Washington State Department of Commerce

Permanent Supportive Housing Advisory Committee

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Report to the Legislature

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OFFICE OF APPLE HEALTH AND HOMES - PERMANENT SUPPORTIVE HOUSING

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Executive summary

Overview

In Chapter 266, Laws of 2022 (SHB 1724), the Legislature created the Permanent Supportive Housing Advisory Committee (Committee) to provide guidance and recommendations on the administration of permanent supportive housing (PSH) programs managed by the Department of Commerce (Commerce). This report satisfies the reporting requirements in Section 2:

> (3)The advisory committee shall:
> (a) Select a chair from among its membership;
> (b) Meet quarterly;
> (c) Provide guidance and recommendations on the administration of permanent supportive housing resources managed by the department, including recommendations to ensure alignment of capital, services, and operating investments and fidelity with the provision of permanent supportive housing as defined in RCW 36.70A.030
> (d) Until December 31, 2027, report its recommendations to enhance the coordination and availability of permanent supportive housing to the appropriate Committees of the Legislature and the governor by December 1st of each year.

This report also describes the Committee recommendations and activities, including the selection of members and a Chair, to ensure alignment of capital, services and operating investments and fidelity of the provision of permanent supportive housing from the four quarterly meetings held between November 2023 and July 2024.

Highlights:

- The Committee focused its second year of operation on a thorough analysis of strategies to expand, sustain and improve the quality of PSH. This report will summarize the 18 recommendations from the Committee and the actions Commerce is taking to move them forward.
- The Committee recommended six members for appointment in 2024, including for a position that was vacant since the Committee's start. The Committee also elected a Chair after the previous Chair left.
- The Committee refined and adopted its bylaws.
- The Committee held quarterly meetings on Nov. 9, 2023, January 18, April 11, and July 11, 2024.

Committee recommendations

Building on the eight strategic priorities (see the Recommendations section) developed previously, **the Committee developed 18 recommendations:**

1. Create a toolkit to educate communities on the benefits of PSH to address not in my back yard (NIMBY) issues
2. Explore workforce issues for the sustainability of capital projects:
    - Identify pipelines
    - Promote living wage/funding for sustainability
    - Promote training and professional development opportunities
3. Study how to convert unused office space/land for PSH
4. Provide training and technical assistance to by-and-for organizations
5. Provide capital pre-development resources (pending funding availability)
6. Improve alignment between sustainable funding sources and new PSH development
7. Clarify or pursue agency Agency request **legislation** to include transitioning from medical respite as an eligibility risk factor for the Apple Health and Homes Initiative

8. Implement a strategic workgroup between PSH providers and managed care organizations/behavioral health administrative service organizations to discuss the implementation of crisis interventions to support PSH providers:
    - Status of the housing crisis intervention teams
    - Mobile crisis teams
    - Policies that allow individuals to return to their homes after short-term hospitalizations
9. Provide Mental Health First Aid training to PSH providers
10. Create a learning collaborative between the Health Care Authority (HCA), the Aging and Long-Term Support Administration (ALTSA), Commerce and housing owners and operators to strengthen partnerships and opportunities for Program for Assertive Community Treatment (PACT)/Governor's Opportunity for Supportive Housing (GOSH)/global leasing dedicated PSH units.
11. Work closely with HCA as they develop the initiative to turn Medicaid "on" before someone's release from incarceration (1115 Medicaid Waiver 2.0). Increase discharge planning and awareness of Foundational Community Supports and Apple Health and Homes.
12. Increase referrals from long-term civil commitment sites to PSH through Commerce participation in discharge planning workgroups and learning collaborative meetings.
13. Increase the sustainability of PSH capital projects by aligning project-based rent assistance and service resources, and evaluate the outcomes and provide a public dashboard and other information about AHAH rent assistance and operations, maintenance and services (OMS) fund sources.
14. Evaluate outcomes and provide a public dashboard on PSH rent assistance and capital resources for individuals enrolled in AHAH.
15. Provide a static public information document on the types of rental assistance available through a matrix that details eligibility, funding sources and how to access them.
16. Continue to pursue additional funding for tenant-based, project-based, global leasing and the sustainability of PSH through decision packages, grants and other sources:
    - Encourage alignment with other strategies, such as discharging from inpatient/institutional settings
    - Alignment with capital development
    - Provide technical assistance
17. Explore a publicly available platform that will describe public rent assistance resources (Rent Assistance Connector) and how to access them in a manner that educates and empowers individuals to make informed decisions about available resources.
18. Provide public information to PSH operators on the types of repair funds, maintenance and operations funds, and emergency repair and preservation funds available through a matrix that details eligibility, funding sources, and how to access them.

Committee membership

Background

Commerce selected Uncommon Bridges (formerly BDS Planning and Design) to assist with creating the PSH Advisory Committee (Committee), organizing and facilitating quarterly meetings and drafting the Committee bylaws. The work also included marketing, distribution and recruitment of Committee members. The Committee has 26 members in accordance with the governing statute.

Current membership

Since November 2022, Commerce and Uncommon Bridges have recruited 26 members using a regional approach based on the Apple Health Integrated Managed Care regions to identify applicants and ensure geographic distribution of the membership. In 18 months, the Committee had a turnover of seven positions as members vacated or left. One position has been vacant since the inception of the Committee. Bylaws established turnover, recruitment processes and final recommendations for the Commerce Director to make final appointments.

Bylaws

The Committee approved bylaws in August 2023 and the bylaws state: "In the case of Committee positions vacated by a resigned or removed member, the Committee shall solicit new members using the following methods, in order:

1. A resigning member may submit a nomination for their replacement to the Chair or the department. The Chair may present the nomination to the Committee. The Committee may then vote to accept the nomination OR
2. A current member can submit a nomination to fill the vacancy created by the resignation to the Chair or the department. The Chair then may present the nomination to the Committee. The Committee may then vote to accept the nomination OR
3. A nomination by a membership subcommittee consisting of the Chair, a department representative, and Committee members appointed by the Chair, with the nomination resulting from an open, public application process. The Chair will present the nomination to the Committee. The Committee must accept the nomination."

The Committee recommended six members for appointment in 2024, including the position that has been vacant since the Committee's inception. Currently, there are two open positions on the Committee (a representative from the behavioral health sector and a single adult living in PSH). Commerce and Uncommon Bridges are keeping the application open for continual recruitment, as future turnover of members occurs to maintain a pool of interested applicants.

Table 1: Demographics of the 24 current Committee members as of August 2024

Demographics	Percent (number)
Identify as members of the LGBTQ+ community	21%
Identify as people of color	33%
Identify as having experienced homelessness and/or behavioral health conditions	63%

Table 2: Geographic distribution of the 24 current Committee members by region as of August 2024

Region	Percent (number)
Great Rivers	8%
King County	21%
North Sound	8%
Salish	4%
Spokane County	8%
Greater Columbia	4%
North Central	4%
Pierce County	13%
Southwest	4%
Thurston and Mason counties	4%
Statewide representatives	21%

The Committee elected a Chair at the July 2024 Committee meeting after the previous Chair left. The Committee refined and adopted the bylaws, which are posted on the PSH Advisory Committee webpage.

Meetings

The Committee held quarterly meetings on November 9, 2023, January 18, April 11, and July 11, 2024. Uncommon Bridges met individually with Committee members between meetings to offer support, debrief, provide additional context and address any unanswered questions or issues not addressed in the Committee meetings. As the Committee members are in different stages of understanding the challenges of PSH, each meeting included an educational component on the issues, resources and challenges. During the February meeting in 2023, the Committee started a strategic planning process to envision an ideal state of PSH in Washington 20 years in the future.

Summaries of the meetings are in Appendix B: Committee meeting summaries.

Recommendations

The Committee focused its second year of operation on the priorities to expand, sustain and improve the quality of PSH managed by Commerce. Each meeting took one of the top priorities and provided education, data and discussion. Conversations were facilitated with specific questions, prompting robust discussions from the group, which resulted in strategies that could be recommendations.

Each quarterly meeting consisted of data presentations on the issue, presenters sharing experiences, asking questions and identifying barriers, challenges and successes with the topic. In addition, Uncommon Bridges conducted one-on-one discussions to clarify and gather additional information and perspectives from Committee members. A recording and accompanying meeting material are available to the public on the Committee website.

Through the process described in the previous report and the utilization of the eight strategic priorities (see numbered list below), the Committee developed 18 strategies and recommendations for enhancing the quality and availability of PSH in Washington. Over the course of the four Committee meetings, members created, developed and adopted the strategies in Table 3 (see Appendix A: Glossary of terms for definitions).

The eight priorities that guided the development of the recommendations:

1. Regional investments
2. Capacity grants
3. Quality assessment
4. Increase rent assistance
5. Inpatient discharge improvement
6. Communication toolkit
7. Feedback loop
8. New program start-up

Table 3: Committee recommendations to Commerce

Number	Strategy/recommendation	Committee meeting where strategy was developed	Adopted by Committee
1	Create a toolkit to educate communities on the benefits of PSH – address NIMBY issues	8/17/23	11/19/23
2	Explore workforce issues for the sustainability of capital projects: ○ Identify pipelines ○ Promote living wage/funding for sustainability Promote training and professional development opportunities	8/17/23	11/19/23
3	Study how to convert unused office space and land for PSH	8/17/23	11/19/23
4	Provide training and technical assistance to by-and-for organizations	8/17/23	11/19/23
5	Provide capital pre-development resources (pending funding availability)	8/17/23	11/19/23
6	Improve alignment between sustainable funding sources and new PSH development	8/17/23	11/19/23
7	Clarify or pursue agency request legislation to include transitioning from medical respite as an eligibility risk factor for the Apple Health and Homes Initiative	11/9/23	01/18/24

Number	Strategy/recommendation	Committee meeting where strategy was developed	Adopted by Committee
8	Implement a strategic workgroup between PSH providers to discuss managed care organizations and Behavioral Health Administrative Service Organizations to discuss the implementation of crisis interventions in support of PSH providers: ○ Status of the housing crisis intervention teams ○ Mobile crisis teams Policies that allow individuals to return to their homes after short-term hospitalizations	11/9/23	01/18/24
9	Provide Mental Health First Aid training to PSH providers	11/9/23	01/18/24
10	Create a learning collaborative between the Healthcare Authority (HCA), ALTSA, Commerce and Housing Owner/Operators to create stronger partnerships and opportunities for PACT/GOSH/Global Leasing dedicated PSH units.	11/9/23	01/18/24
11	Work closely with HCA as they develop the initiative to turn Medicaid "on" prior to someone's release from jail/prison (1115 Medicaid Waiver 2.0). Increase discharge planning/awareness of FCS/Apple Health and Homes – July 2025	11/9/23	01/18/24
12	Increase referrals from Long-term Civil Commitment sites to PSH through Commerce participation in discharge planning workgroups/learning collaborative meetings	11/9/23	01/18/24
13	Increase alignment and transparency of the PSH capital projects, aligning project-based rent assistance and services – evaluate the outcomes and provide public dashboard and information (AHAH rent assistance and OMS fund sources)	1/18/24	04/11/24
14	Evaluate the outcomes and provide public dashboard and information (AHAH rent assistance and OMS fund sources)	1/18/24	04/11/24
15	Provide public information on the types of rental assistance available through a matrix that details eligibility, funding sources, how to access	1/18/24	04/11/24
16	Continue to pursue additional funding for tenant-based, project-based, global leasing and sustainability of PSH through decision packages, grants and other sources: ○ Encourage alignment with other strategies, such as discharging from inpatient/institutional settings ○ Alignment with capital development Provide technical assistance	1/18/24	04/11/24
17	Explore a public matrix/platform that will describe the public funding sources available in a logic model format with current, open funding sources	1/18/24	04/11/24
18	Provide public information on the types of repair funds, maintenance and operations funds, emergency repair and preservation funds available through a matrix that details eligibility, funding sources, and how to access them	1/18/24	04/11/24

Appendix A: Glossary of terms

Agency request legislation
A request for legislation proposed by an agency of the executive branch of government

Behavioral Health Administrative Service Organization (BHASO)
An organization that provides services to help clients navigate through mental health or substance use disorder (SUD) treatment services when needed. BHASOs are funded through state and federal block grant funding.

By-and-for
By-and-for Organizations are operated by and for the communities they serve. Their primary mission and history is serving a specific community. They are culturally based, directed, and substantially controlled by individuals from the population they serve. At the core of their programs, these organizations embody the community's central cultural values. In the affordable housing context, these communities must have demonstrated disproportionate representation in homelessness, housing instability, and housing affordability.

- Black, Native American or other people of color, including people identified as socially disadvantaged as defined in 13 CFR Sec. 124.103
- People with disabilities
- People who identify as part of the d/Deaf and hard-of-hearing community
- People with behavioral health conditions, including substance use disorder
- People who identify as LGBTQIA+
- Survivors of family violence and/or intimate partner violence
- Incarcerated and formerly incarcerated individuals
- Undocumented individuals, immigrants and refugees, and mixed-immigration-status families and communities

Decision package
A submission for a state budget request. The documents in the package organize and describe proposed cost changes in a way that highlights the budget policy decisions. The DP consolidates financial information, supporting justification and statements of impact for a specific action or policy proposed in the budget.

Disability
- A person who has a physical or mental impairment that substantially limits one or more major life activities.
- A person with a record of a physical or mental impairment that substantially limits one or more major life activities.
- A person who is regarded as having a physical or mental impairment that substantially limits one or more major life activities. This may include but is not limited to, people with physical disabilities, people with chronic health conditions, and/or people who are neurodivergent.

Foundational Community Supports (FCS)
A program offering benefits for supportive housing and supported employment for Apple Health-eligible beneficiaries with complex needs.

Global leasing
Global leasing, also known as master leasing, is a strategy that allows local governments, behavioral health agencies, and nonprofits to lease units from an owner and sublease individual units or properties to previously unhoused tenants.

Governor's Opportunity for Supportive Housing (GOSH)
A state service that supports in-home transitions for those discharging/diverting from Eastern or Western State Hospital by connecting them with a Supportive Housing Provider (SHP).

LGBTQIA+
LGBTQIA+ is an acronym for lesbian, gay, bisexual, transgender, queer, intersex, asexual, and other identities, including but not limited to two-spirit, non-binary, pansexual, agender, etc.

Long-term civil commitment sites
Locations for involuntary, court-mandated commitment for periods of more than 90-180 days.

Managed Care Organization (MCO)
Integrated entities in the healthcare system that aim to reduce healthcare costs.

NIMBY
An acronym for the phrase "not in my backyard," signifying one’s opposition to the locating of something considered undesirable in one’s neighborhood.

Program for Assertive Community Treatment (PACT)
A program for people with severe mental health disorders who frequently need care in a psychiatric hospital or other crisis service

Appendix B: Committee meeting summaries

Nov. 9, 2023, PSH Advisory Committee meeting

The PSH Advisory Committee held its fifth meeting on Nov 9, 2023. The Committee reviewed the PSH priority area #1 - focusing on regional investments in rural and urban areas recommendations developed after the August Committee meeting. The Committee formally adopted six strategies, as identified in Table 3, which will promote the development of PSH in rural and urban areas. In addition, the Committee learned about capacity grants (PSH Priority Area #2) that assist organizations (including by-and-for organizations) in increasing the quality of PSH, adding Foundational Community Supports (supportive housing services) to their book of business as well as other enhancement opportunities. These capacity grants are related to Commerce's Apple Health and Homes initiative.

Education

PSH Priority Area #3 included education efforts focused on data associated with behavioral health inpatient and long-term civil commitment discharges and an overview of the Health Care Authority's Discharge Planners Toolkit. Taylor Danielson from the Department of Social and Health Services - Research and Data Analysis Division (Committee member in the position of PSH researcher) provided data on people who exit inpatient settings and transition into emergency or transitional housing, permanent housing, or homelessness. This overview included data about people exiting inpatient mental health facilities, inpatient substance use treatment, and long-term civil commitments such as state psychiatric facilities.

Melodie Pazolt presented an overview of the Health Care Authority's Discharge Planner's Toolkit. Committee member Kimberly Castle, who could not be present, originally prepared this presentation and materials. The presentation provided an overview of the discharge planner's toolkit, explaining how it addresses the housing gaps outlined in Taylor's presentation. The overall goal is to reduce the number of people becoming chronically homeless after exiting inpatient settings. The culmination of existing information available – both presented in the meeting and referenced in resources sent before the meeting – sets a foundation for the following observed issues with improving inpatient discharge:

- Tension with federal definitions of homelessness and the corresponding funding sources are contrary to each other
- Many state housing and related support services, yet:
    - Low service availability
    - Not enough behavioral supports
    - Some state-managed programs are more successful than others
    - Large gap in the overlap between health services and housing (just 2% of PSH clients recently discharged from long-term civil commitment)
- Geographic disparities
- Attempts to address inconsistent data and documentation

Discussion

Following the two presentations, the Committee participated in a facilitated discussion prompted by the following guiding questions.

Regarding inpatient discharge issues:
- What are the Committee members' experiences of these issues?
- What are the implications of these issues?
- Where are the biggest breakdowns?

Regarding possible solutions:
- What is the best of current programs?
- What are the greatest opportunities?
- What gaps need to be filled?

Key takeaways are included in Table 3: Committee recommendations to Commerce.

Jan. 18, 2024, PSH Advisory Committee meeting

The sixth Committee meeting began with a facilitated discussion on the recommendations extracted from the conversations and discussions from the 1-1 and November 2023 meetings. Table 3 lists recommendations that were voted on and approved.

Education

The next priority (Table 3) identified in the Committee's strategic planning framework is increased rental assistance for individuals who need PSH and PSH sites that need rent assistance to sustain operations.

The group received three presentations:
1. Project-Based Rental Assistance and Tenant-Based Rental Assistance – Marquis Jenkins, Committee Housing Authority Representative
2. Global Leasing – Whitney Joy Howard, Committee Aging and Long-Term Support Administration (ALTSA) Representative
3. Operations, Maintenance, and Services (OMS) Funding - Melodie Pazolt

Discussion

Following the presentations, the facilitation team prompted the group to consider:
- What planning is needed in your communities to help bring balance to these needs?

The facilitation team recorded in-real-time and visible notes using a virtual whiteboard platform.

A summarized discussion of themes, as well as a broader committee discussion, is as follows:
- Key takeaways
- Private sector involvement: The private sector is buying up vacant property and letting it sit empty.
    - These units may be empty but are not equipped to house people. The development needed to make these spaces livable is expensive and requires a lot of regulation navigation.
    - Capital funders are hard to convince to undertake these kinds of efforts.
- There needs to be more transparency about how and where funds will support PSH in local communities.
- Point-in-Time Count for data collection is inaccurate for understanding how many unhoused people exist in a space annually. A more productive and effective way to measure and collect this data is needed.
- COVID-related funds provided a false understanding of the resources available in the PSH sector. Now that these funds are gone, the community must return to more limited resources.
- There is a need to allocate rental assistance tools.

April 11, 2024, PSH Advisory Committee meeting

The seventh PSH Advisory Committee meeting began with the Committee's structural and administrative business. The Committee discussed and established ground rules for interpersonal expectations, amending the review of suggested bylaw edits based on feedback and process updates. The amendments included shared definitions, discussions of trauma, self-care, and trauma-informed service delivery. The Committee was encouraged to review the bylaws and make any recommended changes or suggestions in preparation for the July 2024 meeting.

The remainder of the meeting focused on continuing the strategic planning process. The Committee established the quarterly cadence of 2024 meetings with clear and advance notice to committee members of each meeting's topic for discussion. Meeting topics will be based on the Priority Issues that Committee members identified and prioritized in the fall of 2023 (see Table 3). Priority Area #3b is focused on expanding long-term tenant-based and project-based rental assistance programs. Discussion around the Community Behavioral Health Rent Assistance (CBRA) program, including strategies such as master leasing for individuals in both mental health and substance use treatment facilities. Table 3 lists recommendations that were voted on and approved.

Education

The group held a robust discussion about how to better use existing resources and how to share information and assistance. Likewise, the group elevated the need to look ahead to increased demand for PSH from people moving through continuums of care. Other ideas included using mobile transitional housing hubs that can be maintained by centralized repairs.

Priority Area #4 is developing Communications Toolkit(s) to provide information to advocates, non-profits, By and For organizations, and local governments on PSH, what it is and isn't, and other PSH info. This priority area also includes utilizing this Committee's collective experience to inform and improve other communication toolkits regarding housing and homelessness that Commerce may work on.

Discussion

Uncommon Bridges facilitated a discussion with the Committee, framing the conversation with the following questions:

- What key information/voices need to be represented in the development of toolkits?
- How do we balance different audiences? (advocates, non-profits, challengers, local government leaders)
- How can agencies and lawmakers gather personal narratives safely and authentically?
- How can personal narratives/stories best be used and shared by others?
- What are the best ways to use online/digital communication channels?
- What are the best ways to use in-person opportunities for communication?

Key themes and 'takeaways' included:

- The importance of sharing success stories vs. those about needs/deficits.
- Create a 'live' toolkit that includes stories from folks in that specific community rather than abstract stories from distant areas.
- Highlight differences in individuals' PSH journeys to show the varying circumstances that people experience and the diversity of types of PSH.
- Meet people where they are and bring lawmakers, politicians and other influential audiences to spaces where folks can share personal lived experiences.

- Connect the benefits to both PSH residents and the broader community.
- Target audiences (residents/business owners) can also join in a supportive story-sharing effort; avoid binary thinking separating “us vs. them.”
- Balance the use of quantitative and qualitative data to tell stories.

Commerce, supported by BERK Consulting, is currently developing the first toolkit responsive to this priority area, called the “PSH toolkit," to address issues of NIMBYism. NIMBY, short for "Not In My Back Yard," refers to challengers who oppose community development projects in their area due to perceptions of undesirability, even though they may not object to similar projects being located elsewhere. The toolkit’s goal is to help foster productive conversations that inform and counteract NIMBYism toward the expansion of permanent supportive housing in areas of need.

Commerce and BERK staff request Committee members review the factsheets and provide feedback during the development stage and then help share the materials with the broader public when production is complete.

As a direct follow-up to the committee conversation, BERK will consider the following updates to the toolkit immediately:

- Factsheets need to include more stories as there are currently only a few placeholders.
- Consider integrating resources from the national level specifically into the “Importance of Messaging” factsheet. Also, link resources where possible.
- Identify how to link factsheets on the Commerce website where they can serve as a living document type of resource.
- Add opportunities for location/community-specific stories to the “importance of Messaging” factsheet.

In addition, Laura Hodgson, Housing Planning and Data Manager from Growth Management Services, presented an overview of the STEP Model Ordinance and Communications Toolkit. The Legislature directed Commerce to identify housing needs for each county, including the future 20-year needs for PSH. Only about 65 out of about 220 cities have updated regulations to allow PSH where required, and most counties still need to update regulations. Several of those that updated placed restrictions on PSH that were inconsistent with federal or state law.

STEP housing types that governments need to take more of a role in developing include:

- Emergency Shelters (S)
- Transitional housing (T)
- Emergency housing (E)
- Permanent supportive housing (P)

The deliverables of this project include:

- State of the Practice of federal and state regulations, with a summary of local work on Chapter 254, Laws of 2021 (HB 1220) and an overview of the permitting process
- Model ordinance for STEP housing types
- A model ordinance user’s guidebook with best practices for developing regulations, including information on fair housing laws, the Residential Landlord Tenant Act, how to regulate perceived impacts, etc.
- A communications toolkit to support local governments in communicating with the public about STEP housing and the planning process for it
- Case studies of local implementation of STEP housing

Committee members were invited to participate in the public feedback opportunities for the PSH toolkit and the STEP Model Ordinance.

July 11, 2024, PSH Advisory Committee meeting

The eighth meeting began with a welcome to two new members. Consistent with previous meetings, a land acknowledgment and review of the ground rules for interpersonal interactions were reviewed. The meeting also discussed the Legislative report review process and provided an overview of the recommendations adopted thus far. Commerce staff provided an overview of a project management plan framework for implementing the Committee recommendations. In addition, the recruitment subcommittee discussed the vacant positions and their efforts to interview candidates for the open positions. The committee voted to recommend three new members for the Commerce Director to appoint. The Committee also voted on the chair position as an interim chair, which has been in place since November 2023. The Committee meeting also included public attendees who shared feedback at the end of the meeting.

Education

Priority area #3 (See Table 3) is focused on supporting continuous quality improvement by assessing projects across time through the PSH Operations, Maintenance, and Services (OMS) funding program. Commerce staff and Committee member Kimberly Castle (representing the Health Care Authority) provided an overview of the history of WA State's efforts to implement evidence-based practices adopting the Substance Abuse Mental Health Service Administration's (SAMHSA) toolkit on PSH. The committee heard information on the seven principles and HCA's efforts to create a learning collaborative approach to fidelity to the SAMHSA model.

Discussion

The Committee framed the discussion on the PSH continuous quality improvement approach around consistency with the current SAMHSA model. Committee members questioned this approach, and recommendations included using other frameworks, such as the United States Interagency Council on Homelessness (USICH) All-In Strategic Plan. However, upon further research, the USICH All-In Plan also references the SAMHSA principles. Recommendations for this priority will be presented at the October 24 meeting after additional information is collected.