

Integrating Community Knowledge Into Innovative Data-Informed Prioritization



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South Alamo Regional Alliance for the Homeless
(SARAH)

Who is SARAH and What do We Do?

The South Alamo Regional Alliance for the Homeless (SARAH) **exists to ensure everyone has a place to call home in San Antonio and Bexar County.**

SARAH is HUD's designated **Continuum of Care (CoC) lead agency**, the regional coordinating body around homelessness.



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About This Session

This presentation outlines a pilot prioritization tool to replace the VI-SPDAT with a system that is both community and data-informed.

Our new proposed tool aims to be easier to use in the field and is data-informed, utilizing historical HMIS data and incorporating the assessment of case workers and those with lived expertise.

Learning Objectives

- **Emphasize** the importance of the iterative process
- **Outline** working with and integrating community and partner feedback
- **Describe** the logic and process of innovating prioritization

Presentation Outline

- Setting the Stage
- Project Planning
- Gathering Community & Partner Expertise
- Preliminary Findings
- Tool Structure
- Implementation
- What's Next
- Q&A

Setting the Stage: HMIS

- Our local HMIS lead is Haven for Hope, the city's largest shelter and access point
- 49 user organizations
- 809 individual user profiles
- 196 active programs
- No User fees charged



Setting the Stage: Homelessness in San Antonio & Bexar County

- Population of nearly 2 million
- Between 1,500 – 2,000 unsheltered (average)
- 2,000 sheltered (average)
- About 50% of clients served are Latinx/Hispanic
- About 20% Black/African American



Project Planning

- **Connecting with the Lab for Economic Opportunities (LEO) at Notre Dame University**
 - Economists studying & working with communities on poverty interventions
- **Connecting LEO & SARA**
 - Grant application process
 - \$25,000 at pilot launch
- **Laying the groundwork in weekly meetings**
 - Identifying the Problem
 - Brainstorming Solutions
 - Who needs to be at the table?



Gathering Partner & Community Expertise

Winter Listening Sessions (December 2021)

- How do you define vulnerability?
- What sorts of questions can you imagine or think of that would help people's vulnerability score accurately reflect what they are experiencing?
- What sorts of incidents or traits do you believe a tool should prioritize?
- Is there anything that is currently working with the existing prioritization tool?
- When you think about our community and the ways we get to a vulnerability score, what is the one thing that weighs most heavily on your heart? What do we need to be thinking about?
- Is there anything else we haven't touched on?

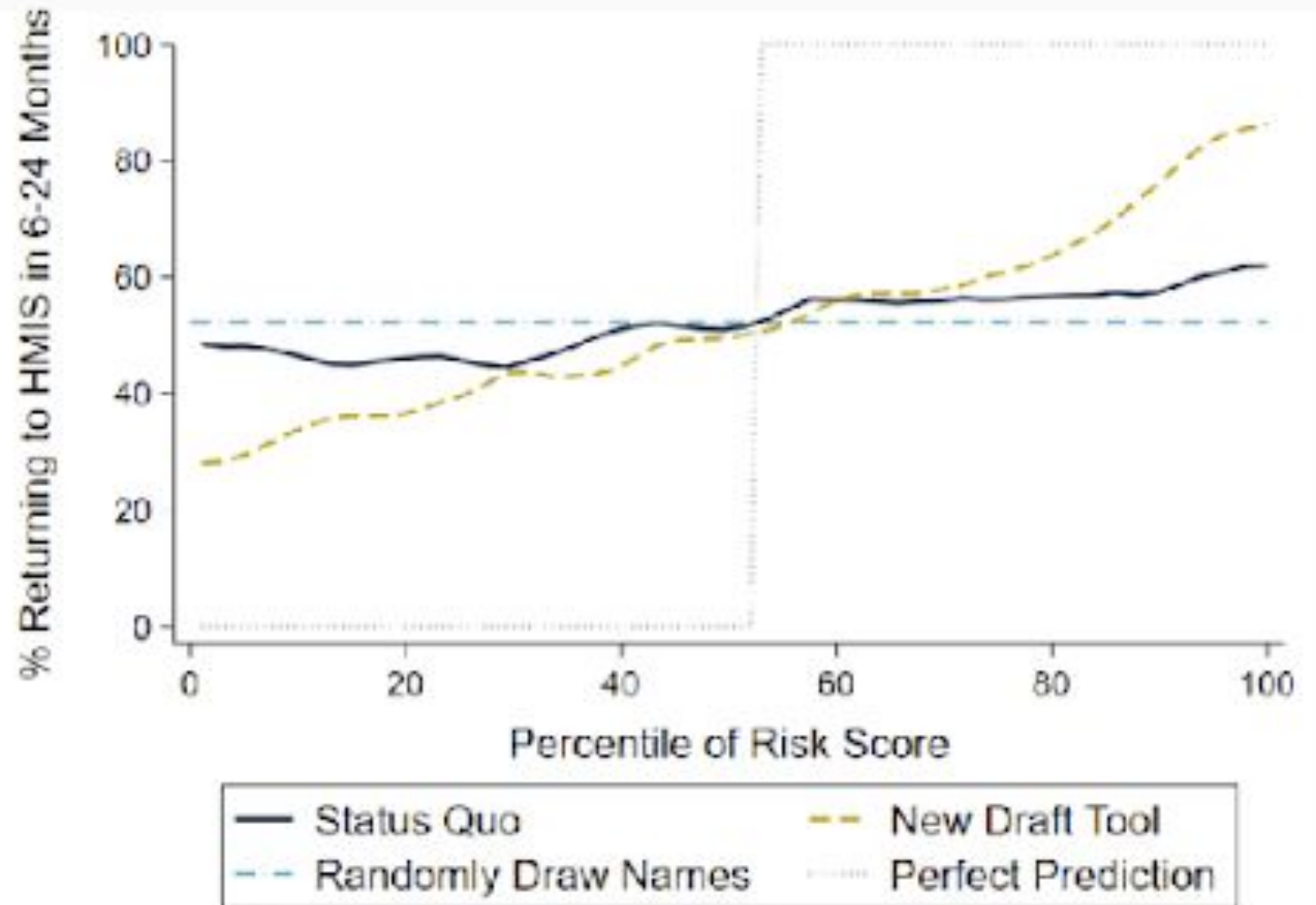
Gathering Partner & Community Expertise

Spring Listening Sessions (April 2022)

- Share preliminary data with partners
- Iterative process and honest feedback pushed and necessitated innovative responses

Preliminary Findings

Comparing: Accuracy



**Visual courtesy of LEO*

Tool Structure



Client Input

- An opportunity for client choice; ***they are the experts in their lives.***
(phase 1)
 - ***Example:*** *Clients could be presented with the tradeoff between getting RRH sooner versus PSH later. Are they willing or able to wait longer for a program with more significant support?*
- Client rating their own level of vulnerability to continued homelessness. *(phase 2)*

Caseworker Ratings

- Allows caseworkers to directly provide their subjective assessments of client vulnerability.
- [On a scale of 0-100], how vulnerable is the client to continued homelessness? Think of your rating as indicating the likelihood this client would be homeless at this time next year if they receive no housing help from homeless service providers. A score of "0" means they almost certainly will obtain housing on their own (low risk). 100 means they almost certainly will be homeless without help from homeless service providers (high risk)]
- Please provide a written justification for the score you provided. Describe the factors about the client or their circumstances that led to this score, whether the score is low or high. It is important to be as specific and detailed as possible, as this information will be used to improve future prioritization.

Data-Driven Risk Scoring

- Based on preliminary findings
- Uses machine learning to identify what factors increase the risk of returning to homelessness
- Compute overall risk score and prioritize assistance to those with a higher score

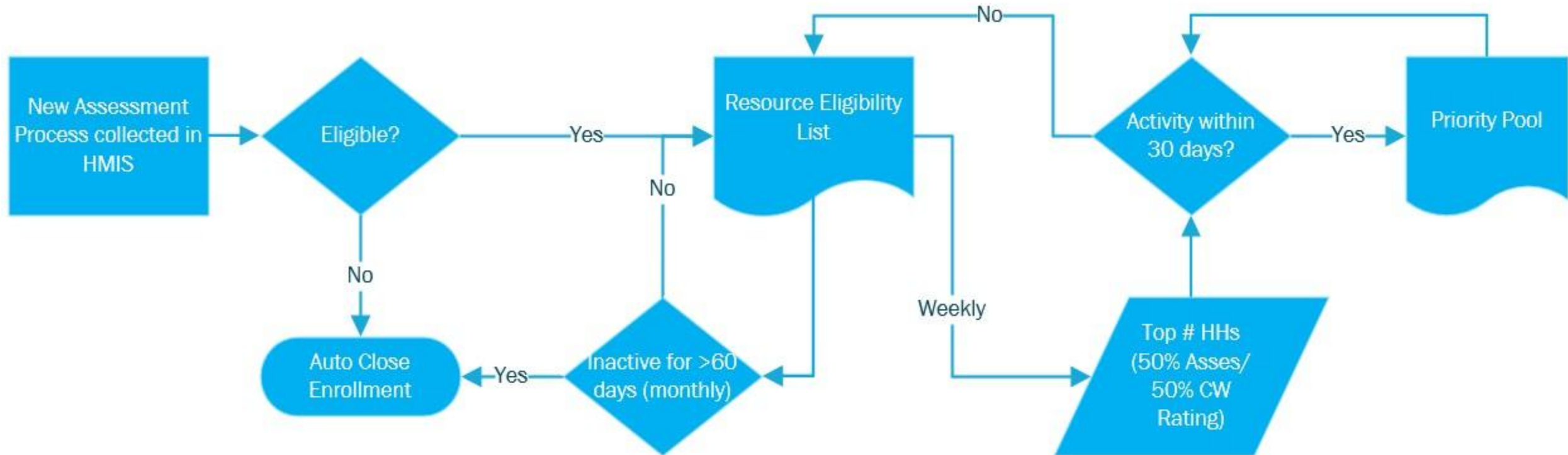
Data-Driven Risk Scoring Elements

- CLS
- Substance Abuse
- Development Disability
- Physical Disability
- Mental Health
- Chronic Illness

Prioritization

- Priority Pool Composition
 - 50% Based on Assessment score
 - 50% Based on Case Worker Rating

Prioritization Workflow



Looking at our Data

- What combination of data-driven decision-making, caseworker evaluation, and client preferences prioritizes clients in the best way?
 - What factors are most important for identifying risk?
 - Do case worker ratings match data-informed predictions?
 - Does client input shape housing intervention effectiveness?
 - Do findings support the HUD “order of priority” for PSH?
 - Do assessor identities influence their subjective assessments?

Implementation - Who is at the table?

Coordinated Entry & Outreach Advisory Committee

Chaired by the City and County (both of whom are CoC Board Members), other stakeholder seats include:

- Homelessness Prevention
- Haven for Hope
- VA
- Criminal Justice, etc.
- Emergency Shelter (ES)
- Homeless Access Hubs
- Permanent Supportive Housing (PSH)
- Lived Expertise

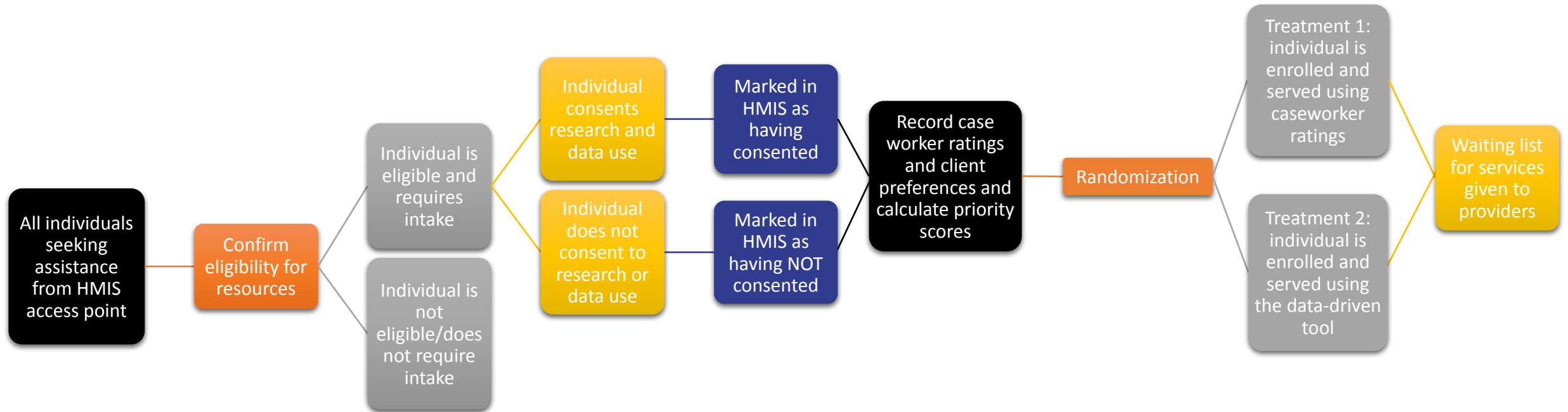
Implementation: Building the Team

- Information Systems Support Subcommittee
 - Planning and coordination across the CoC, HMIS, and LEO
 - The subcommittee collected input and tested components with all direct users and leadership through various community meetings/events.
 - Subcommittee Members included:
 - Street Outreach Providers
 - Emergency Shelter Providers
 - Access Point Providers
 - RRH & PSH Providers
 - Lived Expertise
 - HMIS Team

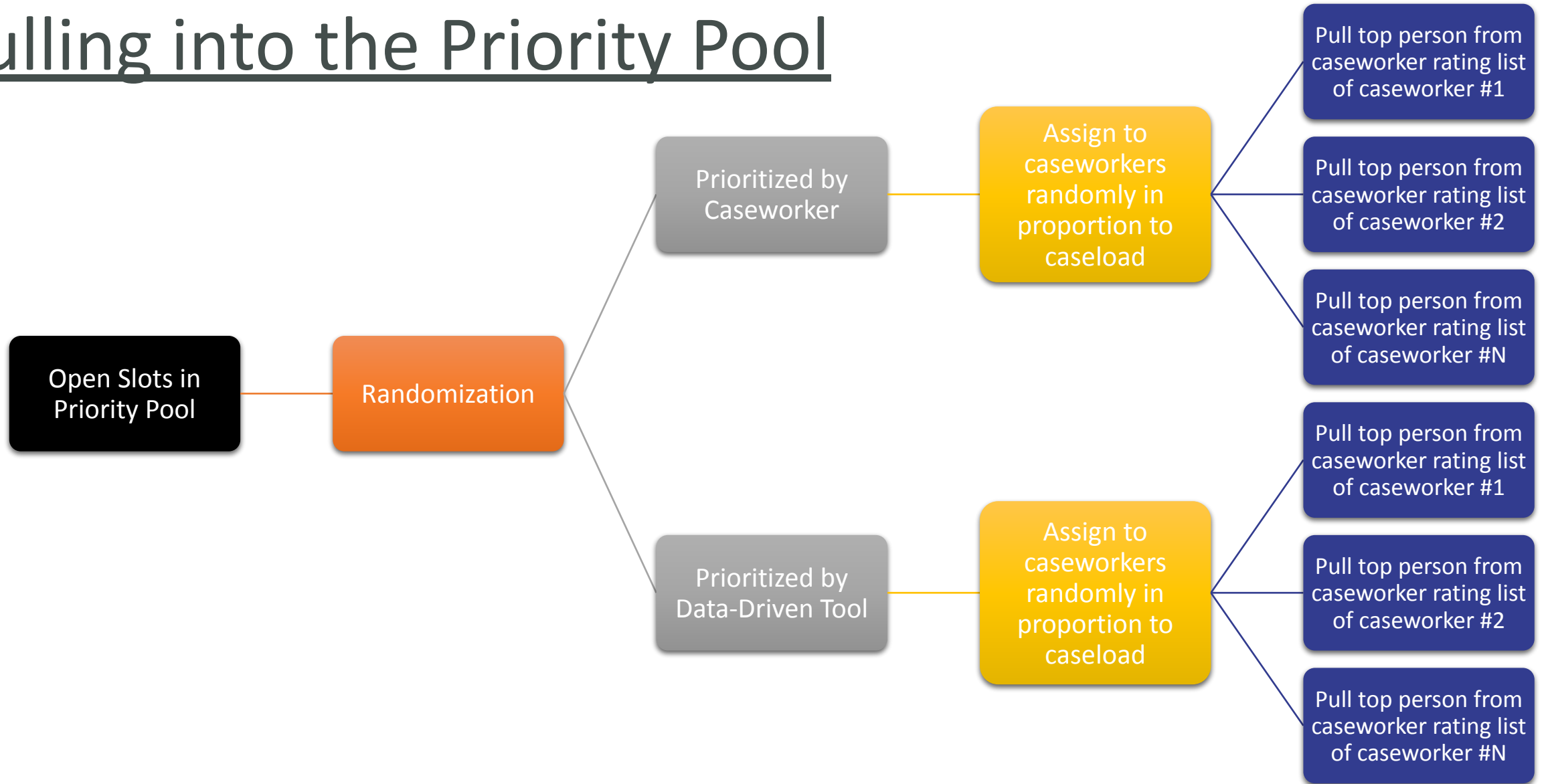
What's Next?

- Expected to run a trial for at least two years, with housing outcomes measured after 3 months, 6 months, 1 year, and 2 years
- Implementation of Phase 1 (Nov 2022) – risk scoring and case worker rating
- Implementation of Phase 2 (January 2023) – add client preference

Study Enrollment Diagram



Pulling into the Priority Pool



Thank You!

Any Questions?

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