

CONTINUUM OF CARE (CoC) BOARD

MARCH 16, 2022 | 3:00-5:00PM

ZOOM MEETING (LINK WILL BE SHARED VIA EMAIL)

TIME	AGENDA ITEM
3:00pm	1. Call to Order
3:01pm	2. Welcome/Introductions
3:03pm	3. Public Comment
3:08pm	4. Approval of Agenda (ACTION)
3:10pm	5. Approval of Minutes (ACTION)
3:12pm	6. SafeHouse Center Update – <i>Gregory Dill, Office of Community and Economic Development (OCED)</i>
3:32pm	7. Shelter Updates (Individuals) a. <i>Dan Kelly, Shelter Association of Washtenaw County (SAWC)</i> b. <i>Krista Girty, Ozone House</i>
3:42pm	8. Shelter Updates (Families) a. <i>Marla Conkin, Salvation Army</i> b. <i>Rhonda Weathers, SOS Community Services</i> c. <i>Ellen Schulmeister, IHN at Alpha House</i> d. <i>Kim Montgomery, SafeHouse Center</i>
3:52pm	9. New Human Services Partnership – <i>Teresa Gillotti, Office of Community and Economic Development (OCED)</i>
4:00pm	10. HUD 2022 Rubric Review – <i>Andrew Kraemer, Office of Community and Economic Development (OCED)</i>
4:05pm	11. COVID Emergency Rental Assistance (CERA) a. Program Updates – <i>Kristin Kunes, Office of Community and Economic Development (OCED)</i> b. Partner Updates – <i>Marla Conkin, Salvation Army and Rhonda Weathers, SOS Community Services</i>
4:15pm	12. HUD/MSHDA ESG-CV Spenddown Updates – <i>Kristin Kunes, Office of Community and Economic Development (OCED)</i>
4:20pm	13. Moving To Work – <i>Weneshia Brand, Ann Arbor Housing Commission (AAHC)</i>
4:30pm	14. CoC Board Development – <i>Catherine Distelrath and Lindsey Bishop Gilmore, Corporation for Supportive Housing (CSH)</i>
4:50pm	15. Board Member Updates/Issues
4:55pm	16. Public Comment
5:00pm	17. Adjournment

CONTINUUM OF CARE (CoC) BOARD

JANUARY 19, 2022 | 3:00-5:00PM

ZOOM MEETING (LINK WILL BE SHARED VIA EMAIL)

Board members present: R. Smith, T. Gillotti, A. Patino, J. Little, T. Lee, R. Weathers, M. Conkin, J. Epps, K. Montgomery, R. Kraut, S. Dowling, K. Hoener, J. Mogensen, K. Girty, A. Carlisle, J. Monahan, D. Kelly, A. Seipelt, Z. Fosler, J. Rosen, N. Adelman, J. Hall, Washtenaw County Sheriff's Office Representative

Community members present: A. Green, W. Carty-Saxon, B. Walker, M. Appel, A. Payne

OCED staff present: M. Boydston, K. Kunes, A. Kraemer, N. DuBois

TIME	AGENDA ITEM
3:00pm	1. Call to Order R. Smith called the meeting to order at 3:12.
3:01pm	2. Welcome/Introductions
3:08pm	3. Public Comment None
3:13pm	4. Approval of Agenda (ACTION) J. Mogensen moved to approve. J. Little seconded. There was no further discussion and the motion was carried with no opposition.
3:15pm	5. Approval of Minutes (ACTION) J. Mogensen provided correction for 11/21/21 Minutes. He is listed as OCED Staff but is a Board Member. J. Epps moved to approve the corrected minutes. A. Carlisle seconded. There was no further discussion and the motion was carried with no opposition.
3:17pm	6. Selection of CoC Board Chairs & Secretary (ACTION) – Kristin Kunes, Office of Community and Economic Development (OCED) R. Smith moved to discuss agenda item. M. Boydston shared information about conversations with CSH about Board Membership – these will start again in April, and will inform Board Engagement moving forward. If there is no interest in taking that Chair seat open now, the vote for Board Chairs and Secretary can be postponed until late summer and current roles extended. Or, the vote could move forward. A. Carlisle asked if current co-chairs are willing to continue. R. Smith agreed that they are willing and able to continue. T. Gillotti moved to table the selection of Board Chair and Secretary. J. Little seconded. The motion carried with no opposition.

3:22pm	7. CoC Letter of Support for Wayne Metropolitan Community Action Agency (ACTION) – <i>Kristin Kunes, Office of Community and Economic Development (OCED)</i> R. Smith moved to discuss agenda item. K. Kunes shared that Michigan Ability Partners requested a letter of support from the CoC for their SSVF program, to Wayne Metropolitan Community Action Agency. There is drafted language in the Board packet. J. Little added more information: MAP has been operating as a subgrantee, and this partnership has helped reduce the number of veterans on the CHP list. MAP is one of three grantees for SSVF, and the only provider in Washtenaw County. A. Carlisle moved to approve. J. Epps seconded. J. Little abstained. The motion carried with no opposition.
3:27pm	8. 2022 Point-in-Time Count Update & Methodology (ACTION) – <i>Andrew Kraemer, Office of Community and Economic Development (OCED)</i> R Smith moved to discuss agenda item. A. Kraemer shared information about the Point-in-Time Count: a count of people in shelters (in shelters, transitional housing, in hotels, etc. – data gathered from HMIS) and experiencing unsheltered homelessness in one night in January. More information is available in the Board packet. A. Patino asked if there are enough volunteers. A. Kraemer shared that there are 24 volunteers, which is enough. R. Kraut moved to approve. K. Hoener seconded. The motion carried with no opposition.
3:37pm	9. 2021 Continuum of Care System Data- <i>Andrew Kraemer, Office of Community and Economic Development (OCED)</i> R. Smith moved to discuss agenda item. A. Kraemer gave an overview of Washtenaw County’s homelessness response system in 2021. 401 people were experiencing homelessness at the end of November 2021 (9% increase since 2020); 557 people were permanently housed in 2021 (5% decrease since 2020); and it took on average 137 days from intake to permanent housing (same since 2020). There was a dip over the summer, hitting a system low of 275 in June. Homelessness spiked going into the winter, reaching 445 in November. The number of veterans and people experiencing chronic homelessness has remained relatively similar; an increase in families experiencing

	homelessness drove the spike in September; individuals experiencing homelessness spiked later in the fall. 340 households were housed in 2021, a decrease from 2020 (403) and 2019 (446) due to increased rents and other pandemic-related factors. More chronic individuals were housed this year than prior years (93) thanks to new PSH developments. The average length of time until housing held stable for all populations except for chronic homelessness (which increased because some people were housed who had been experiencing homelessness for a very long time in the new PSH development). Looking at VI-SPDAT data, people coming into the system in 2021 have high needs. 876 people were served in PSH in 2021 – a record. Most people remained in PSH, but of the 61 who left, 33 went to permanent housing. T. Gillotti asked A. Kraemer to repeat the records. One was a record low of people in the system (275 in June). One was a record number of people served in PSH. People leaving shelter with vouchers was another record. T. Gillotti asked about the challenges of people leaving RRH. Ideally, within 6 months people are able to pay the rent on their own – but this seems like it is not happening, and also there are more vouchers available. A. Carlisle added that the HUD Family Options Study showed how critical vouchers are for family stability – emphasizing how great of a resource vouchers are. No further discussion.
3:45pm	10. COVID Emergency Rental Assistance (CERA) a. Funding Updates and Communication Packet – <i>Morghan Boydston, Office of Community and Economic Development (OCED)</i> b. Number Updates – <i>Marla Conkin, Salvation Army and Rhonda Weathers, SOS Community Services</i> c. 2021 CERA Accomplishments – <i>Tish Lee, Legal Services of South Central Michigan</i> R. Smith moved to discuss agenda item. M. Boydston shared the difference between ERA1 and ERA2. Washtenaw County received CERA 2 funds which is a very different program. There are \$4.5 million to spend down by March 31st, and if that happens, more funds will follow. ERA2 funds are to be used predominantly; ERA1 can be used in special circumstances. For example, ERA1 funds can be used for people who are literally homeless, for hotel and other costs to transition people into a unit. Eligibility and documentation requirements are different – see Board packet for details.

J. Monahan asked about utility fund changing. M. Boydston said the money can only be used for rental arrears moving forward – no more utility-only cases.

J. Hall asked if the income levels change. M. Boydston said they did not. K. Kunes shared that flyers are in the Board packet for reference.

R. Kraut asked to talk about the timelines for getting out assistance. M. Boydston said that the new eligibility requirements might make the processing take longer at least originally, but HAWC is working diligently to get through the applications that are currently in the portal. They hope to get to a point where they are moving faster.

D. Kelly shared that Michigan Coalition Against Homelessness is working with MSHDA and trying to advocate to make the process for ERA2 funds the same as the original. He will share updates as he has them.

M. Conkin shared that HAWC does not have the funds yet – while they can approve applications, there will be a delay in sending out the checks. So far, HAWC has spent over \$5.4 million. Most of the denials were for duplicate applications, but it is likely that that number will increase with the new guidelines. 232 cases are in process.

R. Weathers said that SOS has approved over 1100 cases, over 200 are in review. Most of denials (out of around 300) are also due to duplication.

T. Lee gave recap of Legal Services in 2021 with CERA-related funds. In conjunction with CERA assistance, legal aid agencies received funding to staff an eviction diversion program – they are present in every housing docket that occurs. Anyone who faces eviction goes to court and staff is present in the zoom courtroom. The judges announce their availability so people can take advantage of their assistance. In 2021, opened over 600 cases – 547 are closed, 114 still pending. They had to adjust due to staff turnover mid-year but were still able to get good outcomes for people including for people receiving CERA funds. They were able to spot patterns with particular landlords or complexes – for example, a systemic problem with one in Ypsi, where they were able to help everyone in that complex (issues with heaters and other deficiencies in the units). The program will be staffed through the end of 2023.

J. Mogensen said Religious Action for Affordable Housing received a grant to provide help with eviction prevention, so that work has started and there might be flexible funding available there. If there are questions people can reach out to A. Carlisle.

No further questions or discussion.

4:10pm	11. Upcoming Housing Developments and The Grove (Veridian) Update – <i>Wendy Carty-Saxon and Brandyn Walker, Avalon Housing</i> R. Smith moved to discuss agenda item. W. Carty-Saxon provided update on three new developments. The Grove at Veridian will be a 50-unit new development – 30 will be PSH, 20 will be set aside for households with less than 60% AMI. They have all the funding lined up except for tax credits, which are supposed to make up 75% of the funding. They will be resubmitting their application on April 1. They would learn in June or July if they were awarded, and construction would take place in 2023 and move-in in 2024. There are sketches in the Board Packet. The second development is 206/210 N. Washington in downtown Ypsi. They have a purchase agreement with the City of Ypsilanti, so they are currently doing due diligence. The goal is for 20 units, mostly 1-bedrooms. At least 15 of the units are expected to be supportive housing and they would apply for project-based vouchers. They are looking to include community room and service office in the building, which may also be helpful to Avalon staffs’ other work in the city. Tax credit application is planned for October, and if awarded would start construction mid-2023. B. Walker shared about the Hickory Way Apartments Phase III, located at 1146 S. Maple in Ann Arbor. It is adjacent to Hickory Way Apartments Phases I and II (both fully leased up by the end of 2021). They are planning 14-units at Hickory Way Apts Phase III, all supportive housing. They are also anticipating that this will be recovery housing. This is also planned for submission to October 2022 tax credit round. If awarded, construction would also start mid-2023. W. Carty-Saxon shared that they might ask the CoC Board for a letter of support for the two properties planned for the October tax credit round. No further discussion.
4:20pm	12. Shelter Updates and Winter Response (Individuals) – <i>Dan Kelly, Shelter Association of Washtenaw County (SAWC)</i> R. Smith moved to discuss agenda item. D. Kelly provided update. No major case counts until early December when there was a surge in cases. They have been managing that since and keeping the services going. No one was turned away during this period. People who have COVID-19 are provided with isolation. Most people are provided with PCR or antigen tests most days. They are using hotels for

isolation, currently 26 people are isolating in a couple of hotels across the community. This has caused a strain on staff. Most people's symptoms are mild due to high vaccination rate. OCED funding has helped support staff capacity. While cases are down, there is still a trickle – mostly among people who are coming into shelter for the first time.

In terms of general winter response, up about 30% from this time last year (although that was an abnormally low year). Overdoses are up – they are not sure why, other than pandemic-related. Additional training was provided with Narcan. More people are entering housing, especially highest need guests – thanks to new developments and increased vouchers in the community (partially EHV).

No further discussion.

4:25pm

13. Shelter Updates (Families)

- a. *Marla Conkin, Salvation Army*
- b. *Rhonda Weathers, SOS Community Services*
- c. *Ellen Schulmeister, IHN at Alpha House*

R. Smith moved to discuss agenda item.

M. Conkin shared that 7 families are in hotels, and they are providing case management. Most families (90%) are exiting to housing either through RRH or vouchers. They are currently working on a MOU with Mission for some of the larger families.

R. Weathers shared that SOS continues to provide service through three scattered-site shelter units, they are bringing new families in. They are 3-bedroom homes so can serve larger families. Length of stay had been trending up during the pandemic but is starting to come down, and most people are exiting to permanent housing.

E. Schulmeister was not present and did not provide an update.

T. Gillotti asked if Ozone and Safe House could provide updates as well.

K Girty shared that they are coming out of a wave of COVID. Drop-in services are on hold but moving space – more information to come about these services. This will provide more housing screening and case management capacity.

K. Montgomery shared that shelter is still open and sheltering survivors in immediate danger of domestic violence and sexual assault.

No further discussion.

4:40pm	14. Board Member Updates/Issues R. Smith moved to discuss agenda item. A. Carlisle shared three updates: First, NLIHC is still under the impression that Build Back Better might still pass, but that it might not include housing and homelessness dollars as originally planned. Michigan Senators and Representatives are on board, but it is important to contact them to urge to keep housing and homelessness support in the bill. Second, there is an affordable housing education series planned for the next few months. Third, the City of Ann Arbor is going through a community engagement process for the city’s ARPA funds. Avalon staff shared information about projects under discussion around housing security. There will be a survey and you can provide feedback to City staff in support of these projects. K. Girty added update on minor shelter program. It had been treatment-focused family intervention (family has to agree), so it was missing young people whose families would or could not agree. Now, they are allowing shorter-term stays focused on prevention and diversion. In emergency situations with a minor, they are doing a lot more interventions within 24-72 hours. Providers should feel free to call if they know of a situation where this would be appropriate. M. Boydston asked what the implications were for Ozone House for them to be taking this on. K. Girty shared that this means walking a line between harboring a run away and keeping minors safe – but worth it to keep children safe, and has allowed them to engage youth and families they have not reached before. A lot of this was possible through the prevention dollars. N. Adelman shared an update around overdoses – if anyone needs access to Naloxone or Narcan, reach out to her and she will provide it for free. Washtenaw County Community Mental Health is now the access point for substance use treatment services, so if anyone needs it they should call the access line.
4:45pm	15. Public Comment A. Green shared there are free trainings available, including one next Monday on human trafficking. There will be a trauma-informed care series in February/March. If anyone wants information they can reach out to her: agreen@mihomeless.org. A. Patino added that the Hilltop View development is almost complete, they are taking referrals through CHP and lease-ups will start soon. M. Boydston shared she will not be at the next meeting but will be back in May or so.

	J. Epps shared that Michigan Works is fully open – there are people coming in for assistance with unemployment, as well as helping people to find training or employment opportunities.
5:00pm	16. Adjournment R. Smith adjourned at 4:31pm.



Washtenaw County

SafeHouse Center Update

February 16, 2022



Agenda

- Introduction
- County Survivor Support
- SafeHouse Operations and Services
- SafeHouse Infrastructure Update
- Update on Recommendations
- Next Steps
- Q & A

County Survivor Support

On September 13, 2021, Washtenaw County began to respond to the need for emergency shelter for SafeHouse survivors who stated that were either displaced and/or declined housing at the SafeHouse location. On November 6, 2021, the BOC passed a resolution which allocated \$75,000 to further assist the unsheltered survivors.



Current State of Survivors

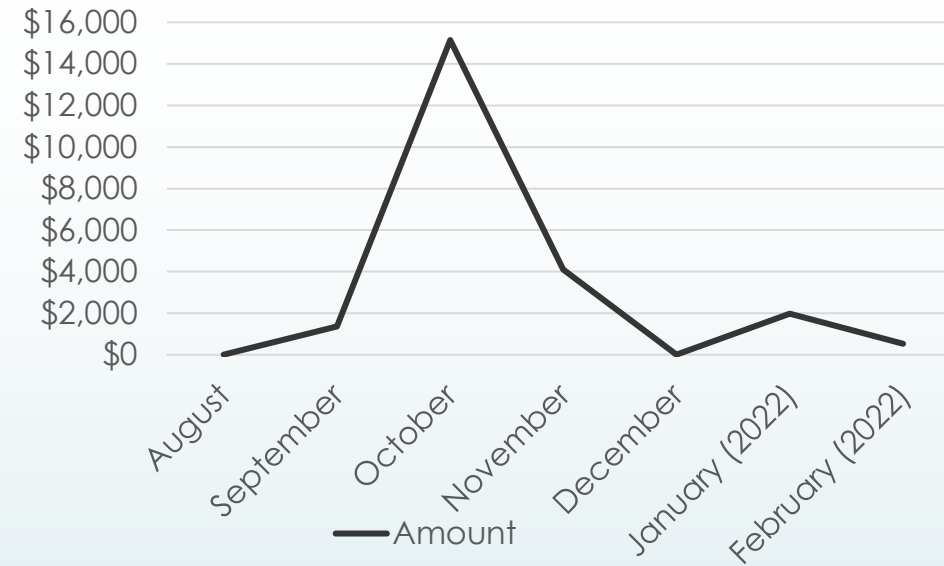
Housing

Partner Support

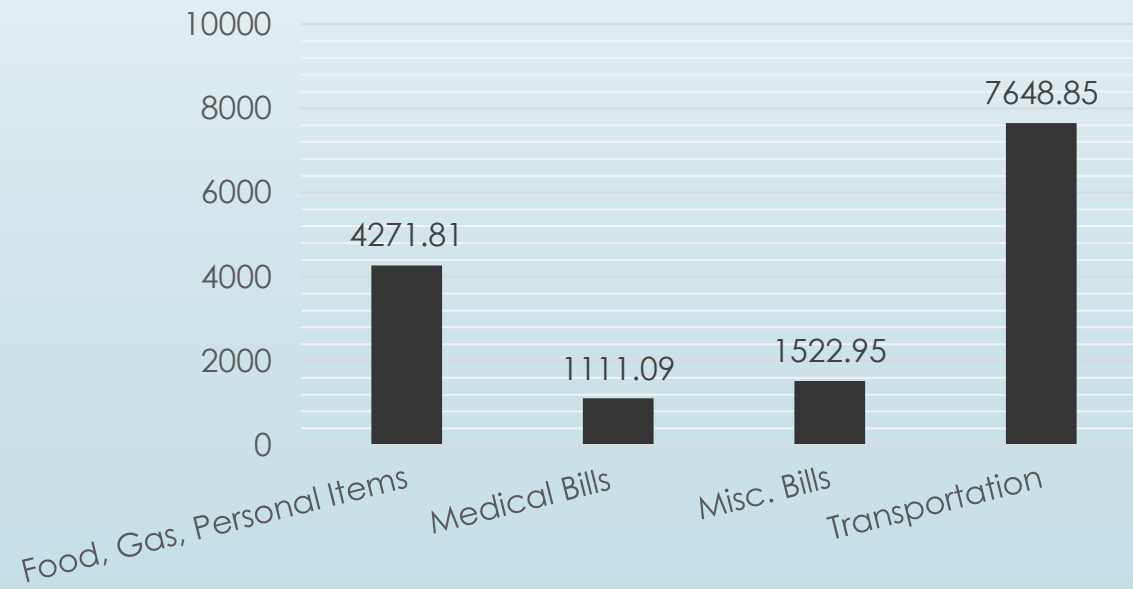
- As of 02/16
 - Three of the four survivors last reported have completed the transition process and are now in permanent housing.
 - Wrap around services are on-going with our housing partners, inclusive of group counseling programs.
- The Delonis Center continues to be the county's designated agency to provide transitional housing solutions, including transitional shelter and additional housing resources.
- Several county departments and partnering agencies remain engaged in providing non-residential services and case management to all survivors upon request.

Utilizing the allocated
funds
\$75,000

Sheltering Support = \$26,000 est.



Non-sheltering support = \$15,000 EST.

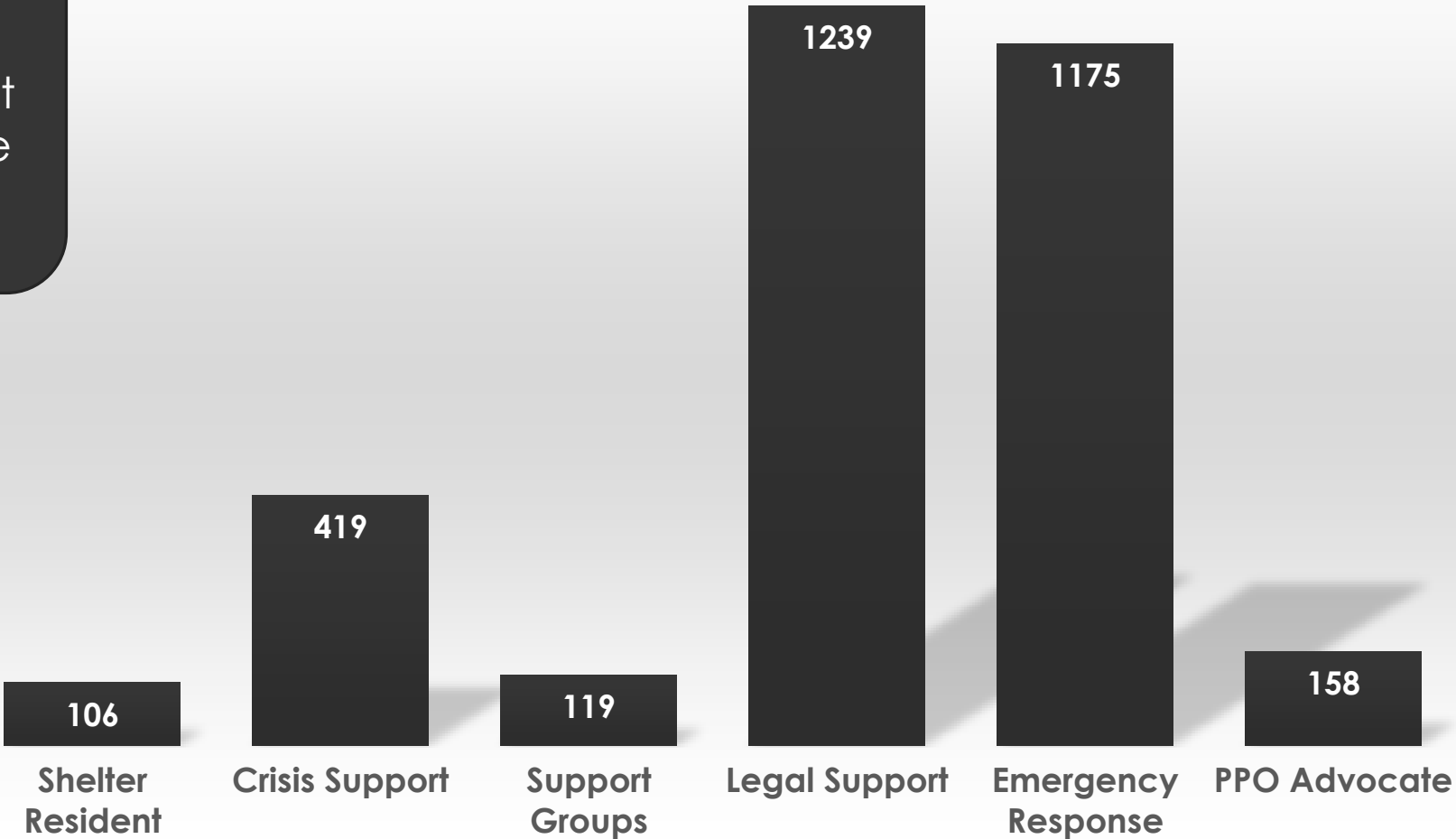


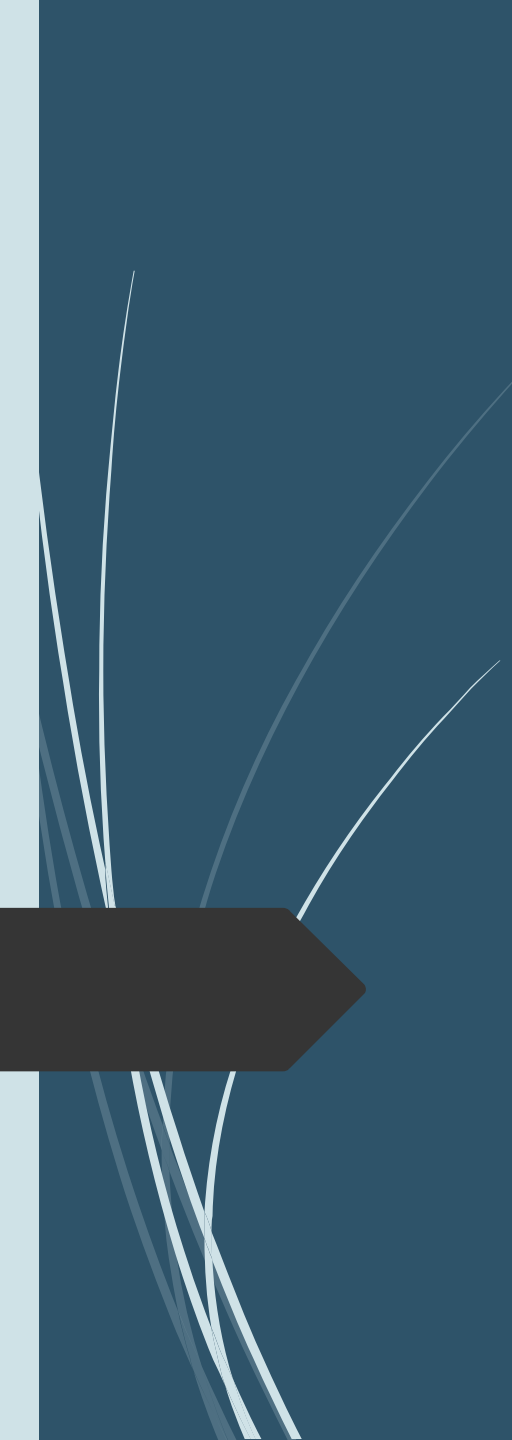


SafeHouse Operations and Services

Service Highlights August 1,2021- January 26, 2022

2216 Total
Calls
Received at
the Helpline





SafeHouse Infrastructure Update

The County's Facility Management Staff continues to work to improve the SafeHouse infrastructure and grounds.



Kitchen

- Replaced/upgraded flooring
- Replaced all cabinets
- Will replace walk-in refrigerator/freezer
- Commercial refrigeration units in room adjacent to kitchen (delivery early March)



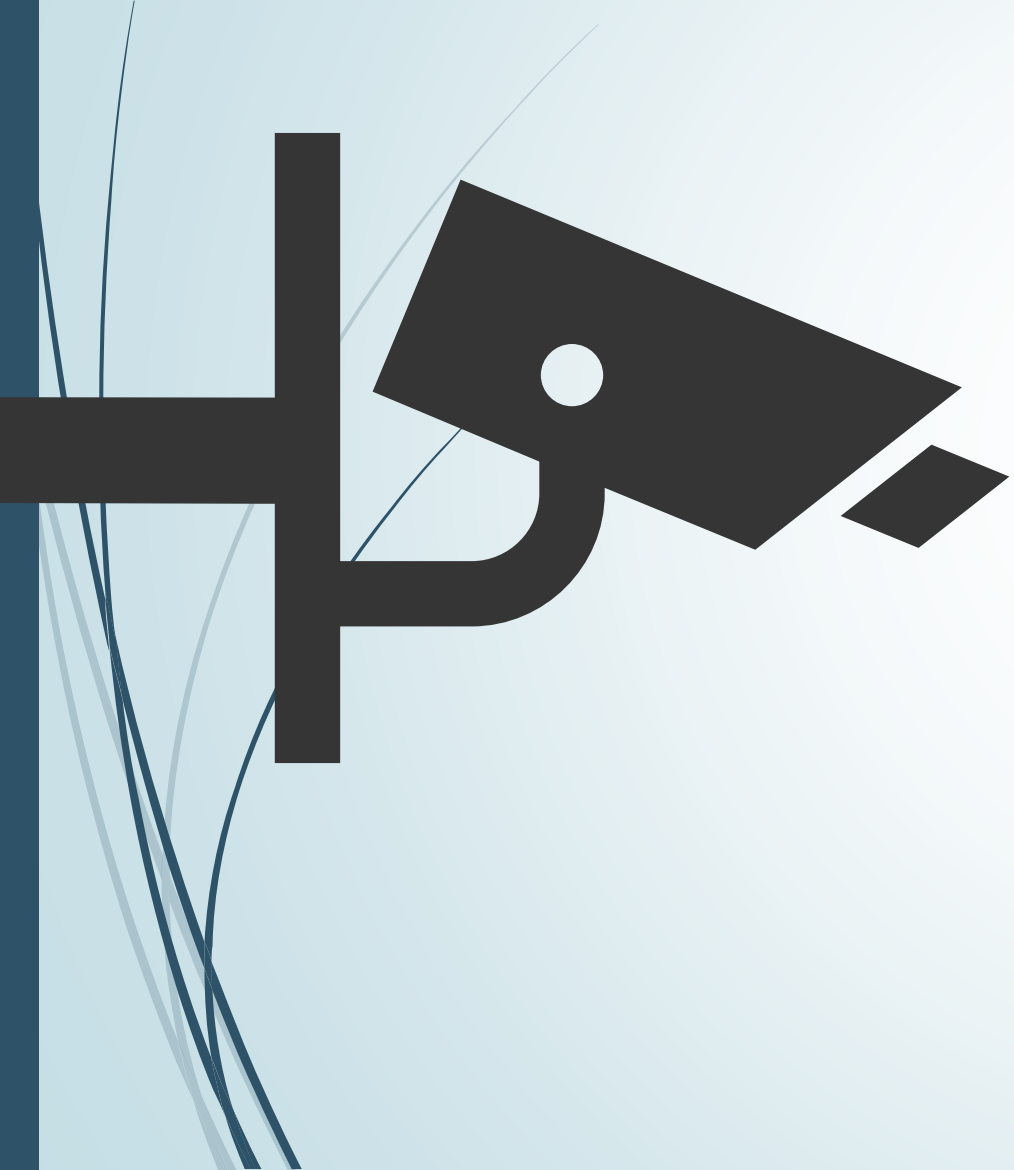
Bathroom

- Epoxy paint and wall protection in restrooms
- Subfloor work, replacement of some of the bathtubs and bath surrounds (completed week of 2/14/22)
- New flooring
- LED lights



Bedrooms

- Painted all hallways, stairs, common areas and meeting spaces
- New flooring and New LED lights
- Epoxy paint and wall protection in bedrooms
- Added corner guards to all main halls and all but one of the resident rooms has been completed.



Security

Development of Camera
Footage and Review
Procedure

UPDATE ON RECOMMENDATIONS

Governance

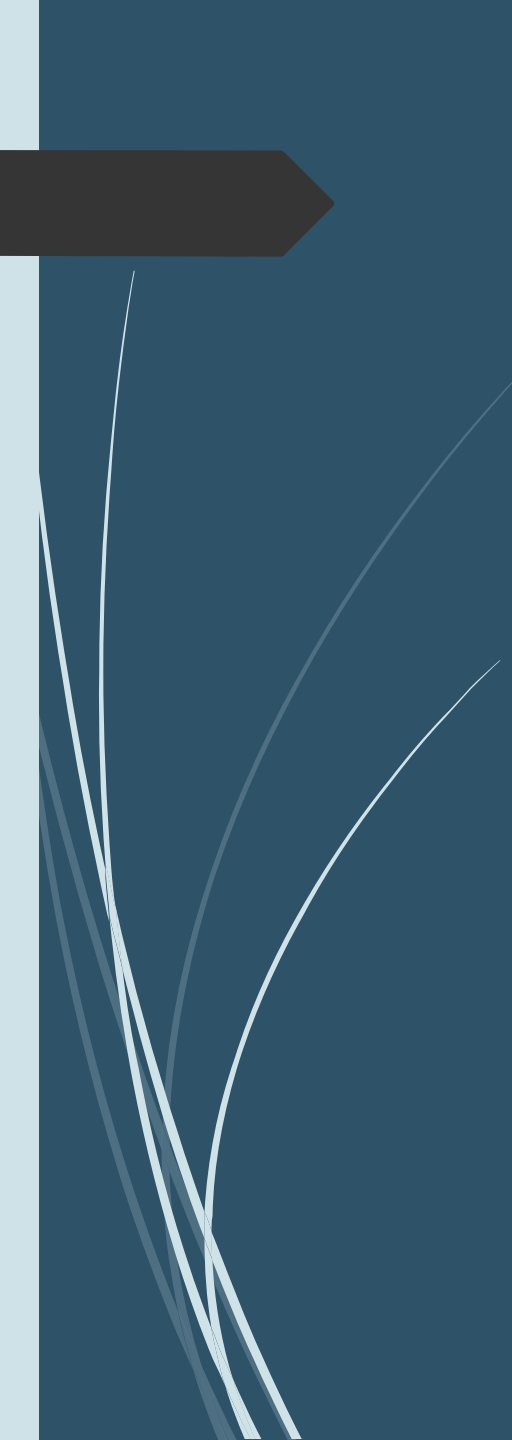
- Current contract under review by County Administration Team
- Team working to gather data to make recommendations that reflect the concerns and priorities of the county.

Funding

- Current funding structure is under review
- No recommendations for changes have been made to date.
- SafeHouse has received full FY 2021 allocation of \$156K

Mission

- Continue to center the county's mission to provide safety net services as related to supporting survivors of domestic violence.

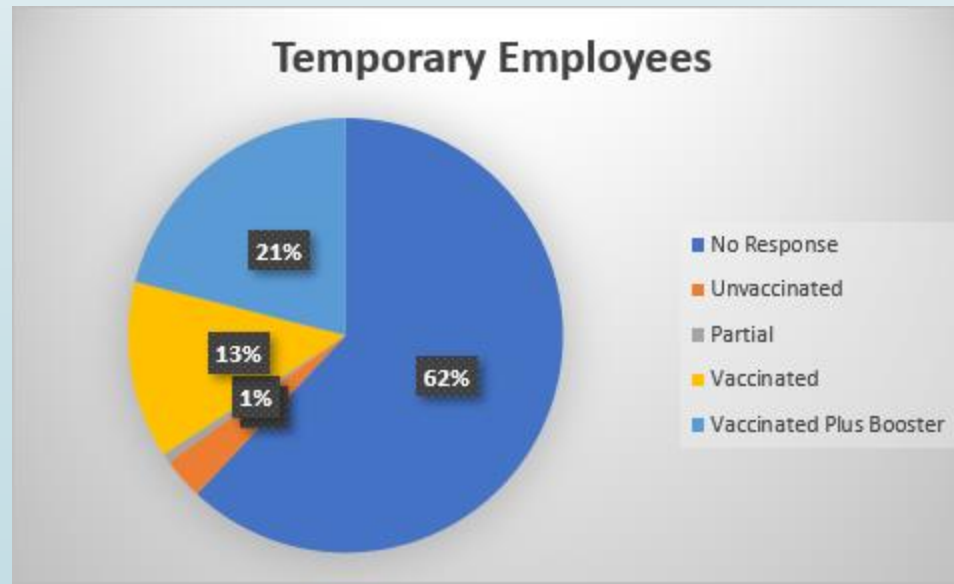
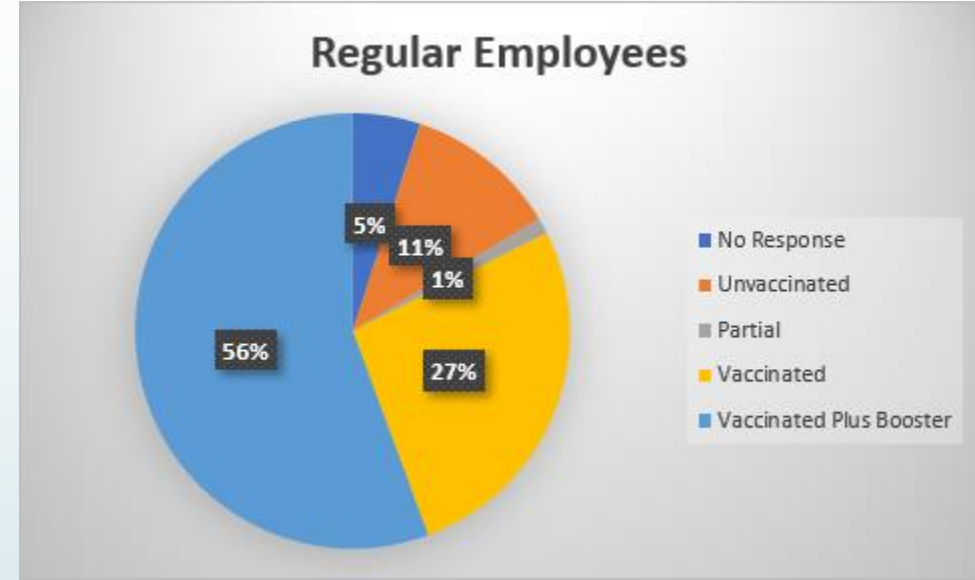
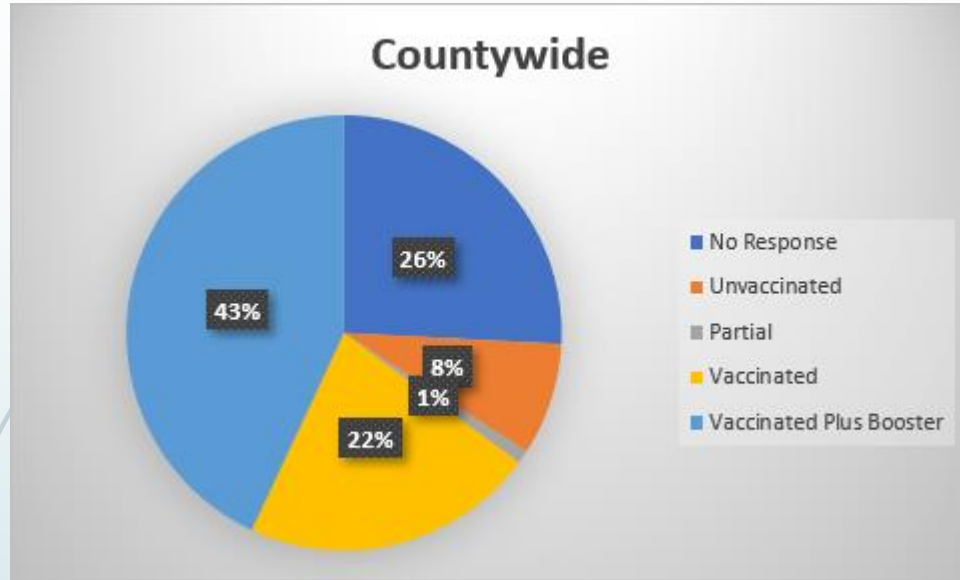


Next Steps

- Identify gaps in current service delivery model
 - Develop a comprehensive, county-wide, Domestic Violence Strategy including:
 - Emergency Sheltering
 - Battering Prevention
 - Transitional Housing
 - Wrap-around Support Services



County Employee Vaccination Data





OFFICE OF COMMUNITY &
ECONOMIC DEVELOPMENT

Collaborative solutions for a promising future



Human Services Partnership Planning

Community Meetings August 2021

Coordinated Funding 10-year History

2008:
Integrated
Funding –
Public Sector

2010
Leadership
Team Formed;
MOU Signed by
5 Funding
Partners

2011:
2-Year Pilot
Implemented

2012:
Private Family
Foundation
(RNR) Engages

2013:
Pilot Extended
for 3rd Year;
TCC Evaluation
Completed

2014:
Implemented
Community-
Wide
Outcomes

Coordinated Funding 10-year History

2015: TCC
Outcomes
Evaluation (Start):

2016
St. Joseph Mercy
Ann Arbor joins
partnership

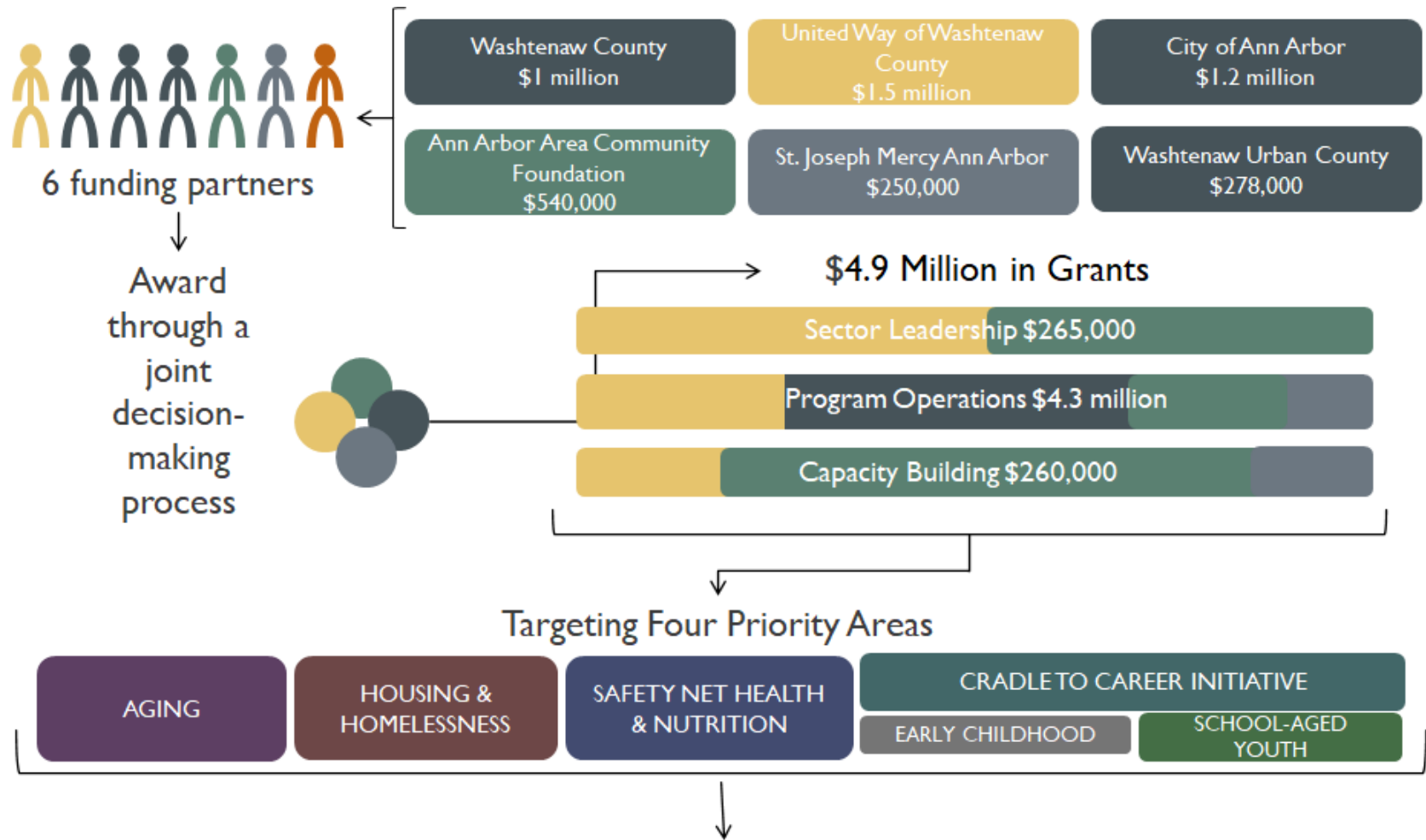
2018
TCC outcomes
evaluation report
released –
Elimination of
Sector Leadership

2018-2019:
Funding partners
reviewing
goals/outcomes –

2020:
AAACF leaves
partnership &
Coordinated
Funding ends in
current form

2021 Transition
grants provided as
planning process
continues

Coordinated Funding Previous Model & Investments



Coordinated Funding Previous Model & Investments

Aging

- Increase independent living for older adults

Cradle to Career

- Improve school readiness
- Increase high school graduation rate
- Increase youth physical & emotional safety

Housing & Homelessness

- Reduce the number of people experiencing homelessness

Safety Net Health & Nutrition

- Increase access to health services & resources
- Decrease food insecurity

Coordinated Funding

Older Adults

Washtenaw Coordinated Funders

Our Community Outcome: Increase or maintain independent living factors for vulnerable adults 60 years of age and older with low incomes.

COMMUNITY TRENDS

- 52% of respondents to the most recent 60+ Survey reported a very good quality of life.
- There was a slight decline between 2010 and 2015 in life satisfaction for adults 65+.
- There was an increase in social support for adults aged 75+ in the same time period.

- The percentage of those 65+ who live below poverty level has steadily hovered at around 6%.
- There is a nine year disparity in life expectancy between residents in Ypsilanti Township and those in the cities of Chelsea, Saline, and parts of Ann Arbor.
- There is a 14-year disparity based on race.

OLDER ADULTS IN WASHTENAW COUNTY

Mean Age of Death

	White/Caucasian	Black/African American	Difference (Years)
Ann Arbor City	78	70	8
Riverview Township	73	62	11
Superior Township	77	64	13
Ypsilanti Township	69	62	7
Ypsilanti City	72	67	5
Washtenaw County	80	66	14

Source: MCHES Vital Statistics 2010-2015



Poverty Rate



Life Satisfaction

Respondent "Very satisfied, Satisfied," in %

	2010	2015
Age 65-74	99%	96%
Age 75+	100%	97%

Social/Emotional Support

Respondent "Very/Quite" from answer to support, in %

	2010	2015
Age 65-74	85%	84%
Age 75+	72%	82%

Sources: Washtenaw County 60+ Survey; Michigan Department of Health and Human Services Vital Statistics

Community Dashboard

JULY 2018-JUNE 2019

PROGRAM LEVEL OUTCOMES

This section illustrates the total number of participants who reported achieving specified outcomes, and the corresponding percentage of achievement for all participants working on that outcome.

Senior Crisis Intervention

Participants seeking and receiving critical senior services

1031
100%

Participants who reported increased self-sufficiency as a result of services from the senior crisis intervention programming

539
64%

Senior Service Network Navigation

Participants who reported the program helped them get needed services

582
68%

Participants who received assistance with completing applications

513
100%

Senior Social Integration

Participants who reported an increase in the number of days they feel good/healthy

245
54%

Participants that reported feeling less socially isolated as a result of program activities

453
61%

POPULATIONS SERVED ACROSS ALL PRIORITY AREAS

Below are the boundary- and priority area-spanning populations that WCF are prioritizing across the funding portfolio. Percentages are estimates based on data from programs electing to track the information—they do not represent totals for all WCF participants.

Priority Population	Goal	% Served
Individuals and families residing in census tracts with a low or very low opportunity score using the Washtenaw Opportunity Index	25-50%	74%
Families with newborns enrolled in Medicaid and/or families with children enrolled in MICHild	20-35%	24%
Homebound seniors	20-35%	30%
Individuals and families experiencing chronic homelessness	15-30%	13%
Individuals and families residing in the zip codes of 48197 and 48198	70-75%	46%
Individuals and families with annual incomes at or below 200% of the Federal Poverty Level	75-85%	90%

DEMOGRAPHIC DATA

Number of Older Adult Participants by ZIP Code (FIGURE 1)

Total served: 2,857

Map reflects participants served for entire Washtenaw County ZIP codes area reported.



Breakdown by INCOME

Income of all WCF Participants (FIGURE 2A)
Total served: 27,819



Income of Older Adult Participants (FY19) (FIGURE 2B)
Total served: 2,857

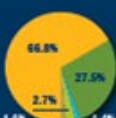


Breakdown by RACE

Race of Washtenaw County Residents (FIGURE 3A)
*Source: U.S. Census



Race of Older Adult Participants (FY19) (FIGURE 3B)
Total served: 2,857



Breakdown by GENDER

Gender of Washtenaw County Residents (FIGURE 4A)
*Source: U.S. Census



Gender of Older Adult Participants (FY19) (FIGURE 4B)
Total served: 2,857



Washtenaw Coordinated Funders (WCF) is meeting the needs of our community's most vulnerable in four priority areas through four funding programs intended to: Support human services programs; Build research capacity; Foster community collaboration and systems-level change; and Support economic development. WCF includes the following partners: Ann Arbor Area Community Foundation (AAACF); Office of Community and Economic Development (OCED), representing Washtenaw County, Washtenaw County and the City of Ann Arbor; United Way of Washtenaw County (UWOC); Saint Joseph Mercy Ann Arbor (SJMAA). For more information, visit our website: coordinatedfunders.org.

New Human Services Partnership

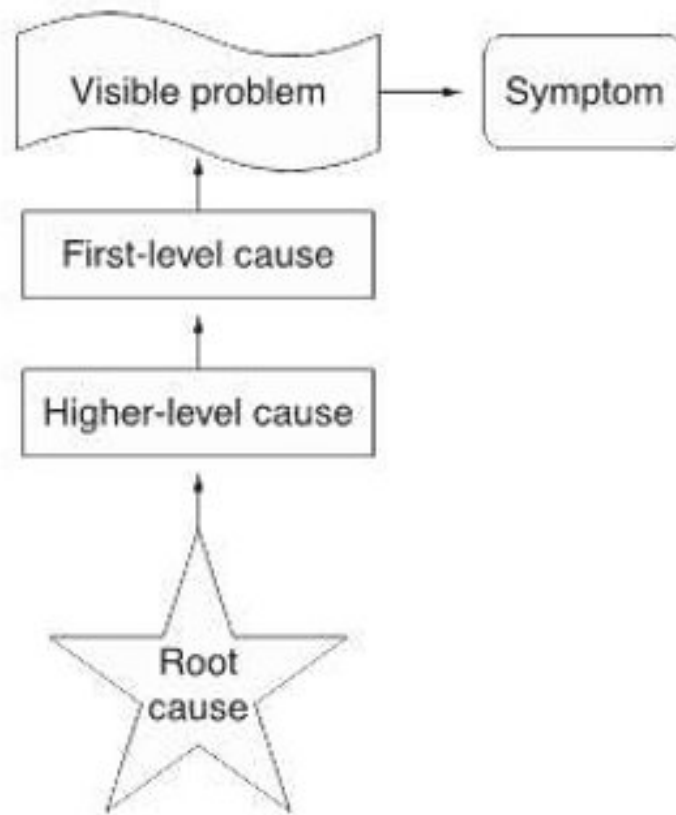
Preliminary Goals

Goals for the New Human Services Partnership

- Focus on ***Equity*** throughout the process.
- Address ***Racism, Poverty, and Trauma*** as root causes.
- Incorporate lessons learned from the ***COVID-19 response***.
- Ease the grant ***award process*** for applicants and staff.

New Human Services Partnership

Preliminary Goals



Root Cause Analysis Diagram

New Human Services Partnership Scalability

DIMENSION	DESCRIPTION
Scaling Out (Beneficiaries)	The expansion of an innovation and/or its replication and adaptation in different contexts. As result, it has more beneficiaries.
Scaling Up (Systems)	Changing institutions' policies, regulations, laws, working relationships, resource flows and practices in ways that enable (rather than undermine) the performance and expansion of the innovation.
Scaling Deep (Culture)	Changing the “hearts and minds” of people, the organization, system or community (e.g., in terms of narrative, values, beliefs and identities) so that the idea underlying the social innovation is supported and embedded in the cultural DNA.
Scaling Scree* (New Innovation)	Encouraging, legitimizing and cultivating other ideas and innovations that seek the same outcomes as the original innovation, but in different ways.
Scaling Infrastructure (Capacity)	Improving the capacity of a system or community to scale the work through such things as capital, data, talent, knowledge, networks.

* Scree: a mass of small loose stones that form or cover a slope on a mountain.

Sources: Riddell, Darcy & Michele-Lee Moore (2015). [Scaling Out, Scaling Up, Scaling Deep: Advancing Systemic Social Innovation and the Learning Processes to Support it](#). The J.W. McConnell Family Foundation & The Tamarack Institute for Community Engagement.

Tulloch, Gord (2018) Blog: [Expanding Conceptions of Scale Within the Social Sector](#).

New Human Services Partnership Preliminary Funding Framework

3 Distinct Funding Programs

1. Human Services Mini-grants
2. Human Services Safety Net Contracts
3. High Impact Human Services Fund

All grantees for all programs will have the following expectations

- Central focus on addressing Racism, Poverty, Trauma
- Grantee organizations are working toward DEI integration in their agency
- Participation in data collection and reporting and outcome evaluation

New Human Services Partnership Preliminary Funding Framework

3 Distinct Funding Programs

(All include a focus on Racism, Poverty, Trauma; DEI integration; Outcome Evaluation)

"Human Services" Safety Net Contracts

- Programs serving those in poverty and/or just over poverty line
- Sustain the conditions: health insurance / healthcare, food security, housing, education, childcare
- Not expected to scale up programs
- Proven track record
- Non-competitive

"Human Services" Mini-Grants

- Targeted to BIPOC and minority-led institutions with innovative, new, or improved projects
- High risk/high reward initiatives
- 1 year grant awards
- Very short RFP process
- Positive outcomes could create opportunity to apply for 5-year grant later
- Competitive

"Human Services" 5-Year Grants

- Programs, systems, or initiatives providing new additive to current programming with high impact over time
- Positive track record in serving targeted group
- 5-year funding, with possibility of renewal with positive outcomes
- Requires strategic planning & sustainable funding
- Competitive

Questions & Answers with the Audience

New Human Services Partnership Small Group Discussions

Small Group Breakout Sessions:

- Click "Join the room" (random assignments).
- A designated facilitator will capture the ideas and suggestions for your group.
- Every idea is valid.
- All recorded comments are anonymous.
- A summary of key themes will be posted on the website after all Community Meetings completed.

New Human Services Partnership

Small Group Discussions

Question 1: How does your organization's work fit into the criterion of racism, poverty, and trauma?

Question 2: In what ways can you scale your work to have a more measurable and sustainable impact over time?

Question 3: What haven't we thought of?

New Human Services Partnership

Next Steps

Next Steps:

August:

- Washtenaw County and City of Ann Arbor will be meeting with other potential funding partners.

September:

- Human Services Partners work to finalize process, funding amount and timeline.

New Human Services Partnership

Next Steps

Next Steps:

September/October:

- Goal is to open funding round(s).

October/November:

- Review applications.

December:

- Obtain approvals from all funders, with intent for funding to start in January.

New Human Services Partnership Framework – background and key points

Working Document – last updated Jan. 27, 2022

OVERALL GOALS OF HUMAN SERVICES FUNDING:

- Desire to make impact and move the needle for those facing institutional inequities, while also supporting the safety net
- Incorporate Equity throughout the process including
 - Accessibility to the application process
 - Community-inclusive review process
 - Equity review of applicants prior to award / contracting
 - Equity in service delivery
- Focus on addressing institutional racism, poverty, and trauma as root causes of institutional inequity
- Redevelop strategic framework for investing resources to be focused on an Equitable grant making and process while achieving high impact outcomes
 - Outcomes/goals co-created with experts and community
 - Incorporate lessons learned from COVID-19 response and previous COFU model
 - Accessibility for grantees – allow for under-represented, new, or growing groups to access funding
 - Ease of process – for applicants and staff
 - Flexibility in funding/programming to allow for pivots and learning, including emerging needs
- Partnership continues to allow for shared communication, links to community partners, ongoing need, support in place, etc.

DEFINITIONS OF KEY COMPONENTS OF THE MODEL: (NARRATIVE)

Equity: According to the World Health Organization (WHO), as... “the absence of avoidable or remediable differences among groups of people, whether those groups are defined socially, economically, demographically or geographically.”

Racial Equity: is a process of eliminating racial disparities and improving outcomes for everyone. It is the intentional and continual practice of changing policies, practices, systems, and structures by prioritizing measurable change in the lives of people of color.

(Institutional) Racism: Institutional racism, also known as systemic racism, is a form of racism that is embedded in the laws and regulations of a society or an organization. It manifests as discrimination in areas such as criminal justice, employment, housing, health care, education, and political representation.

Poverty: is a state or condition in which a person or community lacks the financial resources and essentials for a minimum standard of living.

Trauma: is the response to a deeply distressing or disturbing event that overwhelms an individual's ability to cope, causes feelings of helplessness, diminishes their sense of self and their ability to feel a full range of emotions and experiences.

Intersectionality: the interconnected nature of social categorizations such as race, class, and gender as they apply to a given individual or group, regarded as creating overlapping and interdependent systems of discrimination or disadvantage.

Institutional Oppression: occurs when established laws, customs, and practices systematically reflect and produce inequities based on one's membership in targeted social identity groups. If oppressive consequences accrue to institutional laws, customs, or practices, the institution is oppressive whether the individuals maintaining those practices have oppressive intentions.

EXAMPLES TO GROUND COMMUNITY IN THE NEW HUMAN SERVICES FRAMEWORK:

I identify as LGBTQI. How will my community benefit from this new funding model?

Issues of the LGBTQI community are often considered intersectional in that the community is oppressed not only based on sexual orientation but also because of gender nonconformity, race, income, religious orientation, etc. The LGBTQI community have also experienced many years of oppressive and exclusionary social and political policies and treatment, resulting in trauma due to lasting harm to one's mental and physical health. As a result, organizations and initiatives that aim to serve LGBTQI communities could likely be addressing issues of racism, poverty, and/or trauma within that community.

There are many intersectional identities that are impacted by institutional inequity and the identified roots causes of it. While they are not specifically named, we welcome proposals and initiatives that seek to intentionally eliminate the barriers to their success in Washtenaw County. Other examples (not intended to be an exhaustive list):

- Aging Population
- Immigrants/Undocumented Citizens/Refugees
- Returning Citizens
- Differently Abled community members

What is meant by “[systemic] Racism, Poverty, Trauma as a root cause of Institutional Inequity?”

In the new Human Services framework, we identified Racism, Poverty and Trauma as roots causes of institutional inequity by conducting a root cause analysis of the previously funded COFU programs. After asking ourselves a series of why questions, three core reasons continuously arose, systemic racism, poverty, and trauma were the reason behind many of the opportunity gaps, education disparities, health disparities, food insecurity, lack of resources for the aging population, and homelessness that Washtenaw County residents face. We consider the before-mentioned, symptoms of institutional inequities. To truly address the outcomes of those who face such disparities and negative outcomes permanently, we must address the root causes of institutional oppression and not just the obvious symptoms.

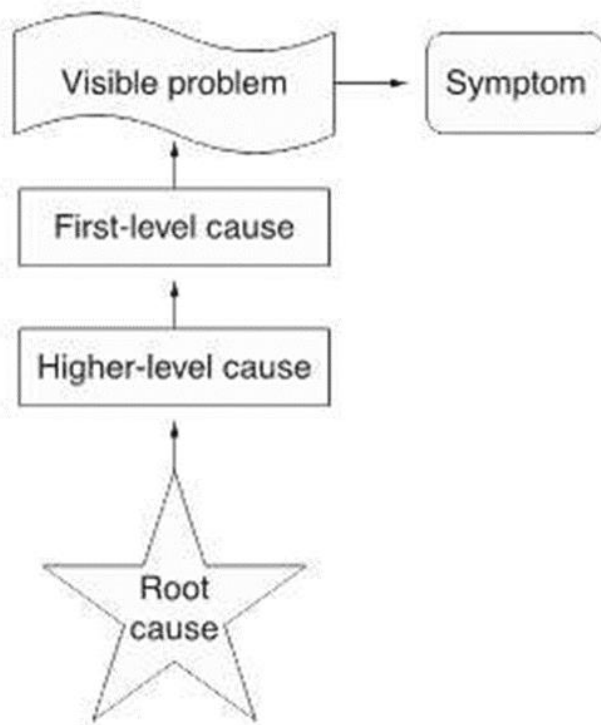
What is an equitable funding process? How does that relate to me?

Please refer to these articles: <https://www.washtenaw.org/3422/New-Human-Services-Partnership-Planning>. We will be requiring grantees to undergo an equity evaluation of their services and ask that they build capacity around equitable organizational practices. We will be involving community and those that receive services in both the grant evaluation process as well as the program evaluation process. Funders will be undergoing a continual equity review to assure that the funding and contracting processes are equitable throughout. As community member, grantee, funder, or receiver of services we hope to include you in many aspects of this process.

Why aren't we starting with outcomes first?

In an equitable funding process that hopes to achieve high impact sustainable outcomes, funded programs must be supported by and able to create tailored outcomes that fit the unique aspects of the funded program and those they serve. A one size fits all approach does not create equitable outcomes. To create equitable evaluation process and outcomes, considerable time and intentional relationship and capacity building between the evaluator and the grantee must be created. To start with pre-prescribed outcomes would not allow for the individualized approach that ultimately sustains high impact programs and outcomes.

Key resources on the framework of the New Human services partnership can be found <https://www.washtenaw.org/3422/New-Human-Services-Partnership-Planning>.



Root Cause Analysis Diagram

1. **Racism (Institutional)**= inequitable policy, underfunded programs, privilege, adherence to dominate culture norms ([Racism as a Root Cause Approach: A New Framework | American Academy of Pediatrics \(aappublications.org\)](https://aappublications.org/))
2. **Poverty**= *institutional racism, land ownership, affordable housing, education inequality, graduation rates, employment opportunity's, health disparities (<http://www.opportunitywashtenaw.org/>)
3. **Trauma**= *institutional racism, Adverse Childhood experience: physical, sexual, emotional abuse; neglect, losing a parent to divorce or incarceration; exposed to mental illness; household member is addict; exposure to violence; disenfranchisement form community, lack of access to social determinates of health (<https://www.cdc.gov/violenceprevention/aces/index.html>)



WASHTENAW COUNTY

COMMUNITY PRIORITY FUND

**APPLICATIONS ACCEPTED:
MARCH 7, 2022, 9AM TO
APRIL 7, 2022 AT MIDNIGHT**

ABOUT THE CFP

- **Funded by American Rescue Plan Act**
- **Designed for community-based businesses and organizations**
- **Technical support and evaluation support provided to awardees**
- **One-time funding to be used through December 31, 2024**

**TO LEARN MORE ABOUT HOW TO APPLY,
REGISTER FOR AN OPTIONAL
TECHNICAL ASSISTANCE SESSION:**

- [Monday, March 7, 2022, at 6 pm](#)
- [Monday, March 14, 2022, at 9 am](#)
- [Monday, March 21, 2022, at 6 pm](#)
- [Monday, March 28, 2022, at 9 am](#)

[CLICK HERE TO APPLY OR LEARN MORE](#)

