CoC Systems Performance Committee (SPC) Minutes

Thursday, October 22nd, 2020
9:00 AM – 11:00 AM
Zoom (online)

Agenda Item	Presenter	Time	Agenda Item Type
0. Call to Order & Welcome: Lisa Bates, Chair			
Meeting called to order at 9:03 AM by Lisa Bates.			
I. Welcome	Lisa Bates	9:05 AM (5 minutes)	
In attendance: Alexis Bernard, Amani Sawires Rapaski, Angela Upshaw, Cindy Cavanaugh, Erin Johnansen, Gina Roberson, Lisa Bates, Mike Jaske, Monica Rocha-Wyatt, Sarah O'Daniel, Stefan Heisler *Absent Members*: Angela Marin, Debra Larson, John Foley, John Kraintz, Noel Kammermann			
II. New Business			
A. <u>CESH Work Products</u>: Sacramento County Department of Human Assistance Visual Map Analysis & SHRA Visual Map Preview	Maddie Nation and Colin Sorensen, Homebase	9:10 AM (40 minutes)	Discussion
Information: Homebase presented an analysis of the DHA Visual Map (materials available below), as well as preview of the SHRA Visual Map (analysis will be available in November).			
B. CoC Hosted Workshop Preview	Homebase	9:50 AM (65 minutes)	Discussion & Action
Information: SPC members were randomly sorted into breakout rooms to discuss the CoC Hosted Workshop slidedeck and key takeaways from the systems maps. After discussion, the SPC decided to delay the CoC Hosted Workshop and meet in November to further analyze the systems mapping work products.			
C. Update on CoC Board Hosted Workshop on Racial Equity & Next Steps	Scott Clark, SSF	9:50 AM (5 minutes)	Informational

Information: Materials available in the _October Meeting Packet_			
D. Meetings in November and December	Lisa Bates, Chair	9:55 AM (5 minutes)	Informational
Information: The SPC will be meeting on November 12th from 9-11am. The December meeting time is still in the process of being identified.			
III. Review of new agenda items for next meeting			
IV. Announcements			
Information: N/A			
V. Adjourn: Lisa Bates, Chair			
Meeting adjourned at 11:03 AM by Lisa Bates.			

October Discussion and Feedback on Systems Mapping Work Products

Committee Members' Questions & Feedback

During the October meeting of the Systems Performance Committee (SPC), Homebase presented: (1) Final Presentation & Analysis of the Department of Human Assistance Visual Map Analysis, and (2) Preview of the CoC Hosted Workshop Slidedeck. 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.

DHA Visual Map Analysis Feedback

- Question from Erin Johansen (TLCS/Hope Cooperative): Is there connectivity between HMIS and the County's Shine system?
    - SSF Response: At this time, no, but we have had conversations with folks at DHA before about better integrating the systems.
    - Homebase Response: There is a good amount of duplicate data entry into HMIS and Shine currently occurring.
- Question from Cindy Cavanaugh (Sacramento County): Will you be covering the Children's Division and Adult Protective Services?
    - Homebase Response: Some projects related to the Child's Division are reflected in the DHA and SHRA Visual Maps, including the Bringing Families Home and Family Unification Program projects. Adult Protective Service's relationships with the Flexible Housing Pool (FHP) HEAP project and the Re-Housing Shelter Network are documented on the DHA Visual Map, and information about VOA's Senior Safehouse is captured in the Project Access Matrix.

CoC Hosted Workshop Slidedeck Feedback

- Slide 17
    - Add information about the different homeless definitions being used by the different systems
    - Clarify the definitions of "voucher" vs. "housing assistance" vs. "built units"
- Slide 18
    - Add further clarification about what it means when two systems overlap
    - Identify if there are ways to find more specific data about turnover rates for Sacramento (vs. using the NAEH national averages)
    - Behavioral Health capacity numbers seem particularly low

- Slide 19
  - There are dedicated elderly beds outside of CE, including DHA
- Slide 30
  - Can we draw conclusions about the system using only HMIS data? Title should not say "four systems"
- Slide 37
  - "Movements" and "people" are not interchangeable
  - Consider including information about non-subsidized exit destinations like market rate housing
  - Consider including information about folks that exit to a permanent destination and folks that exit back to homelessness
  - This this data does not seem accurate
- Key Takeaways
  - Consider "possible opportunities to allocate" instead of just "allocate"
  - Consider including language about "new" and "flexible" to fund allocation goal

Breakout Rooms Discussion Summaries: CoC Hosted Workshop Slidedeck

Overview

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

- What findings from this systems mapping work have surprised you the most?
- What findings from this systems mapping work have been the most impactful for you and your work?
- What findings from this systems mapping work do you have lingering questions about or would like further clarification on?

Discussion Notes

Group 1: Maddie

- Systems mapping findings are not surprising, as much as affirming of my experience doing this work
    - The number of ways that folks get into housing and how many of these ways are so specific match what I have experience
- The bottleneck with emergency shelter and street outreach resources was surprising
    - I think this happens because there are not enough housing resources.
    - There are not enough housing resources, especially folks that need a higher level of care like PSH or deeply affordable housing.
- Some of this data may get folks to feel defensive because the conclusions aren't always going to be positive, but we need to be transparent and let the data speak for itself.
    - It's especially important that we are transparent so that the experience of individuals experiencing homelessness can be improved.
- Some of the systems mapping work products do not accurately depict the complexity of eligibility (e.g., to participate in the Adolfo Transitional Housing for Former Foster Youth program, a youth has to be ILP eligible, which eliminates this resources for many homeless youth.

Group 2: Bridget

- Feedback on the Key Takeaways

- We need a better heading-- which of the 3 topics each is addressing.
- For Key Takeaway #1, it is not clear that the system is under resourced. I am not sure that has been a finding.
- For Key Takeaway #2, the problem is that people don't know where to go, not the specific Access Points themselves. The Visual Maps show why people get confused.
- For Key Takeaway #3, Homebase leaned too hard on the word "may" because we do not know this yet.
    - We aren't good at re-housing people at the systems level. People do not have the resources to afford it. We currently have a vacancy rate, so this key takeaway is not helpful.
    - I disagree, I think that there is a lack of housing. We need to look at the needs of folks experiencing homelessness and match housing. We see chronically homeless folks being pushed into RRH/market rate instead of the PSH they need.
    - We have millions in resources, we just have programs that aren't working well. We need to talk about what we need to stop – we can't just keep saying "we don't have enough." I don't disagree that PSH is the gold standard, but we won't have more. Rapid re-housing is re-housing assistance and some individuals will need deeper assistance
    - I think 12-15% of PSH residents exit to the street – permanent supportive housing isn't enough. We need step down housing options with lighter levels of services/rental support.
    - We need to talk about specific housing types without talking about services implicitly or explicitly provided. Maybe case management is the under-resourced component.
    - We don't even know what case management is at this point. Maybe the up-coming written standards will give us more clarity

- **What are your key takeaways?**
    - We have a lot of resources out there. I was surprised.
    - Existing resources are really uncoordinated.
        - I disagree, there are distinct populations that know where to go and other parallel systems helping direct people to resources. We are also doing cross system coordination intentionally. Is that an uncoordinated or a complicated world?
    - We have an extremely complex system. Maybe we don't need to try to understand that because it will change anyway. We need to try to work with the complexity, not simplify it.

- We need ongoing data to understand systems and more intentional collaboration systems.
    - For example, the COVID-19 structure or the Funders Collaborative.
- Advocating for simplicity for the government.
- This work can be helpful for identifying opportunities.
- There's incomplete assessment and eligibility determinations that are too narrowly program focused that should be done at higher level scale taking into account knowledge of other programs instead of someone walking in some door (which they naively do and are assessed and you don't fit). We need assessment that connects to this over there.
    - This isn't happening right now. We could probably make referrals happen better.
- How can we help people on the ground level move better, equipping each door with a great resource list, multiple ways to get to other systems?
    - People need to know the map to be able to connect their clients.

- **Do you need more time like this?**
    - This conversation is what I've been waiting for. There are smart people on this team, that need time to digest more.
    - We need conclusions from this committee before we share with CoC.
    - This has been like a firehouse of information.

Sacramento County Department of Human Assistance (DHA) 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 Human Assistance (DHA) Homebase and SSF have created a DHA Housing Resources Visual Map based on information collected through an environmental scan, qualitative interviews and over 130 project-specific surveys. The DHA 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.

- **Referral Source:** Eligible agencies or non-profit locations that can provide a referral into the housing or shelter program <u>or</u> entities involved in the initial triage of individuals seeking assistance for the first time.
    - *Information about the Referral Sources was collected via qualitative interview with DHA staff and project-specific survey responses.*

- **Data Entry/Eligibility Screening:** Each client accessing DHA housing or shelter resources will be screened for eligibility. In most cases, clients will also be entered into a database, either Shine or HMIS depending on the project.
    - *Information about the Data Entry/Eligibility Screening process was collected via qualitative interview with DHA staff and project-specific survey responses.*

- **Prioritization:** Except for three shelter programs, each DHA housing or shelter program uses a different prioritization schemes or case conferencing processes to define which individuals or households will fill new vacancies. Several housing or shelter programs also maintain a program-specific waitlist.
    - *Information about the Prioritization process was collected via qualitative interview with DHA staff, environmental scan documents, and project-specific survey responses.*

- **ICMS or PRTS Providers:** Clients prioritized for DHA's permanent housing resources receive Intensive Case Management Services (ICMS) and Property & Related Tenant Services (PRTS). ICMS and PRTS are provided by several different contracted providers.
    - *Information about ICMS and PRTS Providers was collected via qualitative interviews with DHA staff and project-specific survey responses.*

- **Housing Resource:** The DHA system of care connects households to several housing resources, including transitional housing, rapid re-housing, and permanent supportive housing.

o *Information about the Housing or Shelter Resources was collected from project-specific surveys, qualitative interviews with DHA staff, and environmental scan resources.*

- **Shelter Resource:** The DHA system of care connects households to several shelter resources, including scattered site emergency shelter, congregate emergency shelter, interim housing.
  - o *Information about the Housing or Shelter Resources was collected from project-specific surveys, qualitative interviews with DHA staff, and environmental scan resources.*

- **Case Management:** Clients connected to housing or shelter through the Flexible Housing Pool are also connected to case management resources that are provided by an external agency.
  - o *Information about Case Management was collected from project-specific surveys, qualitative interviews with DHA staff, and environmental scan resources.*

Limitations to the Visual Map

The DHA 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.
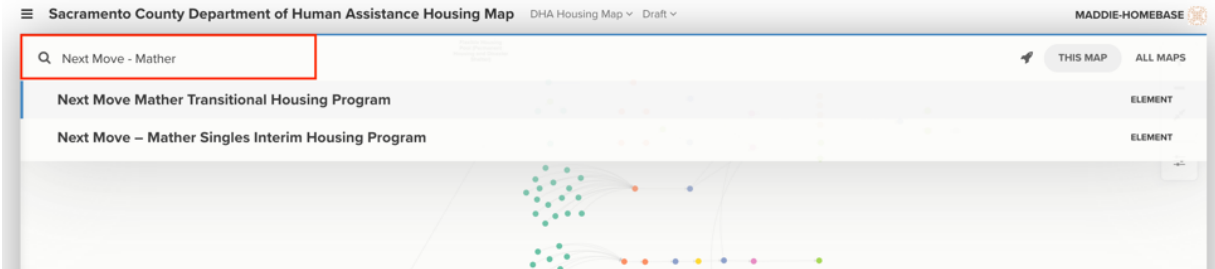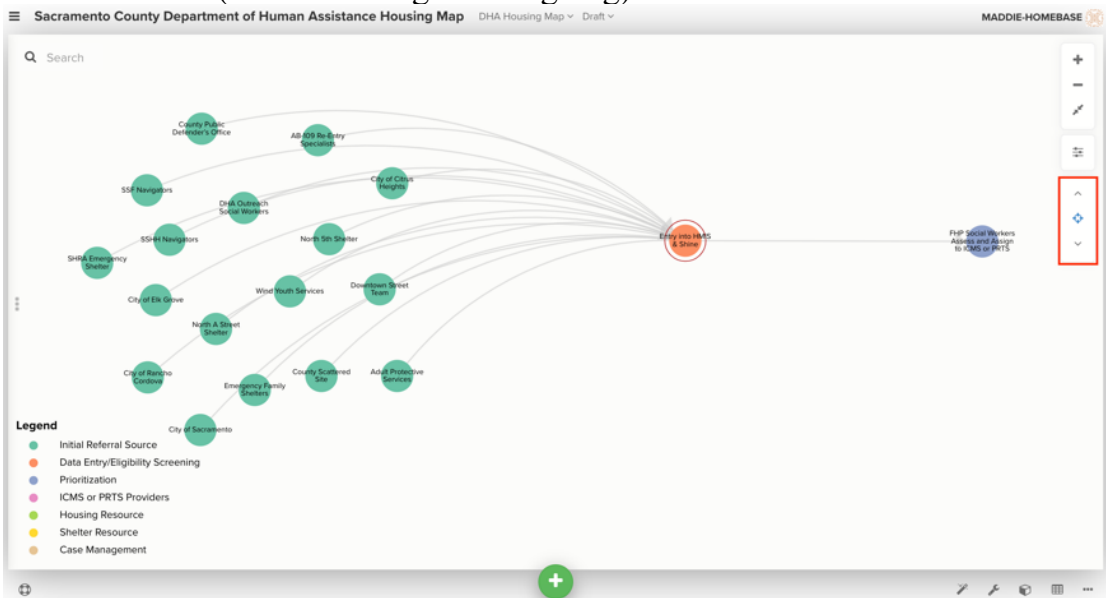
Using the Map

1. Go to https://tinyurl.com/y5fnzxpz
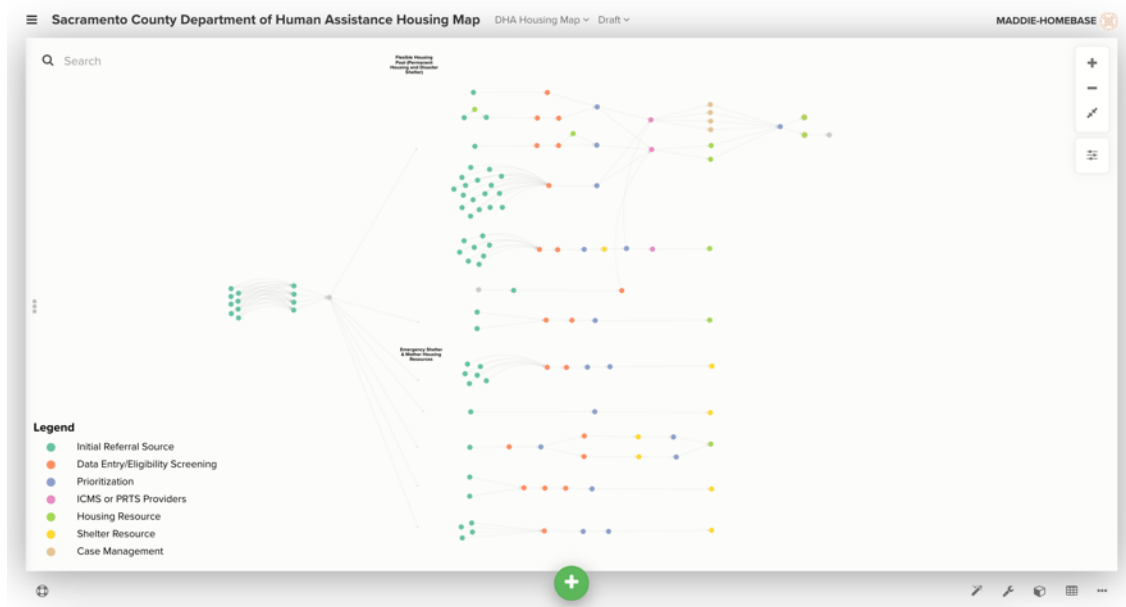
2. Use the +/- buttons in the top right to zoom in/out. Us the ✈ button to re-center the map.
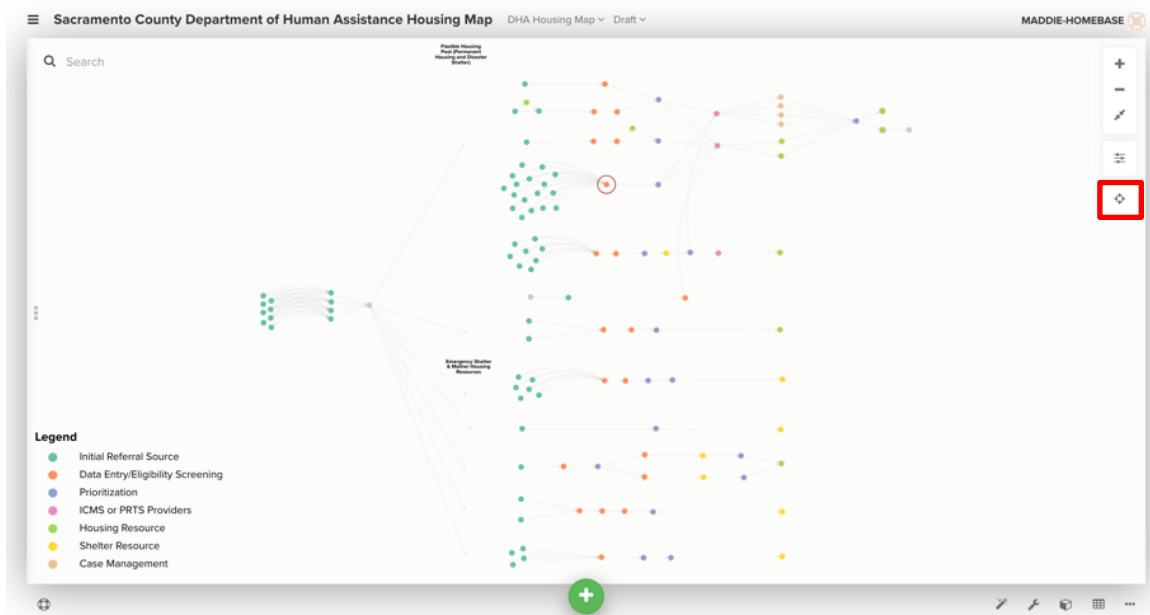
3. Use the search feature in the top right corner to go to a specific agency/program.

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

5. Click the ✥ button again to toggle back to the original map.

Sacramento County Department of Human Assistance (DHA) Housing and Shelter Resources Visual Map Analysis[1]

Overview

Using a variety of data collection methods, the System Performance Committee (SPC) has developed a [Visual Map](#) depicting the housing resources connected to the Sacramento County Department of Human Assistance (DHA).[2] In keeping with the priorities identified by the SPC, the following analysis focuses on access, referral processes, and connections to other systems of care.

Limitations

The DHA 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.

Key Takeaways

- Overall, the path to access to housing and shelter resources in the DHA system is variable depending on the specific program and funding stream.
  - The DHA Homeless Services Division and DHA Bureaus work to triage clients seeking assistance to open resources that fit their needs.
- Currently, the DHA system does not use a unified assessment or prioritization process for their housing or shelter resources.
- The structure of DHA's Flexible Housing Pool pairs housing and case management services in a unique and highly adaptable way. This structure allows new DHA programs within the Flexible Housing Pool to scale up quickly, as indicated by this system's role in the COVID-19 re-housing response.
- The DHA system connects with other homelessness systems of care through shared referral sources (CE, SCDBHS[3], SHRA) and intentional referral processes connecting clients needing a higher level of care to other systems of care (SCDBHS, CE).

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[1] Updated on October 23rd, 2020.

[2] For more information about the data collection process, please see the [Sacramento County Department of Human Assistance (DHA) Housing Resources Visual Map Methodology & Kumu Guide](#).

[3] Sacramento County Department of Behavioral Health Services, Mental Health Division (SCDBHS)

Access

The path to access for DHA housing and shelter resources is variable and dependent on the specific project. The access process for DHA resources can be broadly grouped into two categories: (1) resources open to individuals being triaged ("open to triage"), and (2) resources typically closed to individuals being triaged ("closed to triage").

- There are two DHA teams that can triage individuals and households to open DHA resources: the DHA Homeless Services Division and the DHA Bureaus.[4]
  - Individuals experiencing homelessness may be connected to triage after a referral from local law enforcement, outreach teams, other County departments, or services providers, although the DHA Bureaus offer a drop-in location or phone line open to self-referrals.
  - The DHA Homeless Services Division includes the DHA Planning Team, HSP Social Workers, and DHA Homeless Outreach Team.
- Projects considered closed to triage may be opened in exceptional circumstances.

	# of Projects	Project Names
Open to Triage	8	CalWORKs Housing Support Program (HSP) RRH Program, CalWORKs HSP Flexible Housing Pool, CalWORKs Family Stabilization Program (FSP), North A Street Shelter, VOA Bannon Street Emergency Shelter, Next Move County Emergency Family Shelter, Adolfo Housing Services for Former Foster Youth, Mather Singles Interim Housing
Closed to Triage	8	Flexible Supportive Re-Housing Program (FSRP), HDAP, Bringing Families Home, HEAP Flexible Housing Pool, Project Roomkey, Behavioral Health Flexible Housing Pool, Re-Housing Shelter Network, Next Move Mather Transitional Housing Program

There are approximately 27 unique referral sources into non-COVID DHA projects, although these referral sources, especially those within the Flexible Housing Pool, are periodically re-visited and are subject to change.[5]

- 6 projects accept clients through self-referrals.
  - Of the three emergency shelters accepting self-referrals, two target families

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[4] DHA Bureaus lobbies are typically open for drop-in clients. Information about how to connect to this resource during the spread of the COVID-19 pandemic is available here.

[5] Several additional, new referral sources were introduced to support the Project Roomkey effort, including connections with FQHCs, correctional health, and hospitals. Given that these referral sources were added temporarily, they have not been included as the focus of this analysis.

and one targets former foster youth.

- o Of the three permanent housing programs that accept self-referrals, all three target families.
- 6 projects require a referral from a designated agency or organization, including specific outreach teams, emergency shelters, criminal justice agencies, Adult Protective Services, and SCDBHS.
- 3 projects are open to clients who have previously enrolled in a specific DHA program or are currently enrolled and require more support.
- 1 project does not accept referrals from the community and pulls clients from a list of the 250 highest utilizers of Sacramento County criminal justice and behavioral health resources.

Assessment & Prioritization Process

Depending on the housing or shelter project, each individual or household will follow a slightly different assessment and prioritization process.

- Each client will be assessed for eligibility for the specific program. Each program has different eligibility requirements, largely dependent on the funding stream and/or the project site.
- DHA projects use a combination of waitlists, prioritization schema, and/or case conferencing processes to fill vacancies.
  - o 9 projects utilize prioritization schemg including a combination of factors such as age, chronicity of homelessness, mental health needs, length of time homeless, COVID-19 positive status, disability, and location where the household slept the previous night.
  - o 3 projects use a case conferencing process to fill vacancies.
  - o 3 projects maintain a waitlist without prioritization.
  - o 1 project provides immediate financial assistance to eligible families.
- Each client will be entered into HMIS and/or Shine, the County case management database.
  - o All DHA projects enter their clients into HMIS, with the exception of the CalWORKs Family Stabilization Program.[6]
  - o All of the Flexible Housing Pool programs (8 projects total) enter data into Shine and HMIS.

Housing and Shelter Resources

The DHA system connects clients to 16 different projects, including eight housing projects in the Flexible Housing Pool, three housing projects outside of the Flexible Housing Pool, three emergency shelters, and two interim housing projects.

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[6] The Family Stabilization Program may place clients experiencing homelessness into HMIS, but not all FSP participants are literally homeless.

- Flexible Housing Pool
  - The Flexible Housing Pool includes the Flexible Supportive Re-Housing Program (FSRP), Bringing Families Home (BFH), CalWORKs Housing Support Program (HSP) RRH, HSP Flexible Housing Pool, HEAP Flexible Housing Pool (Interim Shelter), HDAP, Behavioral Health Flexible Housing Pool, and Project Roomkey Re-Housing Initiative.
    - Once clients have followed the path to access and been prioritized for a specific project, they will be matched with an Intensive Case Management Services Provider (ICMS) and a Property & Related Tenant Services Provider (PRTS).
    - Depending on the client's level of need and the program they receive services through, the timeframe and intensity of the assistance changes.
      - For example, clients receiving services through the Flexible Supportive Re-Housing Program are the highest utilizers of County resources and are connected to long-term Housing Choice Voucher and on-going case management services. By contrast, individuals served through the HEAP FHP project receive limited-term services using the Critical Time Intervention model and will be connected to additional housing resources as needed.
  - DHA holds contracts with four ICMS providers and three PRTS Providers.
    - Clients are connected to specific ICMS providers as the providers report capacity to take on additional referrals.
      - ICMS Providers: Consumer Self Help Housing, Hope Cooperative/TLCS, WellSpace Health, People Assisting the Homeless
    - Clients are connected to PRTS providers dependent on housing vacancies and fit for client.
      - PRTS Providers: Sacramento Self Help Housing, Volunteers of America, and Next Move (Project Roomkey only)
      - PRTS providers primarily provide housing navigation and subsidy services to clients.
        - Each PRTS provider utilizes a combination of master leasing, sub-leasing to clients, and developing direct leases between clients and landlords to help move clients into housing.
        - PRTS providers also work to connect clients to Room & Board, Board & Care, and assisted living facilities when necessary.

- No matter where they accessed the system or which specific project they are participating in, a client may be connected to any of the ICMS providers or any of the PRTS providers,
  - Within the Flexible Housing Pool, clients requiring a greater level of support may be referred to the HDAP program or to SCDBHS Full Service Partnership programs.
- Emergency Shelter & Other Housing Resources

Housing Type	Program Name
Emergency Shelter	North A Street, VOA Bannon Street Emergency Shelter, Next Move County Emergency Family Shelter
Interim Housing	Re-Housing Shelter Network, Next Move Mather Singles Interim Housing Program
Other Housing Resources	CalWORKs Family Stabilization Program, Next Move Mather Transitional Housing Program, Adolfo Housing Services for Former Foster Youth

  - The DHA system connects clients to a variety of different shelter models targeting a variety of different subpopulations.
    - The DHA system's emergency shelters include scattered site, congregate, and interim housing models.
    - DHA shelters target individuals in the River District, families, former foster youth, chronically homeless households, and other high needs individuals (i.e., physical health needs, mental health needs).

Connections to Other Systems

The DHA system connects to other systems through shared referral sources (CE, SCDBHS, SHRA) and intentional referral processes for connecting clients needing a higher level of care to other systems of care (SCDBHS, CE).

- The DHA system draws from many of the same referral sources as the other systems of care.
  - Coordinated Entry: Downtown Streets Team, Lutheran Social Services, Sacramento County Homeless Outreach Team (HOT), Sacramento Covered, Sacramento Self Help Housing, Wind Youth Services
  - SHRA: Lutheran Social Services, Sacramento Self Help Housing, Wind Youth Services
  - SCDBHS: Sacramento Self Help Housing, Wind Youth Services
    - Notably, DHA accepted referrals directly from Sacramento County Department of Behavioral Health Services (SCDBHS) to fill vacancies in the HEAP Flexible Housing Pool program. Please see the

[SCDBHS Housing Resources Visual Map](#) for more detail about that system's access points.

- Through a case conferencing process, ICMS and PRTS providers can recommend clients for a higher level of treatment and housing through the SCDBHS system. Clients still follow a similar process to access and will complete the LOCUS to determine eligibility.
    - Similarly, clients housed through the CalWORKs Housing Support Program (HSP) or HEAP Flexible Housing Pool are regularly connected to the VI-SPDAT, the method of access for the Coordinated Entry System. Please note, DHA clients do not have special access to the Coordinated Entry System and follow the regular assessment and prioritization process.

Suggested Questions for Further Analysis

1. What is the capacity of the DHA system? How many individuals are being served by these programs?
2. Given the overlap between DHA and the other systems of care's access points, are there opportunities to better triage individuals at these shared locations and target diversion or problem-solving resources?
3. Are there ways to clarify access to the DHA system for individuals with lived experience and providers?

Systems Performance Committee

Sacramento Continuum of Care
September 24th, 2020

Agenda

I. Welcome & Introductions
II. New Business
    A. CESH Work Products for Feedback and Discussion:
        1. <u>Final Presentation & Analysis</u>: Sacramento County Department of Human Assistance Visual Map
        2. <u>Preview</u>: SHRA Visual Map
    B. CoC Hosted Workshop on Systems Mapping
        1. Overview of CoC Hosted Workshop Slidedeck
    C. Systems Mapping "Communal Processing" Breakout Rooms
    D. Update on CoC Hosted Workshop on Racial Equity & Next Steps
    E. Meetings in November & December
III. Review of new agenda items for next meeting
IV. Announcements
V. Meeting Adjourned

I. Welcome & Introductions

Noel Kammermann, SPC Chair

II. New Business

DHA Visual Map Analysis

Maddie Nation, Homebase

SHRA Visual Map Preview

Colin Sorensen, Homebase

CoC Hosted Workshop on Systems Mapping

Colin Sorensen and Maddie Nation, Homebase

Agenda
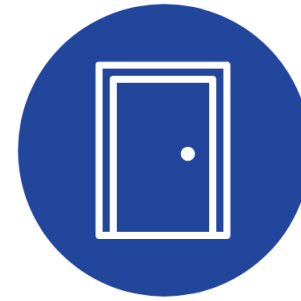
01 Welcome

02 Process

03 Key Takeaways

04 Breakout Rooms

Key Takeaways

1 Due to differing system and funding priorities, there are system elements that **may be under-resourced** creating barriers to the community ending homelessness.

2 Local housing projects are **accessed** in different ways, making it a challenge for individuals experiencing homelessness to know where to go to meet their specific needs.

3 Despite a community intention of coordination and large-scale investment in housing, **disconnects between the local systems** and **a lack of housing resources** may result in longer periods of homelessness for many individuals.

Building Collective Understanding to Set the Stage for Systems Change

Housing Resources

Access

Flow & Connections

There are **four major systems** with housing resources.

Coordinated Entry

Sacramento County Department of Human Assistance

Sacramento Housing & Redevelopment Agency

Sacramento County Department of Behavioral Health Services

Each system's housing follows **different models** and serves **different purposes**.

Coordinated Entry

- ○ Homeless Dedicated
- 🏘 PSH
- 🔑 Built Units

SCDBHS

- ○ Mental Health Dedicated
- 🏘 PSH, Flexible Funds
- $ 🔑 Vouchers, Built Units

SHRA

- ○ Homeless Dedicated & Preference
- 🏘 PH, PSH, RRH
- $ 🔑 Vouchers, Built Units

DHA

- ○ Homeless Dedicated
- 🏘 PSH, Flexible Funds
- $ Vouchers

Each major system offering homeless housing manages varied amounts of housing inventory.

Percentage of Available and Total homeless Housing Stock According to 2020 Housing Inventory Count (HIC).

Legend:
- Total Beds (gray)
- Available Beds Annually (blue)
- **% of Total Available Beds** (# of Beds)

System	% of Total Available Beds
DHA	32% (345)
CE	19% (209)
Case Conferencing/SHRA	14% (147)
BHS/SHRA	12% (128)
CE/DHA	7% (72)
SHRA	7% (72)
Other System	3% (36)
CE/SHRA	3% (28)
CE/BHS	2% (21)
BHS	2% (18)
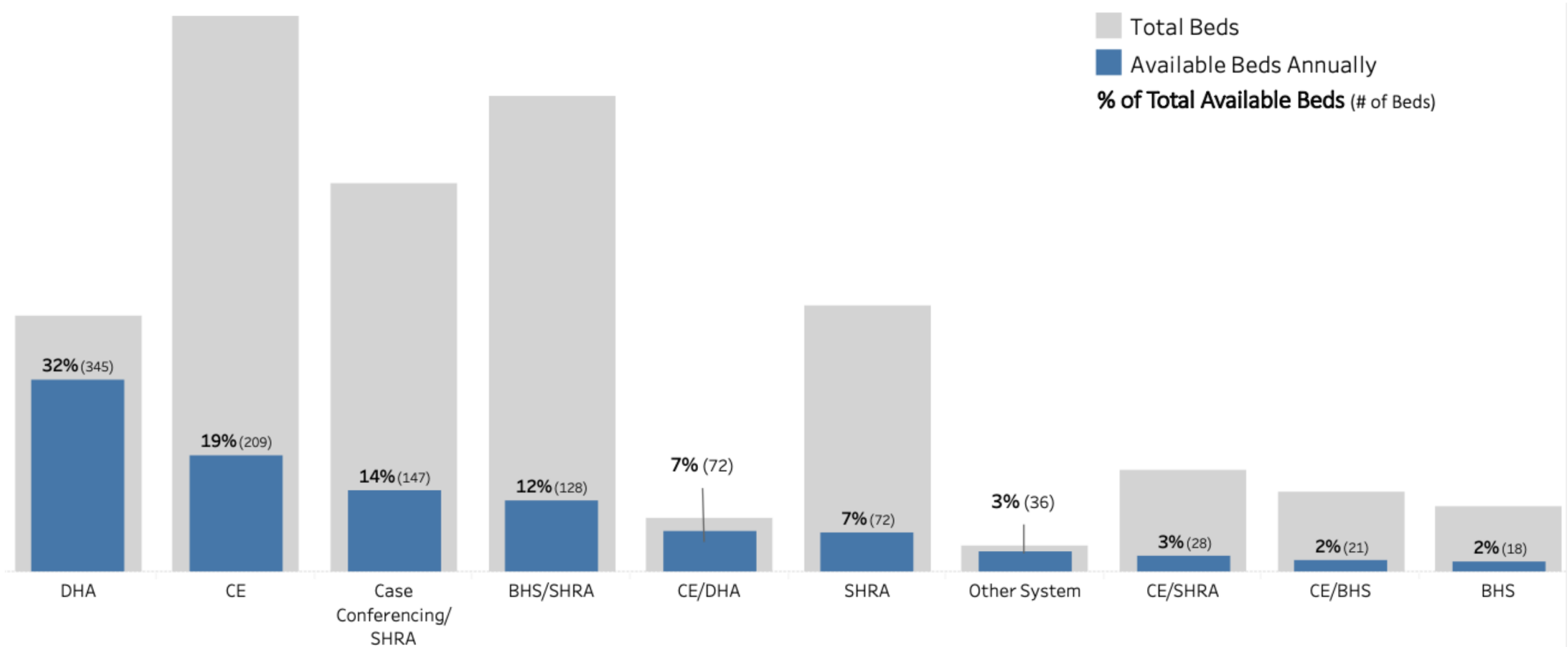
* "Available Beds Annually" calculated using 15% and 75% turnover rate assumptions for PSH and RRH, respectively.
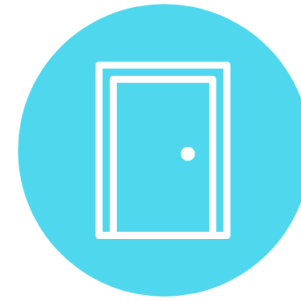
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Each system of care includes **dedicated housing resources** for different subpopulations.
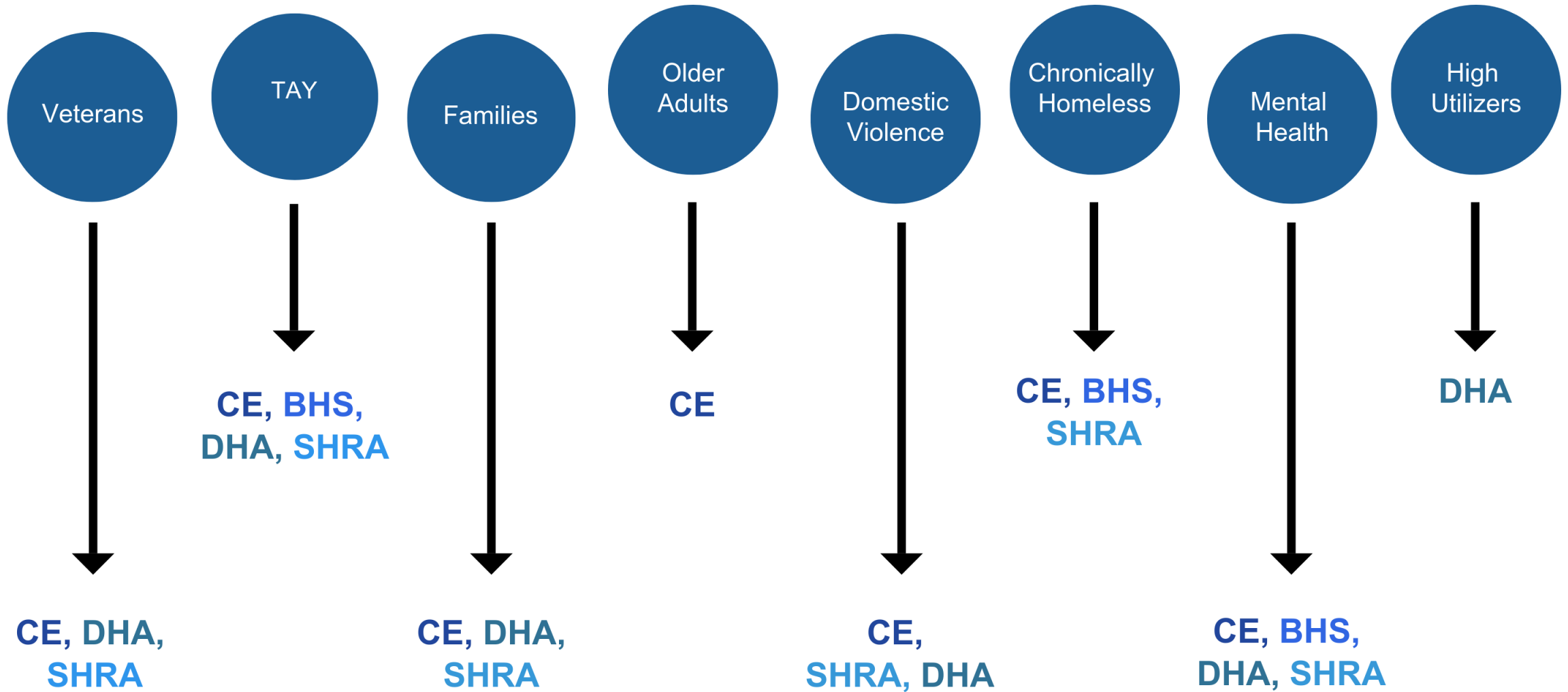
Building Collective Understanding to Set the Stage for Systems Change
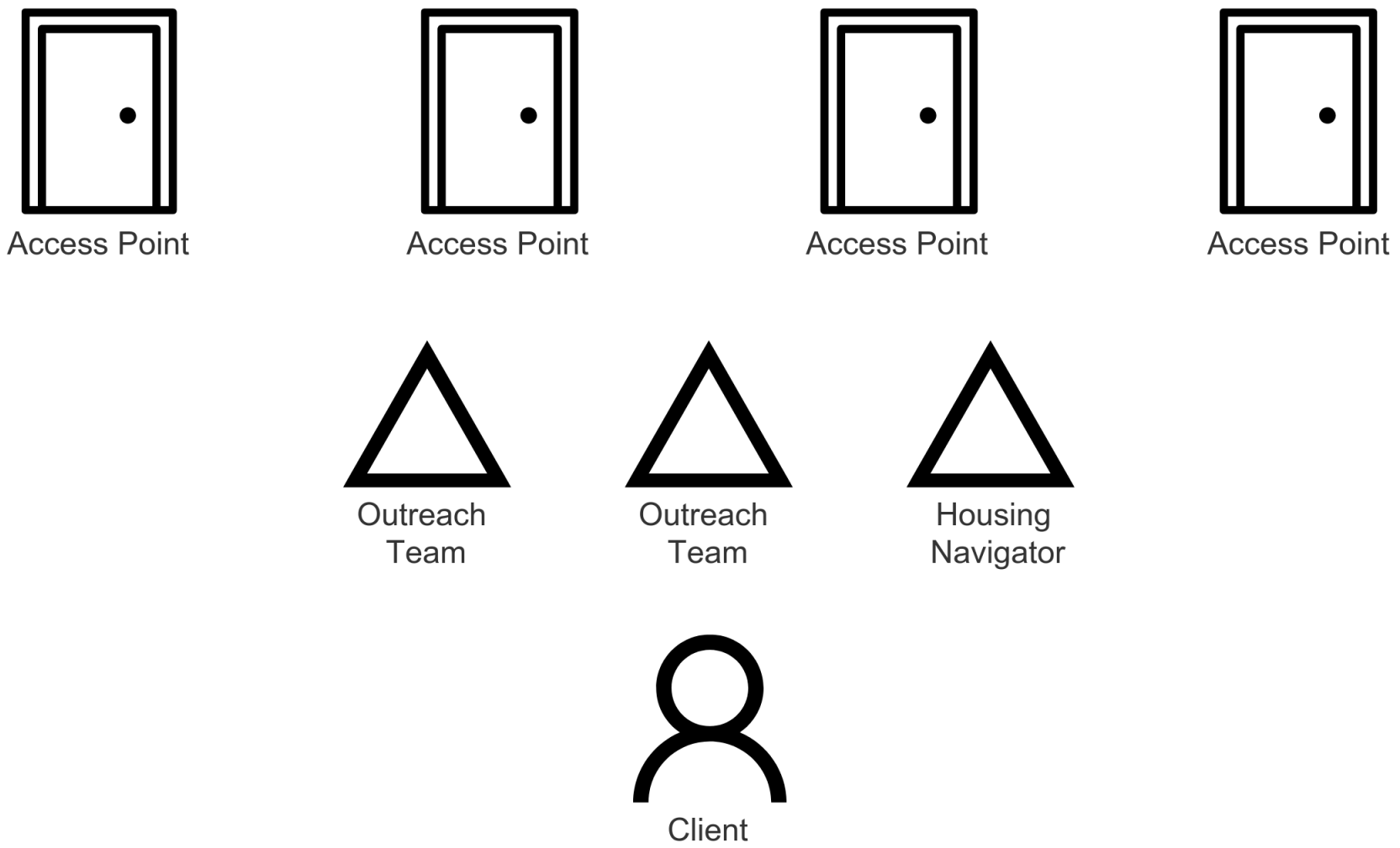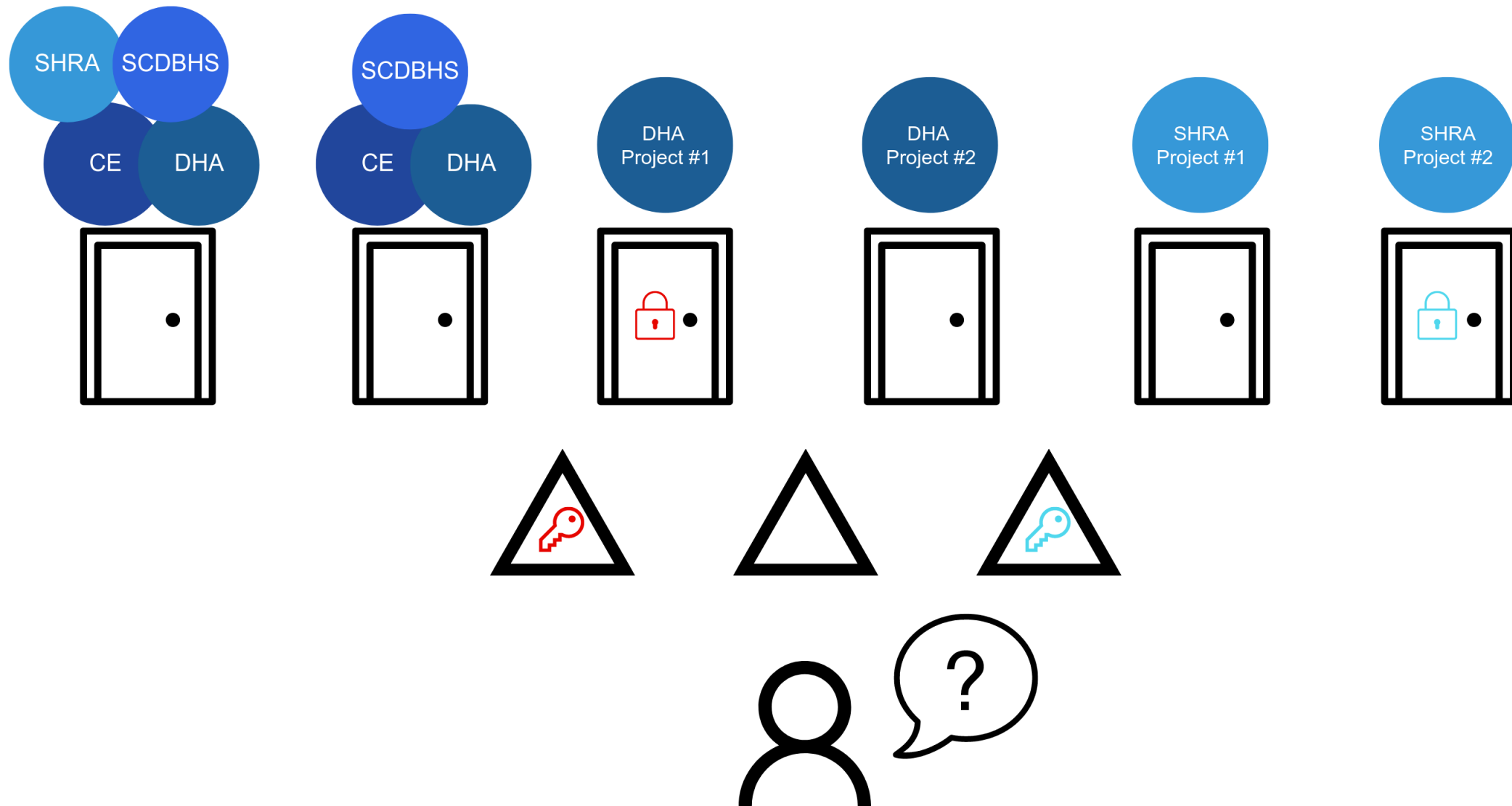

Housing Resources

Access

Flow & Connections

Outreach teams and housing navigators connect clients to the systems through **Access Points**.

Access Point   Access Point   Access Point   Access Point

Outreach Team   Outreach Team   Housing Navigator
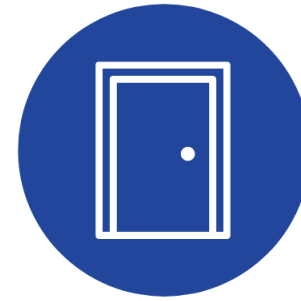
Client

With all of the different paths to access, it is **difficult to know where to begin**.

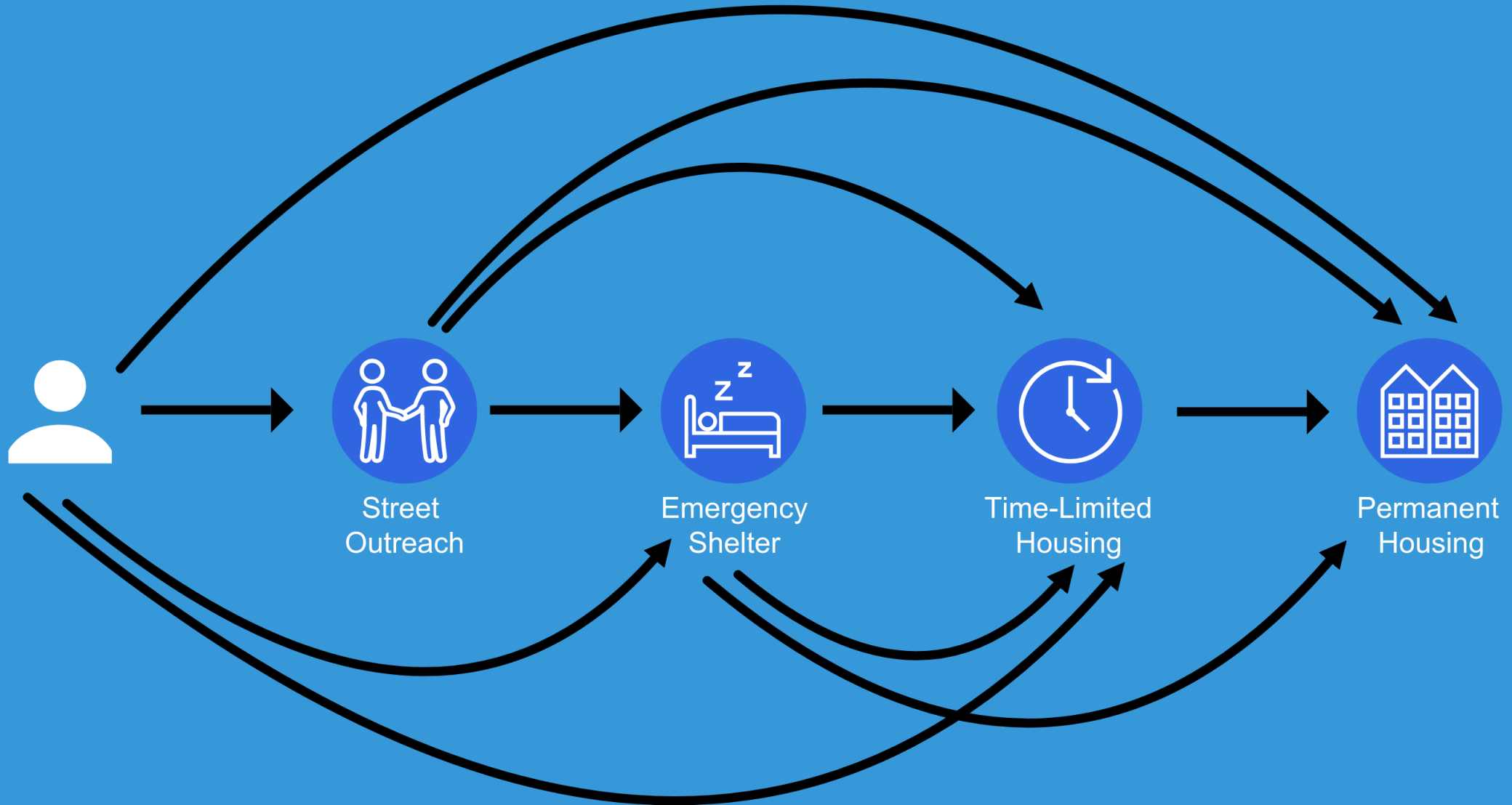# Building Collective Understanding to Set the Stage for Systems Change

Housing Resources

Access

Flow & Connections

Individuals follow several **different paths** to permanent housing.

Street Outreach → Emergency Shelter → Time-Limited Housing → Permanent Housing

There appears to be a bottleneck with clients moving from emergency shelter or street outreach to longer term housing, with two-thirds of those in emergency shelter or street outreach remaining in, or cycling between, either project type.

Percentage of Movements Into Each Project Type From Street Outreach or Emergency Shelter, July 2018-July 2020 (n=8,198)
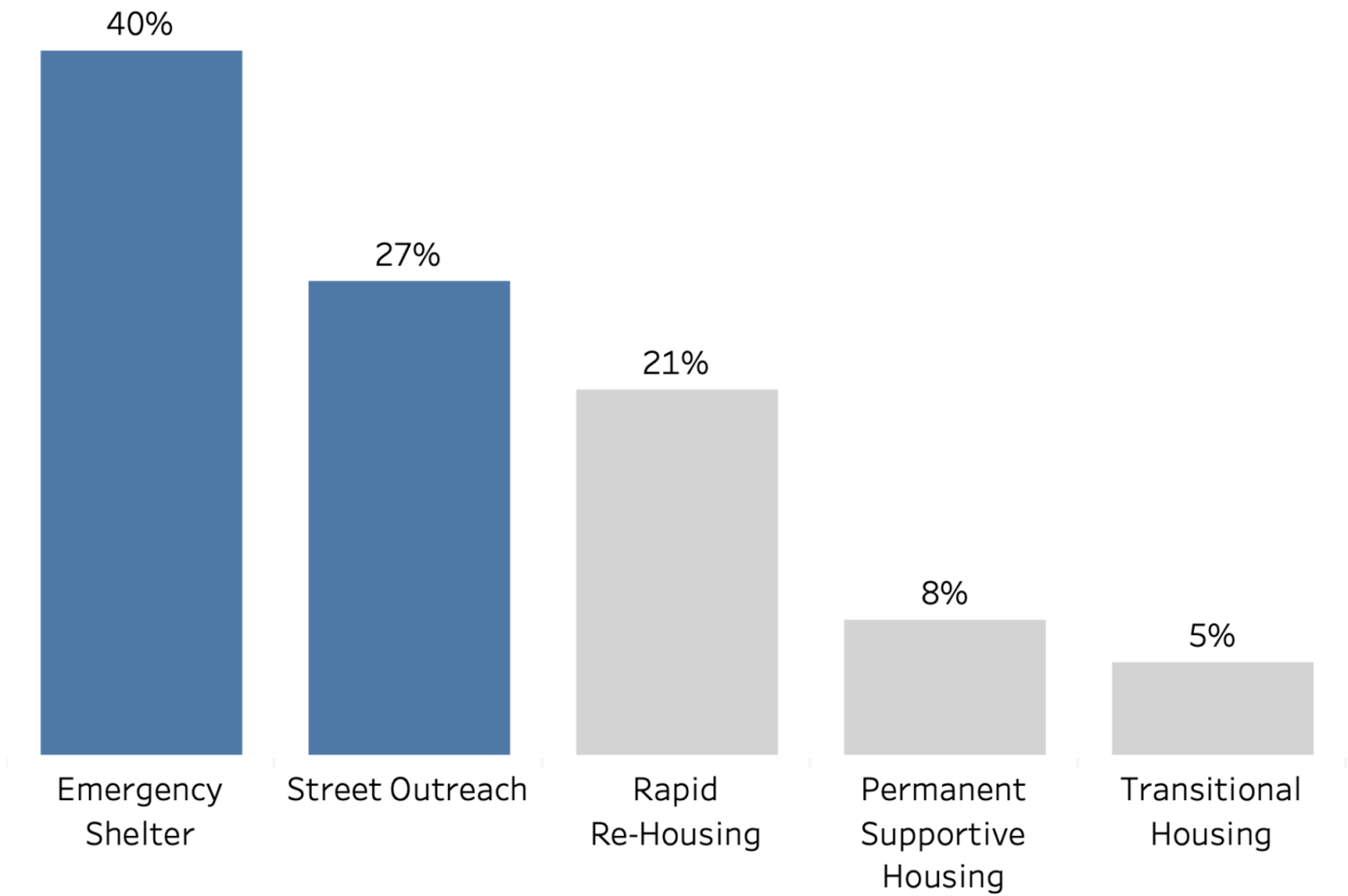
* Because an individual may move between several programs, "movements" are not de-duplicated (i.e. one person moving twice represents two movements.)

Some emergency shelters are having **greater success** with their clients moving on to other project types.

While only 24% of people in ES move on to RRH on average, the highlighted ES programs below show more than double this rate.

Percentage of Movements Between Programs According to Subsequent Enrollments in HMIS, (7/2018-7/2020)

	Permanent Supportive Housing	Rapid Re-Housing	Transitional Housing	Emergency Shelter	Street Outreach
ES #1	2%	4%	8%	53%	33%
ES #2	9%	51%	11%	20%	8%
ES #3	4%	2%	4%	58%	33%
ES #4	5%	54%	2%	18%	21%
ES #5	1%	48%	21%	28%	1%
ES #6	3%	47%		35%	15%
ES #7	5%	63%	11%	14%	6%

*Note: n-values are not de-duplicated, as a client may have several movements/enrollments within the reporting period.

Key Takeaways

1 Due to differing system and funding priorities, there are system elements that **may be under-resourced** creating barriers to the community ending homelessness.

2 Local housing projects are **accessed** in different ways, making it a challenge for individuals experiencing homelessness to know where to go to meet their specific needs.

3 Despite a community intention of coordination and large-scale investment in housing, **disconnects between the local systems** and **a lack of housing resources** may result in longer periods of homelessness for many individuals.
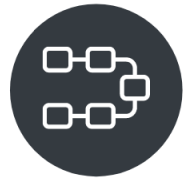
The Gaps Analysis will identify opportunities to:

$ Allocate local and state funding moving forward to address current housing gaps

Improve client experience of access

Improve efficiency of connection to needed resources

Reduce disparities in experience and outcomes through targeted intervention

Scale practices for improving connections to permanent housing destinations

Identifying Opportunities for Systems Level Change

Questions?

This is a workshop, ask away!

For later reference:

- This slidedeck will be emailed to all registrants and posted on the SSF website following the meeting.
- Email **sacramento@homebaseccc.org** if you have any questions about the systems mapping.

Breakout Rooms

Homebase

Discussion Questions

- What findings from this systems mapping work have surprised you the most?

- What findings from this systems mapping work have been the most impactful for you and your work?

- What findings from this systems mapping work do you have lingering questions about or would like further clarification on?
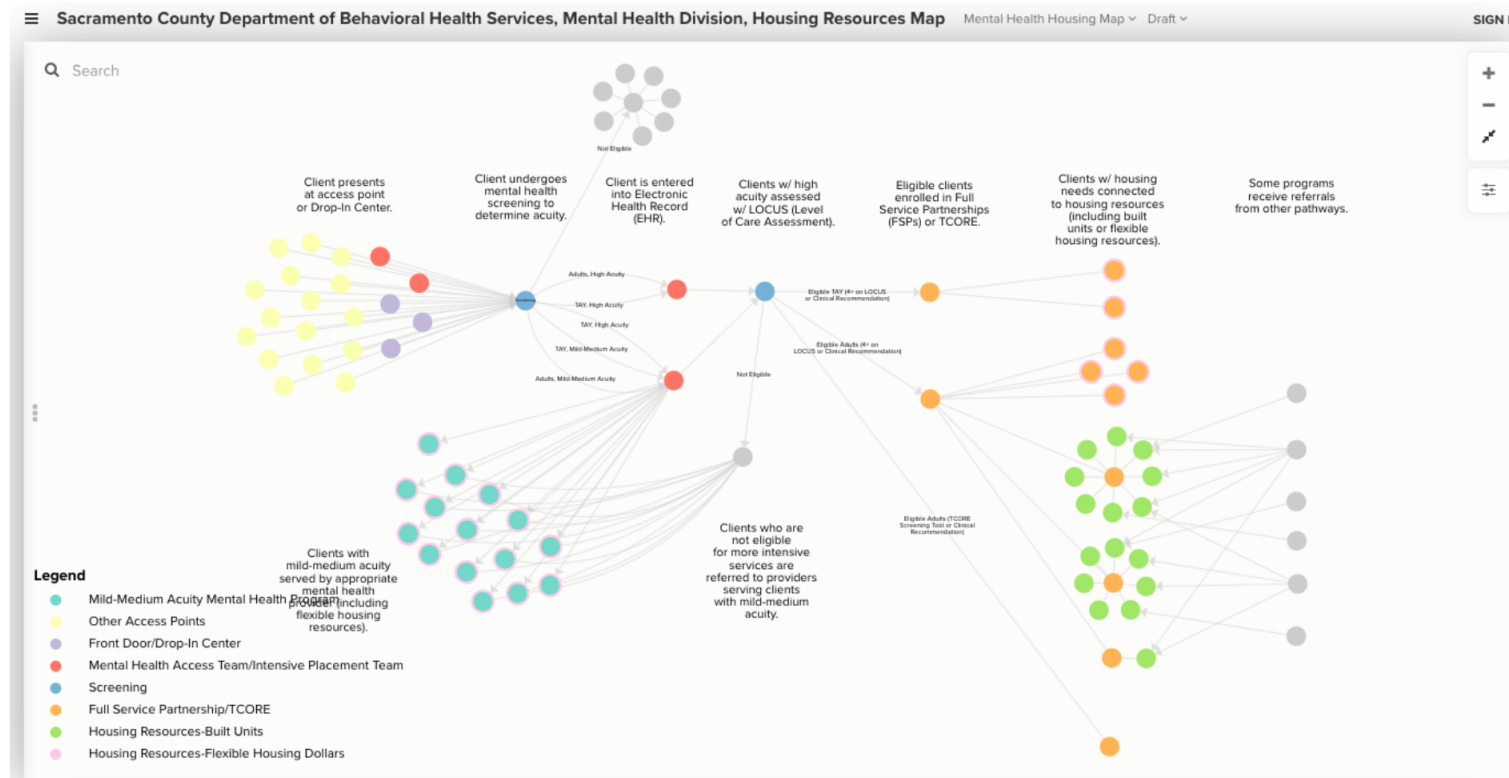
Sacramento Coordinated Entry Map
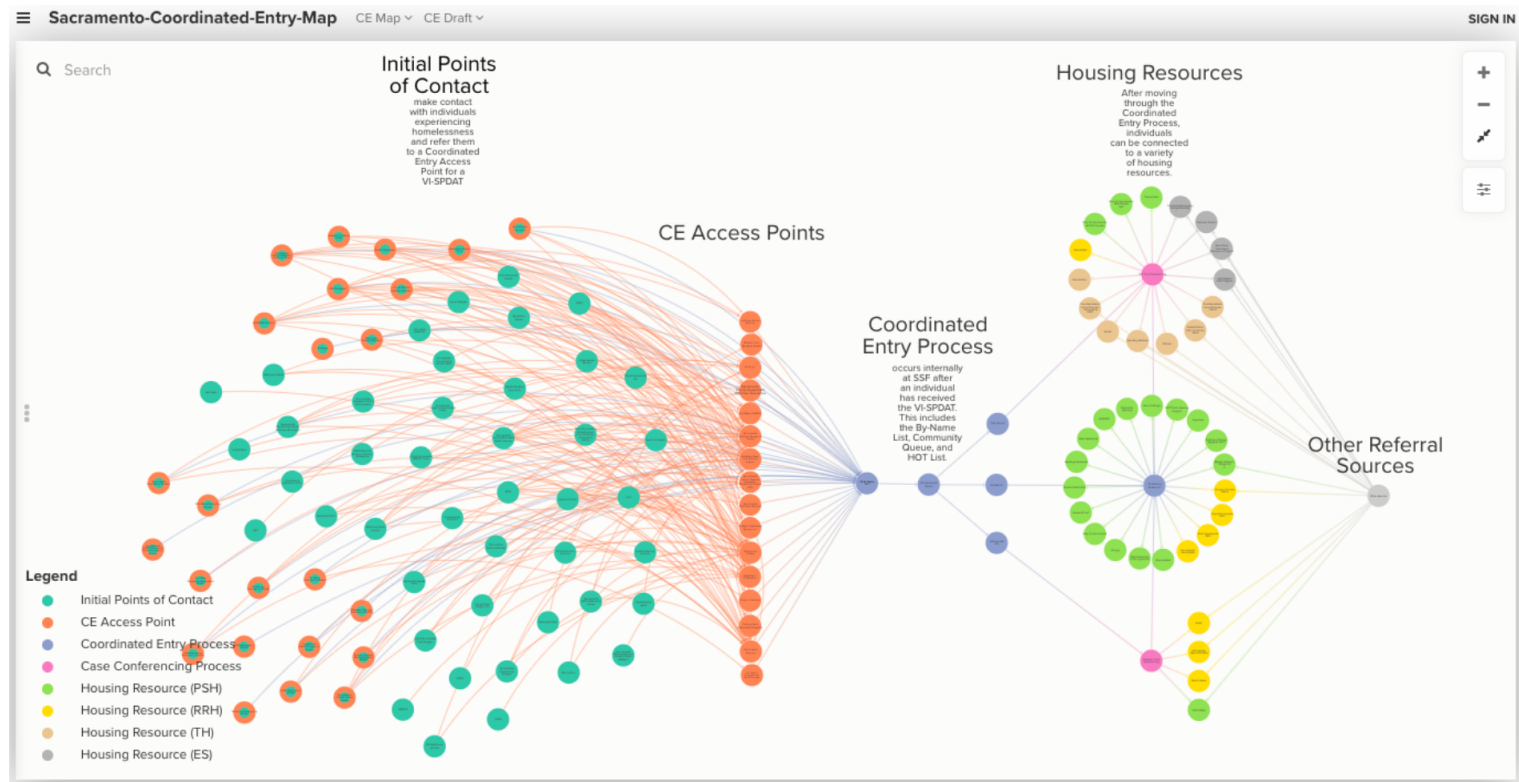
- **Accessing** a VI-SPDAT relies on an individual's ability to schedule an appointment, enroll in a participating project, or adequately connect with a street outreach worker.
- The **prioritization** process for housing resources is often delayed by a lack of housing resources available and/or lack of staff capacity to secure document readiness.
- The number of **housing resources** dedicated to taking referrals through Coordinated Entry is limited by each project's eligibility requirements, low turnover and/or process of taking referrals from other sources.

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Sacramento Behavioral Health Services Housing Resources Map

- **Access** to housing resources in the SCDBHS system is primarily dependent on the acuity of an individual's mental health need.
- **Flexible funding** for housing is available to individuals with a range of mental health needs, while **beds within built projects** are reserved for high acuity individuals participating in a Full Service Partnership program.

# Sacramento Behavioral Health Services Housing Resources Map
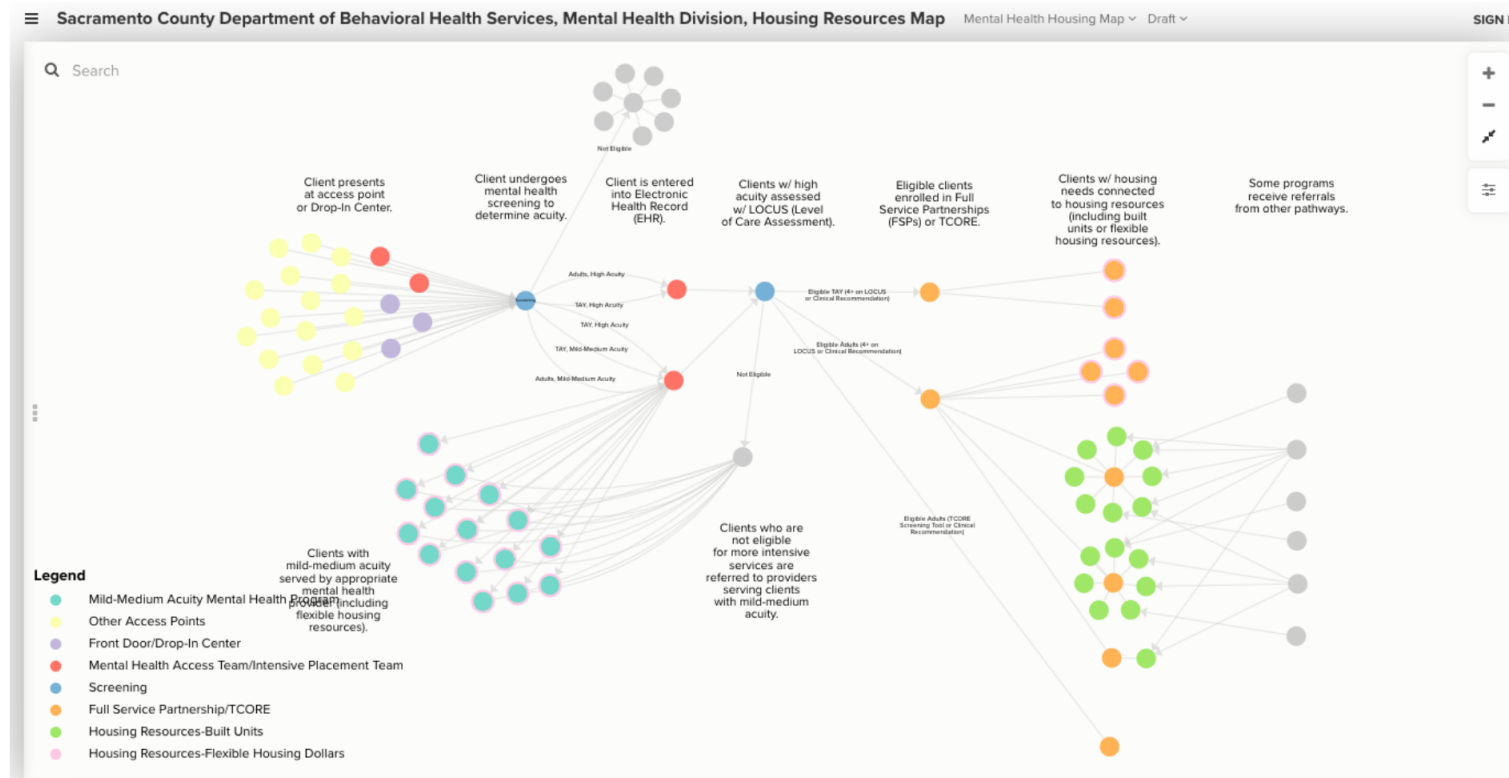
- **Access** to housing resources in the SCDBHS system is primarily dependent on the acuity of an individual's mental health need.
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Sacramento County DHA Housing Resources Map
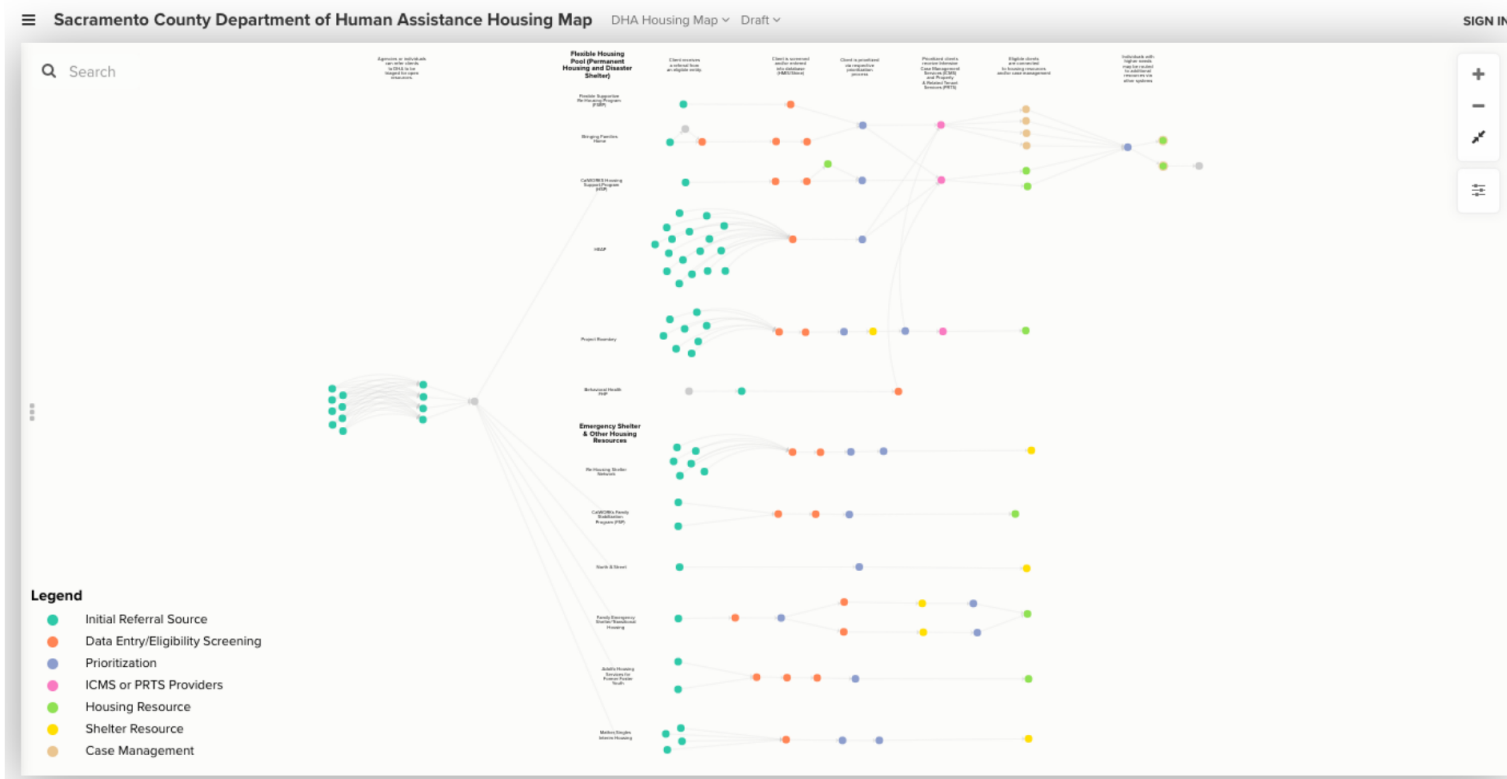
- The path to **access** to housing resources in the DHA system is variable depending on the specific program and funding stream.
- DHA staff work to **triage** clients seeking assistance to open resources that fit their needs.
- Lacks a unified **assessment or prioritization** process for housing resources.
- The structure of DHA's **Flexible Housing Pool** pairs housing and case management services in a unique and highly adaptable way.

Sacramento Project Access Matrix

Project Information			Access Overview		Front Door
Agency Name	Program Name	Project Type	Description of Access	Typical Access Points	
A Community for Peace	DV Emergency Shelter	Emergency Shelter	They should call us first to insure we have availability (916-728-7210) and can come into our office location on 3841 4th Ave to discuss next steps.	Sacramento Covered, Housing with Dignity Program (LSS), Downtown Sacramento Homeless Mental Health Outreach (SSF), El Hogar Guest House, T3 (Wellspace), Patient Navigator Program (Sac Covered), The Willow Clinic (UCD School of Medicine), MercyClinic (Sac Covered/Loaves & Fishes), City of Sacramento Whole Person Care (Pathways to Health & Home), County Behavioral Health Services, VA Healthcare System, Elica Health Centers, Health and Life Organization, Inc. (HALO), One Community Health, Peach Tree Health Clinic, Sacramento Native American Health Center (SNAHC), Sacramento County Adult Access Team, SSF Navigators, SSHH Navigators, LSS/WIND Outreach, Waking the Village Outreach, Veterans Outreach Team, County Department of Human Assistance, 2-1-1, Loaves & Fishes, Union Gospel Mission, Next Move Drop-In Center, Sacramento LGBT Community Center, CASH, Wind Youth, HART, Downtown Streets Team, McKinney-Vento Liaisons, Child Protective Services, City of Sacramento IMPACT Team, Sacramento County Homeless Outreach Team, Sacramento County Park Rangers, City of Sacramento Park Rangers, Sacramento Regional Transit District Police	3
Bishop Gallegos Maternity Home	Bishop Gallegos Maternity Home	Emergency Shelter			
Family Promise of Sacramento (Interfaith Network)	Family Promise Center	Emergency Shelter			
Francis House Center - A Program of Next Move	Family Rescue Program	Emergency Shelter	Client must call location on Monday to make an appointment for Thursday intake. Client will be informed of all paperwork needed to be accepted for the week stay in the motel and if fails to bring all needed paperwork or doesn't qualify client is denied and the next client is contacted; no beds reserved for specific referrals	This project recieves no referrals from healthcare partners or community partners.	1
First Step Communities	North A Street Campus Emergency Shelter	Emergency Shelter	Coordinate with outreach through First Steps Community; no beds are reserved for specific referrals.	SSF Navigators; City of Sacramento IMPACT Team; FSC Outreach	N

- The process for **accessing** resources is decentralized and highly dependent on the project.
- There are few consistent patterns in how housing projects make **referrals** to other housing resources, indicating a lack of coordination across the system and even within agencies with multiple housing projects.

Tableau Movements Analytical Tool
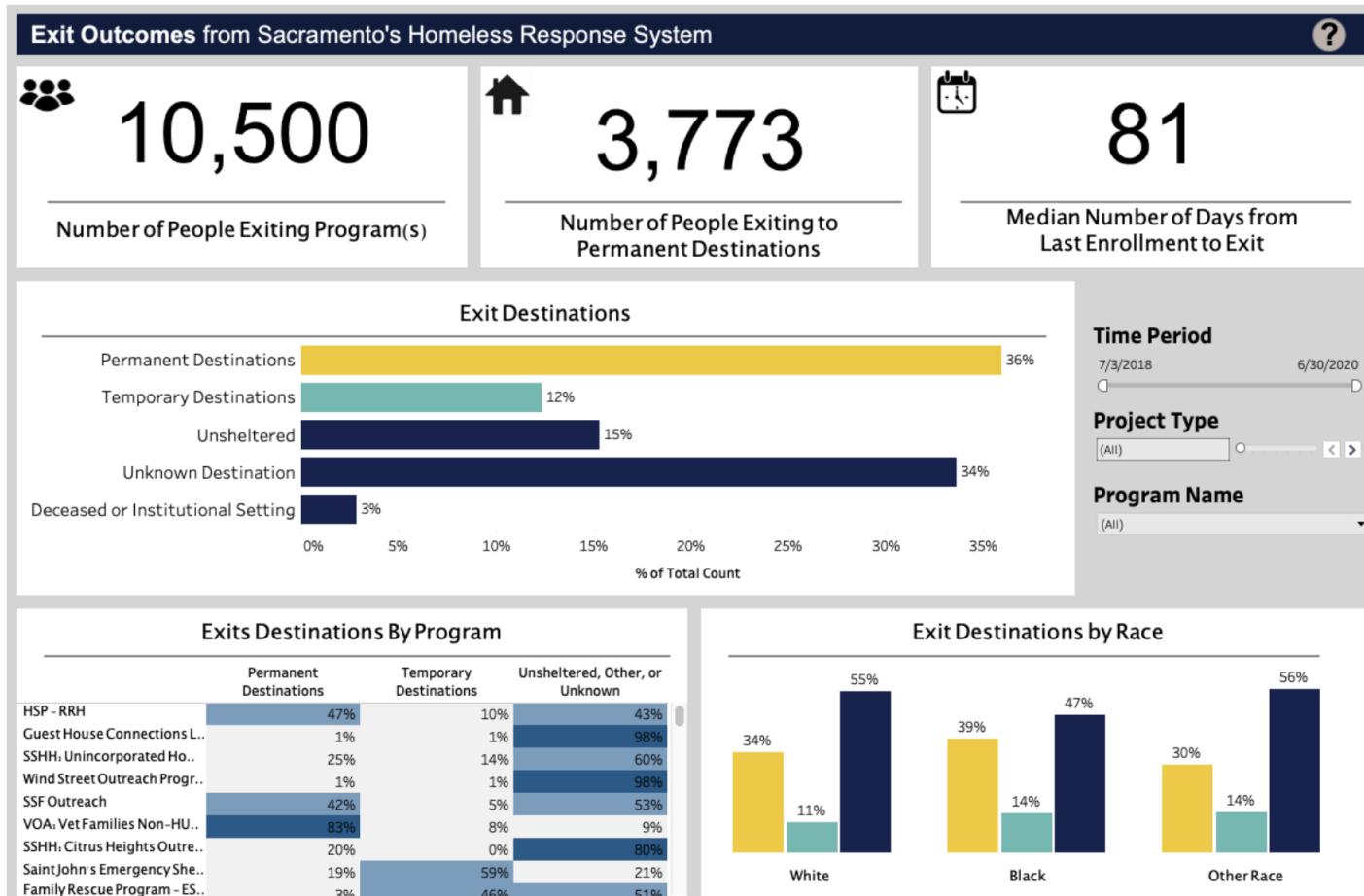
- Clients that enter the system of care via emergency shelter or street outreach tend to **cycle** through these project types.

- Only between 15%-25% of clients in emergency shelters or street outreach **flow** to homeless housing if they stay in the system.

- However, some programs see **higher success rates** with clients moving on to long-term homeless housing.

- Still, individuals in long-term homeless housing programs are only slightly more than 50% likely to exit to **permanent destinations**.