

# Housing Conversation Tool

VI-SPDAT Replacement

Coordinated Access System (CAS)

*Changes to the Assessment & Prioritization*



Sacramento Continuum of Care  
July 2024

SACRAMENTO  
STEPS FORWARD

# □ Session Roadmap

□ History and the "Why"

□ Housing Conversation Tool (HCT) Overview

□ How to Administer the HCT

□ Training, tools, and What's Next



# Key Partners

**Partners with  
Lived  
Experience**

**CoC  
Committees  
(REQC and  
CASC)**

**Community  
Partners  
(You!)**





# Why the Change?



The VI-SPDAT was shown to promote racial disparities at both a local and national level and was requested to be replaced by the REQ and CAS committees.



The VI-SPDAT is no longer supported by the creator, Org Code and there is limited ability to alter or adapt the assessment.



The HCT was developed by the community for use in Sacramento. **Local design and control** also means easier ability to change and evolve over time.



This change will **align our shelter and housing vulnerability/prioritization factors** to create a faster pathway through CAS-managed resources.





# Development Process



SSF completed a comprehensive analysis of other community assessment tools and over-the-counter solutions before ultimately settling on a local design process



The Core Equity team worked for nine consecutive weeks to develop a replacement assessment tool based on a framework of mirroring shelter vulnerability factors and prioritizing housing barriers.



The workgroup focused on rewording, replacing, or removing questions for compilation into a new standardized housing tool.



Once finalized, the team reviewed and discussed a training plan, monitoring strategy, and racial equity review process.





# Key Differences

VI-SPDAT	Housing Conversation Tool
3 different assessments for single adults, families and TAY	One assessment
Could not be used with clients at-risk of homelessness	No limitations on homeless status
36 questions	23 questions
Had questions that could re-traumatize that were not necessary to connect clients to services	Questions were reworded to reflect a trauma-informed approach. Or removed if they were determined they were not necessary
Had questions not reflective of a strength-based approach	Questions were reworded to reflect a strength-based approach.
Had questions that were not racially equitable	Built-in monitoring strategy and plan to address emerging disparities





# Key Similarities



The Housing Conversation Tool is self-reported



The HCT should be conducted in a private space after building rapport and safety is established with the client



Reassessment policy remains the same. Valid for 15 months, can reassess when there are significant changes to a household's situation.



The HCT gathers information to determine client vulnerability, social, health, and mental health needs for housing prioritization



# Critical Elements



The Housing Conversation Tool will function as the CAS Housing Assessment for all CAS-managed housing programs. No more multiple housing assessments!



Crisis Assessment (shelter survey) will cascade into the HCT reducing the need to ask triggering questions multiple times.



CAS Assessors will learn how to interpret the HCT results and understand CAS resources to help identify best-fit client pathways



The HCT will support CAS Assessors in developing a housing-focused Individualized Service Plan (ISP)







## Housing Conversation Tool Questions

1. Are you or anyone in your household required to register on the sex offender registry?
2. Where do you and your family sleep most frequently?
3. Have you been homeless for longer than a year?
4. Is anyone in your household pregnant?
5. Do you have any children?
6. Are there children in your household under five years old?
7. Do you have custody of your children?
  - a. If not, is the court requiring you to obtain housing before custody can be restored?
8. Is your household a single-parent household?





## Housing Conversation Tool Questions

9. Were you enrolled in foster care after the age of 16?
10. Do you or anyone in your household have any long-term disability or ongoing health disability?
11. Do you or anyone in your household require housing-related accommodations?
  - A. Select all that apply
    - (First floor or one story, No Stairs, wide door frames, support bars in bathroom and shower, roll-in shower, low links)
12. Are all adults in your household able to independently care for themselves (such as getting dressed, bathing, grooming, administering medication, eating, etc.)?
13. What is your combined (household) monthly income before taxes?
14. Do you have a housing voucher or dedicated rental subsidy that will last for at least one year?





## Housing Conversation Tool Questions

15. Has having poor credit or no credit/rental history prevented you from obtaining permanent housing?

16. Have you or anyone in your household had an eviction in the past seven years?

17. Have you or anyone in your household been affected by the justice or criminal system that prevented you from being housed?

18. Have you or anyone in your household struggled to obtain permanent housing due to immigration status?





## Housing Conversation Tool Questions

19. Do you have 2-3 trusted contacts you can list on a housing application?
20. Have you or any household member experienced a physical health crisis within the last 3 months?
21. Have you or any household member experienced a mental health crisis within the last 3 months?
22. In the past 3 months, have you or anyone in your household experienced any of the following: domestic violence, dating violence, stalking, sexual assault, or human trafficking?





# Housing Prioritization Schema

1. Vulnerability Score (high to low)

2. Housing Barrier score (high to low)

TB. Length of time homeless (longest to shortest)





## Vulnerability Factors

- Pregnancy
- Any household member who has experienced a physical health crisis within the last 3 months
- Any household member who has experienced a mental health crisis within the last 3 months
- Actively fleeing from DV, human trafficking, sexual assault
- Ongoing and diagnosed mental or physical health disability
- Age (over 55)
- Households living in a tent or outside
- Current episode of homelessness longer than 1 year
- (Families only)** Children under the age of 5 years old
- (Families only)** Single-parent household
- (Families only)** Number of children





## Housing Barrier Factors

- <30% AMI
- At least one eviction in last 7 years
- Poor credit (low credit score)
- Lack of references for rental application
- Criminal history / Justice Involvement
- Requires accommodation / accessible housing
- Undocumented immigration status





## Extremely Vulnerable Households (EVH)

CAS is implementing the Extremely Vulnerable Households (EVH) policy which immediately prioritizes households for the next available and appropriate unit regardless of current geographic location. EVH is defined as:

- Individuals scoring 6+ on HCT or Crisis assessment
- Families scoring 10+ on HCT or Crisis assessment

These scores represent ~ the top 10% of clients based on vulnerability.

EVH clients should be supported with completing "doc-readiness" status ASAP!





# Individualized Support Plan (ISP)

<u>Housing Goal # 1</u>	
<b>Housing Goal #1</b>	
<b>Start Date</b>	
<b>Barriers/Problems</b>	
<b>Steps (Measurable)</b>	
<b>Timeline (Days to Complete)</b>	
<b>Goals Status</b>	Choose an item.
<b>Notes for Housing Goal</b>	

An Individualized Support Plan (ISP) is created in partnership with the client and case worker to be a standardized case management plan designed to identify and achieve SMART housing-focused goals.





# Individualized Support Plan(ISP)





## Individualized Support Plan (ISP) Components

**Assessments + Action:** A review and interpretation of the housing assessment should be conducted before initiating an ISP. Assessments may lead to valuable information about support, personal outcomes, and goals.

**Creating a Support Team:** The support team will be determined by the individual's needs and connections. The support team may grow over time.

**Client-Led:** The client is empowered to lead the processes and participate as much as possible.

**Tracking via HMIS:** Progress and changes should be documented within ISP and HMIS

**SMART Goals:** Goals should follow the SMART method (Specific, Measurable, Achievable, Relevant, and Time-Bound)

**Housing-Focused:** While the ISP allows space for additional goals, the CAS Assessor should focus on developing housing goals





## HMIS Expectations - More training to come...

In addition to a new assessment tool, CAS Assessors will...

- Begin enrolling clients in a dedicated coordinated entry project in HMIS.
- Log specific coordinated entry services when critical activities are completed; (e.g., Assessment, referral, problem-solving, etc.)
- Utilize case notes, update ISPs, and act in accordance with CAS policies and procedures





# Racial Equity Data Monitoring



**Purpose:** To develop a report that will help our team monitor the outcomes of the HCT and seek to avoid issues found with the VI-SPDAT



**Scope:** The report will cover who is assessed, their demographics, their scores, and their outcomes. The report will divide the data by race/ethnicity group and by EVH status.



Other demographics included in report

- TAY (Adults 18-24)
- Preferred Language
- Chronic Homelessness



**SSF's Recommendation:** The Core Equity Team will review the report regularly and be responsible for making recommendations to the Racial Equity and CAS committees for proposed action steps and strategies







# Stretch Goals!



**Updated Crisis Assessment:** Combining the PSAP eligibility and shelter survey to create a single crisis assessment tool.




**Monitoring Strategy:** SSF is responsible for monitoring CAS Assessor activities and ensuring compliance with CAS policies and procedures




**Annual CAS Evaluations:** CAS will be evaluated annually by an entity other than SSF. These evaluations' scopes may differ from year to year.



**Ombuds-Office:** SSF is developing recommendations for the creation of a local Ombuds-office that would respond to client complaints and facilitate solutions.



**Flexible financial assistance:** SSF aims to create a flexible pool of one-time cash assistance available to all CAS Assessors to assist in rapidly exiting or preventing a client's episode of homelessness.



**Physical Access Points:** SSF is planning to release an RFQ for organizations interested in operating physical (drop-in) access points, including mobile, to support 2-1-1



**Virtual Access Point for TAY:** SSF in partnership with the Youth Action Board (YAB) and HUD is developing a virtual access point for TAY to use via their phone and internet connection





# Next Steps Timeline



**July 11:** CAS Committee Presentation and request for approval



**July 17:** Racial Equity Committee Presentation and request for approval



**August 14:** CoC Board Presentation and request for approval



**September:** HCT first becomes available in HMIS and training for VI-SPDAT users is held



**October 1 – Dec 31:** 90 days to assess clients with HCT and phase out VI-SPDAT referrals



**January 2025:** CAS Assessor Training launches – all new requests for access will follow this process





# CAS Assessor Trainings: Begins Jan. 2025

<b>Theories &amp; Evidence-Based Practices</b> <i>Best Practices for Serving Homeless Populations (2 days)</i>	
<b>Training Title</b>	<b>Time</b>
<b>Overview – Principles &amp; Phases</b>	1 hr.
<b>Implicit Bias</b>	1 hr.
<b>Cultural Humility</b>	45 mins
<b>Trauma Informed Care</b>	1 hr.
<b>Vicarious Trauma &amp; Self-Care</b>	1 hr. 15 mins
<b>De-Escalation &amp; Crisis Intervention</b>	1 hr
<b>Progressive Engagement Case Management</b>	1 hr
<b>Survivor: DV/HT/SA</b>	1 hr
<b>Persons with Lived Experience (PLE) Share-Out Panel</b>	1 hr 15 minutes
<b>Total Hours</b>	8 Hours, 15 Minutes

<b>Theory &amp; EBP's in Practice</b> <i>Resources and Accessing CAS Services (virtual)</i>	
<b>Training</b>	<b>Time</b>
<b>Managers Training</b>	2 Hours
<b>Housing Problem Solving Specialist Certification</b>	20 hours
<b>Accessing Problem Solving Funds</b>	1.5 hours
<b>Community Resources</b>	1 hr
<b>Administering Assessments</b>	2 Hours
<b>Coordinated Access System (CAS)</b>	1.5 hr
<b>Requesting Transfers</b>	1 hr
<b>Completing SHRA Applications</b>	1 hr
<b>Survivor System Referral Process (currently VSP Access Points Only)</b>	2 hr
<b>Total Hours</b>	32 Hours







## Community Questions

1. How will these changes impact your workflow?
2. What support do you need to feel comfortable in administering this new assessment?
3. What changes do you like or dislike?

