

## Session 1: Strategies for Monitoring and Evaluating Coordinated Entry

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Technical difficulties in the recording lost the audio for the first six and a half minutes.

**[Alissa Parrish]** So who's overseeing the coordinated entry system? Who's managing that? And how are you making changes? And then monitoring, which happens typically more frequently, could be monthly could be quarterly I've seen a lot of different like data visualization data dashboards to really help you understand, in live time different pieces of your system are functioning and being able to make a lot of based on that information.

So sorry. I know I already asked you about evaluation, monitoring. Okay, should I ask who's doing both?

Okay, Well, how are we doing evaluation?

I think again, we really need to understand if our coordinated entry system is operating as we intended. So we have our HUD requirements for coordinated entry notice which we will get to. But also there are local requirements right? That you all have spent hours and hours, blood sweat and tears, developing and making sure that you're coordinated entry design actually follows what is written down in your policies and procedures. And if it doesn't like, being able to review that and see, what do we need to change? What's written down or do we need to change what is happening in real life. We want to know how to make our system better.

I will deliver our service provider in the field. When we started talking about coordinated entry where I live, and it looked very different then that than it does now, and the only way that we that at most by being able to monitor and valuate, understand what's working well and carry that forward.

No, it's not working well and be able to make pivots and changes to strategies over time. How many folks changed their coordinated entry systems, even if it was only just a little bit during the COVID pandemic? And have folks changed it again, not what we are coming out of the pandemic? Okay looking at it, looking at it and let's start yeah start looking great. It's also a HUD requirement to do evaluation. As I've been mentioning before the actually notice the requires an annual comprehensive evaluation just to know that the waiver there was a waiver that a waived the requirement from September 30, 2020 through, September, 29, 2021. However, we are now in October of 2022. So next slide please. Thank you.

So evaluations do, as I mentioned in the beginning, that they really do focus on these different aspects of coordinated entry. So compliance, which we are focused on and worried about is, you know, are we meeting the baseline requirements from HUD for a coordinated entry system? But also again making sure that your local requirements those may be, are also and they implemented and effective your coordinated entry process? This is one of those pieces where bringing in that qualitative information

that experience from people who have actually navigated through your coordinated entry system like they're qualitative information on how the system is functioning can really help you understand the effectiveness of it and what's not going well.

And then your process, the different points in your coordinated entry system, access prioritization, assessment, referral. How is really digging into those different pieces of your process, and understanding at every step along the way in your coordinated entry system. One: Is it functioning the way we thought it was going to? Two: does it actually meet what we have written down in our established policies and procedures? And if it doesn't where is there misalignment and does that happen on the do we make updates on the written side? Or do we make updates on that in real life side?

And then just a note in the blue box that evaluating coordinated entry does not equal evaluating the community's homeless response system as a whole. I think we know that coordinated entry system, you know it is a huge part of your homeless response system, but doing that specific evaluation about that specific component doesn't equate to doing the entire evaluation of your entire homeless response system.

So curious what evaluation approaches for the folks who raise their hand that they're doing coordinated entry evaluation have taken so far?

**[Brian Roccapriore]** And for the folks who are going to talk. If you could walk up to that microphone right over there because we are being live streamed, and no one will hear you if you don't.

**[Alissa Parrish]** Thank you. Anybody want to get up and talk about their evaluation approaches so far? Crazy? Yeah.

**[Brian Roccapriore]** Okay, good, this is a lot of dry content here. So we need people to talk to us otherwise this whole thing isn't going to work.

**[Alissa Parrish]** Thank you, Rachel

**[Participant]** Gotcha so we are in the early stages of evaluating just because of that waiver. But some of what we're looking at is the process like how that will play out with folks with lived experience and so at first we thought maybe once folks are housed, we could talk to them because we know where they're located, and it would be easy to connect. But what we found is that's actually a lot harder to connect, because they've gone through the system and they know longer really want that that level of support. So trying to connect with folks at the time of them exiting from coordinated entry before there immediately housed talking to them about what that process has been, and it's been give and take in some cases folks have said like you know, this is really great, and I think sometimes that's dependent on the program they're going into. So if it's rapid rehousing it seems to be a little bit of a quicker linkage for permanent supportive housing, it's taken a lot longer to get them housed. Finding housing has been an issue that's been repeatedly echoed. And then, you know, referrals. So depending on how many different agencies they've been referred to? How often were they reached out to by those agencies? What did those reassessment processes look like and how cumbersome was that on their experience? So that's kind of where we're at in the stages of evaluation still very early on and just getting it off the ground.

**[Alissa Parrish]** Thank you, and I love that piece about incorporating people's experiences through the system, and when you were talking about like only looking at folks who are housed because you can easily find them. There's also some like confirmation bias there, right because they are folks who have successfully navigated through that coordinated entry system, or, more client-centered, they are the folks who the system has served well and so then how can we make sure that we're trying to get a comprehensive understanding of how that system is functioning, including for the people that the system does not serve well. So perfect any others? Jake.

**[Participant]** So we are currently trying to figure out how to make coordinated entry work with veterans. So right now, all of our bad skit a soft hand off to our VASH program, and we're trying to figure out how to make it so that they can get that soft hand off. But then still get put on our prioritize or the prioritization list to make sure that they're not just like falling in the cracks if like VASH can't handle, them so that.

**[Alissa Parrish]** Inaudible question

So that is, can you repeat the question? Sorry.

**[Alissa Parrish]** Does that include both having a conversation with your VAMC and also talking with veterans who are going to do that?

**[Participant]** So we're currently in the very preliminary. We our coordinated entry director has had a lot of turnover, so we have a new one. That just started like a month ago. So we're currently figuring out how to make it, so that her team can do the handoffs and stuff like that before we bring in VASH, because we don't want to.. we currently have some issues with our VASH program on like getting them to enter and stuff. So we we want to make it as easy as humanly possible for VASH, so that they don't come back and say no. Wwe don't want to do that. So we're currently just working with our coordinated entry provider.

**[Participant]** So in North Dakota, which is a statewide CoC. We did a complete evaluation because we were using the VI-SPDAT. So we had a change the way we're assessing clients, and so we worked with some neighboring CoCs on the Minnesota side, which is a whole different way of evaluating things because we are 2 different states that do things very differently, but we also use clients that had went through the coordinated entry system that was still on the list, and what their experiences were, or are. And then ones that were successful in housed. We all worked with, we have 10 regions and so we worked with each of those CoC leads in those regions to see like what, what would help better with prioritization. And then we changed the entire way since we're prioritizing since we're not using the VI-SPDAT. So it was a long process. We've been live with that for about 3 months, at 6 months we'll a pre-evaluation to kind of just see where things are going. And then we'll roll out the prevention diversion tool along with that at 6 months. So it's been a process. But a lot of people like it better just because it's not as intense.

**[Missing audio]**

**[Joan Domenech]** ...gathered participant projects and participating persons and households feedback. So any other prompting questions. How have you partnered with ESG or SSVF: So yeah, anybody want to share a little bit about any of these prompting questions?

**[Participant]** Hi! I just have like a comment to this a lot of our providers in our region. We're feeling like are really burnt out we're not getting a lot of feedback, although we request feedback at regular intervals, and I was just wondering like if this is just like related to our community or other people are experiencing this. And if so, how do you inject some enthusiasm at a time when people are just completely overwhelmed?

**[Brian Roccapriore]** Certainly not just you. I think everybody in this room has been living in a pandemic for the last 2 and a half years on top of a competition just finishing. And on top of an active competition right now, so it is it's a lot, and we get that. So how do you invigorate your folks to like participate in another survey, which I'm sure that there's the youth and family committee wants a survey and the veteran committee wants a survey and coordinating those who it can be fewer surveys at the same time, and letting folks know the value of what it is they are giving information on right, because this is going to impact how coordinated entry works is going to impact how folks are connected to housing resources, and without their input the thing that they are upset about that they've been banging their head against the wall will continue because you can't possibly know what all of your providers are experiencing on the ground. So if they know that there's going to be a follow-through at the end of it. And it's not just we're checking a box to do an evaluation, but here are the steps we're going to take after that folks are way more likely to respond, and you're not going to get a 100% response rate. That's just not a thing that happens just because of all of the things I mentioned before. Everybody's burnt out everybody's tired we get that. Be as cheery as you possibly can, and keep it in just few emails as possible.

**[Collin Whelley]** Just to add to that to finish the feedback loop of giving that information that you just took from folks back to the community to see if you interpreted their answers correctly, and if they like understand what You're trying to do to implement the changes is super, super important too/

**[Joan Domenech]** Oh, you're good, thank you thank you calling and Brian! Does anybody else have any additional suggestions, or anything that they want to share on on that hey?

**[Participant]** My name is Melissa, I come Yakima county. One of the things that we did during the pandemic, which seems to be helping a lot is a systems mapping. So we brought in PRA, which is a research agency to come in and talk to our service providers, and ask them now that you're living through this, what would you like? What do you need? Where are the barriers where people falling through the cracks that you're aware of? And doing the countywide assessment from all of our service providers hosting multiple sessions, allowing them to come in whatever frame they wanted. Whether it was a frame to complain about the rental, the landlord memorandums whether it was to complain about the system in general, and take that in that frame and give it back to them in solutions. And then that actually spurred conversations about coordinated entry. And how does coordinated entry function in Yakima county? We've got a small group right now, that is working to align our local guidelines better with the new guidelines. But I think, starting with the frame of how can we help you? Has gone a long way. Thank you.

**[Joan Domenech]** Anybody else? Alright, so we'll go into the next slide please. Alright. So this is one of those things we're just to join out there because we just wanted to talk about it real quick. So through TA engagements and just in general I see that there's really an over emphasis on an assessment on a perfect assessment of perfect tool, something that'll you know give us everything we need and you know that really does not exist. there's no perfect tool and in in my in my opinion, and just you we should be doing is focusing more on the process. What is the process that you're doing and is that process ultimately yielding what we want. Is it really getting us to house the most vulnerable people? And so there's a lot of you that say you're a little bit newer, and there's 4 core elements. Of coordinated entry is not just about the assessment it's about ultimately housing folks, and so you do that. an assessment can be helpful, but you don't need it to be a 50 question survey you don't need it to be a really long thing. I would actually encourage you to look at what you already have. Look at your universal data elements. Look at the metadata elements behind the data. How can you use what you already have existing there? So something to point out there, and just to have it in fresh in your mind that the person purpose of the assessment is gathering just the information you need to prioritize folks that's it so we don't need to use this assessment to match people in that instance to the housing place that they're going to be at. So it's. just to gather the information that we need to prioritize at that point all right to just wanted to have that fresh in mind. Alright, so I think it's next slide, and I'll pass it over.

**[Alissa Parrish]** Okay, can anybody tell me how They're community defines vulnerability? That's it that's not a rhetorical question like I'm legitimately asking anybody?

**[Participant]** So we're actually, we are finishing our new prioritization tool and starting to implement it and the way that we're defining vulnerability is the probability that someone will still be homeless this time next year, given that they are not provided any services.

**[Alissa Parrish]** Awesome, not awesome that that is what is happening, but awesome, that you have defined vulnerability at the local level. So I think, just building off what Joan just mentioned of like we've heard this emphasis on the perfect assessment tool. But in order to have even a functional assessment tool you have to know what you're assessing for and defining vulnerability is really a local process to understand what vulnerability looks like in your community based on the people that your homeless response system is serving and So I'm not gonna name names on assessment tools today. But I'm also just gonna mention that, like it's not just a single assessment tool that has we have seen this first issue around black, indigenous other people of color not being assessed for vulnerability based on what vulnerability actually means, and how it's defined.

So that is something that communities are really starting to look at. In addition to just your assessment process and how that's potentially prioritizing folks in your community. Also when it comes to that monitoring piece. So are you looking at how many folks are assessed, how many of folks are referred, how many of folks are housed? And then ultimately, how many folks return to homelessness? How long is it taking between each of those steps, and are you disaggregating that by race and ethnicity and what are you seeing? So working with communities we've seen disparities in those different points in time throughout coordinated entry system by things like race ethnicity, even household type age like it's all coming into focus of these different disparities. And so these evaluations really do need to look at, not just your assessment tool process and the different scores it does need to look at the scores and determine is this truly measuring vulnerability by our community's definition, and the people that we are serving? Because often I hear, like well, our definition of vulnerability is most likely who is most likely

to die in the street right I hear that often, and that is a measure of vulnerability and it's like a very small percentage of your people that you were serving in your system. So then yes, we should incorporate that into how we are defining and understanding what vulnerability means for our community. But then, what, right? Because there's this whole other set of folks that also are vulnerable, and what does that mean in our community? And how are we defining that, and what are the data points that are going to get us to understand who is going to be prioritized, based on our definition of vulnerability? And then how do we ensure that future coordinate entry strategies and processes don't replicate those same disparities that we've seen, so that ongoing evaluation and monitoring, really understanding what your system is doing in as lifetime as possible to be able to make strategies and shifts and pivots over time. They don't have to be like explosive changes. They're really just pivots to help further refine and improve your system. Next slide, please.

Apparently, I drew the short straw and I'm going to talk about fair housing briefly of just I mean, I think all of you have heard this before, but we always have to just mention that we cannot prioritize households based on the protected characteristics under fair housing. But we have worked with communities, and communities, have worked themselves to be able to incorporate, addressing racial disparities and inequities, and not just race, race related - but we lead with race, because we know that that intersects with all other inequities that we see. But in your homeless response system being able to look at, I don't wanna call them proxies, but like this piece of information that we know impacts people of color at a disproportionate rate, or people with disabling conditions at a disproportionate rate, or people aged I've heard different ages for what is considered a senior. It hasn't yet been 40 so I appreciate that. But you know, seniors, and what does that look like? How does that disproportionately impact them? So different ways to be able to prioritize without actually saying we're gonna give you a point because you're not white. We're gonna give you a point because you're 65 and older.

So prioritization can be based on many different things so that we've had sessions before we go through the different pieces around. Like needs are different than vulnerabilities are different than barriers, and even I've heard of some communities leveraging like strength-based assessments to help inform their prioritization processes. So what are these different pieces that you're community is really leveraging to understand your prioritization process? And then, as we've talked about making sure that we're including and incorporating and intentionally bringing to that table, or just helping to even build the table to begin with, people who are directly impacted by the changes that we are making in our system so minoritized disenfranchised groups to really help us understand how the sense system is functioning for them, so that we can make changes that will help. And then, being consistent and transparent about your prioritization practices through again those documented policies and procedures and again being able to map over this is what's in our written documentation This is how it's functioning in real life. There, there's a disconnect here? and Where did the change? Where does the change need to happen because it's not always we just need to update our policies to align with what's happening? Sometimes we need to figure out what's happening over here and make sure that that is then reflected in our policies and procedures. Next slide, please.

**[Joan Domenech]** Alright, thank you for taking all the technologies issues. I appreciate it alright. So let's talk about data. Alright who is familiar with the SNAPS data strategy? Way less hands. Jesse was way up very proud I see you okay we're gonna change that I'm not gonna spoil it for you. You're gonna go and

read that but it outlines 3 main goals in regards to strategy for both HUD and communities, and I'll talk about one of them. One of the ones that I used to re-center myself and that I really just use it as a north and so one of the strategies and plain, plain language is communities are going to use their data to improve services and outcomes. An outcome sounds very technically, but it really means like, improve how many people were housing improve, how long they stay in homeless in the homeless situation. So that is like all of the work, a lot of you raised your hand, your HMIS leads. All of the hours you spend on training all of the hours you spend on that data quality on monitoring absolutely everything you're doing is for that goal, so that we can improve the services that we're giving to homeless people. And that's where we ultimately want our data to be. And coordinated entry specifically, has really great opportunity and collecting that data and in having a direct impact on those services that we're providing to homeless people, and so we have a few examples, and we'll share them in a bit. But we wanted to hear from you what are the data sources that you're using right now for your coordinated entry evaluations. So we'll have Collin kind of go around the room thank you Collin.

Gotta taker. We got to takeer back there.

**[Participant]** We use HMIS So universal data assessment and a tool that we put together with that.

**[Joan Domenech]** Perfect Yeah, anybody using anything other than HMIS? Okay, I'm glad you're here. let's talk about this we'll do the next slide, please. Alright So here's some of the examples. I'm going to ask you, where do you think all these examples live? Where can you find them, if you needed to find these right now? There you go, the data management guide. We're going back to that everything we're doing here a lot of it you'll find there has really good resources. This is in the data management guide, and if you see the top 2 say required, so we are required to gather, participate for the participant input, and those are the requirements but there's a lot of other different sources of data you can use. I won't read through all of them but I'll highlight a few. And if you take a look at them they're not all HMIS, they're all, not all numbers there's a lot of qualitative data. There are a lot of experience that we want to gather. So one of the ones that I'll highlight from here is observation of the assessment process. So what you have truly written in your policies and procedures is that really happening? If you go to an assessment center, or if you go to an access point and somebody kind of looked at the process, is it reflective of your policies and procedures, and what you imagined that that process was gonna look like? So that's one of the the data sources that you can use. You can also use call center and intake data if you have that available. If that's something that your community uses that could be really informative of how many people are trying to access via phone and how many of those calls actually turn into referrals because or turn into an enrollment or things of that nature. You didn't take all the technical difficulties thank you for leaving one for me. Thank you. Yeah. So these are just overall some of the data sources. Let's go to the next slide please

So in order to use these, you have to plan ahead. And so a critical piece of doing a coordinated entry evaluation is planning ahead. A lot of HMIS people don't really see themselves as project managers at heart, but let me break it to your project managers you need to get into it. That's just gotta get into it. So you have to really plan ahead, and the reason why is because you might say oh, we wanna capture this piece of information and it's not there. so you can only really evaluate on what you have, and so I'll give you an example. If we can go to the next slide.

This is a community example, and what they've taken this is the very beginning. So they've taken some evaluation questions and it's in a chart who doesn't love excel charts. So you have the evaluation

questions, and you have. Where can you find this different source? So How long does it take from point of completed assessment and prioritization ranking score to actually making a referral? That's one of the evaluation questions that this community wants to get at, and they're gonna do that through HMIS data. And so if you go down and keep looking there's other evaluation questions that this particular community is interested in and they are marking, what are the data sources that they're going to use. And so this is just the beginning, because you know you're saying HMIS data. But you have to get a little bit more into the nitty gritty. What specific data element are you gonna use? And this is kind of like that first look at it, and then you have to get more into like what are the particular questions, but all of this to say that in order for your evaluation to go how you want it to, you need to plan for it, and you need to plan ahead in the early stages. Alright next slide.

Excellent. One of my favorite tools ever who has used this tool in a community. One alright, you're my people Martha, we're right here, really just one. Okay, Thanks.

Okay, this resource is really, really good. It outlines. What are some of the core requirements for coordinated entry. What are some of the recommendations and some optional things in there. It has a particular slide just on where some evaluation requirements, but I'm highlighting it to say your community doesn't need to wait for a formal evaluation to know where where they're doing good, or where they're they need to improve. You can do this self-assessment for your community, and figure out what are your strength and weaknesses?

This doesn't replace a formal evaluation but this is something that you could do, maybe even quarterly, and it measures things that are more not so numbery, that's a word, numbery, when I use that it measures more process driven things. So how is your process changing over time? So you can have a baseline and do this with your community. You can do it by yourself, or you could do with a group of you know stakeholders, a specific committee that you have, and see where you're at, and then a quarter in what has changed what of those processes that are required are you now doing that you weren't doing within the first quarter. So yeah, I know that there's a lot of resources that we keep mentioning. And there's a lot of reading that goes into is I actually always suggest folks to block an hour every, you know, every other day, every day, to just kind of be familiar with some of these resources, but this one in particular really gives you an idea of coordinated entry in general[inaudible] Their requirements, that. Okay, alright, and it does a really good job that if you see, that's the table of content, so it gives you the requirements regarding to planning access assessment, prioritization referral data management and evaluation all right. So I think that I'm passing it to Brian. Oh, go ahead, Colin! Mike, get it Good!

**[Participant]** We use the self assessment, the whole tool. We went through the entire thing with our CES committee, our CE committee, and or horrified the first time to see this year all the areas where we were lacking. But we would pick one or 2 elements at each meeting, and we used to meet quarterly when you know COVID kind of killed that. But I mean monthly We would pick in one or 2 items each meeting, and see what can we do to improve this particular area of weakness before our next meeting? And it didn't always work, but over the course of couple of years. We get to the point where we felt like we were in pretty good shape. It's a really good tool I do highly urge people to use it.

**[Joan Domenech]** Thank you for sharing that. I think it is, you know.

**[Brian Roccapriore]** Yeah, we can go to the next slide, and, like horrific is one way to describe it. Right but it's good to know those things because you don't know what you need to change unless you actually

start looking at things. And there's a lot of new people in this room. What I gauge you by the number of hands going up, so a lot of you weren't around when coordinated entry became a thing you've inherited your systems from somebody else. You might not know why you do the things you do, or the ways that you do them. It may have made sense six years ago, and then that person left, and nobody wrote anything down. And you're trying to back. So this has happened before? Okay, yeah, Okay, yeah. So like everybody finds themselves in those kinds of situations so when you're the new person coming in with the coordinated entry evaluation, and I hope we're driving home the point that it's not just the HIMS folks being part of this but it's much much bigger than that. You can't just pull ones and zeros out of the system to get your coordinated entry evaluation in place. But it is a great place to start to understand how you can improve that system. and I'm here to talk about some evaluation examples. I've also seen a number of people taking pictures of the slides, and these are currently available in the Whova App. So I don't expect you to like Google all of these evaluations to figure out where they are. And I put my Amazon reviews, on there because I assume most of us have probably shopped on Amazon at some point, and when you go to look at the reviews, and there's only like 5 reviews and they're all 5 stars. it's a little questionable if that's a real product or not. So that, like confirmation bias if you're only talking to the people who have been housed through your coordinated entry, of course, everything's going to look like it's golden so you really need to make sure that you have that wide breath of folks giving input to those systems. And that's a healthy review right there right because no one's going to love coordinated entry all the time. That's not a thing that is ever going to exist. You're never going to have an all 5 star rating. Please don't hold yourself to that standard. So I swiped a bunch of these from the Internet, because that's part of my job is to Google things, and I came up with a number of really good evaluations from the past couple years, so it's not like the first iteration of coordinated entry, but folks who have refined their systems over time, and I happen to be go next slide, please. I happen to be sitting at the HMIS desk before, and one of my fellow TA Providers was actually the one that did part of the evaluation in Suburban Cook County. So I'm going to have him come on up and talk about that in a second. But what I really liked about this one is that they checked all the right boxes for that coordinated entry self evaluation. but the system still wasn't humming like it should have. There was still a lot of ways that the system itself could be improved. So just so you check all those boxes doesn't necessarily mean that your system is fantastic. So they highlighted a number of different findings of where that system could be improved.

I tried to frame things positively like there's opportunities I'll say. So some findings were that, like they did have statewide access, but they could really improve how they were reaching different populations. So an over reliance on phone calls, coming in for coordinated entry and not going out to meet the people where they were at. There was some expectation management on the end of the folks who are on the receiving end of coordinated entry. People didn't know what the process was. If it was like a guaranteed housing situation at the end of it. So more information sharing is part of that. An over reliance on phone contacts, specifically in the housing on the referral side of things. If you have been part of the system, you know that phone numbers get disconnected quite regularly. And there was some great recommendations on how folks could better reach the clients that they were trying to serve, and most people didn't know that their system was actually functioning pretty well. There was that feedback loop that we were talking about before to give that information back to the community. It didn't exist there, so colin would you like to say a couple more things.

**[Colin Whelley]** Just about the , you know what we did to figure out that access issue. One was, we asked, a ton of people, we had a bunch of focus groups, we had a bunch of interviews which we have to do. But we kind of triangulated that with the quantitative data, and we did that because suburban Cook County collects geographic data on where people are coming to some extent. Right? So if you can do that in your coordinated entry systems, it's very powerful to think about equity in terms of geography in your CoC or your system. So we were able to triangulate that and really identify key like transportation issues, phone issues and outreach issues in specific places, and give that back to the community. For the assessments, regardless of what assessment you use, or what Suburban Cook County used, monitoring the distributions of those assessments. Okay, it's a fancy word for like throw it in a bar chart and see if Assessor A is doing the same as assessor B at the same organization. Simple. But those things highlight that's how you catch a need for training or need to standardize this the assessment process in a different way, or to like in this this situation stop relying so much on for this community stop relying on, on phones so much for that specific assessment.

**[Brian Roccapiore]** Thank you for sitting next to me earlier so I could see into this presentation Colin. We can go to the next slide and it's actually relevant to what Colin was just talking about throwing things into a bar chart. You can see the distribution of assessment scores based on race up there on the left, and if you didn't throw that into a bar chart. You wouldn't see those like pretty it doesn't seem like that big of a difference between like 1 point on that scale of the assessment tool and I'm not going to get into the assessment tool bashing game right now there is no perfect one, and even if you came up with a perfect one today, it won't be the perfect one in 3 weeks from now. It's an evolving process, so I'd encourage you to really focus like Joan was talking about on that process. But here the 9.6 to the 10.7. You can see that well specific tool was making a recommendation for permanent support of housing above 10 and rapidly housing below. So you could see the obvious disparity is that this tool was throwing into this system right and getting that information, throwing that into the bar chart, allowed the community to figure out that this was a thing that was happening. And what Colin was talking about before in my own community.

We did the same thing by who was assessing folks at different projects to see, because you expect like a bell curve when you do these sorts of things. And there were some that, like the bell curve, started to go down, and then it spiked all of a sudden, because everyone there got recommended for permanent supportive housing somehow, so that let you get in and figure out that that was a training issue, and we really needed to work on that in those specific projects. And so what this community started to do is start to look at things with a race equity, framework, getting more people involved who were actually involved in the system, partnering with the folks who lived experience to really start to minimize that re-traumatization that coordinated entry can have on an individual making folks answer those questions time and time and time again, and really starting to get past that as a system and focus more of their efforts on the back end of housing. I should also say if there's anybody who is part of any of these communities that I'm talking about that wants to say something. By all means, please do, because all I know is what you wrote in your coordinated entry evaluations and it's not meant to be like a gotcha moment right coordinated entry evaluations aren't something that you're going to get like hit on the hands with a hammer for there's something for you to take back to your communities and improve your system. So you don't want like that glowing only people who've enjoyed it review. You really need to figure out where you can improve that system they're not meant to be 5 stars all the time. next slide. all right.

The Santa Clara County one. This was great. They used a bunch of different focus groups to figure out what populations that weren't getting served so they highlighted the LGBTIQ community in Hispanic community specific, because there weren't any access points for those specific populations. Making sure that they increased their housing problem solving on the front end, because what they had found was an overreliance on getting people into the system, but not stopping folks from coming into the system in the first place, and I don't need to read all of this stuff to you here, but making sure that they were doing things the same way in the same in all locations. So there wasn't that disparate impact depending on which door you showed up at and helping minimize referral rejections. That is one of the main reasons that people weren't getting connected to housing is that the referrals were going to housing providers, and they weren't getting accepted by those housing providers so figuring out why that was happening to help minimize it. Good! What was happening in another community? I was working with is that same person would get referred 4, 5, 6, 10 times to that same provider, and just muck up the system. So it was stopping an open housing opportunity from being filled by just cycling through the top person on the list, every single time. So figuring out how that process better works.

Next slide and evaluation, and follow through. Should we do a Q and A. Now, or do we want to flow through blow through Okay, we'll go through next slide want to make sure we're responsible here. So, here's a tweet that I stole: "Are you Okay, you barely touched your dashboard you claimed is Mission Critical." Dashboards are never going to solve homelessness like ever right. They can be a really great resource for folks to see how their systems are functioning. And I'm biased I'm from Connecticut so I put my own dashboard up there. But there's a lot of really good examples of communities that are using their data in a meaningful way on a regular basis to monitor what's going on in their systems and on the next one is Hawaii. Next slide, there we go.

So this is a giant spreadsheet right? And a pretty dashboard, it is not. However, there I like this one, because there's a lot of really good data on there about who's document ready? What is their referral status? How many people got housed, how long it's taking them to get housed. So you don't need a fancy super dashboard that's clickable in a million different ways to get the information. Sometimes it's as simple as this and it comes out on a monthly basis, and it's pushed out to all the providers. So it's a regular recurring actionable report that people have so they could see how all the different areas in their CoCs are functioning on the next one.

We have example from King County who there we go I believe they were just presenting in the last session, so I'm sure there's somebody here who will correct me if I start to get this wrong. There was a ton of different information that King County had out there, and this is just a little bit of it. But you could see that they were looking, not just at who is accepted and who is denied. But the breakdown of those denials like I was talking about before, who got rejected, and for what reason? So they can then use that information to go back and figure out what is the main reason people are being rejected for housing, and how can we get past that? And you could see that the client refuses is number one, followed very closely by, unable to connect with that client. Bringing it back to what we were talking about before on don't just rely on a phone number. Next one. This is from the good people of Boulder Colorado. Again, it's just a slice of what's available. But there's folks who are being exited out of homelessness and boulder allows you to see like where the positive exits were out of coordinated entry, and how are those stack up against each other. So here you're looking at the majority of folks were housed there were 350 or so that were reunified, and 170 got diverted, so you could see how the different interventions are stacking up and where you can put more resources towards, and the next one. There we go someone

and I don't mean to speak ill of Santa Clara County, but someone described the colors on here as the poop of a unicorn. So, so it's, it's still good there's still a lot of really good information here. Is it a colorblind palette? I don't think so, but it's still a lot of really good info.

So it highlights how folks were exiting and what you could see there's like there was no diversion happening before 2020, so you could see like that giant spike of diversion, and the impact that it had in their system, going from absolutely nothing to like 20 something percent of their total exits. So again, it allows you to see where folks are going when they leave that system. And then next we go to the great state of Connecticut where again it's a fancy clickable dashboard, and I know I spoke a little of them before, but this one allows you to see from the 211 call center data how folks are, how many folks are trying to access the system and I don't expect you to know all those wild acronyms over on the left, but those are our coordinated entry areas, and you can see over time how many folks are attempting to come into the system from any given area and filterable by time, and all that fun stuff, too. And then on the next one we get to see the outcomes by area. And I can speak specifically to this because we actually used this in our meetings, and we saw that one of our areas was diverting like a 100% of their families, and that didn't pass the sniff desk for me because that doesn't happen. So you get on the phone you start talking to people, and it turns out it was actually true they were diverting 100% of their families. So it was a great learning opportunity to say, what are you doing in Eastern Connecticut that is working to the fact that there are no more homeless families entering shelter in your region. So we got to like bring them in to teach all of the other folks what was going on there, and how they made it work with this hodgepodge of local funding, and all of that stuff. So there's a lot of really good opportunity there for folks to really see how their systems are functioning, and again dashboards aren't going to solve homelessness, but if you can pick those 2 things like every meeting to start going over and driving things towards a goal, if it's wait times if it's number diverted whatever that might be and start working towards that it's an actionable thing that you can monitor on a regular basis, and all of those examples before are clickable from the PowerPoints that are available in the Whova app. So we have on the next slide Joan is going to talk about the refinement process.

**[Joan Domenech]** Alright, so fast forward in time. You have all these good examples. you you've done it done your evaluation? Are we done? Absolutely not. The that is the beginning. Your evaluation is the beginning to start improving. And so It seems like it is a lot of work just figuring out. And I think that Martha did a great job we're picking two. We're prioritizing that, and so I just wanted to highlight really quickly, because we do want to hold some space for you to ask questions a process that I've been doing with some communities of just doing an agile refinement process where you're taking, everybody's busy I think somebody mentioned there's a lot going on, so why don't we do it in a time. Limited process and so I've been doing with communities is let's look at your evaluation plan let's prioritize as a community. What are the things that you're going to be working on and let's set a structure of 10 meetings where we go through and actually get community input on the solutions. So it's not you coming up with the solutions it's the people that we serve, that should become a coming up with those solutions. And so the next slide, if we can go to it, has kind of like the components of what that lab type thing would look like. And there's no right or wrong way to do this. It really is a about having a process after your evaluation, so that you're incorporating what you find into your practices and improving those services and so this is just one example, and you know these are the components that that we've been kind of making sure that our exists is part of that short kind of 10 week process, and at the end they always leave with some actionable top 4 things that they're working on in their coordinate entry. So you want to have a diverse,

inclusive group. You want to have clear identified areas of improvement where you're not in compliance. The self-assessment in your evaluation will give you those areas that you need to work on, and then you need to do the work and develop the strategies, and they might not work, and you might want to come back to them really quick, and say, this didn't work in, let's change it. And that's all part of that iterative improvement process, and then you want to create a plan. You know, I've said that a lot the plan is going to be important for us. What is the plan for the strategies and implementing them? And then ultimately, how are you going to monitor all of the different examples that Brian showed? That is that should be responsive to this it shouldn't be there because we're curious, or we want to know something about the thing. It should be there because we've determined that this is a priority. This is a strategy that's going to improve the services outcomes and we're going to monitor that. So yeah, we're just going to open up the space we hope you left with some good ideas. And now know about the SNAPS data strategy and the data management guide. I'm going to get on that so we're just open it up for any lingering questions that you all might have. No questions?

**[Brian Roccapriore]** That applause is for you. Go ahead.

**[Participant]** Yes, I just wanna know what state that Suburban Cook County evaluation was from?

**[Brian Roccapriore]** Illinois

**[Participant]** So do we know what they classified as suburban like? What cities or how do they come up with that determination of suburban cause there's a lot of like suburbs north south east west and they're trying to see what they...

**[Colin Whelley]** So the suburban Cook County is like Chicago is here. Suburban county is the whole side of the Donut. So they have a north region in west region, in the south region, and so the evaluation looks at all of that together, and then separates it out into regions so that we can compare the disparity between regions and that was really helpful because they had to have because it's so geographically separated. They had to have different systems in some way.

**[Participant]** This is a non-sequitur, but we never got your dog's name. What is your dog's name?

**[Joan Domenech]** Now and there's just if you ever want to adopt. You know I got you. We have a lot of a lot of animals so her name is Addie, and she's my first foster, fail and she's my she was my 12 foster in a year I love her.

**[Brian Roccapriore]** Can you go to the next slide, please? Those are emails they're in the PowerPoint One more slide there we go. If you could all take out your phones and make sure you rate the session 5 stars I'd appreciate it. But while that's going on, and you're all doing it happy to take any more questions that anybody has. I did in the beginning of the presentation, Alyssa I did say my Dog's names in the beginning of the presentation they are Poppy and Franklin. Collins coming over.

**[Participant]** This might be a HMIS desk question but for those of you who have coordinated entry systems that operate in your HMIS, interested and talking with people who how you've incorporated informed consent to reach back out for survey or evaluation for those of completed CE enrollments. Just for my privacy and consent standpoint, because ours is housed in HMIS they can send to enrollment but they don't consent necessarily to be in contacted by a third party who's going to complete the

evaluation in order to get that feedback afterwards. So anyone who has incorporated that into their evaluation strategy I would be interested in learning more.

**[Brian Roccapriore]** We have a hand up for here and I'm going to run the mic over.

**[Participant]** So part of our evaluation, process like we had highlighted initially was that we moved away from only evaluating folks as they were connected to housing. So as they're on that CE list, or the priority list still chatting with them and keeping in contact having a designated agency, or folks that are in connection with them, asking those questions completing those evaluations about their experience and then also in incentivizing is a big part of it. We really want to show folks at their time is being valued and that their participation matters, and that they have a voice so incentivizing it, I would say, is a big part of that process as well. I don't know about after their housed, though I would say probably on the agency that house them, if you're conducting those assessments,

**[Brian Roccapriore]** One of the many hats I wear is I work on the AAQ desk. So if you were to put in a question about a release of information, you get a response that read something like a release of information is not a baseline requirement from HUD, and people will accuse me of giving a non-answer on the AAQ desk quite often, and I am quite skillful at it at this point. That is me. So all anger can come like right here after the session. But as long as it is in your privacy notice what you're going to be doing and there is informed consent on their end, you can use that as your means of being able to reach out to folks happy to answer that question in the AAQ if you decide to put it in, or if anybody else wants to talk afterwards.

**[Participant]** I have a question that's not really directly related to monitoring and evaluation. But I know within our CoC we realize that our coordinated entry system is underutilized, and we would like to be able to encourage more agencies to participate in more options for people who enroll in the system, and I'm wondering if anyone can give suggestions for enticing collaborative entities to join.

**[Brian Roccapriore]** Any yeah anyone have any recommendations for enticing other folks to join your coordinated entry system? The mics coming over.

**[Participant]** Hey, so just a couple of ideas I think one it's not enticing, but working with your other local funders to get them to require coordinated entry and getting them bought into it. So they're all putting it in their contracts so I think that's the most important way. But then we've also made diversion funding available to partners who participate in coordinated entry, so they have access to that flexible funding. And then we've also worked, with our housing authority to get them to allocate vouchers that we can give out to our partners that participate.

**[Brian Roccapriore]** And there's been a number of places too, where there's a privately funded shelter who's not going to fully participate because they don't have to you know is not their thing. But over time you can see that, like coordinated entry is the means of prioritization. And if the folk are in a shelter somewhere that isn't being noticed that they are doing a disservice to the people who are in that shelter. So what I realized over time in my own system was there are ways to work with them, maybe not to be an access point maybe not to like be fully bought in partner. But to at least have somebody be on site every once in a while to get the folks registered, and so they can be prioritized for those permanent house solutions.

We have 3 min left. We'll get the mic worked out for the next question, I promise. Alright, well, thank you all for coming. I appreciate you for being here. There are a lot of people in this room. To the millions of people watching at home, thank you. Hopefully the audio didn't cut out too bad there. There is an HMIS help desk over there, so there's TA staffing it all day long, if you have any questions, or concerns, you can go over there, and they are there to answer your questions. So thank you all!