

Benton County & City of Corvallis
Home, Opportunity, Planning, & Equity (HOPE) Advisory Board



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Corvallis, OR 97339
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HOPE MEETING AGENDA

January 27, 2021 from 4-6 PM

Meeting location: Zoom or phone in

Join Zoom Meeting: <https://cscteam.zoom.us/j/91929383646>
One tap mobile: +12532158782,,91929383646#
Dial by phone: +1 253 215 8782
Meeting ID: 919 2938 3646

AGENDA

- I. Welcome, Zoom Housekeeping, Overview of Agenda.....4pm
- II. Public Comment* (10 minutes)4:05pm
- III. Roll call and approve December meeting minutes4:15pm
- IV. Update on Board Training on Diversity, Equity, and Inclusion4:20pm
- V. Community Updates.....4:25pm
- VI. Presentation of all Community Feedback from online surveys, client surveys, and listening sessions.....4:30pm
- VII. Next Steps5:55pm

*Public Comment: if you would like to make a public comment, please “raise your hand” in the Zoom meeting when you arrive or you can chat a message to the presenter. List your name and the general topic of your comment in the chat. Comments will be made in the order that people “raise their hand” or submit a chat. For people calling in from a phone line, there will be an opportunity for comment for participants who have called-in.

HOPE Advisory Board Meeting

1/27/2021

Zoom Meeting hosted by Julie Arena, HOPE Coordinator

Zoom Housekeeping

- All attendees are muted when they join.
- All attendees can unmute themselves and choose to be seen visually by clicking “Start Video” at the bottom of the screen.
- Public comment:
 - Type your name into the “Chat” area, say you want to make a public comment, and on what topic.
 - Example: “Julie – public comment – crisis response.”
 - For those on the phone, there will be an opportunity to comment, too.
- Questions during the meeting:
 - Type into the “Chat” area and send it to host, Julie Arena.

Meeting Logistics and Agenda

- 1. Meeting Overview**
- 2. Agreements and Culture**
- 3. Public Comment on any topics for 10 minutes**
- 4. Logistics:**
 - a. Vote to Approve 12/16/20 Minutes – roll call**
 - b. Next two months meeting schedule**
- 5. Community Updates**
- 6. Presentation on all community feedback on first four Priority Topics**
 - a. Quantitative Online survey feedback**
 - b. Client feedback from in-person surveys**
 - c. Qualitative listening session feedback and online write-in responses**

Agreements for our culture + conduct:

Fun

Inclusive ✓✓

Humor

Food ✓

Action/roll up sleeves

Change the face of Homelessness

Honesty

Respect ✓

Consensus

Think before you speak

Courtesy ✓

Transparency

Recognize personal bias

Kindness ✓

Time management

Concise communication

Open minded ✓

Opinions matter

Data driven

Do your homework!

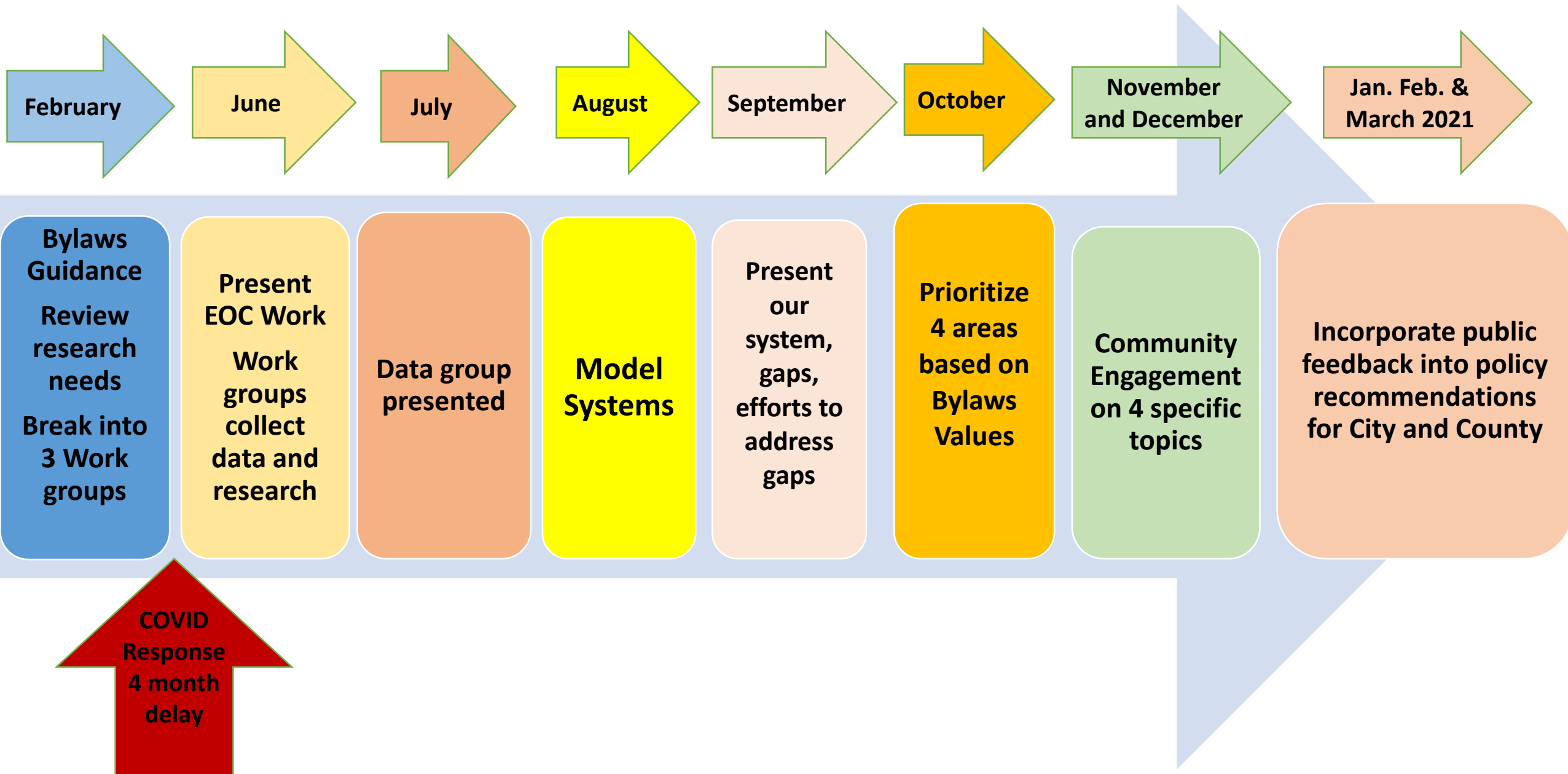
Patience

Authentic

Valuing personal experience

Dedication/work ethic
Honor the expectations of
the work

HOPE Timeline – where are we now?



Public comment: 10 minutes

- **Comment limited to 2-3 minutes based on number of people wanting to comment**
- **Type into the “Chat” and say you want to make a public comment and on what topic.**
- **For those on the phone, I will ask if there are any public comments from callers.**
- **Can also submit written comments via email to Julie.Arena@co.Benton.or.us**

Logistics:

1. Vote to approve 12/16/20 minutes, roll call

Florence Anderson

Lennox Archer

Xan Augerot

Catherine Biscoe

Karyle Butcher

Bruce Butler

Bryan Cotter

Anita Earl

Joel Goodwin

George Grosch

Barbara Hanley

Aleita Hass-Holcombe

Nicole Hobbs

Christina Jancila

Charles Maughan

Pegge McGuire

Jim Moorefield

Andrea Myhre

Jan Napack

Reece Stotsenberg

Linda Tucker

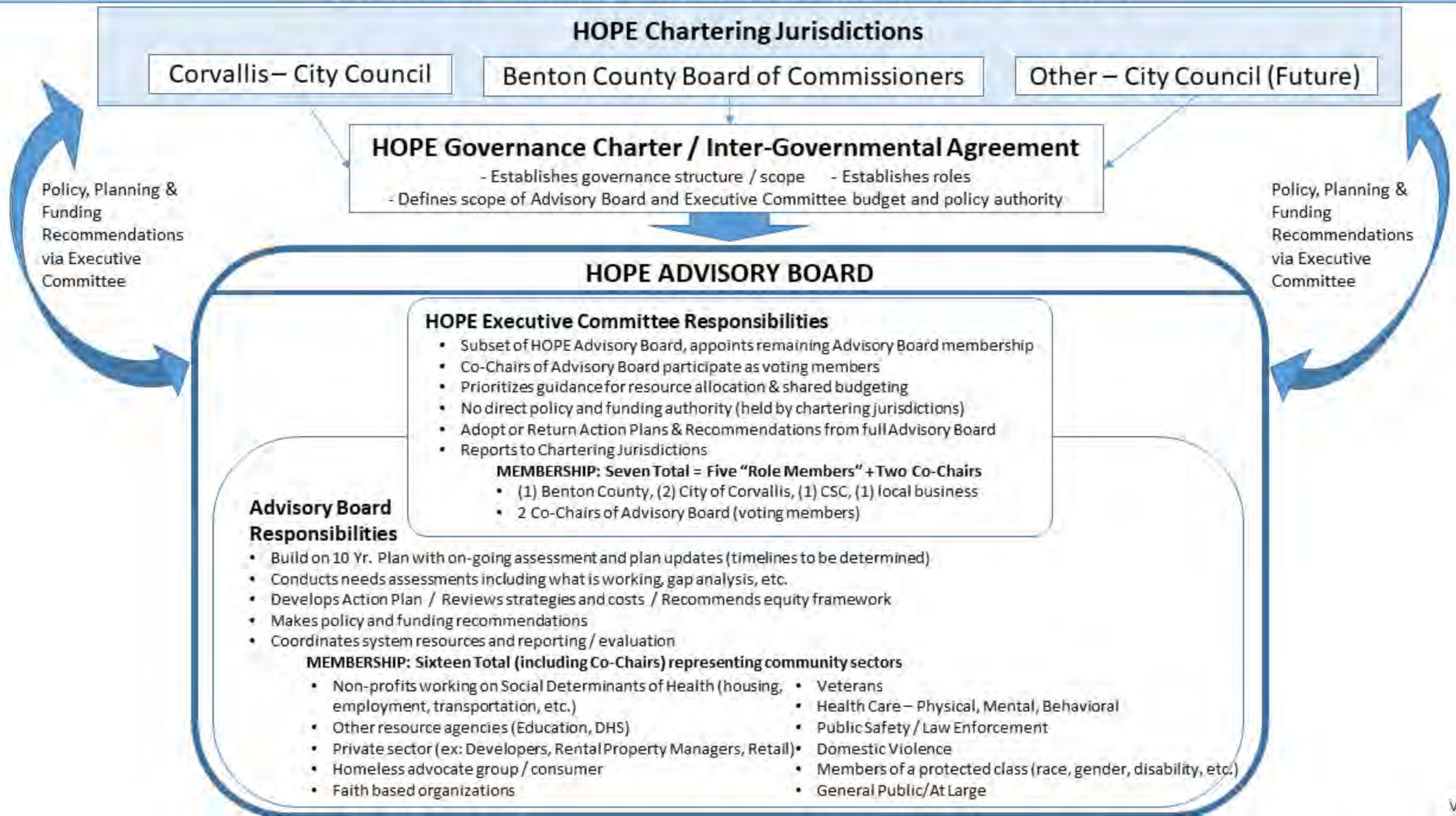
2. February and March scheduling
 - Last two equity trainings, one hour each
 - February: work groups draft the policy recommendations to share with the board at the February meeting.
 - February full board meeting – share draft policy recommendations from each group with full board. Hear feedback from full board.
 - March: work groups finalize policy recommendations based on full board feedback.
 - March full board meeting – finalize policy recommendations.

Community Updates

1. **County Behavioral Health Updates**
 - a. **Drug Treatment Court (DTC): county expanding behavioral health to do treatment component of DTC. New staff to support DTC.**
 - b. **Behavioral Health New Staff:**
 - **Psychiatrist (Dr. Allison Dark)**
 - **Qualified Mental Health Professional (QMHP) School-based (Andrea Craft)**
 - **QMHP Resource (Abbey Gamache)**
 - **QMHP Crisis (Alia Gehr-Selover)**
 - **Qualified Mental Health Associate (QMHA) Drug Treatment Court (Autryana McGee)**
 - **Qualified Mental Health Associate (QMHA) Drug Treatment Court (Danielle Ellis)**
 - **QMHA Wrap around Care Coordinator (Christianna Rhoads)**
2. **Corvallis City Council**
3. **Willamette Criminal Justice Council – Task Force on crisis response, street outreach response team (SORT) or CAHOOTS model**
4. **Point in Time (PIT) County of sheltered and unsheltered community members this week**
5. **New County Equity, Diversity, and Inclusion (EDI) Coordinator JoeHahn (mononym, he/they pronouns)**

Next...Presentation on public feedback

System Structure for HOPE : Home, Opportunity, Planning, and Equity



Priority Topic Areas

- Keep at the forefront diversity, equity, and inclusion recognizing identified disparities in our community data.
- HOPE Bylaws value: safety, vulnerable populations, and racial and ethnic justice.

1. Strengthen Crisis Response Resources: Align Services – Operational Changes for Improved Care Coordination:

- Coordination between existing providers with street outreach and Hub Model of care coordination. Increased case managers to support this care coordination from entry, transition, and permanent case management support to remain in housing.
 - Follow up case management and rental assistance to stay housed in whatever environment works for the individual.
- Data tracking coordinated between providers. Data collection coordinated between providers from entry, to transition, to permanent options.

2. Strengthen Crisis Response Resources: Location – Safe place to be 24/7 for all populations without housing that respects and addresses the needs of each individual.

3. Transitional Options for Safety, Health, and Stability

- Current providers are COI, Corvallis Housing First, and SafePlace.
- Additional examples include microshelters/conestoga huts, managed camping, RV and car camping in locations that are safe, sanitary, stable, and provide services for health.

4. Permanent Supportive Housing Units

- Definition: affordable, community-based housing for individuals and families who have experienced long-term or chronic homelessness and have been diagnosed as having a physical or developmental disability, a severe mental illness, substance abuse problems or HIV/AIDS; or are members of another designated group within the homeless population.
- Structures may include apartments, single-family houses, duplexes, group homes or single-room occupancy housing.
- Supportive services vary, most programs offer case management and housing support, but may also offer more intensive mental health, substance abuse, vocational, employment or other services which help promote independent living. Supportive services may be offered on-site or off-site, or be provided by a mobile service team. (LA County Taxonomy)

HOPE Priority Topics

- How did we arrive at these four priority topics?
 - Data, research on model systems, analysis of the gaps in our system
 - Prioritizing by where our data says we have the greatest:
 - Safety concerns
 - Racial and ethnic disparities
 - Vulnerable populations
- What can Benton County or the City of Corvallis do with policy recommendations on these topics?
 - Make code changes
 - Allocate funding from some limited funding streams (CET, CDBG, TLT)
 - Make decisions about staff time spent on certain topics
 - Make decisions to adopt and support policies
 - Adopt a near-consensus plan, that can be used to leverage additional state, federal and private dollars

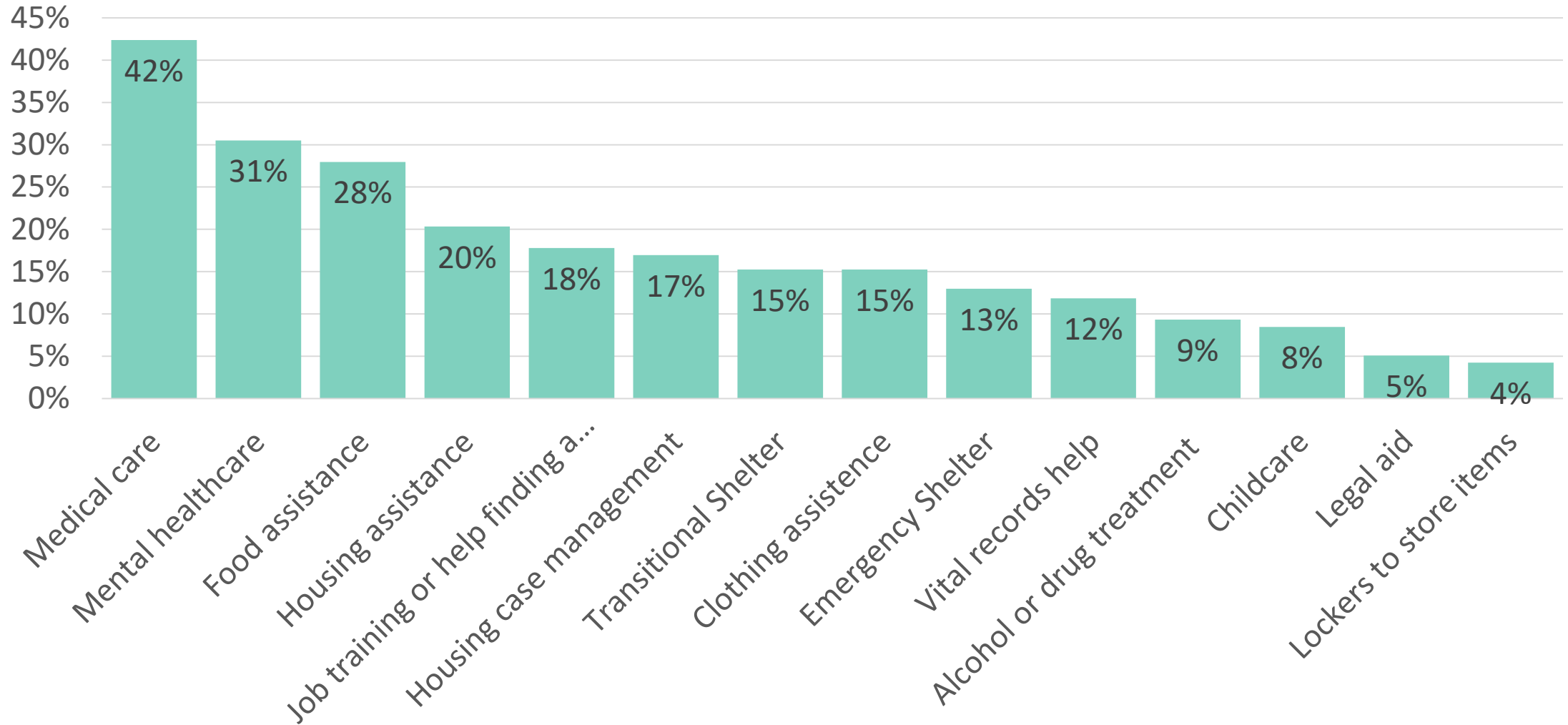
Public Feedback Summary from November and December 2020:

- Online HOPE surveys
 - Topic 1 align services among providers: 177 responses (provider-only survey)
 - Topic 2 location for resources co-located with shelter: 367 responses
 - Topic 3 transitional options: 391 responses
 - Topic 4 permanent supportive housing: 470 responses
- Client surveys collected in person: 244 responses
- Qualitative feedback from community listening sessions and write-in responses to surveys

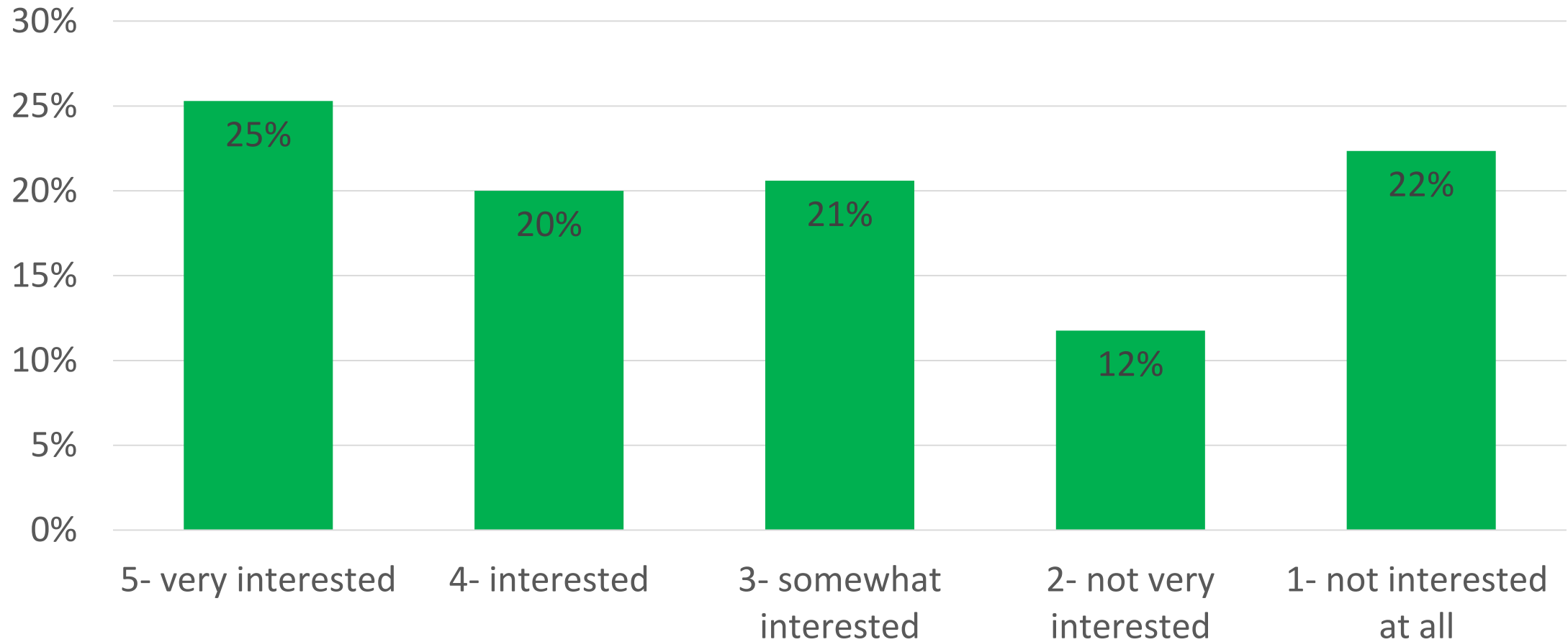
HOPE Priority Topic 1:
Strengthen Crisis Response
Services by Aligning Services

177 online responses
(geared towards providers)

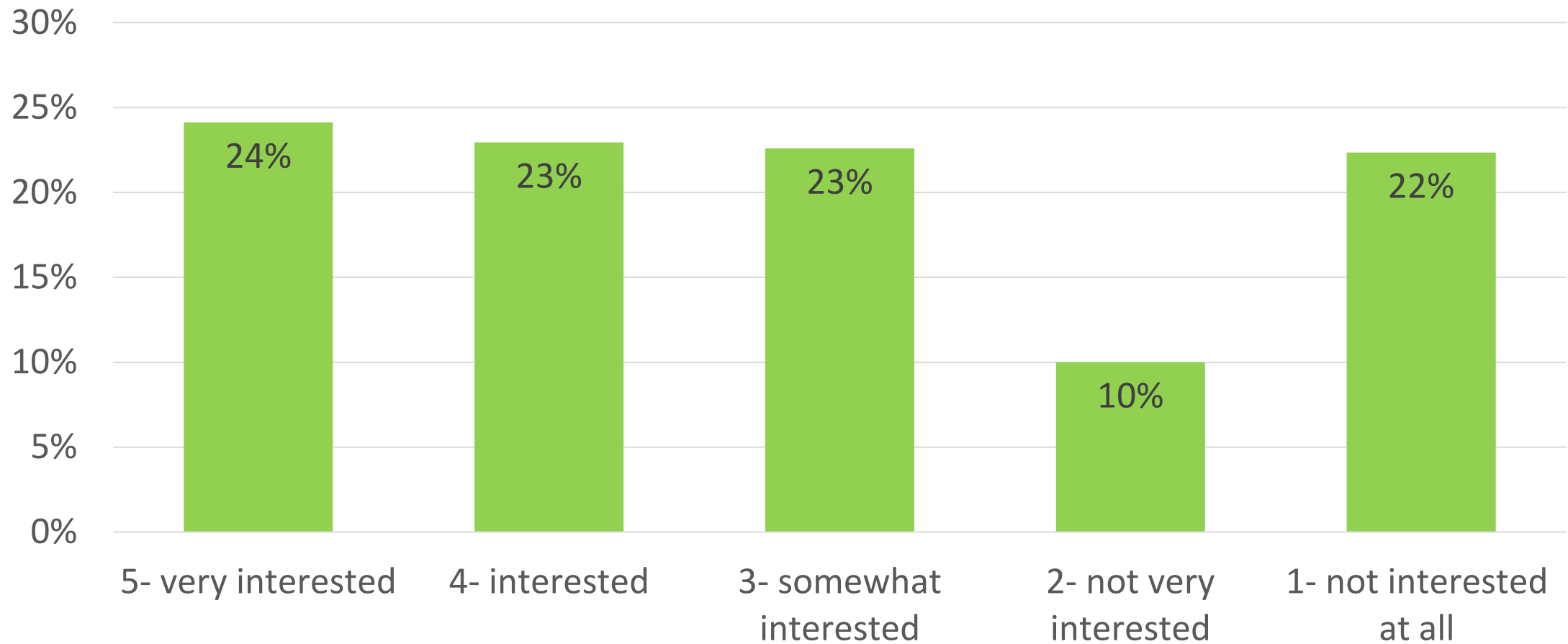
Q1 Which of these services do you provide?



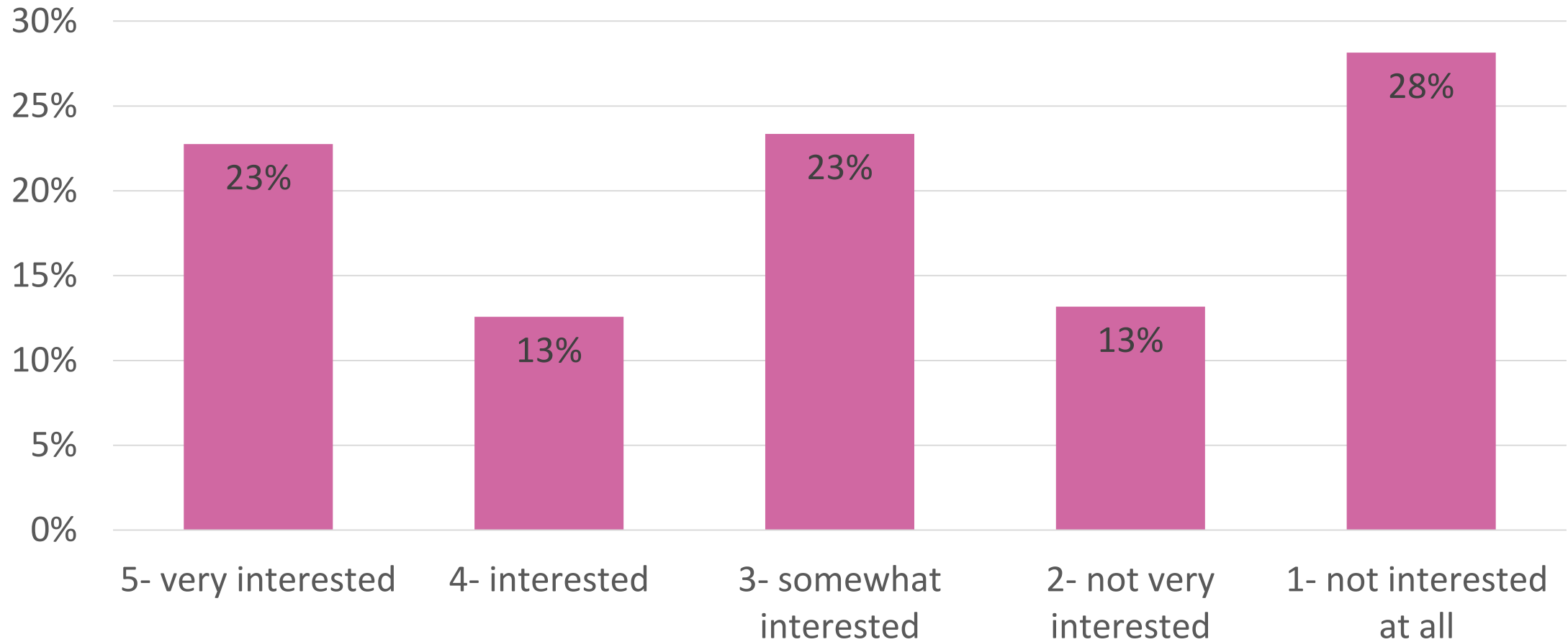
Q2 Working with others to improve data collection/tracking, reduce duplicative data entry and data management?



Q3 How interested are you in being involved in a hub model of care coordination with other providers to meet the needs of individuals?



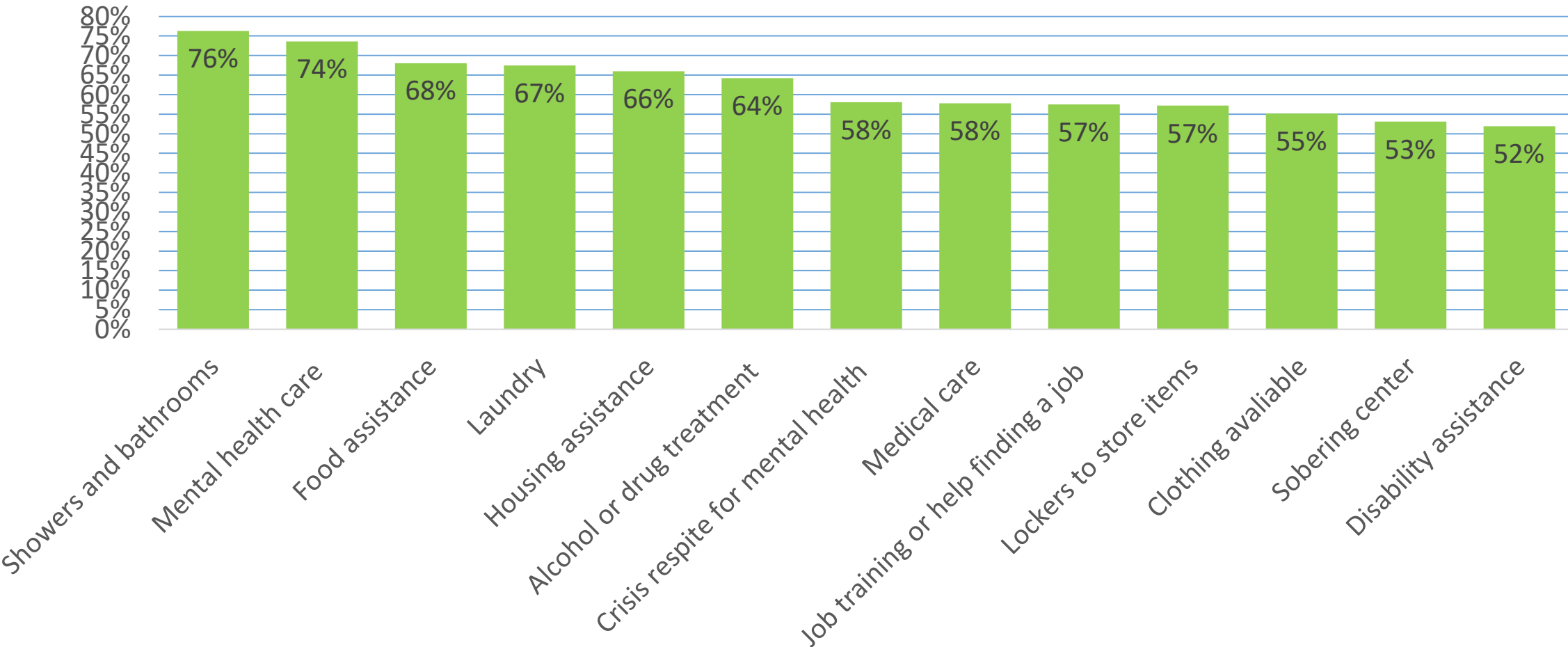
Q4 How interested are you in co-locating services with other providers?



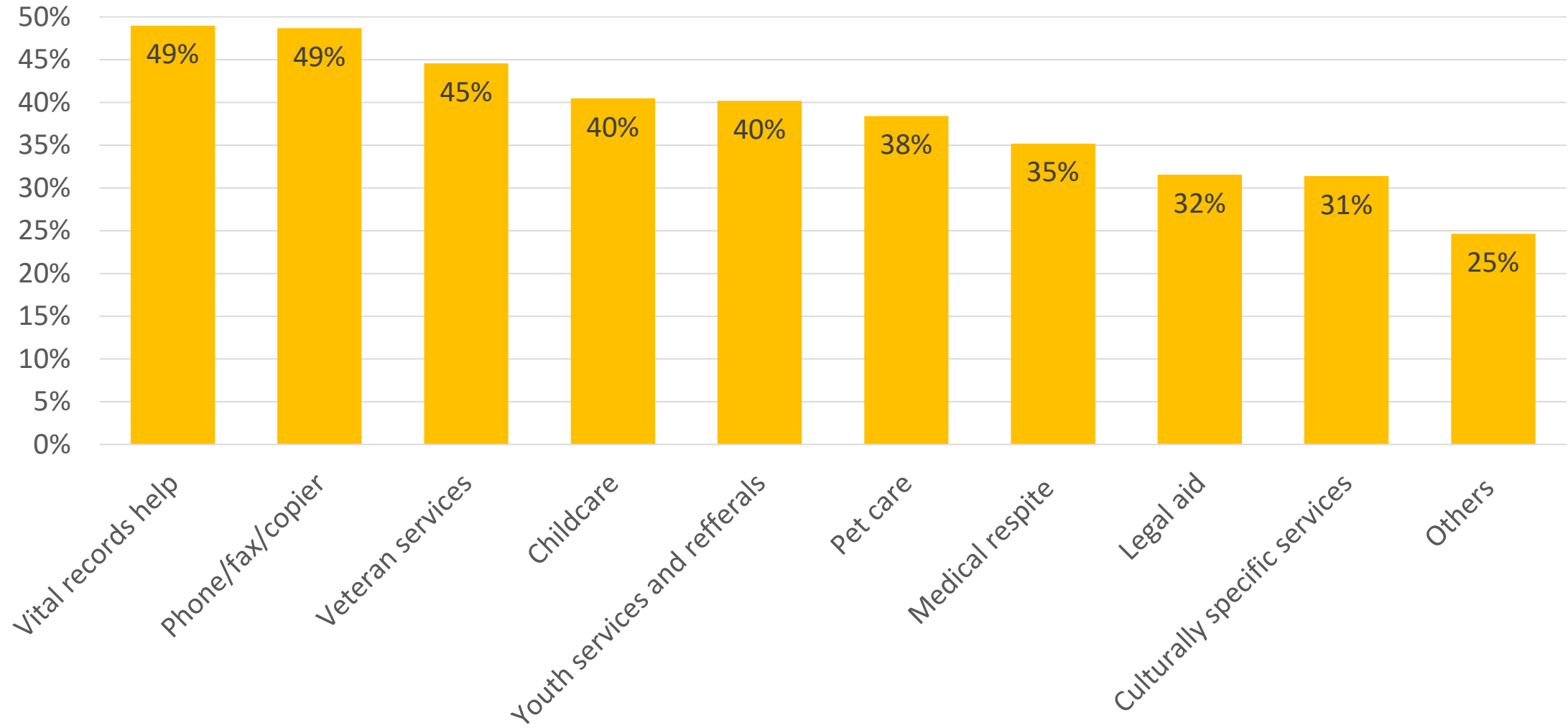
HOPE Priority Topic 2:
Strengthen Crisis Response
Resources with a 24/7 Location

367 online responses

Q1 a. What services should be co-located onsite at a Resource Center?



Q1 b. What services should be co-located onsite at a Resource Center?



Services listed that should be co-located onsite at a Resource Center

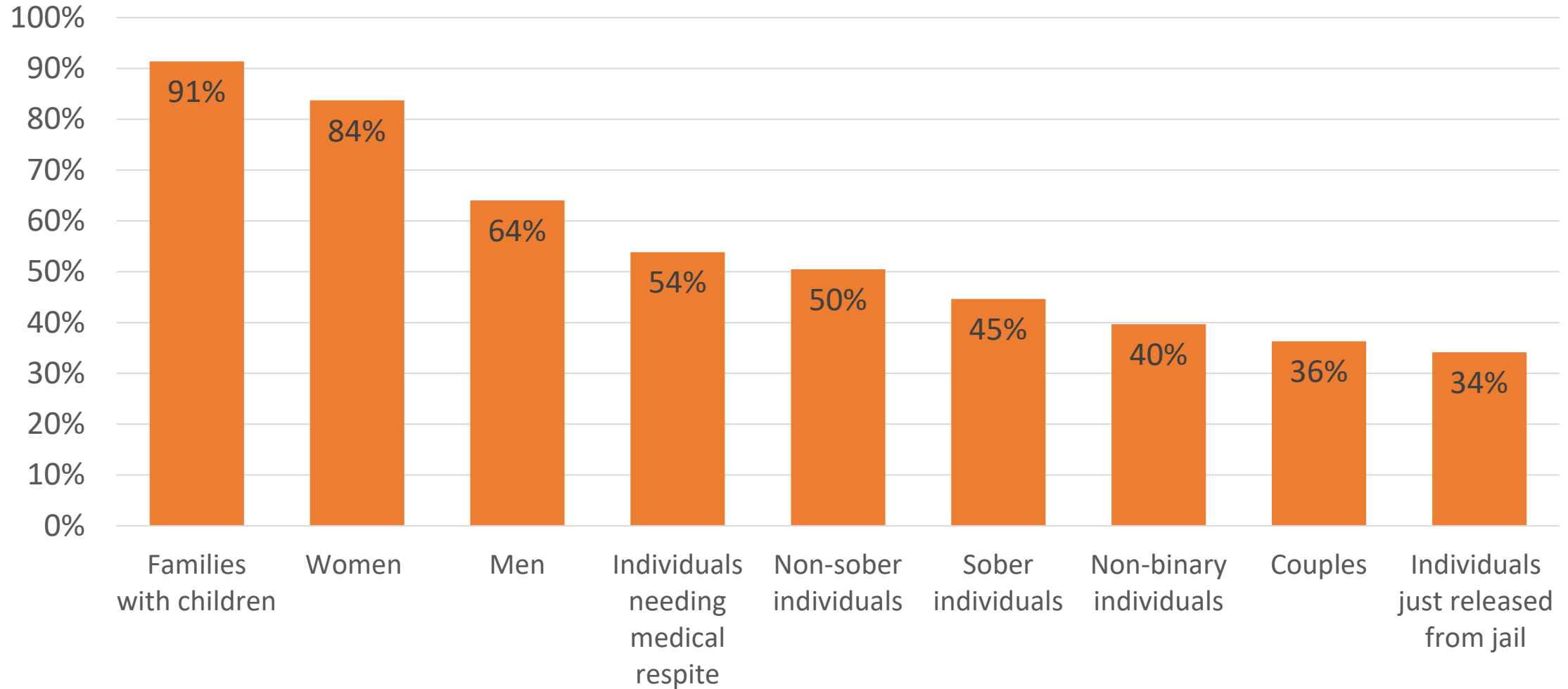
Services most needed

- Showers and bathrooms
- Mental healthcare
- Food assistance
- Laundry
- House Assistance
- Alcohol or drug treatment
- Crisis respites for mental health
- Medical care
- Job training or help finding a job
- Lockers to store items
- Clothing available
- Sobering center
- Disability assistance

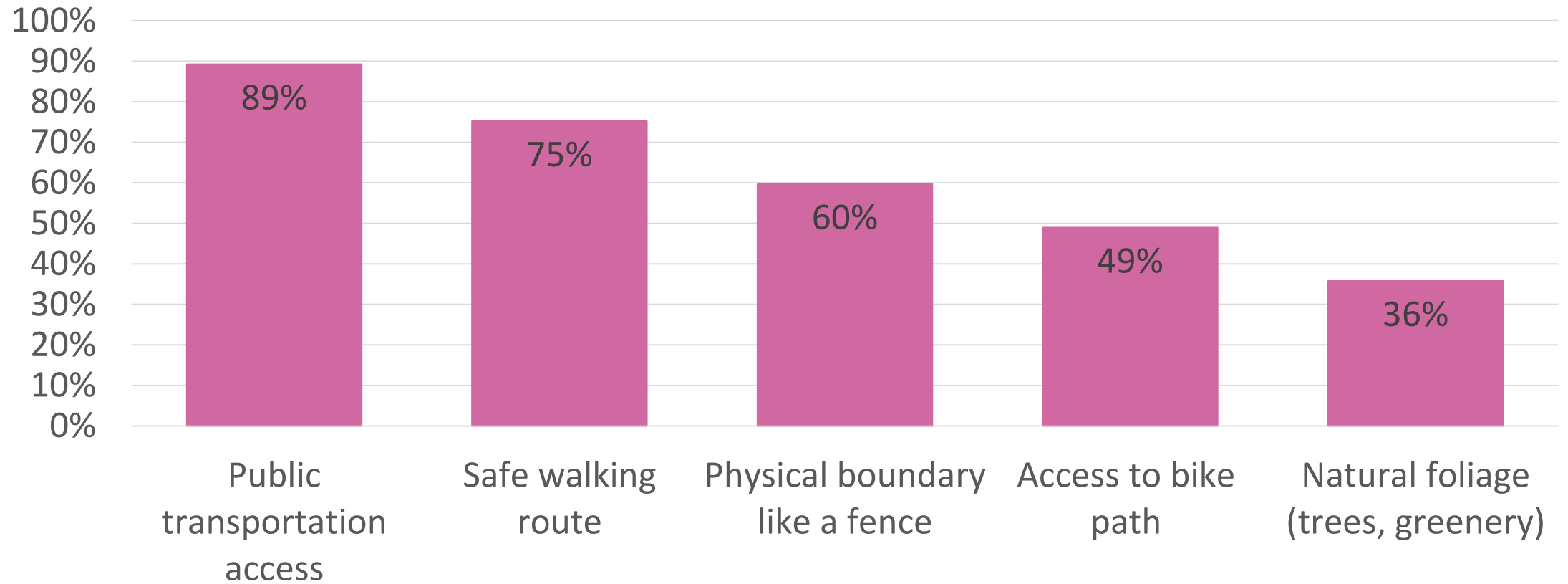
Other services include

- Vital records help (birth certificate, social security card, etc.)
- Phone/fax/copier
- Veteran Services
- Childcare
- Youth services and referrals
- Pet care
- Medical respite
- Legal aid
- Culturally specific service (Casa Latinos, Tribes, NAACP, etc.)
- Others

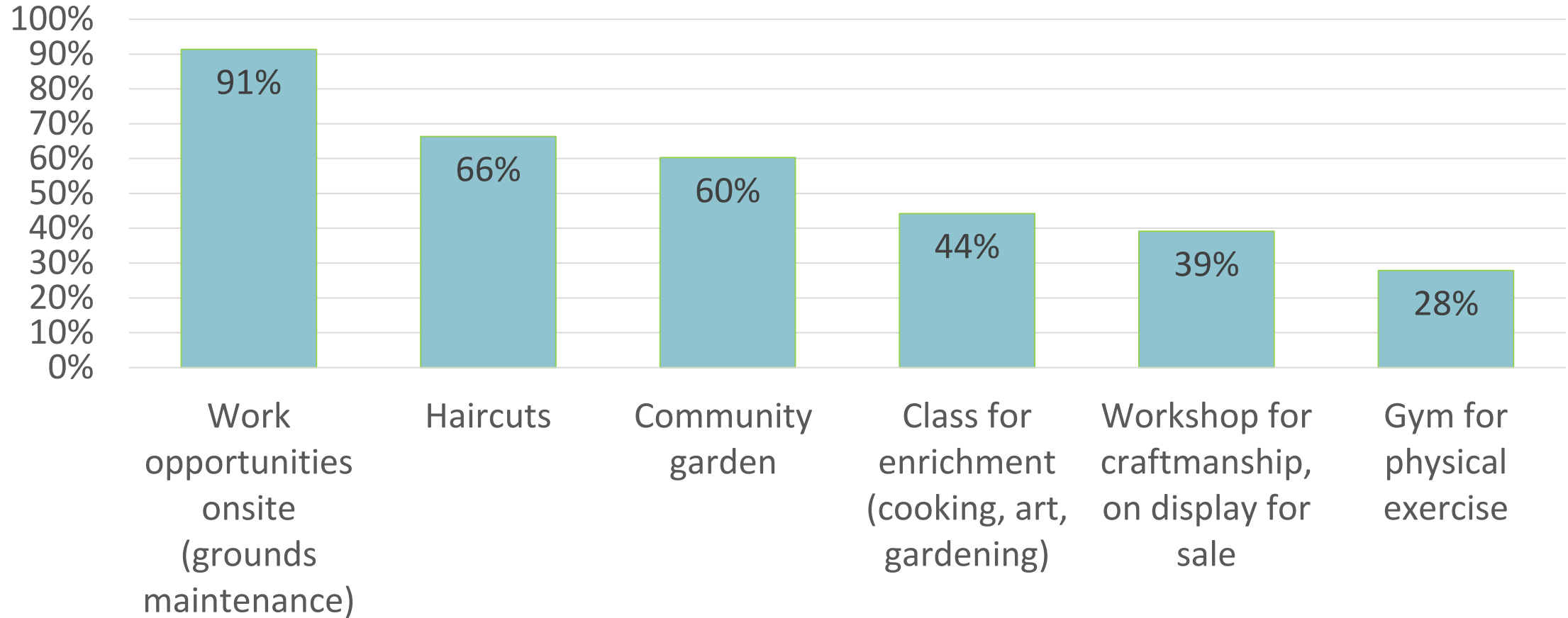
Q2 How many different populations need separate areas for shelter to ensure safety and comfort for all populations?



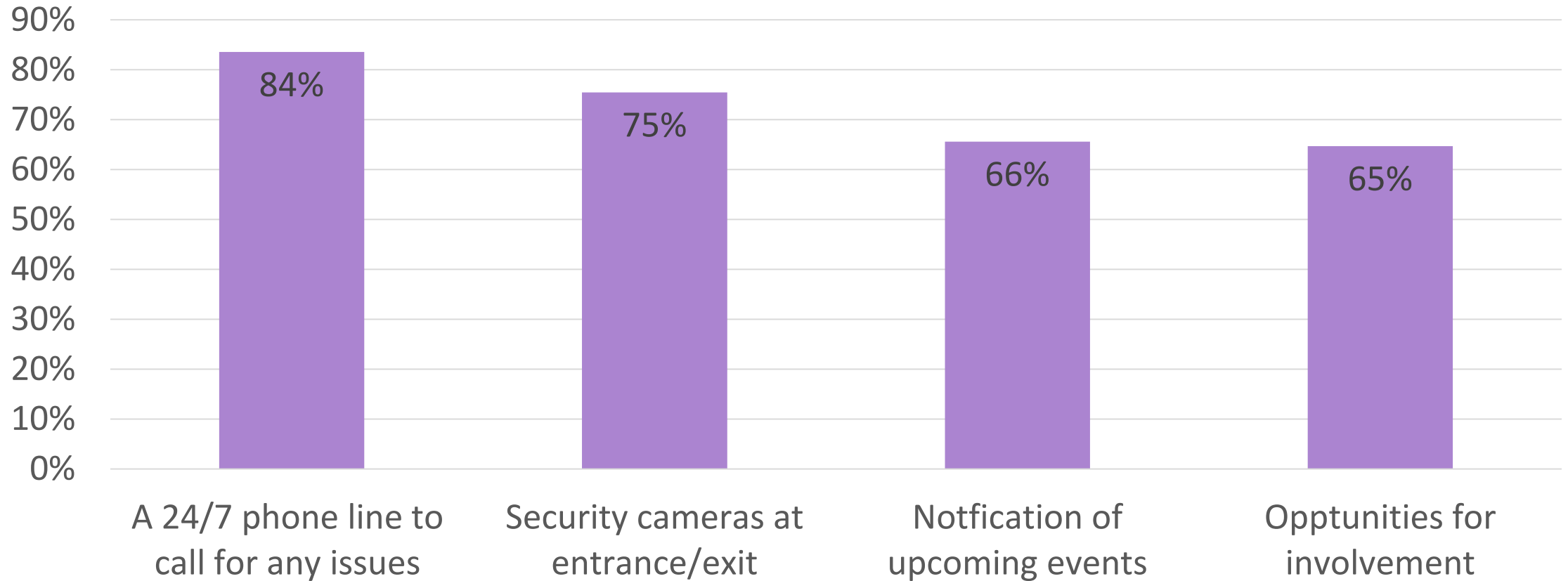
Q3 What are the attributes of a successful geographic location for a Resource Center with safe areas for emergency and transitional living quarters?



Q4 What amenities could be located at or near the Resource Center to enhance the livability of the individuals?



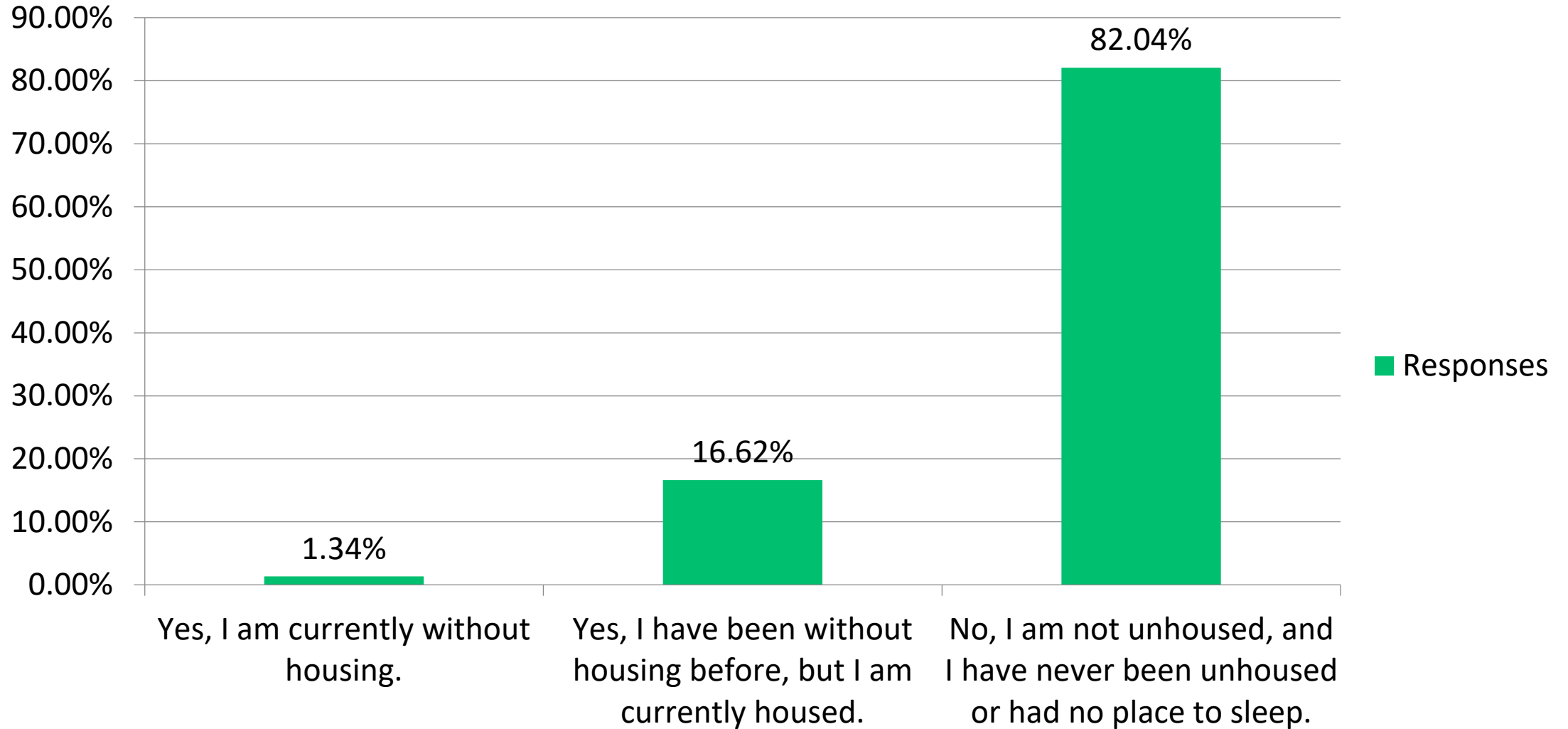
Q5 What services should be available to the surrounding neighborhood adjacent to this type of Resource Center?



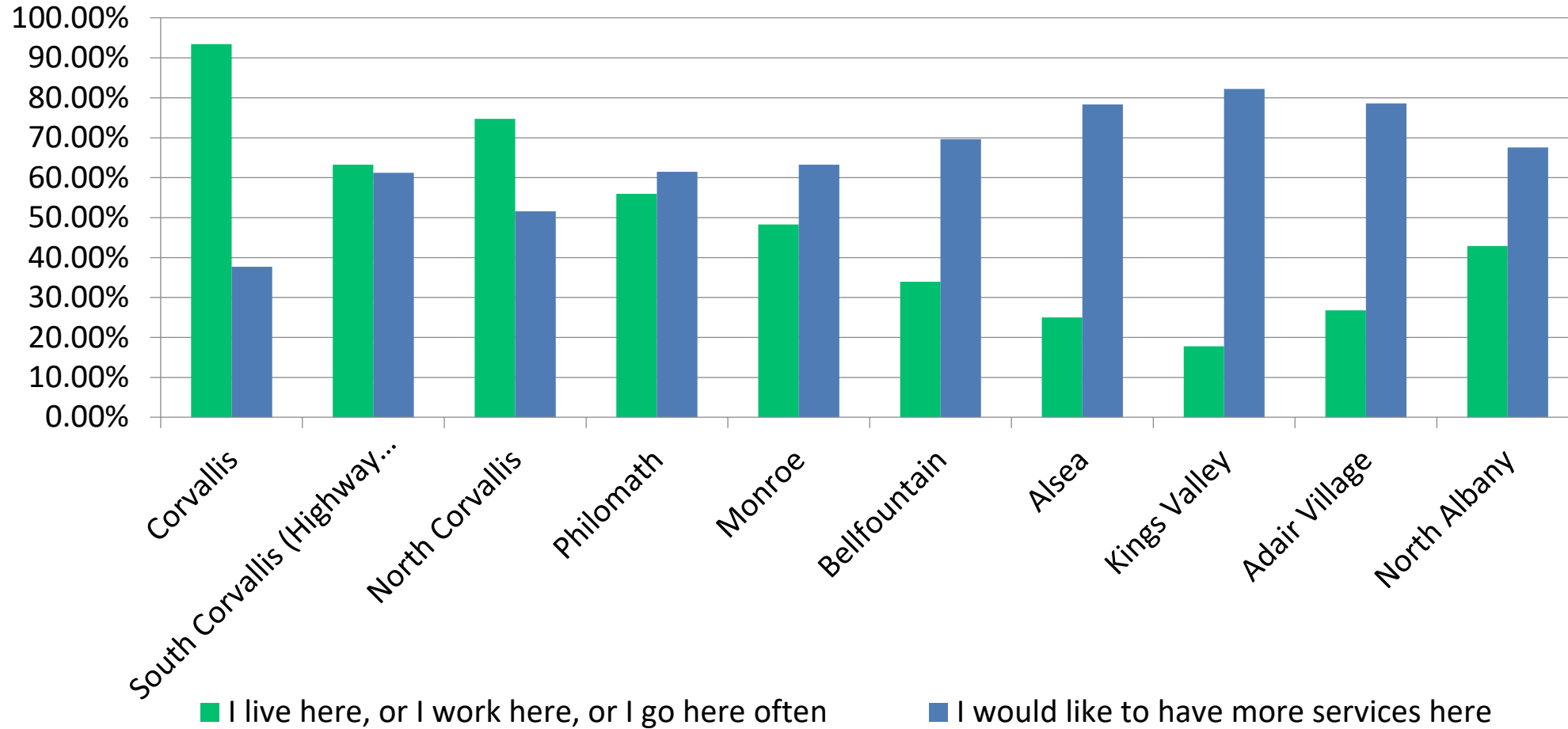
HOPE Priority Topic 3:
Transitional Options for Safety,
Stability, and Health

391 online responses

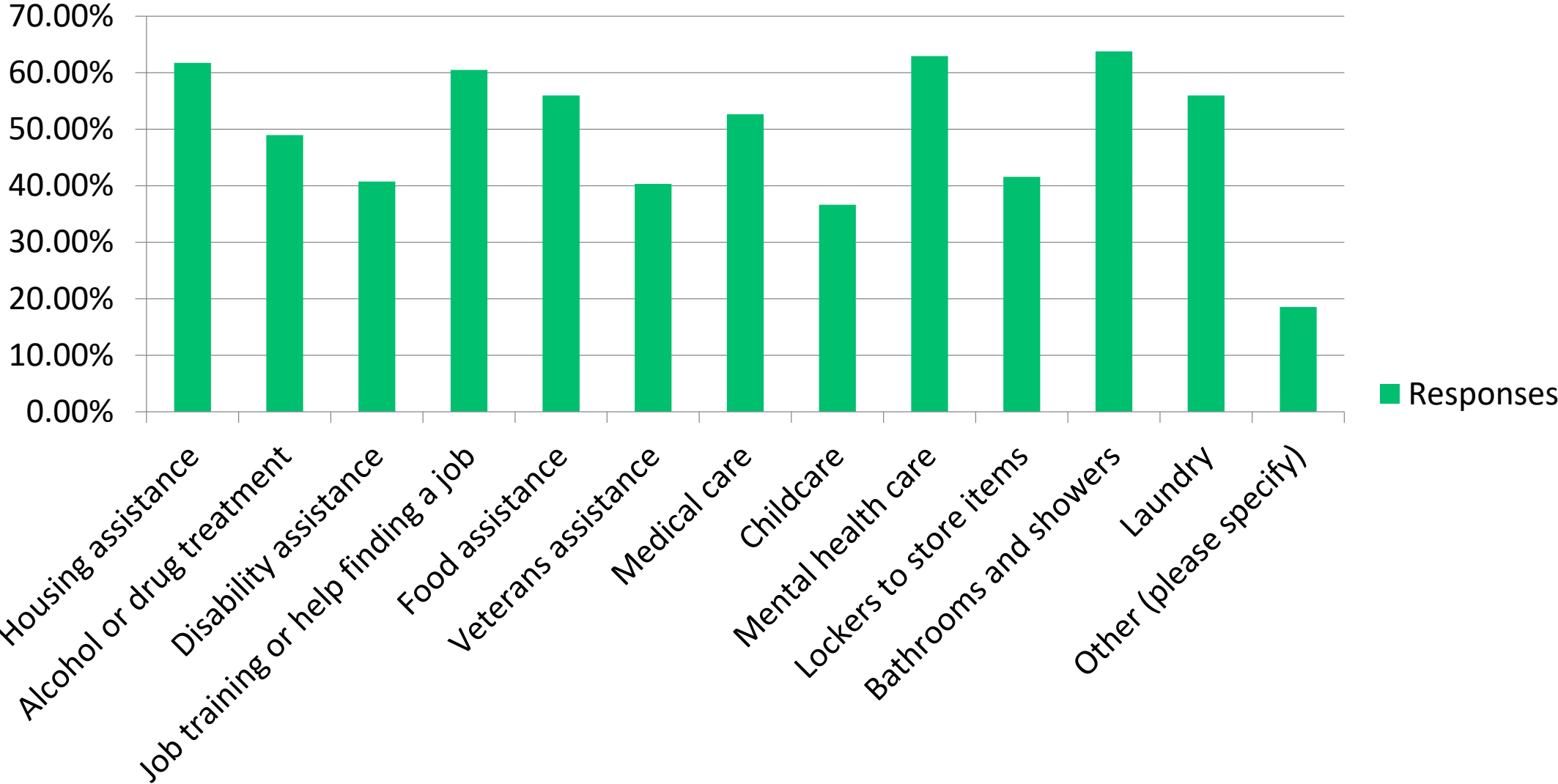
Are you now or have you ever been without housing or a place to sleep for the night?



Help us understand where people would like more services to be located in Benton County. Check where you live, work, or go often and also where you would like more services.



Which of these services would you want access to? Check all you want access to.



If you end up in the position where you have no house to sleep in, which of these options would you choose? Check all options you would choose.

Answer Choices

A safe place to park your own car to sleep.

A safe place to park your own RV or trailer to sleep.

Shelter beds in a dorm prior to COVID.

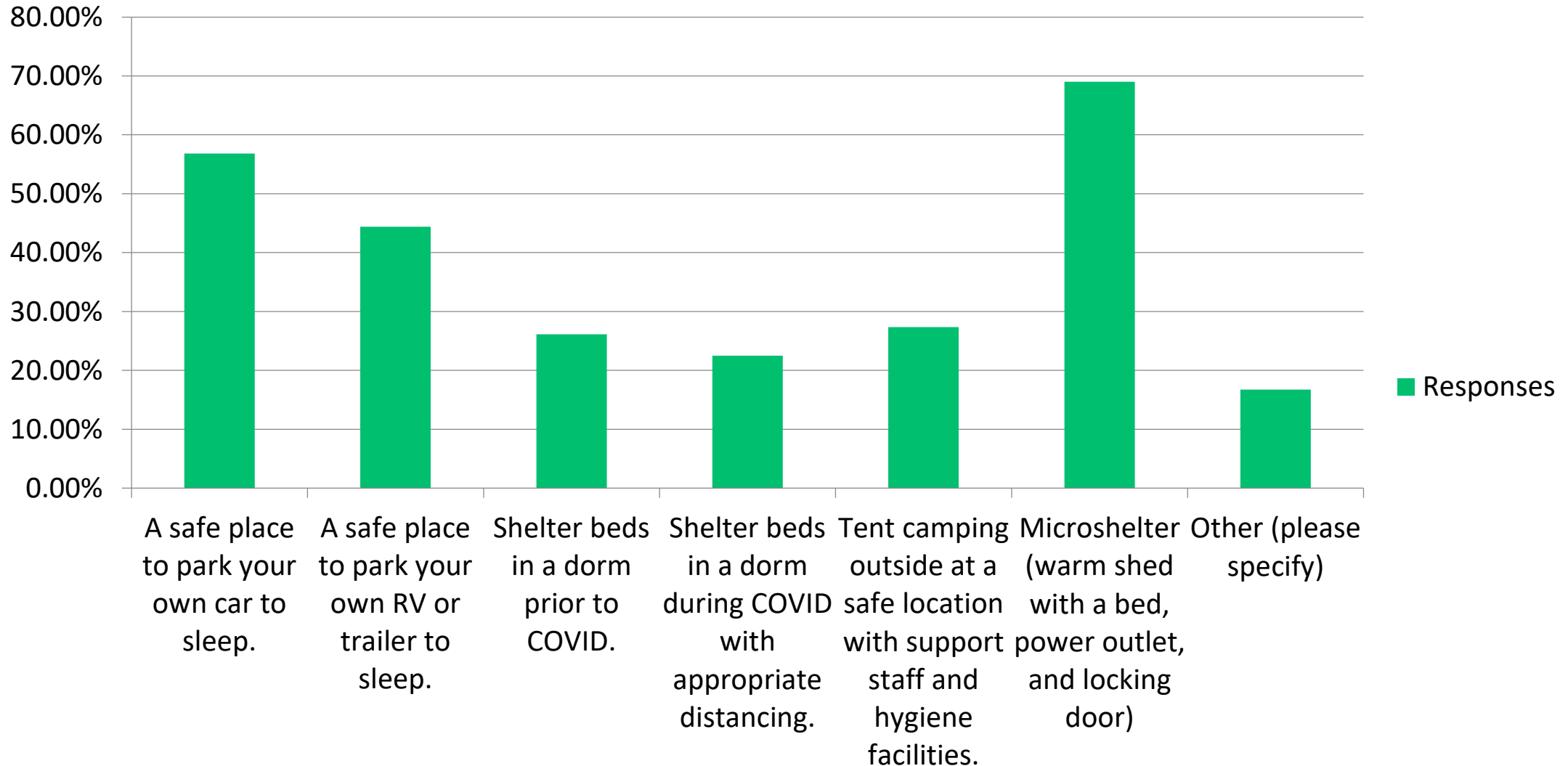
Shelter beds in a dorm during COVID with appropriate distancing.

Tent camping outside at a safe location with support staff and hygiene facilities.

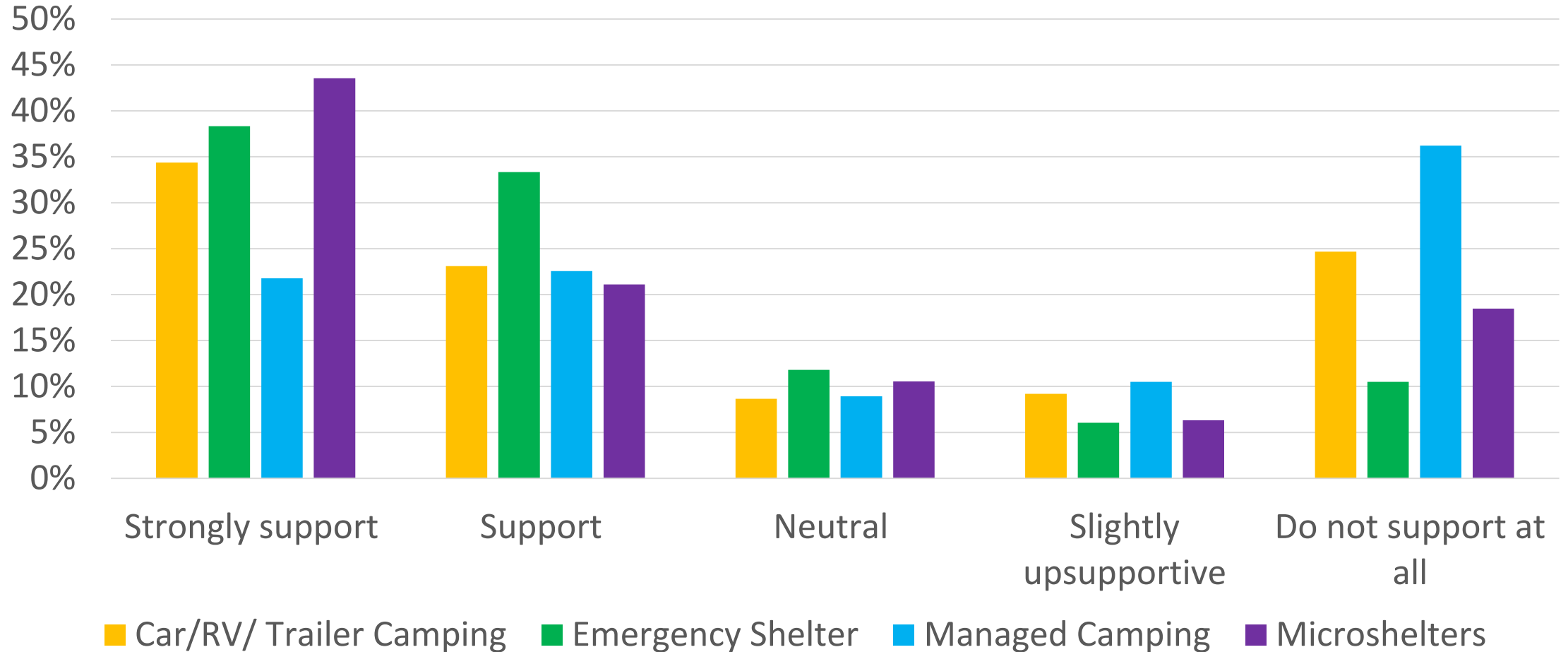
Microshelter (warm shed with a bed, power outlet, and locking door)

Other (please specify)

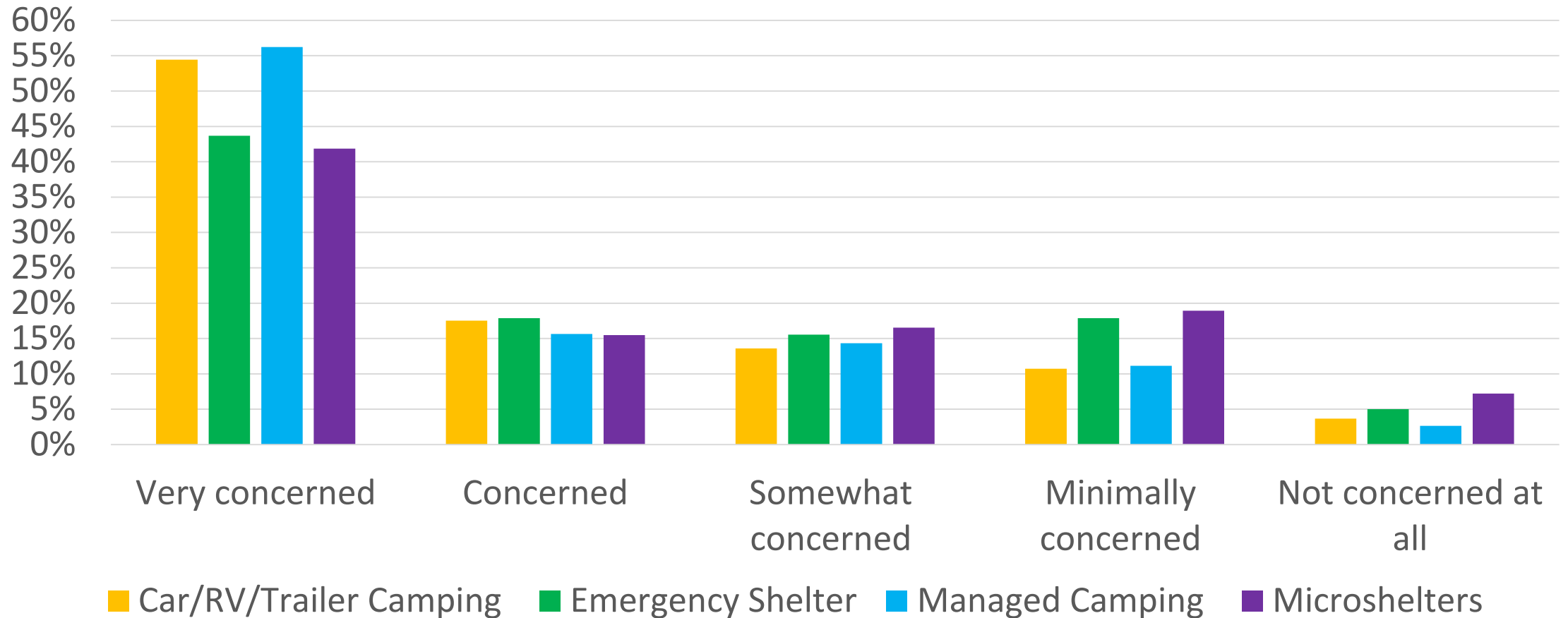
If you end up in the position where you have no house to sleep in, which of these options would you choose? Check all options you would choose.



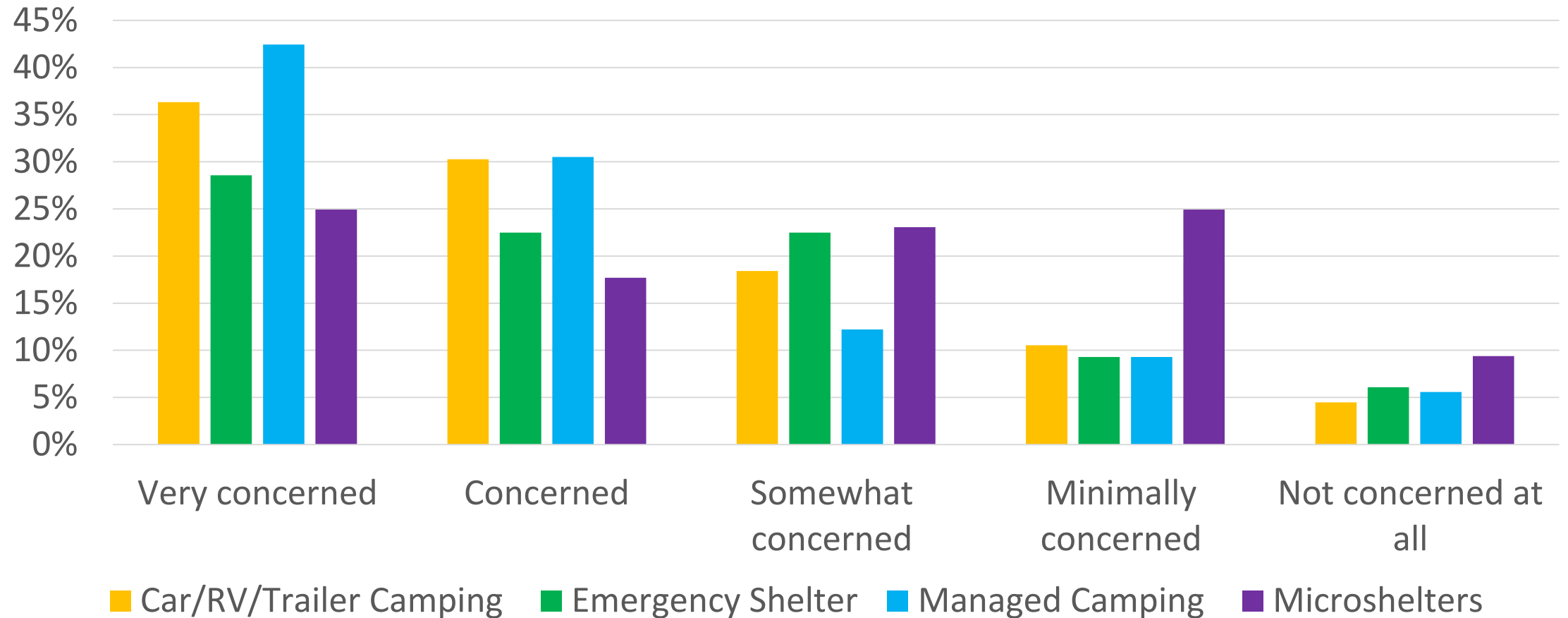
Level of Support for Transitional Options



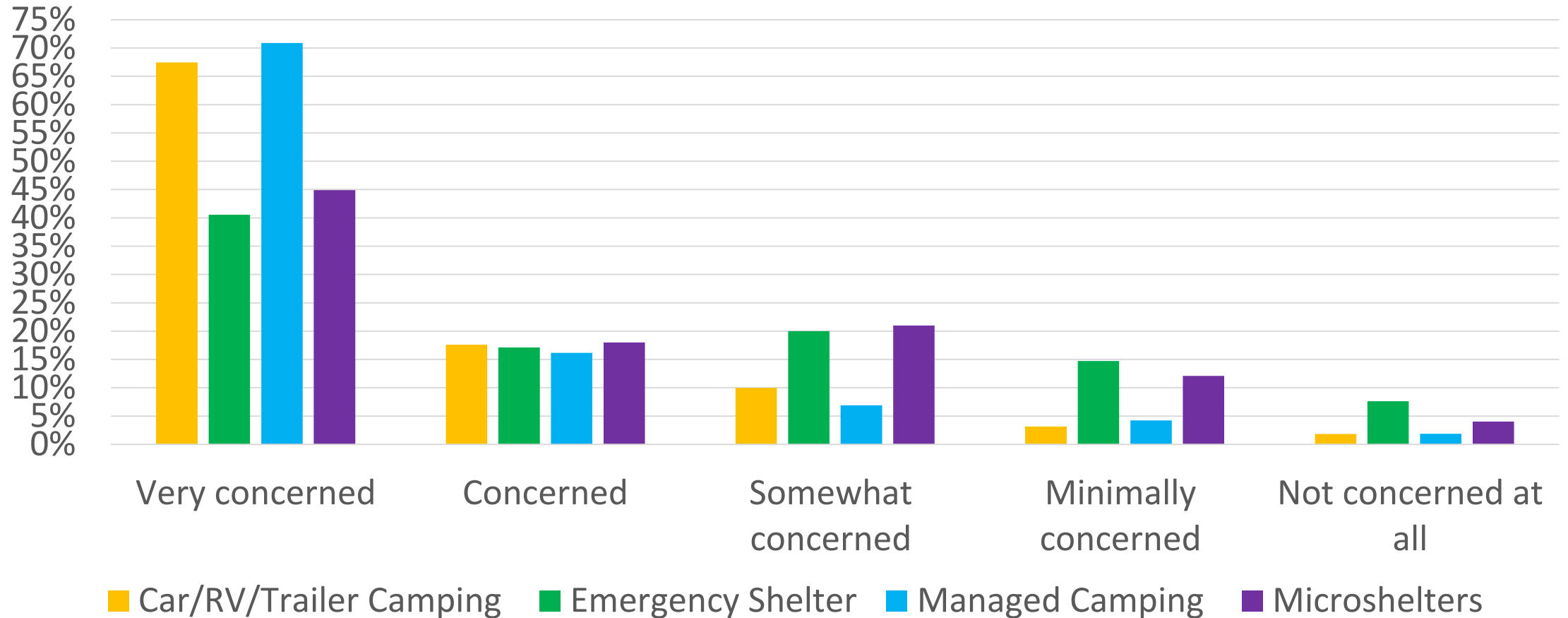
Level of concern for Community Safety



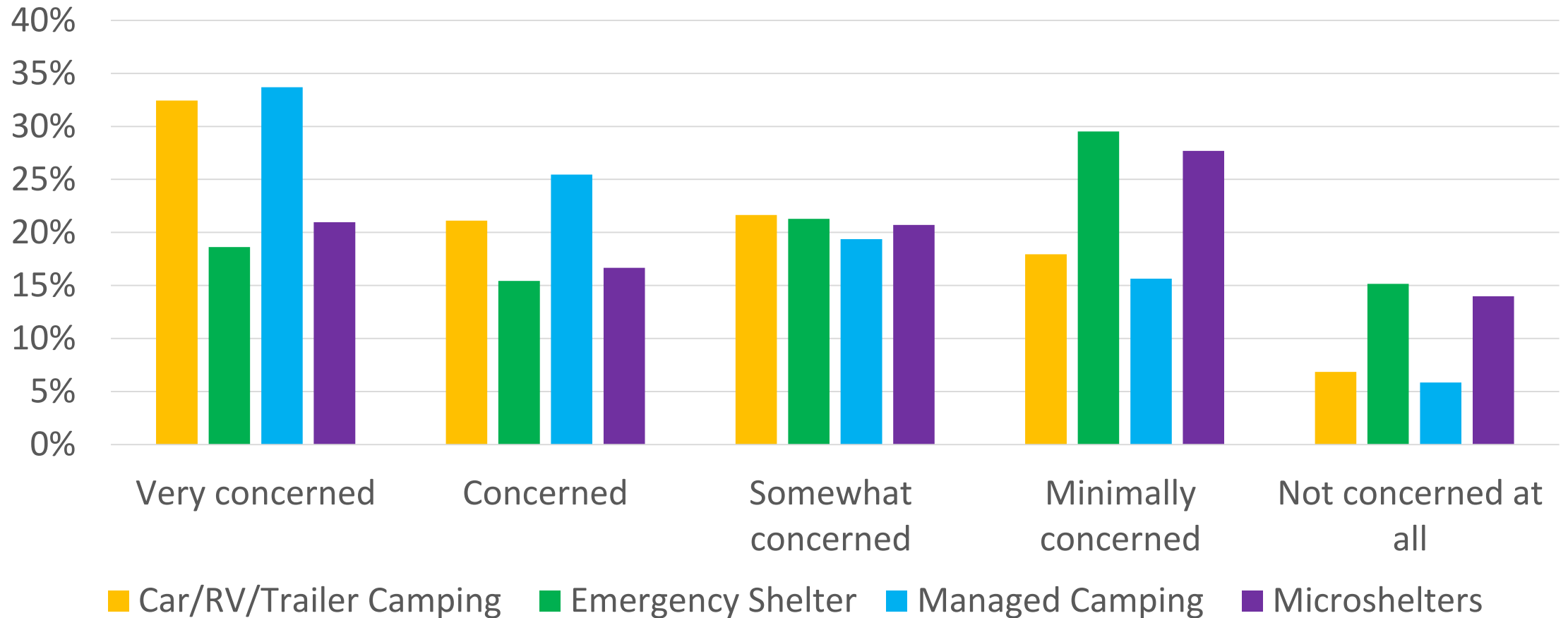
Level of concern for Individual Safety



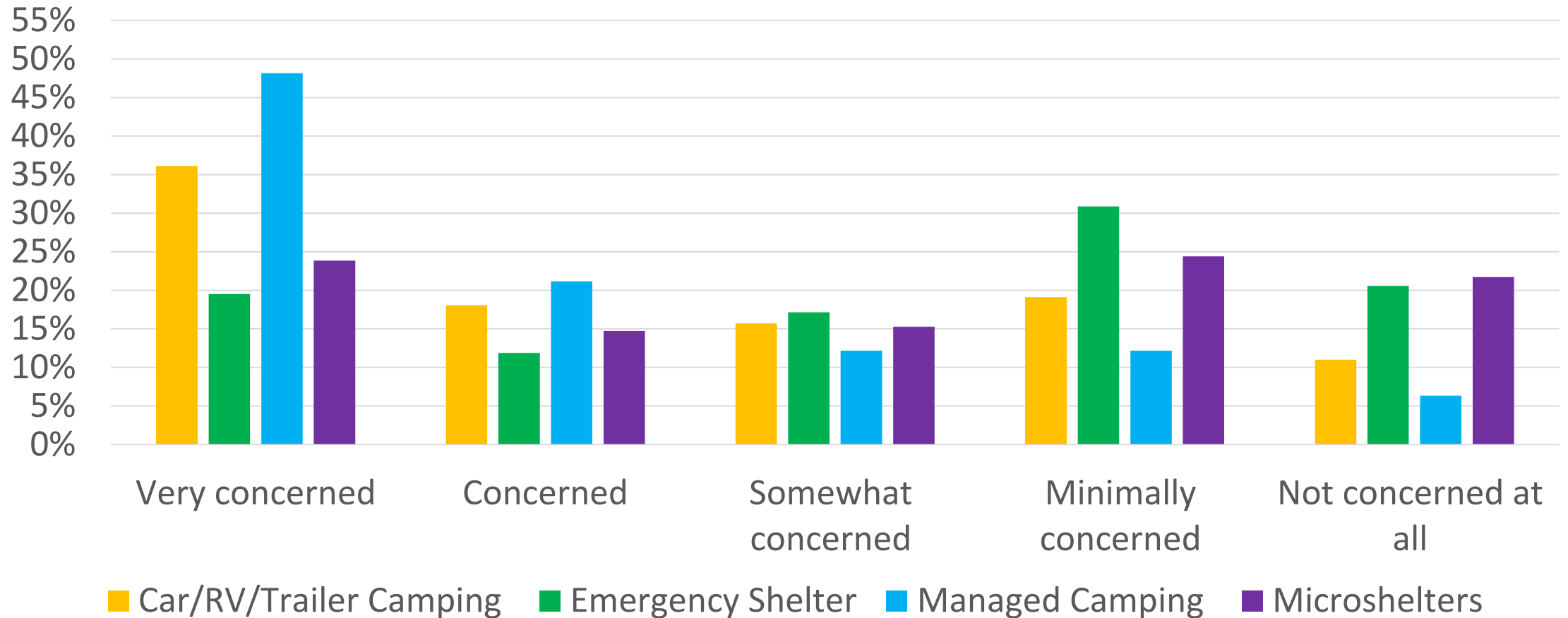
Level of concern for Litter



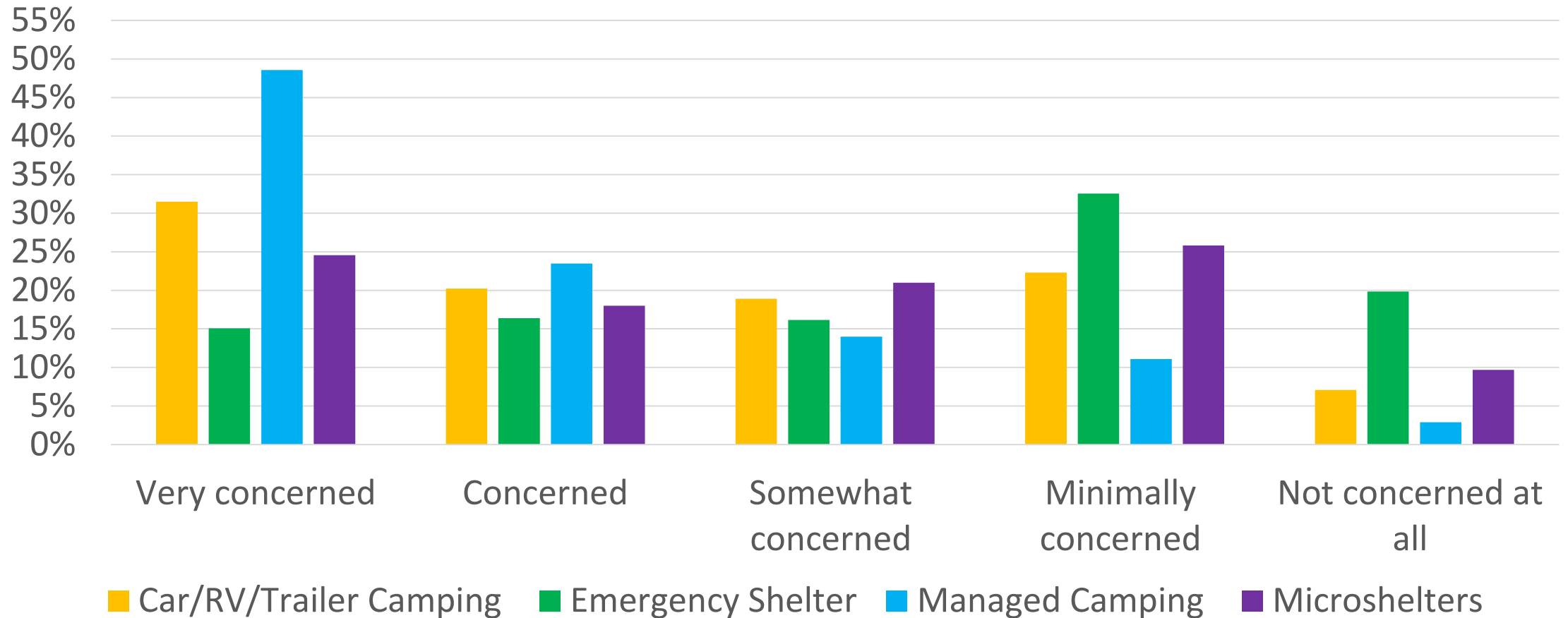
Level of concern for Noise



Level of concern for Visibility



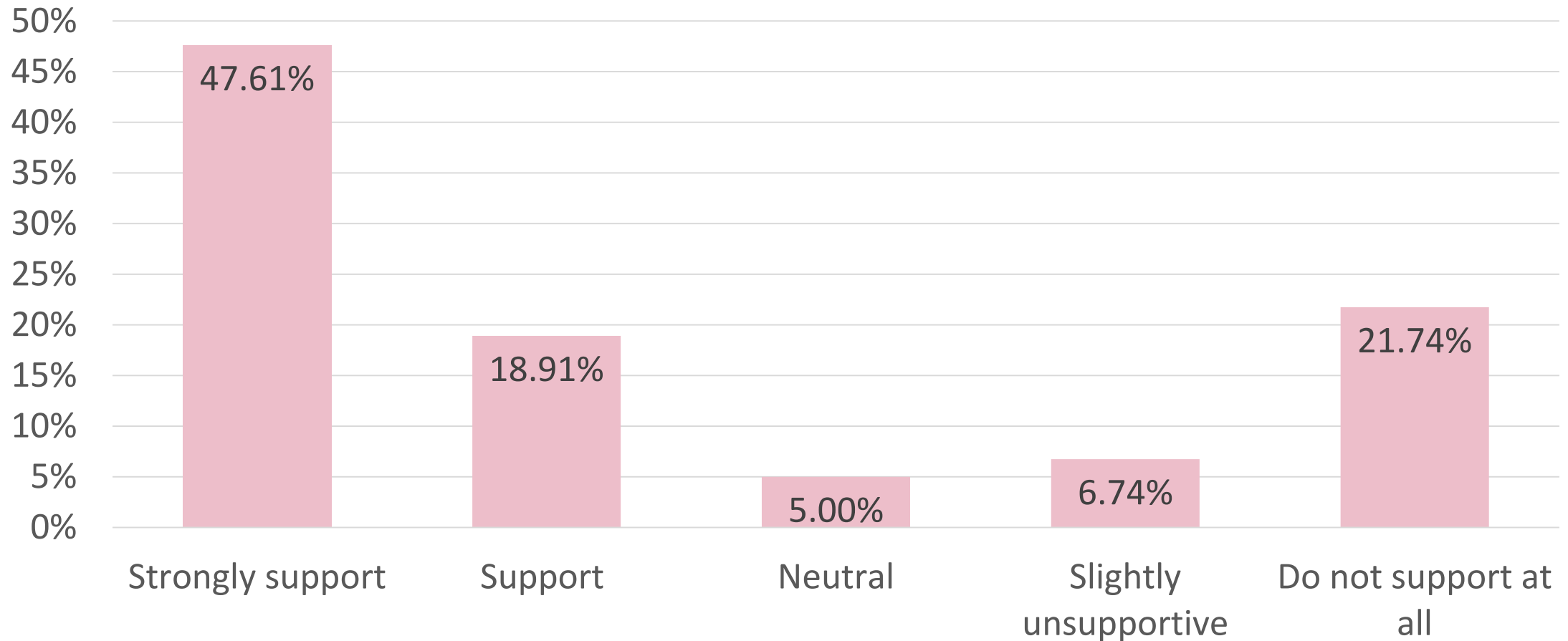
Level of concern for Fire



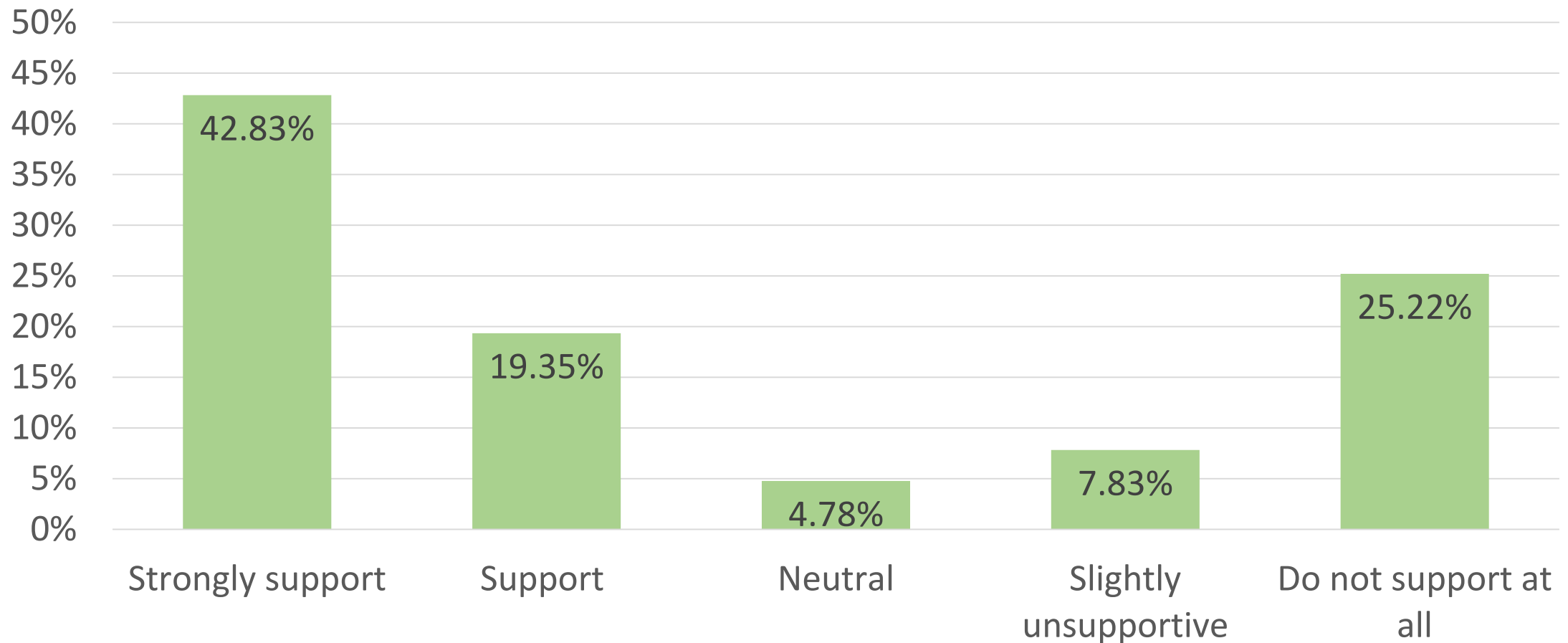
HOPE Priority Topic 4:
Permanent Supportive Housing

470 online responses

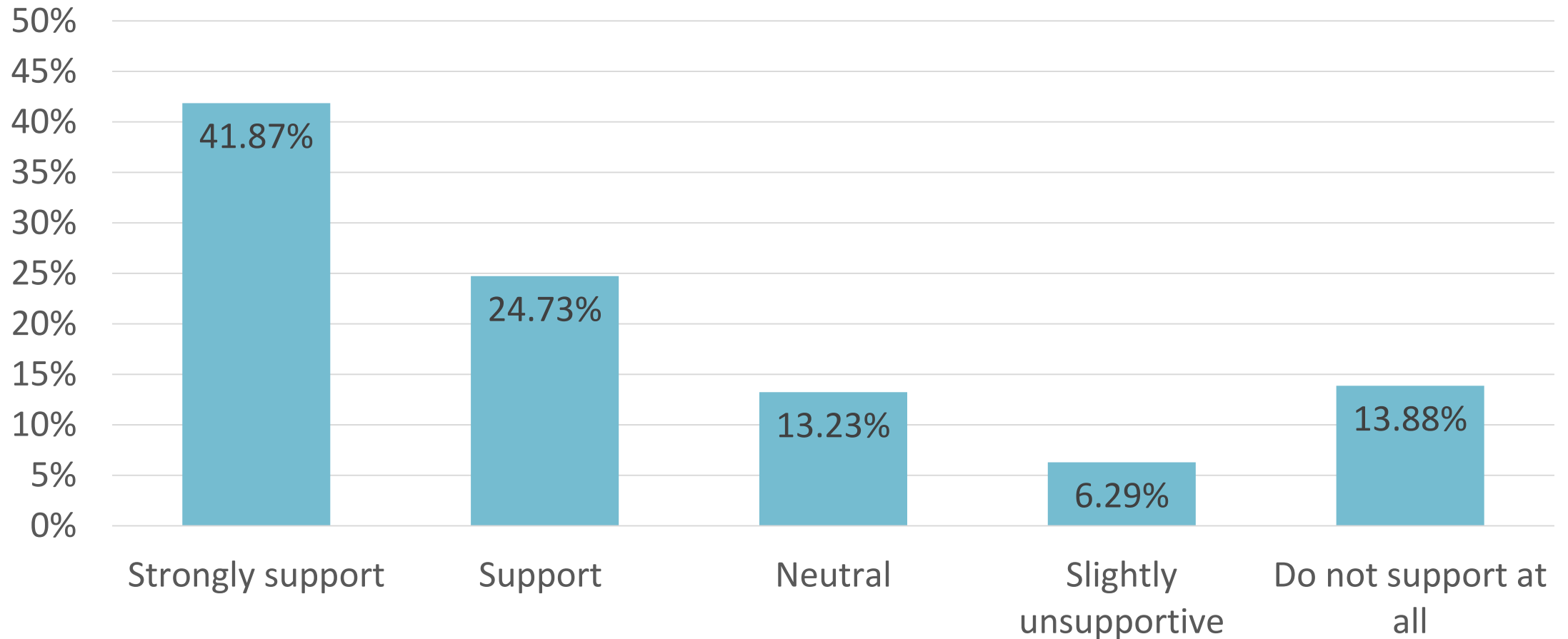
Q1 Please rate your level of support for permanent supportive housing in Benton County.



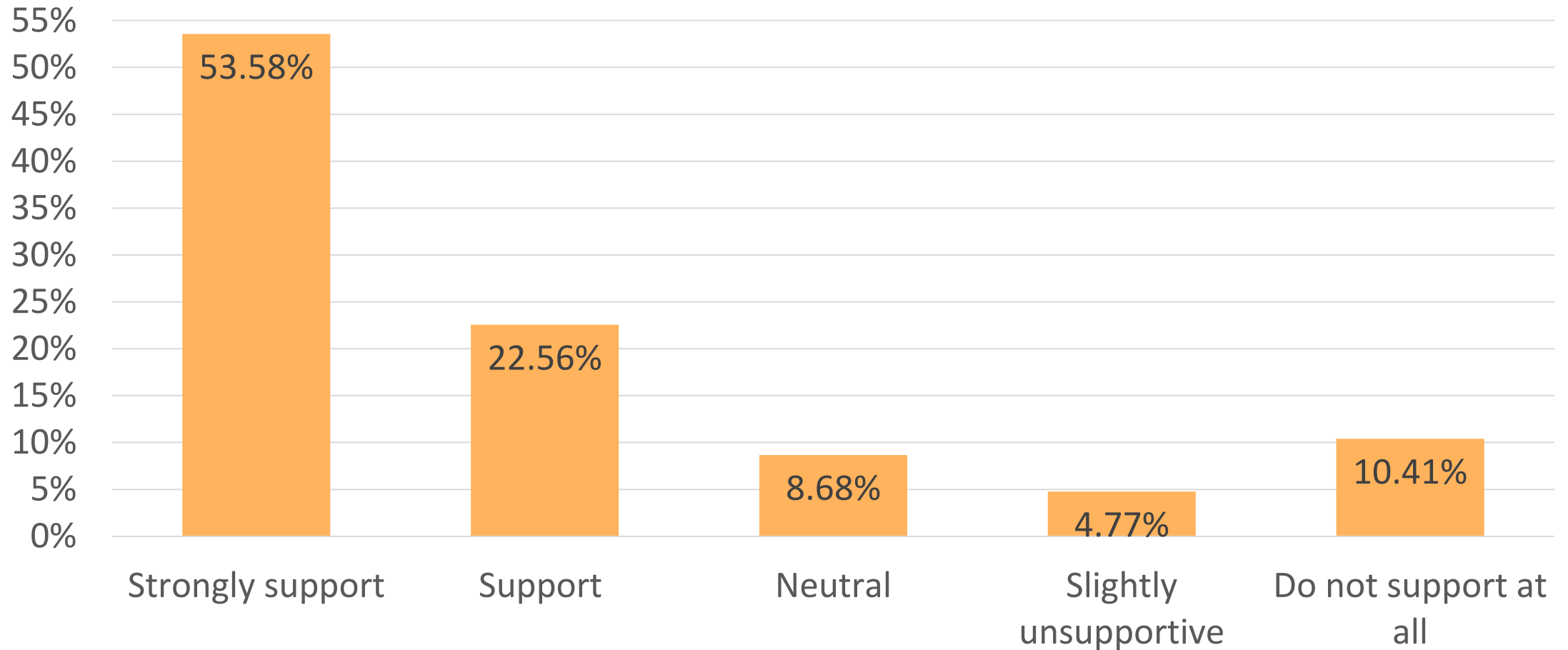
Q2 Support for development of more housing units specifically for permanent supportive housing (land purchase, construction, staff to work on proposals and apply for grants).



Q3 Support for rent assistance to keep individuals in their home.



Q4 Funding supportive services like mental health care and housing case management to support keeping individuals in their home.

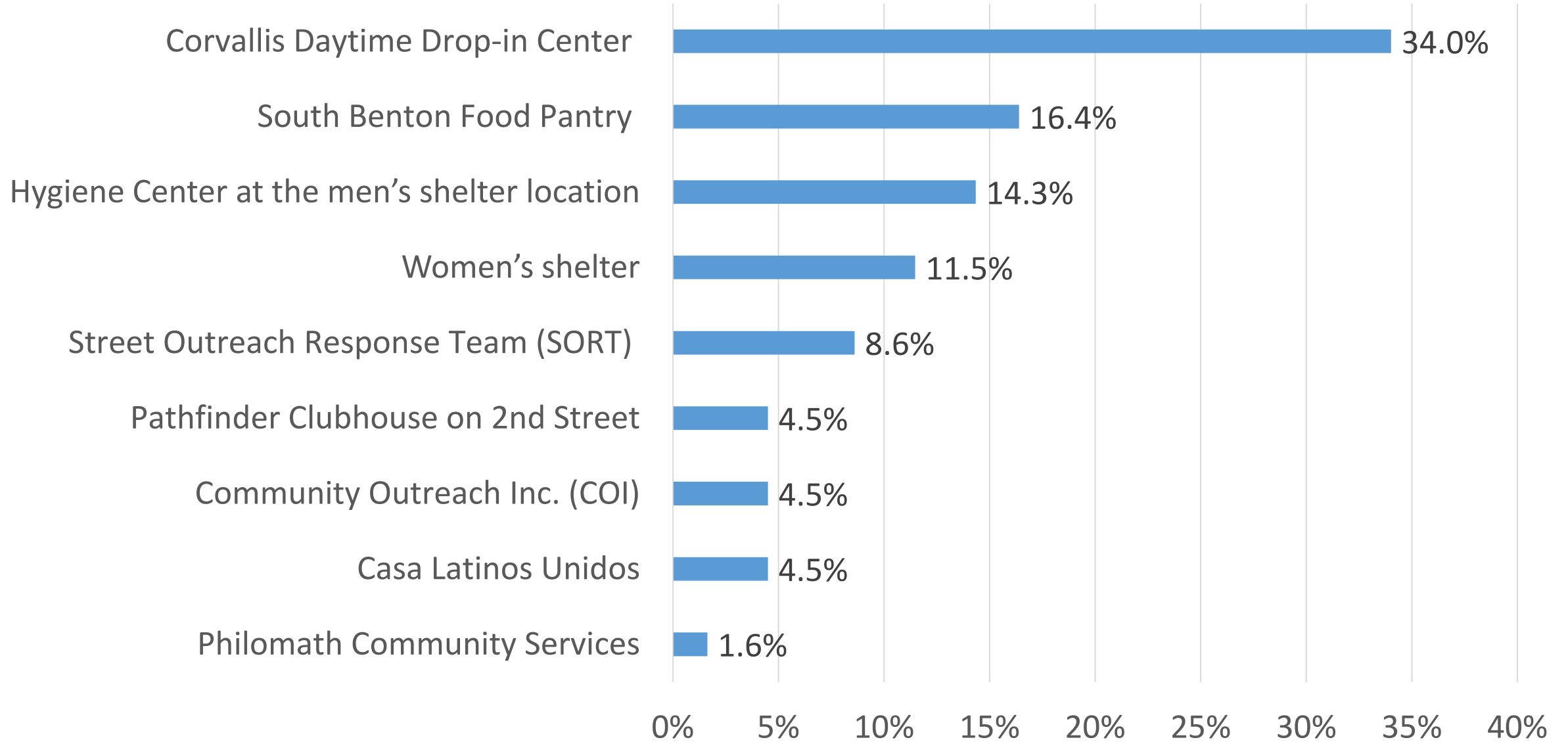


Client Survey Data Analysis

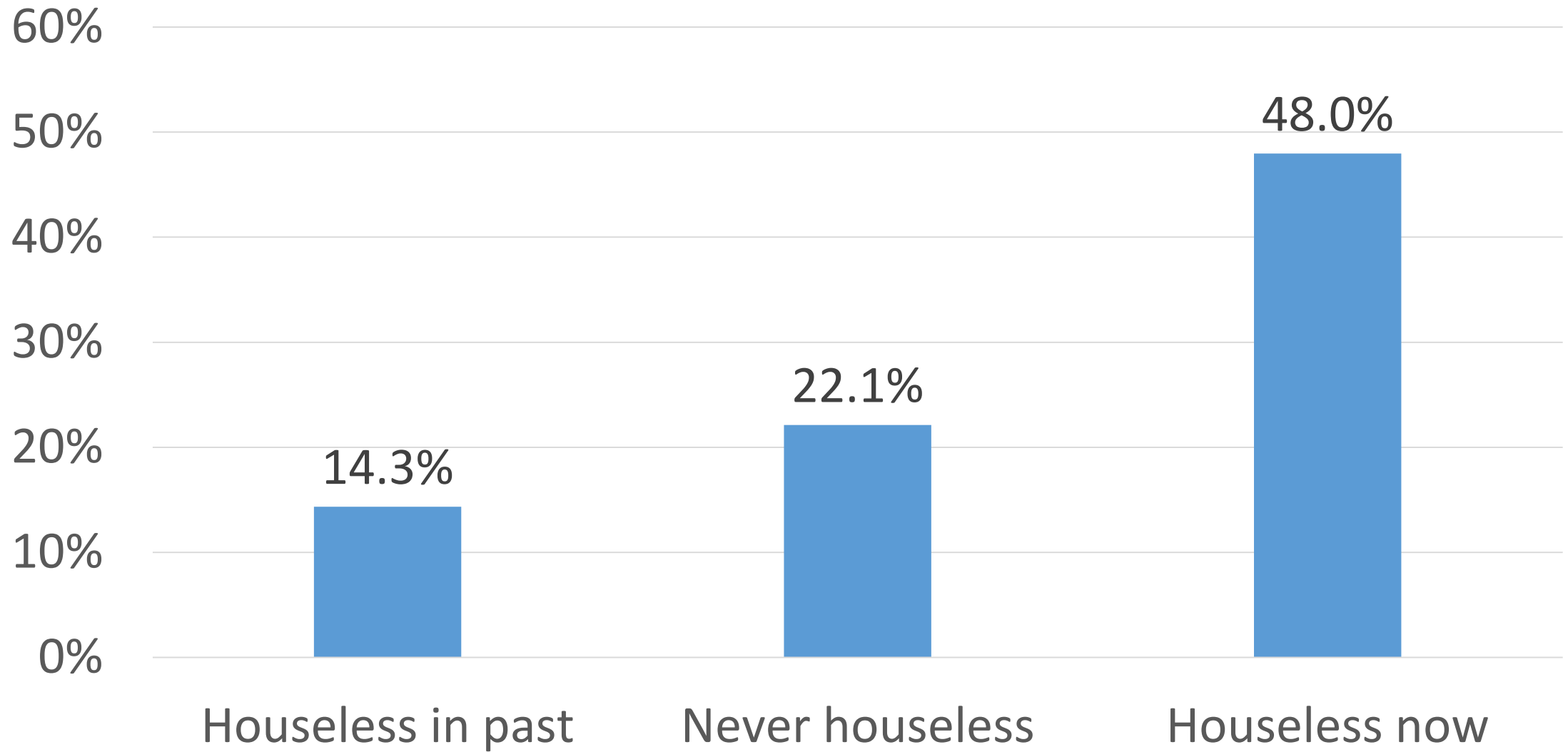
244 responses in-person

Collected by 9 providers

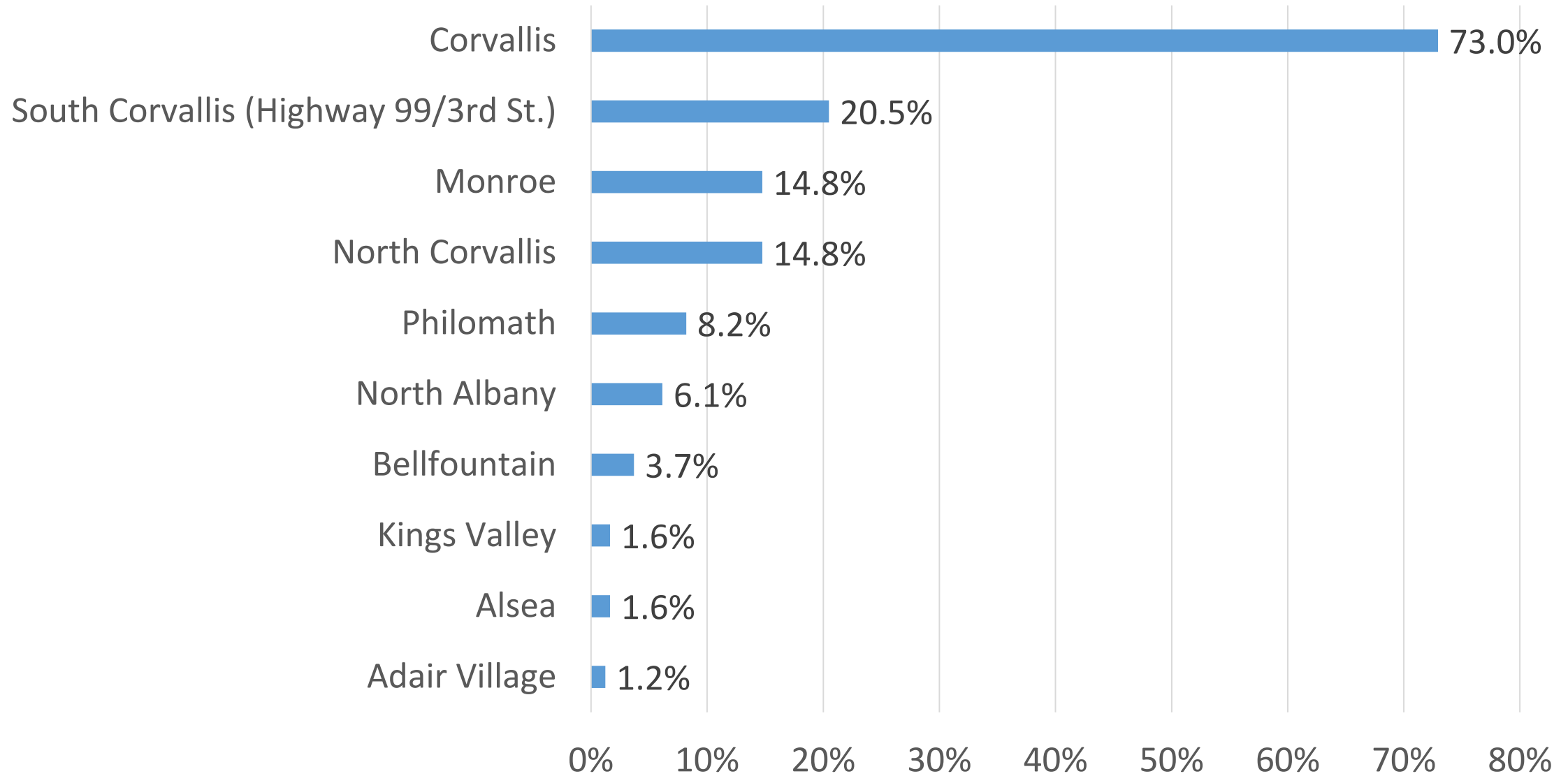
Survey source: Total 244



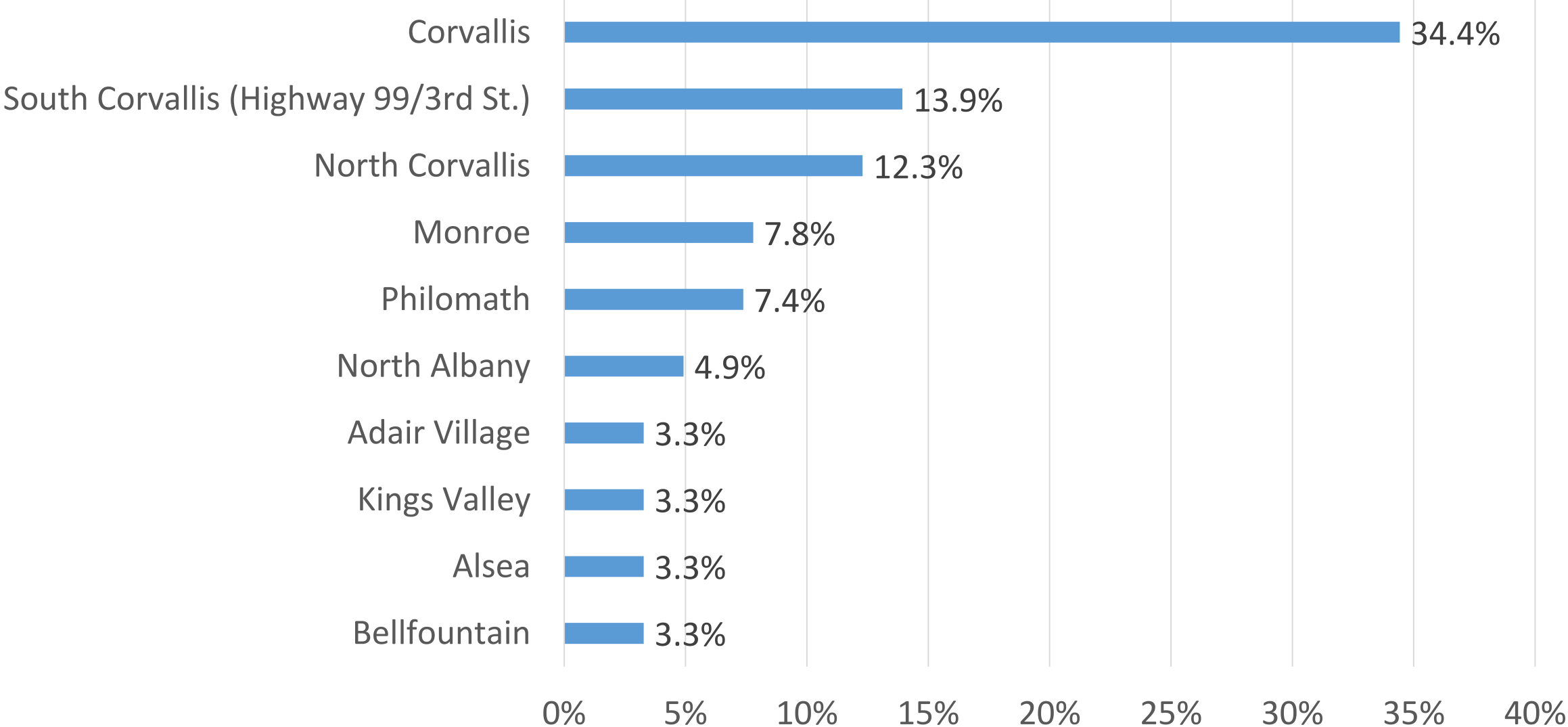
Housing status



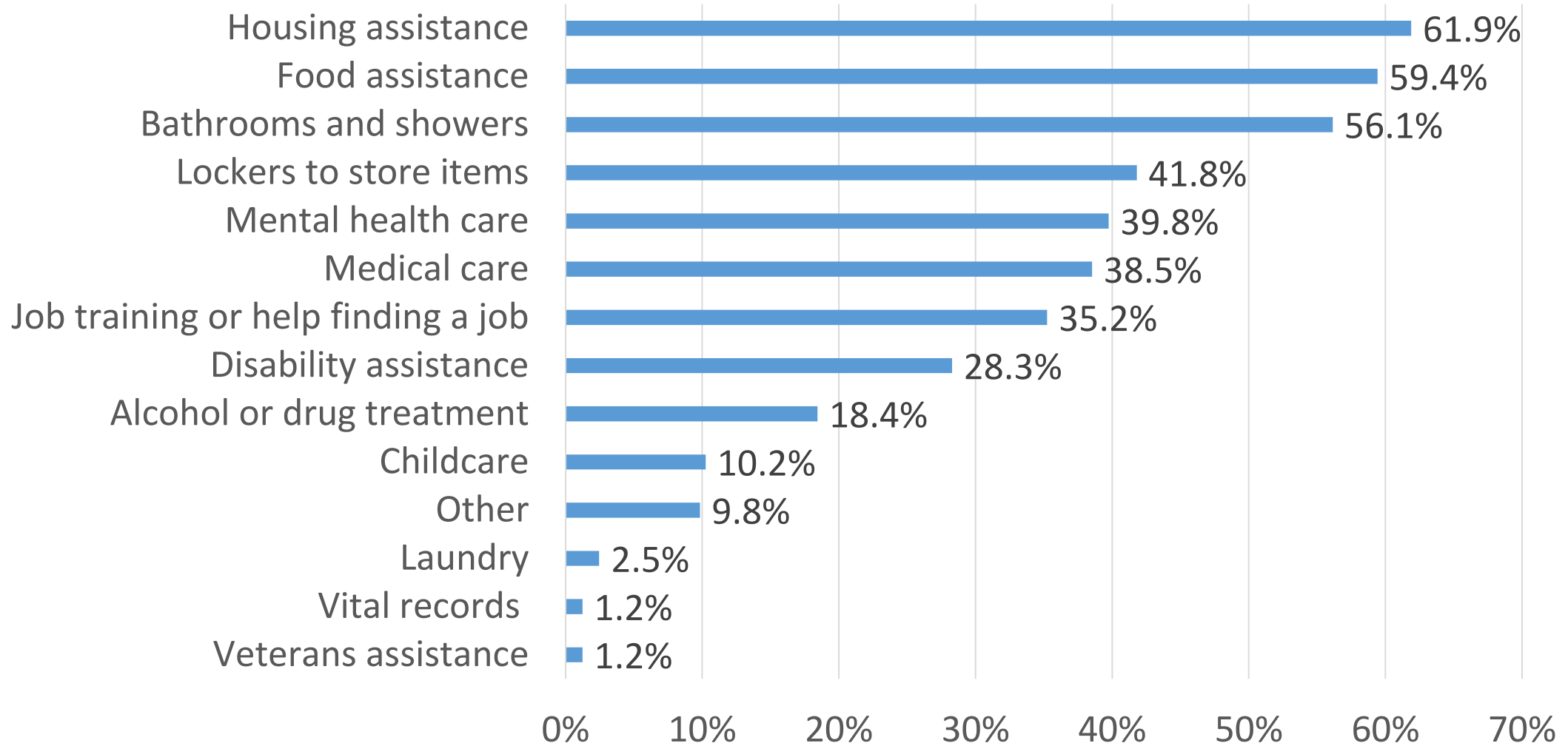
Live, work, or visit often



Would like more services



Services desired



- A safe place to park **your own** car to sleep.



- A safe place to park **your own** RV/trailer to sleep.



- Shelter beds in a dorm before COVID



- Shelter beds in a dorm during COVID



- Tent camping outside at a safe location with support staff and hygiene facilities

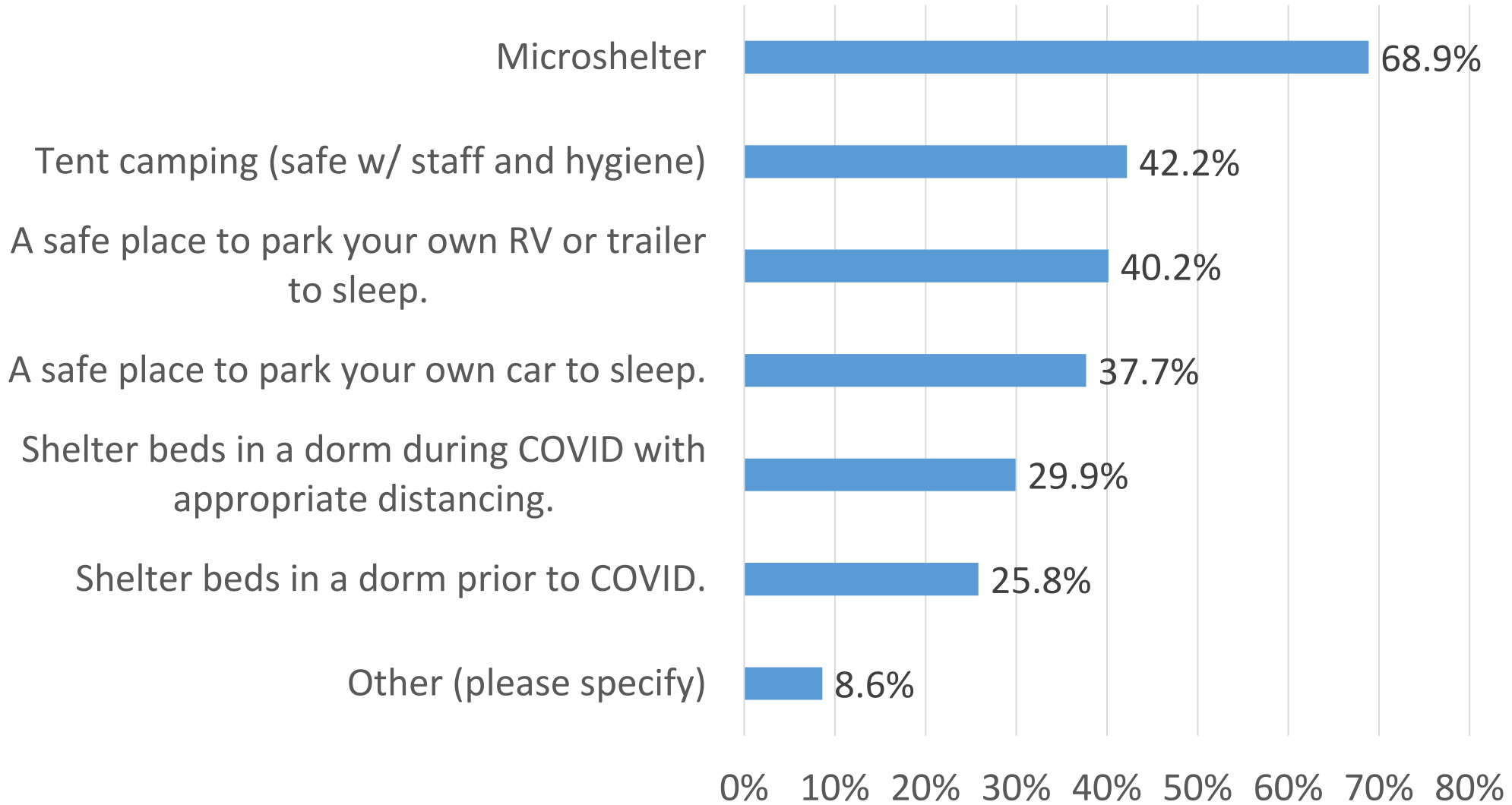


- Microshelter (warm shed with a bed, power outlet, and locking door)



- Other:

Housing type preferred



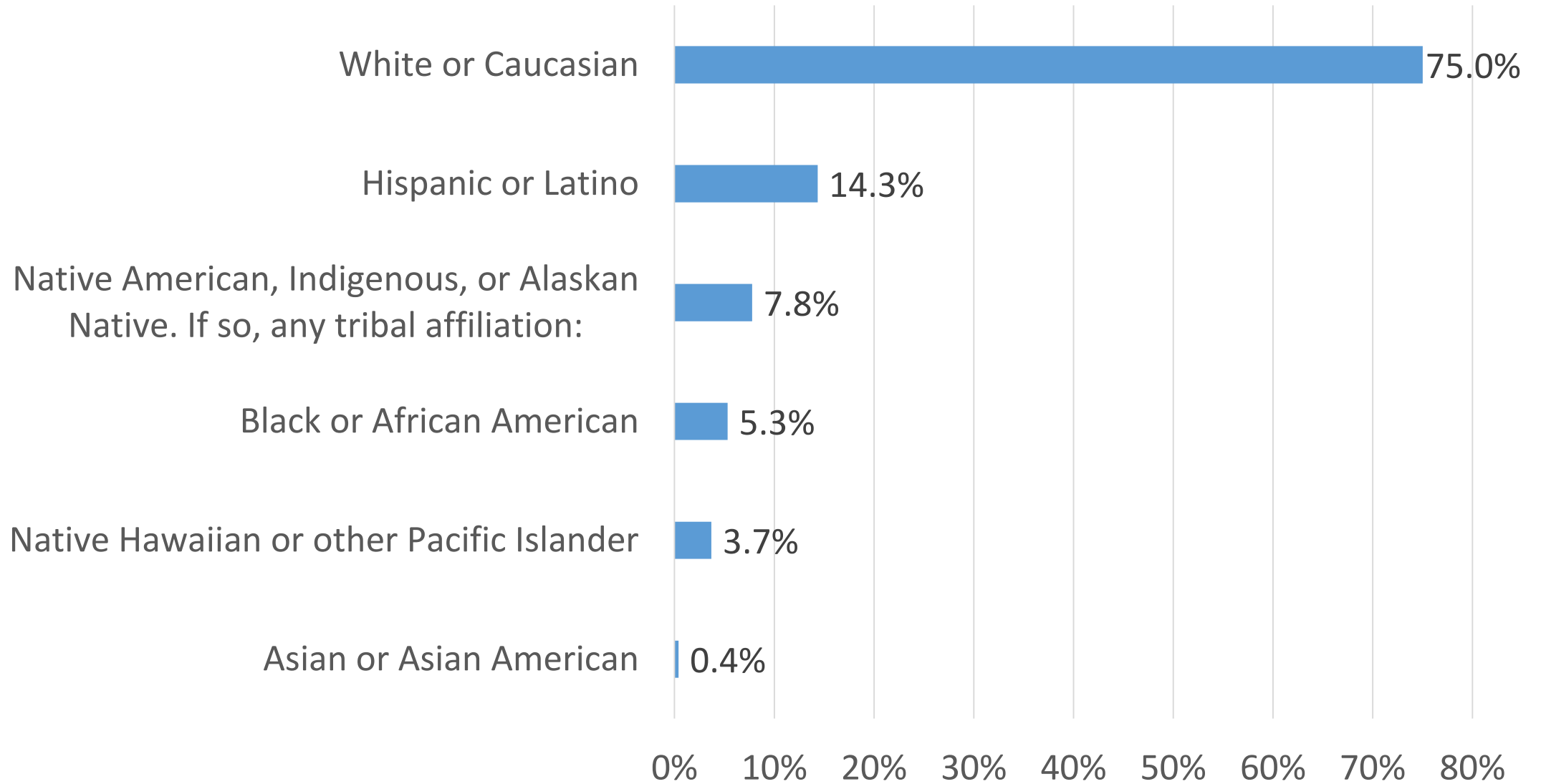
Types of **assistance** listed in the “other” category

- Places for exercise
- Transportation
- marriage counselling
- legal assistance
- Wi-Fi
- assistance in medical bills
- English classes
- Day shelters at the community center
- recreational activities
- supplies (clothing, outdoor gear, dry shoes, propane etc.)

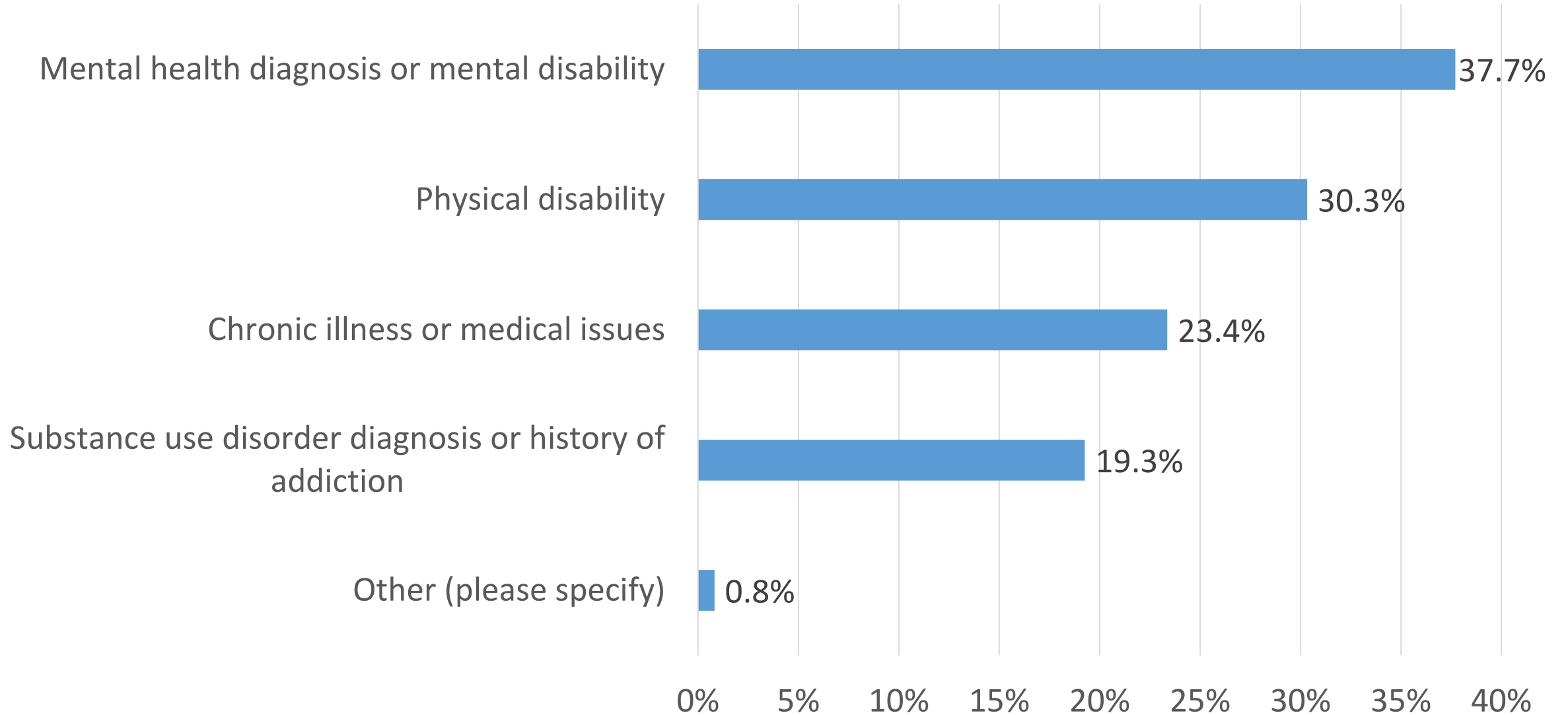
Types of **housing** listed in the “other” category

- Shelter with partner
- Barn
- Long term camping site
- Outside the public library
- Sidewalk
- Small apartments room rental
- Duplex with daughter
- Cave
- friends/family
- Mobile park
- Hotel room
- On a farm in mountains

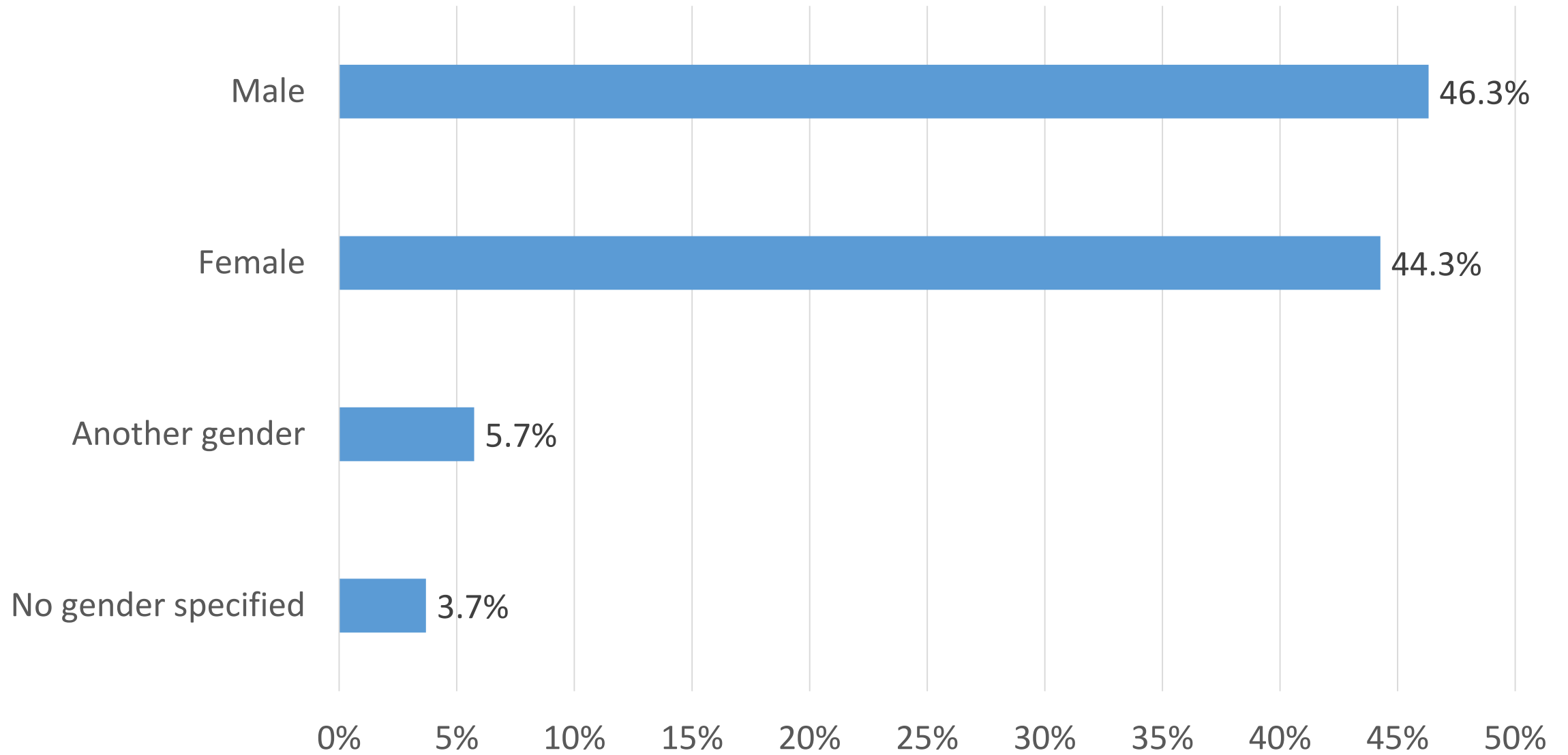
Race and ethnicity



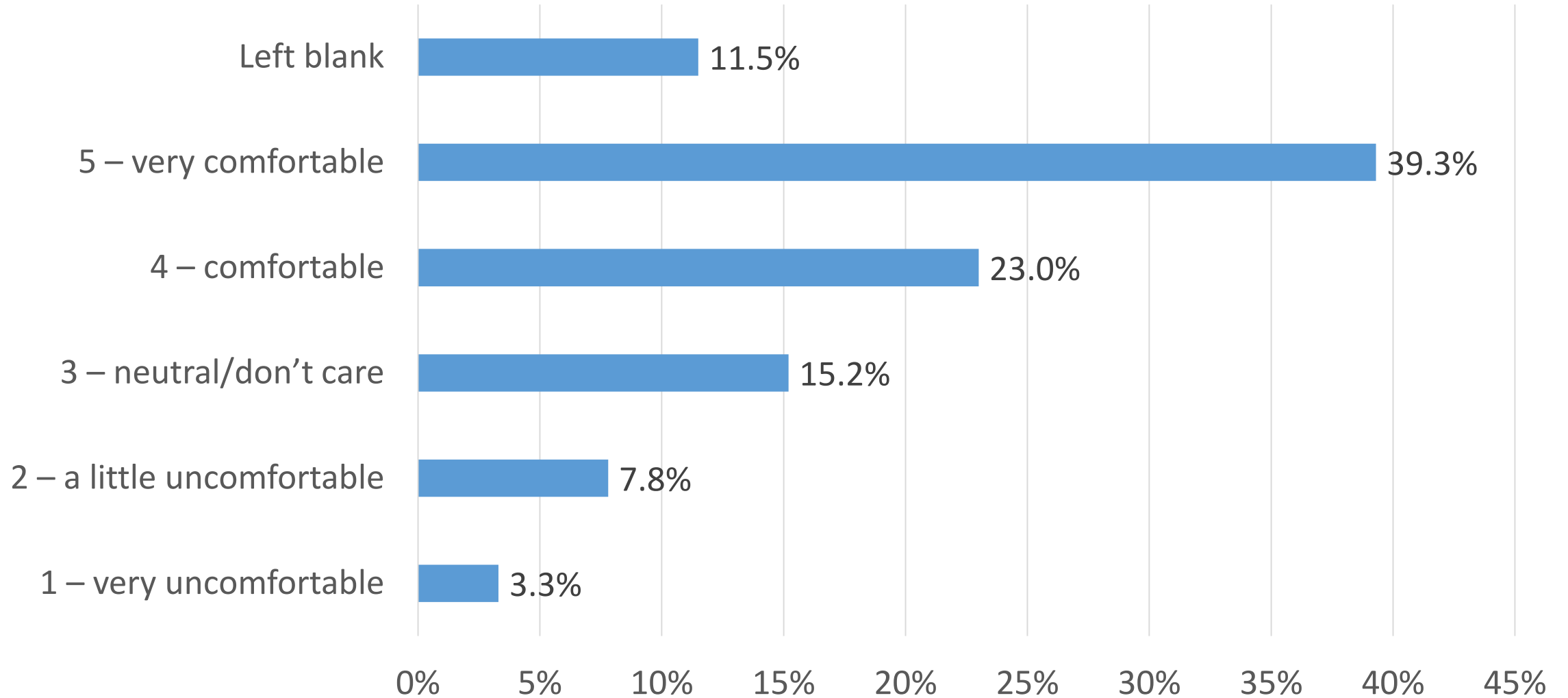
Medical condition



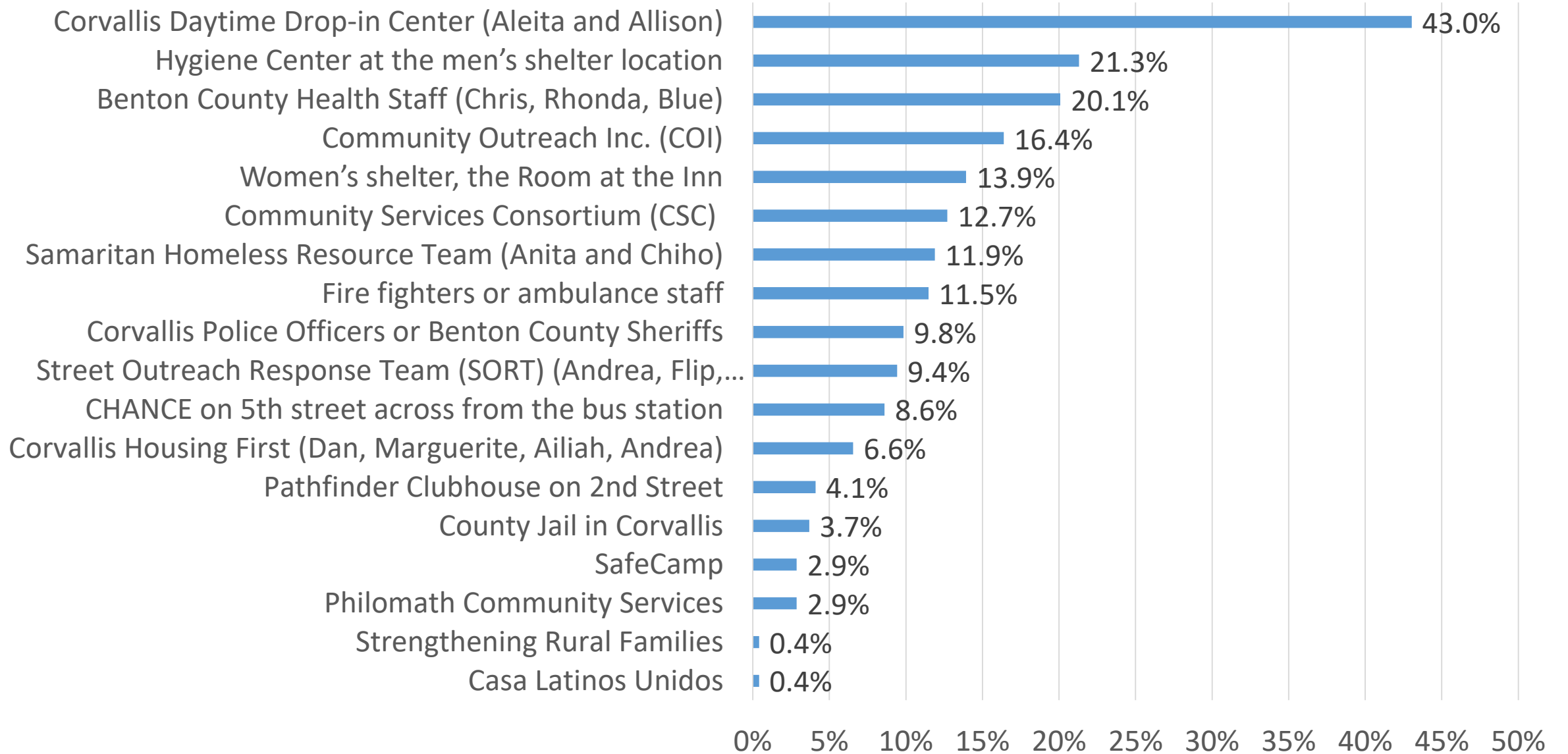
Gender or gender identify



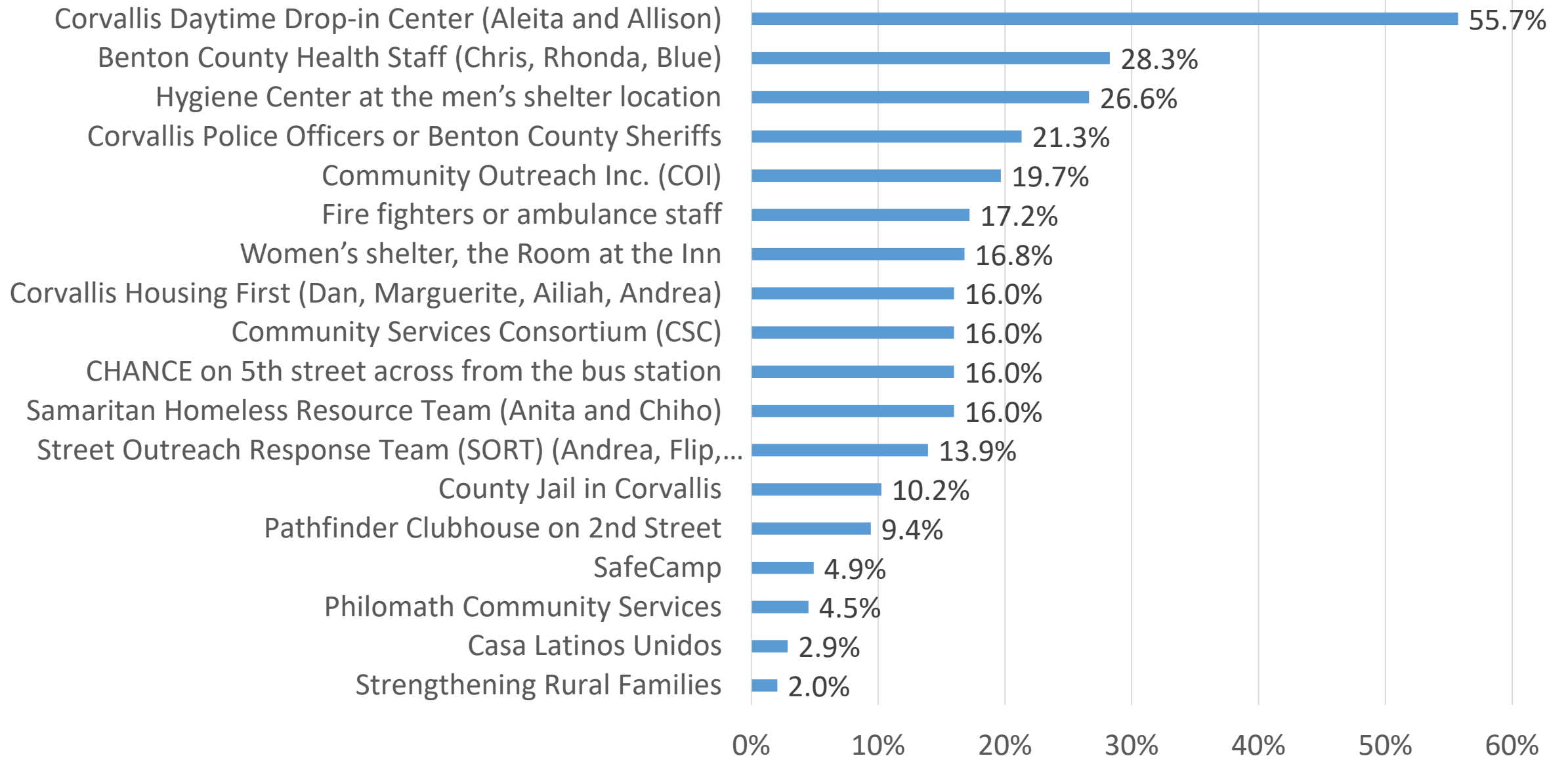
Comfort Level with providers discussing their case to coordinate care



Got help from:

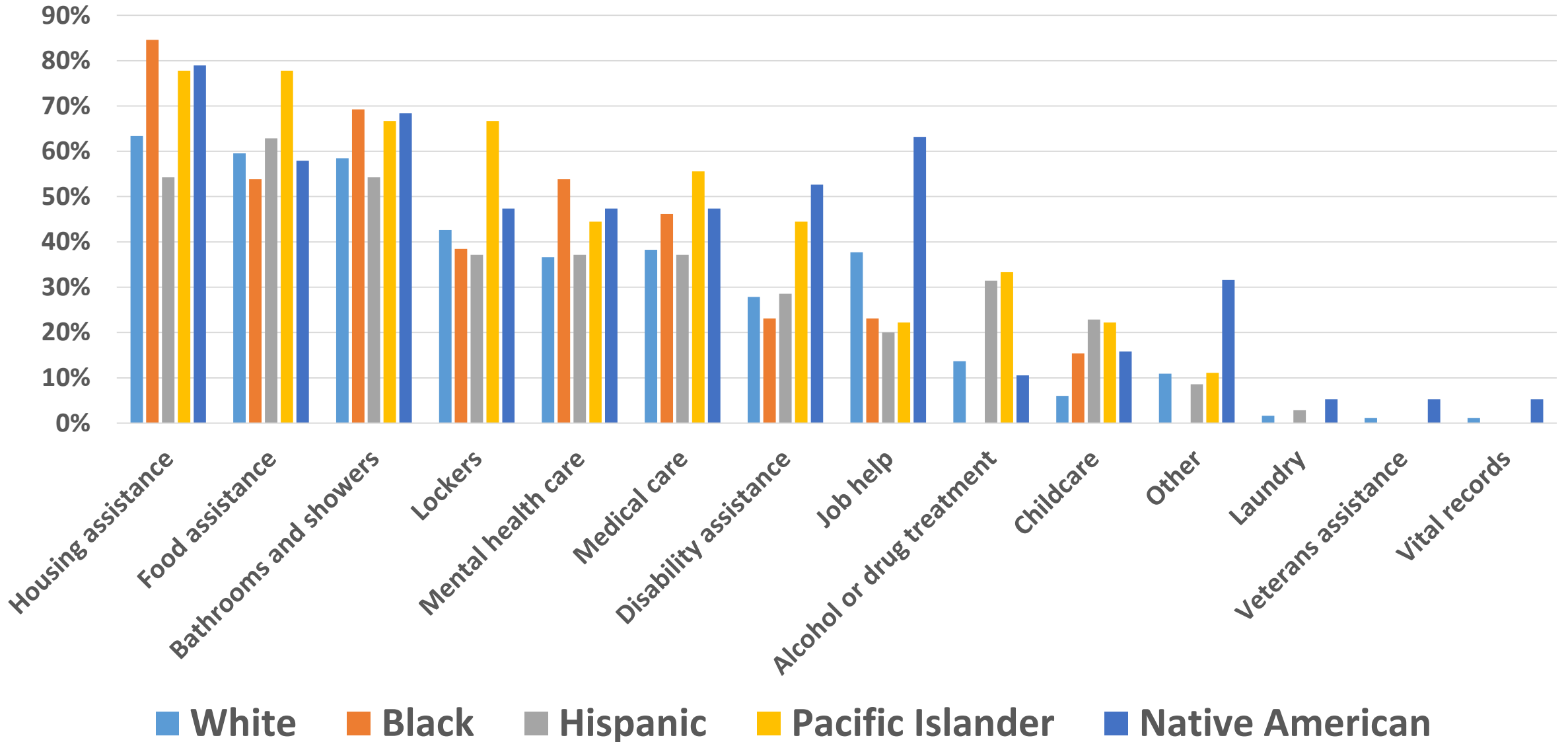


Interacted with:



Survey data: Analysis by demographics

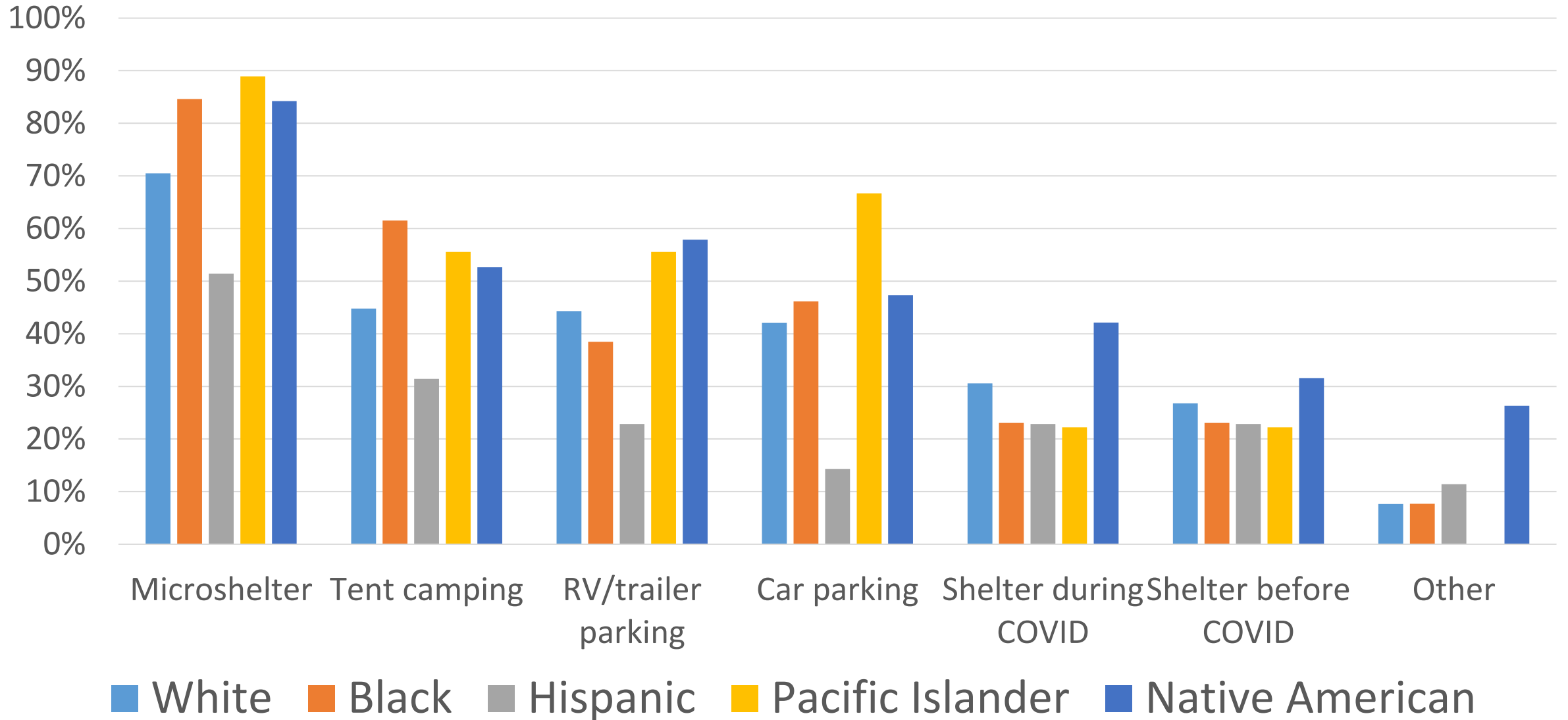
Type of assistance needed by race/ethnicity



Takeaways in highest needs for assistance by race and ethnicity

- Housing assistance → 84.6% Black, 80% Native American and Pacific Islander
- Job help/assistance → 63.2% Native Americans
- Food assistance → 77.8% Pacific Islanders
- Lockers and storage rooms → 66.7% Pacific Islanders
- Mental healthcare → 53.8% Black
- Medical care → 55.6% Pacific Islanders
- Disability services → 52.6% Native Americans
- In Types of assistance, 30% of Native Americans listed assistance “other”: case management (finding shelter), marriage counselling, needing supplies such as clothing, cell phone and camping gear, assistance in paying for medical bills and travel.

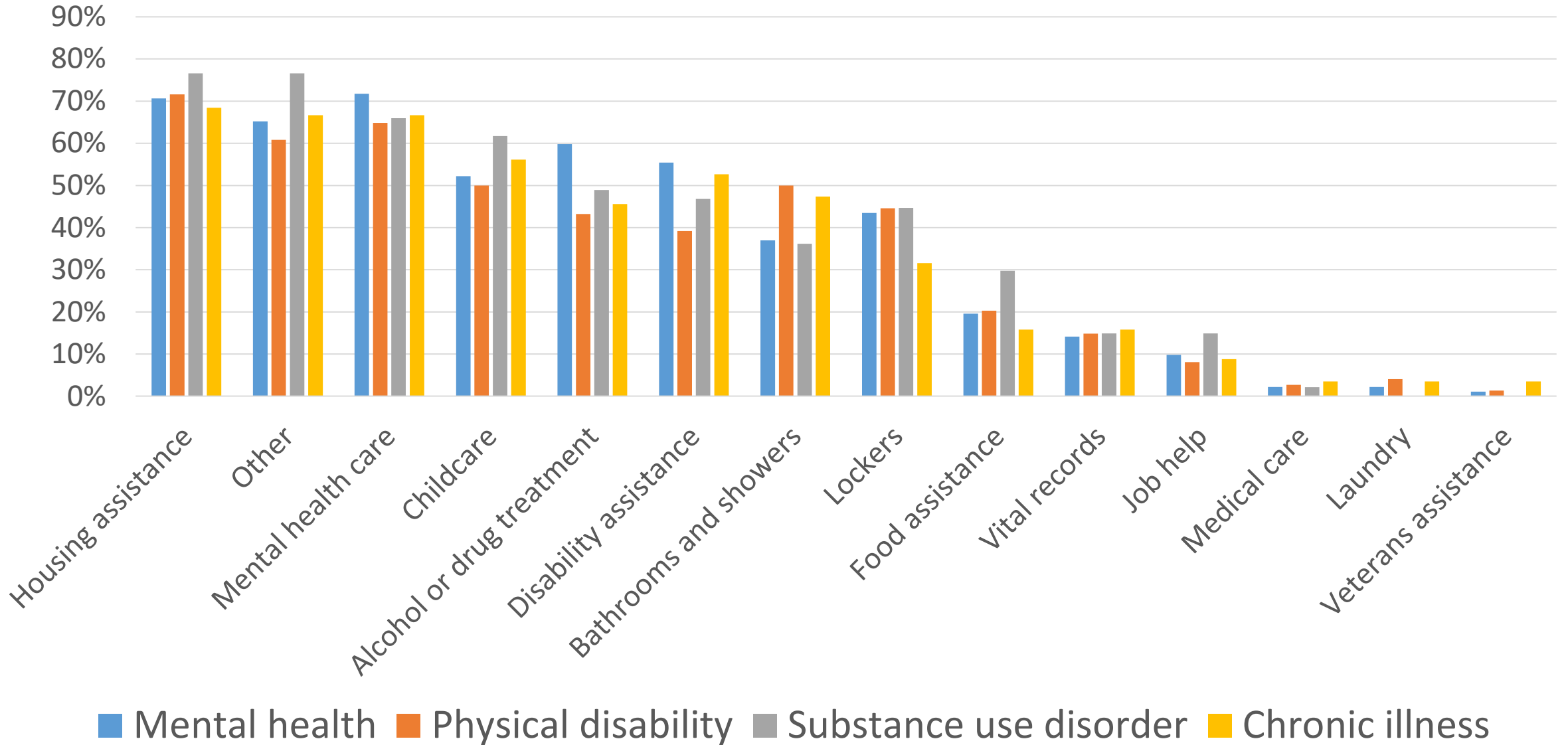
Type of housing preferred by race/ethnicity



Takeaways by race and ethnicity

- Majority of all demographics choose micro shelters as their primary type of housing preference
- Hispanic respondents chose fewer options across the board
- Over 25% of Native Americans chose “other” and listed housing options such as more family shelters, a place where they and their partner can be together, room rental or small apartment and micro shelter community neighborhoods that are affordable.

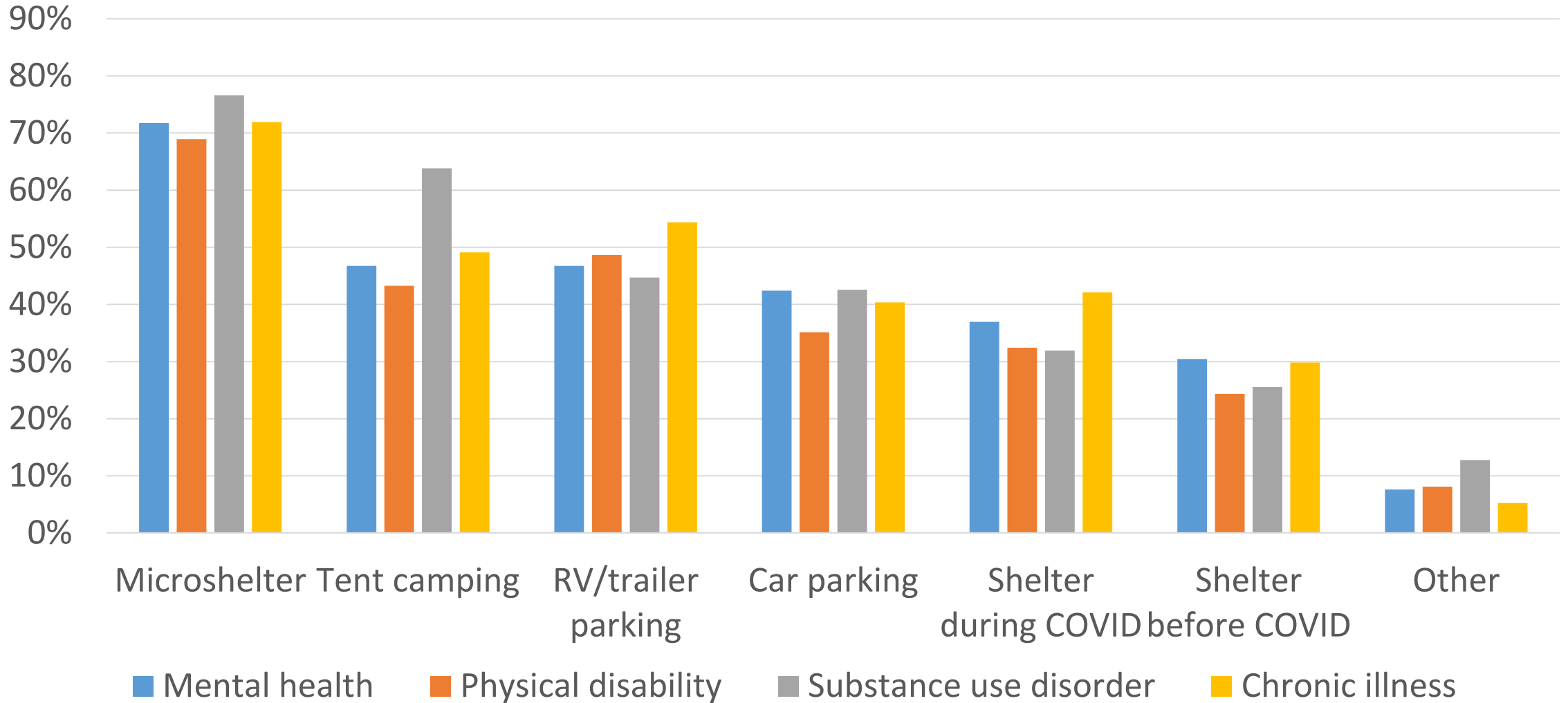
Type of assistance needed by medical condition



Types of assistance listed for “other”:

- Individuals with mental health condition: exercise, shelter, marriage **counselling**, recreational activities, assistance in **finding sources of housing** and hygiene, bikes, **supplies** (camping gear, power outlet, shoes etc.), cash assistance, self improvement and team leader
- Individuals with physical disability: **transportation** to Albany, travelling, shelter, marriage **counselling**, recreational activities, cash assistance, self improvement, team leader, **supplies** such as camping gear and transit to Corvallis (hospital) and Eugene
- Individuals with substance use condition: marriage **counselling**, bikes, day shelters, community center, power outlets, money for personal use, cash assistance and team leader
- Individuals with chronic illness: exercise, **transportation** to Albany, shelter, recreational activities, **assistance in housing resources**, day shelters, money for personal use, team leader and **supplies** such as camping gear

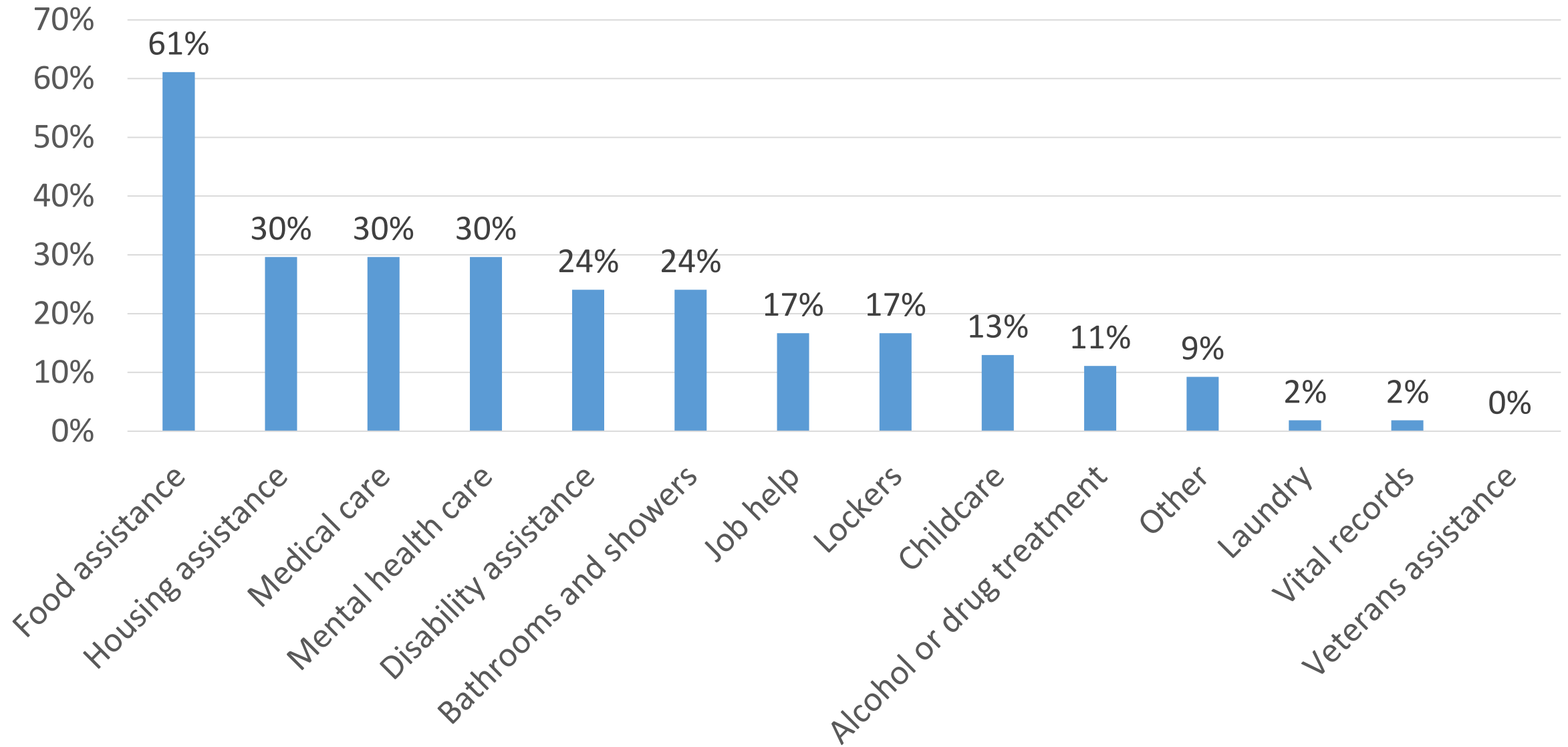
Type of housing preferred by medical condition



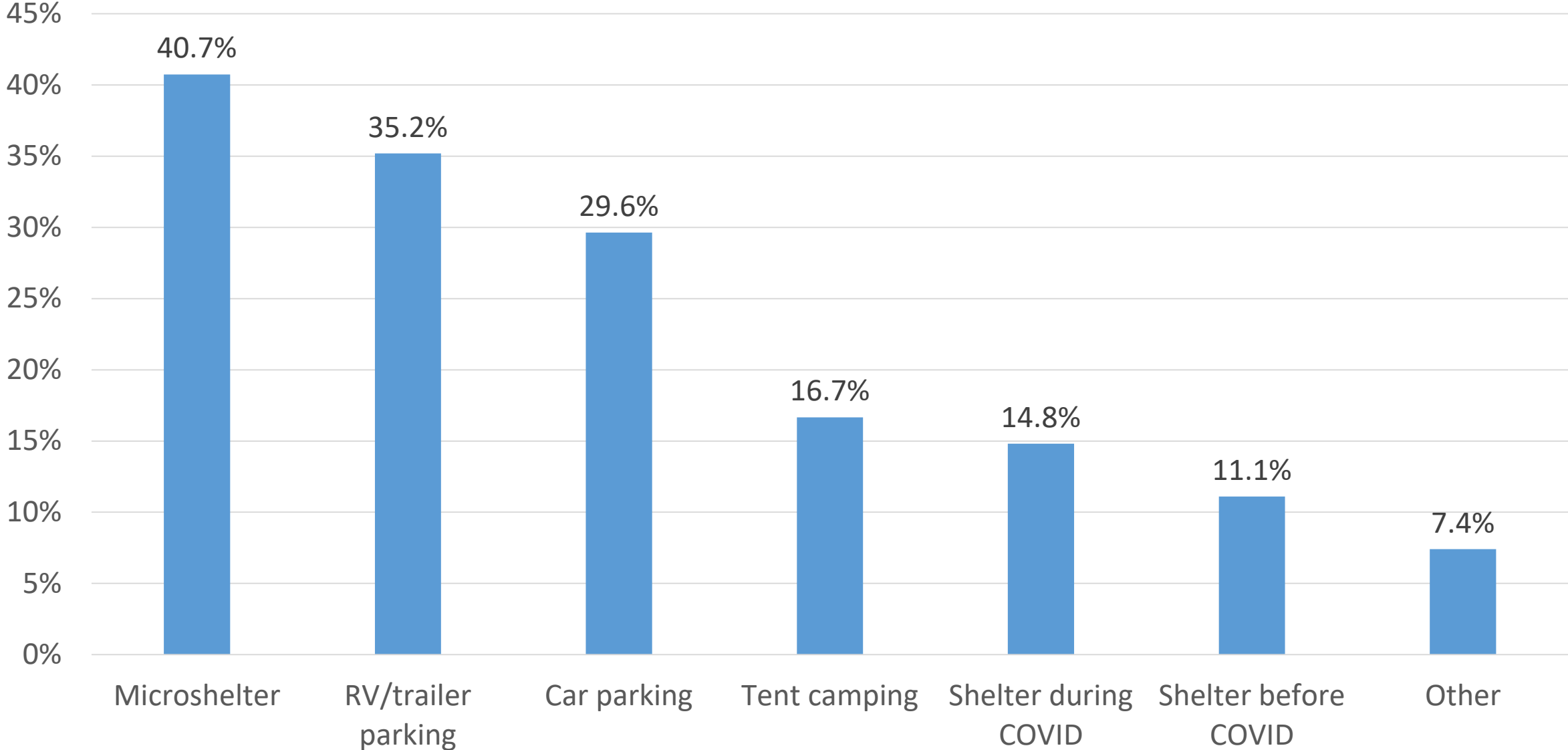
Housing options listed in “other”:

- People with substance use listed places where **partner** and they can live, place that has showers, shelter with **partner**, on a farm, and sidewalk.
- People with chronic pain listed living options such as **micro shelters for families, sharing space with relatives and community neighborhoods.**
- People with mental illness and mental disability listed sharing spaces with relatives, **affordable micro shelters, family shelters**, a place where their **partner** and them can live, cave and sidewalk as their housing options
- People who listed physical disability as a medical condition also listed sharing **space with relative or partner, family shelters**, a place where their **partner** and them can be together and **affordable micro shelters.**

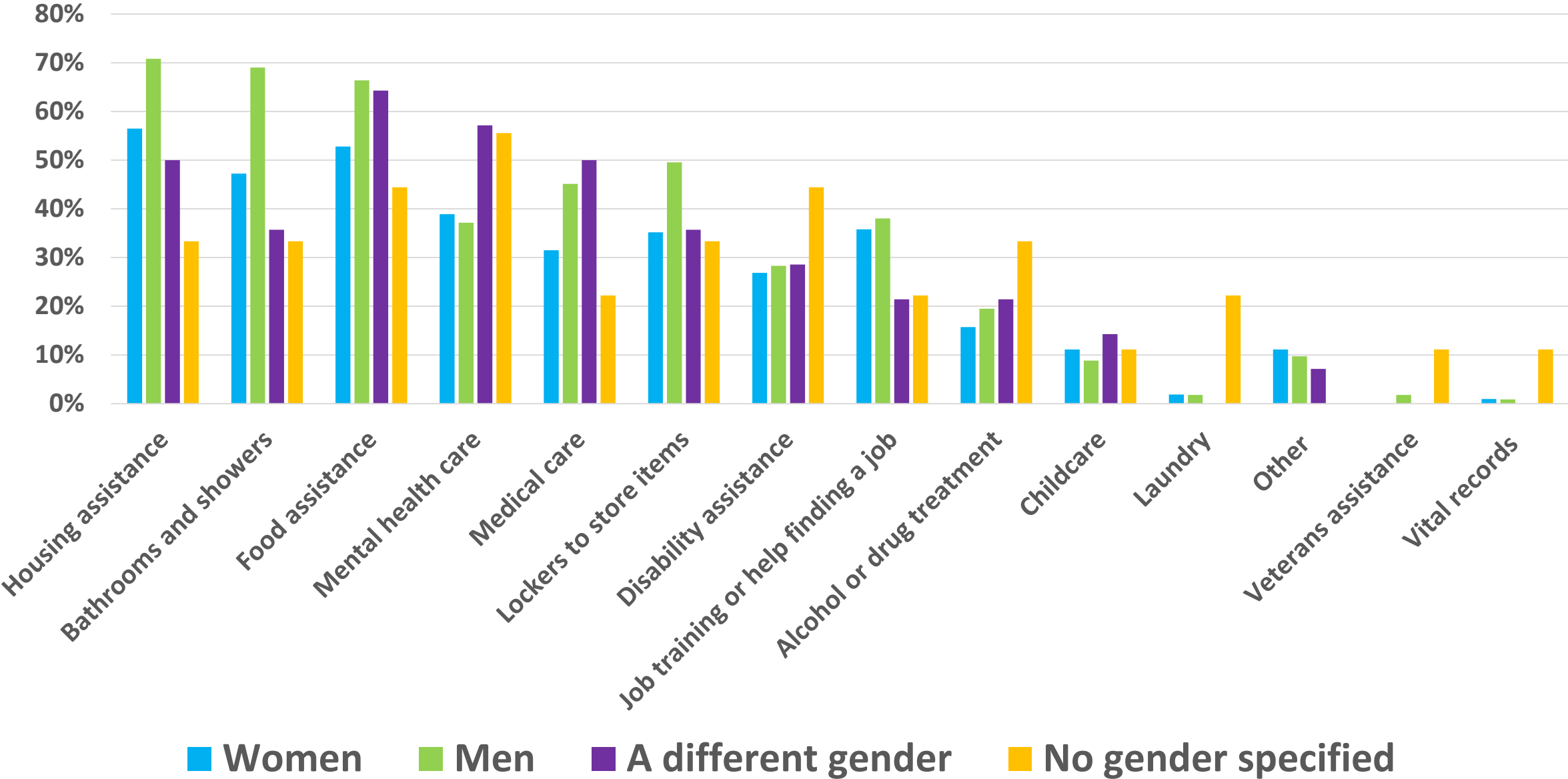
Type of assistance needed for rural community members



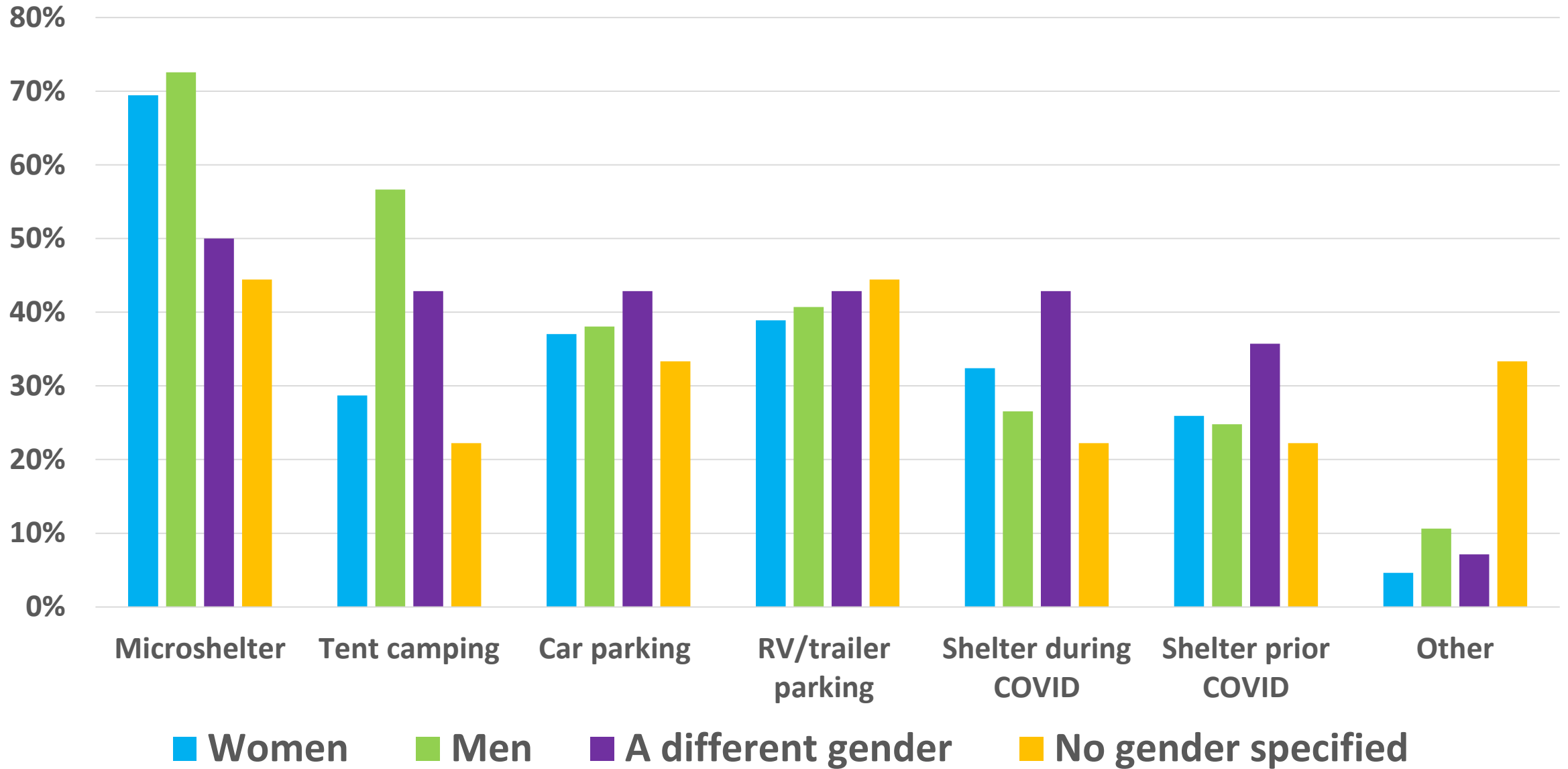
Type of housing preferred by rural community members



Types of assistance needed by gender



Types of housing preferred by gender



Takeaways of types of housing by gender

- People who did not specify their gender, listed sharing space with relative, living with friends and family and needing add-on specialties for living accommodations

Qualitative Data – listening sessions and write-in responses to surveys: 12 Themes

- Hub model of care coordination
- Data collection affects community safety
- Crisis Response (CAHOOTs model)
- Locate services away from existing residential neighborhoods and businesses
- Community Involvement and Transparent Communication
- Co-location of services AND mobile services
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Hub Model of Care Coordination:

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- Use online tools (Zoom, shared databases, online collaboration tools) to begin and include rural areas.
- Benton County Health Department (BCHD) health navigators or Community Health Workers (CHW) to coordinate a Hub model with different regions: Corvallis, Philomath/West Benton, Monroe/South Benton. Work off of Homeless Vulnerable Patients Workgroup but staff it with a full time BCHD employee who can coordinate and involve criminal justice.
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- Coordinate better with job training – include the Department of Health Services (DHS)/vocational rehab (VR) for job training in the hub. The HELP program to connect homeless with jobs needs to be elevated and connected with business owners.
- Corvallis Police Dept. (CPD) and Fire Dept. (CFD) need to be included.
- Samaritan could coordinate obtaining the confidentiality agreements with the individuals who are homeless in their data system, EPIC (1300 in Benton County).
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Data Collection tied to Community Safety and Funding:

- Data collection of who is staying in homeless tent encampments (BMX area and along south town bike path mentioned many times). Crime is occurring without any way to know who is committing it or pursue consequences.
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- Data collection that separates out “disability” for purposes of connecting people to better funding/services. Developmental versus physical disability; substance use disorder and/or mental health is a separate type of “disability.” Depending on the disability, the person can be eligible for disability assistance income.
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- Screen people so that we are working to shelter existing Benton community members and supporting people to return to where they would like to call home.

Street Outreach Response Team (SORT) – outreach and crisis response aka CAHOOTS model:

- We need crisis response that is not law enforcement. It could go through 911, but a team with case manager/peer support/mental health staff should respond.
- Crisis response is supported by all sectors of the community who were polled and many survey response write-ins.
- Need more case managers to go where people are homeless and work to get them transitioned and connected to all needed services (housing, mental, medical, jobs, vital records, etc.).
- Feedback from individuals, residents, and service providers is to not have law enforcement accompany the responder unless necessary.
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- Please respect existing neighborhoods and don't put services in existing residential neighborhoods. Prioritize tax payers safety and use of public parks for our children.
 - In particular, south Corvallis needs to stop being the only location where homeless are allowed to congregate. Community safety for all is a priority – it's being greatly affected in south town especially along the bike path.
- Don't put services in business areas. Businesses are struggling for many reasons, and homeless individuals congregating downtown hurts businesses and other residents' downtown safety.
- This leaves industrial and urban growth boundary (UGB) where there is natural space.
- Designate one or two locations where camping and parking can happen, and have resources there to address the litter, noise, fire, and safety concerns.
- People support having small transitional and permanent housing scattered throughout community, but not a service delivery hub in residential area.
- Some responses that support location downtown list access to transit and resources as the reason why – so any location should have resources on-site and transit.
- Screening for residency.
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- Transparency, notice, part of decision-making.
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 - Include neighborhood member(s) in steering committee for the service provider.
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 - Thresholds for type of services provided and number of people served
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- Must have 24/7 management onsite for places with overnight residents.

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 - Emergency area, that is also transitional, to camp, park a car/RV, and microshelters for individuals/couples. People do not have to leave in the morning like a traditional emergency shelter. RV living without 30 day restrictions.
 - Separate populations by functionality level/sobriety, not gender, with the single-resident or couple model of microshelters.
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 - Survey feedback also mentions need for outposts and/or mobile services hub to go to rural areas.
 - Rural Areas: they don’t want any services located there, but they want better access to services.
 - Job training is key – bringing job training support to where people are instead of requiring them to go to DHS.
- Concentration AND Distribution of subsidized housing: have co-locating AND dispersal of other options – spread some supported housing throughout the community in addition to having co-location with services and emergency/transitional shelter.
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- We have a wonderful police force, but it is not their job to house people. We need staff whose job it is to house people.
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- Need coordinated trash pick up.
- Need resource or designated staff person for Native American individuals in Benton County – there is none. Tribal resources can help support individuals if there were a tribal liaison staff person to make that connection and establish referrals, do the case management.
- Need an organizational structure for a Resource Center that includes city/county representation, local neighborhood representation (local to where the facility is being sited), and representation from the organizations co-locating. Essentially a Citizen Advisory Committee with all parties that have a vested interest yet governmental oversight to ensure a harmonious environment for all.
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- A new neighborhood for already-established communities of people tent camping together. They have friends they don't want to leave by becoming housed separately. This feedback has come from people who are homeless or have been homeless here, as well as service providers like COI, CDDC, and men's shelter.
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 - Include individuals who would live there in the design of any community.
- Can be done for different vulnerable populations with specific amenities: disabled and/or elderly (design with disabilities and mobility in mind), families with children (design with playground and child safety in mind), Native American sanctuary (design in partnership with Tribal input), living in recovery (sober).
- Responsibility for some self-governance and individual responsibility for involvement/work to maintain community. Assist residents to work toward recovery and independence. Have a "job" to learn skills. "Staff" can be residents which helps with shared experience and connection. People receiving services should be responsible for the success of their neighborhood.
- 7 survey write-in responses supporting this topic

Funding Ideas:

- County adopt Construction Excise Tax (CET) and apply for Community Development Block Grant (CDBG)
- County use transient lodging tax (TLT) to build and support transitional emergency village.
- The Medicaid Insurance Intercommunity Health Network-Coordinated Care Organization (IHN-CCO) has delivery system transformation (DST) grants for care coordination similar to the child welfare project with Dr. Cousins. Medical home concept for the Hub Model of care coordination.
- Benton Community Foundation (BCF) could be included to help fund Hub model care coordination and crisis response work.
- Eugene/Lane County and Corvallis/Benton County can partner with OSU and UofO to advocate at the state legislature for local flexibility for excise taxes for university sporting events and on-campus sales. The tax revenue can go to subsidize 1) student housing for low-income students who may otherwise become homeless, and 2) affordable housing or homeless services for non-student population.
- 4 survey write-in responses supporting this topic

Legislative Advocacy:

- Statewide homelessness requirements for a certain number of beds in each jurisdiction to stop the congregation of people coming from other areas to the few places where there are beds and services. Bed requirements should be accompanied by funding to support that number of minimum beds.
- Pac 12 municipalities flexibility to adopt an excise tax for university purchases (ticket sales, food, clothing on campus etc.) to subsidize low-income student housing and general community housing needs.
- CAHOOTs model funding for crisis response.
- Tax reform for rich and corporations to provide funding for social services and housing.
- 14 survey write-in responses supporting this topic

Messaging and Education for the public about what's happening on this topic:

- Who is working on what and what's happening.
- We see constant COVID updates; we want updates about homelessness.
- Rural education on topic of homelessness and what it looks like in rural areas, in particular Monroe.
- Where is the funding for any of this coming from? A lot of fear about property taxes increasing.
- What are the success rates of any of the services that are being provided? (Daytime Drop-in Center, men's and women's shelter, SafeSpace microshelters, health navigators). Is adding services actually helping house people? It appears that homeless population is only increasing – is that from new people coming here, current residents becoming homeless here, while also having successes in housing people? Or are none of the existing services successfully housing people?
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Next steps

- Meet with your topic group in February to develop policy recommendations draft
- Share with full board at February meeting



Home, Opportunity, Planning, and Equity (HOPE)
Advisory Board Meeting
Approved Minutes
January 27, 2021 from 4 pm to 6 pm
ZOOM Meeting



-
- Members Present:** Florence Anderson; *Xan Augerot (Commissioner, Benton County); Catherine Biscoe; Karyle Butcher; Bruce Butler; Bryan Cotter; Anita Earl; Joel Goodwin; George Grosch; Barbara Hanley; Aleita Hass-Holcombe; Nicole Hobbs; Christina Jancila* (Business Associate); Charles Maughan* (Corvallis City Council); Pegge McGuire* (CSC); Jim Moorefield* (Co-Chair); Andrea Myhre; Jan Napack* (Corvallis City Council); Reece Stotsenberg* (Co-Chair); Linda Tucker.
- Members Excused:** Lennox Archer
- Staff Present:** Julie Arena (Benton County Health, HOPE Program Coordinator); Paula Felipe (Benton County Public Health, recorder).
- Guests:** Joe Hahn, Jade Aguilar

*Executive Committee Members.

- I. **Welcome and Introductions.** Reminder about agreements on culture and conduct. Reviewing public feedback and next will draft public policy recommendations in March.
- II. **Public Comments (limited to 2-3 minutes).**
 - Maggie Cooper: Looked at HOPE Bylaws in order to best use scarce resources and acknowledging limitation of funding and impact on safety and livability....I find troubling expenditures by Unity Shelter: What are we providing for the other campers? I am concerned we are spending less wise and not providing services to as broad a group as we can. Xan: we do not have oversight of City Cares Act dollars. HOPE board does not manage monies right now but may play that role down the road. Those emergency funding decisions were made by city council in response to urgent need in context of COVID-19 and they made decisions in response to cares act dollars expiring at end of 2020. This decision-making on funds occurred under pressure of pandemic—it is not ideal but want to support as many people as possible. City Council members would be best to respond to those questions.
- III. **Approval of Minutes:** **MOTION** was made by Bruce Butler to approve the December 16, 2020 minutes; Pegge McGuire seconded the motion. **MOTION** passed as amended by suggested correction under section 4 by Florence Anderson, who indicated she did not participate in the clean-up, which was done by unhoused individuals. She will email the correction to Julie for the minutes.
- IV. **Announcements/Updates:**
 - Please do doodle poll in next couple of hours.
 - The powerpoint shown today will be posted to the HOPE website.

- February and March Scheduling: Work groups draft the policy recommendations to share with the board at the February meeting.
- February full board meeting – share draft policy recommendations from each group with full board. Hear feedback from full board.
- March: work groups finalize policy recommendations based on full board feedback.
- March full board meeting – finalize policy recommendations.
- County Behavioral health Updates: Drug Treatment Court (DTC): county expanding behavioral health to do treatment component of DTC.
- Behavioral Health New Staff: Includes new qualified mental health professionals; such as a psychiatrist and mental health associates to work with Drug Treatment Court, among others.
- Corvallis City Council: Allocated funds for camp site at BMX park; pioneer park parking lot is safer--put in restrooms and moved away from flood zone. Clean out of some unmanaged camps.
- Willamette Criminal Justice Council: Feasibility study on Cahoots model of crisis response.
- Fairgrounds update: camping full; expanded number of spaces to add capacity given cold weather and need for vehicle/RV camping. Expanded contract with CHANCE for motels for medically fragile and will continue thru winter period.
- Point in Time (PIT) count of sheltered and unsheltered community members this week.
- Welcome to Joe Hahn, New County Equity, Diversity, and Inclusion Coordinator.
- Brief review of HOPE’s Chartering Jurisdictions and Governance Charter/Inter-Governmental Agreement.

V. Reminder of Priority Topic Areas: **1.** Strengthen Crisis Response Resources: Align Services – Operational Changes for Improved Care Coordination; **2.** Strengthen Crisis Response_Resources: Location – Safe place to be 24/7 for all populations without housing that respects and addresses the needs of each individual; **3.** Transitional Options for Safety, Health, and Stability; and **4.** Permanent Supportive Housing Units.

- ❖ What can Benton County or the City of Corvallis do with policy recommendations on these topics?
 - Make code changes
 - Allocate funding from some limited funding streams (CET, CDBG, TLT)
 - Make decisions about staff time spent on certain topics
 - Make decisions to adopt and support policies
 - Adopt a near-consensus plan, that can be used to leverage additional state, federal and private dollars
 - *Geographic equity might also help us with locating services. For example, finding space in each part of town for micro-shelters.*

VI. Presentation of All Community Feedback from online surveys, client surveys, and listening sessions

- Four Priority topics were data driven; analyzed gaps; looked at safety concerns; including racial and ethnic disparities and vulnerable populations data.
- Online HOPE surveys
- Topic 1 align services among providers: 177 responses (provider-only survey)
- Topic 2 location for resources co-located with shelter: 367 responses
- Topic 3 transitional options: 391 responses

- Topic 4 permanent supportive housing: 470 responses
- Client surveys collected in person: 244 responses
- Qualitative feedback from community listening sessions and write-in responses to surveys
- Review listening sessions and write-in responses.

- **HOPE Priority Topic 1: strengthen crisis response by aligning services and coordinate care (177 online responses---geared toward providers):**
 - Q1: Which of these services do you provide? (42 percent Medical care; 31 percent Mental health care; 28 percent Food Assistance, and 20 percent housing assistance).
 - Q2 Working with others to improve data collection/tracking, reduce duplicative data entry and data management? (25 percent very interested).
 - Q3: Interested in hub model of care coordination (24 percent very interested)
 - Q4: Interesting in collocate service with other providers. (28 percent not interested at all).

- **HOPE Priority Topic 2: Strengthen Crisis Response Resources with a 24/7 Location (367 online responses):**
 - Q1a: What services should be co-located onsite at a Resource Center? (top 4 responses: Showers and bathrooms; mental health care: Food assistance; and Laundry)
 - Q1b: What services should be co-located onsite at a Resource Center? (top 4 responses: Vital Records help; Phone/fax/copier; Veteran Services; Childcare). **See powerpoint slide for complete list of services.
 - Q2: How many different populations need separate areas for shelter to ensure safety and comfort for all populations? (Top 4 responses: Families with children; women; men; individuals needing medical respite).
 - Q3: What are the attributes of a successful geographic location for a Resource Center with safe areas for emergency and transitional living quarters? (Top 3 responses: public transportation access; safe walking routes; and physical boundary like fence).
 - Q4: What amenities could be located at or near the Resource Center to enhance the livability of the individuals? (Top 3 responses: Work opportunities; hair cuts; and community garden).
 - Q5: What services should be available to the surrounding neighborhood adjacent to this type of Resource Center? (Top 3 responses: A 24/7 phone line to call for any issues; security cameras at entrance/exit; notification of upcoming events.)

- **HOPE Priority Topic 3: Transitional Options for Safety, Stability and Health (391 responses)**
 - Level of Support for Transitional Options: Top pick: Microshelters
 - Level of concern for community safety. Topic pick of most concerned: managed camping
 - Level of concern for individual safety: Most very concerned with Managed Camping.
 - Level of concern for litter: Most very concerned about managed camping.
 - Level of concern for noise: Most very concerned about managed camping.
 - Level of concern for visibility: Most very concerned about managed camping
 - Level of concern for fire: Most very concerned about managed camping
 - *note: definition of managed camping is when people live in tents in area managed and screened with people who support it.

- **HOPE Priority Topic 4: Permanent Supportive Housing (470 online responses)**
 - Q1 Level of support for permanent supportive housing in Benton county (47.61 % strongly support).
 - Q2 Support for development for more housing units (42.82 % strongly support).

- Q3 Support for rental assistance to keep individuals in their home. (41.87 % strongly support).
 - Q4 Funding supportive services like mental health care and housing case management to support keeping people in their home. (53.58 % strongly support).
- **Client Survey Data Analysis-244 responses in person; collected by 9 providers** (see powerpoint slide pg. 45 for list of providers).
 - Housing Status: 48 % houseless now.
 - Live, work, or visit often. 73 % in Corvallis; 20.5 % in South Corvallis.
 - Would like more services: 34.4 % in Corvallis.
 - Services desired: Top 3: Housing assistance; food assistance; and bathrooms/showers.
 - Housing type preferred: Microshelters 68.9 percent; tent camping (safe w/staff and hygiene: 42.2 %); safe place to park your RV/trailer 40.2 %
 - Race and Ethnicity: 75 % white; 14.3% Hispanic; 7.8 % Native American, Indigenous or Alaskan; 5.3 % Black or African American; 3.7 % Native Hawaiian or other Pacific Islander; 0.4 % Asian or Asian American.
 - Medical Conditions: Mental health or mental disability: 37.7%
 - Gender and Gender Identity: Male 46.3%; Female 44.3%; Another gender 5.7%; No gender specified 3.7%
 - Comfort level with providers discussing their case to coordinate care. 39.3 % very comfortable.
 - Most got help from Corvallis Daytime Drop-In Center (43%)
 - Most (55.7%) interacted with Corvallis Daytime Drop-In Center.
 - **Survey data: Analysis by demographics**
 - Types of Assistance needed by race/ethnicity (Isna Waqas):
 - Housing assistance → 84.6% Black, 80% Native American and Pacific Islander
 - Job help/assistance → 63.2% Native Americans
 - Food assistance → 77.8% Pacific Islanders
 - Lockers and storage rooms → 66.7% Pacific Islanders
 - Mental healthcare → 53.8% Black
 - Medical care → 55.6% Pacific Islanders
 - Disability services → 52.6% Native Americans
 - In Types of assistance, 30% of Native Americans listed assistance “other”: case management (finding shelter), marriage counselling, needing supplies such as clothing, cell phone and camping gear, assistance in paying for medical bills and travel.
 - Types of housing preferred by race/ethnicity
 - Majority of all demographics chose micro shelters as their primary type of housing preference
 - Hispanic respondents chose fewer options across the board
 - Over 25% of Native Americans chose “other” and listed housing options such as more family shelters, a place where they and their partner can be together, room rental or small apartment and micro shelter community neighborhoods that are affordable.
 - Types of assistance needed by medical condition (see slide)
 - Types of assistance listed for ‘other’
 - Individuals with mental health condition: exercise, shelter, marriage **counselling**, recreational activities, assistance in **finding sources of housing** and hygiene, bikes, **supplies** (camping gear, power outlet, shoes etc.), cash

- assistance, self improvement and team leader
 - Individuals with physical disability: **transportation** to Albany, travelling, shelter, marriage **counselling**, recreational activities, cash assistance, self improvement, team leader, **supplies** such as camping gear and transit to Corvallis (hospital) and Eugene
 - Individuals with substance use condition: marriage **counselling**, bikes, day shelters, community center, power outlets, money for personal use, cash assistance and team leader
 - Individuals with chronic illness: exercise, **transportation** to Albany, shelter, recreational activities, **assistance in housing resources**, day shelters, money for personal use, team leader and **supplies** such as camping gear
 - Types of housing preferred by medical condition (See slide).
 - Housing options listed in 'other'
 - People with substance use listed places where **partner** and they can live, place that has showers, shelter with **partner**, on a farm, and sidewalk.
 - People with chronic pain listed living options such as **micro shelters for families, sharing space with relatives and community neighborhoods**.
 - People with mental illness and mental disability listed sharing spaces with relatives, **affordable micro shelters, family shelters**, a place where they and their **partner** can live, cave and sidewalk as their housing options
 - People who listed physical disability as a medical condition also listed sharing **space with relative or partner, family shelters**, a place where their **partner** and they can be together and **affordable micro shelters**.
 - Types of assistance needed for rural community members.
 - Types of housing preferred by rural members (40.7 % Microshelters)
 - *For more pics and definition of microshelters as they are being installed in Corvallis go here - <https://www.unityshelter.org/sp-microshelters.html>*
 - Types of assistance needed by gender
 - Types of housing preferred by gender (microshelter)-see slide
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 - Include individuals who would live there in the design of any community.
 - Can be done for different vulnerable populations with specific amenities: disabled and/or elderly (design with disabilities and mobility in mind), families with children (design with playground and child safety in mind), Native American sanctuary (design in partnership with Tribal input), living in recovery (sober).
 - Responsibility for some self-governance and individual responsibility for involvement/work to maintain community. Assist residents to work toward recovery and independence. Have a "job" to learn skills. "Staff" can be residents which helps with shared experience and connection. People receiving services should be responsible for the success of their neighborhood.
 - **7 survey write-in responses supporting this topic**
- Funding Ideas
 - County adopt Construction Excise Tax (CET) and apply for Community Development Block Grant (CDBG)
 - County use transient lodging tax (TLT) to build and support transitional emergency village.
 - The Medicaid Insurance Intercommunity Health Network-Coordinated Care Organization (IHN-CCO) has delivery system transformation (DST) grants for care coordination similar to the child welfare project with Dr. Cousins. Medical home concept for the Hub Model of care coordination.
 - Benton Community Foundation (BCF) could be included to help fund Hub model care coordination and crisis response work.
 - Eugene/Lane County and Corvallis/Benton County can partner with OSU and UofO to advocate at the state legislature for local flexibility for excise taxes for

university sporting events and on-campus sales. The tax revenue can go to subsidize 1) student housing for low-income students who may otherwise become homeless, and 2) affordable housing or homeless services for non-student population.

- **4 survey write-in responses supporting this topic**

- Legislative advocacy

- Statewide homelessness requirements for a certain number of beds in each jurisdiction to stop the congregation of people coming from other areas to the few places where there are beds and services. Bed requirements should be accompanied by funding to support that number of minimum beds.
- Pac 12 municipalities flexibility to adopt an excise tax for university purchases (ticket sales, food, clothing on campus etc.) to subsidize low-income student housing and general community housing needs.
- CAHOOTs model funding for crisis response.
- Tax reform for rich and corporations to provide funding for social services and housing.

- **14 survey write-in responses supporting this topic**

- Messaging and Education for the public about what's happening on this topic

- Who is working on what and what's happening.
- We see constant COVID updates; we want updates about homelessness.
- Rural education on topic of homelessness and what it looks like in rural areas, in particular Monroe.
- Where is the funding for any of this coming from? A lot of fear about property taxes increasing.
- What are the success rates of any of the services that are being provided? (Daytime Drop-in Center, men's and women's shelter, SafeSpace microshelters, health navigators). Is adding services actually helping house people? It appears that homeless population is only increasing – is that from new people coming here, current residents becoming homeless here, while also having successes in housing people? Or are none of the existing services successfully housing people?

- **13 survey write-in responses supporting this topic**

- **Qualitative Data – listening sessions and write-in responses to surveys: 12 Themes**

- Hub model of care coordination
- Data collection affects community safety
- Crisis Response (CAHOOTs model)
- Locate services away from existing residential neighborhoods and businesses
- Community Involvement and Transparent Communication
- Co-location of services AND mobile services
- Village community for permanent neighborhood and transitional sheltering
- Staff to transition people to shelter
- Funding Ideas
- OSU involvement
- Legislative advocacy
- Messaging and Education for the public about what's happening on this topic

VII. Update on Board Training on Diversity, Equity, Inclusion.

Joe Hahn: plan to help bring in speakers and promote education and community building. Important to listen and understand community concerns and help people understand what we are trying to do in

promoting equity.

Dr. Jade Aguilar: Looking from equity perspective on co-location space: knowing who was disproportionately impacted by homelessness, possible need for that to rise more to the top. Appreciate the report including categories by race and gender and disability, the listening sessions, participants, and the work has solid result. Need for on-going education and outreach to overcome stereotypes. People want to support and not come from place of fear. On nimby issues: hundreds in supportive housing right now. Hold an optimistic view; people tend to be good neighbors who get into housing.

- Thanks to neighborhood Associations who sat down and shared insights with us. Important to have that as foundation in planning moving forward.

VIII. Next Steps

Meet with your topic group in Feb to develop first draft of policy recommendations to share with full board. Will be working next month on exercise on equity with Jade Aguilar who will provide an equity lens tool. Share with full board at February meeting

IX. Meeting was adjourned at 6 pm.

Benton County & City of Corvallis
Home, Opportunity, Planning, & Equity (HOPE) Advisory Board



Julie Arena, HOPE Program Coordinator
Benton County Health Department
4077 SW Research Way
Corvallis, OR 97339

541-766-0252 * Email: Julie.Arena@co.benton.or.us

HOPE MEETING AGENDA

February 24, 2021 from 4-6 PM

Meeting location: Zoom or phone in

Join Zoom Meeting: <https://cscteam.zoom.us/j/91929383646>
One tap mobile: +12532158782,,91929383646#
Dial by phone: +1 253 215 8782
Meeting ID: 919 2938 3646

AGENDA

- I. Welcome, Zoom Housekeeping, Overview of Agenda.....4pm
- II. Public Comment* (10 minutes)4:05pm
- III. Roll call and approve January meeting minutes4:15pm
- IV. Update on Board Training on Diversity, Equity, and Inclusion4:20pm
- V. Community Updates.....4:25pm
- VI. Present the first draft of policy recommendations from the four Priority Topics based on public input, research, and data4:30pm
- VII. Next Steps5:55pm

*Public Comment: if you would like to make a public comment, please “raise your hand” in the Zoom meeting when you arrive or you can chat a message to the presenter. List your name and the general topic of your comment in the chat. Comments will be made in the order that people “raise their hand” or submit a chat. For people calling in from a phone line, there will be an opportunity for comment for participants who have called-in.

HOPE Advisory Board Meeting

2/24/2021

Zoom Meeting hosted by Julie Arena, HOPE Coordinator

Zoom Housekeeping

- All attendees are muted when they join.
- All attendees can unmute themselves and choose to be seen visually by clicking “Start Video” at the bottom of the screen.
- Public comment:
 - Type your name into the “Chat” area, say you want to make a public comment, and on what topic.
 - Example: “Julie – public comment – crisis response.”
 - For those on the phone, there will be an opportunity to comment, too.
- Questions during the meeting:
 - Type into the “Chat” area and send it to host, Julie Arena.

Meeting Logistics and Agenda

- 1. Meeting Overview**
- 2. Agreements and Culture**
- 3. Public Comment on any topics for 10 minutes**
- 4. Logistics:**
 - a. Vote to Approve 1/27/20 Minutes – roll call**
- 5. Community Updates**
- 6. Presentation on first draft of Policy Recommendations**

Agreements for our culture + conduct:

Fun

Inclusive ✓✓

Humor

Food ✓

Action/roll up sleeves

Change the face of Homelessness

Honesty

Respect ✓

Consensus

Think before you speak

Cunoxaty ✓

transparency

Recognize personal bias

Kindness ✓

time management

Concise communication

Open minded ✓

opinions matter

data driven

Do your homework!

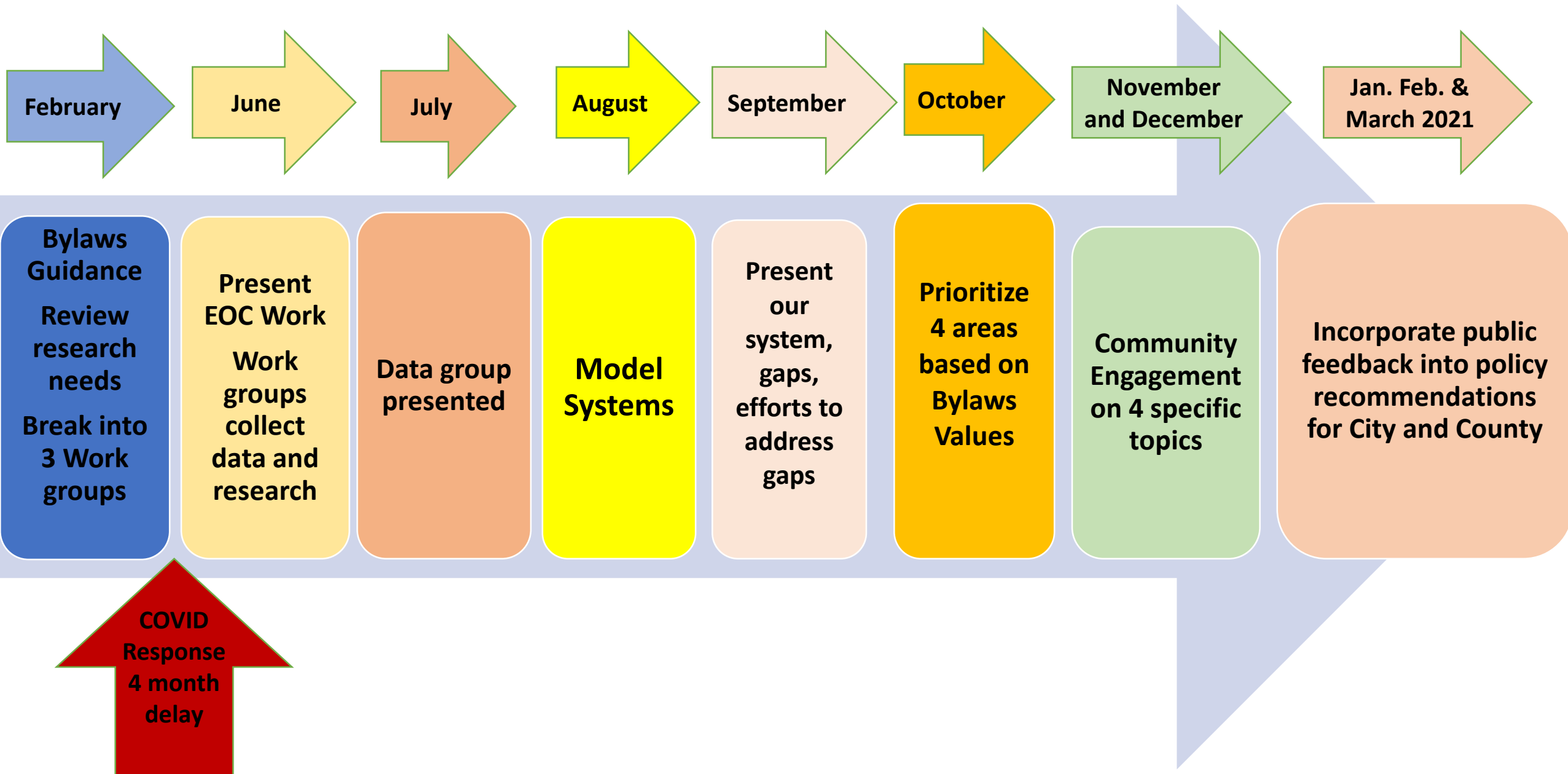
patient

authentic

Valuing personal experience

dedication/work ethic
honor the expectations of
the work

HOPE Timeline – where are we now?



Public comment: 10 minutes

- **Comment limited to 2-3 minutes based on number of people wanting to comment**
- **Type into the “Chat” and say you want to make a public comment and on what topic.**
- **For those on the phone, I will ask if there are any public comments from callers.**
- **Can also submit written comments via email to Julie.Arena@co.Benton.or.us**

Logistics: Vote to approve 1/27/20 minutes, roll call

Florence Anderson

Lennox Archer

Xan Augerot

Catherine Biscoe

Karyle Butcher

Bruce Butler

Bryan Cotter

Anita Earl

Joel Goodwin

George Grosch

Barbara Hanley

Aleita Hass-Holcombe

Nicole Hobbs

Christina Jancila

Charles Maughan

Pegge McGuire

Jim Moorefield

Andrea Myhre

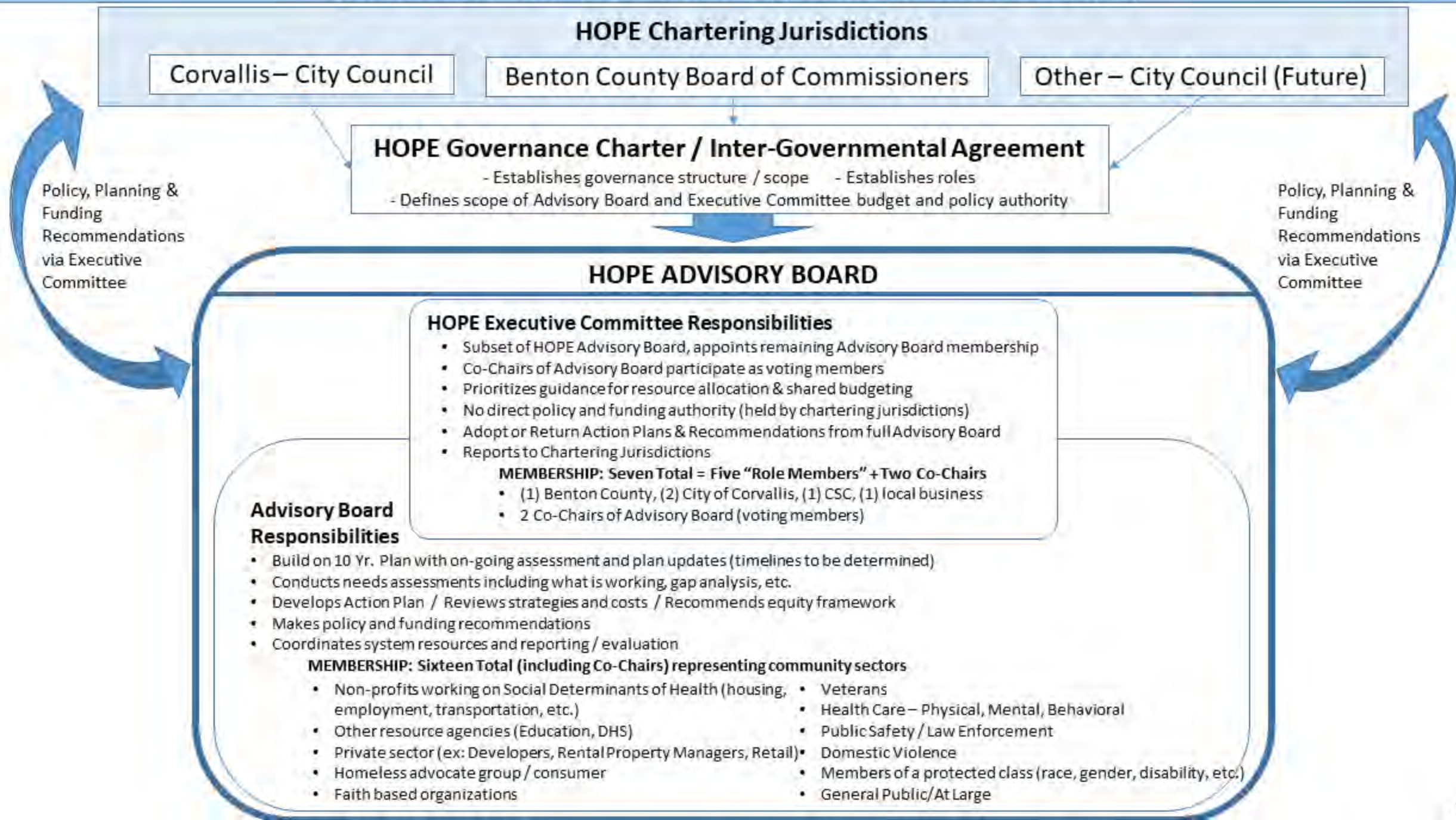
Jan Napack

Reece Stotsenberg

Linda Tucker

Community Updates

- 1. Project Turnkey**
- 2. Point in Time (PIT) County of sheltered and unsheltered community members this week**
- 3. Willamette Criminal Justice Council – committee on crisis response, street outreach response team (SORT) or CAHOOTS model**



Priority Topic Areas

- Keep at the forefront diversity, equity, and inclusion recognizing identified disparities in our community data.
- HOPE Bylaws value: safety, vulnerable populations, and racial and ethnic justice.

1. Strengthen Crisis Response Resources: Align Services – Operational Changes for Improved Care Coordination:

- Coordination between existing providers with street outreach and Hub Model of care coordination. Increased case managers to support this care coordination from entry, transition, and permanent case management support to remain in housing.
 - Follow up case management and rental assistance to stay housed in whatever environment works for the individual.
- Data tracking coordinated between providers. Data collection coordinated between providers from entry, to transition, to permanent options.

2. Strengthen Crisis Response Resources: Location – Safe place to be 24/7 for all populations without housing that respects and addresses the needs of each individual.

3. Transitional Options for Safety, Health, and Stability

- Current providers are COI, Corvallis Housing First, and SafePlace.
- Additional examples include microshelters/conestoga huts, managed camping, RV and car camping in locations that are safe, sanitary, stable, and provide services for health.

4. Permanent Supportive Housing Units

- Definition: affordable, community-based housing for individuals and families who have experienced long-term or chronic homelessness and have been diagnosed as having a physical or developmental disability, a severe mental illness, substance abuse problems or HIV/AIDS; or are members of another designated group within the homeless population.
- Structures may include apartments, single-family houses, duplexes, group homes or single-room occupancy housing.
- Supportive services vary, most programs offer case management and housing support, but may also offer more intensive mental health, substance abuse, vocational, employment or other services which help promote independent living. Supportive services may be offered on-site or off-site, or be provided by a mobile service team. (LA County Taxonomy)

HOPE Priority Topics

- How did we arrive at these four priority topics?
 - Data, research on model systems, analysis of the gaps in our system
 - Prioritizing by where our data says we have the greatest:
 - Safety concerns
 - Racial and ethnic disparities
 - Vulnerable populations
- What can Benton County or the City of Corvallis do with policy recommendations on these topics?
 - Make code changes
 - Allocate funding from some limited funding streams (CET, CDBG, TLT)
 - Make decisions about staff time spent on certain topics
 - Make decisions to adopt and support policies
 - Adopt a near-consensus plan, that can be used to leverage additional state, federal and private dollars

Public Feedback Summary from November and December 2020:

- Online HOPE surveys
 - Topic 1 align services among providers: 177 responses (provider-only survey)
 - Topic 2 location for resources co-located with shelter: 367 responses
 - Topic 3 transitional options: 391 responses
 - Topic 4 permanent supportive housing: 470 responses
- Client surveys collected in person: 244 responses
- Qualitative feedback from community listening sessions and write-in responses to surveys

HOPE Policy Recommendations on First Four Priority Topics

These recommendations are grounded in the following:

- Data: our data shows we have gaps in our system of services for individuals in crisis due to homelessness. A gap is where there is a needed service or type of housing for people but that service/housing does not exist at all or does not exist for a certain population.
- Prioritizing vulnerable populations and safety for all (individual safety and community safety), while actively working to reduce racial and ethnic disparities based on where our data shows these factors exist. Vulnerable populations include people with a behavioral health condition (mental health or substance use disorder), LGBTQ community, elderly, children, veterans, and individuals with disabilities.
- A systems-level approach: all four of these topic areas are crucial to a successful system of housing and services to transition people out of homelessness and support them in remaining housed.
- Public feedback: the majority of quantitative and qualitative public feedback shows support for the following recommendations.

HOPE Topic 1 Draft Policy

Recommendations:

Strengthen Crisis Response
Resources and Improve Care
Coordination

- **Overarching goal:** end homelessness for more people by strengthening crisis response services and coordinating existing services to better address the needs of individuals in crisis in Corvallis and in Benton County as a whole.

- **Definitions:**

Crisis response services help people experiencing a crisis due to lack of housing or behavioral health by connecting them with all the services they need for stability.

Aligning and coordinating existing resources is defined as bringing together, virtually and physically, existing providers to help individuals with all their needs in a coordinated way.

Topic 1 Recommendations:

I. Allocate local and state resources to programs that support these four goals:

1. Improved data collection/tracking
2. Creating metrics for successful program goals
3. Participating in a hub model of care coordination
4. Co-locating service providers

II. Create a staff position for Hub Model

III. Establish a physical location for the Hub

IV. Institute a crisis response team

V. HOPE coordinator position to facilitate and coordinate data improvement efforts with community partners.

I. Allocate local and state resources to programs that support these four goals:

1. **Working with other providers to improve** data collection/tracking and to reduce duplicative data entry and data management.
2. **Working with other providers to create metrics for successful program goals** to track which services are successful interventions in transitioning people out of homelessness.
3. **Participating in a hub model of care** coordination with multiple providers to stabilize individuals with complex needs with the ultimate goal of stable housing.
4. **Co-locating service providers** from multiple organizations to decrease the travel and number of different locations people must go to meet their needs. Having some shared space at one location does not mean that an organization entirely relocates their operation. It means that a representative from different organizations are co-located at a resource hub to coordinate care in one location.
(Long-term goal)

II. Create a staff position for Hub Model

An “agency navigator” is necessary to staff the Hub Model. The hub will only exist if there is a person to coordinate it. This staff position needs to be full-time and could be a health navigator, case manager, community health worker, or program coordinator. The Hub Model is a framework for doing business with existing provider coordination. This same staff position is needed to do an assessment of funding streams: do an assessment with input from city/county and providers of all available funding streams coming into Benton County that fund this work to try to blend funding streams.

Implementation: can be done immediately if an existing staff person is available, until an FTE can be budgeted for this role. It should be jointly funded by county, city, IHN, and Samaritan as it will be coordinated all community partners for all-community benefit and cost savings.

- Hub spokes needed at the table: BCHD, CDDC, Unity Shelter, COI, CARDV, Samaritan, IHN, JSYS when needed, DHS, case managers, CLU, Philomath Community Services, SBFP, Job training/vocational rehab, law enforcement/first responders, crisis response team members, SORT members, social security/disability advocacy, Older Adult Behavioral Health Initiative to do system-level coordination, CWCOG. Any other provider who can provide access to services for a person in need.
- Geographic hub suggestion: the details and frequency can be decided by the Hub participants, but we suggest having routine monthly Hub meetings for Corvallis-centric clients, South Benton clients, and Philomath/West Benton clients.

III. Establish a physical location for the Hub

A one-stop location for multiple service providers to share some space to coordinate and provide immediate access for clients needing support from different providers/systems. **(Long-term Implementation)**

IV. Institute a crisis response team

- Crisis response is a missing spoke of the Hub. We recommend a non-police intervention for non-violent crisis situations which may be, in part, due to homelessness and behavioral health issues. Pursue the feasibility and implementation of a crisis response team.
- We recognize that ongoing efforts are occurring with the Criminal Justice Systems Improvement project and the Willamette Criminal Justice Council. HOPE's research, data, and community feedback fully support the pursuit of a Crisis Response Team to divert calls from law enforcement and provide team partnerships with law enforcement when an officer is necessary.

V. HOPE coordinator position to facilitate and coordinate data improvement efforts with community partners.

Data collection efforts will include a human services coalition model that is a statewide model: service providers come together to say what their priorities are and how they would implement them. Implementation can be immediate with existing staff person.

Feedback on Topic 1 Recommendations:

I. Allocate local and state resources to programs that support these four goals:

1. Improved data collection/tracking
2. Creating metrics for successful program goals
3. Participating in a hub model of care coordination
4. Co-locating service providers

II. Create a staff position for Hub Model

III. Establish a physical location for the Hub

IV. Institute a crisis response team

V. HOPE coordinator position to facilitate and coordinate data improvement efforts with community partners.

HOPE Topic 2 Draft Policy

Recommendations: Strengthen Crisis Response Resources with a 24/7 Location for emergency sheltering.

Definition: a safe place to be 24/7/365 for all populations without housing that respects and addresses the needs of each individual and conducts an initial assessment to enter the client's data into a data system.

Topic 2 Recommendations:

- I. Emergency Shelter and Services Location
- II. Resource Center
- III. Invest in building organizational capacity
- IV. Prioritize investment based on public feedback
- V. Staffing: full-time case managers
- VI. Paid, full-time staff are needed to work on, coordinate, and implement these recommendations on homelessness.
- VII. A Crisis Response Team
- VIII. Funding recommendations
- IX. Legislative Advocacy

Overarching goal: end homelessness for more people by strengthening crisis response services and coordinating existing services to better address the needs of individuals in crisis in Corvallis and in Benton County. Getting to “functional zero” homelessness means we have a system that can address people’s needs in crisis and transition them to stable and permanent living situations.

Definition: crisis response services help people experiencing a crisis due to lack of housing. Part of the continuum of crisis services is a safe location open 24/7/365 where people can be that respects their individual needs and has services to meet those needs. The crisis response services must include an assessment of need and connecting people to appropriate services while staying at the emergency shelter.

Recommendations:

An Emergency Services Location is needed that has two components:

1. Emergency shelter options that are onsite, adjacent, or within short walking distance of the resource center.
2. Resource center with providers.

I. Emergency Shelter Location:

- **Congregate and non-congregate shelter:** needs separate congregate areas for men and women and also significant non-congregate capacity for people who cannot be in men/women dorms: non-binary and trans individuals, couples, people who cannot be in congregate settings due to medical fragility or behavioral health disorders (PTSD, other mental illness), and family members.
- We recommend **micro shelters** onsite to provide this non-congregate capacity for emergency sheltering based on the public feedback supporting micro shelters.
- **Individuals are assigned a bed space that is theirs 24/7** while they work with a case manager on transition. (The women's shelter has a successful model of congregate beds and micro shelters with daytime indoor living space and a case manager onsite to work on transition.)

I. Emergency Shelter Location (cont.)

- Recommended components of this 24/7/365 emergency services location:
 - This emergency shelter is **low barrier** upon arrival to get individuals off the street. Options are available for individual involvement to support the location while they work on transitioning, such as doing laundry, cleaning, or helping to provide food.
 - Emergency shelter is **temporary and has time limits** based on availability of the next transitional option in our community. The duration of a person's stay will vary based on their needs, their progress with a case manager, and availability of an appropriate transitional or permanent option.

I. Emergency Shelter Location (cont.)

- **A tent camping area that is managed**, limited in number based on staffing capacity to provide case management, and time-limited while the person waits for a transitional option. Allowing an area for tent camping will address the safety concerns of unmanaged camping and allow for enforcement of illegal tent camping elsewhere.
 - Tent camping is the least supported by the public feedback due to concerns of fire, individual safety, community safety, litter, noise, and visibility. To transition people out of tent camping, we recommend that any emergency tent camping have time limits for every individual camper with evaluation of that person's progress towards securing transitional or permanent housing on a case-by-case basis. Case management to work on transitioning to stable housing must be provided for all persons.
 - We recognize there are individuals who will not engage in case management to transition out of homelessness. Crisis respite is needed for those who are unable to engage due to behavioral health conditions. Criminal justice systems improvement is needed to add jail capacity for those who pose a safety concern to the community. For those who refuse to work on transitioning out of homelessness and do not belong in crisis respite or jail, tent camping remains illegal and will not be tolerated once it is possible to enforce illegal tent camping given the public health situation with COVID and access to vaccination for individuals experiencing homelessness.

I. Emergency Shelter Location (cont.)

- A limited **overflow area** for people who show up with a tent or car/RV. Tent and car/RV camping is time limited, and the individual must engage to transition to another option.
- Area for warming/cooling from the elements. This place is where someone can be 24/7 who is experiencing homelessness to minimize the need to go to multiple locations throughout the day to stay warm or get cool. **The warming/cooling areas are accessible to individuals not staying at the emergency shelter location.**
- Necessary amenities: showers, bathrooms, drinking water, food provided on-site (to minimize need to travel to multiple locations for food), laundry, wifi, lockers for items for those in congregate shelter, mail service. **These hygiene and food services are accessible to individuals not staying at the emergency shelter location.**
- Necessary components to the overall location: **walking and biking access, public transportation access, and safety:**
 - Safety concerns for everyone involved need to be addressed. Security, lighting, fire code, and immediate access for emergency personnel must be considered.

II. Resource Center

- Resource Center should have space for providers from different organizations to meet with people, enroll them in programs, and work on transitioning out of homelessness.
 - Office space for service providers like BCHD health navigators to enroll people in OHP, housing case managers to work on transitioning people out of homelessness, assistance with vital records (drivers license, social security card, etc.), assistance with applying for and accessing disability and social security income, job assistance, etc.

III. Invest in building organizational capacity

- Invest in building capacity at organizations that can run this emergency shelter location. Invest in building organizational capacity by supporting and collaborating with groups that have demonstrated efforts to provide emergency services in Benton County. If no local organizations wish to build and grow organizational capacity, recruit an organization to Benton County who can provide these services.
 - Suggestions: expand the capacity of organizations that successfully are stabilizing people by adding micro shelters at their locations. For example, Community Outreach Inc. (COI), Corvallis Housing First (CHF), and Unity Shelter have successful models of housing case management to transition people out of homelessness. Increase their capacity with funding for positions and micro shelters at available locations. Organizational capacity goes beyond hiring more case managers and includes building HR, IT, and Finance & Development.
 - Section VIII includes funding recommendations.

IV. Prioritize investment based on public feedback.

The community supports the following options in descending order:

1. Micro shelters,
2. Emergency shelter,
3. RV/car camping,
4. Tent camping.

V. Staffing: full-time case managers

- Full-time staff are needed as case managers to provide onsite services to transition people out of homelessness once they have stabilized at this emergency location. Case managers should have commensurate experience and background that reflects the people they are serving from a cultural perspective and based on lived-experience.
 - County: work with IHN-CCO and Samaritan on workforce capacity for housing case managers, peer support specialists, and social service providers to utilize funding from Medicaid and SAMHSA block grant resources.
 - Work with OSU, PSU School of Social Work, and LBCC on expanding internship workforce capacity from students.

VI. Paid, full-time staff are needed to work on, coordinate, and implement these recommendations on homelessness.

- No new solutions can be successfully implemented without new city/county staff whose job it is to work on the topic of homelessness and poverty.
 - **A team to pursue sites for emergency services locations is needed.** The type of work that DLR has done for the Criminal Justice Systems Improvement Project is needed to research sites, zoning, and other parameters to provide site-specific options for city/county leadership to make informed choices.
 - **Organizational capacity needs to be built at the city/county** to facilitate system-wide coordination along the housing continuum, leverage funding, and collect performance data for continual systems improvement. (in addition to organizational capacity being built for social service organizations to provide the services.) Funding recommendations are below in Section VIII.

VII. A Crisis Response Team

- A Crisis Response team is needed for many reasons, and one function is to support individuals in relocating to emergency shelter. We recommend a non-police intervention for non-violent crisis situations which may be, in part, due to homelessness and behavioral health issues. Pursue the feasibility and implementation of a crisis response team.
- We recognize that ongoing efforts are occurring with the Criminal Justice Systems Improvement project and the Willamette Criminal Justice Council. HOPE's research, data, and community feedback fully support the pursuit of a Crisis Response Team to divert calls from law enforcement and provide team partnerships with law enforcement when an officer is necessary.

VIII. Funding recommendations:

- Explore **state, federal, and private funding** to expand organizational capacity to work on these topics and to fund the emergency shelter with areas for resource providers. Examples include Community Development Block Grant, Medicaid 1115 waiver funding for housing case managers, SAMHSA funding for transitional housing, Transient Lodging Tax funding, and private foundations such as Meyer Memorial Trust, Oregon Community Foundation, McKenzie River Gathering and Benton Community Foundation.
- **Grant writing capacity** at the city/county is needed to access extensive additional funds that are available but are not being applied for.

IX. Legislative Advocacy:

- We need statewide leadership on local requirements for available beds in each county with accompanying state funding to support those required beds. This state requirement and funding is needed to address the migration of people to areas with services from areas with no services.
- State and federal funding for these issues must be advocated for by city and county elected officials and by the League of Cities and Association of Counties.

Feedback on Topic 2 Recommendations:

- I. Emergency Shelter and Services Location
- II. Resource Center
- III. Invest in building organizational capacity
- IV. Prioritize investment based on public feedback
- V. Staffing: full-time case managers
- VI. Paid, full-time staff are needed to work on, coordinate, and implement these recommendations on homelessness.
- VII. A Crisis Response Team
- VIII. Funding recommendations
- IX. Legislative Advocacy

HOPE Topic 3 Draft Policy

Recommendations:

Transitional options for stability,
safety, and health

Overarching goal: end homelessness for more people by increasing transitional housing programs that successfully transition people out of homelessness and into stable homes to address individual and community safety for all.

Definition: transitional housing is a stable environment for someone to live for a period of time with supportive services to work on stability and transitioning to a permanent living situation.

Topic 3 Recommendations on Transitional Options:

- I. Invest in building organizational capacity
- II. Accountability with Public Funding
- III. Prioritize investment based on public feedback and cost-effective allocation
- IV. Tent camping is the least supported transitional option
- V. Staffing: full-time case managers to support people transitioning out of homelessness.
- VI. Paid, full-time staff are needed to work on, coordinate, and implement solutions to homelessness.
- VII. Funding recommendations
- VIII. Code Language and Zoning
- IX. Referral pathway for sex offender population
- X. Communication, Notice, and Community Involvement
- XI. Legislative Advocacy

Recommendations to achieve the goal of stabilizing people and transitioning them out of homelessness:

I. Invest in building capacity:

- Invest in building capacity at organizations that support and successfully transition people out of homelessness. If no local organizations wish to build and grow organizational capacity, recruit an organization to Benton County who can provide these services.
 - Suggestions: expand the capacity of organizations that are successfully stabilizing people by adding micro shelters at their locations. For example, COI, CHF, and SafePlace have successful models of housing case management to transition people out of homelessness. Increase their capacity with funding for positions and micro shelters at available locations.
 - Capacity must be built for organizations to serve Benton County residents in transitional housing outside of Corvallis.

II. Accountability with public funding:

City/county work with providers to develop metrics for successful transition out of homelessness and into housing. Use these metrics to evaluate investment in organizations who successfully transition people out of homelessness. Development of accountability metrics shall be done with an open and transparent process.

III. Prioritize investment based on public feedback and cost-effective allocations of limited public resources

The community supports the following transitional options (beyond just normal brick-and-mortar housing) in the following descending order:

- Micro shelters
- Emergency shelter
- RV/car camping
- Tent camping.

IV. Tent camping is the least supported transitional option from the public feedback due to concerns of fire, individual safety, community safety, litter, noise, and visibility

We recognize that tent camping is illegal, and realistically it is also currently happening. To transition people out of tent camping, we recommend that any transitional tent camping locations have time limits for every individual camper with evaluation of that person's progress towards securing permanent housing on a case-by-case basis. Case management to work on transitioning to stable housing must be provided for all persons at any transitional camping location.

- We recognize there are individuals who will not engage in case management to transition out of homelessness.
- Crisis respite is needed for those who are unable to engage due to behavioral health conditions.
- Criminal justice systems improvement is needed to add jail capacity for those who pose a threat to community safety.
- For those who refuse to work on transitioning out of homelessness and do not belong in crisis respite or jail, tent camping remains illegal and will not be tolerated once it is possible to enforce illegal tent camping given the public health situation with COVID and access to vaccination for individuals experiencing homelessness.

V. Paid, full-time staff are needed as case managers to support people transitioning out of homelessness.

New case managers should have commensurate experience and background that reflects the people they are serving from a cultural perspective and based on lived-experience.

- County: work with IHN-CCO and Samaritan on workforce capacity for housing case managers, peer support specialists, and social service providers to utilize funding from Medicaid and SAMHSA block grant resources.
- Rural areas outside of Corvallis need additional mobile/regional staff to support people's housing needs and transition out of homelessness.

VI. Paid, full-time staff are needed to work on, coordinate, and implement solutions to homelessness, like transitional options.

No new solutions can be successfully implemented without new staff whose job it is to work on the topic of homelessness and poverty. The HOPE recommendations on increasing transitional options will need city/county organizational capacity (staff) whose job it is to work on solutions to homelessness and to implement them. No existing staff job descriptions include working on implementation of homelessness solutions.

- County staff working on solutions to the housing crisis and homelessness should develop a template, or a model “map,” to duplicate transitional programs outside of Corvallis to provide support to rural areas in the county.

VII. Funding recommendations:

Explore state, federal, and private funding to expand organizational capacity to work on these topics. Examples include:

- County adopt Construction Excise Tax (CET) and apply for Community Development Block Grant (CDBG)
- County use transient lodging tax (TLT).
- The Medicaid Insurance Intercommunity Health Network-Coordinated Care Organization (IHN-CCO) has delivery system transformation (DST) grants for care coordination. Medical home concept for the Hub Model of care coordination.
- Medicaid 1115 waiver funding for housing case managers
- SAMHSA funding for transitional housing
- Private foundations like Meyer Memorial and Benton Community Foundation
- Eugene/Lane County and Corvallis/Benton County can partner with OSU and UofO to advocate at the state legislature for local flexibility for excise taxes for university sporting events and on-campus sales. The tax revenue can go to subsidize 1) student housing for low-income students who may otherwise become homeless, and 2) affordable housing or homeless services for non-student population.

VIII. Code Language and Zoning:

City and County Community Development Departments need to work together to actively identify available land in the urban growth boundary to add to the land supply available for transitional housing and social services.

City/county evaluate non-traditional zoning and code solutions to respond to the need for more transitional options:

- For example, Opportunity Village in Eugene is a microshelter village for transitional housing. 30 microshelters are clustered on one acre.
<https://www.squareonevillages.org/opportunity>
- Accessory dwelling units should be made allowable and more easily achievable.
- RV and trailer living should be made allowable and more easily achievable.

IX. Establish a referral pathway from the County Sheriff's Office and Corvallis Police Department to CHANCE to coordinate housing resources for sex offenders.

X. Communication, Notice, and Community Involvement:

- Routine monthly updates from the HOPE Coordinator similar to the Corvallis Sustainability Coalition email updates. These updates should include news and reports about new services, new providers, decisions made on the topic of homelessness, how to get involved, etc.
- Quarterly public forum hosted by the HOPE Coordinator to answer community questions about recent updates and to provide dialogue and an opportunity to answer questions beyond the 10-minute comment period at each HOPE meeting.
- A notice requirement to neighborhoods and businesses with an opportunity for involvement for any new services or new transitional locations approved or funded by the city or county.
 - Notice can be modeled after city/county land development notice requirements for permits or zoning changes. Notice should also be provided in the routine monthly community-wide communication.
 - Organizations funded by the city or county or approved to provide social services or transitional housing must provide routine opportunities for two-way communication and a mechanism to provide feedback for neighbors and nearby businesses. Organizations will forward neighborhood feedback to city and county funders to evaluate future funding decisions and encourage resolving issues with neighbors.

XI. Legislative Advocacy:

State and federal funding for these issues must be advocated for by city and county elected officials and by the League of Cities and Association of Counties.

Feedback on Topic 3 Recommendations on Transitional Options:

- I. Invest in building organizational capacity
- II. Accountability with Public Funding
- III. Prioritize investment based on public feedback and cost-effective allocation
- IV. Tent camping is the least supported transitional option
- V. Staffing: full-time case managers to support people transitioning out of homelessness.
- VI. Paid, full-time staff are needed to work on, coordinate, and implement solutions to homelessness.
- VII. Funding recommendations
- VIII. Code Language and Zoning
- IX. Referral pathway for sex offender population
- X. Communication, Notice, and Community Involvement
- XI. Legislative Advocacy

HOPE Topic 4 Draft

Recommendations:

Permanent Supportive Housing (PSH)

These recommendations are grounded in the following:

- Data:
 - Our data shows we need 150-200 more units of PSH to support chronically homeless Benton County residents in stable housing.
 - Addressing the gaps in our system: Benton County data show a gap in PSH supply.
 - Prioritizing by vulnerable populations, safety for all, and racial and ethnic disparities based on where our data shows these factors exist.
- Prioritizing vulnerable populations and safety for all (individual safety and community safety), while actively working to reduce racial and ethnic disparities based on where our data shows these factors exist. Vulnerable populations include people with a behavioral health condition (mental health or substance use disorder), LGBTQ community, elderly, children, veterans, and individuals with disabilities.
- A systems-level approach: PSH is crucial to a successful system of housing and services to prevent re-entry into homelessness
- Public feedback: most quantitative public feedback shows support and strong support for PSH being supported by local resources. Qualitative feedback from listening sessions supports prioritizing and investing in PSH.

Overarching goal: end homelessness for more people by increasing the number of PSH units in Corvallis and in Benton County.

Definition: PSH includes three main components: affordable housing units, ongoing rental assistance/income in some form, and supportive services to help the person remain stable and housed.

Topic 4 Recommendations on Permanent Supportive Housing:

- I. Increase development or acquisition of affordable housing units for permanent supportive housing (PSH).
- II. Increase available rental/income assistance options
- VI. Increase supportive services to provide services to residents at more affordable housing locations.

I. Goal: increase development or acquisition of affordable housing units for permanent supportive housing (PSH).

- Encourage and incentivize inclusion of a certain percentage of PSH units in any housing project with financial incentives like waived/lowered system development charges.
- Require a certain percentage of housing units (homes, apartments, duplex/triplex/fourplex) to be PSH with additional funding streams.
 - Suggestions include Construction Excise Tax, Community Development Block Grant, and Transient Lodging Tax.
- Coordination with City and County Community Development Departments is necessary to support this work. The Corporation for Supportive Housing has technical assistance cohorts. City and County Community Development Departments can apply to be part of a cohort.
- Pursue PSH projects due to behavioral health responsibility. Utilize HOPE Coordinator staff position for community partner facilitation and coordination to support collaboration between organizations to expand PSH units. (DevNW, Commonwealth, Corvallis Housing First, county health staff)

I. Goal: increase development or acquisition of affordable housing units for permanent supportive housing (PSH) continued:

City/county evaluate non-traditional zoning and code solutions to respond to the need for more permanent living options:

- Permanent tiny home villages.
 - Emerald Village in Eugene has 22 permanent tiny homes on 1.1 acres:
<https://www.squareonevillages.org/emerald>
 - Peace village in development with 36 units on 1.7 acres:
<https://www.squareonevillages.org/peace>
- Accessory dwelling units should be made allowable and more easily achievable.
- RV and trailer living should be made allowable and more easily achievable.
- Motels for permanent living.

II. Goal: increase available rental/income assistance options

- Increasing the number of place-based vouchers in Benton County is a priority. Linn Benton Housing Authority (LBHA) needs to include place-based assistance in their annual plan to accomplish this goal. Work with LBHA to increase projects in rural parts of Benton County in support of more affordable PSH projects like the newest one in Lebanon.
- Establish a consistent resource to help people navigate the process to access social security and disability financial assistance. People with disabilities and elderly individuals are disproportionately represented in the homeless data. Programs like ASSIST and SOAR can be contracted with to expand the resources here to help people access disability and social security benefits.
- Establish a consistent resource to coordinate with Tribal Housing Authorities to provide referrals and connect Native American individuals with Tribal resources, such as housing vouchers, assistance, and support services.

III. Goal: increase supportive services to provide services to residents at more affordable housing locations.

- County BH facilitate the provision of more supportive services to PSH units that are not county-run by subcontracting with providers and using BCHD's position as a BH Center to leverage Medicaid funding for non-county staff to provide BH support, peer support, and counseling/medication assistance.
- County Alcohol and Drug resources can increase their in-the-field work to do diagnoses that will allow for more resources for case management following the 1115 waiver.
- County BH facilitate collaboration with IHN and Samaritan to provide more behavioral health support onsite at affordable housing units, for example health workers onsite at DevNW properties. IHN has to be a partner as they have care management resources. Look at their reimbursement model for case management for PSH via a county contract.

Feedback on Topic 4 Recommendations on Permanent Supportive Housing:

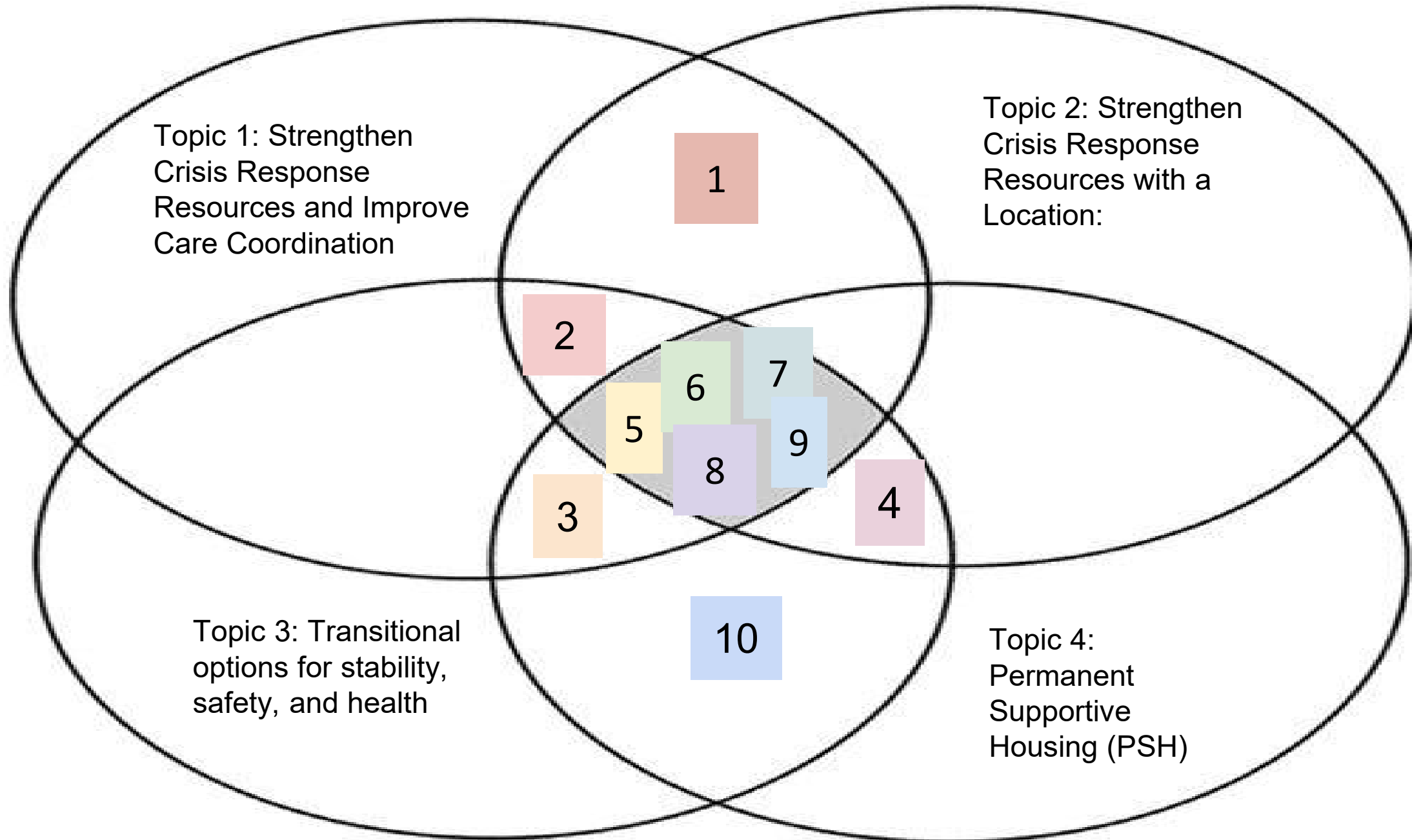
- I. Increase development or acquisition of affordable housing units for permanent supportive housing (PSH).
- II. Increase available rental/income assistance options
- VI. Increase supportive services to provide services to residents at more affordable housing locations.

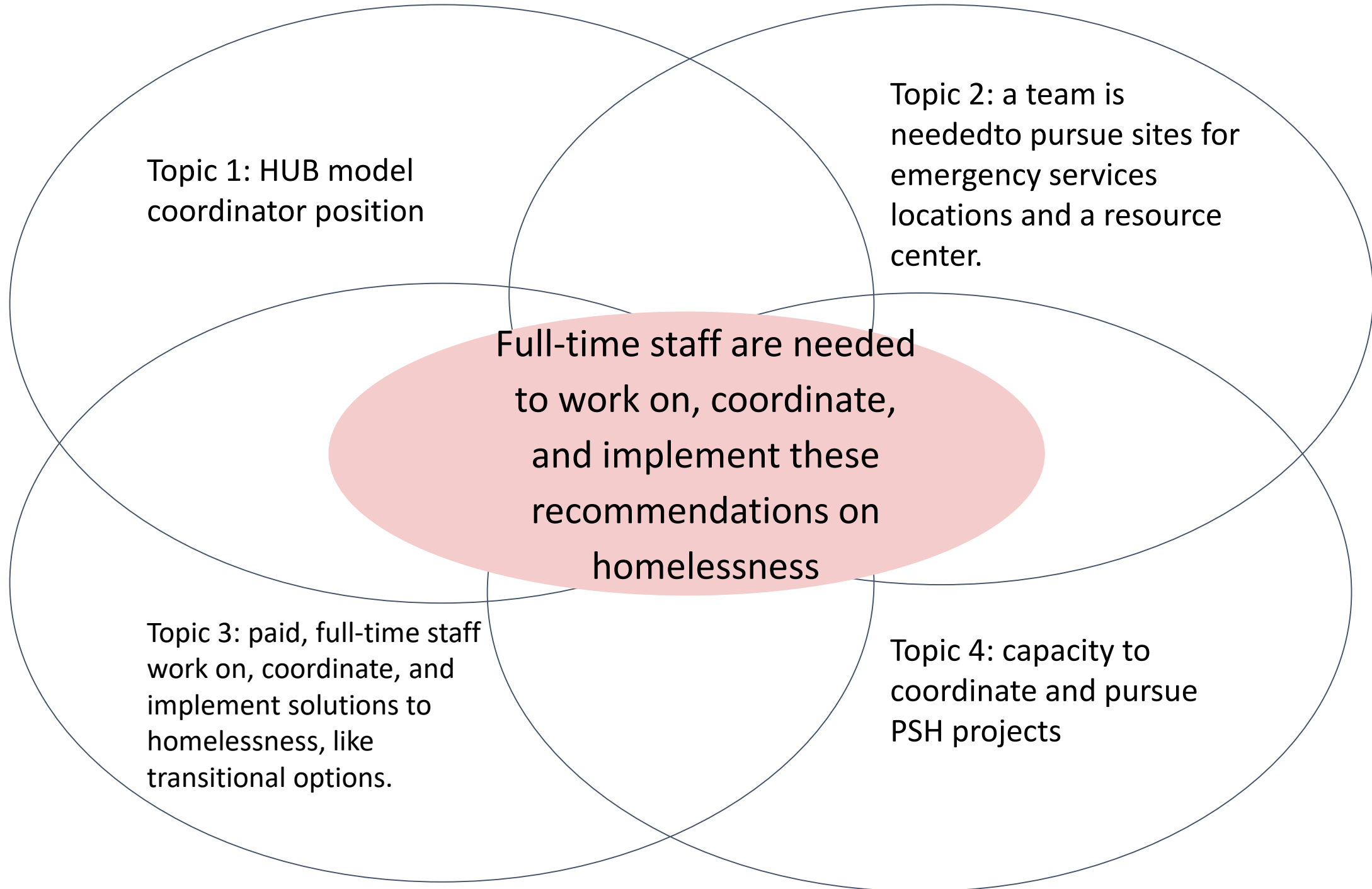
Diagrams showing the overlap between
HOPE policy recommendations

Recommendation	Topic 1	Topic 2	Topic 3	Topic 4
<p>1. Resource Center for service providers from multiple agencies close to emergency services (sleeping, hygiene, warming/cooling, and food)</p>	<p>Establish a physical location for the Hub: a one-stop location for multiple service providers to share some space to coordinate and provide immediate access for clients needing support from different providers/systems.</p>	<p>Resource Center: this Center should have space for providers from different organizations to meet with people, enroll them in programs, and work on transitioning out of homelessness.</p>		
<p>2. Institute a crisis response team</p>	<p>Yes</p>	<p>Yes</p>	<p>Yes</p>	
<p>3. HOPE coordinator position facilitate and coordinate efforts with community partners.</p>	<p>Data improvement coordination</p>			<p>PSH project development</p>
<p>4. Prioritize investment based on public feedback and cost effective allocations of limited public resources. The community supports the following options in descending order: 1) microshelters, 2) emergency shelter, 3) RV/car camping, 4) tent camping.</p>		<p>Yes</p>	<p>Yes</p>	

Recommendation	Topic 1	Topic 2	Topic 3	Topic 4
<p>5. Invest in building organizational capacity at organizations that support and successfully transition people out of homelessness. Support and collaborate with groups that have demonstrated efforts to provide emergency services in Benton County. If no local organizations wish to build and grow organizational capacity, recruit an organization to Benton County who can provide these services.</p>	Yes	Yes	Yes	Yes
<p>6. Paid, full-time staff are needed to work on, coordinate, and implement these recommendations on homelessness. Increase city/county organizational capacity (staff) whose job it is to work on solutions to homelessness and to implement them. No existing staff job descriptions include working on implementation of homelessness solutions.</p>	Yes: hub model coordinator	Yes: a team to pursue sites for emergency services locations is needed.	Yes: paid, full-time staff work on, coordinate, and implement solutions to homelessness, like transitional options. No new solutions can be successfully implemented without new staff whose job it is to work on the topic of homelessness and poverty.	Yes

<p>7. Paid, full-time staff are needed as case managers to support people transitioning out of homelessness. New case managers should have commensurate experience and background that reflects the people they are serving from a cultural perspective and based on lived-experience.</p>	<p>Yes</p>	<p>Yes</p>	<p>Yes</p>	<p>Yes</p>
<p>8. Funding Recommendations, Grant writing capacity</p>	<p>Yes</p>	<p>Yes</p>	<p>Yes</p>	<p>Yes</p>
<p>9. Legislative Advocacy for state leadership and funding</p>	<p>Yes</p>	<p>Yes</p>	<p>Yes</p>	<p>Yes</p>
<p>10. City and County Community Development Departments work together to actively add available land and units for housing options</p>			<p>City/county CD work together to actively identify available land in the urban growth boundary to add to the land supply available for transitional housing and social services. City/county evaluate non-traditional zoning and code solutions to respond to the need for more transitional options.</p>	<p>Increase development or acquisition of affordable housing units for PSH</p>





Topic 1: HUB model coordinator position

Topic 2: a team is needed to pursue sites for emergency services locations and a resource center.

Full-time staff are needed to work on, coordinate, and implement these recommendations on homelessness

Topic 3: paid, full-time staff work on, coordinate, and implement solutions to homelessness, like transitional options.

Topic 4: capacity to coordinate and pursue PSH projects

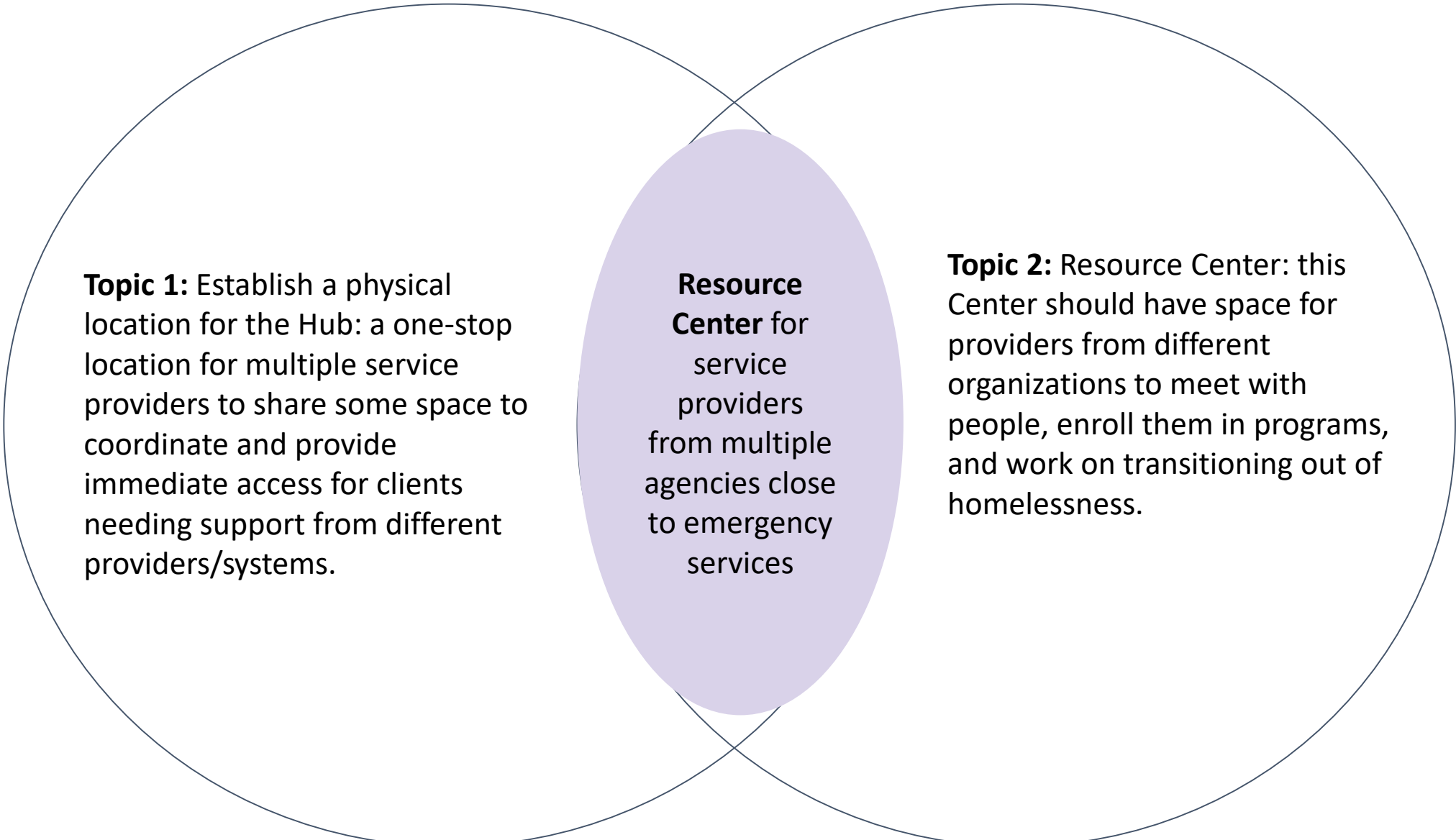
Topic 1: case managers as part of the HUB model

Topic 2: to provide onsite services to transition people out of homelessness once they have stabilized at this emergency location

Paid, full-time case managers to support people transitioning out of homelessness.

Topic 3: work with IHN-CCO and Samaritan on workforce capacity for housing case managers, peer support specialists, and social service providers

Topic 4: Case managers as part of permanent supportive housing



Topic 1: Establish a physical location for the Hub: a one-stop location for multiple service providers to share some space to coordinate and provide immediate access for clients needing support from different providers/systems.

Resource Center for service providers from multiple agencies close to emergency services

Topic 2: Resource Center: this Center should have space for providers from different organizations to meet with people, enroll them in programs, and work on transitioning out of homelessness.

Topic 3: actively identify available land in the urban growth boundary to add to the land supply available for transitional housing and social services.

**City and County
Community
Development
Departments
work together
to actively add
available land
and units for
housing
options**

Topic 4: Increase development or acquisition of affordable housing units for PSH

Next Steps

- Each Topic group meets in the first week of March to incorporate feedback from the full board
 - Create phased approaches/timelines for these recommendations
- March meeting: present the updated draft of the policy recommendations, vote to adopt them.
 - Executive Committee communicates the recommendations to the City and County elected officials.
 - City and County elected officials review and vote to adopt recommendations.



Home, Opportunity, Planning, and Equity (HOPE) Advisory Board Meeting Draft Minutes

February 24, 2021 from 4 pm to 6 pm
ZOOM Meeting



Members Present: Florence Anderson; Lennox Archer; *Xan Augerot (Commissioner, Benton County); Catherine Biscoe; Karyle Butcher; Bruce Butler; Bryan Cotter; Anita Earl; Joel Goodwin; George Grosch; Barbara Hanley; Aleita Hass-Holcombe; Nicole Hobbs; Christina Jancila* (Business Associate); Charles Maughan* (Corvallis City Council); Pegge McGuire* (CSC); Jim Moorefield* (Co-Chair); Andrea Myhre; Jan Napack* (Corvallis City Council); Reece Stotsenberg* (Co-Chair); Linda Tucker.

Absent: Bryan Cotter

Staff Present: Julie Arena (Benton County Health, HOPE Program Coordinator); Paula Felipe (Benton County Public Health, recorder); Suzanne Hoffman, Health Department Director

Guests: Joe Hahn
*Executive Committee Members.

- I. **Welcome and Introductions.** Reminder about agreements on culture and conduct. Review of timeline and agenda. This is the 12th meeting of the HOPE Advisory Committee.

- II. **Public Comments (limited to 2-3 minutes).**
 - **Maggie Cooper:** As a physical therapist and having been involved with HOPE in preliminary stages, I have an interest in homeless services. After last month's meeting I talked with patients about the COVID pandemic putting the board behind in its work, and the patients said they had to scramble to prepare for covid, so HOPE Advisory board could too. HOPE's Bylaws state an annual gaps analysis will be conducted. Reviewed last summer's minutes that brought up men's cold weather shelter and did not see any gaps analysis by HOPE. On Feb 8 a disabled man died near the car wash and he didn't like to go to camps because they were too loud, violent, and chaotic. A gaps analysis should have been performed. If HOPE is not yet ready to take on responsibilities as stated in the Bylaws, the rest of the city should be informed because you are apparently not ready.
 - **HOPE Coordinator Julie Arena** replied that she will email the gaps analysis to Maggie Cooper that work groups conducted over the summer in Corvallis and Benton county. There was an hour and a half presentation on the gaps analysis that looked at every service available and which served to inform the four priority topics. During the outbreak of the pandemic, many city and county employees including some board members were reassigned to work in the Emergency Operations Center, which did delay some of the HOPE's board work. **Catherine Biscoe** served on the gaps workgroup and added that she is aware of budget sensitivity issues and has heard concerns from other community members and recommends the board finds time in a special meeting to address those concerns. **Julie:** Policy recommendations from the workgroup on funding and ways to prioritize for success will be covered in this meeting.

III. **Approval of Minutes:** **MOTION** was made by George Grosch to approve the January 27, 2021 minutes as amended by Jan Napack's minor grammatical corrections; Aleita Hass-Holcombe seconded the motion. **MOTION** passed as amended.

IV. **Announcements/Community Updates:**

- **Project Turnkey** (Andrea Myhre): A Project the state copied from other states to purchase hotels during pandemic for shelter and later for permanent housing. \$50 million from State EOC. Corvallis Housing First will own a hotel (Budget Inn off Hwy 99/South town); waiting on closing. Outreach to south town community. Unity Shelter will open non-congregate shelter—24 units of housing by end of March and turn units into permanent supportive housing units. Email: budgetinnproject@corvallahousingfirst.org for more information on the motel project.
- **PIT Count** (Andrea Myhre): point in time count of homeless individuals yielded a final count of about 135 individuals counted as unsheltered not counting people in microshelters, emergency shelters, motel rooms; does include people in tenting and car, RVs. Did not cover the entire county. Rural Oregon Continuum Care suspended the requirement so does not require street count. Number same as last year; we think more people on street this year; about 20-30 refused. More info coming out in couple of months. Shawn: for most shelters in Homeless management info system in Oregon, use client service for unity shelter client data, count for PIT will be drawn from that.
- **Crisis response-Willamette criminal justice** (Xan): Government, Law Enforcement, Oregon State University and Samaritan are in this group who has met twice. Looking at data and mental health issues at hospital in Corvallis and in law enforcement data in the county. Next meeting on Monday. Behavioral Health's Director Dannielle Brown and OSU psychology services will present. Formed in response to OSU having own police department. Frame that conversation on what is vision of crisis response. It's a continuum-- crisis responses on street or in someone's home and how to integrate across law enforcement agencies and Behavioral health specialists. This will complement the hope advisory board work.
- **United Way** (Michelle Mayers) Good evening, I'm not on HOPE but I wanted to let you know that United Way of Linn Benton Lincoln is interested in purchasing a building and having it be a resource hub. This might be something to reach out to Blake about (if interested in researching it).

V. **Present the First Draft of Policy Recommendations from the Four Priority Topics based on Public Feedback, Prioritizing vulnerable Populations, Safety for all, Systems level approach, Research, and Data.**

- **TOPIC 1 DRAFT POLICY: Strengthening Crisis Response Resources and Improve Care Coordination.** **Overarching Goal:** End homelessness for more people by strengthening crisis response services and coordinating existing services to better address the needs of individuals in crisis in Corvallis and in Benton County as a whole. **Definition:** Crisis response services help people experiencing a crisis due to lack of housing or behavioral health by connecting them with all the services they need for stability. Aligning and coordinating existing resources is defined as bringing together, virtually and physically, existing providers to help individuals with all their needs in a coordinated way.

A. RECOMMENDATIONS for Topic 1 Improving Care Coordination:

1. Allocate local and state resources to programs that support these four goals:
 - Working with other providers to improve data collection/tracking and to reduce duplicative data entry and data management.
 - Working with other providers to create metrics for successful program goals to track which services are successful interventions in transitioning people out of homelessness.
 - Participating in a hub model of care coordination with multiple providers to stabilize individuals with complex needs with the ultimate goal of stable housing.
 - Co-locating service providers from multiple organizations to decrease the travel and number of different locations people must go to meet their needs. Having some shared space at one location does not mean that an organization entirely relocates their operation. It means that a representative from different organizations are co-located at a resource hub to coordinate care in one location. (Long-term goal)
2. Create a staff position for the Hub Model of care coordination
 - The Hub Model is a framework for doing business by coordinating existing partners. An “agency navigator” is a best practice to coordinate the Hub Model. This staff position should be full-time and could be a health navigator, case manager, community health worker, or program coordinator. This same staff position is needed to do an assessment of funding streams: do an assessment with input from city/county and providers of all available funding streams coming into Benton County that fund this work to try to blend funding streams.
 - Implementation: can be done immediately if an existing staff person is available, until an FTE can be budgeted for this role. It should be jointly supported by county, city, IHN, and Samaritan as it will coordinate all community partners for all-community benefit and cost savings.
 - Hub spokes needed at the table: BCHD, CDDC, Unity Shelter, COI, CARDV, Samaritan, IHN, JSYS when needed, DHS, case managers, CLU, Philomath Community Services, SBFP, Job training/vocational rehab, law enforcement/first responders, crisis response team members, SORT members, social security/disability advocacy, Older Adult Behavioral Health Initiative to do system-level coordination, CWCOG. Any other provider who can provide access to services for a person in need.
 - Geographic hub suggestion: the details and frequency can be decided by the Hub participants, but we suggest having routine monthly Hub meetings for Corvallis-centric clients, South Benton clients, and Philomath/West Benton clients.
3. Establish a physical location for a Resource Center: A one-stop location for multiple service providers to share some space to coordinate and provide immediate access for clients needing support from different providers/systems. (Long-term Implementation)
4. Institute a crisis response team
 - We recommend a non-police intervention for non-violent crisis situations which may be, in part, due to homelessness and behavioral health issues. Pursue the feasibility and implementation of a crisis response team.
 - We recognize that ongoing efforts are occurring with the Criminal Justice Systems Improvement project and the Willamette Criminal Justice Council. HOPE’s research, data, and community feedback fully support the pursuit of a Crisis Response Team to

divert calls from law enforcement and provide team partnerships with law enforcement when an officer is necessary.

5. HOPE coordinator position to facilitate and coordinate data improvement efforts with community partners.
 - o Data collection efforts will include a human services coalition model that is a statewide model: service providers come together to say what their priorities are and how they would implement them. Implementation can be immediate with existing staff person.

BOARD DISCUSSION ON TOPIC 1 DRAFT POLICY:

Karyle: Reference Paul Bilotta's note about location. Is there a backup plan in place if we don't find a place? Can we accomplish this without a specific piece of land?

Jan: Public library downtown is a hub in a way. Dashboard, remote sites, satellites could be connected virtually to access any number of places in city and county.

Xan: Look at short term; medium term; and long term: Great to have central service point for clientele—easiest for them. But short term is hub with a point person; and get people into system from anywhere, and find place where we can have an emergency shelter and food and services on one site—that is a long term 3-5 year prospect.

Jim: Not appropriate to reference staff positions/job descriptions; Julie has done a fantastic job; our job to focus on policy and not job descriptions. County administrators want to understand the policy recommendations not how staffing is structured; lots of ways to structure staff; don't want to raise that issue. To attach a responsibility to a person is operations not policy decision. Leave that to city and county if new FTE or existing FTE is needed.

Lennox: Seems normal that policy results in a position.

Catherine: Have we defined Hub model center—what is ideal building structure—conceptually we might be thinking different things. Defining it will be helpful.

Nikki: Policy Makers might find it helpful to have specific recommendations related to staffing which includes diverse racial and ethnic backgrounds; we want to reflect our community.

George: If hub model is a system-that requires people and financial resources.

Barbara: With community pressure to move forward more quickly, we need to deal with issues quickly and believe we have infrastructure in place to address those needs. Implementation can be quicker with an existing staff person.

Joel: There is value in making the recommendation in somewhat broad sense; so there is some leeway, such as site locations. We don't need to say exactly how staffing like FTE should be implemented.

Xan: I interpreted the message from Paul Bilotta to mean that we should be as specific as possible. FTE are an element of that. Not identified to a specific person!

Lennox: I thought we were just giving a general description of the role, not a job description

Andrea: More chance we could get turned down if too specific; Give them an outcome and leeway to figure out. Also, worried about hub model as panacea to solve resource coordination problem; be more specific what population we are hoping to serve with hub model and who is doing the referrals.

Catherine: to clarify, a policy maker can take partial info. More info provides them more tools; let's paint a picture this is what we envision. We cut our policy makers short without the fine details.

Karyle: Tell them what you want and they'll figure out how to do it. I feel strongly about this current

recommendation and sounds like we don't agree. How do we work this out?

George: what is desired outcome and what are we trying to accomplish? What components are necessary in policy recommendation?

Xan: Goal is hub model.

Jan: And make sure we have an improvement process.

TOPIC 2 DRAFT POLICY: Strengthen Crisis Response Resources with a 24/7 Location for emergency sheltering. Definition: a safe place to be 24/7/365 for all populations without housing that respects and addresses the needs of each individual and conducts an initial assessment to enter the client's data into a data system.

- **Overarching goal:** end homelessness for more people by strengthening crisis response services and coordinating existing services to better address the needs of individuals in crisis in Corvallis and in Benton County. Getting to "functional zero" homelessness means we have a system that can address people's needs in crisis and transition them to stable and permanent living situations. **Definition:** crisis response services help people experiencing a crisis due to lack of housing. Part of the continuum of crisis services is a safe location open 24/7/365 where people can be that respects their individual needs and has services to meet those needs. The crisis response services must include an assessment of need and connecting people to appropriate services while staying at the emergency shelter.

A. RECOMMENDATIONS: An Emergency Services Location is needed that has two components: 1) resource center with providers, and 2) emergency shelter options onsite, adjacent, or within short walking distance of the resource center

1. Emergency Shelter Location

- ✓ Congregate and non-congregate shelter: needs separate congregate areas for men and women and also significant non-congregate capacity for people who cannot be in men/women dorms: non-binary and trans individuals, couples, people who cannot be in congregate settings due to medical fragility or behavioral health disorders (PTSD, other mental illness), and family members.
- ✓ We also recommend having some micro shelters onsite to provide some non-congregate capacity for emergency sheltering based on the public feedback supporting micro shelters.
- ✓ Individuals are assigned a bed space that is theirs 24/7 while they work with a case manager on transition. (The women's shelter has a successful model of congregate beds and micro shelters with daytime indoor living space and a case manager onsite to work on transition.)
- ✓ This emergency shelter is low barrier upon arrival to get individuals off the street. Options are available for individual involvement to support the location while they work on transitioning, such as doing laundry, cleaning, or helping to provide food.
- ✓ Emergency shelter is temporary and has time limits based on availability of the next transitional option in our community. The duration of a person's stay will vary based on their needs, their progress with a case manager, and availability of an appropriate transitional or permanent option
- ✓ **If an emergency tent camping area is allowed, it is in an area that is managed, limited in number based on staffing capacity to provide case management, and time-limited while the person waits for a transitional option.**
 - Allowing an area for tent camping will address the safety concerns of unmanaged camping and allow for enforcement of illegal tent camping elsewhere.

- **Tent camping is the least supported by the public feedback** due to concerns of fire, individual safety, community safety, litter, noise, and visibility. To transition people out of tent camping, we recommend that any emergency tent camping have time limits for every individual camper with evaluation of that person's progress towards securing transitional or permanent housing on a case-by-case basis. Case management to work on transitioning to stable housing must be provided for all persons.
- We recognize there are individuals who will not engage in case management to transition out of homelessness. Crisis respite is needed for those who are unable to engage due to behavioral health conditions. Criminal justice systems improvement is needed to add jail capacity for those who pose a safety concern to the community. For those who refuse to work on transitioning out of homelessness and do not belong in crisis respite or jail, tent camping remains illegal and will not be tolerated once it is possible to enforce illegal tent camping given the public health situation with COVID and access to vaccination for individuals experiencing homelessness.
- ✓ A limited overflow area for people who show up with a tent or car/RV. Tent and car/RV camping is time limited, and the individual must engage to transition to another option.
- ✓ Area for warming/cooling from the elements. This place is where someone can be 24/7 who is experiencing homelessness to minimize the need to go to multiple locations throughout the day to stay warm or get cool. The warming/cooling areas are accessible to individuals not staying at the emergency shelter location.
- ✓ Necessary amenities: showers, bathrooms, drinking water, food provided on-site (to minimize need to travel to multiple locations for food), laundry, wifi, lockers for items for those in congregate shelter, mail service. These hygiene and food services are accessible to individuals not staying at the emergency shelter location.
- ✓ Necessary components to the overall location: walking and biking access, public transportation access, and safety.
- ✓ Safety concerns for everyone involved need to be addressed. Security, lighting, fire code, and immediate access for emergency personnel must be considered.

2. Resource Center

- ✓ Resource Center should have space for providers from different organizations to meet with people, enroll them in programs, and work on transitioning out of homelessness.
 - ❖ Office space for service providers like BCHD health navigators to enroll people in OHP, housing case managers to work on transitioning people out of homelessness, assistance with vital records (drivers license, social security card, etc.), assistance with applying for and accessing disability and social security income, job assistance, etc.

3. Invest in Building Organizational Capacity

- ✓ **Invest in building capacity** at organizations that can run this emergency shelter location. Invest in building organizational capacity by supporting and collaborating with groups that have demonstrated efforts to provide emergency services in Benton County. If no local organizations wish to build and grow organizational capacity, recruit an organization to Benton County who can provide these services.
 - ❖ Suggestions: expand the capacity of organizations that successfully are stabilizing people by adding micro shelters at their locations. For example, Community

Outreach Inc. (COI), Corvallis Housing First (CHF), and SafePlace have successful models of housing case management to transition people out of homelessness. Increase their capacity with funding for positions and micro shelters at available locations. Organizational capacity goes beyond hiring more case managers and includes building HR, IT, and Finance & Development.

- ❖ Section VIII includes funding recommendations.

4. Prioritize Investment based on Public Feedback: The community supports the following options in descending order:

- ✓ **Micro shelters,**
- ✓ **Emergency shelter,**
- ✓ **RV/car camping,**
- ✓ **Tent camping.**

5. Staffing: Full-Time Case Managers to provide onsite services to transition people out of homelessness once they have stabilized at this emergency location. Case managers should have commensurate experience and background that reflects the people they are serving from a cultural perspective and based on lived-experience.

- ✓ County: work with IHN-CCO and Samaritan on workforce capacity for housing case managers, peer support specialists, and social service providers to utilize funding from Medicaid and SAMHSA block grant resources.
- ✓ Work with OSU, PSU School of Social Work, and LBCC on expanding internship workforce capacity from students.

6. Paid, Full-Time staff are needed to work on, coordinate, and implement these recommendations on homelessness.

- ✓ No new solutions can be successfully implemented without new city/county staff whose job it is to work on the topic of homelessness and poverty.
- ✓ A team to pursue sites for emergency services locations is needed. The type of work that DLR has done for the Criminal Justice Systems Improvement Project is needed to research sites, zoning, and other parameters to provide site-specific options for city/county leadership to make informed choices.
- ✓ Organizational capacity needs to be built at the city/county to facilitate system-wide coordination along the housing continuum, leverage funding, and collect performance data for continual systems improvement. (in addition to organizational capacity being built for social service organizations to provide the services.) Funding recommendations are below in Section VIII.

7. A Crisis Response Team is needed for many reasons, and one function is to support individuals in relocating to emergency shelter. We recommend a non-police intervention for non-violent crisis situations which may be, in part, due to homelessness and behavioral health issues. Pursue the feasibility and implementation of a crisis response team.

- ✓ We recognize that ongoing efforts are occurring with the Criminal Justice Systems Improvement project and the Willamette Criminal Justice Council. HOPE's research, data, and community feedback fully support the pursuit of a Crisis Response Team to divert calls from law enforcement and provide team partnerships with law enforcement when an officer is necessary.

8. Funding Recommendations:

- ✓ Explore state, federal, and private funding to expand organizational capacity to work on these topics and to fund the emergency shelter with areas for resource providers. Examples include Community Development Block Grant, Medicaid 1115 waiver funding for housing case managers, SAMHSA funding for transitional housing, Transient Lodging Tax funding, and private foundations such as Meyer Memorial Trust, Oregon Community Foundation, McKenzie River Gathering and Benton Community Foundation.
- ✓ Grant writing capacity at the city/county is needed to access extensive additional funds that are available but are not being applied for.

9. Legislative Advocacy:

- ✓ We need statewide leadership on local requirements for available beds in each county with accompanying state funding to support those required beds. This state requirement and funding is needed to address the migration of people to areas with services from areas with no services.
- ✓ State and federal funding for these issues must be advocated for by city and county elected officials and by the League of Cities and Association of Counties.

BOARD DISCUSSION ON TOPIC 2 DRAFT POLICY:

Jim: section on funding awkward and not saying anything new. Should county should develop new funding sources like construction excise tax. One technical thing: block grant state of Oregon limits ways those funds can be used; questionable if we can use for our purposes. Not recommending something new except the excise tax.

Xan: staff capacity needed to handle federal funds; might be useful to have display of current funding streams and their purpose. Some dollars flexible but others cannot; limited and proscribed functions. Help to maximum leverage between one funding stream and another.

Jan: might have untapped reservoirs in private sector; if we knew what we have now versus what we could or should have; might be matching funds...good path to go down.

Barbara: regarding emergency shelter, we had discussions on how do we make recommendation for addressing persons not able to engage in crisis response due to behavioral health status; how are we to handle it? Julie: This is part of work Xan is doing with Willamette criminal justice council and improvement project need for crisis respite.

Karyle: read Paul Bilotta's note; issues he has raised and represents city to a degree.

Christina: on grant writing capacity; other private money; would like that explored. Find creative and innovative ways--that is already part of funding recommendations.

Jim: There are foundations monies coming into Corvallis now; but not necessarily for purposes we are talking about. Organizations giving funds already to address a related need. Gives a wrong message to give impression foundations are not contributing now.

Andrea: I also agree that the services center idea is much more doable if the focus is on providing space for providers, possibly providing shelter beds and transitional housing. I think a campus idea is not going to work given the land limitations we have.

Xan: list funding sources possible and this is an educational document too; what likely pieces to fund; encourage collaboration and coordination among providers to address the priority areas when we go to the providers.

George: define the decision space that elected leaders have; multiple streams of funding exist; they can look at this and redefine how to target resources.

TOPIC 3 DRAFT POLICY: Transitional options for stability, safety, and health

Overarching goal: end homelessness for more people by increasing transitional housing programs that successfully transition people out of homelessness and into stable homes to address individual and community safety for all. **Definition:** transitional housing is a stable environment for someone to live for a period of time with supportive services to work on stability and transitioning to a permanent living situation.

A. RECOMMENDATIONS to achieve the goal of stabilizing people and transitioning them out of homelessness

1. Invest in building capacity at organizations that support and successfully transition people out of homelessness. If no local organizations wish to build and grow organizational capacity, recruit an organization to Benton County who can provide these services.

- ✓ Suggestions: expand the capacity of organizations that are successfully stabilizing people by adding micro shelters at their locations. For example, COI, CHF, and SafePlace have successful models of housing case management to transition people out of homelessness. Increase their capacity with funding for positions and micro shelters at available locations.
- ✓ Capacity must be built for organizations to serve Benton County residents in transitional housing outside of Corvallis.

2. Accountability with public funding

- ✓ City/county work with providers to develop metrics for successful transition out of homelessness and into housing. Use these metrics to evaluate investment in organizations who successfully transition people out of homelessness. Development of accountability metrics shall be done with an open and transparent process.

3. Prioritize investment based on public feedback and cost-effective allocations of limited public resources

- ✓ The community supports the following transitional options (beyond just normal brick-and-mortar housing) in the following descending order:
 - ❖ Micro shelters
 - ❖ Emergency shelter
 - ❖ RV/car camping
 - ❖ Tent camping.

4. To transition people out of tent camping, we recommend that, if they are implemented, any transitional tent camping locations have time limits for every individual camper with evaluation of that person's progress towards securing permanent housing on a case-by-case basis. Case management to work on transitioning to stable housing must be provided for all persons at any transitional camping location.

- We recognize there are individuals who will not engage in case management to transition out of homelessness.
- Crisis respite is needed for those who are unable to engage due to behavioral health conditions.
- Criminal justice systems improvement is needed to add jail capacity for those who pose a threat to community safety.

- For those who refuse to work on transitioning out of homelessness and do not belong in crisis respite or jail, tent camping remains illegal and will not be tolerated once it is possible to enforce illegal tent camping given the public health situation with COVID and access to vaccination for individuals experiencing homelessness.

5. Paid, full-time staff are needed as case managers to support people transitioning out of homelessness

- ✓ New case managers should have commensurate experience and background that reflects the people they are serving from a cultural perspective and based on lived-experience.
 - ❖ County: work with IHN-CCO and Samaritan on workforce capacity for housing case managers, peer support specialists, and social service providers to utilize funding from Medicaid and SAMHSA block grant resources.
 - ❖ Rural areas outside of Corvallis need additional mobile/regional staff to support people’s housing needs and transition out of homelessness.

6. Paid, full-time staff are needed to work on, coordinate, and implement solutions to homelessness, like transitional options

- ✓ No new solutions can be successfully implemented without new staff whose job it is to work on the topic of homelessness and poverty. The HOPE recommendations on increasing transitional options will need city/county organizational capacity (staff) whose job it is to work on solutions to homelessness and to implement them. No existing staff job descriptions include working on implementation of homelessness solutions.
 - ❖ County staff working on solutions to the housing crisis and homelessness should develop a template, or a model “map,” to duplicate transitional programs outside of Corvallis to provide support to rural areas in the county.

7. Funding recommendation

- ✓ Explore state, federal, and private funding to expand organizational capacity to work on these topics. Examples include Community Development Block Grant, Medicaid 1115 waiver funding for housing case managers, SAMHSA funding for transitional housing, Transient Lodging Tax funding, and private foundations like Meyer Memorial and Benton Community Foundation.

8. Code Language and Zoning

- ✓ City and County Community Development Departments need to work together to actively identify available land in the urban growth boundary to add to the land supply available for transitional housing and social services. City/county evaluate non-traditional zoning and code solutions to respond to the need for more transitional options

9. Establish a referral pathway from Benton County Parole & Probation to CHANCE to coordinate housing resources for sex offenders.

10. Communication, Notice, and Community Involvement:

- ✓ Routine monthly updates from the HOPE Coordinator similar to the Corvallis Sustainability Coalition email updates. These updates should include news and reports about new services, new providers, decisions made on the topic of homelessness, how to get involved, etc.

- ✓ Quarterly public forum hosted by the HOPE Coordinator to answer community questions about recent updates and to provide dialogue and an opportunity to answer questions beyond the 10-minute comment period at each HOPE meeting.
- ✓ A notice requirement to neighborhoods and businesses with an opportunity for involvement for any new services or new transitional locations approved or funded by the city or county.
 - ❖ Notice can be modeled after city/county land development notice requirements for permits or zoning changes. Notice should also be provided in the routine monthly community-wide communication.
 - ❖ Organizations funded by the city or county or approved to provide social services or transitional housing must provide routine opportunities for two-way communication and a mechanism to provide feedback for neighbors and nearby businesses. Organizations will forward neighborhood feedback to city and county funders to evaluate future funding decisions and encourage resolving issues with neighbors.

11. Legislative Advocacy: State and federal funding for these issues must be advocated for by city and county elected officials and by the League of Cities and Association of Counties.

BOARD DISCUSSION ON TOPIC 3 DRAFT POLICY:

Jim: Referral pathways for sex offenders could be clarified and could it be expanded to include felons? Some barriers for sex offenders apply to other felony convictions. Xan: now parole and probation provide some short term housing for folks coming out of prison or local jail. When no longer in supportive housing situation or evicted or unable to pay and no longer justice involved, then not eligible for services that we provide; we need to figure that out; most likely to camp in parks.

Catherine: on communication slide: make sure we are open to our populations whether business or 2 way conversation.

TOPIC 4 DRAFT POLICY: Permanent Supportive Housing (PSH) Overarching goal: end homelessness for more people by increasing the number of PSH units in Corvallis and in Benton County. **Definition:** PSH includes three main components: affordable housing units, ongoing rental assistance/income in some form, and supportive services to help the person remain stable and housed.

A. RECOMMENDATIONS:

1. Goal: increase development or acquisition of affordable housing units for permanent supportive housing (PSH).

Specific Recommendations

- ✓ Encourage and incentivize inclusion of a certain percentage of PSH units in any housing project with financial incentives like waived/lowered system development charges.
- ✓ Require a certain percentage of units to be PSH with additional funding streams.
 - ❖ Suggestions include Construction Excise Tax, Community Development Block Grant, and Transient Lodging Tax.
- ✓ Coordination with City and County Community Development Departments is necessary to support this work. The Corporation for Supportive Housing has technical assistance cohorts.

- City and County Community Development Departments can apply to be part of a cohort.
- ✓ Pursue PSH projects due to behavioral health responsibility. Utilize HOPE Coordinator staff position for community partner facilitation and coordination to support collaboration between organizations to expand PSH units. (DevNW, Commonwealth, Corvallis Housing First, county health staff)

2. Goal: increase available rental/income assistance options

- ✓ Increasing the number of place-based vouchers in Benton County is a priority. Linn Benton Housing Authority (LBHA) needs to include place-based assistance in their annual plan to accomplish this goal. Work with LBHA to increase projects in rural parts of Benton County in support of more affordable PSH projects like the newest one in Lebanon.
- ✓ Establish a consistent resource to help people navigate the process to access social security and disability financial assistance. People with disabilities and elderly individuals are disproportionately represented in the homeless data. Programs like ASSIST and SOAR can be contracted with to expand the resources here to help people access disability and social security benefits.
- ✓ Establish a consistent resource to coordinate with Tribal Housing Authorities to provide referrals and connect Native American individuals with Tribal resources, such as housing vouchers, assistance, and support services.

3. Goal: increase supportive services to provide services to residents at more affordable housing locations.

- ✓ County BH facilitate the provision of more supportive services to PSH units that are not county-run by subcontracting with providers and using BCHD's position as a BH Center to leverage Medicaid funding for non-county staff to provide BH support, peer support, and counseling/medication assistance.
 - ❖ County Alcohol and Drug resources can increase their in-the-field work to do diagnoses that will allow for more resources for case management following the 1115 waiver.
- ✓ County BH facilitate collaboration with IHN and Samaritan to provide more behavioral health support onsite at affordable housing units, for example health workers onsite at DevNW properties. IHN has to be a partner as they have care management resources. Look at their reimbursement model for case management for PSH via a county contract.

BOARD DISCUSSION ON TOPIC 4 DRAFT POLICY:

Flip: about vouchers, what about landlords? Make an appeal or case for landlords to accept vouchers. With empty apartments can we consider education for landlords to see value of consistent income?

Jim: years ago, Oregon legislator made discrimination on section 8 vouchers illegal; landlords can't refuse section 8 vouchers to pay rent. If market rents are higher than HUD will pay for; landlord is not required to accept a lower rent; so may not be useable if rent is so high.

Xan: Part of the Housing Authority challenge is the federal formula for capping the amount of rental assistance per voucher. Corvallis is lumped with much of Linn County, which makes the rental reimbursement rate too low for the Corvallis-Philomath market. This is a federal lobbying issue.

Barbara: connect to topic 3 with crisis respite needed for people with behavior health status and unable to engage. Possible to coordinate with state mental health and permanent supportive housing for those who fall outside of ability to engage with services provided, so they can transition

into permanent supportive housing? Move toward state supported permanent housing?

Andrea: Some group homes for those coming out of state hospital or with severe mental illness; becoming more aware of those places where people can go. We may not be able to provide the level of care like a group home that is staffed 24/7. Xan: State hospitals are full; Counties delegated the responsibility with local mental health authority to address the needs of vulnerable people, but funding is not commensurate with the task. Trying to build crisis respite into the system; Legislative proposals to address capacity issue.

Joel: Legal ramifications if someone has mental health issues to place them somewhere unless of their own will. If immediate danger, law enforcement can take action; directors and 2 physicians can sign—it is a high threshold—we may identify mental health issues but unless willing to engage in services; we don't have ability if not meet the high threshold. Joel will give talk on limits and responsibilities and Dannielle will talk on county's role on this topic.

Jan: How to build equity into plans we are making?

Catherine: Barriers: no references; no job; no income for rent; no resume; cost; homelessness; insecure environment; what are baseline needs and how case management can help in those areas and give options to help establish secure environment. With new development, can we implement a percentage that needs to be affordable housing--making it practical and realistic?

VI. Next Steps

Julie and Isna diagramed the overlap to cut down time at next month's meeting. Some areas show different groups recommended the same things. At next month's meeting, diagrams will be shared. Work groups will meet again to incorporate feedback on all recommendations and then share an updated draft at the March 24th meeting.

VII. Meeting was adjourned at 6:30 pm.

Benton County & City of Corvallis
Home, Opportunity, Planning, & Equity (HOPE) Advisory Board



Julie Arena, HOPE Program Coordinator
Benton County Health Department
4077 SW Research Way
Corvallis, OR 97339

541-766-0252 * Email: Julie.Arena@co.benton.or.us

HOPE MEETING AGENDA

March 24, 2021 from 4-6 PM

Meeting location: Zoom or phone in

Join Zoom Meeting: <https://cscteam.zoom.us/j/91929383646>
One tap mobile: +12532158782,,91929383646#
Dial by phone: +1 253 215 8782
Meeting ID: 919 2938 3646

AGENDA

- I. Welcome, Zoom Housekeeping, Overview of Agenda.....4pm
- II. Public Comment* (10 minutes)4:05pm
- III. Roll call and approve February meeting minutes4:15pm
- IV. Update on Board Training on Diversity, Equity, and Inclusion4:20pm
- V. Present the second draft of policy recommendations from the four Priority Topics based on public input, research, and data4:25pm
- VI. Community Updates and Next Steps5:55pm

*Public Comment: if you would like to make a public comment, please “raise your hand” in the Zoom meeting when you arrive or you can chat a message to the presenter. List your name and the general topic of your comment in the chat. Comments will be made in the order that people “raise their hand” or submit a chat. For people calling in from a phone line, there will be an opportunity for comment for participants who have called-in.

HOPE Advisory Board Meeting

3/24/2021

Zoom Meeting hosted by Julie Arena, HOPE Coordinator

Zoom Housekeeping

- All attendees are muted when they join.
- All attendees can unmute themselves and choose to be seen visually by clicking “Start Video” at the bottom of the screen.
- Public comment:
 - Type your name into the “Chat” area, say you want to make a public comment, and on what topic.
 - Example: “Julie – public comment – crisis response.”
 - For those on the phone, there will be an opportunity to comment, too.
- Questions during the meeting:
 - Type into the “Chat” area and send it to host, Julie Arena.

Meeting Logistics and Agenda

- 1. Meeting Overview**
- 2. Agreements and Culture**
- 3. Public Comment on any topics for 10 minutes**
- 4. Logistics:**
 - a. Vote to Approve 2/24/20 Minutes – roll call**
 - b. Timeline for public engagement on final draft of recommendations**
- 5. Presentation of second draft of Policy Recommendations**
- 6. Community Updates**

Agreements for our culture + conduct:

Fun

Inclusive ✓✓

Humor

Food ✓

Action/roll up sleeves

Change the face of Homelessness

Honesty

Respect ✓

Consensus

Think before you speak

Cunoxity ✓

transparency

Recognize personal bias

Kindness ✓

time management

Concise communication

Open minded ✓

opinions matter

data driven

Do your homework!

patient

authentic

Valuing personal experience

dedication/work ethic
honor the expectations of
the work

Public comment: 10 minutes

- **Comment limited to 2-3 minutes based on number of people wanting to comment**
- **Type into the “Chat” and say you want to make a public comment and on what topic.**
- **For those on the phone, I will ask if there are any public comments from callers.**
- **Can also submit written comments via email to Julie.Arena@co.Benton.or.us**

Logistics: Vote to approve 2/24/20 minutes, roll call

Florence Anderson

Lennox Archer

Xan Augerot

Catherine Biscoe

Karyle Butcher

Bruce Butler

Bryan Cotter

Anita Earl

Joel Goodwin

George Grosch

Barbara Hanley

Aleita Hass-Holcombe

Nicole Hobbs

Christina Jancila

Charles Maughan

Pegge McGuire

Jim Moorefield

Andrea Myhre

Jan Napack

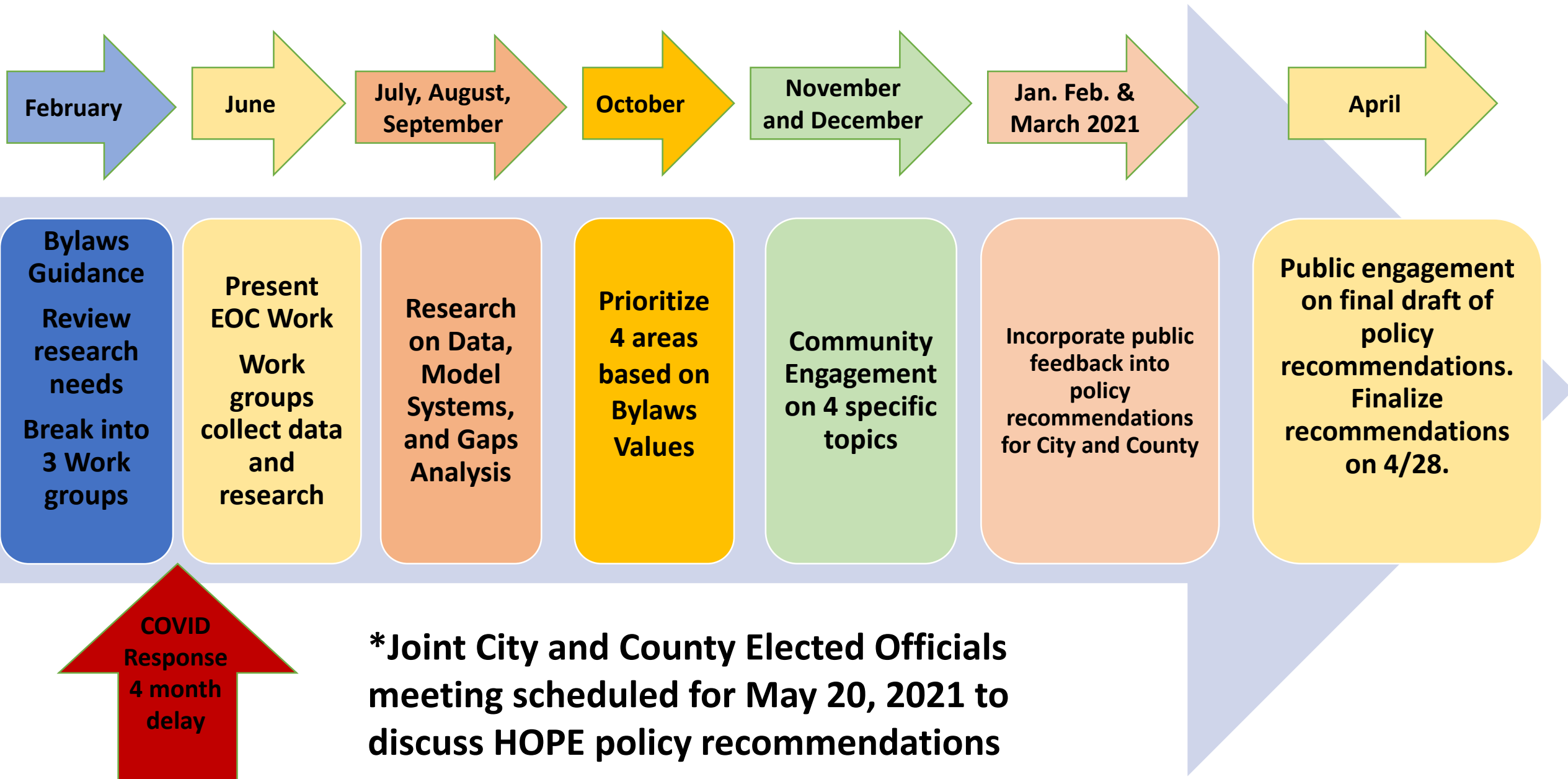
Reece Stotsenberg

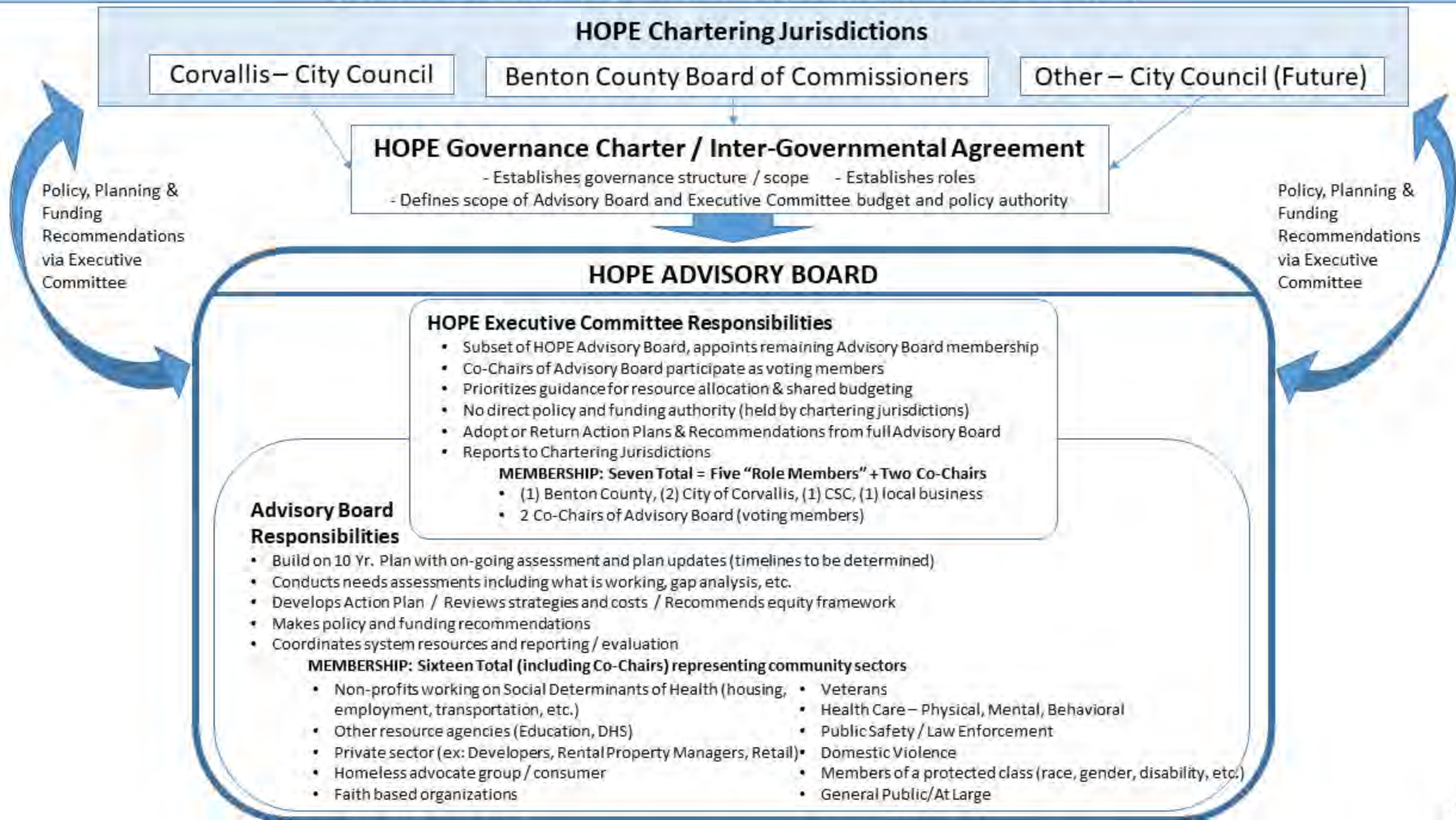
Linda Tucker

***Update on Board membership**

- **April Community Engagement –
timeline and purpose**
- **Today: focus on INTENT, not
wordsmithing**

HOPE Timeline – where are we now?





Priority Topic Areas

- Keep at the forefront diversity, equity, and inclusion recognizing identified disparities in our community data.
- HOPE Bylaws value: safety, vulnerable populations, and racial and ethnic justice.

1. Strengthen Crisis Response Resources: Align Services – Operational Changes for Improved Care Coordination:

- Coordination between existing providers with street outreach and Hub Model of care coordination. Increased case managers to support this care coordination from entry, transition, and permanent case management support to remain in housing.
 - Follow up case management and rental assistance to stay housed in whatever environment works for the individual.
- Data tracking coordinated between providers. Data collection coordinated between providers from entry, to transition, to permanent options.

2. Strengthen Crisis Response Resources: Location – Safe place to be 24/7 for all populations without housing that respects and addresses the needs of each individual.

3. Transitional Options for Safety, Health, and Stability

- Current providers are COI, Corvallis Housing First, and SafePlace.
- Additional examples include microshelters/conestoga huts, managed camping, RV and car camping in locations that are safe, sanitary, stable, and provide services for health.

4. Permanent Supportive Housing Units

- Definition: affordable, community-based housing for individuals and families who have experienced long-term or chronic homelessness and have been diagnosed as having a physical or developmental disability, a severe mental illness, substance abuse problems or HIV/AIDS; or are members of another designated group within the homeless population.
- Structures may include apartments, single-family houses, duplexes, group homes or single-room occupancy housing.
- Supportive services vary, most programs offer case management and housing support, but may also offer more intensive mental health, substance abuse, vocational, employment or other services which help promote independent living. Supportive services may be offered on-site or off-site, or be provided by a mobile service team. (LA County Taxonomy)

HOPE Priority Topics

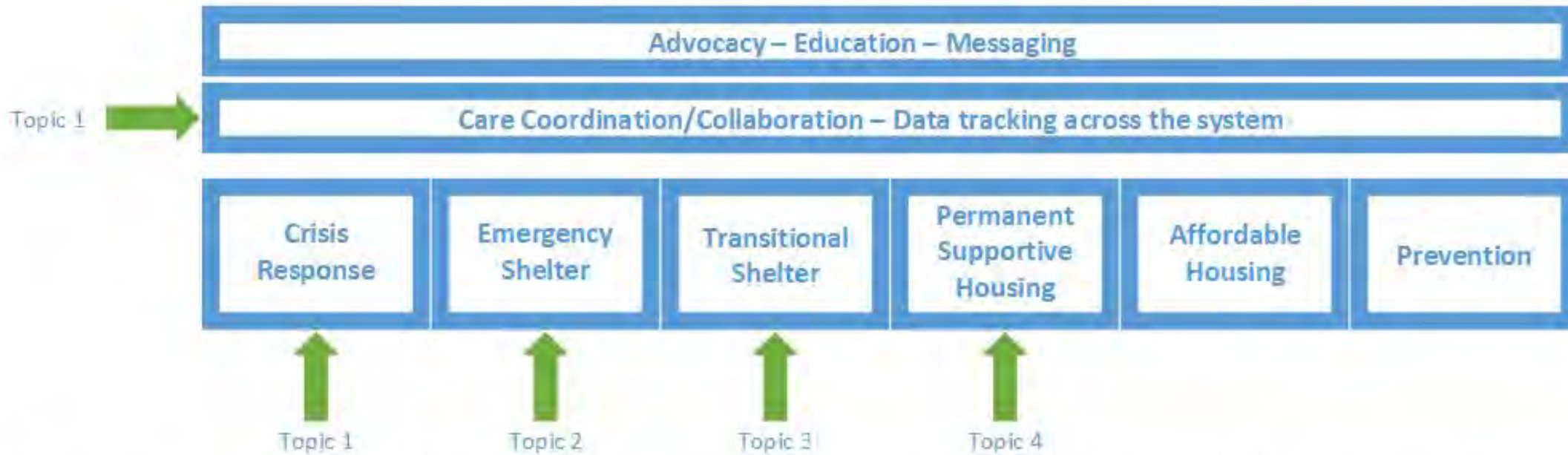
- How did we arrive at these four priority topics?
 - Data, research on model systems, analysis of the gaps in our system (summer 2020)
 - Prioritizing in October 2020 by where our data says we have the greatest:
 - Safety concerns
 - Racial and ethnic disparities
 - Vulnerable populations
- What can Benton County or the City of Corvallis do with policy recommendations on these topics?
 - Make code changes
 - Allocate funding from some limited funding streams (CET, CDBG, TLT)
 - Make decisions about staff time spent on certain topics
 - Make decisions to adopt and support policies
 - Adopt a near-consensus plan, that can be used to leverage additional state, federal and private dollars

Public Feedback Summary from November and December 2020:

- Online HOPE surveys
 - Topic 1 align services among providers: 177 responses (provider-only survey)
 - Topic 2 location for resources co-located with shelter: 367 responses
 - Topic 3 transitional options: 391 responses
 - Topic 4 permanent supportive housing: 470 responses
- Client surveys collected in person: 244 responses
- Qualitative feedback from community listening sessions and write-in responses to surveys
- Full public feedback presentation available [here](https://www.co.benton.or.us/sites/default/files/fileattachments/health_department/page/7203/hope_advisory_board_meeting_1_27_21_final.pdf) (https://www.co.benton.or.us/sites/default/files/fileattachments/health_department/page/7203/hope_advisory_board_meeting_1_27_21_final.pdf)

HOPE Policy Recommendations on First Four Priority Topics

HOPE Advisory Board Priority Topics – Systemic Vision



To Implement All of the Recommendations, the following three systemic changes are needed:

- Organizational capacity is needed to work on and implement these recommendations, and organizational capacity needs to be built within social service organizations to manage and provide the services.
- New Funding Sources
- Legislative Advocacy

These recommendations are grounded in the following:

- Data: our data shows we have gaps in our system of services for individuals in crisis due to homelessness. A gap is where there is a needed service or type of housing for people but that service/housing does not exist at all or does not exist for a certain population.
- Prioritizing vulnerable populations and safety for all (individual safety and community safety), while actively working to reduce racial and ethnic disparities based on where our data shows these factors exist. Vulnerable populations include people with a behavioral health condition (mental health or substance use disorder), LGBTQ community, elderly, children, veterans, and individuals with disabilities.
- A systems-level approach: all four of these topic areas are crucial to a successful system of housing and services to transition people out of homelessness and support them in remaining housed.
- Public feedback: the majority of quantitative and qualitative public feedback shows support for the following recommendations.

HOPE Topic 1 Draft Policy

Recommendations:

Strengthen Crisis Response
Resources and Improve Care
Coordination

1. Facilitate and coordinate data improvement efforts with community partners.

- Work with providers to improve data collection/tracking and to reduce duplicative data entry and data management. Data collection efforts will include a human services coalition model that is a statewide model: service providers come together to say what their priorities are and how they would implement them. Implementation is recommended immediately and could be accomplished with an existing staff person.

2. Work with providers to create metrics for **successful program goals** to track which services are successful interventions in transitioning people out of homelessness. Implementation can be immediate with existing staff person.

3. Adopt the Hub Model of care coordination as a framework for doing business that coordinates existing partners.

- Hub model of care coordination **brings together different providers and partners at routine meetings to address the complex needs of individuals.** This model is similar to the Adult Services Team or the Homeless and Vulnerable Patients Workgroup convened by Samaritan.
- An “agency navigator” is best to coordinate the Hub Model. This staff position should be full-time and could be a health navigator, case manager, community health worker, or program coordinator. This same staff position is needed to do an assessment of funding streams: with input from city/county and providers, assess all available funding streams coming into Benton County that fund this work to try to blend funding streams.
- Implementation: can be done immediately if an existing staff person is available, until an FTE can be budgeted for this role.

Hub Model explanation continued:

- **Hub spokes to include at Hub meetings should be diverse and culturally-versed:** Benton County Health Department (BCHD), Corvallis Daytime Drop-in Center (CDDC), Unity Shelter, Community Outreach Inc. (COI), the Center Against Rape and Domestic Violence (CARDV), Samaritan, Inter-community Health Network-Coordinated Care Organization (IHN-CCO), Jackson Street Youth Services (JSYS) when needed, the state Department of Health Service (DHS), case managers, Casa Latinos Unidos (CLU), Philomath Community Services (PCS), South Benton Food Pantry (SBFP), Job training/vocational rehab, law enforcement/first responders, crisis response team members, Street Outreach Response Team (SORT) members, social security/disability advocacy, faith-based community volunteers, Older Adult Behavioral Health Initiative to do system-level coordination, Oregon Cascades West Council of Governments (OCWCOG). Any other provider who can provide access to services for a person in need.
 - Include in the Hub a representative who is a consistent resource to coordinate with Tribal Housing Authorities to provide referrals and connect Native American individuals with Tribal resources, such as housing vouchers, assistance, and support services. (This resource does not yet exist and is a recommendation from Topic 4: liaison to Tribal Authorities.)
- **Geographic hub suggestion:** the details and frequency can be decided by the Hub participants, but we recommend based on public feedback having routine monthly Hub meetings for Corvallis-centric clients, South Benton clients, and Philomath/West Benton clients (and other geographic regions as needed).

4. Support co-locating service providers from multiple organizations to decrease the travel and number of different locations people must go to meet their needs.

- Having some shared space at one location does not mean that an organization entirely relocates their operation. It means that representatives from different organizations are co-located to coordinate care in one location. (Long-term implementation)

5. Allocate local and state resources to programs that support these first four goals:

- **Collaborating with other providers to improve** data collection/tracking and to reduce duplicative data entry and data management.
- **Working with other providers to create metrics for successful program goals** to track which services are successful interventions in transitioning people out of homelessness.
- **Participating in a hub model of care** coordination with multiple providers to stabilize individuals with complex needs with the ultimate goal of stable housing.
- **Co-locating service providers** from multiple organizations to decrease the travel and number of different locations people must go to meet their needs. Having some shared space at one location does not mean that an organization entirely relocates their operation. It means that a representative from different organizations are co-located at a resource hub to coordinate care in one location. (Long-term goal)

6. Paid, full-time staff are needed as case managers to support people transitioning out of homelessness. Case managers should have commensurate experience and background that reflects the people they are serving from a cultural perspective and based on lived-experience.

- County: work with IHN-CCO and Samaritan on workforce capacity for housing case managers, peer support specialists, and social service providers to utilize funding from Medicaid and SAMHSA block grant resources.
- County: rural areas outside of Corvallis need additional mobile/regional staff to support people's housing needs and transition out of homelessness.
- City and county work with OSU and LBCC on expanding internship workforce capacity from students.

7. Institute a crisis response team

We recommend a non-police intervention for crisis situations due to homelessness and behavioral health issues. Pursue the feasibility and implementation of a crisis response team. HOPE's research, data, and community feedback fully support ongoing efforts to implement a Crisis Response Team to redirect calls from law enforcement and provide team partnerships with law enforcement when an officer is necessary.

- We recognize that ongoing efforts are occurring with the Criminal Justice Systems Improvement project and the Willamette Criminal Justice Council. We recommend continuing to pursue implementation in those existing forums with experts on the topic of crisis response.

HOPE Topic 2 Draft Policy

Recommendations: Strengthen Crisis Response Resources with a 24/7 Location for emergency sheltering.

Definition: a safe place to be 24/7/365 for all populations without housing that respects and addresses the needs of each individual and conducts an initial assessment to enter the client's data into a data system.

Recommendations:

An Emergency Sheltering System is needed that has two components:

1. Emergency sheltering for all populations with onsite resources at any shelter location.
2. Resource Center with representation from providers from multiple agencies.

8. Emergency Sheltering System

Benton County needs an Emergency Sheltering System with onsite resources at any shelter location to transition people out of homelessness with space for warming/cooling from the elements during the day.

Individuals are assigned a bed space that is theirs 24/7 while they work with a case manager on transition.

Emergency sheltering 24/7/365 with onsite resources is referred to as a “navigation center” in upcoming legislation (HB 2004 and HB 2006, 2021 Session).

8. Emergency Sheltering System continued...

- **Challenges:** Implementing this recommended sheltering system will take time, resources, and political will. There are challenges with identifying one or more sites, concentration of populations living in poverty, and the need for separation of some populations for safety.
- **Leadership:** there needs to be collaboration of leadership with providers and with the city and county supporting project management for project design and site planning to insure the following issues are addressed:
 - Geographic locations and siting options. Land use planning research is needed to identify all available sites so providers can make informed decisions about locations.
 - Adequate public transportation schedule to support client needs.
 - Service providers must be included as leaders to determine adequate spacing between populations. Suggestions from providers include separate floors, separate buildings, separate sites, and/or microshelter rows for different populations.
 - Capacity is needed to research and explore available geographic areas in Corvallis, the urban growth boundary around Corvallis, and the county areas surrounding the urban growth boundary.

8. Emergency Sheltering System continued...

- **Phased Implementation Recommendations:** all of the components listed below for an emergency sheltering system will take time to be implemented. While the city and county work to build the organizational capacity and sustainable funding to support the long-term vision of implementing these components, the city and county must facilitate and support the enhancement of service capacity at existing locations in the interim.
 - The existing men's and women's shelters must be open 24/7/365 with additional service providers meeting onsite to transition them to transitional or permanent supportive housing.
 - In partnership with IHN, Samaritan, and service providers, the city and county or another service provider should facilitate building the capacity for mobile service delivery to distributed microshelters, RV/trailer/car camping, and managed tent camping locations. This mobile service delivery can serve populations both within Corvallis urban growth boundary and the greater Benton County areas that have expressed the need for access to services.

8. Emergency Sheltering System continued...

The following three populations need separate sheltering:

- Men in congregate sheltering
- Women in congregate sheltering
- Non-congregate sheltering for people who cannot be in men/women dorms: non-binary and trans individuals, couples, people who cannot be in congregate settings due to medical fragility or behavioral health disorders, people with pets, and family units. We recommend single-unit sheltering options, such as motel room style units and/or microshelters, to provide this non-congregate capacity.
 - The microshelter design needs to be expanded to accommodate a double bed or bunk beds. (Example: the women's shelter has a successful model of congregate beds and microshelters with daytime indoor living space and a case manager onsite to work on transition.)

8. Emergency Sheltering System continued...

Recommended components of an Emergency Sheltering System:

1. Shelter Accessibility:

- Shelter is accessible 24/7/365.
- Emergency shelter is low barrier upon arrival to get individuals off the street. Options are available, but not required, for individual involvement to support the location while they work on transitioning, such as doing laundry, cleaning, or helping to provide food.
- Necessary components at any emergency sheltering location: walking and biking access, public transportation access, and safety. Safety concerns for everyone involved need to be addressed. Security, lighting, fire code, and immediate access for emergency personnel must be considered.

8. Emergency Sheltering System continued...

Recommended components of an Emergency Sheltering System:

- 2. Shelter Facilities:** necessary services at any shelter location include showers, bathrooms, drinking water, food provided on-site (to minimize need to travel to multiple locations for food), laundry, wifi, lockers for items for those in congregate shelter, mail service.
- 3. Shelter Services:** space is designated for providers to meet with clients to work on transitioning out of homelessness and addressing their needs onsite at the sheltering location.

8. Emergency Sheltering System continued...

Recommended components of an Emergency Sheltering System:

4. Emergency shelter is temporary and has time limits based on availability of the next transitional option in our community. The duration of a person's stay will vary based on their needs, their progress with a case manager, and availability of an appropriate transitional or permanent option.
5. A limited overflow area is needed at any sheltering location for people who show up with a tent or car/RV. Tent and car/RV camping is time limited, and the individual must engage to transition to another option. RV sites must have gray and black water dump hookups for appropriate hygiene. The overflow area is under the supervision of the host organization.

8. Emergency Sheltering System continued...

Recommended components of an Emergency Sheltering System:

6. There must be an area for warming/cooling from the elements where someone can be 365 days/year who is experiencing homelessness to minimize the need to go to multiple locations throughout the day to stay warm or get cool. The warming/cooling areas are accessible to individuals not staying in emergency shelter.
7. There must be hygiene facilities, wifi, lockers, and food services that are accessible to individuals not staying in emergency shelter.

8. Emergency Sheltering System continued...

Managed Tent Camping: the Emergency Sheltering system must include a managed tent camping area with boundaries, amenities, and direct supervision. To transition people out of tent camping, we recommend a managed, emergency tent camping area with time limits for every individual camper with evaluation of that person's progress towards securing transitional or permanent housing on a case-by-case basis. Case management to work on transitioning to stable housing must be provided for all persons. The tent camping is limited in number based on staffing capacity to provide case management. Allowing an area for tent camping will address the safety and environmental health concerns of unmanaged camping and allow for enforcement of illegal tent camping elsewhere.

1. Definition of managed tent camping: a specific, designated area where camping in tents is under the direct control of an organization. The organization provides tents and pallets to elevate the tents and is responsible for the condition of tents. The organization designates tent placement with consideration for emergency service accessibility. Campers have access to hygiene, water, trash, and resources.

8. Emergency Sheltering System continued...

2. Tent camping is not supported by the public feedback due to concerns of fire, individual safety, community safety, litter, noise, and visibility. Managed and supported camping addresses these community concerns. We recognize that tent camping is illegal, and yet is widespread. (Corvallis chose to cease posting during COVID pandemic, to allow people experiencing homelessness to shelter in place).
3. We recognize there are individuals who will not engage in case management to transition out of homelessness. Appropriate interventions need to be available for those who cannot engage due to behavioral health conditions, such as crisis response and respite. Pretrial justice services and additional jail capacity are needed for those who break the law. (We recognize there are current efforts to improve crisis response, respite, and additional criminal justice services.) For those who refuse to work on transitioning out of homelessness and do not belong in crisis respite or jail, tent camping remains illegal and will once again be posted when the pandemic statewide emergency is lifted.

8. Emergency Sheltering System continued...

A managed RV, trailer, and car camping area is needed. RV sites must have gray and black water dump hookups for appropriate hygiene.

Definition: a specific, designated area where camping in vehicles is under the direct control of an organization. The organization designates vehicle placement with consideration for emergency service accessibility. Vehicle campers have access to hygiene, water, trash, and resources. Mobile service delivery capacity can make it possible to support distributed sites at multiple smaller locations throughout the county.

8. Emergency Sheltering System continued...

Initial Estimates of Need for Emergency Sheltering: the team working to implement this emergency sheltering system should look at available current and historic data to fine-tune the recommended estimates.

- **Women: 40 congregate beds** based on historical data from the women's shelter. This estimate includes the existing 20-25 beds at the women's shelter which may not be able to remain in its existing location and cannot operate 365 days/per year at that location given church needs.
- **Men: 60 congregate beds** based on historical data from the men's shelter. This estimate includes the capacity at the men's location which may not be able to remain in its existing location given flood plain concerns and space constraints.
- **Non-congregate units** (single-unit occupancy sheltering, for example motel units and microshelters) for couples, parent/child, non-binary and trans folks: **40 units** based on HOPE survey data on trans and non-binary needs and feedback from providers regarding couples and individuals with a child. Our system currently has no permanent, non-congregate emergency sheltering for couples, trans or non-binary folks, and families needing low barrier shelter. Some limited microshelter capacity exists for transitional living in microshelters through SafeSpace. CHANCE is providing motel sheltering for 30 hotel rooms with COVID emergency funding. The Budget Inn will be adding 25 non-congregate units in April 2021, but that emergency sheltering will transition to permanent supported housing in approximately 1-2 years.

8. Emergency Sheltering System continued...

Initial Estimates of Need for Emergency Sheltering continued:

- **Managed RV/trailer and car camping:** we do not have a good estimate of this need based on our current data system. At Pioneer Park, 30 applications (representing about 60 people) were submitted. At Pioneer Park, 15 RV spaces and 9 car spaces are being occupied. All 11 spots at the Fairgrounds were full with 21 individuals camping in cars and RVs. Based on these locations alone, at least 40 RV and car camping spaces are needed in Corvallis. The county-wide need is undetermined.
- **Managed Camping:** between 80-120 individuals are camping in Corvallis close proximity to the hygiene center, on ODOT property, and in the skate park. These estimates may change with more available shelter beds.

[End of Emergency Sheltering recommendation]

Feedback on Emergency Sheltering System recommendations

- Five components needed as part of our sheltering system – all need hygiene facilities, 24/7/365, and case management services provided onsite: 1) men's congregate, 2) women's congregate, 3) non-congregate units, 4) managed tent camping, and 5) managed RV/trailer/car camping.
- Two additional components for hygiene and basic needs available to anyone not staying in shelter: 1) warming and cooling area, and 2) hygiene facilities (shower, bathroom, laundry).
- Accessibility, safety, and resource access is critical for all components.

9. Facilitate and support the creation of a Resource Center

- The city and county should facilitate and support the collaboration between the providers who will occupy and manage this Resource Center.
 - Capacity is needed to research and explore available geographic areas in Corvallis, the urban growth boundary around Corvallis, and the county areas surrounding the urban growth boundary.
- The Resource Center should have office space for providers from different organizations to meet with people, enroll them in programs, and work on transitioning out of homelessness.
 - Office space for service providers like CSC, COG, United Way, BCHD health navigators to enroll people in OHP, housing case managers to work on transitioning people out of homelessness, assistance with vital records (drivers license, social security card, etc.), assistance with applying for and accessing disability and social security income, job assistance, veterans programs, space for representatives from CARDV, JSYS, COI, Casa Latinos Unidos, Tribal liaison, NAACP representative, etc.
 - Ideal location: co-located adjacent to or very near some emergency sheltering. Second best is very short walking distance. Worst-case scenario would be a shuttle system from emergency shelter locations to the resource center.
 - Must have public transit, walking, and biking access.

HOPE Topic 3 Draft Policy

Recommendations:

Transitional options for stability,
safety, and health

10. Prioritize investment based on public feedback and cost effective allocations of limited public resources.

- The community supports the following shelter options (beyond just normal brick-and-mortar housing) in the following descending order:
 - Microshelters
 - Emergency shelter
 - RV/car camping
 - Tent camping.

10. Prioritize investment, continued

Tent camping is the least supported transitional option from the public feedback due to concerns of fire, individual safety, community safety, litter, noise, and visibility. To transition people out of tent camping, we recommend that, if they are implemented, any transitional tent camping locations have time limits for every individual camper with evaluation of that person's progress towards securing permanent housing on a case-by-case basis. Case management to work on transitioning to stable housing must be provided for all persons at any transitional camping location.

- We recognize there are individuals who will not engage in case management to transition out of homelessness.
 - Crisis response and crisis respite are needed for those who are unable to engage due to behavioral health conditions.
 - Criminal justice systems improvement is needed to add jail capacity for those who pose a threat to community safety.

11. Establish referral pathways to transitional and permanent housing resources for serious criminal offenders (sex offenders, felony convictions, etc.).

- For example, a referral pathway from Benton County Parole & Probation to CHANCE to coordinate housing resources. *Note: there is a lack of data on the need for referrals for this population, although it is a known need. Explore and investigate this issue further.

12. Communication, Notice, and Community Involvement:

- **Routine monthly updates** similar to the Corvallis Sustainability Coalition email updates. These updates should include news and reports about new services, new providers, decisions made on the topic of homelessness, how to get involved, etc. Regional updates are needed that include all of Benton County.
- **Quarterly public forum** to provide verbal updates, answer community questions about recent updates, provide dialogue, and have a community conversation beyond the 10 minute comment period at each HOPE meeting. Recommend a minimum two hours.

12. Communication, Notice, and Community Involvement, continued:

- **A notice requirement to neighborhoods and businesses with opportunities for involvement** for any new services or new transitional locations approved or funded by the city or county. The intent of this notice and involvement requirement is to provide ample time and opportunity for community engagement.
 - Organizations funded by the city or county or approved to provide social services or transitional housing must provide routine opportunities for two-way communication and a mechanism to provide feedback for neighbors and nearby businesses. Organizations will forward neighborhood feedback to city and county funders to evaluate future funding decisions and encourage resolving issues with neighbors.
 - Community-wide notice should also be provided in the routine monthly community-wide communication.

Feedback on Transitional Options recommendations

- Prioritize investment based on public support for transitional options with microshelters most preferred.
- Establish referral pathways for individuals with felony convictions.
- Communication, notice, and community involvement.

HOPE Topic 4 Draft

Recommendations:

Permanent Supportive Housing (PSH)

13. Increase development or acquisition of affordable housing units for permanent supportive housing (PSH)

Increase the PSH units by 20 new units per year for the next eight years to add at a minimum 160 new units of PSH in Benton County. “New” can be new construction or conversion of existing units to PSH units.

1. Develop a framework for awarding funds that encourages, incentivizes, or requires, when possible, a certain percentage of PSH units in housing projects seeking affordable housing funding from the City of Corvallis.
 - County pursue additional funding streams to increase PSH units in greater Benton County to implement this recommendation (no dedicated funding stream at the county currently exists like CET and CDBG in Corvallis).

13. Increase development or acquisition of affordable housing units for permanent supportive housing (PSH) continued:

2. Coordination with City and County Community Development (CD) Departments is necessary to support this work. CD Departments should actively facilitate and encourage local organizations' applications for grant funding and technical assistance from evidence-based approaches (for instance, state-level OHCS funding and technical assistance from The Corporation for Supportive Housing).
 - County collaborate with other cities in the county to increase PSH units outside of Corvallis.
3. City/county evaluate non-traditional zoning and code solutions to respond to the need for more permanent living options:
 - Permanent tiny home villages.
 - Emerald Village in Eugene has 22 permanent tiny homes on 1.1 acres: <https://www.squareonevillages.org/emerald>
 - Peace village in development with 36 units on 1.7 acres: <https://www.squareonevillages.org/peace>
 - Accessory dwelling units (ADU) should be made allowable and more easily achievable. (Corvallis already allows ADUs; county code changes are needed.)
 - Motels converted to permanent living.

Topic 3: actively identify available land in the urban growth boundary to add to the land supply available for transitional housing and social services.

**City and County
Community
Development
Departments
work together
to actively add
available land
and units for
housing
options**

Topic 4: Increase development or acquisition of affordable housing units for PSH

14. Increase available rental/income assistance options

1. Increasing the number of place-based section 8 assistance in Benton County is a priority. Linn Benton Housing Authority (LBHA) needs to include place-based assistance in their annual plan to accomplish this goal. Work with LBHA to increase projects in rural parts of Benton County in support of more affordable PSH projects like the newest one in Lebanon.
 - Place-based Section 8 assistance definition: the Section 8 program provides rent assistance to eligible households. The amount of the assistance varies with household income and is capped by HUD rules that define an area's "Fair Market Rent." The Section 8 Program can be delivered in two ways: as a voucher the recipient household uses to pay a portion of their rent, or as "placed-based" assistance in which the assistance is attached to a specific housing unit. The Section 8 voucher program involves being on a waiting list for years. Having to wait years for help doesn't work very well for people who are without housing now and have a disability that puts their health and well-being at risk. Place-based assistance works better than a voucher because an eligible person can move in as soon as there's a vacancy. For this reason, place-based Section 8 assistance is critically important to the development and provision of PSH.

14. Increase available rental/income assistance options, continued:

2. City/county proactively pursue all sources of rent subsidies with community partners, including opportunities with the Veterans Administration, the state of Oregon, and rent subsidies. For example:
 - Establish a consistent resource to help people navigate the process to access social security and disability financial assistance. People with disabilities and elderly individuals are disproportionately represented in the homeless data. Programs like ASSIST and SOAR can be contracted with to expand the resources here to help people access disability and social security benefits.
3. Engage with culturally specific and culturally responsive organizations to help connect communities of color to rental/income programs and ensure that program parameters are aligned with the needs of communities of color.
 - Establish a consistent resource to coordinate with Tribal Housing Authorities to provide referrals and connect Native American individuals with Tribal resources, such as housing vouchers, assistance, and support services.

15. Increase supportive services and stable funding streams to provide services to residents at more affordable housing locations

1. County facilitate and coordinate collaboration among community partner organizations to expand PSH units as part of their behavioral health responsibility. (Existing providers: DevNW, Commonwealth, Corvallis Housing First, county health staff.)
2. County facilitate increasing supportive services by leveraging Medicaid funding for non-county staff to provide behavioral health support, case management, peer support, and counseling/medication assistance. Case management is the most critical component to prioritize.
 - County Alcohol and Drug resources can increase their in-the-field work to do diagnoses that will allow for more resources for case management following the 1115 waiver.
3. County facilitate collaboration with IHN and Samaritan to support more behavioral health services onsite at more permanent supportive housing units.

Feedback on permanent supportive housing (PSH) recommendations

- Increase PSH units
- Increase rental income options
- Increase supportive services

The last three recommendations apply to recommendations 1-15.

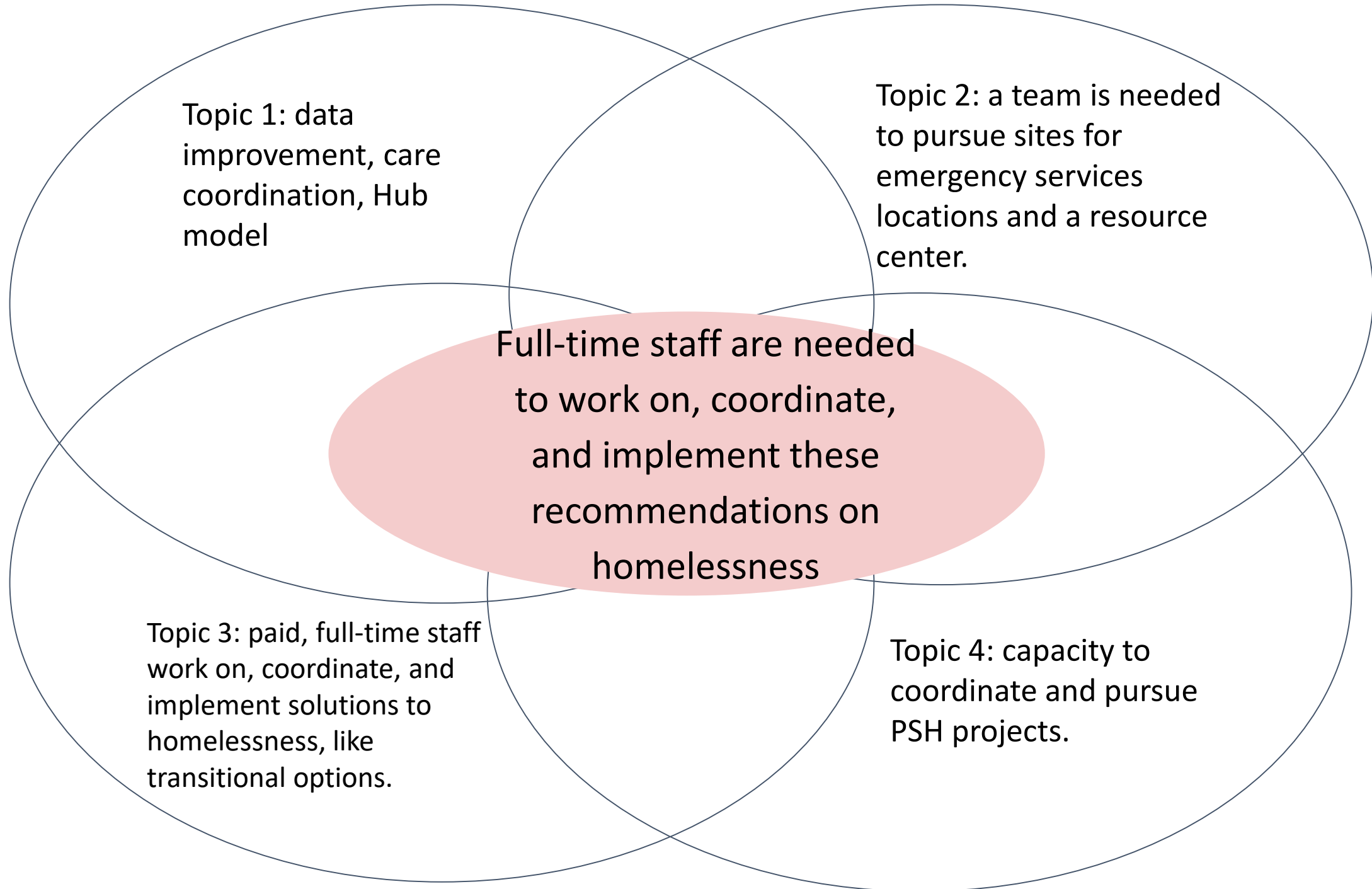
16. Organizational capacity is needed to work on and implement these recommendations, and organizational capacity needs to be built within social service organizations to manage and provide the services.
17. Funding recommendations
18. Legislative Advocacy

16. Organizational capacity is needed to work on and implement these recommendations, and organizational capacity needs to be built within social service organizations to manage and provide the services.

- **Paid, full-time staff are needed to work on, coordinate, and implement these recommendations on homelessness** (whether that capacity is built internally or contracted out). No new solutions can be successfully implemented without new staff whose job it is to work on the topic of homelessness. The following functions are needed to implement these recommendations: project management, coordination and outreach, land use planning, grants management (grant writing, contracting, grant administration, oversight, reporting).
 - Specifically, a team is needed to research and pursue sites for emergency and transitional sheltering, permanent supportive housing, and services locations. The type of work that DLR has done for the Criminal Justice Systems Improvement Project is needed to research sites, zoning, and other parameters to provide site-specific options for providers and city/county leadership to make informed choices.

16. Organizational capacity continued:

- **Invest in building organizational capacity at organizations that can manage all components of these recommendations** and work to support and successfully transition people out of homelessness. Invest in building organizational capacity by supporting and collaborating with groups that have demonstrated efforts to provide emergency services in Benton County. If no local organizations wish to build and grow organizational capacity, recruit an organization to Benton County who can provide these services.
 - Suggestions: expand the capacity of organizations that successfully are stabilizing people by adding microshelters at their locations. For example, Community Outreach Inc. (COI), Corvallis Housing First (CHF), and SafePlace have successful models of housing case management to transition people out of homelessness. Increase their capacity with funding for positions and microshelters at available locations.
 - Capacity must be built for organizations to serve Benton County residents outside of Corvallis.



Topic 1: data improvement, care coordination, Hub model

Topic 2: a team is needed to pursue sites for emergency services locations and a resource center.

Full-time staff are needed to work on, coordinate, and implement these recommendations on homelessness

Topic 3: paid, full-time staff work on, coordinate, and implement solutions to homelessness, like transitional options.

Topic 4: capacity to coordinate and pursue PSH projects.

Topic 1: case managers to do outreach and care coordination

Topic 2: to provide onsite services to transition people out of homelessness once they have stabilized at this emergency location

Paid, full-time staff to support people transitioning out of homelessness.

Topic 3: work with IHN-CCO and Samaritan on workforce capacity for housing case managers, peer support specialists, and social service providers

Topic 4: Case managers needed as part of permanent supportive housing

17. Funding recommendations:

Explore state, federal, and private funding to expand organizational capacity to work on these topics and to fund the implementation and permanent provision of all these recommended services. In partnership with providers, assess current funding streams to ensure funding is not being taken away from existing services but that additional funding is pursued.

- Grant writing capacity at the city/county is needed to access additional funds that are available but are not being applied for.
- County pursue additional funds from Community Development Block Grant in county areas and in partnership with municipalities who have not explored this funding option.
- County explore Medicaid 1115 waiver funding for housing case managers, SAMHSA funding for transitional housing for individuals with a behavioral health diagnosis who do not fall into the SPMI population, new Transient Lodging Tax funding, and private foundations such as Meyer Memorial Trust, Oregon Community Foundation, McKenzie River Gathering, and Benton Community Foundation.
- County explore cost/benefit of adopting a Construction Excise Tax. Local jurisdictions can levy a tax of up to 1 percent of the permit value on residential construction, and levy a tax with no cap on the permit value of commercial and industrial construction. For instance, the City of Corvallis levies a tax of 1% on residential construction and 1.5% on commercial and industrial construction. State law governs how the revenue can be used. Some is restricted for uses such as developing affordable housing and providing down payment assistance, and some is unrestricted.

18. Legislative Advocacy:

- County and City elected officials must advocate for statewide leadership on local requirements for available beds in each county with accompanying state funding to support those required beds. This state requirement and funding is needed to address the migration of people to areas with services from areas with no services.
- State and federal funding for all of these topics must be advocated for by city and county elected officials and by the League of Cities and Association of Counties once these recommendations are adopted.
- City and County explore partnership with OSU and counterparts in Lane County (Lane, Eugene, Springfield, and University of Oregon) to lobby for a state law allowing local tax revenue from Pac-12 events and on-campus sales to address the affordable housing impacts from the university population. The tax revenue would be split between the universities and the local municipalities to fund subsidized housing for low-income students and affordable housing for the surrounding community.

Community Updates

- 1. Project Turnkey: Budget Inn opening this month**
- 2. Emergency Service Grant – COVID (ESG-CV) funding: bringing \$2.6 million into Benton County to bolster emergency sheltering, outreach, transitioning people out of homelessness.**
- 3. Street Outreach Response Team coming under the umbrella of the Corvallis Daytime Drop-in Center**
- 4. Crisis Resource Center and Crisis Response: work continues on developing these concepts and planning programming. Willamette Criminal Justice Council subcommittee, county behavioral health department, and Criminal Justice Systems Improvement work are all collaborating.**

Next Steps

- April: community engagement on the final draft of the policy recommendations.
- 4/28 meeting: finalize phased approaches/timelines for these recommendations
- May 20: joint meeting of City and County elected officials.
 - Executive Committee communicates the recommendations to the City and County elected officials.
 - City and County elected officials begin the process of reviewing and adopting recommendations.



Home, Opportunity, Planning, and Equity (HOPE) Advisory Board Meeting Approved Minutes March 24, 2021 from 4 pm to 6 pm ZOOM Meeting



Members Present: Florence Anderson; *Xan Augerot (Commissioner, Benton County); Catherine Biscoe; Karyle Butcher; Bruce Butler; Bryan Cotter; Anita Earl; Joel Goodwin; George Grosch; Barbara Hanley; Aleita Hass-Holcombe; Nicole Hobbs; Christina Jancila* (Business Associate); Pegge McGuire* (CSC); Jim Moorefield* (Co-Chair); Andrea Myhre; Jan Napack* (Corvallis City Council); Reece Stotsenberg* (Co-Chair)

Members Excused: Lennox Archer; Linda Tucker; Charles Maughan* (Corvallis City Council)

Staff Present: Julie Arena (Benton County Health, HOPE Program Coordinator); Suzanne Hoffman (Benton County Health Director); Joe Hahn (Benton County Diversity Coordinator); Paula Felipe (Benton County Public Health, recorder)

*Executive Committee Members.

- I. **Welcome and Introductions.** Reminders of the Agreement and Culture, such as inclusivity, kindness, and respect.
- II. **Public Comments (limited to 2-3 minutes).**
 - No Comment
- III. **Approval of Minutes: MOTION** was made by Pegge McGuire to approve the February 24, 2021 minutes; Seconded by Jan Napack. **MOTION** passed unanimously.
- IV. **Announcements/Updates:**
 - **Update on Board Membership.** After the April meeting, Nikki Hobbs will be leaving her role on the HOPE Advisory Board. She will be heading to graduate school for a Master's degree in Public Health. Welcome to new Board Member Janie Tebeau, who also serves as Second Vice President, NAACP and on Board of Commissioners for the Linn and Benton County Housing Authority.
 - **Community Engagement Update: (Jim Moorefield).** Now that we have a more solid product to look at, we have another opportunity for public to participate and comment. Today's meeting will focus on what is intent of each major recommendation. Are they stated clearly? Does it say what we want or is there anything to adjust? We still need background justification for each one.
 - We have a 3-step process:
 - ✓ 1. Draft document for review through survey monkey;
 - ✓ 2. Public forum for people to comment and focus on listening; focus groups for individuals who have experienced homelessness.
 - ✓ 3. Have regular meeting in April and finish our recommendations.

V. Presentation of Second Draft Policy Recommendations on First Four Priority Topics:

• HOPE TOPIC 1 Draft Policy Recommendations: Strengthen Crisis Response Resources and Improve Care Coordination

- 1. Facilitate and coordinate data improvement efforts with community partners.
 - ✓ Work with providers to improve data collection/tracking and to reduce duplicative data entry and data management. Data collection efforts will include a human services coalition model that is a statewide model: service providers come together to say what their priorities are and how they would implement them. Implementation is recommended immediately and could be accomplished with an existing staff person.
- 2. Work with providers to create metrics for successful program goals to track which services are successful interventions in transitioning people out of homelessness. Implementation can be immediate with existing staff person
- 3. Adopt the Hub Model of care coordination as a framework for doing business that coordinates existing partners.
 - ✓ Hub model of care coordination brings together different providers and partners at routine meetings to address the complex needs of individuals. This model is similar to the Adult Services Team or the Homeless and Vulnerable Patients Workgroup convened by Samaritan.
 - ✓ An “agency navigator” is best to coordinate the Hub Model. This staff position should be full-time and could be a health navigator, case manager, community health worker, or program coordinator. This same staff position is needed to do an assessment of funding streams: with input from city/county and providers, assess all available funding streams coming into Benton County that fund this work to try to blend funding streams.
 - ✓ Implementation: can be done immediately if an existing staff person is available, until an FTE can be budgeted for this role.
- 4. Support co-locating service providers from multiple organizations to decrease the travel and number of different locations people must go to meet their needs.
 - ✓ Having some shared space at one location does not mean that an organization entirely relocates their operation. It means that representatives from different organizations are co-located to coordinate care in one location. (Long-term implementation)
- 5. Allocate local and state resources to programs that support these first four goals:
 - ✓ Collaborating with other providers to improve data collection/tracking and to reduce duplicative data entry and data management.
 - ✓ Working with other providers to create metrics for successful program goals to track which services are successful interventions in transitioning people out of homelessness.
 - ✓ Participating in a hub model of care coordination with multiple providers to stabilize individuals with complex needs with the ultimate goal of stable housing.
 - ✓ Co-locating service providers from multiple organizations to decrease the travel and number of different locations people must go to meet their needs. Having some shared space at one location does not mean that an

- organization entirely relocates their operation. It means that a representative from different organizations are co-located at a resource hub to coordinate care in one location. (Long-term goal)
- 6. Paid, full-time staff are needed as case managers to support people transitioning out of homelessness. Case managers should have commensurate experience and background that reflects the people they are serving from a cultural perspective and based on lived-experience.
 - ✓ County: work with IHN-CCO and Samaritan on workforce capacity for housing case managers, peer support specialists, and social service providers to utilize funding from Medicaid and SAMHSA block grant resources.
 - ✓ County: rural areas outside of Corvallis need additional mobile/regional staff to support people’s housing needs and transition out of homelessness.
 - ✓ City and county work with OSU and LBCC on expanding internship workforce capacity from students.
 - 7. Institute a crisis response team
 - ✓ We recommend a non-police intervention for crisis situations due to homelessness and behavioral health issues. Pursue the feasibility and implementation of a crisis response team. HOPE’s research, data, and community feedback fully support ongoing efforts to implement a Crisis Response Team to redirect calls from law enforcement and provide team partnerships with law enforcement when an officer is necessary.
 - We recognize that ongoing efforts are occurring with the Criminal Justice Systems Improvement project and the Willamette Criminal Justice Council. We recommend continuing to pursue implementation in those existing forums with experts on the topic of crisis response.

FEEDBACK ON HOPE TOPIC 1 – DISCUSSION

Question: how many more case managers are needed? Xan: Provide ranges; specific as we can on capacity. We can discuss in executive committee. George: advisory group members are not in a position to determine how many case managers needed. If need additional case managers, then health depart and service providers can take action. Jan: Should tell them how much funding and why and who recommended and criteria. Andrea: Could say “appropriate” case loads to prevent overload on case managers.

- **HOPE TOPIC 2 Draft Policy Recommendations: Strengthen Crisis Response Resources with a 24/7 Location for emergency sheltering.** **Definition:** a safe place to be 24/7/365 for all populations without housing that respects and addresses the needs of each individual and conducts an initial assessment to enter the client’s data into a data system.
 - An Emergency Sheltering System is needed that has two components:
 - ✓ 1. Emergency sheltering for all populations with onsite resources at any shelter location; and
 - ✓ 2. Resource Center with representation from providers from multiple agencies.
 - **8. Emergency Sheltering System:**

- ✓ Benton County needs an Emergency Sheltering System with onsite resources at any shelter location to transition people out of homelessness with space for warming/cooling from the elements during the day.
- ✓ Individuals are assigned a bed space that is theirs 24/7 while they work with a case manager on transition.
- ✓ Emergency sheltering 24/7/365 with onsite resources is referred to as a “navigation center” in upcoming legislation (HB 2004 and HB 2006, 2021 Session).
- ✓ **Challenges:** Implementing this recommended sheltering system will take time, resources, and political will. There are challenges with identifying one or more sites, concentration of populations living in poverty, and the need for separation of some populations for safety.
- ✓ **Leadership:** there needs to be collaboration of leadership with providers and with the city and county supporting project management for project design and site planning to insure the following issues are addressed:
 - Geographic locations and siting options. Land use planning research is needed to identify all available sites so providers can make informed decisions about locations.
 - Adequate public transportation schedule to support client needs.
 - Service providers must be included as leaders to determine adequate spacing between populations. Suggestions from providers include separate floors, separate buildings, separate sites, and/or microshelter rows for different populations.
 - Capacity is needed to research and explore available geographic areas in Corvallis, the urban growth boundary around Corvallis, and the county areas surrounding the urban growth boundary.
- ✓ **Phased Implementation Recommendations:** all of the components listed below for an emergency sheltering system will take time to be implemented. While the city and county work to build the organizational capacity and sustainable funding to support the long-term vision of implementing these components, the city and county must facilitate and support the enhancement of service capacity at existing locations in the interim.
 - The existing men’s and women’s shelters must be open 24/7/365 with additional service providers meeting onsite to transition them to transitional or permanent supportive housing.
 - In partnership with IHN, Samaritan, and service providers, the city and county or another service provider should facilitate building the capacity for mobile service delivery to distributed microshelters, RV/trailer/car camping, and managed tent camping locations. This mobile service delivery can serve populations both within Corvallis urban growth boundary and the greater Benton County areas that have expressed the need for access to services.
- ✓ **The following three populations need separate sheltering:**
 - Men in congregate sheltering
 - Women in congregate sheltering
 - Non-congregate sheltering for people who cannot be in men/women dorms: non-binary and trans individuals, couples, people who cannot

be in congregate settings due to medical fragility or behavioral health disorders, people with pets, and family units. We recommend single-unit sheltering options, such as motel room style units and/or microshelters, to provide this non-congregate capacity.

- The microshelter design needs to be expanded to accommodate a double bed or bunk beds. (Example: the women's shelter has a successful model of congregate beds and microshelters with daytime indoor living space and a case manager onsite to work on transition.)

✓ **Recommended components of an Emergency Sheltering System:**

➤ **1. Shelter Accessibility:**

- Shelter is accessible 24/7/365.
- Emergency shelter is low barrier upon arrival to get individuals off the street. Options are available, but not required, for individual involvement to support the location while they work on transitioning, such as doing laundry, cleaning, or helping to provide food.
- Necessary components at any emergency sheltering location: walking and biking access, public transportation access, and safety. Safety concerns for everyone involved need to be addressed. Security, lighting, fire code, and immediate access for emergency personnel must be considered.

➤ **2. Shelter Facilities:** necessary services at any shelter location include showers, bathrooms, drinking water, food provided on-site (to minimize need to travel to multiple locations for food), laundry, wifi, lockers for items for those in congregate shelter, mail service.

➤ **3. Shelter Services:** space is designated for providers to meet with clients to work on transitioning out of homelessness and addressing their needs onsite at the sheltering location.

➤ **4. Emergency shelter is temporary and has time limits based on availability of the next transitional option in our community.** The duration of a person's stay will vary based on their needs, their progress with a case manager, and availability of an appropriate transitional or permanent option.

➤ **5. A limited overflow area is needed at any sheltering location for people who show up with a tent or car/RV.** Tent and car/RV camping is time limited, and the individual must engage to transition to another option. RV sites must have gray and black water dump hookups for appropriate hygiene. The overflow area is under the supervision of the host organization.

➤ **6. There must be an area for warming/cooling from the elements** where someone can be 365 days/year who is experiencing homelessness to minimize the need to go to multiple locations throughout the day to stay warm or get cool. The warming/cooling areas are accessible to individuals not staying in emergency shelter.

➤ **7. There must be hygiene facilities, wifi, lockers, and food services that are accessible to individuals not staying in emergency shelter.**

- ✓ **Managed Tent Camping:** the Emergency Sheltering system must include a managed tent camping area with boundaries, amenities, and direct supervision. To transition people out of tent camping, we recommend a managed, emergency tent camping area with time limits for every individual camper with evaluation of that person's progress towards securing transitional or permanent housing on a case-by-case basis. Case management to work on transitioning to stable housing must be provided for all persons. The tent camping is limited in number based on staffing capacity to provide case management. Allowing an area for tent camping will address the safety and environmental health concerns of unmanaged camping and allow for enforcement of illegal tent camping elsewhere.
 - 1. **Definition of managed tent camping:** a specific, designated area where camping in tents is under the direct control of an organization. The organization provides tents and pallets to elevate the tents and is responsible for the condition of tents. The organization designates tent placement with consideration for emergency service accessibility. Campers have access to hygiene, water, trash, and resources.
 - 2. Tent camping is not supported by the public feedback due to concerns of fire, individual safety, community safety, litter, noise, and visibility. Managed and supported camping addresses these community concerns. We recognize that tent camping is illegal, and yet is widespread. (Corvallis chose to cease posting during COVID pandemic, to allow people experiencing homelessness to shelter in place).
 - 3. We recognize there are individuals who will not engage in case management to transition out of homelessness. Appropriate interventions need to be available for those who cannot engage due to behavioral health conditions, such as crisis response and respite. Pretrial justice services and additional jail capacity are needed for those who break the law. (We recognize there are current efforts to improve crisis response, respite, and additional criminal justice services.) For those who refuse to work on transitioning out of homelessness and do not belong in crisis respite or jail, tent camping remains illegal and will once again be posted when the pandemic statewide emergency is lifted.
- ✓ A managed RV, trailer, and car camping area is needed. RV sites must have gray and black water dump hookups for appropriate hygiene. Definition: a specific, designated area where camping in vehicles is under the direct control of an organization. The organization designates vehicle placement with consideration for emergency service accessibility. Vehicle campers have access to hygiene, water, trash, and resources. Mobile service delivery capacity can make it possible to support distributed sites at multiple smaller locations throughout the county.
- ✓ Initial Estimates of Need for Emergency Sheltering: the team working to implement this emergency sheltering system should look at available current and historic data to fine-tune the recommended estimates.

- **Women: 40 congregate beds based on historical data from the women’s shelter.** This estimate includes the existing 20-25 beds at the women’s shelter which may not be able to remain in its existing location and cannot operate 365 days/per year at that location given church needs.
 - **Men: 60 congregate beds based on historical data** from the men’s shelter. This estimate includes the capacity at the men’s location which may not be able to remain in its existing location given flood plain concerns and space constraints.
 - **Non-congregate units** (single-unit occupancy sheltering, for example motel units and microshelters) for couples, parent/child, non-binary and trans folks: 40 units based on HOPE survey data on trans and non-binary needs and feedback from providers regarding couples and individuals with a child. Our system currently has no permanent, non-congregate emergency sheltering for couples, trans or non-binary folks, and families needing low barrier shelter. Some limited microshelter capacity exists for transitional living in microshelters through SafeSpace. CHANCE is providing motel sheltering for 30 hotel rooms with COVID emergency funding. The Budget Inn will be adding 25 non-congregate units in April 2021, but that emergency sheltering will transition to permanent supported housing in approximately 1-2 years.
 - **Managed RV/trailer and car camping:** we do not have a good estimate of this need based on our current data system. At Pioneer Park, 30 applications (representing about 60 people) were submitted. At Pioneer Park, 15 RV spaces and 9 car spaces are being occupied. All 11 spots at the Fairgrounds were full with 21 individuals camping in cars and RVs. Based on these locations alone, at least 40 RV and car camping spaces are needed in Corvallis. The county-wide need is undetermined.
 - **Managed Camping:** between 80-120 individuals are camping in Corvallis close proximity to the hygiene center, on ODOT property, and in the skate park. These estimates may change with more available shelter beds.
- 9. **Facilitate and support the creation of a Resource Center**
 - ✓ **The city and county should facilitate and support the collaboration between the providers who will occupy and manage this Resource Center.**
 - Capacity is needed to research and explore available geographic areas in Corvallis, the urban growth boundary around Corvallis, and the county areas surrounding the urban growth boundary
 - ✓ **The Resource Center should have office space for providers from different organizations to meet with people, enroll them in programs, and work on transitioning out of homelessness.**
 - Office space for service providers like CSC, COG, United Way, BCHD health navigators to enroll people in OHP, housing case managers to work on transitioning people out of homelessness, assistance with

vital records (drivers license, social security card, etc.), assistance with applying for and accessing disability and social security income, job assistance, veterans programs, space for representatives from CARDV, JSYS, COI, Casa Latinos Unidos, Tribal liaison, NAACP representative, etc.

- Ideal location: co-located adjacent to or very near some emergency sheltering. Second best is very short walking distance. Worst-case scenario would be a shuttle system from emergency shelter locations to the resource center.
- Must have public transit, walking, and biking access.

FEEDBACK ON HOPE TOPIC 2 - EMERGENCY SHELTERING SYSTEM DISCUSSION

- Jim: One issue/challenge is the separation of some populations for safety. Earlier drafts explored a village approach. I don't think segregating and creating concentrations of homeless people is appropriate, practical, or healthy for that population to be put in one place. If intent is not to sell us on a single location, so we don't create concentrations of poverty or unmanageable impacts on a single neighborhood, we need a variety of shelter site options.
- Jim: The concept of resource center described as associated with shelter; but in long term, not sheltering all homeless people; so if resource center is not just for people in shelters; talking about concentration of people in one location. Makes me feel uncomfortable: would like some clarity and have more than one site and serve people in dispersed way.
- Joel: Looking for clarification on transitional options. Is managed camping required to be a part of this? Julie: it's more for "emergency" managed camping versus a transitional managed camping, and it is time limited. I think that's the difference.
- Aleita: Reality sets in; moving people to another unmanaged place doesn't help. Need place for services and case management--that sounds more realistic; more than one managed camp.
- Joel: Topic 3 group recommendations refers back to data from community surveys that proposed managed camping was not widely supported by the community. If decision is made to allow managed camping, that seems to contradict it.
- Aleita: Preference is for microshelters; but camping is for overflow.
- George: This is a difficult conversation: we deny reality if we don't have a managed camping site; and camping in other places poses environmental and neighborhood problems. A tent is only a step or tool in toolbox; but important to make impact.
- Jan: If no managed camping, need place for them to go—it is part of a continuum. We have COI and others opening up around city. Could do a virtual resource center; computers linked at good Sam and library to provide access with variety of service providers at resource center.
- Jim: The numbers of homeless are different if men's shelter and women's shelter can handle more capacity. 24/7 shelter then 120 campers is quite a bit less. Would need to be assessed.
- Jim: another intent question: consider scenarios, such as would camping outside of managed system be treated as illegal?
- Jan: Can we assume goals not to have camping; not allowed on public property.
- Jim: This is a significant statement and a stronger case for not allowing camping all over the place and for managed camping. It is spelled out but de-emphasized.
- Jan: Camping and tents are not good way for long-term living.

- Aleita: I feel those statements about posting illegalities does not make the document stronger.
- Julie: The intent of emergency managed camping is to stop unmanaged camping with its problems such as safety, litter, noise, etc.
- Jan: Unmanaged camping is a lose-lose.
- Jim: disagree with Aleita's comment: The community expects us to say something about it, so it is significant to say we want to see a path towards ending camping because we are providing adequate alternatives. We should be clear about our intent and what we are saying.
- Jan: We will hear from the community in April.
- Andrea: Don't think tents are good for people to live in; lots of problems. Torn as a service provider; need to investigate further.

- **HOPE TOPIC 3 DRAFT POLICY RECOMMENDATIONS: Transitional options for stability, safety, and health**

- 10. Prioritize investment based on public feedback and cost effective allocations of limited public resources.
 - ✓ The community supports the following shelter options (beyond just normal brick-and-mortar housing) in the following descending order:
 - Microshelters
 - Emergency shelter
 - RV/car camping
 - Tent camping.
 - ✓ Tent camping is the least supported transitional option from the public feedback due to concerns of fire, individual safety, community safety, litter, noise, and visibility. To transition people out of tent camping, we recommend that, if they are implemented, any transitional tent camping locations have time limits for every individual camper with evaluation of that person's progress towards securing permanent housing on a case-by-case basis. Case management to work on transitioning to stable housing must be provided for all persons at any transitional camping location.
 - We recognize there are individuals who will not engage in case management to transition out of homelessness.
 - Crisis response and crisis respite are needed for those who are unable to engage due to behavioral health conditions.
 - Criminal justice systems improvement is needed to add jail capacity for those who pose a threat to community safety.
- 11. Establish referral pathways to transitional and permanent housing resources for serious criminal offenders (sex offenders, felony convictions, etc.).
 - ✓ For example, a referral pathway from Benton County Parole & Probation to CHANCE to coordinate housing resources. *Note: there is a lack of data on the need for referrals for this population, although it is a known need. Explore and investigate this issue further.
- 12. Communication, Notice, and Community Involvement:
 - ✓ **Routine monthly updates** similar to the Corvallis Sustainability Coalition email updates. These updates should include news and reports about new services, new providers, decisions made on the topic of homelessness, how

to get involved, etc. Regional updates are needed that include all of Benton County.

- ✓ **Quarterly public forum** to provide verbal updates, answer community questions about recent updates, provide dialogue, and have a community conversation beyond the 10 minute comment period at each HOPE meeting. Recommend a minimum two hours.
- ✓ **A notice requirement to neighborhoods and businesses with opportunities for involvement for any new services or new transitional locations approved or funded by the city or county.** The intent of this notice and involvement requirement is to provide ample time and opportunity for community engagement.
 - Organizations funded by the city or county or approved to provide social services or transitional housing must provide routine opportunities for two-way communication and a mechanism to provide feedback for neighbors and nearby businesses. Organizations will forward neighborhood feedback to city and county funders to evaluate future funding decisions and encourage resolving issues with neighbors.
 - Community-wide notice should also be provided in the routine monthly community-wide communication.

FEEDBACK ON HOPE TOPIC 3 – DISCUSSION ON TRANSITIONAL

- Jan: SafeCamp took over a year; communication system is working; integrated within the neighborhood which is critical. Could have dashboard style website.
- Barbara: See some contradiction in terms of the overflow and emergency shelters and tent camping; and similar language in transition. Recommend we remove tent camping from emergency shelter and make inclusionary in transitional. Tent camping is not what public wants; helps us take unmanaged campers and put into spectrum/managed camping. Think in terms of heard at public level; without background we had in drafting this recommendation; it could be confusing.
- Flip: I really don't like tents but I visited safe camp; if we set aside tents can put microshelters in place instead of tents.
- Barbara: If person camping does not have access to hygiene; and now part of safe camp and improvement; next step can we get them into something with locking door.
- Julie noted language is redundant from emergency and transitional portion—thank you.

HOPE TOPIC 4 DRAFT RECOMMENDATIONS: Permanent Supportive Housing (PSH)

- 13. Increase development or acquisition of affordable housing units for permanent supportive housing (PSH)
 - ✓ Increase the PSH units by 20 new units per year for the next eight years to add at a minimum 160 new units of PSH in Benton County. “New” can be new construction or conversion of existing units to PSH units.
 - 1. Develop a framework for awarding funds that encourages, incentivizes, or requires, when possible, a certain percentage of PSH units in housing projects seeking affordable housing funding from the City of Corvallis.

- Establish a consistent resource to help people navigate the process to access social security and disability financial assistance. People with disabilities and elderly individuals are disproportionately represented in the homeless data. Programs like ASSIST and SOAR can be contracted with to expand the resources here to help people access disability and social security benefits.
 - ✓ 3. Engage with culturally specific and culturally responsive organizations to help connect communities of color to rental/income programs and ensure that program parameters are aligned with the needs of communities of color.
 - Establish a consistent resource to coordinate with Tribal Housing Authorities to provide referrals and connect Native American individuals with Tribal resources, such as housing vouchers, assistance, and support services.
- 15. Increase supportive services and stable funding streams to provide services to residents at more affordable housing locations
 - ✓ 1. County facilitate and coordinate collaboration among community partner organizations to expand PSH units as part of their behavioral health responsibility. (Existing providers: DevNW, Commonwealth, Corvallis Housing First, county health staff.)
 - ✓ 2. County facilitate increasing supportive services by leveraging Medicaid funding for non-county staff to provide behavioral health support, case management, peer support, and counseling/medication assistance. Case management is the most critical component to prioritize.
 - County Alcohol and Drug resources can increase their in-the-field work to do diagnoses that will allow for more resources for case management following the 1115 waiver.
 - ✓ 3. County facilitate collaboration with IHN and Samaritan to support more behavioral health services onsite at more permanent supportive housing units.

FEEDBACK ON HOPE TOPIC 4 - DISCUSSION

- Xan: Question: On-going talks about providing incentives to increase permanent supportive housing options. Do we want specific recommendations for city to create financial incentives for developers to include permanent supportive housing in their developments?
- Jim: City has dollars puts in affordable housing; can they incentivize developers for permanent supportive housing. Sometimes city gets requests for larger projects like housing units; may get a request from non-profit for 50 units; can city incentivize developers to include PSH units? We should talk about it some more. Don't know the answer yet.
- Julie: You ended up with "develop a framework for awarding funds that encourages, incentivizes, or requires, when possible, a certain percentage of PSH units in housing projects seeking affordable housing funding from the City of Corvallis. I think at times the City cannot require it because project could lose out on other funding—so leave to experts in community development to consider it.
- Jim: For now, that language will suffice.
- Jan: Thought we had concern about being fair market rent (section 8); part of rural Oregon counties could put limitation. Jim; misunderstanding about fair market rents; calculated based on Corvallis metro statistical area; not about areas outside of Benton county.

- Flip: What is difference between contractor building a permanent supportive house and apartment building?
- Jim: Permanent supportive housing has guaranteed way to pay rent and location of services. Andrea has property that has people living in rooms; another location might be apartments with all units permanent supportive housing; could be a duplex; the issue is not building type; whether it is congregate setting or scattered site or type of building that it works for.
- Flip: If building houses for permanent, smart to push like emerald village to keep rent low.
- Andrea: Permanent supportive housing; if apartment gets section 8 vouchers; rent support comes from federal government or put people in apartment complex who have voucher or applied for voucher and need gap funding; rent cannot exceed amount of voucher. For tiny homes, in order to access rent support, you have to comply with HUD regulations; if no voucher; people don't pay 30 percent of income.
- Flip: push idea that creating smaller homes not generate high rent; create beautiful little places to keep people from falling into gaps.
- Andrea; 15000 for micro shelter and no indoor plumbing.
- Flip: Emerald village as example; if we can incentive builders for smaller houses, if low rent do not have to keep funding/subsidizing it.
- Julie: yes, this flexibility is already included in their recommendation
- Jim: Not either or question; there is a place for it; not instead of other strategies as well; I was in affordable housing my career; sources of subsidies to build below market rents; we should pursue variety of strategies.
- George: In order to keep costs low; need large infusions of cash; private developer not going to do that; cash incentives; want to see more data about that. Market based solutions havne'See what has worked in other places.

-
- The last three recommendations apply to recommendations 1-15.
 - 16. **Organizational capacity** is needed to work on and implement these recommendations, and organizational capacity needs to be built within social service organizations to manage and provide the services.
 - ✓ **Paid, full-time staff are needed to work on, coordinate, and implement these recommendations on homelessness (whether that capacity is built internally or contracted out).** No new solutions can be successfully implemented without new staff whose job it is to work on the topic of homelessness. The following functions are needed to implement these recommendations: project management, coordination and outreach, land use planning, grants management (grant writing, contracting, grant administration, oversight, reporting).
 - Specifically, a team is needed to research and pursue sites for emergency and transitional sheltering, permanent supportive housing, and services locations. The type of work that DLR has done for the Criminal Justice Systems Improvement Project is needed to research sites, zoning, and other parameters to provide site-specific options for providers and city/county leadership to make informed choices.
 - ✓ **Invest in building organizational capacity at organizations that can manage all components of these recommendations and work to support and successfully transition people out of homelessness.** Invest in building

organizational capacity by supporting and collaborating with groups that have demonstrated efforts to provide emergency services in Benton County. If no local organizations wish to build and grow organizational capacity, recruit an organization to Benton County who can provide these services.

- Suggestions: expand the capacity of organizations that successfully are stabilizing people by adding microshelters at their locations. For example, Community Outreach Inc. (COI), Corvallis Housing First (CHF), and Safe Place have successful models of housing case management to transition people out of homelessness. Increase their capacity with funding for positions and microshelters at available locations.
- Capacity must be built for organizations to serve Benton County residents outside of Corvallis.

○ **17. Funding recommendations**

- ✓ Explore state, federal, and private funding to expand organizational capacity to work on these topics and to fund the implementation and permanent provision of all these recommended services. In partnership with providers, assess current funding streams to ensure funding is not being taken away from existing services but that additional funding is pursued.
 - Grant writing capacity at the city/county is needed to access additional funds that are available but are not being applied for.
 - County pursue additional funds from Community Development Block Grant in county areas and in partnership with municipalities who have not explored this funding option.
 - County explore Medicaid 1115 waiver funding for housing case managers, SAMHSA funding for transitional housing for individuals with a behavioral health diagnosis who do not fall into the SPMI population, new Transient Lodging Tax funding, and private foundations such as Meyer Memorial Trust, Oregon Community Foundation, McKenzie River Gathering, and Benton Community Foundation.
 - County explore cost/benefit of adopting a Construction Excise Tax. Local jurisdictions can levy a tax of up to 1 percent of the permit value on residential construction, and levy a tax with no cap on the permit value of commercial and industrial construction. For instance, the City of Corvallis levies a tax of 1% on residential construction and 1.5% on commercial and industrial construction. State law governs how the revenue can be used. Some is restricted for uses such as developing affordable housing and providing down payment assistance, and some is unrestricted.

○ **18. Legislative Advocacy**

- ✓ County and City elected officials must advocate for statewide leadership on local requirements for available beds in each county with accompanying state funding to support those required beds. This state requirement and funding is needed to address the migration of people to areas with services from areas with no services.
- ✓ State and federal funding for all of these topics must be advocated for by city

and county elected officials and by the League of Cities and Association of Counties once these recommendations are adopted.

- ✓ City and County explore partnership with OSU and counterparts in Lane County (Lane, Eugene, Springfield, and University of Oregon) to lobby for a state law allowing local tax revenue from Pac-12 events and on-campus sales to address the affordable housing impacts from the university population. The tax revenue would be split between the universities and the local municipalities to fund subsidized housing for low-income students and affordable housing for the surrounding community.

VI. Community Updates.

- Project Turnkey: Budget Inn opening this month. Tours available: <https://www.signupgenius.com/go/20f094eaaae22a31-tour>
- Andrea shared the link: <https://endhomelessness.org/ending-homelessness/solutions/permanent-supportive-housing/>
- Emergency Service Grant – COVID (ESG-CV) funding: bringing \$2.6 million into Benton County to bolster emergency sheltering, outreach, transitioning people out of homelessness.
- Street Outreach Response Team coming under the umbrella of the Corvallis Daytime Drop-in Center
- Crisis Resource Center and Crisis Response: work continues on developing these concepts and planning programming. Willamette Criminal Justice Council subcommittee, county behavioral health department, and Criminal Justice Systems Improvement work are all collaborating.

VII. Next Steps:

- April 13 from 4-6 pm: community engagement on the final draft of the policy recommendations.
- 4/28 meeting: finalize phased approaches/timelines for these recommendations
- May 20: joint meeting of City and County elected officials.
 - ✓ Executive Committee communicates the recommendations to the City and County elected officials.
 - ✓ City and County elected officials begin the process of reviewing and adopting recommendations.

VIII. Meeting was adjourned at 6 pm.

Benton County & City of Corvallis
Home, Opportunity, Planning, & Equity (HOPE) Advisory Board



Julie Arena, HOPE Program Coordinator
Benton County Health Department
4077 SW Research Way
Corvallis, OR 97339
541-766-0252 * Email: Julie.Arena@co.benton.or.us

HOPE MEETING AGENDA

April 28, 2021 from 4-6 PM

Meeting location: Zoom or phone in

Join Zoom Meeting: <https://cscteam.zoom.us/j/91929383646>
One tap mobile: +12532158782,,91929383646#
Dial by phone: +1 253 215 8782
Meeting ID: 919 2938 3646

AGENDA

- I. Welcome, Zoom Housekeeping, Overview of Agenda.....4pm
- II. Public Comment* (10 minutes)4:05pm
- III. Roll call and approve March meeting minutes4:15pm
- IV. Community Updates4:20pm
- V. Present and adopt the final draft of policy recommendations from the four Priority Topics based on public input, research, and data4:25pm
- VI. Next Steps5:55pm

*Public Comment: if you would like to make a public comment, please “raise your hand” in the Zoom meeting when you arrive or you can chat a message to the presenter. List your name and the general topic of your comment in the chat. Comments will be made in the order that people “raise their hand” or submit a chat. For people calling in from a phone line, there will be an opportunity for comment for participants who have called-in.

HOPE Advisory Board Meeting

4/28/2021

Zoom Meeting hosted by Julie Arena, HOPE Coordinator

Zoom Housekeeping

- All attendees are muted when they join.
- All attendees can unmute themselves and choose to be seen visually by clicking “Start Video” at the bottom of the screen.
- Public comment:
 - Type your name into the “Chat” area, say you want to make a public comment, and on what topic.
 - Example: “Julie – public comment – crisis response.”
 - For those on the phone, there will be an opportunity to comment, too.
- Questions during the meeting:
 - Type into the “Chat” area and send it to host, Julie Arena.

Meeting Logistics and Agenda

- 1. Meeting Overview**
- 2. Agreements and Culture**
- 3. Public Comment on any topics for 10 minutes**
- 4. Logistics:**
 - a. Vote to Approve 3/24/20 Minutes – roll call**
 - b. Board membership update**
- 5. Community Updates**
- 6. Presentation of final draft of Policy Recommendations**

Agreements for our culture + conduct:

Fun

Inclusive ✓✓

Humor

Food ✓

Action/roll up sleeves

Change the face of Homelessness

Honesty

Respect ✓

Consensus

Think before you speak

Courtesy ✓

Transparency

Recognize personal bias

Kindness ✓

Time management

Concise communication

Open minded ✓

Opinions matter

Data driven

Do your homework!

Patience

Authentic

Valuing personal experience

Dedication/work ethic
Honor the expectations of
the work

Public comment: 10 minutes

- **Comment limited to 2-3 minutes based on number of people wanting to comment**
- **Type into the “Chat” and say you want to make a public comment and on what topic.**
- **For those on the phone, I will ask if there are any public comments from callers.**
- **Can also submit written comments via email to Julie.Arena@co.Benton.or.us**

Community Updates

- Project Turnkey – Corvallis Housing First has acquired the Budget Inn for emergency sheltering and then permanent supportive housing.
- Based on the efforts and work from our local NAACP Corvallis/Albany Branch in partnership with the City and County, we have some good news about proactive equity on the topic of housing. The City of Corvallis Housing Division now has a [webpage](#) of information and resources, including the [petition](#) an individual property owner can fill out and submit to state courts to have a discriminatory covenant removed from a property (it is a state court process, not a city or county process).
 - Oregon state law already has nullified the legal power of any such discriminatory covenants, but property owners may also want to directly remove such covenants from their deed records, so there is a process for doing so. Benton County's Community Development webpage will have a link to the city's webpage to direct people to these resources.

Community Updates continued

- County mental health partnership with Corvallis Police Department on co-response pilot for 911 calls with a behavioral health need. Timeframe is TBD.
- Corvallis Police Department (CPD) Crisis Intervention Training (CIT) with the Benton County mental health (MH) division. CPD's goal is to have 100% of our sworn staff CIT trained. Pre-COVID the trainings for law enforcement were happening every quarter. The CIT training is a fully collaborative training that is an entire 40-hour week that covers a variety of MH topics, including trauma-informed care, mental health first aid, NAMI, high level medication training, etc. COVID has necessitated pausing these trainings, as they are a full-week, in-person training. The goal is to resume these as soon as it is safe to do so. It is important to note Benton County Sheriff's Office (BCSO), Philomath PD, and other area law enforcement agencies similarly prioritize CIT training for their staff.

Logistics: Vote to approve 3/24/20 minutes, roll call

Florence Anderson

Xan Augerot

Catherine Biscoe

Karyle Butcher

Bruce Butler

Bryan Cotter

Anita Earl

Joel Goodwin

George Grosch

Barbara Hanley

Aleita Hass-Holcombe

Nicole Hobbs

Christina Jancila

Charles Maughan

Pegge McGuire

Jim Moorefield

Andrea Myhre

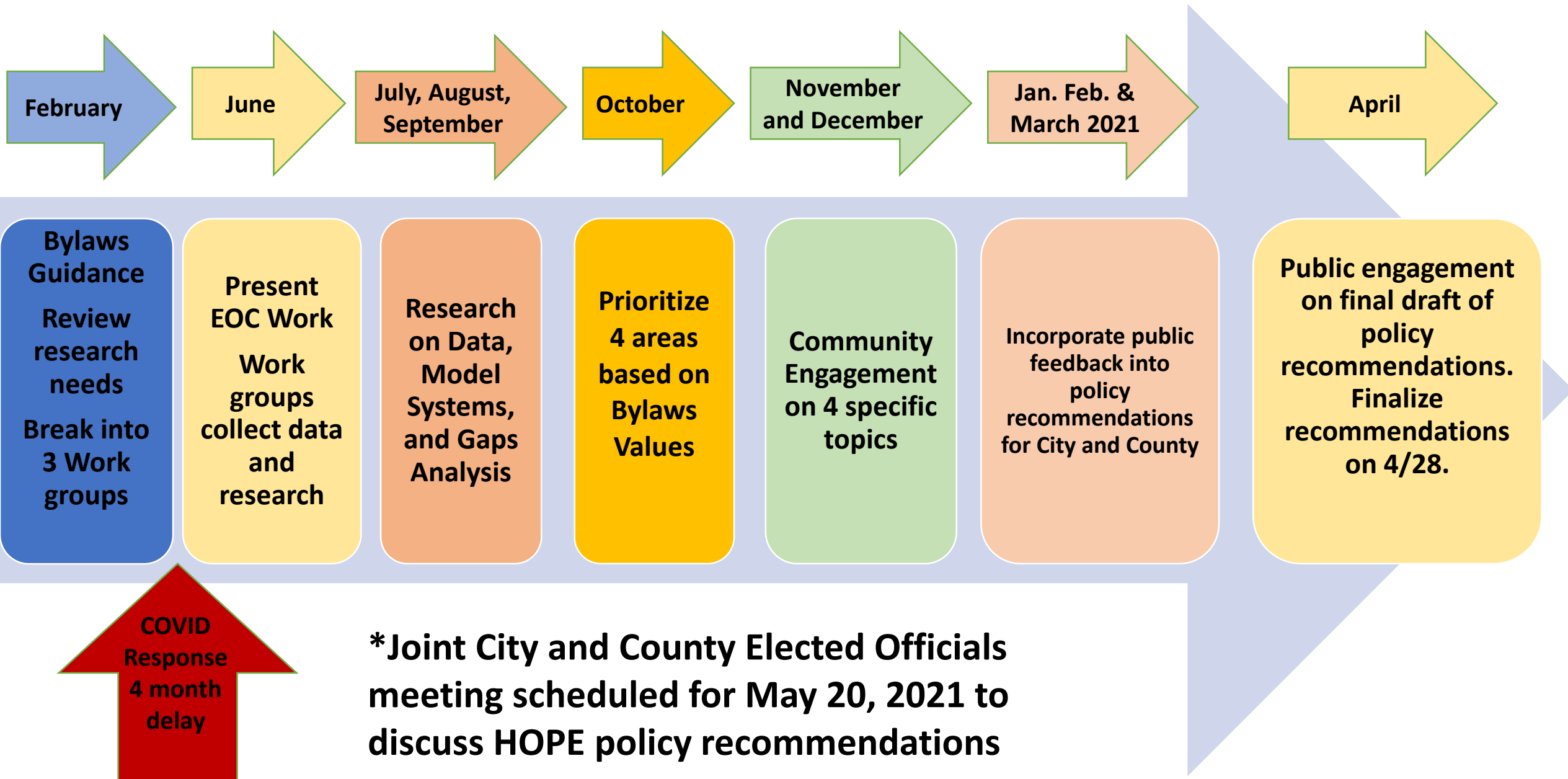
Jan Napack

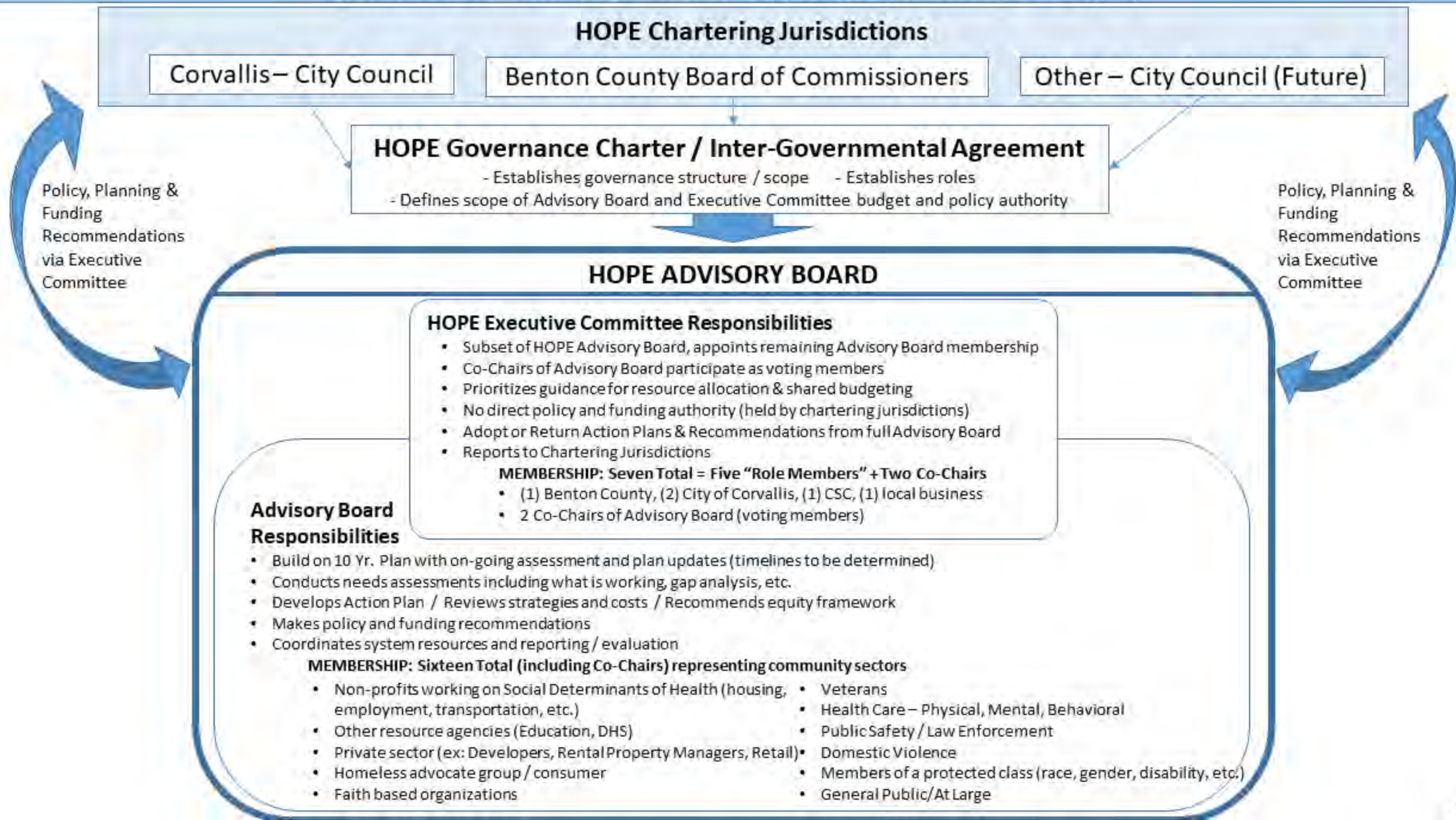
Reece Stotsenberg

Membership Update:

Lennox Archer and Linda Tucker
are no longer able to serve on
the HOPE Board.

HOPE Timeline – where are we now?





Priority Topic Areas

- Keep at the forefront diversity, equity, and inclusion recognizing identified disparities in our community data.
- HOPE Bylaws value: safety, vulnerable populations, and racial and ethnic justice.

1. Strengthen Crisis Response Resources: Align Services – Operational Changes for Improved Care Coordination:

- Coordination between existing providers with street outreach and Hub Model of care coordination. Increased case managers to support this care coordination from entry, transition, and permanent case management support to remain in housing.
 - Follow up case management and rental assistance to stay housed in whatever environment works for the individual.
- Data tracking coordinated between providers. Data collection coordinated between providers from entry, to transition, to permanent options.

2. Strengthen Crisis Response Resources: Location – Safe place to be 24/7 for all populations without housing that respects and addresses the needs of each individual.

3. Transitional Options for Safety, Health, and Stability

- Current providers are COI, Corvallis Housing First, and SafePlace.
- Additional examples include microshelters/conestoga huts, managed camping, RV and car camping in locations that are safe, sanitary, stable, and provide services for health.

4. Permanent Supportive Housing Units

- Definition: affordable, community-based housing for individuals and families who have experienced long-term or chronic homelessness and have been diagnosed as having a physical or developmental disability, a severe mental illness, substance abuse problems or HIV/AIDS; or are members of another designated group within the homeless population.
- Structures may include apartments, single-family houses, duplexes, group homes or single-room occupancy housing.
- Supportive services vary, most programs offer case management and housing support, but may also offer more intensive mental health, substance abuse, vocational, employment or other services which help promote independent living. Supportive services may be offered on-site or off-site, or be provided by a mobile service team. (LA County Taxonomy)

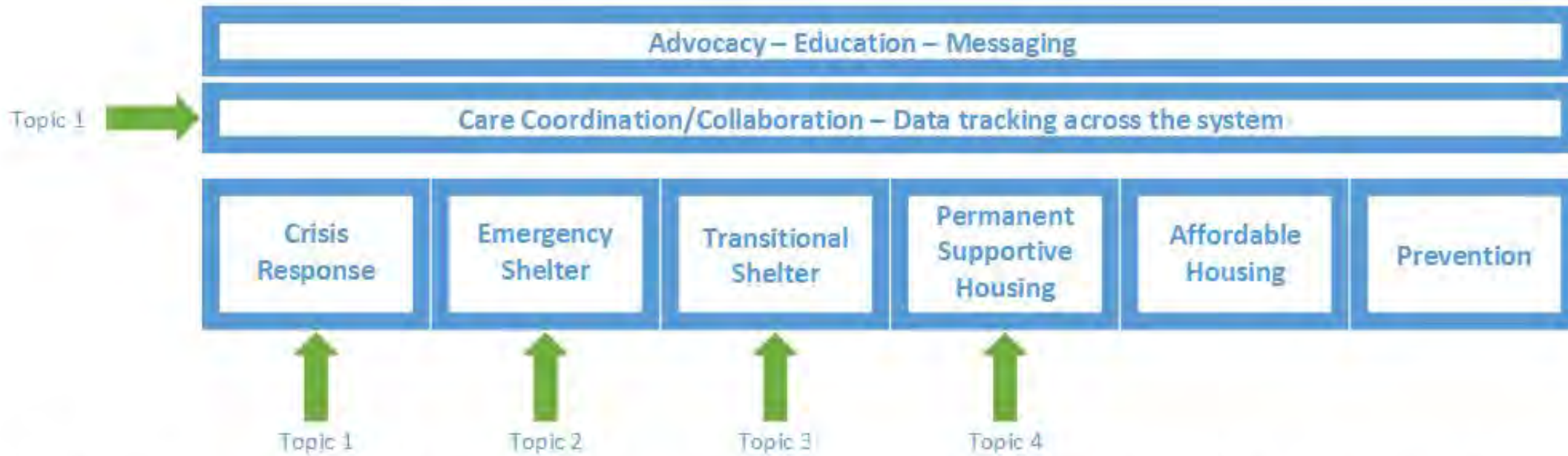
HOPE Priority Topics

- How did we arrive at these first four priority topics?
 - Data, research on model systems, analysis of the gaps in our system (summer 2020)
 - Prioritizing in October 2020 by where our data says we have the greatest:
 - Safety concerns
 - Racial and ethnic disparities
 - Vulnerable populations
- What can Benton County or the City of Corvallis do with policy recommendations on these topics?
 - Make code changes
 - Allocate funding from some limited funding streams (CET, CDBG, TLT)
 - Make decisions about staff time spent on certain topics
 - Make decisions to adopt and support policies
 - Adopt a near-consensus plan, that can be used to leverage additional state, federal and private dollars

Public Feedback Summary from November and December 2020:

- Online HOPE surveys
 - Topic 1 align services among providers: 177 responses (provider-only survey)
 - Topic 2 location for resources co-located with shelter: 367 responses
 - Topic 3 transitional options: 391 responses
 - Topic 4 permanent supportive housing: 470 responses
- Client surveys collected in person: 244 responses
- Qualitative feedback from community listening sessions and write-in responses to surveys
- Full public feedback presentation available [here](https://www.co.benton.or.us/sites/default/files/fileattachments/health_department/page/7203/hope_advisory_board_meeting_1_27_21_final.pdf) (https://www.co.benton.or.us/sites/default/files/fileattachments/health_department/page/7203/hope_advisory_board_meeting_1_27_21_final.pdf)

HOPE Advisory Board Priority Topics – Systemic Vision



To Implement All of the Recommendations, the following three systemic changes are needed:

- Organizational capacity is needed to work on and implement these recommendations, and organizational capacity needs to be built within social service organizations to manage and provide the services.
- New Funding Sources
- Legislative Advocacy

HOPE Policy Recommendations on First Four Priority Topics

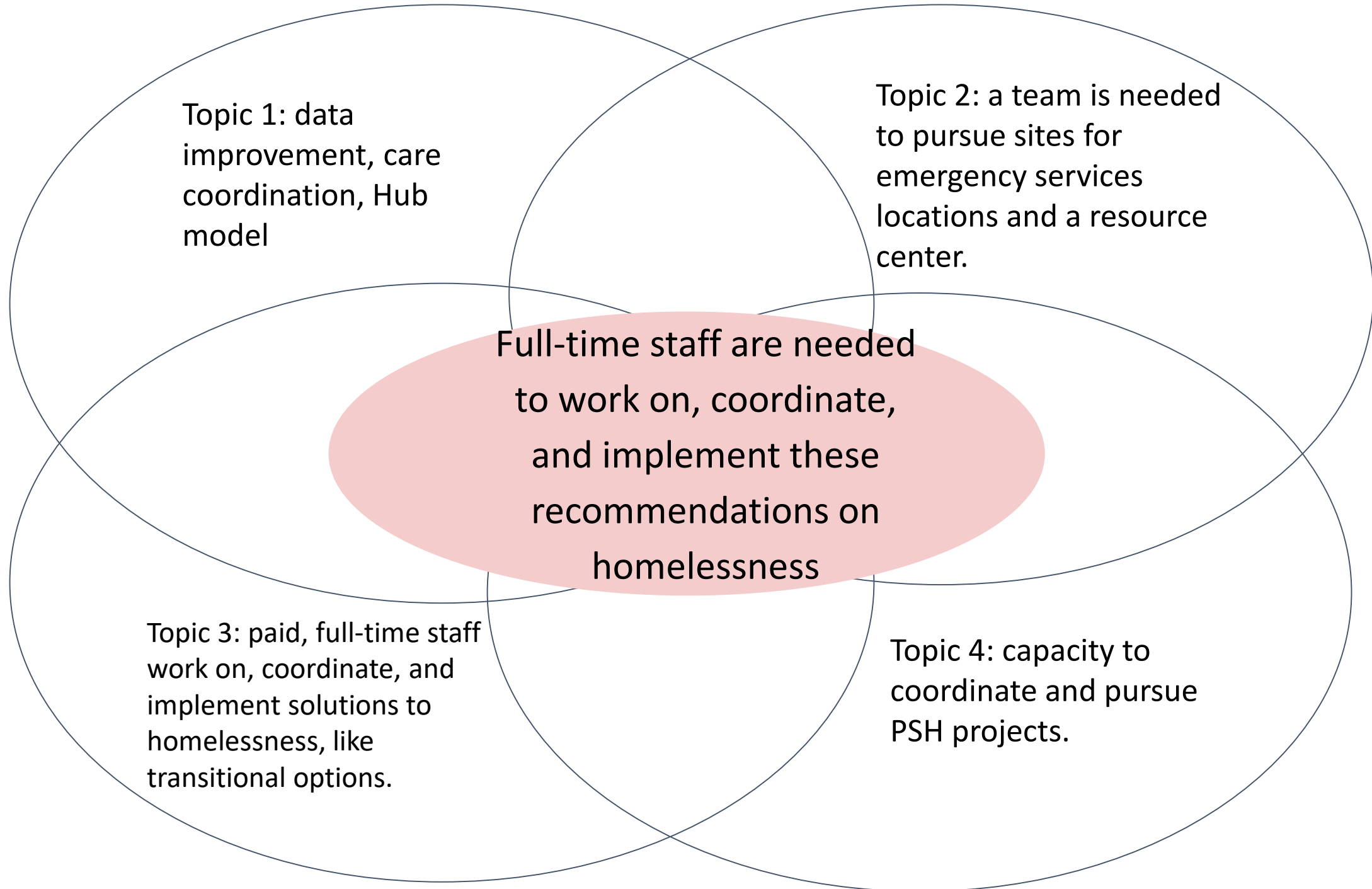
Policy Recommendations

The Board did not collect public feedback on the first three recommendations (A, B, C) to implement the 12 policy recommendations:

A. Organizational capacity is needed to work on and implement these recommendations, and organizational capacity needs to be built within social service organizations to manage and provide the services.

B. Funding recommendations

C. Legislative Advocacy



Topic 1: data improvement, care coordination, Hub model

Topic 2: a team is needed to pursue sites for emergency services locations and a resource center.

Full-time staff are needed to work on, coordinate, and implement these recommendations on homelessness

Topic 3: paid, full-time staff work on, coordinate, and implement solutions to homelessness, like transitional options.

Topic 4: capacity to coordinate and pursue PSH projects.

Topic 1: case managers to do outreach and care coordination

Topic 2: to provide onsite services to transition people out of homelessness once they have stabilized at this emergency location

Paid, full-time staff to support people transitioning out of homelessness.

Topic 3: work with IHN-CCO and Samaritan on workforce capacity for housing case managers, peer support specialists, and social service providers

Topic 4: Case managers needed as part of permanent supportive housing

A. Organizational capacity is needed to work on and implement these recommendations, and organizational capacity needs to be built within social service organizations to manage and provide the services.

A. 1. Organizational capacity to implement these recommendations means prioritizing homelessness and pro-active housing solutions within existing city and county departments and increasing capacity with additional staff to work on, coordinate, and implement these recommendations on homelessness (whether that capacity is built internally or contracted out).

No new solutions can be successfully implemented without new staff whose job it is to work on the topic of homelessness. The following functions are needed to implement these recommendations: **project management, coordination and outreach, land use planning, and grants management (grant writing, contracting, grant administration, oversight, reporting).**

A. Organizational capacity continued

- Specifically, a team is needed to research and pursue sites for sheltering, permanent supportive housing, and service locations. The type of work that DLR has done for the Criminal Justice Systems Improvement Project is needed to research sites, zoning, and other parameters to provide site-specific options for city/county leadership and service providers to make informed choices about where to locate the different components of a sheltering system, resource center, transitional living options, and permanent supportive housing.
- Coordination capacity is needed to routinely convene city and county staff (and community based organizations) who all interact with individuals who are experiencing homelessness: parks, public works, health department, community development department, fire, and police. For example, health department staff give out tents and supplies that are being thrown away by parks staff.
- This increased capacity to manage homeless issues by the City and County also includes directing departments to prioritize coordination internally on the topic of homelessness by making homeless response part of their annual work plan.
- Regional outreach and coordination with adjacent cities and counties is needed to provide communication, collaboration, and regional approaches to addressing homelessness.

A. Organizational capacity continued:

A. 2. Invest in building organizational capacity at organizations that can manage all components of these recommendations and work to support and successfully transition people out of homelessness. Invest in building organizational capacity by supporting and collaborating with groups that have demonstrated efforts to provide services in Benton County. If no local organizations wish to build and grow organizational capacity, recruit an organization to Benton County who can provide these services.

- Other suggestions: expand the capacity of organizations that successfully are stabilizing people by adding microshelters at their locations. For example, Community Outreach Inc. (COI), Corvallis Housing First (CHF), and Unity Shelter have successful models of housing case management to transition people out of homelessness. Increase their capacity with funding for positions and microshelters at available locations.
- Capacity must be built for organizations to serve Benton County residents outside of Corvallis.

B. Funding recommendations:

Explore state, federal, and private funding to expand organizational capacity to work on these topics and to fund the implementation and permanent provision of all these recommended services. In partnership with providers, assess current funding streams to ensure funding is not being taken away from existing services but that additional funding is pursued. Allocate resources to organizations that work toward implementing these policy recommendations. Prioritize resource allocation based on community feedback.

1. Grant writing capacity at the city/county is needed to access additional funds that are available but are not being applied for.
2. County pursue additional funds from Community Development Block Grant in county areas and in partnership with municipalities who have not explored this funding option.
3. County explore SAMHSA funding for transitional housing for individuals with a behavioral health diagnosis who do not fall into the SPMI population, new Transient Lodging Tax funding, and private foundations such as Meyer Memorial Trust, Oregon Community Foundation, McKenzie River Gathering, and Benton Community Foundation. If the state-controlled Medicaid 1115 waiver allows funding for housing case managers, county pursue additional capacity for housing case managers.

B. Funding recommendations continued

4. County explore cost/benefit of adopting a Construction Excise Tax. Local jurisdictions can levy a tax of up to 1 percent of the permit value on residential construction, and levy a tax with no cap on the permit value of commercial and industrial construction. For instance, the City of Corvallis levies a tax of 1% on residential construction and 1.5% on commercial and industrial construction. State law governs how the revenue can be used. Some is restricted for uses such as developing affordable housing and providing down payment assistance, and some is unrestricted.
5. Allocate local and state resources to programs that work to implement these recommendations.
6. Prioritize investment based on public feedback and cost effective allocations of limited public resources. The community supports the following options (beyond just normal brick-and-mortar housing) in the following descending order:
 - i. Microshelters
 - ii. Emergency shelter
 - iii. RV/car camping
 - iv. Tent camping.

C. Legislative Advocacy:

- County and City elected officials must continue to advocate for statewide leadership on local requirements for shelter beds in each county with accompanying state funding to support those required beds. **This state requirement and funding is needed to address worries about migration of people to areas with services from other areas.**
- State and federal funding for all of these topics must continue to be advocated for by city and county elected officials and by the League of Cities and Association of Counties once these recommendations are adopted.
- City and County explore partnership with OSU and counterparts in Lane County (Lane, Eugene, Springfield, and University of Oregon) to lobby for a state law allowing local tax revenue from Pac-12 events and on-campus sales to address the affordable housing impacts from the university population. The tax revenue would be split between the universities and the local municipalities to fund subsidized housing for low-income students and affordable housing for the surrounding community.

12 Policy Recommendations

1. Facilitate and coordinate data improvement efforts with community partners.
2. Work with providers to create metrics for successful program goals.
3. Convene providers at routine meetings for improved care coordination facilitated by a full-time staff member.
4. Collaborate with social service and health care partners to increase the number of paid, full-time case managers to support people transitioning out of homelessness.
5. Pursue implementation of a crisis response team and collect data on law enforcement response to unhoused individuals to understand the magnitude of responses and cost savings from a crisis response team.
6. Provide organizational capacity to facilitate and coordinate providers in establishing a 24/7/365 Sheltering System for all populations with onsite resources at shelter locations to transition people out of homelessness.

Recommendations continued:

7. Facilitate and support the creation of a Resource Center.
8. Explore and investigate the need and the barriers to accessing housing for individuals and their families in our community whose past history has impacted their ability to secure housing.
9. Provide routine communication, notice, and opportunities for community involvement on the topic of homelessness services.
10. Increase development or acquisition of affordable housing units for permanent supportive housing (PSH) by 20 new units per year for the next eight years to add at a minimum 160 new units of PSH in Benton County.
11. Increase available rental/income assistance options.
12. Increase supportive services and stable funding streams to provide services to residents at more affordable housing locations.

Public Feedback on Draft Recommendations:

- A 2-hour public forum on 4/13/21. Video posted on HOPE Community Engagement website:
<https://www.co.benton.or.us/health/page/hope-community-engagement>
- 420 responses to the online survey from 4/1-4/15/21
- In-person focus groups for clients at Corvallis Housing First, Community Outreach Inc., Corvallis Daytime Drop-in Center, and SafeCamp
- Email feedback submitted to HOPE Coordinator:
Julie.Arena@co.Benton.or.us

These recommendations are grounded in the following:

- Data: our data shows we have gaps in our system of services for individuals in crisis due to homelessness. A gap is where there is a needed service or type of housing for people but that service/housing does not exist at all or does not exist for a certain population.
- Prioritizing vulnerable populations and safety for all (individual safety and community safety), while actively working to reduce racial and ethnic disparities based on where our data shows these factors exist. Vulnerable populations include people with a behavioral health condition (mental health or substance use disorder), LGBTQ community, elderly, children, veterans, and individuals with disabilities.
- A systems-level approach: all four of these topic areas are crucial to a successful system of housing and services to transition people out of homelessness and support them in remaining housed.
- Public feedback: the majority of quantitative and qualitative public feedback shows support for the following recommendations.

1. Facilitate and coordinate data improvement efforts with community partners.

- Public feedback: the most supported recommendation.
- Changes made: none.

1. Facilitate and coordinate data improvement efforts with community partners.

- **Description:** Work with providers to improve data collection/tracking and to reduce duplicative data entry and data management. Data collection efforts will include a human services coalition model that is a statewide model: service providers come together to say what their priorities are and how they would implement them. Implementation is recommended immediately and could be accomplished with an existing staff person.
- **Background:** coordinated data collection and analysis of community-wide data support communities' efforts to end homelessness by understanding which individuals continue to cycle into homelessness and which providers and partners continue to interact with them. Best practices from a trauma-informed care perspective are to reduce the number of times an individual must recount their history and circumstances to access assistance.

2. Work with providers to create metrics for successful program goals to track which services are successful interventions in transitioning people out of homelessness. Implementation can be immediate with existing staff person.

- Public feedback: well-supported, no changes needed.
- Changes made: none.

2. Work with providers to create metrics for successful program goals to track which services are successful interventions in transitioning people out of homelessness. Implementation can be immediate with existing staff person.

- **Description:** successful program metrics assist with tracking which services deploy successful interventions in transitioning people out of homelessness. Implementation can be immediate with existing staff person.
- **Background:** success metrics will help funders understand the value of their funding decisions, help us communicate with the community, and allow us to continually adapt and refine services to achieve the desired transition from homelessness for as many people as possible.

3. Previous language: Adopt the Hub Model of care coordination as a framework for doing business that coordinates existing partners.

- Public feedback: the term “Hub Model” is not well understood, more explanation is needed of this model. Clients and service providers would like the flexibility for individuals to be able to attend a meeting like this if they want to and can. A pre-meeting between clients and their case manager before the main meeting can gauge the person’s desired outcomes and needs.
- Changes made: describing the meeting and its purpose instead of using the term “hub” since it has confused clients and the general community. Adding flexibility to allow for the client to attend if they would like to be present.

3. Updated language: Convene providers at routine meetings for improved care coordination facilitated by a full-time staff member.

- **Description:** This model brings together different providers and partners at routine meetings to coordinate care for individuals with high and complex needs on a case-by-case basis. The purpose of this model is to bring together partners to improve the lives of individuals who are interacting with multiple systems. This model of care coordination has been referred to as “case conferencing,” Frequent Users Systems Engagement (FUSE), and also the “Hub model” of care coordination.
- This model should allow for flexibility for the client to be able to attend if they would like to or not attend if they do not wish to or are unable to do so. A pre-meeting with a case manager and the client is needed prior to the all-provider meeting to assess the client’s ability and interest in attending and their goals for progress to inform the coordination.

3. Updated language continued: **Convene providers at routine meetings for improved care coordination facilitated by a full-time staff member.**

- The staff position to coordinate these meetings should be full-time and could be a health navigator, case manager, community health worker, or program coordinator. This same staff position is needed to do an assessment of funding streams: with input from city/county and providers, to assess all available funding streams coming into Benton County (including Corvallis) that fund this work to blend funding streams.
- Implementation: can be done immediately if an existing staff person is available, until an FTE can be budgeted for this role.

3. Updated language continued: **Convene providers at routine meetings for improved care coordination facilitated by a full-time staff member.**

- Hub spokes needed at the table should be diverse and culturally-versed: Benton County Health Department (BCHD), Corvallis Daytime Drop-in Center (CDDC), Unity Shelter, Community Outreach Inc. (COI), Unity Shelter, Corvallis Housing First (CHF), the Center Against Rape and Domestic Violence (CARDV), Samaritan, Inter-community Health Network-Coordinated Care Organization (IHN-CCO), Jackson Street Youth Services (JSYS) when needed, the state Department of Health Service (DHS), Tribal liaisons, case managers, Casa Latinos Unidos (CLU), Philomath Community Services (PCS), South Benton Food Pantry (SBFP), Job training/vocational rehab, law enforcement/first responders, crisis response team members, Street Outreach Response Team (SORT) members, social security/disability advocacy, faith-based community volunteers, Older Adult Behavioral Health Initiative to do system-level coordination, Oregon Cascades West Council of Governments (OCWCOG). Any other provider who can provide access to services for a person in need.

3. Updated language continued: **Convene providers at routine meetings for improved care coordination facilitated by a full-time staff member.**

- Geographic service area suggestion: the details and frequency can be decided by the Hub participants, but based on public feedback we recommend having routine monthly Hub meetings for Corvallis-centric clients, South Benton clients, and Philomath/West Benton clients (and other geographic regions as needed).
- **Background:** This model is similar to the former Benton County Adult Services Team and the current Homeless and Vulnerable Patients Workgroup convened by Samaritan.

4. Previous language: Paid, full-time staff are needed as case managers to support people transitioning out of homelessness. Case managers should have commensurate experience and background that reflects the people they are serving from a cultural perspective and based on lived-experience.

- Public feedback: clarify the city/county role and the need for case managers all over the county.
- Changes made: wording edited to clarify the city/county role and the need for more case managers in Corvallis and throughout the county.

4. Updated language: Collaborate with social service and health care partners to increase the number of paid, full-time case managers to support people transitioning out of homelessness.

- **Description:** there is a need for more case managers with experience and backgrounds that reflects the people they are serving from a cultural perspective and based on lived-experience.

4. Updated language continued: **Collaborate with social service and health care partners to increase the number of paid, full-time case managers to support people transitioning out of homelessness.**

- County: work with IHN-CCO and Samaritan on workforce capacity for housing case managers, peer support specialists, and social service providers to utilize funding from Medicaid and SAMHSA block grant resources.
- County: in addition to increased case managers in Corvallis, rural areas outside of Corvallis also need additional mobile/regional staff to support people's housing needs and transition out of homelessness.
- City and county work with OSU, LBCC, and any other local educational institutions on expanding internship workforce capacity from student populations.
- **Background:** case management is vital to support the transition out of homelessness. Not enough case managers are available in our community to support the need.

5. Previous language: Pursue the feasibility and implementation of a crisis response team.

- Public feedback: resounding support for the concept. Lots of support for a non-law enforcement response and lots of support for a co-response with mental health and law enforcement together. Questions about the data on this need.
- Changes made: add a data collection recommendation to understand the magnitude of the need for crisis response and potential cost savings from this model. Add a co-response recommendation based on public feedback.

5. Updated language: Pursue implementation of a crisis response team and collect data on law enforcement response to unhoused individuals to understand the magnitude of responses and cost savings from a crisis response team.

- **Description:** HOPE recommends a non-police intervention for crisis situations due to homelessness and behavioral health issues. A co-response with behavioral health professionals and law enforcement is also needed depending on the situation. Coordination with street outreach and harm reduction is vital to ensure collaboration with overlapping populations.
- **Background:** HOPE's research, data, and community feedback fully support ongoing efforts to implement a Crisis Response Team to redirect calls from law enforcement and provide team partnerships with law enforcement when an officer is necessary. We recognize that ongoing efforts are occurring with the Criminal Justice Systems Improvement project and the Willamette Criminal Justice Council. We recommend continuing to pursue implementation in those existing forums with experts on the topic of crisis response.

6. Previous language: Benton County needs a 24/7/365 Emergency Sheltering System for all populations with onsite resources at any shelter location to transition people out of homelessness.

- Public feedback: many worries about attracting people here/being a magnet for services, location(s) that don't negatively impact businesses, neighborhoods, and parks, having a requirement to work on transitioning/self-sufficiency/responsibility once stabilized. The urgency of a place for tent and car campers to go – from the client and community-wide perspectives. If folks can stay here 24/7 while they work on transitioning, let's call this a shelter system instead of an emergency shelter.
- Changes made: terminology updated to remove “emergency” from the Sheltering System title since individuals will be assigned that bed space for a period of time while they work with a case manager (they do not have to leave during the day like the historical emergency shelter locations). Major addition: a recommendation about the most urgent need being a place to move tent and vehicle campers where it is not illegal so they can stabilize and work on transitioning out of homelessness.

6. Updated language: Provide organizational capacity to facilitate and coordinate providers in establishing a 24/7/365 Sheltering System for all populations with onsite resources at shelter locations to transition people out of homelessness.

This organizational capacity is needed to determine possible sites for sheltering, the logistics of implementation, and the ongoing funding from sources that minimize the use of general fund dollars. (See the first recommendation A for details on the organizational capacity needed in the form of project coordination, project management, land use planning, and grant writing.)

- **Description:** any shelter needs space for warming/cooling from the elements during the day. Individuals are assigned a bed space that is theirs 24/7 while they work with a case manager on transition. Emergency sheltering 24/7/365 with onsite resources is referred to as a “navigation center” in pending legislation (HB 2004 and HB 2006, 2021 Session).

6. Updated language continued: Provide organizational capacity to facilitate and coordinate providers in establishing a 24/7/365 Sheltering System for all populations with onsite resources at shelter locations to transition people out of homelessness.

- **We recommend the following six components of a sheltering system to address safety concerns for different populations:** congregate male, congregate female, non-congregate sheltering (like motel rooms or microshelters), managed tent camping, managed car/RV/trailer camping, and mobile service delivery to alternate locations. The team working to implement this sheltering system should look at available current and historic data to fine-tune the recommended estimates.
- **Initial Estimates of Need (long description)**

6. Updated language continued: Provide organizational capacity to facilitate and coordinate providers in establishing a 24/7/365 Sheltering System for all populations with onsite resources at shelter locations to transition people out of homelessness.

Recommended components of a Sheltering System:

- **Shelter Accessibility:**

- Shelter is accessible 24/7/365.
- Shelter is low barrier upon arrival to get individuals off the street. Options are available, but not required, for individual involvement to support the location while they work on transitioning, such as doing laundry, cleaning, or helping to provide food.
- Necessary components at any emergency sheltering location: walking and biking access, public transportation access, and safety. Safety concerns for everyone involved need to be addressed. Security, lighting, fire code, and immediate access for emergency personnel must be considered.

6. Updated language continued: Provide organizational capacity to facilitate and coordinate providers in establishing a 24/7/365 Sheltering System for all populations with onsite resources at shelter locations to transition people out of homelessness.

Recommended components of a Sheltering System:

- **Shelter facilities and onsite services:** necessary services at any shelter location include showers, bathrooms, drinking water, food provided on-site (to minimize need to travel to multiple locations for food), laundry, wifi, lockers for items for those in congregate shelter, mail service, and office space for meeting with providers like a case manager, mental health and addiction support person, and someone who can help enroll people in assistance programs.
- **Shelter is temporary** and is not a permanent housing solution. The duration of a person's stay will vary based on their needs, their progress with a case a manager, and availability of an appropriate transitional or permanent option.

6. Updated language continued: Provide organizational capacity to facilitate and coordinate providers in establishing a 24/7/365 Sheltering System for all populations with onsite resources at shelter locations to transition people out of homelessness.

Recommended components of a Sheltering System:

- **A limited overflow area is needed** at any sheltering location for people who show up with a tent or car/RV. Tent and car/RV camping is time limited, and the individual must engage to transition to another option. RV sites must have gray and black water dump hookups for appropriate hygiene. The overflow area is under the supervision of the host organization.
- **Hygiene and basic needs services accessible to any individuals**, even those not staying in the shelter system: an area for warming/cooling from the elements where someone can be 365 days/year who is experiencing homelessness to minimize the need to go to multiple locations throughout the day to stay warm or get cool. There must be hygiene facilities, wifi, lockers, and food services that are accessible to individuals to balance the negative impacts on our natural areas and waterways for those without access to basic hygiene.
- **Definitions section** (long description)

6. Updated language continued: **Provide organizational capacity to facilitate and coordinate providers in establishing a 24/7/365 Sheltering System for all populations with onsite resources at shelter locations to transition people out of homelessness.**

Background:

- **Challenges:** implementing this recommended emergency sheltering system will take time, resources, and political will. There are challenges with site identification, concentration of populations living in poverty, and the need for separation of some populations for safety.
- **Leadership:** there needs to be collaboration of leadership with providers and with the city and county supporting project management for project design and site planning to insure the following issues are addressed:
 - Geographic locations and siting options.
 - Adequate public transportation schedule to support client needs.
 - Service providers must be included as leaders to determine adequate spacing between populations. Suggestions from providers include separate floors, separate buildings, and/or microshelter rows for different populations.
 - Capacity is needed to research and explore available geographic areas in Corvallis, the urban growth boundary around Corvallis, and the county areas surrounding the urban growth boundary to find all possible locations for the different components for a sheltering system.

Phased Implementation to bolster Emergency Sheltering System: all of the components outlined for an emergency sheltering system will take staff capacity and time to be implemented. While the city and county work to build the organizational capacity and sustainable funding to support the long-term vision of implementing these components, the city and county must facilitate and support the enhancement of service capacity for these most urgent needs:

- The men's shelter must be open 24/7/365 with additional service providers meeting with men onsite to transition them to transitional or permanent supportive housing.
- The City of Corvallis and County, in partnership with IHN, Samaritan, and other service providers, should facilitate building the capacity for mobile service delivery to distributed microshelters, RV/trailer/car camping, and managed tent camping locations. This mobile service delivery can serve populations both within Corvallis urban growth boundary and the greater Benton County areas that have expressed the need for access to services.
- The most urgent need voiced by clients and providers is a safe place to locate their tent or vehicle so they can stabilize, access services, secure a job, and transition out of homelessness. Basic needs of safety, sleep, food, and hygiene need to be met first before people can work on transitioning out of camping. This is also the most urgent need voiced by community members who are housed – addressing the unmanaged tent and vehicle camping throughout the community by having a place for managed camping in tents and vehicles so they do not continue to disperse and move from one street or natural area to another.

7. Previous language: Facilitate and support the creation of a Resource Center.

- Public feedback: lots of confusion about whether or not this already exists. Lots of fear about tax increases to fund it. Sentiment about attracting people here and only wanting to help people “from here.” Need to stress the statewide advocacy for funding for all counties to provide services.
- Changes made: updated description to address transit needs and working toward self-sufficiency.

7. Updated language: Facilitate and support the creation of a Resource Center.

Description: the Resource Center should have office space for providers from different organizations to meet with people, enroll them in programs, and work on improving their economic stability with sufficient means to meet their needs. The city and county should facilitate and support the collaboration between the providers to choose the best location options and determine who will occupy and manage this Resource Center. Must have public transit, walking, and biking access. A dedicated shuttle service from shelter locations around the community will support access beyond just public transit.

- Ideal location: capacity is needed to research and explore available geographic areas in Corvallis, the urban growth boundary around Corvallis, and the county areas surrounding the urban growth boundary (similar to the work DLR has done for criminal justice components sites). Best options would be co-located adjacent to or very near some sheltering. Second best is very short walking distance. Also possible would be a shuttle system from shelter locations to the resource center.

7. Updated language: Facilitate and support the creation of a Resource Center.

Background: supporting co-location of service providers from multiple organizations decreases the travel and number of different locations people must go to meet their needs. Having some shared space at one location does not mean that an organization entirely relocates their operation. It means that representatives from different organizations are co-located to coordinate care in one location. Most clients have to travel to multiple places (between 5-10 different geographic locations) to enroll in the numerous programs available to them.

The Resource Center can have office space for service providers like Community Services Consortium (CSC), Council of Governments (COG), United Way, county health navigators to enroll people in OHP, housing case managers to work on transitioning people out of homelessness, assistance with vital records (drivers license, social security card, etc.), assistance with applying for and accessing disability and social security income, job assistance, veterans programs, space for representatives from the Center Against Rape and Domestic Violence (CARDV), Jackson Street Youth Services (JSYS), Community Outreach Inc. (COI), Casa Latinos Unidos, Tribal liaison, NAACP representative, Unity Shelter, Corvallis Housing First, Linn Benton Housing Authority, other housing entities, state entities like DHS, etc.

8. Previous language: Establish referral pathways to transitional and permanent housing resources for serious criminal offenders (sex offenders, felony convictions, etc.).

- Public feedback: people misinterpreted this wording to think that the Board wanted a pipeline of ex-convicts to find housing here.
- Changes made: edited wording to mention criminal history AND other history that makes it difficult to secure housing. More investigation needed to understand the magnitude of the need and explore solutions.

8. Policy Recommendation: explore and investigate the need and the barriers to accessing housing for individuals and their families in our community whose past history has impacted their ability to secure housing

- **Description:** people with past criminal histories, bad credit scores, and previous evictions continue to be disqualified from housing and remain unhoused. Housing assistance for people with conviction histories is lacking once they do not qualify for support from county Parole and Probation.
- **Background:** individuals with difficult histories end up living in their cars or RVs throughout the community. These individuals and their families are already a part of our community. There is a lack of data on the need for referrals for this population, although it is a known need based on provider feedback. Explore and investigate this issue further.

9. Previous language: Routine communication, notice, and community involvement need to happen on the topic of homelessness services.

- Public feedback: community would like a way to give feedback directly to city and county instead of only to service providers. They would like accountability in funding decisions based on community feedback.
- Changes made: added in a recommendation to create a mechanism for public feedback directly to city and county about funding for social service providers.

9. Communication, Notice, and Community Involvement:

- **Routine monthly updates** similar to the Corvallis Sustainability Coalition email updates. These updates should include news and reports about new services, new providers, decisions made on the topic of homelessness, how to get involved, etc. Regional updates are needed that include all of Benton County.
- **Quarterly public forum** to provide verbal updates, answer community questions about recent updates, provide dialogue, and have a community conversation beyond the 10 minute comment period at each HOPE meeting. Recommend a minimum two hours.

9. [Changes to this third portion in bold]

- A notice requirement to neighborhoods and businesses with opportunities for involvement for any new services or new transitional locations approved or funded by the city or county. The intent of this notice and involvement requirement is to provide ample time and opportunity for community engagement.
 - Organizations funded by the city or county or approved to provide social services or transitional housing must provide routine opportunities for two-way communication and a mechanism to provide feedback for neighbors and nearby businesses.
City/county establish a mechanism for community members to provide feedback on services and organizations directly to the city and county provider (via email, website, and postal option) instead of only to the service provider. City/county track community feedback for improved accountability and to make informed decisions about future funding allocations. Organizations will forward any neighborhood feedback to city and county funders to evaluate future funding decisions and encourage resolving issues with neighbors.
 - Community-wide notice should also be provided in the routine monthly community-wide communication.

10. Increase development or acquisition of affordable housing units for permanent supportive housing (PSH) by 20 new units per year for the next eight years to add at a minimum 160 new units of PSH in Benton County.

“New” can be new construction or conversion of existing units to PSH units. PSH is necessary for a small portion of our unhoused community who need permanent support to remain stably housed.

- Public feedback: worries about increased utility, water, and property tax bills.
- Changes made: updated terminology to indicate new funding sources from grant opportunities that already exist but that the county has not had the staffing capacity to apply for, disburse, oversee, and manage.

10. Increase development or acquisition of affordable housing units for PSH

Description: permanent supportive housing (PSH) is necessary for a small portion of our unhoused community who need permanent support to remain stably housed. “New” units can be new construction or conversion of existing units to PSH units. Increasing PSH will decrease the number of chronically homeless individuals in the community and result in cost savings. (<https://endhomelessness.org/wp-content/uploads/2017/06/Cost-Savings-from-PSH.pdf>)

- Develop a framework for awarding **currently available grant** funds that encourages, incentivizes, or requires, when possible, a certain percentage of PSH units in housing projects seeking affordable housing funding from the City of Corvallis.
 - County pursue additional grant funding streams to increase PSH units in greater Benton County to implement this recommendation.

10. Increase development or acquisition of affordable housing units for PSH

- Coordination with City and County Community Development (CD) Departments is necessary to support this work. CD Departments should actively facilitate and encourage local organizations' applications for grant funding and technical assistance from evidence-based approaches (for instance, state-level OHCS funding and technical assistance from The Corporation for Supportive Housing).
 - County collaborate with other cities in the county to increase PSH units outside of Corvallis.
- City/county evaluate non-traditional zoning and code solutions to respond to the need for more permanent living options:
 - Permanent tiny home villages.
 - Emerald Village in Eugene has 22 permanent tiny homes on 1.1 acres: <https://www.squareonevillages.org/emerald>
 - Peace village in development with 36 units on 1.7 acres: <https://www.squareonevillages.org/peace>
 - Accessory dwelling units (ADU) should be made allowable and more easily achievable. (Corvallis already allows ADUs; county code changes are needed.)
 - Motels converted to permanent living.

Topic 3: actively identify available land in the urban growth boundary to add to the land supply available for transitional housing and social services.

**City and County
Community
Development
Departments
work together
to actively add
available land
and units for
housing
options**

Topic 4: Increase development or acquisition of affordable housing units for PSH

11. Increase available rental/income assistance options

- Public feedback: lots of general support. Some worries about increased utility, water, and property tax bills. The need for overall messaging about how rental support/vouchers are funded is important.
- Changes made: none.

11. Increase available rental/income assistance options

1. Increasing the number of place-based section 8 assistance in Benton County is a priority. Linn Benton Housing Authority (LBHA) needs to include place-based assistance in their annual plan to accomplish this goal. Work with LBHA to increase projects in rural parts of Benton County in support of more affordable PSH projects like the newest one in Lebanon.
2. City/county proactively pursue all sources of rent subsidies with community partners, including opportunities with the Veterans Administration, the state of Oregon, and rent subsidies. For example:
 - Establish a consistent resource to help people navigate the process to access social security and disability financial assistance. People with disabilities and elderly individuals are disproportionately represented in the homeless data. Programs like ASSIST and SOAR can be contracted with to expand the resources here to help people access disability and social security benefits.
3. Engage with culturally specific and culturally responsive organizations to help connect communities of color to rental/income programs and ensure that program parameters are aligned with the needs of communities of color.
 - Establish a consistent resource to coordinate with Tribal Housing Authorities to provide referrals and connect Native American individuals with Tribal resources, such as housing vouchers, assistance, and support services.

11. Increase available rental/income assistance options

Background: place-based Section 8 assistance definition: the Section 8 program provides rent assistance to eligible households. The amount of the assistance varies with household income and is capped by HUD rules that define an area's "Fair Market Rent." The Section 8 Program can be delivered in two ways: as a voucher the recipient household uses to pay a portion of their rent, or as "placed-based" assistance in which the assistance is attached to a specific housing unit. The Section 8 voucher program involves being on a waiting list for years. Having to wait years for help doesn't work very well for people who are without housing now and have a disability that puts their health and well-being at risk. Place-based assistance works better than a voucher because an eligible person can move in as soon as there's a vacancy. For this reason, place-based Section 8 assistance is critically important to the development and provision of PSH.

12. Increase supportive services and stable funding streams to provide services to residents at more affordable housing locations

- Public feedback: some worries about increased utility, water, and property tax bills. The need for overall messaging about how these services are funded is important.
- Changes made: none.

12. Increase supportive services and stable funding streams to provide services to residents at more affordable housing locations

1. County facilitate and coordinate collaboration among community partner organizations to expand PSH units as part of their behavioral health responsibility. (Existing providers: DevNW, Commonwealth, Corvallis Housing First, county health staff.)
2. County facilitate increasing supportive services by leveraging Medicaid funding for non-county staff to provide behavioral health support, case management, peer support, and counseling/medication assistance. Case management is the most critical component to prioritize.
 - County Alcohol and Drug resources can increase their in-the-field work to do diagnoses that will allow for more resources for case management following the 1115 waiver.
3. County facilitate collaboration with IHN and Samaritan to support more behavioral health services onsite at more permanent supportive housing units.

Vote to adopt policy recommendations

Next Steps

- May 20: joint meeting of City and County elected officials.
 - Executive Committee communicates the recommendations to the City and County elected officials.
 - City and County elected officials begin the process of reviewing and adopting recommendations.
- May 26 HOPE Meeting discuss next steps in the board's work, any questions the city/county leaders have about this first round of policy recommendations.



Home, Opportunity, Planning, and Equity (HOPE)

Advisory Board Meeting

Approved Minutes

April 28, 2021 from 4 pm to 6 pm

ZOOM Meeting



Members Present: Florence Anderson; Lennox Archer; *Xan Augerot (Commissioner, Benton County); Catherine Biscoe;;; Bryan Cotter; Anita Earl; Joel Goodwin; George Grosch; Barbara Hanley; Aleita Hass-Holcombe; Nicole Hobbs; Christina Jancila* (Business Associate); Charles Maughan* (Corvallis City Council); Pegge McGuire* (CSC); Jim Moorefield* (Co-Chair); Andrea Myhre; Jan Napack* (Corvallis City Council); Reece Stotsenberg* (Co-Chair); Linda Tucker.

Excused: Karyle Butcher; Bruce Butler

Absent:

Staff Present: Julie Arena (Benton County Health, HOPE Program Coordinator); Paula Felipe (Benton County Public Health, recorder); Suzanne Hoffman, Health Department Director; Joe Hahn, Diversity Coordinator.

Guests: *Executive Committee Members.

- I. **Welcome and Introductions.** Reminder about agreements on culture and conduct. Review of timeline and agenda. Congratulations on a year and a half of great work!
- II. **Public Comments (limited to 2-3 minutes).**
 - Blair: Good work all. There has been a significant reduction in negative comments from neighbors. Want to share amazing progress--excited to share this info with you. Survey released to neighborhood association: We received 79 to 80 percent to questions related to CACs (*Community Advisory Committees*) as very important; 21-15 percent neutral; zero percent say it's not important. At end of the day, we need community buy in to succeed and find solutions. Thanks for time and energy. We appreciate you.
- III. **Approval of Minutes: MOTION** was made by Pegge McGuire to approve the March HOPE minutes. Anita Earl seconded the motion. **MOTION** passed.
- IV. **Membership update:** Lennox Archer and Linda Tucker are no longer able to serve even though committed to the cause. Niki Hobbs will remain on the board while we do board member recruitment. Janie Tebeau will join the board in May. Recommended to the executive committee mid and end of May to start doing community-wide recruitment. Will get assistance from Diversity Coordinator John Hahn and Equity Coordinator Rocio Munoz so that recruitment is inclusive and widely disseminated.
- V. **Overview and Community Updates:** Hope timeline; how we arrived; public feedback and priority topics.
 - Project Turnkey – Corvallis Housing First has acquired the Budget Inn for emergency

sheltering and then permanent supportive housing. If people are interested in shelter at the Budget Inn, please have them contact Dan Easdale at 541-224-1170.

- Based on the efforts and work from our local NAACP Corvallis/Albany Branch in partnership with the City and County, we have some good news about proactive equity on the topic of housing. The City of Corvallis Housing Division now has a [webpage](#) of information and resources, including the [petition](#) an individual property owner can fill out and submit to state courts to have a discriminatory covenant removed from a property (it is a state court process, not a city or county process).
 - Oregon state law already has nullified the legal power of any such discriminatory covenants, but property owners may also want to directly remove such covenants from their deed records, so there is a process for doing so. Benton County's Community Development webpage will have a link to the city's webpage to direct people to these resources.
- County mental health partnership with Corvallis Police Department on co-response pilot for 911 calls with a behavioral health need. Timeframe is TBD.
- Corvallis Police Department (CPD) Crisis Intervention Training (CIT) with the Benton County mental health (MH) division. CPD's goal is to have 100% of our sworn staff CIT trained. Pre-COVID the trainings for law enforcement were happening every quarter. The CIT training is a fully collaborative training that is an entire 40-hour week that covers a variety of MH topics, including trauma-informed care, mental health first aid, NAMI, high level medication training, etc. COVID has necessitated pausing these trainings, as they are a full-week, in-person training. The goal is to resume these as soon as it is safe to do so. It is important to note Benton County Sheriff's Office (BCSO), Philomath PD, and other area law enforcement agencies similarly prioritize CIT training for their staff.

VI. Presentation of Final Draft of Policy Recommendations: What can Benton County or the City of Corvallis do with policy recommendations on these topics?

- Make code changes
- Allocate funding from some limited funding streams (CET, CDBG, TLT)
- Make decisions about staff time spent on certain topics
- Make decisions to adopt and support policies
- Adopt a near-consensus plan, that can be used to leverage additional state, federal and private dollars

To implement all of the recommendations, the following three systemic changes are needed:

- Organizational capacity needs to be built within social service organizations and is needed to work on and implement these recommendations.
- New Funding Sources
- Legislative Advocacy

DISCUSSION: Julie: After the Board adopts the recommendations and vote tonight, we can go through this language with elected officials making it polished and easily readable.

Funding recommendations have not changed—no public feedback on this item. Keep in mind, the Board has recommended prioritizing investment based on public feedback that supports microshelters most highly.

Legislative Advocacy: what came out of public feedback? Worries about whether services draw people from other areas; this state level advocacy can address that worry about migration of people.

(We do not have enough data to draw conclusions about migration.) Other areas are working on increasing services – service expansion is happening all over the state.

12 Policy Recommendations (List)

1. Facilitate and coordinate data improvement efforts with community partners.
2. Work with providers to create metrics for successful program goals.
3. Convene providers at routine meetings for improved care coordination facilitated by a full-time staff member.
4. Collaborate with social service and health care partners to increase the number of paid, full-time case managers to support people transitioning out of homelessness.
5. Pursue implementation of a crisis response team and collect data on scope and scale of need for crisis response.
6. Provide organizational capacity to facilitate and coordinate providers in establishing a 24/7/365 Sheltering System for all populations with onsite resources at shelter locations to transition people out of homelessness.
7. Facilitate and support the creation of a Resource Center.
8. Explore and investigate the need and the barriers to accessing housing for individuals and their families in our community whose past history has impacted their ability to secure housing.
9. Provide routine communication, notice, and opportunities for community involvement on the topic of homelessness services.
10. Increase development or acquisition of affordable housing units for permanent supportive housing (PSH) by 20 new units per year for the next eight years to add at a minimum 160 new units of PSH in Benton County.
11. Increase available rental/income assistance options.
12. Increase supportive services and stable funding streams to provide services to residents at more affordable housing locations.

Public Feedback on Draft Recommendations

- A 2-hour public forum on 4/13/21. Video posted on HOPE Community Engagement website: <https://www.co.benton.or.us/health/page/hope-community-engagement>
- 420 responses to the online survey from 4/1-4/15/21
- In-person focus groups for clients at Corvallis Housing First, Community Outreach Inc., Corvallis Daytime Drop-in Center, and SafeCamp
- Email feedback submitted to HOPE Coordinator: Julie.Arena@co.Benton.or.us

1. Facilitate and coordinate data improvement efforts with community partners.

- Public feedback: the most supported recommendation.
- Changes made: none.
- Description: Work with providers to improve data collection/tracking and to reduce duplicative data entry and data management. Data collection efforts will include a human services coalition model that is a statewide model: service providers come together to say what their priorities are and how they would implement them. Implementation is recommended immediately and could be accomplished with an existing staff person.
- Background: coordinated data collection and analysis of community-wide data support communities' efforts to end homelessness by understanding which individuals continue to cycle into homelessness and which providers and partners continue to interact with them. Best practices from a trauma-informed care perspective are to reduce the number of times an individual must recount their

history and circumstances to access assistance.

2. **Work with providers to create metrics for successful program goals** to track which services are successful interventions in transitioning people out of homelessness. Implementation can be immediate with existing staff person.
 - Public feedback: well-supported, no changes needed.
 - Changes made: none.
 - Description: successful program metrics assist with tracking which services deploy successful interventions in transitioning people out of homelessness. Implementation can be immediate with existing staff person.
 - Background: success metrics will help funders understand the value of their funding decisions, help us communicate with the community, and allow us to continually adapt and refine services to achieve the desired transition from homelessness for as many people as possible.

3. **Previous language:** Adopt the Hub Model of care coordination as a framework for doing business that coordinates existing partners.
 - Public feedback: the term “Hub Model” is not well understood, more explanation is needed of this model. Clients and service providers would like the flexibility for individuals to be able to attend a meeting like this if they want to and can. A pre-meeting between clients and their case manager before the main meeting can gauge the person’s desired outcomes and needs.
 - Changes made: describing the meeting and its purpose instead of using the term “hub” since it has confused clients and the general community. Adding flexibility to allow for the client to attend if they would like to be present.
 - **Updated language for #3: Convene providers at routine meetings for improved care coordination facilitated by a full-time staff member.**
 - Description: This model brings together different providers and partners at routine meetings to coordinate care for individuals with high and complex needs on a case-by-case basis. The purpose of this model is to bring together partners to improve the lives of individuals who are interacting with multiple systems. This model of care coordination has been referred to as “case conferencing,” Frequent Users Systems Engagement (FUSE), and also the “Hub model” of care coordination.
 - This model should allow for flexibility for the client to be able to attend if they would like to or not attend if they do not wish to or are unable to do so. A pre-meeting with a case manager and the client is needed prior to the all-provider meeting to assess the client’s ability and interest in attending and their goals for progress to inform the coordination.
 - The staff position to coordinate these meetings should be full-time and could be a health navigator, case manager, community health worker, or program coordinator. This same staff position is needed to do an assessment of funding streams: with input from city/county and providers, to assess all available funding streams coming into Benton County (including Corvallis) that fund this work to blend funding streams.
 - Implementation: can be done immediately if an existing staff person is available, until an FTE can be budgeted for this role.
 - Hub spokes needed at the table should be diverse and culturally-versed: Benton County Health Department (BCHD), Corvallis Daytime Drop-in Center (CDDC), Unity Shelter, Community Outreach Inc. (COI), Unity Shelter, Corvallis Housing First (CHF), the Center Against Rape and Domestic Violence (CARDV), Samaritan, Inter-community Health Network-Coordinated Care Organization (IHN-CCO),

Jackson Street Youth Services (JSYS) when needed, the state Department of Health Service (DHS), Tribal liaisons, case managers, Casa Latinos Unidos (CLU), Philomath Community Services (PCS), South Benton Food Pantry (SBFP), Job training/vocational rehab, law enforcement/first responders, crisis response team members, Street Outreach Response Team (SORT) members, social security/disability advocacy, faith-based community volunteers, Older Adult Behavioral Health Initiative to do system-level coordination, Oregon Cascades West Council of Governments (OCWCOG). Any other provider who can provide access to services for a person in need.

- Geographic service area suggestion: the details and frequency can be decided by the Hub participants, but based on public feedback we recommend having routine monthly Hub meetings for Corvallis-centric clients, South Benton clients, and Philomath/West Benton clients (and other geographic regions as needed).
- Background: This model is similar to the former Benton County Adult Services Team and the current Homeless and Vulnerable Patients Workgroup convened by Samaritan.

4. Previous language: Paid, full-time staff are needed as case managers to support people transitioning out of homelessness. Case managers should have commensurate experience and background that reflects the people they are serving from a cultural perspective and based on lived-experience.

- Public feedback: clarify the city/county role and the need for case managers all over the county.
- Changes made: wording edited to clarify the city/county role and the need for more case managers in Corvallis and throughout the county.
- **Updated language for #4: Collaborate with social service and health care partners to increase the number of paid, full-time case managers to support people transitioning out of homelessness.**
- Description: there is a need for more case managers with experience and backgrounds that reflects the people they are serving from a cultural perspective and based on lived-experience.
- County: work with IHN-CCO and Samaritan on workforce capacity for housing case managers, peer support specialists, and social service providers to utilize funding from Medicaid and SAMHSA block grant resources.
- County: in addition to increased case managers in Corvallis, rural areas outside of Corvallis also need additional mobile/regional staff to support people's housing needs and transition out of homelessness.
- City and county work with OSU, LBCC, and any other local educational institutions on expanding internship workforce capacity from student populations.
- Background: case management is vital to support the transition out of homelessness. Not enough case managers are available in our community to support the need.

5. Previous language: Pursue the feasibility and implementation of a crisis response team.

- Public feedback: resounding support for the concept. Lots of support for a non-law enforcement response and lots of support for a co-response with mental health and law enforcement together. Questions about the data on this need.
- Changes made: add a data collection recommendation to understand the magnitude of the need for crisis response and potential cost savings from this model. Add a co-response recommendation based on public feedback.
- **Updated language to #5:** Pursue implementation of a crisis response team and collect data on the scope and scale of need for crisis response.
- Description: HOPE recommends a non-police intervention for crisis situations due to homelessness and behavioral health issues. A co-response with behavioral health professionals and law

enforcement is also needed depending on the situation. Coordination with street outreach and harm reduction is vital to ensure collaboration with overlapping populations.

- Background: HOPE’s research, data, and community feedback fully support ongoing efforts to implement a Crisis Response Team to redirect calls from law enforcement and provide team partnerships with law enforcement when an officer is necessary. We recognize that ongoing efforts are occurring with the Criminal Justice Systems Improvement project and the Willamette Criminal Justice Council. We recommend continuing to pursue implementation in those existing forums with experts on the topic of crisis response.

6. Previous language: Benton County needs a 24/7/365 Emergency Sheltering System for all populations with onsite resources at any shelter location to transition people out of homelessness.

- Public feedback: many worries about attracting people here/being a magnet for services, location(s) that don’t negatively impact businesses, neighborhoods, and parks, having a requirement to work on transitioning/self-sufficiency/responsibility once stabilized. The urgency of a place for tent and car campers to go – from the client and community-wide perspectives. If folks can stay here 24/7 while they work on transitioning, let’s call this a shelter system instead of an emergency shelter.
- Changes made: terminology updated to remove “emergency” from the Sheltering System title since individuals will be assigned that bed space for a period of time while they work with a case manager (they do not have to leave during the day like the historical emergency shelter locations). Major addition: a recommendation about the most urgent need being a place to move tent and vehicle campers where it is not illegal so they can stabilize and work on transitioning out of homelessness.
- **Updated language to #6: Provide organizational capacity to facilitate and coordinate providers in establishing a 24/7/365 Sheltering System for all populations with onsite resources at shelter locations to transition people out of homelessness.**
- This organizational capacity is needed to determine possible sites for sheltering, the logistics of implementation, and the ongoing funding from sources that minimize the use of general fund dollars. (See the first recommendation A for details on the organizational capacity needed in the form of project coordination, project management, land use planning, and grant writing.)
- Description: any shelter needs space for warming/cooling from the elements during the day. Individuals are assigned a bed space that is theirs 24/7 while they work with a case manager on transition. Emergency sheltering 24/7/365 with onsite resources is referred to as a “navigation center” in pending legislation (HB 2004 and HB 2006, 2021 Session).
- **We recommend the following six components of a sheltering system to address safety concerns for different populations:** congregate male, congregate female, non-congregate sheltering (like motel rooms or microshelters), managed tent camping, managed car/RV/trailer camping, and mobile service delivery to alternate locations. The team working to implement this sheltering system should look at available current and historic data to fine-tune the recommended estimates.
- **Initial Estimates of Need (long description)**

Recommended components of a Sheltering System:

- **Shelter Accessibility:**
- Shelter is accessible 24/7/365.
- Shelter is low barrier upon arrival to get individuals off the street. Options are available, but not required, for individual involvement to support the location while they work on transitioning, such as doing laundry, cleaning, or helping to provide food.
- Necessary components at any emergency sheltering location: walking and biking access, public

transportation access, and safety. Safety concerns for everyone involved need to be addressed. Security, lighting, fire code, and immediate access for emergency personnel must be considered.

- Shelter facilities and onsite services: necessary services at any shelter location include showers, bathrooms, drinking water, food provided on-site (to minimize need to travel to multiple locations for food), laundry, wifi, lockers for items for those in congregate shelter, mail service, and office space for meeting with providers like a case manager, mental health and addiction support person, and someone who can help enroll people in assistance programs.
- Shelter is temporary and is not a permanent housing solution. The duration of a person's stay will vary based on their needs, their progress with a case manager, and availability of an appropriate transitional or permanent option.
- A limited overflow area is needed at any sheltering location for people who show up with a tent or car/RV. Tent and car/RV camping is time limited, and the individual must engage to transition to another option. RV sites must have gray and black water dump hookups for appropriate hygiene. The overflow area is under the supervision of the host organization.
- Hygiene and basic needs services accessible to any individuals, even those not staying in the shelter system: an area for warming/cooling from the elements where someone can be 365 days/year who is experiencing homelessness to minimize the need to go to multiple locations throughout the day to stay warm or get cool. There must be hygiene facilities, wifi, lockers, and food services that are accessible to individuals to balance the negative impacts on our natural areas and waterways for those without access to basic hygiene.
- Definitions section (long description)
- Background:
- **Challenges:** implementing this recommended emergency sheltering system will take time, resources, and political will. There are challenges with site identification, concentration of populations living in poverty, and the need for separation of some populations for safety.
- **Leadership:** there needs to be collaboration of leadership with providers and with the city and county supporting project management for project design and site planning to insure the following issues are addressed:
 - Geographic locations and siting options.
 - Adequate public transportation schedule to support client needs.
 - Service providers must be included as leaders to determine adequate spacing between populations. Suggestions from providers include separate floors, separate buildings, and/or microshelter rows for different populations.
 - Capacity is needed to research and explore available geographic areas in Corvallis, the urban growth boundary around Corvallis, and the county areas surrounding the urban growth boundary to find all possible locations for the different components for a sheltering system.
 - Phased Implementation to bolster Emergency Sheltering System: all of the components outlined for an emergency sheltering system will take staff capacity and time to be implemented. While the city and county work to build the organizational capacity and sustainable funding to support the long-term vision of implementing these components, the city and county must facilitate and support the enhancement of service capacity for these most urgent needs:
 - The men's shelter must be open 24/7/365 with additional service providers meeting with men onsite to transition them to transitional or permanent supportive housing.
 - The City of Corvallis and County, in partnership with IHN, Samaritan, and other service providers, should facilitate building the capacity for mobile service delivery to distributed microshelters, RV/trailer/car camping, and managed tent camping locations. This mobile service delivery can serve

populations both within Corvallis urban growth boundary and the greater Benton County areas that have expressed the need for access to services.

- The most urgent need voiced by clients and providers is a safe place to locate their tent or vehicle so they can stabilize, access services, secure a job, and transition out of homelessness. Basic needs of safety, sleep, food, and hygiene need to be met first before people can work on transitioning out of camping. This is also the most urgent need voiced by community members who are housed – addressing the unmanaged tent and vehicle camping throughout the community by having a place for managed camping in tents and vehicles so they do not continue to disperse and move from one street or natural area to another.

7. Previous language: Facilitate and support the creation of a Resource Center.

- Public feedback: lots of confusion about whether or not this already exists. Lots of fear about tax increases to fund it. Sentiment about attracting people here and only wanting to help people “from here.” Need to stress the statewide advocacy for funding for all counties to provide services.
- Changes made: updated description to address transit needs and working toward self-sufficiency.
- **Updated language to #7: Facilitate and support the creation of a Resource Center.**
- Description: the Resource Center should have office space for providers from different organizations to meet with people, enroll them in programs, and work on improving their economic stability with sufficient means to meet their needs. The city and county should facilitate and support the collaboration between the providers to choose the best location options and determine who will occupy and manage this Resource Center. Must have public transit, walking, and biking access. A dedicated shuttle service from shelter locations around the community will support access beyond just public transit.
- Ideal location: capacity is needed to research and explore available geographic areas in Corvallis, the urban growth boundary around Corvallis, and the county areas surrounding the urban growth boundary (similar to the work DLR has done for criminal justice components sites). Best options would be co-located adjacent to or very near some sheltering. Second best is very short walking distance. Also possible would be a shuttle system from shelter locations to the resource center.
- Background: supporting co-location of service providers from multiple organizations decreases the travel and number of different locations people must go to meet their needs. Having some shared space at one location does not mean that an organization entirely relocates their operation. It means that representatives from different organizations are co-located to coordinate care in one location. Most clients have to travel to multiple places (between 5-10 different geographic locations) to enroll in the numerous programs available to them.
- The Resource Center can have office space for service providers like Community Services Consortium (CSC), Council of Governments (COG), United Way, county health navigators to enroll people in OHP, housing case managers to work on transitioning people out of homelessness, assistance with vital records (drivers license, social security card, etc.), assistance with applying for and accessing disability and social security income, job assistance, veterans programs, space for representatives from the Center Against Rape and Domestic Violence (CARDV), Jackson Street Youth Services (JSYS), Community Outreach Inc. (COI), Casa Latinos Unidos, Tribal liaison, NAACP representative, Unity Shelter, Corvallis Housing First, Linn Benton Housing Authority, other housing entities, state entities like DHS, etc.

8. Previous language: Establish referral pathways to transitional and permanent housing resources for serious criminal offenders (sex offenders, felony convictions, etc.).

- Public feedback: people misinterpreted this wording to think that the Board wanted a pipeline of ex-

convicts to find housing here.

- Changes made: edited wording to mention criminal history AND other history that makes it difficult to secure housing. More investigation needed to understand the magnitude of the need and explore solutions.
- **Policy Recommendation for #8: explore and investigate the need and the barriers to accessing housing for individuals and their families in our community whose past history has impacted their ability to secure housing**
- Description: people with past criminal histories, bad credit scores, and previous evictions continue to be disqualified from housing and remain unhoused. Housing assistance for people with conviction histories is lacking once they do not qualify for support from county Parole and Probation.
- Background: individuals with difficult histories end up living in their cars or RVs throughout the community. These individuals and their families are already a part of our community. There is a lack of data on the need for referrals for this population, although it is a known need based on provider feedback. Explore and investigate this issue further.

9. Previous language: Routine communication, notice, and community involvement need to happen on the topic of homelessness services.

- Public feedback: community would like a way to give feedback directly to city and county instead of only to service providers. They would like accountability in funding decisions based on community feedback.
- Changes made: added in a recommendation to create a mechanism for public feedback directly to city and county about funding for social service providers.

Communication, Notice, and Community Involvement for #9:

- **Routine monthly updates** similar to the Corvallis Sustainability Coalition email updates. These updates should include news and reports about new services, new providers, decisions made on the topic of homelessness, how to get involved, etc. Regional updates are needed that include all of Benton County.
- **Quarterly public forum to provide verbal updates**, answer community questions about recent updates, provide dialogue, and have a community conversation beyond the 10 minute comment period at each HOPE meeting. Recommend a minimum two hours.

. [Changes to this third portion of #9 in bold]

- A notice requirement to neighborhoods and businesses with opportunities for involvement for any new services or new transitional locations approved or funded by the city or county. The intent of this notice and involvement requirement is to provide ample time and opportunity for community engagement.
- Organizations funded by the city or county or approved to provide social services or transitional housing must provide routine opportunities for two-way communication and a mechanism to provide feedback for neighbors and nearby businesses. **City/county establish a mechanism for community members to provide feedback on services and organizations directly to the city and county provider (via email, website, and postal option) instead of only to the service provider. City/county track community feedback for improved accountability and to make informed decisions about future funding allocations.** Organizations will forward any neighborhood feedback to city and county funders to evaluate future funding decisions and encourage resolving issues with neighbors.
- Community-wide notice should also be provided in the routine monthly community-wide communication.

10. Increase development or acquisition of affordable housing units for permanent supportive housing (PSH) by 20 new units per year for the next eight years to add at a minimum 160 new units of PSH in Benton County

- “New” can be new construction or conversion of existing units to PSH units. PSH is necessary for a small portion of our unhoused community who need permanent support to remain stably housed.
- Public feedback: worries about increased utility, water, and property tax bills.
- Changes made: updated terminology to indicate new funding sources from grant opportunities that already exist but that the county has not had the staffing capacity to apply for, disburse, oversee, and manage.
- Description: permanent supportive housing (PSH) is necessary for a small portion of our unhoused community who need permanent support to remain stably housed. “New” units can be new construction or conversion of existing units to PSH units. Increasing PSH will decrease the number of chronically homeless individuals in the community and result in cost savings. (<https://endhomelessness.org/wp-content/uploads/2017/06/Cost-Savings-from-PSH.pdf>)
- Develop a framework for awarding currently available grant funds that encourages, incentivizes, or requires, when possible, a certain percentage of PSH units in housing projects seeking affordable housing funding from the City of Corvallis.
 - County pursue additional grant funding streams to increase PSH units in greater Benton County to implement this recommendation.
- Coordination with City and County Community Development (CD) Departments is necessary to support this work. CD Departments should actively facilitate and encourage local organizations’ applications for grant funding and technical assistance from evidence-based approaches (for instance, state-level OHCS funding and technical assistance from The Corporation for Supportive Housing).
 - County collaborate with other cities in the county to increase PSH units outside of Corvallis.
- City/county evaluate non-traditional zoning and code solutions to respond to the need for more permanent living options:
 - Permanent tiny home villages.
 - Emerald Village in Eugene has 22 permanent tiny homes on 1.1 acres: <https://www.squareonevillages.org/emerald>
 - Peace village in development with 36 units on 1.7 acres: <https://www.squareonevillages.org/peace>
 - Accessory dwelling units (ADU) should be made allowable and more easily achievable. (Corvallis already allows ADUs; county code changes are needed.)
 - Motels converted to permanent living.

11. Increase available rental/income assistance options

- Public feedback: lots of general support. Some worries about increased utility, water, and property tax bills. The need for overall messaging about how rental support/vouchers are funded is important.
- Changes made: none.
- Increasing the number of place-based section 8 assistance in Benton County is a priority. Linn Benton Housing Authority (LBHA) needs to include place-based assistance in their annual plan to accomplish this goal. Work with LBHA to increase projects in rural parts of Benton County in support of more affordable PSH projects like the newest one in Lebanon.
- City/county proactively pursue all sources of rent subsidies with community partners, including

opportunities with the Veterans Administration, the state of Oregon, and rent subsidies. For example:

- Establish a consistent resource to help people navigate the process to access social security and disability financial assistance. People with disabilities and elderly individuals are disproportionately represented in the homeless data. Programs like ASSIST and SOAR can be contracted with to expand the resources here to help people access disability and social security benefits.
- Engage with culturally specific and culturally responsive organizations to help connect communities of color to rental/income programs and ensure that program parameters are aligned with the needs of communities of color.
- Establish a consistent resource to coordinate with Tribal Housing Authorities to provide referrals and connect Native American individuals with Tribal resources, such as housing vouchers, assistance, and support services.
- Background: place-based Section 8 assistance definition: the Section 8 program provides rent assistance to eligible households. The amount of the assistance varies with household income and is capped by HUD rules that define an area's "Fair Market Rent." The Section 8 Program can be delivered in two ways: as a voucher the recipient household uses to pay a portion of their rent, or as "placed-based" assistance in which the assistance is attached to a specific housing unit. The Section 8 voucher program involves being on a waiting list for years. Having to wait years for help doesn't work very well for people who are without housing now and have a disability that puts their health and well-being at risk. Place-based assistance works better than a voucher because an eligible person can move in as soon as there's a vacancy. For this reason, place-based Section 8 assistance is critically important to the development and provision of PSH.

12. Increase supportive services and stable funding streams to provide services to residents at more affordable housing locations

- Public feedback: some worries about increased utility, water, and property tax bills. The need for overall messaging about how these services are funded is important.
- Changes made: none.
- County facilitate and coordinate collaboration among community partner organizations to expand PSH units as part of their behavioral health responsibility. (Existing providers: DevNW, Commonwealth, Corvallis Housing First, county health staff.)
- County facilitate increasing supportive services by leveraging Medicaid funding for non-county staff to provide behavioral health support, case management, peer support, and counseling/medication assistance. Case management is the most critical component to prioritize.
- County Alcohol and Drug resources can increase their in-the-field work to do diagnoses that will allow for more resources for case management following the 1115 waiver.
- County facilitate collaboration with IHN and Samaritan to support more behavioral health services onsite at more permanent supportive housing units.

DISCUSSION:

- Need to clear up the HUB process. Ben from COI: We attempt to provide wrap-around services; feel like hub is more about collaboration.
- Joel: Brief recap of hub model: doesn't have to be called Hub—variety of disciplines at the table. Anyone can bring a case forward for review. No requirement for the person to be there. Create a plan of action and engage in service. There is data to support this model. More proactive approach; action based; backed with data; widely used in Canada to provide services; almost intervention style.

- Aleita: we talked a lot about hub model; hub model has no client present; the other has client in the center.
- Pegge: is hub a place or virtual place?
- Joel: it is confusing talking about hub and resource hub...unfortunate that both are called hub. Massachusetts offered to do a virtual presentation on the hub model. Don't need physical space for Hub; additional info on the model would be beneficial.
- Jim: these are implementation questions; people doing work will sort through. Core idea is first recognize that no organization has all resources. It requires collaboration among organizations which is critical to problem solving.
- Jan: hub model is process of problem solving; data driven; call it whatever you want. The intention of the Hub Model is exactly what we want with some adjustments—such as client involvement possibilities; discussion of who 'runs' it, 'where' it exists, how immediate and how long term the follow up is, etc. A hybrid of immediate of action and longer term intervention.
- Andrea: We need both a specific strategy for coordinating services for especially vulnerable individuals who are touched by law enforcement, as well as a general strategy of collaboration and coordination of services for the benefit of the larger homeless population.
- Catherine: It still seems that we are looking at two different models, the one that Aleita has mentioned and the original Chelsea model that Joel has talked about. Are we still looking at two separate models (one which involves clients) and one that does not? Before we move a recommendation forward at this time, do we need more data, or can we put together enough of a recommendation to bring this before the policy makers?
- Andrea: We need a FUSE approach and then a general encouragement of collaboration among agencies to better serve clients.
- Anita: I have a sense that being a smallish community with not many avenues of 'quick' response—so I like the hybrid idea of collaboration and agree it feels like we are talking about two different models here.
- Andrea: The other important thing is that the HUB gets more resources for housing and etc. to serve the most vulnerable.
- Catherine and Julie: consensus that more research needs to be done including learning more about the hub model.
- Rapid engagement and quick turnaround response with coordinated front door entry sounds good.
- We can adopt the recommendations as proposed with Joel's comments attached and an understanding that more work is needed to clarify.
- George: how we direct services with intervention and rapid response—means something different to me than to Joel. Some homeless concerned with police and social workers; deal with difficult people but careful on how we talk about it without engaging them in person. We do need mental health professionals and options available. Some people viewed as problems so we need to be careful on how we say it--there needs to be coordination in dealing with people in ways that are trauma informed.
- Pegge: talking about several different approaches. In hub/case conference model; take hardest to house first like fuse model or do we say these are easy to house firsts and then more difficult; how do we do that. Theoretical approach to how we resolve this.
- Catherine: very generalized, great ideas, two core ideas; one clients involved the other not. How do we recommend without more data. Need type of model but research is necessary.
- Julie: most high level; need fuse approach and general encouragement of collaboration.
- Pegge: contacted by consultant working for Benton county social service agency: how to engage

the community..been around for 100 years and I barely knew they existed. Is there a table where people share? HOAC was kind of that table; closest is HOPE and Mac Gillespie's work around food/food insecurity; no entity provides coordinated approach to services; so not duplicating services but complimenting.

- Jim: services engagement ; provide technical assistance to communities; fuse being implemented in Lane county; these models like hub and fuse much more coherent than there strategy based on experience and FTE dedicated; requires commitment of resources to make it work.
- Julie: prioritize collaboration and coordination and will do more research; ask for all of you to see if you want to form a workgroup or subcommittee to look into models more. Anyone interested in being on work group: Joel, Catherine, Jan, Pegge. Email Julie if want to join this group.
- Joel: implement a crisis response team without talking about cost savings and data gathering. Julie: what about paring down languages.
- Xan: collect data on scope and scale of need; Pursue implementation of a crisis response team and collect data on scope and scale of need for crisis response.
- Barbara; making data available from law enforcement.
- Jim: Talking about data on citations and crimes; related to homelessness. When in agency's self interest to report it, they do. Joel will provide an educational portion at next meeting.
- Group to make recommendation on best approach; what we have and community has; we are identifying toolbox; managed camping is one of those tools; it is a service in the tool kit. Whether political will or not but does not change our recommendation.
- Xan: saying no to managed camping means accepting unmanaged camping scattered around the city. A lot in South Corvallis, people ready for that not to be the case throughout Avery Park along Mary's river; everyone prefers microshelters but cannot get there overnight; need a place for people who disperse.
- Reece: micorshelters could be built by winter. Pioneer park is empty; might be issue with management; managed camping might be a higher used option.
- Catherine: clarify goal is not permanent; but emergency response; necessary as contingency in future; keeping language as contingency not for long term.
- Julie: when managed it is successful for getting people off streets and out of homelessness.
- Alieta; safe camp success; a lot of people who transitioned; horizontal and vertical thinking; once place to stay move forward and get new places to live.
- Julie: can ask for data and what it looks like to have managed camping; I think including there is some disagreement on board whether managed camping should be recommended. Up to elected officials what part they adopt.
- Charles: when collected data for Pioneer and BMX park, very different entities with different rules.
- Barbara: a lot of feedback public not happy with camping; even though managed camping lowest choice in that stepping stone getting people into more stable transitional housing at same time as making camping illegal which is what the community wanted.
- Julie; up to city and county to operationalize recommendations; sheltering system with different components.
- Joel: go back to points I made in email; data driven, respectful of community input; struggle with recommended managed camping as option; best course demonstrate priorities and provide parameters; a lot of people been camping with little or no enforcement this past year. Don't think it accurately reflects data from community if we recommend managed camping.
- Charles: agree with following the data: We collected data and did poll; people mostly uncomfortable with unmanaged camping: Agree that managed camping is not the solution but good

course of action given our options but not the end goal.

- Andrea: we cannot rule it out; need to provide something for people.
- Jan: concerned what law enforcement would think about this; do more exploring before we set up parameters and expectations.
- Pegge; responsible to our values; data driven input; very concerned as civil rights activist about perspective of “community” input; historically neighborhood groups did not allow people of color into neighborhoods. Worried if give too much weight to community input; value-centered altruistic determination on where we go with this.
- Jim: put community input in perspective: we asked them on input on aspects and it is our job to look at it holistically and apply moral compass. Community input is important; but if people don't like managed camping does not mean it cannot be a recommendation. Our job is create a system whereby their well being can be improved and the well being of the community.
- Xan: community perspectives: heard two things; camping least preferred; not secure; not safe; not stable; tents don't last; don't think want managed camping to be thrown out completely in case of overflow; that was broadened; least preferred tool in toolbox.
- Reece: people utilizing managed camps: better to have microshelters; change wording for designated place for people to camp; not just free camping.
- Aleita: should be continuum in the toolbox; didn't have pilot for managed camping.
- Reece: change wording from managed to designated.
- Julie: ok if not perfect agreement; note it in the vote; voice and include in email why they don't agree.
- Xan: Take a look at this article on managed camping in Santa Rosa https://khn.org/news/article/go-ahead-and-vote-me-out-what-other-places-can-learn-from-santa-rosas-tent-city/?utm_campaign=KHN%3A%20Daily%20Health%20Policy%20Report&utm_medium=email&hsmi=120278905&hsenc=p2ANqtz-6P-bRCbnCsMjAsWlhXWq43XvdNaCf1Xg2ihytAiP_ul1YgZRZZ6fa3GmHAtrXZkUTcRLBaVzSjiz7d70n7fcuDSWDUISIHQPUj4iU3vumlB2jSeA&utm_content=120278905&utm_source=hs_email
- Pegge: We need a continuum of options for people because no one solution is appropriate for everyone.
- Jan: Reece made a very good point re getting data as to how many applied to live at the BMX/MCWS managed camp.
- Andrea: Managed camping as a contingency if there are no other options for people
- George: Let's just not fool ourselves thinking that leaving managed camping out will do anything to change illegal camping. Having managed camping as an option reduces unmanaged camping.
- Andrea: If there is no place for people we have to provide an alternative. We have to say that managed camping would be an option if nothing else is available (shelter or housing)
- Pegge: Community input is not always reflective of altruistic and inclusive perspectives.
- Andrea: Managed camping is not unmanaged camping!
- Xan: We got two different community perspectives. That tenting is the least preferred option by everyone, housed and unhoused. And then, this month, we heard that we need to keep managed camping on the table, and not throw it out altogether. Let's not pit ourselves against one another!!
- Jan: We need to define success parameters / goals for managed camping.
- Pegge: Correct. Managed camping is an essential option in the continuum.
- Jan: FYI, designated parcel for unmanaged camping failed in Eugene a few years ago. Council disbanded it after a year of problems (was located at the corner of Roosevelt and Bertelsen).

VII. VOTE on Recommendations: Vote to adopt all except for Number 6 (24/7/356 – we will not vote on that right now)--Just the other 12 recommendations.

DISCUSSION: Joel: To clarify for number 3, we will do more research correct? Language will prioritize collaboration recommend more research on models. Yes.

•**MOTION:** Pegge McGuire made **MOTION** to approve all of the recommendations except for Number 6. Charles Maughan seconded. **MOTION** passed unanimously.

•**MOTION:** George Grosche made **MOTION** to adopt Number 6 on organization capacity and sheltering system. **MOTION** seconded by Pegge McGuire. **14 AYES; 4 NOS. MOTION PASSED.**

Opposed: Joel Goodwin—as per his email that stated public feedback does not fully support managed camping; Christina Jancila; Jan Napack; Reece Stotsenberg.

Question:

- Catherine: Is there an option to testify on the 20th that this is contingency emergency recommendation to make sure waters do not get muddy about managed camping. Xan: May 20 meeting there is no opportunity to testify. Catherine: those voting no can submit their reasons in writing. Xan: If we say no to managed camping, we are essentially saying that we are ok with rough, unmanaged camping and moving people along. We all prefer microshelters, but we cannot get there right away. Charles and Anita agree with Xan.
- Jan: Understood! But has managed camping been shown to be quantitatively useful for short term transitional housing? I think SafeCamp might have some data.

VIII. Next steps: May 20: joint meeting of City and County elected officials.

- Executive Committee communicates the recommendations to the City and County elected officials.
- City and County elected officials begin the process of reviewing and adopting recommendations.
- May 26 HOPE Meeting discuss next steps in the board's work, any questions the city/county leaders have about this first round of policy recommendations.

XI. Meeting was adjourned at 6:10 pm.

Benton County & City of Corvallis
Home, Opportunity, Planning, & Equity (HOPE) Advisory Board



Julie Arena, HOPE Program Coordinator
Benton County Health Department
4077 SW Research Way
Corvallis, OR 97339
541-766-0252 * Email: Julie.Arena@co.benton.or.us

HOPE MEETING AGENDA

May 26, 2021 from 4-6 PM

Meeting location: Zoom or phone in

Join Zoom Meeting: <https://cscteam.zoom.us/j/91929383646>
One tap mobile: +12532158782,,91929383646#
Dial by phone: +1 253 215 8782
Meeting ID: 919 2938 3646

AGENDA

- I. Welcome, Zoom Housekeeping, Overview of Agenda.....4pm
- II. Public Comment* (10 minutes)4:05pm
- III. Roll call and approve April meeting minutes4:15pm
- IV. Community Updates4:20pm
- V. Follow-up from May 20 Joint Elected Officials Meeting4:25pm
 - a. Investigating resource development and legislative advocacy for recommendations
 - b. Any requests from the elected officials at the joint meeting
- VI. Educational Presentation and Discussion: topic TBD.....5:15pm
- VII. Next Steps5:50pm

*Public Comment: if you would like to make a public comment, please put your name in the chat window or "raise your hand" in the Zoom meeting when you arrive. List your name and the general topic of your comment in the chat. Comments will be made in the order that people "raise their hand" or submit a chat. For people calling in from a phone line, there will be an opportunity for comment for participants who have called-in.

HOPE Advisory Board Meeting

5/26/2021

Zoom Meeting hosted by Julie Arena, HOPE Coordinator

Zoom Housekeeping

- All attendees are muted when they join.
- All attendees can unmute themselves and choose to be seen visually by clicking “Start Video” at the bottom of the screen.
- Public comment:
 - Type your name into the “Chat” area, say you want to make a public comment, and on what topic.
 - Example: “Julie – public comment – crisis response.”
 - For those on the phone, there will be an opportunity to comment, too.
- Questions during the meeting:
 - Type into the “Chat” area and send it to host, Julie Arena.

Meeting Agenda

- 1. Meeting Overview**
- 2. Agreements and Culture**
- 3. Public Comment on any topics for 10 minutes**
- 4. Logistics:**
 - **Vote to approve April minutes – roll call**
 - **Board Membership update:**
 - **Welcome Janie!**
 - **Recruitment efforts**
- 5. Community Updates**
- 6. Debrief from Joint Elected Officials 5/20 meeting**
 - **Investigating Resource Development and Legislative Advocacy for Recommendations**
- 7. Educational Component from Joel Goodwin**

Agreements for our culture + conduct:

Fun

Inclusive ✓✓

Humor

Food ✓

Action/roll up sleeves

Change the face of Homelessness

Honesty

Respect ✓

Consensus

Think before you speak

Cunoxity ✓

transparency

Recognize personal bias

Kindness ✓

time management

Concise communication

Open minded ✓

Opinions matter

data driven

Do your homework!

patient

authentic

Valuing personal experience

dedication/work ethic

honor the expectations of the work

Public comment: 10 minutes

- **Comment limited to 2-3 minutes based on number of people wanting to comment**
- **Type into the “Chat” and say you want to make a public comment and on what topic.**
- **For those on the phone, I will ask if there are any public comments from callers.**
- **Can also submit written comments via email to Julie.Arena@co.Benton.or.us**

Logistics: Vote to approve 4/28/21 minutes, roll call

Flip Anderson

Joel Goodwin

Pegge McGuire

Xan Augerot

George Grosch

Jim Moorefield

Catherine Biscoe

Barbara Hanley

Andrea Myhre

Karyle Butcher

Aleita Hass-Holcombe

Jan Napack

Bruce Butler

Niki Hobbs

Reece Stotsenberg

Bryan Cotter

Christina Jancila

Janie Tebeau

Anita Earl

Charles Maughan

Membership Update:

- Lennox Archer and Linda Tucker are no longer able to serve on the HOPE Board.
- Janie Tebeau has joined the Board, welcome!
- Niki Hobbs will remain on the board while we do recruitment for two additional Board members starting in June and going into this summer.
- Julie consulting with JoeHahn and Rocio to update application and recruitment.

Community Updates

Project Turnkey – Corvallis Housing First has acquired the Budget Inn for emergency sheltering and then permanent supportive housing.

How people access shelter at the Budget Inn:

Placement is determined by referring individuals on the local Coordinated Entry list, or the list of people who have been entered into the homelessness management information system (HMIS) and have participated in an assessment, as the intention is to prioritize those who are homeless and qualify for Permanent Supported Housing (or those who have a disability, have a history of chronic homelessness, and are vulnerable), as well as those who are BIPOC or from the LGBTQ community.

Individuals being served through the Corvallis Daytime Drop-In Center, Community Services Consortium, and Unity Shelter are asked for their information to be inputted into HMIS because of program funding requirements. However, service providers working with a client in need of shelter and support, or are an individual looking for shelter and support, can contact Dan Easdale at 541-224-1170 for more information.

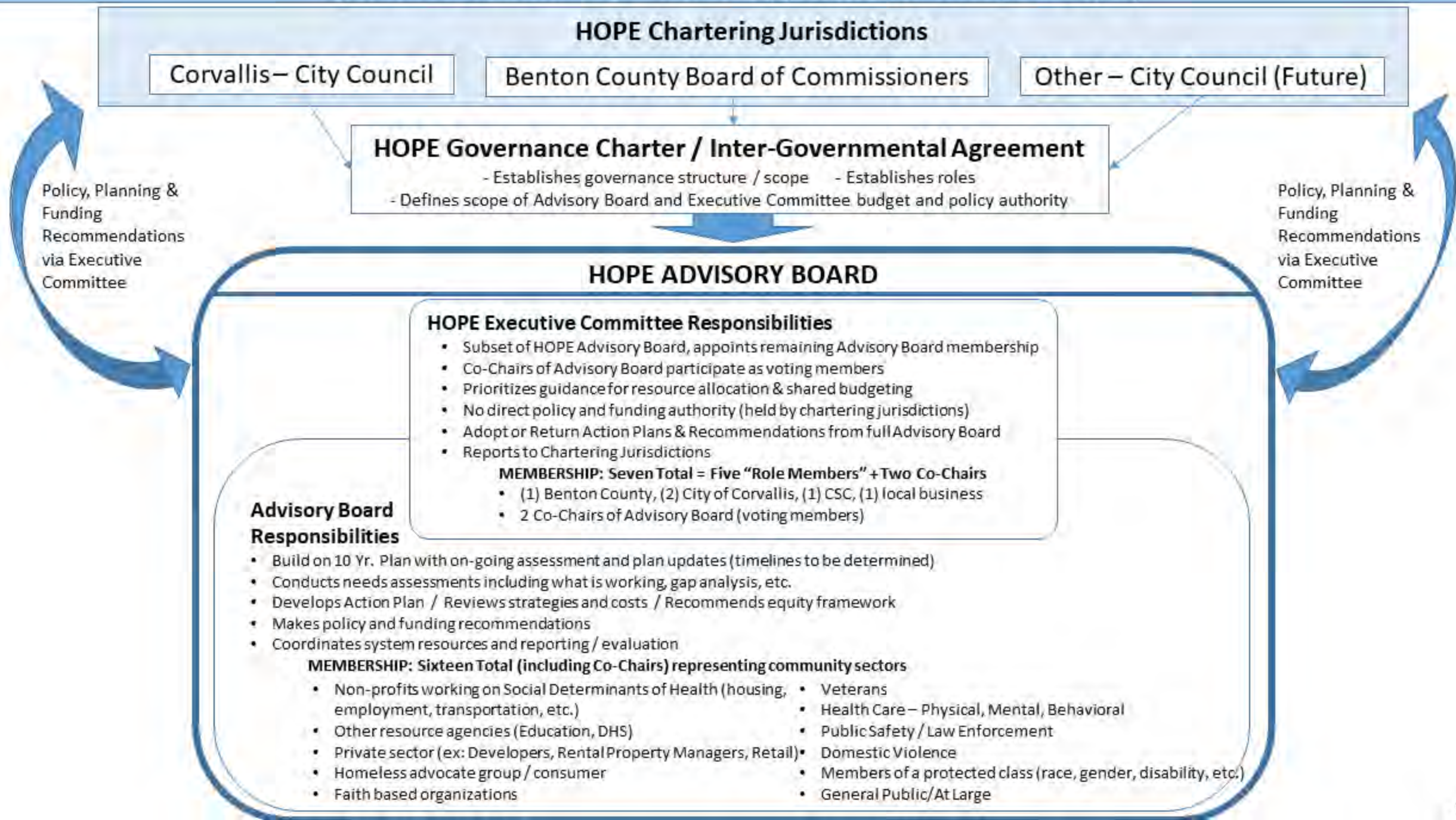
Community Updates continued

Community Court will be launching at the end of June and will be held the last Thursday of the month.

- The purpose of adopting Community Court is to divert some people with misdemeanor offenses from entering jail and instead connect them with the supportive services they need.
- This effort is in partnership with the following local providers:
 - ARC of Benton County
 - Benton County Behavioral Health
 - CHANCE
 - Community Outreach
 - Corvallis Drop-In Center
 - Corvallis Housing First
 - Jackson Street Youth Shelter
 - Unity Shelter

Community Updates continued

- The Corvallis City Council has removed the moratorium on enforcement of illegal camping as of May 15th. The City has provided guidelines to help houseless community members know where they can legally sleep at City Hall and the city parks system in accordance with the Boise decision.
- Funding opportunity: InterCommunity Health Network Coordinated Care Organization (IHN-CCO) invites interested parties in Benton, Lincoln and Linn counties who can positively impact the health outcomes of IHN-CCO members to submit proposals. The selected proposals will be Delivery System Transformation (DST) pilots that help transform the health care delivery system and projects that impact housing through the SHARE (Supporting Health for All through REinvestment) Initiative. Due 8am on June 2, 2021.
 - The Request for Proposal Guidelines and required Letter of Intent Form can be found on the IHN-CCO website: IHNtogether.org/RFP.
- Temporary increase in federally funded housing vouchers, just received by Linn Benton Housing Authority.
 - HOPE Board member interest in a work group to discuss housing voucher increase and strategies? Pegge, Andrea, and Xan



Debrief from Joint Elected Officials Meeting 5/20/21

- City and County elected officials met to review the HOPE recommendations and discuss the process of formally accepting them.
 - Link to the meeting video: <https://vimeo.com/553411384>
 - Link to final recommendations: https://www.co.benton.or.us/sites/default/files/fileattachments/health_department/page/7506/hope_policy_recommendations_4-28-21_approved.pdf
- Both bodies shared gratitude for the work the HOPE Board has done and the process of data collection, research, prioritizing, and community engagement as outlined by the Bylaws.
- Accepting the HOPE recommendations:
 - 6/7/21: Corvallis City Council will review and vote to accept the recommendations.
 - 6/8/21: County Commissioners will review the City's thoughts on lead roles and responsibilities for the recommendations.
 - 6/15/21: County Commissioners will vote to accept the recommendations.
 - 7/1/21: Joint City and County Elected Officials meeting to discuss lead and joint roles and responsibilities to implement the recommendations.

Recommendations to Implement Policies

A. Organizational capacity is needed to work on and implement these recommendations, and organizational capacity needs to be built within social service organizations to manage and provide the services.

B. Funding recommendations

C. Legislative Advocacy

12 Policy Recommendations

1. Facilitate and coordinate data improvement efforts with community partners.
2. Work with providers to create metrics for successful program goals.
3. Convene providers at routine meetings for improved care coordination facilitated by a full-time staff member.
4. Collaborate with social service and health care partners to increase the number of paid, full-time case managers to support people transitioning out of homelessness.
5. Pursue implementation of a crisis response team and collect data on scope and scale of need for crisis response.
6. Provide organizational capacity to facilitate and coordinate providers in establishing a 24/7/365 Sheltering System for all populations with onsite resources at shelter locations to transition people out of homelessness.

Recommendations continued:

7. Facilitate and support the creation of a Resource Center.
8. Explore and investigate the need and the barriers to accessing housing for individuals and their families in our community whose past history has impacted their ability to secure housing.
9. Provide routine communication, notice, and opportunities for community involvement on the topic of homelessness services.
10. Increase development or acquisition of affordable housing units for permanent supportive housing (PSH) by 20 new units per year for the next eight years to add at a minimum 160 new units of PSH in Benton County.
11. Increase available rental/income assistance options.
12. Increase supportive services and stable funding streams to provide services to residents at more affordable housing locations.

HOPE Recommendation: C. **Legislative Advocacy:**

1. County and City elected officials must continue to advocate for statewide leadership on local requirements for shelter beds in each county with accompanying state funding to support those required beds. This state requirement and funding is needed to address worries about migration of people to areas with services from other areas.
2. State and federal funding for all of these topics must continue to be advocated for by city and county elected officials and by the League of Cities and Association of Counties once these recommendations are adopted.
3. City and County explore partnership with OSU and counterparts in Lane County (Lane, Eugene, Springfield, and University of Oregon) to lobby for a state law allowing local tax revenue from Pac-12 events and on-campus sales to address the affordable housing impacts from the university population. The tax revenue would be split between the universities and the local municipalities to fund subsidized housing for low-income students and affordable housing for the surrounding community.

Investigating resource development and legislative advocacy for recommendations

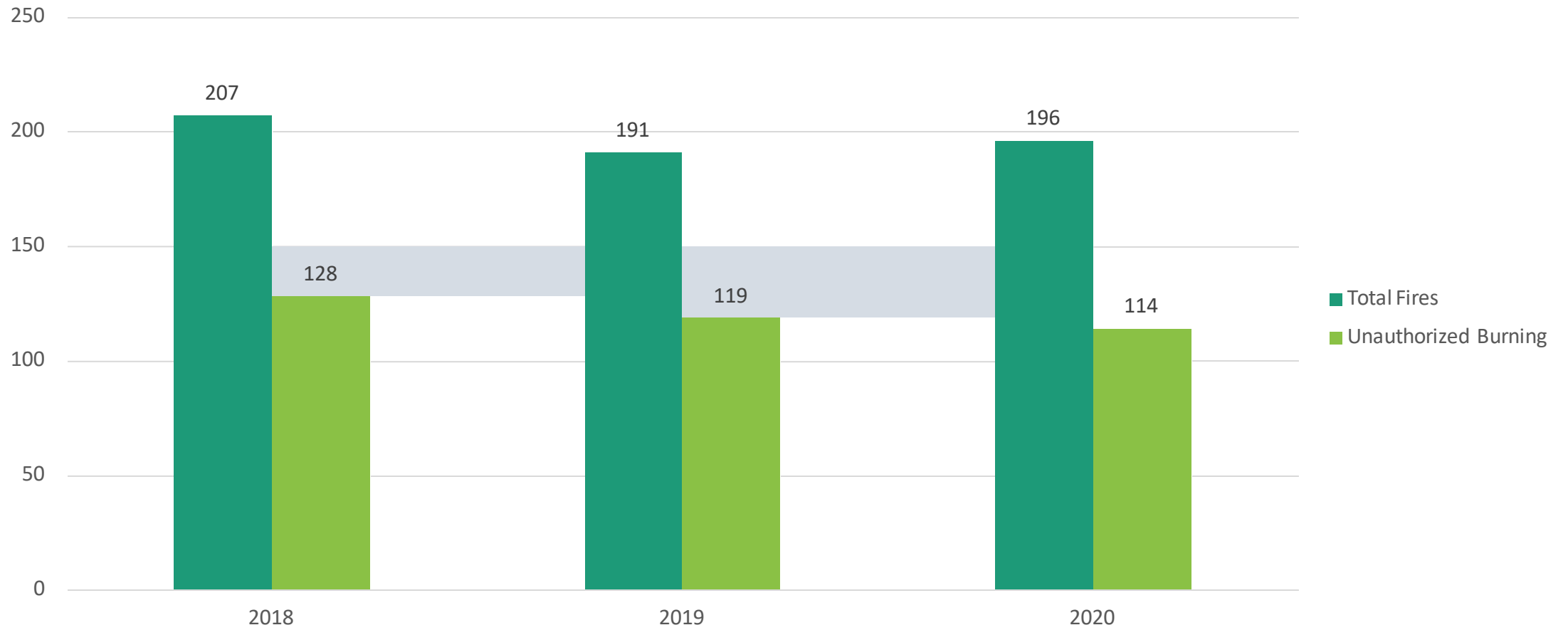
- The recommendation for legislative advocacy has been given to the city and county elected officials.
- Other avenues for advocacy and resource investment at the state level could be pursued once the HOPE recommendations are officially accepted. (Housing Alliance, Community Action Partnership Organization, etc.)
- Discussion of coordinated strategies to advocate for state/federal funds to implement the recommendations.

Educational Presentation and Discussion

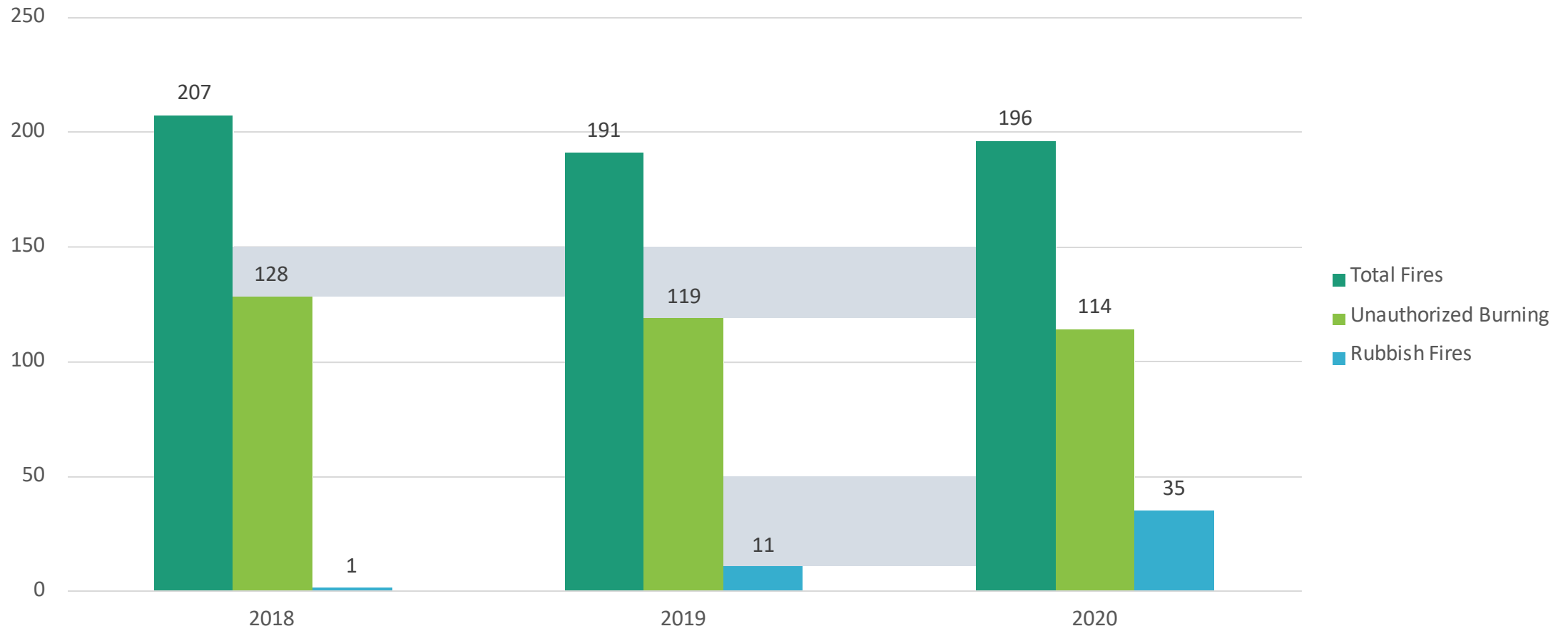
- Captain Joel Goodwin, Corvallis Police Department (CPD)

DATA RELATED TO THE
BEHAVIOR-BASED INTERSECTION
of
CORVALLIS PUBLIC SAFETY
and
HIGH-IMPACT HOMELESS

FIRE SAFETY



FIRE SAFETY

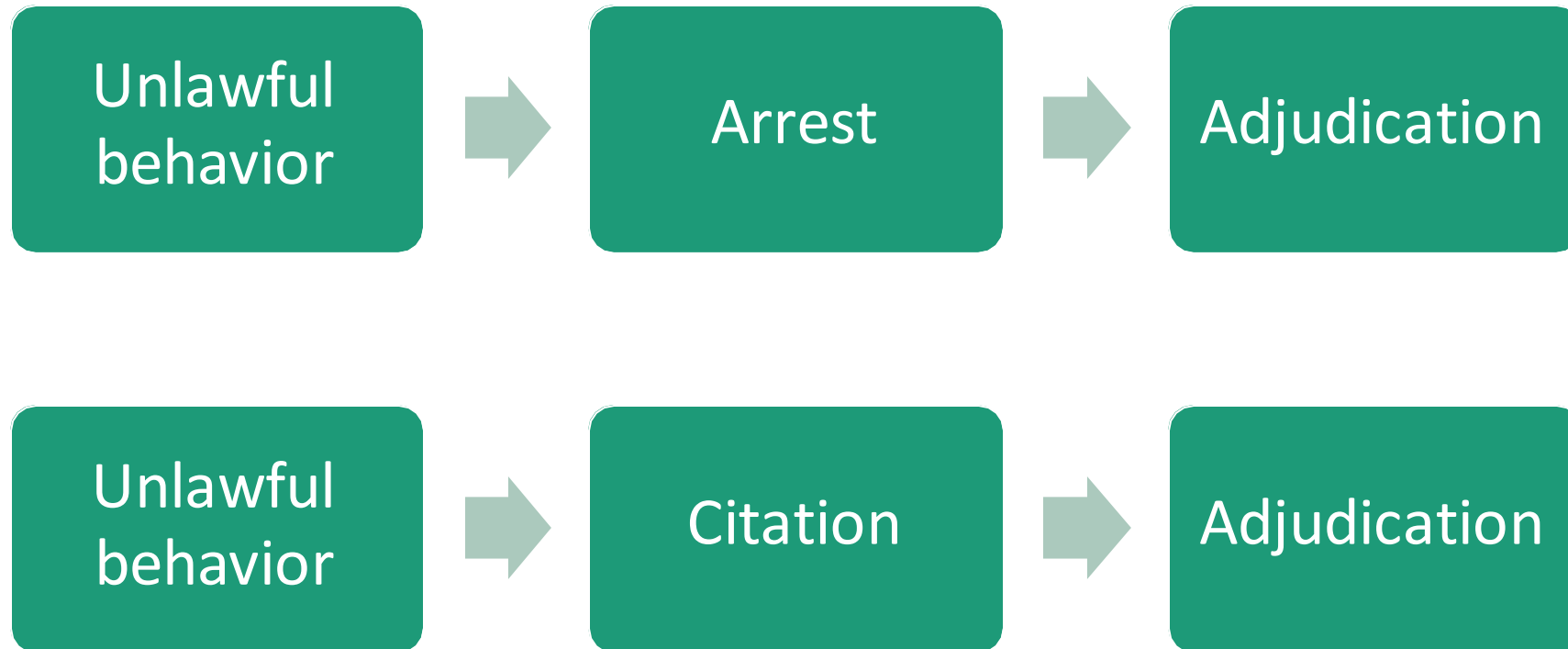


FIRE SAFETY

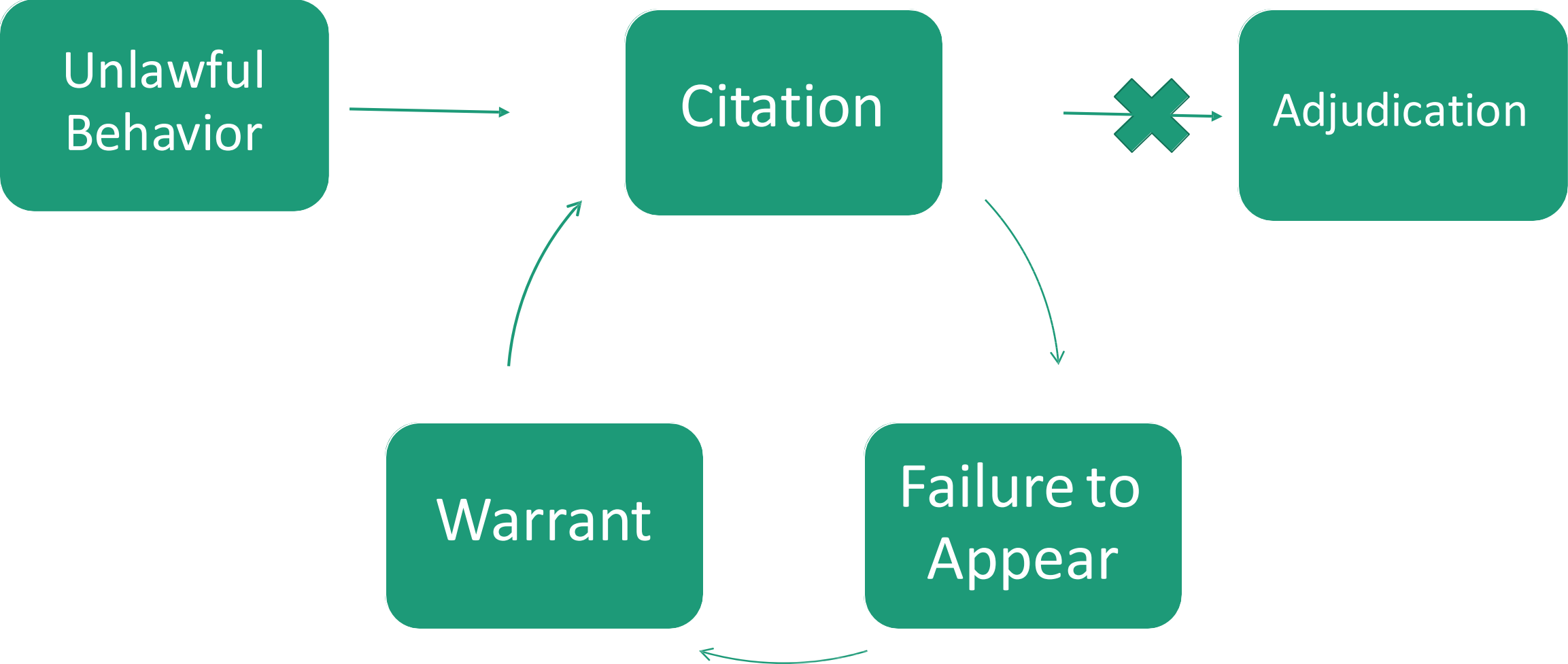
In the last 9 months, 80% of intentionally set unattended fires were within the red circles.



UNLAWFUL BEHAVIOR



UNLAWFUL BEHAVIOR



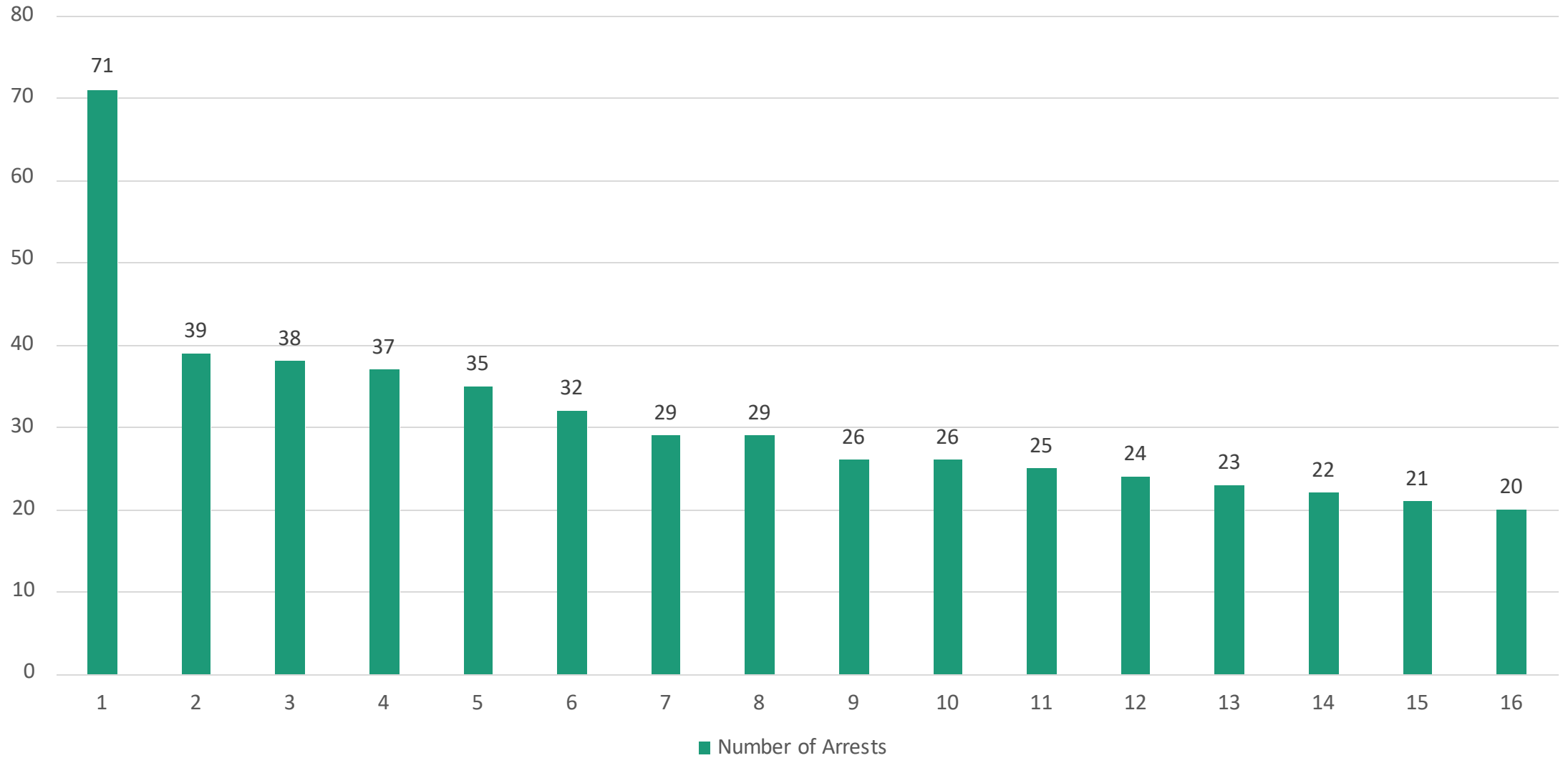
UNLAWFUL BEHAVIOR: Repeat offenders

From January 1st, 2020 through May 18th 2021,
64
people have been arrested
more than ten times.

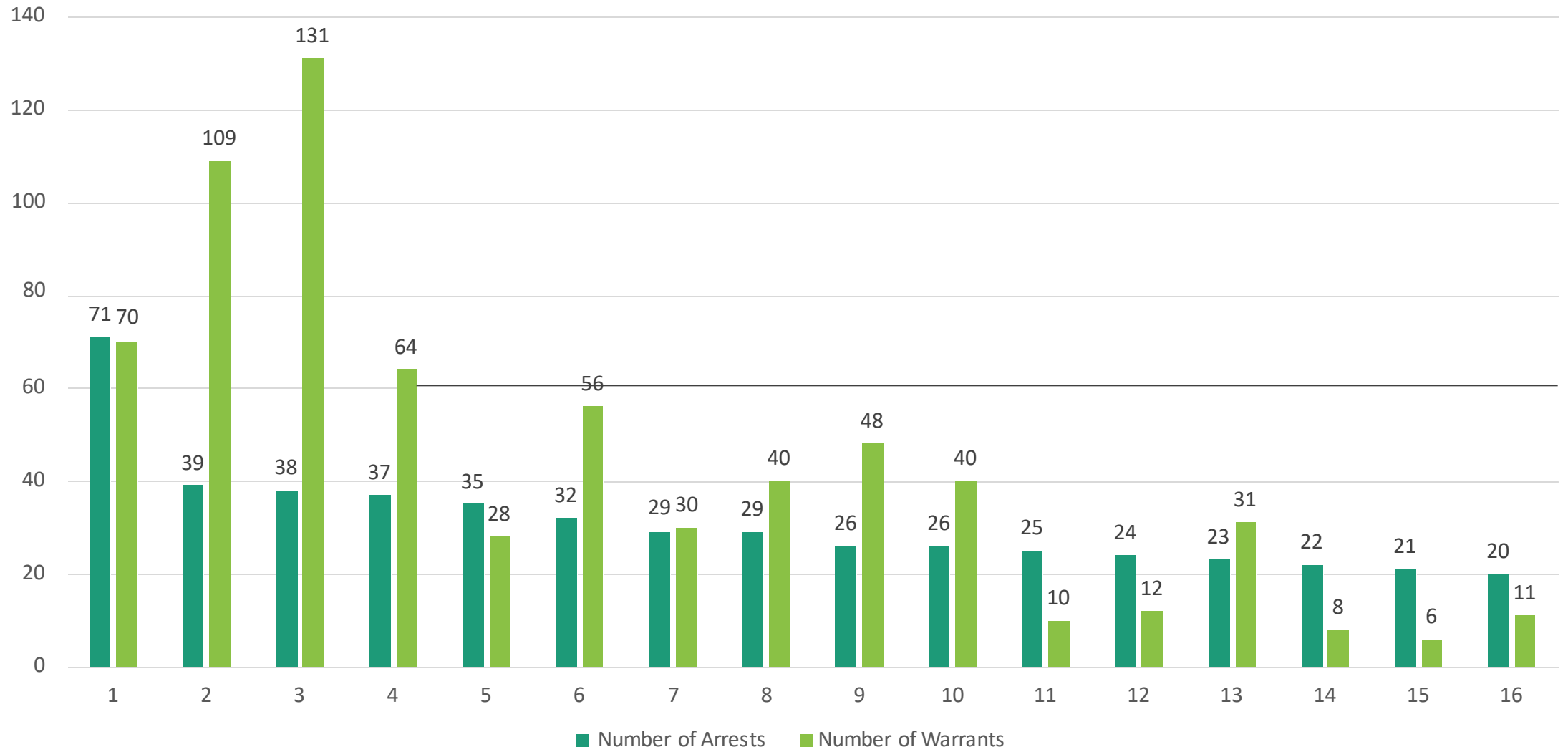
UNLAWFUL BEHAVIOR: Repeat offenders

- From January 1st 2020 through May 18th 2021,
 - **16**
 - people have been arrested
 - **more than twenty times.**

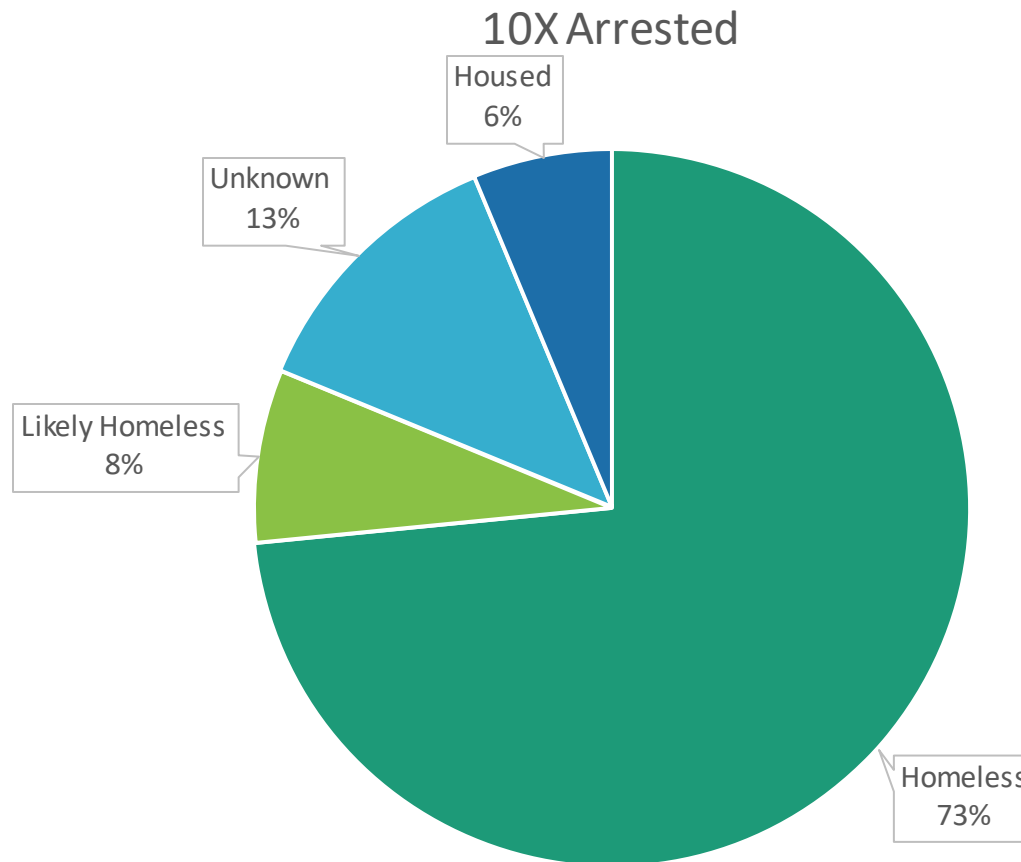
Number of Arrests 2020-2021(YTD)



Number of Arrests 2020-2021(YTD)

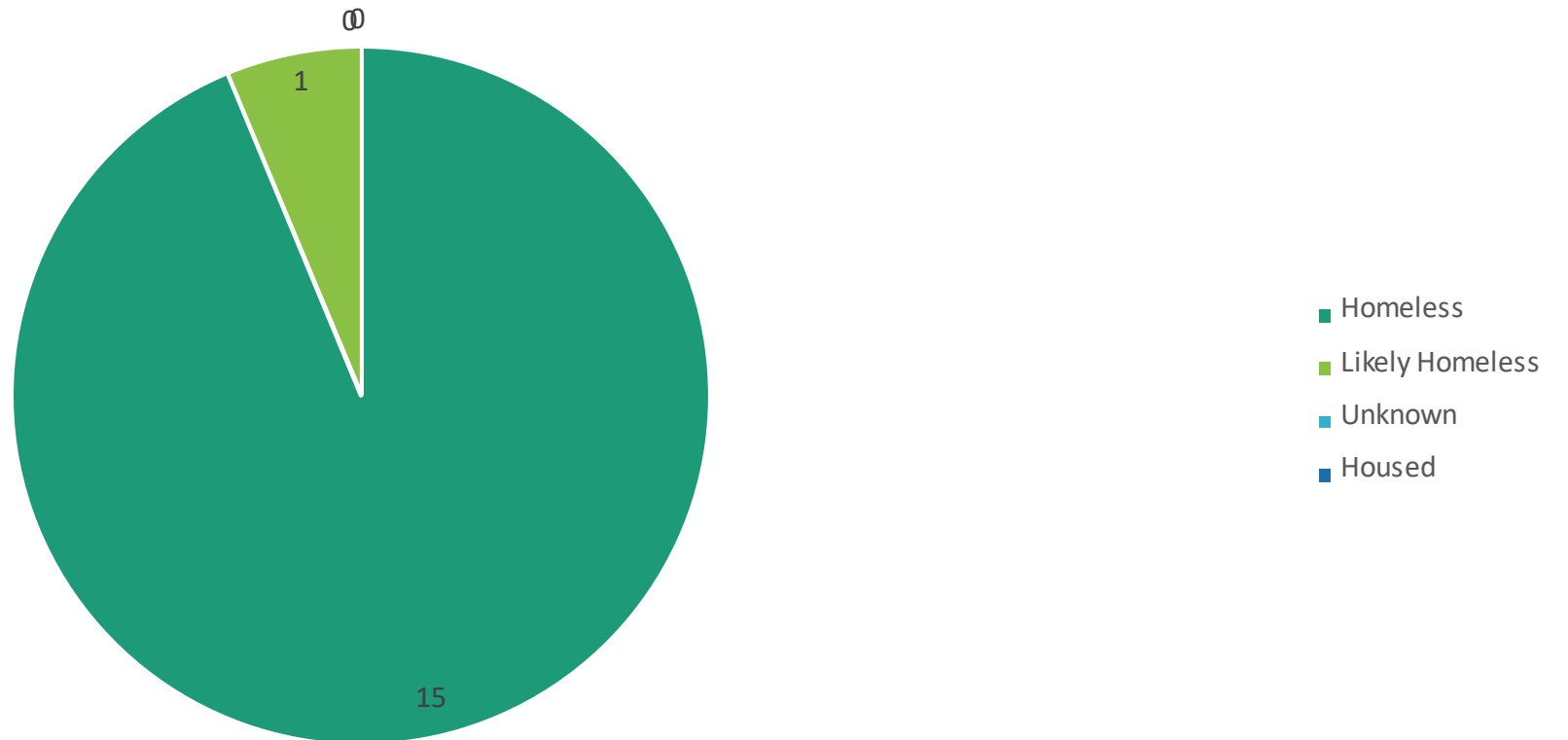


UNLAWFUL BEHAVIOR: Repeat offenders

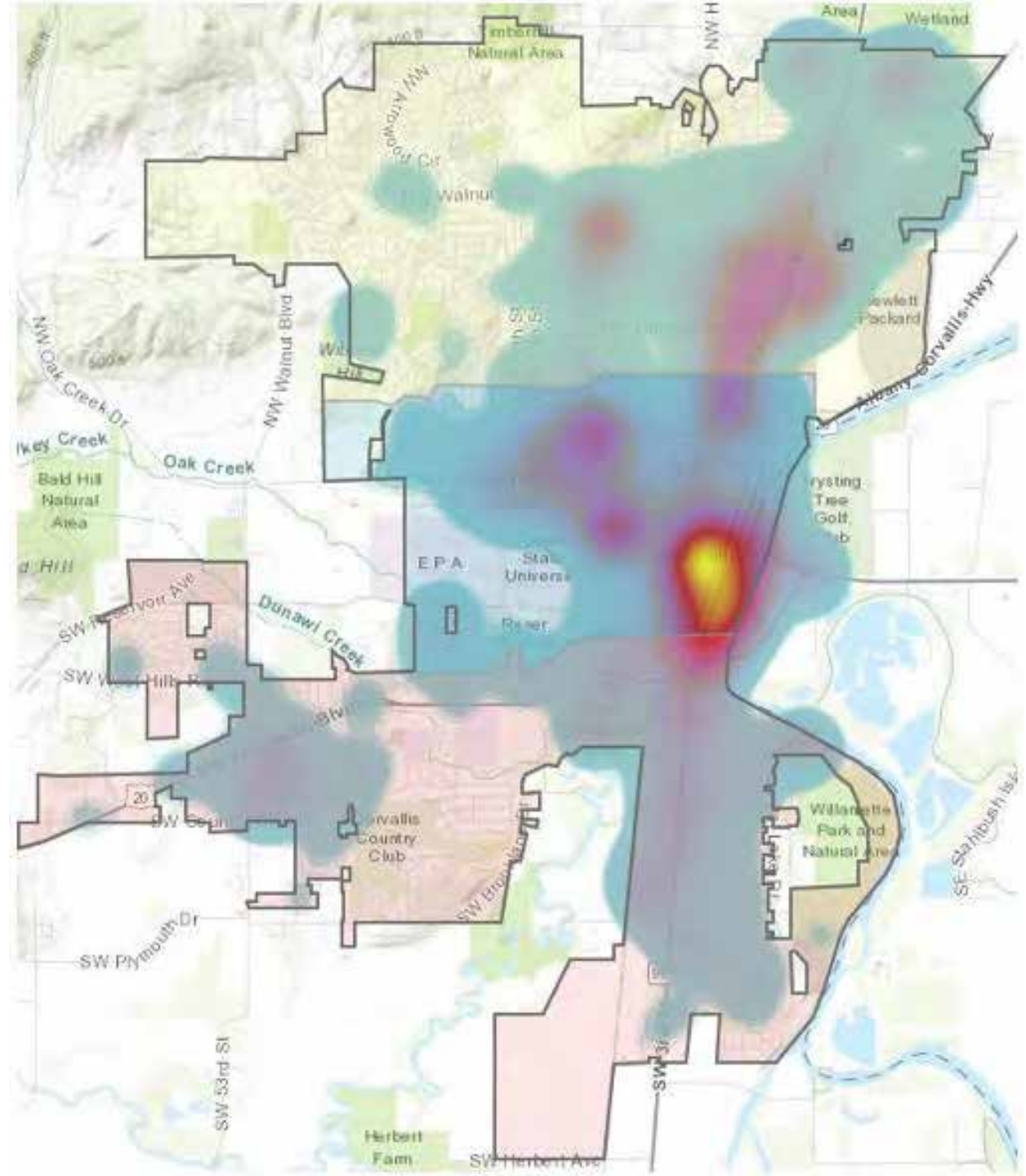


UNLAWFUL BEHAVIOR: Repeat offenders

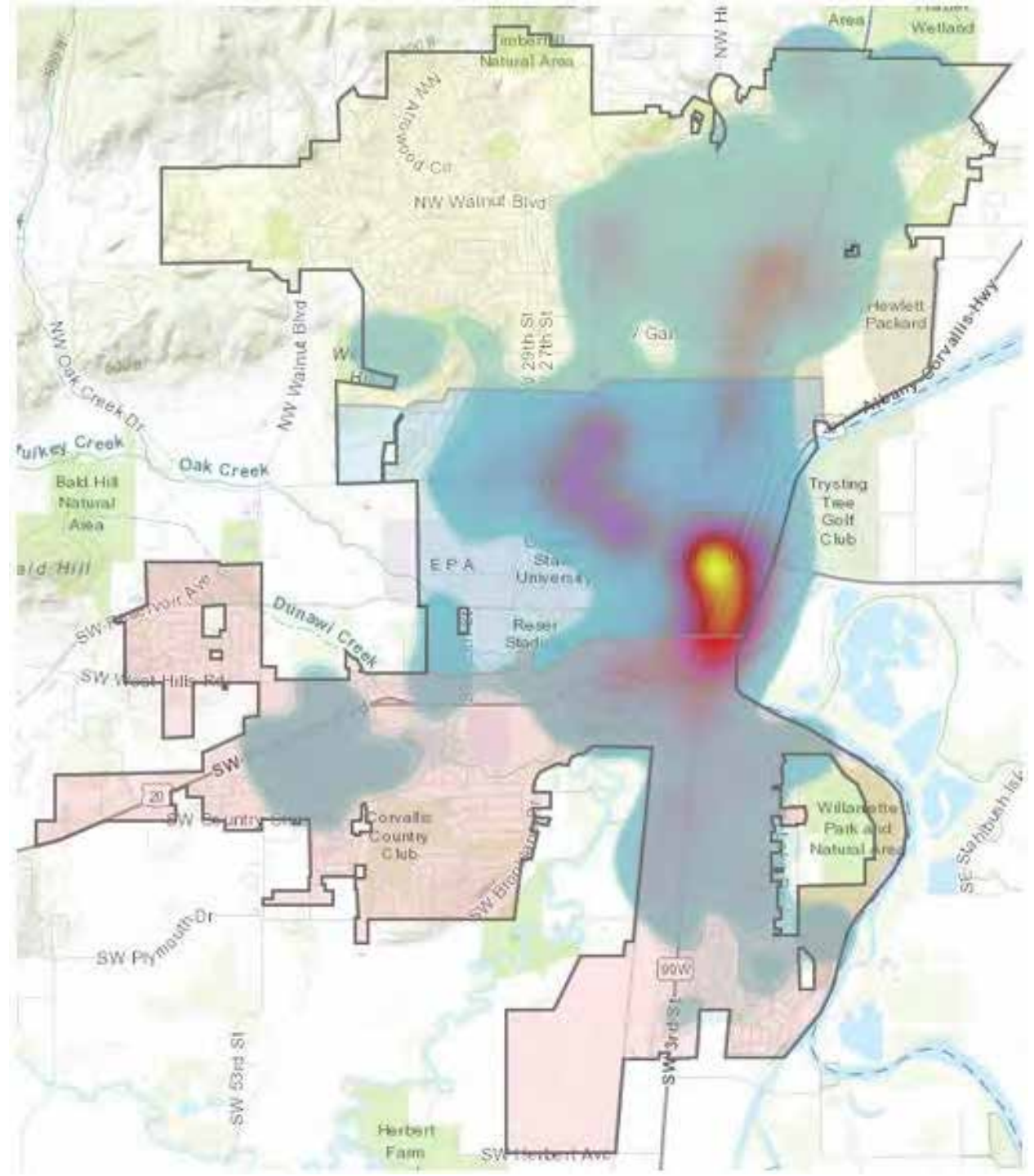
20X Arrested



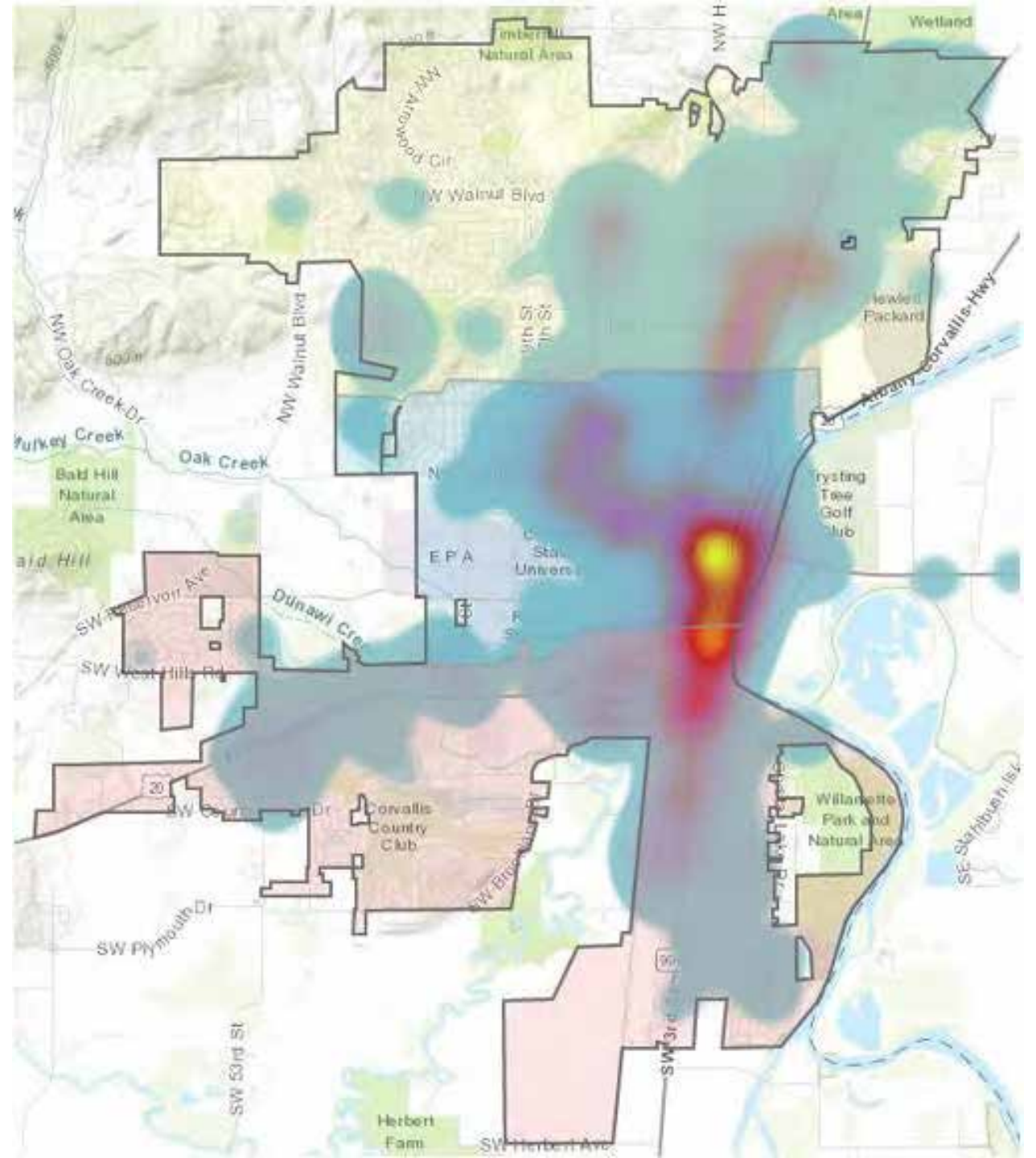
UNLAWFUL
BEHAVIOR:
Arrest
location
(2018)



UNLAWFUL
BEHAVIOR:
Arrest
location
(2019)



UNLAWFUL
BEHAVIOR:
Arrest
location
(2020)



UNLAWFUL BEHAVIOR:

Total CPD calls for service downtown
(Excluding traffic)

2019: 24%

2020: 25%

2021 (YTD): 28%

UNLAWFUL BEHAVIOR: MICROSHELTERS

- Three current microshelter sites permitted by the City of Corvallis
 - Two have been in place long enough to review data
- Feedback from CD is positive
- Average calls to address about 1x per month
 - ***These calls do not appear to be related to the microshelters***

UNLAWFUL BEHAVIOR:

Tent camping

- Parks are often used as tent camping locations
- Pioneer Park, BMX Park, and Skate Park have long been favorites in Corvallis
 - 2019: 526 CFS
 - 2020: 1,012 CFS
 - 2021 YTD: 374 CFS

OFFICER SAFETY



QUESTIONS?

Next Steps

- Board recruitment in June and July for two openings.
- Accepting the HOPE recommendations:
 - 6/7/21: Corvallis City Council will review and vote to accept the recommendations.
 - 6/8/21: County Commissioners will review the City's thoughts on lead roles and responsibilities for the recommendations.
 - 6/15/21: County Commissioners will vote to accept the recommendations.
 - 7/1/21: Joint City and County Elected Officials meeting to discuss lead and joint roles and responsibilities to implement the recommendations.



Home, Opportunity, Planning, and Equity (HOPE)

Advisory Board Meeting

Approved Minutes

May 26, 2021 from 4 pm to 6 pm

ZOOM Meeting



-
- Members Present:** Florence Anderson; Lennox Archer; *Xan Augerot (Commissioner, Benton County); Catherine Biscoe; Karyle Butcher; Bruce Butler; Anita Earl; Joel Goodwin; George Grosch; Barbara Hanley; Aleita Hass-Holcombe; Nicole Hobbs; Christina Jancila* (Business Associate); Charles Maughan* (Corvallis City Council); Pegge McGuire* (CSC); Jim Moorefield* (Co-Chair); Andrea Myhre; Jan Napack* (Corvallis City Council); Reece Stotsenberg* (Co-Chair); Janie Tebeau; Linda Tucker.
- Excused:** Bryan Cotter
- Absent:**
- Staff Present:** Julie Arena (Benton County Health, HOPE Program Coordinator); Paula Felipe (Benton County Public Health, recorder); Suzanne Hoffman, Health Department Director; Joe Hahn, Equity, Diversity, and Inclusion Coordinator.
- Guests:** *Executive Committee Members.
-

- I. **Welcome and Introductions.** Overview of agenda and reminder of agreements of culture, such as inclusive, respectful, transparency, and kindness.
- II. **Public Comments (limited to 2-3 minutes).**
 - No Comment
- III. **Approval of Minutes:** **MOTION** made by Karyle Butcher to approve the April minutes; Seconded by Pegge McGuire. **MOTION PASSED** with one abstention.
- IV. **Membership update:**
 - Janie Tebeau has joined the HOPE Board and serves with NAACP where she formed a new policy committee focused on affordable housing and homelessness.
 - Niki Hobbs remains on the board while transitioning to grad school.
 - Julie Arena is working with Diversity Coordinator Joe Hahn and Rocio Munoz to make updates to the original HOPE application to make sure it is inclusive.
- V. **Overview and Community Updates:**
 - Project Turnkey – Corvallis Housing First has acquired the Budget Inn for emergency sheltering and then permanent supportive housing. Nine people in so far; one more to move in; repairs on south building.
 - How people access shelter at the Budget Inn:
 - Placement is determined by referring individuals on the local Coordinated Entry list, or the list of people who have been entered into the homelessness management information

system (HMIS) and have participated in an assessment, as the intention is to prioritize those who are homeless and qualify for Permanent Supported Housing (or those who have a disability, have a history of chronic homelessness, and are vulnerable), as well as those who are BIPOC or from the LGBTQ community.

- Individuals being served through the Corvallis Daytime Drop-In Center, Community Services Consortium, and Unity Shelter are asked for their information to be inputted into HMIS because of program funding requirements. However, service providers working with a client in need of shelter and support, or are an individual looking for shelter and support, can contact Dan Easdale at 541-224-1170 for more information.
- Community Court will be launching at the end of June and will be held the last Thursday of the month.
 - The purpose of adopting Community Court is to divert some people with misdemeanor offenses from entering jail and instead connect them with the supportive services they need.
 - This effort is in partnership with the following local providers:
 - ARC of Benton County
 - Benton County Behavioral Health
 - CHANCE
 - Community Outreach
 - Corvallis Drop-In Center
 - Corvallis Housing First
 - Jackson Street Youth Shelter
 - Unity Shelter
- The Corvallis City Council has removed the moratorium on enforcement of illegal camping as of May 15th. The City has provided guidelines to help houseless community members know where they can legally sleep at City Hall and the city parks system in accordance with the Boise decision.
- Funding opportunity: InterCommunity Health Network Coordinated Care Organization (IHN-CCO) invites interested parties in Benton, Lincoln and Linn counties who can positively impact the health outcomes of IHN-CCO members to submit proposals. The selected proposals will be Delivery System Transformation (DST) pilots that help transform the health care delivery system and projects that impact housing through the SHARE (Supporting Health for All through Reinvestment) Initiative. Due 8am on June 2, 2021.
 - The Request for Proposal Guidelines and required Letter of Intent Form can be found on the IHN-CCO website: [IHNtogether.org/RFP](https://ihntogether.org/RFP).
- Temporary increase in federally funded housing vouchers, just received by Linn Benton Housing Authority.
 - HOPE Board member interest in a work group to discuss housing voucher increase and strategies? Pegge, Andrea, Jim, Janie, and Xan

VI. Debrief from Joint Elected Officials Meeting 5/20/21 (Xan, Jan, Charles)

- City and County elected officials met to review the HOPE recommendations and discuss the process of formally accepting them.
 - Link to the meeting video: <https://vimeo.com/553411384>
 - Link to final recommendations: https://www.co.benton.or.us/sites/default/files/fileattachments/health_department

[t/page/7506/hope_policy_recommendations_4-28-21_approved.pdf](https://www.corvallisoregon.gov/page/7506/hope_policy_recommendations_4-28-21_approved.pdf)

- Both bodies shared gratitude for the work the HOPE Board has done and the process of data collection, research, prioritizing, and community engagement as outlined by the Bylaws.
- Accepting the HOPE recommendations:
 - 6/7/21: Corvallis City Council will review and vote to accept the recommendations.
 - 6/8/21: County Commissioners will review the City's thoughts on lead roles and responsibilities for the recommendations.
 - 6/15/21: County Commissioners will vote to accept the recommendations.
 - 7/1/21: Joint City and County Elected Officials meeting to discuss lead and joint roles and responsibilities to implement the recommendations.

DISCUSSION:

- Want to make sure there is movement on these recommendations.
- Prioritization; we can't do it all with limited people and resources.
- Charles: Everyone is excited about the recommendations to move forward.
- George: it was positive. Adequate supply of housing will change the community. We need to promote the value of having that spectrum of housing; need advocacy.
- Charles: Submit to city recorder and BOC to receive message and will share it. Definition of accept--like accepting a treasurer's report instead of adopting it; moving forward to flush out further.
- Jan: understand things need to be detailed and city will help us actualize the plan.
- Charles: I do plan on moving to adopt as policy once more finalized; these are goals we will work on as a city.
- Jim: word of caution: accept does not mean any of this is a priority; also next steps on who takes the lead role; clearly a process for deciding what is important and what happens next; don't think our elected officials decided this as list of priorities. Look forward to regular updates as the details get worked out.
- Pegge: Additionally, if the recommendations are adopted, the city and county lobbyists can make the legislation a priority.
- Karyle: a lot can happen in city council; with 2 city council people in HOPE, this could be faster than advisory board discussion.
- Julie: The City Council expressed gratitude to you all to make it easier to accept these recommendations; of the process to be data driven; research; engage the community; unpaid time. Thank you for deliberate and thoughtful process; outlined by the bylaws.
- George: It is important to adopt this plan; going in right direction; we will give support they need when time comes.

VII. 12 Policy Recommendations:

1. Facilitate and coordinate data improvement efforts with community partners.
2. Work with providers to create metrics for successful program goals.
3. Convene providers at routine meetings for improved care coordination facilitated by a full-time staff member.
4. Collaborate with social service and health care partners to increase the number of paid, full-time case managers to support people transitioning out of homelessness.
5. Pursue implementation of a crisis response team and collect data on scope and scale of need for crisis response.

6. Provide organizational capacity to facilitate and coordinate providers in establishing a 24/7/365 Sheltering System for all populations with onsite resources at shelter locations to transition people out of homelessness
7. Facilitate and support the creation of a Resource Center.
8. Explore and investigate the need and the barriers to accessing housing for individuals and their families in our community whose past history has impacted their ability to secure housing.
9. Provide routine communication, notice, and opportunities for community involvement on the topic of homelessness services.
10. Increase development or acquisition of affordable housing units for permanent supportive housing (PSH) by 20 new units per year for the next eight years to add at a minimum 160 new units of PSH in Benton County.
11. Increase available rental/income assistance options.
12. Increase supportive services and stable funding streams to provide services to residents at more affordable housing locations.

VIII. Legislation Advocacy: Investigating resource development and legislative advocacy for recommendations:

- County and City elected officials must continue to advocate for statewide leadership on local requirements for shelter beds in each county with accompanying state funding to support those required beds. This state requirement and funding is needed to address worries about migration of people to areas with services from other areas.
- State and federal funding for all of these topics must continue to be advocated for by city and county elected officials and by the League of Cities and Association of Counties once these recommendations are adopted.
- City and County explore partnership with OSU and counterparts in Lane County (Lane, Eugene, Springfield, and University of Oregon) to lobby for a state law allowing local tax revenue from Pac-12 events and on-campus sales to address the affordable housing impacts from the university population. The tax revenue would be split between the universities and the local municipalities to fund subsidized housing for low-income students and affordable housing for the surrounding community.
- The recommendation for legislative advocacy has been given to the city and county elected officials.
- Other avenues for advocacy and resource investment at the state level could be pursued once the HOPE recommendations are officially accepted. (Housing Alliance, Community Action Partnership Organization, etc.)
- Discussion of coordinated strategies to advocate for state/federal funds to implement the recommendations.

DISCUSSION:

- Pegge McGuire: things a little disjointed in funding; looking at earmarks from senators and current legislation. More advocacy needed with 10 community for navigation centers; until we are clear about funding and work hard on legislators' priorities, I don't think we will see those kind of earmarks. Other opportunities like project turnkey to put together proposals; foundation funds; types of funding. Julie: getting feedback from board members for next steps.
- Pegge: Julie is one person; there are so many components that need additional shepherding as we move forward; some level of resource commitment.

- Jim: On legislative process, point out effective advocacy; one on one with elected officials; 2 coalitions of organizations that have ongoing presence in Salem and talk to legislators every day. Oregon Housing Alliance has effective presence; local government can be a member and has in the past with city council; we can be involved and effect the legislative agenda. Consider becoming members of lobbying organization that are effective on housing and homelessness.
- Julie: On legislative advocacy: Are there HOPE members who want a workgroup to come up with possible strategies--joining housing alliance a good place to start.
- Xan: I engage with legislators regularly. Move HOPE plan to adoption and have real projects in the pipeline with specific plans; let's address obstacles and address funding; need a level of solution established.
- Jim: Priorities need to be adopted so we can say we have decided this is a priority and what we need.
- Catherine: Excited we are having this conversation on how to put action under recommendations like lobbying and what does this ideally look like, such as hire someone to take on this project or collaboration between elected officials and service providers and HOPE board.
- Xan: City Council and BOC will be discussing.
- Jim: part of being member of Oregon Housing Alliance is you help determine legislative agenda. Agenda for session determined before session starts; agenda for next year is determined this summer and fall for short session.
- Julie: executive committee can talk about priorities moving forward and work groups and be agenda item for next month.

IX. Educational Presentation by Captain Joel Goodwin of the Corvallis Police Department

- Data related to the behavior-based intersection of Corvallis Public Safety and high-impact Homeless. Data not based on housing status; this is from Corvallis public safety and fire records.
- Recognize there is a spectrum from temporary homelessness to more of chronic longer-term impact nexus with public safety.
- Fire: Data from last 3 years (2018 to 2020): about 200 fires per year. We don't track data on homeless. Look at categories of fires such as burning brush pile leaves unattended, campfires in parks. Category rubbish fires: specific exclusively for camping situations; there has been a significant increase. Total number in 2020: 35 rubbish fires.
- In last 9 months, 80 percent of intentionally set unattended fires in red circles on map. (mostly in downtown Corvallis and Willamette Park.)
- Video from fire in Pioneer Park in July; and a few weeks ago a fire near BMX track. Parks and Recreation photographed the damage. Propane tanks exploded. Fires can spread quickly and pose danger to the area creating a lot of hazards.
- Calls for service about behavior. Officer responds and depending on crime, could remain in jail. If found guilty, sentence given. Typically in Corvallis; unlawful behavior results in issuing a citation in lieu of custody--about 90 percent are citations in lieu of custody. Only serious offenders go to jail. So, most do not reach the adjudication stage of criminal process. Why don't they get sentenced to community service or drug treatment? They need to be adjudicated first; instead they get repeated citations. With those repeat offenders, from Jan 1 2020 thru May 18, 2021 64 people arrested more than 10 times. In that same time

frame: 16 people have been arrested more than 20 times. Cycle of issuing citations; failure to appear and behavior not corrected.

- To illustrate that point; top 16 offenders; not most serious but most frequently arrested: one was arrested 71 times.
- Law enforcement are problem solvers; citation may solve that problem; but with repeated behavior, the citation is not solving problems.
- Our officers look for other solutions to help that person connect with others. If substance abuse issues, we can make referrals but person needs to want the treatment. Only under certain circumstances get immediate treatment, such as imminent danger to others. If there is a mental health issue, we legally cannot force them to get help unless they are willing to do it or immediate danger to others.
- Arrest warrants: each arrest does not capture charges or warrants; They might have several warrants for their arrests. A person since Jan 1, 2020 has 131 warrants in less than a year and a half.
- More than 20 warrants result in citation due to no capacity to do other than that. Writing tickets is not changing behaviors.
- Unlawful behavior and Repeat offenders: not a box to check on housed or unhoused or other status. Specific nexus to offense; people arrested 10 or more times, officers asked about their housing status: Results: 73 percent homeless; 8 percent likely homeless; 13 percent don't know; 6 percent housed. Most were unhoused repeat offenders—it is an educated guess--when ask for address for the citation, they may give us a shelter address where they receive mail or an ID card out of state address. 65 people arrested 10 or more times; about 8 showed an address as transient and the rest had some sort of address but might not be valid.
- List of people arrested 20 or more times; 15 homeless; mostly solid nexus between issues.
- Unlawful behavior: Call for service downtown: 2019; 24 percent Corvallis police officers were in downtown area.
- In 2020 up to 25 percent; 2021 up to 28 percent; at least 1 in 4 calls for service in downtown area.
- Three current microshelter sites permitted by the City of Corvallis.
- Two have been in place long enough to review data.
- Calls do not appear related to microshelters. Parking lot in middle of night; vandalism; stealing.
- Parks are often used as tent camping locations.
- Pioneer Park, BMX Park, and Skate Park have long been favorite areas for tent camping.
- Looked at geographic area: 2019: Corvallis PD had 526 calls for service at those parks; not necessarily related to tent camping though can be related.
- In 2020, 1,012 calls for service in those park areas.
- In 2021 YTD 374 calls for service, could be a welfare check; follow-up; disorderly conduct; alcohol related; stabbing; assaults; discharging a firearm; some other serious calls as well.
- Officer safety: Dispatched to park; woman hit by boyfriend who left the area. Officer later came back to park looking for him to investigate. They were camping in park as officer was flagged down and realized a fight was brewing. The officer tried to prevent physical violence; one had a walking stick and tried to separate them. One grabbed the officer so he could assault the other man; a third man shouting at officer and grabbed a hatchet as officer tried to prevent this fight. There are concerns in these camping areas for officer

safety; we usually send two officers when we have calls for service in the parks. We are problem solvers trying to find solutions and trying to deescalate without taking enforcement action.

- Regarding the man with 131 warrants: we recognize everyone is unique and we care about the people we serve. He was homeless and was connected with services; but he cannot maintain sobriety so the cycle continues.

DISCUSSION:

- Karyle: With these arrests and fires, what is the overarching message you are trying to give us? Showing us the bad side of homelessness? Joel: we recognize homelessness is a spectrum and I'm comfortable saying in my opinion most of the homeless we don't interact with, but we do have some with high impact in our community who we deal with routinely.
- Karyle: Would CAHOOTS help? Joel: Pre-covid, Anita Earl and mental health services and I made a project to engage folks where they are. Anita had some great success with some and some don't change. Don't think CAHOOTS could solve all of these problems.
- Karyle: On microshelters, there was concern by church about thefts and trespassing. Do you have concerns? Joel: With permitted RV camping in Pioneer Park, we are address based. There was high workload for community development staff; We are fact based; don't assume; there is a parking lot adjacent to the park.
- Catherine: This is alarming looking at some of the worst offenses. Do you feel the Chelsea hub model will impact this arrest or case load? Do you feel if these individuals had safety and stability of housing that would make a big different in top arrest cases? Joel: situation table would have positive impact like the person with 131 warrants—when in substance abuse—situational table could provide better access and resources to help. Some people could benefit from stable housing and some are not interested. Extreme end of spectrum often times most antisocial behavior.
- Jim: appreciate presentation and data. Concerning expanding the Benton county Jail; I think too many people are in prisons but it is not same as the local jail. My eyes were opened on lack of options law enforcement has trying to problem solve and get someone into situation where behavioral problems can be addressed more effectively.
- Jim: What is relationship between options and ability to solve problems as it relates to the jail? Joel: Some think arrest is the end and it's just the beginning. Most never get to adjudication. Circuit court has drug court looking for alternatives; courts trying to solve problems as well. 90 percent of arrests last years were citations--we wrote them a ticket.
- Xan: Couple of steps taken at county in last year to address this issue: failure to appear and social turbulence. Jail commander added more space in jail and then covid hit and we can't use it. Setting up pretrial services program; not novel; support offenders to make it to court. Program gives reminders of court dates--strategy to have short term use cell phones to receive reminder if no phone available. Also working with probation to introduce services that intersect earlier in criminal justice system before go around resolving door--just starting to roll out that pretrial services program.
- George: appreciate Corvallis PD as first responders. We don't have the infrastructure in place. This is a solid foundation to encourage elected officials because this system is not working and this shows what is missing. Caution about making assumptions about specific problems like unlawful behavior and calls for service--when I look at downtown hotspots, could relate to other areas with the university and pandemic or other issues so do not make

broad assumptions.

- Andrea: There is a lack of jail capacity; makes for unsafe conditions for homeless in our community. People behave illegally; no situation to stop them; mix of people on streets that would do well in housing to stabilize and others not even present with us. Unless receive serious treatment they won't listen to tickets. Sometimes jail is a tool to help people stabilize.
- Need a jail and crisis services.
- Flip: see housing as huge player. I know the police department cares and trying to solve problems; we don't witness the crazy stuff at night but police do...homeless are nocturnal like Michael's boating landing; whole different world; people in tents are vulnerable and don't want to be there. When less people camping, less fights so housing big issue to help this.
- Barbara: live near tree farm and our neighborhood trying to approach homelessness in compassionate way. Thinking about the data and people arrested multiple times. How much time do officers spend on the call? How much budget is spent on 64 people? Also, about the unlawful behavior: is it just camping or public urination or drunkenness? There is a percentage of people who will never seek help and some may need institutional settings for care. Joel: in terms of microshelters; safecamp permitting to county not city. Others more centrally located in Corvallis. About the amount of time spent on warrant: each circumstance is different, and my perception is bulk is related to other behavior--maybe drinking in public; disturbance; disorderly conduct; fighting; but we don't issue citations for illegal camping. Even in typical years maybe 5 or 10 percent of time repeated offenders; given warnings that is not working.
- Jan: if we took data set for Corvallis PD as base and five years from now; HOPE recommendations may have helped or not; we can look at data. Joel: There are a lot of moving pieces and parts.
- Ben Danley: It would be interesting to analyze data on victims of crime in Corvallis and see if there is a similar over-representation of people without homes. (Although those victims may be much less likely to report.)
- Joel: homeless are victimized by other homeless; spoken or unspoken don't report it to the police, which is frustrating to us; we want to hold them accountable; we need people to tell us about it.
- Pegge: Friends, when the eviction moratorium ends in June, homelessness will spike and we will see households on the street.

X. Next steps:

- Board recruitment in June and July for two openings.
- Accepting the HOPE recommendations:
 - 6/7/21: Corvallis City Council will review and vote to accept the recommendations.
 - 6/8/21: County Commissioners will review the City's thoughts on lead roles and responsibilities for the recommendations.
 - 6/15/21: County Commissioners will vote to accept the recommendations.
 - 7/1/21: Joint City and County Elected Officials meeting to discuss lead and joint roles and responsibilities to implement the recommendations.

XI Meeting was adjourned at 5:57 pm

Benton County & City of Corvallis
Home, Opportunity, Planning, & Equity (HOPE) Advisory Board



Julie Arena, HOPE Program Coordinator
Benton County Health Department
4077 SW Research Way
Corvallis, OR 97339
541-766-0252 * Email: Julie.Arena@co.benton.or.us

HOPE MEETING AGENDA

June 23, 2021 from 4-6 PM

Meeting location: Zoom or phone in

Join Zoom Meeting: <https://cscteam.zoom.us/j/91929383646>
One tap mobile: +12532158782,,91929383646#
Dial by phone: +1 253 215 8782
Meeting ID: 919 2938 3646

AGENDA

- I. Welcome, Zoom Housekeeping, Overview of Agenda.....4pm
- II. Public Comment* (up to 10 minutes)4:05pm
- III. Roll call and approve May meeting minutes4:15pm
- IV. Community Updates4:20pm
- V. Presentation and Q&A on Chelsea MA Situation Table for Care Coordination4:25pm
- VI. Presentation from Corvallis Chamber of Commerce on Downtown Survey results.....5:00pm
- VII. Educational Presentation and Discussion: Dannielle Brown, Benton County Behavioral Health
Director, on Mental Health and Addiction treatment and responsibilities5:20pm
- VIII. Next Steps5:50pm

*Public Comment: if you would like to make a public comment, please put your name in the chat window or "raise your hand" in the Zoom meeting when you arrive. List your name and the general topic of your comment in the chat. Comments will be made in the order that people "raise their hand" or submit a chat. For people calling in from a phone line, there will be an opportunity for comment for participants who have called-in.

HOPE Advisory Board Meeting

6/23/2021

Zoom Meeting hosted by Julie Arena, HOPE Coordinator

Zoom Housekeeping

- All attendees are muted when they join.
- All attendees can unmute themselves and choose to be seen visually by clicking “Start Video” at the bottom of the screen.
- Public comment:
 - Type your name into the “Chat” area, say you want to make a public comment, and on what topic.
 - Example: “Julie – public comment – crisis response.”
 - For those on the phone, there will be an opportunity to comment, too.
- Questions during the meeting:
 - Type into the “Chat” area and send it to host, Julie Arena.

Meeting Agenda

- 1. Meeting Overview**
- 2. Agreements and Culture**
- 3. Public Comment on any topics for 10 minutes**
- 4. Logistics:**
 - Vote to approve May 2021 minutes – roll call**
 - Board Membership update: Recruitment efforts**
- 5. Community Updates**
- 6. Guest Presenter: Dan Cortez from Chelsea Massachusetts to share the Hub model of care coordination, aka the situation table**
- 7. Guest Presenter: Simon Date from the Corvallis Chamber of Commerce to present some survey feedback from downtown business owners and community members**
- 8. Educational Component from Dannielle Brown, County Behavioral Health Director: Behavioral Health crisis response services and their nexus with folks experiencing homelessness**

Agreements for our culture + conduct:

Fun

Inclusive ✓✓

Humor

Food ✓

Action/roll up sleeves

Change the face of Homelessness

Honesty

Respect ✓

Consensus

Think before you speak

Cunoxaty ✓

transparency

Recognize personal bias

Kindness ✓

time management

Concise communication

Open minded ✓

opinions matter

data driven

Do your homework!

patient

authentic

Valuing personal experience

dedication/work ethic
honor the expectations of
the work

Public comment: 10 minutes

- **Comment limited to 2-3 minutes based on number of people wanting to comment**
- **Type into the “Chat” and say you want to make a public comment and on what topic.**
- **For those on the phone, I will ask if there are any public comments from callers.**
- **Can also submit written comments via email to Julie.Arena@co.Benton.or.us**

Logistics: Vote to approve May 2021 minutes, roll call

Flip Anderson

Joel Goodwin

Pegge McGuire

Xan Augerot

George Grosch

Jim Moorefield

Catherine Biscoe

Barbara Hanley

Andrea Myhre

Karyle Butcher

Aleita Hass-Holcombe

Jan Napack

Bruce Butler

Niki Hobbs

Reece Stotsenberg

Bryan Cotter

Christina Jancila

Janie Tebeau

Anita Earl

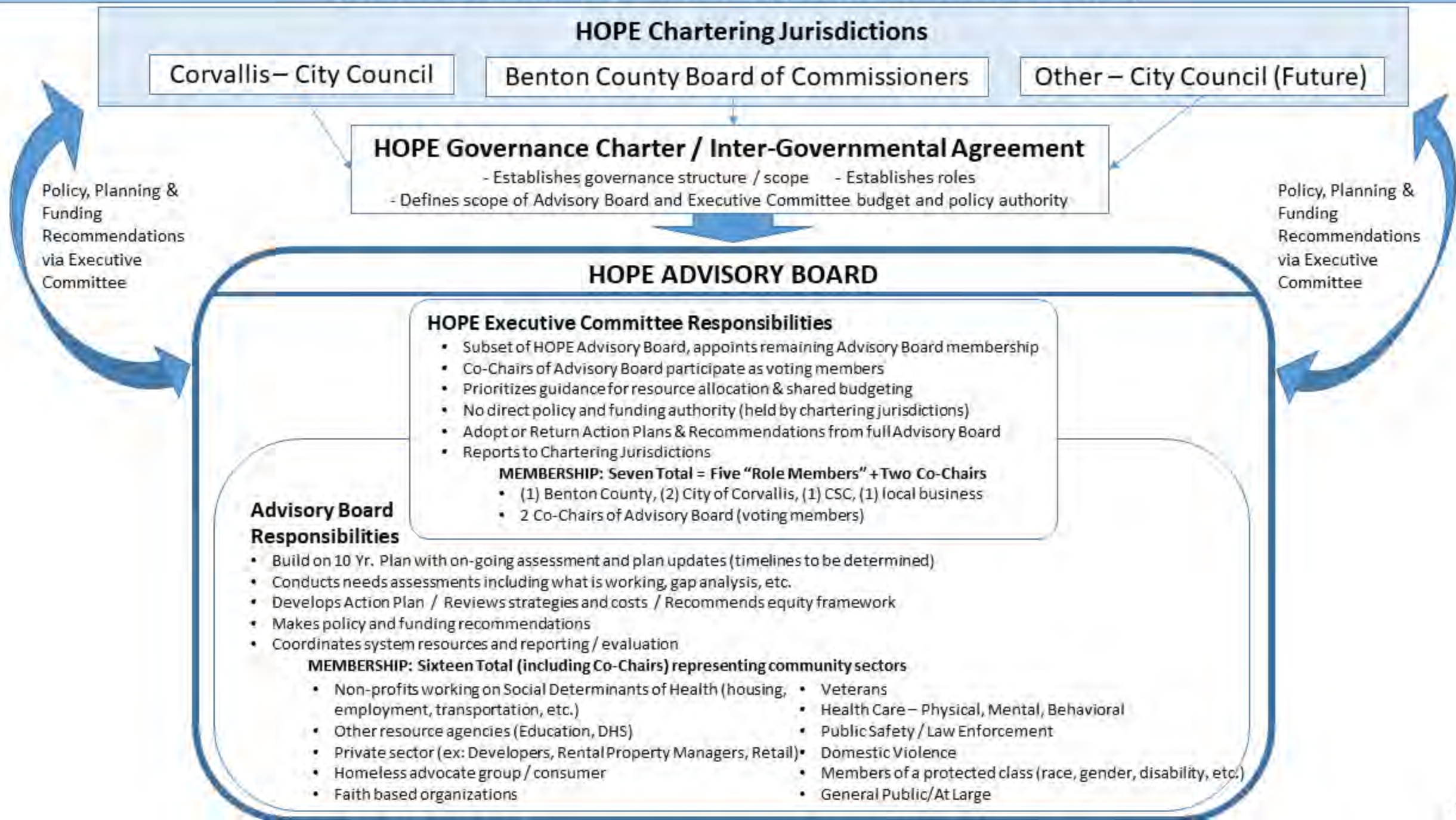
Charles Maughan

Membership Update:

- Julie working with county communications staff to develop outreach materials with new recruitment application.

Community Updates

- The Corvallis City Council has removed the moratorium on enforcement of illegal camping as of May 15th. The City has provided guidelines to help houseless community members know where they can legally sleep at City Hall and the city parks system in accordance with the Boise decision.
- Providers are witnessing lots of people in tents who have nowhere to go. Providers have shared they are seeing traumatizing experiences trying to find and relocate to anywhere safe.
- Emergency Housing Vouchers (EHVs): Temporary increase in federally funded housing vouchers, just received by Linn Benton Housing Authority.
 - HOPE Board work group met to discuss housing voucher increase and strategies: Pegge, Andrea, Janie, Jim, and Xan



Update on Joint Elected Officials Accepting Recommendations

- City and County elected officials met to review the HOPE recommendations and discuss the process of formally accepting them. Link to the meeting video: <https://vimeo.com/553411384>
 - Link to final recommendations:
https://www.co.benton.or.us/sites/default/files/fileattachments/health_department/page/7506/hope_policy_recommendations_4-28-21_approved.pdf
- Both bodies shared gratitude for the work the HOPE Board has done and the process of data collection, research, prioritizing, and community engagement as outlined by the Bylaws.
- Accepting the HOPE recommendations:
 - 6/7/21: Corvallis City Council voted to accept the recommendations.
 - 6/8/21: County Commissioners reviewed the City's thoughts on lead roles and responsibilities for the recommendations.
 - 6/15/21: County Commissioners voted to accept the recommendations.
 - 6/24/21: city and county internal staff are meeting to review elected officials priorities among the HOPE recommendations and prepare an overview for the 7/1/21 joint meeting.
 - 7/1/21: Joint City and County Elected Officials meeting to discuss lead and joint roles and responsibilities to implement the recommendations.

Guest Speaker: Dan Cortez

- Community Engagement Specialist with Chelsea, MA Police Department
- Adopted the “Hub model” of care coordination, also called the “situation table” where partners and providers from different organizations come together to jointly coordinate on complex situations.
- 7 minute ideo with an overview of the Chelsea model of care coordination and four filter process to bring situations to the group:

<https://youtu.be/UK8v8s6t63E>

Guest Speaker: Simon Date

- Corvallis Chamber of Commerce conducted a survey
- Simon is here to share the results of that survey

Educational Presentation and Discussion

- Dannielle Brown, County Behavioral Health Director

Next Steps

- Board recruitment in July and August for two openings.
- Upcoming progress on HOPE recommendations:
 - 6/24/21: city and county internal staff are meeting to review elected officials priorities among the HOPE recommendations and prepare an overview for the 7/1/21 joint meeting.
 - 7/1/21: Joint City and County Elected Officials meeting to discuss lead and joint roles and responsibilities to implement the recommendations.



Benton County

Behavioral Health

Crisis Services

- Focus is to serve any individual within the county experiencing a crisis 24 hours a day, seven days a week, 365 day per year
 - Daytime Crisis (Mon-Fri 6am-8pm) is covered by the Crisis Team
 - 4 Masters level clinicians (Qualified Mental Health Professionals – QMHPs)
 - Afterhours Crisis (8pm-6am Mon-Fri, weekends, and holidays)
 - 12 QMHPs from the all of the mental health teams on a rotation
- 24-hr crisis response
 - Crisis workers are paged by internal staff and community partners.

Crisis Services

- For every crisis, follow-up is attempted within 3 business days to ensure the patient's needs are met and coordination is done with their care team.
- Inpatient Psychiatric Hospital discharge coordination
 - Daily coordination meetings with inpatient hospital discharge planner
 - Care coordination for clients in the inpatient hospital discharging to Benton County
 - Follow-up services

Crisis Services

- 24 hour crisis line for all community members.
 - 1-888-232-7192 - Answered by clinicians 24-hrs/day
 - Crisis Text line – Text “Oregon” to 741741
- Partnership with local law enforcement
 - Coordinate a quarterly 40hrs. Crisis Intervention Training in our community
 - Pilot Project with Corvallis Police Dept. beginning July 1, 2021 – CORE (Crisis, Outreach, Response, Engagement)

Crisis Services

- Evidence of imminent danger to self or others per Oregon Revised Statute 426.005
 - Must have probable cause
 - Custody = Temporary suspension of civil rights
- Taking Custody of Individuals – Notice of Mental Illness (NMI - AKA Holds)
 - Directors Hold/Custody
 - Police Officer Custody (POC)
 - Two-physician hold
- Two-party petition – 15 judicial days, does not assume custody of individual

Crisis Services

- Notice of Mental Illness - NMI (cont.)
 - No more than 5 judicial days
 - Decision by judicial day 3
 - Civil Commitment hearing
 - 14-Day Diversion
 - Drop Hold and release
 - Outreach and follow-up

Crisis Services

- Statutorily required service of Community Mental Health Program (CMHP)
- Directors Designee requirement
- Not solely for unhoused population
- REMINDER – Holds (taking individuals into custody) temporarily suspends civil rights
 - Cannot be based on suspicion or symptoms alone – Has to present risk to self or others.

QUESTIONS?

Contact: Dannielle Brown

dannielle.brown@co.benton.or.us

OR Eric Bowling

eric.bowling@co.benton.or.us

Houseless
Survey
2021

HOPE PRESENTATION

June 23, 2021



Corvallis
Chamber
of Commerce

Introduction

- Chamber of Commerce has 370 members
 - Simon Date – CEO/President
 - 2 years this week
- We represent businesses in the Corvallis & Benton County area





Corvallis Chamber of Commerce

Why We Did It

Why Do The Survey?

- Representation in the houseless conversation
- Unique concerns of the business community
- We want to speak from a POV of knowledge, not guess work
- We have committed to share the unfiltered data with everyone

Shared with HOPE last month

- 17 questions, 4 of which had subsets



Points To Note in Responses

- This is not 'scientific'.

Perception vs. Reality factor

- Human rights should always trump business rights
 - Feedback from different church groups
- 68 duplicate IP addresses coinciding with FB post
 - Survey was anonymous (minus IP addresses)

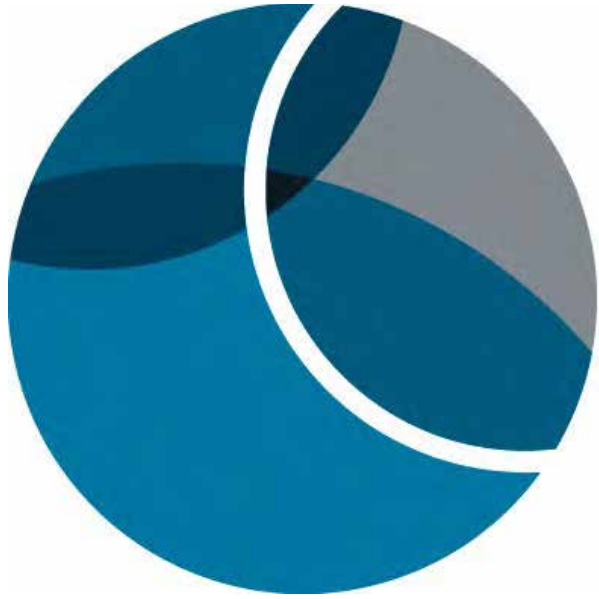


Who Took The Survey

- There are 3 groups in the survey, all self-identified
 1. Everyone – 456
 2. Owned a business – 162
 3. Belonged to the Chamber - 83

Groups 1 and 3 will be represented in this presentation



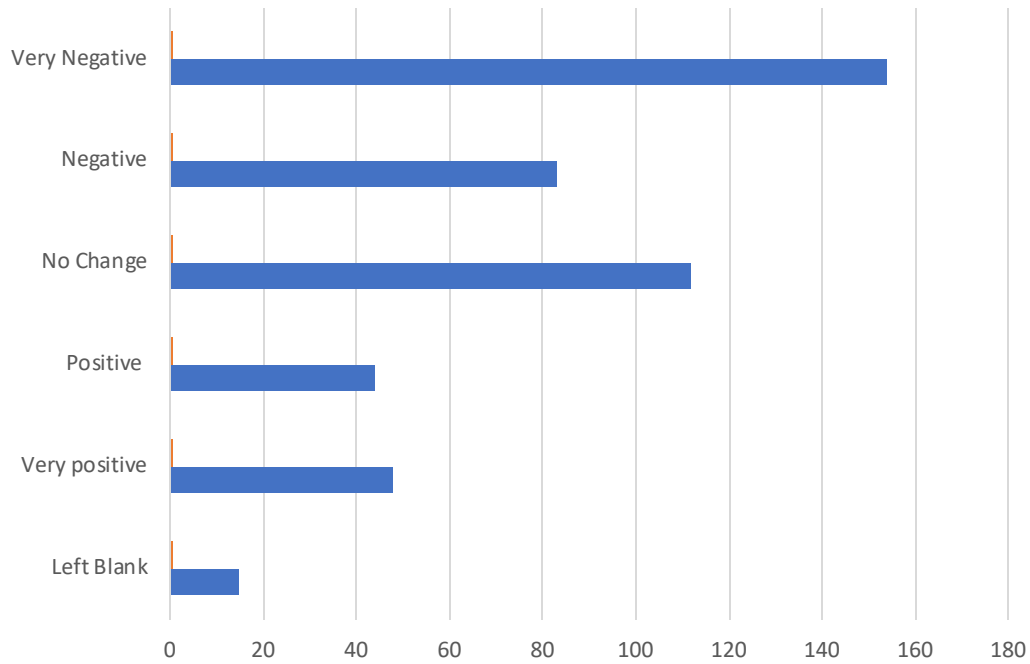


Corvallis Chamber of Commerce

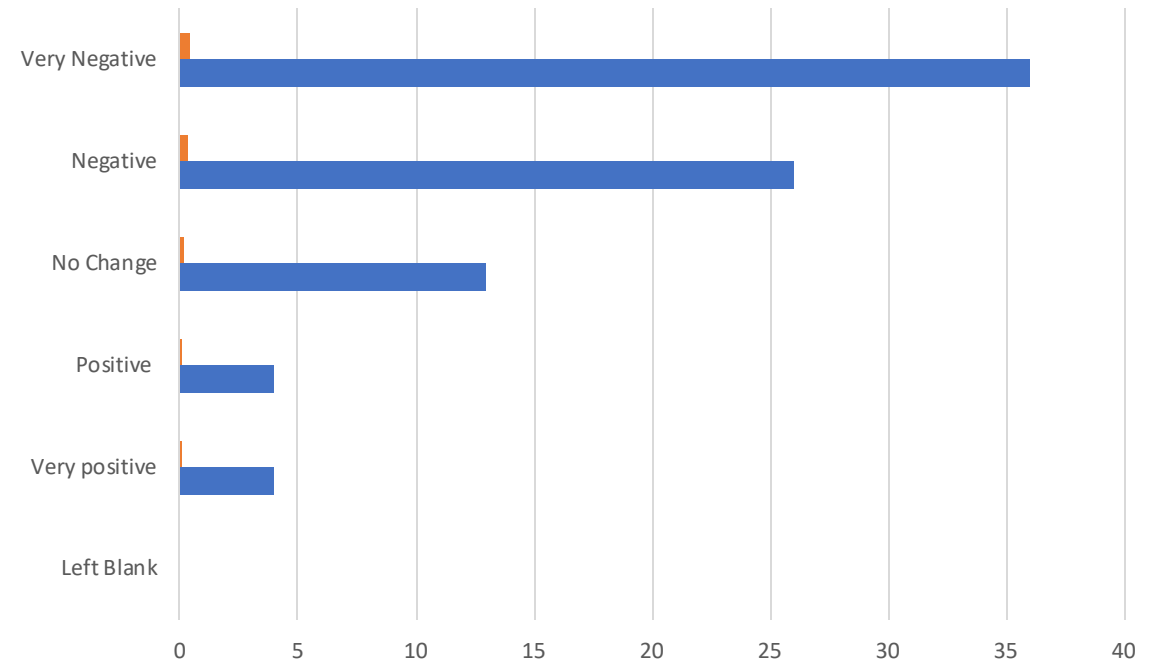
Results

QUESTION 1: What has been your overall impression of behaviors as the houseless population has grown?

ALL RESPONSES

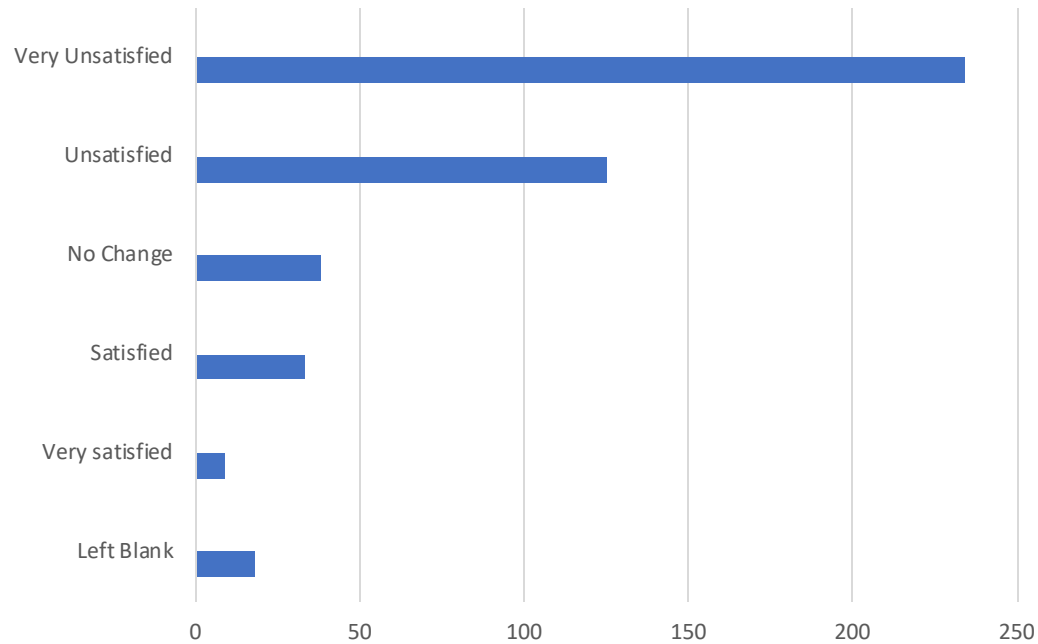


CHAMBER MEMBERS

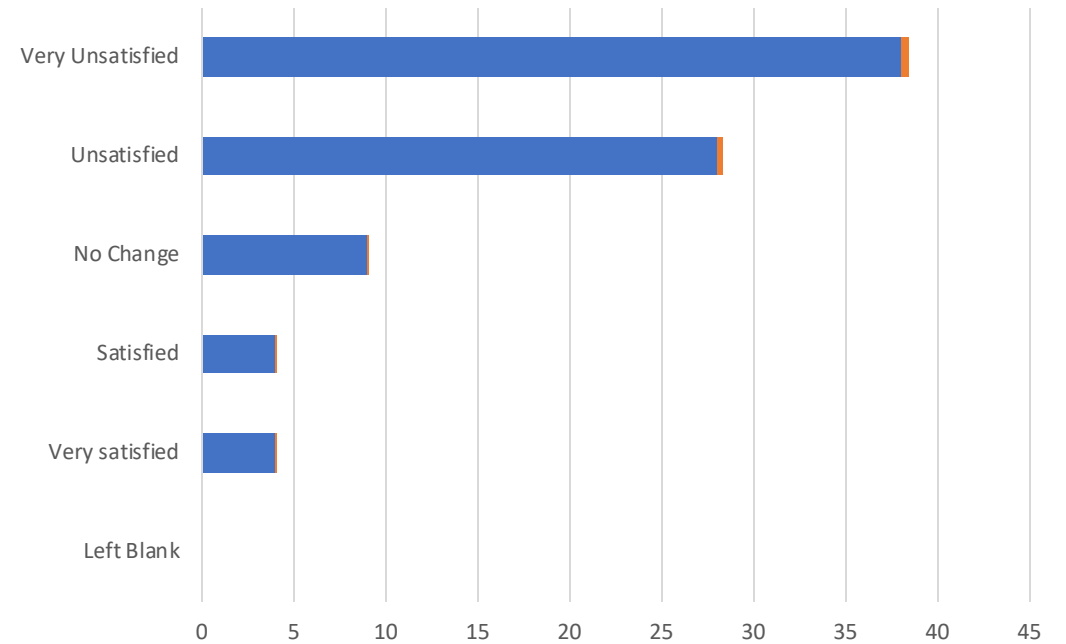


QUESTION 2: On the following scale, please indicate your satisfaction with the job that the government is doing here locally, to help with the houseless situation.

ALL RESPONSES

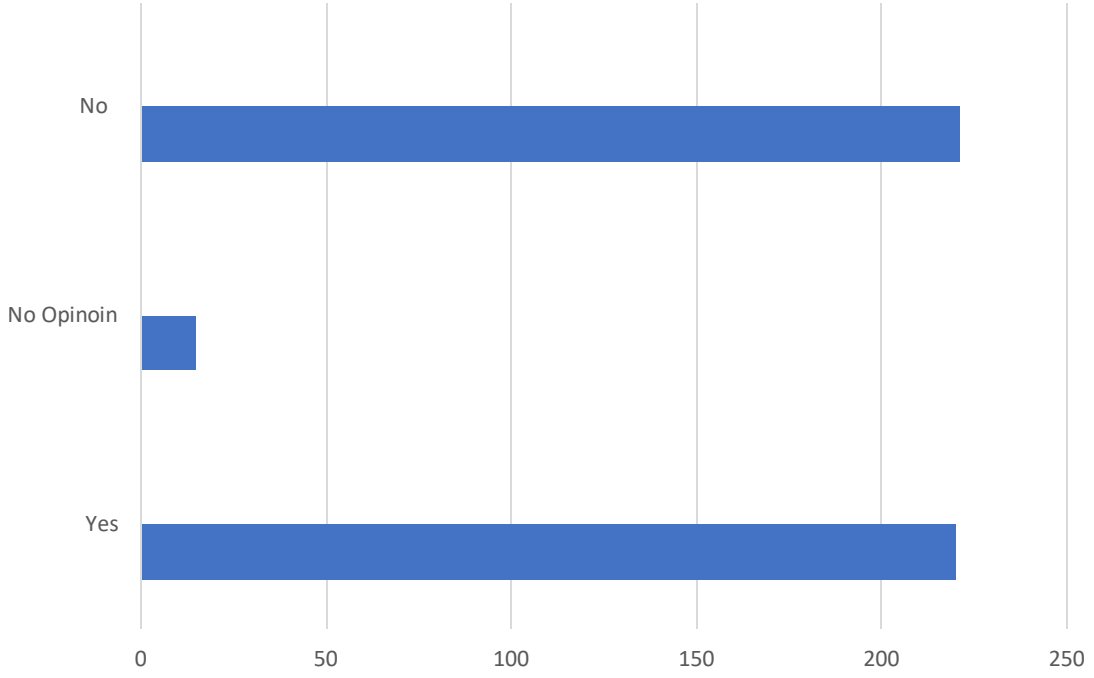


CHAMBER MEMBERS

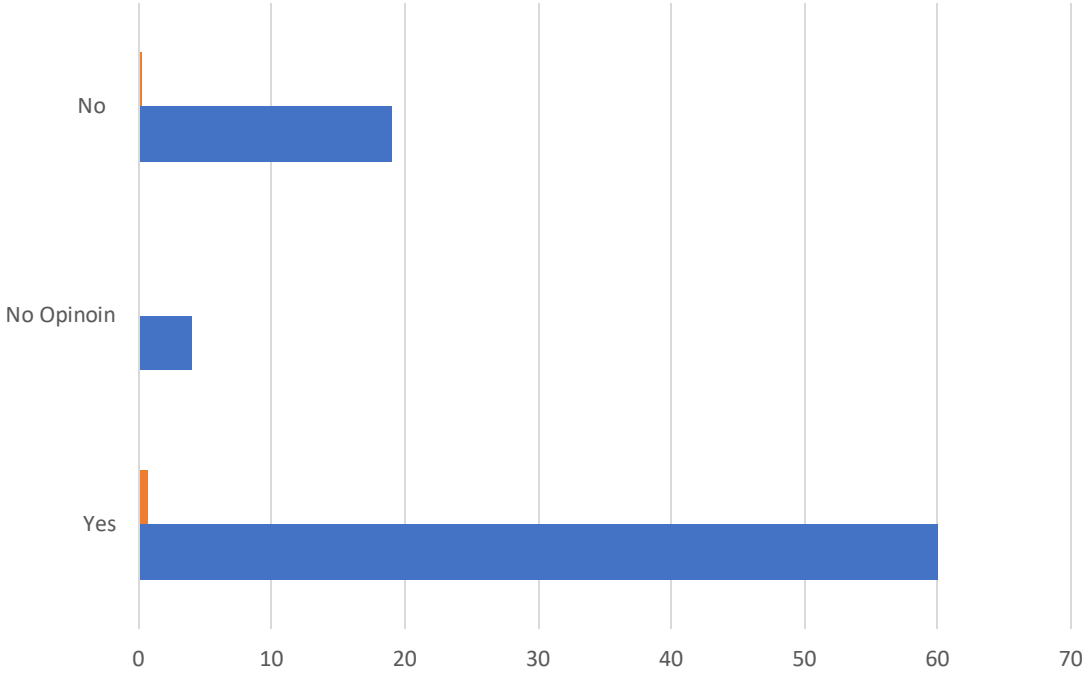


QUESTION 3: Would you support action from the City of Corvallis up to, and including, expulsion from a specific area or pre-determined zone that specifically targeted people exhibiting negative behaviors?

ALL RESPONSES

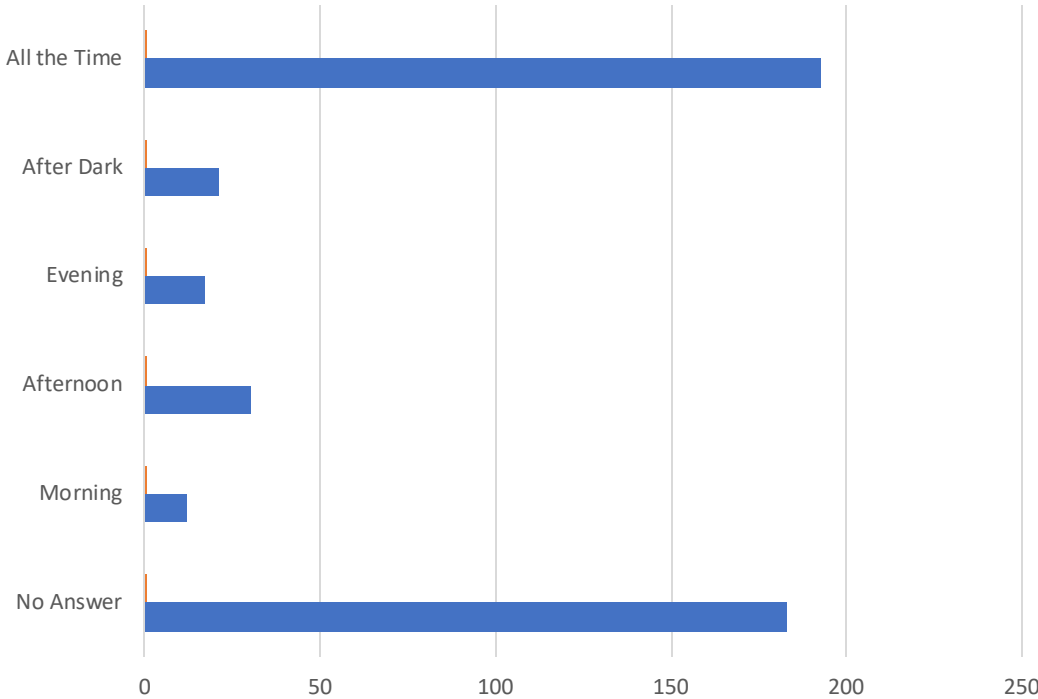


CHAMBER MEMBERS

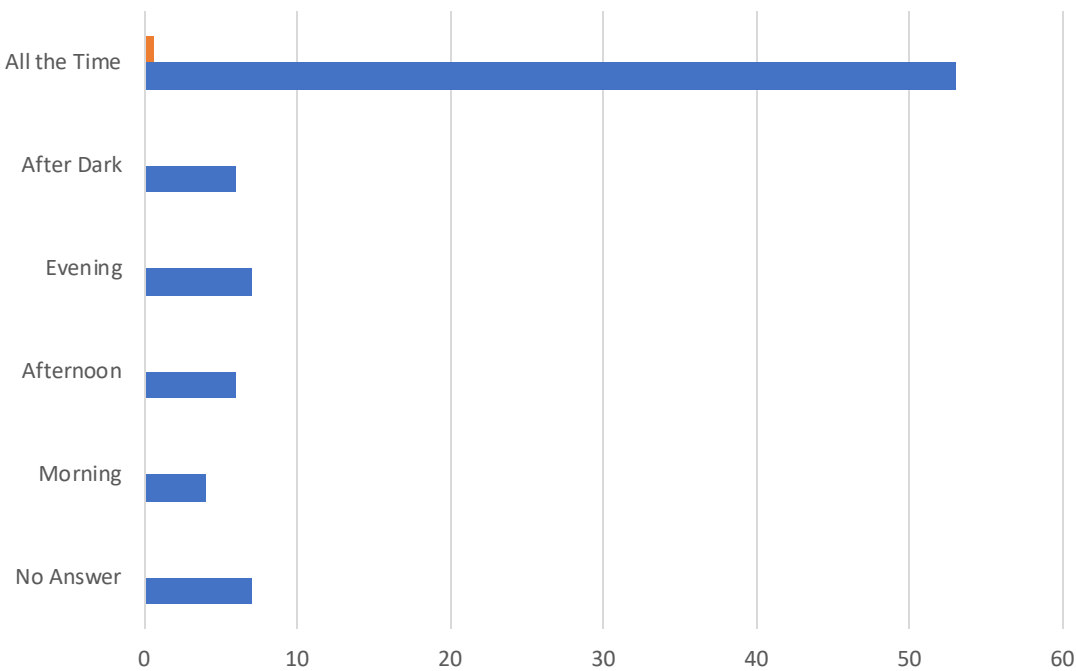


QUESTION 4: If you have experienced negative behaviors, please indicate what time of day/night you tend to see them the most?

ALL RESPONSES

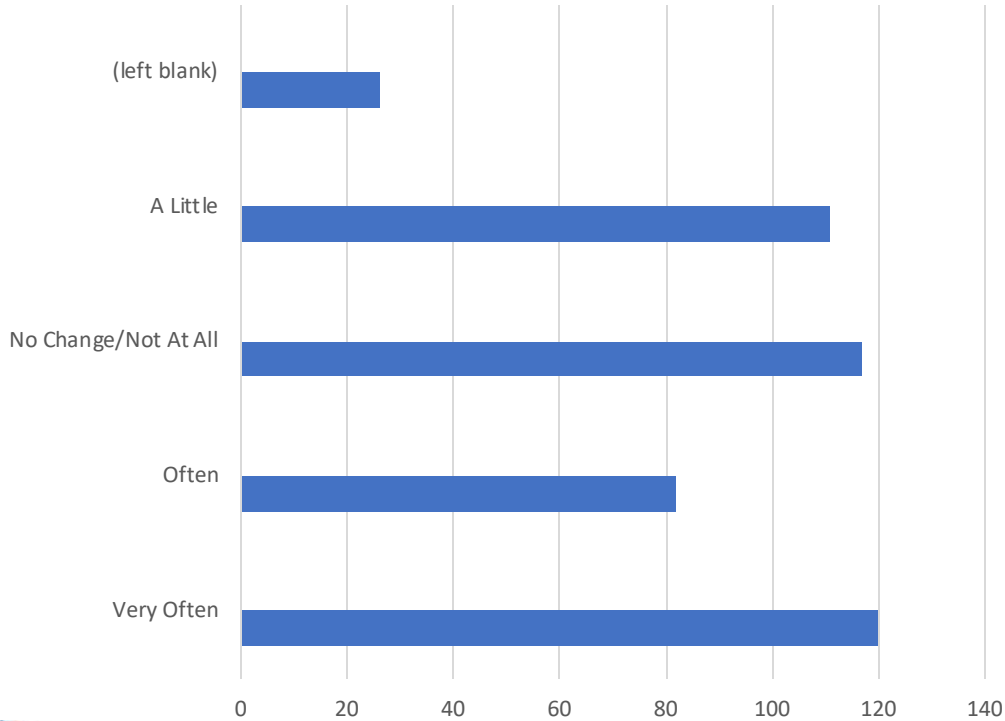


CHAMBER MEMBERS

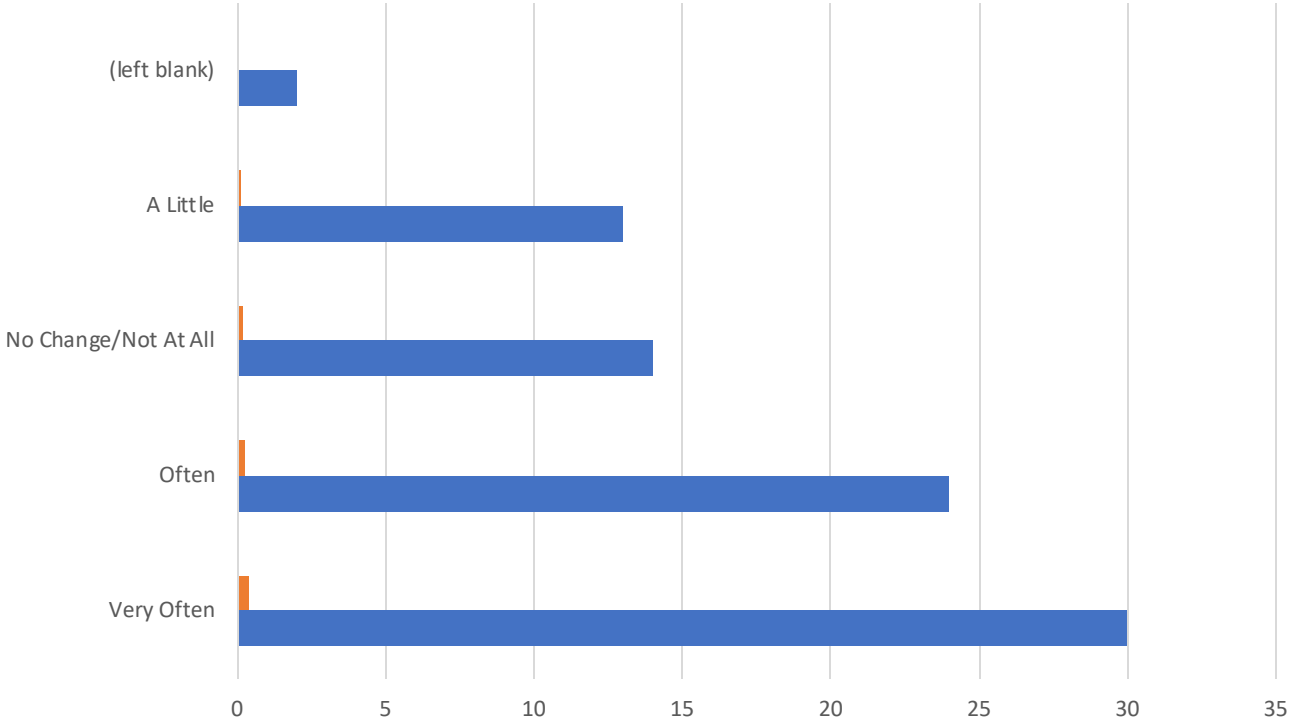


QUESTION 5a: Have you seen pan-handling?

ALL RESPONSES

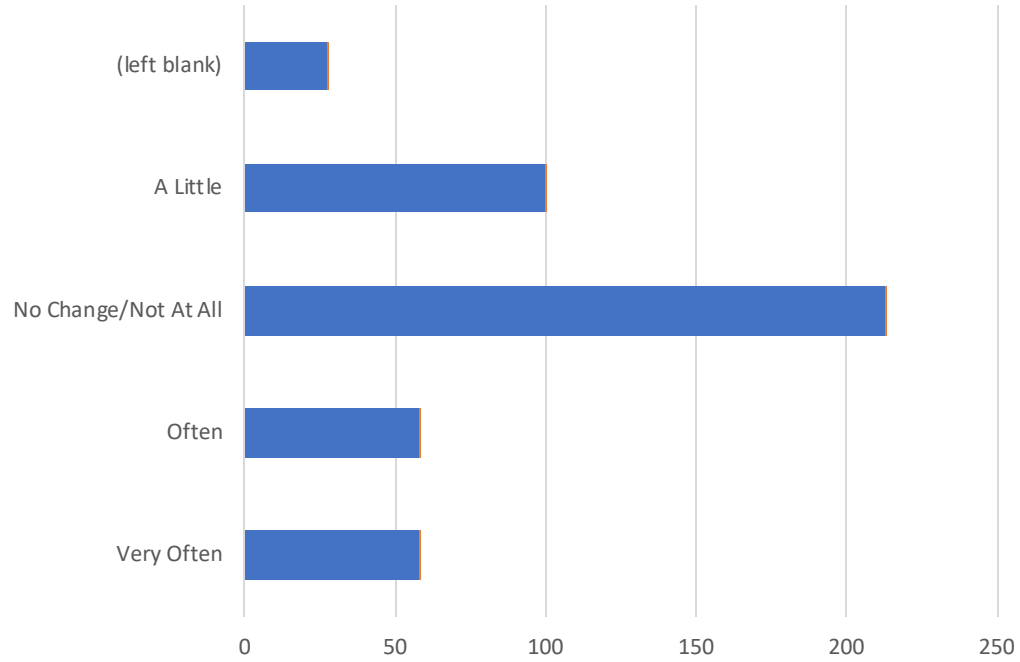


CHAMBER MEMBERS

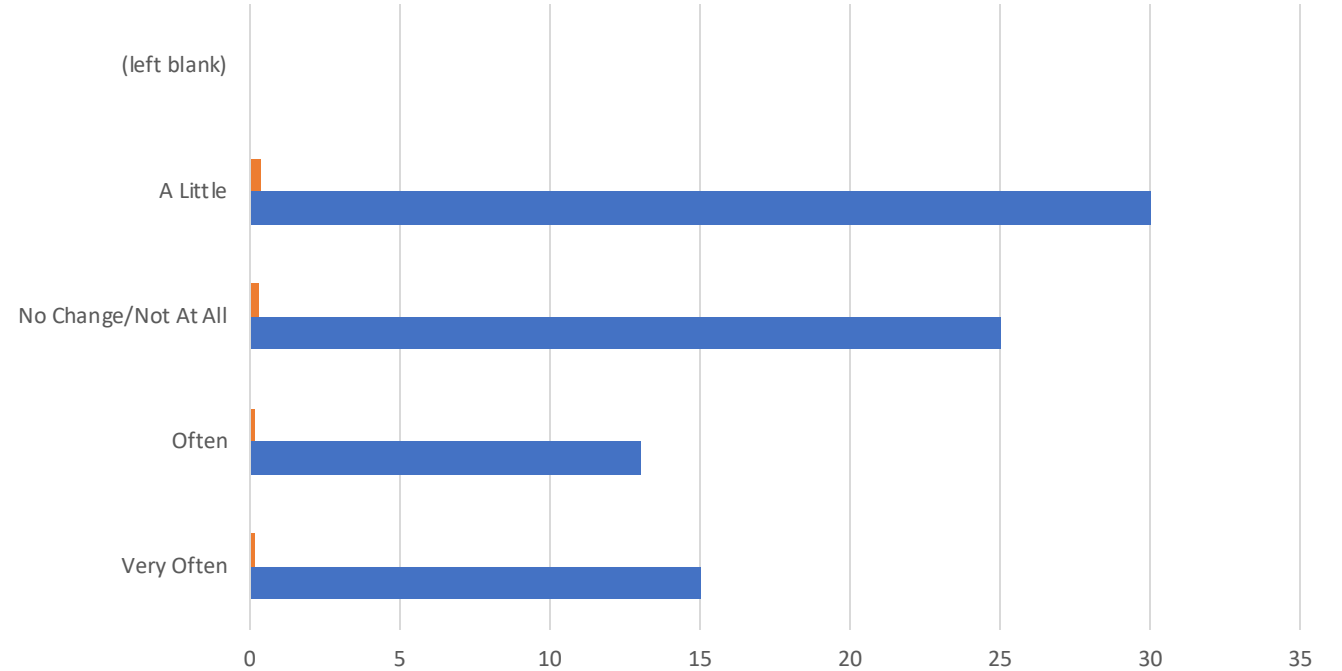


QUESTION 5b: Have you seen harassment?

ALL RESPONSES

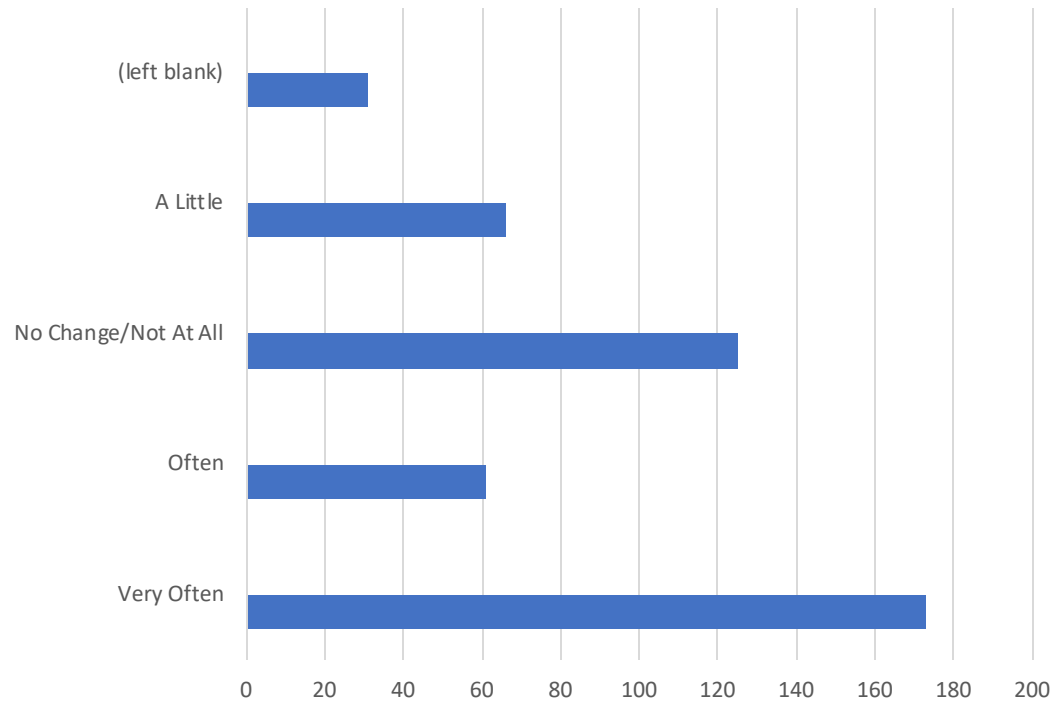


CHAMBER MEMBERS

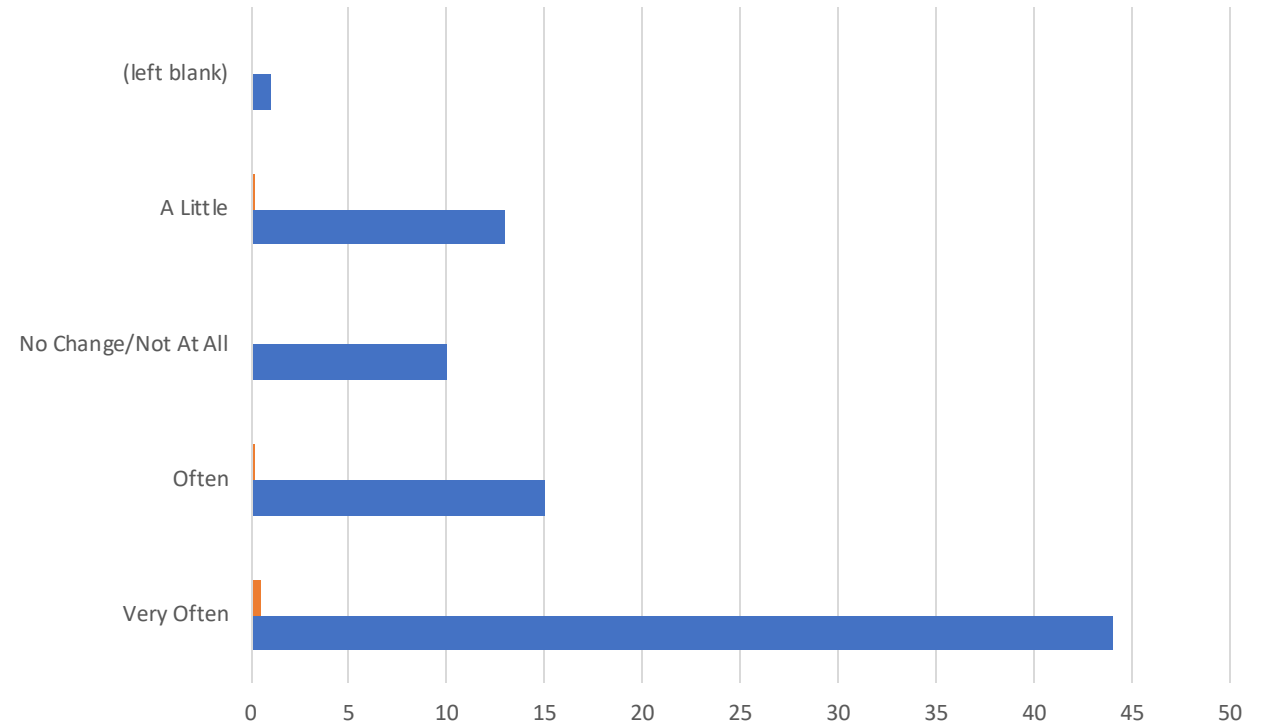


QUESTION 5c: Have you seen loitering?

ALL RESPONSES

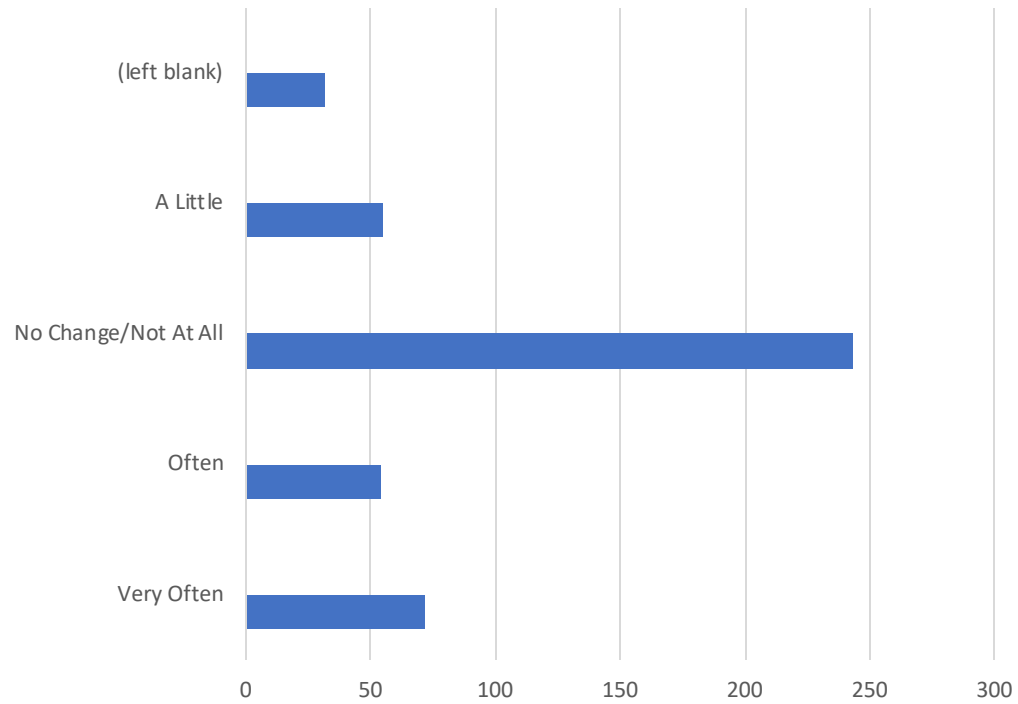


CHAMBER MEMBERS

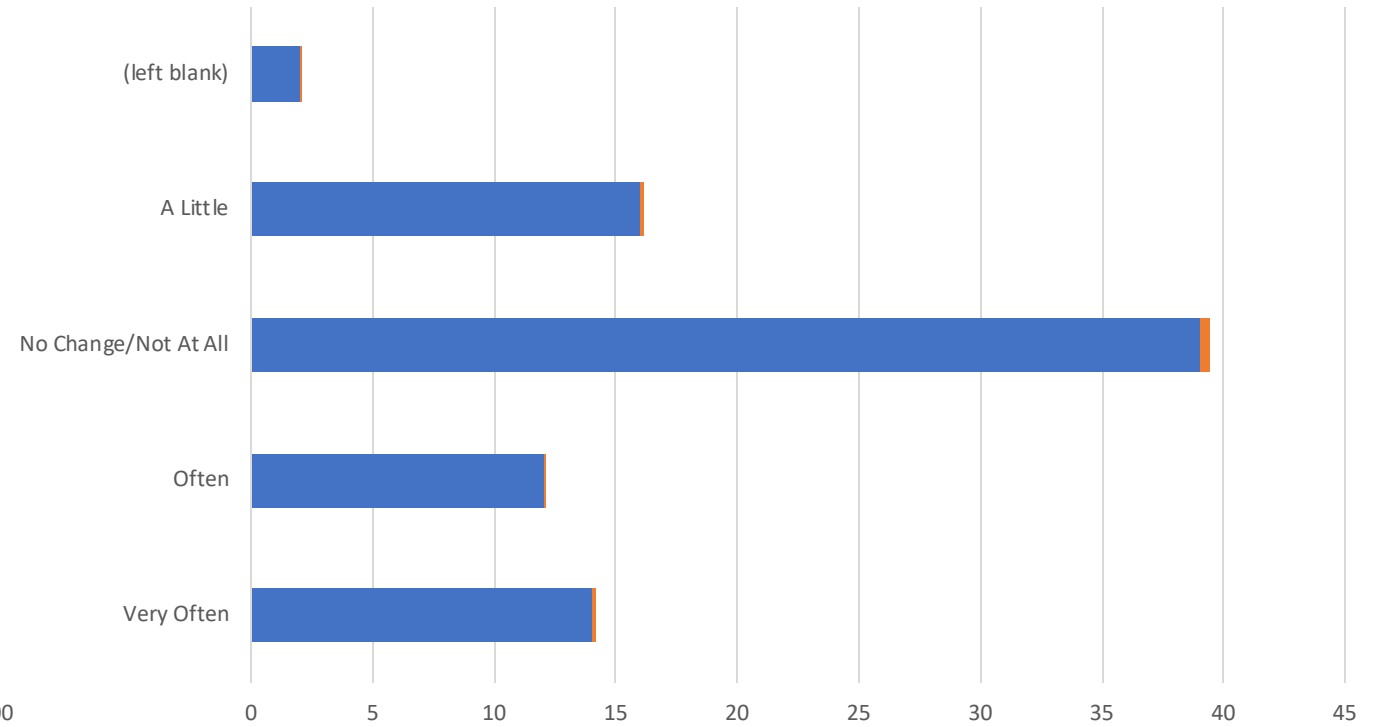


QUESTION 5d: Have you seen theft?

ALL RESPONSES

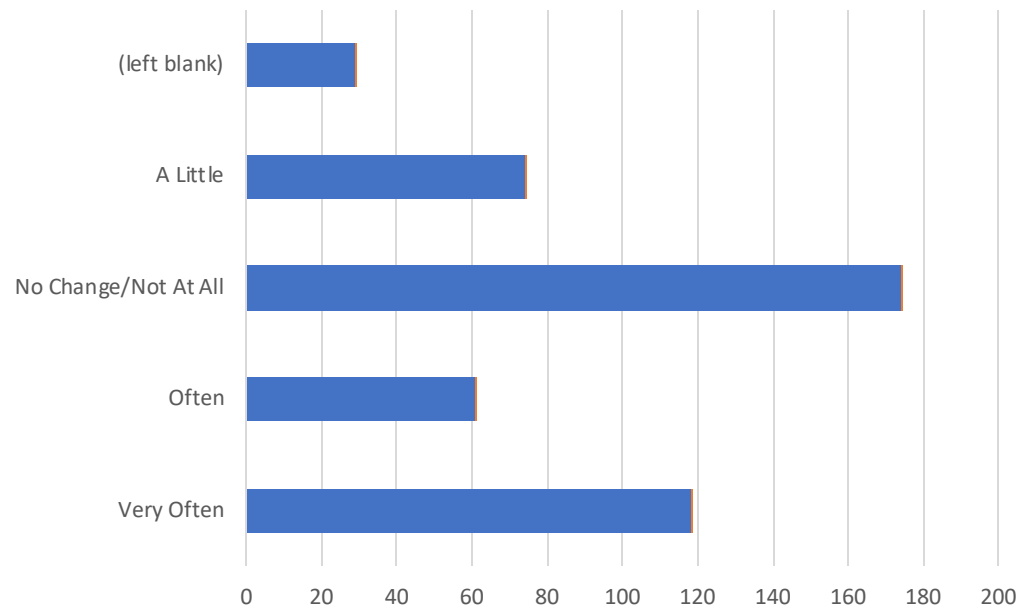


CHAMBER MEMBERS

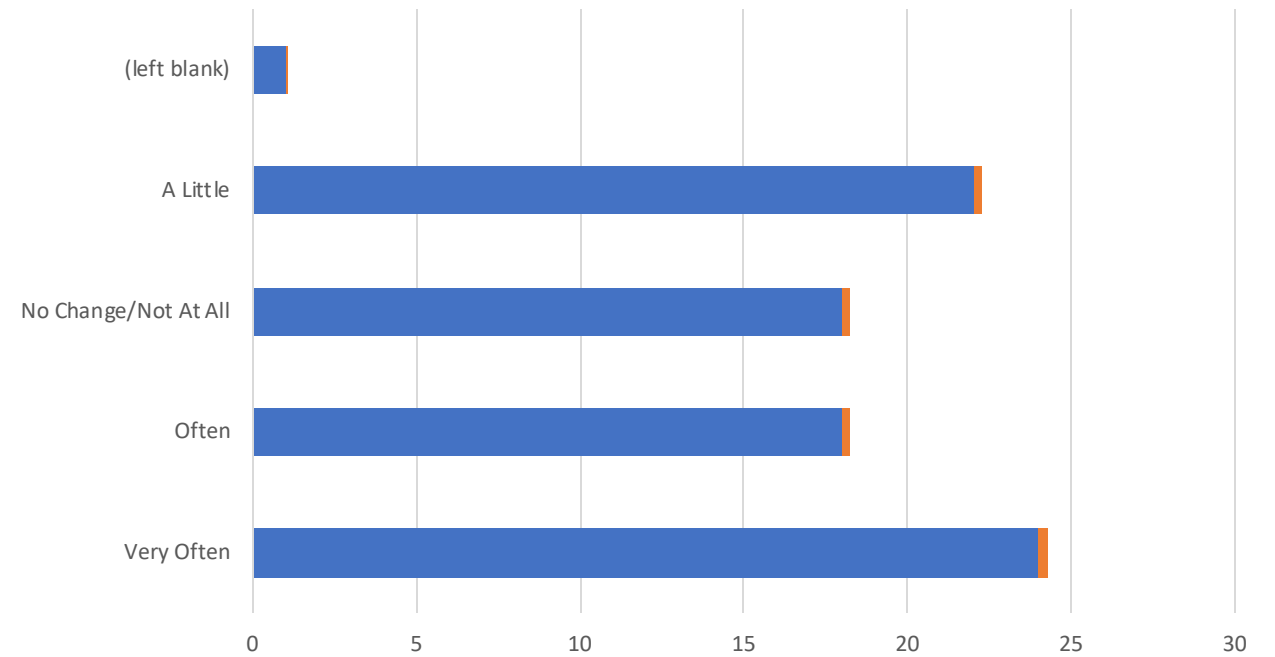


QUESTION 5e: Have you seen drug use?

ALL RESPONSES

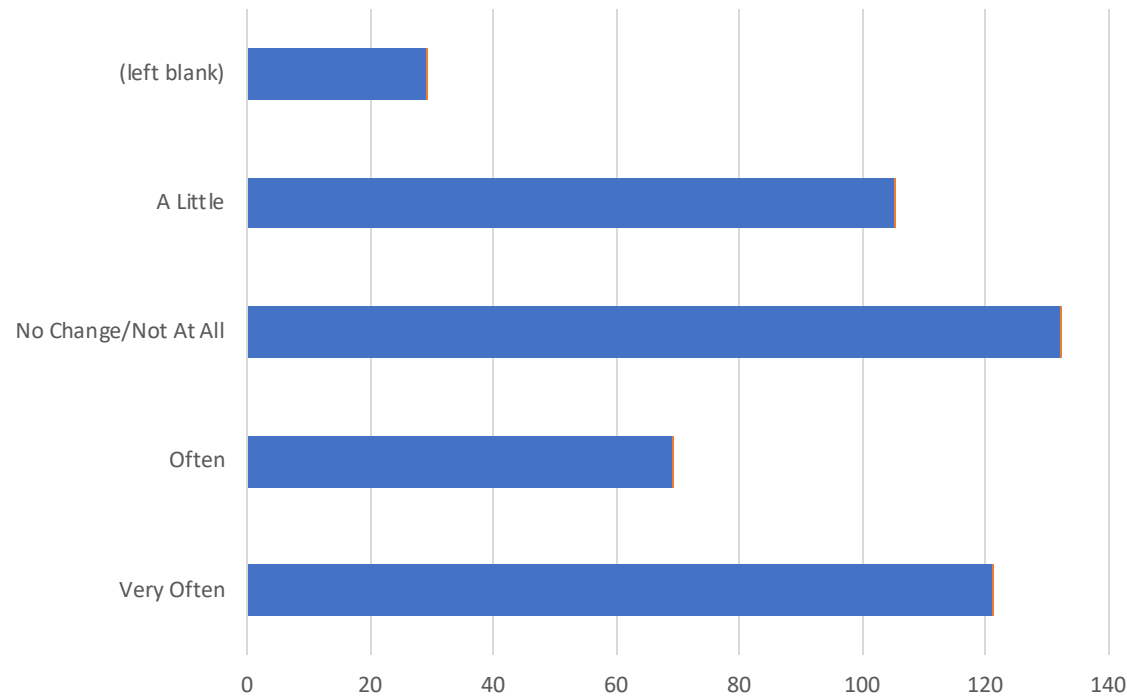


CHAMBER MEMBERS

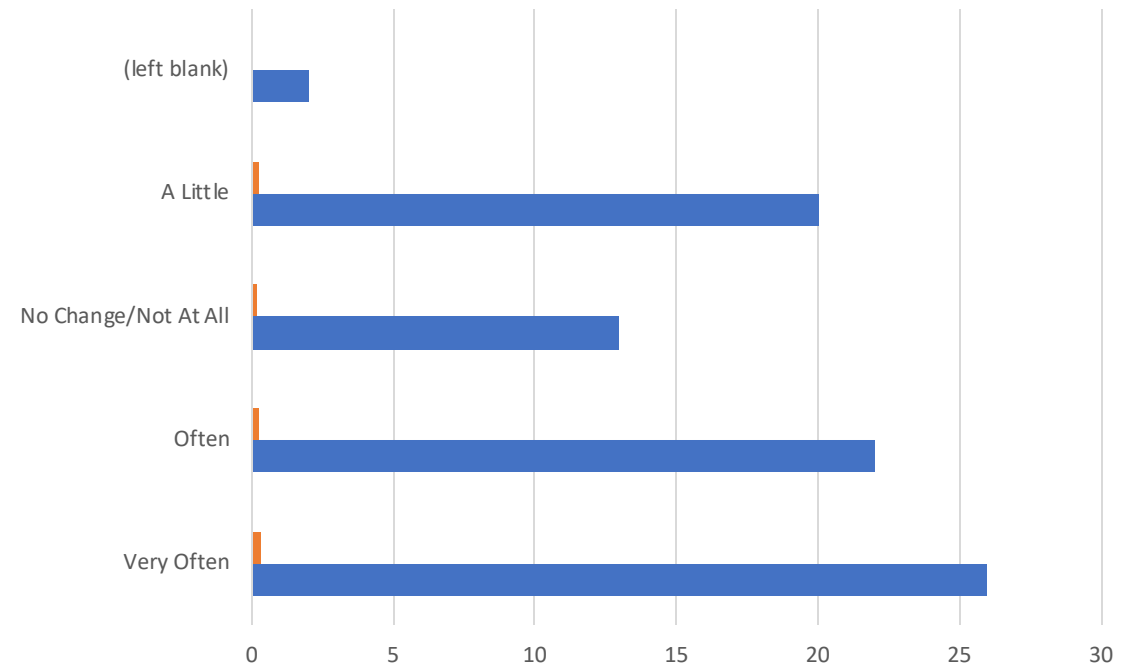


QUESTION 5f: Have you seen drunkenness?

ALL RESPONSES

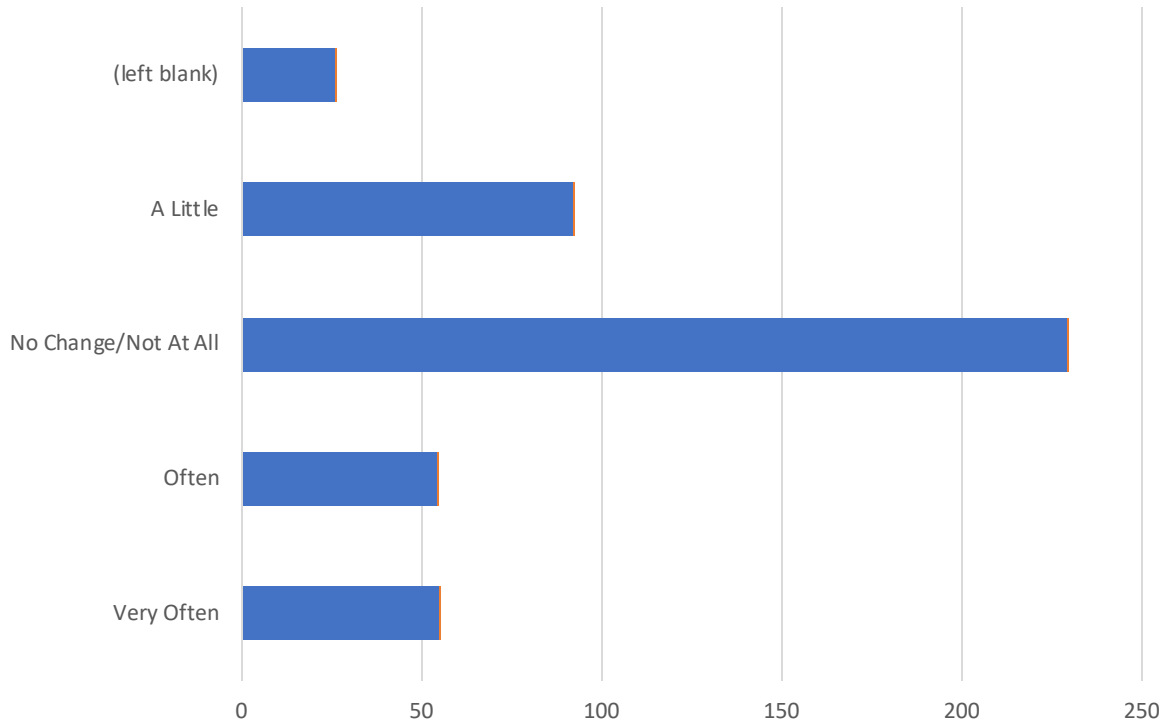


CHAMBER MEMBERS

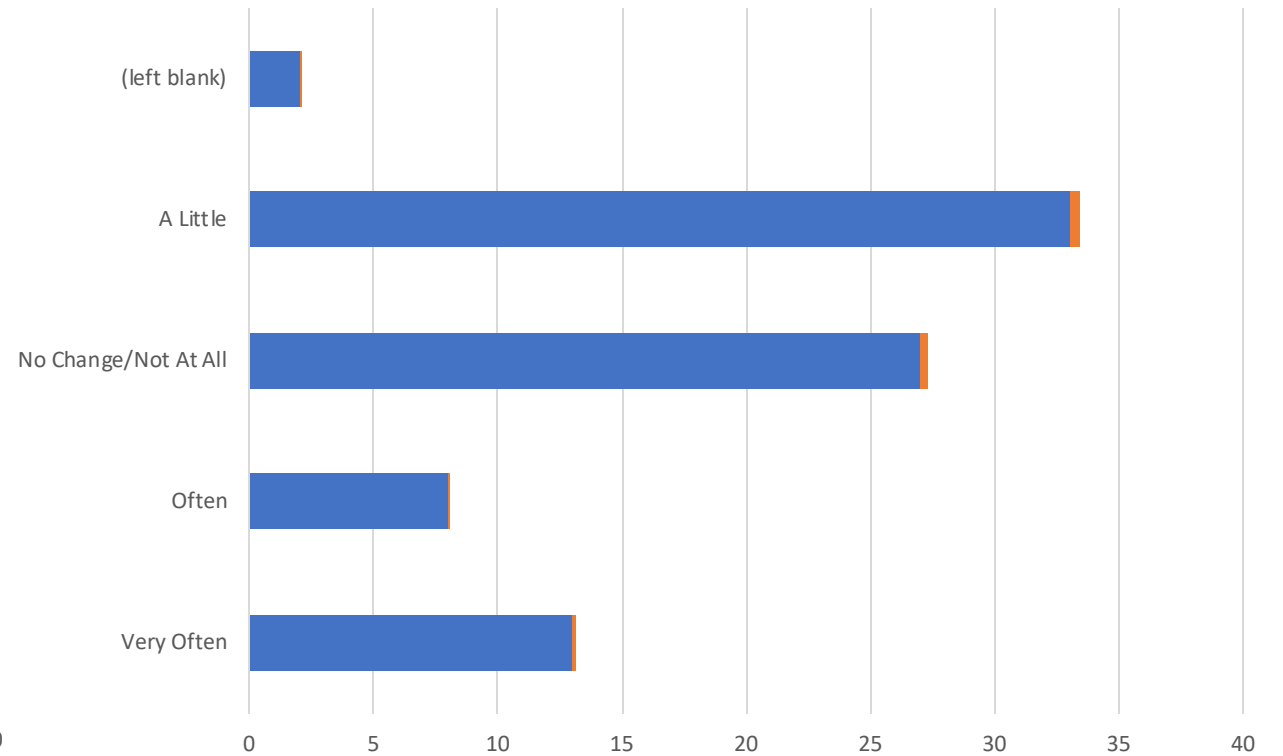


QUESTION 5g: Have you seen violence?

ALL RESPONSES

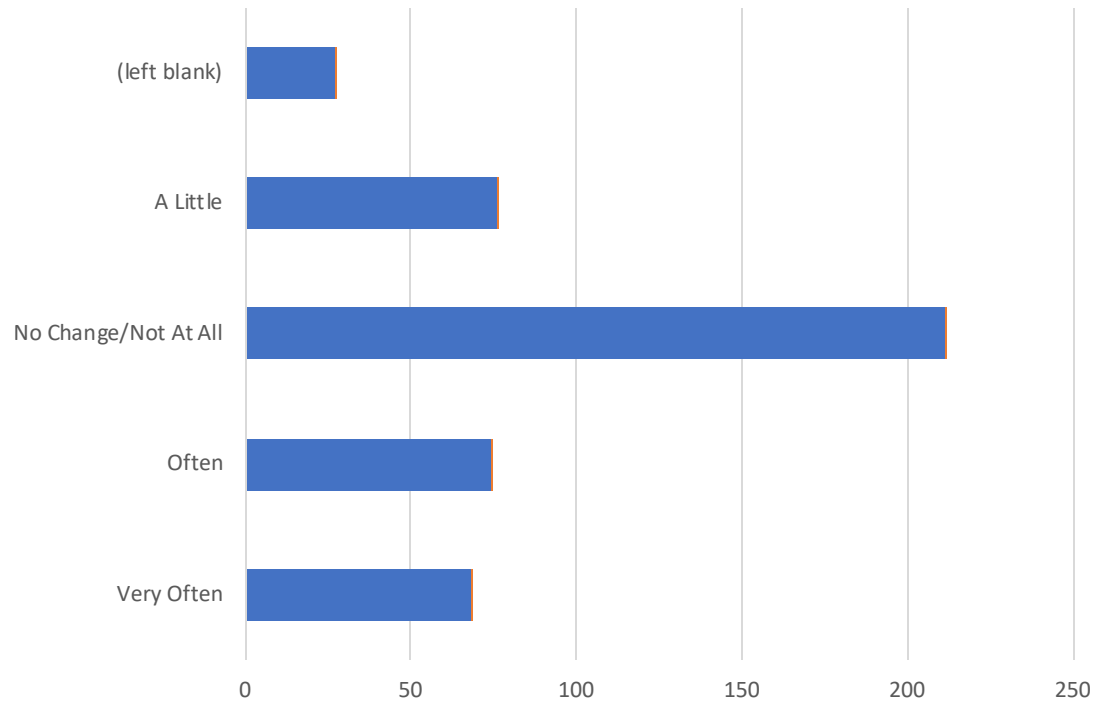


CHAMBER MEMBERS

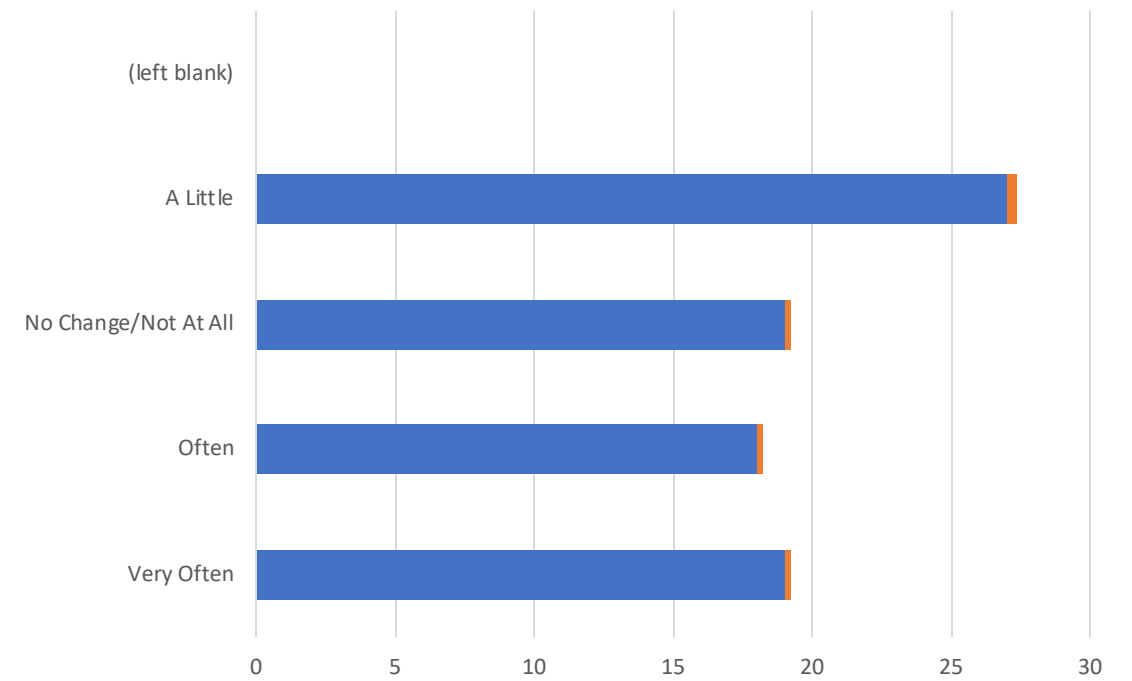


QUESTION 5h: Have you seen defecation?

ALL RESPONSES

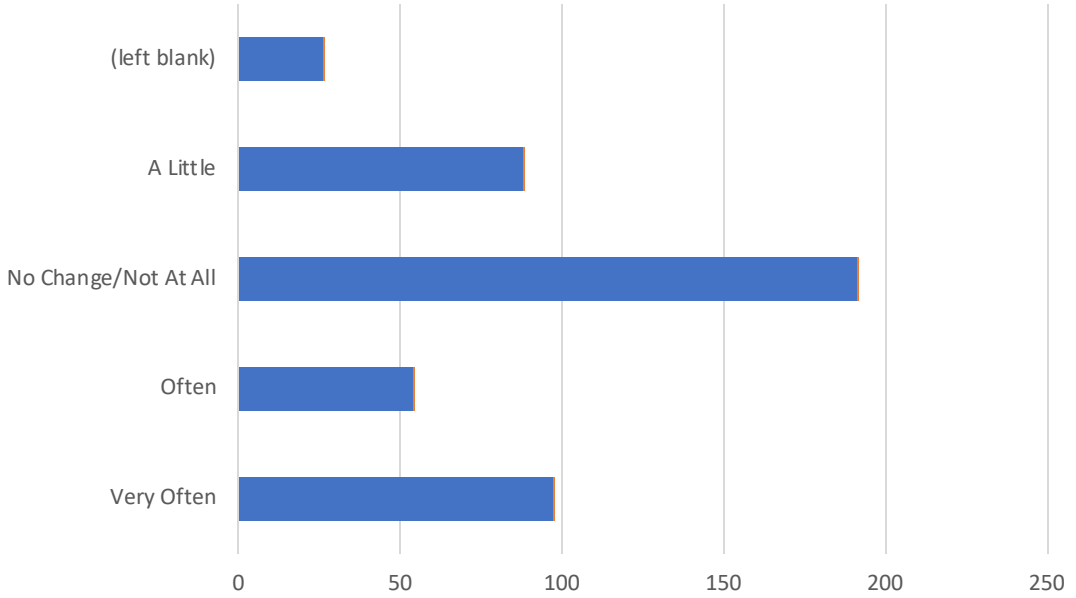


CHAMBER MEMBERS

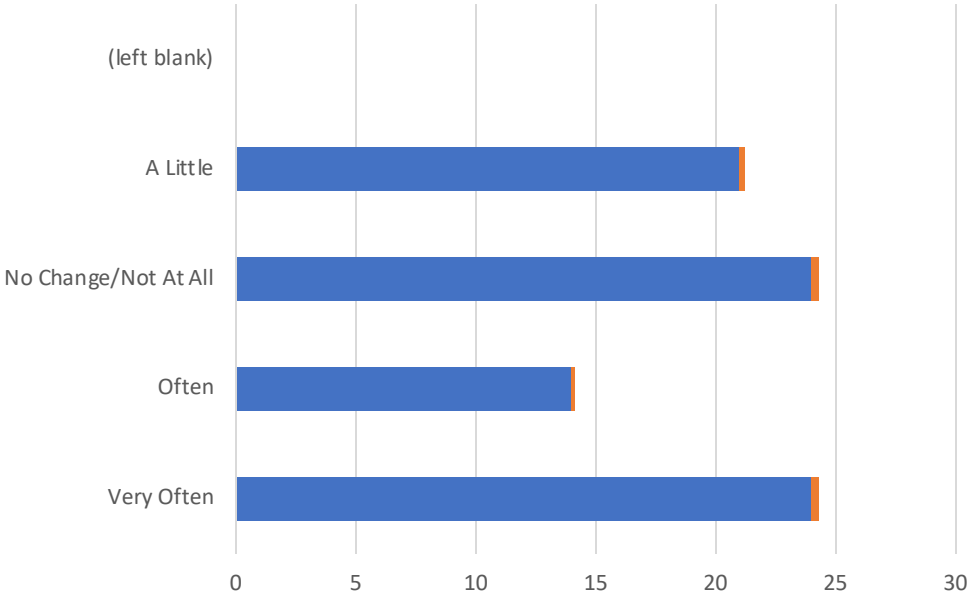


QUESTION 5i: Have you seen graffiti?

ALL RESPONSES

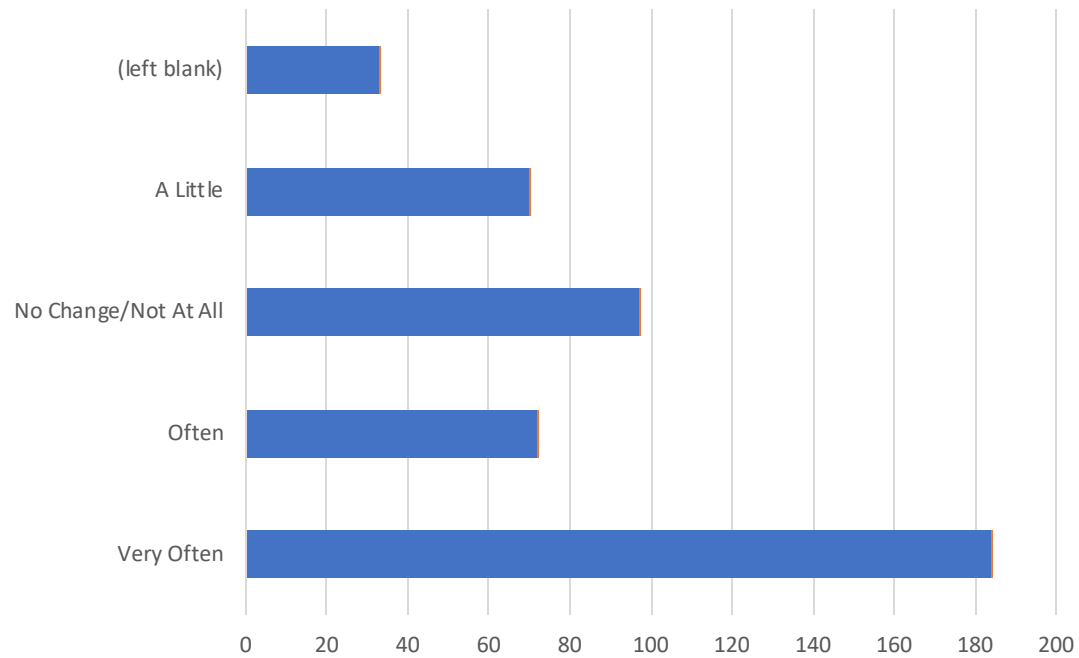


CHAMBER MEMBERS

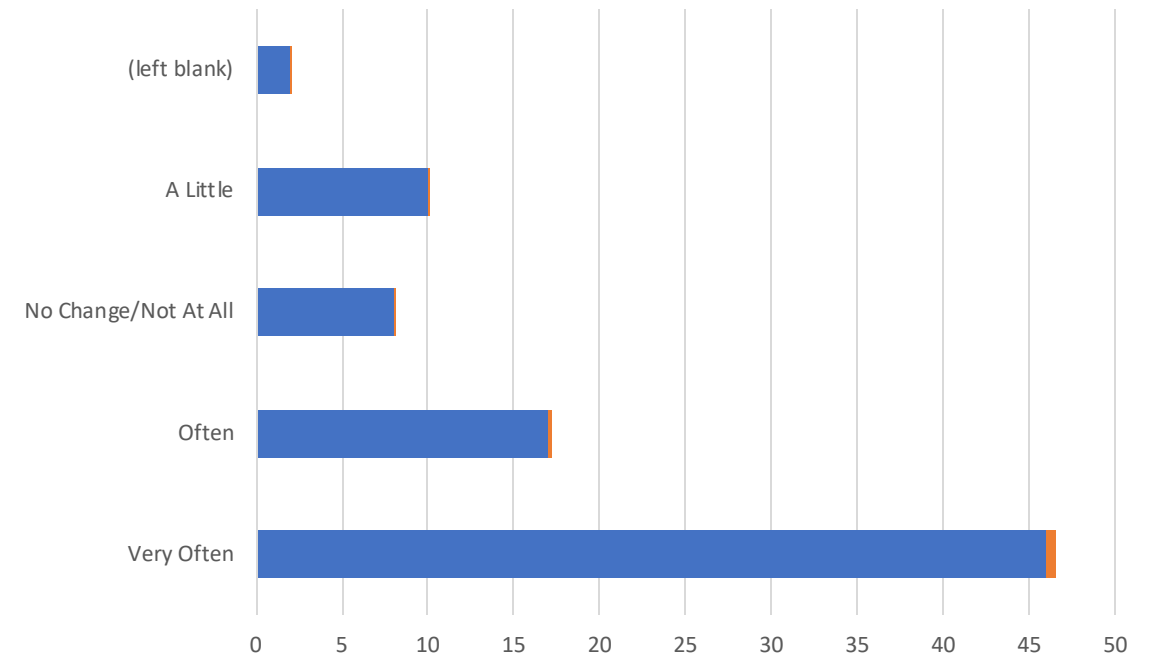


QUESTION 5j: Have you seen sleeping outside the designated camping areas?

ALL RESPONSES

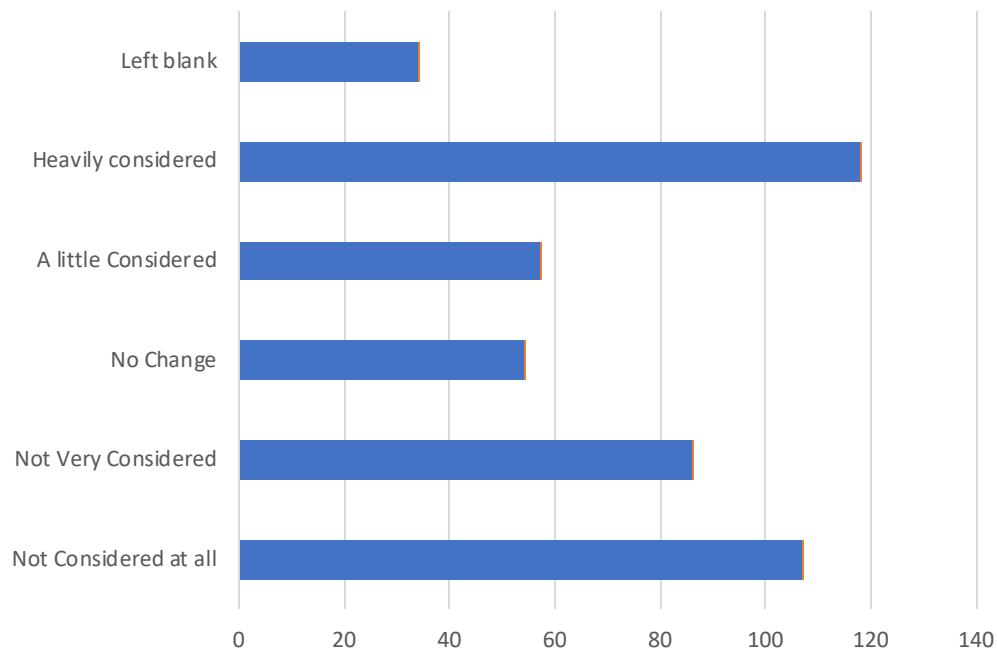


CHAMBER MEMBERS

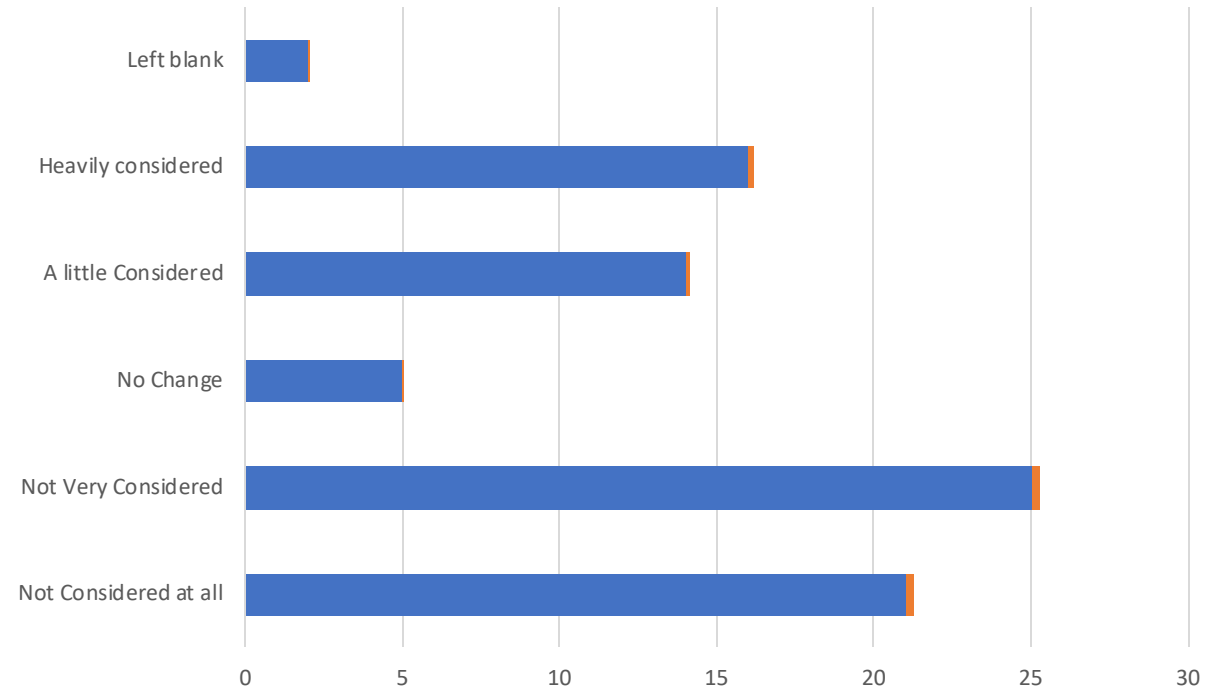


QUESTION 6: How much do you feel the businesses of Corvallis are considered when the City Council is determining when and where camping is allowed in Corvallis?

ALL RESPONSES



CHAMBER MEMBERS



QUESTION 7: Where would you like to see the Chamber use its resources for support?

CHAMBER MEMBERS

Speaking at Council Meetings	36.4%
Supporting a behavior zone	19.2%
Working with Corvallis PD on enhanced patrols	34.9%
Working with HOPE to provide feedback	39.7%
All of the above	48.2%



QUESTION 8: Are you aware of specific organizations in Corvallis/Benton County, whose specific area of expertise is to assist and house the houseless population? If yes, please list up to three?

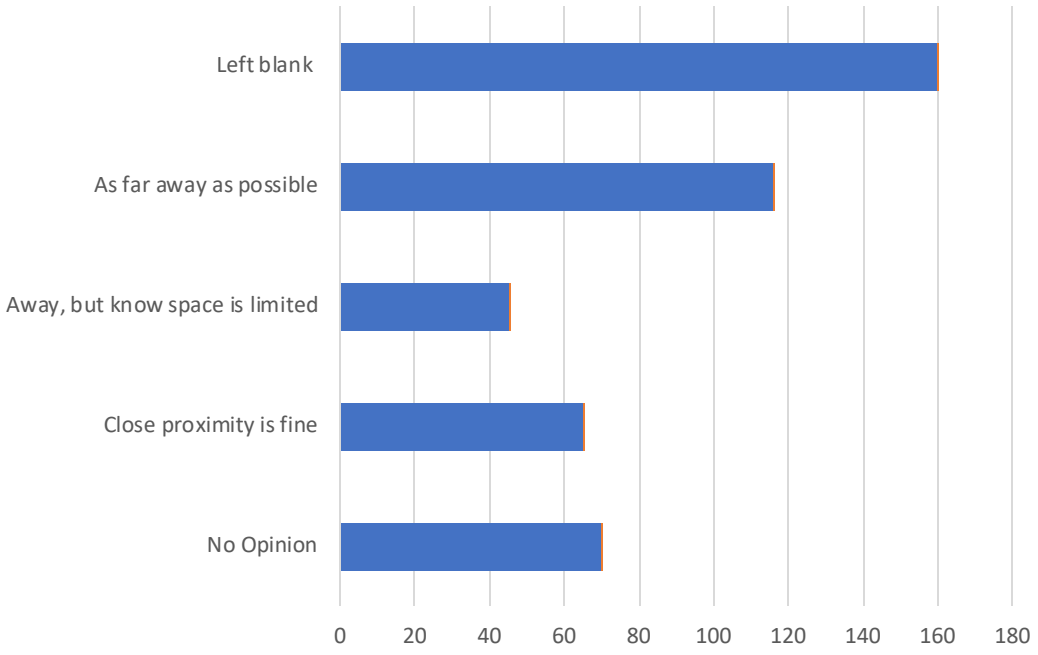
39 Responses

Community Outreach	12
Jackson Street Youth Services	7
HOPE	8
Day Time Drop In Center	8
Misc (5 or below)	31

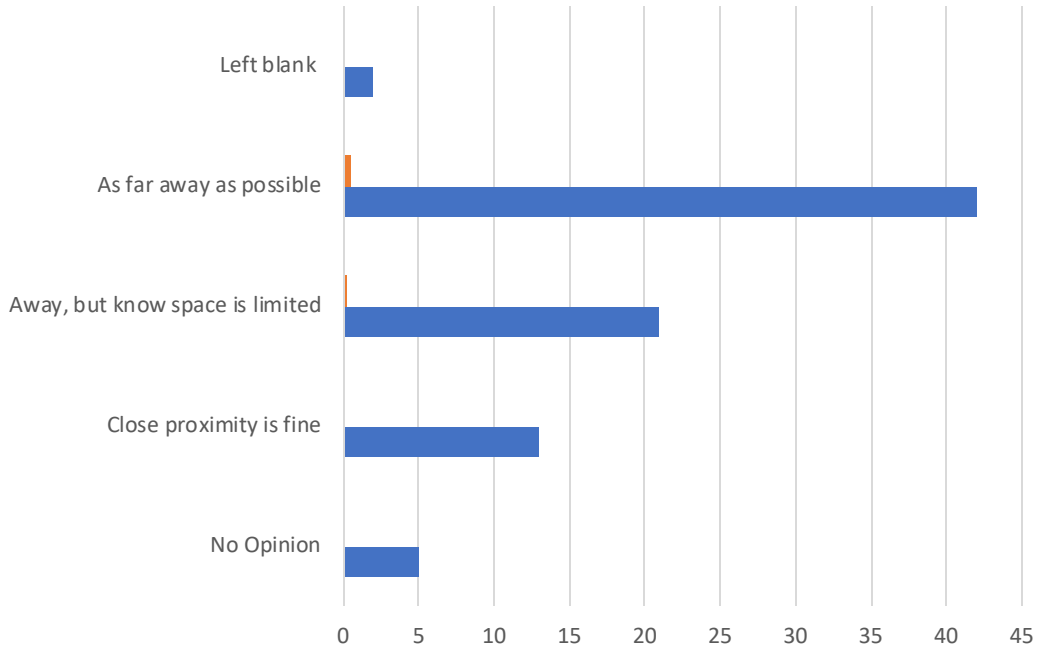


QUESTION 9a: Using the scale listed, how do you feel about the camping issue, as it relates to its proximity to your BUSINESS? (Please leave blank if you don't own a business)

ALL RESPONSES

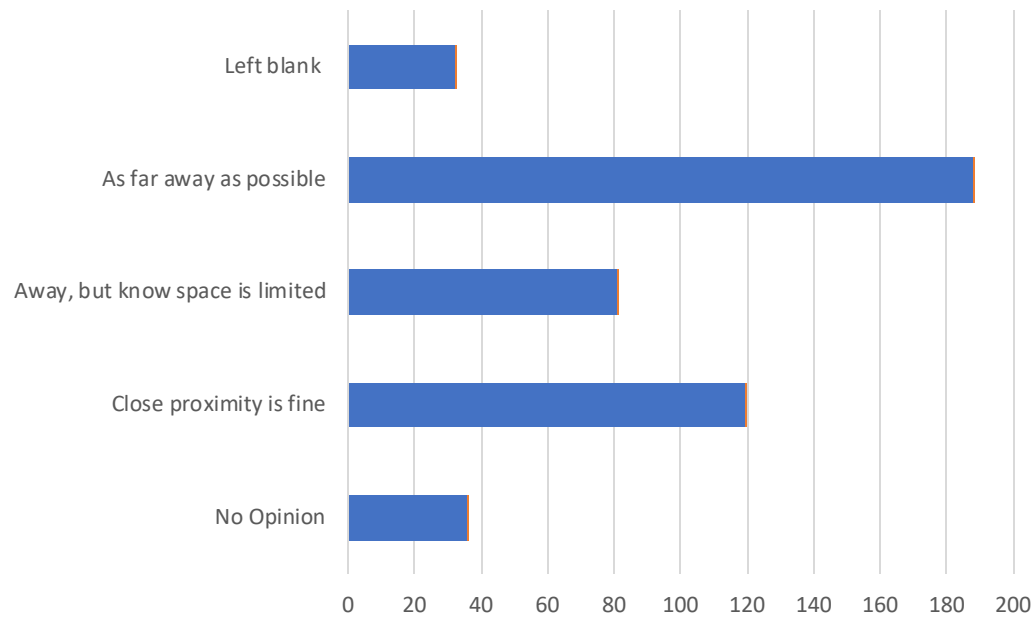


CHAMBER MEMBERS

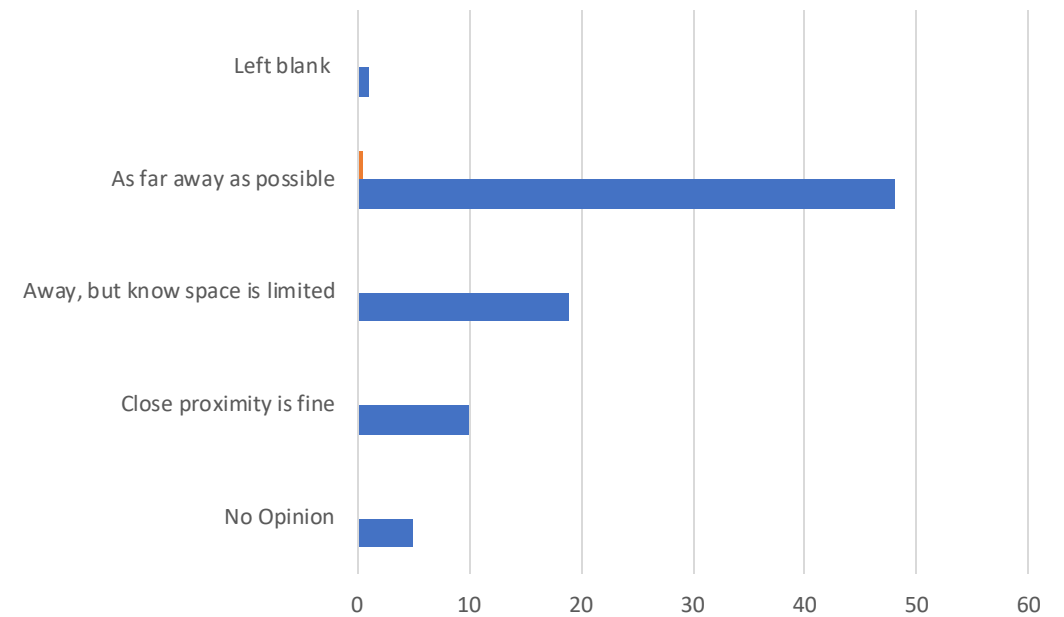


QUESTION 9b: Using the scale listed, how do you feel about the camping issue, as it relates to its proximity to your HOME?

ALL RESPONSES

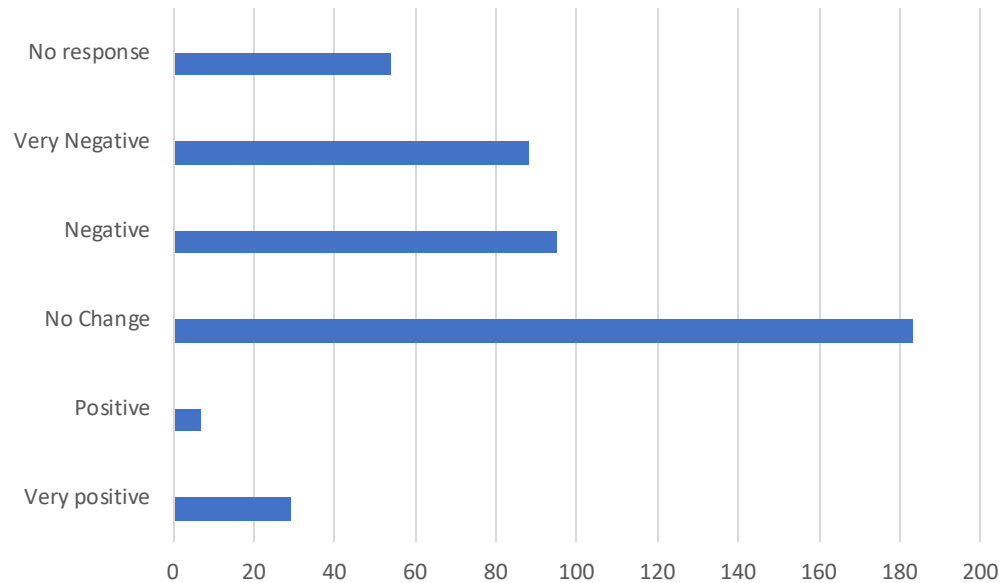


CHAMBER MEMBERS

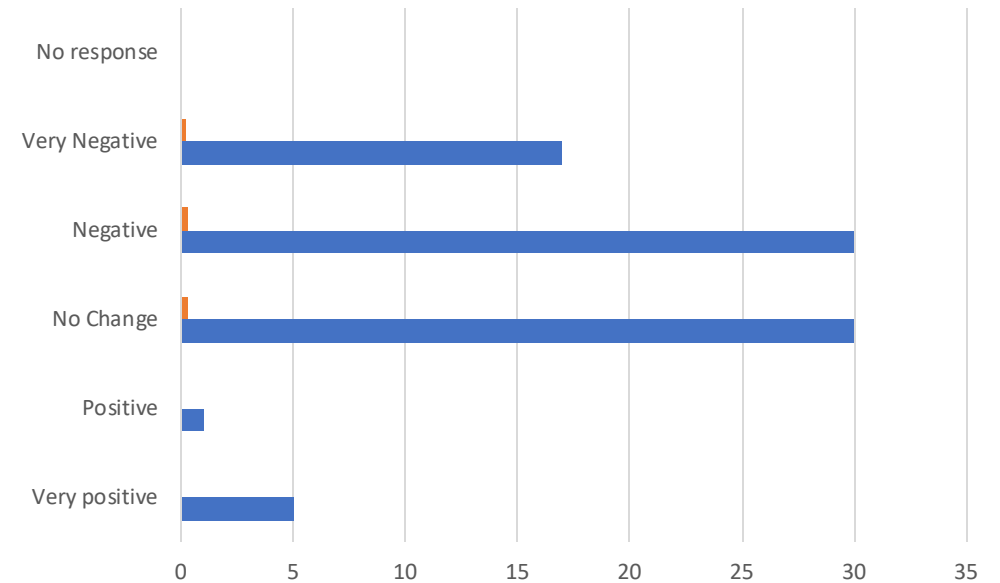


QUESTION 10: Using the following scale, how do you feel the impact of the camping locations are impacting your ability to do business within the city limits?

ALL RESPONSES

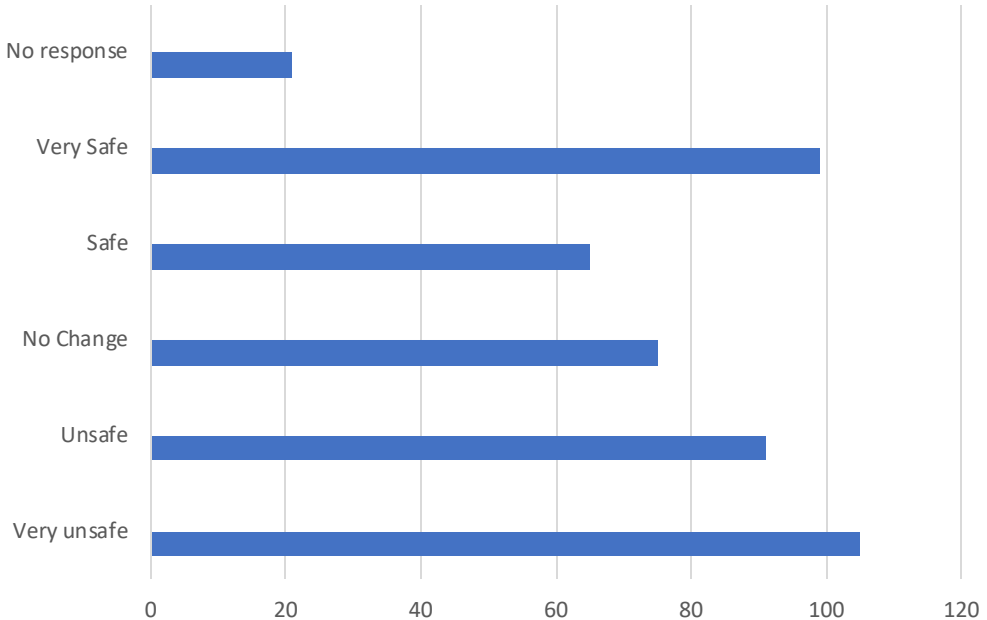


CHAMBER MEMBERS

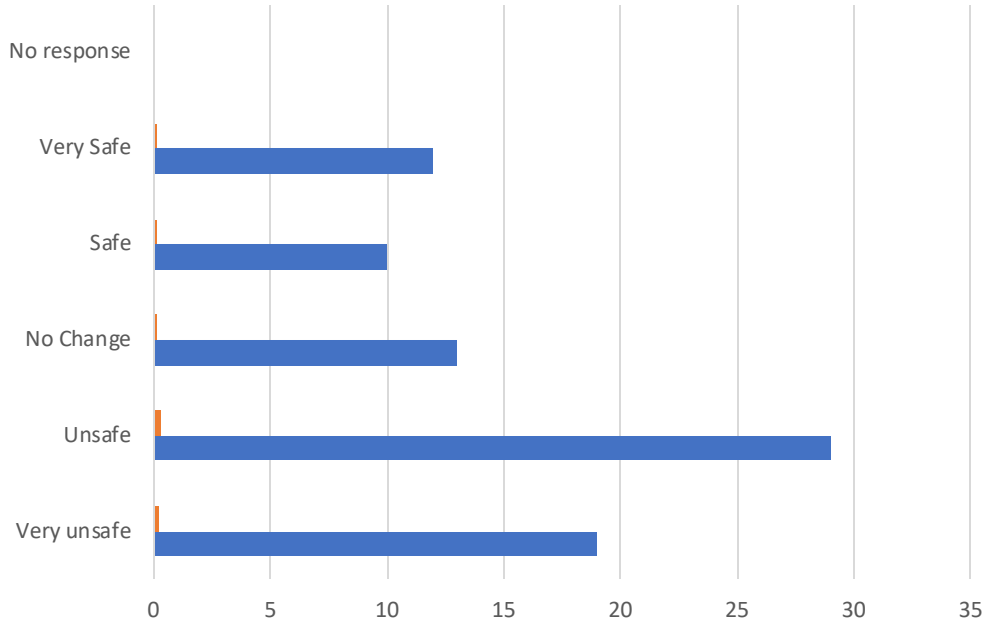


QUESTION 11: How do you, as a customer, feel downtown after dark?

ALL RESPONSES

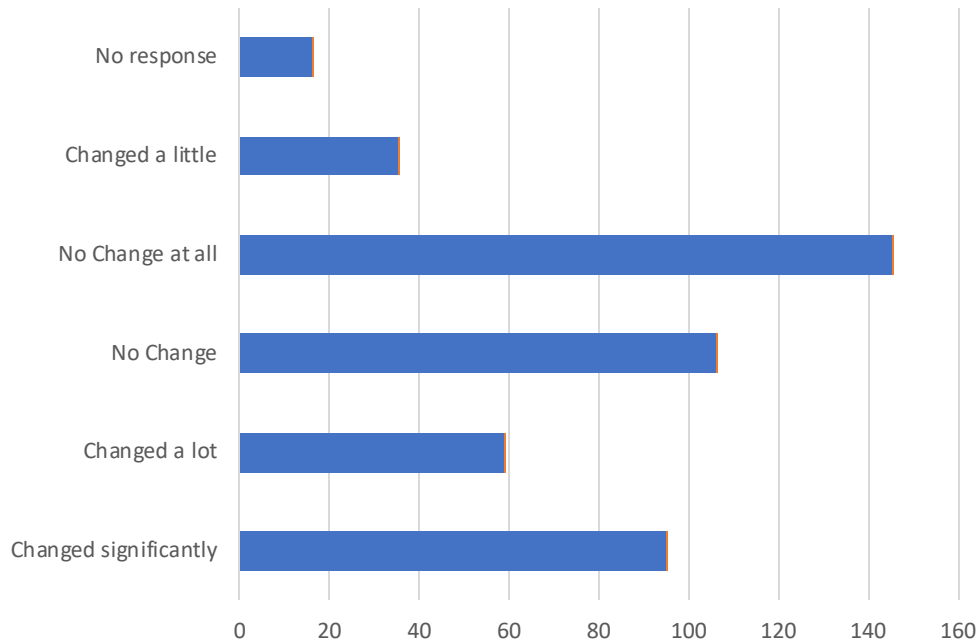


CHAMBER MEMBERS

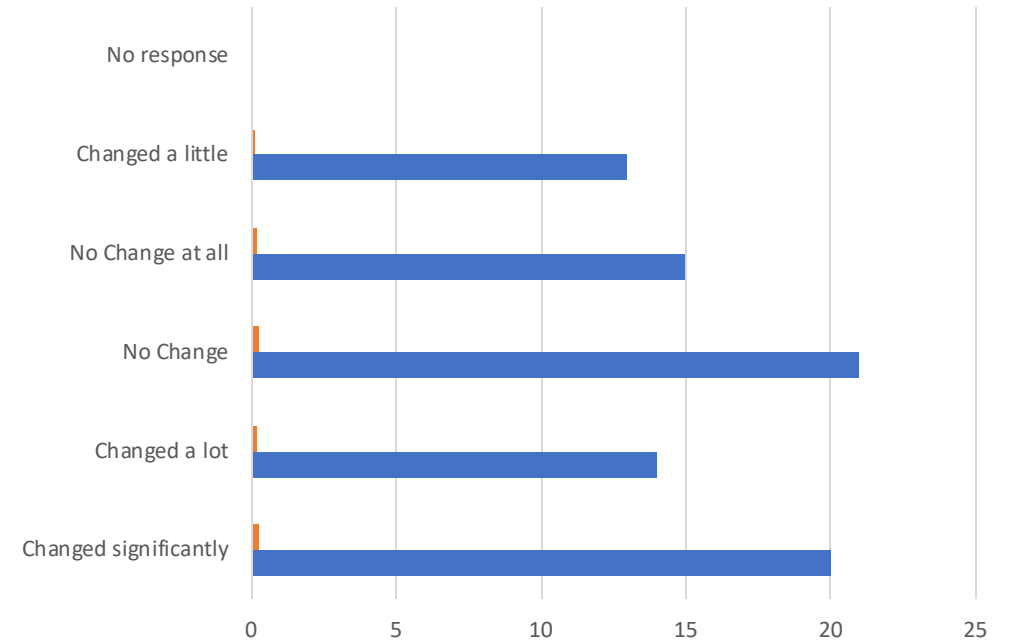


QUESTION 12: Have your consumer habits (where/when you shop) changed in anyway based on the managed camping in Corvallis?

ALL RESPONSES

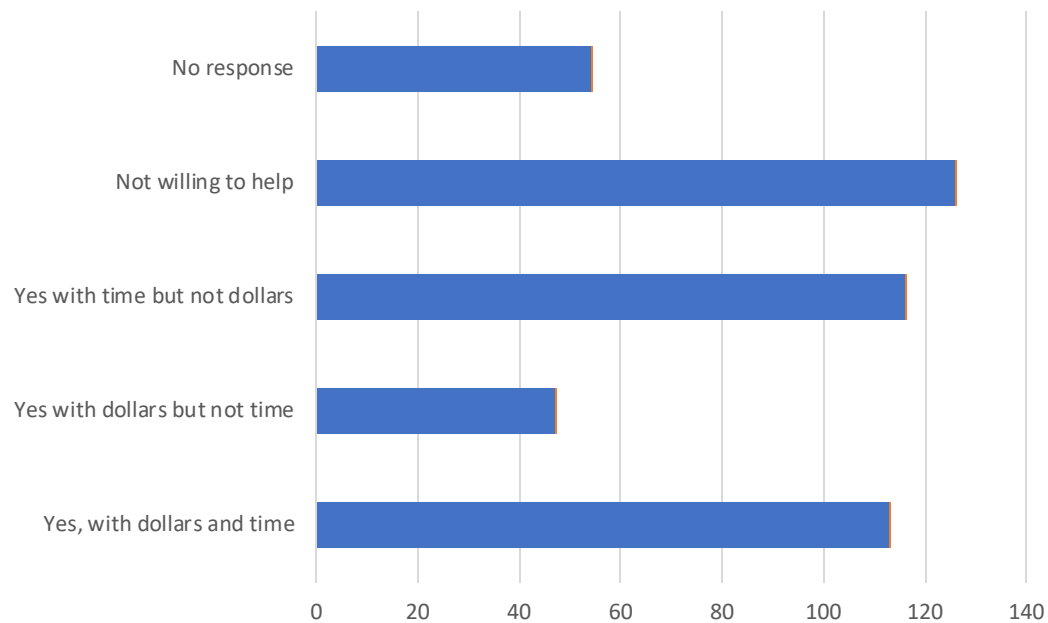


CHAMBER MEMBERS

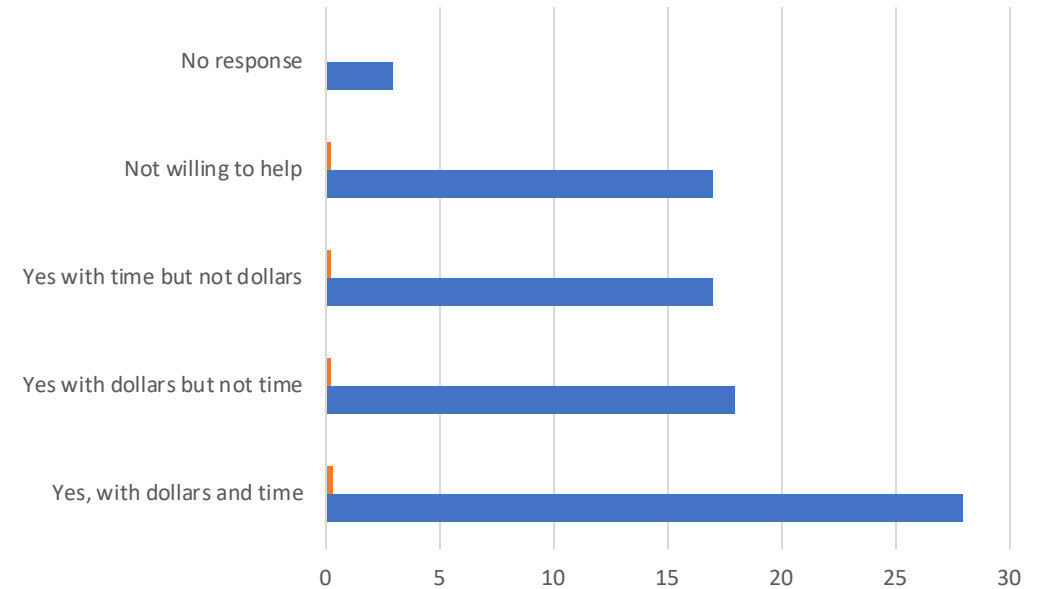


QUESTION 13: Would you be willing to contribute to the city (either with dollars or time) to provide immediate solutions for the houseless issues? Examples: Community Watch Group, Beautification Projects, Community Clean up, programs to decrease crime, etc

ALL RESPONSES

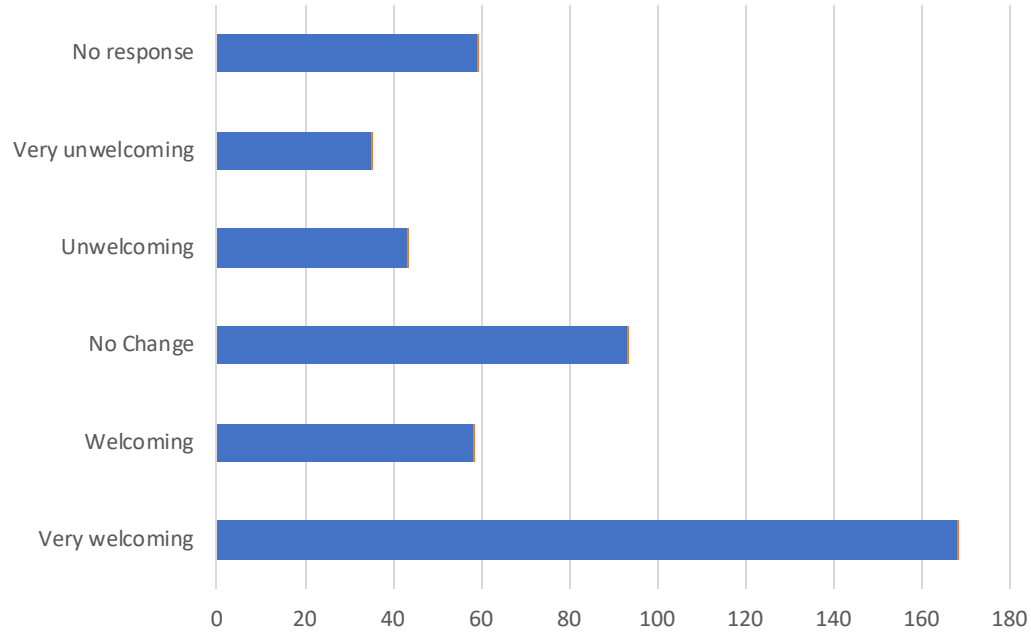


CHAMBER MEMBERS

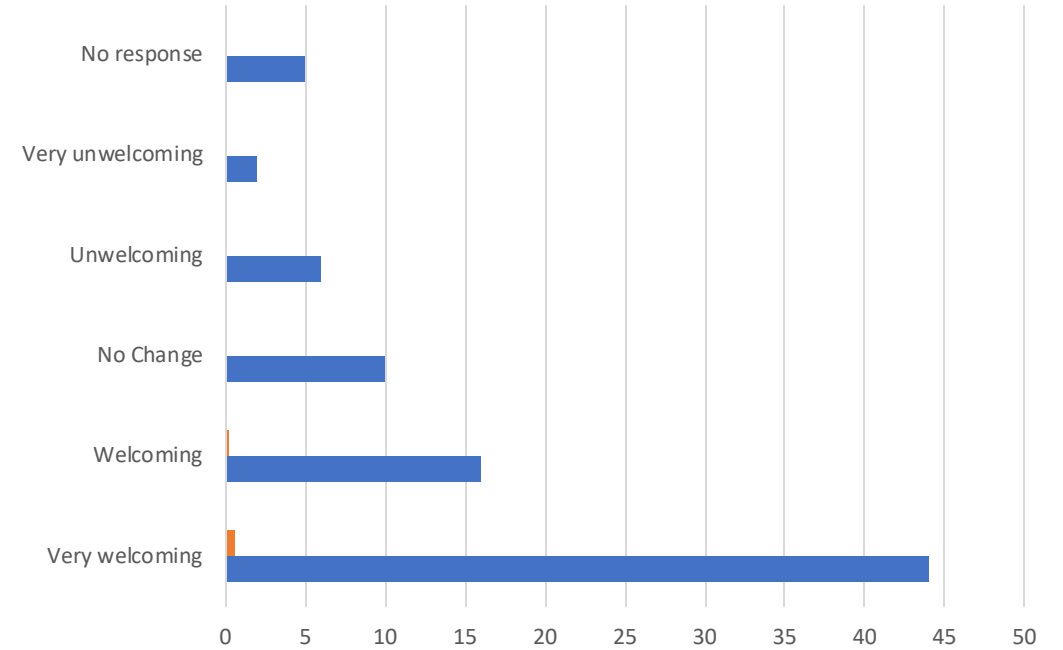


QUESTION 14: How do you feel the city of Corvallis is viewed by the houseless members of the state who do not currently reside here?

ALL RESPONSES

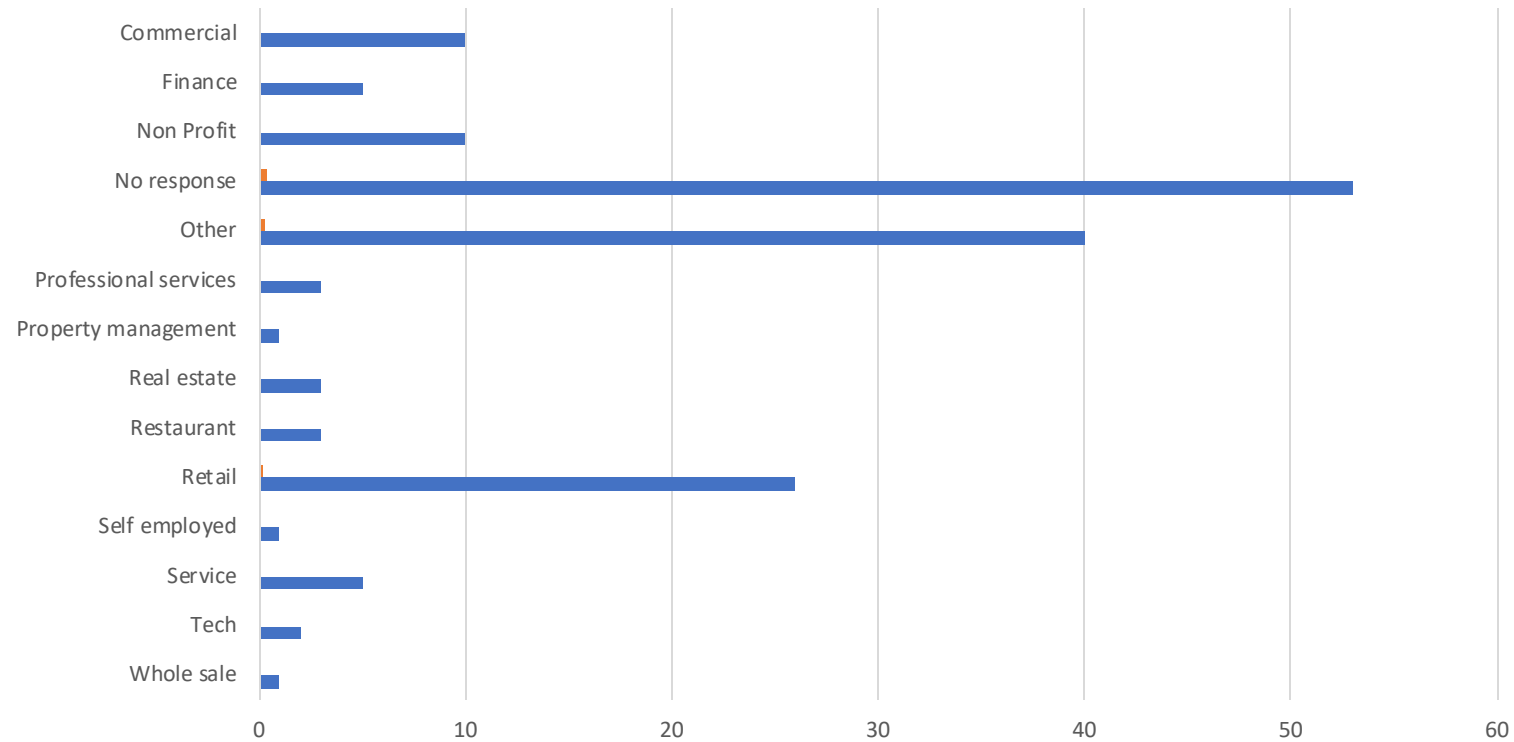


CHAMBER MEMBERS



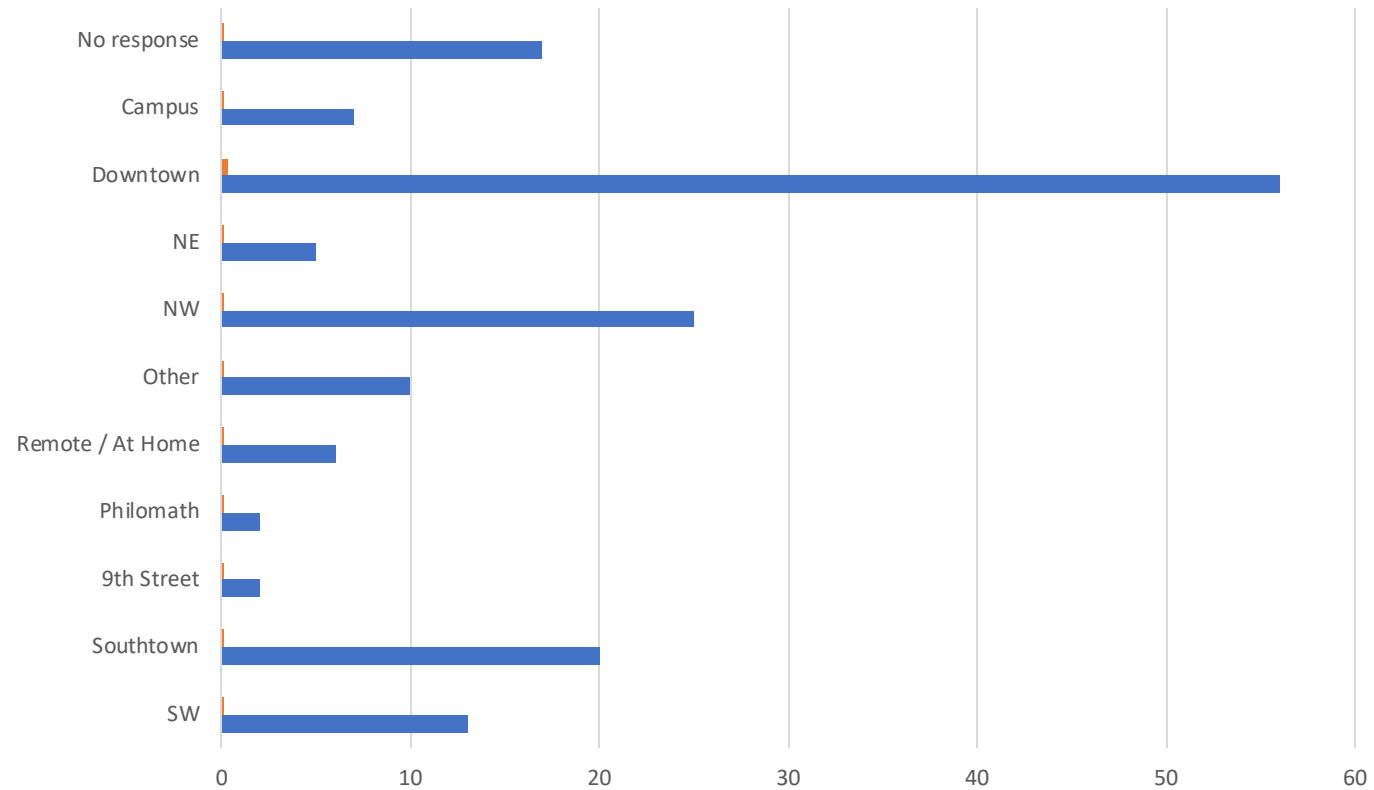
QUESTION 15a: What type of business?
Example: retail, commercial, restaurant, non-profit etc?

ALL BUSINESSES



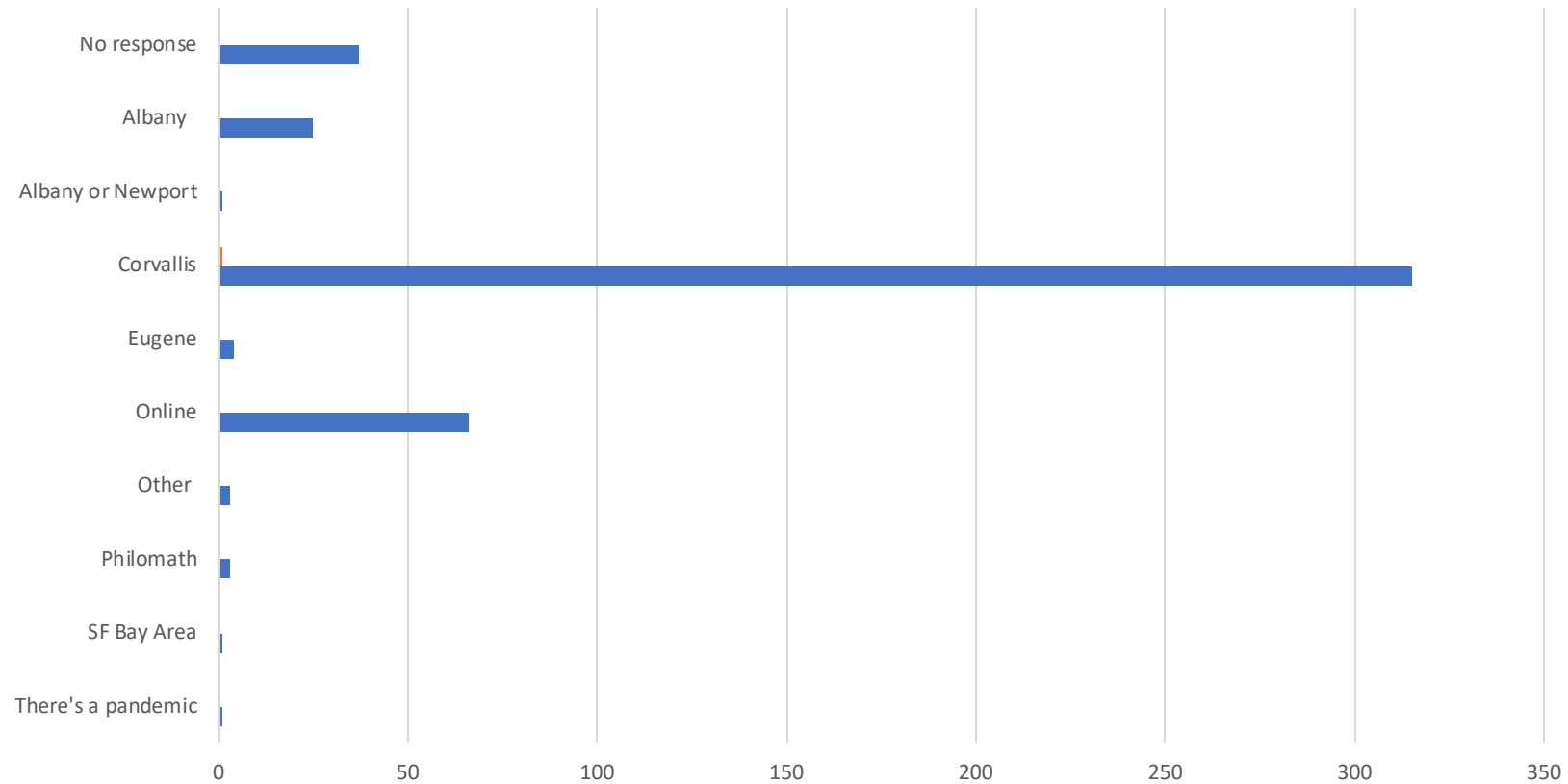
QUESTION 15b: Where is your business located?

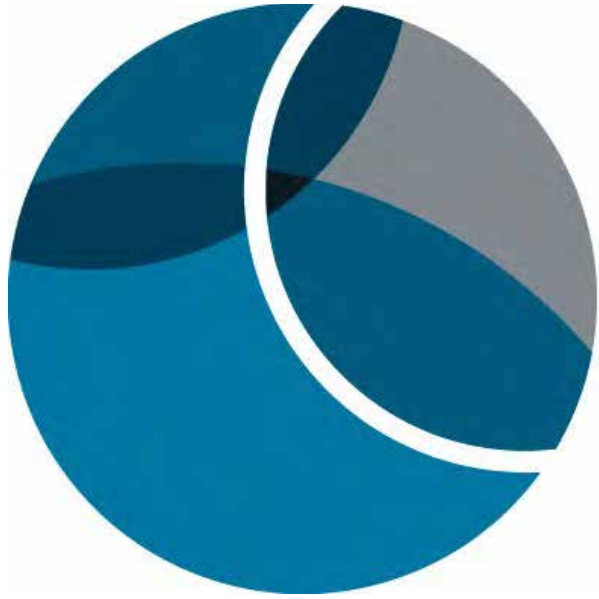
ALL BUSINESSES



QUESTION 16: Where would you describe you primarily shop most regularly?

ALL RESPONSES





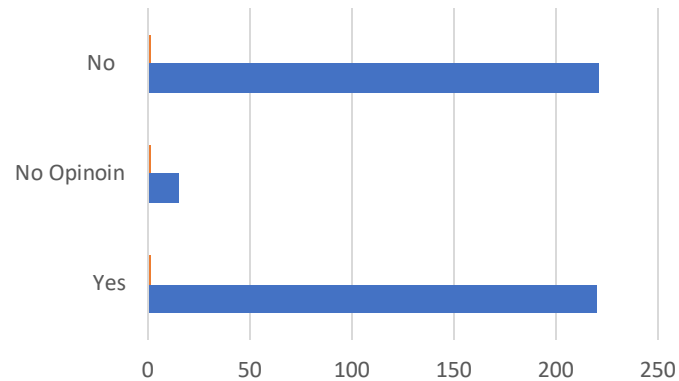
Corvallis Chamber of Commerce

Conclusion

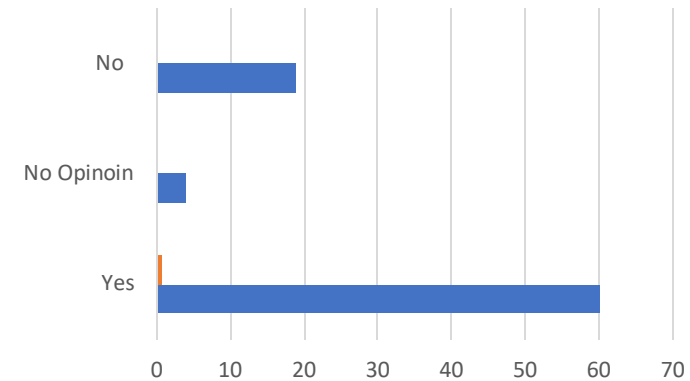
Survey Conclusion: Exclusion Zone

- 1:1 split with everyone polled
- 3:1 in support of it among Chamber members

ALL RESPONSES



CHAMBER MEMBERS



Survey Conclusion: Behaviors

- In every single category, business members experience an increase in negative behaviors, by percentage, than the main group
- Based on geography, opportunity, and time, it is no surprise that the areas of town that negative behaviors occur are those where there isn't constant surveillance after dark
 - Reports shared with the Police Department. Non-reporting has become an issue among businesses. Apathy.



Survey Conclusion: Chamber Direction

- We have to be more involved in the conversation, representing local business, and advocating for them.
 - We have not done a good enough job.

Speaking at Council Meetings 36.4%

Supporting a behavior zone 19.2%

Working with Corvallis PD on enhanced patrols 34.9%

Working with HOPE to provide feedback 39.7%

All of the above 48.2%



Survey Conclusion: Outreach

Marketing/Spreading the Word

- Resource recognition: HOPE?

- Perception vs. Reality

Action plans for 5 and 10 years do not solve issues TODAY



Survey Conclusion: Camping

PROXIMITY

Chamber Members

5:1 as far away as possible

Exhaustion level

All Responses

2:1 as far away as possible

ABILITY TO DO BUSINESS

Chamber Members

9:1 very neg/negative

vs. positive/very positive

All Responses

6:1 very neg/negative

vs. positive/very positive



Survey Conclusion: Feel Safe

FEEL SAFE

Chamber Members

2:1 unsafe/very unsafe
vs. safe/very safe

All Responses

1:1 unsafe/very unsafe
vs. safe/very safe

SHOPPING HABITS CHANGED

Chamber Members

2:1 changed/changed a lot
vs. changed little/no change

All Responses

1:1 changed/changed a lot
vs. changed little/no change

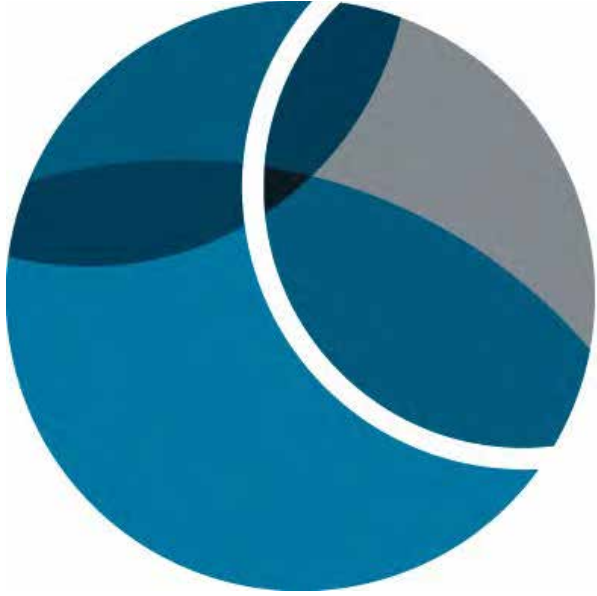


Survey Conclusion: Validation

We need a voice, too

The business community has unique struggles that are not being resolved





Corvallis Chamber of Commerce

Next Steps

Where Do We Go From Here?

- Board of Directors can disseminate the information and decide strategy
 - Share this information
 - Have a voice at the table. Be present.
 - Help people get back on their feet after the pandemic
- Ensure all the houseless community who want housing have the ability and access to receiving it





Corvallis Chamber of Commerce

THANK YOU

FOUR FILTER PROCESS

This step happens away from the table

FILTER 1: Individual Agency Screening

Individuals within agencies, who have identified situations, where individuals and/or families are facing acutely elevated levels of risk, can complete the referral form and submit it to the designated individual within their agency to be brought forward at the Situation Table.

Table representatives may bring forward referrals made from within their agencies, or from their community partner agencies

AT THE TABLE

FILTER 2: Determine Acutely Elevated Risk

First: Limited Follow-up from Prior Filter 4 Interventions

The Table is provided a high level update by the lead agency and a determination is made whether the AER has been addressed. This is to tell the table if services have been connected or not and to close the situation if possible. No details of the intervention or follow-up services are discussed.

Second: New Situations Brought Forward from Filter One

Limited de-identified data is disclosed to determine if Acutely Elevated Risk is present.

No identified records are kept by the table. The only information captured is regarding risk and agencies involved.

OUTCOMES

More information is required before being able to determine risks present



More work needs to be done by the originating Agency

The Situation Table is a conversation, it is not an entity and does not handle case management.

FILTER 3: Limited disclosure, pause for recognition

Limited disclosure of information is presented to pause for recognition and to determine if (and if so, which) agencies are already engaged with the individual, based on the evident acute risk factors, and if (and if so, which) other agencies should play a role.

OUTCOMES

Determined agencies are actively engaged and services are moving forward so intervention not required



FILTER 4: The 'Door Knock' Intervention

Agencies involved will meet at the end of the meeting to discuss the next step, which should take place within the next **24 - 48 HOURS**. This intervention is not about enforcing or apprehending. It is about gaining express consent from the client in order to collaborate in offering full support and assistance that, in many cases, the clients were not previously aware of, able to obtain, or had access to.

POTENTIAL OUTCOMES



Wasn't interested initially, but then reached out



Open to Intervention—Consent Obtained—Services Connected



Not Interested—Sector-specific Options Remain for Consideration

The Four Filter Process

A Detailed Overview

Through early attempts to explain and gain support from privacy officials for the Table model, it became evident that in operation, the Table was in effect creating new language and new decision criteria that could collectively support limited information sharing, necessitated and anticipated by the exigency clauses in almost all governing legislation across the various human services.

The **FIRST FILTER (F1)** in the process is that in order for an agency to bring a situation to the Table, they should first have exhausted options currently available within that originating agency, or available under existing bi-lateral collaborations, to meet the needs of the individual or family involved. Only if an agency is unable to meet the needs of their client unilaterally, and, if the evident risk factors extend beyond the scope of that agencies own services, then their Situation Table representative can bring the situation to the table.

The **SECOND FILTER (F2)** occurs at the next available Table meeting, where an agency that feels it has exhausted its means within its current capacity and mandate to address an individual's complex needs, introduces and provides carefully de-identified information to the other Table participants about the situation. During this process, the referring agency must identify the presenting risks which combine to deem, in their view, the situation as one of acutely-elevated risk.

It is in this second filter where the other Table participants will use their combined expertise and extensive experience in recognizing and evaluating risk levels, and will collectively decide whether the risk factors identified do indeed, or do not in their view, place the situation at a level of acutely-elevated risk. If the group decides that not enough criteria are met to propose the situation for further discussion at the Table, the originating agency will be encouraged to revisit their original support strategies, or, in some cases, work offline with another single agency in the community. However, when the Table participants collectively agree and determine that a situation is one of acutely-elevated risk, the situation will move forward to filter three. Note that client consent is always a preferred path in advancing any situation. But, due to the nature of AER situations, consent is not always readily available, and a very limited scope of implied consent will arise from the determinations made at F2, and informed consent will become an important goal as the first step in any F4 intervention.

The **THIRD FILTER (F3)** in the Situation Table process is where basic identifiable information about the individual or family is shared. In F3 discussion, only enough personal information and the most basic, non-identifying details about the client's circumstances are shared, with the express purpose of identifying whether other agencies are already involved with the client, or in contrast, which agencies should be but are not yet involved. During filter three, only these relevant agencies are permitted to take notes. To help direct the discussion further, a "lead agency" is determined by the Table, based on the relevance of the highest priority risk factors

to the mandate of the agency, or in some cases, based on the best established and trusted access that agency can provide. In addition, “assisting agencies” are also identified to help develop and execute an intervention. There will be no further discussion at the actual Table surrounding this situation at this point, as it moves outside the Table for F4 planning limited to the actual service providers to be involved. Only the de-identified data introduced in F2, and the agencies who are to be involved as identified in F3, will be added to the Risk Tracking Database (RTD).

It is at the **FOURTH FILTER (F4)** where collaborative intervention planning and execution occurs, and it only occurs completely out of the view of other Table members. Once the Table meeting ends, the lead and assisting agencies will meet privately to discuss their options for building a solution. During their intervention planning, the F4 sub-group will identify the assets or supports in the community which may become critical in the sustainability of their collaborative intervention, and will coordinate and schedule an integrated meeting with the client(s) as soon as possible.

Chelsea Hub

Working Together to Reduce Risk in Our Community

About the Chelsea Hub:

The Hub is a team of designated staff from community and government agencies that meet weekly to address specific situations regarding clients facing elevated levels of risk, and develop immediate, coordinated and integrated responses through the mobilization of resources.

The Hub is a new way of utilizing and mobilizing resources already in place in different, unified, and dynamic ways to address specific situations of elevated risk before there is an incident that requires emergency response. The Hub does not perform case management. Its purpose is to mitigate risk within 24-48 hours and connect individuals and families to services. Case management functions remain with the most appropriate agency as determined by the Hub table.

The Hub works with families and individuals that are facing complex challenges and may need services from more than one community agency. We work together to ensure families and individuals are safe, healthy and have the opportunity to thrive.

Examples of Risk Factors that we work to reduce:

Acutely-Elevated Risk: Risk Assessment and Need for Involvement of Other Agencies. Check risk factors that apply: (These are categories of risk factors from the Hub Database, Glossary of Risk Factors. See the Glossary for risk factors under each category and definitions)					
<input type="checkbox"/>	Alcohol	<input type="checkbox"/>	Drugs	<input type="checkbox"/>	Gambling
<input type="checkbox"/>	Mental Health	<input type="checkbox"/>	Cognitive Impairment	<input type="checkbox"/>	Physical Health
<input type="checkbox"/>	Suicide	<input type="checkbox"/>	Self-Harm	<input type="checkbox"/>	Criminal Involvement
<input type="checkbox"/>	Crime Victimization	<input type="checkbox"/>	Physical Violence	<input type="checkbox"/>	Emotional Violence
<input type="checkbox"/>	Sexual Violence	<input type="checkbox"/>	Elderly Abuse	<input type="checkbox"/>	Supervision
<input type="checkbox"/>	Basic Needs	<input type="checkbox"/>	Missing School	<input type="checkbox"/>	Parenting
<input type="checkbox"/>	Housing	<input type="checkbox"/>	Poverty	<input type="checkbox"/>	Negative Peers
<input type="checkbox"/>	Antisocial/Negative Behavior	<input type="checkbox"/>	Unemployment	<input type="checkbox"/>	Missing/Runaway
<input type="checkbox"/>	Threat to Public Health and Safety	<input type="checkbox"/>	Gangs	<input type="checkbox"/>	Social Environment

Other: _____

Who is part of the Chelsea Hub? Bay Cove Human Services, CAPIC, Chelsea Public Schools, Chelsea Housing Authority, Chelsea District Court, DHCD, DTA, Chelsea Police Department, La Colaborativa, Department of Children & Families, Department of Youth Services, Everett Hospital (Cambridge Health Alliance), HarborCOV, Healthy Streets, Healthcare Resource Centers (HCRC), Housing Families Inc., Jordan Boys & Girls Club, Kids In Need of Defense (KIND), MGH Chelsea Health Center, MGH Freedom Clinic, People's AME Church, Mystic Valley Elder Services, North Suffolk Mental Health Association (including BEST & Navigators), Phoenix Charter Academy, Rosie's Place, Roca Inc., Residential Support Services, The Neighborhood Developers (TND)

Consent Waiver

By signing below, you consent to have your situation brought forth to the Hub. Please know that representatives from each of the above groups will be part of determining the best possible response for your individual or family needs.

Name: _____ Home Phone #: _____

Signature: _____ Date: _____

Address: _____ Cell Phone #: _____

Relevant Family Member Information: _____

This release is valid until: _____ No expiration date: _____



Home, Opportunity, Planning, and Equity (HOPE)
Advisory Board Meeting
Approved Minutes
June 23, 2021 from 4 pm to 6 pm
ZOOM Meeting



- Members Present:** Florence Anderson; *Xan Augerot (Commissioner, Benton County); Catherine Biscoe; Karyle Butcher; Bruce Butler; Anita Earl; Joel Goodwin; George Grosch; Barbara Hanley; Nicole Hobbs; Christina Jancila* (Business Associate); Pegge McGuire* (CSC); Jim Moorefield* (Co-Chair); Jan Napack* (Corvallis City Council); Reece Stotsenberg* (Co-Chair); Janie Tebeau.
- Excused:** Bryan Cotter; Charles Maughan* (Corvallis City Council); Andrea Myhre; Aleita Hass-Holcombe.
- Absent:**
- Staff Present:** Julie Arena (Benton County Health, HOPE Program Coordinator); Paula Felipe (Benton County Public Health, recorder); Suzanne Hoffman, Health Department Director; Joe Hahn, Diversity Coordinator.
- Guests:** *Executive Committee Members.

- I. **Welcome and Introductions.** Meeting overview. Three guests tonight: Dan Cortez from Chelsea MA to present on care coordination model called “the Hub” or the situation table; Simon Date with Corvallis Chamber of Commerce; and Danielle Brown of Benton County Behavioral Health. Reminders about culture agreements such as inclusivity, kindness, respect, curiosity.
- II. **Public Comments (limited to 2-3 minutes).**
 - No Comments
- III. **Approval of Minutes: MOTION** made by Xan Augerot to approve the May 2021 minutes. Captain Joel Goodwin seconded the Motion; all in favor; **MOTION** passed.
- IV. **Membership update:**
 - Recruitment efforts for new members: Joint Information Center has been swamped with COVID-19 updates, and we are trying to work with them to create the County application so that it is updated and more inclusive and easy to read. Plans for targeted outreach and create visuals to share with community partners and with city and county via social media.
- V. **Overview and Community Updates:**
 - The Corvallis City Council has removed the moratorium on enforcement of illegal camping as of May 15th. The City has provided guidelines to help houseless community members know where they can legally sleep at City Hall and the city parks system in accordance with the Boise decision.
 - Providers are witnessing lots of people in tents who have nowhere to go. Providers have shared they are seeing traumatizing experiences trying to find and relocate to anywhere safe.
 - Emergency Housing Vouchers (EHVs): Temporary increase in federally funded housing

vouchers, just received by Linn Benton Housing Authority.

- HOPE Board work group met to discuss housing voucher increase and strategies: Pegge, Andrea, Janie, Jim, and Xan
- Concern we don't have enough for these vouchers; only good for 10 years. Funds to be used for moving; first and last month's rent. Specific referral process legislatively created: It has to come from a community partnership: CSC; CARDV--come through those two community partners. Prioritize referrals using these vouchers.
- Congratulate Pegge McGuire for her new position--officially placed as Director of Community Services Consortium.

VI. Update on Joint Elected Officials Making Recommendations.

- City and County elected officials met to review the HOPE recommendations and discuss the process of formally accepting them. Link to the meeting video: <https://vimeo.com/553411384>
 - Link to final recommendations: https://www.co.benton.or.us/sites/default/files/fileattachments/health_department/page/7506/hope_policy_recommendations_4-28-21_approved.pdf
- Both bodies shared gratitude for the work the HOPE Board has done and the process of data collection, research, prioritizing, and community engagement as outlined by the Bylaws.
- Accepting the HOPE recommendations:
 - 6/7/21: Corvallis City Council voted to accept the recommendations.
 - 6/8/21: County Commissioners reviewed the City's thoughts on lead roles and responsibilities for the recommendations.
 - 6/15/21: County Commissioners voted to accept the recommendations.
 - 6/24/21: city and county internal staff are meeting to review elected officials priorities among the HOPE recommendations and prepare an overview for the 7/1/21 joint meeting.
 - 7/1/21: Joint City and County Elected Officials meeting to discuss lead and joint roles and responsibilities to implement the recommendations.
- Xan: huge step forward with these substantive discussions to bring together solid plans to address the HOPE recommendations.

VII. Guest Speaker: Dan Cortez

- Community Engagement Specialist with Chelsea, MA Police Department
- Adopted the "Hub model" of care coordination, also called the "situation table" where partners and providers from different organizations come together to jointly coordinate on complex situations.
- 7 minute video with an overview of the Chelsea model of care coordination and four filter process to bring situations to the group: <https://youtu.be/UK8v8s6t63E>
- Julie sent out email on hub model and process; and Dan Cortez followed up with job descriptions that Julie shared with workgroup.
- Karyle: Question: A call about person moving a trailer by a stream—who to call to connect woman with services? Anita: Share my Corvallis Housing First phone number, and we can attempt to help with housing. But if not a housing issue; there is a reporting page for City of Corvallis to report code issues under "report a problem."
- Daniel Cortez: Hub process is simple; a filter process to share info to mobilize a team to

assist with intervention of services.

- Two things needed in Hub: coordination and communications.
- Create a hub team; meet every week and start to learn what everyone else does. Learn all services available in community.
- 120 communities in Canada and 16 or 18 in United States. First Hub in Chelsea, MA, which changed the community including major drop in crime.
- Hub brought community together around common issues: such as child protective services; law enforcement; addiction services; mental and behavior health issues, among others.
- Review scenarios, such as a nurse sees someone continually coming into the emergency room. Bring to hub meeting and engage with other agencies; facilitator asks questions. History of drug use, diagnose mental health, highly at risk in community. Does the person consent to receive help? If yes, review history with all services. Is person acutely at risk; if everyone says yes, we can share info.
- Discussion of the four filters: Intro to the table is based on risk factors; share limited disclosure of information. Part of hub is everyone has a rolodex of all services. Filter 4 happens separately and meet to develop strategy, which is a plan and provides hope to person.
- Implement strategy: 1) Did she accept treatment and reunification plan?; 2) informed of services but not ready right now; 3) flat out refuses; 4) she has left the area and moved on; unable to locate.
- In database; risk factors and what is needed and outcome. Don't keep situations open for long like 2 weeks; doesn't mean stop trying to help person; but in a situational table, identify risk, mobilize resources, offer services and provide updates. It's not case management, so not sharing too much info.
- Form filled out; top has checklist designed for social workers to check off risk factors; person at risk checks off additional risk factors. Works incredibly well. Doing it for 6 years and hub has transformed our community.
- Can be adapted to fit the needs of community; elderly; hoarders; kids at risk; drug use; families; domestic violence; alcoholism; homelessness; community at risk. Hub helps coordinate services and communication.
- We had 804 hub situations in six years; and 500 situations talked about after hub meeting; we met on Tuesdays.
- Christina: How do you determine extreme risk? Who determines who to call? Daniel: provide a one minute training video. Teams that rescue people who are drowning; look at how do they get in the river? If falling off; then build a protective barrier. For example, look at why people's childhood trauma remain unaddressed.
- One stop shop: I run hub in community; mobilized community to help people.
- Question: how much is hub about getting homeless housed? Dan: homelessness is one issue/problem; look at solving the risk factors that homeless person has, including mental health, addiction; lost job; income; reasons why unhoused. Mental health is number one risk factor; housing number 2.
- In past 3 years, City council and leaders plug money into services for people facing addiction. Teams working with people; homelessness is one of risk factors we address.
- Jim: Congrats on incredible success; look forward to how we can adapt. Point of hub to identify the risk; connect to resources.
- Julie sent follow up questions via email. Workgroup will meet in July and bring back their

findings at July board meeting to recommend the model to city and county. Thank you Dan!

VIII. Simon Date (Corvallis Chamber of Commerce):

- Houseless Survey 2021 full results; April and May 2021.
- Chamber 370 members; Simon date-CEO / President for 2 years.
- Represent businesses in Corvallis/Benton County.
- Unique concerns of business community like geographic areas/issues.
- Speak from Point of View of knowledge.
- Share unfiltered data; 17 questions; 4 had subsets.
- Not scientific; perceptions vs. reality.
- Human rights trump business rights.
- Feedback from different church groups
- 68 duplicate IP addresses coincide with facebook posts
- Survey was anonymous
- Transparency
- 3 groups took survey: everyone 456; owned a business 162; belonged to the chamber 83 (group 1 and 3 in this presentations). (See powerpoint presentation for details).
- Survey conclusion about behaviors; increase in negative behaviors (see slide).
- Solutions for negative behaviors: who is going to help? HOPE has good action plan for longer term; no solution from Hope and other groups for today. How are these organizations going to help me tomorrow with negative issues? No plan for tomorrow or today is perception; reality vs perception; Julie would like to share HOPE recommendations at upcoming chamber meeting. Some are immediate/urgent issues.
- Catherine Biscoe: thank you. Don't have triage response; business has triage from covid; not quick recovery for business owners; recommend we prioritize businesses that cannot wait five to 10 years for solutions to be implemented.
- Simon gave his cell phone for board members to follow up.
- Pegge: thank you! Services don't draw homeless to our community....this is a traumatic issue for everyone involved.
- Simon: perception vs reality; you are doing fantastic work. Consistent concern of business community. Perception is the city does not care; how do we change that—Julie will follow up with Chamber.
- George: Thank you for being here Simon. It is important that business voices be heard and that their opinions are largely based on frustrations we all share.

IX. Danielle Brown – Benton County Behavioral Health Director

- Brief overview of main services offered from Behavioral health, including substance use disorders; adult outpatient services; peer delivered services; children's WRAP program; Housing Program; School Based prevention; Medication Management; Choice Program; Supported employment; Drug Treatment Court; CHC Behavioral Health team: Psychiatric Security Review Board; Medication Assisted Treatment; Assertive Community Treatment; Pre-Commitment Investigations; Jail and Forensic Services; Crisis Services; and Early Assessment and Support Alliance.
- Crisis Response and Services for Benton County.
- Our focus is to serve any individual within our county experiencing a crisis 24 hours a day
- Daytime Crisis (Mon-Fri 6am-8pm) is covered by the Crisis Team

- 4 Masters level clinicians (Qualified Mental Health Professionals – QMHPs)
- Afterhours Crisis (8pm-6am Mon-Fri, weekends, and holidays)
- 12 QMHPs from the all of the mental health teams on a rotation
- We offer 24hr crisis response
- Crisis workers are paged by internal staff and community partners. Pages are called back within 5 minutes and the crisis worker will arrive at the site of the evaluation within 45 minutes of the request for service for external calls and within 15 minutes for internal calls.
- For every crisis, we follow up the next day to ensure that the patient’s needs are met and we also coordinate care with their care team.
- Inpatient Psychiatric Hospital discharge coordination
- Daily coordination meetings with inpatient hospital discharge planner
- Care coordination for clients in the inpatient hospital discharging to Benton County
- 24 hour crisis line for all community members: 1-888-232-7192
- Answered by clinicians 24hrs
- Partnership with local law enforcement
- Coordinate a quarterly 40hrs. Crisis Intervention Training in our community
- Crisis Text Line – Text “Oregon” to 741741.
- Questions: where are they housed...emergency room for further evaluation. Could be inpatient psychiatric unit; depends of level of risk; ER physicians make decision; do secondary risk assessment and make recommendations; up to hospital doctors to write; 2 physicians hold for longer term hold—5 days.
- Cannot have overlapping holds when only can keep for a few days
- Crisis center would allow for people to have safe place to go and receive treatment and care and connect with long-term services other than ER department.
- What are wait times for mental health treatment? With covid now we are out 7 to 9 weeks for evaluations; trying to minimize wait times as people need help.
- Danielle is available to come back to engage with this group again.

X. Next steps:

- Board recruitment in July and August for two openings.
- Upcoming progress on HOPE recommendations:
 - 6/24/21: city and county internal staff are meeting to review elected officials priorities among the HOPE recommendations and prepare an overview for the 7/1/21 joint meeting.
 - 7/1/21: Joint City and County Elected Officials meeting to discuss lead and joint roles and responsibilities to implement the recommendations.

XI Meeting was adjourned at 6 pm.

Benton County & City of Corvallis
Home, Opportunity, Planning, & Equity (HOPE) Advisory Board



Julie Arena, HOPE Program Coordinator
Benton County Health Department
4077 SW Research Way
Corvallis, OR 97339
541-766-0252 * Email: Julie.Arena@co.benton.or.us

HOPE Meeting Agenda

July 28, 2021 from 4-6 PM

Meeting location: Zoom or phone in

Join Zoom Meeting: <https://cscteam.zoom.us/j/91929383646>
One tap mobile: +12532158782,,91929383646#
Dial by phone: +1 253 215 8782
Meeting ID: 919 2938 3646

AGENDA

- I. Welcome, Zoom Housekeeping, Overview of Agenda.....4pm
- II. Public Comment* (up to 10 minutes)4:05pm
- III. Roll call and approve June meeting minutes4:15pm
- IV. Community Updates4:20pm
- V. Educational Presentation and Q&A on Developing Affordable Housing4:25pm
 - a. Guest Speakers from the state, city, and county: Connor McDonnell, Housing Integrator from Oregon Housing & Community Services, Paul Bilotta and Brigetta Olson from the City of Corvallis Community Development Department, and Rebecca Taylor from Benton County Community Development Department.
- VI. Care Coordination recommended model from HOPE work group.....5:30pm
- VII. HOPE Recommendations Update – implementation of 12 HOPE recommendations..... 5:45pm
- VIII. Next Steps5:55pm

*Public Comment: if you want to make a public comment, please put your name in the chat window or “raise your hand” in the Zoom meeting when you arrive. List your name and the topic of your comment

in the chat. Comments are made in the order that people “raise their hand” or submit a chat. For people calling in from a phone line, there will be an opportunity for comment for participants on the phone.



HOPE Advisory Board

July 2021 Public Meeting

Meeting facilitated by HOPE Coordinator, Julie Arena

7/28/21



Zoom Housekeeping

- All attendees are muted when they join.
- All attendees can unmute themselves and choose to be seen visually by clicking “Start Video” at the bottom of the screen.
- **Public comment:**
 - Type your name into the “Chat” area, say you want to make a public comment, and on what topic.
 - Example: “Julie – public comment – crisis response.”
 - For those on the phone, there will be an opportunity to comment, too.
- **Questions during the meeting:**
 - Type into the “Chat” area and send it to host, Julie Arena.

Meeting Agenda

1. Meeting Overview, Agreements and Culture
2. Public Comment for 10 minutes
3. Logistics:
 - Vote to approve June 2021 minutes – roll call
 - Board Membership update: Recruitment efforts
4. Community Updates
5. Educational Component – Community Development: the role of the state, city, and county in developing affordable housing

Guest Speakers: Connor McDonnell, Housing Integrator from Oregon Housing & Community Services, Paul Bilotta and Brigetta Olson from the City of Corvallis Community Development Department, and Rebecca Taylor from Benton County Community Development Department.
6. Care Coordination recommended model from HOPE work group
7. HOPE Recommendations Update – implementation of 12 HOPE recommendations



Agreements for our culture + conduct:

Fun

Inclusive ✓✓

Humor

Food ✓

Action/roll up sleeves

Change the face of Homelessness

honesty

Respect ✓

consensus

Think before you speak

Curiosity ✓

transparency

Recognize personal bias

Kindness ✓

time management

Concise communication

Open minded ✓

opinions matter

data driven

Do your homework!

patient

authentic

Valuing personal experience

dedication/work ethic
honor the expectations of
the work

Public Comment

10 minutes

- Comment limited to 2-3 minutes based on number of people wanting to comment
- Type into the “Chat” and say you want to make a public comment and on what topic.
- For those on the phone, I will ask if there are any public comments from callers.
- Can also submit written comments to the Board via email to Julie.Arena@co.Benton.or.us

Logistics: Vote to approve June 2021 minutes, roll call

Flip Anderson

Xan Augerot

Catherine Biscoe

Karyle Butcher

Bruce Butler

Bryan Cotter

Anita Earl

Joel Goodwin

George Grosch

Barbara Hanley (will join at 4:30)

Aleita Hass-Holcombe (excused absence)

Niki Hobbs

Christina Jancila

Charles Maughan

Pegge McGuire (excused absence)

Jim Moorefield

Andrea Myhre

Jan Napack

Reece Stotsenberg

Janie Tebeau (excused absence)

Community Updates

- Crisis Outreach Response and Engagement (CORE) team launched this month. Pilot with two staff (1 Corvallis Police Department and 1 Behavioral Health) to do co-response for the next year and collect data about the need for crisis response, when law enforcement is needed, what kinds of calls, etc.
- Legislative Session just ended – lots of unprecedented state and fed funding for housing, homelessness, behavioral health, crisis response and respite, services.
- Permanent Supportive Housing (PSH) \$5 million to Corvallis Housing First (CHF) – Andrea Myhre
- Jackson Street Youth Services (JSYS) renovation, closing Albany until 2022
- ESG-CV funding 3 new positions with CSC.
 - 1) Data coordination and improvement for homeless management information system (HMIS) (position posted),
For our community members experiencing homelessness: 2) a Tribal liaison to do outreach and case management for our Native American community members, and 3) Black community outreach and case manager (last two positions being finalized).

Board Recruitment Update

Recruitment ends 7/31/21

Apply online:

bit.ly/BentonCoGov-HOPE-Board

- 10 Applications as of 7/27/21
- Demographics (some overlapping):
 - Four people who have experienced homelessness
 - Four people from communities of color
 - Two people from our LGBTQI+ community
 - One person from our disability advocates community
- Timeline:
 - HOPE Executive Committee will review applications at their August meeting
 - Goal is to have new members start in September or October.



Guest Speaker: Connor McDonnell Housing Integrator from Oregon Housing & Community Services



OREGON HOUSING AND COMMUNITY SERVICES

The Role of Oregon Housing and Community Services on Affordable Housing Development



Connor McDonnell, *Housing Integrator*
Oregon Housing and Community Services

Wednesday, July 28th, 2021



AGENCY ROLE



Working together to serve individuals, families
and communities throughout Oregon

OREGON HOUSING AND COMMUNITY SERVICES CROSS-AGENCY STRATEGIC ALIGNMENT

HEALTH
OUTCOMES



SAFETY
OUTCOMES



EDUCATION
OUTCOMES



ECONOMIC
OUTCOMES



HOUSING IS FOUNDATIONAL



Statewide Housing Plan Priorities



PRIORITY: EQUITY & RACIAL JUSTICE

Identify and address institutional and systemic barriers that have created and perpetuated patterns of disparity in housing and economic prosperity.



PRIORITY: HOMELESSNESS

Build a coordinated and concerted statewide effort to prevent and end homelessness, with a focus on ending unsheltered homelessness of Oregon's children & veterans.



PRIORITY: PERMANENT SUPPORTIVE HOUSING

Invest in permanent supportive housing, a proven strategy to reduce chronic homelessness and reduce barriers to housing stability.



PRIORITY: AFFORDABLE RENTAL HOUSING

Work to close the affordable rental housing gap and reduce housing cost burden for low-income Oregonians.



PRIORITY: HOMEOWNERSHIP

Expand homeownership for low and moderate income Oregonians with the tools to successfully achieve and maintain homeownership, particularly in communities of color.



PRIORITY: RURAL COMMUNITIES

Change the way OHCS does business in small towns and rural communities to be responsive to the unique housing and service needs and unlock the opportunities for housing development.



OREGON HOUSING AND COMMUNITY SERVICES CONTINUUM

HOUSING STABILIZATION



AFFORDABLE RENTAL HOUSING



HOMEOWNERSHIP



EQUITY AND RACIAL JUSTICE

CORE PROGRAMS

- Energy Bill Pay Assistance
- Weatherization Programs
- IDA (Asset Building)
- Emergency Housing Assistance
- Low-Income Rental Housing Fund (Rental Assistance)

CORE PROGRAMS

- 9% AND 4% LIHTC
- Permanent Supportive Housing
- LIFT Rental
- Gap Funding
- Oregon Multifamily Energy Program
- Agriculture Worker Housing

CORE PROGRAMS

- Home Ownership Assistance Program (HOAP)
- Down Payment Assistance
- Oregon Bonds Residential Loan Program
- Oregon Homeownership Stabilization Initiative
- LIFT Homeownership



OREGON HOUSING *and*
COMMUNITY SERVICES

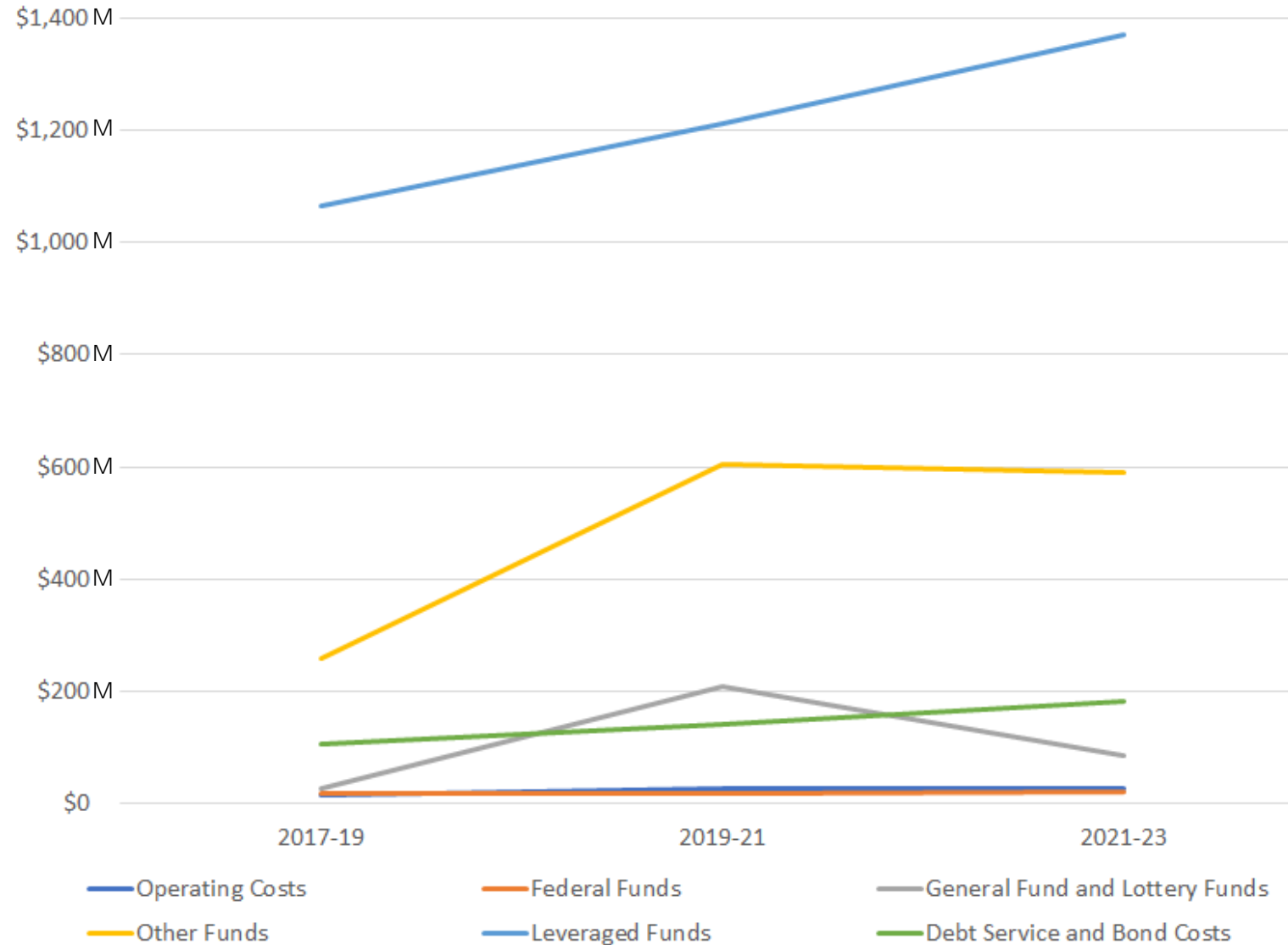
Affordable Rental Housing

Programs designed to increase and retain the stock of affordable rental housing opportunities through development (funding construction) and asset management.

In 2020, **OHCS added more than 5,000 homes to our development pipeline** (funding commitments for 2,874 homes and closing on 41 transactions that will produce an additional 2,785 homes).



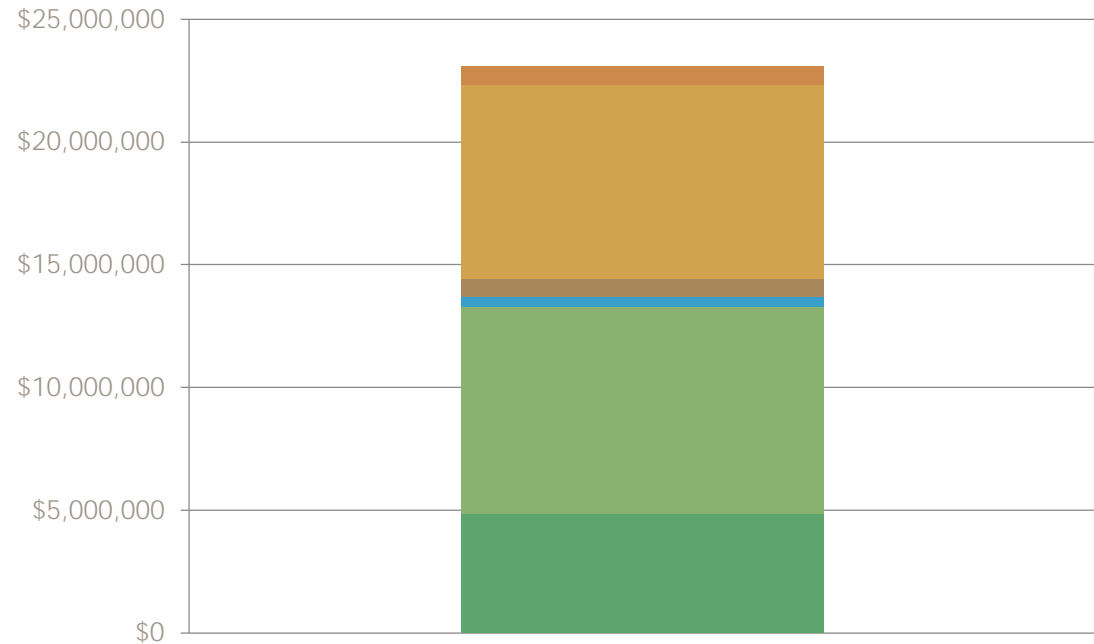
Operating costs come from all fund types



Cornerstone Apartments

Salem

- 180 units a 60% AMI
- Serving communities of color
- 36 units to serve DHS clients
- LIFT: \$4,877,919
- 4% LIHTC: \$883,272



- Deferred Developer Fee
- Long Term Bonds (Permanent Debt)
- Private Grant
- City HOME
- Leveraged Tax Credit Equity
- OHCS LIFT

AFFORDABLE RENTAL HOUSING – PERMANENT SUPPORTIVE HOUSING

PSH Components

- PSH Unit
One-time funding
- Operations/Rent Subsidy
Ongoing funding
- Supportive Services
Ongoing funding

PSH Cost Comparisons

Intervention	2018 Cost	Duration
State Hospital Stay	\$800	Per night
Emergency Room	\$500	Per average visit
County Jail	\$125	Per night
PSH	\$59-64	Per night



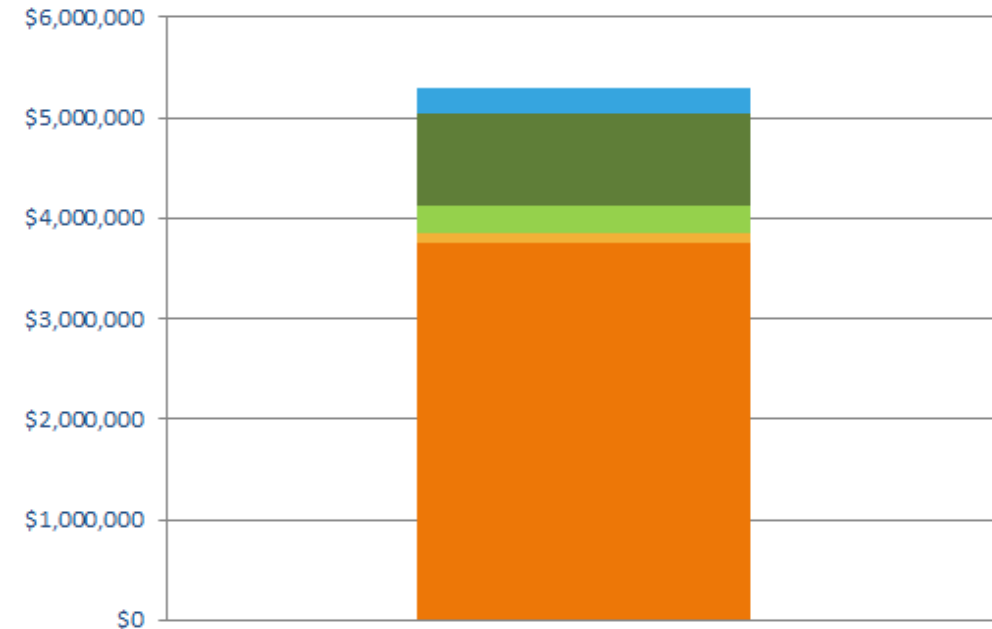
*Bud Clark Commons residents saw a **45% reduction in healthcare costs** a year after moving into Permanent Supportive Housing*

Affordable Housing Case Study: PSH

Keystone Apartments

Eugene

- 15 permanent supportive housing (PSH) homes for chronically homeless families
- Serving communities of color
- PSH development - \$3.75 million
- Support services funds that allow for wrap around support
- Local support, System Development Charge (SDC) waiver



- Deferred Developer Fee
- Loan
- Private Grant
- SDC Waiver
- OHCS PSH Development Funding

Housing Preservation

Ya Po Ah Terrace

Eugene

- 18-story, 222 units
- Older adult housing where tenants pay 30% of gross income on rent & utilities
- Numerous sources of funding including Low Income Housing Tax Credits (LIHTC) 9% & 4% that totaled nearly \$65 million in project costs



Moving Oregon Toward an Equitable Recovery: OHCS Investments

OHCS state investments in the 2019-21 biennium was \$336.5 M; the 2021-23 biennium state investments **increased by 260%** to nearly \$900 M



Affordable Rental Housing

Priority Policy Bills

- HB 2094 – Veterans Definition Expansion
- HB 2095 – Publicly Support Housing (PuSH) Preservation Notice Fix
- HB 2433 – Changes to the Agricultural Worker Housing Tax Credit

Investments - \$622.9 million*

- \$410 M in bond funding for Local Innovation Fast Track (LIFT) Rental, LIFT Homeownership, and Permanent Supportive Housing Development Resources
 - \$60 M is set aside for LIFT Rental developments unfunded in last NOFA
- \$13.4 M PSH rental assistance & services
- \$100 M for affordable housing preservation
- \$30 M for land and property acquisition
- \$30 M for Landlord Compensation Fund 20% payments
- \$10 M Co-Location w/ early learning
- \$10 M Oregon Affordable Housing Tax Credit Increase
- \$9.5 M Agricultural Worker Housing Tax Credit Increase
- \$5 M Construction gaps
- \$5 M Landlord Guarantee Fund related to the safe harbor period established in SB 278 (grant to Home Forward)

Additional Development Resources

- Revenue bonds - \$500 M
- Pass-Through Revenue Bonds - \$1.3 B
- Private Activity Bonds 2022 - \$250 M to OHCS (\$151.86 M to PAB committee)
- Private Activity Bonds 2023 - \$250 M to OHCS (\$151.86 M to PAB committees)



Housing Stabilization – Homeless Services

Priority Policy Bills

- HB 2094 – Veterans Definition Expansion
- HB 2101 – updating landlord guarantee programs
- HB 2100 – modernizing Oregon's homeless response system; Task Force on Homelessness and Racial Justice
- HB 2344 – Individual Development Account policy changes

Investments - \$42.68 million*

- \$7 M Individual Development Account (tax credit also extended with HB 2433)
- \$25 M shelter infrastructure and capacity
- \$2 M shelter technical assistance
- \$3 M for OERAP local provider capacity building & tenant education
- \$1.18 M Homeless Management Information System (HMIS)
- \$4.5 M long-term rental assistance for at-risk youth



Barriers Reported to Us on Affordable Housing Development

- Pre-development resources to get project ready and land not available
- Zoning and permitting process difficult
- Lack of incentives from local government (such as property tax-exemption)
- Complexity of affordable housing development
- Finite development resources from funders & service funding challenges
- Opposition to affordable housing from neighbors



Questions

Contact Information:

Connor McDonnell, Housing Integrator at Oregon Housing
& Community Services

Connor.McDonnell@oregon.gov



**Guest Speakers:
Paul Bilotta and Brigetta Olson,
City of Corvallis
Community Development Department**

**Rebecca Taylor, Benton County
Community Development Department**



THE LOCAL GOVERNMENT'S ROLE IN AFFORDABLE HOUSING

July 28, 2021

- ▶ Local Government Roles in Affordable Housing
- ▶ City Role in Affordable Housing
- ▶ County Role in Affordable Housing

AGENDA

SHARED ROLES

Paul Bilotta

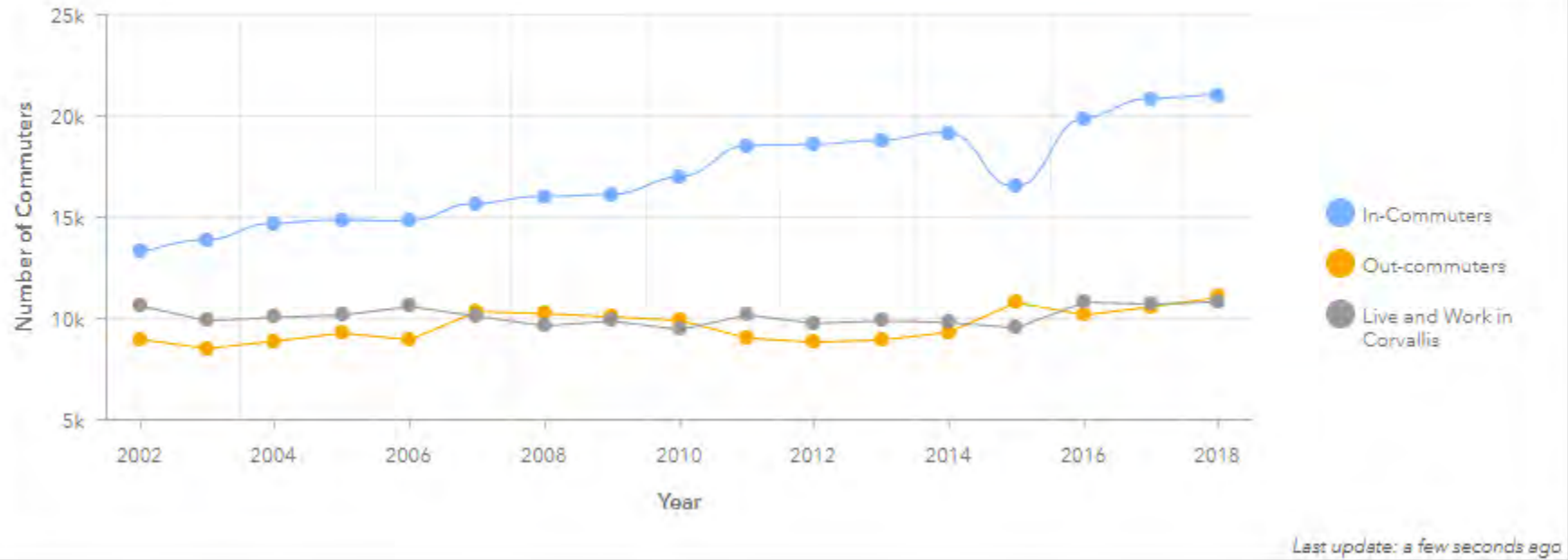
City of Corvallis



- ▶ Ensure there is adequate land supply to meet market demand and maintain competition
- ▶ Ensure that there is an adequate variety of land available to supply the full range of housing types
- ▶ Maintain regulations that implement community housing goals and evolve with changes in the marketplace
- ▶ Provide reliable information
- ▶ Follow the law

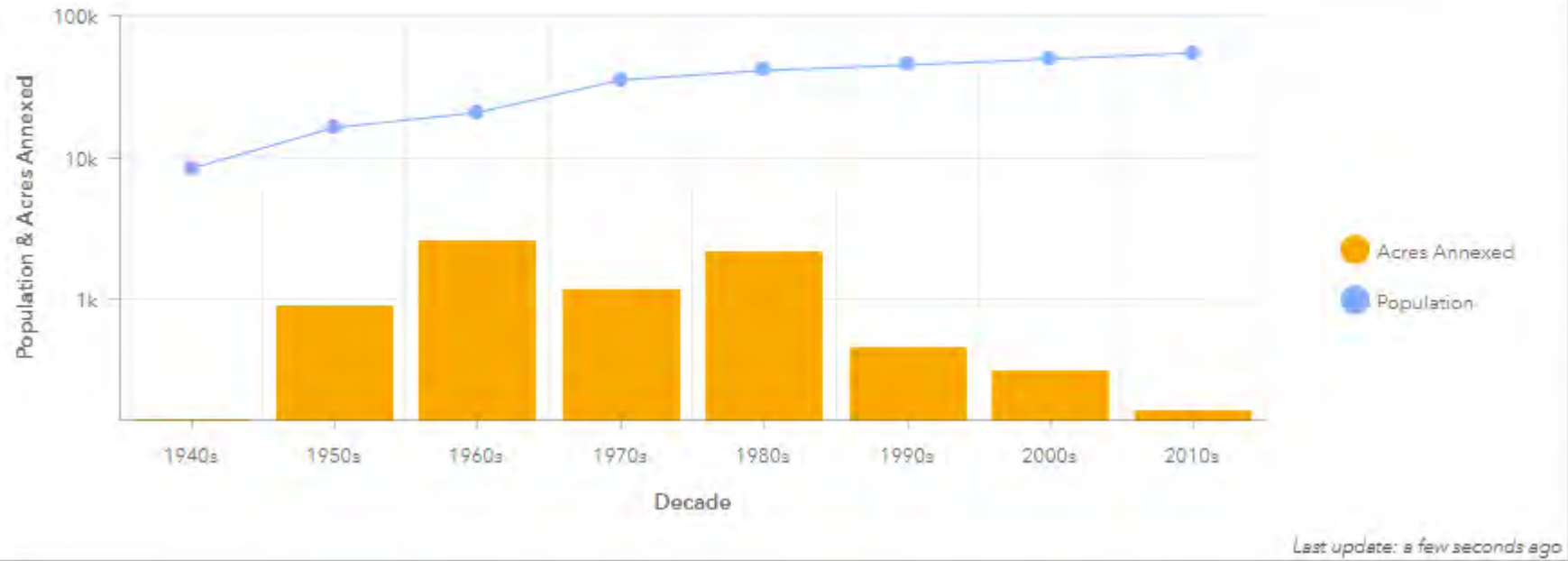
CITY/COUNTY SHARED ROLES

Corvallis In-Commuters Vs. Out Commuters



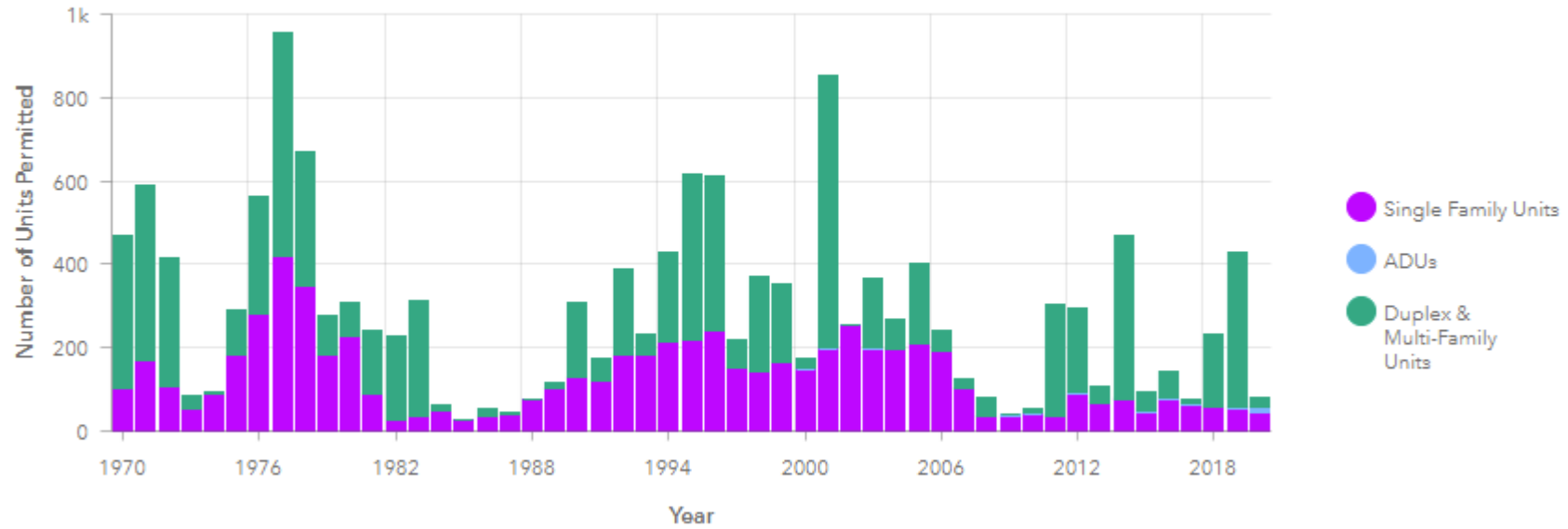
ADEQUATE LAND SUPPLY

Acres Annexed Vs. Population



ADEQUATE LAND SUPPLY

Residential Building Permits Since 1970



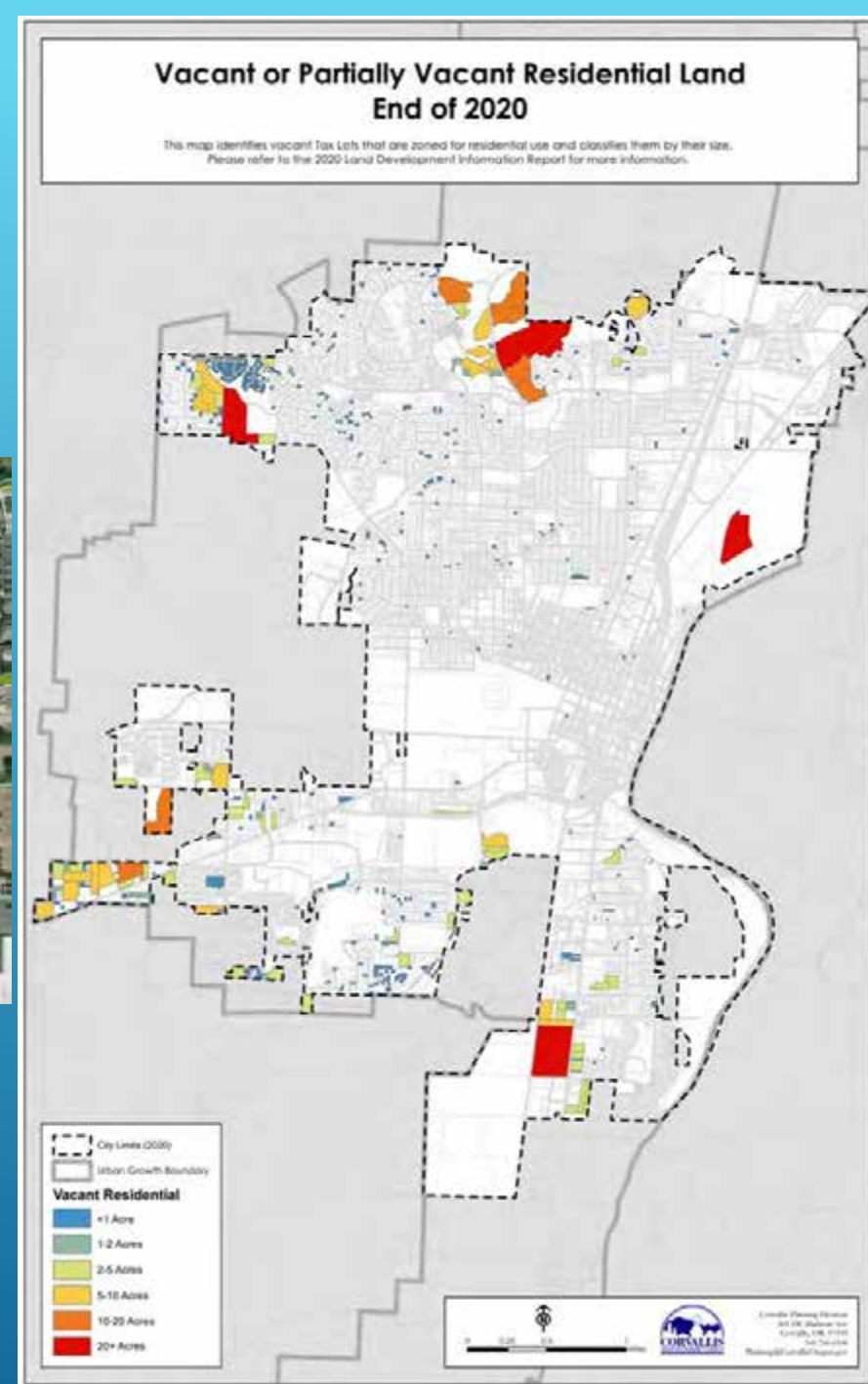
Last update: a minute ago

ADEQUATE LAND SUPPLY

- ▶ Accessory Dwelling Units
- ▶ HB 2001 "Middle Housing"
- ▶ Project all types of housing individually



VARIETY OF LAND SUPPLY



▶ Benton County Land Development Code

<https://www.co.benton.or.us/planning/page/development-code>

▶ City of Corvallis Land Development Code <https://www.corvallisoregon.gov/cd/page/land-development-code>

KEEP REGULATIONS UP TO DATE



Reliable Information

- ▶ Housing Dashboard
<https://www.corvallisoregon.gov/cd/page/housing-data>
- ▶ Land Development Information Report
<https://www.corvallisoregon.gov/cd/page/community-development-publications>

Follow the Law



WRAPPING UP

CITY SPECIFIC ROLES

Brigetta Olson

City of Corvallis



- ▶ Work with developers to create competitive deals that can occur
- ▶ Create opportunities for gap financing
- ▶ Implement Fair Housing
- ▶ Build organizational capability
- ▶ Land banking

CITY SPECIFIC ROLES

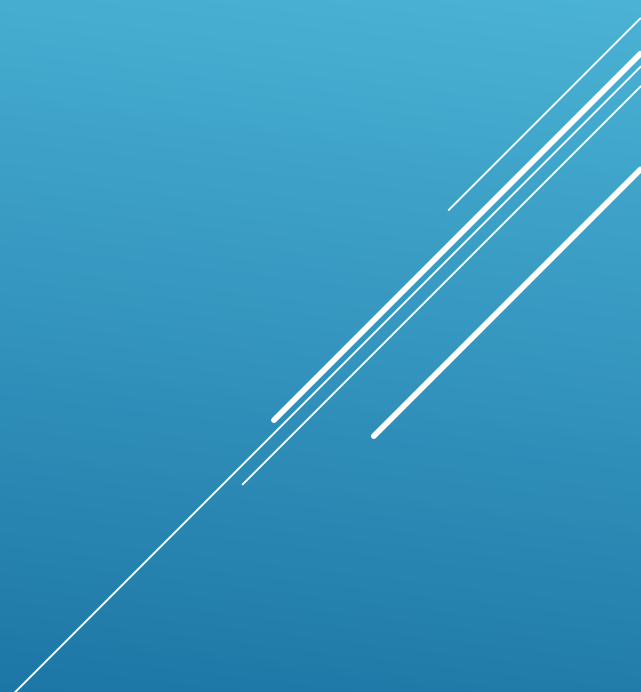
- ▶ Creating a Development Strategy (information gathering)
- ▶ Selecting Developer/ Finding a Site/ Services
- ▶ Predevelopment and Financing!
- ▶ Construction
- ▶ Occupancy and Ongoing Operations

HOUSING DEVELOPMENT PROCESS

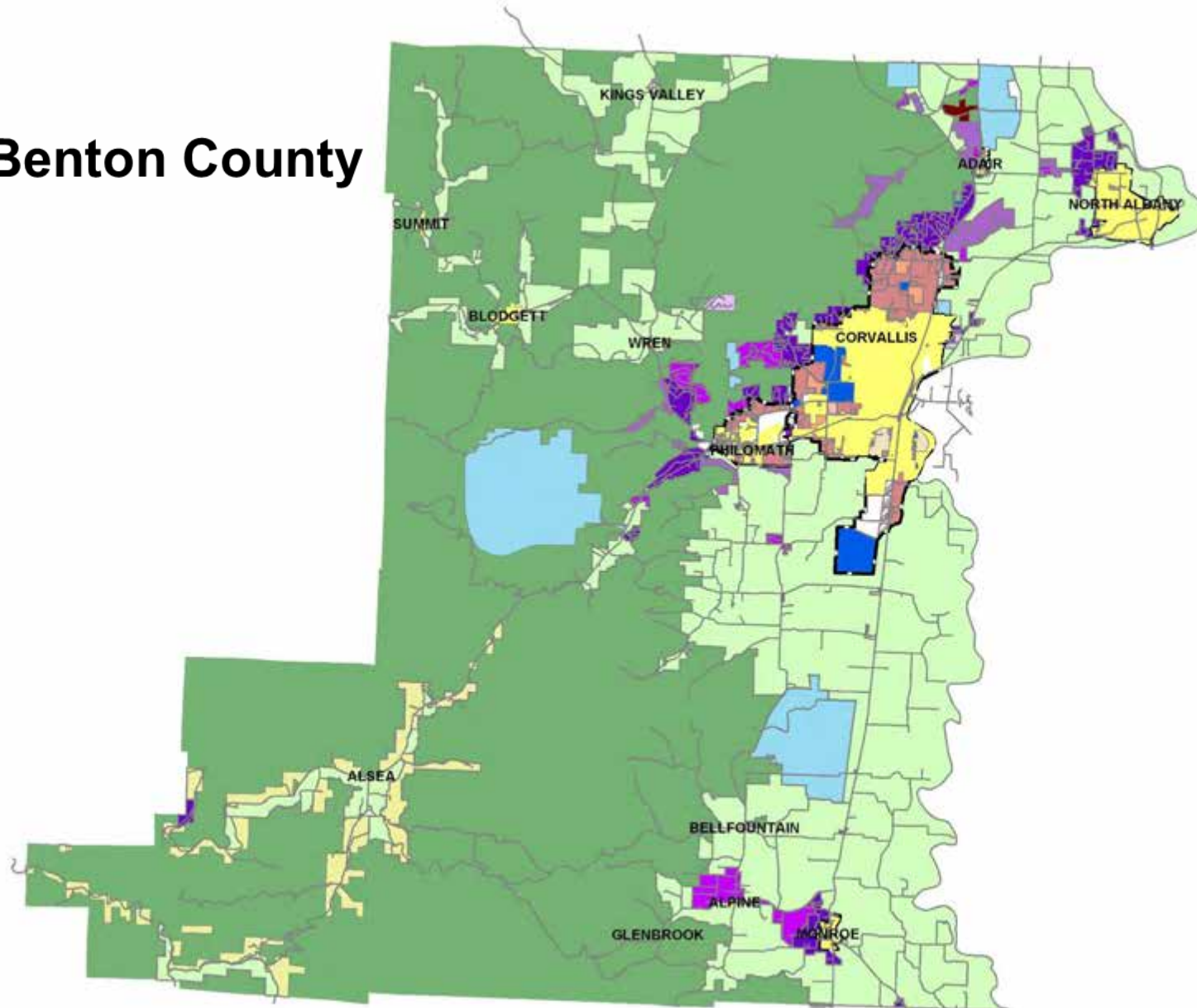
COUNTY SPECIFIC ROLES

Rebecca Taylor

Benton County



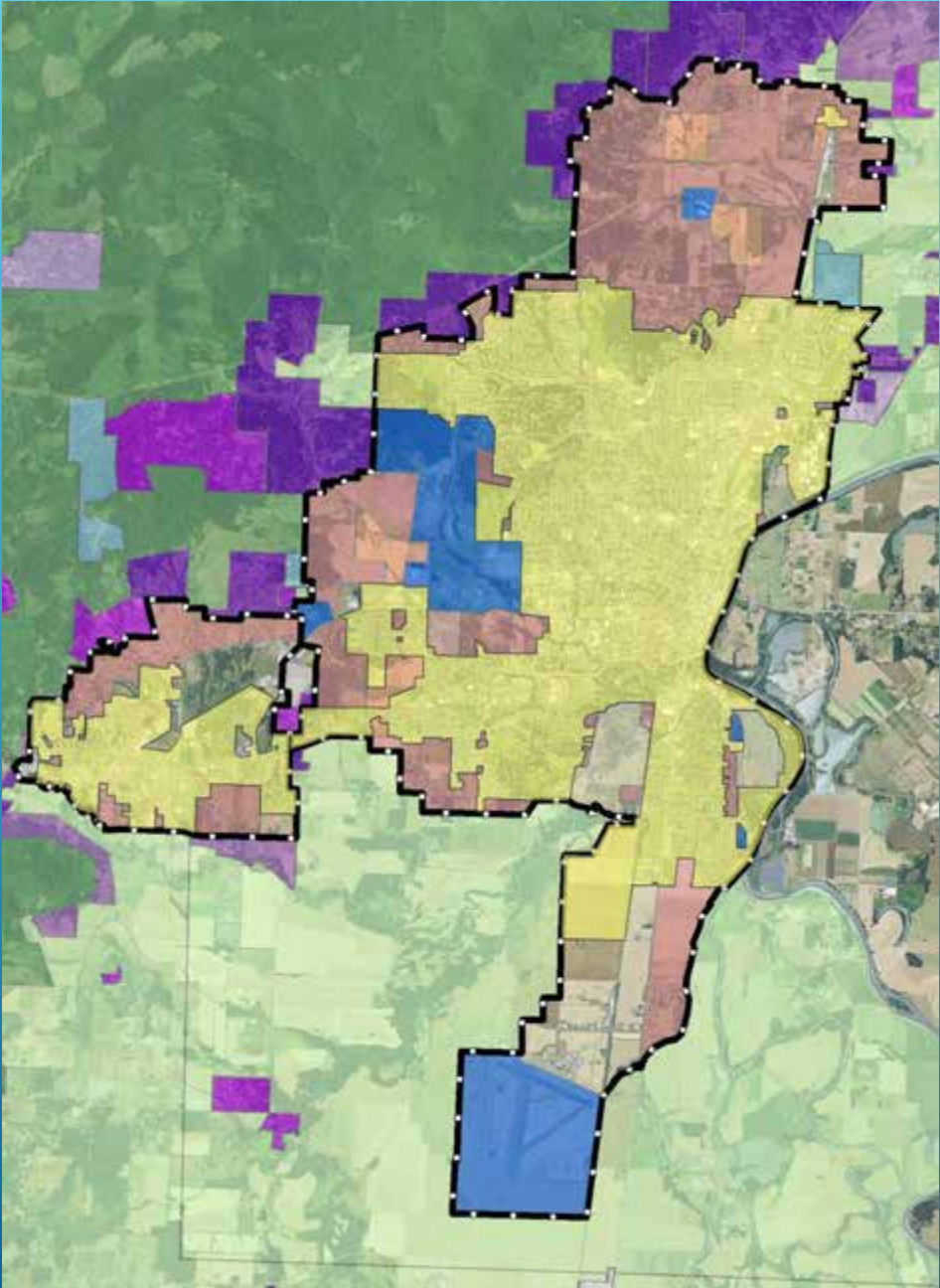
Benton County



- ▶ Every city
- ▶ Jointly established by city and county
- ▶ All urban development must occur within
- ▶ Accommodate 20 year supply of buildable land
- ▶ Expansion process:
 - ▶ justify need
 - ▶ evaluate alternative available lands

URBAN GROWTH BOUNDARIES (UGBS)

Corvallis
and
Philomath
Urban
Growth
Boundaries
(UGBs)



- ▶ Efficient use of land (a finite resource)
- ▶ Efficient infrastructure (expensive)
- ▶ Preserves farmland and forestland from one-way conversion
- ▶ Other benefits?

BENEFITS OF A UGB?

- ▶ Goal 3: “Agricultural Lands shall be preserved and maintained for farm use”
- ▶ Goal 4: “Conserve forest lands”
- ▶ EFU and Forest zoning is the rule
 - ▶ Farm and forest uses have precedence
 - ▶ Conflicting uses are limited

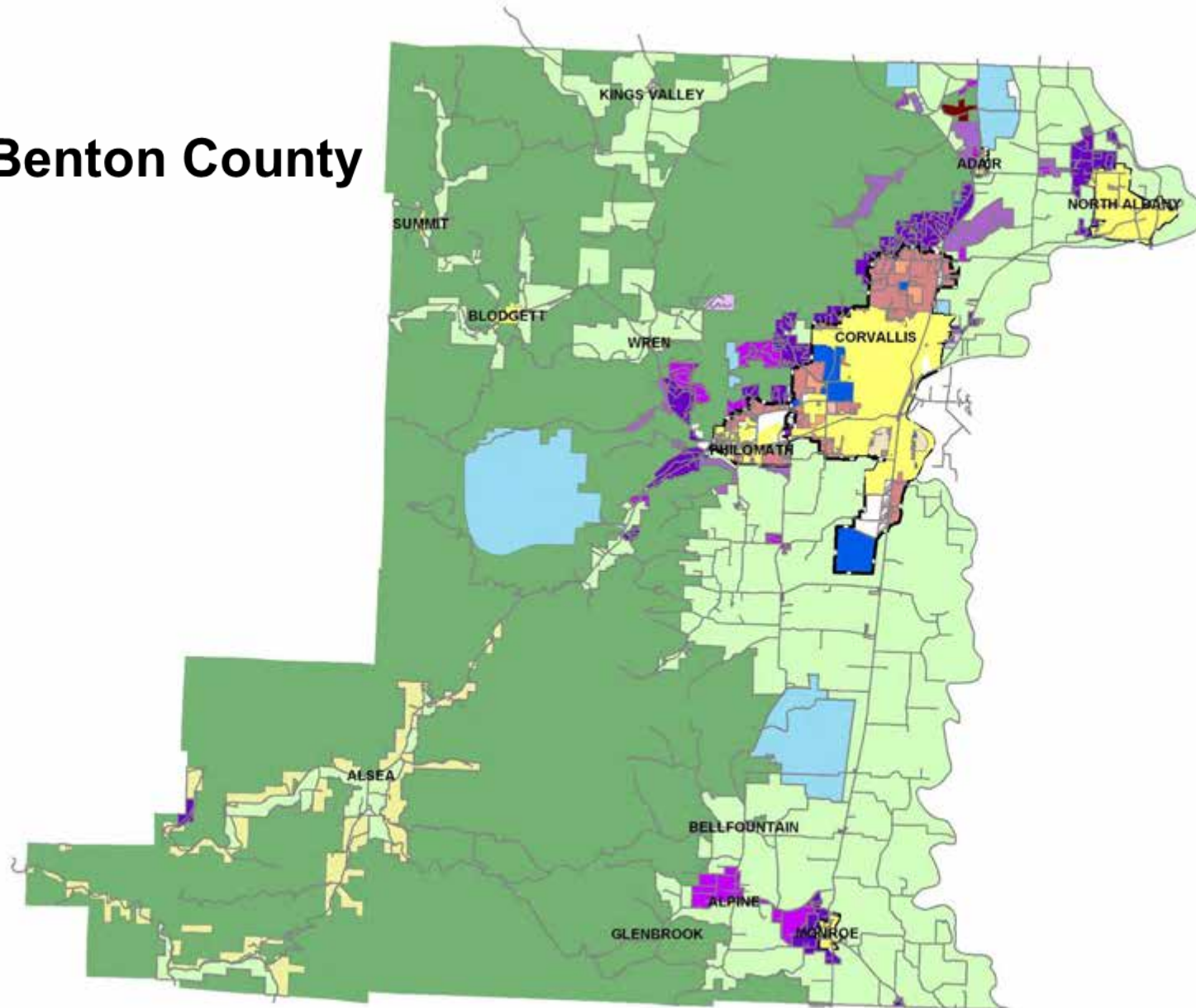
OUTSIDE THE UGB: RESOURCE LANDS

- ▶ Reduce “sprawl”
- ▶ Preserve farm and forest economies
- ▶ Preserve open space
- ▶ Preserve wildlife habitat, watersheds

BENEFITS OF PRESERVING RESOURCE LANDS?



Benton County



- EFU and Forest zoning is the rule
- Exceptions:
 - previously developed, committed, or otherwise necessary lands
 - rural residential lands
 - rural industrial (e.g., sawmills)
 - rural communities

OUTSIDE THE UGB: DEVELOPMENT

- ▶ Small towns
 - ▶ Alsea, Wren, Alpine, Bellfountain
- ▶ No city gov't or city services
- ▶ County zoning



RURAL UNINCORPORATED COMMUNITIES

**Guest Speakers:
Paul Bilotta and Brigetta Olson,
City of Corvallis
Community Development Department**

**Rebecca Taylor, Benton County
Community Development Department**

Questions?



HOPE

Recommendation #3: prioritize care coordination

Task: Vote to adopt this model as part
of recommendation #3

- Work group on this topic met for the last three months (May, June, July): Xan, Joel, Pegge, Niki, Catherine, Jan
- Conducted research on care coordination models and invited guest speakers and participants to their meetings:
 - Dan Cortez from Chelsea MA: hub model/situation table
 - Marci Howard, Manager of Community Care Coordination at Samaritan Health Plans
 - Bruce Butler, IHN, and Anita Earl, Samaritan

HOPE Recommendation #3: prioritize care coordination

Task: Vote to adopt this model as part of recommendation #3

- Conclusions: the technical assistance and support from the Chelsea MA care coordination model allows for support to adopt and adapt a care coordination model that is supported by years of data.
- Recommendation: amend HOPE recommendation #3 to include the Hub model of care coordination, also called the situation table. Recommend that city and county elected officials review, accept, and move forward with this model of care coordination in partnership with Samaritan and IHN.

HOPE Recommendations Update

The process to accept and begin implementation of the 12 HOPE recommendations

- City and County elected officials met separately in June to officially accept the HOPE recommendations.
- City and County elected officials met jointly in July to voice their priorities for implementation.
- Unanimous agreement to prioritize implementation of HOPE recommendation #6: provide organizational capacity to facilitate and coordinate providers in establishing a 24/7/365 Sheltering System for all populations with onsite resources at shelter locations to transition people out of homelessness.

City and County staff are working in collaboration with homeless service providers to answer the question, what is needed to implement the sheltering system recommendation?

- What is needed in the short term?
- What is needed to fully implement the recommendation?



**Benton
County**





Home, Opportunity, Planning, and Equity (HOPE)

Advisory Board Meeting

Approved Minutes

July 28, 2021 from 4 pm to 6 pm

ZOOM Meeting



- Members Present:** Florence Anderson; *Xan Augerot (Commissioner, Benton County); Catherine Biscoe; Karyle Butcher; Bruce Butler; Bryan Cotter; Anita Earl; Joel Goodwin; George Grosch; Barbara Hanley; Niki Hobbs; Christina Jancila* (Business Associate); Charles Maughan* (Corvallis City Council); Jim Moorefield* (Co-Chair); Jan Napack* (Corvallis City Council); Reece Stotsenberg* (Co-Chair);
- Excused:** Pegge McGuire* (CSC); Christina Jancila* (Business Associate);
- Absent:** Janie Tebeau; Aleita-Hass-Holcombe
- Staff Present:** Julie Arena (Benton County Health, HOPE Program Coordinator); Paula Felipe (Benton County Public Health, recorder); Suzanne Hoffman, Health Department Director; Joe Hahn, Diversity Coordinator.
- Guests:** *Executive Committee Members.

- I. **Welcome and Introductions.** Meeting overview.
- II. **Public Comments (limited to 2-3 minutes).**
 - No Comments
- III. **Approval of Minutes: MOTION** made by Bryan Cotter to approve the June 2021 minutes. Jim Moorefield seconded the Motion; all in favor; **MOTION** passed. Abstentions: Flip Anderson, Charles Maughan
- IV. **Membership and Board Recruitment update:**
 - 10 Applications as of 7/27/21
 - Demographics (some overlapping):
 - Four people who have experienced homelessness
 - Four people from communities of color
 - Two people from our LGBTQI+ community
 - One person from our disability advocates community
 - Timeline:
 - HOPE Executive Committee will review applications at their August meeting
 - Goal is to have new members start in September or October.
- V. **Overview and Community Updates:**
 - Crisis Outreach Response and Engagement (CORE) team launched this month. Pilot with two staff (1 Corvallis Police Department and 1 Behavioral Health) to do co-response for the next year and collect data about the need for crisis response, when law enforcement is needed, what kinds of calls, etc.
 - Legislative Session just ended – lots of unprecedented state and fed funding for housing,

homelessness, behavioral health, crisis response and respite services.

- Permanent Supportive Housing (PSH) \$5 million to Corvallis Housing First (CHF) – Andrea Myhre. A total of 11 million dollars raised so far. Great opportunity to develop housing like adding 40-50 units to the current site. Asking for the community’s support. Forming a South Corvallis Advisory group: if you want more info, email: director@corvallishousingfirst.org
- Jackson Street Youth Services (JSYS) renovation, closing Albany location until 2022.
- ESG-CV funding three new positions with CSC.
 - 1. Data coordination and improvement for homeless management information system (HMIS) (position posted),
 - For our community members experiencing homelessness: 2) a Tribal liaison to do outreach and case management for our Native American community members, and
 - 3) Black community outreach and case manager (last two positions being finalized).

VI. Educational Component – OREGON HOUSING AND COMMUNITY SERVICES: The Role of Oregon Housing and Community Services on Affordable Housing Development

Guest Speakers: Connor McDonnell, Housing Integrator from Oregon Housing & Community Services. Contact email: Connor.McDonnell@oregon.gov

- Housing is foundational to improving the lives of Oregonians: including health, safety, education, and economic outcomes.
- Statewide Housing Plan Priorities: Equity and Racial Justice; Homelessness; Permanent Supportive Housing; Affordable Rental Housing; Homeownership; Rural Communities.
- **Affordable Rental Housing: Cornerstone Apartments in Salem**
 - 180 units a 60% AMI
 - Serving communities of color
 - 36 units to serve DHS clients
 - Local innovation and fast track (LIFT): \$4,877,919
 - 4% Low-income housing tax credit (LIHTC): \$883,272
- **Permanent Supportive Housing:**
 - Bud Clark Commons residents saw a 45% reduction in healthcare costs a year after moving into Permanent Supportive Housing
 - Keystone Apartments in Eugene:
 - 15 permanent supportive housing (PSH) homes for chronically homeless families
 - Serving communities of color
 - PSH development - \$3.75 million
 - Support services funds that allow for wrap around support
 - Local support, System Development Charge (SDC) waiver
- **Housing Preservation:**
 - Ya Po Ah Terrace in Eugene:
 - 18-story, 222 units
 - Older adult housing where tenants pay 30% of gross income on rent & utilities
 - Numerous sources of funding including Low Income Housing Tax Credits (LIHTC) 9% & 4% that totaled nearly \$65 million in project costs
- Moving Oregon Toward an Equitable Recovery:
OHCS state investments in the 2019-21 biennium was \$336.5 M; the 2021-23 biennium

state investments increased by 260% to nearly \$900 M

- Affordable Rental Housing: Priority Policy Bills:
 - HB 2094 – Veterans Definition Expansion
 - HB 2095 – Publicly Support Housing (PuSH) Preservation Notice Fix
 - HB 2433 – Changes to the Agricultural Worker Housing Tax Credit
- **Investments - \$622.9 million***
- \$410 M in bond funding for Local Innovation Fast Track (LIFT) Rental, LIFT Homeownership, and Permanent Supportive Housing Development Resources
- \$60 M is set aside for LIFT Rental developments unfunded in last Notice of Funding Award
- \$13.4 M PSH rental assistance & services
- \$100 M for affordable housing preservation
- \$30 M for land and property acquisition
- \$30 M for Landlord Compensation Fund 20% payments
- \$10 M Co-Location w/ early learning
- \$10 M Oregon Affordable Housing Tax Credit Increase
- \$9.5 M Agricultural Worker Housing Tax Credit Increase
- \$5 M Construction gaps
- \$5 M Landlord Guarantee Fund related to the safe harbor period established in SB 278 (grant to Home Forward)
- **Additional Development Resources**
- Revenue bonds - \$500 M
- Pass-Through Revenue Bonds - \$1.3 B
- Private Activity Bonds 2022 - \$250 M to OHCS (\$151.86 M to PAB committee)
- Private Activity Bonds 2023 - \$250 M to OHCS (\$151.86 M to PAB committees)
- **Housing Stabilization – Homeless Services:**
 - **Priority Policy Bills:**
 - HB 2094 – Veterans Definition Expansion
 - HB 2101 – updating landlord guarantee programs
 - HB 2100 – modernizing Oregon's homeless response system; Task Force on Homelessness and Racial Justice
 - HB 2344 – Individual Development Account policy changes
 - **Investments - \$42.68 million***
 - \$7 M Individual Development Account (tax credit also extended with HB 2433)
 - \$25 M shelter infrastructure and capacity
 - \$2 M shelter technical assistance
 - \$3 M for Oregon Emergency Rental Assistance Program (OREAP) local provider capacity building & tenant education
 - \$1.18 M Homeless Management Information System (HMIS)
 - \$4.5 M long-term rental assistance for at-risk youth
- **Barriers Reported to Us on Affordable Housing Development**
 - Pre-development resources to get project ready and land not available
 - Zoning and permitting process difficult
 - Lack of incentives from local government (such as property tax-exemption)
 - Complexity of affordable housing development
 - Finite development resources from funders & service funding challenges

- Opposition to affordable housing from neighbors

VII. Educational Presentation: THE LOCAL GOVERNMENT’S ROLE IN AFFORDABLE HOUSING: Speakers: Paul Bilotta and Brigetta Olson, City of Corvallis Community Development Department. Rebecca Taylor, Benton County Community Development Department

- **City/County Shared Roles:**
 - Ensure there is adequate land supply to meet market demand and maintain competition
 - Ensure that there is an adequate variety of land available to supply the full range of housing types
 - Maintain regulations that implement community housing goals and evolve with changes in the marketplace
 - Provide reliable information
 - Follow the law
- **Adequate and Variety of Land Supply:**
 - Accessory Dwelling Units
 - HB 2001 “Middle Housing”
- **Keep Regulations Up to Date:**
 - **Benton County Land Development Code**
<https://www.co.benton.or.us/planning/page/development-code>
 - **City of Corvallis Land Development Code**
<https://www.corvallisoregon.gov/cd/page/land-development-code>
- **Reliable Information:**
 - Housing Dashboard <https://www.corvallisoregon.gov/cd/page/housing-data>
 - Land Development Information Report
<https://www.corvallisoregon.gov/cd/page/community-development-publications>
- **City Specific Roles (Brigetta Olson, City of Corvallis):**
 - Work with developers to create competitive deals that can occur
 - Create opportunities for gap financing
 - Implement Fair Housing
 - Build organizational capability
 - Land banking
 - Creating a Development Strategy (information gathering)
 - Selecting Developer/ Finding a Site/ Services
 - Predevelopment and Financing!
 - Construction
 - Occupancy and Ongoing Operations
- **County Specific Roles (Rebecca Taylor, Benton County)**
 - Urban Growth Boundaries:
 - Every city
 - Jointly established by city and county
 - All urban development must occur within
 - Accommodate 20 year supply of buildable land
 - Expansion process:
 - justify need
 - evaluate alternative available lands

- **Corvallis and Philomath Urban Growth Boundaries (UGBs)**
- Benefits of an urban growth boundary (UGB)
- Efficient use of land (a finite resource)
- Efficient infrastructure (expensive)
- Preserves farmland and forestland from one-way conversion
- **Outside the UGB: Resource Lands:**
- Goal 3: “Agricultural Lands shall be preserved and maintained for farm use”
- Goal 4: “Conserve forest lands”
- Exclusive Farm Use (EFU) and Forest zoning is the rule
- Farm and forest uses have precedence
- Conflicting uses are limited
- **Benefits of Preservation Resource Lands:**
- Reduce “sprawl”
- Preserve farm and forest economies
- Preserve open space
- Preserve wildlife habitat, watersheds
- **Outside the UGB: Development**
- EFU and Forest zoning is the rule
- Exceptions:
- previously developed, committed, or otherwise necessary lands
- rural residential lands
- rural industrial (e.g., sawmills)
- rural communities

QUESTIONS/DISCUSSION:

- Andrea; what are main causes of lack of affordable housing?
- Paul Bilotta: construction costs are uniform across the country; labor changes regionally; but big difference is land price. Urban growth boundaries have impact; very challenging to move one; not operating the way they were expected; build up not out. If buying a house on lot and demolish still buying land. Back in 90s, property tax caps took away city ability to fund infrastructure; those costs tend to drive land price down; speculation cost variable.
- For more detailed discussion, see video of the meeting on the [HOPE Website](#).

VIII. Care Coordination recommended model from HOPE work group. Task: Vote to adopt this model as part of recommendation #3

- Work group on this topic met for the last three months (May, June, July): Xan, Joel, Pegge, Niki, Catherine, Jan
- Conducted research on care coordination models and invited guest speakers and participants to their meetings:
- Dan Cortez from Chelsea MA: hub model/situation table
- Marci Howard, Manager of Community Care Coordination at Samaritan Health Plans
- Bruce Butler, IHN, and Anita Earl, Samaritan
- Conclusions: the technical assistance and support from the Chelsea MA care coordination model allows for support to adopt and adapt a care coordination model that is supported by years of data.
- Recommendation: amend HOPE recommendation #3 to include the Hub model of care

coordination, also called the “situation table.” Recommend that city and county elected officials review, accept, and move forward with this model of care coordination in partnership with Samaritan and InterCommunity Health Network (IHN).

MOTION: Niki Hobbs made the motion to adopt this model as part of recommendation #3; Jim Moorefield seconded the MOTION, which passed unanimously.

IX. HOPE Recommendations Update – Implementation of 12 HOPE Recommendations.

- The process to accept and begin implementation of the 12 HOPE recommendations
- City and County elected officials met separately in June to officially accept the HOPE recommendations.
- City and County elected officials met jointly in July to voice their priorities for implementation.
- Unanimous agreement to prioritize implementation of HOPE recommendation #6: provide organizational capacity to facilitate and coordinate providers in establishing a 24/7/365 Sheltering System for all populations with onsite resources at shelter locations to transition people out of homelessness.
- City and County staff are working in collaboration with homeless service providers to answer the question, what is needed to implement the sheltering system recommendation?
- What is needed in the short term?
- What is needed to fully implement the recommendation?

X. Meeting was adjourned at 6 pm. Next month’s educational topic will be access to jobs and job training.

Benton County & City of Corvallis
Home, Opportunity, Planning, & Equity (HOPE) Advisory Board



Julie Arena, HOPE Program Coordinator
Benton County Health Department
4077 SW Research Way
Corvallis, OR 97339
541-766-0252 * Email: Julie.Arena@co.benton.or.us

HOPE Meeting Agenda

August 25, 2021 from 4-6 PM

Meeting location: Zoom or phone in

Join Zoom Meeting: <https://cscteam.zoom.us/j/91929383646>
One tap mobile: +12532158782,,91929383646#
Dial by phone: +1 253 215 8782
Meeting ID: 919 2938 3646

AGENDA

- I. Welcome, Zoom Housekeeping, Overview of Agenda.....4pm
- II. Public Comment* (up to 10 minutes)4:05pm
- III. Roll call and approve July meeting minutes4:15pm
- IV. Community Updates4:20pm
- V. Educational Presentation and Q&A on Jobs Access and Job Training4:30pm
Guest Speakers: Allison Hobgood, Executive Director of Corvallis Daytime Drop-in Center and Homeless Employment Launching Program (HELP); Sharee Cooper, Senior Operations Manager at Community Services Consortium (CSC); and Karen Litvin, Program & Compliance Director, Northwest Oregon Works.
- VI. HOPE Recommendations Implementation Update and Routine Feedback.....5:10pm
- VII. Educational Topics for the Board and Next Steps 5:20pm

*Public Comment: if you want to make a public comment, please put your name in the chat window or "raise your hand" in the Zoom meeting when you arrive. List your name and the topic of your comment in the chat. Comments are made in the order that people "raise their hand" or submit a chat. For people calling in from a phone line, there will be an opportunity for comment for participants on the phone.



HOPE Advisory Board

August 2021 Public Meeting

Meeting facilitated by HOPE Coordinator, Julie Arena

8/25/21



Zoom Housekeeping

- All attendees are muted when they join.
- All attendees can unmute themselves and choose to be seen visually by clicking “Start Video” at the bottom of the screen.
- **Public comment:**
 - Type your name into the “Chat” area, say you want to make a public comment, and on what topic.
 - Example: “Julie – public comment – crisis response.”
 - For those on the phone, there will be an opportunity to comment, too.
- **Questions during the meeting:**
 - Type into the “Chat” area and send it to host, Julie Arena.

Meeting Agenda

1. Meeting Overview, Agreements and Culture
2. Public Comment for 10 minutes
3. Logistics: vote to approve July 2021 minutes – roll call
4. Educational Presentation and Q&A on Jobs Access and Job Training
Guest Speakers: Allison Hobgood, Executive Director of Corvallis Daytime Drop-in Center and Homeless Employment Launching Program (HELP); Sharee Cooper, Senior Operations Manager at Community Services Consortium (CSC); and Karen Litvin, Program & Compliance Director, Northwest Oregon Works.
5. Community Updates
6. HOPE Recommendations Implementation Update and Routine Feedback
7. Educational Topics for the Board and Next Steps

Agreements for our culture + conduct:

Fun

Inclusive ✓✓

Humor

Food ✓

Action/roll up sleeves

Change the face of Homelessness

Honesty

Respect ✓

Consensus

Think before you speak

Curiosity ✓

Transparency

Recognize personal bias

Kindness ✓

Time management

Concise communication

Open minded ✓

Opinions matter

Data driven

Do your homework!

Patience

Authentic

Valuing personal experience

Dedication/work ethic
Honor the expectations of
the work

Public Comment

10 minutes

- Comment limited to 2-3 minutes based on number of people wanting to comment
- Type into the “Chat” and say you want to make a public comment and on what topic.
- For those on the phone, I will ask if there are any public comments from callers.
- Can also submit written comments to the Board via email to Julie.Arena@co.Benton.or.us

Logistics: Vote to approve July 2021 minutes, roll call

Flip Anderson

Xan Augerot

Catherine Biscoe

Karyle Butcher

Bruce Butler (excused)

Bryan Cotter

Anita Earl

Joel Goodwin

George Grosch

Barbara Hanley

Aleita Hass-Holcombe

Niki Hobbs

Christina Jancila

Charles Maughan

Pegge McGuire

Jim Moorefield

Andrea Myhre

Jan Napack

Reece Stotsenberg

Janie Tebeau

Guest Speakers:

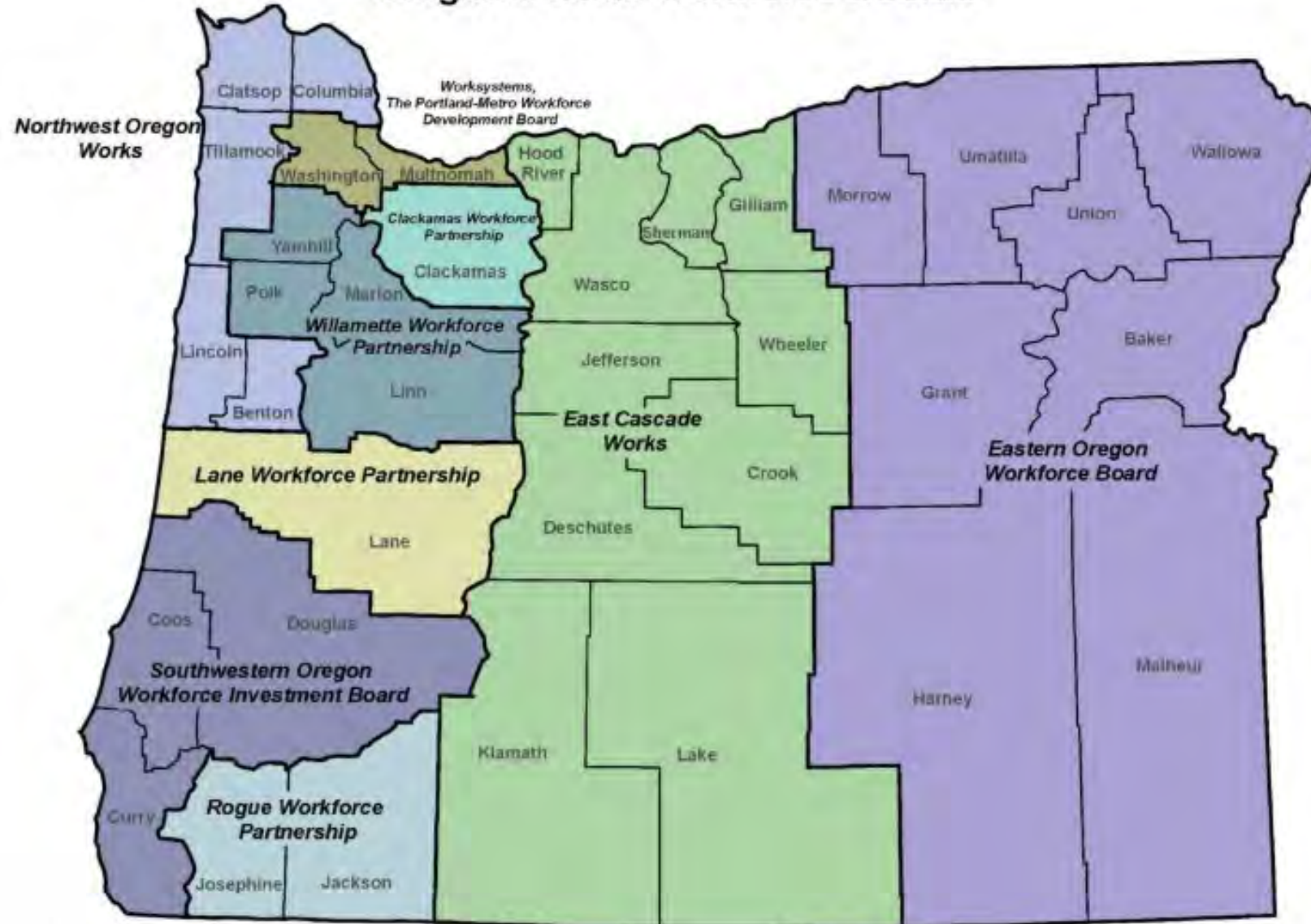
Educational presentation on
Jobs and Job Training access
in Benton County

- Karen Litvin, Program & Compliance Director, Northwest Oregon Works
- Sharee Cooper, Senior Operations Manager at Community Services Consortium (CSC)
- Allison Hobgood, Executive Director of Corvallis Daytime Drop-in Center and Homeless Employment Launching Project (HELP)

Supporting NW Oregon: Economic and Workforce Development

Presented by:
Karen Litvin, Northwest Oregon Works

Oregon's Local Workforce Boards



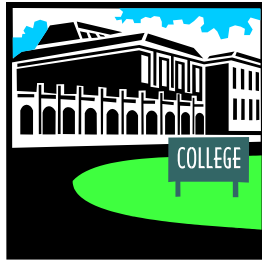


WHAT DOES THE LWB DO?

SUPPLY



Youth Programs



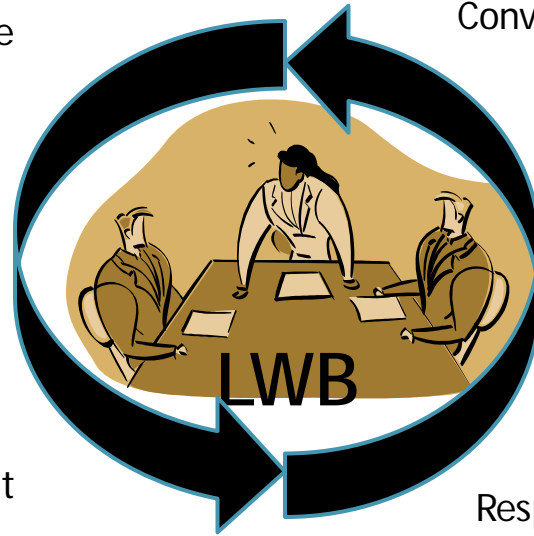
Training & Education



WorkSource

Oversee

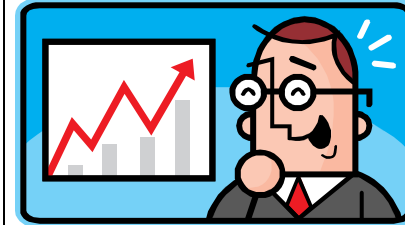
Convene



Invest

Respond

DEMAND



Economic Development



Business




What to Expect at WorkSource

Welcome to WorkSource Oregon

We help people find jobs. Businesses find talent.

Job Seeker
Find the right opportunity

Business
Find the right candidate

Watch on  YouTube

Whether you've been laid off, want a career change, or are looking for your first job, WorkSource has the resources to help you take that next step. From entry level to executive leadership, we're here to help you get the job you want.

Research shows that people who use WorkSource employment services return to work faster and earn more money than those who don't.

At WorkSource, you can:

- ✓ Register in [iMatchSkills](#), Oregon's largest job database
- ✓ Apply for jobs, sign up for trainings, develop a career plan and WorkSource Portfolio, and message WorkSource staff in [My WorkSource](#)
- ✓ Get a one-on-one career coach
- ✓ Match your interests and abilities to jobs you'd be good at and enjoy doing
- ✓ Learn about **free training** to help you advance in your career or learn a new industry
- ✓ Explore paid internships, apprenticeships, on-the-job training, GED programs, and college classes
- ✓ Take part in workshops on resumes, interviewing, networking, soft skills, applying for state jobs, and more
- ✓ Use computers, internet, phones, fax, copiers, and printers in our Resource Rooms
- ✓ Get help with housing, transportation, childcare, food, internet access, tuition, textbooks, school fees, identification, work clothes and tools, and more.



General Services

- ▶ Job Search
- ▶ Workshops
- ▶ Resume and Interview Assistance
- ▶ Skills Assessment
- ▶ Career Planning
- ▶ Labor Market Information



Additional Services

- ▶ Require Documentation
 - ▶ Date of Birth
 - ▶ Selective Service Registration
 - ▶ Legal to Work Status
- ▶ Occupational Skills Training
- ▶ Temporary Jobs and On-the-Job Training
- ▶ Workforce Preparation Activities
- ▶ Adult Basic Skills and GED



My WorkSource



CAREER PLANNING

Use a variety of tools to identify careers best suited for you and explore ways to budget and reach self-sufficiency.



ENHANCE & VALIDATE SKILLS

Use self-assessment tools and explore career options to find jobs that are right for you.



WORKSHOPS

Search and sign up for a variety of free workshops offered in a WorkSource center near you.



TRAINING & EDUCATION

Discover the types of training and education opportunities available to WorkSource Oregon customers.



JOB SEARCH

Search WorkSource Oregon, Monster, Indeed, Idealist, and Craigslist at one time, save searches, add a job posting to your job Application Log, and use the jobscan tool to compare the job posting to your resume and streamline your resume to get the job.



OTHER RESOURCES





Questions

Contact:

Karen Litvin, Northwest Oregon Works

karen@onwib.org





Sharee Cooper
Senior Operations Manager
Community Services Consortium
Workforce & Education
Health & Family Stability
scooper@communityservices.us
(541) 758-2633

CSC's STEP program

- ▶ STEP is a partnership with ODHS Self-Sufficiency
- ▶ There are a number of STEP providers including OED and LBCC
- ▶ Eligibility: SNAP recipient (who doesn't receive TANF)
- ▶ Services include:
 - ▶ Supportive Services (cell phone, car repair, rent, work clothing, etc.,)
 - ▶ Job Search
 - ▶ Job Search Training & Occupational Skills Training
 - ▶ Work Experience
 - ▶ Collaboration and other service navigation

Opportunities:

- ▶ In Linn County, Workforce Board contracts with specialized service providers to provide WorkSource navigation assistance for the unhoused and those with disabilities.
- ▶ Job / Training retention – executive functioning, stress reduction
- ▶ Supports: housing, secure storage (including documents), hygiene facilities
- ▶ Need for additional resources for those with disabilities
- ▶ Need ongoing case management / job coaching

Corvallis
Daytime
Drop-in
Center



Homeless Employment Launching Project (HELP)

Connecting Corvallis homeowners and local businesses who need help with day labor to unhoused and low-income individuals eager to work

Workforce and Program Coordinator, Sarah Ligon, is a matchmaker and job navigator

Offers folks job training, can learn work habits, develop a work history, earn a paycheck

Fostering renewed sense of hope, purpose, possibility, and self-worth



Systemic
gaps

Possible
supports

- Access to housing and hygiene
- Access to vital records
- Behavioral Health support

- Need for employment navigators offering bottom to top advocacy
- Pathfinder Clubhouse creative model to support realities of behavioral health disabilities

Questions for Guest Speakers:

Educational presentation on
Jobs and Job Training access
in Benton County

- Karen Litvin, Program & Compliance Director, Northwest Oregon Works
- Sharee Cooper, Senior Operations Manager at Community Services Consortium (CSC)
- Allison Hobgood, Executive Director of Corvallis Daytime Drop-in Center and Homeless Employment Launching Project (HELP)

Board Recruitment Update

Recruitment ended 7/31/21

- 13 Applications
- Demographics (some overlapping):
 - Seven people who have experienced homelessness
 - Four people from communities of color
 - Two people from our LGBTQI+ community
 - One person from our disability advocates community
- Timeline:
 - HOPE Executive Committee deliberating in September
 - Goal is to have new members start in October.



Community Updates

- Legislative Session ended – lots state and fed funding. Working on a guest speaker to present on new laws.
- ESG-CV funding 3 new positions with CSC.
 - 1) Data coordination and improvement for homeless management information system (HMIS) (position posted),
For our community members experiencing homelessness: 2) a Tribal liaison to do outreach and case management for our Native American community members, and 3) Black community outreach and case manager (last two positions being finalized).

Community Updates

- **Changing Shelter Capacity**

- Budget Inn – still under construction to reach full capacity

Location	Pre-pandemic	Current Capacity	Available now	Full Capacity (when Covid restrictions removed)
Budget Inn	0	16	0	24
Microshelters (4 sites)	0	26	0	29
Men's Shelter	50	36	6-12	50
Women's Shelter	18	22	0	22
COI	74	54	0	85
Jackson Street	12	6	0	12
Totals	154	160	6-12	222

Community Updates

- **Linn Tiny Home Village:** https://democratherald.com/news/local/albany-group-gets-grant-toward-tiny-home-community/article_92a493e9-3d19-5a61-9f54-6f361622e44d.html
- **Crisis Center** – The proposed Benton County Crisis Center will serve individuals experiencing Behavioral Health Crisis in Benton County. This location will serve as an alternative to emergency room or incarceration for individuals who are in crisis and need connection to services and resources. The combination of both short-term chairs (less than 23 hours) and longer term beds (up to 30 days) will allow individuals to have an opportunity to get connected to and enrolled in treatment services, get needs met (might include a shower, a warm meal, and laundry), and get a break from any immediate stressors that are contributing to the crisis. Initial estimates indicate that the Crisis Center will serve up to 800 people per year in a trauma-informed, appropriate level of care. This will have a significant long-term impact for community members who are in need of care and have continued contact with first responders.

HOPE Recommendations Update

The process to accept and begin implementation of the 12 HOPE recommendations

- City and County elected officials met jointly and separately in June, July, and August to officially accept the HOPE recommendations and voice their priorities for implementation.
- Unanimous agreement in to prioritize implementation of HOPE recommendations:

#6: Provide organizational capacity to facilitate and coordinate providers in establishing a 24/7/365 Sheltering System for all populations with onsite resources at shelter locations to transition people out of homelessness.

#1: Facilitate and coordinate data improvement efforts with community partners.

#4: Collaborate with social service and health care partners to increase the number of paid, full-time case managers to support people transitioning out of homelessness.

City and County staff are working with homeless service providers to answer, what is needed to implement the sheltering system recommendation, facilitate data improvements, and collaborate to increase sustainable funding for case managers?

- What is needed in the short term?
- What is needed to fully implement the recommendation?

Elected Officials meet jointly next Thursday 9/2 from 4-6pm



HOPE Recommendations Implementation Update and Routine Feedback

- At least quarterly updates at a HOPE meeting on the progress of HOPE Recommendations implementation.
- Timely updates when progress is made.
- Feedback loop for community accountability and to understand the practicality of recommended policies, where are we hitting the mark or falling short.

Next Steps for the Board and Educational Topics

- Update: HOPE Executive Committee looking at Bylaws for any streamlining and updating. Exec Committee meetings will be publicly noticed and open to the public.
- The provider landscape has changed. Do you want a work group to assemble to update the gap analysis and capacity?
- Which educational topics to focus on? The purpose being to get educated on topics to make decisions about next steps.

Educational Topics: Survey results on topics of interest (18 participants)

Housing First policy – what is it and how does it work?

Oxford Houses and Godgear – what kind of housing do they provide?

Mobile Home Parks and Manufactured Homes

Land banking (Land banks are governmental entities or nonprofit corporations that are focused on the conversion of vacant, abandoned, and tax delinquent properties into productive use.)

ACEs (Adverse Childhood Experiences) questions and scores to assess childhood trauma and its impact

Addiction treatment and services (CHANCE, Alcohol and Drug rehab option, county addiction services)

Mental health treatment and services system

Health care system (Samaritan Health Services, Medicaid insurance)

Prevention strategies – basic income assistance pilots, rental assistance, supportive services, etc.

Justice System Improvement Program – upgrading law enforcement system, new jail, etc.

Re-entry from incarceration and transitional housing upon release, Parole and Probation services, Sponsors Inc.

Legislation – new laws that passed this year and what they changed

Other?

Survey results:

Very Interested: top 7

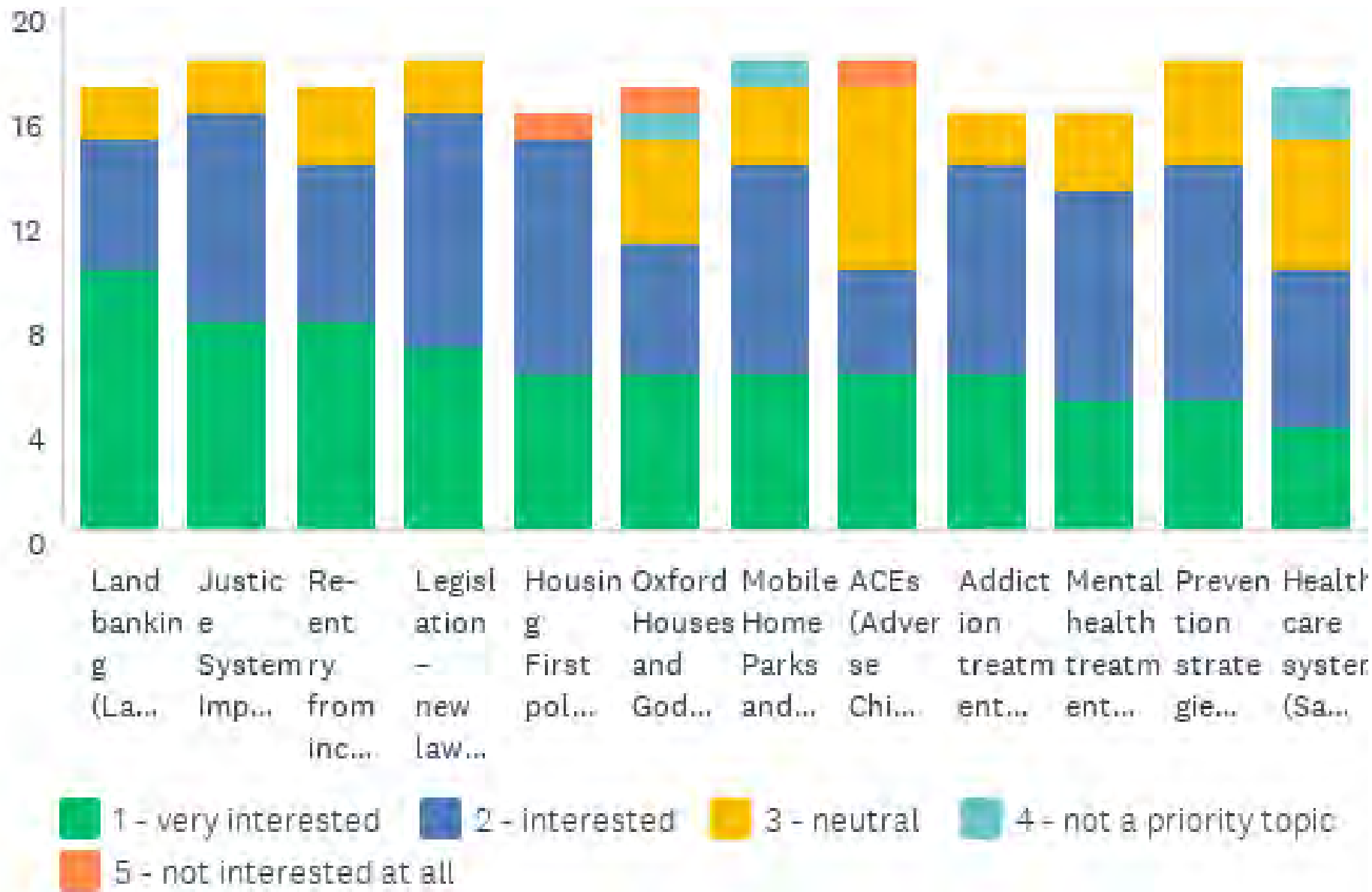
- **Land banking** (Land banks are governmental entities or nonprofit corporations that are focused on the conversion of vacant, abandoned, and tax delinquent properties into productive use.) (59%)
- **Re-entry from incarceration** and transitional housing upon release, Parole and Probation services, Sponsors Inc. (47%)
- **Justice System Improvement Program** – upgrading law enforcement system, new jail, etc. (44%) [Scheduled for September]
- **Legislation** – new laws that passed this year and what they changed. (39%) [Likely September]
- **Housing First and Addiction treatment and services** (CHANCE, Alcohol and Drug rehab option, county addiction services). (both 37.5%)
- **Oxford Houses and Godgear Housing** (35%)

Interested: top 7

- **Housing First policy** – what is it and how does it work? (56%)
- **Prevention strategies** – basic income assistance pilots, rental assistance, supportive services, etc. (53%)
- **Legislation** – new laws that passed this year and what they changed. (50%) [Likely September]
- **Mental health** treatment and services system. (50%)
- **Addiction treatment and services.** (50%)
- **Mobile Home Parks and Manufactured Homes.** (44%)
- **Justice System Improvement Program** (44%)

Two Write-in Responses:

- We all understand we need affordable housing, if homelessness is to be addressed, but what kind? Are their plans to develop the kinds homeless people need? What are the sources for rent assistance? Let's hear a presentation from providers.
- Specifically would like to hear from COI - much of HOPE is on the homeless in parks, riverfront less so on those who use COI.



Educational Topics: Survey results on topics of interest (18 participants)

Combine “very interested” and “interested”

- Legislation and Justice System Improvement (16 people)
- Housing First and Land Banking (15 people)
- Re-entry from incarceration, Mobile Home Parks, Prevention, and Addiction services (14)

- Idea to have a presentation from providers, highlighting COI

Next steps...

HOPE Executive Committee will work to plan out educational topics that match Board's interest in developing knowledge





**Benton
County**





Home, Opportunity, Planning, and Equity (HOPE) Advisory Board Meeting Approved Minutes August 25, 2021 from 4 pm to 6 pm ZOOM Meeting



Members Present: Florence Anderson; *Xan Augerot (Commissioner, Benton County); Catherine Biscoe; Karyle Butcher; Bruce Butler; Bryan Cotter; Anita Earl; Joel Goodwin; George Grosch; Barbara Hanley; Aleita-Hass-Holcombe; Niki Hobbs; Christina Jancila* (Business Associate); Charles Maughan* (Corvallis City Council); Pegge McGuire* (CSC); Jim Moorefield* (Co-Chair); Jan Napack* (Corvallis City Council); Janie Tebeau;

Excused:

Absent: Reece Stotsenberg* (Co-Chair)

Staff Present: Julie Arena (Benton County Health, HOPE Program Coordinator); Paula Felipe (Benton County Public Health, recorder); Suzanne Hoffman, Health Department Director; Joe Hahn, Diversity Coordinator.

Guests: *Executive Committee Members.

- I. **Welcome and Introductions.** Congratulations to Niki Hobbs on her pursuit of higher education in graduate school! Thank you for serving for two years on the HOPE board. Niki said she enjoyed the experience and excited to keep watching HOPE's work.
- II. **Public Comments (limited to 2-3 minutes).**
 - No Comments
- III. **Approval of Minutes: MOTION** made by Karyle Butcher to approve the July 2021 minutes. Seconded by Niki Hobbs. All in favor; **MOTION** passed. Abstentions: 2 *Note: Edit suggestion by Jan Napack to spell out acronyms--Julie will make those changes.*
- IV. **Membership and Board Recruitment update:**
 - 13 Applications
 - Demographics (some overlapping):
 - Seven people who have experienced homelessness
 - Four people from communities of color
 - Two people from our LGBTQI+ community
 - One person from our disability advocates community
 - Timeline:
 - HOPE Executive Committee deliberating in September
 - Goal is to have new members start in October.
- V. **Overview and Community Updates:**
 - Legislative Session ended – lots state and fed funding. Working on a guest speaker to present on new laws.
 - ESG-CV funding 3 new positions with CSC.

- Data coordination and improvement for homeless management information system (HMIS) (position posted),
- For our community members experiencing homelessness: 2) a Tribal liaison to do outreach and case management for our Native American community members, and 3) Black community outreach and case manager (last two positions being finalized).
- Changing Shelter Capacity
- **Budget Inn – still under construction to reach full capacity**

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- **Linn Tiny Home Village:** https://democratherald.com/news/local/albany-group-gets-grant-toward-tiny-home-community/article_92a493e9-3d19-5a61-9f54-6f361622e44d.html
- **Crisis Center** –The proposed Benton County Crisis Center will serve individuals experiencing Behavioral Health Crisis in Benton County. This location will serve as an alternative to emergency room or incarceration for individuals who are in crisis and need connection to services and resources. The combination of both short-term chairs (less than 23 hours) and longer term beds (up to 30 days) will allow individuals to have an opportunity to get connected to and enrolled in treatment services, get needs met (might include a shower, a warm meal, and laundry), and get a break from any immediate stressors that are contributing to the crisis. Initial estimates indicate that the Crisis Center will serve up to 800 people per year in a trauma-informed, appropriate level of care. This will have a significant long-term impact for community members who are in need of care and have continued contact with first responders.

VI. Educational Component – Three Guest Speakers: **Karen Litvin**, Program & Compliance Director, Northwest Oregon Works; **Sharee Cooper**, Senior Operations Manager at Community Services Consortium (CSC); and **Allison Hobgood**, Executive Director of Corvallis Daytime Drop-in Center and Homeless Employment Launching Project (HELP)

- **Supporting NW Oregon: Economic and Workforce Development. Presented by: Karen Litvin, Northwest Oregon Works; karen@onwib.org**
 - Local workforce development board; Northwest corner of state.
 - Federally funded; state discretionary funds; competitive discretionary funds; to support our community. Primary mission: workforce.
 - Transportation, housing, child care, training, education, jobs, safety; housing...partner on a lot of initiatives.
 - Economic development. Investors, funding; contract out direct services; brokers.

- Youth programs; adult programs.
- Work Source Oregon: where people go if they need help getting job.
- Work Source Oregon: one in every county of the state.
- Resource rooms; fax; phones; copiers; resources to prepare for a job interview.
- General Services:
 - Job Search
 - Workshops
 - Resume and Interview Assistance
 - Skills Assessment
 - Career Planning
 - Labor Market Information
- Additional Services:
 - Require Documentation
 - Date of Birth
 - Selective Service Registration
 - Legal to Work Status
 - Occupational Skills Training
 - Temporary Jobs and On-the-Job Training
 - Workforce Preparation Activities
 - Adult Basic Skills and GED
- **Community Services Consortium (CSC); Presented by Sharee Cooper, Senior Operations Manager at CSC; scooper@communityservices.us (541) 758-2633**
 - **STEP is a partnership with ODHS Self-Sufficiency**
 - There are a number of STEP providers including OED and LBCC
 - Eligibility: SNAP recipient (who doesn't receive TANF)
 - Services include:
 - Supportive Services (cell phone, car repair, rent, work clothing, etc.,)
 - Job Search
 - Job Search Training & Occupational Skills Training
 - Work Experience
 - Collaboration and other service navigation
 - **Opportunities:**
 - In Linn County, Workforce Board contracts with specialized service providers to provide WorkSource navigation assistance for the unhoused and those with disabilities.
 - Job / Training retention – executive functioning, stress reduction
 - Supports: housing, secure storage (including documents), hygiene facilities
 - Need for additional resources for those with disabilities
 - Need ongoing case management / job coaching
 - **Corvallis Daytime Drop In Center**
 - **Homeless Employment Launching Project (HELP)**
 - **CSC can help people with ID's though it does take time. For some of our 'work experience' programs we do all of the I-9 documentation and bring them on our payroll so worksite placements don't have to worry about them. Space in those programs is limited though.**

- **Allison Hobgood**, Executive Director of Corvallis Daytime Drop-in Center and Homeless Employment Launching Project (HELP)
 - Homeless Employment Launching Project (HELP)
 - Connecting Corvallis homeowners and local businesses who need help with day labor to unhoused and low-income individuals eager to work
 - Workforce and Program Coordinator, Sarah Ligon, is a matchmaker and job navigator
 - Offers folx job training, can learn work habits, develop a work history, earn a paycheck
 - Fostering renewed sense of hope, purpose, possibility, and self-worth

- **Systemic Gaps and Possible Sources of Support**
 - Access to housing and hygiene
 - Access to vital records
 - Behavioral Health support
 - Need for employment navigators offering bottom to top advocacy
 - Pathfinder Clubhouse creative model to support realities of behavioral health disabilities

QUESTIONS/DISCUSSION:

- League of Women Voters housing committee program looks at barriers to housing with people with disabilities. Worthwhile topic and I can send email. Our community should track disability situation in terms of housing (Karyle). Julie: hope you connect with Jasper Smith; non-profit people very busy too.
- Why not more people participating in these programs? (Aleita) Sara: Some barriers are attitudes in community. When people want to work; not having any ID is huge problem if stolen or misplaced. Frustration for workers who want money now and want to work now. Sometimes the only clothes are on their back or don't have shoes. Clothes ruined after 2-3 laborious jobs. Some people want to go to college; can't because living in woods and don't see a way out, so hopelessness is major problem and fear they cannot be employed because of criminal record or owe child support or owe a debt, so afraid to become visible due to legal issue and they have no money.
- Sara: There is a perception that homeless are not reliable, but we know that's not true. Help program connects people with work; we have people who can do electrical work; painting; building; construction—many with a lot of skills. Love to get that out there.

VII. HOPE Recommendations Update: The process to accept and begin implementation of the 12 HOPE recommendations

- City and County elected officials met jointly and separately in June, July, and August to officially accept the HOPE recommendations and voice their priorities for implementation.
- Unanimous agreement in to prioritize implementation of HOPE recommendations:
- #6: Provide organizational capacity to facilitate and coordinate providers in establishing a 24/7/365 Sheltering System for all populations with onsite resources at shelter locations to transition people out of homelessness.
- #1: Facilitate and coordinate data improvement efforts with community partners.
- #4: Collaborate with social service and health care partners to increase the number of paid, full-time case managers to support people transitioning out of homelessness.
- City and County staff are working with homeless service providers to answer, what is needed to implement the sheltering system recommendation, facilitate data

improvements, and collaborate to increase sustainable funding for case managers?

- What is needed in the short term?
- What is needed to fully implement the recommendation?
- Elected Officials meet jointly next Thursday 9/2 from 4-6 pm

QUESTIONS/DISCUSSION:

- Look at longer term; crisis in homelessness in pandemic; decisions driven by sooner than later; agreed shelter goals should be given priority. Jim appreciates Xan talking about efforts to get community ready to access fed and state funds to bring resources to our county.
- Julie: Does HOPE want to form a provider landscape workgroup—to look at changes and update gaps analysis that was conducted last summer? Members interested in serving in workgroup; Andrea; Xan; Flip; Barbara. Jan is available to help with spreadsheets.
- HOPE hasn't addressed COI issues, like families and kids, who are not high profile like people on the streets. We don't talk much about them. (Karyle) Jan: COI is concerned and Jackson Street youth shelter concerned also. They do so much; important not to lose sight of their work.
- COI executive director is included in all of these conversations with city and county staff (Julie).
- We focus more on riverfront and park people; the other group not being talked about as much and I think HOPE is addressing small percentage of this population. (Karyle).
- Essential to focus on those populations too (Jim). Part of Housing First for everyone; intended for families. Need more affordable housing; includes lots of different kinds of housing targeted to different populations.
- Julie: 100 affordable units in south Corvallis. Connecting with schools to take direct referrals for families.
- Xan: concur to learn more and talk more about need for youth homelessness services for families or at risk of homelessness and COI's role and Jackson Street who are effective; our gaps analysis led us there too.
- George: what is missing/lacking is housing; lack of units for families. Need to increase total number of units and make more available across a range of populations.
- What are we doing this moment for people on continuum at lowest edge? Identify immediate need like camping, but this community doesn't want to face it. In Portland, sanctuary camping sites soon. (Aleita)
- City is working on it--prioritization and getting extensions to have some options; tune in next week on Thursday when these will be shared. (Julie)
- Perhaps we should have educational programs focused on families with children, and one focused on youth homelessness.(Xan).
- Thank you for sharing the updates on City /County staff's hard work...is there a way that we can get updates on these efforts provided to the HOPE Board? (Catherine).
- Jim: Close meeting out comment: think of where we are headed as a group; got to a milestone; submitted recommendations; now entering another phase. The survey of educational topics part of next phase. Look forward to a time when we make another set of recommendations and tweak them and what comes next as we move forward. Julie will reach out to workgroup members.

VIII. Next Steps and Educational Topics:

- HOPE Executive Committee looking at Bylaws for any streamlining and updating.
- Exec Committee meetings will be publicly noticed and open to the public.
- HOPE Executive Committee will work to plan out educational topics that match Board's interest in developing knowledge

IX. Meeting was adjourned at 6 pm.

Benton County & City of Corvallis
Home, Opportunity, Planning, & Equity (HOPE) Advisory Board



Julie Arena, HOPE Program Coordinator
Benton County Health Department
4077 SW Research Way
Corvallis, OR 97339
541-766-0252 * Email: Julie.Arena@co.benton.or.us

HOPE Meeting Agenda

September 22, 2021 from 4-6 PM

Meeting location: virtual or phone

Join Zoom Meeting: <https://cscteam.zoom.us/j/91929383646>
One tap mobile: +12532158782,,91929383646#
Dial by phone: +1 253 215 8782
Meeting ID: 919 2938 3646

AGENDA

- I. Welcome, Zoom Housekeeping, Overview of Agenda.....4pm
- II. Public Comment* (up to 10 minutes)4:05pm
- III. Roll call and approve August meeting minutes4:15pm
- IV. Welcome new HOPE Board member4:20pm
- V. Community Updates4:25pm
- VI. Educational Presentation and Q&A on Justice System Improvement Program.....4:30pm
Guest Speaker: Nick Kurth, Program Manager
- VII. Educational Presentation and Q&A on Legislation passed in 2021.....5:15pm
Guest Speaker: Alison McIntosh, Policy and Communications Director, Neighborhood Partnerships
- VIII. HOPE Recommendations Implementation Update5:45pm
- IX. Next Steps 5:55pm

*Public Comment: if you want to make a public comment, please put your name in the chat window or “raise your hand” in the Zoom meeting when you arrive. List your name and the topic of your comment

in the chat. Comments are made in the order that people “raise their hand” or submit a chat. For people calling in from a phone line, there will be an opportunity for comment for participants on the phone.



HOPE Advisory Board

September 2021 Public Meeting

Meeting facilitated by HOPE Coordinator, Julie Arena

9/22/21



Zoom Housekeeping

- All attendees are muted when they join.
- All attendees can unmute themselves and choose to be seen visually by clicking “Start Video” at the bottom of the screen.
- **Public comment:**
 - Type your name into the “Chat” area, say you want to make a public comment, and on what topic.
 - Example: “Julie – public comment – crisis response.”
 - For those on the phone, there will be an opportunity to comment, too.
- **Questions during the meeting:**
 - Type into the “Chat” area and send it to host, Julie Arena.

Meeting Agenda

1. Meeting Overview, Agreements and Culture
2. Public Comment for 10 minutes
3. Welcome new HOPE Board member: Dharma Mirza
4. Logistics: vote to approve August 2021 minutes – roll call
5. Justice System Improvement Program
Educational Presentation and Q&A
Guest Speaker: Nick Kurth, Program Manager
6. Legislation passed in 2021
Educational Presentation and Q&A
Guest Speaker: Alison McIntosh, Policy and Communications Director, Neighborhood Partnerships
7. Community Updates – HOPE Recommendations Implementation Update



Agreements for our culture + conduct:

Fun

Inclusive ✓✓

Humor

Food ✓

Action/roll up sleeves

Change the face of Homelessness

Honesty

Respect ✓

Consensus

Think before you speak

Curiosity ✓

Transparency

Recognize personal bias

Kindness ✓

Time management

Concise communication

Open minded ✓

Opinions matter

Data driven

Do your homework!

Patience

Authentic

Valuing personal experience

Dedication/work ethic
Honor the expectations of
the work

Public Comment

10 minutes

- Comment limited to 2-3 minutes based on number of people wanting to comment
- Type into the “Chat” and say you want to make a public comment and on what topic.
- For those on the phone, I will ask if there are any public comments from callers.
- Can also submit written comments to the Board via email to Julie.Arena@co.Benton.or.us

Logistics: Vote to approve August 2021 minutes, roll call

Flip Anderson

Xan Augerot

Catherine Biscoe

Karyle Butcher

Bruce Butler (excused)

Bryan Cotter

Anita Earl

Joel Goodwin

George Grosch

Barbara Hanley

Aleita Hass-Holcombe

Christina Jancila

Charles Maughan

Pegge McGuire

Dharma Mirza

Jim Moorefield

Andrea Myhre

Jan Napack

Reece Stotsenberg

Janie Tebeau

Guest Speakers:
Educational presentations

**Justice System Improvement
Program**

**Nick Kurth
Program Manager
Benton County**

Legislation passed in 2021

**Alison McIntosh
Policy and Communications
Director
Neighborhood Partnerships**



Questions for
Guest Speaker

Justice System
Improvement Program

Guest Speaker:
Nick Kurth, Program
Manager

Guest Speaker

Alison McIntosh
Policy and
Communications
Director
Neighborhood
Partnerships

Legislation passed in 2021 –
resources for more info:

- [Addressing Homelessness & Protecting Renters](#)
- [Building & Maintaining Affordable Housing](#)
- [Homeownership & Asset Building](#)



HOPE Recommendations Update

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- Unanimous agreement in to prioritize implementation of three HOPE recommendations:

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City and County staff are working with homeless service providers to answer, what is needed to implement the sheltering system recommendation, facilitate data improvements, and collaborate to increase sustainable funding for case managers?

- What can we accomplish in the short term?
- What is needed to fully implement the recommendation?

Elected Officials met jointly on 9/2 to give the go-ahead for city, county, and provider team to pursue the feasibility of different options like motel sheltering, microshelters, identifying possible sites, working on logistics.



Recommendations Implementation

Recommendations	Progress/Update
1. Facilitate and coordinate data improvement efforts with community partners.	Community Services Consortium is recruiting for a data support full-time employee to work with providers on improving data entry and coordination.
2. Work with providers to create metrics for successful program goals.	No current activity. CSC has success metrics for many programs that can serve as a model.
3. Prioritize collaboration and coordination of providers and partners with routine meetings for improved care coordination facilitated by a full-time staff member.	No current activity. InterCommunity Health Network – Coordinated Care Organization (IHN-CCO) (Medicaid insurance from Samaritan Health Services) – investigating how their system can support more care coordination like this model.
4. Collaborate with social service and health care partners to increase the number of paid, full-time case managers to support people transitioning out of homelessness.	No current activity. Will need leadership from county and involvement from IHN, Samaritan, and social service providers to develop a funding and contracting model.

Recommendations Implementation

Recommendations	Progress/Update
5. Pursue implementation of a crisis response team and collect data on the scope and scale of need for crisis response.	Crisis Outreach Response and Engagement (CORE) Team pilot launched in July 2021 with 1 behavioral health staff person and 1 law enforcement staff person co-responding to 911 calls with a behavioral health issue. This co-response pilot will collect data on the need for crisis response with law enforcement.
6. Provide organizational capacity to facilitate and coordinate providers in establishing a 24/7/365 Sheltering System for all populations with onsite resources at shelter locations to transition people out of homelessness.	City, county, and provider leaders are currently working on this recommendation for short-term immediate sheltering this fall/winter. Ongoing work to discuss capacity to address long-term solutions. *Current priority for elected officials.
7. Facilitate and support the creation of a Resource Center.	United Way's new Director of Community Impact, Chris Sherrod, is facilitating multiple stakeholders to move forward this concept: CSC, COG, Samaritan, County health, Linn Benton Food Share, United Way, DHS.
8. Explore and investigate the need and the barriers to accessing housing for individuals and their families in our community whose past history has impacted their ability to secure housing.	No current activity.

Recommendations Implementation

Recommendations	Progress/Update
9. Provide routine communication, notice, and opportunities for community involvement on the topic of homelessness services.	No current activity.
10. Increase development or acquisition of affordable housing units for permanent supportive housing (PSH) by 20 new units per year for the next eight years to add at a minimum 160 new units of PSH in Benton County.	City Community Development continues their work to add affordable units in Corvallis. Corvallis Housing First will receive funding to add approximately 40 units of PSH in the coming years.
11. Increase available rental/income assistance options.	Linn Benton Housing Authority (LBHA) is receiving referrals from CSC and CARDV to use new 170+ emergency housing vouchers for people currently experiencing homelessness or fleeing domestic violence in Benton and Linn counties.
12. Increase supportive services and stable funding streams to provide services to residents at more affordable housing locations.	No current activity.



Next steps...

1-on-1 feedback sessions with each board member and HOPE Coordinator.

Anonymous survey to provide feedback on your experience on the HOPE Board.

HOPE Executive Committee will review and discuss future efforts for this board. Full board will also have time for this discussion at a meeting in the near future.

Key question: what role could the HOPE Board play in supporting any part of implementing of your recommendations?





**Benton
County**





Home, Opportunity, Planning, and Equity (HOPE)

Advisory Board Meeting

Approved Minutes

September 22, 2021 from 4 pm to 6 pm

ZOOM Meeting



- Members Present:** Florence Anderson; Catherine Biscoe; Karyle Butcher; Bruce Butler; Bryan Cotter; Anita Earl; Joel Goodwin; George Grosch; Barbara Hanley; Niki Hobbs; Christina Jancila* (Business Associate); Charles Maughan* (Corvallis City Council); Pegge McGuire* (CSC); Dharma Mirza; Jim Moorefield* (Co-Chair); Jan Napack* (Corvallis City Council).
- Excused:** *Xan Augerot (Commissioner, Benton County); Aleita Hass-Holcombe; Janie Tebeau.
- Absent:** Reece Stotsenberg* (Co-Chair)
- Staff Present:** Julie Arena (Benton County Health, HOPE Program Coordinator); Paula Felipe (Benton County Public Health, recorder); Suzanne Hoffman, Health Department Director; Joe Hahn, Diversity Coordinator.
- Guests:** Nancy Wyse
*Executive Committee Members.

- I. **Welcome and Introductions.** Reminder of culture of agreements. Welcome to Nancy Wyse visiting from County Commissioners. Welcome to new HOPE board member: Dharma Mirza
- II. **Public Comments (limited to 2-3 minutes).**
 - Susan Melero: Introduced herself as a South Corvallis Advocate for people with disabilities and a college student starting school next month.
- III. **Approval of Minutes: MOTION** made by George Grosch to approve the August 2021 minutes. Seconded by Jan Napack. All in favor; **MOTION** passed. (Abstained: Bruce Butler; Pegge McGuire; Dharma Mirza).
- IV. **Membership and Board Recruitment update:**
 - Welcome to new board member Dharmakrishna Mirza.
- V. **Educational Component** – Nick Kurth, Program Manager, Justice System Improvement Program. “Building a Justice System for the Future.”
 - Gave this to Corvallis City Council on Tuesday night. Invite comments and questions from HOPE Board.
 - Vision: Treatment and accountability to transform lives, ensure safety, and strengthen community.
 - Goal: Build an equitable, effective, and safe justice system for all Benton County residents.
 - New facilities: what and why
 - Crisis center; correctional facility; county courthouse; and sheriff and emergency operations.
 - Victims and public know dangerous offenders are off the streets and receiving

- treatment.
 - Modern buildings with new technology to assist in saving lives.
- Contemplating bond measure.
- Integrating facilities and programs.
- New services and support
 - Pretrial services
 - Electronic monitoring
 - Enhanced crisis response
 - Crisis center operations
 - Developmental disabilities training
 - In-Custody treatment programs
 - Data evaluation and metrics
 - Funded by Public Health and Safety levy and the Benton County General Fund
- Proposed New or updated facilities
- Program Timeline: 2018-2019 Assessment Balance Accountability & Treatment; 2020-2022: predesign; 2023-2027: Design and Implementation.
- Key Public Engagement Questions:
 - Rank importance of each facility.
 - Where should the new Courthouse be located?
 - Which option do you favor to repurpose the historic courthouse.
- Key Decisions for the County.
 - Choose suburban site for JSIP development
 - Determine suite of facilities and funding for the November bond measure
 - Choose location of the new courthouse
 - Determine repurposing of historical courthouse.
- Facility funding scenarios: Funds received \$22.25 Million: Approx cost: \$103 to \$135 Million
- Need to make some hard choices.
- Site selection data driven and arduous process; West site; South Site; Downtown Site.
- Concept 1: 3 facilities on campus on west site with crisis center downtown.
- Concept 2: crisis center downtown; sheriff office south campus
- Concept 3a: courthouse downtown; other facilities off site.
- Concept 3b: Downtown / South.
- Old Jail will not be a building anymore; they will landscape with plants.
- Next Steps: public engagement; Oct 13 2nd event; by mid-November purchase agreement for properties.

DISCUSSION:

- Early design contemplate using full block but valuable services and support in the apartments for transitional housing and drug treatment court on that block. Would have to build it somewhere else. Commissioners said does not make sense to tear it all down and provide that service somewhere else. Securing space very difficult downtown. Originally have a whole campus downtown but could not secure the space. May not have a space for the courthouse.
- Karyle: like location of Reservoir road; old courthouse has potential for people have attachment to it. Sell to private investment? Office buildings? Yes actively exploring options. Waiting to see results of feasibility study.

- Bond measure attempts been made several times over years (Jim): community ambivalence to incarceration to criminal justice challenges. Talk with leaders about relationship services that work and jail as an option. Better job with treatment and reintroduce people in community with an enhanced facility. Not seeing this story being told on how it will make community safer and help people turn their lives around and hold people accountable.
- Jim: Budget that would change or enhancements envisioned for supportive services at facilities? In custody treatment programs: Want to move away from warehousing to treatment programs and training and other programs. Nick: Right now outsourcing our jail beds; not aligned with best practices. Drive down recidivism with support network includes family. Difficult to do when sent out of county. 4-5 years to create the correctional facility—use that term intentionally—commit to in-custody treatment programs. Yes, willing to make tough choices to fund those programs. Looking now at how to fund programs—even though event 4-5 years away.
- Jim: increase in FTE: yes, certainly and some savings at same time; won't be spending funds to send out of county for beds. Primary funding; public health and safety (haven't changed the rate in 15 years) and general fund.
- Dharma: environmental impact? Removal of courthouse out of downtown; less transportation options; central transit hub for people who need access and equitable ways. Nick: In terms of accessibility, think holistically about the county; conduct traffic studies looking at impact more than accessibility; multi paths can be extended on south property; public transit is key; met with Corvallis transit to extend bus routes or intergovernmental shuttle. In terms of environmental impact: depends on wetlands; Southside is wetlands; mitigated; wetlands created somewhere else; onsite mitigation studies and discounted not based on cost but because not aligned to best practices. Less environmental impact on west site; downtown go vertically; tall vertical buildings.
- George: feeling better about this—before more focused on punitive aspects; this shows beginnings on restorative ideals of justice which fits with what this committee is working on; I've been anti jail in the past but now this feels like moving in good direction. Focus on direct treatment services.
- Traffic impact on west side: study done; south site more direct but takes same amount of time to get downtown.
- Access programs and services with people with disabilities? Facilities in actual design. Developmental disabilities training for LE in support services side; budget for training and date set. Working with CPD, BCSO, Albany Police, OSU, and the Arc. Also, communications training.
- Proposing a 120-bed facility. Building for a 20-year horizon. If we do a good job reducing recidivism; treatment; and other programs it would be great if don't fill all those beds; can always rent those beds out.
- Captain John Devaney: cooperative agreement with Lincoln County; attended jail conference on reentry Corvallis and Albany. Sheriff met with Lincoln jail Commander; create regional approach to go after grant funding; housing voucher; cell phones; and other services to cut down on recidivism rate.
- Dharma; I would also just mirror the NAACP suggestion that we need commitment to in-custody treatment and services if we are considering pouring more funds into punitive centers. Focus ought to be on creating facilities that reduce recidivism and incarceration rates.

- Dharma: I feel that both crisis center (critical don't get me wrong) and enhanced law enforcement center capacity seem to not address preventative care facilities as they seem to address issues post-effect (i.e. if we don't have a county detox center, how are we reducing rates of drug related crime that drives crime rates). I just feel that we need a more comprehensive SUD treatment, housing service, and behavioral treatment service array before we fund more incarceration options.

VI. Allison McIntosh: Policy and Communications Director, Neighborhood Partnerships Oregon Housing Alliance.

- Legislative advocacy coalition
- Safe place to live; what are needs in community and how to address problems.
- What are barriers and how to help people who are homeless?
- How can we help people access home ownership?
- Regulated affordable housing that is built with public dollars and govt resources.
- Mostly focus our time on this kind of housing—because not enough affordable housing available.
- 2021 Legislative Agenda: exciting time; action was bold and stepped up. Short term needs; medium terms solutions; and long term changes to impact community for years to come.
- Homelessness: 2 state pots of money to fund shelter or emergency rental assistance; go to community action agency like Pegge McGuire at CSC.
- Legislature continued to invest in those programs; infusion of federal dollars.
- \$27 Million funds for emergency shelter; significant increase. Not heard implementation plan yet; distribute some resources before this winter.
- Consultant for statewide shelter study; capacity and need for emergency shelters. Can find more info.
- Bills related to Youth; network of youth providers; homeless and other support services; \$3.6 million state invested; goes to existing network of providers.
- HB 2163 invests 4.5 million in pilot program for youth experiencing homelessness.
- Legislature \$10 million for mobile crisis intervention program; alternative 911 to help homeless services. OHA will implement that program.
- Legislature passed HB 2006; temporary provision until July 1, 2022; address barriers and process about shelters; for next year local government cannot deny emergency shelters.
- Legislature eviction moratorium to expire: if applied for rent assistance puts pause on eviction proceeding for 60 days while go thru application process. SB 278 creates 60 day pause.
- If not able to pay rent, have until March to pay back rent.
- Expunge evictions; share housing without being penalized by landlord; provides other protections too.
- SB 291: coming out of corrections system and can ask for individual assessment; apply to landlord, chance to explain issues. Rather than deny criminal history; look at whole circumstances; goes into effect in January 2022. Will send to Julie when available.
- Building affordable housing; since 2015 state using bonds; past year committed \$410 million dollars—more than ever for affordable housing—long term strategies—developers will apply. 2-3 years before buildings open but will make a big different with level and scale of commitment.
- Big investment in existing affordable housing.

- Bill SB 8: easier to build affordable housing across the state; commercial; with religious land can build affordable housing; can skip some re-zoning process.
- Legislature increase housing for ag workers and families.
- Early learning facilities on site in housing.
- Home ownership: cannot be foreclosed thru end of year.
- Legislature invested 20 million in home safety and accessibility; ADAs.
- Funds to replace aging homes; hard to heat and cool and unsafe; program to help homeowners replace homes at lower cost.

***SB 8: Affordable Housing Land Use Requirements**

SB 8 requires local governments to approve the development of certain affordable housing, and not require a zone change or conditional use permit, on land zoned to allow commercial uses, to allow religious assembly, or as public lands. Qualifying land may be owned by a public body or a religious nonprofit. The bill applies to property zoned to allow for industrial uses only if the property is publicly owned, adjacent to lands zoned for residential uses or schools, and not specifically designated for heavy industrial uses. These requirements do not apply to land that a local government determines lacks adequate infrastructure, or on property that: contains a slope of 25% or greater; is within a 100-year floodplain; or is constrained by state land use regulations based on natural disasters and hazards or natural resources. Local governments may still impose development requirements based on siting and design standards and building permits. SB 8 also includes a statewide density bonus for affordable housing in areas zoned for residential use. A local government may reduce the density or height of a development as necessary to address a health, safety or habitability issue, including fire safety, or to comply with a protective measure adopted pursuant to a statewide land use planning goal. Finally, the bill broadens the ability of applicants developing affordable housing to obtain attorney fees in prevailing appeals before LUBA

Effective Date: January 1, 2022

***HB 2008: Religious-owned Affordable Housing Siting and Property Tax Exemption**

HB 2008 requires local governments to approve the development of affordable housing on property not zoned for housing, without requiring a zoning change, on property owned by a religious organization if that property is located within an urban growth boundary, is not zoned for industrial use and is contiguous to property zoned for residential use. For a property contiguous to more than one residential property, the zoning of the property with the greatest density is applied to the new development. The bill allows local governments to apply certain restrictions or conditions of approval, habitability, or infrastructure. HB 2008 also provides a property tax exemption for property owned or purchased by a religious organization that is used solely to provide affordable housing to individuals with a combined household income at or below 60% of an area's median income. The development must also be subject to an affordable housing covenant guaranteeing affordability for at least 60 years. The bill applies to property tax years beginning on or after July 1, 2021.

Effective Date: September 25, 2021

QUESTIONS:

- Jim: from \$40 million to \$410 million; Allison on short list who made that happen—thank you! Concern with capacity of state to deploy resources. Out of state organizations moving into Oregon to see opportunity; what concerns me is the right kind of housing be developed. Invest in capacity and address homelessness. LIFT by itself won't end homelessness; it targets folks who are working; minimum wage; part time; not for zero income or just social security; need additional tools.

- Jim: Excited about federal government considering bigger investments in affordable housing; including housing vouchers. Oregon could get 9000 extra vouchers (about a quarter of what we have now). Can serve people with low incomes.
- Legislatures have ideas and more COVID impacts to deal with that impact homeless.
- Continue work on Long-term assistance program.
- Pegge: Oregon Housing and Community Services notified CSC to give back \$12 million already earmarked for Linn Benton Lincoln renters to put in a pool to access by other communities; there are already people in pipeline who requested full 12 million. This is a tragic situation I'm fighting tooth and nail; money that is going straight to Portland Metro and not to Linn Benton Lincoln counties.
- Karyle: big project in next few years in Corvallis: source of funding we could tempt builder with to make affordable housing? Allison: inclusionary zoning; on our list of things to fix; now only buildings over 20 units. There is constructions excise tax, but how to convince developer? I don't know if state has incentive money. Last year HB 2001 and 2003 (what they are doing to support affordable housing and what housing productive strategy—20 pages of ideas produced that local governments can do to incentivize).
- From Alison McIntosh: https://www.oregon.gov/lcd/UP/Documents/660-008-0050_HPS_List_Tools_Actions_Policies.pdf

VII. HOPE Recommendations Update: Implementation of the 12 HOPE recommendations

- City and County elected officials met jointly and separately in June, July, August, and September to officially accept the HOPE recommendations and voice their priorities and direction for implementation.
- Unanimous agreement in to prioritize implementation of three HOPE recommendations:
- #6: Provide organizational capacity to facilitate and coordinate providers in establishing a 24/7/365 Sheltering System for all populations with onsite resources at shelter locations to transition people out of homelessness.
- #1: Facilitate and coordinate data improvement efforts with community partners.
- #4: Collaborate with social service and health care partners to increase the number of paid, full-time case managers to support people transitioning out of homelessness.
- City and County staff are working with homeless service providers to answer, what is needed to implement the sheltering system recommendation, facilitate data improvements, and collaborate to increase sustainable funding for case managers?
- What can we accomplish in the short term?
- What is needed to fully implement the recommendation?
- Elected Officials met jointly on 9/2 to give the go-ahead for city, county, and provider team to pursue the feasibility of different options like motel sheltering, microshelters, identifying possible sites, working on logistics.

VIII. Next Steps and Educational Topics:

- 1-on-1 feedback sessions with each board member and HOPE Coordinator.
- Anonymous survey to provide feedback on your experience on the HOPE Board.
- HOPE Executive Committee will review and discuss future efforts for this board. Full board will also have time for this discussion at a meeting in the near future.
- Key question: what role could the HOPE Board play in supporting any part of implementing of your recommendations?

- Jim's closing remarks: we made a difference! Thanks Julie and everyone. We are seeing progress.
- Andrea: As with the general population, vaccination rates among the homeless are mixed. I would estimate that maybe half to 2/3rds of the folks out there are vaccinated? It doesn't help to continue with postings at this time.
- Andrea; Think it's important that this group knows that the COVID infection rates among people on the street are very high right now. Recent camp cleanups were delayed due to over 50% of the folks in some areas testing positive for COVID. It's basically the scenario that we were fearful of when the pandemic first hit.
- From Susan Melero: Housing for low-income and disabled has safety reasons that can be helpful.
- Dharma: Andrea, are we increasing vaccination efforts to these communities in response to this increase, or are these mainly being attributed to breakthrough cases?
- We are increasing vaccination efforts on all fronts and I can often offer outreach from our team to unhoused folks wherever they are to increase accessibility.

IX. Meeting was adjourned at 5:58 pm.

Benton County & City of Corvallis
Home, Opportunity, Planning, & Equity (HOPE) Advisory Board



Julie Arena, HOPE Program Coordinator
Benton County Health Department
4077 SW Research Way
Corvallis, OR 97339
541-766-0252 * Email: Julie.Arena@co.benton.or.us

HOPE Meeting Agenda

October 27, 2021 from 4-6 PM

Meeting location: virtual or phone

Join Zoom Meeting: <https://cscteam.zoom.us/j/91929383646>
One tap mobile: +12532158782,,91929383646#
Dial by phone: +1 253 215 8782
Meeting ID: 919 2938 3646

AGENDA

- I. Welcome, Zoom Housekeeping, Overview of Agenda.....4pm
- II. Public Comment* (up to 10 minutes)4:05pm
- III. Roll call and approve September meeting minutes4:15pm
- IV. Meeting scheduling.....4:20pm
 - a. November one week earlier – recap of two-year terms and feedback from members
 - b. December cancelled
- V. Educational Presentation and Q&A on Adverse Childhood Experiences (ACEs)..... 4:25pm
Guest Speaker: Clarissa McGee, Oregon Family Support Network
- VI. Recruitment priorities for Board vacancies5:00pm
- VII. Board discussion about next steps – what role can the HOPE Board play to support
implementation of previous recommendations?.....5:10pm

*Public Comment: if you want to make a public comment, please put your name in the chat window or “raise your hand” in the Zoom meeting when you arrive. List your name and the topic of your comment in the chat. Comments are made in the order that people “raise their hand” or submit a chat. For people calling in from a phone line, there will be an opportunity for comment for participants on the phone.



HOPE Advisory Board

October 2021 Public Meeting

Meeting facilitated by HOPE Coordinator, Julie Arena

10/27/21



Zoom Housekeeping

- All attendees are muted when they join.
- All attendees can unmute themselves and choose to be seen visually by clicking “Start Video” at the bottom of the screen.
- **Public comment:**
 - Type your name into the “Chat” area, say you want to make a public comment, and on what topic.
 - Example: “Julie – public comment – crisis response.”
 - For those on the phone, there will be an opportunity to comment, too.
- **Questions during the meeting:**
 - Type into the “Chat” area and send it to host, Julie Arena.

Meeting Agenda

1. Meeting Overview, Agreements and Culture
2. Public Comment for 10 minutes
3. Roll call and approve September meeting minutes
4. Meeting scheduling
 - November one week earlier – recap of two-year terms and feedback from members
 - December cancelled
5. Educational Presentation and Q&A on Adverse Childhood Experiences (ACEs).
Guest Speaker: Clarissa McGee, Oregon Family Support Network
6. Community Updates – HOPE Recommendations Implementation Update
7. Recruitment priorities for Board vacancies
8. Board discussion about next steps – what role can the HOPE Board play to support implementation of previous recommendations?

Agreements for our culture + conduct:

Fun

Inclusive ✓✓

Humor

Food ✓

Action/roll up sleeves

Change the face of Homelessness

honesty

Respect ✓

consensus

Think before you speak

Curiosity ✓

transparency

Recognize personal bias

Kindness ✓

time management

Concise communication

Open minded ✓

opinions matter

data driven

Do your homework!

patient

authentic

Valuing personal experience

dedication/work ethic
honor the expectations of
the work

Public Comment

10 minutes

- Comment limited to 2-3 minutes based on number of people wanting to comment
- Type into the “Chat” and say you want to make a public comment and on what topic.
- For those on the phone, I will ask if there are any public comments from callers.
- Can also submit written comments to the Board via email to Julie.Arena@co.Benton.or.us

Logistics: Vote to approve August 2021 minutes, roll call

Flip Anderson

Xan Augerot

Catherine Biscoe

Karyle Butcher

Bruce Butler (excused)

Bryan Cotter

Anita Earl

Joel Goodwin

George Grosch

Barbara Hanley

Aleita Hass-Holcombe

Christina Jancila

Charles Maughan

Pegge McGuire

Dharma Mirza

Jim Moorefield

Andrea Myhre

Jan Napack

Reece Stotsenberg

Janie Tebeau

Topic:
**Adverse Childhood
Experiences (ACEs)**

Guest Speaker:
**Clarissa McGee from
Oregon Family Support
Network**

To help protect your privacy, PowerPoint has blocked automatic download of this picture.



HOPE Recommendations Update

City and County elected officials met jointly and separately in June, July, August, and September to officially accept the HOPE recommendations and voice their priorities and direction for implementation.

- Unanimous agreement in to prioritize implementation of three HOPE recommendations:

#6: Provide organizational capacity to facilitate and coordinate providers in establishing a 24/7/365 Sheltering System for all populations with onsite resources at shelter locations to transition people out of homelessness.

#1: Facilitate and coordinate data improvement efforts with community partners.

#4: Collaborate with social service and health care partners to increase the number of paid, full-time case managers to support people transitioning out of homelessness.

City and County staff are working with homeless service providers to answer, what is needed to implement the sheltering system recommendation, facilitate data improvements, and collaborate to increase sustainable funding for case managers?

- What can we accomplish in the short term?
- What is needed to fully implement the recommendation?

Elected Officials met jointly on 9/2 to give the go-ahead for city, county, and provider team to pursue the feasibility of different options like motel sheltering, microshelters, identifying possible sites, working on logistics.



Recommendations Implementation

Recommendations	Progress/Update
1. Facilitate and coordinate data improvement efforts with community partners.	Community Services Consortium <i>has hired</i> a data support full-time employee to work with providers on improving data entry and coordination. Julie Arena is <i>convening a work group</i> on data improvement with local partners.
2. Work with providers to create metrics for successful program goals.	No current activity. CSC has success metrics for many programs that can serve as a model.
3. Prioritize collaboration and coordination of providers and partners with routine meetings for improved care coordination facilitated by a full-time staff member.	No current activity. InterCommunity Health Network – Coordinated Care Organization (IHN-CCO) (Medicaid insurance from Samaritan Health Services) – interested in how their system can support more care coordination like this model.
4. Collaborate with social service and health care partners to increase the number of paid, full-time case managers to support people transitioning out of homelessness.	No current activity. Will need leadership from county and involvement from IHN, Samaritan, and social service providers to develop a funding and contracting model.

Recommendations Implementation

Recommendations	Progress/Update
<p>5. Pursue implementation of a crisis response team and collect data on the scope and scale of need for crisis response.</p>	<p>Crisis Outreach Response and Engagement (CORE) Team pilot launched in July 2021 with 1 behavioral health staff person and 1 law enforcement staff person co-responding to 911 calls with a behavioral health issue. This co-response pilot will collect data on the need for crisis response with law enforcement.</p>
<p>6. Provide organizational capacity to facilitate and coordinate providers in establishing a 24/7/365 Sheltering System for all populations with onsite resources at shelter locations to transition people out of homelessness.</p>	<p>City, county, and provider leaders are currently working on this recommendation for short-term immediate sheltering this fall/winter. Ongoing work to discuss capacity to address long-term solutions. <i>City and county team are:</i></p> <ul style="list-style-type: none"> • <i>Pursuing microshelter installation at city hall.</i> • <i>Costing out and doing logistical planning for possible use of County Fairgrounds.</i> • <i>Visiting different sites for possible shelter options.</i> <p>*Current priority for elected officials.</p>
<p>7. Facilitate and support the creation of a Resource Center.</p>	<p>United Way’s new Director of Community Impact, Chris Sherrod, is facilitating multiple stakeholders to move forward this concept: CSC, COG, Samaritan, County health, Linn Benton Food Share, United Way, DHS.</p>



Recommendations Implementation

Recommendations	Progress/Update
8. Explore and investigate the need and the barriers to accessing housing for individuals and their families in our community whose past history has impacted their ability to secure housing.	No current activity.
9. Provide routine communication, notice, and opportunities for community involvement on the topic of homelessness services.	<i>Julie and city/county team working to put together more routine updates about progress on implementation and strategies for publicizing information.</i>
10. Increase development or acquisition of affordable housing units for permanent supportive housing (PSH) by 20 new units per year for the next eight years to add at a minimum 160 new units of PSH in Benton County.	City Community Development continues their work to add affordable units in Corvallis. Corvallis Housing First will receive funding to add approximately 40 units of PSH in the coming years.
11. Increase available rental/income assistance options.	Linn Benton Housing Authority (LBHA) using 170+ emergency housing vouchers for people currently experiencing homelessness or fleeing domestic violence in Benton and Linn counties.
12. Increase supportive services and stable funding streams to provide services to residents at more affordable housing locations.	No current activity.



**Benton
County**



Discussion of next steps:

Key question: what role could the HOPE Board play in supporting any part of implementing of your recommendations?

Ideas: communication role, researching successful models of collaboration on homeless solutions, research successful timelines of implementation, other ideas?

Next steps...

Meeting scheduling:

- November one week earlier – recap of two-year terms and feedback from members
- December cancelled

1-on-1 feedback sessions with each board member and HOPE Coordinator continue.

Anonymous survey to provide feedback on your experience on the HOPE Board. Will send out after last 1-on-1.

HOPE Executive Committee will review and discuss future efforts for this board.



**Benton
County**





**Home, Opportunity, Planning, and Equity (HOPE)
Advisory Board Meeting
Approved Minutes
October 27, 2021 from 4 pm to 6 pm
ZOOM Meeting**



- Members Present:** Florence (Flip) Anderson; *Xan Augerot (Commissioner, Benton County); Catherine Biscoe; Karyle Butcher; Bruce Butler; Bryan Cotter; Anita Earl; Joel Goodwin; George Grosch; Barbara Hanley; Aleita Hass-Holcombe; Christina Jancila* (Business Associate); Charles Maughan* (Corvallis City Council); Pegge McGuire* (CSC); Dharmakrishna Mirza; Andrea Myhre; Jan Napack* (Corvallis City Council); Reece Stotsenberg* (Co-Chair); Janie Tebeau.
- Excused:** Jim Moorefield* (Co-Chair)
- Absent:** Catherine Biscoe
- Staff Present:** Julie Arena (Benton County Health, HOPE Program Coordinator); Paula Felipe (Benton County Public Health, recorder); Joe Hahn, Diversity Coordinator.
- Guests:** *Executive Committee Members.

- I. **Welcome and Introductions.** Reminder of culture of agreements. Welcome to Clarissa McGee, our speaker, who is the Regional Manager from the Oregon Family Support Network. Her office is in Salem and her area covers Lincoln to Baker County.

- II. **Public Comments (limited to 2-3 minutes).** No comments offered.

- III. **Approval of Minutes: MOTION** made by Pegge McGuire to approve the September 2021 minutes. Seconded by Bryan Cotter. All in favor; **MOTION** passed. (Abstained due to not being in attendance at September meeting: Xan Augerot; Aleita Hass-Holcombe; Janie Tebeau.)

- IV. **Educational Component – Adverse Childhood Experiences (ACES).** Guest Speaker: Clarissa McGee, Regional Manager (Salem Office), Oregon Family Support Network
 - Oregon Family Support network has peers who share lived experience – either raised child with mental health diagnosis or other experience with mental health issues and has experience navigating systems.
 - ACES Study: looked at 3 categories: childhood abuse, neglect, and household challenges. Respondents were given an ACES score between 0 and 10 based on how many of the 10 types of adverse experiences they reported experiencing.
 - Clarissa shared her own personal experiences with neglect and abuse as a child from the age of 3 years old. She was moved around a lot, which made it difficult to make friends at school. She did not read until the fourth grade, and when she learned to read, she was asked to be in the talented and gifted program. She moved to Oregon and had new teachers but was bullied in school. She graduated from high school with 3.85 gpa and was married at 18 years old and it became abusive relationships. She had a child and a divorce, she remarried and had 4 more children. A genetic component involved as three of her children developed mental health issues, including bipolar and schizophrenia. She is proud

of her children as they are adults now and doing well but had difficult childhoods and raised with single mother was challenging. After receiving mental health treatment, Clarissa got a job with the school district as special ed assistant and she learned about the ACES study. Her score was 9 out of 10 and this indicated she was at higher risk for illness, stroke, heart attack, suffering from other chronic depression; more likely to become an alcoholic; have serious financial problems, among others.

- Preventing ACES: Parent support programs; treatment for mental illness and substance abuse; high quality child care; sufficient economic support for families with lower incomes; home visiting to pregnant women and families with newborns; parent training programs; intimate partner violence prevention; family friendly work.
- After working at the school district, Clarissa got a job as a peer with Washington County working with National Alliance on Mental Illness, a national non-profit agency supporting families and adults with mental health issues. Clarissa worked there 4 years before relocating to Oregon.

DISCUSSION:

- Best ways to prevent ACES? Programs that work with families providing wrap around services. Try to get everyone that can help child and family at same table to learn process to support them in navigating systems.
- What can HOPE do to help? You won't see many families with children out on the streets; they might be in a shelter for families; but many are broken up so we need more opportunities for families to stay together. Children miss school and bad things happen; drug use is another issue: we need treatment programs and not just prison system and punishments. Mental health programs; drug and alcohol treatment; warm place to sleep and social workers recommended.
- Here is a link that has both the ACEs and resilience test in one place:
<https://cls.unc.edu/wp-content/uploads/sites/3019/2016/08/From-ACESTOOHIGH-ACES-and-Resilience-questions.pdf>
- Dharmakrishna: appreciate your presentation; important to understand how ACES useful for population level change and not necessarily for individual determinants; this framework has been wielded against communities of color, queer families, poor families, as if they are the cause of these adverse experiences. There are some studies that look at not only childhood experiences but also adverse community environments as well. What are the structures causing adverse childhood experiences outside of family unit? We can get in dangerous mindset that individual families are failing children by causing traumas instead of looking at adverse community environments. Encourage folks to look at "Pair of ACES" -- really key for us to look at community destruction; discrimination; poor housing quality and affordable; lack of domestic violence shelters; how to find parity with individual measures and substantive policy interventions.
- Clarissa: system of care in every county where we come together from every discipline from every child serving system; talk about the issues around mental health issues. It would be amazing to have you on those committees because it is a community effort and amazing things happen when people get involved. Get feedback from people who are receiving or not receiving the services.
- https://publichealth.gwu.edu/sites/default/files/downloads/Redstone-Center/Resource%20Description_Pair%20of%20ACEs%20Tree.pdf

- <https://publichealth.gwu.edu/sites/default/files/downloads/Redstone-Center/BCR%20Pair%20of%20ACES%20Webinar%20Slides.pdf>
- Many board members agree that “Pair of ACES” work is where we need to be focused.
- George: Trillium working to raise mental health awareness; mental health matters; give awards to people working in the field. Advocacy and awareness group.

V. HOPE Recommendations Update:

- City and County elected officials met jointly and separately in June, July, August, and September to officially accept the HOPE recommendations and voice their priorities and direction for implementation.
- Unanimous agreement in to prioritize implementation of three HOPE recommendations:
- #6: Provide organizational capacity to facilitate and coordinate providers in establishing a 24/7/365 Sheltering System for all populations with onsite resources at shelter locations to transition people out of homelessness.
- #1: Facilitate and coordinate data improvement efforts with community partners.
- #4: Collaborate with social service and health care partners to increase the number of paid, full-time case managers to support people transitioning out of homelessness.
- City and County staff are working with homeless service providers to answer, what is needed to implement the sheltering system recommendation, facilitate data improvements, and collaborate to increase sustainable funding for case managers?
- What can we accomplish in the short term?
- What is needed to fully implement the recommendation?
- Elected Officials met jointly on 9/2 to give the go-ahead for city, county, and provider team to pursue the feasibility of different options like motel sheltering, microshelters, identifying possible sites, working on logistics.
- Pegge: item 7: Linn Benton food share is a subset of CSC. The Resource Center group recently had good conversation; DHS has room on Research way building; one stop entity; navigation first and foremost priority; get situation triage and someone help navigate; housing and access to other resources; feel like movement in this direction just in last week or so. DHS has info on amount of space; cost; access; CSC may provide more support; and Benton county provide staffing; more to come next month.

VI. Next Steps and Educational Topics: Board discussion about next steps – what role can the HOPE Board play to support implementation of previous recommendations

- Karyle: Are there service providers set up to work with the city? What can we learn from them? How is it working? Like to hear from service providers.
- Pegge: with CSC we are not feeling barriers, but things do move slowly and that is frustrating, and we are in sheltering season now. City and County are proactive in reaching out to us saying how can we help?
- Karyle: I’m talking with developers about housing. City isn’t moving fast enough; people have certain windows to get something done. It is a cultural thing in Corvallis.
- Pegge: patchwork of funding resources across jurisdictions—part of the problem. None have similar timeliness or fit well with one another. Requirements to invest your own money for site control and not supported by other funding sources.
- Jan: FYI, I met with the CASA exec director earlier today. One (of many) of their objectives is trauma-informed support for children who have experienced high levels of distress during

the pandemic. They are collaborating with Jackson Street Youth Services; COI, Boys and Girls Club, Old Mill Center; Strengthening Rural Families.

- From Ben Danley – COI: from my point of view, communications between/among the city and county and providers has never been better. I think the work of this group may be impacting that situation. Remarkably easy now working with city and county; reaching out to providers. It's a lot different now.
- Jan: Need to look at structural organization; not nimble; looking at homeless using different lens; be more efficient and more effective to make sure we understand as we go forward, we cannot do everything; need to look at segmenting ourselves.
- George: what Jan and Karyle speak to are important: It would help to define the goals and role: educate ourselves on how to get affordable housing. If look to private developers we won't get accomplished; what can we do as community to invest money, time, energy into supporting initiative that put houses on the ground working with private non profit developers. Good place to start; what is overall goal? Address community based problems; keep housing on the ground; what is the end goal--that everyone knows where to put their head in bed tonight.
- Andrea: Well said George. We have the responsibility to check in on the recommendations we are making and help troubleshoot and ask good questions. That should be one of our main tasks.
- Andrea: Doing a quarterly meeting for the public, online, to present on progress and take questions might be a great idea and ease pressure on open forums like City Council meetings. We could volunteer to present information or help answer questions.
- George: What are the characteristics of a healthy and resilient community? What is preventing private investment in housing for all?
- Andrea: I think asking city and county staff/service providers to report on the progress of the chosen goals would be a good strategy. I think one weakness of the goals we selected is that I am not sure if there is a specific timelines or measures for success. Providing regular reports to HOPE might help drive more action/pressure/more suggestions by the group.
- Andrea: I also think having some members of this group who are well-connected in the community help find locations is a good idea. That is the only reason we have found the places we have for shelter and housing.
- Pegge: When the community action network tried to hold Oregon Housing's feet to the fire on getting the \$\$ out the door, they went to the governor and said they cannot work with us. This is the same argument that the community action network voiced with the state about the funding. And, OHCS is thinking it makes more sense for us to have to apply for these funds via an RFP rather than formula
- Pegge: Similarly, when people come to the HOPE meetings to voice unhappiness over issues, they are looking for someone to "fix" the issue when it is more complex than just a quick decision can resolve
- Barbara: Public wants more communication on what HOPE is doing and what progress is being made and how to measure it. HOPE can provide evaluation of progress being data driven and communicate with public.
- Xan: our bylaws speak to evaluation role. Look at each of 12 areas to move ball further even in absence of city and county work. Provide link to flush out concepts we describe. Agree with George and Barbara: measurement/metrics for success is important and would be wonderful to put together for each of 12 goals.

- Julie: about metrics for success: what role could this board play? Is that a workgroup or research project?
- Pegge: we have some metrics for success; what is return on investment? Fine tune our measurements on what success looks like. Where are clients we served 10 years ago? How did our programs help them?
- Aleita: metrics are who slept in front of my door last night? Where do people go for shelter on November 15th? See how many do not have place to sleep. My lens is folks on my door way. I think city and county can help pay for hotels and get people dry.
- Karyle: I think the public does not understand what role is in driving decisions making. HOPE has a leadership role—what is the role of executive council? Need advocacy in moving forward.
- Xan: I hear the frustration; staff meet weekly and feel it every day and trying to wrestle with these issues: city and county have agreed to use microshelters and are looking for a place to put them. It is really challenging to find sites and services; it is a slow process; not enough staffing in organizations. It hurts because everyone is trying and then doesn't do anything for people on doorstep..very challenging situation.
- Aleita: Keep the people in front of our eyes.
- Xan: staff working on issue trying to find places and spaces; working hand and hand with community; all working on it. Wish we could have started in July instead of Sept.
- Karyle: I know your working hard; you show passion and care; heart on your sleeve helps. Frustration we know we needed a shelter; why didn't this start earlier?
- Julie: CSC still funds sheltering program; supportive services staff to help with hotels; some cannot because of behavior issues or rules of conduct. That program is still happening; entities like CHANCE are still running this program for folks who can be placed into motels.
- Yes, Motel sheltering is still happening; CHANCE is key organization to get into the door.
- Andrea Myhre: issue to use city council and county meetings for creating policy issues; should be places to advocate but not create policy. Poor decisions made; feel role HOPE can play is have priorities and ask city and county and service providers to report back on those recommendations. Have regular check ins and opportunity to report back; where are the barriers?
- Charles: I encourage people to testify at city council; engage with local elected officials. We are doing the best we can; think of approach and what you are trying to accomplish. Work with elected officials.
- George: Think about where we were several months ago and work we accomplish; a lot has occurred and positive effects. Also, serious things such as issue of camping hasn't been resolved; continue to work on it. 2 levels of communications: between agencies and local government is good; lacking is communication between elected officials, HOPE, and the public on what we are doing.
- What does healthy, equitable, inclusive community look like? How are we making progress toward our goals?
- Develop metrics; decisions made at committee levels. Give elected official options that are vetted.
- Barbara: in terms of transitional housing – is there a mechanism for a private residence to accept a microshelter on their property in the city of Corvallis? Julie: once you have someone on your property, it can get bad if not resources and services to help. A lot of planning is involved in microshelter housing, such as screening, therapy, support services; and ways to

follow up.

- Barbara; provide training on what to expect; screening; address obstacles to microshelters.
- Reece: Microshelters are great—one piece of pie. Also, look at other forms of housing. Rent out house; permanent supportive housing programs. 70 units in Philomath—discussion on that would go along way.
- Andrea: make community connections; look at people willing to sell and purchase buildings.
- Christina: need community involvement and increase supportive services to residents; need affordable housing: what I suggested was feedback loop from service providers on the 12 recommendations. Who is not meeting requirements and what is happening. Julie gave slides on feedback on what is happening.
- Dharmakrishna: thinking of sustainable; if continue to develop services assuming a homogeneity; feel marginalized; services aren't designed with community without cultural needs in mind; LGBTQ unless evaluating--wonder role to destigmatize homelessness in area more widely. High level of stigma...stigma reduction needed.
- Julie; topic of discussion for executive committee.
- Dharmakrishna; think critically about how not diverse this group is; very isolating only trans people; people of color; ethnic and racial justice; think of how to engage those populations; why aren't they at the table now; concerned about lack of equity and diversity. Think about into the future; partner with communities of color and marginalized groups. Julie working to improve that; love to meet offline; met with Joe Hahn; Rocio Munoz; leadership locally; trying to do as much targeted outreach as possible.
- Jan: We need to meet in person at some point to get to know each other on a deeper level.
- Anita Earl: I second that Jan.

Next Steps:

- Meeting scheduling:
 - November one week earlier – recap of two-year terms and feedback from members
 - December cancelled
- 1-on-1 feedback sessions with each board member and HOPE Coordinator continue.
- Anonymous survey to provide feedback on your experience on the HOPE Board. Will send out after last 1-on-1.
- HOPE Executive Committee will review and discuss future efforts for this board.

IX. Meeting was adjourned at 5:50 pm.

Benton County & City of Corvallis
Home, Opportunity, Planning, & Equity (HOPE) Advisory Board



Julie Arena, HOPE Program Coordinator
Benton County Health Department
4077 SW Research Way
Corvallis, OR 97339
541-766-0252 * Email: Julie.Arena@co.benton.or.us

HOPE Meeting Agenda

November 17, 2021 from 4-6 PM
Meeting location: virtual or phone

Join Zoom Meeting: <https://cscteam.zoom.us/j/91929383646>
One tap mobile: +12532158782,,91929383646#
Dial by phone: +1 253 215 8782
Meeting ID: 919 2938 3646

AGENDA

- I. Welcome, Zoom Housekeeping, Overview of Agenda.....4pm
- II. Public Comment* (up to 10 minutes)4:05pm
- III. Roll call and approve October meeting minutes4:15pm
- IV. Meeting schedule.....4:20pm
 - a. December meeting cancelled
 - b. January reconvene for the start of the next 2-year term
- V. Recap of two-years work and progress made in the community.....4:25pm
- VI. Summary of Feedback from HOPE Board members.....4:35pm
 - a. What worked and was successful?
 - b. What are the areas for improvement going forward?
 - c. Who plans to serve a second two-year term?
- VII. Recruitment priorities for Board vacancies.....5:15pm
- VIII. Board discussion about next steps – what role can the HOPE Board play to support implementation of previous recommendations?.....5:25pm

*Public Comment: if you want to make a public comment, please put your name in the chat window or “raise your hand” in the Zoom meeting when you arrive. List your name and the topic of your comment in the chat. Comments are made in the order that people “raise their hand” or submit a chat. For people calling in from a phone line, there will be an opportunity for comment for participants on the phone.



HOPE Advisory Board

November 2021 Public Meeting

Meeting facilitated by HOPE Coordinator, Julie Arena

11/17/21



Zoom Housekeeping

- All attendees are muted when they join.
- All attendees can unmute themselves and choose to be seen visually by clicking “Start Video” at the bottom of the screen.
- **Public comment:**
 - Type your name into the “Chat” area, say you want to make a public comment, and on what topic.
 - Example: “Julie – public comment – crisis response.”
 - For those on the phone, there will be an opportunity to comment, too.
- **Questions during the meeting:**
 - Type into the “Chat” area and send it to host, Julie Arena.

Meeting Agenda

1. Meeting Overview, Agreements and Culture.....4:00pm
2. Public Comment for up to 10 minutes.....4:05pm
3. Roll call and approve October meeting minutes4:15pm
4. Meeting schedule.....4:20pm
 - a. December meeting cancelled
 - b. January reconvene for the start of the next 2-year term
5. Recap of two-years work and progress made in the community.....4:25pm
6. Summary of Feedback from HOPE Board members.....4:45pm
 - a. What worked and was successful?
 - b. What are the areas for improvement going forward?
 - c. Who plans to serve a second two-year term?
7. Recruitment priorities for Board vacancies.....5:15pm
8. Board discussion about next steps.....5:25pm
 - a. What role can the HOPE Board play to support implementation of recommendations?



Agreements for our culture + conduct:

Fun

Inclusive ✓✓

Humor

Food ✓

Action/roll up sleeves

Change the face of Homelessness

Honesty

Respect ✓

Consensus

Think before you speak

Curiosity ✓

Transparency

Recognize personal bias

Kindness ✓

Time management

Concise communication

Open minded ✓

Opinions matter

Data driven

Do your homework!

Patience

Authentic

Valuing personal experience

Dedication/work ethic
Honor the expectations of
the work

Public Comment

10 minutes

- Comment limited to 2-3 minutes based on number of people wanting to comment
- Type into the “Chat” and say you want to make a public comment and on what topic.
- For those on the phone, I will ask if there are any public comments from callers.
- Can also submit written comments to the Board via email to Julie.Arena@co.Benton.or.us

Upcoming Meetings

- December meeting cancelled
- January meeting will reconvene to start a new 2-year term for board members

Logistics: Vote to approve October 2021 minutes, roll call

Flip Anderson

Xan Augerot

Catherine Biscoe

Karyle Butcher

Bruce Butler

Bryan Cotter

Anita Earl

Joel Goodwin

George Grosch

Barbara Hanley

Aleita Hass-Holcombe

Christina Jancila

Charles Maughan

Pegge McGuire

Dharmakrishna Mirza

Jim Moorefield

Andrea Myhre

Jan Napack

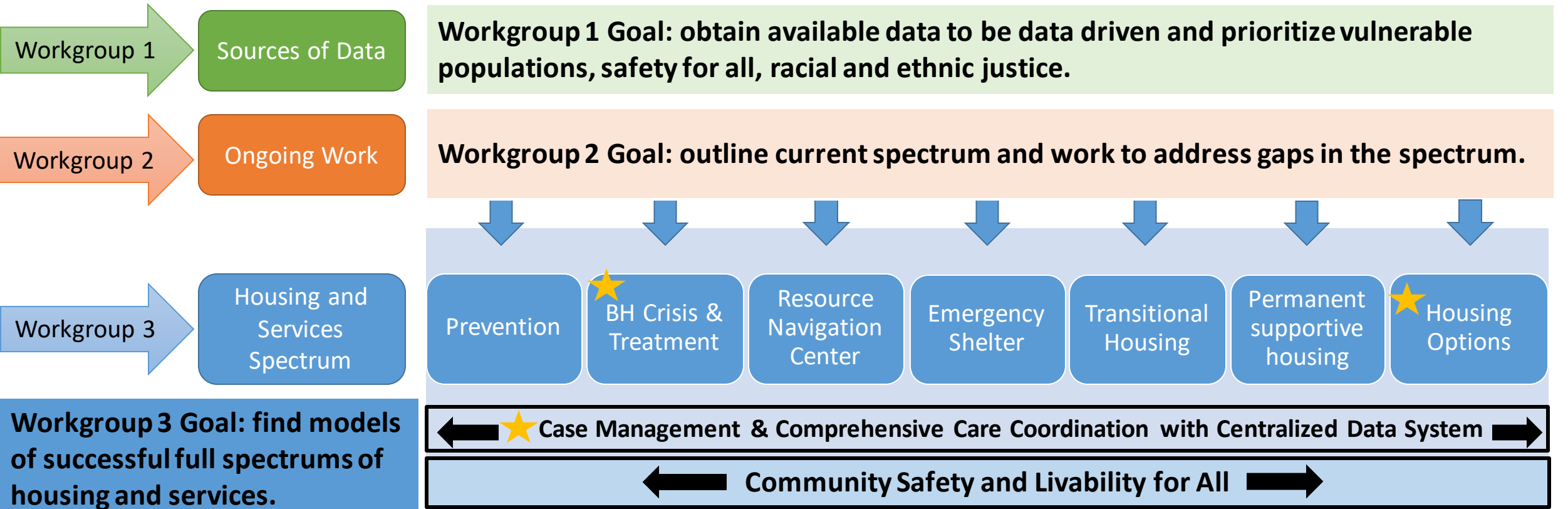
Reece Stotsenberg

Janie Tebeau

Community Progress from 2019-2021

- For the past 2 years, the HOPE Board has made progress with
 - Data collection
 - Research
 - Extensive community engagement, and
 - Formation of policy recommendations unanimously accepted by the city and county elected officials based on this transparent process.
- Lots of progress has been made with community providers and partners while this policy process happened.

2020: HOPE Housing and Services Model



**HOPE Board
Ideas 1/28/20**

★ 5 Keystone Strategies:
Strengthen Law Enforcement
and MH partnership

- | | | | | | | |
|--|--|---|---|--|---|---|
| <ul style="list-style-type: none"> • Surveillance for housing insecurity • Education and outreach • Training for professionals | <ul style="list-style-type: none"> • Immediate response, care, and treatment • 24 hour team on-call • Simultaneous MH and SUD treatment | <ul style="list-style-type: none"> • Permanent resource center open 24/7 • Intake, assessment, services • Reentry case management from corrections | <ul style="list-style-type: none"> • Permanent year-round shelters for all populations, low and high barrier • Open 24/7 with resources | <ul style="list-style-type: none"> • Car camping, microshelters, tiny villages, managed tent camping • Residence halls | <ul style="list-style-type: none"> • Increase PSH • Respite bed capacity • Rent assistance • Medical and behavioral support | <ul style="list-style-type: none"> • New construction requirements • Permitting/SDC relief for affordable housing • Tiny home villages • Infill/high density construction |
| <ul style="list-style-type: none"> • Advocacy, Education, and Outreach ★ • Balance between incentives and behavior for accountability and safety for all • City and county funding for case management, housing navigators, and oversight | | | | | | |

BH Crisis & Treatment

Street Outreach & Response

Resource Center Emergency Shelter

Transitional Housing

Permanent Supp. Housing

Housing and Prevention

2020 Gaps: Case Management & Comprehensive Care Coordination with Centralized Data

GAPS:

Assertive Community Treatment limited to 75 clients, with specific diagnoses
Decreased acute care hospital beds
Lack of psychiatry for non-county clients
Lack of housing (supportive and other)
Insufficient resident & outpatient treatment
No medical detox
No standardized assessment for all services

EFFORTS:

County recruiting for mental health in Alsea, Monroe, and Corvallis, exploring Crisis Respite

GAPS:

Samaritan HRT: Two LCSWs serving whole county and tri-county area
SORT: Volunteer group with other full-time jobs
JSYS: youth 12-25
No full-time peer response or linked to 9-1-1

EFFORTS:

CDDC collaborating, more on-site services, working on data collection

GAPS:

No shelter beds at Resource Center
No 24/7/365 access
Space for other providers, BH care
No shelter for couples, pets
No low barrier family shelter
Men’s & women’s cold weather only
Laundry, shower, and internet access

EFFORTS:

City, County and Unity Shelter working on men’s shelter
COI hoping to expand transition age shelter capacity
Working to fund women’s shelter year round

GAPS:

Only two permanent options with no capacity (Corvallis Housing First and COI)
RV/Car camping at Fairgrounds is COVID response

EFFORTS:

Expanding microshelters
County areas able to host up to 3 microshelters, car/RV at religious institutions

GAPS:

Huge gap in capacity compared to need
Need many more locations for different populations

EFFORTS:

Corvallis Housing 1st collaboration to expand capacity
HCDAB using CET funding for DevNW

GAPS:

Enough units – need at least 4800 to meet need

EFFORTS:

Rental assistance, COVID relief
Urban renewal district in South Corvallis will add units
Commonwealth LIFT funding for 53rd Flats

Behavioral Health Improvements:

Benton County Health Department added programs:

- Adult Drug Treatment Court 5.98 FTE
- Children and Family Outpatient Mental Health services (Including school-based MH = 9 FTE approved, 4 still vacant)
- CORE Team 0 new FTE, redirected current staff
- Additional outpatient therapist 1.0 FTE
- Behavioral Health Resource Team (in collaboration with the Health Clinics) 2.2 FTE

Samaritan Homeless Resource Team: 2 new licensed clinical social workers (LCSWs): one at CDDC and one at 3rd street commons, can respond to any location at any time for vaccination, transport, navigation. IHN funding approval for a new navigator position to support medical respite beds, about 12 in the tri-county region.

Pathfinder Clubhouse added supportive, training location and community hub for mental health.

Behavioral Health Improvements – Crisis

Crisis Response Services

Crisis Outreach Response and Engagement (CORE) Team pilot launched summer 2021 with one mental health staff and one law enforcement staff responding to 911 calls with a mental health situation. One year pilot to collect data on the staffing needs for crisis response.

Crisis Center

Benton County Health Department has received some funding to move forward with a Crisis Center for people in mental health crisis. Planned renovations during 2022. Opening date is still in progress.

Resource Center

- **Chris Sherrod, new Director of Community Impact hired by United Way, is coordinating key partners and providers to move forward with collaborating on a one-stop shop public benefits Resource Center:**
 - CSC, including Linn Benton Food Share
 - OR Cascade West Council of Governments (COG)
 - Samaritan
 - Benton County Community Health Centers (CHCs)
 - State Department of Human Services (DHS)

Resource Center

Corvallis Daytime Drop-in Center has expanded staff capacity and data reporting as a low-barrier resource hub.

- Paid Executive Director, Allison Hobgood, PhD.
- In last year went from 1 to 6 employees total.

- Anne Snell is Basic Needs Navigator – stimulus checks, application for SNAP, affordable housing first steps, vital records, community resource supports and connections, RX co-pay, transportation, access to phone and technology, and lost identification
- Ezler Jandrasi is Data and Information Coordinator; manages staff, provider, and CBO partner schedules, and tracks all client data
- Hezekiah Franklin – Frontline Community Wellness Staff who is consistent, trusted person to help folks navigate to CDDC behavioral health counselor or other resource connections
- Sarah Ligon – Homeless Employment Launching Project (HELP) Coordinator to connect folks to day labor jobs in the community and take next steps around employment
- Maddie Bean – Street Outreach and Response Team (SORT) Coordinator leading CDDC street outreach and advocacy initiatives. Have amplified direct street outreach into encampments from 1 day per week to 2 (W and F). SORT officially part of CDDC now.
- Samaritan nurses and social worker come Wed. and Fridays to connect guests to providers and other community resources.
- Collaboration with BC Harm Reduction to support needle exchange and STI testing M-Th; referrals to BCHD.
- Corvallis Housing First (CHF) collaboration with case managers.
- Open M-F 9a-12p basic needs and walk-in appointments; M-F 12-2p by appointment. COVID impacting operations. 150 volunteer hours per week.



Emergency Sheltering

- **COI** has added a transition age youth shelter for 18-24 year olds.
- **Corvallis Housing First** acquired the former Budget Inn motel, now the 3rd Street Commons, for Unity Shelter to operate 24 motel rooms for emergency shelter and COVID isolation.
- **Unity Shelter** has expanded locations, staffing, and bed capacity.
- **City** pursuing hosting 4 microshelters at City Hall.
- **County** opened 10 spots at Fairgrounds for over one year for car and RV camping. Currently figuring out the staffing needed and logistical issues to overcome to provide a county location for microshelters.
- **CHANCE** took over operating Albany-based Signs of Victory and saved it from closure, in its new incarnation as Second Chance. Expanded motel sheltering program during COVID.

Shelter Capacity Expansion

Shelters	population	Pre pandemic	Summer 2021	Available now	Waiting list	Full Capacity - Post pandemic 2022-23
Budget Inn	single, couples	n/a	16	0	*120	24
Microshelters (4 sites currently)	single, couples	n/a	26	0	*120	**29
Unity-- Men's shelter	Men	50	36	0	0	50
Unity-Room at the Inn	Women	18	22	0	1	22
COI	women, men, families practicing sobriety	74	54	0	38	85
Jackson Street Youth Services	youth/young adults	12	6	0	2	12
TOTAL		154	160	0	161	222
						68 added spots, 44% increase
* same waiting list						
** need additional sites						
CARDV		16	16		0	16



Transitional Housing

Unity Shelter has expanded locations, staffing, and capacity.

- **Unity Shelter's SafePlace** microshelter program has expanded to multiple sites, added dozens of microshelters, and hired many new staff to support these operations and individuals.
- 4 new sites with 26 microshelters for transitional housing.

Permanent Supportive Housing (PSH)

- **Corvallis Housing First** has secured state and federal funding for development of about 40 units of PSH at 3rd Street Commons. In predevelopment stage working with developers and city on possibilities.
- City and County have funded predevelopment and site improvements.

Prevention and ongoing support

- 170 Emergency Housing Vouchers prioritizing literally homeless and people experiencing domestic violence. 2 housing navigators (1 at CSC and 1 at Linn Benton Housing Authority) to help people find housing.
- Federal/state rental assistance allocated to CSC during COVID to help prevent homelessness.
- Corvallis School District hired 3 new family advocates with the Corvallis School District to support families experiencing homelessness.

Housing Options

- City of Corvallis and Benton County have hired new staff in community development with affordable housing development experience:
 - Brigetta Olson, Housing Manager with the City of Corvallis
 - Darren Nichols, Community Development Director with Benton County
- New state law allowing/requiring “middle housing” in all residential zones for more housing options for developers.
- State and federal funding for affordable housing incentives at highest level.

Other Progress

- Data improvements: new data analyst position at CSC to support providers.
- New County Equity, Diversity, and Inclusion (EDI) Coordinator JoeHahn (mononym, he/they pronouns) to support EDI efforts across all county departments.
- Benton County Commissioners decided to have the county join the Housing Alliance to amplify legislative advocacy.
- Community Court program was adopted locally by Judge Blake to provide help to low-level offenders struggling with housing, mental health, and addiction and match participants with local non-profit agencies.
- Legislative changes on shelter siting, middle housing, and funding.

HOPE Board Member Feedback

1. What worked and was successful?
2. What are the areas for improvement going forward?
3. Who plans to serve a second two-year term?

HOPE Board Member Feedback

1. What worked and was successful?

- Structure and Process
- Staff Person was instrumental in success and progress
- Educational for board members and greater community
- Relationship building
- End Result Recommendations: biggest tangible success.

What worked well for board members?

Structure and Process:
Bylaws dictated the process without emotion driving it. Public process gives transparency, public vetting, and accountability. Data drove it and values in bylaws. Gives political cover/support for electeds to make hard decisions.

- “Formal structure and relationship to city and county with staff member is working exactly how it was intended to” with high-level participation from city council, county commissioner, and CAA Director allowed information sharing to move quickly.
- Having a place/venue for discussions around unhoused and housing insecure provides broad system picture and a convener at the system level.
- Virtual meetings allowed attendance more often by more people – keep hybrid virtual and in-person meetings. Have one per quarter that is all in-person once we can. (supported by most board members)
- Work groups: worked well for many board members. Could focus, hone in on details, people could speak up who might not in the bigger group, and build relationships.
- Community Outreach: engagement, surveys, focus groups work was very valuable. Everyone felt engaged or had an opportunity to be engaged.

**What worked well
for board
members?**

**Paid staff member
working on
homelessness solutions.**

- **Staff Person was instrumental in success and progress:**
 - facilitating,
 - pushing along,
 - organizing,
 - agendas,
 - powerpoints and presentations,
 - leadership,
 - managing personalities,
 - staying on task and making progress.
- **Paula supporting notetaking was great.**

What worked well for board members?

Educational components and learning about the community.

- Educational for board members and greater community
- Learned about our community
- How government/advisory boards operate, zoning and development
- Grew to appreciate expertise of folks on the board and people from city and county
- Diversity Equity and Inclusion (DEI) consultant work very informative.

What worked well for board members?

Relationship building

Lots of mutual respect built among board members.

Everyone worked hard, especially in work groups.

Relationships are what make effective collaborative solutions happen over time.

What worked well for board members?

End Result

Recommendations: biggest tangible success.

- All city and county elected officials unanimously agreed on 12 recs because of the process, data, staff support, community engagement, and transparency.
- City and county high-level staff working to implement a part of the homelessness solutions continuum.
- Previous stuff is more intangible successes (relationships, education, transparency, etc.)

HOPE Board Member Feedback

2. What are the areas for improvement going forward?

- Role Clarity
- COVID threw a wrench into everything
- More staffing Needed to work on this topic
- Differing levels of knowledge, personalities, and passions on board
- Would like to tackle other topics going forward
- Work groups
- Board representation
- Quarterly HOPE meeting for public forum

Where are there areas for improvement?

- Clarify the role of the board: To recommend policies from data, research, and public engagement.

- **Role Clarity:** needs to be re-articulated routinely due to the tension between planning/research/policy work and immediate solutions needing to be implemented out in the community.
 - Lots of board members want to effect change immediately – they can do that via another avenue.

Where are there areas for improvement?

- Staffing Needed to work on this topic.
- Bylaws outline more than what we're able to do with one current staff member.

- Communication about progress being made – communicate with board and publicly. Need to be creating better relations with community with more communication out in community spaces. Community thinks HOPE controls homelessness and can do something immediate. Media presentations and communications about regional stuff.
- Manager/project coordinator to manage implementation of all these projects.
- Improve data, measurement, formalizing success parameters and metrics – these need staff, not a volunteer board. Bylaws outline annual data collection and dissemination as standard practice. Projection estimates on future growth, development and needs.
- We have a whole justice system improvement contract with lots of paid contracted staff support, where's the investment on this topic like that one?
- Need a paid team of 3: project management/coordinator, communications/facilitation, and financing/grants to work on multiple different issues and projects concurrently.

Where are there areas for improvement?

- Managing differing levels of knowledge, passion, and personalities on board.

- How do we educate board members who are interested in a topic without duplicating education for those with a Masters on the topic?
- How do we make space for people who take longer to process before participating or who are shy?
- Really need to emphasize a parking lot for issues that are not priority or not on-topic at the moment. Some people argue the same point or say the same off-topic thing every meeting.
- Managing passion about a certain facet of a solution when this board is about a multifaceted system and set of problems that require multifaceted solutions – must focus on the whole spectrum.

Where are there areas for improvement?

- Would like to tackle other topics going forward.

- Jobs
- Regular old affordable housing not just for chronically homeless
- Vicarious trauma and well-being training for members as this is a burnout topic
- Sequential intercept model in a system like law enforcement
- Housing First as a policy across all investments in the housing spectrum

Where are there areas for improvement?

- Work group structure can be improved.
- Work from the work groups almost had to be duplicated with the larger board and was not always given same weight or respect of some other work groups.
- No benefit to work group deliverable if it's disregarded by rest of board.
- Some work groups were unwieldy – might work better to assign key strategic players specific tasks.

Where are there areas for improvement?

- Board representation.
- The Board is supposed to be diverse – lacking business and community/neighborhood perspectives that are not service providers/advocates
- Recruit more people of color
- Include key Executive Directors on the board to have collaborative strength of system leaders who are now working on implementation

Where are there areas for improvement?

- **Communications and community-wide education.**

- **Quarterly HOPE meeting for a public forum:**

- education,
- messaging,
- questions from community,
- relationship building.

HOPE Board Member Feedback

3. Who plans to serve a second two-year term?



15 Board Members continuing on Board:

Catherine Biscoe

Karyle Butcher

Bruce Butler

Bryan Cotter

Anita Earl

Joel Goodwin

George Grosch

Barbara Hanley

Charles Maughan

Pegge McGuire

Dharmakrishna Mirza

Jim Moorefield

Andrea Myhre

Jan Napack

Reece Stotsenberg

Board Member Changes & Vacancies

- **New role member on HOPE Executive Committee**
 - Business Community: Christina Jancila served the first 2-year term. Cindee Lolik from the Co-Op will serve during the second 2-year term starting in January 2022.
- **Board members moving on:** Janie Tebeau, Aleita Hass-Holcombe, Flip Anderson.
- **Four vacancies on the board (21 members total).**
- **Recruitment priorities:**
 - People from communities of color
 - Business owners
 - People who have experienced homelessness

Feedback in 1-on-1s:

To support implementation of previous recommendations

- communications
- characterizing the interdependence of the recommendations
- researching practices that guide city/county investment in the recs, such as Housing First as a policy for all of the different system components
- researching best practices for implementing different recommendations, like successful timelines, capacity based on population, collaborative organizational structures to work on solutions or deliver services, etc.
- have a work group work with CSC to put together success metrics for the recs
- play an evaluation role for progress of system and of recs implementation



Key question: what role could the HOPE Board play in supporting implementing of your recommendations?

Three likely areas:

1. evaluation role,
2. communication role,
3. researching successful models of collaboration on homeless solutions, including researching successful timelines of implementation and realistic capacity.

Next steps...

Meetings scheduling:

- December cancelled
- January reconvene for the start of the next 2-year term

Julie will send out recruitment materials for 4 open board positions. Recruitment is ongoing but efforts will be focused for the next month.

HOPE Executive Committee will discuss future efforts for this board. Communicate with city, county, and provider leaders to collaborate on how best to support implementation in the near future.





**Benton
County**





**Home, Opportunity, Planning, and Equity (HOPE)
Advisory Board Meeting
DRAFT Minutes
November 17, 2021 from 4 pm to 6 pm
ZOOM Meeting**



- Members Present:** Florence (Flip) Anderson; Catherine Biscoe; Karyle Butcher; Bruce Butler; Bryan Cotter; Anita Earl; Joel Goodwin; George Grosch; Barbara Hanley; Aleita Hass-Holcombe; Christina Jancila* (Business Associate); Charles Maughan* (Corvallis City Council); Jim Moorefield* (Co-Chair); Jan Napack* (Corvallis City Council); Reece Stotsenberg* (Co-Chair).
- Excused:** Xan Augerot* (Commissioner, Benton County); Pegge McGuire*
- Absent:** Bryan Cotter; Andrea Myhre.
- Staff Present:** Julie Arena (Benton County Health, HOPE Program Coordinator); Paula Felipe (Benton County Public Health, recorder); Joe Hahn, Diversity Coordinator.
- Guests:** *Executive Committee Members.

- I. **Welcome and Introductions.** Reminder of culture of agreements. Meeting next month in December is cancelled. In January reconvene fourth Wednesday of month from 4-6 pm. January meeting will start a new 2-year term for board members.
- II. **Public Comments (limited to 2-3 minutes).** No Comments.
- III. **Approval of Minutes: MOTION** made by Bruce Butler to approve the October 27, 2021 minutes. Seconded by Charles Maughan. All in favor; **MOTION** passed. Roll Call: Abstained due to not being in attendance at October meeting: Jim Moorefield; Catherine Biscoe.
- IV. **Recap of Two Years Work and Progress made in the Community** – see [slides](https://www.co.benton.or.us/sites/default/files/fileattachments/health_department/page/7203/hope_advisory_board_meeting_11-17-21.pdf):
https://www.co.benton.or.us/sites/default/files/fileattachments/health_department/page/7203/hope_advisory_board_meeting_11-17-21.pdf
For the past 2 years, the HOPE Board has made progress with:
 - Data collection
 - Research
 - Extensive community engagement, and
 - Formation of policy recommendations unanimously accepted by the city and county elected officials based on this transparent process.
 - Lots of progress has been made with community providers and partners while this policy process happened. (See powerpoint slide on website for more details on 2020: HOPE Housing and Services Model).
 - See powerpoint for more details on “2020 Gaps: Case Management & Comprehensive Care Coordination with Centralized Data”

Behavioral Health Improvements:

- Benton County Health Department added programs:

- Adult Drug Treatment Court 5.98 FTE
- Children and Family Outpatient Mental Health services (Including school-based MH = 9 FTE approved, 4 still vacant)
- CORE Team 0 new FTE, redirected current staff
- Additional outpatient therapist 1.0 FTE
- Behavioral Health Resource Team (in collaboration with the Health Clinics) 2.2 FTE
- **Samaritan Homeless Resource Team:** 2 new licensed clinical social workers (LCSWs): one at CDDC and one at 3rd street commons, can respond to any location at any time for vaccination, transport, navigation. IHN funding approval for a new navigator position to support medical respite beds, about 12 in the tri-county region.
- **Pathfinder Clubhouse** added supportive, training location and community hub for mental health.
- **Crisis Outreach Response and Engagement (CORE) Team** pilot launched summer 2021 with one mental health staff and one law enforcement staff responding to calls related to a mental health crisis. One-year pilot to collect data on the staffing needs for crisis response.
- **Crisis Center:** Benton County Health Department has received some funding to move forward with a Crisis Center for people in mental health crisis. Planned renovations during 2022. Opening date is still in progress.

Community Organizations Changes:

- Resource Center: Chris Sherrod, new Director of Community Impact hired by United Way, is coordinating key partners and providers to move forward with collaborating on a one-stop shop public benefits Resource Center:
- Corvallis Daytime Drop-in Center has expanded staff capacity and data reporting as a low-barrier resource hub.
 - Paid Executive Director, Allison Hobgood, PhD.
 - In last year went from 1 to 6 employees total.
 - Anne Snell is Basic Needs Navigator – stimulus checks, application for SNAP, affordable housing first steps, vital records, community resource supports and connections, RX co-pay, transportation, access to phone and technology, and lost identification
 - Ezler Jandrasi is Data and Information Coordinator; manages staff, provider, and CBO partner schedules, and tracks all client data
 - Hezekiah Franklin – Frontline Community Wellness Staff who is consistent, trusted person to help folks navigate to CDDC behavioral health counselor or other resource connections
 - Sarah Ligon – Homeless Employment Launching Project (HELP) Coordinator to connect folks to day labor jobs in the community and take next steps around employment
 - Maddie Bean – Street Outreach and Response Team (SORT) Coordinator leading CDDC street outreach and advocacy initiatives. Have amplified direct street outreach into encampments from 1 day per week to 2 (W and F). SORT officially part of CDDC now.
 - Samaritan nurses and social worker come Wed. and Fridays to connect guests to providers and other community resources.
 - Collaboration with BC Harm Reduction to support needle exchange and STI testing M-Th; referrals to BCHD.

- Corvallis Housing First (CHF) collaboration with case managers.
- Open M-F 9a-12p basic needs and walk-in appointments; M-F 12-2p by appointment. COVID impacting operations. 150 volunteer hours per week.

Emergency Sheltering:

- **COI** has added a transition age youth shelter for 18-24 year olds.
- **Corvallis Housing First** acquired the former Budget Inn motel, now the 3rd Street Commons, for Unity Shelter to operate 24 motel rooms for emergency shelter and COVID isolation.
- **Unity Shelter** has expanded locations, staffing, and bed capacity.
- **City** pursuing hosting 4 microshelters at City Hall.
- **County** opened 10 spots at Fairgrounds for over one year for car and RV camping. Currently figuring out the staffing needed and logistical issues to overcome to provide a county location for microshelters.
- **CHANCE** took over operating Albany-based Signs of Victory and saved it from closure, in its new incarnation as Second Chance. Expanded motel sheltering program during COVID.
- **Shelter Capacity Expansion:** added 68 new spots; 44 percent increase in shelter capacity in last 18 months. (see slide in powerpoint for more details).

Transitional housing:

- Unity Shelter's SafePlace microshelter program has expanded to multiple sites, added dozens of microshelters, and hired many new staff to support these operations and individuals.
- 4 new sites with 26 microshelters for transitional housing.

Permanent Supportive Housing (PSH):

- **Corvallis Housing First** has secured state and federal funding for development of about 40 units of PSH at 3rd Street Commons. In predevelopment stage working with developers and city on possibilities.
- City and County have funded predevelopment and site improvements.

Prevention and ongoing support:

- 170 Emergency Housing Vouchers prioritizing literally homeless and people experiencing domestic violence. 2 housing navigators (1 at CSC and 1 at Linn Benton Housing Authority) to help people find housing.
- Federal/state rental assistance allocated to CSC during COVID to help prevent homelessness.
- Corvallis School District hired 3 new family advocates with the Corvallis School District to support families experiencing homelessness.

Housing Options:

- City of Corvallis and Benton County have hired new staff in community development with affordable housing development experience:
- Brigetta Olson, Housing Manager with the City of Corvallis
- Darren Nichols, Community Development Director with Benton County
- New state law allowing/requiring "middle housing" in all residential zones for more housing options for developers.

- State and federal funding for affordable housing incentives at highest level.

Other Progress (supporting goals of HOPE board):

- Data improvements: new data analyst position at CSC to support providers.
- New County Equity, Diversity, and Inclusion (EDI) Coordinator JoeHahn (mononym, he/they pronouns) to support EDI efforts across all county departments.
- Benton County Commissioners decided to have the county join the Housing Alliance to amplify legislative advocacy.
- Community Court program was adopted locally by Judge Blake to provide help to low-level offenders struggling with housing, mental health, and addiction and match participants with local non-profit agencies.
- Legislative changes on shelter siting, middle housing, and funding.

V. Summary of Feedback from HOPE Board Members: Discussion

What worked and was successful? (See powerpoint slide for more details)

- Structure and Process
- Staff Person was instrumental in success and progress: facilitating, pushing along, organizing, agendas, powerpoints and presentations, leadership, managing personalities, staying on task and making progress; Paula Felipe supporting with notetaking was great.
- Educational for board members and greater community
- Relationship building
- **End Result Recommendations: biggest tangible success**
- All city and county elected officials unanimously agreed on 12 recs because of the process, data, staff support, community engagement, and transparency.
- City and county high-level staff working to implement a part of the homelessness solutions continuum.
- Previous stuff is more intangible successes (relationships, education, transparency, etc.)

What are the areas for improvement going forward? (See powerpoint for more details).

- Role Clarity
- COVID threw a wrench into everything
- More staffing needed to work on this topic
- Differing levels of knowledge, personalities, and passions on board
- Would like to tackle other topics going forward
- Work groups
- Board representation; need more diversity
- Communications and community-wide education
- Quarterly HOPE meeting for public forum

Who plans to serve a second two-year term?

- 14 board members continuing to serve
- Five vacancies on the board (16 members currently, 21 members total possible).
- New role member on HOPE Executive Committee Business Community: Christina Jancila served the first 2-year term. Cindee Lolik from the Co-Op will serve during the second 2-year term starting in January 2022.
- Board members moving on: Janie Tebeau, Aleita Hass-Holcombe, Flip Anderson,

Dharmakrishna Mirza.

- Jim and Reece no longer co-chairs when term ends, so elect co-chairs in January.
- Recruitment priorities:
 - People from communities of color
 - Business owners
 - People who have experienced homelessness
- Thanks all folks who served last two years.
 - Flip: appreciated being on the advisory board; dedication of people, volunteers and professionals; fantastic opportunity.
 - Aleita: my role with HOPE to be historical perspective which was important in creation of strategies and recommendations and feels like good time now to allow others to get involved moving forward with our recommendations.
 - Julie: loved working with you all. We will work with Joe Hahn and Rocio Munoz on recruitment and with Kate Porsche.

DISCUSSION:

- Julie thanked all the board members for their service.
- Catherine: Appreciate encompassing all pieces on homelessness and housing programs; reflects there is motion forward. Well put together with more detail.
- Julie: thanks to Paul Bilotta for his input.
- Aleita: would like to have those slides. Yes, they will be on HOPE Advisory board website.
- Catherine: Useful tool to show to Philomath council and others—nice presentation of work.
- Barbara: Shows coherent and cohesive work that has been done. One question: why aren't we building more houses? As we communicate this info, share that infrastructure has to come first so when homes and shelters are being built they can be managed effectively and not collapse on itself. Have to have infrastructure in place to be successful and communicate with the public.
- The Powerpoint will go out to everyone.

VI. **Key question: what role could the HOPE Board play in supporting implementing of your recommendations?**

Three likely areas:

- evaluation role,
- communication role,
- researching successful models of collaboration on homeless solutions, including researching successful timelines of implementation and realistic capacity.
- **Feedback in 1-on-1s: To support implementation of previous recommendations**
- communications
- characterizing the interdependence of the recommendations
- researching practices that guide city/county investment in the recs, such as Housing First as a policy for all of the different system components
- researching best practices for implementing different recommendations, like successful timelines, capacity based on population, collaborative organizational structures to work on solutions or deliver services, etc.
- have a work group work with CSC to put together success metrics for the recs

- play an evaluation role for progress of system and of recs implementation

DISCUSSION:

- Jan: Need to know extent and scope of issue/problem we are dealing with—need evaluation of data on homeless including sectors impacted to approach strategically. Julie: Your workgroup on data did excellent work already. Jan: we don't have a reliable, robust system. We need to know people by name and need and that they successfully transitioned out of homelessness. Julie: CSC have data analyst hired who can provide data as local providers input data in that system.
- George: Should we use the next steps process to communicate with elected bodies for their feedback regarding ideas for additional policy areas for us to examine? Can we do a deeper dive into areas they would like to have looked at? An example would be look at how housing gets built, the opportunities, barriers and specific goals to meet needs.
- Charles: On long term planning; look at eviction moratorium ending; rent increase allowable by state 9.9 percent; people's wages aren't going up that much. Contributes to stress and downward spiral. People's incomes do not match rent increase. Think how to stabilize housing. What can we do as city and county to curb this issue? What resources can provide long term stable housing for current and future rent burden?
- Catherine; how to address affordable housing? Look at long range planning and how to leverage HOPE capacity to promote solution. Regional conversation on housing needed and bring to policy makers.
- Jan: Agree with Charles--income level is just one ceiling...for those who earn less than \$30K housing opportunities will degrade given "present state" of affordable housing.
- What is long range plan and how to promote affordable housing? Philomath cost burden for rents. How to leverage HOPE Advisory board capacity so easier to attain solution to affordable housing? Regional conversation on housing; bring conversation to policy makers.
- From Kenneth Marshall (in Chat): Rent control will only exacerbate the problem. I am a Realtor with over 45 years experience. Affordable housing is the solution. High development fees and regulatory burdens do not contribute to lower housing costs. Part of the housing problem in Corvallis is that nearly 40% of the single family homes are owned by investors, not those who live in them. This is driven by the university. If the university built more dorms and required students to live on the campus for more than just one year, we would be a lot closer to resolving the pressure on rentals.
- George :I don't know who mentioned rent control? But we should be able to have conversations around these topics in order to find meaningful solutions.
- Barbara: The university plays a substantial role in the lack of affordable housing in the area, and the underlying economics that perpetuate it.
- George: That's true and it is a factor that that needs to be considered but it is not about why we are here, it's about what do we really need and how do we get there. Listening and creating an environment of support for difficult actions. Nobody asks how do the citizens actually subsidize growth. Government investment in housing is exactly the same as the subsidies given to private developer's.
- George: How do we help people understand how local government subsidizes private development to the exclusion of affordability?
- Kenneth Marshall: Has there been any effort to research other communities that may have had success in resolving some of the homeless issues?

- George: Want community where people can prosper. No one is assigned to prosperity. Having job to afford living. Looking at for 30 years; not enough housing for people working minimum wage jobs; where are jobs? How to get affordable housing for below medium wage? Think about zoning and land? Come up with new ideas—not about data—people need place to live and prosper.
- Jim: Faced pandemic in the beginning of our work; Look at big picture and root causes. Why does HOPE exist? Address those big questions and root causes. Look at more ambitious goal saying homelessness is immoral and unjust; and evolve into that discussion.
- Aleita: elephant in the room; idea that public housing is not popular; need to bring it into a space of conversation and movement forward; city could do public housing. Has been done by churches and non governmental agencies.
- Christina: On affordable housing, today it takes 2 people; I pay \$15 an hour as employer; cannot compete with corporations that can hire for \$20 an hour. Puts small business at disadvantage; need workers locally and rents competing; domino effect. If it were not for the housing vouchers--only thing keeps chin above water. Public housing has not had great outcomes and high cost; would need serious reflection. As far as economic prosperity; minimum wage; costs go up and shortage of workers; there is an other side of coin; takes 2 people to afford rent nowadays.
- George: need to help people understand; public housing subsidize doesn't mean giant concrete skyscrapers in run down neighborhoods; can see 600 units in different locations in Corvallis that people can afford to pay. Govt investment in housing is only way we can drive down costs.
- Karyle: disconnect between city aspirations and how people respond to housing in their neighborhood. Want vibrant downtown, yes, developers say hard to build here. Need to engage in conversations; Need housing to aspire to our goals.
- Anita: we looked at how to communicate with partners better; need work with broader community at large; if we don't have buildings; mental health counselling; case managers; just go around in circles; need to attract mental health providers and need better dialogue with greater community. Corvallis is progressive town and still hesitant to commit to land. Elevate the dialogue. Want to be part of outreach efforts.
- Catherine: We need more housing; Outreach with public commentary; talk about what truly affordable housing looks like. How to reframe goals and have high level planning conversations with policy makers and community engagement. How to subsidize development?
- Bruce: action steps: get more practical and action oriented; we have invested a lot—it is a launching pad for action; implementation.
- Reece: board could utilize communications before hires made through the county and we could serve as communicators; want to hear about more standard, low income housing; also drug rehabilitation and how drug addiction impacts immediate problems community has.
- Jan: Need to do more public outreach.
- Jim: housing availability and costs—big topic; need to explore more. Don't assume it hasn't been talked about—a lot of talks on housing supply and development happening with national, state, and regional importance. Way to focus that discussion on area of purview; understand data; can become more targeted on what kinds of housing gets built and who it is for. We can look at how many families are in need of housing; mental health needs; alcohol and drugs impacts; and so forth. So, we can get targeted on what we want to

achieve.

- Julie: working with Paul and Brigeta and homeless service providers on how many are in shelters and experiencing homelessness and understand how city can utilize investment in development to target people who are homeless.
- Julie: Chamber of Commerce reached out after the presentation on survey results to board; how to collaborate better with HOPE board on housing and homeless; Julie meets regularly with Chamber; Downtown Business Association; Economic development with City among others; how business community is better engaged and informed with HOPE efforts.
- Barbara: I would also like to see HOPE communication outreach with the community and policy makers, but also the Chamber of Commerce, and business owners and trade associations.
- Karyle: concerned about people with jobs who cannot afford home here. Also, community development website informative; how to help people who are rent burdened.
- Julie: (responding to comment in chat): Oregon is unique with tax law and land development codes different from other states; understand constraints and structure of Oregon law.
- Barbara: could host a housing summit with community stakeholders with actionable data. To use data to make decisions.

VII. Next Steps:

- Meeting scheduling:
 - December cancelled
 - January reconvene for the start of the next 2-year term
- Julie will send out recruitment materials for 5 open board positions. Recruitment is ongoing but efforts will be focused for the next month.
- HOPE Executive Committee will discuss future efforts for this board. Communicate with city, county, and provider leaders to collaborate on how best to support implementation in the near future.

VIII. Meeting was adjourned at 5:55 pm.