

Maryland CoC Peersharing Call: COVID-19

Meeting Minutes

March 5, 2021 – 9-10am

[Google Meeting Link](#)

Call-In Details: 224-475-1193, PIN: 821 816 781#

I. Welcome

Stuart

II. Funding Updates

● ERAP

Stuart

- DHCD is in the final stages of program design in collaboration with the Maryland General Assembly advisory workgroup
- Tentative plan to release allocations and grant application package next week
- Reminder that ERAP can pay for: rent arrears, prospective rent, utility arrears, prospective utility payments, housing-related costs, housing stability services, admin
- Eligible households: under 80% AMI, owe rent, unemployed OR experienced direct/indirect COVID19 financial hardship, AND have housing instability (late rent notice, eviction notice, utility notice, etc)
- Self-certification for most eligibility criteria acceptable when documentation cannot be obtained and grantee made reasonable effort
- House of Representatives passed American Rescue Plan Act, which includes additional \$19 billion nationwide for ERAP – adds more money to existing program
- Treasury will release more guidance soon

Questions:

- What is the limit on how many months of rent / utility assistance can be provided for ERAP?
 - Combination of 15 months across all types. Don't know if it can pay for both rent and utilities in a month, some guidance is unclear. Maybe counted separately ie. 6 months rent and 6 month utilities equals 12 months.

● State RELIEF Act

Stuart

- Included \$15 million in new funding for emergency housing up to 30 days
- Currently determining the eligible activities and costs and how funds will be deployed, who eligible grantees will be
- Your feedback about possible ways funds could be used was extremely helpful and shared internally

Grantee input:

- More administrative funds are needed for implementation of programs funded by various covid emergency grants.

- There were challenges with adding ESG to HSP which created confusion. Would prefer not to mingle with HSP for clarity of implementation. Prefer separate grant agreements. Several others agreed with this.
- Will the new agreement slow funding reaching agencies? Yes. However funds could be made payable retroactively

- **HSP/ESG-CV**

Emily

- Thank you for attending monitoring training
- Reminder that we are processing ESG-CV2 grant agreements and budgets on a rolling basis as they are received – we encourage you to get these in early so we can execute grant agreements quickly.
- Remind that 25% match is not required for ESG - CV2 (It's grant boilerplate that says it is unless waived but grantees keep reading this and becoming alarmed, although it is waived)

III. COVID19 Response Updates

Danielle

- Utility Shut-Off Moratoriums – SEE UPDATE FROM OPC
- CDC Eviction Moratorium – Extended through March 31, 2021
- MD District Courts are not hearing **new** failure to pay rent cases through at least March 14, 2021. They are still processing tenant holding over and breach of lease cases. Sheriffs offices are still operating and executing eviction orders. **We will send an update as soon as we know if this has been extended or if Courts will return to normal operations**
- State Eviction “Moratorium” – Governor has not rescinded the protections afforded to tenants if they had a loss of income due to COVID19
- Mortgage Foreclosures and Relief:
 - The Notice of Intent (NOI) system will not begin accepting new notices of intent to foreclose until April 1 per Governor’s order
 - There is a moratorium on foreclosures until June 30, 2021 for mortgages backed by Fannie Mae, Freddie Mac and the FHA, USDA, and VA.
 - See [DOL COVID19 Financial Relief Guide](#) for additional resources
 - CoCs are encouraged to partner with housing counseling agencies - [see list here](#)
- Maryland Vaccine Plan
 - Homeless service providers and their staff are in vaccine priority group 1B and eligible to start receiving vaccines now under the State’s distribution plan.
 - The State has a very limited supply of vaccines
 - Vaccine distribution will happen through local health departments. Please contact your local health department to get in the queue and advocate for your programs to be prioritized
 - HUD has released a lot of great tools and resources on vaccine distribution (including client education materials): [Link](#)
 - DHCD sent the vaccine tracker tool to CoCs in an effort to monitor outreach efforts and support statewide coordination for vaccine strategy.
 - CoCs should designate 1-2 people to update the program’s vaccine information on a regular basis (recommended no less than once every two weeks)

- DHCD will review data entered into the tracker on every COVID call.
- [Review vaccine tracker](#)

Comments on vaccine tracker:

- **Harford:** Requests assistance from the state with the health dept. to get vaccines to people who are homeless.
- **Allegany:** Requests help coordinating with the health dept.
- **Southern Maryland:** Doing well with offering vaccines. Experiencing greater concerns with vaccine hesitancy. Created own vaccine update data collection tool.
- **Anne Arundel:** What is data used for again? - Track equitable access and barriers to getting vaccines to the homeless population. State data does not collect information on housing status connected to vaccination records. This makes it difficult to measure success at getting vaccines to the population. Need the data to demonstrate need for priority access and support advocacy work.
- **Carroll:** Working actively with health dept. to get vaccines to shelters and encampments. Still working on how to input data into the vaccine tracker tool. Finding challenges with getting people 2nd shots. Would like to use the single dose Johnson and Johnson for unsheltered.
- **Prince George's:** Really struggling with vaccine acceptance in shelters. Working with Luminous Health to offer pre-education. Has been effective in 80 % reversal on vaccine acceptance. Find that a party other than shelter providers provide education has been very successful. Have not had time to update the tracker, but are receiving data and updates from providers.

IV. Rapid Re-Housing Discussion

Emily

We've heard from many of you that you're foreseeing challenges scaling up Rapid Rehousing, and securing housing for at-risk tenants in the pandemic context:

- Challenges finding landlords, landlord hesitancy.
- Concerns clients will not have resources to maintain housing post subsidy

Here's what we recommend as strategies to expand RRH in a pandemic:

- Make commitments to landlords for longer-term assistance and deeper subsidies (max 24 months for ESG-CV-1, 12 for ESG-CV-2)
- Single room leasing arrangements
- Invest in a housing navigator position focused on outreach to landlords, and new partnerships
- Increase staff for services/case management, expect lower case ratio than normal as clients are less likely to be employed, and may need longer-term assistance finding employment.
- Bridge to permanent subsidized housing.

- Use some services dollars to create and hire entry level positions / peer support / lived experience positions for people close to client population Ex. Hotel services monitor / support worker for hotel shelter

Discussion questions

- What other strategies are you using to expand Rapid Rehousing in your jurisdiction?
- How are organizations structuring services around RRH? (e.g., caseloads, do you have a housing navigator on staff, what is the role of the agency vs. client in finding housing?)
- What other challenges are you facing in expanding Rapid Rehousing?
- Other updates for the group

Discussion:

- Using RRH as a bridge is only feasible when it is possible to anticipate longer term subsidy or voucher will be available within 2 years.
- Harford - Success in single room rental accommodations. Need more support and options for families with children. Have partnered with a larger property manager and achieved success implementing 12 month rent commitment agreements.