



## Oregon HIV Housing Task Force Meeting Minutes: February 16, 2005

### Participants:

<b>Name</b>	<b>Agency</b>
Sherri Alston	<i>EOCIL</i>
Jeanne Arana	<i>Oregon Housing and Community Services</i>
Annick Benson-Scott	<i>Department of Human Services</i>
Jarae Bjelland	<i>Marion County Health Department</i>
Jack Duncan	<i>Oregon Housing and Community Services</i>
Victor Fox	<i>Department of Human Services</i>
Emily Graham-Berks	<i>HIV Alliance</i>
Liz Harrison	<i>Oregon Housing &amp; Community Services</i>
Colleen Martinson	<i>Oregon Housing &amp; Community Services</i>
Renee Yandel	<i>HIV Alliance</i>
Donna Yutzy	<i>HIV Client Services Program Consultant</i>

### Welcome and Introductions

Introductions were made.

### Updates

#### Legislative Update

Jeanne discussed budget reductions and how these may impact Oregon Housing and Community Services and the OHOP program. All agencies are required to reduce funds by 10% across all HCS program. This will eliminate the Home Energy Assistance Program. Governors budget assumes no new revenue. The Hunger Relief Task Force has received positive responses by the Governor. On the federal level the community action agency's flexible funding could be cut. Possibly 50% may be restored.

#### HIV Client Services

Vic discussed the impact of CAREAssist on Ryan White services and the OHOP program. When OHP closed this impacted the number of persons coming into CAREAssist. This in turn requires local jurisdictions to spend more dollars on medical services impacting their ability to assist clients with other supportive service needs, including housing. HRSA is providing more directives that HIV Client Services must first fund Health Insurance, Medications, Dental, MH/SA and Case Management. This will require the program to identify other funds to save some "supportive services".

## **OHOP Update**

### *OHOP Management:*

Jeanne announced that HCS is currently in discussions with DHS around transferring the management of the OHOP program back to HIV Client Services. HCS does not provide direct services to clients and has had a hard time fitting the program into their existing structure. HCS does not have the capacity to maintain a direct service model. Currently, the OHOP Management Team is looking at how this will work and what the relationship will look like in the future. This model will better align the services with Ryan White. As the two state agencies work towards some agreement more information will be available to case managers and coordinators.

### *Formula Funding:*

Oregon has been notified that we are now a HUD HOPWA Formula funded State. These funds come to HCS as a part of their block grant. HCS has proposed that DHS remain a partner for Formula Funds administration. There is 1 staff person who is the Consolidated Plan Coordinator that represents certain areas of the plan. HCS just completed the prior year report due to HUD, now HCS is in the process of finalizing the CP for 2006 cycle. Every community in the State has to have consolidated plans that will be in compliance with the state plan. HOPWA formula funds will align with the competitive program. You can get public hearing schedule to discuss community needs.

### *APR:*

The OHOP program has just completed its second program year. The HUD Annual Progress Report OHOP reports that OHOP is currently serving 151 PLWHA and 143 family members.

### *OHOP Staff:*

There are currently two open HOPWA Housing Coordinator positions. Currently, the position in Lane County is posted. Discuss with Jill. Renee suggested that posting should also be included in local regions, for example the Eugene Register Guard.

### *Housing Coordinator Updates:*

Colleen is currently working in the Easter Region and Region 3 in Southern Oregon. Colleen spends the second week of each month in the Southern Oregon community. There are many post-incarcerated clients that are failing in housing by re-offending. Case Managers are pulling clients off of the OHOP program as a result of incarceration. Colleen would like to look at failures and successes in how OHOP managed PIP eligible clients. Colleen is assisting some clients in that area in moving away from sub-standard housing situations. Colleen is focusing her attention on affordable housing first in order to prepare clients for Section 8 assistance. Jeanne mentioned that their needs to be a policy/procedure to assure that services are provided to clients in a consistent manner throughout the state. Colleen also mentioned that she is getting concerned inquiries from clients that are concerned about long-term OHOP funding.

Renee added that each area has a different availability of housing options and that clients should not be required to live in a certain unit if other options are available that meet HUD requirements. Renee indicated that she wants to be clear on the policy so that she and her staff can work with their clients to assure that they are aligning clients to OHOP's requirements now.

Liz reported that follow-up has been difficult due to the caseload in Region 1 & 2. Liz is trying to identify clients that will not be able to transfer to Section 8 because of their history and identify other options for them. "Home for Good" could be another link with Dept. of Corrections and will need to be explored. They may be able to provide tenant readiness within the correctional facility. OHOP needs to explore these kinds of programs. Many landlords accept clients who complete these kinds of programs regardless of their history. St. Vincent in Lane charges \$200 for Ready to Rent class which is not specific to HIV. The cost of this program is difficult for local programs to pay if clients cannot afford it.

#### *Local Housing Concerns:*

1. HIV Alliance- HC has been out for a number of months. This has been a challenge for case managers. Follow up is not occurring with clients. Crisis management around housing is beginning to occur for HIV Alliance. There are challenges around discrimination and HIV Alliance is perusing the Fair Housing agency to discuss discrimination issues. HIV Alliance is spending more time identifying appropriate housing and staff are forced to spend additional dollars to keep folks housed. Ready to Rent is important for some clients but is expensive in Lane County.
2. EOCIL- Eastern Oregon has not had many challenges. People are stabilized and the OHOP coordinator has worked very well with staff. Clients are stable and have been housed quickly. Case Managers work really closely to the housing plan and provide extensive follow-up services. EOCIL has worked closely to landlords and have developed relationships that have helped in housing clients.
3. Marion- Housing has been okay in Marion. They are screening for appropriate housing needs and only referring high need clients. The barrier is more about the influx of clients with medical assistance needs, which is straining local finances.

Jeanne: HC's should be looking at other funding streams for those clients on the waiting list. Community Action should have funds that may be able to assist clients. Jeanne will discuss this with HC's. CAP agencies may also be able to reimburse local communities.

#### **Other Updates**

Jack announced that an inpatient chronic MH provider network in Florence. On HCS website subsidized housing programs are listed under county.

Vic mentioned that MH providers avoid dx with HIV positive clients because they don't understand HIV.

Sherri: Voc Rehab will pay some support services for clients involved in their project.

- **Action: Download factsheets on OHOP and OHOP-PIP from HCS website.**

### **HIV Housing Comprehensive Planning:**

HIV Client Services will look to the Housing Task Force once again for annual strategic planning. We will need to begin to develop the HIV Housing Comprehensive Plan and will need to pull other people into the discussion in order to get a complete picture of the issues.

Group Decisions:

The task force participants agreed to keep the task force a small group and invite key players to each meeting. The strategic planning process would occur over the next year and each meeting we will deal with a specific topic.

1. Mental Health  
*Vicky Skryha, Bob Nikkel, Susan McCreedy*
2. Substance Abuse  
*Marty Perrigan, PAC, Mult. Co, Ontrack*
3. Ready to Rent  
*CAP, OHCS*
4. Discrimination/Fair Housing  
*Eugene Human Rights Commissioner (Emily Graham Berks), Peggy McGuire-Fair Housing Council of Oregon*
5. Corrections  
*Nancy Horn, Home for Good (DOC), Mult. Co has transitional CM from prison (Marilee), PIP program*
6. Re-employment  
*Voc-Rehab (Sherri can assist with identifying contacts), CAPCO, Tom Clancy Burn, CAP Return to Work Program, St. Vincent De Paul*
7. Successful/Unsuccessful Landlords  
*Jeanne Arana can provide contacts*
8. Undocumented clients  
*Centro Latino (Renee can provide contact), Mexican Consolit,*
9. Homelessness  
*Rainy Gavain (OHCS), CAP agency (Dan Murphy), Whitebird (homelessness CM)*

Process: First 1.5 hours of each meeting will be spent on presentations and dialogue from invited speakers. The last 1.5 hours will be spent on developing goals. Meeting hours: 1-4

### **Next TF Meeting**

TBA, 1-4 PM