

TO: Senate Health and Welfare Committee
FROM: COTS
DATE: April 16, 2025
Room 17 Statehouse
RE: H.91, draft 7.1

COTS is a homeless services agency operating in Burlington VT, and Chittenden County. We offer Emergency shelter, homeless services, motel outreach, and family supportive housing.

- **Daystation Shelter:** Daytime drop-in for adults 18+, daily meal, showers, laundry, wi-fi, physical mail, COTS services, many community partner service agencies. 75-100 people daily, 1,780 unique visitors in fiscal '24.(up from 500 in fiscal '23)
- **Waystation Shelter:** 36 beds of substance free, housing focused shelter. Engagement in services is an expectation of the stay.
- **Warming Station:** A low-barrier winter shelter, 40 beds
- **Family Shelter:** 15 families in a substance-free, housing focused shelter with Children's education advocate and Children's Mental Health Advocate on staff.
- **Smith House:** 7 bed transitional housing facility for individuals 18+
- **Family Supportive Housing:** 50 families with DCF involvement, long-term support.
- **Motel Outreach:** April 2020 to April 2025; Housing navigation support for households in GA motels, 1,930 served, 266 moved into permanent housing.
- **Affordable Housing:** 106 units of permanent affordable housing for formerly homeless households.
- **130+ people (including children) in shelter each night; 140+ people (including children) in housing each night.**
- **106 households moved from homeless into housing in the last fiscal year '24, 40% of all such movement in Chittenden County.**

H.91 Concerns

1. The bill was written by the House Human Services Committee without any testimony or input from shelter and service providers.
2. Comments provided to the House Human Services Committee by COTS were neither acknowledged as received nor posted as part of the public record.
3. The bill upends a very functional HOP funding system that includes allocation of funding, state-wide guidelines, superior support from OEO, flexibility to changing needs in the community, and good grant reporting, billing, and payment system. Please note that agencies such as COTS are laying out operating cash

and then being reimbursed quarterly. We can count on \$225K in HOP reimbursements arriving in a predictable manner. This week I submitted \$760K in invoices to AHS and OEO along with our reports. I am confident that COTS will be reimbursed for the services that we have provided – and that we have fronted the cash for.

4. I see no savings in duplicating this infrastructure in five agencies across the state. I've been working closely with CVOEO for the better part of 14 years, and they are great community partners. However, this bill asks CVOEO to ramp up significantly to duplicate an allocation process, a reporting process, and a billing process that already exists at OEO and runs well. The ongoing financial support for this infrastructure will take away from the funding that is available to serve those in need. Non-profits will need to do more with less.
5. The bill risks implementing five disparate service areas, which could negatively impact one another as people move between districts (and they do). i.e. one area utilizes motels and another does not, there will likely be differing eligibility, services, and quality of services from region to region.
6. The bill does not increase access to services for Vermonters. It merely takes away a functioning system of HOP at OEO, and rearranges the system.
7. The bill risks substantial state and private investment in projects such as our shelter expansion plan, and others in the state. Our plans have been undertaken in concert with OEO over a long time, and this bill jeopardizes the necessary funding to operate them in future years, or even next year. Our new location and expansion plans were done in concert with OEO, and we need that level-headed, long-term view from our state partners.
8. Community Action Agencies are great partners, but this bill creates conflict of interest. It places a peer organization in charge of the distribution of funding while at the same time that organization in charge of allocation also accepts state funding to perform some of the same functions that other agencies perform. And while I trust the intentions and integrity of my community partners, it's a systemic flaw that will backfire. There is talk of a democratic process in which the CoC's vote on funding under H.91, and after 14 years of CoC meetings, I can share some realities.
 - Very few executive directors attend the CoC meetings in Chittenden County (CCHA). They are largely attended by well-intentioned folks who do direct service work and do not necessarily have a big picture view of their own agency or of the community, none of them are paid to do so.
 - If funding allocations are made in this arena, we risk having high-functioning programs disrupted by well-intentioned, but not necessarily qualified, folks.

- We risk funding decisions being made on the mood of, or the particular attendees of that meeting.
 - Decisions of the CCHA are mercurial; I've literally seen the CoC prioritize Veterans for the coordinated entry system because it sounds great, only to have the same group vote to prioritize families just a few months later, because it sounds great.
9. I take issue with the vague language in the bill that states "Vermont's emergency housing statutes, rules, policies, procedures, and practices be modeled on Housing First principles." Housing First is a specific program designed for mental health and substance use disorder treatment. It involves 24/7 in-person availability of a medical professional, a mental health professional, a substance use disorder professional, and a peer support worker for each person enrolled in the program. It also assumes that the housing is paid for, and that a participant may be relocated from one unit to another when behavioral issues doom a tenancy. This language is vague, confusing, and is not germane to the discussion of the bill. Housing First is an approach that should be supported for agencies such as Pathways, but not a mandate for service provision across the non-profit spectrum.
10. I do agree that the GA Emergency Housing system is less than ideal. However, I want to speak a bit about our experience with our Warming Station that has been in operation. We proposed 30 beds and have over-delivered with 40 beds each night this winter. **The biggest lesson in operating the low barrier Warming Station is that just about every guest we are serving there would greatly benefit from a 24/7 residential care setting. As a state, we should be providing a setting in which not only would folks' basic needs be met, but physical and mental health care needs, and substance use disorder treatment could be provided.** I want to be clear that we are serving folks with auditory and visual hallucinations, folks with acute substance use disorder, folks with mobility issues such as walkers and canes, folks with severe medical issues, a person discharged from the hospital following back surgery, and not one but two women who were sleeping rough who presented at the Warming Station in late stage pregnancy. There is scarcely a night that our team does not call an ambulance. Most nights it occurs more than once, just the other night there were four medical emergencies. Please leave HOP in the capable hands of OEO and put the GA Emergency Funding money into 24/7 transitional residential treatment centers where folks can live and receive dignified, daily care like showers and meals, medication management assistance, medical care and SUD treatment. Do so by harnessing the full capacity of the State Department of Health, Department of Health

Access, Department of Mental Health, Disabilities Aging and Independent Living, and the Department of Corrections. This type of bold action will truly help the most vulnerable in our communities.

11. Against the current backdrop of chaos in funding at the national level, which we are all rushing to adapt, this bill does not at all feel supportive of, or even recognize, the work that non-profit shelter and service providers accomplish.

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