# So why are we all here today?

to build a community of peer support for centers that are serving rural areas. What does that mean? It might be a little uncomfortable at first, but I want to let you know there is no designated presenter and listener for this call. Everyone on this call is the presenter of this information, and we are here to learn from one another so please feel free to pipe in.

Liz Sherwin: I am glad we are having a discussion and we all acknowledge that there are a different set of rules that govern how we serve rural communities because of the distances that we have to travel as well as the lack of community support like transportation, and I think it's wonderful that we are having this discussion, and maybe between all of us we could share our ideas on what's working in our areas, and maybe as I said earlier, replicating our areas and just coming up with some new ideas because our main focus is to serve consumers. The only way we can serve consumers is to be able to reach them.

what are some ways that you all are serving those consumers in rural areas? **Those that might have barriers to getting to your office and traditionally delivered services. If you can include any creative solutions you're doing**

>> This is Liz Sherwin, and I'm with the center in Illinois, and most of the rural area that we serve in is really farm country, pigs, cows, that sort of thing. And you could drive for miles and that's what you'll encounter. We serve both Illinois and Iowa, and the rural counties in Illinois. They were very limited in terms of public transportation. The communities don't have a lot of resources such as healthcare and those kinds of things. When we try to figure out how to reach those communities because my center is located in an urban part of the community. We figured out that in order to serve people you have to be where the people are, and one of the things we looked at is how to do it effectively because most centers in rural areas because of the sparse the population, they have less resources than many other centers. So we had to do it in a way that was cost-effective.

1. we looked at making sure we had money in our transportation budget to reach these communities.
2. Looked at ways where if we did reach the communities that we could do it in an effective way. So a lot of times, if we were going out to the community, we would try to schedule a number of visits at the same time. We also work with agencies in those counties or identify those agencies that would maybe allow us to have office hours and all kinds of things.
3. Technology, maybe using some form of technology to reach people and provide services.
4. We work really hard to identify any resources that could support what we were doing.
5. the concept of the circuit riding. I kind of like that because I think a lot of us do that, so we just haven't given it a name because I know that when we are out listing our consumers we try to make one trip do because of the expenses related to transportation.
6. We also work with the local transportation authority to get increased transportation in some of the rural areas, but we were only able to do it in one of our counties.
7. The other counties sadly lacked transportation. There’s no way for people to get to the office. So we have to partner with agencies that exist out there and that people already know about to reach the consumers that we serve.
8. We do a lot of social security benefits. What we usually do is work with agencies that are there. We use their computer systems to help people apply for benefits, and whatever there is out in those communities we try to utilize to better serve our community, and our people with disabilities.

 My name is Melissa O'Brien, and I'm with Southeast Alaska Independent Living and I’m in Ketchikan, Alaska we are always dealing with rural issues because we are an island. We have a couple different independent living centers within our organization and the larger communities, and then we are always having to figure out how to serve all the areas.

1. We actually started and have a pilot project for a few years and it was called IL Stand and it was service to independent living and services to help Alaska. And we had advocates on different islands that were able to help. It was a very part-time position so some of them were only seven hours in the community, but it was giving those people the resources in the community. We started with six and ended up with 10 at the end.
2. We do a lot of phone stuff. A lot of times even the access to zoom or web platforms isn't something that our consumers can do so phone is good for us.
3. We try to tag as much outreach as we can if we know we’re going to a community for a health fair we try to make sure we get all those meetings in as we can, but it's deftly a struggle for us.

Hi this is Robbie from Atlantis Community, and we are in Denver, Colorado. We serve a seven county catchment area and are the only office is in Denver.

1. we were fortunate enough a few years ago our executive director had applied for a grant, and we were awarded the grant to create our mobile office, and that's what we are currently using to basically serve people experiencing homelessness or to work with folks where there is some type of a barrier that's keeping them to getting to our main office. That mobile office has absolutely been a game changer for us with being able to reach folks who would otherwise not be able to receive services, and its not perfect by any stretch of the imagination, and it certainly has not solved all of our struggles when it comes to working with folks in rural parts of our catchment area. Typically our mobile office work week is split between days where we are actually doing intakes and having those follow-up one-on-one appointments with consumers to work on their goals, and then the other days are where we are really heavily focusing on our outreach. Early on we set up outreach locations in about half of our catchment area and our hope was the outreach locations would really be our anchors as far as locations in the community, and then going forward, that's where we would have folks come and meet us. Like if we meet someone through a specific outreach location than we know obviously that's a location the person can get to so then that also becomes a place where we meet with that consumer on any subsequent follow-up appointments. So if that answers when you're saying, how does it work? That's kind of the foundation of how we’re doing it is we’re using it to do those follow-up one-on-one appointments as well as our outreach efforts.

Eileen from northern coast regional center for independent living serving three counties mostly in northern New York along the Canadian border.

1. We do a lot of phone calls and home visits some web-based trainings and service calls, but those conference calls only work when they've done a lot of prep work ahead of time.
2. have a small education grants that serves nine counties that is mostly teacher education about IDEA and it's usually web-based.

Martha Mason from Southwest Center for Independence out of Durango, Colorado. They serve five counties, 6500 square miles, with 14 people per square mile.

1. We do a lot of circuit rider isle services, and try to include several staff when we travel for anything in the region. (Well it's kinda based on old preachers, but it means office hours and doing home visits. For instance, we are 60 miles from Pagosa Springs, and we try to schedule visits with everyone in Pagosa Springs for the same day. We have a couple of satellite offices, but we also use different senior centers, community centers, ranges and whatnot to bring groups, classes, and in office hours. It's just a name. )
2. Started their own transportation company. Southwest Drives and it's a nonprofit. We had to get registered with the PHC. At this point we have two accessible vehicles. We got disgusted because Medicaid is contracting with non-acceptable vehicles for transportation down here, and that was part of the reason, and another reason was we were working on a young man who just obtained quadriplegia, and he was in a real bad situation about an hour out of time town, and we helped him find an apartment in town , but had no way to get there so we put him in a nursing home for three nights so they would transport him to his apartment. So we've got some startup grant funding. We’re billing Medicaid and waiver Medicaid for services, and then we have contracts with the school district, human services, other organizations to transport DVR, to transport individual people for different things. We are actually looking at a grant to do a route. We serve the Pine River Valley, and it's a big area with lots of disenfranchised people who are aging or trying to age in place that are very rural, and so we are trying to find funding to do a big loop and pick people up and bring them into the small town of Bayfield that has about 2000 people to go to the library, have a drink, meet their friends. They are doing something great conversations around what they need in order to stay at home without having to be institutionalized. We did logic plans and all of that stuff and anticipated that in five years, and this is our three, that we would be self-sustaining.
3. Our office is actually in a place with no landline service, so they ended up getting cell phones for all the IL staff, and they can access email and enter their data from virtually anywhere when they’re meeting with somebody.

Nadine Autry serves Franklin and Carroll County in Maryland Freedom Center and she says:

1. We have employees on the transportation board in order try to affect change in rural areas. So talking about getting folks on the transportation board and making a system change for that transportation.
2. We do zoom meetings, FaceTime meetings, we actually have a cell phone now where we are able to text especially with the deaf community.
3. We go to people and sometimes if they can get to a certain point, we will meet them at McDonald's, or the library, or meet them where it's convenient, we have computers where we could remote in, and actually get access to some of the resources that they may need. So whatever it takes we put our foot in there and try to make sure we are serving the community we represent.

Karma says

1. they are listed on the wall of our Social Security offices as the Internet computer lab location so people can come in and use it.

Natasha from Multiple Choices Center for Independent Living, and some of the ways they are serving folks in their youth transportation program –

1. they’re serving folks through a youth transition program
2. assistive technology,
3. braille,
4. peer support,
5. and referral to agencies. They serve Barrow, Clarke, Elberton, Green and the rest of the remaining counties for Northeast Georgia.
6. Some of their biggest barriers are transportation. We are have trouble finding our transportation and trying to get the youth and the disabled ways to get to our agency for help because either the cost is too much, or they just don't have the funds, or either their health insurance doesn't include the policies that we have.

>> This is Diana at the Services for Independent Living, and I'm actually in Cody, Wyoming, which is actually the East gate of Yellowstone. Our agency serves all of Western Wyoming. We’re about seven hours from top to bottom on the state for driving. We have three main offices,

1. what we do, and I never had a name for it before Martha, but I guess we’re all circuit riders. We line things up on the phone and then we make a circuit and stop and see all of our folks. Most of us see people once a month because I do other programs, but sometimes I'll see them maybe every other week, or maybe I will see them twice a month.

Brian Hollander from Independent Living Resource Center serving counties of Santa Barbara, San Luis Obispo, and Ventura, we have this mix of highly populated areas that are then surrounded by very rural areas.

1. We’re able to do a lot of work using technology, however, some of our more rural citizens they don't have reliable broadband Internet connections so we do a lot of work over the phone
2. The other thing we do is we do a lot of partnering with other local organizations, libraries, even for-profit entities that have space like somebody mentioned McDonald's, we do a lot of meetings at coffee shops, it is California.
3. What we try to do is a lot of meeting people where they are as well as we focus our systems advocacy efforts on some of these gaps so one thing we've done this year is created system advocacy work groups and we have four offices and those in our more rural areas are focusing more on groups of poor people that are committed to taking specific project-based action to try to address systemic barriers to public transportation, or to accessible transportation in those communities.
4. We also do what somebody was talking about with circuit rider where we will have a couple of staff that plan trips so they can meet with several people on one trip.
5. One thing that I would say is we do struggle with some of the services that we can't provide. We have a couple of programs that require that we subcontract some services. For example, we have a program that’s called The Older Individuals Who are Blind Program that serves people who are 55 and older who are blind or low vision, and we struggle with, not so much our side of providing services and that, but finding some of the subcontracted services like Visual Evaluation Providers Assistive Technology, specialists who are certified for people who are blind, certified Orientation of Mobility Specialists who we have in some of our areas, but in some of the rural areas, there's nobody to go there or subcontract with so that’s something that we struggle with.

Who are the key agencies or partners that you’re working with in rural areas. **We could just start with your question if you want. How do you address that challenge of capacity building or finding those services that you need to contract out for?**

1. This is Robbie from Atlantis Community. It may not necessarily be a specific with subcontractors, but one approach we’ve try to take is organizations where there’s some overlap but not necessarily duplicating services. For example, with our mobile office since there was such an emphasis in regard to how do we serve people with disabilities who are experiencing homelessness. We really put a lot of effort into partnering up with day shelters, with libraries, because what we’re seeing and a lot of the catchment area that we serve in Colorado, even in downtown Denver at the main library branch they brought on a bunch of full-time social workers because of the people experiencing homelessness who were leaning on libraries more than just shelters during the day to have access to technology. So libraries and day shelters are providing services may not be served directly to people with disabilities. We were like, hey, we would like to provide some backup and relief for what you're providing if you're willing to provide us with a little bit of space. The approach we are trying to take is kind of like this mutual aid. We’re not just asking them to help us out. What can we do to provide some relief on their end as well? That's been pretty successful with us partnering up with day shelters, libraries, each of the counties that we serve we've partnered up with they’re human services offices and the different County arts chapters as well. Just in the big picture, what can we do to work together and support each other. That's been where I feel like one of our successes has been. This is what we have to offer as well.
2. This is Liz Sherwin. We partner with community action agencies and also some of the senior organizations because they serve a lot of people that we’re trying to reach so we alot of times will schedule our visits at their location or if they are doing different types of events like community fairs or whatever and we have booth space with new information about our services and programs to keep us visible to the community because a lot of times our– one office is located in the metropolitan area, but we have to make sure that we are visible in those communities to make sure people know that we are there and wanting to serve people and provide services in whatever location that's convenient or available to them. Whether we have to travel to the site, or if we could partner with the agencies that already exist so that we could reach and serve consumers.
3. This is Nadine at The Freedom Center, and I'm in agreement with all of you, and what we do here at the Freedom Center is we partner with everyone. We will partner if you have space and you allow us to have a conversation and you have people that are in need and we could help them. We used to have co locations with the Department of Aging and we still have co-locations with one of them, but we would co locate with other agencies who would allow us to co locate with the because not only are we providing them assistance, but then they are giving us referrals which bills are clientele which lets us contact the state for more money. There's a population out here that's not being served, and we need more money in order to serve them. However, I partner with the hospitals. I partner with the churches. I partner with anyone who will allow us to come and have a space where we could meet with individuals. They are of the same mindset and they want to help the community so any community partners that are available we try to build a partnership with them, and so far we have been doing pretty well with our outreach.
4. Martha said in the chat box that they partner with community centers, soup kitchens, senior centers, coffee shops and granges (Grange's are the old community centers in the country. It’s where you meet to talk about the water district, and you have craft fairs, and groundhog suppers. It’s just a country thing).
5. Brian also added back in, also at the libraries where he is in California are serving a lot of people who are homeless and they've been working with their local libraries to provide linkages to services for these individuals in their community. Approximately 80% of them have a disability.
6. Melissa in Ketchikan, Alaska wanted to say they host a lot of clinics. Our largest city is a six hour flight away. Oh my. We do not have access to a lot of specialty clinics so we are constantly doing outreach and staying on top of community issues, gathering referrals, and making connections to host clinics in our town such as brain injury screenings and low vision specialists.
7. Liz Sherwin, IA About seven years ago, we started doing a resource fair to bring in different types of technology, and experts, and different types of devices so that people are aware of a lot of things that are out there to increase their independence, and we’ve been doing this for probably about seven or eight years, and one of the things we found, we have the one location and a lot of the rural communities don't have enough space for the type of venues that we have, so we provided at one of the hotels in our metropolitan area, but we worked with different transportation sources so that we can have people from the rural communities come in. We have them come in by bus, and whatever to participate in these events, and we’ve been doing that, and that's been pretty successful. We found a grant to pay for some of the transportation to get to the event, and we generally have about 300 people every year that participate and quite a few of them are from rural communities.
8. Diana, Wy: We have a health coalition in each of the three areas, the three main areas that we have. We have health coalitions where we get to meet with some of the other agencies monthly, and I'm finding one of our best partners to work with his public health, the public health nurse. Also, there is assisted-living's that are starting to come around to try to give us some referrals of people who had been referred to them but, yet they couldn't take them or something like that.

# How do you partner with others in rural areas if they don’t seem like they are interested?

This is Nadine at The Freedom Center, and breaking down doors, kicking in doors, it takes a while. You have to have the stomach for it. One of the ways that we used to break down a lot of the barriers that we have because as you realize everyone that has like the Center for Independent living, the Vision Rehabilitation, mental health, everybody has their pot of money, and they don't want you to dip into their pot of money. So getting the idea across is that if we partner we aren't dipping into the same pot, we’re just assisting each other to serve the community. Trying to get that across is like pulling teeth, and you have to keep at it, and keep at it, and keep at it. So getting into the school system is pulling teeth, and some of getting into the community agencies is like pulling teeth because they think that you're going to take away some of their funding, but when they realize that what you want to do is be an asset to them and not take anything away from them sometimes that's a way of getting your foot in the door, or you could go to other organizations who already have their foot in the door partner with them and that gets your foot in the door.

This is Liz again. We had a problem with one of our counties and one person was in charge of all of the poor people, and they said if you do not work with this individual could provide services in the county. So they have something which they call human service councils where everyone got together maybe once a month and talked about whatever was going on or whatever the perceiver conditions of the county was where people need it. One of the things that came out of that was they did not have a directory of services for the county. People just knew different programs were there, but they had no idea who they were or how things operated. In these meetings we came up with the idea that they should do a directory of human services specific for that county and anybody that provide services. I worked with a couple of people, someone from the senior agency that had some of the information, and someone from another agency, and we came up with all the data on people who served in the county whether they were prophets or non-for profit as well as state and local resources. Once they was done they weren't sure how they're going to go about developing those directories. So I volunteered our secretary to enter all the data into a system that was manageable. Also, we came up with some of money from one of the local organizations, or maybe it was the utility company. I can’t remember which, and they would pay for the publishing of this directory and so many copies. What we did was do all the layouts, the center did, and set up everything, but one of the things in the directory, our center was listed as the publisher for it. So that got our name out there. So anybody who uses the directory whether they were the police department or the schools or whatever, the Center for Independent living was listed as the publisher and that sort of thing so that was one of the ways we got our names out in one of the rural counties.

 This is Martha. I'd like to say in our really rural areas, and we have three counties that have less than two people per square mile, all of the agencies work with each other and count on each other. We apply for grants together, we use each other's offices. I’ve got a situation right now where we are not able to get into our office for the next two weeks minimum, and the whole community is reaching out and offering. I’m at the IDD service providers agency right now. People are allowing us to make photocopies. I had two big contracts, one federal and one to get turned in, and people were letting me use their scanners, and all kinds of stuff. In some ways it really is easier for people who are truly rural to work together than it is to be one big city because we aren't competing with each other. We are supporting each other.

This is Robbie from Atlantis Community, and one other thing that I'd like to add in regards to partnerships because I've definitely experienced a little bit of everything that's been shared from organizations that I use. I did make up this term, but hording their resources where they don't want to work with other organizations. To the other end of the spectrum where people are super excited about working together. One thing that's helped us getting our foot in the door with the organizations that weren't as excited to collaborate was on our end just coming up with some specific examples like here are things that we are going to bring to the table, here are some things that we can do that will lighten your load as opposed to taking the approach of we need your resources. We’re coming to take up your space. How do you get into that some wordsmithing using some different language to highlight what we have to bring to the table. That's it, I'm done.

Here in Athens we just started a collaborative with service providers in this area that serves individuals with disabilities, and that’s where we come together and this year we are coming together as collaboratives to create resources that we could share with each other. Also for when clients come to us from surrounding rural counties, so that is been something that has been very beneficial, and it's nice to see there are many services coming out versus being closed in and not sharing things they have to offer.

# My question is, another barrier that we have with Rural Housing

* This is Robbie from Atlantis Community. Transportation and housing are definitely – that's one and two on our list that we struggle with as well. In our area housing is disgusting, the lack of housing, there’s a housing crisis, and for us it's just about trying to work with the consumers and just being persistent in trying to get creative in regards to we try to communicate with consumers, especially ones that are experiencing homelessness. Maybe whatever the next place you get is not necessarily going to be your permanent place, but it's a step in the right direction. We try to get folks to work together maybe a couple of consumers to be willing to be roommates where they’re each renting a room in a place and combining their resources as opposed to each one having to come up with their own full amount of rent for a one-bedroom place. We’ve tried to look at different databases that compiled housing that is available. There is one called silver nest, which I'm pretty sure is across a lot of the United States, and silver nest is this database of homeowners combined with people creating profiles for space that they are looking for. So it's a lot of rooms for rent at a house, or maybe someone had a condo at one time and now they're renting out the two rooms out of it as opposed to them living in it to themselves.
* This is Liz again. One of the things we developed and are publishing every so often is a housing directory of accessible affordable housing in our community that is available to people. So we’ve gone out and looked at each of the municipalities whether it was rented, or owned, or public, or whatever and developed a directory that lists the housing and the type of units they are and their accessibility and those kinds of things, and we publish that every so often. One of the things in Illinois we have the housing development authority and they actually have funding to develop houses in communities. A lot of times this particular organization and it’s a state organization statewide, and they asked that the looking local Housing Authority or whoever is applying for the money gets a letter of support from us as to the housing being accessible and for the needs of people with disabilities and their community. I do a lot of support letters to increase housing for people. This could be in the development or maybe even the rehabilitation of existing housing.
* Carol in the chat mentioned that if you are not at the table with your local continuum of care organization this would be a great opportunity to apply for HUD funding for rural areas. I came from a position where I was the continuous care director out of Virginia and I'm currently The Director of the Disability Rights and Resource Center in Rocky Mountain, Virginia which we have a huge rural area with about four or five localities, but with the continuous care process, I know the grant is about to end for this year on September 30th, but all the organizations on the line now should be a member of their local continual care because through that you not only have the ability to access the federal dollars for your community, but I’m not sure about individual laws, but just talking about letters of support, but you can also partner and provide letters of support. There are a lot of communities where continuum of care do not partner well, and we were very fortunate to be able to partner really well with the Housing Authority and with our Center for Independent Living as well as a number of other agencies including veteran localizations to bring housing and funding to the community. We had a lot of offers they came to the community to serve the rural areas as well for people with disabilities including community services health organization as well as people with physical disabilities. It's worth a try if you're not at the table to find out who your COPD is and to get in on those meetings.
* Your right, we do have a continuum of care that we participate in, and most of the senior organizations, and the homeless shelters, and all those kinds of people are involved as well as the commitment to access community. We participate in that organization, and it's good to reach out and find out about your continuum of care.
* Karma says that they partner with the Rural Housing Authority. Karma says, HUD lists apartment complexes that were built with tax credit, and they have meeting rooms also and they been using those to hold trainings and meetings. They are required to have trainings so they were thrilled that we came in.
* Martha wanted to note that there continuum of care is called Balance of State and covers 56 counties.

# Transportation

* There are a number of groups that work on rural transportation in our area so we generally participate in those meetings and that sort of thing to make sure that the issue of accessible transportation is always at the table, and to look at ways and resources that we could increase transportation options for people because in many of the rural areas they may have taxi services or whatever. They have whatever it takes to get people where they need to go, and there even some volunteer modes of transportation. If there is any type of transportation or discussion about transportation, we try to attend those meetings, especially with the county board and the supervisors and those types of people so that they are aware when they are doing planning that transportation is a major barrier to people getting services. So it's just important to look at or identify those resources in those counties and maybe having that discussion.
* one of our senior centers that serve a couple of rural counties, so we try to educate them, and they also have those vans that are just sitting vacant and they’re not using them to encourage them to increase or look at ways they can better serve the population that we’re working with.>> This is
* Melissa O’Bryan in Ketchikan, Alaska. One of the things we did, and we did it in our general office and our Ketchikan community, we partnered with local taxi companies and we were successfully about to write a mini grant through Alaska Mental Health Trust Authority and partnered with the Department of Transportation, and we have two accessible taxis in our community, and we offer half price taxi vouchers to people for qualified seniors and people with disabilities. It’s grant fund contingent from year to year, but been a big help for people to get to us ,and a lot of the issues we face is the borough bus only go at 7 AM to 5 PM and for people that's not really convenient when they are 15 miles off the road so that was overcoming a huge barrier cross for us.
* This is Martha, and one of the cool things we did was we got a $2000 grant from the county and we put a rent a car up at a housing unit, a subsidized housing unit that's way out of town so people could sign up and drive the car get their groceries and whatnot.
* One of the things we are doing is we are just starting to try to address creative transportation issues here. We actually just recently had a meeting about this here in Santa Barbara with a bunch of local stakeholders, and one of the things we’re batting around is this idea of creating a transportation Consortium that might be subsidized or indemnified by the troubled public transportation provider to use some of their vans and vehicles. There are a lot of human services organizations and they use their vans early in the morning, and then they use them for about an hour in the evening, and then they just kind of sit all day.
* This actually came out of that idea because we are partnering with one of our community organizations at UCP. They have pledged to use their vans for our 2020 get out the vote efforts. So we thought if we could do it for that maybe we could create something on a more regular basis for this, but the issue of indemnification becomes complicated, but if you're getting indemnified by the public transportation then he could possibly resolve that issue.

# Strategies for Hiring, Supervising, and running rural outreach offices that are far away and may feel ‘disconnected’ or difficult to supervise without making them have a ton of windshield time driving back and forth to meetings?

* We deal with that too because like I mentioned we have rural office offices all around Southeast Alaska, and it's rare that we get together as an agency. We can’t drive to each other's offices so even if we do outreach we do one staff retreat a year and that something that's important to our agency, but otherwise we make a planned effort so we have weekly – let me look at my schedule. Our first week meeting is always an IL meeting where all of our advocates do things such as this, and then we have an all staff training once a month and it's not mandatory, but it's kind of mandatory that you’re there and we do either zoom or platform or conference call. I feel like it's all about connections with certain things so if you could find a way to make a point effort to be able to connect whether it's a staff meeting that everybody calls into or something. I feel like there is more buy-in from staff and it's a constant struggle for us as well especially when you're dealing with retention and trying to keep people happy and that's part of it.
* One of the things that we do is we have four different offices but we have people with the same or similar titles in each of our different offices so we tried to get them to utilize, to meet regularly over the phone or Internet chat and share ideas, challenges, and successes, as well as having our quarterly all staff meetings for the entire agency.
* The other thing we do is we encourage our staff to reach out to their counterparts at other centers in the state so that they don't feel quite as isolated, but there also always thinking about their jobs as part of a larger movement. That also encourages always trying to get creative solutions to challenges they may be facing.
* they set up their own structure within those satellite office centers so we've got a county coordinator and they will answer to the ED at the main office, and then they are in charge of making sure folks show up on time and do their work at those satellite offices.
* We use Slack to communicate with each other throughout the day. I've actually used Slack for a few different projects that I'm doing, and it is pretty handy. It's kind of like, I don't know, like the old chat or internal chatting, and you could create a channel, and put all your staff on it ,and you could see if there on Slack or not, and it's basically like email only it saves all your conversations and everybody could all be chatting together all the offices, which is kind of neat. Thanks for bringing that up IPKY.