

Report on the Three County CoC Coordinated Entry Process

Ben Cook, Lelia Jenkins, Julia Ferolie, and Dan Musante

DIAL/SELF Americorps Program Franklin County TSP

June 2020

Summary

This report conducted by DIAL/SELF Americorps Program members aimed to examine the coordinated entry process in terms of accessibility and efficiency for supporting individuals and families of Franklin, Berkshire, and Hampshire counties who are facing or are at risk of homelessness. The Americorps members distributed surveys to homeless service providers and CoC-funded housing providers to collect feedback on stakeholders' perceptions and/or experiences with accessibility of the CE process, including the by-names list, case conferencing, matching clients to services, and transitioning clients to housing. The responses to the survey overall are generally positive, but reveal perceived discrepancies in the accessibility to the CE process for youth and young adults, particularly because youth vulnerability scores based on the assessment "can't compete" to the scores attributed to chronically homeless individuals. Feedback from respondents also suggests the case conferencing meetings suggests the case conferencing meetings should continue to grow in attendance and capacity by bringing in more service providers from a wider variety of backgrounds and supports.

Introduction

The DIAL/SELF Americorps program members in Greenfield, MA partnered with the Three County Continuum of Care (CoC) in the Fall of 2019 to conduct an evaluation of the coordinated entry (CE) system with particular focus on how the CE process serves and supports youth and young adults. The purpose of this evaluation is to examine the facets of the CE process by obtaining feedback from stakeholders in the process, including homeless service providers, CoC-funded housing providers, and people with lived experience of homelessness, and to provide recommendations based on the feedback provided by those stakeholders.

Methods

The Americorps members, in conjunction with CE specialists from Community Action Pioneer Valley, drafted an instrument to be used to conduct focus groups and interviews with providers and individuals with lived experiences. Interviews and focus groups were to be conducted beginning in March 2020. However, in response to the COVID19 pandemic, the instrument was revised and made into a survey. The survey was modified into separate tools for the following groups: service providers who conduct assessments using the assessment tool, service providers who do not perform assessments, CoC-funded providers who perform assessments using the assessment tool, and CoC-funded providers who do not perform assessments. The surveys contain multiple choice questions as well as short-responses questions for the stakeholders to provide their own thoughts and feedback (see Appendix A for surveys).

Unfortunately, due to the COVID19 pandemic, it was not possible to reach out to people with lived experience of homelessness for input or feedback. The surveys were distributed to a list of stakeholders whose contact information was provided by the Three County CoC.

Results

A total of 9 responses were collected, 6 from service providers who conduct assessments, and 3 from CoC-funded providers who conduct assessments. See Appendix B for a complete summary of the responses collected.

The survey can be broken down into the following sections: perceptions/experiences of access to CE, perceptions/experiences of CE assessment and tool, perceptions/experiences

with the by-names list, perceptions/experiences of case conferencing/matching, and perceptions/experiences of transitioning a client to housing.

Perceptions/Experiences of Access to CE

The following special populations were indicated by the responses: Unaccompanied youth (5), parenting youth (4), People of color (8), LGBTQ+(8), People w/ disabilities (7), Immigrants (6), Veterans (6), Domestic violence victims (8) ---Other: HIV+ (1), Behavioral/mental health (2).

Referrals are received from the following: doctors, shelters, schools, local agencies, police, rehabilitation programs, community members, prisons, hospitals.

Perceptions/Experiences of CE Assessment and Tool

Multiple responses indicated a perceived disparity in access to the CE system for youth and young adults because their scores on the assessment often are not high enough to compete with individuals who are chronically homeless (See Appendix B).

Perceptions/Experiences with the By-Names List

See Appendix B for graphs.

Perceptions/Experiences of Case Conferencing/Matching

One response included that an individual did not accept a housing offer made to them because the individual did not have access to the necessary supports in the area where the housing was available.

Responses also indicate a desire for more people to be in attendance at the case conferencing meetings, particularly mental health providers, more housing agencies, and addiction and behavioral health treatment centers. Also, more support for Northern Berkshire County.

One response also suggests maintaining a log of “complaints/struggles” in dealing with large institutions when they are ineffective to provide feedback to these institutions. (See Appendix B.)

Perceptions/Experiences of Transitioning a Client to Housing

Responses indicate that more supports and services are needed during and after the transition is made. Drug and alcohol proximity are also a concern for individuals who are matched with housing offers who are vulnerable to substance use disorders. (See Appendix B.)

Recommendations

It is recommended that the CoC continue to collect responses to this survey or additional tools to collect feedback. Particular emphasis should be placed on getting feedback from individuals with lived experience to fully inform the evaluation.

Conclusion

Due to the COVID19 pandemic and small sample size collected from the surveys, it is important for the CoC to build on this work going forward. With this small data sample, however, it can be noted that youth seem to have a more difficult time being connected to services, likely

due to the nature of how assessments scores are quantified. The feedback pertaining to case conferencing, the by-names list, and matching indicate that the current practices are perceived to be effective but has room to grow by making CE access more equitable to youth and young adults, as well as by building the capacity of the case conferencing meetings by growing attendance and range of service providers.

Coordinated Entry Survey

This survey is being conducted by the Franklin County DIAL/SELF Americorps members on behalf of the Three County CoC. The responses from this survey will be included in an evaluation of the Three County Coordinated Entry System. The purpose of the Coordinated Entry Evaluation is to evaluate the quality and effectiveness of the coordinated entry system, as experienced by program participants, individuals and families with lived experience of homelessness, CE partners and homeless service providers, and CoC funded projects. This is an annual evaluation that will occur each spring, starting in 2020. The findings of the evaluation will be reported to the CoC Board on June 1st.

This survey intends to ask your perceptions, beliefs, and experiences of the Three County CoC Coordinated Entry system. There are no right or wrong answers. You must be at least 18 years or older to participate in this focus group. You have the right to withdraw your participation at any time. Your responses will be kept anonymous.

If you have additional information, comments, concerns, or wish to withdrawal your responses to the survey, please reach out to Ben Cook via email at benjamincook968@gmail.com

By continuing to the survey you agree that you have read the statements above.

* Required

1. Do you have access to ETO?

Mark only one oval.

Yes

No

Other: _____

2. Please select any special populations you work with *

Check all that apply.

- Unaccompanied youth
- Parenting youth
- People of color
- LGBTQ+
- People with disabilities
- Immigrants
- Veterans
- Domestic violence victims

Other: _____

3. Please select the counties you or your agency services

Check all that apply.

- Franklin County
- Berkshire County
- Hampshire County

Other: _____

4. Are you generally the first point of contact when someone is in housing crisis or do you typically get referrals from another agency? *

Mark only one oval.

- I am generally the first point of contact
- I typically get referrals from another agency
- Other: _____

5. If you get referrals, from who?

6. In your opinion, have you seen any disparities in access to the CE system for any specific population? If so, please explain. If not, skip question.

7. Where are you conducting assessments? *

8. Do clients make an appointment? *

Mark only one oval.

- Yes
- No
- Other: _____

9. Do you conduct assessments over the phone? *

Mark only one oval.

- Yes
- No
- Other: _____

10. When are you conducting assessments? *

Mark only one oval.

- First contact
- Second contact
- Other: _____

11. On a scale of 1-5, how effective do you believe the entire Assessment Tool is in scoring the population you work with? *

Mark only one oval.

	1	2	3	4	5	
Not at all effective	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Extremely effective

12. On a scale of 1-5, how effective do you believe the Life Domains section is in scoring the population you work with? *

Mark only one oval.

	1	2	3	4	5	
Not at all effective	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Extremely effective

13. On any given month, approximately how many Vulnerability assessments are you either conducting or referring for? *

14. Do you have any clients who decline to participate in the assessment? If so, why? If no, skip question.

15. Have you experienced any accessibility issues with the tool itself? (Client prefers other language, client cannot read tool, font too small, etc.) If yes, please explain. If no, skip question.

16. If there was one aspect of the tool, you'd recommend changing, what is it?

17. What, if any, special populations vulnerabilities do you feel are not included in the weighting?

18. In your opinion, how effective is the current By Names List (labeling & layout) in providing information and support during Case Conferencing meetings? *

Mark only one oval.

	1	2	3	4	5	
Not at all effective	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Extremely effective

19. Have you had clients exit the By Names list into CoC funded housing in the last three months? *

Mark only one oval.

Yes

No

Other: _____

20. What, if any, changes would you recommend for the physical layout of the By Names List?

21. On a scale of 1-5, how effective do you believe case conferencing is to identifying options, resources, and services to connect your clients with permanent housing? *

Mark only one oval.

	1	2	3	4	5	
Not at all effective	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Extremely effective

22. On a scale of 1-5, how effective do you believe case conferencing is to identifying options, resources, and services to connect your clients with supportive services? *

Mark only one oval.

	1	2	3	4	5	
Not at all effective	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Extremely effective

23. How effective do you feel case conferencing is for identifying appropriate matches for CoC funded permanent supportive housing and transitional housing? *

Mark only one oval.

	1	2	3	4	5	
Not at all effective	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Extremely effective

24. Do you feel those of your clients who are “most vulnerable” are being appropriately prioritized for CoC housing? *

Mark only one oval.

	1	2	3	4	5	
Strongly disagree	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Strongly agree

25. Have you ever been working with a client who was highest on the list and did not receive the next offer of housing? If yes, what was your understanding of why? If no, skip question.

26. On a scale of 1-5, how productive do you find the case conferencing meetings to your work and the goal of your work? *

Mark only one oval.

	1	2	3	4	5	
Not at all productive	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Extremely productive

27. Have you ever had a disagreement with a housing match? *

Mark only one oval.

Yes

No

Other: _____

28. In your experience, do you see any disparities among special populations in who is given a housing offer? If so, which populations? If no, skip question.

29. Do you feel like your voice and opinions are valued when discussing the eligibility, suitability, and appropriateness of a match? *

Mark only one oval.

	1	2	3	4	5	
Strongly disagree	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Strongly agree

30. Have you worked with someone offered CoC housing and have had significant concerns about the safety and appropriateness of the housing match? If Yes, what information was shared or needed to be shared for the group to make a different decision with moving forward with the match? If no, skip question.

31. How often are you working with a client who has been assessed and needs support but is not discussed during case conferencing? *

Mark only one oval.

- Weekly
- Bi-weekly
- Monthly
- Rarely

32. Are there any agencies or types of services that are not in the room that you'd like to see in the room, who would help further the goal of CE?

33. Please provide any additional feedback on case conferencing/matching

34. If you are working with someone on the By Names List, and they receive a housing offer, are you typically the one who informs them? *

Mark only one oval.

- Yes
- No
- Other: _____

35. Are you able to continue to work with a client after move-in? If so, for how long?

36. On a scale of 1-5, how effective do you feel case conferencing meetings are in supporting providers during their clients transition period from homeless to housed? *

Mark only one oval.

1 2 3 4 5

Not at all effective Extremely effective

37. Please provide feedback of effectiveness of case conferencing meetings in supporting providers during their client’s transition period from homeless to housed

38. In your opinion, what are the biggest factors that lead to successful offers and placements and how do you think case conferencing could support that?

39. In your opinion, how easy is it for someone to access the coordinated entry system?

Mark only one oval.

	1	2	3	4	5	
Very easy	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Very difficult

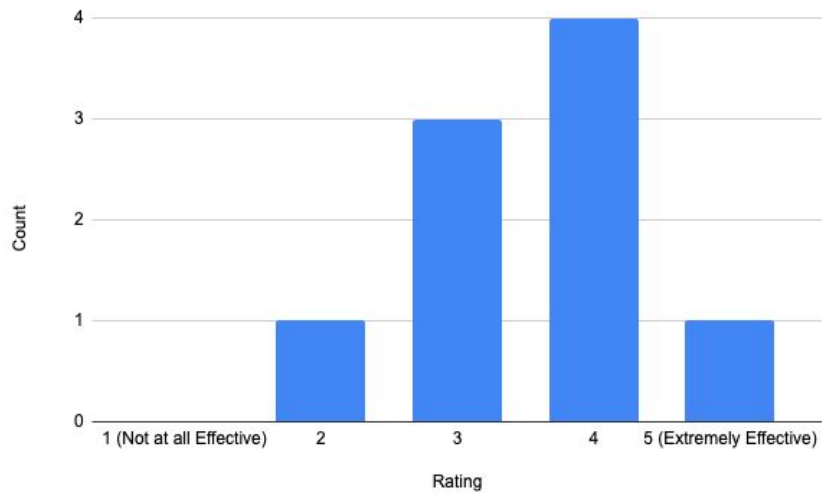
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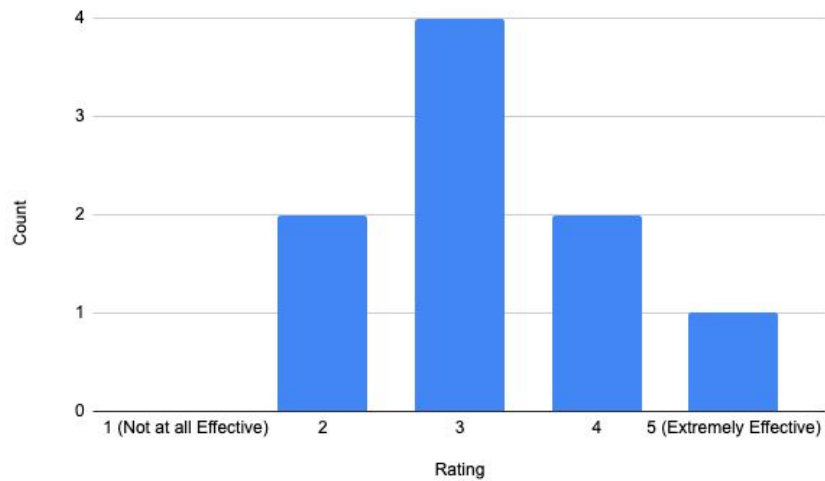
Appendix B

PERCEPTIONS/EXPERIENCES OF CE ASSESSMENT AND TOOL

On a scale of 1-5, how effective do you believe the entire Assessment Tool is in scoring the population you work with?

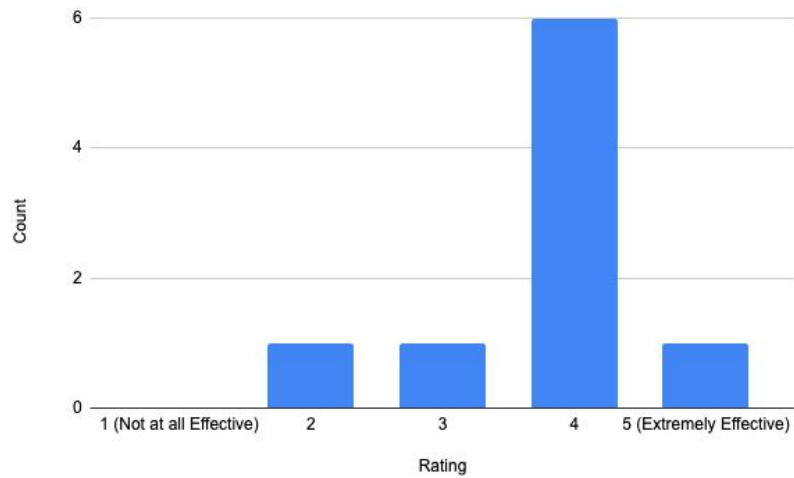


On a scale of 1-5, how effective do you believe the Life Domains section is in scoring the population you work with?



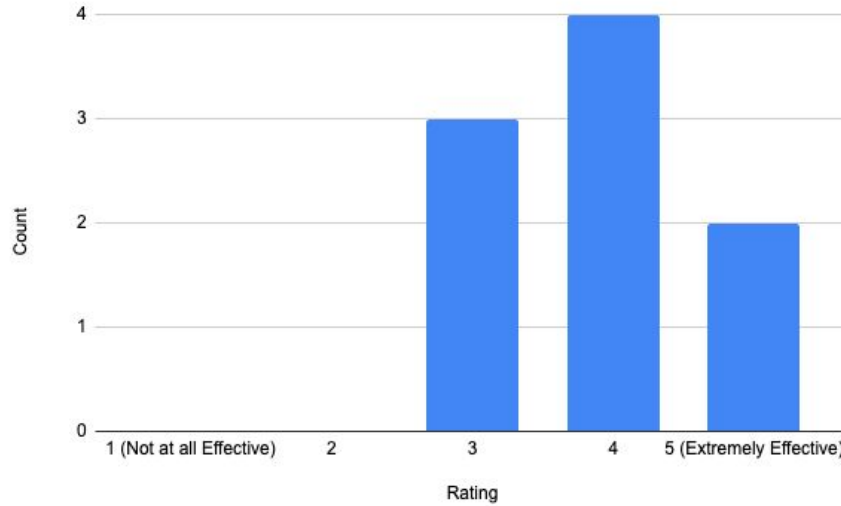
PERCEPTIONS/EXPERIENCES WITH BY NAMES LIST

In your opinion, how effective is the current By Names List (labeling & layout) in providing information and support during Case Conferencing meetings?

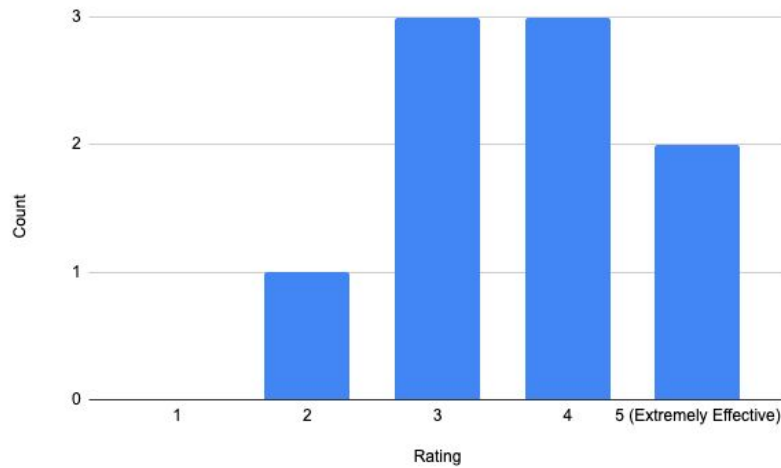


PERCEPTIONS/EXPERIENCES WITH CASE CONFERENCING/MATCHING

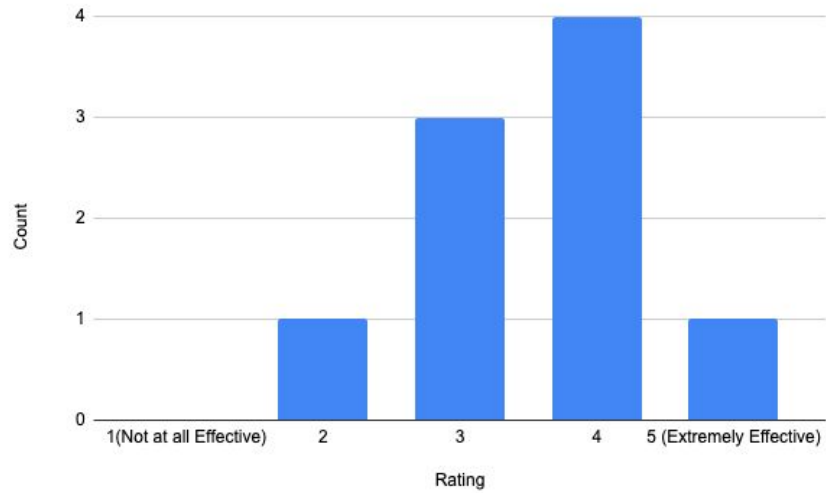
On a scale of 1-5, how effective do you believe case conferencing is to identifying options, resources, and services to connect your clients with permanent housing?



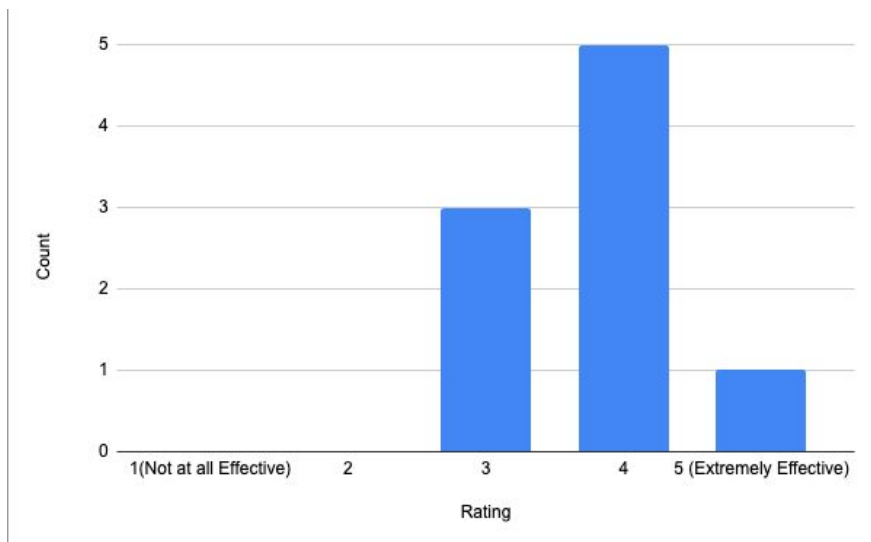
On a scale of 1-5, how effective do you believe case conferencing is to identifying options, resources, and services to connect your clients with supportive services?



How effective do you feel case conferencing is for identifying appropriate matches for CoC funded permanent supportive housing and transitional housing?

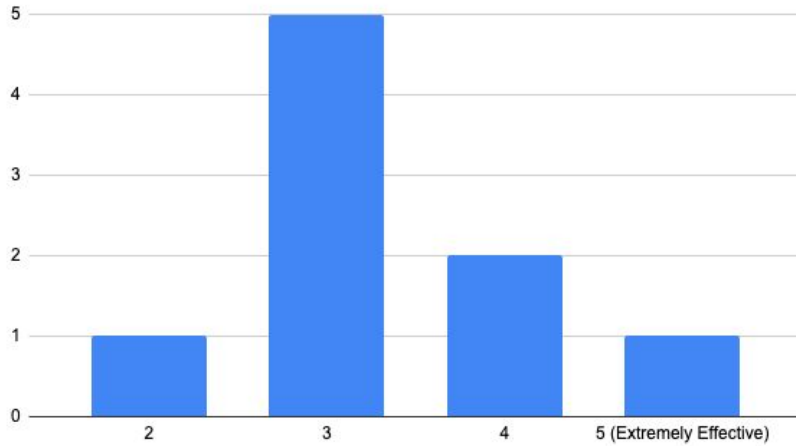


On a scale of 1-5, how productive do you find the case conferencing meetings to your work and the goal of your work?



PERCEPTIONS/EXPERIENCES WITH TRANSITIONING CoC CLIENT TO HOUSING

On a scale of 1-5, how effective do you feel case conferencing meetings are in supporting providers during their clients transition period from homeless to housed?



In your opinion, how easy is it for someone to access the coordinated entry system?

