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Houston Pilots Coordinated Entry for Survivors of Intimate Partner Violence

In Harris County, TX, our providers connect more than 5,500 people to domestic violence emergency shelter every year, and we receive nearly 80,000 calls to our domestic violence hotlines. Our resources fall far short of the demand: we are turning away, on average, 30 to 40% of victims fleeing domestic violence who are trying to access emergency shelter and ultimately move on to a permanent home.

We knew we could do better to make sure we were using our resources the most efficiently and effectively and tailoring our housing and services to meet people's specific needs. Through a partnership between the Harris County Domestic Violence Coordinating Council and the Houston Coalition for the Homeless, we decided to explore two pilot projects to test the effectiveness of coordinated access among our domestic violence service providers using an assessment tool for connecting victims to the housing and services they need.

Working with our area's five victim service providers and the Coalition, we agreed that our key priorities were to develop a coordinated access system, create a way to prioritize services based on need and safety, and gather collective data to help define the community's need for safe housing and services options for survivors of domestic violence. Early in the process, confidentiality issues created barriers and challenges for the group to consider. We had many discussions about how to function as a domestic violence system while maintaining confidentiality and adherence to VAWA legislation.

As we navigated those challenges, the Coalition offered the funding to support a project manager who guided us in developing a coordinated access system, which kept agencies invested in advancing the work and facilitated a relationship that solidified the commitment to work across sectors. The group found common ground in needing a coordinated approach to housing, needing to collect data and evidence, and needing to have a system for prioritizing those with the highest needs for the limited domestic violence-specific housing options.

Our first pilot, which has been operating for around 6 months now, uses a decentralized coordinated access process. For triage and prioritization into housing, our five providers use the EPPA tool (Eligibility, Prioritization, and Placement Assessment), which was developed by the workgroup and informed by the work of Dr. Jacqueline Campbell's Danger Assessment. The EPPA tool includes an enhanced lethality assessment to create the core element of the prioritization score. The overall score places clients on a waitlist based on their need for DV-specific housing.

Creating scores, prioritizations, and a waitlist are without a doubt the heaviest pieces to manage in the pilot. The providers on the front line have told us that while a waitlist doesn't provide an immediate solution for everyone, it does expand the options providers have. While the assessment is not perfect, we believe that it has been a good place to start and we're continuing to evaluate the scores and assessments.

Our second pilot, which has been operating for a little more than 3 months, is structured to focus on diverting individuals and families from shelter into rapid re-housing. Because of the management burden of a decentralized access process, we decided to test this model using a centralized system. Survivors of domestic violence who are not yet in shelter can call a central hotline and be assessed using the EPPA tool for rapid re-housing.

It's important to note that each pilot has a core group of providers who can refer a survivor into another project if safety is or becomes a concern. Survivors are enrolled into the DV coordinated access system, but may also elect to self-refer into coordinated access for the homelessness service system. In addition, domestic violence providers may refer clients with their permission into coordinated access.

While both of our pilots are still new, our group has fought for some lessons learned along the way:

- Having money and resources to support the process keeps agencies at the table.
- Collaboration requires trust, time, and the willingness to release control.
- Taking the time for debate and getting all involved from the beginning is crucial to the long-term success.
- Don't avoid the difficult conversations. They're further indication that they need to happen.

As we continue to implement our pilots, we already know some of the work ahead, including:

- Developing better solutions to address confidentiality without creating systemic barriers for access to housing
- Finding better ways to maximize resources while meeting the complex needs of families, including removing systemic barriers and funding requirements that create additional barriers
- Creating a smooth and efficient process for survivors working with homelessness providers to access non-residential services from DV providers
- Capitalizing on the expertise that homelessness and DV service providers have created throughout the years to support each other in serving survivors in a true client-centered approach based on what they identify as their immediate need

This work isn't easy. But through these pilots we're creating a space to have some really hard conversations as a community about how to streamline our processes so that survivors can get the housing and services they need as quickly as possible. It's our hope that our lessons can

help you create something even better!

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