

Mississippi Balance of State CoC
Quarterly Membership Meeting Minutes
Thursday, June 11, 2015
10:00 a.m.

TIME AND PLACE

The Summer Quarterly Membership meeting of the Mississippi Balance of State CoC was called to order at 10:15 a.m. The meeting was held at the Hilton Garden Inn – The King Edward Hotel (235 W. Capitol Street, Jackson, MS 39201)

ROLL CALL

Agencies with current membership dues and multiple represented agencies attending the 2015 Annual Meeting.

CALL TO ORDER

Ledger Parker, Program Director of MUTEH, called the meeting to order.

PRESENT (*=denotes online attendance)

Leslie Payne, Marci Ann Reynolds, Deke Cross, Cassie Hicks, Tanya Smith, Amanda McNeil, Demetra Bates, Chamon Williams, Kimberle Neal, LaQuita Johnson, Cynthia Jackson, Sheron Brown-Gorden, Margaret Johnson, Barbara Thornton, Bobby Capps, Sandra Barr, Dorothy Sylvester, Jean Spring, Jessica Howell, Eve Wellons, Fannie Johnson, Christianna Jackson, Faye McCall, Sheila Brand, Florida McKay, Kenyatta Newson, Vickie Hawkins, Angela Glenn, Ora Jackson, Annie Jackson, Ashley Collins, Danielle Styron, Stacey Howard, Nakieta Brown, Frances Nixon, Charisse Myers, Ivie Pulliam, Christie Rainer, Crystal Collins, Kathy Garner, Louise Meyer, Ledger Parker, Marika Baliko, Kayla Russey, Reginald Glenn, Tamara Stewart, Tina Davis, Martha Mitternacht, Myron Hutson, Don Roberts, Martishia Powers, Bethany Latham, (Rep. of a US Congressman)

ADOPTION / REVIEW OF AGENDA

A motion was made accept the agenda. The motion was seconded. All in favor by acclamation.

REVIEW OF MINUTES

A motion was made accept the minutes for the meeting on March 12, 2015. The motion was seconded. All in favor by acclamation

I. AGENCY REPORT - CARE LODGE DOMESTIC VIOLENCE

- a. The Care Lodge Agency Report was created in video format:
<https://youtu.be/TY5Ibi3tE9c>

II. CONTINUUM OF CARE GOVERNING COUNCIL

- a. What is the CoC Governing Council?
- In March 2015, the Mississippi Balance of State adapted updates and revisions to the Continuum of Care Governance Charter to establish the implementation of the Mississippi Balance of State Continuum of Care (MS BoS CoC) Governing Council. The MS BoS CoC Governing Council will be the primary decision- making group of the Continuum of Care membership. The Council will consist of 15 individuals with representation from diverse backgrounds including: The Chair of each of the 6 regional coalitions (prefer non-funded agency representation)

1. A Formerly Homeless Individual
 2. An ESG sub-recipient agency representative
 3. Representation from a Mississippi Municipality
 4. A MS Permanent Supportive Housing Council representative
 5. A Representative from Veteran's Affairs
 6. A Philanthropic/Foundation representative
- b. Introduction: CoC Governing Council
- EXECUTIVE COMMITTEE OF THE COUNCIL
 1. **Martha Mitternight** - Executive Committee Chair (At-Large Representative)
 2. **Ivie Pulliam**, Southeast MS Rural Health Initiative - Vice Chair (Pine Belt Coalition Rep.) - Hattiesburg, MS
 3. **Trisha Hinson**, MS Department of Mental Health - Secretary/Treasurer (Dept. of Mental Health Rep.) - Jackson, MS
 - COUNCIL MEMBERS
 1. **Bobby Capps**, Crosswind (Northeast Coalition Rep.) - Corinth, MS
 2. **Leslie Payne**, Care Lodge(Central MS Coalition Rep.) - Meridian, MS
 3. **Jean Spring**, WINGS (Delta MS Coalition Rep.) - McComb, MS
 4. **Mayor Johnny Dupree**, City of Hattiesburg (Municipal Rep.) - Hattiesburg, MS
 5. **Patricia Lane**, VAMC-Jackson (Veterans Affairs Rep.) - Jackson, MS
 6. **Louise Meyer**, MUTEH Inc. (Executive Director of the Collaborative Applicant) - Cleveland, MS
 7. **Cassie Hicks**, Institute for Disability Studies (MS Permanent Permanent Supportive Housing Council Rep.) - Jackson/Hattiesburg, MS
 8. **Myron Hutson** (Formerly Homeless Person) - Leland, MS
- c. Responsibilities of the Governing Council
- The Governing Council Shall Be Responsible For The Following Actions: Annually assess needs for housing and homeless services and recommend prioritization of gaps in services to be filled through reallocation of existing resources and/or additional resource development
 - Directly make policy and funding decisions related to the CoC resources
 - Assist in developing and adopt a plan to end homelessness in Mississippi and associated annual updates
 - Approve all portions of the Consolidated Plan and associated Annual Action Plans as specifically related to the use of HUD Continuum of Care and Emergency Solutions Grant funds
 - Approve the annual HUD Continuum of Care application, including associated strategic plan goals and project ranking
 - Direct the scope of work of the Regional Coalitions, including working with the Regional Coalitions Chairs to establish Regional Coalitions meeting agendas
 - Establish any associated CoC committees, task forces, or ad hoc work groups, define their membership and generally establish and direct their scopes of work.
 - Hire a CoC Coordinator and determine the responsibilities of that position by developing and updating a Job Description annually
 - **The governing body of the CoC will meet quarterly during CoC Membership Meeting (outside of committee work) to discuss and provide guidance for the aforementioned actions.**

d. Next CoC Governing Council Meeting: July 2015 (CoC Application Training)

III. 2015 ANNUAL REPORT

a. Clients Served

Clients Served 5/1/14 – 4/30/2015	
Delta	388
Northeast	1090
Central	810
Pine Belt	2011
Southwest	395
TOTAL SERVED	4694
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Total Served since 2008:	21,819

b. Volunteer Efforts

Volunteers Through the Years	
2010	32
2011	83
2012	106
2013	200
2014	400
2015	359

359 Volunteers & 700+ Combined Man-Hours Conducting the PIT Count

b. 2015 PIT Count

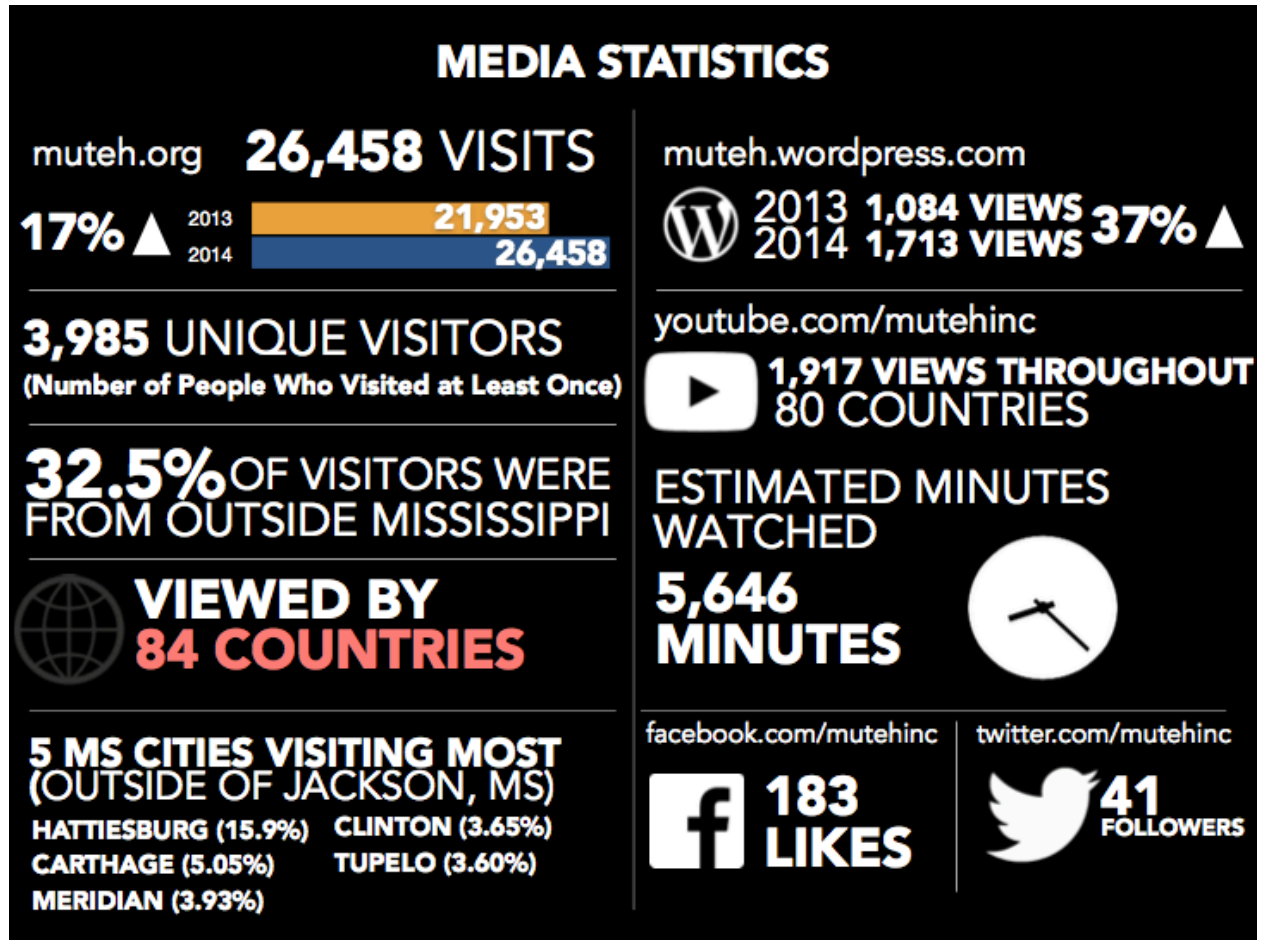
- Total People Counted: 809

c. Tier 1 Funding Breakdown

Agency	Project Name	Amount
MUTEH Inc.	CoC Planning Project	\$31,188
Crosswind	FAITH	\$65,375
MUTEH Inc.	HMIS II	\$100,043
Recovery House	Project Hope PSH	\$124,232
AIDS Services Coalition	1-2-1 Haven House	\$131,404
MUTEH Inc.	MPHA II	\$159,933
MUTEH Inc.	HMIS I	\$162,037
MUTEH Inc.	MPHA I	\$176,595
USM IDS	Project Recovery II	\$192,210
USM IDS	Project Recovery I	\$199,277
Catholic Charities Inc.	CoC RRH	\$200,280
Recovery House	Project Hope TH	\$212,022
MUTEH Inc.	Pine Grove Village	\$221,308

AIDS Services Coalition	Green Meadows	\$291,971
MCCSA	STEPS	\$327,550
BCCAA	CoC RRH	\$661,933
Total Funding Awarded for FY2014		\$3,257,358

d. Media Statistics



e. Housing Inventory Count – Yearly Increase/Decrease in Beds

- During the MS Balance of State 2015 Point in Time (PIT) Count, we collected data on both sheltered and unsheltered homeless persons in our 71-county coverage area. As a part of the sheltered count, we are charged with providing an accurate count of homeless persons being housed, but we are also charged with counting the number of beds provided to house the homeless population in our coverage area.

HIC	2012	2013	2014	2015
Permanent Housing	112	145	143	184
Transitional Housing	331	460	440	384
Emergency Shelter	554	588	590	472

f. Annual Homeless Assessment Report

- The Annual Homeless Assessment Report or AHAR is a report to the U.S. Congress on the extent and nature of homelessness in America. The report is prepared by the Department of Housing and Urban Development (HUD) and provides nationwide estimates of homelessness, including information about the demographic characteristics of homeless persons, service use patterns, and the capacity to house homeless persons. The report is based primarily on Homeless Management Information Systems (HMIS) data about persons who experience homelessness during a 12-month period.

AHAR	2011	2012	2013	2014
Percentage of Usable beds	76.00%	81.00%	83.00%	93.00%

g. HMIS Coverage Rates

HMIS Coverage Rate	2013 - AMT	2013 - PERCENT	2014 - AMT	2014 - PERCENT	2015 - AMT	2015 - PERCENT
Permanent Housing	120	83.00%	118	86.00%	132	86.00%
Transitional Housing	293	65.00%	308	59.00%	231	62.00%
Emergency Shelter	253	79.00%	201	73.00%	161	75.00%

IV. REGIONAL COALITIONS UPDATE

a. Why Do We Meet?

- Regional Coalitions are created to be an alliance of individuals and organization from a specific region that come together to address the issues surrounding homelessness & social services in their community. The goals to focus on system-wide changes and collaborations that foster relationships as well as better services for clients.

b. Coalition Initiatives & Focal Points

- In the past year, many of our coalitions have discussed and implemented different initiatives and announced key focuses to effectively serve their community.
- This includes
 1. Collaboration and recruitment of agencies by agency presentations (Central)
 2. Sharing interagency success stories with coalition “for the good of the cause”
 3. Continuously developing an affordable housing collaboration to ensure the housing of needy persons
 4. Using other Coalitions to expand program referral services state-wide
 5. Discussing and petitioning for municipal government participation

c. Leadership

- During the past year, the Balance of State CoC has focused on providing strong and effective leadership to each coalition. Coalition leaders must possess both strong organizational skills and the ability to inspire commitment and action. Coalitions are working to find 1-2 people who will serve as co-chairs with equal authority. These leaders also double as representatives for the CoC Governing Council.

1. **CENTRAL**
 - a. Leslie Payne, Care Lodge Domestic Violence
2. **DELTA** - Chairs: TBD
3. **NORTHEAST**
 - a. Bobby Capps, Crosswind
4. **NORTH CENTRAL** - Chairs: TBD
5. **PINE BELT**
 - a. Kathy Garner, AIDS Services Coalition
 - b. Ivie Pulliam, Southeast Mississippi Rural Health Initiative
6. **SOUTHWEST**
 - a. Jean Spring, WINGS DV

d. Meetings

- **Each regional coalition is now conducting monthly meetings**--serving as an opportunity for service organizations across Mississippi to gather and explore ideas centered around the establishment of purpose, goals, and objectives for their region.
- **Every three months, each coalition participant is encouraged to attend Quarterly Membership Meetings in Jackson, MS** where they are given a chance to interact with various entities from around the state whom provide homeless & housing services, as well as supportive services.

V. **AGENCY REPORT - BCCAA**

- a. The BCCAA Agency Report was created in video format:
<https://youtu.be/QdwK4tXstM0>

VI. **HMIS REPORT**

a. HMIS Features

- Operations Options
 1. Property Management
 2. Rent/Utility
 3. Leases
- Trackers in AWARDS
 1. Customizable
 2. Track Valuable Data
- New Sharing Options

b. HMIS Involvement

- CoC-Funded Programs
- HOPWA
- CABHI/PATH
- ESG
- Privately Funded Substance Abuse Treatment Facilities

c. Where is the HMIS/AWARDS Going?

- Silo-busting
- Significant Program Management Tool
 1. Bio Metrics
 2. Geo Mapping
 3. Room Reservations
- Outside Reports
- More Automation

d. Upcoming HMIS Surveys: What do agencies want from their data systems?

VII. SUCCESS STORY - Crosswind

- a. The Crosswind Success Story was created in video format: <https://vimeo.com/130059421>

VIII. ADDITIONAL NOTES

- a. Where the BoS Can Grow
 - Meaningful Committee Work
 - Organized Communication
 - Measurements/Quality Management
 - Data Consolidation: Silo-busting
- b. POP QUIZ: According to MUTEH's PIT Count & HMIS Data, this number of people were counted as homeless in 2014 were then served by stabilization programs of the BoS:
 - 33
 - 130
 - 273
 - 333
 - The Answer: 33 (29 in PH; 4 in TH)
- c. QUOTE: Team: "a number of people with complementary skills who are committed to a common purpose and work interdependently to achieve specific performance goals using an approach for which they hold themselves mutually accountable" – *Kazenbach and Smith, 1993*
- d. MS BoS Coordinated Entry
 - Entry
 1. Prospective clients can access CoC Coordinated Entry process through any CoC member agency
 2. Every literally homeless client will have a referral created and should show up in the prioritized listing for that region and the overarching list
 3. Prescreening surveys (built in FormBuilder) will be conducted to determine initial eligibility
 4. If the prescreening survey points to the need for diversion, client will be directed to other resources to resolve their homelessness
 5. For literally homeless clients that should be served (as determined by the prescreening form) from core CoC services (ex: PSH, RRH, SSVF, HOPWA, and CABHI), VI-SPDAT's will be completed in conjunction with the prescreening survey
 6. CoC Member agencies are required to participate in the Coordinated Entry process, and will prioritize program resources (placements) for the highest ranking (most appropriate) client referral
 - Measurements
 1. MUTEH has asked Foothold to provide canned reports that should be available that quickly detail:
 2. Length of time average client spends from initial contact to being engaged to being served by a program
 3. Agency referral/rejection rates
 4. Available units within a given geographic area — the bed registry report could be used but we may need to make a few tweaks
 5. Graphs that quickly demonstrate information quickly would be really nice
 - Questions for the Coordinated Entry Systems Workgroup
 1. Maybe the "electronic referral" should simply be a note on the priority

listing that displays the client's level of engagement in a (specified or non-specified program)

2. Client consent forms should exist in the system
 - a. The client's first interaction with the system should be their electronic signature on a consent form — prior to intake/admission
 - b. That consent should then follow the electronic record regardless of which agency the client eventually enrolls
 - c. That consent form should also allow for verbal consent for intakes by phone
 3. What opportunities are there for AWARDS to receive client info from a 3rd party app — where clients could apply for services through a website and then populate in the priority listing in AWARDS?
- System-Wide Performance Measurements
 1. HMIS measuring:
 - a. Lengths of time in homelessness
 - b. Outcomes/placements (90-120 day follow-up)
 - c. Recidivism

IX. ANNOUNCEMENTS

X. ADJOURNMENT TO BREAKOUT SESSIONS

- a. The meeting adjourned at 12:00 p.m.