

**Santa Clara County CoC
Coordinated Assessment Work Group**
Meeting Minutes
April 13, 2017

Attendees: Arnold McKenney (HomeFirst), Sharon Miller (Cathedral Basilica of St. Joseph), Paul Tunison (LifeMoves), Sasha Drozdova (HomeBase), Hali Greenroad (LifeMoves), Lynn Morison (Abode Services), Elizabeth Medina (Family Supportive Housing), Laura Foster (Bill Wilson Center), Jessica Orozco (Office of Supportive Housing), Betty Rosas (Housing Choices), Bob Dolci (Office of Supportive Housing), Consuelo Collard (Catholic Charities), Ronny Nojopranoto (West Valley Community Services), Melody Boykins (Community Solutions), Valerie Kang (MidPen Housing), James Henderson (YWCA-SV), Shannon Robinson (Downtown Streets Team), Nadia Zazie (Downtown Streets Team), Christine Andes Cook (Bridges of Hope/Cathedral Basilica of St. Joseph), Regina Abadajos (Sunnyvale Community Services), Shelly Barbieri (Office of Supportive Housing), Jason Satterfield (Bitfocus), Hilary Barroga (Office of Supportive Housing), Leila Qureishi (Office of Supportive Housing), Erin Stanton (Office of Supportive Housing)

1. Welcome and Introductions

2. CoC Updates

- a. HMIS and UPLIFT Updates:** UPLIFT allocations can be requested starting May 1st. In May and June OSH will be working with partner agencies on new MOUs.
- b. Performance Management:**
 - i. The next performance management work group will be Thursday, May 25th (the group meets quarterly). The May meeting will focus on setting local benchmarks for FY16-17 for the HUD system performance measures and locally determined measures.
 - ii. The OSH and Bitfocus are preparing to submit HUD system performance measures for federal year 10/1/15-9/30/16 to HUD by May 31. This is the second submission of SPM data to HUD and is part of the CoC NOFA competition. You can help ensure complete and accurate data is submitted to HUD by reviewing your program's data quality.
- c. Upcoming CoC Meetings:**
 - i. **NOFA Committee** – Tuesday 4/18 1-3pm at The Health Trust
 - ii. **SPDAT Training** – Tuesday 4/18 – FULL
 - iii. **Performance Management** – Thursday 5/25 1-3pm

3. Coordinated Assessment Updates

- a. Translation of HMIS and VI-SPDAT Documents:** HMIS and VI-SPDAT documents will be translated into Spanish, Vietnamese, Tagalog, and Mandarin (Santa Clara County threshold languages). The documents that will be translated are: HMIS Client Consent, HMIS Intake, Client Privacy Statement, and the VI-SPDAT (all versions). VI-SPDAT

translations will include the introductory script and the additional local eligibility questions.

- b. Expired Referrals:** If you enter VI-SPDATs in HMIS you may have gotten notices that a client you referred to the community queue has been denied due to “referral time expired.” This is because Clarity automatically times out referrals after 360 days. If a client has been on the queue but has no activity in HMIS (program enrollments, service transactions, or “check-ins” on the referral) for 360 days, you will receive an email notification from Santa Clara County HMIS and the client will be removed from the community queue. At this time, we are still running reports of all individuals with VI-SPDATs in HMIS when we make referrals (not just those on the community queue), **so no one is missing out on a referral due to their VI-SPDAT expiring. If this happens to one of your clients, here’s what you should do:**
 - i. If you are in touch with the client and they are willing, do a new VI-SPDAT and refer again to the queue. We recommend re-doing the VI-SPDAT after a year because circumstances (and therefore the score) may have changed.
 - ii. If you are not able to re-do the VI-SPDAT, but you believe the client is still homeless and in the area you can re-refer them to the queue by going to the assessments tab and clicking on the “eligibility” button next to the assessment score (then scroll to the bottom of the page and click refer to community queue).

- c. Policies and Procedures:** HomeBase and OSH are working on updating the coordinated assessment policies and procedures. Updates focus on alignment with the HUD notice that came out in January. HomeBase is working on proposed updates now and will bring a draft document to the Work Group in May for review and discussion. One addition will be a policy for addressing clients that were referred to rapid rehousing programs, but once in those programs are determined to need permanent supportive housing.

- d. VI-SPDAT Subcommittee Recommendations:**
 - i. The requirement to participate in local VI-SPDAT training will go into effect on July 1st. OSH will provide regularly scheduled trainings, including refresher trainings.
 - ii. OSH is in the process of drafting Access Point Agency and Assessor agreements, which will spell out guidelines for conducting the VI-SPDAT. Agreements will also be implemented in July.
 - iii. OSH continues to investigate the legal requirements for incorporating the Silicon Valley Triage Tool into matchmaking and prioritization for coordinated entry. We will bring updates back to the work group when we have more information.

- e. New Versions of the VI-SPDAT:** OrgCode has two new versions of the VI-SPDAT:
 - i. Prevention VI-SPDAT: targets households at imminent risk of homelessness and prioritizes those most in need of homelessness prevention assistance. There are versions for families and individuals. In Santa Clara County we will pilot this tool with the family homelessness prevention project that Destination: Home and the EAN agencies will begin in July.

- ii. Justice Discharge VI-SPDAT: targets currently incarcerated individuals that will be homeless upon their release from jail or prison. We just learned about this tool and plan to have teams that work in the jails use it with currently incarcerated individuals before they are released.

4. Quarterly Review of Coordinated Assessment Implementation

VI-SPDAT Assessments:

On a quarterly basis the Work Group takes a deeper look at coordinated assessment implementation to date. As of March 31st:

- 8,488 VI-SPDATs
 - o 8,368 in HMIS
 - o 120 on confidential queue
- 7,180 unduplicated households
 - o 7,060 in HMIS
 - o 120 on confidential queue
 - o 6,042 completed the single adult VI-SPDAT
 - o 288 completed the transition age youth (TAY) VI-SPDAT
 - o 850 completed the families VI-SPDAT

Note that an additional 363 TAY completed other versions of the VI-SPDAT:

- 299 TAY have done the adult VI-SPDAT
- 64 TAY have done the families VI-SPDAT

We look at demographics of individuals/households that have completed the VI-SPDAT to see if are reaching all populations of people who are homeless or if we are in some way limiting access to a particular group. Demographics of unduplicated individuals/households that have completed the VI-SPDAT remain pretty consistent. They also align with data from the 2015 PIT count, with some small discrepancies:

- *Household type:*
 - o 12% of VI-SPDATS are for families with children and 88% for individuals. This breakdown is exactly the same as it was in July, October, and January. It is a higher percentage of households than counted in the PIT (5% of households), however we believe families are generally under counted in the PIT so this makes sense.
- *Age of Head of Household:*
 - o Only 9% of VI-SPDATs were completed by transition age youth, compared to 12% in the PIT. The percentage has gone up since Bill Wilson Center began doing the TAY VI-SPDAT through their outreach and drop in center, but it is still a little low.

We continue to see large numbers of VI-SPDATs completed each month. The percentage of VI-SPDATs that are duplicates (i.e. the household already has at least one VI-SPDAT in the system) is growing since we passed the one year mark. We encourage households that are still homeless to re-do the VI-SPDAT after one year. We are now averaging around 75% of VI-SPDATs completed each month are for a new individual or household. Last year we were in the 80-90% range for most of the year.

Since implementing coordinated entry in late 2015 we've averaged 527 new VI-SPDATs and 445 new unduplicated households each month. We've trended upward in numbers of both each month – in the last three months we've averaged 655 new VI-SPDATs and 489 new unduplicated households per month.

The distribution of VI-SPDAT scores remains consistent with what we've seen throughout the last year, with the majority falling in the rapid rehousing range and the most common scores being in the lower end of the RRH range. To date, 33% of VI-SPDATs in HMIS scored in the PSH range, 47% scored in the RRH range, and 20% scored in the minimal intervention range. However, among individuals that completed the TAY VI-SPDAT, a higher percentage scored in the PSH range.

Permanent Housing Referrals:

As of March 31st we had made 969 referrals to 875 unduplicated households – remaining consistent at 12% of unduplicated households that have completed a VI-SPDAT.

When looking at the most recent outcome for the 875 unduplicated households that received a referral:

- 51% enrolled in the program
- 24% pending
- 25% denied

The percentages in the pending and denied categories have both increased since we last looked at these in November. The pending number may be due to timing – it includes people who received referrals just before the end of the reporting period.

51% of households that received a referral enrolled in the permanent housing program. Of those, 67% are still active in the program. 41% are housed and 59% are in the housing search phase. 33% of households had already exited the program prior to the end of the reporting period (primarily from rapid rehousing programs). 53% exited to a permanent housing destination and 47% exited to an unhoused or temporary destination.

Overall, 25% of households that received a referral have been denied. We'd like to get that percentage down, so it's important to understand why households are denied. Reasons for referrals to be denied include:

- 32% - household not found
- 27% - household was ineligible for the program they were referred to (the most common reason is not meeting the chronic homeless definition for PSH programs)
- 14% - household self-resolved their homelessness
- 5% - household declined services
- 4% - moved out of the area, primarily out of state.

5. Peer Learning Topic

A new idea for future work group meetings is to take advantage of the experience and knowledge of the folks in this room to help us learn from each other how we can each do a better job of implementing coordinated assessment. A lot of us face common challenges - for example, how to talk about the VI-SPDAT, how to keep people moving through the VI-SPDAT so that it can be done efficiently, how to

locate clients that have been referred to a program – and we can learn from each other how to address those challenges.

The group selected “Locating and Engaging Clients” as the topic for the first Peer Learning session at the May Work Group meeting.

6. Check-Out

The next Coordinated Assessment Work Group meeting will be May 11, 2017 from 1-3pm at The Health Trust.