 - Personal fears or barriers to living alone.
 - Have they ever lived alone
 - Rental history
 - Legal history
 - Medication compliance
 - Connected to any services currently
 - Vulnerability
- All agreed it is important that it is the client's choice whether to be housing in single site or in scattered site. A recommendation can be made based off of questionnaire but it must ultimately be the client's choice.
- In order to find people for housing program, outreach must be done. Person to neutrally engage population that is hard to serve.
- Contact advocacy groups working with homeless population

Single Site Design

- Smaller facilities. Large and highly populated single sites don't work. Approximately 17 apartments.
- Individual apartments so the clients have their own private space.
- Possibly efficiency type apartments. Would include refrigerator, sink and stove/oven.
- Possibly have pot-luck type events for residents to get together with food they cooked.
- Any violence is a zero tolerance policy.
- Cameras in main walkways for security purposes.
- If not staffed 24 hour, need security there over-night. If staffed 24 hour do not need security.
- Have different single sites in different areas of the city.
 - Not in International district
 - In areas with access to schools.
 - In areas with access to transportation
- Important to get buy-in from community where the single site will be. This is important for acceptance and to reduce stigma.
- Families could be housed in same area, but in a separate unit that houses only families with children.
 - Not necessarily more rules in the family unit, but more services available.

Single Site Services

- Case Management.
 - More case managers so there is a lower ratio (1:7 or 1:5)
- Vocational Coordinators
- Family Specialists
- Psychiatric Provider
 - Who is also in the community, so if the client leaves the housing program they still have the connection with the psychiatric provider.
- On-Site Nurse
- Some services mandatory for the first 30 days, in order to determine level of services needed for each client. Include a mandatory behavioral health/psychiatric assessment in first 30 days. Then have appropriate step down services after 30 days.
- Substance Abuse and Dependence Services (including AA and NA meetings)
- Employment Services
- Living Skills Services (weekly life skills group taught by social worker or case manager)
- 24 hour services depends on population.
 - If harm reduction, "wet house" it needs to be staffed 24 hours.
 - Support services available 24 hours
- 24 hour services depends on available funding and resources
 - Would rather see more housing sites than have all single site be 24 hour
- Transportation to take people housed to appointments, grocery shopping, job interviews, etc.

Resources

- Need Landlord and on-site manager
- Peer Support Workers

- SOAR Rep

Measures of Success

- Do they remained housed in the program
- Connections to services
- Able to be housed through Section 8
- Completing probation (for those involved in criminal justice system)
- Hospital visits
- Emergency Room Visits
- Arrests
- Incarcerations
- Physical Health
- Psychological Health
- All agreed they don't want people only involved in criminal justice system, but all homeless people can be eligible.

ATTACHMENT 2

SECTION 5: Best Practice Identification

Best Practice Identification: *(Recommended Length: 1 – 2 pages single spaced)*

Instructions: Use the following questions to build a more descriptive summary of the evidence-based best practices towards addressing the problems stated above.

- Are there well-established models and methods to address these challenges?*
 - What is the community already doing to address these needs?*
 - What regional or national best practices have been identified by government organizations, advocacy groups and other authorities in the field?*
- What academic research has been done regarding these interventions so far?*
 - How dated is that research, what methods were used and what outcomes were evaluated?*
 - What are the concerns for findings' validity in Bernalillo County?*
- What other evaluations, cost studies or assessments might there be on existing service providers or other promising methods?*

Resources available to help answer these questions:

- UNM ISR literature review*
- Requests for Information (RFIs)*
- Other regional and state approaches*
- Federal government resources (websites, briefings, etc.)*
- Nationally recognized advocacy & policy organizations*

SECTION 6: Description of Intended Intervention

Description of Intended Intervention: (Recommended Length: 0.5 – 1 pages single spaced)

Instructions: Use the following questions to describe the intervention or service delivery model best assumed to solve the stated problem, serve the stated target population and achieve the desired outcomes.

- Is there a particular intervention that has been proven effective in addressing our problem either locally or across the country?
 - If not, is there a particular service delivery model we think could be an effective solution to our problem? If so, why?
- In what setting does this service take place?
- What activities are performed in this service delivery?
 - What would a client’s “day in the life” look like?
- Who is involved in the service provision?
 - What is their background / qualifications?

Resources available to help answer these questions:

- National best-practice organizations
- Problem identification description
- Requests for Information (RFIs)
- Other regional and state approaches
- Logic model completion (see below)

Generic Logic Model:

Inputs	Activities	Outputs	Outcomes	Impact
<input type="checkbox"/> Staff	<input type="checkbox"/> Train	<input type="checkbox"/> Plans	<input type="checkbox"/> Awareness	<input type="checkbox"/> Social
<input type="checkbox"/> Time	<input type="checkbox"/> Teach	<input type="checkbox"/> Connections	<input type="checkbox"/> Knowledge	<input type="checkbox"/> Economic
<input type="checkbox"/> Budget	<input type="checkbox"/> Treat	<input type="checkbox"/> Learning environments	<input type="checkbox"/> Skills	<input type="checkbox"/> Environmental
<input type="checkbox"/> Technology	<input type="checkbox"/> Advise	<input type="checkbox"/> Self-awareness	<input type="checkbox"/> Motivations	<input type="checkbox"/> Inter-personal
<input type="checkbox"/> Space	<input type="checkbox"/> Facilitate		<input type="checkbox"/> Skills	<input type="checkbox"/> Civic
<input type="checkbox"/> Materials			<input type="checkbox"/> Behavior	
<input type="checkbox"/> Equipment				

