

Familiar Faces Steering Committee

Meeting Summary

March 7, 2019, 9:30 - 11:00 am, Chinook Room 121 401 5th Avenue, Seattle

Members/representatives Present: *Matt Allen, Samantha Anderson, Jesse Benet, Jason Bragg, Brook Buettner, Margo Burnison, Angelique Cardon, Elise Chayet, Meagen Condon, Michelle Conley, Tyler Corwin, Leo Flor, Chole Gale, Tracy Gillespie, John Gilvar, Madeliine Grazos, Joy Hunt, Turina James, Daniel Malone, Hedda McLendon, Dan Nelson, Patty Noble-Desy, John Page, Emily Rasler, Grace Ritter, Gail Stone, Lena Tebeau, Sidney Wilson*

Guests/Staff: *Alex Conn, Rekha Ravindran*

Welcome and Introductions

9:30 a.m.

- Brook Buettner welcomed guests. Committee members and guests introduced themselves.

Advisory Board Set-Aside Time

9:35 – 9:40 a.m.

- Sidney Wilson, Advisory Board Member provided an update on the Black Prisoners Caucus (BPC) meeting. BPC requested that the Familiar Faces Steering Committee attend a meeting monthly and provide an updated on work being completed.
- Brook will work with committee members offline to decide who will attend and provide the updates.

Introduce Leo Flor, DCHS Director

9:40 – 9:55 a.m.

- Leo discussed his ideas and vision of Familiar Faces; emphasizing that the true initiative vision and direction come from the Steering Committee members themselves and it is up to them to decide the future direction.
- The Steering Committee is the only group in existence with this cross-section of services, policy and ground-level members.
- Likened the work to Transportations “First/Last Mile” work, equating the Familiar Faces work to be in the areas of “missing links” and connections – how to be the first and the last mile for those in and out of the system.

“Divert to What”

A group of Steering Committee members and others held a long meeting last fall to discuss where Familiar Faces should move strategically over the coming 18+ months. Stemmed from the Steering Committees’ desire to move to more action-oriented work.

1. Outreach Coordination Workgroup, *Chloe Gale, ETS/REACH*
 - Group began mapping current outreach groups/orgs. And types of work they are doing throughout the county. Do not want work to be redundant.

- Plan to meet monthly; sharing current resource availability for frontline staff.
 - Plan to begin working on reviewing and updating outreach staff competency documents to include required and desired skillsets, training and resource links for outreach workers in King County to be effective. (Document initially created for the Healthcare for the Homeless RFQ and the City of Seattle)
 - Reviewed some current opportunities:
 - Coordinated Entry for All (CEA)
 - Current outreach needs particularly in areas such as South County and campuses of Health overlap. Looking towards current “blind spots” in services and service areas.
 - Update outreach best practices document, add equity considerations
 - Development of shared care plans
2. South County Workgroup, *Turina James, Familiar Faces Advisory Board*
- Service providers held their own meeting the week prior (Alicia Benish and Rekha Ravindran lead).
 - To ensure work by King County will not be redundant a majority of this meeting focused on the providers meeting and what they determined.
 - It was decided that it would work with the provider group to support with needed resources and facilitation if needed.
 - Provider group is looking at ways to coordinate efforts already being done and capitalize on some cities major collaborations such as LEAD expansion in Burien and FD CARES in Kent.
 - Acknowledged that efforts need to look different than what has worked in the City of Seattle due to the geographic space and municipality autonomy.
 - More to come.
3. Facility Based Access Points
- Have not met yet; will convene at a later date.
 - Housing is a key factor in Familiar Faces work; without sustainable permanent housing individuals cannot focus on what is needed to break the cycle of SUB, Mental Illness and repeated jail bookings.
 - DCHS through the VHSL (Veterans, Housing, and Seniors Levy) has released its first RFT to specifically create housing for those exiting jail.
 - Current development plans have 10% of all affordable housing going specifically towards LEAD.
 - Current challenges:
 - Finding landlords that they will be good tenants;
 - Ways to leverage Medicare;
 - No immediate housing available—initiatives currently dependent on new developments.
 - Jefferson Corridor Update, *Hedda McLendon, DCHS*
 - Part of review of underutilized spaces throughout the county.
 - Overall goal is to not offer all services at every site, but to create a full service corridor (area of access).
 - Harborview Hall:
 - Opened in January
 - 100 overnight beds
 - Designated beds for ED patients needing to return for next day appointments

- Long-term plans to become an “enhanced” shelter offering multiple services
 - 4th & Jefferson (420 building):
 - Opened February
 - Moved overnight shelter beds to second floor
 - Opened up day center on first floor
 - Current services include: showers, washers & dryers, mobile medical van
 - Long-term plans to include employment and health specialists, as well as navigation teams.
 - West Wing (County Correctional Facility)
 - Scheduled to open Spring 2019
 - Will have 100 overnight beds located on the first floor
 - Long-term plans included expanded service, including healthcare.
 - Will include a prosecutorial diversion team to help keep individuals out of the court system if possible.
- Health Needs assessment, Elise Chayet, Harborview, & John Gilvar, Public Health/Healthcare for the Homeless network
 - Currently working to get a handle on the Jefferson Corridor (i.e. what services are needed and what population the corridor is primarily serving).
 - “First mile, last mile” is good way articulate what Healthcare for the Homeless does; noting that the homelessness crisis and disconnect in services is not only a local problem but a national problem with significant barriers to health services for the homeless population. The standard office hours model does not work.
 - Working to justify and create “nimble” micro-locations of healthcare such as shelters.
 - A new needs assessment is not necessarily needed as the population is very well understood with a significantly lower life expectancy due to uncontrolled/treated chronic conditions.
 - Next steps will be to review the current overlap of patients within the various systems in the HMAS database. Look specifically for patterns in diagnosing of high-utilizers.
 - Will need to include additional resources beyond basic housing such as skilled nursing facilities (SNFs) and hospice.

Emerging Issues or Opportunities

1. Responding to report: “System Failure: Report on Prolific Offenders in Seattle’s Criminal Justice System”, *Daniel Malone, DESC*
 - Opportunity to make a statement about what has been done or the direction headed.
 - Need to move from a crisis response oriented system to a preventative system.
 - The future includes criminal justice system and key figures.
 - Brook will send an email to those interested in formulating a joint response from the steering committee.
2. Updates

- VITAL: Served 90 individuals to-date with 60 individuals on average in the program at any given time.

Next Steps/Meeting Themes

- Outreach Coordination Workgroup: March 25, 2019, 12:15 – 1:45pm, Chinook 233
- Next Steering Committee Meeting: May 2, 2019, 9:30 – 11am, Chinook 121
 - Resend Committee Charter for review