2-1-1’s and HMIS: Coordinated Assessment Models

“Data Happens”

Karen Williams, President & CEO, 2–1–1 Orange County, CA

Susan Gemmel, 2–1–1 Director, King County, WA

Catherine Rea, CEO, CIR/2–1–1 Arizona

June 3, 2014
2–1–1 Assembly
AIRS Conference, Atlanta, GA
HEARTH Act

• On May 20, 2009, President Obama signed the Homeless Emergency Assistance and Rapid Transition to Housing (HEARTH) Act of 2009.

• Continuum of Care’s (CoC’s) required to create a Coordinated Assessment.

• HUD funded services required to use HMIS.
SEC. 1203. PARTICIPATION IN HOMELESS MANAGEMENT INFORMATION SYSTEM.

“(f) PARTICIPATION IN HMIS.—The Secretary shall ensure that recipients of funds under this subtitle ensure the consistent participation by emergency shelters and homelessness prevention and rehousing programs in any applicable community-wide homeless management information system.”.
“Coordinated Assessment is defined to mean a centralized or coordinated process designed to coordinate program participant intake, assessment, and provision of referrals. A centralized or coordinated assessment system covers the geographic area, is easily accessed by individuals and families seeking housing or services, is well advertised, and includes a comprehensive and standardized assessment tool.”

24 CFR Part 578
“Some examples of centralized or coordinated assessment systems include: a central location or locations within a geographic area where individuals and families must be present to receive homeless services; a 211 or other hotline system that screens and directly connects callers to appropriate homeless housing/service providers in the area; ...”

24 CFR Part 578
“2–1–1 : How may I help you?”
HMIS Data Entry
"I think you should be more explicit here in step two."
Orange County, CA

Connect • Collaborate • Inform
Why 2014 Merger:

“2-1-1 OC is a call center”
- Information & Referral
- Disaster Response
- Resource Database
- Service Gap Analysis/Needs Assessment
- Provider Support

“OC Partnership is ‘all things HUD’ ”
- Homeless Management Information System
- 10 YR Plan & Continuum of Care hub
- HUD SuperNOFA process
- Service Gap Analysis/Needs Assessment
- Provider Support
2014 Merger Outcome:

Providing efficiencies for the OC System of Care
Orange County, CA

County Population: **3.1 million**
- Number of Cities: **34**
- Number of Homeless – 2013 Point in Time: **12,707**
- Number of annual calls: **87,000**
- Coordinated Entry System planning began: **6/2012**
- Homeless Provider System Analysis: **8/2013**
- Program redefined: **1/2014**

Database built by Adsystech, on top of the HMIS System
<table>
<thead>
<tr>
<th>Top 10 needs requests at 211OC</th>
</tr>
</thead>
<tbody>
<tr>
<td><em>(March 2013 to Feb. 2014)</em></td>
</tr>
<tr>
<td><strong>Transitional Housing/Shelter</strong></td>
</tr>
<tr>
<td><strong>Rent Payment Assistance</strong></td>
</tr>
<tr>
<td><strong>Electric Service Payment Assistance</strong></td>
</tr>
<tr>
<td><strong>Ongoing Emergency Food Assistance</strong></td>
</tr>
<tr>
<td><strong>Low Cost Home Rental Listings</strong></td>
</tr>
<tr>
<td><strong>Homeless Motel Vouchers</strong></td>
</tr>
<tr>
<td><strong>Gas Service Payment Assistance</strong></td>
</tr>
<tr>
<td><strong>Cold Weather Shelters/Warming Centers</strong></td>
</tr>
<tr>
<td><strong>Occasional Emergency Food Assistance</strong></td>
</tr>
<tr>
<td><strong>Community Clinics</strong></td>
</tr>
</tbody>
</table>
Does Orange County’s current set of housing components fit the need?

How does Coordinated Assessment/ Centralized Intake help solve this problem?
### Orange County’s System of Care

#### System Summary: Year 2

<table>
<thead>
<tr>
<th></th>
<th>Emergency Shelters</th>
<th>Transitional Housing</th>
<th>Rapid Re-Housing</th>
<th>Permanent Supportive Hsg.</th>
<th>Total System</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Providers</td>
<td>15</td>
<td>33</td>
<td>7</td>
<td>8</td>
<td>63</td>
</tr>
<tr>
<td>Total Programs</td>
<td>21</td>
<td>60</td>
<td>11</td>
<td>16</td>
<td>108</td>
</tr>
<tr>
<td>Average # Programs per Provider</td>
<td>1.4</td>
<td>1.8</td>
<td>1.6</td>
<td>2.0</td>
<td>1.7</td>
</tr>
<tr>
<td>% of all system programs</td>
<td>19%</td>
<td>56%</td>
<td>10%</td>
<td>15%</td>
<td>100%</td>
</tr>
<tr>
<td>Total HMIS Providers</td>
<td>7</td>
<td>22</td>
<td>3</td>
<td>8</td>
<td>40</td>
</tr>
<tr>
<td>Total HMIS Programs</td>
<td>8</td>
<td>41</td>
<td>4</td>
<td>12</td>
<td>65</td>
</tr>
<tr>
<td>% of all system programs in HMIS</td>
<td>12%</td>
<td>63%</td>
<td>6%</td>
<td>18%</td>
<td>100%</td>
</tr>
<tr>
<td>HMIS Program Coverage</td>
<td>38%</td>
<td>68%</td>
<td>36%</td>
<td>75%</td>
<td>60%</td>
</tr>
<tr>
<td>Total Beds</td>
<td>1,294</td>
<td>1,990</td>
<td>345</td>
<td>1,690</td>
<td>5,319</td>
</tr>
<tr>
<td>% of all system beds</td>
<td>24%</td>
<td>37%</td>
<td>6%</td>
<td>32%</td>
<td>100%</td>
</tr>
<tr>
<td>Total HMIS Beds</td>
<td>1,097</td>
<td>1,396</td>
<td>313</td>
<td>1,303</td>
<td>4,109</td>
</tr>
<tr>
<td>% of system beds in HMIS</td>
<td>27%</td>
<td>34%</td>
<td>8%</td>
<td>32%</td>
<td>100%</td>
</tr>
<tr>
<td>Total Investment in HMIS Programs</td>
<td>$3,398,659</td>
<td>$12,873,848</td>
<td>$498,925</td>
<td>$26,321,999</td>
<td>$43,093,431</td>
</tr>
<tr>
<td>Average Investment/Year/Bed</td>
<td>$3,098</td>
<td>$9,222</td>
<td>$1,455</td>
<td>$20,201</td>
<td>$8,494</td>
</tr>
<tr>
<td>Average Investment/PH Exit</td>
<td>$21,927</td>
<td>$26,709</td>
<td>$3,450</td>
<td>N/A</td>
<td>$17,562</td>
</tr>
<tr>
<td>% of system investment</td>
<td>8%</td>
<td>30%</td>
<td>1%</td>
<td>61%</td>
<td>100%</td>
</tr>
</tbody>
</table>
System Outcomes: Cost / Permanent Housing Exit

Cost For Exits to PH, Transitional Housing
Orange County, Year 2

From high of $104,175

To low of $915
Orange County: Current Program Entry Process

Referrals From:
- Other Programs/Providers
- Hospitals
- Jail/Prison
- Social Service Programs
- Community Members

Program Specific Intake/Assessment
- Funder Eligibility Requirements
- Program Eligibility Requirements
- Homeless Program

Waitlist

Intake Locations
- Program Front Door
- Outreach Worker

2-1-1

Households

Household tries again with another program

x 108 programs
We look at this information, and then:

- Identify the best use of existing bed inventory
- Work collaboratively with programs to make sure programs don’t close their doors due to property deed restrictions
- Think outside the box, e.g. we have too much transitional housing, maybe use as emergency housing
- Management of Coordinated Assessment for community, both calls and outreach

Create plan that allows the community to reduce homelessness by 85% within 5-6 years
King County, WA

- County population 1.9 mil
  - Number of Homeless Families Unknown
- Coordinated Entry System began 4/23/2012
  - Family Housing Connection (FHC)
- Database built by Adsystech, on top of the HMIS System
  - Includes 2-1-1 Online Screening Tool
- 2-1-1 Database Changes – Remove Shelter (except DV) and Transitional Housing (including DV) Listings
  - I&R Specialists no longer provide shelter referrals for families
King County, WA

2-1-1 Phone Screening
Family is Eligible

Specialist Checks for
Open Appointments

NO Appointment(s) Available

Advise Caller and
Let them know to Call Back

Appointment(s) Available

Schedules Appointment at
One of the Nine Assessment Sites

Reason for Calling King
County 2-1-1
Call to 2-1-1 for FHC
Information Only
Call to 2-1-1 and an FHC
Appt is Scheduled

Logging an FHC Call – Database
Record Name

FHC – Family Shelter and
Transitional Housing Information

FHC – First Appointment

Reason for Calling King
County 2-1-1
Call to 2-1-1 to Cancel or
Change an FHC Appointment
Call to 2-1-1 to Change Their
Personal Info with FHC

Logging an FHC Call – Database Record Name

FHC – Appointment Maintenance

FHC – Post Assessment Update Line
Some lessons learned:

- Be realistic – limit eligibility – you can always broaden later
- Technology – be prepared, and there will still be issues
- Special populations – DV, immigrant/refugee, CD treatment
- Case managers coach ineligible callers
- Only 50% families show up for their assessment appt.
- 80+ different eligibility criteria from shelter/housing providers
- High # of placement denials by agencies and refusals by families
- Fair housing rules were not always followed
• Some lessons learned (cont.)
  • Most outside of the system and many within the system, do not understand the changes, process or know who handles what
  • Many erroneously see King County 2-1-1 as the “FHC System” and the decision makers
  • A lot of added stress on I&R Specialists
  • Very difficult to develop the coordinated entry system when you already have a shelter and transitional housing process I place
  • Very confusing and frustrating for all if continued changes
  • Messaging, Messaging, and more Messaging is Key
2-1-1 Arizona

“Front End”:

• 2-1-1 Arizona services started in October 2011, now referring to over 36,000 services provided by over 12,000 participating programs and expanding statewide.

• CONTACS Shelter Hotline in operation for 8 years through 800 and local numbers.

• In FY 2013, estimated Arizona population of 6.5 million and 2-1-1 Arizona assisted with over 1.34 million human services information and referral requests.
“Back End”: 

- CIR HMIS Project serves 14 of 15 Arizona Counties, averages over 70 participating agencies, over 600 users who served over 23,322 unique homeless individuals in FY 2013.

- 2-1-1 Call Specialists assisted nearly 100,000 requests for shelter last year, and are “Users” in the HMIS systems to collect CoC shared UDE’s and create HMIS client records for providers.
Bowman ServicePoint Modules and Uses

- ResourcePoint Module - Internal statewide database of health and human services.

- CommunityPoint Module - External (public face) of statewide database of health and human services.

- CallPoint Module – Tracking client HUD required Universal Data Elements (UDE’s) and call service requests and referrals.

- HMIS Modules
2-1-1 Arizona Data Flow

- 211 Call Specialist
- Recorded Messages (IVR)
- 2-1-1 Shelter Call Specialist
- Balance of State (BOS) Shelter Call
- Maricopa County Shelter Call
- Collect HUD UDE Log Needs and Referrals
- Maricopa County HMIS
- BOS HMIS
- BOS ESG Coordinated Assessment Centers
- BOS HMIS Providers
2-1-1 Arizona

http://www.211arizona.org/hmis/
Coordinated Assessment will improve the process

- Bed Inventory will allow filling of empty beds
- Working with service providers to remove barriers from programs
- Solving issue of housing those who are chronically homeless (HUD requirement)
- Right-sizing the system to create system change
- Client-centric system vs. program centric
Challenges:

- Bed availability/updates
- Community waiting lists
- Push back from providers
- Fair housing violations
- DV participation
- Faith based providers participation
- HUD’s placement of 2-1-1/I&R/shelter hotlines in “Supportive Services” at risk of losing HUD funding
Opportunities:

• 2-1-1 easier number to remember for housing services
• Ease of access for clients
• Coordination among providers and comprehensive service alternatives
• Elimination of creaming
• To be leaders in the process
• Ultimately, to assist in eliminating homelessness
3. Find x.

Here it is $x = 0$.