

Ending Homelessness. Starting Fresh.

Combined Coordinated Entry/Evaluation Committee Meeting

Thursday, September 10th, 2:30-4 p.m.

Zoom

https://us02web.zoom.us/j/85139063012

Agenda Item	Presenter	Time	Item Type
1. Welcome and Introductions	Co-Chair: John	2:35 PM (5 min)	Informational
 Formalization of CE membership and orientation 	Michele Watts	2:40 PM (30 mins)	Informational
 CE Data / Staffing / Responsiblity Presentation 	Peter Bell	3:10 PM (10 mins)	Informational
 HB Update on lived-experience interviews 	Homebase	3:20 PM (5 mins)	Presentation and Discussion
5. CE Access Points and RFP draft preview	Homebase / SSF	3:25 PM (35 mins)	Presentation and Discussion
6. Adjourn	Co-Chair: John	4:00 PM	



Ending Homelessness. Starting Fresh.

TO: CoC Board Members

FROM: John Foley, Coordinated Entry System (CES) Committee Chair

DATE: September 9, 2020

SUBJECT: CoC CES Committee Slate- ACTION (Consent Calendar)

Background

The CoC Board has previously had two committees focused on the Coordinated Entry System (CES), the CES Committee and the CES Evaluation Committee. The former was formed in 2013, prior to the launch of the CES standard assessment (VI-SPDAT) in 2015 and has continued to meet regularly over the years. The latter was formed in 2018 and was charged with the evaluation responsibilities outlined by HUD in the CES Compliance Checklist. In addition to somewhat differing scopes, the key difference between these committees is their membership structure: the CES Committee membership structure is informal, with no appointed members, while the CES Evaluation Committee members were formally appointed by the CoC Board in 2018. The two committee have been meeting jointly since 2019, led by the CoC Board-approved Chair, John Foley.

CES Committee Purpose and Scope

The Coordinated Entry System Committee oversees the design and implementation of the local coordinated entry system (CES) and evaluates its functioning and impact on improving access and connection to services to resolve homelessness. Responsibilities include:

- In consultation with ESG jurisdictions and CoC recipients, establishing policies and procedures, including specific policies to guide operation for persons fleeing domestic violence, to ensure HUD requirements and local goals are met;

- Developing performance metrics and evaluative tools;

- Regularly seeking feedback from providers, consumers, and others; and

- Reporting regularly to Sacramento CoC Board and broader CoC community on access, resources, and functioning.

Member Roles and Responsibilities

The role of committee members is to represent their constituencies and the broader CoC community. The commitment to this committee is ongoing, with the expectation that members will serve an initial two-year term which can be renewed. There are no term limits on CoC Board committees. The CES Committee meets monthly, on the second Thursday afternoon of the month and meetings are currently held via zoom. Member responsibilities include reviewing materials prior to meetings, attending meetings, advising staff in advance if a meeting will be missed, and following up on any additional commitments the member makes over the course of the committee's work.

Recruitment Timeline

The committee recruitment and slate development timeline is detailed below.

CoC CES Committee Recruitment Timeline					
Activity	Date(s)				
Recruitment Announcement at CoC Board	Wed., Aug. 12				
Recruitment Announcement at CES Committee	Thurs., Aug. 13				
Community Recruitment Announcement- Email	Mon., Aug. 24				
Listserv & SSF Website Posting					
Application Period	Mon., Aug. 24 – Mon.,				
	Aug. 31				
Application Deadline	Mon., Aug. 31				
CES Chair & CoC Executive Committee	Tues., Sept. 1 – Thurs.,				
Finalize Slate	Sept. 3				
CoC Board Approval of Slate	Wed., Sept. 9				

Thirteen applications were submitted by the August 31, 2020 deadline and a fourteenth applicant was added to the slate based on a subsequent recommendation from the committee chair. Only one of the applicants is not being recommended for appointment now, based on her being entirely new to CoC and committee engagement and having already been appointed to another committee recently (System Performance Committee Point-in-Time Count Subcommittee appointment in July 2020). This applicant will be invited to participate with the CES Committee as a guest and she may be recommended for appointment to this committee in the future pending her engagement as a participating member on the PIT Subcommittee.

Name	Agency	CES	Areas of
		participation	Representation
Desirae Sterner	Hope Cooperative	provider	PSH, mental
			health
Erica Plumb	Mercy Housing	provider	PSH
Kelsey Endo	Cottage Housing	provider	PSH
Paula Kelly	Sacramento Self Help	provider	PSH
	Housing		
Kate Hutchinson	Lutheran Social Services	provider	PSH, youth
Monica Roca-	Sacramento County	partner	mental health
Wyatt	Behavioral Health		
Peter Muse	Sacramento Veterans	partner	veterans
	Resource Center		
Rose Aghaowa	Wellness & Recovery North	partner	mental health
Phillip Scott Reed	VA	partner	veterans
Julie Field	Sacramento County DHA	partner	DHA
Maggie Marshall	Kaiser Permanente	partner	healthcare
Derrick Bane	Turning Point	no	PSH, mental
			health
Tina Glover	SACOG	no	SACOG

Proposed CES Committee Slate

Additional Recruitment

Targeted recruitment will be conducted to round out this slate with the following areas of representation:

- Lived Experience
- CoC Board Member
- City of Sacramento
- SHRA
- Business Community
- 211

CoC Board Action Requested

Approve the recommended slate for the CoC Board Coordinated Entry System Performance Committee as presented.

Coordinated Entry System Committee Members

Chair: John Foley, CoC Board Member & Sacramento Self Help Housing CEO

Appointed September 2020

··· ·		CES			
Name	Agency	participation	Areas of Representation		
Desirae Stermer	Hope Cooperative	provider	PSH, mental health		
Erica Plumb	Mercy Housing	provider	PSH		
Kelsey Endo	Cottage Housing	provider	PSH		
Paula Kelly	Sacramento Self Help Housing	provider	PSH		
Kate Hutchinson	Lutheran Social Services	provider	PSH, youth		
Monica Roca-Wyatt	Sacramento County Behavioral Health	partner	mental health		
Peter Muse	Sacramento Veterans Resource Center	partner	veterans		
Rose Aghaowa	Wellness & Recovery North	partner	mental health		
Phillip Scott Reed	VA	partner	veterans		
Julie Field	Sacramento County DHA	partner	DHA		
Maggie Marshall	Kaiser Permanente	partner	healthcare		
Derrick Bane	Turning Point	-	PSH, mental health		
Tina Glover	SACOG	-	SACOG		
Recruitment Target	TBD	provider	SHRA		
Recruitment Target	TBD	partner	City of Sacramento		
Recruitment Target	TBD	partner	Business Community		
Recruitment Target	TBD	consumer	Person w/Lived Experience		

Coordinated Entry: Roles and Responsibilities

September 10th, 2020 Coordinated Entry Committee



Roles and Responsibilities

CES Manager

- •Design and develop ongoing system improvements.
- •Manage CE team and oversee ongoing referral processes.
- •Draft and administer policy relevant to Coordinated Entry and it's processes.

CE Referral Specialist

- •Manage ongoing referral processes.
- •Provide technical assistance for providers.
- Actively manage community Priority Lists by collaborating with a variety of stakeholders
 Assist with community Case Conferencing.

CE Data Quality Specialist

•Generate the Priority Lists.

- •Manage CE data projects and lead clean-up efforts
- •Support the SSF data team
- •Develop data tools for project setups and ongoing project management.
- •CE Research and evaluation
- •TA for CE data elements

Roles and Responsibilities cont.

Referral Desk Specialist (NEW)

- Manages requests for information, public phone calls, and the immediate bed-reservations system (COVID response).
- Assists with various other administrative tasks and responsibilities.

Shelter Referral Specialist (NEW)

 Same as Referral Specialist but focuses on shelter & emergency response systems Outreach and Engagement Specialist (**NEW-**ish)

- Coordinated Entry system navigators
- Outreach to most vulnerable clients
- Assist clients with "doc ready" requirements
- Provide transportation and foundation services

Referral Data Management

Program Opening (referral request)-> Referral -> Enrollment or Denial

- Time Management
- Responsiveness
- Data Quality

CE Evaluation: Initial Findings

Data Collection Process

- October January: Qualitative interviews with SSF Staff and CoC Board
- February September: Develop systems mapping work products, including Coordinated Entry Visual Map
- August September: Qualitative interviews with providers and lived experience focus groups

Themes from Qualitative Interviews

X

Access

Lack of transparency around existing CE Access Points

Need for a drop-in CE Access Point

Assessment

VI-SPDAT is an imperfect measure of vulnerability Administration of the VI-SPDAT varies based on the assessor

Prioritization

The community does not know the CE prioritization scheme

Referrals

Long wait times between agencies reporting bed vacancies and referrals

Clients are not document ready at the time of referral

Case managers would like notification when a client has been successfully housed via CE

Themes from Qualitative Interviews (ctd.)

Governance

Ongoing frustration with lack of implementation of CE Committee decisions

Expanding the Scope of CE

Desire to have conversation about better integrating crisis response resources into CE

By-Name-List is too big to be effective given number of CEconnected housing resources

Staffing CE needs additional staff capacity

Lived Experience Focus Groups

- Variety of sources referring to homeless services (PD, 211, foster care, therapist, friend)
- Not familiar with coordinated entry
- Uncomfortable talking about disabilities sometimes
- High staff turn-over can make it difficult to build trust, get connected to services, and maintain engagement
- "They'll help you if they see that you want help"
- Case managers are supportive in securing eligibility documentation
- Generally less than a month between referral and move-in

Timeline

August 2020-December 2020

- **August:** Finish reviewing HUD requirements and gaps, identify method for engaging individuals with lived experience, identify additional stakeholders to interview, begin coordinating engagement, identify metrics of interest for CE Evaluation
- **September:** Engage individuals with lived experience for feedback, interview stakeholders not previously interviewed, submit data request to SSF, share draft framework with SSF/CE Committee
- October: Analyze data, summarize results of interviews, begin drafting
- **November:** First draft, gather feedback from CE Committee
- **December:** Final draft and presentation, public-facing version

Access Point Discussion

Coordinated Entry Access Models

	SINGLE POINT OF ACCESS	MULTISITE CENTRALIZED ACCESS	NO WRONG DOOR	ASSESSMENT HOTLINE
Site Location	Centralized	Located at population centers, high-volume providers, and possibly separated by subpopulation	All existing provider locations	Telephone based or Internet
Number of Access Points	1	Variable, based on geography (2 to 4)	Many	1 telephone number or website access through Internet
	Primarily access and assessment; may include triage services, emergency services, or other mainstream services	Primarily access and assessment; may include the services of a co-located provider; may be targeted to one of several subpopulations	Access, at least limited assessment, referrals, and the standard services of each provider	Access to the homeless system, often includes access to mainstream services; limited assessment capability
	Permanent independent access specialists; may be shared staff of a central shelter or other organization		Independently operated by each provider	Local 211 or other designated hotline agency
Hours of Operation	Hours of the central location	Hours of each access site	Hours depend on and vary with each provider	Typically 24-hour operation, 7 days a week
Considerations		Moderate level of control over implementation and compliance for the CoC; the most adaptable model, sometimes called a "hybrid" system	Lowest level of control over implementation and compliance for the CoC; however, still requires standardized forms and coordinated referrals for all	211 is the most popular example; sometimes combined as an initial triage tool with any of the other models; often must build a relationship with an outside provider

Multisite Centralized Access Model: Seattle/King County

- Primarily appointment-based with limited walk-in hours
- Generic access points + veteran- and youth-specific access points
- Services offered: housing problem solving, employment navigation, benefits, basic needs
- Access points are accessible by public transportation and located where additional community resources can be accessed as needed
- Community partners and 211 refer households to access points
- Access points are responsible for assessing entirety of their geographic regions
- Access points are responsible for outreach within their region
- Prioritized households within each BNL (Single Adults, Youth and Young Adults, Families, Veterans) are assigned to a Housing Navigator from an agency that serves the population being referred who handles eligibility documentation

Multisite Centralized Access Model: Southern Nevada

- Outreach teams facilitate and/or deliver health and basic needs services, deliver housing assessments, connect clients to other homeless services, and assist matchers to locate individuals for which housing is ready
- Generic + DV-, youth-, and veteran-specific access points provide walk-in and appointment options for people who need to connect to homeless services
- DV hotline available for assessments as well
- Access points provide safety planning, basic need services, housing problem solving, connection to shelter
- Case conferencing addresses document readiness of all clients, beginning with prioritized households most likely to receive a referral in the near future

Hybrid Model: Santa Clara County

- Multisite centralized access + no wrong door
- Assessments done by generic and subpopulation-specific shelter, drop-in, outreach, and supportive services providers
- Services offered: housing problem solving, physical and behavioral health care, bus passes, benefits enrollment
- One outreach team dedicated to locating households to be imminently referred to PSH to complete eligibility documentation
- For RRH, program receiving referral is responsible for documentation

Access Points

- Currently 40+ Access Points, including hybrid of multi-site centralized access and assessment hotline
- Across 30+ interviews with CoC Board members, community members, provider, and Coordinated Entry staff, stakeholders noted the need for a clearer definition of "Access Point"
- Brainstorming exercise: How should we define what it means to be an access point for Coordinated Entry?

1. What concrete characteristics make an agency an access point for CE?

- 2. When a client shows up at a CE Access Point, what should ideally happen (e.g., triage, connection to other resources, referrals to the BH system)?
- 3. Who should operate the CE Access Point (e.g., SSF, homelessness providers, other non-profits)?
- 4. Who should provide funding to operate the CE Access Point?

To provide additional feedback...

- Homebase: <u>sacramento@homebaseccc.org</u>
- Peter Bell, CES Manager: <u>pbell@sacstepsforward.org</u>

Coordinated Entry Referral-V1

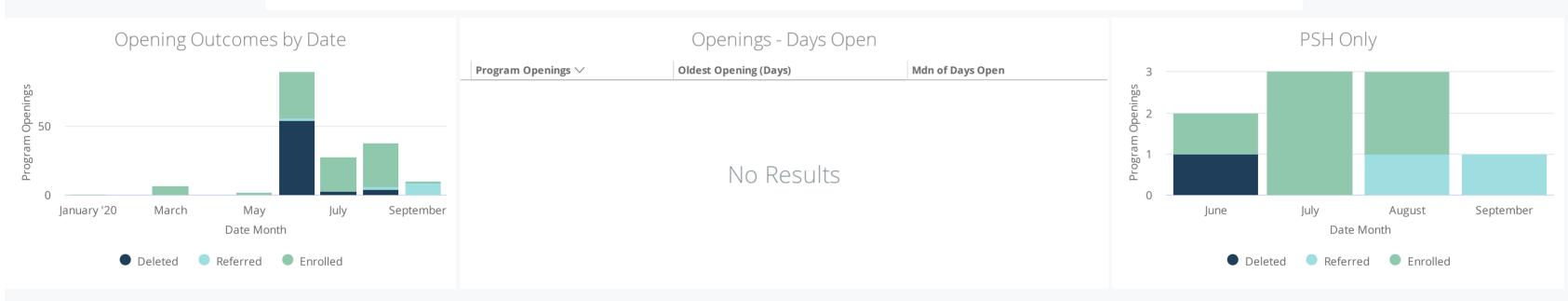
ter is not voa: Mather commun	ity Campus (MCC) Families - HUI	O TH" or "VOA: N	Mather Commu	nity Campus (MC	C) Singles - HUD	TH" or "Capitol P	ark Hotel - ES"	or "Wind Street	Outreach Program	n" or "CalExpo All (
0 Openir	ıgs		20 g Referrals	S		3 ss Referrals	Pro	ogram Refe	36 rrals Made i	in Past 14
			С	urrent Ope	nings					
Agency Name	Name	Da	ys from Opening		-		Program	n Openings ee		
				No Resu						
				: Pending R						
Agency Name	Days Since Reassigned > Name	1 Referrals	2 Referrals	6 Referrals	10 Referrals	14 Referrals	16 Referrals	30 Referrals	31 Referrals	35 Referrals
TLCS, Inc.	TLCS: New Direction FSP - RRH	1	1	Ø	Ø	Ø	Ø	Ø	2	2
Sacramento Self Help Housin	SSHH: Shared Community - P	Ø		3 Ø	Ø	Ø	Ø	Ø	© 2	Ø
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Sacramento Self Help Housin	SSHH: Friendship Housing - H	Ø	2	Ø	Ø	Ø	Ø	Ø	Ø	Ø
SHRA - Shelter Plus Care	SHRA: Shasta Hotel - HUD SR	Ø	Ø	Ø	Ø	1	1	Ø	Ø	Ø
Next Move (SAEHC) - Step Up	LSS SUS: TAY Families - PSH	Ø	Ø	Ø	1	Ø	Ø	Ø	Ø	Ø
Lutheran Social Services	LSS: Connections - HUD RRH	Ø	Ø	1	Ø	Ø	Ø	Ø	Ø	Ø
Volunteers Of America	County ESG RRH - Sacramento	Ø	Ø	Ø	Ø	Ø	Ø	1	Ø	Ø
Totals		1		8	1	1 1		1	1	2 2
			Age:	In-Process I	Referrals					
	Days Since Reassigned				Referrals	311		32	24	
Agency Name	Days Since Reassigned Name		>	In-Process 185 Referrals	Referrals	311 Referrals			24 24 24	
Agency Name Sacramento County Department	Name		>	185	Referrals	Referrals		Re	eferrals	
	Name HSP - RRH	JD CoC PSH	>	185	Referrals				eferrals	1
Sacramento County Department	Name HSP - RRH	JD CoC PSH	>	185 Referrals	Referrals	Referrals1		Re	eferrals	1

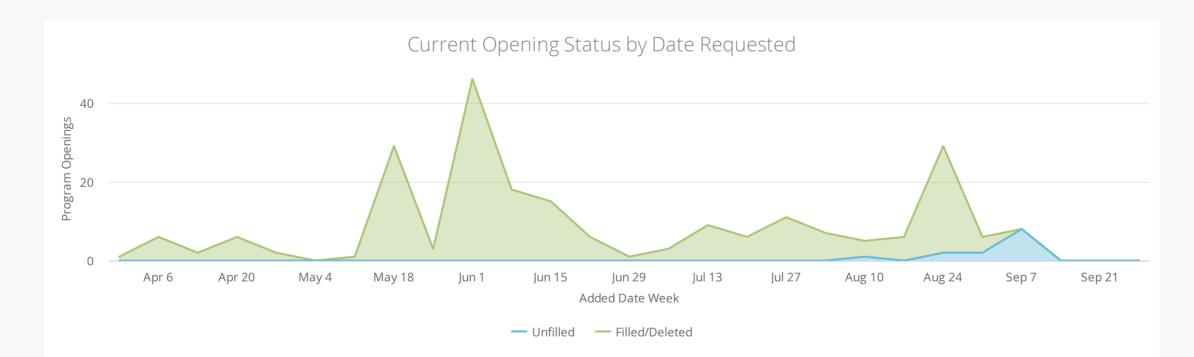
Days from Opening to Referral

Agency Name	Name \vee	Status	Days from opening to referral
1 TLCS, Inc.	TLCS: New Direction FSP - RRH	Pending	-102
2 TLCS, Inc.	TLCS: New Direction FSP - RRH	Pending	0
3 TLCS, Inc.	TLCS: New Direction FSP - RRH	Pending	0
4 TLCS, Inc.	TLCS: New Direction FSP - RRH	Pending	0
5 TLCS, Inc.	TLCS: New Direction FSP - RRH	Pending	0
6 TLCS, Inc.	TLCS: New Direction FSP - RRH	Pending	0
7 Sacramento Self Help Housing (SSHH)	SSHH: Shared Community - PSH	Pending	0
8 Sacramento Self Help Housing (SSHH)	SSHH: Shared Community - PSH	Pending	0
9 Sacramento Self Help Housing (SSHH)	SSHH: Shared Community - PSH	Pending	0
10 Sacramento Self Help Housing (SSHH)	SSHH: New Community - HUD PSH	Pending	0
11 Sacramento Self Help Housing (SSHH)	SSHH: Friendship Housing - HUD PSH	Pending	0
12 Sacramento Self Help Housing (SSHH)	SSHH: Friendship Housing - HUD PSH	Pending	0
13 Sacramento Self Help Housing (SSHH)	SSHH: Friendship Housing - HUD PSH	Pending	-134
14 SHRA - Shelter Plus Care	SHRA: Shasta Hotel - HUD SRA PSH	Pending	74
15 SHRA - Shelter Plus Care	SHRA: Shasta Hotel - HUD SRA PSH	Pending	-1608
16 Volunteers Of America	ReSTART - PSH	Pending - In Process	82
17 Sacramento Veterans Resource Center	Mather Veteran's Village - HUD CoC PSH	Pending - In Process	5
18 Lutheran Social Services	LSS: Connections - HUD RRH	Pending	-46
19 Next Move (SAEHC) - Step Up Sacramento	LSS SUS: TAY Families - PSH	Pending	13
20 Volunteers Of America	County ESG RRH - Sacramento	Pending	0

Unfilled Openings by Program -- Barchart

No Results





	Denied Reason <	Referral time expired	Other	Client refused services	Client did not show up or call	Total
Agency Name	Name	Referrals	Referrals	Referrals	Referrals	Referrals
Sacramento CoC Coordinated Entry	Coordinated Entry	3	Ø	Ø	Ø	3
Sacramento Self Help Housing (SSHH)	SSHH: Friendship Housing - HUD PSH	1	1	Ø	Ø	2
SHRA & First Step Communities - Partnership	Emergency Bridge Housing - Emergency Shelter (ES)	Ø	Ø	Ø	4	
Lutheran Social Services	LSS: Achieving Change Together (ACT) - HUD PSH	Ø	Ø	Ø	2	2
Sacramento Self Help Housing (SSHH)	SSHH: Shared Community - PSH	Ø	Ø	1	Ø	1
Mercy Housing	The Courtyards on Orange Grove (CES- WS) - PSH	Ø	Ø	1	1	2
TLCS & Wind Youth - Possibilities	Possibilities TH Component (Joint RRH/TH Program)	Ø	1	Ø	Ø	1
Cottage Housing, Inc	CH: Quinn Cottages - HUD PSH	Ø	Ø	Ø	1	1
LCS & Wind Youth - Possibilities	Possibilities RRH Component (Joint RRH/TH Program)	Ø	1	Ø	Ø	1



