JOPLIN CITY COUNCIL
INFORMAL MEETING
MONDAY, APRIL 4, 2022
5TH FLOOR COUNCIL CHAMBERS
602 S. MAIN ST.
5:30 P.M.

This meeting can be livestreamed at http://www.joplinmo.org/182/Video-Multimedia

AGENDA

1. Homeless Coalition Update

Notice posted at 12:00 pm. on this 31st day of March 2022. (RSMo 610.020)

The City of Joplin is committed to comply with the Americans Disability Act. The Joplin City Council Chambers is wheelchair accessible. Request for reasonable special accommodations must be made 48 hours prior to the meeting. Please email the City Clerk's office at hnagy@joplinmo.org or call (417) 624-0820 ext. 1220 for assistance.

Ad Omnia Parata

THE HOMELESS COALITION'S STATE OF HOMELESSNESS

The Homeless Coalition Leadership

- Tammy Walker, Economic Security, Collaborative Applicant
- Robin Smith, Economic Security, Chair
- Tom Walters, City of Joplin, Vice-Chair
- Dandy Myles, Institute for Community Alliances, Secretary
- Sarah Canada, Legal Aid, Treasurer
- Coordinated Entry Lead: Economic Security
- Homeless Management Information System Lead: Institute for Community Alliances

MEMBERSHIP & PARTNERS

- The Salvation Army
- Catholic Charities
- Economic Security Corporation
- Dept. of Mental Health
- Joplin Schools
- City of Joplin
- Legal Aid
- Missouri Career Center
- The Community Clinic
- Ozark Center
- Community Impact Project of SW MO
- Vita Nova Village
- Next Steps
- One Joplin's Housing Subcommittee
- Joplin Chamber of Commerce
- Loving Grace
- Souls Harbor
- Children's Haven
- Lafayette House
- Institute for Community Alliances
- Veteran's Administration
- The House Inc.
- Joplin Housing Authority
- Joplin Police Department
- South Joplin Christian Church
- Jasper County Public Housing
- Access Family Care

MISSION AND VISION

- ***Mission:*** To improve the quality of life for individuals in the Jasper-Newton County region impacted by all aspects of homelessness through community education and coordination of community services.
- ***Vision:*** *A community that supports a system that prevents homelessness leading to ending chronic homelessness in Southwest Missouri*.
- A **Continuum of Care** (CoC) is a regional or local planning body that coordinates housing and services funding for people who are experiencing **homelessness.**

HOW WE ENGAGE & COORDINATE?

- Through our membership and partnerships
- Monthly Coalition meetings
- Housing Connect
- Street Outreach
- Point In Time Count and Housing Inventory (annually)
- Project Homeless Connect Events
- Find affordable housing/landlords

IS HOMELESSNESS GROWING ?

- The Homeless Coalition utilizes a Homeless Management Information System (HMIS) to provide data, analyze and evaluate needs for the Joplin Community.
  - Seven System Performance Measures where we report annually
  - Annual Point In Time Count and Housing Inventory Chart
  - Data collection for all funded agencies. (HUD COC, ESG and MHDC grants)
  - Data collection for Housing Connect.
- **What does the data show?**
- The last 13 years utilizing the communities Winter Point In Time Count tells a different picture, 35% decrease in homelessness in Jasper and Newton Counties
- In the last five years, a 22% decrease in homelessness.
- Looking at the 2019/2020/2021 Housing Inventory of Emergency Shelter and Transitional Housing beds versus Point In Time Count data locally we were not at 100% capacity.

FIRST RESPONDERS ARE OVERWHELMED

- A representative from the Police Department participates on the Street Outreach Committee.
- We consult with the police on our street outreach efforts.
- Street Outreach team and the police department have gone out together on a few occasions. (Example: Sam's Club area)
- Current crime stats report on the City of Joplin's website, does not separate homeless calls out from other calls.
- I am told that arrests are tracked and if the information is disclosed they can track homeless.
- Contacts are currently not tracked.

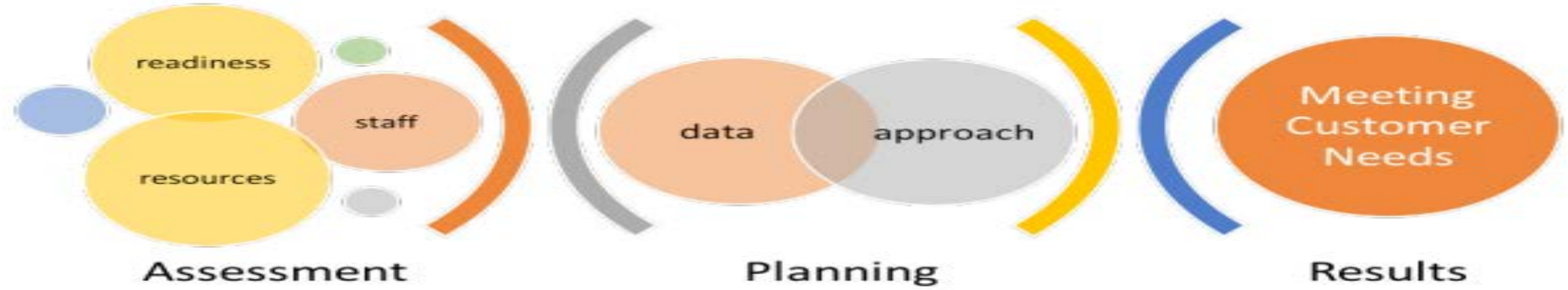
EFFORTS TO PROVIDE FREE HOUSING

- The Homeless Coalition's philosophy is "Housing First model."
- Permanent Supportive Housing and Rapid Re-housing programs require all people to pay 30% of their income toward rent.
- Of those housed 98% retained their housing or exited to new permanent housing. (2021 System Performance Measure)
- Of those housed 2% or less return to homelessness. (2021 System Performance Measure)

SEEN AS A HANDOUT AND NOT A HAND-UP

- Case Management Services are free and voluntary and are provided by many of the partner agencies.
- Families set their own goals and receive guidance on the steps necessary to reach their goals.
- Several agencies and groups provide assistance with replacing important documents.
- Connecting them to programs and services they need like detox, rehab, medical services, assistance completing disability forms, seeking employment, etc.

WHAT'S THE EVIDENCE?



- When services are bundled, clients were 3 to 4 times more likely to achieve a "major economic outcome" than were non-bundlers.
- Working together, is smarter.

HOMELESS IS AN ISSUE DUE TO EMPTY AND ABANDONED BUILDINGS

Data: Comprehensive Housing Market Analysis City of Joplin

- 32 income-restricted rental communities offering 1,910 units.
- Leaving a large demand for affordable rentals that exceed the current supply.
- 80 people have been approved for housing assistance and are out on the street, prospective tenants can not find a home.

DOUBLE EDGE SWORD JOPLIN CARES

- Our Continuum of Care has a cornucopia of services available while other neighboring communities have none.
- **What Does The Data Tell Us?**
- 75% of the Homeless Management Information System's entry and exit are from our zip codes.
  - These are Jasper/Newton county citizens.
  - This data included over 550 individuals.

VISUAL: CORNER PANHANDLING

Assumption that Panhandlers are all homeless

- No collected data to support this claim.
- During Street Outreach we can report that not all panhandlers are experiencing homelessness.

Who are the people standing on the corners?

- People that are housed already but need additional money to pay bills.
- It is a personal choice as to whether a person wants to give cash to someone on the street corner.

THANK YOU!

- Questions?

Tammy Walker
twalker@escswa.org
417-627-2016

The Homeless Coalition's Homeless Census Count
2009 to 2021 Homeless Point In Time Counts
January Counts

Total Persons (These are the figures reported)

Year	Emergency Shelter	Transitional Housing	Unsheltered	Total
2021	**96**	**79**	**35**	**210**
2020	173	70	70	313
2019	122	66	49	237
2018	155	65	55	275
2017	165	64	41	270
2016	128	110	59	297
2015	108	130	20	258
2014	120	161	34	315
2013	261	278	35	574*
2012	1411	255	58	1724*
2011	119	222	116	457
2010	112	207	74	393
2009	102	183	37	322

* 2021 no Project Homeless Connect was held due to the pandemic which affected unsheltered numbers.

* 2012 & 2013 include numbers in FEMA Temporary Housing Units after the May 2011 tornado.

The Homeless Coalition
• Ending Homelessness •
JASPER & NEWTON COUNTY

Date of Release: 17 March 2022

For more information, contact:
Thomas Walters
The Homeless Coalition's Vice-Chair
(417) 624-0820 (City of Joplin, ask for Tom Walters)
TWalters@Joplinmo.Org

The Homeless Coalition received notification by the U. S. Department of Housing & Urban Development's Continuum of Care (CoC) Awards.

The Homeless Coalition was successful in receiving continued grant funding for the elimination of homelessness in Southwest Missouri. These grant opportunities help persons experiencing homelessness and persons with disabilities that are experiencing homelessness to find safe and affordable housing. Review the chart on the next page to find out the funding award amounts and the name of each agency. The amount of funding is for $625,350. The number of individuals or families experiencing homelessness that will receive a continued housing opportunity is approximately 80 families. How does an individual or family get involved? They would need to contact Shonna Greninger, Housing Resource Coordinator, at the Housing Connect Office located at the Economic Security Corporation's Central Office or by calling 417-627-2039.

The Homeless Coalition
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JASPER & NEWTON COUNTY

HUD's Continuum of Care (CoC)

FY2021 Awards (PY2022)

Agency	Program Name	Award Amount
1. Economic Security Corporation	Chronically Homeless	$ 53,115
2. Economic Security Corporation	Rapid Re-Housing	$ 67,460
3. Economic Security Corporation	Rental Assistance Program (RAP)	$ 89,101
4. Economic Security Corporation	Permanent Supportive Housing (Shelter Plus Care)	76,968
4. Catholic Charities of SW Missouri	Rapid Rehousing	$ 23,924
5. MO Department of Mental Health	Permanent Supportive Housing	$237,233
6. The Homeless Coalition's Continuum of Care Planning Grant	CoC Planning	$ 18,494
7. Mo Dept. of Mental Health	Permanent Supportive Housing	$ 26,139
8. Economic Security Corporation	CoC Rapid Rehousing	$ 36,768

Total Award: $625,350

A decrease of -***$8,462*** For Ending Homelessness in Southwest Missouri.

Homeless Point In Time Count
January 2020
80 Individuals

26% decrease over 10 years

The Homeless Coalition
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The Homeless Coalition
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JASPER & NEWTON COUNTY

About The Homeless Coalition: Since 1989, The Homeless Coalition has been a leader in developing Homelessness solutions and bringing resources to Jasper and Newton Counties. It offers a diverse array of services meeting basic human needs for food and shelter, while enriching people's lives by providing access to increased education, skills, and building relationships for the future. The Homeless Coalition is a private nonprofit organization that receives federal, state and local funding; foundation grants; and donations from individuals and businesses in our community. To learn more about The Homeless Coalition please visit www.escswa.org/thehomelesscoaltion.

###

MO-602 Coordinated Entry Referrals Data

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Introduction

ICF received a data set from MO-602 that represented all referrals made through Coordinated Entry in 2021. ICF was able to cross-reference the referrals with the Coordinated Entry enrollments to disaggregate the data by race, ethnicity, gender, and other identities. The goal is to understand the Coordinated Entry referral process and if disparities exist in how clients are being referred.

The data ICF received is visualized here:
https://public.tableau.com/app/profile/alissa.parrish7144/viz/MO-602CEReferrals/MO-602CEReferrals

MO-602 Coordinated Entry Referrals Data

Data

Total Persons Referred

266 Persons

- 6 of these referrals are not represented in the Tableau dashboard, due to when the Coordinated Entry enrollments occurred and not being re-enrolled into Coordinated Entry at the time of the referral made in 2021.

Race Demographics

87% White (227 persons)
9% Black, African American, or African (24 persons)
2% Multiple Races (5 persons)
0.3% American Indian, Alaska Native, or Indigenous (1 person)

- Based on the CoC Racial Equity Analysis Tool, the general population is 91% White, 2% Black/African American, 2% Native American/Alaskan, 2% Asian/Pacific Islander, and 4% Other/Multiracial. Further, the tool shows that for those in poverty, the breakdown is 87% White, 3% Black/African American, 2% Native American/Alaskan, 2% Asian/Pacific Islander, and 6% Other/Multiracial. This indicates both underrepresentation (White, Multiple Races, and American Indian, Alaska Native, or Indigenous) and overrepresentation (Black, African American, or African) in who is accessing Coordinated Entry and referred.
- What local context is there to understand both the underrepresentation and overrepresentation? How does this compare to race demographics of persons accessing Emergency Shelter, Street Outreach, Homelessness Prevention, and other parts of the homeless response system?

Ethnicity Demographics

3% Hispanic/Latin(a)(o)(x) (9 persons)
95% Non-Hispanic/Non-Latin(a)(o)(x) (248 persons)

- Based on the CoC Racial Equity Analysis Tool, the general population is 7% Hispanic and 93% Non-Hispanic. Further, the tool shows that for those in poverty, the breakdown is 17% Hispanic and 83% Non-Hispanic. This indicates an underrepresentation of Hispanic/Latin(a)(o)(x) accessing Coordinated Entry and referred.
- What local context is there to understand this underrepresentation? How does this compare to ethnicity demographics of persons accessing Emergency Shelter, Street Outreach, Homelessness Prevention, and other parts of the homeless response system? Are there barriers experienced by Hispanic/Latin(a)(o)(x) persons that prevent them from accessing necessary services?

Gender Demographics

46% Female (120 persons)
53% Male (137 persons)

- How does this compare to gender demographics of persons accessing Emergency Shelter, Street Outreach, Homelessness Prevention, and other parts of the homeless response system?

Averages & Medians

- Based on the average and median age when filtering the Tableau view to only include persons without a VI-SPDAT score, we are assuming that those persons are minors within a household (85 persons without a VI-SPDAT score with an average age of 17 and a median

age of 12). Because of this assumption, we excluded them from average and median calculations.

Days on List
72 average days
60 median days

Days between Coordinated Entry Enrollment and Referral
17 average days
7 median days

- Because of ServicePoint functionality, a specific referral cannot be directly tied to a specific Coordinated Entry enrollment. This means that persons with more than one Coordinated Entry enrollment and/or more than one referral could be impacting this measurement. We accounted for this as much as possible in the data set (i.e. reviewed for negative days, etc.).

Days between Referral and Exit from Coordinated Entry
55 average days
49 median days

- Because of ServicePoint functionality, a specific referral cannot be directly tied to a specific Coordinated Entry enrollment. This means that persons with more than one Coordinated Entry enrollment and/or more than one referral could be impacting this measurement. We accounted for this as much as possible in the data set (i.e. reviewed for negative days, etc.).

Length of Time Experiencing Homelessness (based on Approximate Date Homelessness Started)
105 average days
88 median days

Age at Coordinated Entry Enrollment
46 average years
48 median years

VI-SPDAT and Chronic Information

- Of the VI-SPDATs completed, **26% were Family** VI-SPDATs and **74% were Single** VI-SPDATs.
- **81% of VI-SPDATs** completed had a score of **less than 10**.
- **97%** of persons referred were not defined as meeting the chronic homeless definition.
- Is PSH dedicated to chronic homelessness in your community? Does the community believe that the VI-SPDAT measures vulnerability of persons served in the community?

Referral Information

- If a person received more than one referral in 2021, they are included more than once in these counts.

Referral Type
1% Transitional Housing (2 referrals)
17% Permanent Supportive Housing (43 referrals)
17% Homelessness Prevention (44 referrals)
70% Rapid Rehousing (182 referrals)

Referral/Need Status
34% In Progress (89 referrals)
35% Identified (91 referrals)
38% Closed (98 referrals)

Referral/Need Outcome
66% Service Pending (172 referrals)

25% Fully Met (64 referrals)
17% Not Met (45 referrals)

- Of those referrals not met, 8% were because the service was not accessible, 13% were because the person refused the service, 40% were because the person was determined ineligible, and 40% were because the person could not be contacted

Destination Information

34% exited with no exit interview completed (89 persons)
25% exited to a rental by client with RRH or equivalent subsidy (64 persons)
14% were still active on the list as of the end of 2021 (37 persons)
9% exited to a rental by client with other ongoing housing subsidy (24 persons)
6% exited to a rental by client with VASH housing subsidy (15 persons)
4% exited to a rental by client without a housing subsidy (10 persons)

Potential Disparities and/or Areas of Interest

- For persons referred to PSH, VI-SPDAT scores range from 4 to 14 and 93% are defined as not meeting chronic homelessness
    - Are PSH projects dedicated to chronic homelessness? How is the VI-SPDAT score factored into determining vulnerability?
- VI-SPDAT scores have wide ranges for all referral types
    - How is it determined which household is referred to which project type?
- Households with a VI-SPDAT score of 10 or more:
    - 94% are white (31 persons) – while a small universe of households, questions arise around whether the VI-SPDAT is truly measuring vulnerability or if there are specific subpopulations from which vulnerability is brought to light to a greater extent than others
    - 70% are female (23 persons) – this is an interesting dynamic and not necessarily typical across communities (that those with the highest VI-SPDAT scores are female)
- Households with a VI-SPDAT score of 4-9:
    - 14% are black/African American (20 persons) – again, while a small universe of households, questions arise around whether the VI-SPDAT is truly measuring vulnerability or if there are specific subpopulations where vulnerability is underrepresented/underreported due to the assessment used or other factors
    - 61% are male (87 persons) – this aligns a little more closely to the overall gender demographic breakdown of all those with a referral in 2021 (53% male) but in conjunction with the gender breakdown for those scoring highest on the VI-SPDAT, this is an interesting dynamic
- Overall, while people of color are accessing Coordinated Entry at a disproportionate rate compared to both the general population and the poverty population demographic breakdown, nothing in the key performance indicators around referrals through Coordinated Entry immediately shows disparities in how referrals are made, who is housed, and the time it takes between the various stages of Coordinated Entry. ICF would encourage the community to:
    - Review the questions throughout this analysis to incorporate local context and qualitative information to inform the quantitative data
    - Review the VI-SPDAT and how it's used in the Coordinated Entry prioritization process to determine if it is serving the purpose it's intended to serve
    - Monitor data on an ongoing basis to understand who is accessing the homeless response system and how they are being served

Governance Charter

The responsibilities of the ***Continuum of Care*** take place through ***The Homeless Coalition*** with the leadership of the Executive Committee, Committee Chairs, the Collaborative Applicant and the HMIS Lead during monthly meetings and committee work.

The responsibilities of the Continuum of Care are as follows:

- Establish and operate a Continuum of Care in Jasper and Newton Counties.
- Establish performance targets, conduct performance evaluation, provide assistance to struggling programs and take action.
- Establish written standards for ESG funds that include:
    - Eligibility
    - Prioritizing individuals for Transitional Housing, Rapid Rehousing, and Permanent Supportive Housing.

Continuum of Care Planning
Our CoC will include the following elements: Outreach, Engagement, Assessment, Shelter, Housing, Support Services and Prevention Strategies.
Other responsibilities include conducting the following:

- Point In Time count. (PIT)
- Housing Inventory Count. (HIC)
- Project Homeless Connect event.
- Gaps and analysis of homeless needs and services.
- Collecting and providing information for the Consolidated Plan. (City of Joplin)
- Consulting with State and local government Emergency Solutions Grants program recipients on an allocation plan for funds, meeting reporting requirements, and evaluating the performance of ESG recipients.
- Coordinated Entry (Housing Connect)
- Identify membership gaps and invite new members at least annually.
- Develop, follow, and update annually this governance charter.

Other responsibilities of a Continuum of Care include preparing an application to Housing and Urban Development for funding per the Continuum of Care/HEARTH Interim Rule 24 CRF 578. A CoC must design, operate and follow a collaborative process for the development of the application, establish priorities for funding projects and submit one consolidated applications. Transparency is important in all aspects of the work that the Continuum of Care carries out.

Collaborative Partner: Economic Security Corporation of S W Area

Updated 8/13/2018
Updated 6/19/2019
Updated 11/04/2020
Updated 9/13/2021

Coordinated Entry
The Homeless Coalition established a system to standardize access and assessment for all people, as well as a coordinated referral and housing placement process to ensure that people experiencing (or at-risk for) homelessness receive appropriate assistance with both immediate and long-term housing and service needs. The Housing Connect office is located within the Economic Security Corporation.

Housing Connect
Economic Security Corporation
302 Joplin
Joplin, MO 64801

Strategic Plan
The Homeless Coalition's Strategic plan contains the mission, vision, values, purpose statements, long term goals, and short term goals. The plan is for three years but is evaluated at least once per year.

The Homeless Coalition:

Executive Committee: Chair, Vice-Chair, Secretary, and Treasurer

Voting members: Organizations and or individuals that have paid membership and can vote.

Non-voting members: Organizations and individuals that have not paid a membership and cannot vote.

Membership: Membership is not limited and new members are eligible to join at any time throughout the year.

Established Committees:

- Continuum of Care
- HMIS
- Missouri Interagency Council on Homelessness
- Housing Connect
- Monitoring Committee
- Prioritization Committee
- Street Outreach

Bylaws: Revised date: March 8, 2021

Article I: Name
Article II: Mission
Article III: Members
Article IV: Meetings
Article V: Officers

Updated 8/13/2018
Updated 6/19/2019
Updated 11/04/2020
Updated 9/13/2021

Article VI: Governing Authority
Article VII: Voting
Article VIII: Amendments

Policies

The Homeless Coalition Executive Responsibilities

Policy 1.40 Grant Prioritization Process
Policy 2.00 Reimbursement of Expenses
Policy 2.10 Expenditures
Policy 2.20 Internal Audit
Policy 2.30 Deposits
Policy 2.40 Resolutions for a name change on bank account
Policy 3.00 Coordination by The Homeless Coalition of a closing of a shelter
Policy 4.00 Coordination by The Homeless Coalition for Ensuring Enrollment for School Aged Children
Policy 5.00 Order of Priority for Permanent Supportive Housing Projects
Policy 6.00 Reallocation
Policy 7.00 Emergency Solutions Grant
Policy 8.00 Monitoring
Policy 9.00 Conflict of Interest
Policy 10.00 Non-Discrimination Policy
Policy 11.00 Street Outreach
Policy 12.00 Discharge Planning Policy

HMIS

The Continuum of Care must designate a single Homeless management Information System (HMIS) for the two county area covered by the CoC. (Jasper and Newton Counties) A HMIS Lead agency must be chosen to manage responsibilities of the system, create, review, revise and approve policies.

- Privacy Plan
- Security Plan
- Data Quality Plan

Other responsibilities of the Lead HMIS are as follows:

- Ensure consistent participation with the system.
- Ensure the HMIS is administered in compliance with HUD's requirement.
- Ensure all elements outlined in the MOA with the Homeless Coalition are carried out.

HMIS Lead: Institute for Community Alliances (ICA)
ICA Contact: ICA will provide the CoC a contact person.
Local HMIS Contact: Tammy Walker, Economic Security Corporation
HMIS: Service Point
Software Provider: Mediware

Updated 8/13/2018
Updated 6/19/2019
Updated 11/04/2020
Updated 9/13/2021

Housing Connect

We Care About You!

Get Connected.

Economic Security Corporation
302 S. Joplin, Joplin
417-627-2039
Ask for Shonna
sgreninger@escswa.org

Mon.- Thurs.
8:30 AM TO 4:30 PM

Homelessness is Tough.
We are Here When
You Are Ready.

The Homeless Coalition

This project/program is funded 50% at $25,000 by federal funds and 50% at $25,000 by nongovernmental sources for a total amount of $ 50,000. The federal funds are received from the U.S. Department of Health and Human Services (HHS) provided by the Missouri Department of Social Services.

Homelessness

Ending Chronic Homelessness in Southwest Missouri

According to the 2021 Point In Time count, an estimated 210 individuals of all ages spend their nights in an emergency shelter, transitional housing program or on the street in SW Missouri. This represents a 33% decrease from last year. This decrease can be attributed to an increase in rental assistance, COVID-19's State Assistance for Housing Relief (SAFHR), economic stimulus checks and an increase in contacts through The Homeless Coalition's street outreach program.

The US is still dealing with the COVID-19 pandemic, which causes additional challenges. Homeless Southwest Missourians continue to lack government issued identification, and that affects their access to affordable, decent and safe housing, which also limits their employment options. While this may seem overwhelming, when we tackle these issues together, our situation is brighter because our community has banded together, resources are pooled and we collaborate through community partnerships.

The Homeless Coalition of Jasper and Newton County's continuous street outreach has led to ESC providing leadership by directing regular street outreach activities—helping more than 263 people in the past three years. ESC also set aside additional funds and helped pay for 28 Missouri-issued identifications and birth certificates for people experiencing homelessness—helping them obtain permanent housing and employment. Other housing activities include our Community Housing Development Organization status that has successfully worked with private housing developers. ESC's recent partners, Kodiak and O'Reilly, are creating more housing for working families, seniors and Veterans in 2022.





SW Missouri's Need

210 **FAMILIES** are experiencing homelessness on any given night.

People struggling with homelessness are often frequent users of emergency departments. On average, they visit the emergency room five times per year, with the highest users visiting weekly. Each visit costs **$3,700—that's $18,500 spent per year for the average person.**

We have seen a **58%** **DECREASE** in homeless Veterans in Southwest Missouri from 2020 to 2021.

Our Reach

MORE THAN **14** **homeless programs**

More than **20** **MEMBERS** make up **The Homeless Coalition.**

In partnership with government private businesses, faith, communities and other non-profits, ESC works with **141** **COMMUNITY PARTNERS** to end chronic homelessness.

Our Annual Impact

More than **155** homeless individuals were housed.

Almost **$1.5 MILLION** is being used to end chronic homelessness in Southwest Missouri.

Partnerships with over **647** private landlords.

$436,751 *leveraged dollars to end homelessness in Southwest Missouri.*

Housed **14** homeless **Veterans** during **COVID-19 Pandemic.**

From a Park Bench to a Home: Ending Chronic Homelessness Where We Live

ESC met Monte Fitzjarrell during The Homeless Coalition's street outreach activities. He had been homeless for quite some time, living in one of our local community parks. In addition, he was dealing with several health issues. His trust in people was low and he had repeatedly said that he was just to the point of giving up.

Mr. Fitzjarrell had no access to his monthly income and truly believed that his benefits had been stopped. ESC's case manager made several calls to the Social Security Administration, who was not seeing anyone in person during the Pandemic. We were able to verify that he was still receiving his monthly income, which was being direct deposited into a local bank. We were able to provide transportation to the bank, where he was able to retrieve a temporary replacement bankcard that gave him access to his money while the permanent bankcard was processed and mailed out. One of the important services that ESC provides is the use of our mailing address. We allow people who are experiencing homelessness to use our PO Box when they are working with Housing Connect or a Housing Case Manager for a physical mailing address.



Shortly after visiting the bank, bad luck struck. Mr. Fitzjarrell had everything stolen, which included his clothes, wallet, ID, medications, bankcard and even his Medicare card. He once again felt discouraged and fed up. ESC stepped up and helped him through the process by calling and canceling the temporary card, and it only took a week or so for him to receive his permanent bankcard. Once he had received it, we helped him figure out how to keep it safe.

He began applying to live in affordable housing apartments, such as Webb City Public Housing Authority and the Drake Hotel Apartments, which involves completing an application and having your name placed on a housing waiting list. Unfortunately, during this time Mr. Fitzjarrell's health became a major concern, and at one point he was taken to the emergency room by ESC. Another time an ambulance was dispatched to the park to transport him. Each time he went to the hospital a referral was made for continued medical care. ESC's case manager arranged for an appointment with Access Family Care, helping Mr. Fitzjarrell gain regular access to medical care. He received the medical attention he needed to stay healthy and was able to get his required medications.

> *What happened next was truly a blessing: We were notified that Mr. Fitzjarrell had been approved for Webb City's Public Housing. After viewing the property, he signed a lease and received the keys to his new home.*

ESC's utility assistance was able to help him settle an old bill that he did not even know existed. Our Community Services Block Grant funding assisted with his rent, utility deposits and first month's rent. Through the help of community partnerships, volunteers and donations, Mr. Fitzjarrell was able to settle into his new place, cook a hot meal and take a hot shower before settling in to sleep in a warm bed instead of a park bench.



