

Health and Communities (Ballard) ZOOM Mtg. Tues 10/26/2021, 1:00-2:00 PM

In attendance: Emily Wells - new Community Engagement person at Ballad, picking up some of Rachel's responsibilities., Sam Edwards, Michael Price (KHRA), Sabrina, Rebecca, Lindy (Clinch-Powell), Rachel - Ballad; Lynn Panell, BRHA; Nicole Intagliata, ASP; Andy Kegley, HOPE, Inc.; Amy Livingston, Eastern 8 CDC;

Fahe: Alex Dadok, Katy Stigers, Vonda Poynter, Jackie (notes)

Notes:

1. Reporting

Vonda: We have one group that has already completed their reporting for this round – Clinch-Powell! The next round of reporting is due next week, for the previous three months,

Aug/Sept/Oct. Please make sure to include the leveraged dollars and pass along any success stories, especially where health and housing intersect.

Jessie: Remember that you are reporting on a household. And it's also people. So think about just making sure that watching the distinction there any funds that you're leveraging, whether that be directly to this household or around this work.

We want to make sure that we are identifying what that leverage looks like across the board as we serve folks in our communities, and making sure that we're, you know, garnering that information, and reporting it as well. Any questions?

2. Around the Square - Insights about how this is working at your organization

<u>Rebecca</u> - more mindful about providing direct service, looking at the health of the clients, does anyone have feedback from the panel at the Annual Meeting? Lost a cousin after a month $\frac{1}{2}$ in the hospital.

<u>Rachel</u> - So sorry, this is still happening, just lost a very vibrant community Member, it's rough Vonda - just lost our third family member to COVID, layering this on top of everything else we deal with is difficult

<u>Sam</u> - KHRA - Sober living - doing really well on that, nearing completion. Working very hard, good contractor, the house will have 6 beds for ppl coming out of treatment taking a step towards independence. It's definitely going to be a requirement that they have to have some ongoing case management activity that they are engaged in.

So we're looking at some different options there we're looking at possibly having an AmeriCorps person on staff or one of the residents of the house to be an AmeriCorps staff person that can kind of, you know, not be the not be the tattletale or somebody

to run the house but you know just to be there and we want to facilitate any type of, you know, group meetings or anything that those, those clients might need. Accessing money through THDA, we upload our information (spreadsheet)

<u>Andy</u> - HOPE, Inc. - spent through the first round of funds - when is the second chunk coming? (From Jackie in Chat):

Receipt of MOA and first quarter (May-July) reporting –	\$6,570
August 2021	
Receipt of final quarter (February – April) reporting – May 2022	\$6,750

We got a local foundation that has a piece of money for a different piece of our geography that we're doing the same sort of thing health and housing overlap, just got word yesterday that a list, healthy housing Grant has been approved for a small multifamily project we're working on and so that's sort of good news. Our county announced three weeks ago that there's a brand new 2500 employee factory to be built to make my Nitrile gloves for the

Department of Defense, so that's a health and housing opportunity because there's no housing for those 2500 people here and I got an idea we need to talk about.

Lynn - Bristol Redev. & Housing Authority – Interested to hear more about the system Sam talked about. Access to rental assistance through Virginia Housing and have applied as the landlord on behalf of our residents, we've had a boatload of grant back rent paid backwards, and three months ahead. We've had we've captured a lot of money in, in that program and then we also partnered with the City of Bristol we were given \$65,000 through the city to do rent relief and mortgage relief. Looking to see about the state monies. more broad as far as being tied connected strict directly to COVID. We've not had anybody yet to apply for any mortgage relief and the city money will pay for both. Have been trying to wrap some services around fix to and helping them to look for jobs we keep job postings available and we have some supportive services available to help connect people so that they can get stable and stay stable, as they're moving forward. We also partner with a recovery group called The Table, trying to work together to help them establish and structure that transitional program for some guys who were ready to come out of that treatment program, but are not really stable enough that still need the support moving forward, much like Sam was talking about. Managing 15 emergency housing vouchers but finding places for people to live is a real struggle right now.

<u>Lisa, AppCAA</u>: Extremely busy. Partnered w/ Scott Co. rec'd some funds to help people directly related to COVID it on their rent, utilities, those types of things. Talking to Lee Co. as well. Have a huge weatherization program, we're using this money to kind of supplement some of those to help people that we normally would not be able to help so it's been a been a plus for us as well. A lot going on right now with our Financial Opportunity Center, have expanded that to also include high school students in one of the counties. Partnering with workforce dev. to expand outside of our service area, has grown by leaps and bounds and the last six mos.

Nicole, ASP: BUSY! - Have a couple of different types of partnerships going on for healthy housing that are helping move us forward so a couple of the Universities in the area, both at ETSU and Milligan. Reached out to Milligan their OT program has done a few site visits with us and so it's a little, little off topic but an exciting piece of the holistic care puzzle when it comes to housing so it's more on their end for training, then than ours but we're hoping as we continue to build that partnership, help us get a foot in the door, they're also doing some retroactive research with the ETSU School of Public Health we've been partners with for awhile. They're helping us look at some of our retroactive data on home repairs and looking forward to the future as well. Planning to speak with them at the World Health conference, down in Pigeon Forge here in a few weeks, doing a little presentation together.

Amy Livingston (for Sherry), Eastern 8 CDC: Getting ready to close on a rental home in Kingsport, and we'll be starting townhomes, hopefully by the first of the year. Seven homes under construction. Met with Tina from the Hand Up Fund, hoping to be able to partner with them so we're really excited.

Rachel, Ballad Health: At the Annual Meeting when we were talking about the intersection of housing and health and we're talking about I think it was Rebecca that brought it up and then there was some conversation with Andy about the increased rate of Radon testing and how could we work that into a bigger conversation and so I'm actually writing an email, will copy Emily and we have a new smoking cessation coordinator, that just came out earlier in the month and I'm wondering if there's not some kind of connection there (lung cancer/Radon) I will make that a point to put that on the agenda for next meeting to kind of give us an update on where things are with that.

3. <u>Follow-up to the Breakout Panel at the Annual</u> Vonda: Jackie Mayo had some questions about how do we get connected they just kind of heard about that. So we've got some follow up to do there. Rebecca, one. And then of course Rachel just mentioned a second item there that that is kind of another download from that conversation. There were no specific comments on the annual meeting panel from the survey respondents.

Don't forget to be thinking about your reporting, make sure that that gets done after the end of this month or Jessie will become knocking at your door.

4. <u>UniteUS</u> (Vonda) - any other activity ongoing with Virginia, or Tennessee?

<u>Rachel</u> - Virginia has done really well about making sure that they could pay for this, and Tennessee I think that that's something that they were trying to figure out, we'll do some more checking on that after we get after we get kind of that list and see where we need to go I don't know if that was SAMHSA.

There was some conversation about THDA working with the Department of Health and Human Services, and maybe even connection with the SAMHSA grant to be able to think about how you nine us got shared out within, Tennessee, but I have heard absolutely nothing on that so don't quote me, but we'll do some checking.

Rebecca - my understanding is Ballad is supposed to pay for that, in Tennessee.

<u>Rachel</u> – Ballad will pick it up in Tennessee in our service footprint. Anything outside the service area, would not be covered. In Virginia, of course Commonwealth is picking it up which is amazing, but we will continue to pick it up for our service footprint in Tennessee. And beyond that, in Virginia when that funding is that when the state stops paying valuable pick it up for the service area in Virginia. People, Inc. is a big player in terms of referrals. Working to make sure that they are on-boarded to UniteUS.

What would be really helpful for me and Emily is to have a list of, you know, maybe Vonda Me, me and you and Jackie can work on this but if I really had a contact list so that I could just reach out to folks, then I can do some work on the back end. Our favorite conversations probably the state level that I hope are being had but if I have any update on the next meeting I'll, I'll let y'all know as well.

Andy – duplication of reporting on so many crucial programs and all of those are very different. People Inc. does good job at that but you know we're kind of having to take a long view. Rachel - In this scope it gets messy and in reality this is still really new work the United platform has only been really launched since what like late June. It's still very new and I think considering it's going to take some time and so just you know being a little bit vulnerable organizationally and understanding that you know we have a lot of work to do and just talk to try to dig in and do it and try to sell it to folks like you know people link as best we can, but I get the difficulty. Andy – Grantors have specific needs/reporting systems – Grantees – are expected to report their findings and they're not going to want to report through two different programs, we don't have the manpower to do that.

<u>Sam -</u> We've talked about the interface between UniteUS and any other potential. Like HMIS or the two-generation kind of system right which is all interesting, but you're right, the duplication of data entry is just not feasible sometimes.

<u>Andy -</u> Do you know whether Ballad's emergency departments are still doing the screenings? And are those screenings going through UniteUS in Virginia?

<u>Rachel</u> - Let me make a note and check with Paula, as far as I understand the screenings are still happening but I don't have received an update but let me check.

<u>Vonda</u> – it might have been Jackie Mayo who asked. She's in Knoxville, outside the Ballad footprint. And so, how does she get connected, or how does she even explore if this is something that might be of help to her organization, because they did they also have a lot of referrals, they also have their own system that they have to report information into again HMIS as well .

<u>Rachel</u> - There is a company wide town hall that I'm scheduled to get to I think it's tomorrow. On a larger scale that this is a question I'd like to bring up on your own behalf. For the housing industry about that duplication of efforts and having to use systems like:

- HMIS homeless management information system
- EMPOWER
- Service Point.

- One Case
- Salesforce Service point (Family Metrics for reporting and other case management)
- CounselorMax (for HUD)

<u>Vonda</u> – see Katy's comment in the chat, it's really not a trivial concern when all of the large majority of the grant dollars are program related, but they do not cover the data entry information, they don't cover that staff position. They want the information you use their money for the family but that dollar figure to hire that staff and to make sure that you've got that information is not covered within those grant programs.

<u>Rachel</u> - These are the questions that need to come up at town hall tomorrow. Emily, beyond that and we'll make sure to bring these up on behalf of Fahe because I think they're excellent there excellent points.

<u>Katy</u> - I'm not trying to pick on Ballad, I just recognize that you have an opportunity to be a voice in the conversation and I just want to be sure that that is that information is available to get into other conversations. So I just want to be really clear that it's sent with warm intents. <u>Rachel</u> – I come from a nonprofit background and I've worked in your grant dollars and know that grant dollars don't always support the people who are actually doing the work but you're right the end of the day, what everybody's after is the data right and I do take it seriously in a position to be I am in a position where I can do the communication between organizations on this call and a bigger audience. Let's solve the problems that we're already seeing before this thing gets any bigger. If this is really going to work, then these are the issues right here. I just want to make sure that I'm holding myself accountable, from a community member standpoint to make sure that I can bring these up in the best way possible. I think, Emily and I both feel really similarly about that. so.

Sabrina - I would just one thing just to add on to that, like, even if you can somehow try to use the same system like Salesforce, we looked into this, it would cost an insane amount of money, and we spent months with like Salesforce and a consultant trying to figure this out. If thousands upon thousands upon thousands of dollars to be able to customize a system where the list app inside of Salesforce, and a client management system that hood approves app in Salesforce to get them to even talk to each other because they're all proprietary inside of there.

Sam - I was just going to talk about software for a second so we're actually doing a huge software conversion right now going to YARDY (sp?). It's mainly housing software, a couple hundred thousand dollars doing that. I'm going over all of our housing software already so we're looking we have tag which is tracking at a glance. We're trying to integrate as many of those different products that we have out there into this one, it's a pain and the capital is huge!

<u>Rebecca</u> - THANK YOU to Rachel and Emily also for advocating for us. We genuinely appreciate this effort.

Rachel - I'm happy to be in a position that I can, I can try to make some sort of change in whatever way I can but I'll follow up on on the things and Emily and I'll dig in. I'm happy to have Emily on board with us she has a master's in public health and has worked with clinics like RAM and just as on, I think a fast track to some great stuff and she comes from a sort of a community building nonprofit background; so we've got a good team. I feel really lucky to work for department population health I think Paula's vision there is fantastic We're all just working against a big machine sometimes and it feels really difficult and when you're the person that has to look somebody in the US and trying to find them a house, I get that that feels a lot different than, you know, talking about, you know.

<u>Jackie</u> - I'm working on that list of people from that session Rachel.

<u>Vonda</u> – next meeting is December 7

All previous notes, and many other articles and resources can be found on our page of the Members website: https://www.fahemembers.com/healthcare-housing/