

## 9/12/2022 PLE Committee Meeting

Attended: Bruce, CJ, Rebecca

Did not attend: Atalie, Grant, John

Note: Alysa resigned

Facilitators: Jen, Kraig, Margaret, Mary, and Wendy

Ideas about how to get more consistent attendance

Set meeting date each month

Bruce: yes

Rebecca: yes

Rebecca: Mondays are hard

Bruce: I'm flexible

CJ: my employer knows that I'm part of this group, so I can meet whenever other people can meet

Mary thanked members for signing the letter of support for the CoC Plan. Discussion about how the SNOFO application process works

Bruce (in Longview):

1. Affordable housing – Barrier for people with criminal history, especially felonies; can only live in certain areas; 40% of parolees in White Settlement are pedophiles are living in the same areas; homelessness is a result of other things; domino effect
2. Rental rates are out of control

Wendy:

Are there scoring criteria in the SNOFO for housing navigation and landlord engagement?

MRS: Yes

Rebecca: Denton is a large county but kind-of a smaller city. Big barrier is: no medical detox facility. Big barrier: allowing people to live in only certain areas

Bruce: No detox in Longview; people have to go to Tyler

MRS: How could Be Well Texas help with detox

Bruce went to Hiway 80 Rescue Mission for treatment, learned he was hypoglycemic, and that helped

CJ: we need addiction counseling

Mary showed Be Well Texas info

Wendy: once people are ready to ask for help

Rebecca:

3. Accessing medication management for your mental health; MHMR is good unless you have insurance;

CJ:

1. Developing strategies for re-entry and self-sufficiency
2. A lot of our population have mental health concerns
3. Housing First is good, but if we're putting someone into HF when they're unstable is not a good idea
4. SUD recovery
5. Many people are scared at the prospect of being responsible for housing. The transition from being in a homeless situation to being on your own can be really hard

MRS: HF is not Hsg Only

CJ: In my org we have a transitional shelter (hotel room) after emergency shelter, they have a roommate, have case mgt staff, deliver meals to them daily

MRS: so maybe the model your agency uses could be used in more areas around the state

CJ: interagency cooperation is critical

Wendy: That model works. COVID funds gave us opportunity to shelter people in hotels. Going directly from unsheltered to housing is a big jump. 14 of 14 people we helped are still housed today.

MRS: SNOFO has more eligible populations than the regular CoC Program will

Rebecca: what CJ described is what worked for me. You're in survival mode and can't think about anything besides getting shelter and water and food

KBF: People have been let down by the system

Rebecca: You're not resistant; you've been damaged by the system

Wendy: we get people into housing, and a handful of them just will not participate; costing our agency money for damages; they won't let you into their apt. How can we do things differently? Could there be other options for people in that mindframe?

MRS: can be seen as harm reduction

Wendy: she's going to

KBF: if you've burned all your bridges, you're out of luck

Bruce: when people are refusing services. They really believe a shelter or housing program is making money off of them. "I'm not staying there and have them make money off of me."

MRS: maybe refer people to APS, LMHA, hospice

CJ: my board president once told me, "I'm not going to work harder than you." "We're assisting you with your journey."

KBF: Rock bottom is not rock bottom because you can always dig deeper

MH: It's up to people to decide for themselves when they want help, but the community needs to have resources available when people want/need them