

Digital Referral and Case Management Platform

A new Digital Referral and Case Management Platform will provide an internal and external referral system platform to streamline case management of families across service sectors and providers. Further, they would build on collaboration and coordination efforts currently supported by the City of San Antonio, Bexar County, nonprofit partners, and community funders.

Digital Referral Platform Model (Assumes Use of Signify Platform)



Digital Referral Platform Partners

- City Departments:
 - Neighborhood Housing Services Department
 - Economic Development Department
 - Metropolitan Health District
- Community Funders:
 - Kronkosky Foundation
 - United Way of San Antonio & Bexar County
- Community System Users:
 - More than 70 non-profit organizations and local service providers, including those funded by the City of San Antonio Department of Human Services and Economic Development Department through the Human and Workforce Development Services Consolidated Funding Process



Expected Outcomes

- By July 2021, a Case Management System and Referral Platform will be implemented with a minimum of 70 contracted agency partners utilizing the system to case manage families and make referrals.
- Once implemented, 95% of families and/or individuals will receive 2 or more referrals for wraparound services.
- Of those families and/or individuals who have received one or more referrals, 90% of families and/or individuals will be jointly case managed by one or more agencies.

Budget and Funding Components

Expenses		Proposed Funding Source	
System Procurement and Licenses	\$1,500,000	CARES Act Funding	\$1,500,000
TOTAL	\$1,500,000	TOTAL	\$1,500,000

Note: Cost does not include annual license fees

Equity and Engagement Strategies

- The Department of Human Services will work closely with local funders and City departments to ensure that clients receiving services funded by the City of San Antonio and local funders are entered into the case management system to enable cross agency case management.
- Participating service providers will utilize the referral platform to ensure that marginalized community members enrolled in case management receive and access appropriate referrals for services.
- Individual case managers will utilize referral utilization data to align case management strategies to address barriers to accessing services and achieving individual and family goals.
- Both system data on utilization of services and anecdotal case management data will be utilized by individual agencies to align service practices and also by funders to assess funding investments and their impact in improving outcomes for individuals and families.

Major Milestones Timeline (Assumes Use of Existing Communitywide Referral Platform)

- June 2020: Develop Business Case User Requirements and Seek ELT Waiver on Standard Procurement Processes
- July 2020: IT Governance Committee Approval
- August 2020: RFCA Approval
- January 2021: Phase 1 Deliverables
- July 2022: Phase 2 Deliverables and Identify Funding Source for Ongoing License Costs
- October 2022: Full System Implementation



Homeless Emergency Shelter and Alternative Housing Options

This strategy includes multiple components designed to permanently house homeless individuals; increase available emergency shelter bed space, and reduce chronic and unsheltered homelessness including diversion from homelessness, hotel bridge housing, rapid rehousing, and expanded outreach avenues and funding to quickly rehouse residents who are experiencing homelessness.

Expected Outcomes:

- By June 30, 2020, DHS will contract for up to 500 hotel rooms to increase capacity at emergency shelter locations
- By July 2020:
 - Prioritize currently homeless individuals from emergency shelters for permanent housing assistance and begin transitioning homeless to temporary hotel housing
 - Hire and contract for additional homeless outreach staff and finalize system wide outreach protocol.
 - DHS will continue operating the Homeless Connections Hotline to serve as an effective access point for new or unsheltered homeless seeking shelter, housing, and basic needs.
- By December 2020:
 - 500 homeless individuals and families will be rapidly re-housed to permanent housing or in temporary transitional shelter awaiting housing placement.
 - Once transitioned, housing teams will assess 100% of residents and identify transitional/permanent housing for 80% of hotel clients.
 - 85% of homeless who are rapidly re-housed will maintain housing for 6 months.

Expected Partners

- City Departments
 - San Antonio Police Department
 - Neighborhood Housing Services Department
- Community
 - South Alamo Regional Alliance for the Homeless (SARAH) Haven for Hope
 - Salvation Army
 - American GI Forum,
 - SAMMinistries
 - Society of St. Vincent de Paul
 - Alamo Area Resource Center
 - BEAT AIDS
 - San Antonio AIDS Foundation
 - Thrive Youth



Budget and Funding

Expenses		Funding Sources	
Rental of Hotel Space	3,286,500	ESG-CARES (round 1) Funding period ends December 2022	\$3,902,645
Hotel Operations/Support Services	2,083,536	Coronavirus Relief Fund Funding period December 2020	5,335,355
Rapid Rehousing Programs	2,657,300		
Outreach (contract)	450,664		
Outreach (DHS)	600,000		
Homeless Hotline (DHS)	160,000		
SUBTOTAL	\$9,238,000	SUBTOTAL	\$9,238,000
Unallocated ESG-CARES (Rd. 2)	12,900,000	ESG-CARES (Round 2)	12,900,000
TOTAL	\$21,138,000	TOTAL	\$21,138,000

Equity and Engagement Strategies

- Include a homeless consumer on the evaluation panel
- Evaluation panel will consist of internal and external stakeholders in addition to having an individual with lived experience of homelessness.
- Invite potential vendors to participate in DHS sponsored learning collaboratives.
- Agencies will provide demographic data on clients served

Selection/Application Process

- Housing teams and systems navigators will assess and prioritize currently homeless individuals in emergency shelters based on vulnerability and transition them to temporary hotel shelter while awaiting their housing placement.
- This process will increase capacity in emergency shelters for newly homeless and unsheltered individuals. Outreach teams will be assigned designated areas to canvas and build rapport with clients to help them move from street homelessness to a higher level of care and/or housing intervention.
- DHS will contract with non-profit organizations to provide short term (0-3 months) and medium term (4-24 months) rental assistance for clients experiencing homelessness to quickly move them into permanent housing with case supportive services.
- Where possible, transition homeless from shelters directly to permanent housing.
- Case managers and system navigators will help homeless transition successfully to permanent housing and maintain housing. Hotel rooms will also provide a diversion from shelter option for newly homeless who can be rapidly rehoused or for clients not eligible for current shelter options.

Implementation Timeline

- Coordinate with Culture and Neighborhood Housing Committee to prioritize ESG-CARES Round 2 funding
- June –July 2020: Issue Request for Letters of Interest (LOI) and execute contracts for homeless prevention, street outreach, emergency shelter and rapid rehousing services.
- July 2020: Develop system wide outreach protocol and hire/contract for additional outreach staff
- July 2020: Prioritize homeless for permanent housing and begin transitioning to hotels
- December 2020: 500 homeless individuals will be housed or in the process of housing placement.

**COVID-19 Response and CARES Act: Housing Security Pillar
Domestic Violence**

The domestic violence strategy combines direct services through initiatives including the Domestic Violence High-Risk team and cognitive behavioral therapy for children exposed to violence, with community-wide prevention and education campaigns.

Budget

Initiative	Original Investment	CARES Act Funding
Triple P Positive Parenting Program	\$250,000	\$970,000
Domestic Violence High-Risk Team/Handle With Care	\$246,276	\$1,650,000
Coordinated Community Response	\$170,000	\$680,000
Total	\$666,276	\$3,300,000

Expected Outcomes

- By December 2020, the Stay Positive Parenting campaign will have generated at least 2 Million media impressions, and at least 400 families will have enrolled in the online parenting program.
- By December 2020, the Domestic Violence Awareness and Prevention campaign will have generated at least 2 Million impressions and provided training to 200 professionals through online opportunities.
- By May 2021, at least 1,000 therapy sessions will have been provided to students experiencing violence in the home as facilitated by Metro Health through partnerships with Communities in School and University Health System.
- By June 2021, the Domestic Violence High-Risk Team will have provided case management services to 400 high-risk families.

Expected Partners

- City Departments
 - Metro Health
 - Department of Human Services
 - San Antonio Police Department
- Community
 - San Antonio and Bexar County Collaborative Community Commission on Domestic Violence
 - San Antonio Domestic Violence Task Force
 - United Way Ready Child Impact Council
 - Bexar County Family Justice Center
 - Family Violence Prevention Services
 - UTSA

Selection/Application Process

- Domestic Violence High-Risk Team - Individuals will be identified for the Domestic Violence High-Risk Team through the use of a danger assessment. Individuals who screen high-risk will be eligible for DVHRT services. Individuals may be referred for screening from any community agency, but it is anticipated that most referrals will initially come from law enforcement.
- Triple P Online Program - Families are eligible for the Triple P parenting program if they reside in San Antonio and currently have at least one child under the age of 5. Parents will be referred for the

Triple P program through COSA Delegate Agencies and can self-refer through the completion of an interest form.

- School-based Cognitive Behavioral Therapy – Students can be referred for services by a teacher, or school counselor. Students identified through the Handle with Care program will receive priority placement.

Equity and Engagement

All resources are prioritized to target to Zip codes with the highest equity scores, meaning the greatest need. Resources for school-based services are prioritized to school districts with the highest number of referrals for children exposed to violence. The Domestic Violence High-Risk Team model uses an evidence-based screening tool to identify individuals at greatest risk of experiencing domestic violence to prioritize resources. Additionally, community stakeholders will be engaged by:

- June 1 – 12, 2020 – Workgroups from the Collaborative Commission on Domestic Violence develop the implementation plan for strategies
- June 12 - 30, 2020 – Presentation of a draft implementation plan for community input:
 - Triple P Provider Network, June 8th
 - Univision Townhall, June 12th
 - KSAT Townhall, June 16th
 - San Antonio Domestic Violence Task Force, June 18th

Implementation Timeline

- June 2020 – Gather input from community stakeholders through remote meetings
- End of June - Finalize implementation plan and complete the contracting process
- July 2020 – Media Campaign Launch
- August 2020 – Online Parenting Program Launch
- Mid-December 2020 – Program Evaluation and Assessment