Evaluating and Strengthening Coordinated Entry Systems to Foster Equity and Accurate Assessment of Vulnerability

Kathryn Kaminski

Nikole Thomas

Sasha Caine

Homebase

Introductions

Kathryn Kaminski

- *Continuum of Care Quality Improvement Manager*
- *Office of Supportive Housing*
- *County of Santa Clara*

Nikole Thomas

- *Policy Analyst*
- *Homebase*

Sasha Caine

- *Staff Attorney*
- *Homebase*

Homebase

Educational Objectives

1. Participants will be able to **design actionable evaluations** of coordinated entry systems to assess the extent to which they foster **equity and inclusivity in access to housing**

2. Participants will be able to **identify quantitative and qualitative sources of data** to pinpoint coordinated entry system strengths and opportunities for improvement

3. Participants will be able to develop strategies **to tap into diverse personal experience and professional expertise** in forming recommendations to strengthen coordinated entry – its efficiency, effectiveness, equitableness, and inclusivity
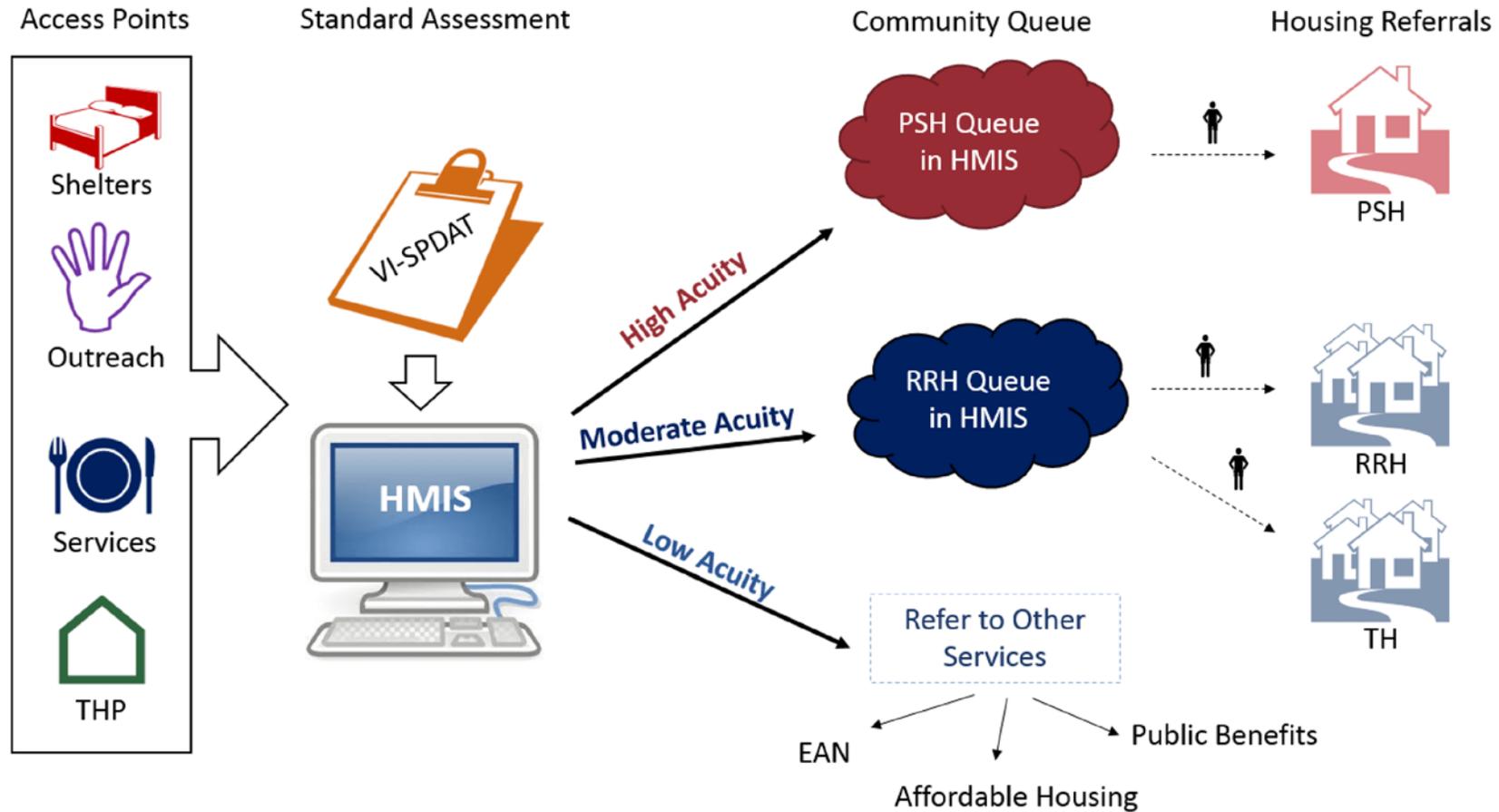
Homebase

Agenda

1. Why evaluate your Coordinated Entry (CE) system?

2. Overview of the Santa Clara County Coordinated Assessment System (CAS)

3. Quantitative Analysis: Methods and Findings

4. Qualitative Analysis: Methods and Resulting Recommendations
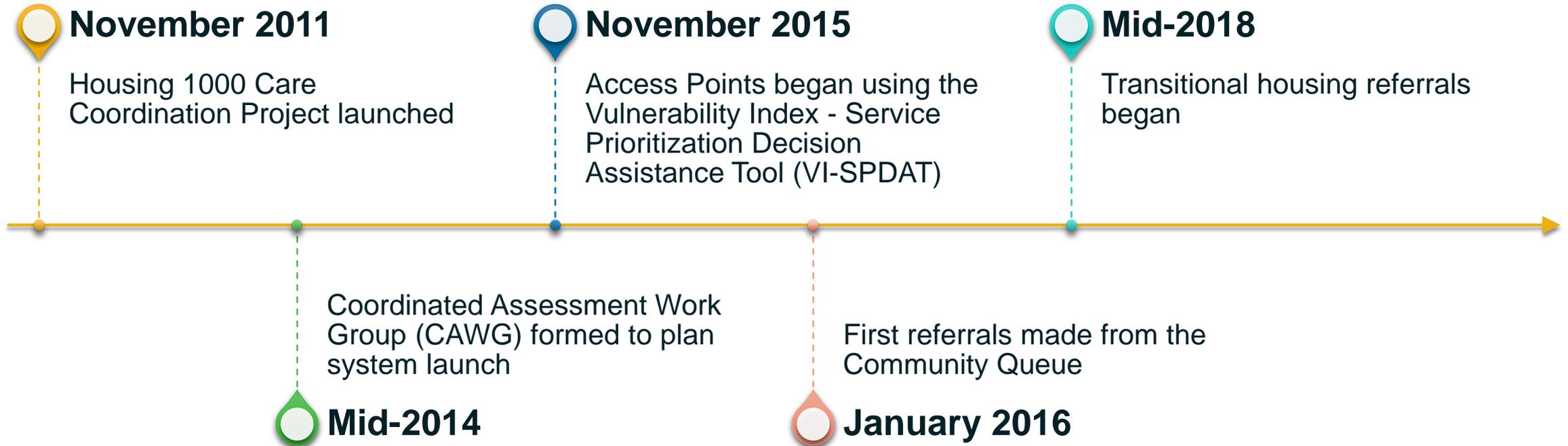
5. What's next?

Homebase

Why evaluate your CE system?

- **Compliance.** Does the CE process meet HUD's requirements and the CoC's design?

- **Effectiveness.** How effective is the CE process is in connecting people experiencing homelessness to appropriate referrals?
  - Gaps in current system
  - Assessment, prioritization, referral
  - Implementation consistency and access issues

- **Process.** How has the CE process been implemented? Is it currently operating in accordance with the CoC's established policies and procedures?
  - Access, assessment, prioritization, referral
  - Quality of collaboration
  - Governance and oversight
  - Funding and sustainability

Homebase

Santa Clara County Coordinated Assessment System

A Brief History of CE in Santa Clara County

November 2011

Housing 1000 Care Coordination Project launched

November 2015

Access Points began using the Vulnerability Index - Service Prioritization Decision Assistance Tool (VI-SPDAT)

Mid-2018

Transitional housing referrals began

Coordinated Assessment Work Group (CAWG) formed to plan system launch

Mid-2014

First referrals made from the Community Queue

January 2016

Why did the CAWG convene a Prioritization Subcommittee in 2019?

- We had been implementing the current system for three years

- We have enough data to review system-wide outcomes

- We frequently receive feedback from various groups/subpopulations and wanted to bring all groups together

- We value regular evaluation of how our system is serving clients

- We are required by HUD to evaluate the system annually

Homebase

Prioritization Subcommittee Quantitative Analysis

- Time from assessment to referral by score, household composition, and intervention type
- Demographic comparison of poverty, Point-in-Time Count, assessed, and referred populations
- Assessment score by age
- Age of assessed population vs referred population
- Disability status of assessed population vs referred population
- Self-reporting of disability at assessment vs enrollment
- Assessment score by total disabilities
- Recommended intervention by total disabilities reported at assessment
- Project enrollment by total disabilities reported at enrollment
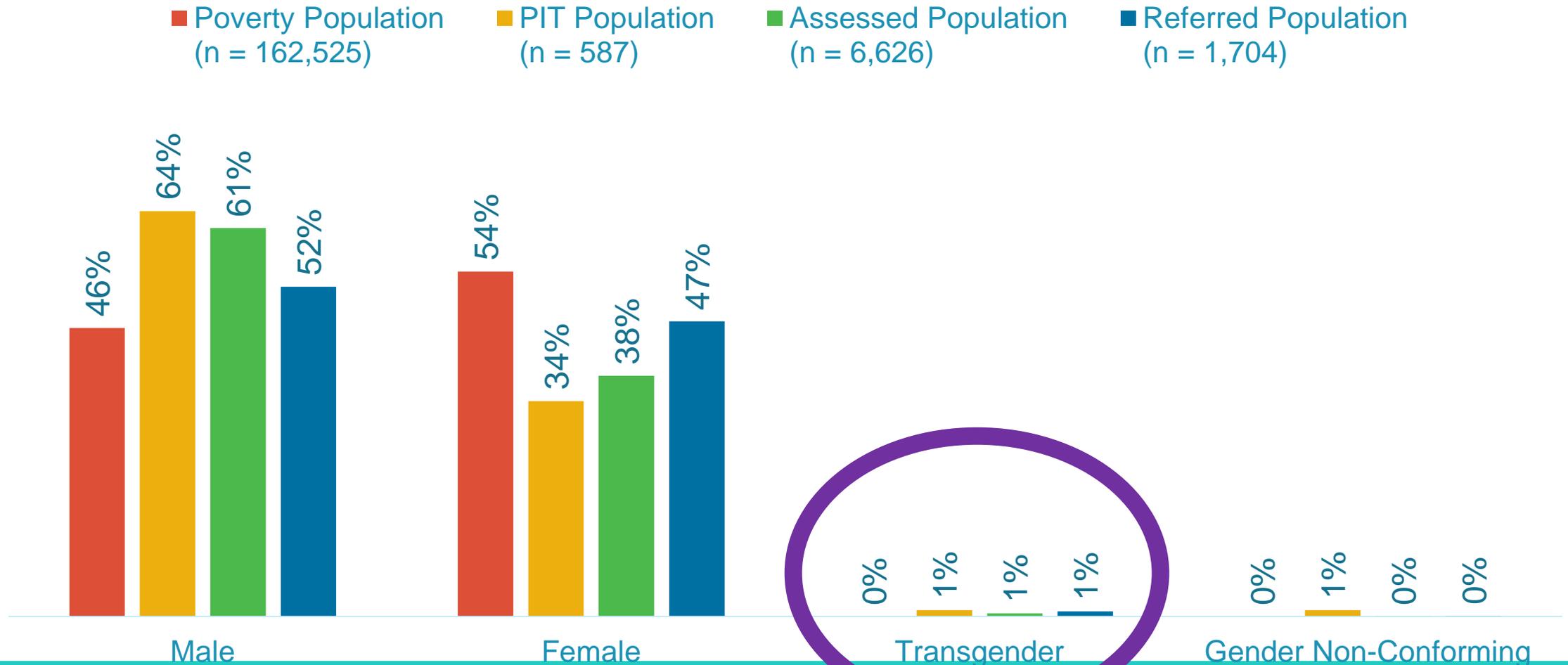
Homebase

Prioritization Subcommittee Quantitative Analysis Cont.

- Rate of referral denial

- Referral denial reasons

- Referral denial messages for referrals denied due to *Lack of Eligibility* or *Other Reason*

- Frequency of self-resolution by assessment score

- Demographic comparison of referred population vs denied referrals
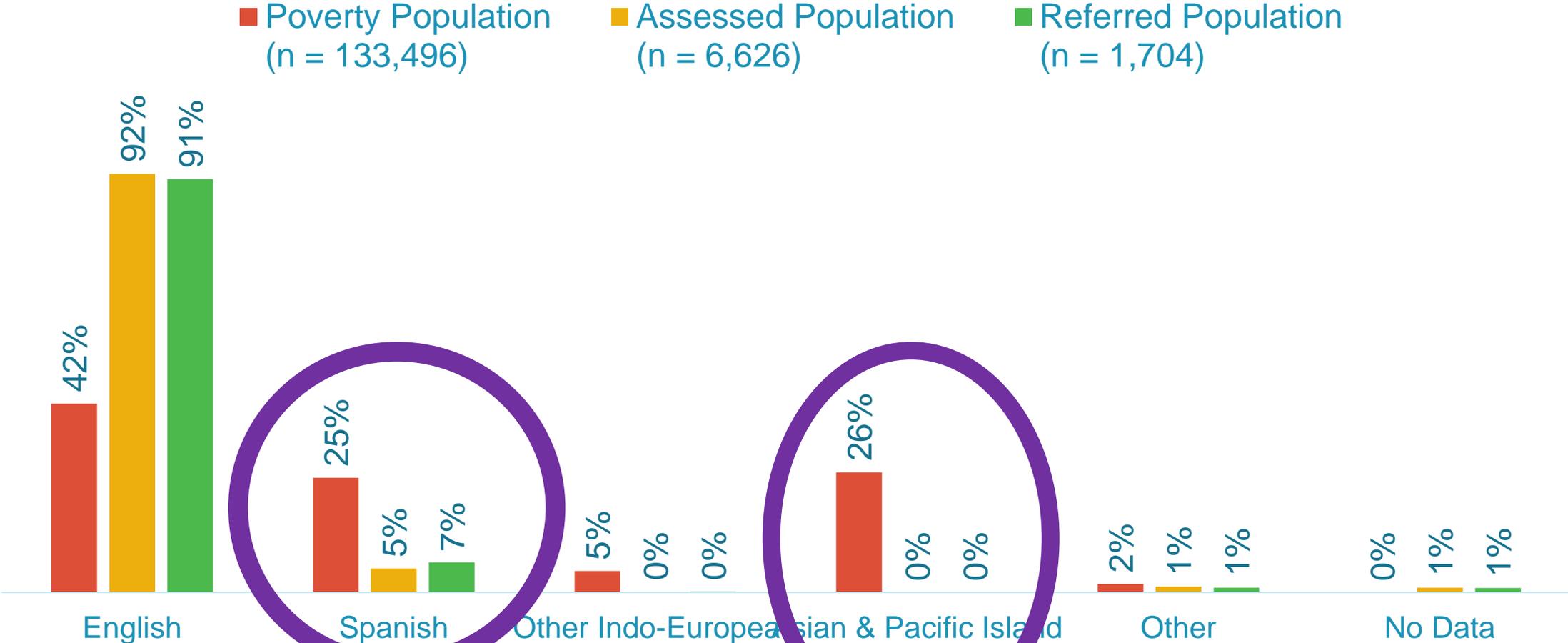
- Rate of referral denial by disability type

Homebase

Finding: Access and Gender Identity

- Poverty Population (n = 162,525)
- PIT Population (n = 587)
- Assessed Population (n = 6,626)
- Referred Population (n = 1,704)

Male: 46%, 64%, 61%, 52%
Female: 54%, 34%, 38%, 47%
Transgender: 0%, 1%, 1%, 1%
Gender Non-Conforming: 0%, 1%, 0%, 0%

Homebase

Finding: Access and Language

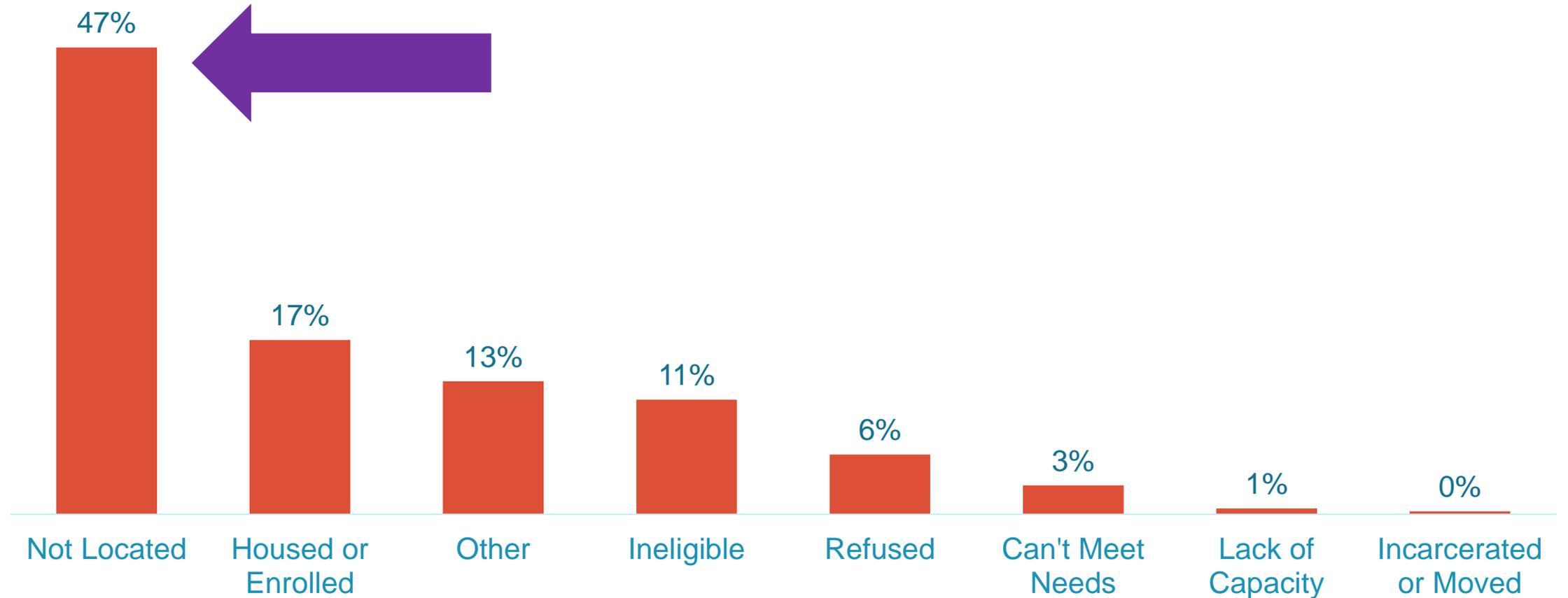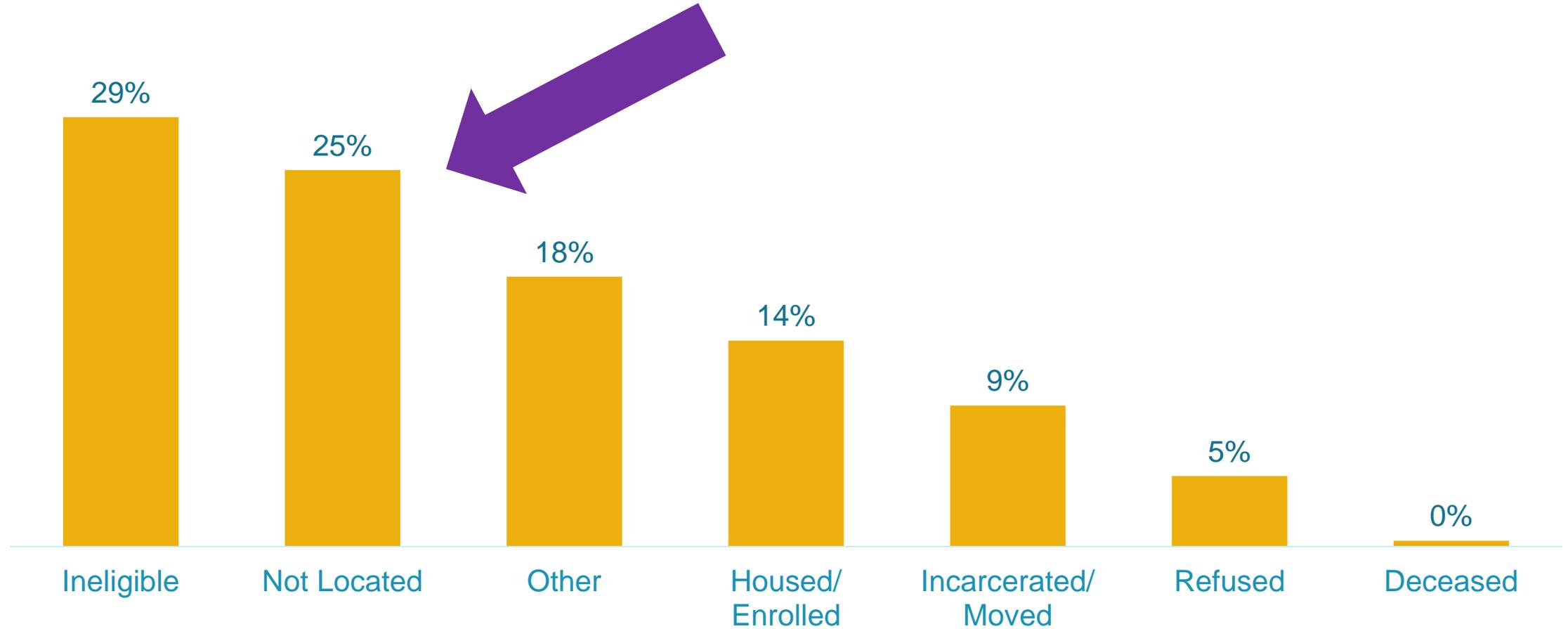# Finding: Assessment of Health Concerns
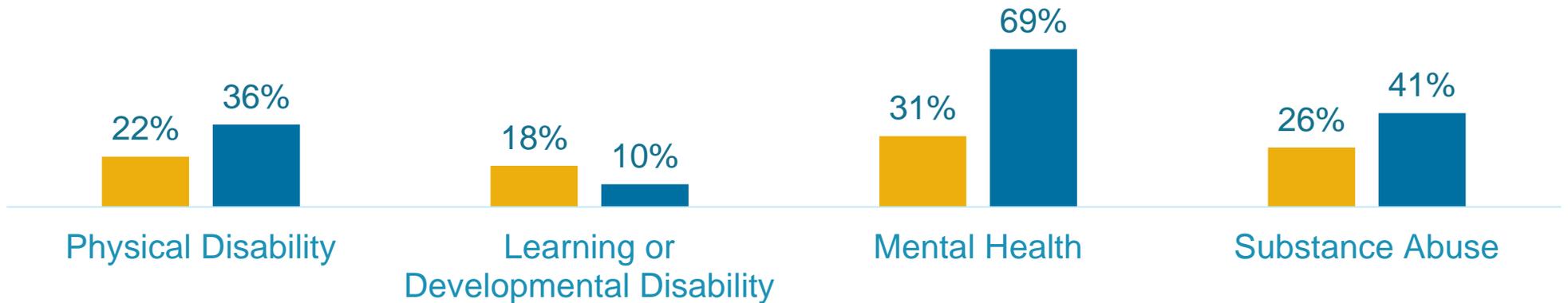
Finding: RRH Referral Denials

Finding: PSH Referral Denials

Goals for Strengthening the System

- **Access.** Increase system accessibility to more effectively reach:
  - LGBTQIA+ persons, particularly youth
  - Hispanic/Latinx persons; and
  - Asian and Pacific Islander persons.

- **Assessment and Prioritization.** More accurately assess vulnerability related to physical and behavioral health to:
  - Effectively prioritize the most vulnerable persons experiencing homelessness, and
  - Refer prioritized persons to supportive housing programs that will provide them the right level and types of assistance to regain housing stability.

- **Referral.** Support matchmakers and agencies receiving referrals in promoting consistency and fairness of referral processing to maximize consumer access to supportive housing.

Homebase

Qualitative Analysis Methodology

- 3 interviews with staff from community-based organizations and programs led by and specifically serving underrepresented communities

- 4 interviews with staff from health care and criminal justice systems

- 3 interviews with CAS matchmakers

- 1 focus group with individuals and families with lived experience

- 2 meetings with members of the Lived Experience Advisory Board, CAS matchmakers, and staff representing outreach, prevention, emergency shelter, supportive housing, reentry, health care, and criminal justice

- Web-based survey completed by 68 staff from housing and service provider agencies

Homebase

Strategies to Improve Access for LGBTQ Persons

- Hire and center **LGBTQ staff** to administer assessments, provide services, and manage programs

- Provide support in accessing affirming, inclusive, and respectful **public health services**

- Provide **cultural literacy and responsiveness** training, including confidentiality, use of pronouns, and available mental health resources

- Coordinate more **community support groups** to provide assistance and resources in overcoming discrimination, prejudice, and stigma

- Engage allies with established LGBTQ-specific, confidential, **safe spaces**

- Provide space where clients can disclose their gender identity whenever they are comfortable (rather than immediately) and make clear that their identities will be **accepted and respected**

Strategies to Improve Access for Hispanic/Latinx and Asian and Pacific Islander Persons

- Expand CAS access to **community-based organizations** led by and specifically serving Hispanic/Latinx and Asian and Pacific Islander persons

- Hire more **Latinx, Chinese, and Vietnamese staff** to administer assessments, provide services, and manage programs

- Ensure there are enough staff (including staff answering phones) fluent in **commonly spoken languages** and provide training accessible to that staff

- Develop an **accessible web presence** and post more informational flyers with information about existing resources, access points, and immigrants' rights

- Provide **cultural literacy and responsiveness training** to support staff in understanding diverse values, beliefs, and practices and include front desk staff in training

- Partner with **community centers and churches**

Homebase

Strategies to Strengthen Assessment and Prioritization

- Narrow the **pool of assessors** (e.g., by requiring a higher level of training)

- Include more persons with **lived expertise** of homelessness and clinicians in outreach teams

- Have a **problem-solving conversation** before/instead of administering the assessment

- Explore the possibility of providing an option to **self-administer** the assessment

- Provide respondents **time to reflect** and the opportunity to subsequently **adjust answers** and/or allow more frequent re-assessment – e.g., quarterly

- Provide more **flexibility** regarding when and where the assessment takes place

Homebase

Strategies to Strengthen Assessment and Prioritization Cont.

- Revisit the **assessment script** to provide a more accurate estimate of how long the assessment will take, incorporate safe space agreements, stress importance of candid responses, and highlight potential impact of not self-disclosing

- Develop and implement a **quality assurance process** to ensure consistent and informed administration of the assessment

- Explore **alternative or supplemental assessment tools**, such as an observation-based assessment, including a process for flagging potential misuse or a behavioral health scale or assessment of the respondent's level of functioning

- Partner with persons with lived experience of homelessness to develop and pilot **alternative formulations of assessment questions** to minimize re-traumatization, address racial and ethnic disparities, and more effectively identify physical and behavioral health conditions

Homebase

Strategies to Streamline Referral

- Provide a mandatory **introductory webinar training** on the CAS process and provider responsibilities for new housing program staff

- Expand the *Standard Location Practices for Community Queue Referrals* to include a written protocol detailing the workflow and **best practices for locating** referred clients

- Incorporate the *Standard Location Practices for Community Queue Referrals* into **onboarding process** for new housing program staff

- Make it **easier to determine in HMIS** whether someone has been assessed and whether they should be reassessed

- Track the processing and outcomes of transitional housing **referrals in HMIS**

Strategies to Streamline Referral Cont.

- Provide **consistent technical assistance** targeted to agencies based on identified patterns to minimize referral rejections

- Coordinate with the VA to track available **HUD-VASH resources in HMIS**

- Automate a process for obtaining the **community queue** (applying logic formulas and eliminating duplicates) in real-time

- Create a **client portal** to support housing programs in locating and communicating with referred clients

Homebase

What's next?

1. CAWG to prioritize recommendations based on estimated impact and lift

2. CAWG, OSH, and Homebase to develop implementation plans

3. CAS partners to implement strategies

Homebase

Questions?