



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 |
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| 0. Call to Order & Welcome: Noel Kammermann, Chair | | | |
| <i>Meeting called to order at 9:03 AM by Noel Kammermann.</i> | | | |
| I. Welcome | Noel Kammermann | 9:05 AM (5 minutes) | |
| <p><i><u>In attendance:</u> Alexis Bernard, Amani Sawires Rapaski (represented by Joshua Arnold), Angela Marin (represented by Andrew Guerink), Angela Upshaw, Cindy Cavanaugh, Debra Larson, Erin Johnansen, Gina Roberson, John Foley, Mike Jaske, Monica Rocha-Wyatt, Noel Kammermann, Stephan Heisler</i></p> <p><i><u>Absent Members:</u> John Kraintz, Lisa Bates, Sarah O'Daniel</i></p> | | | |
| 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 |
| <p><i><u>Information:</u> 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.</i></p> | | | |
| 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.

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| C. HIC Presentation | Scott Clark, SSF | 10:25 AM (20 minutes) | Informational |
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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.

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| D. Discussion: HUD's Stella Tool | Colin Sorensen, Homebase | 10:45 AM (10 minutes) | Informational |
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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).

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| E. Special Recruitment for SPC | Michele Watts, SSF | 10:55 (5 minutes) | Discussion |
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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

Committee Members' Questions & Feedback

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 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 need 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 need 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 need 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 need to answer for the work of the SPC to move forward?

- Capacity gap 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?