



TOWN COUNCIL
Committee to Assess Homelessness in Hyannis
Selectmen's Conference Room

Wednesday March 9, 2016
MEETING MINUTES

I. BUSINESS

A. Roll Call:

Members present: Chair of Committee Councilor Jennifer Cullum, Deb Krau; Councilor Frederick Chirigotis, Councilor James Crocker Jr.; Councilor James Tinsley; Councilor Debra Dagwan
OTHERS IN ATTENDANCE: Lt. J. Challies; Sgt. J. Ellis, Barnstable Police,

Chair of the Committee Councilor Jennifer Cullum opened up the meeting at 5:35 with public comment. Seeing no one from the public wanting to speak Chair of the committee closed public comment. Chair of the Committee introduced Heidi Duffy CEO of Duffy Health Center.

Part of her day today reflecting on what is happening in Hyannis is not unique; it is all across the country in many environments, there is a new wave now in some communities that are actually using the strategy of creating a State of Emergency surrounding homelessness, the cities of Seattle, Portland, and the state of Hawaii, Los Angeles and San Jose, and Oakland California, and Eugene, Oregon. The reason for the State of Emergencies is being used is because it shakes up the ability to identify new resources and breaks more political barriers that people that may experience in addressing the issues, Such as zoning issues and suspending statues of laws and regulations to facilitate contracts between service providers and coming up with funding for shelters, even though that is not what we would want, we are not alone as a community, this is happening all over.

Street outreach is the next topic and where this is in our community and who does this work. Heidi has met with Mark Ells, Assistant Town Manager, and Duffy Health Center has committed to look with the town's help for additional funding for an additional full time outreach worker for her Duffy Health Center. Duffy Health center has also met with Deb Krau, and the Duffy Health Center agreed to commit and can serve as a convener of the outreach provider services that serve the Main Street areas and coordinate those services. Ms. Nelson also said that the Duffy Center will be there to help in any way possible and are committed to do so. Ms. Nelson found a definition of outreach which she described as "Access to care for vulnerable populations "Outreach is contact with any individual who would otherwise be ignored (or underserved) in non-traditional settings for the purpose of improving their mental health, health, or social functioning or increasing their human service and resource utilization. "Source: Morse, GA. Conceptual overview of mobile outreach for persons who are homeless and mentally ill. American Public Health Association Annual •Convention; New Orleans, LA; 1987

There are a number of kinds of outreach that are provided by healthcare providers such as the Duffy Health Center. You often see street outreach as a mental health function, there are mental health workers who are trained in the area of mental health, and they may not be licensed clinicians but are trained in the area of mental health and substance issues. You also see clinicians doing street outreach primarily to introduce themselves to those individuals on the street. This worker gets to know the individual and then the individual feels safe when they are sectioned. There are also outreach workers as well that are there to address basic needs; socks, underwear, clothing etc. On the Cape we have a number of players involved in street outreach (see handout)

Diverse Organizations with Diverse Purposes:

Vinfen Homeless Outreach Team; which covers the entire Cape has 2.5 full time equivalent (FTE) employees. Vinfen's purpose is to connect people who are homeless, to the Department of Mental Health services. They also operate the coffee house at the Federated Church on Main Street, Hyannis. Vinfen projects to assist in transition from homelessness; this service was formerly provided by Eliot Community Human Services; Northshore, PATH coordinator for the state, and now the contract is with Vinfen. "Best Practice" is to act as a 'shelter specialist,' again moving people into Department of Mental Health (DMH) services but not necessarily Department of Mental Health (DMH) eligible.

Council of Churches provides part time hours, and its purpose is the compassionate response to those in need

M25- Dan McCullough and Maureen Carser; formerly did outreach to the camps but they don't go anymore because it is too dangerous. The tents are enabling the individuals to camp, so his primary focus is on meeting basic needs and assisting the other agencies with household items and basic items such as clothing. They are typically out on Wednesdays.

Duffy Health Center:

The Duffy Health Center Case Managers are funded to connect and maintain people in their housing. There are 3 positions funded by Mass Health.

The Duffy Health Center has two Case Managers that are funded by the State Prevention and Wellness Trust Fund to assist in management of chronic disease.

Housing Case Managers spend time each week at the coffee house assisting Vinfen with staffing and connecting participants to Duffy services.

Psychiatry outreach the Duffy Health Center has a new psychiatrist that goes to the shelter and on the street for a few hours twice per month to introduce herself to clients, and get to know them so that the proper services can be identified and offered.

The Outreach Case Manager will be a new position; it originally was intended to be a Case Manager at the NOAH Shelter but has been re-tooled to focus on bringing new patients into Duffy. It can be a shelter Case Management position in the future. The incumbent is willing and interested in doing outreach to the camps.

Duffy's Mission, Purpose and Funding

The Duffy Health Center has provided tours of the facility to President Jessica Rapp Grassetto, Councilor James Tinsley, and Councilor Debra Dagwan. The Duffy Health Center has developed relationships with Councilor Paul Hebert, and has spent time with Councilor Jennifer Cullum and Ex Officio Vice president Ann Canedy. The Duffy Health Center served 3,200 people in 2015, have a panel size of over 4,000. The Duffy Health Center provides medical care, mental health and substance abuse counseling, Medication Assisted Treatment, and case management (previously described). The Duffy Health Center controls diabetes in (400 patients, 66% under control). The Duffy Health Center controlled hypertension (700 patients, 68% within normal ranges). The Duffy Health Center provides preventive health exams (goal is 50%, performance at 40%) The Duffy Health Center provides substance abuse treatment services (75% of our MAT patients have been in the program over one year) The Duffy Health Center provides housing support services- 45 case management slots, goal is to house 36 individuals annually.

The Duffy Health Center's Strategic Plan goals are:

- 1) Re-design our services to become a Patient-Centered Medical Home (improve access), coordinate care (with hospital) and empower our patients to manage their own health).

2) Grow the services, in particular opiate use treatment and day center services.

3) Develop our employees.

The Duffy Health Center has a budget of almost \$6 million, and generates over \$15 million in economic activity in our service area which is Barnstable County.

Half of the Duffy Health Center employees live in the Town of Barnstable (30) and one third of those (10) live in Hyannis.

Barnstable Police Department:

Community Impact Unit is moving to a broader involvement in progressive policing, the police officers are beginning to be trained on handling mental health and substance use issues on the street. Progressive policing should be encouraged and supported by the town, this is happening all across the country. Ms. Nelson spoke regarding the first and foremost important thing to keep in mind is that every mental health and substance abuse crisis is a public safety issue; is there a gun or knife involved, is someone going to get punched; with a clinician on the Police Department team the process of sectioning an individual becomes an easier process and the disposition of the incident should be to have a favorable outcome.

Ms. Nelson sees Duffy's Role in Outreach as the following she explains:

The street outreach position was funded at CAC by stimulus funding 2009-2011. When funding ended, Duffy Health Center picked up the position and converted a vacant Therapist position to a Street Outreach worker. The individual that was in the position did not last. In the meantime, in Fiscal Year 2012 and Fiscal Year 2013, Duffy health Center suffered a 6 figure loss as we moved into our new building and expanded our staff. When the street outreach worker left the Duffy Health Center they converted the position back to a Therapist because the position is revenue generating. The Duffy Health Center eliminated seven positions and laid off 4 staff (out of 60 positions) to right size our organization, and in Fiscal Year 2015 and the current year we are doing well and re-building our balance sheet. Ms. Nelson stated "When I arrived, I prioritized understanding outreach, and regularly convened the group of outreach workers after the full time position was eliminated. We now meet once or twice per year.

Ms. Duffy believes the next step for the Duffy health Center is to:

- Convene the outreach group and the Barnstable Police Department to define our goals for outreach.
- Develop mutual commitment and accountability for these goals.
- Examine existing resources to ensure that they are well-deployed.
- Seek funding for new outreach services.

Chair of the Committee Councilor Jennifer Cullum thanked Ms. Nelson for her presentation and asked if any of the committee members had any questions. Councilor James Crocker Jr. stated obviously the Duffy Health Center has had a decrease in their budget, and had to re look at what the Duffy Health Center can now provide for services but when he looks at the number of individuals in the woods, and the amounts increasing, what are the success rates of the Duffy Health Center to reach these individuals and get them out of the woods, we are sliding backwards so can it be explained, Ms. Nelson said that the opiate crisis is a major contributing factor, overdoses, and the other thing is housing, the Duffy Health Center is looking for affordable housing, the town has none, she recognizes that the Housing Corp and the Duffy Center is way behind in the housing, or placing people in homes because there are none to be had, and the rent is going up every day. Most of the apartments in town are being rented by middle

income individuals and families trying to stay on the Cape and work here which causes a shortage for the purpose we would need for these individuals. Ms. Nelson stated her goal is a pretty aggressive one; Ms. Nelson would like to be able to house 36 individuals annually, as of last week we housed 9 individuals, in February we housed 6 so our total today is 15. Ms. Nelson also mentioned that the housing grants were just approved and we now have vouchers for all of Barnstable, and received more money than we thought. The problem is if we move everyone out of the shelter at once we have nowhere to put them. Councilor Crocker said the shelter is moving to a dry shelter which equals more people moving into the woods because they do not like the model of NOAH, does the Duffy Health Center have a number that you can give us to say that 6 out of 10 individuals in the woods have housing, is there a measurement you can give us to say that your facility is helping these individuals stay out of the woods. Ms. Nelson said that she does not have the number but believes that 60 out of the 3200 her facility serves that people are street people that include the camps, they Duffy Center does not split up the demographics according to when they come for treatment, and how they house them. Ms. Nelson said there is a reporting that is attached to the Federal Funding that has to be done with them to validate the clients they serve, and it was mentioned every year the homeless status of the clients and where they live. Her recall is 750 on the street shelter and transitional housing, less than 100 from the street; she does not break down the stat when the individual is housed as to where they came from. Councilor James Crocker mentioned that last year out of the 100 on the street and a total of 750 people they serviced only 15 individuals were housed, which took a while, how long do you think it will take to house the rest? Ms. Duffy answered a long time. Councilor James Crocker asked if there was a way to change the pace to get these individuals services and housing quicker. Ms. Nelson stated the problem is housing, there are no houses available. Ms. Nelson said there is three factors that contribute to the problem as she sees it; (1) Case Management (we need more of these), (2) vouchers, (3) housing for the vouchers; Ms. Nelson said all three are out of balance and never in sync. When the economy was poor the Duffy Center had a grant that increased the case managers (9) at one time; 5 were dedicated to this type of work only, and in that period we housed 300 people in a 5 year period, what the Duffy Health is funded to do is to provide health care to the individuals so that they are successful in the housing area. We partner with Housing Assistance Corp with the vouchers to get them into housing, so we have more case managers and vouchers to make this happen, but there are no houses. Councilor Crocker said he sees an influx of homeless to the Cape, does the Duffy Health Center have in their budget to handle the influx, Ms. Nelson said no.

Chair of the Committee met with the Human Services Committee along with Ms. Nelson and the Department of Mental Health and it was interesting to her at this meeting that unless an individual is diagnosed with a mental disorder they are not eligible for any services under the Department of Mental Health, and also to receive housing. Councilor Jennifer Cullum said after we have tackled this problem, we may need to look at the definition and criteria that is designed right now, does not benefit some, unless you have a mental diagnosed condition. Ms. Nelson mentioned that substance abuse disorders, the success for that person is to become sober, and when that person becomes sober they can work and reunite with families and be successful. If there is an individual that is so chronic and become disabled, then we can access another portion of Social Security to access more funding for those individuals to be able to afford their home.

Councilor Chirigotis asked about the support after the individual is placed in housing, how we keep these individuals in the housing. Ms. Nelson said that after we place someone in housing the support comes from the case managers, if there is a problem with the landlord, we will sit down with the landlord and try and work those out with the client and the landlord. It really is case management, but the piece that is missing here on the Cape is that we need that middle level where people are too debilitated to live in their own home is just not safe without a 24hour case manager, and that is not possible, but there is a type of facility Safe Haven models, that are single room occupancy where the Case Managers report to every day and work out of these Safe Haven homes and can keep an eye and continue the support the individual needs. Councilor Chirigotis asked if the voucher program covers this type of housing, Ms. Nelson said yes. Councilor Chirigotis asked if we have any of these Safe Haven homes on

the Cape. Ms. Nelson answered not for people that are still active in their addiction and are not receiving medication on a regular basis for the mental health disorder.

Councilor Jennifer Cullum mentioned that she would like to bring the Department of Mental Health in to one of our meetings so questions like “How do you form relationships with these landlords” to be able to create more housing for these individuals. We need to look for any builders that would be willing to do this. Ms. Nelson said we need a forum to educate these landlords about housing these individuals, education is key to the landlords in obtaining housing, to develop those relationships.

Deb Krau said that outreach was the topic tonight and when she read the handout it mentioned that M25 workers were out two days a week, yet she had heard they are only out there on Wednesday’s; are they out there on Tuesday’s as well? Ms. Nelson would look and ask them. Deb Krau said that the information received tonight on all the services provided from the various agencies, and read that the Outreach Workers get together once or twice a year, she believes this committee would like to see a more aggressive outreach, we need something different, she understands the real challenges when each of these 8 hours to 20 hours to full time all report to different bosses and boards, we need a more coordinated aggressive outreach, so if it backs up at the voucher level or the landlords; at least we can reach some of the individuals with other services and get them started they will be provided with some services, she has a hard time believing that 6 agencies with all kind of reporting up their own way and are asked to come together, as Ms. Nelson has asked them to, will get us where we need to be, her thought is we need some sort of agreement or an Memorandum of Understanding she would like to see the 6 outreach groups come up with an agreement together on how they can cover the time they need to be out there, with the police help maybe tell them when they should be out there based on the activity, and it looks like there will be an additional of 2 Full Time Equivalents’ in the areas that there was originally no one, and this would be the way the clients and the community to get some coordination and results while there is still outreach funding for these 6 agencies, so she is requesting these 6 agencies to come up with a schedule coordinated with the police for reporting purposes.

Chair of the Committee Councilor Jennifer Cullum mentioned that at the last meeting that was held there was a motion made by Councilor James Crocker to ask the Assistant Town Manager to come up with a budget on the cost of helping with the effort, but is not willing to put another tax payers dime on solving this problem, we already do that with the police, she is looking to eliminate the police as case works, and the position that is looking to be funded is a position that will hold the Agencies accountable for reporting to this person what they are doing to help and assist these individuals, and that the agencies are accountable for the funding they receive to help these individuals that need it.

Chair of the Committee introduced Michael Sweeney, CFO and Rick Presbrey, CEO, Housing Assistance Corporation to talk about what their efforts are in the homelessness issue. Mr. Sweeney stated that his agency has been working closely with the state for about 6 months through the department of Housing and Community Development to fund an outreach worker associated with the NOAH Shelter through the contract they hold. The contract is still pending, however we would like to hire someone now and wait for the funding, and we have interviewed and have someone that is ready to start now. What we see as the vision for this person is reaching out to those on the streets and to get them the services they need and by providing whatever is needed. Housing is a problem as it was mentioned, but this person will help those individuals get into the NOAH Shelter and set them up with the services they may need whether it be counseling or mental health services, and then eventually possibly getting them into their own home through a step by step process. This person will also work with the landlords. The Housing Assistance Corporation has housed 70 people in 8 months since July 1, 2015. There is a building he knows of with about 6 units empty that his agency is working on getting the vouchers for. Chair of the Committee Jennifer Cullum asked how much the position pays that he described at 32 hours. The safety issues for the outreach worker is a concern, however the pay would be mid 40’s according to Mr. Sweeney.

Councilor Chirigotis asked how are we going to coordinate all of these outreach efforts. What is Housing Assistance Corp role in the coordination? Mr. Sweeney stated that the Duffy Center has offered

to organize and convene the outreach workers, his agency will support the Duffy Center and make sure that our staff person is a viable part of those efforts in outreach, this person will fall under my supervision, so I will make sure that it happens and they work with the Duffy Center and enhance the services provided. Councilor Cullum said that a commitment of 110% is what we are looking for from everyone, so an MOU is absolutely necessary. Councilor Debra Dagwan mentioned that there are a number of vacant properties around, and she would like to know if there was a landlord that is interested in renting, or is there an incentive for the landlords. Mr. Sweeney said that part of his agencies role in placement is working with the landlords, and part of it is if the tenancy starts to get in trouble with the landlord, then you can intervene and try and work out the problem. We do this continually. If there is a voucher program the landlord knows that on the first of the month there is a check sent to them for a major portion of the rent, that is an incentive for them and if the problem is with the tenant not paying, we will work with the tenant to solve the problem. Councilor Debra Dagwan asked if there was any training for the landlord. Mr. Sweeney said that through his education at Housing Assistance Corporation, they have had workshops for the landlord and potential tenants, but the real effort is in the placement of the individual, that the landlord has someone to call if there is a problem.

Councilor James Crocker said that we are all committed to solving this problem; however there are things in your organization you could possibly help me understand, clearly with your location on West Main Street and the NOAH Shelter, there has always been discussion from people that are told to make appointments at the NOAH Shelter so that the numbers look better, can you tell me if this happens at all.

Mr. Sweeney said he is unaware of this happening; there are individuals that use the NOAH Shelter during the day for various reasons, but do not stay, or work with our housing person there, or our person that handles the job force, Mr. Sweeney said it really does not benefit us to escalate our numbers in one or the other facility. Consistency of the staff at your facility, we were told that there is inconsistency in the shelter staff on how they enforce the rules. When we were in the woods we were told by individuals that because the inconsistency exists they choose to step aside, how is the training going in the facility. Mr. Sweeney stated that he has been involved with the NOAH Shelter and with Housing for over thirty years and in the last two he has seen the policies tightened, and he sees how the guest and clients are treated on an individual basis has gotten better. Councilor Crocker said it is a work in progress and are getting better. Mr. Sweeney said he believes it is getting better. Councilor Crocker asked about the dry shelter and how nimble are you to changing that idea so that individuals are not turned away and back into the woods. Mr. Sweeney answered that it is in its early stages and the planning going forward will have to address those issues. Mr. Sweeney mentioned that there are some that do not want to go to the shelter and choose to stay in the woods, and we need to address those individuals and their needs; this will happen with the Transitional group discussing this. Councilor Crocker mentioned that the individuals in the woods that do not want to come out and we need to find a way to reach those people the best we can to get them in the dry shelter. Councilor Crocker asked that if we can through the outreach workers convince these individuals that they will be safe in the environment of the dry shelter will there be enough outreach workers to address the needs of these individuals. Mr. Sweeney answered the outreach worker will have 35 hours on the streets working with these individuals and getting them set up in the services they will need. Councilor Crocker asked if any of the outreach workers are going to be split between West Main Street facility and the NOAH Shelter, or are they just going to be dedicated to the NOAH. Mr. Sweeney stated that the commitment is 35 hours a week, and depending if they are with the police for all 35 hours would be great, he sees them stepping up to that with the help of the police. We also want this person to work with the other outreach workers that are up there. Councilor Crocker asked about a commitment from the Housing Assistance Corporation with regards to the 35 hour position and a safe passage with the Barnstable Police. Mr. Presbrey spoke about the position stating that the focus is going to be housing if we can get them out of the woods. Mr. Presbrey said he travels around the Cape looking for housing in the towns these individuals came from. There are two issue with the dry shelter (1) the core group that works currently in the shelter wants it to

be a dry shelter and we know there are people that want to be there and people that do not, so we will have to make adjustments to that and make sure we are consistent. (2) The issue of being dry is interpreted in two ways; the emergency room doctors have a different definition than we do when it comes to being dry. If someone has taken synthetic drugs the test provided today do not pick them up, or if someone has smoked marijuana three weeks ago it is not detected in a simple urine test. We currently have staff members doing the testing of the individuals as they report to the facility, if you test positive you are not allowed in and they are on the street again. He does not like it when people are turned away because if you turn someone away, then it may be the end of that person's life, and he does not want that to be the norm. He would like to have another room where the people who are not sober can stay in the facility until they are dry and move to the other part of the building. We are very committed to make sure we help the town in any way possible moving forward. Councilor Crocker mentioned that this town is concerned about the people in this town, so do not say we are concerned about the business here, we are concerned about the people.

Chair of the Committee wants a Memorandum of Understanding in place so that everyone understands the role from all of the agencies and everyone knows what their responsibility is moving forward.

Ms. Carolyn Corrigan, Council of Churches said that the journey of homelessness is important to understand, there was a woman who lived in the woods for five years, and she had a drinking problem. She decided to get sober and went to Gosnold, then went into a home that the Homeless not Helpless owns, her intention was to become sober and get her life back on track. There was a case manager assigned to her and she was doing fine, the success is based on the case manager staying with this person and making sure they follow the treatment program, unfortunately she did not stay, she went back to what was familiar to her, and this is what most do, they will return to what is comfortable for them and that sometimes means the woods because it is a simple life and that is what they are seeking. It is like someone coming out of prison, they can't face the real world.

Chair of the Committee wanted to make sure everyone knew what this committee is trying to do, we are committed to the trying to mitigate the problems in people's lives and in that making the lives of neighborhoods safe for everyone. We need to show a solution oriented path for the homeless. Everyone on this committee has a heart and we understand the complex issues surrounding this and we are here to help solve this problem. We need measurable quality goals.

Chair of the Committee introduced Mark Ells, Assistant Town Manager was asked at the last meeting to come up with a budget on a position and the funding source. (See handout)

Mr. Ells worked with Heidi Nelson as well on this. Mr. Ells also went beyond the scope and looked at comparable outreach position. There is also a coordinator position that the police department worked on as well for FY17 budget. If it becomes an internal position then there will be collective bargaining regarding the position if it becomes a Town position, there are several steps in this process if it becomes a town position. If this position is needed quickly then we would look at other sources of funding to expedite it quicker.

Councilor Crocker said he believes this position would be a sunset clause position, and at some point it may end. He never thought this was a position of continuance. He thanked Assistant Town Manager for his presentation and the numbers.

Chair of the Committee again said she is not going to be in favor of asking the Town Council to fund the position or the Town being in the Human Services Business, although she would be in favor of funding a position that coordinates between the Social Service Agencies and getting the Town of Barnstable a seat at the table when these discussion are being held.

Chair of the Committee asked for a motion regarding the Memorandum of Understanding with all the agencies and to respond to council when questions are asked. Ms. Nelson and Deb Krau will work on it in the next couple of

Councilor James Crocker made a motion to development of a particular time table with regards to the Memorandum of Understanding so that we can have full discussion and disclosure about what we know and where the strengths will be. All committee members voted in favor of this motion.

ADJOURNED: 6:55PM

NEXT MEETING: March 29, 2016 5:30pm