

Greater Kansas City Coalition to End Homelessness
Board of Directors Meeting
May 01 2020 8:30 AM – 10:00AM Annual Meeting
Online Go To Meeting: <https://global.gotomeeting.com/join/978587821>

I Call to Order: CP MW- 8:34am

II Roll Call

a. **Present: Matt Watkins, Kimberly Henderson, Simon Messmer, Jane Philbrook, Heather Bradley-Geary, Greg Porter, Precious Stargell Cushmn, Cara Hoover, Jameson Auten, MB @ 8:40am-8:57am, CM @ 9:02am**

b. **Absent: BM**

III Motion to Approve: Jane 2ndHBG Approved- Unanimous

IV Approval of Minutes

a. March 2020

i. Edits: None

ii. Motion: GP 2nd Jane

iii. Approved Unanimous

b. April 2020

i. Edits: PSC sending amendments

ii. Motion GP 2nd SM

iii. Approved Unanimous

V Public Comment- None

VI Executive Director Highlights

a. **HH Noted:**

i. Working on COVID-19

ii. Thank you for gift cards!

iii. Remote working going well, tech working great.

iv. Marqueia is appointed to Health Commission.

VII Committee Reports, Finance

a. Executive

i. Treasurer Report

ii. Wrapped up year financials this week.

iii. Financials

a. On website and emailed out.

b. JP: On monthly statement of activities that shows MARCH 2020 on grants line (430) is that money that has come in since March.

Amber: Funding is showing that it ends in March.

VIII Discussion Items Requiring Board Knowledge

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a. HMIS Lead Agency Status Update

- i. HH Noted: Things are going well! Having Shida on board is great, she has already completed a safety and security training allowing she is working with Simtech to clean up SPM data. HUD allows us to go back in and provide significant revisions as needed to our data. Shida has been going through program by program to ensure SPM data is correct.
- ii. GP: What are upcoming deadlines that we will be needing to hit that we will need to be aware of?

HH: ESG Caper report in coordination with MCH, Shida LAS is also coming up. SPM continue to be cleaned up. Simtech is also very helpful in ensuring we are working on what we have coming up.

GP: And no issues with CW as a vendor?

HH: None so far.

CH: Any feedback from the community?

HH: Through Shida, yes, all positive. Folx are getting what they need and are

MW: were you thinking of HIC/PIT?

HH: No, but that is a good point, but I was thinking of CE.

GP: Can we get a dashboard with HMIS customer service details until we get a committee to oversee HMIS LA activity?

HH: Yes, we can get that dashboard each month. Shida will prepare and will have that for next board meeting.

b. COVID-19 Updates/Recommendation

- i. Jackson County Contract

HH: Will be giving brief overview.

Early March we began holding conversations regarding community responses.

HUD TA began reaching out asking about our response.

Started inviting ourselves to the table at city meetings, etc.

None of the entities had not thought of homeless community response and then began asking for specifics on what our community needs.

Created a plan give on March 20. Priority need expressed was isolation housing for homeless population.

City committed to 20 hotel rooms.

HUD TA still reaching out and asking what we are doing in our community and giving examples of what other communities are doing.

Jackson county has been authorized to

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Advance 200K of that to us, 11% admin fee- unrestricted funds in our account

Staff piece is main concern for this.

GKCCEH would hire 20 FTE and PTE positions serving at shelter, could partner with OMNI for this, would be able to secure Workers comp, BCBS would offer telehealth expanded through July 31-free to us and them.

Would secure outside staff to serve remotely on an on-call basis to assist shelter staff.

Would provide PPE for staff as well as cameras for security and supervision.

The reason GKCCEH is proposing to staff is because no one else has stepped into the roll after multiple asks to outside providers.

FAQs: Concerns around direct service and yes this is out of our lane a bit, but we are getting at least 3 calls a week from HUD that “KC is behind the 8ball” at this point compared to other communities and it is incumbent that the CoC takes on rolls that are not being fulfilled by other agencies. Nothing would go beyond July 31, 2020. If there was a continued need we would have plenty of time to pivot and move responsibilities over to someone else.

Structure and policy already put in place at this point.

HBG: What agencies have you contacted to do direct service? Do you have a list?

HH: Weekly calls with full community and Wyandotte county put out regular asks for this. This didn't land anywhere then reached to Wyandot Center, TMC, Children's Hospital- Jackson county proposed that they would take over their staff contracts. No one was interested in taking us up on offer.

HBG: What's the reasoning behind this funding not being dedicated to increasing hotel rooms instead of one spot.

HH: Research of other communities and best practice shows that you shouldn't do this at hotels due to air circulation.

Providing regular supports to folx is very difficult in a hotel setting. Making sure that folx don't leave campus and providing medical is extremely difficult. At isolation center

HBG: I do not support this and I think that this is 100% out of our lane and having worked on other disaster we are completely out of our lane and I am not okay with partnering with Sal Army because they openly discriminate against LGBTQ folx.

HH: Sal army is not involved in any aspects of the

HBG: its about perception and if folx know they are not welcoming and they would not go because of that and us partnering is with sal army is a sign of us connecting with sal army shows that it is

PSC: Interesting to me that we haven't reached out to people with shelter experience. I agree with HBG regarding her points and concerned about staff capacity. I am not in favor.

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CM: I agree with HBG and PSC as well. There are so many requirements that I am concerned that are not being fulfilled now and if we take on direct service work we won't be doing what we are working on to improve and they are not being working on now. I do not support this. If there were service in KCK my org could help support this.

JP: I have been in contact with KCK folx and our financial situation is different. We could qualify for \$ that KCMO could, so KCK is working with community folx to work this out. As of a few days ago we haven't had a case, however we are still preparing for when it does hit the KCK community. Looking at this from a community standpoint are not going to be jumping in with KCMO because we do not have that type of funding. This doesn't mean I am anti-this, but at this point I am for it.

JA: I agree with what Jane said, we are in uncharted waters and at my agencies and board that I am involved with we are being asked to go outside of our lane. If there is a gap that can be filled we do it, of course we look at the liabilities, but at the end of the day I'm for it.

GP: I tend to agree that if we have done our due diligence and reached out to other providers. I did not hear a single one of our members has been reached out to. One of the shelter providers may have been in a better position to do this. Can we dive into B1 and 2, we need to have liability insurance, can we do that?

HH: yes, that is already confirmed and we have a price quote from our insurance company, cost 4500.00, covers liability for all staff at shelter.

GP: Will cover 20+ staff?

HH: Yes, covers payroll up to 66K.

GP: Management or staff responsible, whose name is going to be put on that doc,

HH: GKCEH.

GP Whose name?

HH: Mine and possibly Joyce with sal army.

GP: I have concerns regarding capacity. You being management staff is concerning. What if someone doesn't show up on shift 3. How do we have the capacity to do that?

HH: In regard to capacity, reached out to OMNI and HUD and they suggest that we work with HR and OMNI said that they could do HR and Scheduling, 24hr and PRN/On call. We would look to hire on call staff from other agencies.

GP: if OMNI is going to be helping is OMNI going to be listed on the "staff responsible"?

HH: I don't see why that couldn't happen, I would have to ask OMNI

GP: It seems like there is a lot more and if you put Sal Army on here, if they are not providing services.

GP is this a segregated fund? Because it would be open to audit

HH yes that would be an option to separate that out in QB. In terms of noting request for other staff in community worked out to randy c. at Wyandotte BH and restart has already

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stated that they will not provide services to anyone who is COVID + and haven't heard anything back from RBC for about a week now. So there have been conversations that have happened that didn't

GP: on page 8 standard of care, since we don't provide that, what is our standard of care and how do we know we are not violating that provision?

HH: Since we will have multiple providers offering services we have multiple points that will act as checkpoints that we are providing standard of care. Also this language is from other areas, so if we need to adjust I believe we could.

PSC: on page 9 I think that there are lots of opportunities. I also notice the insurance, we have 2 difference dollar amounts that JACKSON and SAL ARMY are requiring.

Sal Army's scope of work is very specific and deliberate and differs from what HH described earlier.

HH: have sent this to insurance folx to review and they recognize discrepancy and are determining if we move forward or if we make minor changes. Insurance is willing to move forward.

GP: and they are willing to put that in writing? Also I am leaning no but want to get to yes

KH: in agreement. Like JA said, we do need to step up and take the lead. I understand the concerns with language and being out of our lane. I think this is in our lane because we need to advocate for those who are in our community. There are things we need to look deep into, but I am in agreement

JP: I believe we need to have separate account and in QB to CYA.

HBG: I am not against us being fiscal agent for this funding and I have worked for 6 years doing disaster recovery and feel strongly that this is a disservice to our community. This is not what we do and not what we are good at and it is about perception and we need

HH: I would counter that, understanding your expertise, is the way I have been coming gat this is what does it look like if we don't do this and what happens when folx do get ill or pass away? If we do not step into this role. I feel like the real disservice is not stepping up in this time of need so that folx do

HBG: I answer to a code of ethics so I am not saying that ppl should die I am saying we have not done a good job reaching out to other agencies. I am not convinced that we have truly turned every stone. I am not against the concept or us accepting the money and I don't think we have done a good job turning every stone to find the right agencies to do this.

SM: Soft lean towards yes, because if not yes but who. I don't like making decision backed into corner. If we don't make a decision now what happens on Aug 1 if we still have folx who are sick

HH: we would have a 90 period to start pivoting. We could ask folx to take over our place and Jackson county have 2M to lean on. We could roll out of roll entirely or into just fiscal agency.

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CM: can ppl from KCK got to KCMO isolation center?

JP They can go wherever because homelessness has no bounds. WyCo has been working with community because we don't have the funding,

MW: can people from KS got to MO

HH: Right now there would be a bit of a fight around that. The issue hasn't been discussed in some time, but it would depend on availability in shelter

JP: we have arranged hotel rooms but I don't have in writing but Gordon has made sure that we can serve folx now and we stuff hit the fan.

MW: does anyone have a hard stop at 10am.

PSC: I think we push through

MW: we are an organization that is unique int his sector and ppl are turning to us for leadership which is a good thing and I agree we need to be careful. This is a 90 day commitment and we have to be careful

I am in agreement with moving forward

We will have to continue to track and monitor

PSC: I don't disagree with everything that has been stated. We do have a responsible to our community and it is reflected in our mission. I think we need to reach out 1 or 2 day to reach out to other constituents to see how we get them on board. But really get some expertise around the table and reach out to other resources Community services action to help provide support. We have targeted conversations before we are the last resort. We have already obligated ourselves to this and it has been advertised and if we don't do it what does it say about our organization. My biggest concern is not doing it, it is the how. I am concerned with our expertise when it comes to running something like this.

GP: Before I said yes I would need to see liability, etc. and would like to see if this goes past July 31 or if costs go past \$ given we are not responsible. I am worried about cost and liability insurance. I would like to see all that before I vote.

MW: I don't' think insurance will be an issue, but we will not be able to get docs before vote. Are we doing vote separately or together?

JP: It doesn't work too well if we don't have them both.

MW: we would need to do them together.

HH: Yes we would need to do both.

JP: Motion to move forward with both contract, addendum that we make sure we are covered with insurance.

PSC: what about additional coverage to service providers?

JP: would be willing to add that in future to turn over to someone else but not right now. we need to keep moving forward.

MW: If someone wants to take over

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PSC: but this is not transferable within 90 days

MW: that's not how I am reading it I think we can transfer

JA: 2nd

Discussion: HBG: Call for role call vote

MW: vote in chat box

HBG: need to vote publicly.

MW: fine by me

Motion: Jane Philbrook

2nd: Jameson Auten

VOTE: HBG-NO, MB- Abstain, CM-NO, GP-NO, SM=yes, KH-Yes, CH- Yes, MW- Yes, JA=yes, PSC-no, JP-YES- 6 to 4 passes

Motion Approved

- ii. Salvation Army License Agreement
- c. FY21 GKCCEH DRAFT Budget
 - i. HH: Overview- No major changes to budget, Wyandotte budget is grayed out because it has not yet been approved.

HUD Planning grant FY 19 is TBD because we do not know when it is coming on line yet. HUD would like us to double that up since we typically run a year behind.
 - ii. Point of revision: HMIS grant left available is 66K, currently budgeted 40K, gives us more room on HMIS budget

We are meeting with national HUD to discuss all finances in the capacity grant and should have idea of what this will look like later today.

General OP budget line item equipment has gone up over 100% we alternate every year, and we will need to renew for all of our staff because technology is failing.

Went up PIT, we had lower expense last year based on what we were told by HUD TA, but went up because we corrected it back up to the actual expense.

SM: There was a discrepancy with Planning grant

HH I have it noted as full 467k, but we will only have 11 months, just under 14K will not be a part of this for this FY. That is where FY 19 planning grant comes into play. And we can pull that FY 19 grant over anytime.

PSC: Those distributions are the exact grant awards, do you have a plan to resolve that?

HH: correct but in bold and blue are the amount we will see in our fiscal year

PSG: I'm seeing a discrepancy of 32K

SM: that is due to WyCo grant.

PSG: so where are we on HMIS side because that is not clear to me.

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HH: I budgeted under for HMIS, that gets us to around 20K under, meaning we are still lacking 20K in what we will need for HMIS. When we meet with HUD later today that will let us know if the budget line item is going to change at all.

PSG I'm just trying to get to our net income.

HH: Right now we are reading to the negative with recognition that we would get additional funding with capacity grant being discussed later today.

MW motion to approve?

Motion: SM

2nd: HBG

Approved: Unanimous

IX Action Items Requiring Board Vote/Approval

a. Jackson Co Contract-discussed above.

b. Officer Positions

- i. CH: Brian and Jane rolling off, thank you for your service. HBG has agreed to serve another 2 years. And we are working on bringing in WyCo folx so that we can keep our numbers where they are now.

GP: Thank you to Brian and JP

CH: Proposed slate for exec board:

Leave Matt W. as chair

Vice Chair-Cara Hoover

Precious as Secretary

Simon Messer as treasurer

Immediate past chair- Greg Porter

Motion: JP

2nd CM

Approved unanimous

c. FY21 GKCCEH Budget

X Committee Reports, Continued

a. COVID-19 Planning Update- ADDED

Marqueia W: Small group made up of MW (staff), HBG, GP, PSC, Teresa from community linc, Rob and Susilla from crosslines, Sarah Owlsely Townsend

- Created service delivery map for Homeless service prevention.
- One path for those who are homeless and those who have been unemployed for 2 months.
- Makes sure that folx receive proper intervention and only that intervention.

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- Created as an advisory committee to meet the need and have ability to create and oversee diversion process with goal of transferring duties to GKCCEH after 6 months
 - Guidance will be related to federal funding for homeless and homeless prevention services, including policies, priorities, supporting existing efforts, data collection and documentation.
 - Would be charges with project implementation, defining performance measures, project eval.
 - There is a need for a project manager, looking to existing service providers wherever possible to ensure that capacity is there.
 - Need to determine fiscal agent, decision making power of group, draft MOU/Contract, designate project manager, and identifies to drop-in location responsibilities. (Would look similar to HUB system, but would specifically serve those at risk of becoming homeless)
 - 60-100K households that will be challenged and cost burdens after COVID-19 and that would be the target client, but we have not determined any special groups or anything of that nature.

GP: That committee was thinking, and wanted to present to the Board one, that there'll probably be some policies and guidelines as through a normal process, but maybe an expedited process through the Finance and Administration Committee that the board would need to engage. Those policies and procedures have been drafted there before a small group right now, but they'll go before the board on Monday .We would ask the staff team to maybe put together a walk through some of those provisions, so that the Board is educated on those prior to seeking those approvals, then the fiscal agent conversation. They would also request that the group would like to have is, if folks are comfortable with allowing this advisory group, some flexibility to make decisions and stand up the prevention and diversion.

PSC:I am comfortable with this and think that this is right and next week folx should be ready for that information to be passed along.

HBG: I agree with this as well and folx should be ready for information next week. Myself, Greg and Precious will be available for questions as well.

Committee reports will be sent our next week in written form due to time constraints.

- b. Finance & Administration
- c. Community Standards
- d. Supportive Services
- e. Progress & Evaluation
- f. Education & Training

XI Jane Philbrook Updated-ADDED

XII Public Comment

- a. Teresa McClain: I think it would be good to do a 5 or 7 day period to send out an invite to the entire community giving the opportunity to support with the isolation center staffing, etc. or something similar to an RFP with a quick turn around time that would give agency the

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opportunity to respond to specific requests (i.e. Need for 10 staff, etc.). This could help solve the concern around capacity.

- b. Amy Copeland: I agree with what Teresa said and I am concerned with the county line MO/KS as this could be a Medicaid nightmare.

XIII New Business

XIV Executive Session

Motion: MB

2nd: JP

Approved: Unanimous

XV Adjournment