Santa Clara County Continuum of Care Coordinated Assessment Working Group Meeting Notes August 12, 2021

In attendance:

- Elisha Heruty—Office of Supportive Housing
- Hilary Barroga— Office of Supportive
 Housing
- Leila Qureishi— Office of Supportive
 Housing
- Jimmy Chan-Office of Supportive Housing
- Steven Tong-Office of Supportive Housing
- Jazmine Wong—Office of Supportive
 Housing
- Laura Foster—Bill Wilson Center
- Sarinna Sejalbo—Santa Clara Family Health Plan
- Marti Phillips—Bitfocus

- Lesly Soto Bright—Bitfocus
- Trevor Mells—Bitfocus
- Shelby Booker—Covenant House
 California
- Beatriz Ramos—HomeFirst
- Alex Chavez—Abode Services
- Consuelo Collard—Catholic Charities
- Maria Magallanes—VA Palo Alto Health Care System
- Luis Bast- West Valley Community
 Services
- Patricia Nanez- West Valley Community Services
- Nikole Thomas—Homebase
- Joy Balinbin—Homebase

Coordinated Assessment System Data Update

- Leila from OSH provided data on the Coordinated Assessment System (CAS) Assessment (VI-SPDAT) data from November 15, 2015 – June 30, 2021
 - 44,650 total VI-SPDATs (includes duplicates)
 - 28, 951 unduplicated VI-SPDATs
 - 22,566 individual adults (78%)
 - 1,847 transition age youth (TAY)
 - Note: TAY (18-24-year-olds) are also assessed with Single Adult or Family VI-SPDATs. Because of this, TAY actually make up about 13% of all assessments.
 - 4,475 families with children
 - 63 justice discharges
 - 976 VISPDATS are included from the Confidential Queue
 - Intervention score range data from November 15, 2015 September 30, 2021
 - o 36% score within Permanent Supportive Housing (PSH) range
 - o 48% score within Rapid Rehousing (RRH) range
 - 500 households were referred directly to rapid rehousing programs and not through the traditional VISDPAT route. These direct referrals are mainly through veteran and CALWORKS family programs.
 - 16% score within Minimal intervention range
- There have been over 2,920 referrals to PSH and over 7,383 referrals to RRH to date.
 - \circ $\,$ 26% on our way to our goal of housing 20,000 households by 2025 $\,$
 - An average of 155 households per month have been placed in permanent housing in the past 12 months and an average of 272 households per month have taken the VI-SPDAT assessment for the first time.

TAY VI-SPDAT

- Nikole from Homebase provided an overview of TAY VI-SPDAT features
 - Guidance for Version 2: recommended scoring ranges and potential courses of action remain the same
 - Version 2 would take the same amount of time to complete as Version 1 (7.5-8.5 minutes, but usually takes more time)
- Clarifying questions and incorporating outside information
 - More flexibility and guidance from OrgCode: okay to rephrase questions or provide examples
- Self-reporting is still the primary way of gaining information, but case notes can be included and prepopulated into assessment scores, if you give the client the opportunity to correct the information and respect the answer they give you at the time.
- Elisha Heruty: Looked at moving to the TAY Version 2 before they realized that most of the changes were the same in Version 3 of the single and family VISPDAT. While the CoC agreed it would not be worthwhile to adopt the newer versions in whole considering they are in the process of exploring and developing a new tool altogether that will better meet local community needs, there are a few features that might be beneficial to adopt in the interim.
- New Section Two Questions (unique to TAY VISPDAT)
 - New Question: Have you and/or your family spent a lot of time without stable housing? Did you all move around a lot?
 - The CAWG endorsed adding this question
 - One change that CAWG endorsed for Single Adults: Aligning language to Version 3.0's condensing of the physical and/or mental health issues.
 - Reason: To lower stigma and to addresses disparities in self-reporting of these conditions.

• The CAWG endorsed this change

 Added "Car" as an option to single and family version, CAWG endorsed add this to the TAY VISPDAT to remain consistent.

• The CAWG endorsed adding this option

- New Question: High risk of long-term homelessness
 - If a client answered "YES" to question 13, 22, 27, and 29, the client will get an extra point due to predictors of long-term homelessness
 - This is Youth specific and doesn't apply to other versions
 - A CAWG member noted that adding a score of 1 may or may not be useful for prioritizing accurately but they would not want more young people to end up in the low end of PSH range, unsure what impact this change would have.
 - There was a question on if someone checked off only 3 out of 4 questions, they will not be qualified for 1 additional point?
 - Correct all points must be "YES", high threshold.
 - The CAWG decided more information was needed before voting on this option.
 Will explore how this question would impact youth currently on the queue.
 - Homebase to read Dr Rice's research and background information
 - Will convene a subcommittee once all of the data and research has been pulled.
- o CAWG agreed to adopt changes for the first three questions
 - Bitfocus prefer to make changes all at once, as long as we are clear on what the scoring implications are.

Customer Portal Assessment Management presentation and discussion

- Marti from Bitfocus led a presentation on the Customer Portal, facilitated a discussion around measuring the success of the portal, and gathered feedback and questions from the CAWG.
- The Customer Portal is in development in collaboration with Destination:Home, the Office of Supportive Housing, and Homebase
- Clients can complete and update ROIs, update their contact info in real time, share their location, schedule and view appointments with case managers, view project enrollment data, view assessments that have been completed (not necessarily details), upload documents for recordkeeping, access a resource directory, and view their community queue status
- Focusing on assessment management: Allowing clients to complete assessments on their own through the portal.
- Assessment Parameters and Use Cases
 - Do not use portal assessments for:
 - Assessments that must be conducted face to face
 - Include highly sensitive personal information (e.g. HIV Status)
 - Use portal assessments for
 - Status updates
 - Readiness assessments
 - Client satisfaction surveys
 - Registration forms
- Discussion: What ideas do you have for assessment management?
- There was a question regarding once the portal is live; how assessment features be added?
 - Depends on what level of assistance you're looking for. Need to make sure that the assessments will be available to the portal and providers can push them out. There is a lot of flexibility regarding new assessments