CoC Systems Performance Committee (SPC) Minutes

Thursday, August 27th, 2020
9:00 AM – 11:00 AM
Zoom (online)

Agenda Item	Presenter	Time	Agenda Item Type
0. Call to Order & Welcome: Noel Kammermann, Chair			
Meeting called to order at 9:03 AM by Noel Kammermann.			
I. Welcome	Noel Kammermann	9:05 AM (5 minutes)	
In attendance: Alexis Bernard, Amani Sawires Rapaski (represented by Joshua Arnold), Angela Marin (represented by Andrew Guerkink), Angela Upshaw, Cindy Cavanaugh, Debra Larson, Erin Johnansen, Gina Roberson, John Foley, Mike Jaske, Monica Rocha-Wyatt, Noel Kammermann, Stephan Heisler *Absent Members*: John Kraintz, Lisa Bates, Sarah O'Daniel			
II. New Business			
A. CESH Work Products: Access Matrix (analysis), Sacramento County Department of Behavioral Health Visual Map (preview), update on other visual maps	Maddie Nation and Colin Sorensen, Homebase	9:10 AM (60 minutes)	Informational
Information: Homebase presented an analysis of the Access Matrix, as well as a preview of the Sacramento County Department of Behavioral Health Visual Map. SPC Members were invited to ask questions and provide feedback (summarized in discussion summary below). SPC members are welcome to provide additional feedback on these items to sacramento@homebaseccc.org through Friday, September 4th. Based on a Homebase recommendation, the SPC agreed to shift the focus of the final two visual maps to (1) SHRA and (2) Sacramento County Department of Human Assistance.			
B. Breakout Groups: Gaps Analysis	Homebase	10:10 AM (15 minutes)	Discussion

Information: SPC members were randomly sorted into breakout rooms to discuss the essential elements of a Gaps Analysis (aggregated notes available below). Homebase and SSF will be considering these discussion notes while building out the Gaps Analysis Framework over the next two months.			
C. HIC Presentation	Scott Clark, SSF	10:25 AM (20 minutes)	Informational
Information: The HIC slidedeck and other presentation materials are available in the August SPC Meeting Packet. Please provide all feedback on these materials to Scott Clark at sclark@sacstepsforward.org by Friday, September 4th.			
D. Discussion: HUD's Stella Tool	Colin Sorensen, Homebase	10:45 AM (10 minutes)	Informational
Information: Homebase gave a brief presentation focused on the capabilities of HUD's Stella tool. Analysis of the Stella tool will be postponed until the LSA has been updated (currently estimated for late 2020).			
E. Special Recruitment for SPC	Michele Watts, SSF	10:55 (5 minutes)	Discussion
Information: Due to his new role as CE Manager at SSF, Peter Bell has resigned as SPC Co-Chair and stepped down from the Committee. Noel Kammermann, Lisa Bates, and SSF are working on a special recruitment process to fill the SPC member seat vacancy. If any SPC members are interested in the Co-Chair position, please let Noel Kammermann noel@sacloaves.org and Michele Watts mwatts@sacstepsforward.org know.			
III. Adjourn: Noel Kammermann, Chair			
Meeting adjourned at 11:03 AM by Noel Kammermann.			

August Discussion and Feedback on Systems Mapping Work Products

During the July meeting of the Systems Performance Committee (SPC), Homebase presented: (1) Final Presentation & Analysis of the Sacramento Project Access Matrix, and (2) Preview of the Sacramento Department of Behavioral Health Services, Mental Health Division, Visual Map. The following questions and feedback may have been slightly altered to increase readability. Responses have been built out to include more specific information or examples where useful to building readers' understanding.

Sacramento Project Access Matrix Feedback

- The Access Matrix is missing a number of homelessness prevention programs funded by Sacramento County, including the CalWORKs homelessness prevention program, a non-CalWORKs diversion program at family shelters, and the Bringing Families Home homelessness prevention program. There are also homelessness prevention resources attached to the Sacramento County Behavioral Health System, Mental Health Division. There may also be homelessness prevention programs within the domestic violence system. This makes the conclusions presented about the homelessness prevention system being dedicated to TAY and veterans incorrect.
    - Homebase Response: Thank you for flagging these inaccuracies! We will update the systems mapping work products accordingly and make sure this piece of analysis is corrected moving forward.
- We should do a deeper exploration as to why programs aren't participating in the Coordinated Entry System. This can could be part of a specific project's funding requirements or due to other factors. The projects that are not participating in Coordinated Entry are often reaching people who aren't touched by CE (e.g. jail diversion, older adults, child-welfare connected families).
- There are no DV programs in the Sacramento Project Access Matrix.
    - Homebase Response: There are five DV projects in the Access Matrix, including A Community for Peace - DV Emergency Shelter, My Sister's House - DV Emergency Shelter, Volunteers of America - Senior Safehouse, WEAVE - Emergency Shelter Program, and WEAVE - Transitional Housing. If you would like more information about how to navigate the Access Matrix, including filtering by sub-populations or agency, please contact sacramento@homebaseccc.org

- When the community did outreach to encampments as part of the COVID-19 response, we found that many folks experiencing unsheltered homelessness were completely disconnected from the system. The "normal" homelessness system of care seems dependent upon individuals approaching the system.

Sacramento County Department of Behavioral Health, Mental Health Division, Housing Resources Visual Map Feedback

- The Mental Health Access Team will triage clients seeking services to the mild-medium acuity mental health providers. Only the purple dots (Wellness & Recovery North, Wellness & Recovery South, El Hogar) offer drop-in assessment.
- The Mental Health Access Team completes the eligibility screening for each client. The mental health provider will then do a more in-depth assessment for bio-social needs (including housing), as well as working with the client to create a service plan.
- For mild-medium acuity mental health programs, the flexible housing funding is typically limited to 9 to 12 months and requires that the client have a housing plan. In these programs, the flexible housing funds can be used for homelessness prevention and room and board, but it not usually long-term housing.
- For Full Service Partnerships, long-term housing is only available.
  - If folks are being serviced at a mild-medium acuity mental health program, but their mental health impairment is impacting their ability to get housed, they can be reassessed for eligibility for the Full Service Partnership.

Breakout Rooms: Gaps Analysis

Overview
Systems Performance Committee Members were randomly sorted into four breakout rooms and asked to discuss the following questions. Each breakout room was facilitated by a SSF staff member, who took notes on the discussion.

1. Please introduce yourself!
2. Reflecting on what you have learned from the system mapping so far and the goals of this committee, what question(s) does the Gaps Analysis **need** to answer for the work of the SPC to move forward?
3. If you have time: In the system mapping work products and findings, name one thing you have seen that particularly concerns you and one thing that mystifies you that you want to understand more about.

Discussion Notes

Group 1: Tamu
Reflecting on what you have learned from the system mapping so far and the goals of this committee, what question(s) does the Gaps Analysis <u>need</u> to answer for the work of the SPC to move forward?

- How do people really get connected? There's frustration with people calling 2-1-1. What's the experience from the client level? Is it as easy as it can be?
- There's a lot of back-and-forth referral that's very frustrating to people. Where are the actual open doors? That's what CE is meant to do, so it was surprising to learn today how many units aren't connected to CE. Fragmentation of the system.
- What's the cost-benefit analysis of having a well-used CE system versus the fragmented system we currently have? If the CE system worked well, would that be an incentive for more providers and institutions to participate?
- Is there a perception of CE as a one-size-fits-all? Can we better capture eligibility criteria for CE so that more would participate?

Group 2: Scott
Reflecting on what you have learned from the system mapping so far and the goals of this committee, what question(s) does the Gaps Analysis <u>need</u> to answer for the work of the SPC to move forward?

- Definitely have to see how race is a factor in terms of access and success of services and just equity and access in general. Making sure it is clear for the entire community how to access.
- Agree with need for community access clarifications.
- Disconnect between programs, how you can connect between services, need for more communication.
- Fundamental issue is lack of beds.
- Housing first and housing is health is the approach but sometimes once in housing can't connect to services they need and transition on. System not moving quick enough.
- Referrals the first point of contact, what happens after outreach provider contact, we do seem to put up additional barriers, referring from street to shelter to program.
- Even 2-1-1 doesn't know all the resources out there, and then we need cutting down hoops that the community has to jump through.
- Now too much focus on housing. If SSF can do more coordination of outreach or other programs that need coordination maybe with best practices.

Group 3: Michele
Reflecting on what you have learned from the system mapping so far and the goals of this committee, what question(s) does the Gaps Analysis <u>need</u> to answer for the work of the SPC to move forward?
- We need to know, based on the characteristics of the homeless subpopulation characteristics, what the right mix of capacity is across different types of housing, and whether the rate of flow through the system at all matches up to the norms/proven practices for treating/successfully rehousing those subpopulations
- We know we clearly have capacity deficits at crude level, but we need a better understanding at a deeper level of what people experiencing homelessness in our community need, in order to improve outcomes.
- We see a need for more shelter, but shelter isn't housing so if we can transition people faster from shelter to housing, then we don't need more shelter- gaps analysis tool needs to be able to account for this.
- What is the shelter turnover rate? How close are we to the HUD goal of a one-month stay with an exit to PH at the end?
- How much of each intervention do we need?
- How do we improve efficiency/where do we need to improve efficiency, in addition to increasing capacity.

- Goal is to improve efficiency and add capacity to first hold steady, then turn the curve so we have more outflow than inflow, and, eventually, get to functional zero.
- Recognize it's a moving target with outside influences meaning we need more of everything, but would like to have a tool that can somehow take external factors into account.
- Since we need so much, and external influences are substantial, maybe our gaps analysis could be structured to prioritize next steps: what we definitely need, probably need, and might need?
- We need a gaps analysis that we can give elected officials who can influence policy. We also need to get providers, elected officials, and advocacy groups all on same page - unified effort.
- Needs to focus on current needs and projected needs, out 3-5 years, because it takes time to build or develop- tool needs to be able to analyze external environment.
- Concerns about COVID: All of the ppl facing eviction now could be a new inflow- what are their characteristics, how are they different from the current population?
- We live in uncertainty with COVID- impacting so many people in so many different ways, hope we can still make informed decisions moving forward, when we might see big increases in next PIT…
- SHRA will be admin millions to stem the tide of newly evicted persons- need for more collab between SHRA and the rest of the homeless system.

Group 4: Peter
Reflecting on what you have learned from the system mapping so far and the goals of this committee, what question(s) does the Gaps Analysis <u>need</u> to answer for the work of the SPC to move forward?
- <u>Capacity gap</u> and how will we solve this?
- Relative to need (population and intervention) what is the level of investment and the disconnect from the need? Gap of investment relative to need
- Client-level, where can we send folks? Transparency in the process.
- Investments we have and what have we received for these investments thus far. Do we have enough money in the system now to solve homelessness? What is the money we need to make these investments work? *The color of money.*
- Match-up of amount of money and the needs.
- Outcomes from investments. Do we know the outcomes of our investments across all systems?

In the system mapping work products and findings, name one thing you have seen that particularly concerns you and one thing that mystifies you that you want to understand more about.

- Systems that aren't part of this. How do folks access various systems, and how does the individual service provider's understanding of this process assist clients in getting to where they need to be?
- We have over simplified. "If we only had one system…" How do we braid systems? What can be done specifically to achieve more transparent access?
- Can there be one number that helps people clearly navigate through different systems? Or at least point them in the right direction?

Sacramento County Department of Behavioral Health Services, Mental Health Division, (SCDBHS) Housing Resources Visual Map: Methodology & Kumu Guide

Overview of Methodology

In order to visualize the path to access to housing resources across the Sacramento County Department of Behavioral Health Services, Mental Health Division (SCDBHS), Homebase and SSF have created a SCDBHS Housing Resources Visual Map based on information collected through an environmental scan, qualitative interviews and over 130 project-specific surveys. The SCDBHS Housing Resources Visual Map is one of four Visual Maps that will be created using the CESH funding.

Definitions

Definitions below are shaded with their corresponding colors found on the Visual Map.

- **Mild-Medium Acuity Mental Health Programs:** Agencies that are contracted by the SCDBHS to provide mental health services to eligible individuals.
  - *Information about the Mental Health Programs was collected from project-specific surveys, as well as qualitative interviews and documents provided by SCDBHS.*

- **Other Access Points:** Agencies or locations that do not provide mental health services, but will assess or refer clients needing these services directly to the system of care.
  - *Information about Other Access Points was collected via documents provided by SCDBHS.*

- **Front Door/Drop-In Center:** Agencies or locations where an individual can present in-person and request mental health assistance.
  - *Information about the Front Door/Drop-In Centers was collected via existing documents provided by the SCDBHS.*

- **Mental Health Access Team/Intensive Placement Team:** These two teams serve a variety of functions within the SCBHS system, including phone triage for individuals requesting assistance and administrative support for individuals who have already been screened for eligibility.
  - *Information about the Mental Health Access Team/Intensive Placement Team was collected via qualitative interview with SCDBHS.*

- **Screening:** Every client receiving mental health services through the SCDBHS is screened to determine the severity (or acuity) of their mental health need. This screening will differ slightly based on the individual's point of access to the mental health system and/or the mental health program that they will ultimately participate in. While this screening may include basic questions about housing needs, the screening is primarily focused on mental health need. Clients

with a higher severity of mental health need may go on to complete the LOCUS Assessment to determine confirm their eligibility for a Full Service Partnership or TCORE program.

  o *Information about screenings was collected via qualitative interviews with SCDBHS.*

- **Full Service Partnerships/TCORE:** Full Service Partnerships (FSPs) and Hope Cooperative/TLCS' TCORE (TCORE) are two types of specialty mental health service programs, serving clients with a moderate to high intensity of mental health need. The SCDBHS FSP and TCORE Contract Monitor is responsible for triaging eligible clients between the variety of FSP and TCORE program available. Clients are placed based on a variety of factors, including their specific demographic characteristics (e.g., primary language), as well as clinical recommendations from the mental health programs they are already worked with.

  o *Information about FSPs/TCORE was collected via project-specific surveys and qualitative interviews with SCDBHS.*

- **Housing Resources – Built Units:** Each FSP or TCORE program has access to different housing resources. "Housing Resources - Built Units" refers to housing projects that accept clients through specific FSP programs or providers. For example, Courtyards at Orange Grove accepts clients through the Telecare ARISE FSP.

  o *Information about Housing Resources – Built Units was collected via project-specific surveys and qualitative interviews with SCDBHS.*

- **Housing Resources – Flexible Housing Dollars:** All Mental Health Programs, including TCORE and FSPs, have access to flexible housing dollars to assist eligible clients receiving treatment for their mental health with housing. The level of housing funding available varies by Mental Health Provider and the acuity of the client's mental health need.

  o *Information about Housing Resources – Flexible Housing Dollars was collected via project-specific surveys and qualitative interviews with SCDBHS.*

Limitations to the Visual Map

The SCDBHS Housing Resources Visual Map was a result of a qualitative research process. Collecting information about informal and formal referral processes can be difficult in the context of community-wide surveys with non-standardized definitions (e.g., referral). Some agencies may have interpreted key definitions in different ways or otherwise misreported an individual project's referral partnerships. As much as possible, Homebase contacted providers about any potential corrections; however, there may still be cases where information on the map differs slightly from current operations.

Using the Map

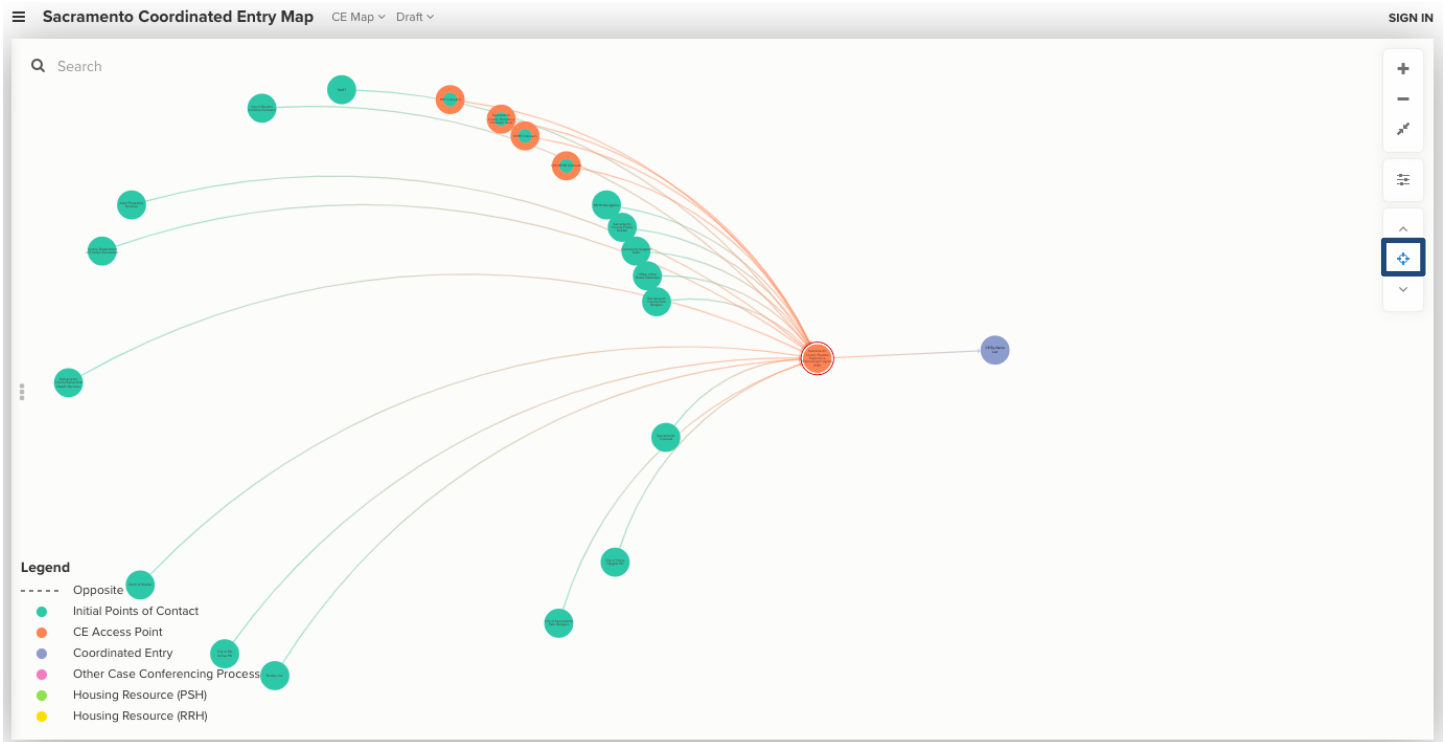1. Go to https://tinyurl.com/y3tuzjcy
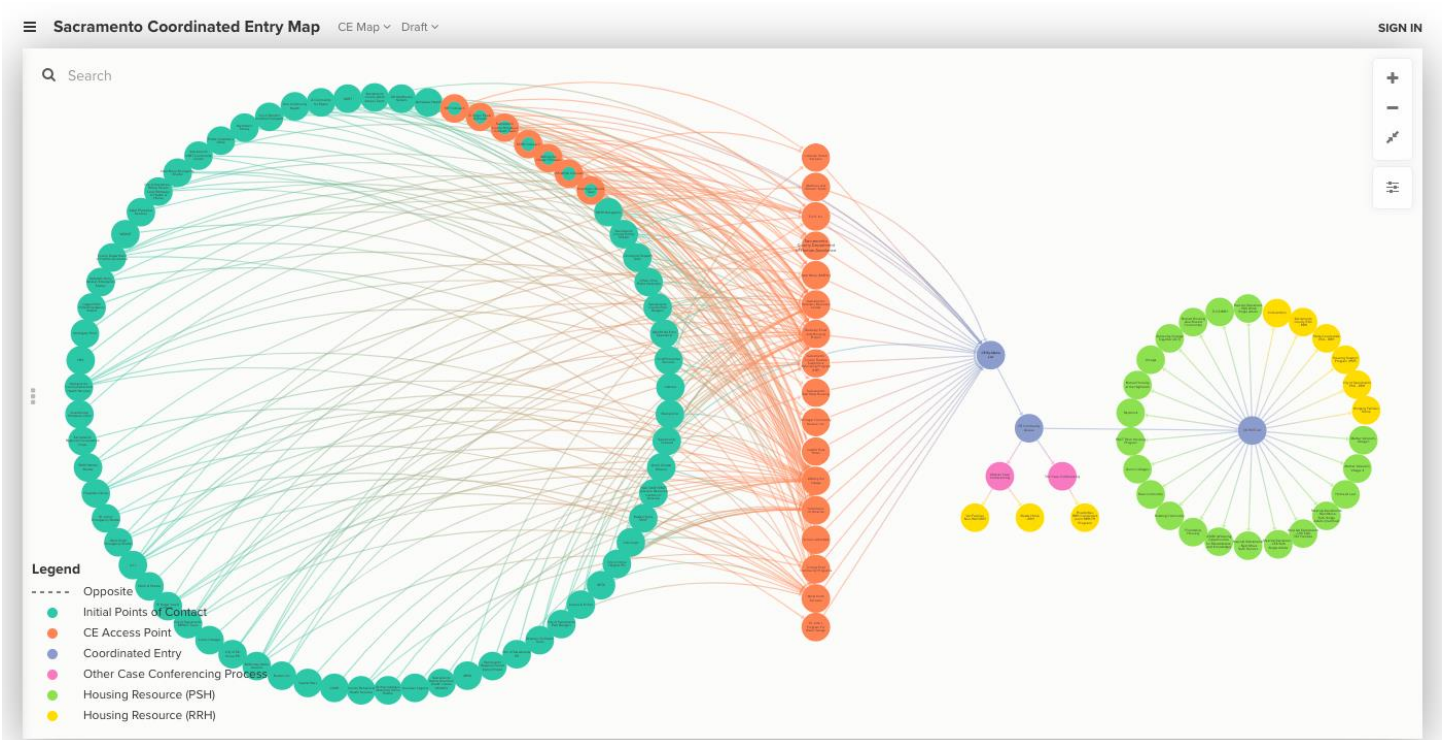
1. Use the +/- buttons in the top right to zoom in/out. Us the ✦ button to re-center the map.
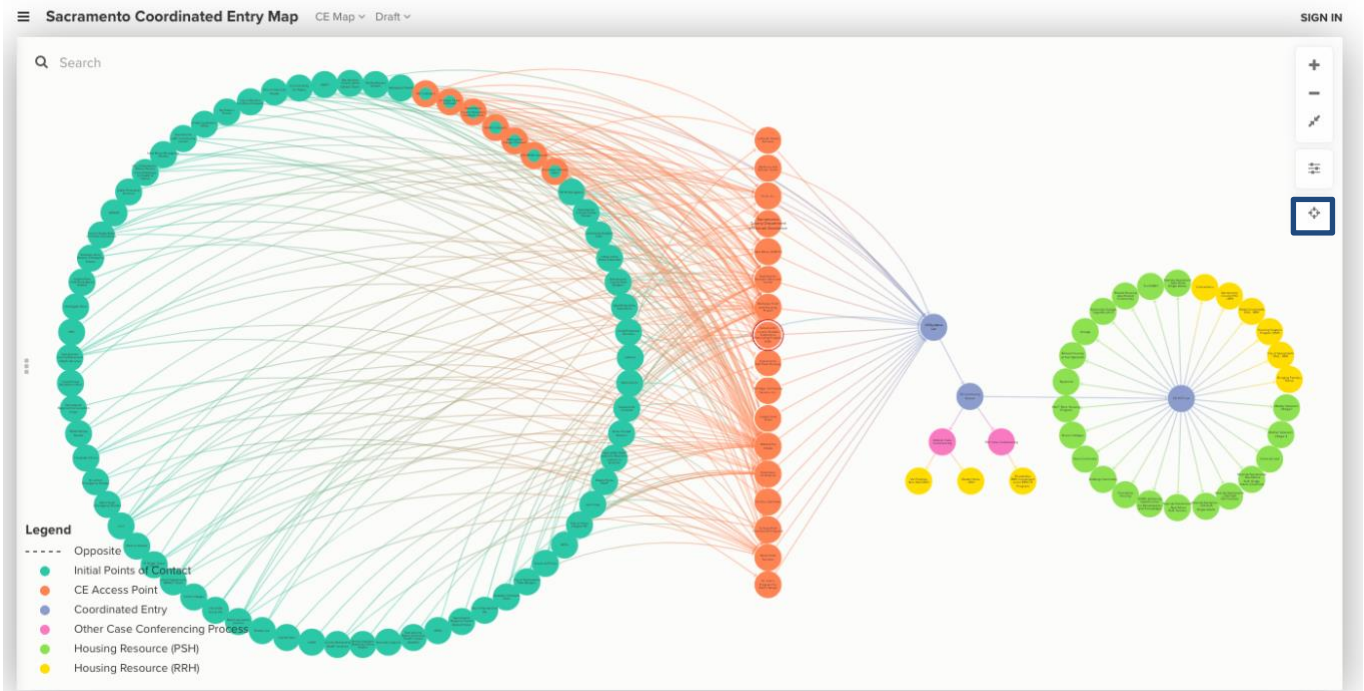

2. Use the search feature in the top right corner to go to a specific agency/program.

3. Click on any bubble and then the ✦ button to focus specifically on that bubble and its various connections (both incoming and outgoing).

4. Click the ✛ button again to toggle back to the original map.

System Performance Committee

August 27th, 2020

Agenda

I.   Welcome & Introductions
II. New Business
  A. CESH Work Products
    1. Final Presentation & Analysis: Access Matrix
    2. Preview: Sacramento County Department of Behavioral Health Services, Mental Health Division, Housing Resources Visual Map
    3. Update: Other Visual Maps
  B. Breakout Groups: Gaps Analysis
  C. HIC Presentation
  D. HUD's Stella Tool
  E.   Special Recruitment for SPC
III. Review agenda items for September meeting
IV.   Announcements

Welcome & Introductions

Noel Kammermann, Chair & Lisa Bates, Co-Chair

CESH Work Products

Project Access Matrix

Maddie Nation and Colin Sorensen, Homebase

Overview of Project Access Matrix

- Formerly the "Eligibility Matrix"

- The tool is available here.

- We recommend re-visiting the tool and re-downloading each time you plan to review.

Access Matrix Methodology & Limitations

- Dependent on project-level surveys

  - 80% response rate across all projects

- Analysis primarily focuses on number of projects as opposed to capacity

Access Matrix Key Takeaways: Housing Access

- Access to the system of care is decentralized and there are many unique paths to accessing the variety of homeless-dedicated housing across Sacramento.

- While 79% of all projects except PSH are connecting their clients to the VI-SPDAT, only 54% of housing resources fill at least some vacancies through Coordinated Entry.

  - 29% of total housing projects (22 out of 76) fill their vacancies entirely through Coordinated Entry.

  - Several of Sacramento's largest housing programs (e.g., Housing Support Program, Flexible Housing Pool, VASH Vouchers, Mercy Housing projects) are largely disconnected from the Coordinated Entry System.

- Since many programs and funders require unique paths to access and processes for filling vacancies, it is difficult to see who is falling through the cracks in the current system of care.

Access Matrix Key Takeaways: Housing Flow

- Most emergency shelters and transitional housing projects are connecting clients to additional housing resources, reflecting a community-wide commitment to re-housing at this level.

- There are few consistent patterns in how projects make referrals to housing resources, indicating a lack of coordination across the system and even within agencies with multiple housing projects.

- Several housing projects reported referring their clients to housing resources that require a specific path to access

  - For example, a rapid re-housing project reported making housing referrals to SSHH –Transitional Housing, but these projects only accept referrals from local HARTs.

Access Matrix Key Takeaways: Homelessness Prevention & Street Outreach

- Overall, the homelessness prevention system is largely decentralized and focused on serving TAY and veterans.

  - There are three small homelessness prevention programs connected to the Coordinated Entry System.

- Street outreach teams in Sacramento are operating on different models, including variations in the number of outreach workers, target population, caseload numbers, and geographic boundaries.

- Street outreach teams are well connected to the Coordinated Entry System and other housing resources across Sacramento.

Questions? Feedback?

Sacramento County Department of Behavioral Health, Mental Health Division, Housing Resources Visual Map

Maddie Nation and Colin Sorensen, Homebase

Preview: SCDBHS Housing Resources Visual Map

- SCDBHS Housing Resources Visual Map: Methodology & Kumu Guide

    - Developed using project-specific survey responses, qualitative interviews with SCDBHS staff, and resources uncovered during the environmental scan

- Today's Goals: preview the visual map, collect feedback and questions

Questions? Feedback?

Next Steps for the Behavioral Health Visual Map

- We will send out the Behavioral Health visual map link and user guide with the meeting minutes and summary document.

    - Please send us any questions or feedback by Wednesday, September 2nd.

- We will bring back an analysis of this visual map to the September SPC meeting.
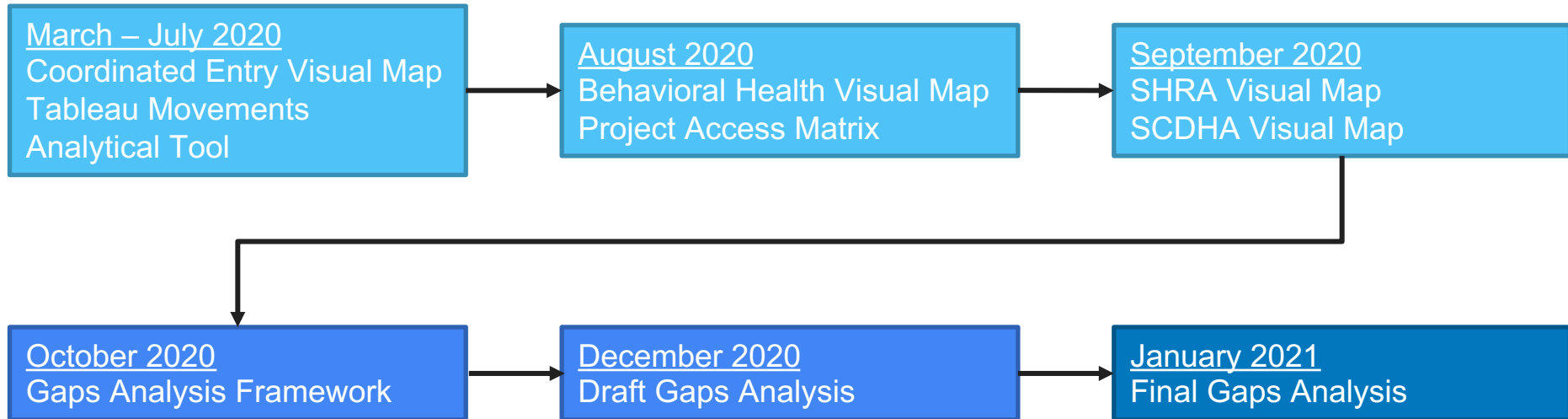
Update on Other Visual Maps

- Originally, our team had proposed 4 visual maps:
    1. Coordinated Entry
    2. Behavioral Health
    3. County-funded PSH, RRH, and TH
    4. County- and City of Sacramento-funded Emergency Shelter

- In place of visual maps #3 and #4 listed above, Homebase recommends focusing the final two visual maps on: Sacramento County Department of Human Assistance and SHRA

Breakout Groups: Gaps Analysis

Maddie Nation and Colin Sorensen, Homebase

Systems Mapping & Gaps Analysis Work Timeline

March – July 2020
Coordinated Entry Visual Map
Tableau Movements
Analytical Tool

→

August 2020
Behavioral Health Visual Map
Project Access Matrix

→

September 2020
SHRA Visual Map
SCDHA Visual Map

October 2020
Gaps Analysis Framework

→

December 2020
Draft Gaps Analysis

→

January 2021
Final Gaps Analysis

Breakout Room Instructions

Turn on video and/or unmute and getting ready to say hello!

Discussion questions will be available in the **chat box**.

Breakout rooms will meet for **15 minutes**, then we will come back together.

Each room will have **one facilitator from Sacramento Steps Forward**, they will be taking notes on the conversations that will be shared with the group after the meeting.

Questions for Discussion

1. Please introduce yourself!

2. Reflecting on what you have learned from the system mapping so far and the goals of this committee, what question(s) does the Gaps Analysis **need** to answer for the work of the SPC to move forward?

3. If you have time: In the system mapping work products and findings, name one thing you have seen that particularly concerns you and one thing that mystifies you that you want to understand more about.

HIC Presentation

Scott Clark, Sacramento Steps Forward

Overview of HUD's Stella Tool

Colin Sorensen, Homebase

What is Stella?

- Strategy/analysis tool from HUD
- Two Stellas:
    - Stella-P (released)
    - Stella-M (upcoming)

What does it show?

- Length of time people remain homeless,
- Exits to permanent destinations,
- Returns to homelessness,
- Demographics/characteristics of households

Pros/Cons

Pros
- Quickly summarizes data
- Several datapoints
- Allows for easy analysis and review of trends
- No labor required after LSA is uploaded

Cons
- Not project level
- Missing street outreach, prevention, Coordinated Entry
- Cannot easily drill down beyond preset filters
- Only updated annually

Special Recruitment for the SPC

Michele Watts, Sacramento Steps Forward

September SPC Agenda Items

A. Final Presentation & Analysis:

    1. SCDBHS Visual Map

    2. SCDHA Visual Map

    3. SHRA Visual Map

B. Racial Equity Preliminary Data

For more information…

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Homebase Sacramento Team, sacramento@homebaseccc.org