

## SYSTEM COORDINATION COMMITTEE AGENDA (NOTES) 12-11-2019

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*System Coordination Committee meetings are open to the public. Homeless and formerly homeless Alameda County residents are encouraged to attend. Public comment will be taken at the beginning of each meeting and is limited to 2 minutes per person.*

*Persons who are unable to attend the meeting may submit written comments. Comments should address an item on the agenda and be submitted prior to the meeting. Comments which include "For Public Distribution" in either the title and/or body of the email or letter will be brought to the attention of the SCC Committee and included in the public meeting notes. Written comments should be submitted to:*

[jleadbetter@everyonehome.org](mailto:jleadbetter@everyonehome.org)

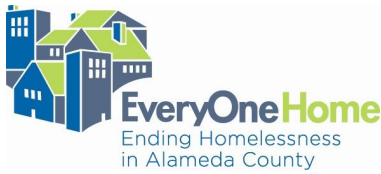
or

*Julie Leadbetter, Director of System Coordination  
101 Callan Ave, Ste 230,  
San Leandro, CA 94577*

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**Committee attendance:** Lara T., Suzanne W., Kate H., Gloria W., Alison D., Jessica L., Calleene E., Kerry A., Vivian W., Marta L., C'Mone F.,  
**Staff:** Julie L., Jessica S., Dorcas C.,  
**Public:** Nic M.

1. Public Comment (Julie) **2:00-2:10pm**
  - a. Public comment **None**
  - b. Reading of written comments submitted, if any
  
2. Director's Report (Julie) **2:10-2:15pm**
  - a. Coordinated Entry evaluation report will be completed this month
  - b. Katharine Gale will include the evaluation results in the CE Refresh assessment and action plan to be presented in January
    - i. **Katharine will be building off evaluation result and scope we talked about and will present in January (maybe February). She has started the assessment and stakeholder interviewers.**
    - ii. **Julie will make sure Kate/SAVE gets added to the DV stakeholder interview.**
  - c. Katharine has started her assessment and is conducting limited stakeholder interviews
  - d. System modeling is underway, with a new work stream added for racial equity modeling
  
3. Urgent Items (Julie)
  - a. None



#### 4. Discussion Items (Lara)

##### a. Housing Problem Solving Policies and Practice (Lara)

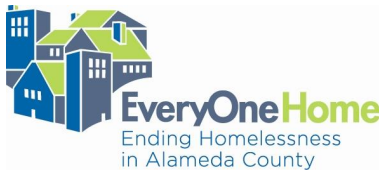
**2:15-2:25pm**

- i. Committee members have identified the need to strengthen the practice of Housing Problem Solving in the Alameda County Coordinated Entry
- ii. Katharine Gale has also indicated that this will be a finding and recommendation of the CE Refresh
- iii. City of Oakland has spearheaded a contract with Frontlines Services to provide training and consulting for the development of a Housing Problem Solving guide for Alameda County, City of Oakland, BACS, Abode, and HCSA are partnering to cover costs and provide training, thank you!
  1. Nic is working on a housing problem solving training:
    - a. It will be 2 two day trainings with 50 people each
      - i. One training for Oakland and one for general county
    - b. 20 of those people will train the trainers
    - c. It will be during the week of Jan 27
    - d. Will be focus on HPS for literally homeless
- iv. Given the need and opportunities, SCC will work in December and January to update HPS policies so that they can be incorporated into the System Manual and HPS Guide

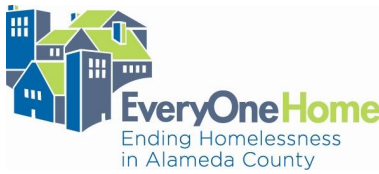
##### b. Housing Problem Solving Policy Development Exercise (Katharine)

**2:25-3:20pm**

- i. Who gets problem solving and where in the system do they get it?
  1. Recommend option 3 and if it turns out they are not high priority during the assessment, go back to problem solving.
  2. Look at 4 screening questions and see if they are the right ones
  3. Make these decisions until after the training?
  4. In SF, they do everyone.
  5. Some teams have long conversation that's more in depth, we don't have resources to do good housing problem solving
  6. Design system so that not literally homeless would not go to HRC and those who call 211 gets briefer screening
- ii. How does it fit in the CE workflow/process? i.e. relationship to phased assessment and HMIS workflow
  1. A very limited version of problem solving is currently part of Access Packet workflow
  2. At minimum would we want assessors trained on it and the question is what about all of the other folks?
- iii. Who conducts problem solving (staff/roles)?
  1. Start with current housing navigators/outreach staff/HRC
  2. Include health outreach workers?
  3. For upcoming training: 100 slots, 20 for trainers
- iv. What training/certification is required for staff to conduct problem solving?
  1. Making the training a requirement, fold it into the accessor module



2. Someone doing assessment training should have HPS training
3. Beyond that, it doesn't have to be mandatory for other staff
4. Then do a once a year refresher
5. We may not get everyone in first round. Train certified assessors first.
- v. What frequency should the trainings be?
  1. Once a year refresher training, as we look to develop a model with guidance from Front Line
  2. After the two day training, we should have experience to customized to local scenarios/setting
- vi. If using a train the trainer model, who's a trainer and who do they train?
- vii. Financial assistance (sources, rules, broad or narrow, caps in amount, caps in a year, inspections required?
  1. Closest financial assistance is the flex funds
  2. Does it make sense to have single pool?
  3. County or region?
    - a. We currently have multiple county funds. More streamlined if at county level?
    - b. If we do by region, want to fund agency to do that work to have consistency across county.
    - c. There will always be some pots that are county administered, never 100% by region
  4. Can't make full decision. But the goal should to have it as streamlined/centralized as possible, have common standards, and distribute in an equitable fashion as fast as possible.
- viii. How are we going to collect data?
  1. Capture data as a service – see what result of that service and if that person shows up in our system?
  2. In the short term we could change HPS section in the Access Packet
  3. If there are guiding questions in the Access Packet, that could be useful
  4. After PS training and we will move closer to CE redesign
  5. Does guide become addendum to system manual?
    - a. It's meant to be available county wide
    - b. LA Guide is more of a practice guide – with some direction of flex funds
    - c. After HPS training, we'll set policies in the CE Refresh
- c. Committee Membership (Suzanne) **3:20-3:35pm**
  - i. 3-4 open seats
    1. Look at what's needed and what's the representation that is most beneficial to where system is
      - a. Email us before next meeting with ideas
      - b. Doesn't have to be individuals/Can be type of seats
    2. 13 seats now, 4 vacant ones
    3. Governance charter says that SCC has 15-17 members



4. Jamaica – pulled off committee last month, would like to stay in touch
5. Youth lived experience – open but HUD CoC also formed the YAB to have an organized voice for youth in the Continuum, C'mone is the coordinator and represents it on SCC

- ii. Vote in January/February
- iii. Review EOH recruitment process
- iv. Recruitment suggestions
  1. Steve Weiss, BALA
  2. HMIS Oversight Co-Chair, Mike Keller
  3. Others?

d. 2020 Workplan Development (Suzanne) **3:35-3:40pm**

- i. Co-Chairs will be proposing a work plan based on the following areas:
  1. Policies that require annual review
  2. Missing policies identified in the CE Compliance Review
  3. Policies identified for action in the CE Refresh
- ii. Co-Chairs will present to Committee in January/February for vote

5. Action Items for Vote (Lara)

a. Recommendation to the HUD CoC on Designating a CE Management Entity **3:40-4:00pm**

- i. Presentation & Amendments
- ii. Call to Vote
- iii. Vote
  1. Change: Take out specific names and add signed in MOU by the HUD CoC chair, SCC Chair and EveryOne Home Executive Director
  2. Bring back to work group for focused attention to review applicants
  3. Voting to move this forward to HUD CoC with propose changes signed by 3 people we named
    - a. Katie, Gloria, Marta, Alison, Jessica, C'Mone, Calleene, Kerry, Lara, Suzanne.

6. Consent Items

- a. None

## Key Questions for Taking PS to Scale in Alameda County

### 1. Who Gets Problem Solving? (note that this is closely related to question 2, where PS happens)

Options:

1. Everyone gets a PS conversation
  - a. Implications: Persons who do assessments spend time on PS conversations still doing assessments in many (majority of cases) when no PS solution
  - b. Recommended as most comprehensive approach, but will be most resource intensive
2. Only people who are not yet literally homeless have a PS conversation
  - a. Implications – focus on diversion, keeping people out of system
  - b. Fewer conversations but fewer results
  - c. Offers nothing to people already homeless except assessment and probably long waits
3. Some form of triage is done and PS is offered when certain conditions are met (e.g. income now or recently, first time homeless etc.)
  - a. Fewer conversations, potentially higher initial success rate (this used to be what Frontline recommended though not sure they do anymore)
  - b. Not clear that the things that might be used to screen at first are predictive; leaves many without an option for a resolution

### 2. Where in the System will PS happen?

Options:

1. At HRCs (by dedicated specialists/repurposed Assessor functions)
2. With any current Assessor anywhere in the system
3. By phone through call centers including 211 and Family Front Door
4. Through Street Outreach
5. At Shelters before people take a bed
6. In mainstream agencies such as schools, health clinics, County SSA offices, etc.
7. Any combination or all of the above
  - a. Implications: The more places it happens the more people can be reached and the more the work of one place can be built upon by the next. For example, if it happens at HRCs *and* at shelters, shelters can look at the HRC conversation and attempt to build on it.
  - b. The more places it happens, the more you will need
    - i. Training, and more specific to each site type and method
    - ii. Data integration (so each site can see what occurred previously)
    - iii. Widespread or integrated/pooled financial assistance to make sure it can be used in a timely fashion throughout the system
    - iv. Clear messaging for staff and participants to understand how these PS sites relate to one another

Many places start with a few sites (access points and either phone and/or street) and then expand over time

**3. How does PS fit in the CE workflow/process? i.e. relationship to phased assessment and HMIS workflow?**

Options:

1. PS conversation done after a screening/triage and before assessment; only assess if cannot achieve a resolution
  - a. Implications: will reduce number of assessments somewhat but not significantly at first
  - b. SF is finding for Adults that it typically takes 2-3 conversations to get to a resolution; however, after being assessed most people are told they are in Problem Solving Status, so they know they won't be getting a housing referral and this may motivate them to come back with new ideas
2. PS conversation done after assessment
  - a. Implications: use information in the assessment process for the conversation; tell someone right away that they won't get a housing referral and lead into the PS conversation; collects more data on everyone
3. PS conversation done through a referral as a separate step – not in the assessment process
  - a. Implications: people are referred to PS based on some criteria and it is done at a separate time/place. People can elect whether to participate. Programs can be specialized by population or other ways
  - b. Many places pilot this way before moving to scale

*Note: Reducing the current assessment's length is a different, though related, matter and should be considered regardless. In thinking about the above questions assume that steps will be taken to reduce the time currently spent on assessments but that there will still need to be assessment's done on a lot of people that will take some time*

**4. Training and Certification/Standardization: How will problem solving staff be trained**

Options:

1. Anyone doing PS must be trained and certified through in person training
  - a. Implications: most likely to result in high quality but has ongoing costs associated and potential delays in people getting started
2. Trained trainers in each agency provide training to staff
  - a. Cheaper and more timely but need work to keep up the trainers skills and ensure standardization and quality
3. Online or other modules provide, or supplement, the training
4. Learning Collaboratives help reinforce training and allow Problem Solving staff to build their skills together
  - a. Implications: ongoing training has a cost but is essential to growing the practice and increasing the outcomes over time. Places like Connecticut offer regular front line and supervisor trainings and ensure that PS trainings happen 4-6 time per year.

*Note: Some people are really good at this service and find it rewarding, and other people find it very challenging. No matter how much training is offered, looking for the people who distinguish themselves in this area and giving them training roles and larger caseloads is a good way to increase the quality quickly.*

## **5. Financial assistance (sources, rules, broad or narrow, caps in amount, caps in a year, inspections required?)**

Options:

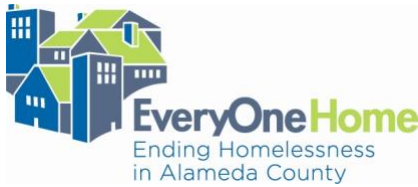
1. Create a single county wide pool (with whatever resource are available) with one set of rules and easy access by sites that do Problem Solving
  - a. Easiest for consistency and for tracking
  - b. Can delay use of fund and potentially lose outcomes if not able to work quickly/nimble to get funding out
2. Adopt common rules for PS resources even with different resources at each site; create guidance and tools/forms
  - a. Each entity has more control over the resources and may be able to act faster
  - b. More likelihood of disparities in how used
  - c. Harder to account for at a system level
  - d. Could result in participants “shopping’ for assistance
3. Hybrid: each site has some flex resources, larger amounts come from a pool.
  - a. May be faster for smaller amounts while having greater accountability for larger expenditures
  - b. Has many of same challenges as decentralized model for reporting, potential disparities and shopping

## **6. Data Collection, Sharing and Reporting**

Options:

1. Create program entries in HMIS for all Problem solving
  - a. Implications: Most work at start to enter new participants but best for reporting
  - b. May message to staff that PS is a specific program type rather than a strategy/approach, which can slow down impact and make process longer
2. Create an assessment or other screen in HMIS for PS conversations and use enrollments only when providing financial assistance (LA model)
  - a. Implications: Intended to be less work
  - b. Makes useful reporting more difficult though not impossible.
  - c. May discourage use of financial assistance when it would be appropriate
3. Treat PS as part of CE enrollment; ensure that some data about the conversation and result are collected either in HMIS or separately
  - a. implications: Integrates practice into CE
  - b. Likely to produce the least useful data for analysis and performance
  - c. May include some double entry

Whichever is chosen, it is critical to have data for reporting and analysis to track impact over time, and to have data sharing across sites doing PS for service delivery so that participants can be served in multiple locations.



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**RECOMMENDATION:** Recommendation to HUD CoC on Designating a Coordinated Entry Management Entity

**REQUESTED BY:** HUD CoC

**DEVELOPED BY:** SCC Work Group

**DATE:** November 13, 2019

**AMENDED AND APPROVED:** December 11, 2019

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## **BACKGROUND**

The HUD CoC is responsible for defining the management functions of, undertaking a process to select, and formally designating a Coordinated Entry Management Entity on behalf of the Alameda County CoC. In June of 2019, the HUD CoC requested that System Coordination committee develop a recommendation for designating this entity. HUD CoC provided guidance that SCC should accomplish this using the following development process:

- System Coordination Committee (SCC) is responsible for developing a recommendation to the HUD CoC Committee that includes:
  - A limited process evaluation of Coordinated Entry in Alameda County to provide context for HUD CoC
  - Defining and prioritizing a set of centralized management functions including day-to-day management, establishing a communications plan, promoting standardized screening and assessment processes, developing and delivering training, identifying a process to handle grievances, and conducting monitoring, that would ensure effective operations of Alameda County's Coordinated Entry.
  - Identifying reporting expectations of the CE Management Entity to the HUD CoC Committee and System Coordination Committee. Reporting may include regular CE monitoring reports, policy gaps or adjustments, and funding or resource needs.
  - Developing a timeline and selection process for the CE Management Entity
- SCC will establish a work group made up of SCC members and other appropriate community stakeholders to develop the recommendation.





- Abt Associates will provide technical assistance to SCC and HUD CoC to support the development process. Technical assistance is sponsored by the Department of Housing and Urban Development.

System Coordination Committee conducted this process between June 2019 and October 2019 by conducting the following activities:

June 2019:

- Discussed proposal with SCC and HUD CoC

June-July 2019:

- Refined process with SCC

July 10, 2019:

- SCC Working Session: Present best practices of Dynamic System Management and basic management functions to the SCC, discuss possible selection process for CE Management Entity

August 2019:

- HUD CoC Chair and SCC Chair Check-in to review process, roles, and responsibilities of SCC and HUD CoC
- SCC: Establish working group meeting times to develop recommendations to HUD CoC

September/October 2019

- SCC hosted a feedback session with CE providers as part of a limited process evaluation. Client feedback meetings are scheduled for October 23, 24, 25 of 2019.
- SCC was informed by County funders of funding shifts expected by December 2020 that would impact Coordinated Entry funding, management, and processes.
- Based on the communication of funding shifts, SCC determined that an expert assessment of Alameda County's Coordinated Entry system and set of recommendations for improvement/redesign is necessary for the CoC to clearly define what it intends for the CE system to include and, therefore, what roles and responsibilities would be expected of a Coordinated Entry Management Entity.
- SCC hosted a meeting with County government partners to discuss the County's understanding of the CE Management Entity role and potential interest in fulfilling this CoC responsibility on behalf of the CoC. County representatives stated that for them to consider the role there would need to be an RFI/RFQ/RFP process that they could respond to.

October 2019:

- SCC Co-Chairs held a meeting with expert, Katharine Gale, and received a proposal for a scope of work to assess the system and recommend changes.



- SCC in October was cancelled due to emergency power outage, items postponed until November SCC meeting
- Work group of SCC members to review and revise the first draft Recommendation to Designate Coordinated Entry Management Entity

November 2019:

- Recommendation presented to SCC
- SCC votes to send recommendation to HUD CoC

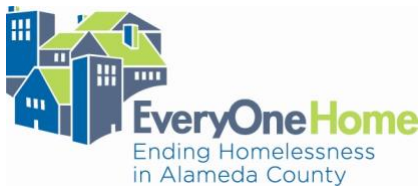
Simultaneous to this development process, the CoC is also conducting a redesign of the structure of Coordinated Entry in the HMIS System. This will present opportunities to improve CE data collection and management using the HMIS, ensure that HMIS supports an effective CE work flow, and meets HUD requirements for implementation of CE data elements by April 2020.

#### **RECOMMENDATION:**

The System Coordination Committee recommends that HUD CoC consider the following to define and designate a Coordinated Entry Management Entity on behalf of the Alameda County CoC:

#### **Timeline:**

- **November 2019:**
  - Coordinated Entry Evaluation is completed by EOH Systems Analyst. This includes a compliance review, a limited process evaluation, and a prioritization analysis.
  - SCC presents recommendation to HUD CoC
- **November 2019-April 2020:** Coordinated Entry restructure is taking place in HMIS. SCC provides input and monitors for potential CE policy implications. This includes defining and building the CE management reports in HMIS.
- **November 2019-January 2020:**
  - Assessment of Alameda County's Coordinated Entry system is conducted by Katharine Gale and a set of recommendations for improvement is submitted to SCC.
- **January- February 2020:**
  - Review results of the CE evaluation and the CE assessment and improvement recommendations
  - Develop a document that outlines the design, functions, and necessary improvements, of the Coordinated Entry system in Alameda County. This may include defining/refining the management functions and reports to support an effective CE system, depending on the progress of the development of CE structure in HMIS. Document will be the basis of an RFI and eventually an MOU.



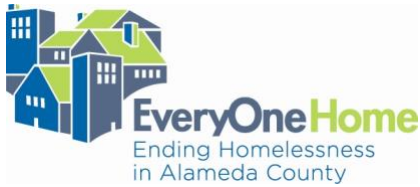
- Write and release an Request for Interest in serving as the Coordinated Entry Management Entity.
- **March- April 2020:** Review RFI responses and determine next steps.
- **May-June 2020:** Conduct specified next steps. Designate CE Management Entity and negotiate contract or MOU.

#### **Recommended Selection Process:**

- SCC develops and drafts a Request for Interest (RFI) that outlines the HUD CoC's expectations of a CE design and structure, expectations of a CE management entity, and current/possible funding sources for both the CE system and the CE management entity functions
- HUD CoC issues the Request for Interest (RFI)
- SCC identifies a Subcommittee to serve in the capacity similar to HUD NOFA Subcommittee. The Subcommittee would:
  - Be comprised of a diverse subgroup of SCC members. No person shall serve on the Subcommittee that belongs to agency that responds to the RFI.
  - Create criteria and/or rating and ranking system to evaluate responses
  - Review and score RFI responses using system
  - Based on responses, prepare a recommendation for HUD CoC on how to move forward. Recommendation could include: provide clarifying information to respondents, conduct meetings with respondents, recommend the designation of a management entity and development of an MOU.
  - Subcommittee reports back to SCC to present scoring/rating/ranking of responses and recommendation on how to move forward. SCC votes to send recommendation to HUD CoC.  
HUD CoC reviews and makes a decision on course of action.
- HUD CoC reviews recommendation and determines course of action to designate the entity, enter into negotiations, and develop an MOU.
- HUD CoC designates the CoC Chair, SCC Chair and EveryOne Home ED, as parties responsible for negotiating the MOU.

#### **Recommended to be included in the RFI:**

- Vision of Coordinated Entry in Alameda County
- Description of Coordinated Entry and/or the Assessment and Improvement Recommendations completed by Katharine Gale
- Links to HUD Requirements and Guidance
- Outline of current and potential funding sources
- Sample CE Management Functions and CE Reports
- Questions:
  - Describe the entity's interest in serving as the CE Management Entity for the Alameda County Continuum of Care.



- What is the entity's capacity to fulfill the outlined expectations and requirements of a CE Management Entity?
  - Ability to ensure that the Coordinated Entry process is conducted in a standard, fair, and consistent manner and connects households to the appropriate service or resource in a timely manner
  - Provide appropriate staffing levels to fulfill management entity tasks
  - Authority to make operational decisions and to ensure participation in CE
  - Provide system wide training to CE staff/ host learning communities or other practices to ensure standard practices
  - Ensure active collaboration and buy-in from all partners
  - Establish and manage agreements with all participating projects in CE
  - Manage an updated inventory of CE resources
  - Provide regular CE Management Reports to System Coordination Committee/HUD CoC
- Provide a preliminary budget, implementation timeline, potential staffing structure
- Identify existing funding sources or potential sources for covering the costs