**PUBLIC SERVICE GRANT (PSG) COUNCIL**

**Most Vulnerable Person Sub-Committee**

**MEETING MINUTES  
Ed Ball Building, 214 N. Hogan, 8TH Floor, Room 851**

**January 16, 2019 – 2:00 PM**

**PSG Chair: Dr. Marcie Turner**

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| **Sub- Committee Meeting Attendance** | | | |
| **X** | **Lara Diettrich** | **X** | **Sherry Jackson** |
| **E** | **Jackie Perry** | **X** | **Beth Mixson** |
| **X** | **Bob Baldwin** | **X** | **Ann Mackey** |
| **E** | **Chris Warren** | **X** | **Courtney Weatherby-Hunter** |
| **X** | **Dr. Marcie Turner** | **X** | **Jaclyn Blair** |
| **X** | **Tameiko Grant** | **X** | **Brad Goodwin** |

Quorum Present: *YES*

Staff: Damian Cook & John Snyder, Grants & Compliance Office

Sandra Stockwell, OGC

Chester Aikens, ECA for C/M Joyce Morgan District 1

1. **Welcome & Introduction of PSG Council Members- Dr. Turner**

Dr. Turner called the meeting to order and members, agencies representatives, and staff introduced themselves at 2:20 PM other members, and agency representatives introduced themselves upon arrival and before speaking.

1. **Discussion regarding MVP – Mr. Cook**

Mr. Cook opened the discussion for the Most Vulnerable Persons by asking Ms. Coughlin to give an overview of her original handout. After Ms. Coughlin’s overview, Mr. Cook talked about the revision since the PSG Council meeting from January 9th. Dr. Turner asked agencies present to comment on the revised handout. Jim Kowalski with Jacksonville Areal Legal Aid asked that when referencing legal counseling to use the term legal representation. Gail Patin with Hubbard House discussed some of her requested changes; using urgent shelter, add or, eliminate “no or very low income”, eliminate medical attention from Acute, clarify longer-term shelter, further define legal assistance, and other qualifiers.

Mr. Cook and staff handed out an example of definitions of the 3 Priority Needs (Acute, Prevention and Diversion, and Self-Sufficiency and Stability) with more specific defining terms. There was discussion regarding the pros and cons concerning citing examples of the needs. The discussed concluded with those in attendance agreeing to not use specific defining terms in each of the three priority needs, but to use the definitions provided up to the word “such as”.

Dr. Turner then moved the discussion toward the assigning of percentages to the three priority needs. There were 6 iterations suggested, four from Ms. Diettrich from the January 6th PSG Council meeting and two others from the discussion. After the discussion, Mr. Baldwin motioned to use the following percentages; Acute (35%), Prevention & Diversion (40%), and Self-Sufficiency and Stability (25%). Ms. Diettrich seconded the motion for discussion. There was more discussion and debate concerning the percentages.

1. **Public Comment on MVP for 2020- Dr. Turner**

Dr. Turner ask for public comment, there were no comments since most individuals and members already discussed the proposal and the percentages.

1. **Vote on MVP for 2020 PSG Council funding – Dr. Turner**

Dr. Turner then called for vote. **The motion passed 9-1 (Ms. Jackson). The motion passed** (See attached document).

1. **Public Comment on assignment of points- Dr. Turner**

Ms. Diettrich motioned to keep the scoring points from last year. She then read the scoring sheet for the record. Ms. Jackson seconded the motion. Dr. Turner asked for public comment. Mr. Howland with Jacksonville Speech and Hearing asked if the discussion was assigning of point to the scoring or the scoring procedure itself. Mr. Cook replied that it was for the assigning points for the scoring. Ms. Diettrich indicated that the tie-break scenario is something that needs to be address by the full PSG Council.

1. **Vote on assignment of points – Dr. Turner**

Dr. Turner called for vote. **The motioned passed unanimously in favor of keeping the same scoring points.**

1. **Public Comment on Application or RFP – Dr. Turner**

Mr. Baldwin motioned to keep using the application process. Dr. Turner asked for public comment, there were no further comments.

1. **Vote on Application or RFP** – **Dr. Turner**

Dr. Turner called for vote. **The motioned passed unanimously in favor of using the application process.**

1. **Discussion on MVP Legislation-Dr. Turner**

Dr. Turner asked Ms. Diettrich if we already voted on this measure. There was some discussion regard this issue. The discussion concluded that the PSG Council voted on changing name, but not a this specific legislation. Ms. Diettrich motioned to accept the draft legislation, and present to full PSG Council next month for a vote. Ms. Jackson seconded the motion.

1. **Public Comment on MVP Legislation-Dr. Turner**

Dr. Turner asked for any public comment, there were no further comments

1. **Vote on MVP Legislation-Dr. Turner**

Dr. Turner called for a vote on the motion. **The motion passed unanimously.**

1. **Open Discussion**

Ms. Diettrich stated that she will work with staff on developing talking points and assign each PSG Council Members one or two City Council members to meet with and discuss these changes.

Mr. Cook stated that since all the voting is complete then there is no need for this sub-committee to meeting on January 24th, members agreed.

1. **Public Comment- No further public Comment**
2. **Adjourn** at 4:25 PM.

Recorder: John Snyder

Completed - 01/18/2019

**Next Sub-Committee Meeting Date – TBD**

**Next PSG Council Meeting – 02/13/2019**

PSG HUMAN SERVICES FRAMEWORK

ACUTE PREVENTION SELF-SUFFICIENCY

**Priority Need A: Acute (35%)**

Services focused on adult individuals and/or families experiencing a difficult or dangerous situation which requires prompt action to avoid further deterioration of their health, safety, or welfare.

**Priority Need B: Prevention and Diversion (40%)**

Services focused on preventing negative changes to the health, safety, and welfare of adult individuals and/or families; or services designed to divert adult individuals and/or families who have experienced negative changes to their health, safety, or welfare from experiencing further deterioration.

**Priority Need C: Self-Sufficiency and Stability (25%)**

Services focused on helping adult individuals and/or families work toward needing no assistance to satisfy their health, safety, and welfare; or services focused on helping adult individuals and/or families work towards a stable level of assistance needed on an ongoing basis.