



CoC Advisory Board Agenda

Wednesday, January 10, 2018 8-9:30 AM

Sacramento Steps Forward, 1331 Garden Highway, Sacramento, CA 95833 - VCR Room (2nd Floor)

I. Welcome & Introductions:		
II. Review and Approval of Minutes		
III. Chair's Report		
IV. SSF CEO's Report		
V. New Business:		
A. Item: Coordinated Entry System Compliance: Recommended Policies & Updates	Presenter(s): CES Committee Co-Chair, John Foley & Michele Watts	Time: 35 minutes
B. Item: Performance Review Committee: FY2018 NOFA Competition Process and Timeline Revisions	Presenter(s): Michele Watts	Time: 20 minutes
C. Item: Draft System Map for Review	Presenter(s): Nick Lee	Time: 15 minutes
VI. Follow-Up Items		
VII. Announcements		
VIII. Meeting Adjourned		

Next Meeting – February 7, 2018

Please note that today's meeting is being recorded and the digital file is available upon request. To request a copy, please contact SSF CoC Coordinator at kcasarino@sacstepsforward.org or (916) 993-7706.



CoC Advisory Board Minutes

Wednesday, December 13th, 2017 8-9:30 AM

Sacramento Steps Forward, 1331 Garden Highway, Sacramento, CA 95833 - VCR Room (2nd Floor)

MEMBERS PRESENT: Joan Burke, Bill Knowlton, Emily Bender, Sarah Bontrager, Cindy Cavanaugh, Cathy Creswell, Lisa Culp, John Foley, Katie Feeny, Emily Halcon, Erin Johansen, Patty Kleinknecht, Lt. Dan Monk, Jonathan Porteus, Sarah Thomas

GUEST(S): Angela Upshaw, Kate Hutchinson, Londell Earls, Zach Kihm, Nathan Guerra, Noel Kammermann, Natalie Siva, Brian Pyne, Mike Jaske, Suzi Dotson, Nick Mori, Lacey Mickleburgh

MEMBERS NOT IN ATTENDANCE: Beth Hassett, Katherine Cooley, Dion Dwyer, Jason Henry, Todd Henry, David Husid, Olivia Kasirye, Amani Sawires Rapaski, Chris Ware, Holly Wunder Stiles

STAFF: Ryan Loofbourrow-CEO, Michele Watts-Chief Program Officer, Nick Lee-Chief Operating Officer, Ben Avey-Chief Public Affairs Officer, Chris Weare-Data Analytics and Research Manager, Stacey Fong-Contracts Analyst, Kate Casarino-CoC and Contracts Coordinator

Call to Order: Bill Knowlton 8:07am, Quorum met at 8:08am.

I. Welcome & Introductions by: Joan Burke

II. Review & Approval of Prior Meeting Minutes: Patty Kleinknecht 1st, John Foley 2nd. MSC.

III. Chair's Report:

Joan turns over report to Emily Halcon

E. Halcon. reports on the City's Triage Shelter, located on Railroad Drive, run by Volunteers of America. It has the capacity to hold up to 200 people. So far they have filled 50 spots since December 8th, and anticipate having full capacity by the end of December. The Triage Shelter provides supportive services on site (Pathway's whole person care), limited storage for guests, pets as well as occasional veterinarian services, showers, case management, and 3 meals a day. There is no length of stay required, however, the lease for the shelter ends March 31st. The shelter is for adults 18+. Emily H. states that the shelter is not open to the public, which means visitors and observers are not allowed. The shelter is meant to provide privacy.

C. Cavanaugh reports on the County Winter Sanctuary, run by First Step Communities and began its operation November 20th. It has been at capacity at 100 guests. This Winter Sanctuary program ends in early April. The County is also issuing their RFP for the permanent full service rehousing shelter which will be on a scattered-site basis this week.

IV. SSF CEO's Report:

R. Loofbourrow reports on the chamber study mission he and S. Dotson took in Austin during the last Advisory Board Meeting. They took a bus tour provided by ECHO, SSF's Austin counterpart, to view some of the housing options provided by their continuum of care. They also went to Community First, which is a small home community. It was a good chance to talk about our community. Austin's CoC and Sacramento's CoC are comparable, though Sacramento's homelessness has increased. Went to San Antonio to look at Haven for Hope and talked to their CoC lead called SARA and are in communication comparing notes on how they do their work and how they run their CoC.

SSF is working on a Leadership retreat for SSF Board and the Advisory Board Executive Committee set for January.

There will be an annual report produced in March 2018 that will show a summary of the work SSF has done in the past year.

V. New Business

A. Item: Coordinated Entry System HUD Compliance Updates
Presented by John Foley, CES Committee Co-Chair

J. Foley: HUD on a national level tries to give guidance to continuums all over the country of the best ways to provide services to persons experiencing homelessness. Eventually they start setting goals, and then requirements. In the Coordinated Entry system, HUD is recommending several things. The basic idea is that people experiencing homelessness should have the chance to find out what services are available in a way that is easy to understand, easily accessible, and non-discriminatory. The CES committee has been working on this for a while and we haven't gotten to a point where we're doing a great job. Next month, the CES will need to have something in place. The Board will have to vote on approving a few items.

Handouts: HUD CES Compliance Self-Assessment Checklist and Memo

Access: By next month 211 will be fully up and running and able to receive calls and refer to a list of access points.
Prioritization: Still working on the RRH piece. There is a policy on how we operate referrals now, but will be discussed next month.
Evaluation: still in the works

M. Watts: Prioritization - HUD provided a descriptive guideline on what they wanted. HUD would like to see more CH prioritization within RRH.
Developed a plan to work closely with the RRH Collaborative to start with, which will then be brought up to the CES, then to the Advisory Board. The plan will cover the approach on how to serve the clients that HUD wants to see us serve. There is a lot of data and national and local best practices to consider before any decisions are made. The timeline is to have a plan by mid 2018 and bring it to the Advisory Board.
Referral: There are elements of referral that we need Advisory Board support in, for example denials, specifically denial of provider of person experiencing homelessness.

R. Loofbourrow: C. Weare is working with King County and how they are able to access data through dashboard and is looking into a software platform that will give us the same ability.

Coordinated Access is currently for anyone experiencing homelessness, though referrals are specifically CoC funded programs and ESG programs. SSF is currently working on expanding Coordinated Access.

J. Foley: The idea of 211 is for access sites to be fully staffed and able to do assessment. The ideal is for every individual to be assigned case management until they are housed, but there is no funding for that.

N. Lee: Pre-pilot program started in January with a walk-up site at the library downtown. Gathered a lot of feedback, what were the accomplishments, what were the failures? Wellness and Recovery South participated in the alpha test where one SSF staff took 6 assessments per week. We would receive a phone call, which would then follow a checklist of methods to divert, then a referral to a designated point of entry, and the same staff would go to the access point and would conduct the VI-SPDAT. SSF then realized that just doing the assessment would bring us back to where we started years ago, which is not how we need access points to function..

The Beta Phase will be implemented in the next few weeks, once more access sites are up and running. Francis House has offered to participate in this Beta Phase where we will be testing out the "same-day site-based" scheduling.

Acknowledgement is made that Coordinated Entry is still confusing for consumers, especially because there are several "front doors."

Ask: A map of what the system looks like by way of a flow chart, beginning with 211.

R. Loofbourrow offers to present a map with what the flow chart looks like currently, though it most likely will look different in a few months.

E. Johansen: Would like to create a system that works together in the community, map how everything fits together, so that all providers understand how to work together.

B. Performance Review Committee

R. Loofbourrow reminds everyone that the Performance Review Committee's purpose is to assure the scoring tool is completed and approved, staying focused on the NOFA competition process, and having non-conflicted members apply the scoring tool once the NOFA has been released.

Handouts: Sacramento CoC FY2018 HUD NOFA Competition Timeline

M. Watts: Working backward with a tentative NOFA release of June, the PRC is working to get the Scoring Tool approved for a Mid-Year review in late January so that the PRC is able to look at the results in the February meeting. The

PRC has a lot of work to do before it is approved, so a second Advisory Board meeting in the month of January may be necessary.

The PRC is looking to finalize the Tool in April so that information can be collected well before the NOFA release. SSF is working on a template for collecting full budget information from providers to develop a cost related measure for the actual competition, though this will not be asked for during the Mid-Year.

Chris W. is looking at different methodology so that we can have a better “apples-to apples” comparison.

E. Johansen: Is the cost analysis a HUD requirement, or is this a local inquiry?

S. Bontrager: The difference between the Mid-Year Review and the Final Process, is that the Mid-Year is to make sure that the data looks good and that there are no major errors. It’s not going to give you the score that the project would get during the NOFA competition, though it will give a snapshot of what a project would get, given that the tool is heavily based on the data that is collected.

The timeline reflects a Mid-Year review that will be effectively for the final NOFA competition.

J. Foley: was under the impression that the the Mid-Year will reflect where projects will place in Tier 1 and Tier 2 and so that providers can reflect on how they can make changes to their program.

C. Weare’s work with the PRC: Concerns: timeliness of access to the data, and contexts of the data, and getting budget information. All these things are top priorities. Have been talking to database provider about getting full backend access so that we can begin writing a performance report. With full access to the data, a quarterly update would be available throughout the year. HMIS has the capability for providers to input budget information, but it has not been implemented yet and will not be available at the end of January for the Mid-Year review.

Hoping to come back with a mid-year tool during the next board meeting

C. Rapid Rehousing Length of Stay Performance Targets

Handout: Rapid Rehousing Length of Stay Performance Targets

Since the National Best Practice length of stay for RRH does not seem to be working in our community, the Rapid Rehousing Collaborative is currently looking into similar communities to help the CoC find a length of stay that works.y. Because the 120 days is not a HUD standard it is suggested that we use some flexibility establishing one that works for our community.

S. Dotson comments that it is not only about RRH performance standards are, but what we need in our community; if we lose RRH program funding, how are we making sure we have something to fall back on? S. Dotson also comments that we do not have a model of what an RRH graduate looks like, which would be helpful guide for RRH participants. It is noted that we should look at the RRH program that achieved the National Standard length of stay.

VI. Follow-Up Items:

This Item was not discussed due to time constraints and lack of outstanding follow-up items.

VII. Announcements:

J. Foley - Members of the Advisory are terming out in March, including all executive committee. What is the plan and system for addressing this?

The Executive Committee will meet to address this issue.

C. Cavenagh - DHA has Request for Proposals is out this week, Number Four request for two qualifications for the Initiative Flexible Supportive Rehousing Program (intensive case managers and a property related service provider) for a \$4.5 million grant. Number Three is for a Full Service Rehousing Shelter (Shelter Operations and one for Rehousing) for a \$2.6 million grant.

J. Porteus: Deployed second street nurse, who will be working full time in midtown/downtown.

S. Dotson: Winds Shelter for OES will be opening December for 20 TAY beds. Participants may be referred through the drop in center.

VIII. Meeting Adjourned: 9:35am



SACRAMENTO STEPS FORWARD

Ending Homelessness. Starting Fresh.

TO: Sacramento CoC Advisory Board

FROM: Sacramento Steps Forward (SSF) Coordinated Entry System Department
& Coordinated Entry System (CES) Committee

DATE: January 5, 2018

SUBJECT: Coordinated Entry System Compliance: Recommended Policies & Updates

SSF and the CES Committee have focused on the requirements set forth in the HUD CES Compliance Self-Assessment Checklist since early this year. In October 2017, staff presented the committee with a memo (attached) outlining elements of the Compliance Checklist for which specific tasks needed to be completed in order to meet the January 23, 2018 compliance deadline. This memo presents policies recommended by the CES Committee for your approval, as well as several updates, since the October 2017 memo. Specifically, two policies pertaining to CES Evaluation recommended for approval by the CES Committee are presented below. Additionally, updates on rapid rehousing prioritization, potential additional referral policies, and housing conferencing are also presented below.

Recommended Actions

➤ Sacramento CES Evaluation

At its January meeting, the CES Committee approved recommendation of the following Evaluation Policy for approval by the CoC Advisory Board.

- The CoC will engage in ongoing data collection on the performance of the CES. Data collected will be formally reviewed quarterly and formal policy and procedure updates based on the evaluation will occur no less than annually.
- Data collected will include the elements currently included in the monthly CES Report (see attached list of report metrics and a sample report), as well as (a) referral timelines for each step in the process; (b) additional metrics to be developed to ensure comprehensive evaluation of the system, including returns to homelessness; (c) participant satisfaction surveys; and (d) quarterly stakeholder meetings to collect input from all participating agencies.
- Written CES Evaluation policies and procedures will be developed to specify how project participants will be selected to provide feedback.
- Participant data collected in HMIS is protected by the CoC's Privacy & Security Plan protocols and will only be reported in aggregate. Data collected outside of HMIS, such as through participant surveys, will be collected anonymously/no identifying information will be requested on survey instrument(s).
- The mechanism for quarterly review of the data shall be a CES Evaluation Committee convened by the Advisory Board.
- The CES Evaluation Committee will report to the Advisory Board at least semi-annually.
- Reports and other materials prepared for the CES Evaluation Committee will be posted on the SSF website.

The CES Committee will discuss the particulars of CES Evaluation Committee membership at its February meeting and will return with a recommendation for the Advisory Board in March.

➤ Independent Third Party Evaluation

At its January meeting, the CES Committee also approved a recommendation to the CoC Advisory Board that as resources become available in the future, an independent third party evaluation of the Coordinated Entry System should be conducted.

Updates

➤ Rapid Rehousing (RRH) Prioritization

Based on SSF's reading of HUD's guidance on this issue, reinforced by our CES TA provider, the Sacramento CoC still needs a plan to move toward prioritizing at least a portion of our RRH for households with severe service needs. This discussion will take place in the coming months, with the goal of finalizing a plan for phasing in prioritization of needier households by mid-2018.

The intent of this process is to develop a RRH prioritization policy that balances local needs and resources with HUD's expectations. Planning inputs and priorities will include a clear understanding of HUD's policy direction, national and local best practices, what local data tells us, and a commitment to ensuring responsiveness to client and program needs. To ensure the policy developed reflects the realities of how our RRH projects operate and what their needs are, CES staff will consult the Rapid Rehousing Collaborative of all RRH providers in the Sacramento CoC on an ongoing basis. The RRH Collaborative will continue to play a role during the implementation phase, serving as a "learning community" as we monitor impacts and make adjustments along the way. CES staff will serve as the formal link between the Collaborative and the CES Committee and will be responsible for ensuring both groups receive the information they need to make recommendations and decisions (HUD guidance, local data, research, etc.).

Regular updates will be provided at the CES Committee and Advisory Board levels. A final policy should be developed for approval by September 2018.

➤ Potential Additional Referral Policies

The CES currently has a variety of referral policies and procedures in place, concerning how a referral moves through the system and how referral outcomes are communicated to SSF and to participants. At its November meeting, the CES Committee considered adding policies around the time each step in the referral process should take and how to respond to multiple provider denials of referrals. After in-depth discussion, a few options were considered but additional data is needed to select the appropriate one on which to set informed policies. Therefore, referral process timelines and all referral outcomes will be monitored and evaluated by the CES Evaluation Committee (discussed later). Once sufficient data on typical referral timeframes has been reviewed, consideration of additional policies will be revisited.

Regular updates will be provided at the CES Committee and Advisory Board levels. Additional referral policies may be proposed on an ad hoc basis later this year or in the annual Policies and Procedures review discussed later.

➤ Housing Conferencing

At its December meeting, the CES Committee discussed "Case Conferencing," a best practice where case workers and others working with homeless households provide additional information to supplement assessment results for improved matching of participants to available placements. This is a recommended, not required, CES Compliance element, but it is a practice this community has been discussing for quite some time. See the Housing Conferencing memo (attached) for additional details on what the CES Committee discussed.

Following discussion, at its December meeting the CES Committee agreed to pilot a Housing Conferencing model for housing placements with the TAY provider community and the Veteran provider

community. These provider communities are already working together and seem like a good place to start. Staff are charged with working with these providers to coordinate the effort. As the pilots proceed, staff and agencies participating will report back to the committee. The ultimate goal is to take lessons learned with these subpopulations to design Housing Conferencing for the rest of the population.

Current Data Presented in the Monthly Coordinated Entry System Report

SINGLES/INDIVIDUALS COMMUNITY QUEUE CHARTS

- Community Queue (CQ) Activity (Single Households) Chart: Presents the change in the active CQ for single adults from one month to the next, including inflow, and outflow, by VI-SPDAT score bands of Recommended Housing Type (Diversion 0-4, RRH/TH 5-9, PSH 10+)
 - o Total active CQ at the end of the preceding month
 - o In-flow through new VI-SPDATs
 - o In-flow through re-assignment to the CQ of previously assessed individuals that had been exited from the CQ for any reason
 - o Outflow through being housed through CES
 - o Outflow through assisted resolution
 - o Outflow through being removed for no contact in 90+ days
 - o Total active CQ at the end of the report month

- Single Households Housed through CES Chart: Presents the number of individuals housed in PSH, RRH, and TH by the CES each month by subpopulation categories
 - o Veterans housed in PSH, RRH, TH
 - o TAY housed in PSH, RRH, TH
 - o Chronic (non-TAY, non-Vet) housed in PSH, RRH, TH
 - o Non-Chronic (non-TAY, non-Vet) housed in PSH, RRH, TH
 - o Total housed in PSH, RRH, TH

- Breakdown of CQ Based on VI-SPDAT Score Active Single Households: Recommended Housing Intervention Chart- Presents the active CQ at the end of the report month by subpopulation and Recommended Housing Intervention (Diversion 0-4, RRH/TH 5-9, PSH 10+)
 - o Total Veterans on active CQ by Recommended Housing Intervention Type
 - o Total TAY on active CQ by Recommended Housing Intervention Type
 - o Total Seniors (55+) on active CQ by Recommended Housing Intervention Type
 - o Total Chronic (non-Vet, non-TAY, non-Senior) on active CQ by Recommended Housing Intervention Type
 - o Total Remaining Population on active CQ by Recommended Housing Intervention Type
 - o Total on active CQ by Recommended Housing Intervention Type

- Breakdown of CQ Based on VI-SPDAT Score Active Single Households: By Severity of Service Need Chart- Presents the active CQ at the end of the report month by subpopulation and Severity of Service Needs (Mild 0-6, Moderate 7-13, Severe 14+)
 - o Total Veterans on active CQ by Severity of Service Need
 - o Total TAY on active CQ by Severity of Service Need
 - o Total Seniors (55+) on active CQ by Severity of Service Need
 - o Total Chronic (non-Vet, non-TAY, non-Senior) on active CQ by Severity of Service Need
 - o Total Remaining Population on active CQ by Severity of Service Need
 - o Total on active CQ by Severity of Service Need

FAMILIES COMMUNITY QUEUE CHARTS

- Community Queue (CQ) Activity (Family Households) Chart: Presents the change in the active CQ for family households from one month to the next, including inflow, and outflow, by VI-SPDAT score bands of Recommended Housing Type (Diversion 0-4, RRH/TH 5-9, PSH 10+)
 - o Total active family CQ at the end of the preceding month
 - o In-flow through new VI-SPDATs
 - o In-flow through re-assignment to the CQ of previously assessed families that had been exited from the CQ for any reason
 - o Outflow through being housed through CES
 - o Outflow through assisted resolution
 - o Outflow through being removed for no contact in 90+ days
 - o Total active CQ at the end of the report month

- Family Households Housed through CES Chart: Presents the number of family households housed in PSH, RRH, and TH by the CES each month by subpopulation categories
 - o Veteran families housed in PSH, RRH, TH
 - o TAY families housed in PSH, RRH, TH
 - o Chronic (non-TAY, non-Vet) families housed in PSH, RRH, TH
 - o Non-Chronic (non-TAY, non-Vet) families housed in PSH, RRH, TH
 - o Total families housed in PSH, RRH, TH

- Breakdown of CQ Based on VI-SPDAT Score Active Family Households: Recommended Housing Intervention Chart- Presents the active CQ at the end of the report month by subpopulation and Recommended Housing Intervention (Diversion 0-4, RRH/TH 5-9, PSH 10+)
 - o Total Veteran families on active CQ by Recommended Housing Intervention Type
 - o Total TAY families on active CQ by Recommended Housing Intervention Type
 - o Total Seniors (55+) families on active CQ by Recommended Housing Intervention Type
 - o Total Chronic (non-Vet, non-TAY, non-Senior) families on active CQ by Recommended Housing Intervention Type
 - o Total Remaining Population of families on active CQ by Recommended Housing Intervention Type
 - o Total families on active CQ by Recommended Housing Intervention Type

- Breakdown of CQ Based on VI-SPDAT Score Active Family Households: By Severity of Service Need Chart- Presents the active CQ at the end of the report month by subpopulation and Severity of Service Needs (Mild 0-6, Moderate 7-13, Severe 14+)
 - o Total Veteran families on active CQ by Severity of Service Need
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 - o Total families on active CQ by Severity of Service Need

REFERRAL OUTCOMES CHARTS & TABLE

- Outcomes for CES Referrals Chart- Presents outcomes for the referrals requested by providers in the report period by project type (PSH, RRH, TH)
 - o Referrals requested by PSH, RRH, TH
 - o Referrals sent by PSH, RRH, TH
 - o Participants enrolled by PSH, RRH, TH
 - o Provider denial by PSH, RRH, TH
 - o Participant refused by PSH, RRH, TH
 - o Appointment rescheduled by PSH, RRH, TH
 - o Participant no show by PSH, RRH, TH
 - o Referral outcome pending by PSH, RRH, TH

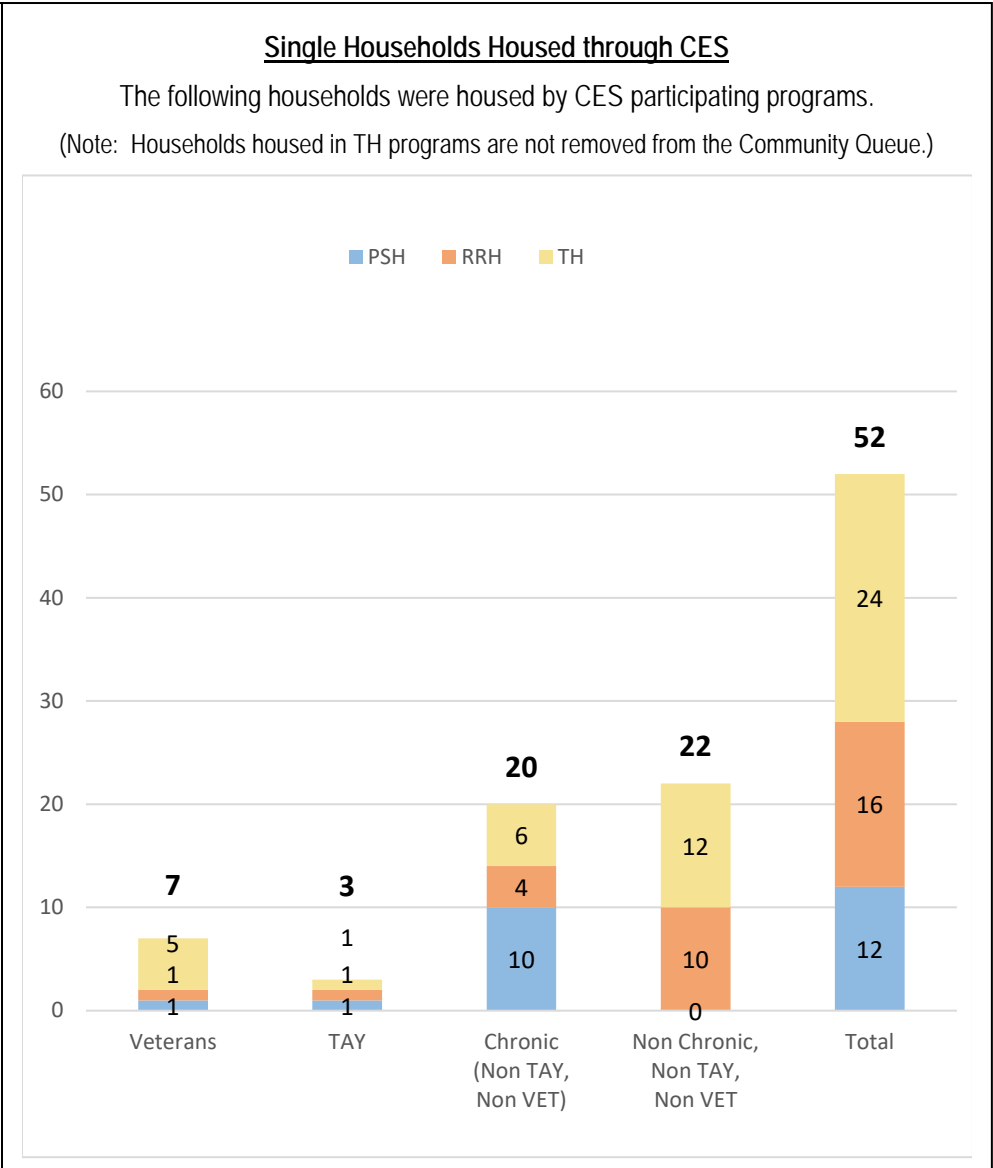
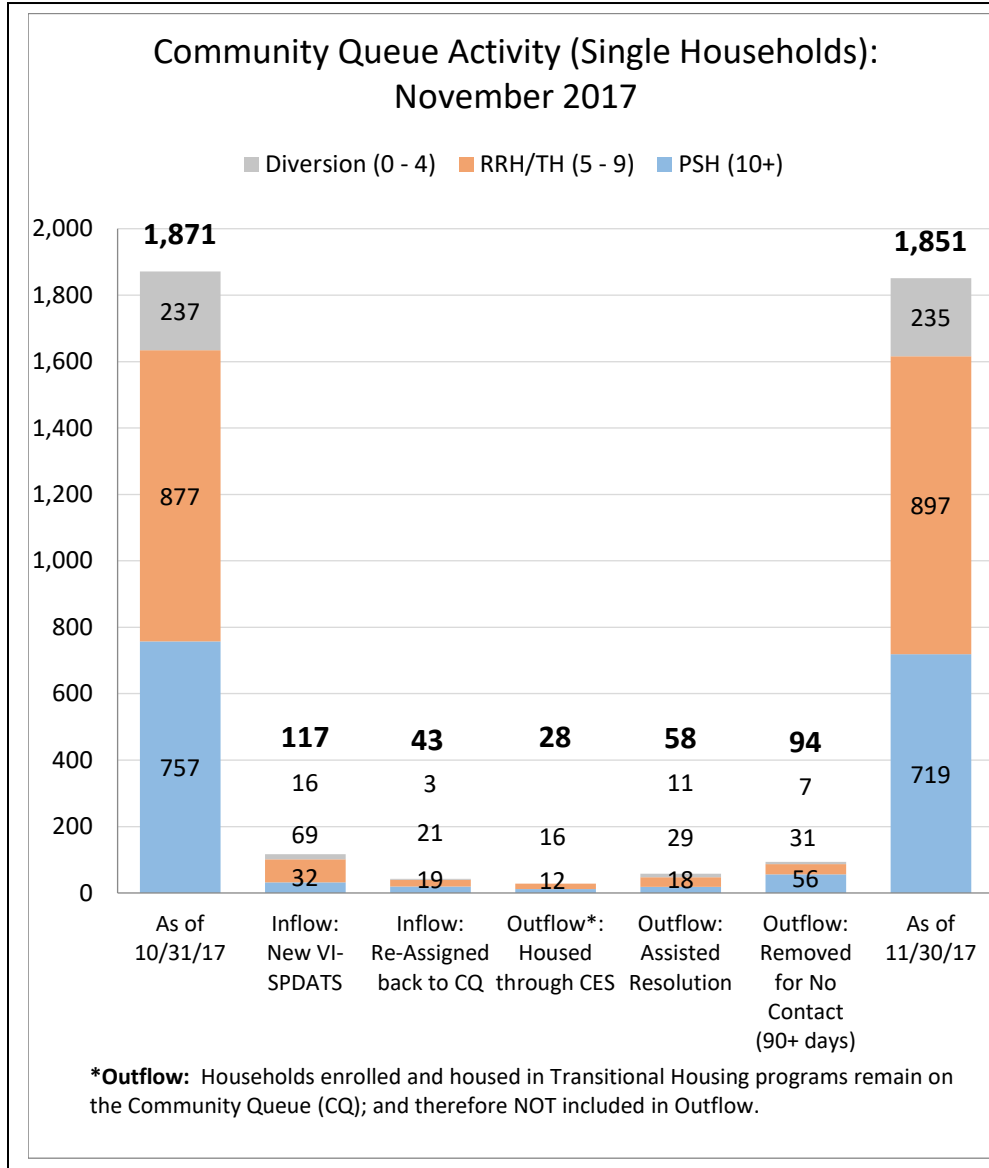
- Outcomes for CES Referrals by Program Type Table- Presents monthly and year-to-date outcomes of referrals organized by project type (RRH, TH, PSH)
 - o RRH referrals requested, sent, enrolled, provider denial, refused, rescheduled, no show, pending, for the month and year-to-date
 - o TH referrals requested, sent, enrolled, provider denial, refused, rescheduled, no show, pending, for the month and year-to-date
 - o PSH referrals requested, sent, enrolled, provider denial, refused, rescheduled, no show, pending, for the month and year-to-date

- Outcomes for CES Referrals by Program Type Pie Charts- Presents monthly and year-to-date outcomes for referrals organized by project type (RRH, TH, PSH); the pie charts present the same data as the Outcomes for CES Referrals by Program Type Table in a visual format

- RRH referrals requested, sent, enrolled, provider denial, refused, rescheduled, no show, pending, for the month and year-to-date
- TH referrals requested, sent, enrolled, provider denial, refused, rescheduled, no show, pending, for the month and year-to-date
- PSH referrals requested, sent, enrolled, provider denial, refused, rescheduled, no show, pending, for the month and year-to-date

Coordinated Entry System Report: November 2017

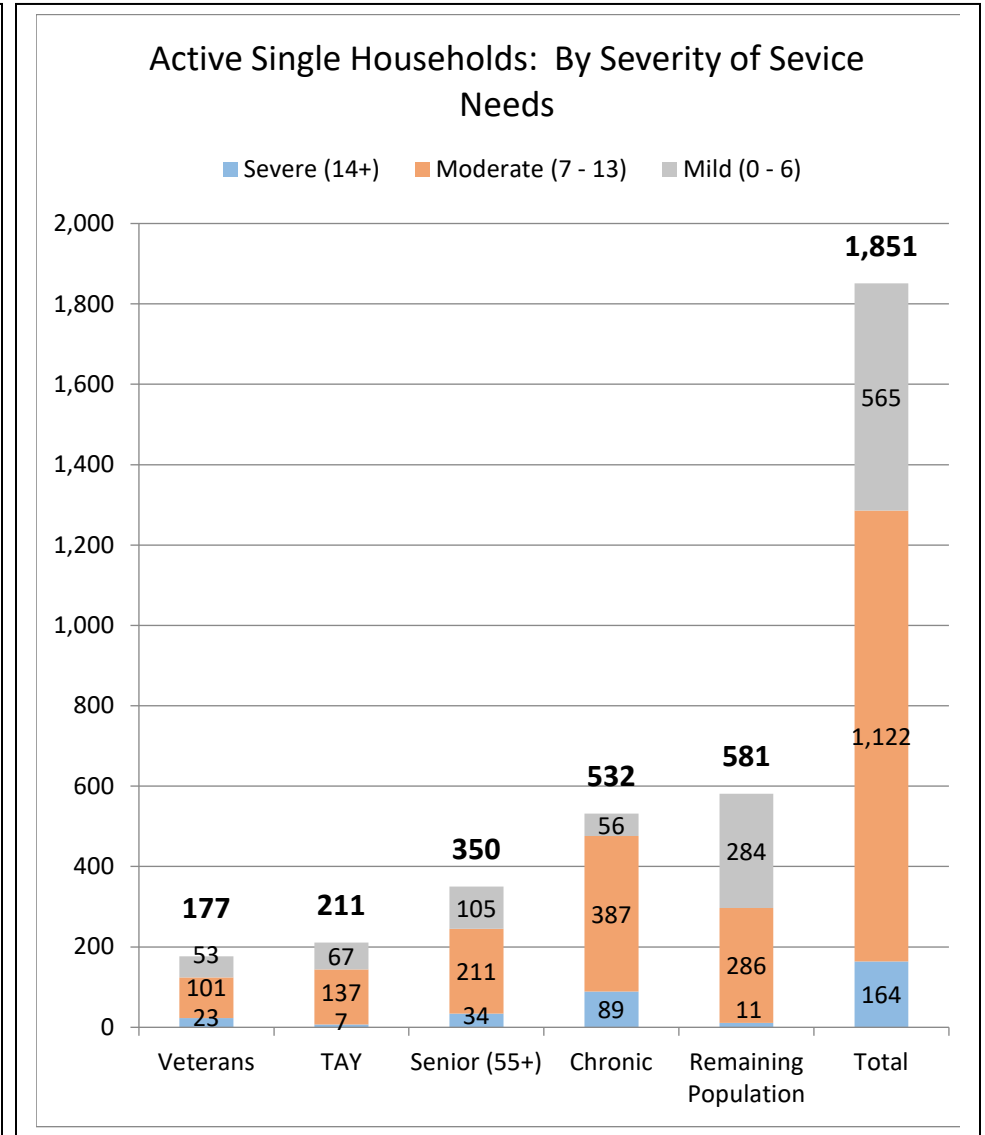
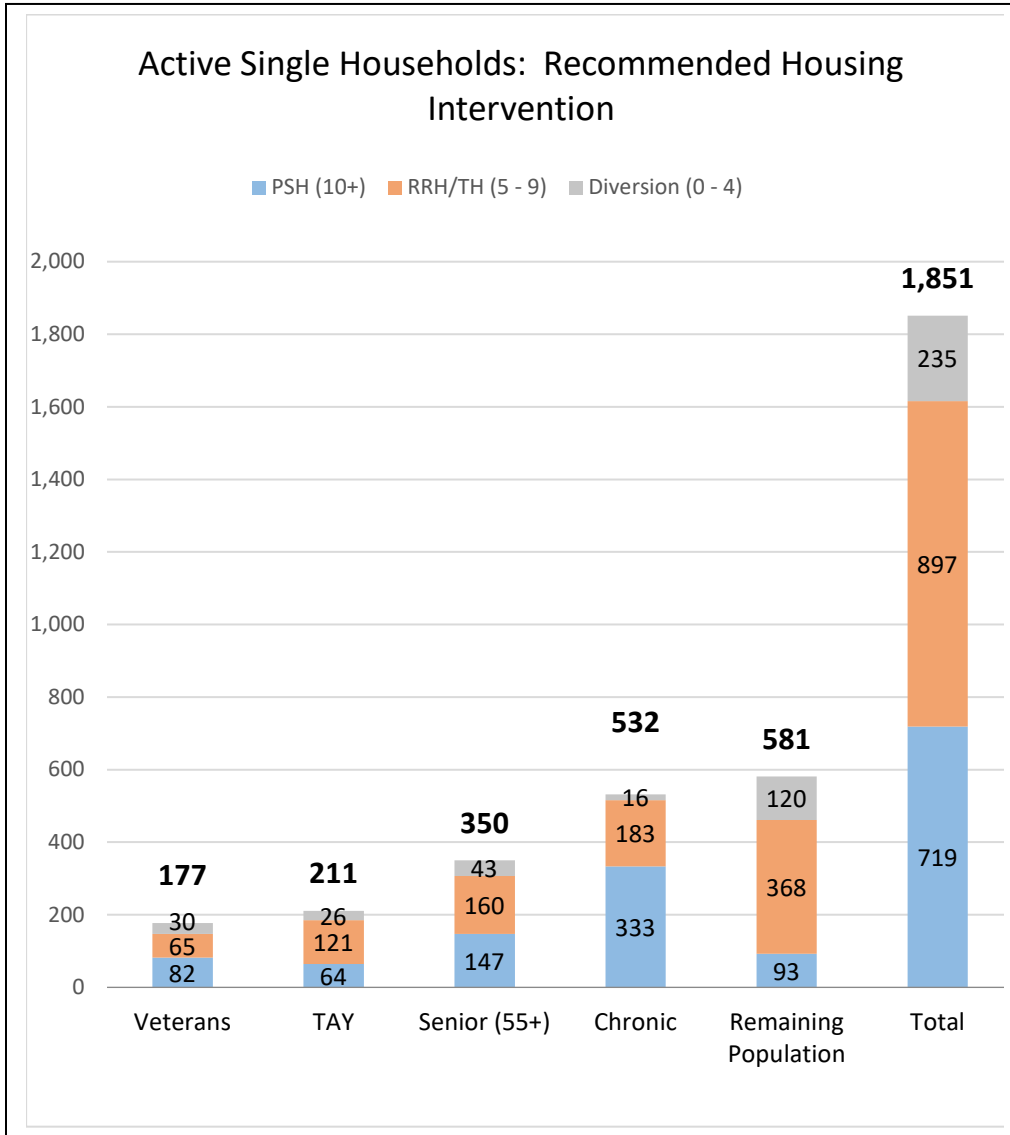
Coordinated Entry System (CES) Report contains a short summary of active households on the Community Queue, total monthly referral requests and outcomes, as well as program placements for all project types (Permanent Supportive Housing, Rapid Rehousing, and Transitional Housing) currently participating in CES. Presented data is for the period from November 1, 2017 to November 30, 2017.



Coordinated Entry System Report: November 2017

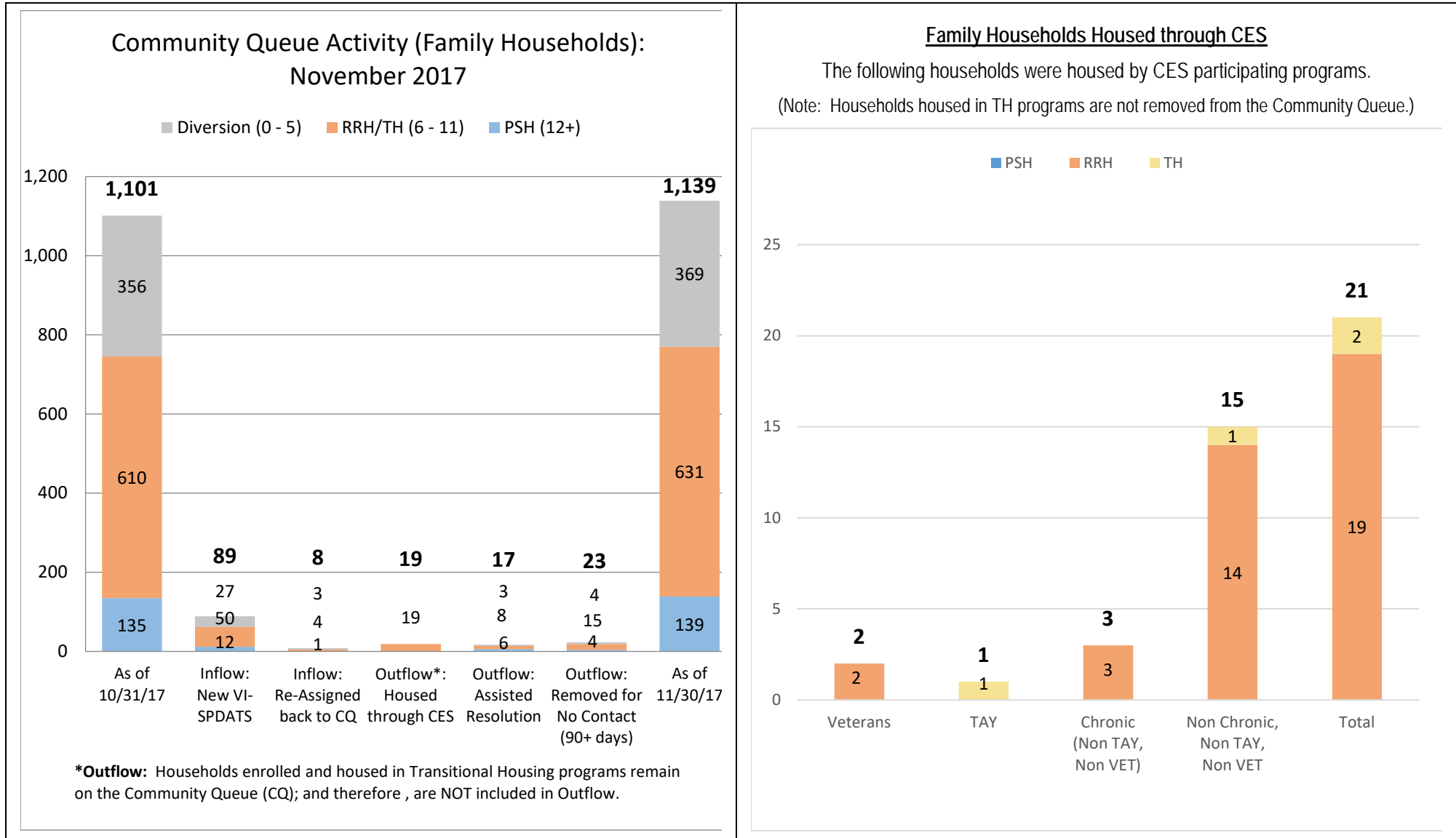
Breakdown of Community Queue Based on VI-SPDAT Score

This chart contains single households on the Community Queue (CQ) at the end of this reporting period. All data collected through the VI-SPDAT assessment process is self-reported. (Note: Households currently enrolled in RRH programs and TH programs remain active on the Community Queue.)



Coordinated Entry System Report: November 2017

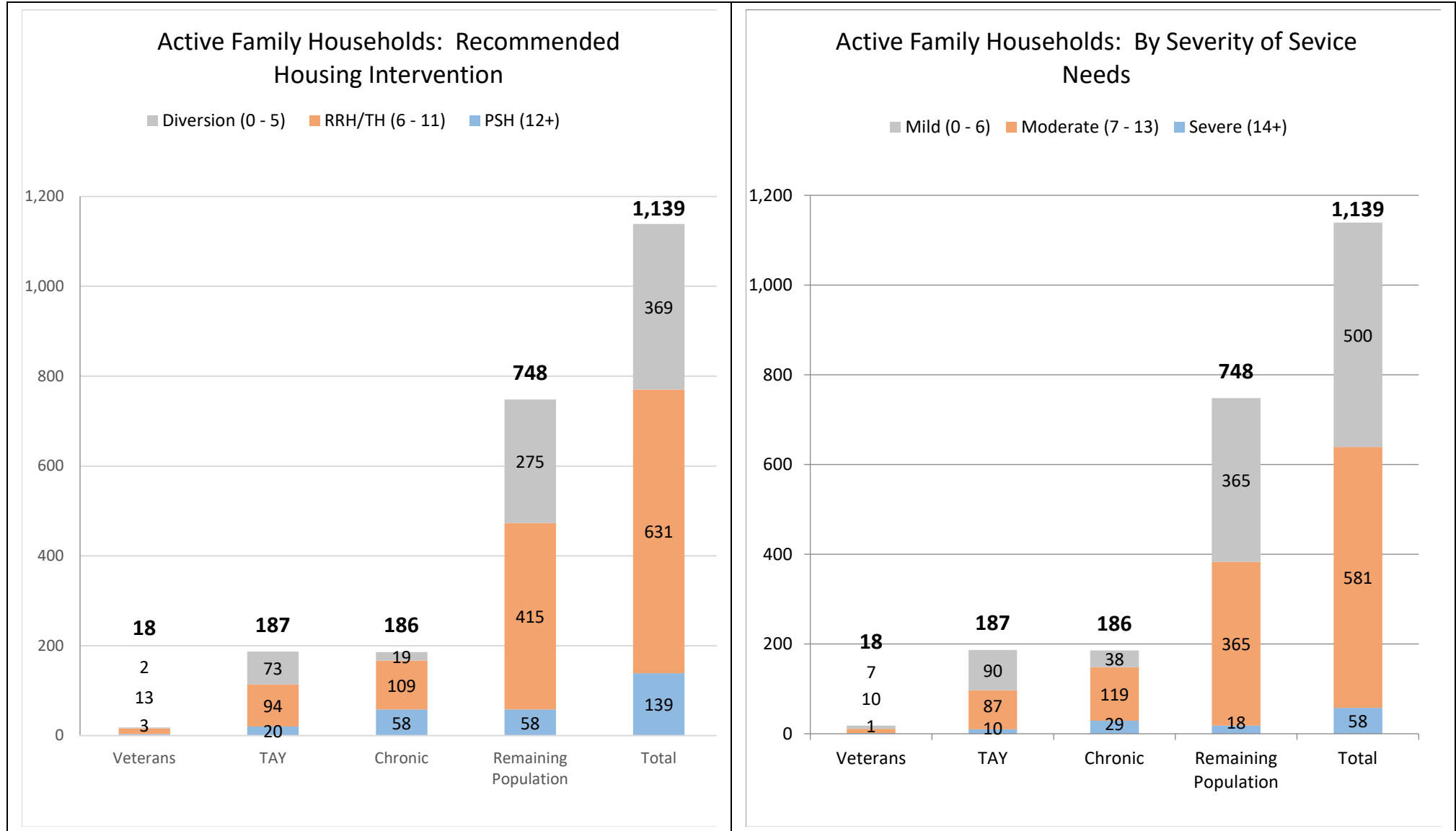
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Coordinated Entry System Report: November 2017

Breakdown of Community Queue Based on VI-SPDAT Score

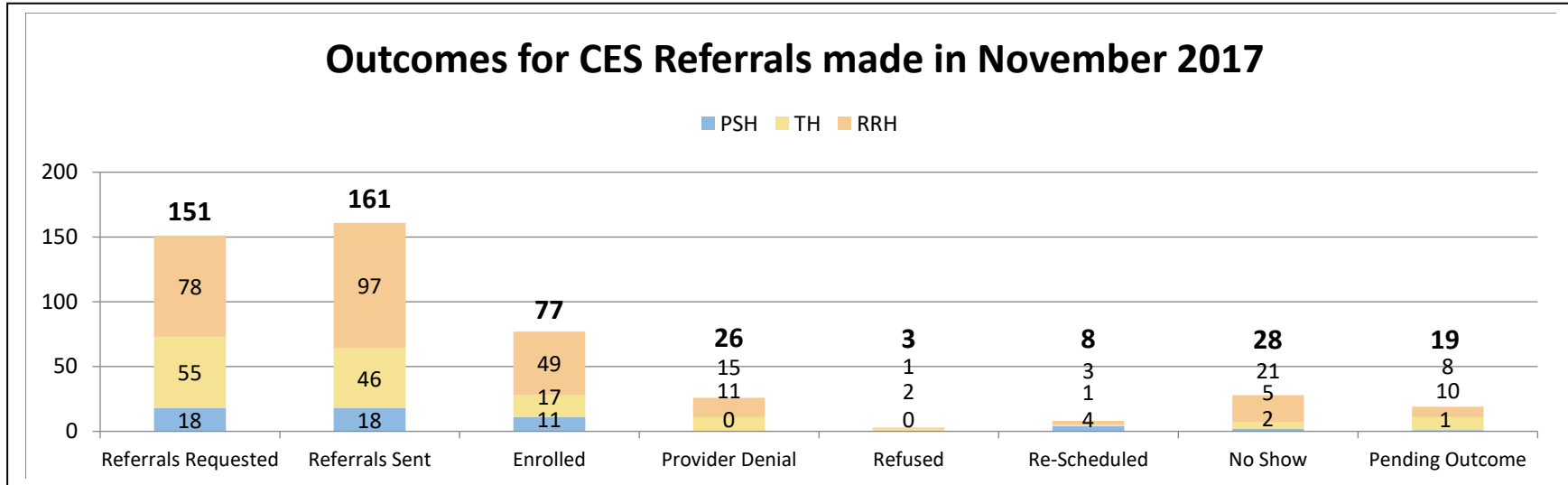
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Coordinated Entry System Report: November 2017

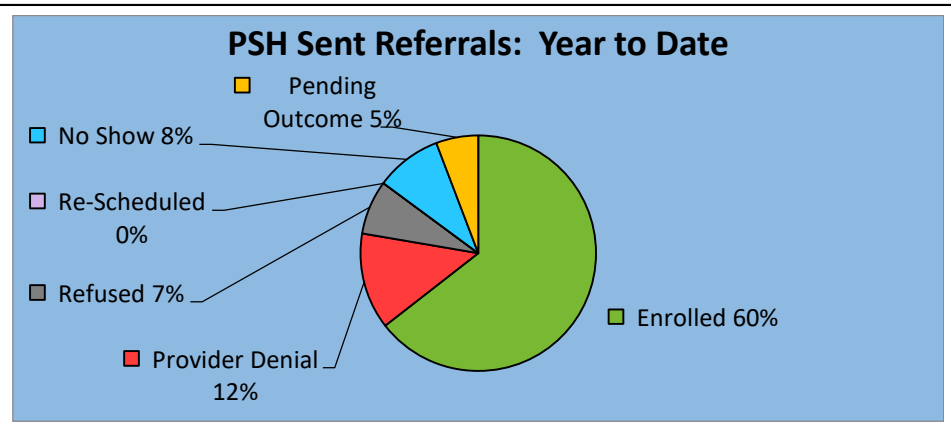
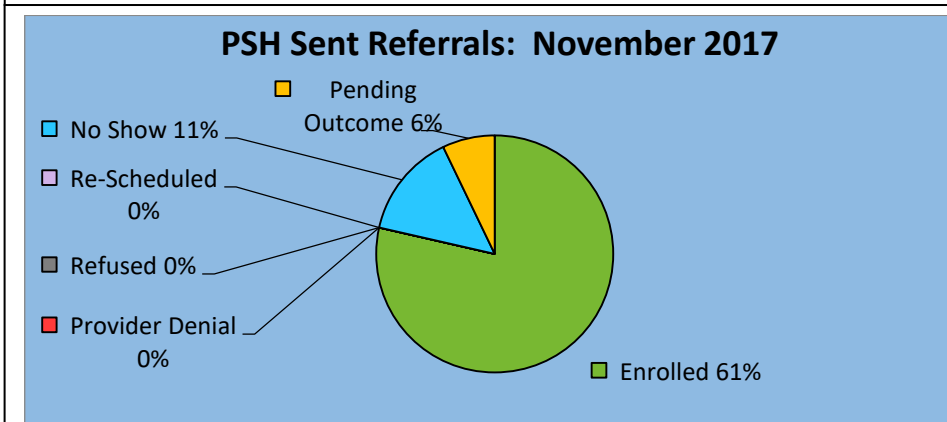
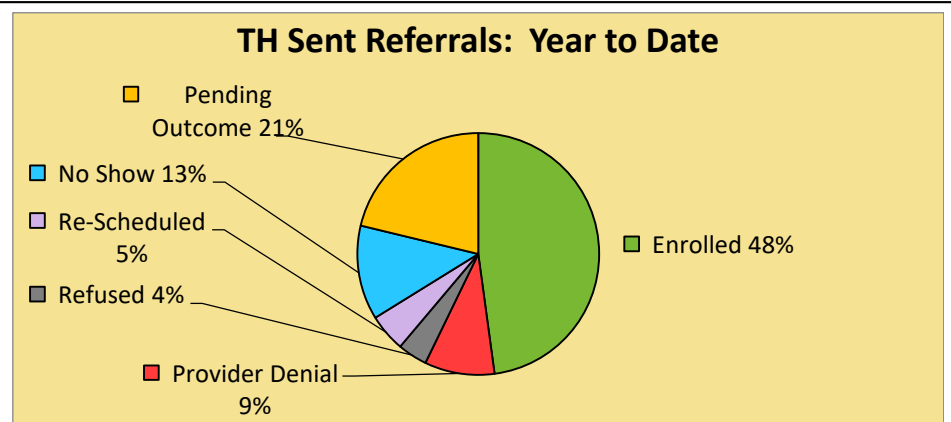
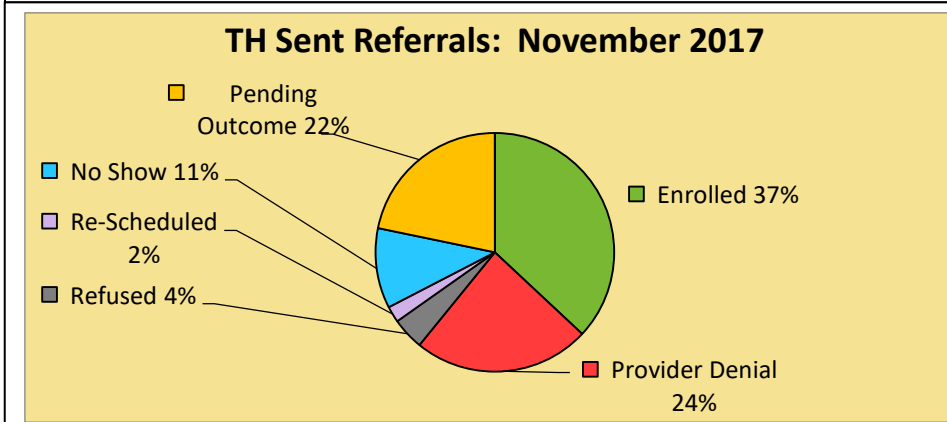
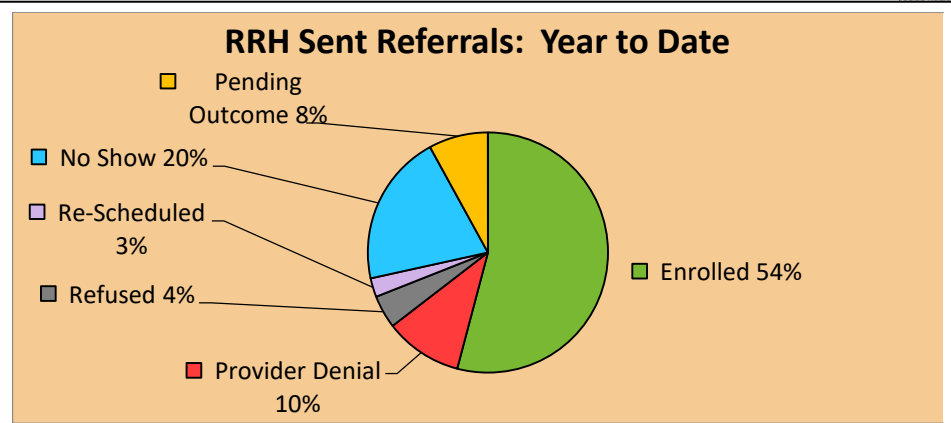
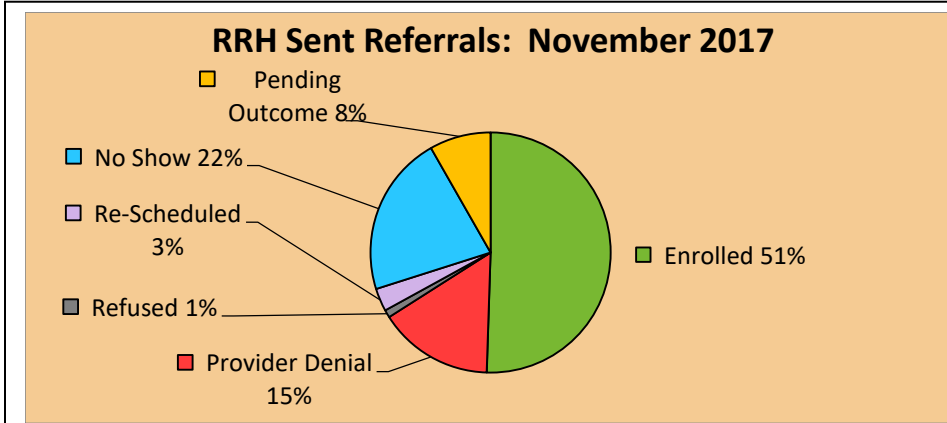
Referral Outcomes

The below chart displays the outcomes of the *referrals requested* during the October reporting period. The term *pending outcome* is reserved for referrals made during this reporting period which did not have a final outcome by close of the month.



2017 - Program Type Monthly Overview				REFERRAL OUTCOMES					
	Time Period	Referrals Requested	Referrals Sent	Enrolled	Denials				Pending
					Provider Denial	Refused	Re-Scheduled	No Show	
Rapid Re-Housing (RRH)	November	78	97	49	15	1	3	21	8
	YTD TOTAL	825	900	487	94	40	23	184	72
Transitional Housing (TH)	November	55	46	17	11	2	1	5	10
	YTD TOTAL	341	278	133	26	11	14	35	59
Permanent Supportive Housing (PSH)	November	18	18	11	0	0	4	2	1
	YTD TOTAL	94	130	78	16	9	9	11	7

Coordinated Entry System Report: November 2017





SACRAMENTO STEPS FORWARD

Ending Homelessness. Starting Fresh.

TO: CoC Advisory Board Coordinated Entry System (CES) Committee
FROM: Sacramento Steps Forward (SSF) CES Department
DATE: December 7, 2017
SUBJECT: Sacramento Key Considerations for Housing Conferencing

Why implement case conferencing?

1. HUD CES Checklist: "Case" conferencing appears in the Prioritization section of the checklist, in the "recommended" elements section:
Prioritization Process- item 13. "In cases where the assessment tool does not produce the entire body of information necessary to determine a household's prioritization, either because of the nature of self-reporting, withheld information, or circumstances outside the score of the assessment questions, the CoC allows case workers and others working with households to provide additional information through case conferencing or another method of case worker input.
2. Additional reasons- to bring system partners together to (a) improve successful location and engagement of households prioritized for permanent housing programs; (b) to respond to challenges after program placement, including completion of transfers when appropriate; and (c) to avoid and/or problem solve agency denials and/or participant refusals.

What should we call it?

At the November CES Committee meeting, members present agreed that "case conferencing" is not a client-centered term. Several suggestions were made to use "person" or "client" instead. Additionally, staff is suggesting we might call it "housing conferencing" to highlight the focus or intent of the activities.

Goal

Match permanent housing program vacancies with the prioritize list of households generated by the CES.

Options for Pilot Program(s)

- Housing conferencing by population type for all housing programs (PSH and RRH): veterans, transition age youth, families
- Housing conferencing specifically for PSH for single adults
- Other options?

Sources: *US Dept of Veteran Affairs SSVF Toolkit. Overview: Case Conferencing*
South Alamo Regional Alliance for the Homeless Policies & Procedures
Conference call with Abt Associates, Sacramento CoC CES TA Provider

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