

**FY2021 Continuum of Care**

**Renewal Project Application**

Agencies that apply for funds through the CoC Funding Process must complete an application for each program in E-snaps. In addition, agencies must complete this Renewal Project Application for each program.

This form is due on **October 4, 2021 at Noon** by e-mail to [hsc@cityofmadison.com](mailto:hsc@cityofmadison.com). **Late or incomplete applications will not be considered. Please do not wait until the deadline to submit the application. No grace period will be granted.** If you have questions, please contact Torrie Kopp Mueller, [tkoppmueller@cityofmadison.com](mailto:tkoppmueller@cityofmadison.com) or call 608-266-6254.

**Agencies with more than one CoC project must submit a separate form for EACH project.**

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| Agency Name | **Tellurian, Inc.** |
| Project Name | **Permanent Supportive Housing Program** |
|  |  |
| Project Contact Name | Kelly Crooks |
| Phone Number | 608-663-2120 X 114 |
| E-Mail | Kcrooks@tellurian.org |

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| Funding Request | $428,233 |
| Proposed # of Units | 23 |
| Proposed # of Beds | 23 |

**Please answer the following questions:**

*Project applications will be reviewed based upon adherence to the HUD CoC Program Interim Rule, FY21 CoC NOFA, and FY21 CoC NOFA Policy Priorities, as well as results of the Project Performance Scorecard.*

1. **Describe the grantee’s (and any sub-grantee’s) experience in administering this type of program. Describe the qualification of the staff assigned to the proposed program, including their knowledge and experience.**

Tellurian has over 35 years of experience in providing homeless services and is well equipped to administer the proposed projects successfully. Tellurian was part of the small group of initial applicants from Madison/Dane County CoC that applied and received the HUD Supportive Housing Program funds. Since then, Tellurian has operated a continuum of homeless services including emergency shelter, transitional housing, permanent supportive housing, and street outreach programs, with funds from federal agencies such as HUD and SAMHSA. Tellurian is familiar with requirements in operating with federal funds, and has had good standing with the federal agencies with no unresolved issues or conditions.

Tellurian’s PSH (Permanent Supportive Housing) program currently consists of 2 case managers, a program supervisor and the Director of Housing Services. Tellurian’s permanent supportive housing programs are for homeless single adults with severe and persistent mental illness. Tellurian’s PSH Team receives referrals from the Dane County Coordinated Entry Housing Priority List. At initial contact, whether in person, or over the phone, project staff identify oneself as a Tellurian permanent supportive housing project staff and describe the purpose of the call. If over the phone, an in-person meeting is requested and scheduled to complete an application packet. Once a client is accepted into the program, PSH Staff work closely with the consumer to establish a good working relationship. Tellurian staff believes in “meeting people where they are at” and working on goals that clients establish. Some clients require weekly appointments, but case managers are expected to connect with clients bi-monthly unless the client requests the minimum of monthly visits in person. An individualized service plan is created annually, and reviewed quarterly. This plan assesses the participants’ choice and goals for obtaining services such as HUD/Section 8 housing, counseling, employment referrals, education, referral and coordination of services, and accessing mainstream resources. Participants decide what they want their short and long term goals to be, and the case manager helps facilitate.

The PSH case manager works with participants to establish and maintain a relationship, regardless if they decide to work towards changing their high-risk behavior, or continue it .The case manager functions as a non-judgmental partner in the change process and helps develop a wide range of options and choices to facilitate and encourage change. Staff attempt to motivate clients by exploring with clients the benefits of changing, reducing or eliminating high-risk behaviors of clients.

This program employs two case managers. One case manager holds a bachelor’s degree in Social Work and has four years of experience working in shelters, outreach, and case management. Our other case manager holds an Associate’s Degree in Human Services with fifteen years of experience working in the mental health field and in programs for people experiencing homelessness.

Our program supervisor holds a Bachelor’s degree in social services, has eight years of experience working with individuals experiencing homeless, and has lived-expertise as an individual that has experienced homelessness.

Tellurian’s Director of Housing has a Master’s Degree in Social Work with a history of working with victims of domestic and sexual violence, as well as homelessness. While her main focus at this point in time is homeless adults, her history includes: Shelter Advocate at Saint Margaret’s House for Women and Children in South Bend, Indiana and participating, researching and writing an extensive research study entitled Locating the Frontier of Homeless Youth: Emerging Interventions for a Population at Risk. The Director of Housing’s history of working with those experiencing violence includes: Belles against Violence Outreach and Awareness Committee, Sexual Offense Services of Saint Joseph County Advocate and Intern, Indiana Coalition against Sexual Assault-End Violence Now Intern, Violence Prevention Project Assistant at the End Violence on Campus Office at the University of Wisconsin, and Community Response Advocate for DAIS Madison. The Director of Housing also teaches the Crisis Intervention and De-Escalation Training for Tellurian. The research and knowledge associated with these experiences will allow the Director to guide staff to adequate resources and interventions, with a trauma-informed focus, for those experiencing homelessness.

1. **Please describe how your project takes proactive steps to minimize or overcome barriers to housing rete**ntion.

**No housing readiness requirements:**  Tellurian opened its initial Housing First permanent housing program in 2015. Since then, Tellurian has recognized that when coming from situations where a person is unhoused, some individuals may be unwilling to enter into housing if the program requires sobriety, case management or treatment for a mental health condition. By offering housing without these prerequisites, the participants can determine their own level of engagement.

**Harm Reduction Approach:** Staff is trained in evidence-based best practices, including: the stages of change framework, motivational interviewing techniques, Narcan training, CPI training, and the harm reduction approach. This engagement and intervention builds trust with participants to set attainable goals. The Case Manager functions as a non-judgmental partner in the change process and helps develop a wide range of options and choices to facilitate and encourage change. Staff attempt to motivate clients by exploring with clients the benefits of changing, reducing or eliminating high-risk behaviors of clients. The case manager works with participants to establish and maintain a relationship, regardless if they decide to work towards changing their high-risk behavior, or continue it.

**Consumer choice and self-determination:** The Housing First model emphasizes providing participants with choices. When necessary, different housing and service options are presented. Tellurian has been actively involved in the Housing Placement Group. In order to ensure the best program-fit for the client, Tellurian’s Permanent Supportive Housing Programs has been involved in many inter-agency program transfers. This particular strategy ensures that the client is able to obtain housing and programming that is tailored to their specific needs.

1. **In your last operating year:** 
   1. **How many households exited the program?**
      * Three households exited the program.
   2. **Why did the households exit? (i.e. one was terminated from the program & one moved into subsidized housing & one was evicted):** 
      * One household exited to a skilled-nursing facility, as they were no longer able to live independently. Our second household passed away in a hospital setting while in our program. Our third household transferred to a project based PSH program after we put in a transfer request.
   3. **If the participant(s) was evicted, please list the reason?** 
      * Our program did not have any evictions.
   4. **Did the program attempt an agency transfer for any of the leavers? If so, what was the outcome?**
      * We did request an agency transfer for one of our households that was successful.
   5. **How many new households entered the program?**
      * We had three households enter our program.
   6. **How many transfers were accepted into the program?** 
      * Two of our enrollments came from agency transfers.
2. **Was the program found to be in non-compliance with the Written Standards by the CoC from September 1, 2019-Present? If yes, describe the nature of the issue and how the issue has been addressed.**

In 2019 Tellurian had an on-site CoC visit which resulted in the finding of 4 concerns related to Written Standards. Please find the concerns and the way they have been addressed as follows:

**Documentation of Chronic Homelessness:** Upon review of the files, it was found that one participant moved from Willy Street SRO into the PSH (then called PHP) program, but did not meet the definition of chronic homelessness and one file did not have complete documentation (a form showing months homeless was filled out, but no back up documentation from street outreach or self-certification). In reference to this concern, we have worked to update our policy and procedure handbook and to update client files. The files were 70% complete with the documentation missing and they were fully completed by December 10th, 2019.

**-Lived Experience Policy:** Upon review of the policy and procedure handbook, the auditors asked that we strengthen our program policy around participation of people with lived experience on our Board. These policies existed within our handbook during the site visit; however, due to technical errors did not print off in the copy of the manual that was provided to auditors. The policies have been updated and were provided to the auditors after the visit.

-**Termination Policy:** Upon review of the policy and procedure handbook, the auditors asked that we strengthen our program policy on termination to include due process. These policies existed within our handbook during the site visit; however, due to technical errors did not print off in the copy of the manual that was provided to auditors. The policies have been updated and were provided to the auditors after the visit.

-**Housing First Policy:** Upon review of the policy and procedure handbook, the auditors asked that we strengthen our Housing First policies to include language that people are not screened out due to history of domestic violence and they are not terminated for being a victim of domestic violence. These policies existed within our handbook during the site visit; however, due to technical errors did not print off in the copy of the manual that was provided to auditors. The policies have been updated and were provided to the auditors after the visit.

No concerns were found in 2020 or 2021.

1. **Describe your agency’s efforts to improve service quality and outcomes for the program. Please include how you solicit and incorporate feedback from program participants.**

It is the policy of Tellurian to review the quality, which is the appropriateness and effectiveness of the services we provide to our clients. Our mission for the quality assurance we conduct is to assure that our clients are receiving appropriate and consistent care and services. Tellurian created a quality assurance committee that consists of the Quality Assurance Director, Director of Treatment Services, Director of Mental Health, Director of Housing Services, and Program Supervisors from each of our programs. During these quarterly meetings a random sample of charts are reviewed for accuracy and compliance as well as any changing applicable laws. Discussions during these quarterly reviews form training needs for continual staff development and program improvements. This allows Tellurian to stay consistent with all standards and practice guidelines relevant to state standards and regulations, contract specifications, and known best practice guidelines and evidence based practices within the field of care.

Tellurian has begun to utilize KIPU, electronic health record (EHR), all Tellurian programs will be in KIPU by the end of Quarter 3 of 2021. This system allows us to enter referrals and callers into what is referred to as a pre-admittance status. This system allows us to maintain HIPPA Compliance that is applicable with state and federal confidentiality statues and regulations. An additional benefit of this system is that it allows us to track dates of when calls are coming in, reason for call, demographics, and any other information that is requested to be tracked. KIPU promises to be able to pull specific data and metrics specifically around average length of stay, client demographics, and client outcomes on self-assessment tools. These reports are reviewed on a quarterly basis with the Director of Treatment Services, Director of Mental Health, Director of Housing Services, Director of Quality Assurance, and EHR Specialist.

Tellurian reorganized its staff training system in 2020 and chose to partner with Paycom Learning and PESI for on-going staff training and workforce management. PESI specializes in behavioral health that supports human service professionals. Each session is designed interactively with mini quizzes and final exam for better content retention. Program Supervisors have worked with Quality Assurance and HR to customize the list of trainings for the individual staff in every program based on licensing requirements and individual staff training needs. Program Supervisors have worked with Quality Assurance and HR to customize the list of trainings for the individual staff in every program based on licensing requirements and individual staff training needs. Tellurian PSH is utilizing Paycom to meet training requirements. The system keeps track of each staff's training requirements and sends email alerts to both staff and supervisors when training requirements need attention. It also keeps track of staff's licensing and caregiver background check status. System generated reports have reduced the compliance related administrative tasks significantly. The change has also resulted in a reduction in staff training costs and improved staff satisfaction.

Client experience is an important element of quality assurance that we use at Tellurian. Client satisfaction is determined by both informal feedback on a daily basis and through formal surveys at discharge. Client input is important to ensure the reliability and responsiveness of the program. Staff provides positive feedback to consumers for any given feedback and work to incorporate this information to ensure clients feel heard. Our surveys touch on staff promptness and efficacy in response times, meeting needs, and feeling like staff is available, feeling respected and non-stigmatized by staff, and the ability to participate in one's own recovery and independence.

Quality improvement is a priority at Tellurian and is provided through continual monitoring of the daily activities and documentation in the consumers records. Working collectively we consistently review and evaluate current processes, identify areas for improvement, and ensure that PSH complies with the internal, state and federal regulations related to homeless services. The program's strengths are identified in the consumer's satisfaction with the services provided by the caring, professional, and experienced staff members who offer daily support and programming. Consumers consistently indicate that they feel safe, respected, and supported while at PSH. Further evidence of the quality and level of consumer focused services provided at PSH is the continued relationships consumers have with the program. One of the great strengths of the PSH model is its success in providing the support, encouragement, and skills necessary for consumers to create lasting friendships and support systems. These friendships are maintained when consumers move to other settings and become a positive coping strategy for minimizing loneliness.

1. **What percentage of staff members working for this program identify as Black, Indigenous or a Person of Color? (Info only, to be scored in FY22)**

This program employs two case managers and one supervisor. Sixty-seven percent (67%) of the staff on this program identify as Black, Indigenous, or as a Person of Color.

1. **How does this program work against systematic racism and other structures of oppression? (Info only, to be scored in FY22)**

Tellurian’s scattered-site PSH program is a permanent supportive housing program for single adults experiencing chronic homelessness with severe and persistent mental illness. The program was designed for and is maintained with the goal of providing housing for individuals with the highest barriers. The program enrolls individuals exclusively from Madison/Dane County’s Single’s Housing Community Que, prioritizing individuals with the longest length of homelessness and most severe needs. Any new clients admitted to the program are 1) chronically homeless as defined by HUD with a disability related to mental illness, and 2) come from locations not meant for human habitation, emergency shelters, or safe havens.

The program attempts to work against structures of oppression by using the Community Que for enrollments, rather than screening individual applications. This is a process we use to attempt to eliminate any biases and allows for us to accept referrals for individuals from diverse races, ethnicities, and backgrounds. Staff are provided with cultural competency training. Case managers often serve as mediators between residents and law enforcement, as police calls are often made about our residents due to racial biases and mental health symptoms. We work to fight ableism by enrolling individuals with mental health related disabilities.

This specific program has been able to provide permanent housing for individuals who are undocumented citizens and individuals on the lifetime sex offender’s registry.

1. **How is this program and its practices culturally responsive to the population(s) who participate? (Info only, to be scored in FY22)**

Tellurian serves individuals of varied backgrounds and cultures and adapts to provide services that are culturally sensitive and relevant. Tellurian strives to be mindful of individual's experiences and culture, we recognize that each individual has a story and honor that in our process and care. In efforts to ensure the program remains culturally relevant and promotes racial equity, PSH works to be vigilant and open to feedback from clients and staff. Tellurian has worked to increase training opportunities and ways to make units more accessible. Tellurian also utilizes interpretation and translation services so that we are able to serve people of all languages. All Tellurian staff receives training on cultural competency and sensitivity as well as EEOC regulations and company policies relating to non-discriminatory service delivery. These include but are not limited to Cultural and Historical Traumas: Invisible Barrier to Healing and Change as well as an 8 parts series about understanding diversity, bias, and fostering inclusion. Staff receives regular supervision regarding the· need to treat consumers in a client centered approach from a cultural perspective, and with dignity and respect. Staff is to make no assumptions of need, but to ask and engage empathetically in determining consumers' needs. All staff is encouraged to attend any additional training aimed at improved cultural sensitivity.

PSH works to educate clients on racial equity through interactions through both demonstration of how we treat others who are different than ourselves and formally by addressing any problematic situations that may occur. Any violence, bullying or harassment, including, but not limited to, threats towards any neighbor, program participant, staff or visitor; demeaning language including, but not limited to, comments about one's race, religion, disabilities, ethnic background, sexual orientation, or gender identification or expression are not tolerated. PSH staff is equipped with knowledge and empathy to respond to remarks that may be damaging from one client to another by providing education about why statements may be harmful and supporting the individual(s) of whom the statement was directed.

PSH respects and celebrates the diversity of our consumers and staff. Tellurian encourages consumers and staff alike to share their cultural traditions with others, as they feel comfortable doing so. Tellurian facilitates a safe space for consumers and staff to discuss any concerns they may have regarding anything within the program, but especially including racial barriers or inequities.

Over the last 50 years, Tellurian has provided a full continuum of care for individuals struggling with behavioral health, substance use, and homelessness. Tellurian serves individuals of varied backgrounds and cultures and adapts to provide services that are culturally sensitive and relevant. Tellurian strives to be mindful of individual's experiences and culture, we recognize that each individual has a story and honor that in our process and care. Tellurian has a long standing working relationship with Dane County and is prepared to collaborate and adopt the county's new strategic plan for inclusion and racial equity. Tellurian has hired a Director of Diversity and Inclusion in 2020 to evaluate current practices and provide education. There is a Cultural Sensitivity Committee (CSC) which is attended by employees outside of the leadership team, to look at the practices in the organization and provide suggestions and action plans to make changes. Currently, this group is rewriting the Employee Handbook to ensure the language is accessible to all and reevaluating the hiring practices. An employee co-leads this group with the Director of Diversity and meets monthly with Tellurian's CEO to provide feedback and updates on what the CSC is focused on.

Tellurian's Human Resource department has taken an active role in being a member of the CSC and lending support to all employees during this past summer of social unrest. Tellurian has created optional employee calls during 2020 that started twice a week and transitioned to meet twice a month as demand lessened. Tellurian's CEO and HR Director facilitate this call and provide transparent direct feedback and support to any pressing concerns/questions submitted via an anonymous Survey Monkey or via the call itself. Additionally, Tellurian offers free access for all employees to an Employee Assistance Program, which provides anonymous counseling and support for a variety of topics.

Tellurian is constantly striving to achieve a balanced workforce. Tellurian's Director of Human Resources, CEO, and Director of Diversity and Inclusion have met, reviewed, and discussed opportunities to improve Tellurian's ability to recruit more diverse individuals for our staff, including but not limited to those who identify as BIPOC or with lived experience. The following are goals that Tellurian has to help achieve that directive:

•Hire and retain an increased number of bilingual staff.

•Reviewing job descriptions to ensure that they reflect actual job duties with reasonable work-related requirements for employment.

•Broadening recruitment notices to include community organizations likely to refer women, minorities, and individuals with disabilities.

•Advertising position vacancies in minority media.

•Identifying an informal equal employment opportunity complaint resolution procedure.

One member on Tellurian's Board of Directors, a major governing body of the organization, has lived experience of homelessness. At least 33% of members on the Board identifies as having lived experience with mental illness or a family member with mental illness. The Board has 6 female members, 2 black members and an indigenous member. The Board is responsible for setting program missions and overseeing the following process of the organization: program planning, training and staffing, informed consent, rights protection, program administration, governance, and policy determination, and program evaluation. Tellurian is actively working to continue to be and to grow as an inclusive organization. One of the steps to doing this is to have more BIPOC representation in the room.

**Alignment with Housing First Principles**

1)    Please attach your agency and/or project written policies or procedures that clearly demonstrate participants are NOT SCREENED OUT based on the following criteria, and indicate the document and page number where the panel can find each provision.

Please Note: if a policy or procedure applies to all CoC-funded projects or agency-wide, you may submit one copy per agency. If you have different policies or procedures for different projects or project types, submit one copy of each relevant policy and specify to which project or projects each one applies.

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| --- | --- | --- | --- |
|  | **Name of Document/File** | **Page Number** | **Name of Project(s) (or “All Projects”)** |
| Having too little or no income | Standards of Practice: Housing First; Rejection; Project Admissions Policy | 9,16 | All Projects |
| Active, or history of, substance use or a substance use disorder | Standards of Practice: Housing First; Rejection; Project Admissions Policy | 9,16 | All Projects |
| Having a criminal record \* | Standards of Practice: Housing First; Rejection; Project Admissions Policy | 9,16 | All Projects |
| History of domestic violence (e.g., lack of a protective order, period of separation from abuser, or law enforcement involvement) | Standards of Practice: Housing First; Rejection; Project Admissions Policy | 9,16 | All Projects |

\*1A) Please note if there are specific criminal records the program denies for, what they are and the reason for denial.

2)    Please attach your agency and/or project written policies or procedures that clearly demonstrate participants are NOT TERMINATED from the program for the following reasons, and indicate the document and page number where the panel can find each provision.

Please Note: if a policy or procedure applies to all CoC-funded projects or agency-wide, you may submit one copy per agency. If you have different policies or procedures for different projects or project types, submit one copy of each relevant policy and specify which project or projects each one applies to.

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| --- | --- | --- | --- |
|  | **Name of Document/File** | **Page Number** | **Name of Project(s) (or “All Projects”)** |
| Failure to participate in supportive services | Standards of Practice: Housing First, Termination of Assistance | 9, 56 | All Projects |
| Failure to make progress on a service plan | Standards of Practice: Housing First, Termination of Assistance | 9, 56 | All Projects |
| Loss of income or failure to improve income | Standards of Practice: Housing First, Termination of Assistance | 9, 56 | All Projects |
| Being a victim of domestic violence | Standards of Practice: Housing First, Termination of Assistance | 9, 56 | All Projects |

Please provide any information that will give context to any areas project scored low on for performance.