



October 7, 2020



## **Sonoma County ACCESS – Helping the Homeless During the COVID-19 Pandemic**

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**Carolyn Staats**, Director of Innovation, Information Services Department, County of Sonoma

# The Challenge

## ***Sonoma County 3<sup>rd</sup> highest homeless population in U.S. large suburban counties***

- In the 2019 Point in Time Homeless Count, Sonoma County has the 3<sup>rd</sup> highest percentages of unsheltered homeless individuals.\*
- Significant contributors to Sonoma County's homeless problems are high housing costs, low vacancy rates, and displacement due to the recent wildfire disasters, lack of adequate behavioral health services.



*\*The 2019 Annual Homeless Assessment Report (AHAR) to Congress*

# The Challenge

Siloed Programs

+

Siloed Systems

+

Siloed Funding

=

Poor Outcomes



- Services and programs are not integrated
- Staff across programs do not systematically collaborate to support clients.
- Inefficient service delivery.

- Unable to share key information across programs that would enable more effective service delivery.

- Categorical funding limit ability to pool funding across programs to build collaborative programs.

- Lack of integration barrier to support vulnerable clients.
- Poor outcomes for improved well-being and self sufficiency.
- Costly and administratively burdensome



# The Solution

Integrated Care Management



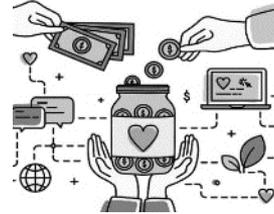
- Safety net Front-line staff and community partners working together
- Coordinated problem-solving
- Coordinated goal-setting

+ Enabling Technology



- Sharing data across siloes
- Access to critical information to inform care management and service needs.
- Integrated care plan anytime anywhere

+ Braided Funding



- Pooled funding to build shared data systems and integrated care management teams
- Fund gaps in collaborative care system

=

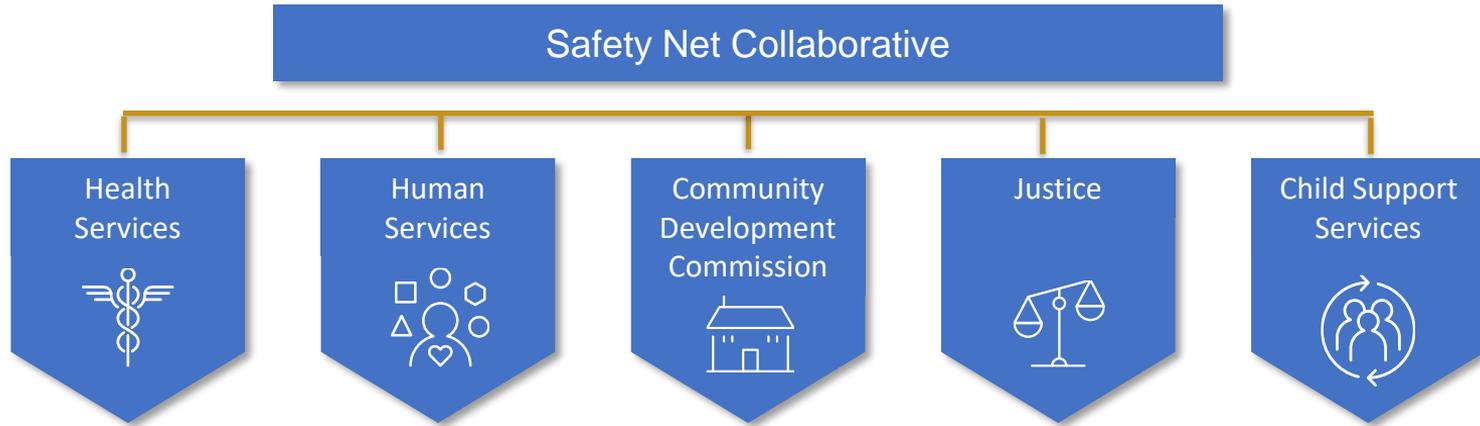
Successful Outcomes



- Housing and sheltering
- Behavioral health and medical services
- Economic assistance
- Food assistance
- Improved well-being and stability



# ACCESS Sonoma Organizational Leadership

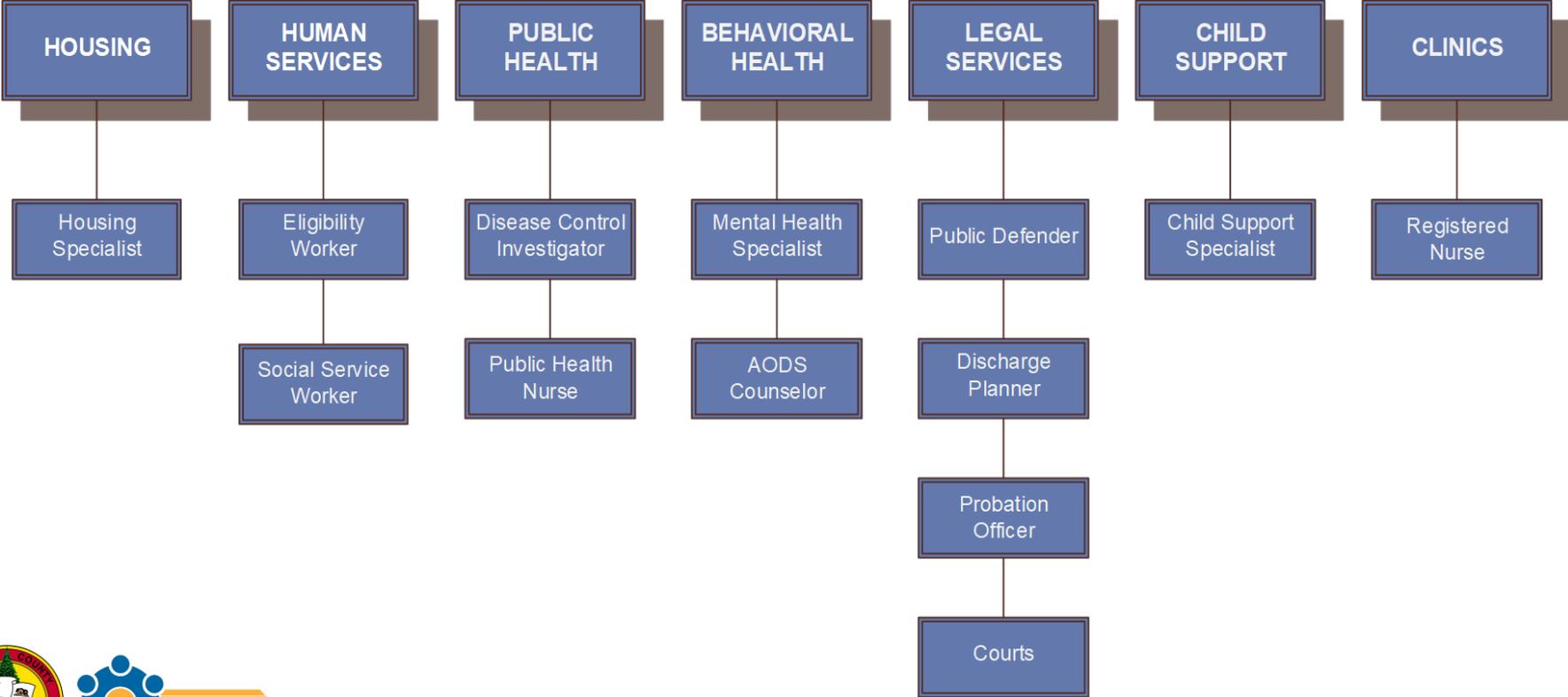


- Policy Development
- Discharge Planning
- Interim Encampment Policy
- Funding Decisions
- Staffing Decision
- Cohort Selections
- Budget Planning

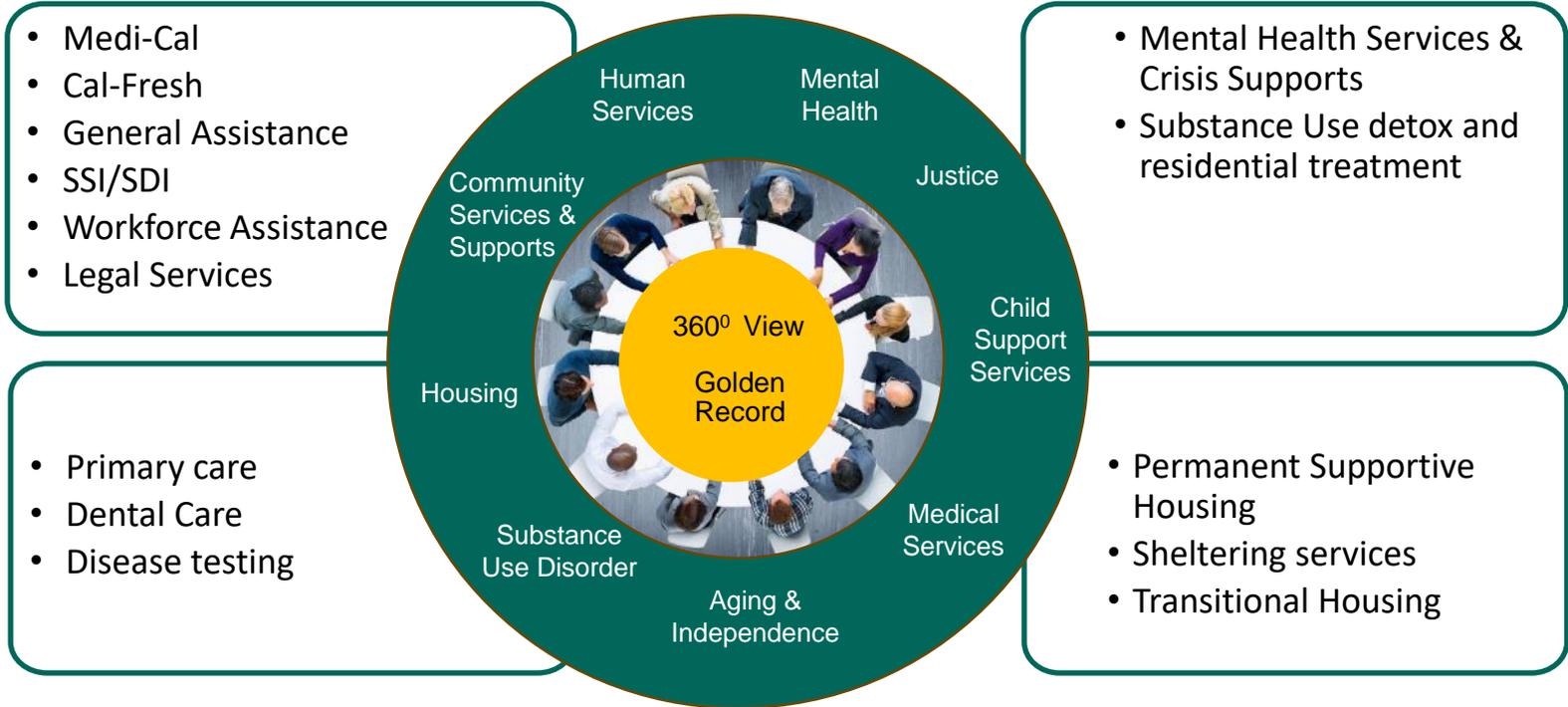
***Collaboration without integration is just another form of fragmentation***



# Organizational Structure – Integrated Care Management Team



# ACCESS Safety Net Services



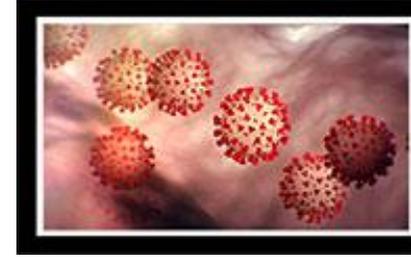
# ***ACCESS Sonoma Cohorts***

**3971  
Participants  
across  
6 cohorts**

1. **COVID-19-Vulnerable** – Launched May 14, 2020
2. **Homeless Encampment (HEART/JRT)** – Launched Dec. 24, 2019
3. **High Needs Homeless** – Launched Feb. 1, 2018
4. **Emergency Department High Utilizers** – Launched May 21, 2019
5. **Emergency Rapid Response** – 2017 Complex Fires and 2019 Kincade Fire
6. **Mental Health Diversion** – Launched November 5, 2019



# COVID-19 Cohort



Target outreach: homeless, 65 years of age or older and those under 65 with serious underlying health conditions (respiratory illness, heart conditions, diabetes, cancer, etc.)

## Covid-19

- Launched May 14, 2020
- **(243)** COVID-vulnerable sheltered
- **(112)** Individual needs assessed for safety net services & housing
- **(112)** ACCESS enrolled
- **(46)** Voucher Applications Submitted

## Covid-19 Services Provided

- Medi-Cal Enrollments
- CalFresh enrollments
- SSI Enrollments
- Shelter Placements



# *Homeless Encampment Access & Resource Team (HEART) Cohort*



## **HEART Cohort**

- Launched December 24, 2019
- **(304)** Participants Enrolled
- **(338)** Outreach and Engagement episodes

## **HEART Service Services Provided**

- Medi-Cal Enrollments
- Enrolled in General Assistance
- CalFresh Enrollments
- SSI Enrollments
- Housing vouchers awarded
- Shelter Placements
- Permanent Housing Placements
- Coordinated Entry referrals
- Placed residential substance use treatment
- Enrolled in MH services



# ***High Needs Homeless (HnH) Cohort: SPMI with underlying medical conditions***



## **High Needs Homeless**

- Launched February 1, 2018
- **(172)** Participants Enrolled in Cohort
- **(3092)** Outreach and Engagement episodes

## **High Needs Services Provided**

- Medi-Cal Enrollments
- General Assistance Enrollments
- CalFresh Enrollments
- SSI Enrollments
- Established Medical Homes
- Shelter Placements
- Housing Placements
- Coordinated Entry Referrals
- Placed Residential Substance Use Treatment
- Enrolled in MH Services



# ***Emergency Department High Utilizers Cohort***



## **Emergency Department High Utilizer**

- Launched May 21, 2019

## **ED High Utilizer Services Provided**

- Medi-Cal Enrollments
- General Assistance Enrollments
- CalFresh Enrollments
- Shelter Placements
- Housing Placement
- Enrolled in MH services
- Cost savings \$25,173.60-\$75,315.65



# ***Emergency Rapid Response Cohort: 2017 Complex/2019 Kincade Fire Disaster Response***



## **Emergency Response team**

- Deployed October 2017  
(Complex Fires)
- Deployed December 2019  
(Kincade Fire)
- **(238)** Participants Enrolled in  
Cohort

## **Emergency Response Services Provided**

- Housing Placements
- Shelter Placements
- Enrolled in one or more of the  
following: General Assistance, CalFresh,  
Medi-Cal, SSI, IHSS



# ***Mental Health Diversion Cohort: Diversion from Criminal Justice System***



## **Mental Health Diversion**

Launched November 5, 2019

- (22) Referrals from PD to Courts
- (26) non-duplicative referrals from Courts to MH Diversion
- (11) Accepted into services for SCBH MH Diversion program
- (7) Enrolled into SoCo Behavioral Health/Mental Health Diversion program
- (7) Pending enrollment into Sonoma Access

## **Mental Health Diversion Services Provided**

- Medi-Cal Enrollments
- General Assistance Enrollments
- CalFresh Enrollments
- Established Medical Homes
- Housing Vouchers Awarded
- Shelter Placements
- Living with Family





# Addressing Homelessness Efforts to Date



# Addressing Homelessness

- On December 23rd and March 10th, the Board of Supervisors made significant investments of resources to aggressively address homelessness in the County
- Approved the County's participation in the Governor's 100-day challenge
- The County ACCESS Initiative has played an integral part in addressing homelessness in the county over the past year with its focus on integrated care management teams using enabling technology to develop care plans and track goals along with increased safety net services and supports
- Have utilized 10 trailers from the governor to help support the County's efforts to achieve functional zero homelessness



# *Addressing Homelessness*

To house those most at risk of contracting COVID-19 the County established four non-congregate sites:

- **Best Western Dry Creek**, Healdsburg
- **Astro Hotel**, Santa Rosa
- **Sonoma County Fairgrounds**, Santa Rosa – utilizing the Governor’s 10 trailers
- **Alliance Redwoods**, Occidental

**80 Vouchers  
for  
COVID-19  
homeless**





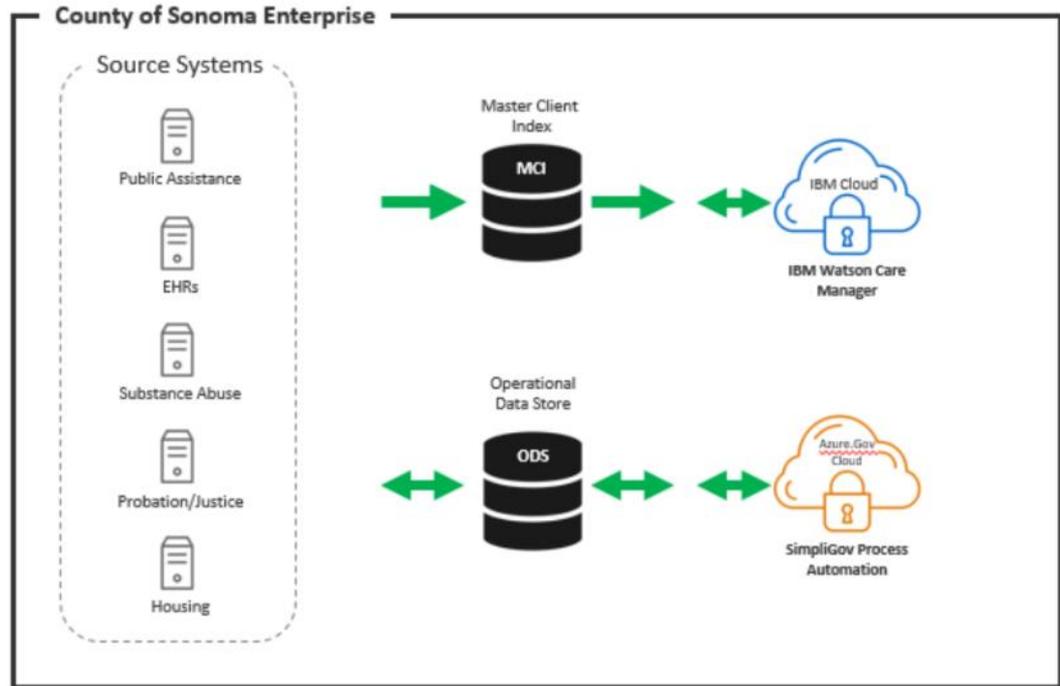
# ACCESS Sonoma Data Hub



# ACCESS Sonoma Key Components – Integrated Data Systems

## The ACCESS Data Hub

- Integrated data hub combines data from safety net source systems.
- Integrated holistic view of the client
- Cloud-based, mobile care coordination shared by all team.
- Community-based organization participation and referral capability.





Martin Shore

53 Years  
12/1/1966  
Male  
Priority: Not Set

Alerts (2)  
Virtual Record

Actions

Address  
600 Morgan Street,  
Santa Rosa,  
95401

Phone  
707-212-3456

Agent  
Ron Turik  
707-334-8532

Programs  
WPC Intensive Case  
Management

Summary

Care Team Safety Concerns

Dangerous Living Conditions .  
Dangerous Living Conditions. 6th  
St Bridge visit requires  
appropriate footwear - lots of drug  
paraphernalia on ground including  
used sharps

Programs

WPC Intensive Case Management

Assessments

PHQ-4 (Anxiety/Depression:  
Patient Health Questionnaire  
4-item)

PHQ-4 Anxiety Subscale	5
PHQ-4 Depression Subscale	5

10/7/2019

Latest Touchpoint

Face to Face Other:  
Successful

Good meeting with client  
reviewing goals and updating

Protective Factors

Income . Currently working with  
IHSS for about 20 hours a month

Positively Engaged in Behavioral  
Health Treatment .

Employment History .

High School Education .

Job Skills .

Goals

Adequate Behavioral Health  
Treatment

Safety Screening

Needed Physical Health Ser-  
vices

Adequate Consistent Income

Suitable and Stable Housing

Places Frequented

Russian River area. Works with  
WCCH and goes to Clean Day.  
6/4/2019 -

Current Actions

Follow Recommended Men-  
tal Health Treatment  
6/11/2019

Determine Housing Need  
6/11/2019

Establish Mental Health  
Provider  
6/11/2019

Connect client to other shel-  
ter (winter shelters, Red-  
wood Gospel Mission, Day  
Centers)  
6/11/2019

Determine Need for Safety  
Planning  
6/11/2019

Health Background

Diabetic, shoulder pain  
possibly needing an

Care Team

- Carolyn Staats  
Lead Care Manager  
707-5655472
- Jessica Hetherington  
BH: Eligibility Social  
Worker
- Watson Demo  
Lead Care Manager
- Abigail Garcia Diaz  
HSD EA: Senior Eligibility  
Specialist
- Cruz Lopez  
Care Manager - not  
Primary  
707-5654812

Planned Actions

No Records

Personal Background

Homeless living out in the  
Russian River area. Lots of  
social contacts out there  
including WCCH. Has kids but  
estranged. Has had a few ex  
wives but...



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Management

Summary Plan Programs Data History Team

Summary

Share Care Plan Customize Summary

Care Team Safety Concerns

Dangerous Living Conditions .  
Dangerous Living Conditions. 6th  
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used sharps

Programs

WPC Intensive Case Manage-  
ment

Assessments

PHQ-4 (Anxiety/Depression:  
Patient Health Questionnaire  
4-item)

PHQ-4 Anxiety Subscale  
Positive Screen - Anxiety 5

PHQ-4 Depression Subscale  
Positive Screen - Depression 5  
10/7/2019

Latest Touchpoint

Face to Face Other:  
Successful  
  
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Protective Factors

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Position . Employment in Behavioral  
Health

Employment History .

High School Education .

Job Skills .

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Centers)  
6/11/2019

Determine Need for Safety  
Planning  
6/11/2019

Health Background

Diabetic, shoulder pain  
possibly needing an

Collaboration tools for  
Interdepartmental  
Multidisciplinary Teams



Care Team

Carolyn Staats  
Lead Care Manager  
707-5655472

Jessica Hetherington  
BH: Eligibility Social  
Worker

Watson Demo  
Lead Care Manager

Abigail Garcia Diaz  
HSD EA: Senior Eligibility  
Specialist

Cruz Lopez  
Care Manager - not  
Primary  
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Planned Actions

No Records

Personal Background

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Russian River area. Lots of  
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**Martin Shore**  
53 Years  
Male

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600 Morgan Street,  
Santa Rosa,  
95401

**Phone**  
707-212-3456

**Agent**  
Ron Turik  
707-334-8532

**Programs**  
WPC Intensive Case Management

**Care Team Safety Concerns**

**Programs**  
WPC Intensive Case Management

**Assessments**

PHQ-4 (Anxiety/Depression: Patient Health Questionnaire 4-item)	
PHQ-4 Anxiety Subscale	5
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10/7/2019	

**Latest Touchpoint**

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Good meeting with client reviewing goals and updating

**Protective Factors**

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Positively Engaged in Behavioral Health Treatment .

Employment History .

High School Education .

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**Goals**

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Safety Screening

Needed Physical Health Services

Adequate Consistent Income

Suitable and Stable Housing

**Places Frequented**

Russian River area. Works with WCCH and goes to Clean Day. 6/4/2019 -

**Current Actions**

Follow Recommended Mental Health Treatment  
6/11/2019

Determine Housing Need  
6/11/2019

Establish Mental Health Provider  
6/11/2019

Connect client to other shelter (winter shelters, Redwood Gospel Mission, Day Centers)  
6/11/2019

Determine Need for Safety Planning  
6/11/2019

**Health Background**

Diabetic, shoulder pain possibly needing an

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Lead Care Manager  
707-565472

Jessica Hetherington  
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HSD EA: Senior Eligibility

Cruz Lopez  
Primary  
707-5654812

**Planned Actions**

No Records

**Personal Background**

Homeless living out in the Russian River area. Lots of social contacts out there including WCCH. Has kids but estranged. Has had a few ex wives but...

Protective Factors provide the IMDT insights into strengths that can be applied no matter the program

Places Frequented provide the IMDT with real-world information for in-person service delivery

**Martin Shore**  
 53 Years  
 12/1/1966  
 Male  
 Priority: Not Set

**Alerts (2)**

**Virtual Record**

**Actions**

**Address**  
 600 Morgan Street,  
 Santa Rosa,  
 95401  
 Phone  
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**Agent**  
 Ron Turik  
 707-334-8532

**Programs**  
 WPC Intensive Case Management

**Care Team Safety Concerns**

Dangerous Living Conditions . Dangerous Living Conditions. 6th St Bridge visit requires appropriate footwear - lots of drug paraphernalia on ground including used sharps

**Programs**

WPC Intensive Case Management

**Assessments**

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Lead Care Manager  
707-5655472

Jessica Hetherington  
BH Eligibility Social Worker

Watson Demo  
Lead Care Manager

Abigail Garcia Diaz  
Specialist

**Planned Actions**

No Records

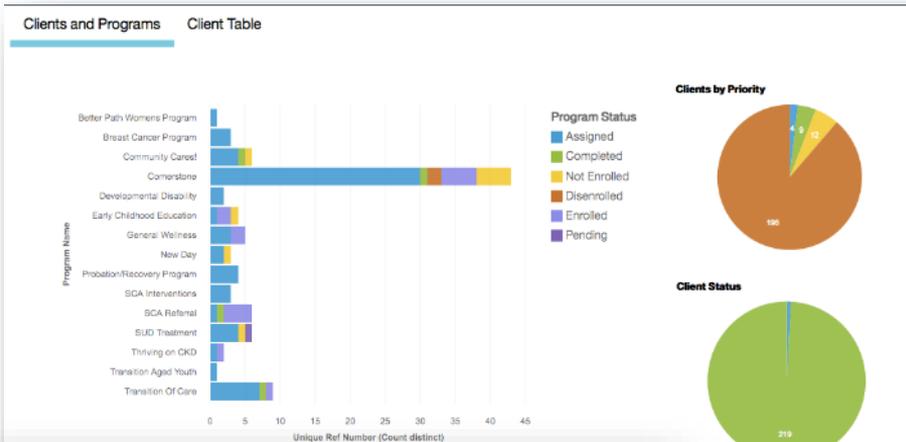
**Personal Background**

Homeless living out in the Russian River area. Lots of social contacts out there including WCCH. Has kids but estranged. Has had a few ex wives but...

Goals highlight the areas of focus for Martin

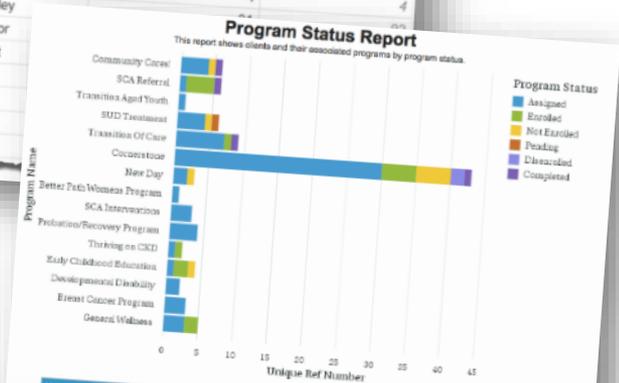
Actions track the activities Martin and the IMDT are taking, working towards his Goals

# Watson Care Manager Reporting



### Patients Assigned to Care Managers

Full Name	Patient Currently Assigned	Total Patients Assigned
Adrienne Donato		
Aidan McDermott	2	2
Angela Schmahl	1	1
Anne Fray	12	12
Annette Fudge	6	6
Barb Murringer	4	4
Brandon Barringer	3	3
Brittney Bentley	4	4
Crystal Connor		
Erikka Bobbitt		
Eva Das		
Frank Pagan		
Jim Blackwell		
John Ridley		



### Care Team Actions

Added By Full Name	Total Added	Total Complete	Added Past 7 Days	Closed Past 7 Days	Added Past 8-14 Days	Closed 8-14 Days	Added Past 15-21 Days	Closed 15-21 Days	Added 22-28 Days Ago	Closed 22-28 Days Ago	Added 29+ Days Ago	Closed 29+ Days Ago
Robb Murringer	81	38	0	0	0	0	0	0	0	0	0	0
Brittney Bentley	219	206	2	1	0	0	0	0	0	0	0	0
Crystal Connor	49	4	2	0	0	0	0	0	0	0	0	0
Frank Pagan	199	16	0	0	0	0	0	0	0	0	0	0
Wendy Clark	19	4	0	0	0	0	0	0	0	0	0	0
Wendy Clark	36	36	0	0	0	0	0	0	0	0	0	0
Wendy Clark	16	16	0	0	0	0	0	0	0	0	0	0
Wendy Clark	42	2	0	0	0	0	0	0	0	0	0	0
Wendy Clark	89	2	0	0	0	0	0	0	0	0	0	0
Wendy Clark	83	14	0	0	0	0	0	0	0	0	0	0
Wendy Clark	67	20	0	0	0	0	0	0	0	0	0	0
Wendy Clark	62	8	0	0	0	0	0	0	0	0	0	0
Wendy Clark	18	18	0	0	0	0	0	0	0	0	0	0
Wendy Clark	17	1	0	0	0	0	0	0	0	0	0	0
Wendy Clark	79	11	0	0	0	0	0	0	0	0	0	0
Wendy Clark	64	20	0	0	0	0	0	0	0	0	0	0
Wendy Clark	59	4	0	0	0	0	0	0	0	0	0	0
Wendy Clark	57	17	0	0	0	0	0	0	0	0	0	0
Wendy Clark	59	9	0	0	0	0	0	0	0	0	0	0
Wendy Clark	58	25	0	0	0	0	0	0	0	0	0	0
Wendy Clark	23	1	0	0	0	0	0	0	0	0	0	0
Wendy Clark	11	18	0	0	0	0	0	0	0	0	0	0
Overall - Summary	1,199	891	4	0	0	0	0	0	0	0	0	0

### Notes and Comments Report

User Name	Total Notes Created	Notes Created 1-7 Days Ago	Notes Created 8-14 Days Ago	Notes Created 15-21 Days Ago	Notes Created 22-28 Days Ago	Notes Created 29+ Days Ago
Barb Murringer	3	0	0	0	0	3
Brittney Bentley	23	0	0	0	0	23
Catherine Kavanagh	9	0	0	0	0	9
Ju Park	3	0	0	0	0	3
Una Simpson	9	0	0	0	0	9
Overall - Summary	47	0	0	0	0	47





# ACCESS Sonoma Client Successes



# ***ACCESS Sonoma Success Story***

## ***Patricia Perseveres***

Patricia, a 43-year-old single mother and her teenage son lived in her car for more than year. Although this single mother had mental and physical health challenges, she was adamant that her son kept up with his education. She adhered to the ACCESS program meeting goals even when she felt like giving up. Throughout this time, high needs homeless staff continued to support her participation in the program encouraging when she struggled.

Despite her personal challenges Patricia was determined to continue working the high needs homeless program and raise her son, ultimately achieving success not only for herself but her family too. Patricia is now living in supportive permanent housing after experiencing homelessness for over a year. She continues to work on her mental and physical health to further increase her self-sufficiency.



# ACCESS Sonoma Success Story

## *Martina is giving back*

- Received services on the Joe Rodota Trail (JRT)
- Moved to Los Guilicos Villages
- Transitioned into Buckelew Housing

After being homeless for 10+ years Martina has overcome many barriers. Currently, she's holding a full time job working in the security industry. She is currently sober and doing individual recovery work with a sponsor. She has expressed her gratitude for all the opportunities she has received.



# ***ACCESS Sonoma Success Story***

## ***Jonathan wants to become a peer advocate***

**Jonathan** was a 45-year-old homeless man with a criminal history, substance abuse issues, and a Bipolar diagnosis. He found the fortitude to turn his life around after leaving the Sonoma County Jail.

He was in the WellPath program and then referred to Whole Person Care. His case manager accompanied him from the jail to probation and then to Interfaith Shelter Network (IFSN). In a short amount of time he managed to acquire a therapist and get his own studio apartment. Presently he is waiting to start the SRJC Culinary program. He would also like to become a peer advocate when the Wellness program returns.



# ***ACCESS Sonoma Success Story***

## ***Mark is thankful***

**Mark** was referred to the High Needs Homeless (HnH) Program by the Sonoma County Sheriff in late 2018. In his early 50's, Mark was on probation living on the streets of Rohnert Park. With significant medical issues and a mental health diagnosis, the High Needs Homeless Cohort assisted **Mark** with financial services through the Human Services Department and medical care through Santa Rosa Community Health. Unwilling to engage with mental health services, his health was deteriorating further. After finding him in distress, he was taken to a local hospital; the HnH team was able to locate a skilled nursing facility and eventually local housing at the InterFaith Shelter Network's house. With ongoing help from the ACCESS Sonoma's HnH cohort, Mark has secured his driver's license, purchased a car, and is looking forward to using his SSI stipend to secure his own apartment.

*"I owe my thanks to you for helping me get through a very difficult time in my life. I told you I would hit the ground running if I could just get housing. Please tell everyone at your office how much what you do really helps people, and I for one, am so very thankful to you and your staff. Oh yeah, even got a Obama phone!"*



# ***ACCESS Sonoma***

- **Model is a blueprint** that is scalable across cities, counties and states.
- **The ACCESS Sonoma initiative has been highly successful** in its short time — helping vulnerable individuals to achieve stable housing, independence and stability in their lives.
- **Award-Winning Initiative** that has won 3 awards in 12 months: Financial Times Intelligent Business Award, National Association of Counties Achievement Award and the IBM Watson Health Award.
- **Local Jurisdictions are interested in replicating...** cities, counties, and states across the country have reached out and expressed interest in our approach.





**Barbie Robinson**, MPP, JD, CHC

Director, Department of Health Services

Interim Executive Director, Community Development Commission

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Information Services Department

T: 707-565-3541

[Carolyn.Staats@sonoma-county.org](mailto:Carolyn.Staats@sonoma-county.org)