



D.C. Department of Human Services

**Introducing *The Aston*:
The District's First
Non-Congregate Shelter (NCS) Model**

Presented June 21, 2023, to ANC2A

Agenda

1. About the Purchase (The Why)
2. Target Demographic
3. Difference Between LBS vs. NCS
4. Program Operations
5. Summary of Renovations
6. Timeline
7. Community Engagement
8. DHS Points of Contact

Advantages of Non-Congregate Sites

- **Many clients avoid low barrier shelters**
 - Offers privacy not available in low barrier shelters
 - Offers an opportunity to clients who are not easily served
- **Clients with medical vulnerabilities cannot be adequately served in low barrier shelters**
 - Shelters offer clinic services, not daily nursing or professional staff
- **Creates "flow" throughout the CoC**
 - Requires case management
 - Includes built-in exit timelines
- **Supports the Mayor's commitment to making homelessness rare, brief, and non-recurring.**

Who will be served at the Aston

- Medically Vulnerable (*Chronic conditions*)
- Clients who are matched to a housing resource through CAHP.
- Individuals who cannot be served in our other shelters:
 - Couples
 - Mix gendered adult families
 - Currently, in order to access shelters, adult families of different genders must access separate shelters.
 - Clients in need of medical respite bed
 - Respite meaning short-term, acute, recuperative stays

Who will be served at the Aston

Medically Vulnerable

Documentation of one or more of the following:

End stage renal disease (dialysis dependent)	Severe respiratory illness such as severe COPD with O2 requirement
Paralysis that impairs Activities of Daily Living (such as stroke, trauma, etc.)	Major Neurocognitive disorder (formerly called dementia) causing severe impairment
Congestive Heart Failure with exacerbations	Liver disease
Active cancer diagnosis/treatment	Chronic lung disease
Difficult to control Insulin-Dependent Diabetes Mellitus (IDDM)	Severe neurodegenerative disorders such as ALS and severe MS
AIDS poorly controlled	Sickle Cell Disease
Severe vision impairment	Cerebrovascular disease

Low Barrier Shelter vs. Non-Congregate Shelter

	LBS	Non-Congregate
Admission	Low Barrier – All client are offered a bed subject to availability. Admission was first-come, first-served.	Transitional – Clients will be issued a bed subject to an admissions criterion such as medical vulnerability, unable to serve in our current shelters, or matched to housing. Clients will be admitted through our coordinated entry (CHAP) process.
Bed Configuration	High Density – Several congregate sleeping rooms with several clients in the same area, including some bunkbeds, shared bathrooms.	Pairs – Two to a room with a bathroom for each individual suite.
Case Mgt.	Even when offered, clients in a low barrier shelter are not required to participate in case management. DHS and provider staff.	Clients will be required to participate in case management as a condition of admission and in order to continually reside at the Aston. This is a key component of our NCS strategy.
Gender	Single Sex (*except LGBTQ)	Men, women, and non-conforming genders will be served.

Overview of Operations

- **Anticipated Length of Stay**
 - 3 - 5 months

- **Client Services**
 - Consistent medical services
 - Intensive case management

- **Provider Selection**
 - Selection process in progress
 - Anticipated provider selection: July 2023

General Contractor: MJM Contracting INC.

Proposed Timeline: 8 weeks

Proposed Scope of Work:

- ✓ Painting interior spaces within the building.
- ✓ Replacing carpet with vinyl plank flooring in over 100 units.
- ✓ Upgrading security and IT infrastructure.
- ✓ Construction of new administrative spaces & medical clinic.
- ✓ Repairing underground garage parking area.
- ✓ Providing a deep clean of the entire building.

The project also includes providing new furniture and appliances for over 100 client units and administrative spaces.



When Do Anticipate Clients Moving In?

- ✓ Contract Executed (Projected Jul/Aug 2023)
- ✓ Renovations: (8 weeks - Aug/Sept 2023)
- ✓ Provider onboarding: (Sept/Oct 2023)
- ✓ Client move-in: (Oct/Nov 2023)

How we Engage

- DHS prioritizes being a good neighbor. This includes transparency and ongoing communication as the project gets underway.
- For consistency, we communicate directly with ANC Commissioners and Councilmembers first for awareness.
- We work with the Mayor's Office on Community Relations and Services (MOCRS) to identify stakeholder groups to engage.

How we Engage

- Attendance at regular ANC and community meetings to discuss and brainstorm external design, maintenance, or operational options to reduce trash build-up, traffic flow issues, excessive noise complaints, etc.
- Attendance at routine ANC and community meetings to discuss ways to build community and good neighbor relationships.
- Collaborate with sister agencies (MPD, DBH, etc.) for issues that extend beyond the purview of DHS.

Who to Contact?

Between **June 2023 – October 2023**, please contact:

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