

TO: House Committee on Human Services and House Committee on General, Housing and Military Affairs

FROM: Washington County Homelessness Task Force (Another Way, Capstone Community Action, Downstreet Housing and Community Development, Family Center of Washington County, Good Samaritan Haven and Washington County Mental Health Services)

RE: Comments on DCF's Emergency Housing Initiative

DATE: February 14, 2021

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Our task force has been meeting weekly since the beginning of the pandemic and have established a strong partnership in support of our homeless neighbors in Washington County. During this time, we have responded to evolving situations as a team, in partnership with AHS/OEO.

We reviewed the proposed changes by DCF to the Emergency Assistance Program administered by the State. We would like to share the concerns our Task Force has to this proposal.

We are very concerned about both the content and timing of this proposal. At the outset, we do want to affirm that AHS and Sarah Phillips, in particular, have done a great job and have been strong partners to our region during the past year. We fully believe that OEO shares our goals for improving emergency housing response and that Sarah understands the challenges our clients face.

We are very concerned about the timeline presented in the proposal. All of our organizations are stretched beyond capacity to address the multiple aspects of the pandemic upon the clients we serve. The proposal to begin to embrace an additional responsibility, currently held by a robust state infrastructure, feels very rushed. We are still in the height of a global pandemic. To us, it is unrealistic to restructure amidst the pandemic, and will cause any effort to transition to "the community", ultimately, to fail.

AHS is understandably concerned about what happens when FEMA goes away -- and so are we! That is why we are focused on that immediate challenge and believe our collective efforts need to continue be focused on creating more & better places for the unhoused hotel guests to reside post-motel. A new requirement to take on an entirely different mission and program will simply overwhelm us, and deter us from the tasks we are now embarking upon. This proposal must be delayed.

There are some fundamental challenges within this proposal. This plan depends upon asking nonprofit corporations to manage a program of last resort on essentially a fixed budget which is problematic on its face. While the state has the ability to be flexible to

the critical need for emergency housing, and spend what is needed to address emergencies, nonprofits do not. Nonprofit corporations have very limited reserves available for a program that can be volatile in nature as we have seen with the pandemic. Therefore, we believe this program is best managed at the state level.

We do believe that the approach of working directly with communities as has worked throughout the pandemic should continue; however, the ultimate responsibility for administering the program should remain with the state. At this moment, we can't really respond to the proposed levels of funding as there are a lot of unknowns in those details.

The AHS proposal has at its core, a goal of fostering more community-based solutions. We think that can be achieved without transferring ultimate responsibility for motel voucher administration to the communities. Instead we recommend a major expansion of the GA - Community Investments Program with improved coordination between ESD and community organizations, along with a beefed up technical assistance program focusing on effective service delivery and other solutions. With this approach we could gradually move away from over reliance on the motel system.

We welcome a conversation about how we can work even more closely with ESD with the expectation that they continue to provide the backbone infrastructure and hold the financial risk and that we work to take on more responsibility to improve the operations and management of the program. As the discussion continues, we will certainly keep an open mind.