



OPENING DOORS FAIRFIELD COUNTY FUNDING COMMITTEE MEETING

Meeting held by phone

June 20, 2017 11:00 am to 12:30 pm

Attendees: Adam Bovilsky (ODFC Co-Chair, City of Norwalk), Rebecca Allen (Melville Trust), Nancy von Euler (Fairfield County's Community Foundation), Pamela Ralston (ODFC Manager), Leigh Howard (Diana T. Myers & Associates), Doran Wright (CCEH/ODFC Project Coordinator, notes).

Agenda:

1. Review and discuss St. Vincent's SHP Bridgeport appeal request and explore response for cost effective reallocation
2. Discuss Operation Hope project and determine way forward

It was agreed that Adam Bovilsky would facilitate the call meeting.

Adam provided a summary overview and background information with regard to St. Vincent's projects and stating that in particular the St. Vincent's project that has been causing the most inefficiency is their congregate housing that has been in existence for many years.

St. Vincent's has combined a number of projects that are altogether listed as a \$1.3 million project on our spreadsheet. Over time a lot of things were merged into one grant, and some decisions may need to be made about what they can and cannot do and there is a need to understand there is more than just congregate sites involved.

It was reported that the St. Vincent's grant is in effect a mix of projects and the efficiency issue is that when this funding reallocation structure was created it was explained that the goal was to do more with less, that is, to create additional units through efficiency and to accomplish that goal without ending any projects by looking at fair market rents and knowing what it costs to house people when we add service dollars to those fair market rents.

A key consideration is that St. Vincent's is not leasing dollars because they own the project (i.e. the building). St. Vincent's asks how a FMR standard can be applied to buildings that are owned, where a number of factors enter into building ownership. Their argument is that it is not comparing apples to apples, but comparing apples to oranges when applying FMR standard. They argue that for their projects that house three individuals the wrong standard is being applied (fair market rent for 3-bedroom units). St. Vincent's is saying they doing it less expensively by putting all three persons into one three bedroom unit, and if those persons were to be housed in three one bedroom units, it would cost the system a great deal more (if there were no congregate care).

Following Adam's summation it was asked if they were the only congregate housing grantee and it was stated they have projects in Norwalk and Bridgeport and they say the Norwalk project is within the standard.



Possible responses to the appeal from St. Vincent's were then put forward:

First, to the point that we are not comparing apples to apples, therefore we shouldn't apply the FMR standard: Our decisions about efficiencies is not about how you spend the money but what it ought to cost. If St. Vincent's project is more expensive, then it is more expensive per person. We care how much it costs in Federal dollars received to house a homeless person. We use FMR because it is what it would cost to house a person in the private market. The answer is still the same; it could be done more cheaply through a different type of project by turning it into rental dollars. It's about how can we effectively and efficiently house and support people.

Leigh then said that the argument doesn't hold on the math; by the numbers it would be over by \$223 thousand if the 26 individuals living in congregate housing were moved into separate units and maintaining 33 people in efficiency units (there are 59 single units and 33 people in efficiencies 26 people in congregate living). There was then discussion around the actual number and size of units within the St. Vincent's project: 14 3-BR units housing 8 families, 1 4-BR for families; 6 3-BR; 4 2-BR; 33 1-BR.

The question was then asked whether anything else about the project should be looked at from a systems point of view— i.e. what is the benefit or harm to the system. Because of the congregate nature of the projects; it caused some "knock-on" effects of the system. ODFC has adopted housing first policy that is considered a best practice and in congregate housing they are not always able to take the next person from the By-Name-List because it may not work for already housed persons in the congregate setting. Client choice is also a consideration, and it seems at times it is hard to fill slots in St. Vincent's congregate housing. Once the appeal comes in can we look at these considerations while also looking at efficiencies and how beneficial to the system are these congregate housing units.

Leigh said that the St. Vincent's congregate housing model feels like perhaps a version of a shared housing model without using best practices that go along with a shared housing model (ensuring that it is a good match for those already housed and those moving in). Moving people in and out does not instill permanency; not to mention all the other aspects of housing first that Adam mentioned.

The question was asked, for those who do want a roommate, can they (should they be allowed) to obtain a two-bedroom unit? Leigh said that it should be allowable as a community. The answer is that we haven't discussed what the answer from the CoC is, but hopefully St. Vincent's would integrate them (people potentially moved out of congregate housing) into another project or refer to another program. To the question of what would happen to people in congregate units, can vouchers be made available?, Leigh answered It would have to be checked off on the vouchers to allow two non-related households to each have their own lease with the landlord and have both incomes count toward rent. The annual plan of the housing authority should be looked at to see what is allowed.

There was then discussion about whether to include considerations about congregate housing into the efficiency discussion. Pam said that one factor regarding consumer choice is that once people see the congregate care units they tend to reject them. The comment was made that in the context of a zoning approval issue, for example, a sober house can get a reasonable accommodation under the premise that those recovering from substance abuse issues can actually benefit from congregate living where there is mutual support.

It was stated that St. Vincent's is not arguing that if these projects were closed it would cost the system more. They are also not arguing that their project is unique. It was further said that some people have been there since 1992; when it was started we did not have a Vulnerability Index, or By-Name-List; some may not have ever been literally homeless. We need to take responsibility for anyone we would be taking congregate housing from, but the people currently in congregate housing may not qualify for Permanent Supportive Housing but more likely some form of Rapid Rehousing unless they fail out of Rapid Rehousing.

These programs were run differently in the 1990's and may not have even qualified as literally homeless (as opposed to being at risk) when they came into congregate living. Not everyone may qualify or need PSH who are now in the congregate housing setting.

The question was asked as to what would the process of phasing out look like. Leigh said that a process would need to be developed. St. Vincent's has been awarded FY-16 funding and their grant would expire December 2018. There would need to be a transition plan in place, assuming an assessment of each household using the same tools now being used, or, if not appropriate, develop an alternate tool for assessing people where they are right now. That is, does this person need a permanently affordable housing opportunity, staying as consistent to the assessment methodology we currently use acknowledging that some people who have been there for 20 years may be either high functioning or low functioning (having an individualized plan for each household).

It was stated that there are options for how we respond to each appeal. St. Vincent's however there is some nervousness that they would lose the entire \$1.3 million if they made an appeal.

One option to respond, if denying the appeal would be by saying that St. Vincent's must come up with a budget that meets our efficiency standards which may involve closing substantial portions of their project. (They probably can't make it work unless they close all their congregate housing). If the St. Vincent's argument is that had we had put these people into one bedrooms it would be more expensive, then it's a choice they made to put them into three bedrooms so it stands to reason it should be evaluated based on 3-BR FMR and amount of service dollars required. Leigh said that in that case instead of being an overage of \$223,000 to house 26 people in 1-BR efficiencies, it would be \$174,000 over. We could say you're losing all your congregate housing because it's not efficient.



Two options were discussed. In summary, Option One: We deny your appeal; Option Two: We deny your appeal and you have to give us a budget that works (continuing to serving 59 households or voluntarily make it work without losing people.)

Leigh Howard said Option Two does not address either the housing first compliance issue or the consumer choice issue and asked is this handled by another group outside of this process.

Pam commented that this is illustrated in our processes for ranking and reallocation in terms of strategies for reallocation, to which it was said there is plenty of data to illustrate these points.

Leigh said 46% of people (calendar year 2016) were there for 5 years or longer (the highest window). In terms of average length of participation (there for the entire calendar year) only 6 out of 80 left. The median was 6.91 years and the average 6.74 years. That was offset by 7 people in the program for less than one year. It is thus reasonable to assume that people have been in the program for a number of years.

A question was asked regarding vacancy rates; are they taking people from the top of BNL list (which is due by the end of the week)? Pam said that in many PSH projects we have, many need to be re-assessed and we should be figuring out a move-on strategy for all projects. This could apply to projects beyond St. Vincent's and so it would be unfair to single out St. Vincent's until the discussion happens around ranking more projects.

There was consensus that all that is needed to deny the appeal based strictly and solely on financial considerations was in hand. Adam then asked if a vote should be taken and there was agreement. Adam then asked Leigh that as far as process goes, should an explanation or rationale be given along with the denial. Leigh said that everyone should have the chance to review and read the letter. Non-conflicted members of ODFC will approve and adopt the appeals decisions made by the Funding Oversight Committee.

Adam then proposed a motion to deny St. Vincent's appeal for the reason that none of the arguments that St. Vincent's put forward were compelling and that they have not shown how the system would be negatively impacted by reallocation and that the efficiency standard should be met in a budget drafted by St. Vincent's. The motion was unanimously approved and Pam will draft a letter and send it to Leigh to review before it goes to the non-conflicted coordinating council for approval and adoption.

Adam said he will be away on vacation until June 30th (back in the office that morning) and will be unavailable for telephone calls but could perhaps read emails.

Discussion then moved to Agenda item 2., concerning Operation Hope's Hope IV program.

Pam said that Operation Hope's Executive Director has concerns about the Hope IV project. She will fit into the budget but feels that service costs will not cover basic monthly needs of case management (including food, transportation and other basic needs) and that HUD will not re-work the project to include such items.



According to Leigh food and transportation is not required. The group agreed that that Leigh should respond directly to the Executive Director's concern.

Before adjourning the meeting, Adam said that he and David Rich are seeing some concerning numbers coming out of Stamford with regard to Rapid Rehousing and suggests consideration be given to what should be done to ensure that there is a decent level of evaluation and not having Rapid Rehousing providers not taking Rapid Rehousing dollars and in one case having a 0% success rate compared with a 93% success rate for the state overall. Pam said that DOH manages most projects, but one site is managed by DMHAS and has never been monitored.

The meeting was adjourned at 12:30 p.m.