

Coordinated Access System (CAS)

CAS

The Sacramento City and County Continuum of Care, City of Sacramento, and County of Sacramento recently pooled resources to invest \$16 million to create a Coordinated Access System aimed at ensuring people needing services have streamlined and clear paths to go through to access the right help. This investment will ensure that help is more equitable, expedient, and easier to find by our unhoused neighbors.

What is the Coordinated Access System?

A streamlined system designed to match people experiencing homelessness with housing and service options. This process also prioritizes limited local supportive housing resources, so people with the highest vulnerability can be connected to supports as quickly as possible.



CORE ELEMENTS:

Access, assessment, problem-solving, prioritization, and referral

DATABASE:

Homeless Management Information System (HMIS)

KEY PLAYERS:

Access points, outreach/advocates, shelters, service providers, and housing programs

REFERRAL ENTITY:

2-1-1 operated by Community Link and supported by Sacramento Steps Forward

What Can We Accomplish Together Through the Coordinated Access System?

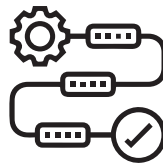
STOP
homelessness
before it
begins



SHORTEN
the time people
must wait to be
assessed



STREAMLINE
access for people
experiencing
homelessness



OPTIMIZE
existing shelter
and housing
programs



FORGE
a cohesive and
coordinated homeless
system of care



Why Do We Need a Coordinated Access System?

✘ Navigating the current system is confusing and difficult to access for people seeking resources:

- **60+ access points** each with unique services and eligibility criteria
- **One third of shelters** require a referral

✘ Sacramento's continued rise in homeless is evidence that our current model is not working:

- Local gaps analysis suggests an estimated **16,500 to 20,000 people** will experience homelessness annually in Sacramento
- **More than half** who enter the system are likely to experience homelessness for the first time

February 2023 Housing Crisis Line Key Performance Indicators

PREPARED BY
SACRAMENTO STEPS FORWARD



1,166 CALLERS
CONNECTED
TO OTHER
RESOURCES

1,700
CALLS HANDLED

534
HOUSEHOLDS CURRENTLY
OR
AT-RISK OF HOMELESSNESS

323
REFERRALS TO
CRISIS
RESOURCES



100
HOUSEHOLDS
ENROLLED IN
SHELTER

245



145
HOUSEHOLDS
EXITED OR
DIVERTED FROM
HOMELESSNESS

***DATA IS CAPTURED ON A ROLLING BASIS, AND
MONTHLY REPORTING MAY OVERLAP.***

How is this data collected? The homeless management information system (HMIS) is a locally administered database that captures client-level data and data on the provision of housing and services to homeless individuals, families, and persons at risk of homelessness. HMIS improves service access and delivery and strengthens community planning and resource allocation.

HOUSING CRISIS LINE

The Housing Crisis Line (2-1-1) connects households seeking housing and homeless resources to appropriate resources.

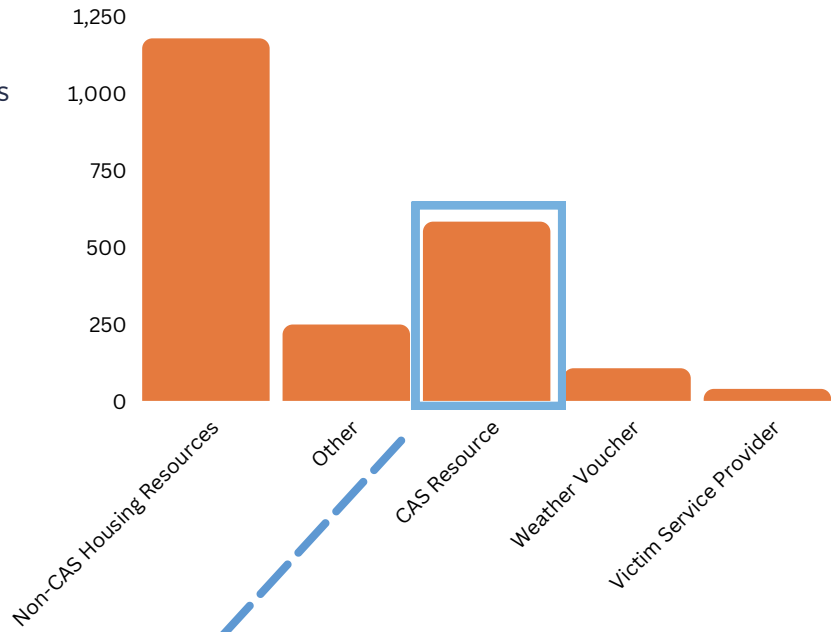
CALLS HANDLED: 1,700

HIGHEST REQUESTS BY ZIP CODE: 95811, 95823, 95670, 95815

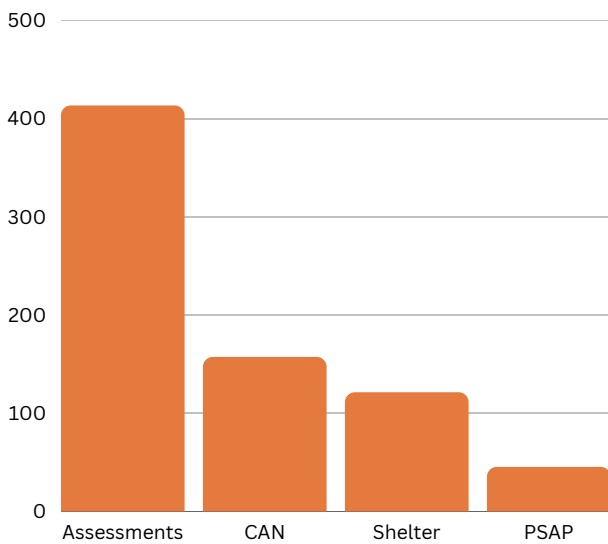
AVERAGE CALL WAIT TIME: 6:28

AVERAGE CALL HANDLE TIME: 12:02

Resource Connections



Referrals to CAS Resources



CAS RESOURCE CONNECTIONS

With the addition of CAS resources, 2-1-1 can triage and refer households to participating shelters, problem-solving access points (PSAPs), shelter navigation, and conduct housing assessments

HOUSEHOLDS TRIAGED 534:

ASSESSMENTS COMPLETED: 413

SHELTER REFERRALS: 121

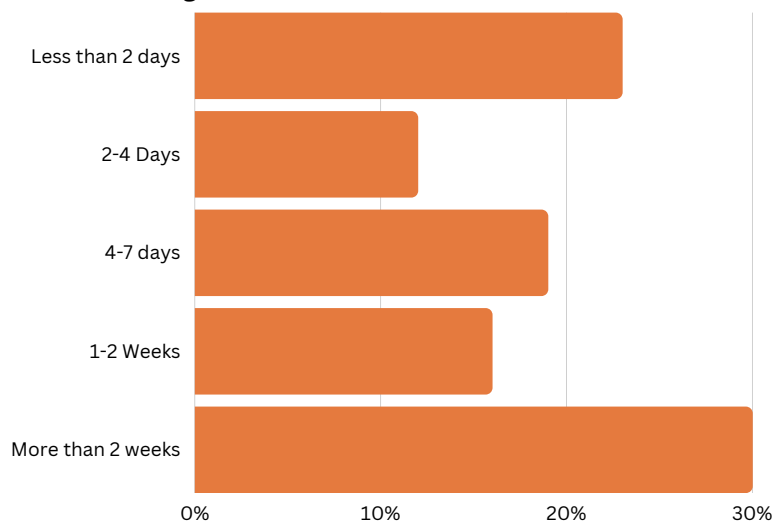
PSAP REFERRALS: 45

CAN REFERRALS: 157

HOUSEHOLDS REFERRED TO SHELTER: 121

- 24% OF HOUSEHOLDS ASSESSED WERE REFERRED TO A SHELTER
- AVERAGE LENGTH TIME TO GET REFERRED TO SHELTER: 14 DAYS
- AVERAGE LENGTH OF TIME FROM SHELTER REFERRAL TO SHELTER INTAKE: 28 HOURS
- 90% OF REFERRALS RESULTED IN A SHELTER ENROLLMENT

Length of Time from Assessment to Shelter Intake



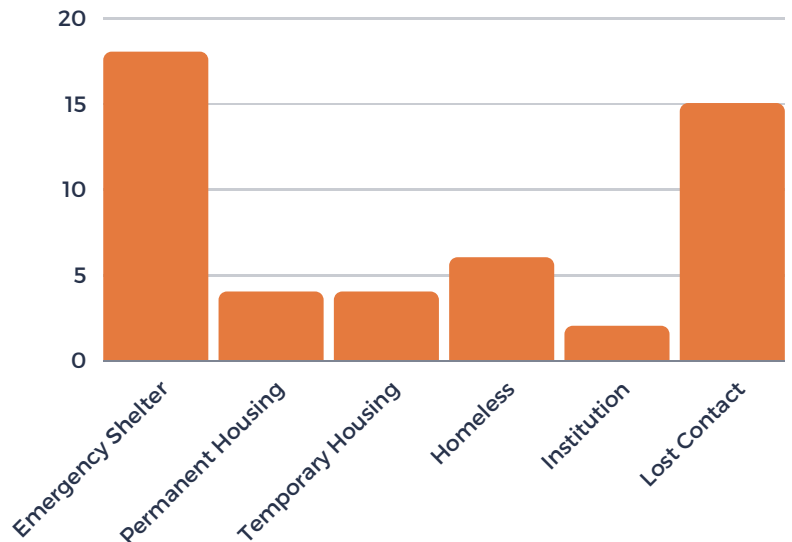
NAVIGATION

Elica Health Centers manages a team of trained navigators who provide shelter and housing placement support to eligible households referred by 2-1-1. Referrals began on 2/1/2023.

HOUSEHOLDS REFERRED TO CAN: 157

- **64% (101) OF REFERRALS RESULTED IN A PROGRAM ENROLLMENT**
- **AVERAGE TIME FROM REFERRAL TO ENROLLMENT: TWO DAYS**
- **53% OF EXITS WERE POSITIVE**
 - **FOUR HOUSEHOLDS EXITED TO PERMANENT HOUSING**
 - **FOUR HOUSEHOLDS EXITED TO TEMPORARY HOUSING**
 - **18 HOUSEHOLDS EXITED TO AN EMERGENCY SHELTER**

CAN Program: Household Exit Destinations



Stories from the Field

"When conducting my fieldwork, my client asked if we could help him receive reading glasses. The client stated he would like me to email him the information. I emailed him a list of centers that take his insurance and even clinics that do it for free. The next day he called them and even did some walk-ins to talk about pricing and how much his insurance could cover and was able to set up an appointment.

When I reconnected with the client the following week, he was at his appointment and was super happy that his insurance could cover it all and that no out-of-pocket expenses were needed! Although he was in a challenging situation, he felt that he was slowly getting his life back together, and getting his glasses felt like such a significant accomplishment." - Coordinated Access Navigator

PROBLEM SOLVING ACCESS POINTS

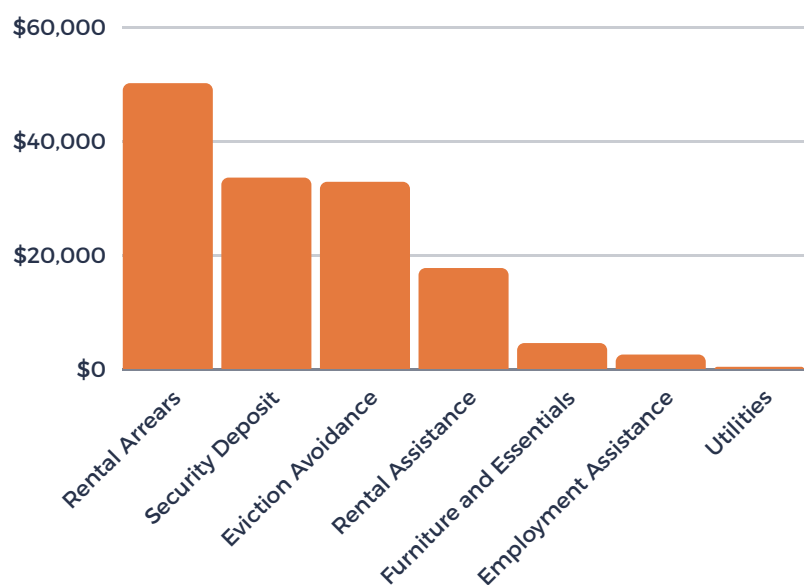
Designated access points provide problem-solving services to divert or rapidly exit households from homelessness, including access to financial assistance.

HOUSEHOLDS SUPPORTED IN ACQUIRING OR MAINTAINING HOUSING: **45**

AVERAGE AMOUNT PER HOUSEHOLD: **\$3,143**

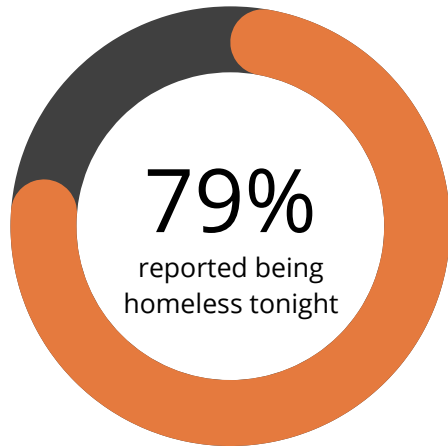
JANUARY EXPENDITURES: **\$141,442**

Problem-solving Financial Assistance by Activity



HOUSEHOLDS SERVED

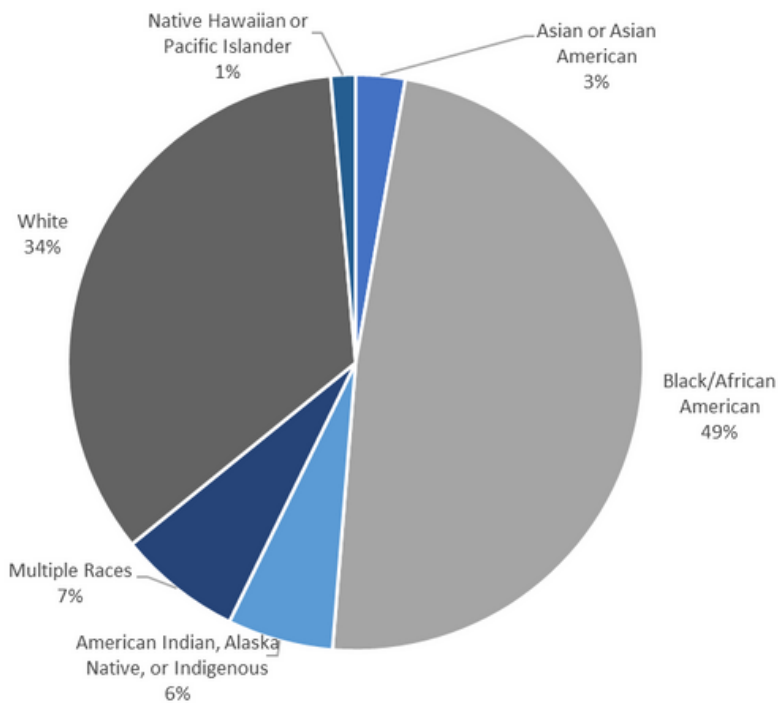
The number of households served includes enrollments and/or services provided by 211, problem-solving access points, and the navigation team. Although some services prevent or divert someone from experiencing homelessness, most households served are already experiencing homelessness.



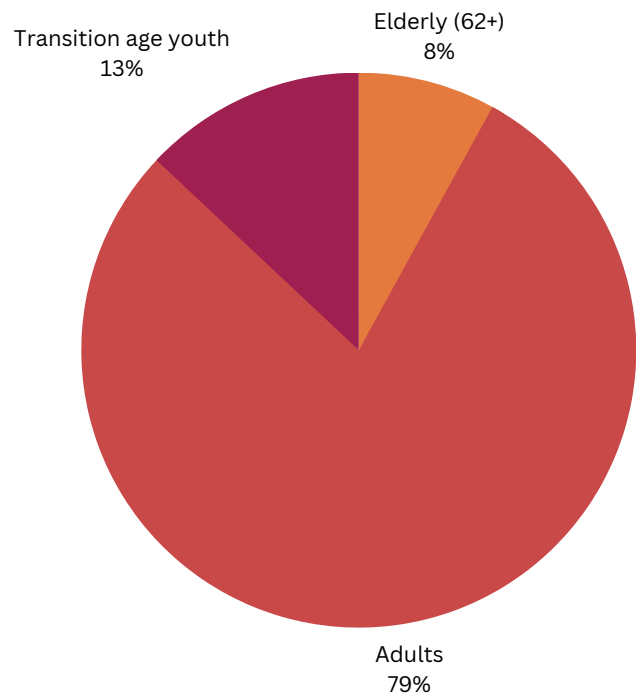
53% of households are female-identifying

- 17% ARE AT IMMINENT RISK OF OR AT RISK OF EXPERIENCING HOMELESSNESS (WITHIN 30 DAYS)
- 24% (100) OF HOUSEHOLDS WERE DIVERTED FROM HOMELESSNESS BY 2-1-1 STAFF

Race



Household Type



CAS PARTICIPATING PROGRAMS

Current CAS Shelters

| Shelter | Population | Number of Beds/Units |
|------------------|--|----------------------|
| Meadowview | Female-identifying individuals | 100 |
| EBH at the Grove | Transitional age youth (18-24 yo) | 48 |
| North 5th Street | Individuals | 163 |
| X Street | Individuals | 100 |
| Common Ground | Transitional age youth (18-24 yo) | 20 |
| STEP Shelter | Transitional age youth (18-24 yo) | 14 |
| The Village | Transitional age youth (18-24 yo), pregnant or parenting | 8 |
| TOTAL | | 453 |

14% of total shelter capacity

Future CAS Shelters

| | | |
|---------------------|--------------------------|------------|
| North A Street | Individuals | 80 |
| Step up on Second | Individuals and families | 200 |
| City of Refuge | Families | 70 |
| TSA Center for Hope | Individuals | 70 |
| TOTAL | | 420 |

27% of total shelter capacity

Problem-Solving Access Points

TOTAL: 873

| Program Name | Targeted Subpopulation |
|---|---|
| LGBT Center* | LGBTQ+ community and Transition-Age Youth |
| Sacramento Self Help Housing* | All, with a focus on Elk Grove and Rancho Cordova |
| South Sacramento HART* | All, with a focus on South Sacramento |
| WEAVE* | Survivors of domestic violence, sexual assault, and sex trafficking |
| Rose Family Creative Empowerment Center | All, with a focus on African American families |

Future Problem-Solving Access Points

| Program Name | Targeted Subpopulation |
|-------------------------------------|--|
| CASH | Survivors of human trafficking |
| Lutheran Social Services - P&I Team | Transition-Age Youth |
| Family Justice Center | Survivors of domestic violence, sexual assault and human trafficking |
| Sacramento Covered | All |
| Lao Family Development Center | Refugees, families |
| Waking the Village | Transition-Age Youth |

*Contracted to provide housing location assistance and take 211 referrals
All PSAPs are available by appointment only and do not accept direct requests for assistance.