**Welcome!**

**CE Prioritization Policy**

* Recap of prioritization (last meeting, discussion of smoking)
* Timeframe: current policy through 12/31 which may be extended
  + December GB meeting to discuss what a policy may look like moving into 2021
  + May be able to change prioritization depending on how the region does through the holiday seasons (ICF)
* Recent changes in CDC underlying list of medical conditions (pregnancy)
* We encourage those to circle back to the covid health screening as the guidance changes and update the form with the client information
* The scoring and tool that we’re using is really helpful to clearly see who should be prioritized and who should go to the next vacancy, etc.
  + Looking at diversion
    - It has become easier when we’re looking at covid high risk population using an assessment tool
  + Consistency between 2 CES operators and how they interpret a policy
* Nassau County concerns with motel stayers
  + Less of an ability of CES for being a response for immediate referral
  + NC is interested in discussing this more and will be joining our next call in December
* Concerns with long term households that do not have CDC underlying illness and highly vulnerable households
  + How are we addressing their needs?
  + We will discuss this more in December as well
* Please let us know more feedback for our next meeting to discuss the covid prioritization policy

**Assessment Tool Implementation**

* (TSCLI) It is going well - the assessment tool in place has made a tremendous difference with the list and making it manageable
* 45 people on the DV CES waitlist, with the new prioritization and assessment - 15 people who scored 10 points or above (people who are primarily living in shelters, high risk of covid-19.)
  + These are the ones we are focused on right now (getting them prepared to get paired up with a housing program)
  + Anyone who scored lower, we have a housing specialist and in the process of hiring a second one to work with those people on diversion work
  + Coordinating a meeting with Mike with Angel from OCD - how to utilize HP funds for people fleeing DV and end up falling lower on the list and who have more of an immediate need for housing because they are not in a shelter
* Soon we will have the addition of Circulo de la Hispanidad - transitional to RRH program (first one in our region)
* TSCLI also applied for ESG RRH funds and hired an Employment Specialist

**PHA Set Asides**

* Town of Brookhaven - interested in coming to the table to discuss putting in place a process where CES in coordination with PSH and RRH providers identify households that could potentially gain access to housing choice vouchers through the town of Brookhaven (through a set-aside process that they are looking to put in place)
  + Initial planning meetings with the Town of Brookhaven
  + Projecting - 20 set aside vouchers for HH’s that are either stably housed in PSH right now (within the town of Brookhaven) that are no longer in need of PSH support services and are interested in transitioning out of PSH program onto a HC voucher rental subsidy as well as RRH households that have achieved housing stability but are severely rent burdened
* Jess sent out an updated transfer policy document to our CoC Partners - document includes an explanation who we are looking to identify in both PSH and RRH programs (CES will play a large role in that in that we will have to receive applications and referrals from PSH and RRH partners and determine what their needs are and coordinate those HH’s - have a separate waiting list for HH’s that can transition onto town of Brookhaven vouchers when they become available and provided to us from set aside program. Then looking to coordinate a transition and do transition case management in coordination with PSH and RRH.
* Not in place right now but could be in place quickly
* Within the Town of Brookhaven, that is where the majority of our PSH beds are (funded through CoC)
* Town of Brookhaven is currently working on their end to create written procedures for how this is going to work
* Pros of this: transition a HH out of a PSH program will then create another vacancy where we place another long-term or covid high risk family or single adult into that unit
* Our covid response and cohort work has led to this
* Town of Islip and Nassau County
  + Awarded additional vouchers under Housing Choice voucher programs

**2021 PIT Count**

* HUD has finalized the guidance for their expectations of CoC’s for conducting the PIT Count
* Document was added to calendar invite and chat
* Overview of Guidance: if you are doing an unsheltered count, please make sure to do it safely and considering all of the health risks of covid-19 and considering CDC guidance
* Observational tool option (used before in the past - 2016)
  + May have to bring this back for 2021 PIT Count
  + For those who did not want/feel comfortable engaging with somebody
  + Can document where they saw someone and identified characteristics, etc.
* Ideas - for street outreach programs that are already in operation, it doesn’t make sense for them not to gather information if they are already out supporting people in the field
  + Working directly with our Street Outreach Committee and coordinate with partners who are doing street outreach work to see if they can gather this information and get it to us
  + Any gaps of Street Outreach Committee not covering certain areas, we would do a socially distanced approach to counting people (based on observation - i.e. being in their car, driving past the known locations, have essential supplies that they can drop to people from a distance, and people can go and get those supplies)
* Feedback from GB
  + Have any other CoC’s expressed their concerns for the 2021 PIT Count?
    - Areas that are pushing back to not do a count - largest community spread rates currently (i.e. Arizona, middle America, etc.)
  + Most CoC’s want to do a PIT Count but want to do it safely
    - Observations or relying on drop in centers (where people are already going and can gather that information without additionally sending people out in the community)
    - Engaging people in encampments - highest on our radar with maintaining safety (LICH intends to take on probably in partnership with the counties)
    - How to address encampments with a big capacity, etc. and dropping off supplies from a distance
    - HUD is more flexible with the amount of information you need to gather about somebody
  + Important for us to do the count
    - Spread it out across a period of time TBD
    - Need to be mindful of percentages as we’re increasing (if schools are shut down, etc. we may need to rethink that)
    - Come up with a Plan A and B and wait for what the Governor is doing in terms of shutdown status
  + Need extra PPE for staff and clients
* We will come up with a written plan based on all the different scenarios and present that plan at the December GB meeting and have additional guidance and conversations with street outreach partners before then which will be incorporated

**Built for Zero**

* A National initiative that Jess, Thanh, Stephanie, and Mike are apart of
* They are putting together a cohort to develop language around how we determine goals and what ending homelessness looks like and some of the ways we articulate our objectives better as a country and on a CoC level around homelessness
* They put out a potential opportunity for people with lived experience they want to hear from directly and get feedback from how we can better define goals/objectives and better understand the problem of homelessness and how we talk about solving it in a goal oriented way
* Mike sent an email out to the GB - specifically asking to help identify 1 to 3 PLE in the community - highlighted an interest in youth and family homelessness as well as reentry
  + A potential opportunity that can be beneficial for our region
  + If interested or may know someone who is interested (approaching Dec 1st), please respond to Mike in the GB email and let him know