

# The Southeastern Oklahoma Continuum of Care

*The Southeastern Oklahoma Continuum of Care is committed to prevent and end the tragedy of homelessness among individuals and families.*

**Serving Atoka, Bryan, Carter, Choctaw, Coal, Haskell, Hughes, Johnston, Latimer, LeFlore, Love, Marshall, McCurtain, McIntosh, Murray, Muskogee, Okfuskee, Okmulgee, Pittsburg, Pontotoc, and Pushmataha Counties.**

Meeting Minutes

Thursday, September 14, 2023

9:30 am CoC Meeting

## Virtual Meeting

1. Introductions-Everyone in attendance introduced themselves and the agency they represent. Sign in via the chat. See attachment.
2. Projects for Assistance in Transition from Homelessness (PATH) – Update
  - a. CREOKS- Kristi Boydston; we recently hired Alissa Tinney for the new case manager position. We are going to be doing a winter clothing drive if you want to donate to this cause.
3. Supportive Services for Veteran Families Program - Update
  - a. Community Service Council-Not present.
  - b. KI BOIS CAF- Tammy Randazzo; the award announcements have been made and you can view that online. If you have any referrals, please send them our way. We also have our Shallow Subsidy program that allows us to offer assistance to veterans for up to 2 years. If they are outside of our area just make sure to have them, call 211.
4. Homeless Management Information System (HMIS) CDSA has a new HMIS coordinator Cody McMullen. If you have any HMIS needs, please reach out to him. We are making an effort to support the homeless outreach in each area. The new HIMS documents will be sent out after the meeting. There has also been a change to the ROI, so once it is signed it is valid until it is revoked. We are about to submit the Consolidated Applications so if you have any data to clean up, please do that in the next 7 to 10 days.
5. Rescind COVID-19 Response Guide: A motion was entertained to rescind the COVID-19 Response Guide since the state of emergency has ended. The motion was made by Tammy Randazzo. The motion was seconded by Christi Baldrige. Motion Approved.
6. VAWA/Domestic Violence Emergency Transfer Plan Policies: A motion was made to approve the VAWA/Domestic Violence Emergency Transfer Plan Policies as presented. The motion was made by Christie Baldrige. The motion was seconded by Sara Frye. Motion approved.
7. FY 2023 HUD CoC NOFO was released on July 5<sup>th</sup>, 2023. It must be posted by September 26<sup>th</sup>, 2023 and submitted by September 28<sup>th</sup>, 2023.
  - a. Consolidated Application: A motion was made to amend the Governance Charter to state that our executive committee will review and approve our application before submission. The motion was made by Sarah Frye. The motion was seconded by Samantha Robertson seconds. Motion approved.
  - b. Project Review, Rating, and Ranking: We have two applications for renewal. RRH program KI BOIS and the DV Bonus project that was awarded to Grace Center last year.
8. FY 2022 HUD CoC NOFO
  - a. DV Bonus Project DV Bonus Project: This was so exciting that we were awarded this funding. In August there was a change in leadership at Grace Center and the board was not comfortable taking Federal money. The field office said we could find a different

grantee, so we approached Family Shelter of Southern Oklahoma and they agreed to take the funding. We have had to do some paperwork and make some changes due to the change in agency. The grant function will be used the way that Grace center wrote the grant. If there is a glitch in paperwork it would operate through KI BOIS as the fiscal agent. We were very excited we were able to find another grantee. They are located in Ardmore.

9. HUD CoC Supplemental NOFO - Update
  - a. Ada Homeless Services Rural Grant - \$395,924 Ada Homeless Sarah Frye we signed the contract with a start date of Oct. 1<sup>st</sup>. We just have not really heard much. The training is not scheduled until October/November, so we are just waiting for guidance.
  - b. OHFA – 20 Stability Vouchers – Waiting for OHFA to develop forms and policies for the Stability Vouchers.
10. Plan for Serving Individuals & Families Experiencing Homelessness with Severe Service Needs
  - a. Lived Experience Work Groups Report we have a dv meeting set up for Tuesday September 19<sup>th</sup>.
  - b. Advancing Equity Committee Report
    - i. Discrimination Policies Advancing Equity Committee Report Sarah Frye-We had our first meeting. We came up with some policies and procedures. We will set up some training access on the CoC website available to the CoC. A log to show which trainings you have done. We want to advance our reach to those agencies that tend to have a lot of interaction with that population that are experiencing homelessness and make sure they know our services. Ask that each organization each year review your equity data once a year to be able to analyze it and see how we could respond. We will be doing a racial analysis and once that is done, we will send it out to the CoC. What shows up in PIT and what is in HMIS.
11. CoC Committee Reports
  - a. Point in Time/Housing Inventory Count Needs a chair, we will be doing electronic forms again.
  - b. Performance and Outcomes ESG grantees will need to be on this and CoC funded programs will need to be represented. HUD is requiring a housing first assessment be done. Housing first principles and how you implement that. This is currently being done with the KI BOIS RRH program.
  - c. Consolidated Application no one signed up for this so we will be reaching out to some of you to gather information on certain topics like street outreach.
  - d. HMIS/Data HMIS we just had new updates with a learning curve, so we have been working through some questions. There will be new data standards this year and changes will be made.
  - e. Coordinated Entry System Christi Baldrige we have reached out to see about getting some training on this, so we are just waiting for a response from the field office.
  - f. Veteran we have not met yet but have 4 on the committee. We will meet in October; we are talking about doing an information push in November to make sure the service information is out to the public and agencies. Like a PSA drive.
12. Policy Training – Discrimination Policy training once we have a more detailed policy it will be updated to 2023 standards.
12. Discussion and Announcements Our 4<sup>th</sup> quarter meeting will be either Nov 14<sup>th</sup> or 16<sup>th</sup> and it will be virtual.
13. Adjourn

If you have any questions, please contact Linda Love at 1-918-967-3325.

***Please note that attendance at a minimum of two meetings is required to qualify as an active member.***

# Southeastern Oklahoma CoC

## Anti-Discrimination Policies

Southeastern Oklahoma Continuum of Care (OK-507)

### *Policy regarding Equal Access in the Continuum of Care (CoC)*

Effect Date:

The Southeastern Oklahoma CoC, represented by Southeastern Oklahoma Continuum of Care member agencies receiving CoC funding are committed to complying with all requirements regarding the HUD Equal Access Rule and all other federal, state, and local non-discrimination and privacy laws.

This policy will be followed by the CoC, all CoC-funded agencies within the CoC and the Coordinated Assessment system (together, "CoC agencies"), and CoC agency and Coordinated Assessment staff, volunteers, and interns (referred to, jointly, as "agency staff" herein).

## Equal Access Protections

### *Equal Access Policy*

CoC-funded providers shall not discriminate on the basis of any protected characteristic, including race, color, national origin, religion, sex, familial status, disability, age, gender, LGBT status, or marital status. CoC-funded housing shall be made available to all otherwise eligible individuals regardless of actual or perceived sexual orientation, gender identity, or marital status. The CoC and CoC agencies will ensure equal access to programs, for all individuals and their families; provide housing, services, and/or accommodations in accordance with a clients' gender identity; and determine eligibility without regard to actual or perceived sexual orientation, gender identity, or marital status.

### *Equal Access Procedures for Southeastern Oklahoma CoC*

- The CoC will provide annual and as-needed training to CoC agencies and agency staff regarding the Equal Access Rule and related requirements.
- The CoC will maintain an Equity Training shared file that shall be accessible through the SEO CoC web page. Said shared file shall also contain a "log" for tracking purposes.
- The CoC and CoC agencies will use appropriate, inclusive language in communications, publications, trainings, personnel handbooks, and other policy documents that affirms the CoC's commitment to serving all eligible clients in adherence with the HUD Equal Access Rule.
- The CoC and CoC agencies will continue to develop partnerships with organizations that can provide expertise around the process of changing gender markers on identification and benefit applications or will ensure subject matter expertise among staff.

- The CoC and CoC agencies support all clients in understanding their privacy rights and the implications of releasing information.

### *Equal Access Procedures for Agencies*

- CoC agencies will ensure that staff, volunteers, and contractors understand that a client may not present as the way they identify.
- CoC agencies will ensure all staff, volunteers, and contractors maintain the confidentiality of a client's legal name and gender at birth and understand the potential impact that disclosure can have on a client's progress to self-sufficiency.
- CoC agencies shall annually conduct an equity data analysis to review any possible disparities in services to any specific sub-populations, especially those with historically higher rates of homelessness.
- When possible, CoC agencies will ensure that construction or property rehabilitation includes and promotes privacy and safety in sleeping areas, bathrooms, and showers.
- If a CoC program only offers congregate bathrooms or showers, all urinals/toilets and shower heads will have individual stalls to support client safety.
- CoC agencies will offer individual gender-neutral bathrooms and gender-neutral shower rooms, where feasible.
- CoC agencies will mediate and resolve conflicts between clients in a way that is respectful, fair, and equitable.
- CoC agencies will take immediate action to resolve inappropriate behavior, harassment, or equal access issues by any person (staff, volunteers, contractors, or clients).

### *Equal Access Procedures for CoC Agency Staff*

- Agency staff shall not consider a client or potential client ineligible because their appearance or behavior does not conform to gender stereotypes and will serve all individuals who are eligible for the project/program.
- Agency staff shall not ask questions or seek information concerning a person's anatomy or medical history beyond elements necessary for the purpose of providing services.
- If a client needs to be moved for harassment and safety concerns, agency staff will have a preference to move the client with a bias (e.g., move the individual who is having concerns towards the person who may not conform to mainstream gender expression/identity.)
- Agency staff will honor the request of an individual for a private space to complete intake and data collection.

- Agency staff will honor the request of an individual for accommodations based on their personal safety and privacy concerns, whenever feasible. An "accommodation" will not be given as a "requirement."
- Gender identity is not required to match the gender listed on the ID or documents.
- Agency staff will assist the clients without identification documents to understand the resources available to obtain identification documents.
- Agency intake materials will allow clients to indicate their legal name and the name they prefer to be called.
- Clients with prescribed hormones or other medications as part of their gender-affirming healthcare regime will have access to those medications.
- Agency staff and clients will use the client's preferred gender and pronoun and support the client's gender identity.
- Agency staff will be alert to and correct any misinformation or inaccurate conclusions that transgender clients threaten the health or safety of other clients solely based on their nonconforming gender identity/expression during risk-based conversations.
- Agency staff will keep a client's transgender status confidential unless the client gives permission to share this information.
- Agency staff will ensure that only essential staff, identified by administrators, are told about a client's transgender status to ensure equal access and safety.
- Agency staff will ensure that when a client's gender identity and sex assigned at birth differ, that difference is treated as confidential medical information and may not be disclosed without specific, time-limited written client consent. Similarly, a client's legal name will be treated as confidential information.

### *Policies on Involuntary Family Separation*

In compliance with CoC Program interim rule 24 CFR § 578.93(e), involuntary family separation is prohibited in CoC- and ESG-funded projects. CoC - and ESG-funded projects may not deny admission to any household on the basis of:

- Age and gender of a child under age 18, or
- Gender or marital status of a parent or parents.

The CoC will work with providers to ensure that placement efforts are coordinated to avoid involuntary family separation.

Any person who believes that they or a family member has experienced involuntary family separation may report the issue to the CoC. The CoC will investigate the claim and take remedial action when appropriate.

### *Policies on Faith-Based Activities*

CoC agencies and staff shall not, in providing program assistance, discriminate against a program participant or prospective program participant on the basis of religion or religious belief. In providing services supported in whole or in part with federal financial assistance, and in their outreach activities related to such services, programs shall not discriminate against current or prospective program beneficiaries on the basis of religion, a religious belief, a refusal to hold a religious belief, or a refusal to attend or participate in a religious practice.

**The Southeastern Oklahoma Continuum of Care  
Plan to Improve Services for Individuals and Families Fleeing  
Domestic Violence and Abuse**

This plan and strategies were developed after gathering input from survivors of domestic violence and abuse. All participants were at different stages in their journey. *Feedback and additions from the Lived Experience Working Group appear in italics.*

**Education**

Education can help break the stigma and judgement associated with domestic violence and abuse.

Law enforcement needs to be aware of what constitutes domestic violence and abuse including physical, verbal, emotional, mental, *financial, technology, and sexual abuse*. Law enforcement needs to be aware of domestic violence and abuse resources including both mainstream and tribal.

Mainstream resource providers need to be aware of what constitutes domestic violence and abuse including physical, verbal, emotional, mental, *financial, technology, and sexual abuse*. They also need to be aware of domestic violence and abuse resources including both mainstream and tribal.

The general public, *including high school students*, also needs to be aware of what constitutes domestic violence and abuse including physical, verbal, emotional, mental, *financial, technology, and sexual abuse*, in addition to contact information for the local domestic violence and abuse program. *Education should include what shelter means and services provided (keeping in mind not all shelters provide the same services), victims will not lose their children just because they go to a shelter, and individuals are eligible and will receive the same domestic violence and abuse services as victims with children. It is critical to get this information to victims.*

**Action Steps**

- 1) Provide training to law enforcement on types and effects of domestic violence and abuse and available resources *at least* twice per year.
  - a. Training emphasis should be placed on the ways men manipulate women to avoid arrest.
- 2) Provide resource cards for law enforcement to *DISCREETLY* present to victims regardless of type of abuse, and especially including non-physical abuse.
- 3) Ensure resource information is available at the local jail, courthouse, police department, sheriff's office, *hospital, Health Department, Department of Human Services, clinics, and schools.*

- 4) Provide training to mainstream resource providers, *and schools* on types and effects of domestic violence and abuse and available resources. *Ensure resource information is available in lobbies and other public areas including restrooms.*
- 5) Provide resource cards for mainstream resource providers, *including hospitals, Health Departments, Department of Human Services, and clinics,* to present to victims regardless of types of abuse.
- 6) Provide educational sessions on types and effects of domestic violence and abuse to the general public in multiple venues throughout the year.
- 7) Ensure domestic violence and abuse program contact information and crisis line number are available throughout the community, *including flyers posted in local businesses and in public restrooms (especially gas station restrooms).*

### **Access to Safe Shelter**

Domestic violence and abuse victims need access to safe shelter. Transportation is a key issue when seeking shelter. In many circumstances, victims are reluctant to call law enforcement or family members when leaving.

#### **Action Steps**

- 1) Accommodation for transportation to safe shelter should be provided at all times. If shelter staff cannot transport, an advocate should accompany law enforcement when transporting. If staffing levels do not allow for transport or accompaniment, volunteers should be recruited and trained to assist.

### **Shelter Intake**

Leaving their home and entering a shelter is traumatic for all domestic violence and abuse victims. Staff should ensure they are using a trauma informed approach when providing intake services.

#### **Action Steps**

- 1) Intake materials should be reviewed with a trauma informed lens and revised when necessary.
- 2) Staff should attend to immediate needs before starting intake.
- 3) Staff should use a trauma informed approach when doing intakes, including taking breaks as necessary, needed, or requested.

### **Entry Into Shelter**

Entry into a congregate shelter can be difficult, traumatic, and frightening. Care should be taken to use a trauma informed approach when introducing victims to existing residents.

### **Shelter Services**



Domestic violence and abuse victims can become survivors more quickly when they know what resources are available and what is expected of them. Shelter services should target both individuals and women with children.

### **Action Steps**

- 1) Review shelter services to ensure they are voluntary, and trauma informed.
- 2) Provide resource information as soon after arrival as is appropriate for the situation.
- 3) The suicide hotline number should be included with resource information and be posted in the shelter facility.
- 4) Maintain information necessary for protective orders and other court-related proceedings.
- 5) Maintain knowledge of Department of Human Services procedures for reunification.
- 6) Educate employers and partner with employers who understand domestic violence and abuse and its effects.
- 7) Maintain information on Workforce Oklahoma and Work Ready Oklahoma.
- 8) Maintain information regarding safe affordable housing destinations.
- 9) Provide tenant education for survivors moving into their own homes.

### **Service Plans**

Service plans provide a structured path to achieving goals necessary to become safely independent.

### **Action Steps**

- 1) Service plans goals should be based on survivor choice and developed by the survivor with the assistance of staff.
- 2) Service plan goals should be reasonable and appropriate for the survivor's current situation.
- 3) Goals should be accompanied by achievable action steps with reasonable timeframes.
- 4) Service plan goals should be reviewed every two weeks to determine successes and barriers.

### **Shelter Staff**

Shelter staff are key to the success of domestic violence and abuse services.

### **Action Steps**

- 1) Staff should be trained in effective voluntary and trauma informed service approaches.
- 2) Staff should use trauma informed approaches to maintain structure in the shelter environment and keep residents accountable.

- 3) Staff should be available for informal one-on-one conversations with residents. These conversations may keep a situation from escalating into a crisis.