



**PINELLAS CONTINUUM OF CARE
 Joint Funders/Providers Council Meeting
 May 2, 2024, 1:30 PM - 3:30 PM**

Location:

2-1-1 Tampa Bay Cares

13921 Icot Blvd Suite 700, Clearwater, FL 33760

Zoom Link: <https://us02web.zoom.us/j/84509762874> ; Meeting ID: 45 0976 2874

The Pinellas Continuum of Care is dedicated to ensuring homelessness is rare, brief and a one-time experience.

Time	Topic/Materials	Category	Lead
1:30pm	Welcome	Information	Kevin Marrone
1:35pm	Consent Agenda	Action	Kevin Marrone
1:45pm	Coordinated Entry Mobility Transfer Policy	Action	Sezen Boylan
2:00pm	Priority Populations	Action	Kevin Marrone
2:20pm	FSS 125.0231: Anti-Camping Law	Information	Daisy Corea & Lt. Zach Haisch
3:00pm	Streamlining Funding Processes Across Jurisdictions	Information	Charles Lane
3:25pm	Public Comments	Comments	Group
3:30pm	Adjourn	Information	Kevin Marrone

Funders' Council Meeting Attendance (Includes Voting Members, Contributing Members, and Guests)

Name	February	May	June	August	October	December
Ann Marie Winter	x					
Yvonne Morales	x					
Blossom Kapper						
Chair Kathleen Beckman						
Chuck Lane	x					
Denise Sanderson						
Arrow Woodard	x					
Tammy Hillier						
Amy Foster						
Helen Rhymes	x					
Lynn Farr	x					
Joshua Johnson						
Celeste Fernandez						
Julie Rocco						
Camille Henry						
Jeanine Evoli	x					
Diana Carro						
Duggan Cooley						
Joe Riddle	x					
Bruce Bussey						
Carol Stricklin						
Councilmember Rene Flowers						
Darlina Herring						
Karen Yatchum	x					
Sara Madden						

Providers' Council Meeting Attendance (Includes Voting Members, Contributing Members, and Guests)

Name	February	May	June	August	October	December
Lariana Forsythe	x					
Jaclyn Boland						
Michael Jalazo	x					
Lt. Zach Hasich	x					
April Lott	x					
Michael Raposa						
Kevin Marrone	x					
Micki Thompson	x					
Denis Sousa						
Ashley Lowery	x					
Dee Monje						
Jennifer Stracick						
Helen Rhymes	x					

Elisa Galvan						
Nicole Leslie						
Frank Rabbito						
Karen Yachtum	X					
Erika Giste	X					
Gabe Parra						
Holly Harmon	X					
Dolores Raffa	X					
Shirley Lightsey Manual						
Dominique Randal	X					
Donna Sicilian						
Koble Andy						

PINELLAS COUNTY CONTINUUM OF CARE
 Providers' Council Meeting Minutes
 February 23, 2024 | 1:30 PM to 3:30 PM
 Zoom Meeting

Attendees		HLA Staff
April Lott	Christine Long	Cynthia Kazawitch
Kevin Marrone	Yvonne Morales	Victoria Kelly
Lt. Zach Haisch	Helen Rhymes	Lenny Collazo
Micki Thompson	Jennifer Stracick	Daisy Corea
Michael Jalazo	Karen Yatchum	Imani Smith
Zac White	Dolores Raffa	
Lariana Forsythe	Gaby Holton	
Holly Harmon		

Welcomes & Introductions

- Kevin Marrone, Chair of the Providers Council, called the meeting to order at 1:30 pm.

Consent Agenda

- Kevin Marrone asks for a motion to approve the minutes and agenda.

April Lott motions to approve the minutes; Michael Jalazo seconds; motion passes unanimously.

Agenda Addition:

- Kevin Marrone adds HB 1365: Unauthorized Public Camping and Public Sleeping as a discussion item to the agenda. The new Florida Bill prohibits counties and municipalities from authorizing or otherwise allowing public camping or sleeping on public property without certification of designated public property by the Department of Children and Families; authorizing counties to designate certain public property for such uses for a specified time period; requiring the department to certify such designation; requiring counties to establish specified standards and procedures relating to such property; authorizing the department to inspect such property; authorizing the Secretary of Children and Families to provide certain notice to counties; providing applicability; providing an exception to applicability during specified emergencies; providing a declaration of important state interest; providing applicability; providing effective dates.
- April Lott adds that the bill could pose problems due to the current situation in Saint Petersburg where there is unhoused individuals camping in certain public areas of the city. April Lott asks the Providers Council what their thoughts are on the new bill. Audio becomes muffled and unable to translate.
- April Lott asks Lt. Zach Haisch if his command has spoken about the issue, she adds that Safe Harbor is a jail diversion program serving those who probably have been criminalized while being homeless. This law will allow/require every law enforcement office to arrest those who are sleeping in public areas not meant for human habitation. Audio Temporary Lost.
- April asked Lt. Haisch what the current capacity at Safe Harbor is, he states that the maximum capacity is 470, but realistically they could manage around 300 individuals. Lt. Haisch also states that the last thing the Sheriff wants is to turn the county jail into a shelter. April Lott added this should be on the radar of our policy makers and decision makers because there are federal advocacy groups that have gotten heard about the bill, Governor DeSantis is saying that the bill will pass through regardless of any opposition. Mrs. Lott says she has heard about conversations between businesses and lived experience personnel about possible lawsuit filings and other topics regarding the bill.
- April Lott talks about Pinellas Hope and how the program was designed to specifically to deal with some of the issues the proposed bill is meant to target. Although we have the bases for strategy between Safe Harbor and Pinellas Hope the bill will pose issues with capacity at both locations, daily accessibility as it won't be a normal 9 to 5 enrollment process.
- April Lott also talks about the importance of the Providers Council and or the Funders Council to come together to discuss possible outcomes and be prepared if the bill passes. April Lott thinks that the counties will be spending a lot of money on this lawsuit.
- Families are going to be the most affected by this bill, currently camping in a vehicle is allowed. April Lott believes that Wawa allows vehicles to camp at their parking lots. Erika Ralf interjects and states that Wawa has turned families away when trying to camp in their vehicles.
- April Lott closes the topic by saying that Kevin Marrone wanted to bring this to everyone's attention and to be able to continue having these conversations. There are advocacy groups at the federal level who got wind of this and are preparing to deal with the situation. April Lott adds possibly through the HLA we can develop a strategy to be better prepared if the bill passes. We currently have Allendale United Methodist Church who has manifested a camp and other organizations that could be used.
- Karen Yatchum elaborates about collaboration, it will take all hands-on deck. This will work better if we are all working together instead of working on the issue individually.
- Lt. Haish talks about specific language within the bill that states encampment locations can't be within a specified distance of areas that will compromise the value, safety, and security of other residential or commercial properties. Lt. Haisch states I don't know where we would do that, April Lott adds that is correct Pinellas County is a densely populated area.
- Michael Jalazo added that the bill will create conflict at federal level, the bill could be taken to court and overturned.
- April Lott asks Pamela Qualls to elaborate about other CoCs onboard with the proposed bill. Discussion ensued about CoCs such as the Miami CoC responding favorably to proposed legislation.
- Daisy Corea adds that the Polk CoC is against the bill, and she doesn't believe all CoCs are in favor. Mrs. Corea

states she will be engaging with other CoCs to learn what they are doing and what things we can do collectively. We currently have a long list, and that list will be getting larger how we move people into housing and other services.

Recent incident at HEP

- Kevin Marrone asks to adjust the agenda to provide an opportunity for Ashley Lowery from the Homeless Empowerment Program (HEP) to discuss the sensitive issue that occurred at their location the previous week.
- Committee members discuss the recent incident at the Homeless Empowerment Program (HEP). Additional discussion will follow.

Overview of Pit (Observations and lessons)

- Victoria Kelly provides a quick overview of this year's PIT; she emphasizes that the current data is still being worked on and will be provided once available. The purpose of the presentation is to bring up highlights of the event and show Providers how the data will be presented.
- The PIT count registered 534 volunteers out of those 401 were trained. 368 of those volunteers were scheduled for a total of 1800 volunteer hours outside of committee work. The average value to volunteer hours is \$26, Victoria commends Provider's for a job well done gathering volunteers.
- Vitoria Kelly explains the difference organizations that will be providing data such as CASA (providing Domestic Violence data, Jail Data will be coming from Pinellas Conty Sherrif's Office, Pinellas County schools board will be providing school data. Mrs. Kelly adds that the school data provided by Pinellas County School Board is not the same as the data collected during PIT. An example of the type of data is school kids is a accumulative list, only the children are added to the list when identified as homeless and the name will not come off the list until the end of the school year.
- Victoria Kelly explains the timeline for the PIT data, the data will be submitted to HUD at the end of April, and it will be presented at the board of directors in June by Dr. Gerhart.
- Victoria Kelly highlights the new application Survey123 used during this year's pit, the application will be able to provide data broken down by municipalities. A beneficial tool for all providers to access information, you will be able to see a map illustration of where our current population is.
- Victoria Kelly asks Providers about what kind of homelessness data they would like to see when the report is ready. Kevin Marrone states he would like to see chronicity, April Lott says she would like to see the number of times a person has been homeless. Mrs. Lott also elaborates on how the school data is collected and is not a part of the PIT data that is collected. Mrs. Lott states there must be a way for us to reconcile the number of children although they aren't counted so we don't lose sight of them when we are creating this data.
- Micki Thompson states the age should be reflected for children as well as those who are over 55, there are organizations who can benefit from having this data as it pertains to their programs.
- Kevin Marrone adds there should be a way that the schools can access this information during the time of PIT, as the current data provided by the schools is cumulative. Mr. Marrone says there is a Point in Time conducted at the school daily. Victoria clarifies that she has not seen children being surveyed because they are always done with their parents. The schools do send a letter to the parents letting them know about the PIT Survey and encourage parents to participate.
- Helen Rhymes questions why it can't be done, the form that it was used at the beginning of the year for the PIT. Victoria tells Providers that she will have to seek additional guidance, but she does see the importance of collecting the school's information.
- Victoria Kelly talks about the phone surveys that are conducted the day after PIT.
- Lariana Forsythe adds that the enrollment document Helen Rhymes was referencing is in discussions right not with a recommendation for it to be administered twice a year. Once at the beginning in fall and another one in January.

- Victoria Kelly reminds Providers that the PIT is currently set to happen the last week of January, but the committee is in conversations about a possible change.
- Kevin Marrone asks about adding vulnerabilities such as mental health or other disabilities that may be affecting the clients.
- Victoria Kelly briefly talks about the Annual Homeless Assessment Report to Congress (AHAR); the data is submitted to HUD, and they create the report which tells the rankings within counties based on data. Helen Rhymes asks about adding the percentages on the dashboard, as it is data used by their organization.
- Kevin Marrone states that there will be no time to cover the Priority Populations item on the agenda due to time constraints. But he tells Providers that it is something that must be discussed prior to the next joint meeting so we are all prepared for recommendations and decisions.
- Kevin Marrone asked Providers if anyone would be interested in creating a subcommittee to go over Priority Populations prior to the joint meeting in April. Kevin Marrone, April Lott, Helen Rhymes, Michael Jalazo, Ashley Lowery Lariana Forsyth will be volunteering for the subcommittee.

Topics to be Elevated to Funders Council

- Kevin Marrone talks about the topics that need to be presented to the Providers Council, the topics provided are ahead of the next Funders council that we need to be discussed. These issues are in line with the funding conversations we had previously. April Lott adds that she believes the list came from a previous joint meeting that both committees had agreed on working to address them.
- Pamela Qualls states earlier that morning the Providers Council spoke about the lack of emergency shelter for families and budgets that have been recommended.
- April Lott asks did they talk about the county finding the priority for that funding, Pamela Qualls says that they did and there are looking into using Street Outreach funding that is not been used currently.
- April Lott goes down the items listed on the agenda, asking providers if they agree on the topics being elevated to the Funders Council.
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HMIS Policies and Procedures

- Cynthia Kazawitch introduces Imani Smith as the new HMIS Manager with the oversight of Mrs. Kazawitch who oversees both HMIS and Finance.
- Cynthia Kazawitch speaks about the purpose of elevating the HMIS Policies and Procedures because the CoC Charter requires them to be reviewed and approved. This is an opportunity Providers to give feedback in reference to what they would like to see in the Policies and Procedures.
- Cynthia Kazawitch adds that the previous year the Policies and Procedures were elevated to the CoC board without being discussed during the meeting due to not enough time and the Policies and Procedures needing to be submitted on time.
- Imani Smith begins by formally introducing herself, the first changes she highlights are title changes and wording changes withing the document. The changes will empower Providers to own and manage their data, while making the system a more user friendly for end users.
- April Lott added that in the past she had requested to have changes tracked on the document, as it makes it hard to tell what changes have been made thus far. Mrs. Lott states that the one thing she can't see within the document is who is supposed to enter data into HMIS. Sometimes some Providers are not entering data into HMIS we had made a change to the application for Providers Council that asks are you inputting data into HMIS. April Lott would like to get to a point where they are saying that it is a strong suggestion if you are a service provider to enter data into HMIS.

- Imanni Smith explains there is a section in the document that alludes to April Lott question, she adds that there are requirements that need to be met by the Providers such as level 2 background checks to be able to enter data into HMIS.
- Cynthia Kazawitch explains to providers that there has been an HMIS expansion funding approved that will help data entry for smaller agencies that struggle getting staff level 2 certified.
- Micki Thompson adds there has been talk about how some providers must enter data into multiple systems. There are questions about data integration and if funding can be allocated for the HMIS team to be able to merge all the data into its system.
- Cynthia Kazawitch speaks about the growth of HMIS, highlighting that currently there are over 400 HMIS end users in the County. But add that with growth comes capacity issues, which currently had the ratio to 100 plus end users to manage per HMIS staff member. Cynthia Kazawitch adds the current HUD guidelines state there should be a 75 to 1 ratio.
- April Lott states there should be clearer guidance about the fees associated with HMIS licenses, the current understanding is that agencies only get charged once a year. Cynthia Kazawitch explains the explanation was added to the document because multiple providers had inquired about the same information. Mrs. Kazawitch explains to April Lott that once a year a message goes out to the Providers asking how many licenses will be needed. The agencies agree on the amount and that's how they are purchased, but this does not happen without the approval from someone at the organization.

Closing Remarks

- Kevin Marrone asks Providers to end the meeting on a positive note after a meeting full of heavy discussions. Lariana Forsythe shares how Kevin Marrone provided her organization with a solution to their parking issues due to all the construction workers parking near their location.
- Kevin Marrone also adds that Whispering Pines will be opening 20 units for families.
- Lariana Forsythe shares CASA has expanded their services to Marion County.
- April Lott shares the story about an unhoused female that had been brought up in previous meeting, who was recently provided permanent housing after a very long period of homelessness.
- Helen Rhymes shares the story about a gentleman she came across who she remembered from seeing him sleeping at City Hall. The gentleman has been provided shelter and he provided Helen Rhymes with pictures expressing his gratitude for the assistance.

Adjournment

- Kevin Marrone, Chair of Providers Council, adjourned the meeting at 3:32pm.

**Pinellas Continuum of Care
 Funders' Council Meeting Minutes
 February 23, 2024 | 9:00am – 11:00am
 Virtual Only
[Click Here to View Meeting Recording](#)**

Attendees		
Councilmember Kathleen Beckman	Chuck Lane	Arrow Woodard
Helen Rhymes	Joe Riddle	Jeanine Evoli
Karen Yatchum	Yvonne Morales	Lynn Farr
HLA Attendees		
Pamela Qualls	Lara Wojahn	Victoria Kelly
Cynthia Kazawitch	Imani Smith	

Welcome (presented by Councilperson Kathleen Beckman)

- Quorum was achieved at 9:03 am
- Councilperson Beckman called the meeting to order at 9:03 a.m.
- Funders' Council members and HLA staff were introduced.

Consent Agenda

Arrow Woodard motions to approve the December meeting minutes; Janine Evoli seconds; the motion passes unanimously.

- The attendees were informed that the Providers Council did not agree to merge the two councils.

Meeting Schedule and Location for 2024

- 2024 meeting schedule was presented to the group.
- A few members were confused because there was a joint Funders and Providers Council meeting on their calendars for later in the day. They were informed that the afternoon meeting was only for Providers Council.
- **ACTION: HLA Staff to send out a clarifying email to let the group know that there was no joint Funders and Providers Council meeting later in the day**
- The October joint Funders and Providers Council meeting is well timed to agree on the priorities for the upcoming budget season and grant offerings.
- The December 20 meeting date is not convenient for members as it's too close to the holidays.
- The group was asked to weigh in on which alternate meeting date would be best for the last meeting.
- Karen Yatchum thought the December 13 meeting would work as long as there is enough time for the priorities to be agreed on by all committees and boards.
- Budgets have already been submitted by now.
- Arrow Woodard noted that having the data to back up the priorities is also important.
- Pam Qualls stated it would be helpful to have the data by June to support the priorities discussion.
- The group agreed to hold the December meeting on the 13th.
- For the coming year: Data available in June, discussion of what it shows in August and then decisions in October, to be confirmed by the CoC in November, then December 13th meeting the Funders will know what the priorities are.

Karen Yatchum motions to accept meeting dates; Helen Rhymes seconds; the motion passes unanimously.

- Group agreed to have the December 13th meeting virtually due to challenges with quorum.

HMIS Policies and Procedures (presented by Cynthia Kazawitch and Imani Smith, HMIS)

- Each year the Funders Council must review and approve the HMIS Policies and Procedures, Data Quality Plan and Benchmarks.
- Imani Smith presented the updates to the HIS Policies and Procedures, Data Quality Plan and Benchmarks.
- There was discussion specifically about why some services, such as street outreach, had different benchmarks for data quality.
- The data that has quality benchmarks are required by HUD, which is why it is so important to collect the information accurately.
- Arrow Woodard wondered if the data quality benchmarks and performance are posted on the HLA website
- HMIS staff clarified that the dashboard on the website was created for funders a few years back and it is updated quarterly.

Funders Council Charter

- Councilperson Beckman started the conversation by noting that the Funders Council needs a Chair, a Vice Chair, and a Secretary.
- Karen Yatchum mentioned that she does not recall anyone being a secretary.
- Councilperson Beckman suggested that, once a Chair and Vice Chair are selected, the Charter can be amended to reflect the wishes of the group.
- According to the Charter, the Chair would serve on the CoC Board and Executive committee as well.
- Pam Qualls noted that the Charter could be amended to allow the Chair to assign someone else to sit on the CoC Board and Executive Committee.
- Chuck Lane said Duggan Cooley told him the time commitment is a lot and he would need to better understand how the interaction with HLA staff would look.
- Karen Yatchum clarified that she is happy to participate in any committee, but she cannot vote potentially in opposition with one of her commissioners. The County has an administrative directive prohibiting staff from sitting on boards and voting to avoid the appearance of a conflict or violation of Sunshine Law.
- Councilperson Beckman asked Jeanine Evoli if she would be interested since she has no elected official over her.
- Ms. Evoli noted she is very new to the Council and is still getting her feet under her and would need a better foundation before agreeing to a leadership role.
- Helen Rhymes noted that she has one on ones with her elected official and there would definitely be a perception of conflict.
- Pam Qualls noted that someone else may be assigned to the voting position to avoid the perception of conflict.
- **Action: Pam Qualls will e-introduce Chuck Lane to Daisy Corea.**
- Chuck Lane will represent the Funders Council at the next joint Funders and Providers meeting.
- Arrow Woodard will check with her higher ups on taking a leadership role as well.

New Members for Funders Council

- Pamela Qualls noted it would be nice to have corporate representation on the Funders Council. For example, HLA just submitted a grant application to TD Bank and Citi Foundation.
- Arrow Woodard opined that healthcare representation is important. They should be a funder at the table.
- Camille Henry from Northside Hospital was recently elected to Funders Council.
- Councilperson Beckman noted that BayCare is an important funder.
- Annemarie Winter is a member of the Funders Council – she is with the Area Agency on Aging.

- Members are encouraged to reach out to Pam Qualls and Lara Wojahn if they have any ideas on new membership.

Interest in HUD Alignment Training

- Councilperson Beckman started the conversation by noting that the members of the Funders Council sometimes get conflicting advice from their HUD TAs and it would be beneficial to have everyone on the same call to get on the same page. Is this something the group wants to see?
- Arrow Woodard mentioned that the group should get together first and compare notes. The analysis should be by program. The ideal is that each funding source has standard performance measures for each local government, which each can add their own measures if they want. The process started in 2016 by taking the HUD measures, inserting standard language into each contract.
- The plan is to find out where they differ and then request a HUD TA to advise on alignment and streamlining. First is the documentation and eligible expenditures.
- As an example, the down payment program for each local government was not the same so they streamlined and simplified the terms so that potential participants were given the same information from each local government.
- Chuck Lane said that the conflicting guidance from HUD was more of an issue during the pandemic. Not so much now. Agrees with Arrow that its more about streamlining between the municipalities.
- Joe Riddle agrees – they all use Neighborly and they can tweak the Neighborly software so all applications are as close to each other as possible.
- Councilperson Beckman wondered if they wanted HLA to facilitate the process or if this is something that the local governments could do on their own.
- Arrow Woodard replied they could do it on their own like they did for down payment assistance. Once the local governments have gotten together they can run their applications and processes by HUD to get their approval.
- The group could talk about how to move towards a fee for service model rather than invoice reimbursement.
- Joe Riddle pointed out that their grants fund positions to carry out the programs.

Workflow Information Request

- Kathleen Beckman presented a draft letter to funders in the county about the priority of the CoC being family emergency shelter.
- Per Helen Rhymes, 25 family beds will go away once ARPA funds dry up. City of St Pete gives \$400,000 to the Collab project with the County. It is the only program that provides rapid rehousing for individuals. She noted that it would be beneficial for other municipalities to join the Collab.
- Karen Yatchum stated that she moved forward with the recommendations from the October meeting regarding funding priorities. They are still funding a program delivering medical care to homeless and street outreach.
- They are shifting their \$400,000 from street outreach to family shelter. Their current provider for family emergency shelter is HEP.
- Jeanine Evoli said her organization funded RRH recently to assist 30 families each by two agencies – 60 families total. They are currently working on their FY25 budget and will see the outcomes of the program to determine recommendations for FY25.
- There was discussion about the length of time the families receive housing assistance in these programs and the costs involved.
- **ACTION: Jeanine Evoli has committed to sending Pam Qualls and HLA staff the language of the contract that sets out how long the family is able to receive support to discuss at the next meeting.**
- Arrow Woodard communicated in Largo's budget process that family shelter is a priority.

- Karen Yatchum stated that it was the intent of the Collab project that more local governments would participate to expand the capacity of the program.
- Arrow Woodard recommends sending letters to state and federal legislators outlining priorities for funding as well.
- Karen Yatchum will send out the Collab interlocal agreement.
- Arrow Woodard said that at the time the Collab agreement was being negotiated, there was not enough data and experience with RRH to convince Largo to join.
- Kathleen Beckman mentioned the Housing Pact that is going to Forward Pinellas, which is an important statement of intent of municipalities.
- Pam Qualls asked the group if there is anything they need prior to March 25 when Daisy Corea starts, to let her know.
- The group discussed what details should be included in the letter.
- Kathleen Beckman suggested that the workflow should include a calendar of committee meetings at the state and federal level.
- The HUD CoC award was discussed. \$6.1 million for the 2023 NOFO.
- No preliminary data on the PIC count.
- Karen Yatchum announced that the Safe Harbor work group went to the county, and it will be used to apply for grants. They are applying to DCF to bring additional case management to Safe Harbor. They are doubling the size of the Bay Side health clinic. They are getting a grant for another small medical van.
- Helen Rhymes noted they have an RFP of \$250,000 for prevention. Everything else is static.
- Meeting adjourned at 11:02.



Coordinated Entry Mobility Transfer

Rationale

Coordinated Entry (CE) promotes housing stability for households and recognizes that circumstances may require a change in a current shelter or housing placement. This Transfer Policy applies to the following types of transfer through the Coordinated Access System:

- Rapid Rehousing to Rapid Rehousing
- Rapid Rehousing to Permanent Supportive Housing
- Permanent Supportive Housing to Permanent Supportive Housing
- Permanent Supportive Housing to Rapid Rehousing
- Family Shelter to Family Shelter

Policy

Households eligible for a Mobility Transfer are prioritized for referral to another housing or shelter placement. The Mobility Policy should be used to transfer household(s) to a different program when it is in the best interest of the household(s). To be eligible, households must have a completed CE assessment entered in Pinellas HMIS with a score of more than 3 OR a documented Full SPDAT assessment(s) exhibiting a higher-level need for care. Households are potentially eligible for Mobility Transfer regardless of how they were referred to their current placement: **eligibility is not limited to those who were referred via Coordinated Entry**

Prioritization. Current and former residents of housing programs that accept referrals from CE are eligible for mobility transfer. Household(s) may be eligible for a transfer if they experience any of the following:

- **IMMINENT SAFETY ISSUE** – An imminent safety issue that cannot be resolved through safety planning within the current placement. A household should contact 911 if they feel they are unsafe. CE will not approve a mobility request for safety if there is a severe safety risk that could endanger those in the new program. Safety issues related to domestic violence should be referred to domestic violence resources.
- **GEOGRAPHIC CHANGE** – Travel burden that results from a household's resource location (employment, education, childcare) such that it leads to housing instability.
- **CHANGE IN SERVICE NEED**– As demonstrated by a change in Full SPDAT score and vulnerabilities that were not present during the CE assessment (VI(F)SPDAT). [A change in service request \(increase\) will be referred for Tier Three Mediation Case Conferencing before approval of the mobility request.](#)
- **EXITING PROGRAM DUE TO AGE LIMITS WITHOUT A SAFE PLACE TO GO** – Aging out of a CE participating program OR aging out of a youth shelter program without a safe housing option available.
- **Change in Family Size** - A change in the number of household members that impacts the eligibility of current housing placement.

Note that Mobility Requests are not automatically approved, and approval is not a guarantee of referral or placement within a certain timeframe

Procedures: The following process must be followed for all mobility transfers

1. The housing or shelter provider must send the completed Mobility Request (MR) form via Wufoo, documenting the reason for Mobility Transfer in full detail. The MR will be reviewed by the Senior Manager of Coordinated Entry. The household also needs to have a completed CE assessment entered Pinellas HMIS OR a documented Full SPDAT assessment(s) exhibiting a higher-level need for care. If the household is assessed and scores 0-3, the mobility request will not be approved. Mobility Requests must indicate steps taken by the housing provider staff to support the household and seek options that would keep the household housed, sheltered, and/or enrolled within their program, if possible. In addition, information about the proposed new housing or shelter placement, that would mitigate or eliminate a reemergence of the previous and/or current instability, or if ineligible exit them to a safe place.

The CE Mobility Request form can be found at: <https://hlapinellas.wufoo.com/forms/pinellas-coordinated-entry-mobility-request/>

- a. **Internal Transfers Only:** Housing or Family Shelter providers have the autonomy to make internal transfers between projects at the **same agency within the same program model type**, as well as between Safe Haven and PSH models at the same agency. A CES approval is not required.
Please note that an internal transfer from one program model type to another (e.g., RRH to PSH) requires CES approval
 - i. To ensure such transfers are documented through CES, housing or shelter providers must complete the Internal Transfer Notification Form within 2 business days after determining that an internal transfer will occur. This form will include the date of transfer if known.
 - ii. The form can be found at: <https://hlapinellas.wufoo.com/forms/z90afxr0vjcr1v/>
 - iii. CE Staff will acknowledge receipt of the internal transfer notification form and will complete a CES referral in HMIS within 2 business days. *Providers do not need to wait for this referral to be entered in HMIS by CE staff to transfer a household.*
2. Family Shelter Mobility Transfer- CE staff will facilitate conversations with the household and family shelter provider to understand both perspectives of the mobility request and ensure the household wants to transfer shelter programs. This follow-up will be completed within:
 - a. One business day when there is a safety concern.
 - b. Three business days when there is not a safety concern.
3. Rapid Rehousing Mobility Transfer (increase in service)- CE staff will initiate a Tier Three Mediation Case Conference Meeting, with emphasis on the Mobility Request (example: RRH to PSH program transfer)
 - a. One business day when there is a safety concern.
 - b. Three business days when there is not a safety concern.
 - c. Meeting attendees should include the housing provider (required), Emergency Shelter staff (if applicable), Community and Veteran Navigators (if applicable), participant advocates, and CoC-funded PSH staff (required).
 - d. A copy of the Mobility Transfer Request Wufoo Form will be emailed to meeting attendees.
 - e. The current RRH provider must continue to support the household through the MR process until the household is successfully (re)housed in a PSH program.
4. Permanent Supportive Housing Mobility Transfer (PSH to PSH)- CE staff will initiate a Tier Three Mediation Case Conference Meeting, with emphasis on the Mobility Request
 - a. One business day when there is a safety concern.
 - b. Three business days when there is not a safety concern.
 - c. Meeting attendees should include the housing provider (required), Emergency Shelter staff

- (if applicable), Community and Veteran Navigators (if applicable), participant advocates, and all CoC-funded PSH staff (required).
- d. A copy of the Mobility Transfer Request Wufoo Form will be emailed to meeting attendees.
 - e. The current RRH provider must continue to support the household through the MR process until the household is successfully (re)housed in another PSH program.
5. Family Shelter- *If a Mobility Request is approved, the provider who submitted the MR is responsible for declining the shelter referral in HMIS with the appropriate referral outcome/reason.*
 - a. **Households approved for safety reasons will be prioritized over non-safety reasons.**
 - i. ***If the Family Shelter Provider has capacity within their agency, immediate enrollment is permissible (see Internal Transfer Rule)***
 - b. The eligible household will be referred to an appropriate shelter as soon as possible.
 - c. CE staff will update necessary information in Pinellas HMIS.
 6. RRH or PSH- *If a Mobility Request is approved, the provider who submitted the MR is responsible for declining the RRH/PSH referral in HMIS with the appropriate referral outcome/reason, so the household can be returned to the Prioritization List (reactivated in the Priority Pool).*
 - a. The eligible household will be referred to an appropriate program as soon as possible.
 - b. CE staff will update necessary information in Pinellas HMIS.
 - c. **Household (s) who have been approved for mobility for safety reasons will be prioritized over non-safety reason mobility requests, followed by households in danger of losing their housing.**
 7. CE staff will update the necessary information in Pinellas HMIS regarding all mobility requests, if approved. If the approval for mobility transfer is to another shelter and/or housing provider, the eligible household will be reactivated in the Priority Pool and will be prioritized for the next referral.
 8. If the household has been approved but there is currently no housing program/shelter available, the housing provider/shelter will continue supporting the household, develop a plan, and refer household(s) to needed services as necessary.
 9. If denied mobility transfer through CE, the housing situation and housing plan will be determined between the housing provider and the household(s).

Pinellas Continuum of Care

CE Mobility Request

The request will NOT be considered unless the form is ENTIRELY complete.

Mobility Requests are not automatically approved, and approval is not a guarantee of placement within a certain timeframe.

Today's Date: _____

Name of staff completing form:	Staff contact information:
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HOH Name:	HMIS ID:	HOH Date of Birth:	Household size:
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For families: please describe the household's current custody of minors:
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Current Program Enrollment:	If housed through RRH or PSH, date of move-in:
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Household able to document chronic homelessness?	Household able to document disability? Need an ADA unit?:
--	--

Note that Mobility Requests are not automatically approved, and approval is not a guarantee of referral or placement within a certain timeframe

Categories:

Imminent Safety Risk: An imminent safety issue that cannot be resolved through safety planning within the current placement. A household should contact 911 if they feel they are unsafe. CE will not approve a mobility request for safety if there is a severe safety risk that could endanger those in the new program. Safety issues related to domestic violence should be referred to domestic violence resources. OR when a household is at risk of violence and needs to be moved to a different location. Mobility Requests under this category will be prioritized. Note that disagreements between neighbors are expected to be mediated first.

Geographic Change: Travel burden that results from a household's resource location (employment, education, childcare) such that it leads to housing instability.

Change in Service Need: As demonstrated by a change in SPDAT score and vulnerabilities that were not present during the CE Assessment. When a program and a household agree that a household needs either a decrease or increase in services related to circumstances that have changed since enrollment in the original program. Examples could include a medical event or permanent disability, or a need for more intensive on-site case management support.

Exiting Program Due to Age Limits Without a Safe Place to Go: Aging out of a CE participating program OR aging out of a youth shelter program without a safe housing option available. This also applies to youths (under 18) who are aging out of shelter or other homeless services and will be experiencing homelessness upon program exit.

Change in Family Size/Household Type: When a household is anticipating a change in family size resulting in the household being over or under-occupancy for their unit. This also applies if a household is moving from one population to another, which impacts the eligibility of current housing placement (i.e. from being a single adult household to a family household with minors.)

Please identify the reason(s) for the Mobility Request:

Select all that apply

Imminent Safety Risk

Exiting Program Due to Age Limits Without a Safe Place to Go

Geographic Change

Change in Family Size or Household Composition

Change in Service Need

Please complete each section that applies to the reason selected and provide a detailed narrative. *The narrative should explain why the request is being submitted and include any interventions attempted to prevent relocation.*

Imminent Safety Risk

An imminent safety issue that cannot be resolved through safety planning within the current placement. A household should contact 911 if they feel they are unsafe. CE will not approve a mobility request for safety if there is a severe safety risk that could endanger those in the new program. Safety Issues related to domestic violence should be referred to domestic violence resources.

1. Is a program transfer required to assure the safety of the resident? Yes No
2. Were safety concerns present at intake? Yes No
 - a. Were safety concerns discussed with the household at the time of intake? Yes No

Please explain:

3. Please list any unsafe areas for the household:
4. If a transfer is achieved, are there ways to avoid a similar concern in the future? Yes No

Please explain:

5. Does the resident require a confidential housing resource? Yes No
6. Is the resident able to remain in the current program until another resource is identified? Yes No
 - a. If not, what other housing options have been identified until a different housing program/shelter is available through coordinated entry?

Narrative:

Geographic Change (safety not an issue)

Travel burden that results from a household's resource location (employment, education, childcare) such that it leads to housing instability.

1. Location or region requested:
2. Reason for requested change:
3. Is this change a temporary or long-term solution? Please explain:

Narrative:

Exiting Program Due to Age Limits Without a Safe Place to Go

Aging out of a CE participating program OR aging out of a youth shelter program without a safe housing option available. This also applies to youth (under 18) who are aging out of shelter or other homeless services and will be experiencing homelessness upon program exit.

1. Will the resident age out of the program within the next two months? Yes No
 - a. If yes, what is the date the resident must exit your program?
2. What other housing options have the young adult and provider reviewed or pursued?
3. If this is a transitional housing resource, has an extension been pursued with the funder?

Narrative:

Change in Service Need

1. Have the resident and housing/shelter provider discussed the change requested? Yes No
2. Does the resident need an increased or decreased level of support? Increased Decreased
 - a. If Increase, please list all agencies/services involved with the household, their contact information, and their role in relation to the household: _____
3. Why is the current level of support not meeting the residents' needs?
4. Was the resident's level of service accurately captured during the initial housing assessment? Yes No
 - a. If not, what was inaccurate or omitted?
5. What interventions have been attempted or considered to maintain current program placement/housing stability?
6. Did a specific incident initiate this request? Yes No
If yes, please explain:

Narrative:

Change in family size or household type

1. Is the resident pregnant? If yes, what is their due date? Yes No Due Date _____
2. Is the resident reuniting with their child(ren)? Yes No
 - a. Number of adults in the household:
 - b. Number of children in the household:

Narrative:

HISTORY & BACKGROUND

1. Legal involvement:
 - a. In the past 3-5 years? Yes No
 - b. In the past 1-2 years? Yes No
 - c. In the past 6 months? Yes No
 - i. Current? Yes No

Narrative in detail (i.e.: who, type of involvement, when etc.):

2. DCF or Child Dependency Involvement:
 - a. Current? Yes No
 - i. If no, approximate year and jurisdiction involved: _____

Narrative in detail:

3. Past evictions? Yes No
 - a. Evicted by a HUD-based property? Yes No
4. Are Any household members part of the lifetime sex offender registry? Yes No

Please provide a summary of all pertinent information that may be needed to best understand this household's case:

If you are a PSH OR RRH Housing Provider, all Full SPDAT Assessments that have been completed with the household must be uploaded to this Wufoo form.

Mobility Request Review Decision Rubric

Category	Factors Present for Approval
Imminent Safety Risk	<ul style="list-style-type: none"> • Household is experiencing <i>targeted</i> (specific to that person/household) violence and/or threats of violence AND the household's place of residence is known to the perpetrator. • The threat or possibility of self-harm, or chaotic substance use leading to a pattern overdose. • The housing/shelter provider has attempted to resolve safety concerns through safety planning, follow-up with other residents if applicable, and internal transfer if possible. <p><i>Disputes between neighbors that do not involve targeted violence or threats of violence do not rise to the level of a Mobility Request even though a resident may be fearful because of those interactions. The risk of losing housing does not rise to the level of imminent safety risk.</i></p>
Change in Service (Increase)	<ul style="list-style-type: none"> • Outlined mental/behavioral health challenges, SUD challenges, medical events, or permanent disability. <p>AND</p> <ul style="list-style-type: none"> • Outlines more appropriate service matching and services offered that would better support the household. <p>AND</p> <ul style="list-style-type: none"> • The household has expressed a desire to transfer to a resource with more supportive services. <p>AND</p> <ul style="list-style-type: none"> • <i>Having a hard time in housing due to mental health/substance use/behavioral health but an absence of any sort of engagement or support from the provider does not rise to the level of a Mobility Request. Lease violations or not complying with the lease do not rise to the level of a Mobility Request.</i>
Change in Service (Decrease)	<ul style="list-style-type: none"> • Outlines more appropriate service matching and services offered that would better support the household. <p>AND</p> <ul style="list-style-type: none"> • Household has expressed a desire to transfer to a resource with fewer supportive services.
Change in Family Size/Household Type	<ul style="list-style-type: none"> • Household is either over maximum or under minimum occupancy per funder guidelines for their current placement. <p>OR</p> <ul style="list-style-type: none"> • Household is no longer the household type that their placement permits due to pregnancy or change in custody of minor(s). <p>AND</p> <ul style="list-style-type: none"> • The housing provider has taken steps to seek an internal transfer if possible.
Geographical Change	<ul style="list-style-type: none"> • The household's eligibility for their current placement requires a physical move to another location due to employment, schooling, medical care, proximity to the caregiver, or proximity to family custody. <p><i>Change of preference on where to live, or the general "unsafe" feeling in a neighborhood does not rise to the level of a Mobility Request.</i></p>
Aging Out	<ul style="list-style-type: none"> • YA (18-24 years old) is within 30 days of aging out of a CE participating program. <p>OR</p> <ul style="list-style-type: none"> • Youth (17 years old) is housed in a youth shelter and will age out without a safe housing option available.

Note that Mobility Requests are not automatically approved, and approval is not a guarantee of referral or placement within a certain timeframe