Youth-focused Coordinated Access Systems

Considerations from the Field

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Contributors

A Way Home Canada

*A Way Home Canada* (AWHC) is a national coalition reimagining solutions to youth homelessness through transformations in policy, planning and practice. AWHC works with all orders of government, communities, services providers and philanthropy to create a policy, investment and service environment that enables a shift away from simply “managing” the problem of youth homelessness through emergency services to a more proactive, rights-based approach that focuses on prevention (stopping young people from becoming homeless in the first place) and helping those who are homeless move into housing with supports as rapidly as possible in a safe and planned way. Their collective work is evidence-driven and solutions-focused.

Canadian Observatory on Homelessness

The *Canadian Observatory on Homelessness* (COH) is a non-partisan research and policy partnership between academics, policy and decision makers, service providers and people with lived experience of homelessness. We work in collaboration with partners to conduct and mobilize research designed to have an impact on solutions to homelessness. Housed at York University, the COH evolved out of a 2008 Social Sciences and Humanities Research Council funded project called the Canadian Homelessness Research Network. Led by Dr. Stephen Gaetz, CEO & President, the COH collaborates with partners to conduct and mobilize research that contributes to better, more effective solutions to homelessness.

In an effort to bridge the gap between research, policy and practice, the COH goes beyond the mandate of a traditional research institute. As one of the largest homelessness-dedicated research institutes in the world, we support service providers, policy makers, and governments to improve their capacity to end homelessness. Our philosophy is simple: through research, evaluation and design, we can develop evidence-based solutions and together, solve homelessness.
National Learning Community on Youth Homelessness

The National Learning Community on Youth Homelessness (Learning Community) is a pan-Canadian network of leading youth-serving organizations hosted and managed by A Way Home Canada working toward a reduction in the length of time youth experience homelessness. The full membership meets in-person annually and members participate in working groups throughout the year to address key priorities identified in the strategic planning process. Their aim is to support the shift toward preventing youth homelessness and improving practices and policies by:

- Being an active community of practice that creates meaningful connections between service organizations and deepens collective knowledge on relevant issues/topics;
- Ensuring youth are active partners in the discussion and decision-making on issues related to them, and;
- Informing the national policy agenda in Canada.

The Learning Community has created space for sharing emerging/promising practices, which have contributed to the development of strategies, resources and tools that are disseminated to strengthen the sector as a whole.

Making the Shift Demonstration Projects

Making the Shift Demonstration Projects (MtS DEMS) is a joint endeavor co-led by A Way Home Canada and the Canadian Observatory on Homelessness with support from MaRS Centre for Impact Investing. Funded in 2017 by the Government of Canada’s Youth Employment and Skills Strategy, MtS DEMS offer a space to develop, refine and test models of prevention and Housing First for Youth in real-time in 10 cities in Ontario and Alberta. At the same time, these models are undergoing rigorous research and evaluation in order to strengthen the service delivery, and therefore ensure the best possible outcomes for young people and their families. The MtS DEMS are contributing to the larger body of knowledge generated by the MtS Youth Homelessness Social Innovation Lab.

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Hub Solutions is a social enterprise embedded within the Canadian Observatory on Homelessness (COH). Income generated from Hub Solutions fee-for-service work is reinvested into the COH to support research, innovation, policy recommendations and knowledge mobilization. Learn more: www.hubsolutions.ca
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Introduction

Coordinated Access is key to both systems integration and implementing prevention programs for young people at risk of homelessness or experiencing homelessness. The intent is to create a standardized process for intake, assessment, and referral. Accessibility and reducing barriers to support is an important consideration for coordinated access. A ‘no wrong door’ approach is necessary so young people are able to connect with and access the support they need in a way that is timely, seamless, streamlined, and effective from the perspective of the young person, their family, or the referring adult.

The Reaching Home: Canada’s Homelessness Strategy directives outline program requirements to assist federally-funded communities in preventing and reducing homelessness. There are some important new directions that are of specific interest to those focusing on youth homelessness prevention. Importantly, Reaching Home’s mandatory community-level outcomes not only require Designated Communities to take action and report on reductions in chronic homelessness. Communities are also required to report on reductions to new inflows into homelessness (note: this is primary and secondary prevention); and returns to homelessness (tertiary prevention).

Additionally, Designated Communities must report on reductions in homelessness among Indigenous Peoples and can also choose to report on outcomes for young people or other specific populations that are experiencing homelessness.

“...if we can integrate youth better and faster we can lower their risk of chronic homelessness.” Survey Respondent

A priority for A Way Home Canada (AWH) and the Canadian Observatory on Homelessness (COH) is to assess youth-serving organizations’ engagement and comfort levels with two core features of Reaching Home: Coordinated Access Systems (CAS) and Homeless Individuals and Families Information System (HIFIS) or Homelessness Management Information System (HMIS) for data management. CASs are often used to connect people who are chronically homeless to local programs and services. However, when chronicity and acuity are the primary criteria used to determine eligibility for a program or service, young people in need can be easily overlooked. This is because the risk factors specific to youths’ experiences of homelessness are not the same as adults, and timely early intervention is necessary to prevent the trauma and victimization that can occur if youth become entrenched in homelessness.
Coordinated Access Components

The purpose of Coordinated Access is to know who is experiencing homelessness and what they need to end their homeless experience. Quality assurance processes ensure people are being connected to the supports they need, when they need them, in the way that works best for them. As an outcomes-based program, Reaching Home focuses on reducing chronic homelessness, in addition to an overall reduction of homelessness, a reduction in Indigenous homelessness, prevention of new inflows to homelessness, and prevention of returns to homelessness. Within their community planning exercise, communities can identify youth as a priority population and seek to accelerate reductions in youth homelessness as an additional outcome. An important consideration within a systems approach to Youth CAS is age of consent. These elements are locally defined and communities need consent protocols for addressing situations where youth aren’t willing or able to give informed consent. Communities should have referral protocols to connect youth ages 12-15 with services. Coordinated Access leads (as defined by communities) need to actively engage with the child and youth sector/child protection sector.

AWH and the COH engaged the National Learning Community on Youth Homelessness and the Making the Shift Demonstration Projects to gain a broader understanding of the experiences of youth and youth-serving organizations within local CASs and under new federal guidelines for CASs.
Survey Results

A total of 20 respondents participated in the survey and all but 2 were representatives from frontline serving organizations:

<table>
<thead>
<tr>
<th>Province</th>
<th>% of Respondents</th>
</tr>
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<tbody>
<tr>
<td>Ontario</td>
<td>38%</td>
</tr>
<tr>
<td>Alberta</td>
<td>33%</td>
</tr>
<tr>
<td>British Columbia</td>
<td>11%</td>
</tr>
<tr>
<td>Québec</td>
<td>6%</td>
</tr>
<tr>
<td>New Brunswick</td>
<td>6%</td>
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<tr>
<td>Nova Scotia</td>
<td>6%</td>
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Across the respondents, 89% felt they had a good understanding of what a CAS is and how it should be implemented within communities. 72% of the youth serving agencies were participating in their local CAS, but 11% indicated that only a portion of their organization’s programs meet the requirements of their local CAS. Of those engaged in their local CAS, a number of dynamic challenges emerged that orient themselves around two specific themes.

1. Eligibility and Prioritization

Respondents noted that the assessment tools being utilized were varied and did not reflect and assess the unique needs of youth. Youth-serving organizations and/or outreach services that connect with young people in the community conduct assessments as the first step of the CAS process. This was typically enabled by the youth serving organization the young person was attached to.

Most survey respondents noted that eligibility criteria for CAS included that youth:

- Be 16-24 years old;
- Be homeless for at least 7-14 days;
- Be in need of housing; and,
- Have longer term homelessness and support needs.
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Some noted additional components of CAS pathways included the need for participants to check-in every 3 months to remain on the priority list, apply to a housing opportunity list, or receive referrals to other services at the time of their assessment and intake.

2. Access

Underpinning the access issues to CAS appears to be the number of steps required to ensure a youth’s needs can be tabled, such as permissions granting and multiple pre-assessments. Some communities had a limited number of organizations who were represented in their local CAS, limiting the services that young people could access if they went through CAS. Survey respondents told us that their CASs do not link young people to services beyond housing. Integrating services and systems outside of the traditional housing and homelessness sectors is essential for early intervention and prevention efforts within communities.

These other systems and services should be reflected in the organizations participating in and the suite of options available through CAS if full integration across the continuum is to be realized.
“...youth are underrepresented in the homeless/at risk sector as they are not seeking help at the CAS agencies” Survey Respondent

Organizations are open to participating in CASs and respondents valued the prospect of broader integration. In communities where youth-serving organizations were not engaged in their local CAS, they noted that they were either operating their own housing waitlist and/or were deterred by the adult focus of their CAS.

A consistent issue with CAS processes across the community feedback was the mandatory use of the SPDAT tool and the concerns about youth having to wait to achieve a higher acuity score to access services. This is often positioned as the biggest concern of youth-serving organizations wanting to participate in CASs. Flexibility and acceptance of tools that reflect the strength-based ways in which youth-serving organizations are operating on a day-to-day basis is required. Overall, the deficit approach taken with most housing and homelessness assessment processes should be all but phased out as CAS’ take root. This is where the Youth Assessment and Prioritization (YAP) Tool can embed itself within community processes.

The YAP Tool is a strength-based assessment for youth who are experiencing, or are at-risk of experiencing, homelessness that strives to be as non-clinical and non-prescriptive as possible – which is part of what makes it so different from other assessment tools. The assessment has been designed specifically to determine what the youth’s risk factors and strengths are, through a short “pre-screen” questionnaire followed by a more fulsome interview, if deemed necessary. The YAP tool captures the youth’s positive attributes, skills, and goals in addition to any vulnerabilities.

A strengths focus requires developmental supports and opportunities that promote success, rather than those that just get rid of or ignore failures. While this can be a daunting concept, the YAP Tool is a clear example of how to implement a strength-based philosophy in a practical manner. Given the YAP tools focus on five key domains (Housing Needs, Social Networks and Connections, Health and Wellness, Daily Living and Attitudes and Behaviours), it can more accurately assess need and triage support given the breadth of the prevention continuum that exists within the youth homelessness response.
Specific concerns have also been raised about youth sharing their personal stories under the assumption that they will rapidly receive services, then waiting in a cue for support while there are other services available that may be appropriate to meet their needs. The lack of a comprehensive continuum of service providers offered through local CASs indicate the need for clear directives from Reaching Home on how to create a broad spectrum of support.

**Do all homeless-serving agencies and housing providers in your community participate in the coordinated access system?**

- **Yes**: 33%
- **No**: 11%
- **Partial Involvement**: 11%
- **Unsure**: 45%
The respondents expressed that there is a range of housing providers/operators maintaining waitlists without participating in their community’s CAS, such as social housing, not-for-profit housing, or other types of “niche” housing providers (i.e. housing services for young parents). They also noted that systems outside of the housing and homelessness system, such as health and education, were not included. There was mention that only those who receive federal funding from their local Community Entity, typically for Housing First programs, were a part of their CAS. There was consensus across respondents with respect to the systems players from Child Welfare, Mental Health, Health Services, and Indigenous organizations who should be engaged in the CAS.

“One of the core tenants of our work is to work with youth where they are at and provide services in the moment, not waiting for youth to achieve greater acuity prior to service delivery.” - Survey Respondent

Feedback from respondents was consistent across a number of concerns they have with wedging “youth” into existing CASs, including:

- Measures for prioritization at existing CASs require youth to fall into more severe homeless situations or precarious housing arrangements before they would “qualify” for services.
- Some youth reported that they finessed or tailored their responses to the SPDAT process in order to accumulate a high enough score to qualify for Housing First services.
- The youth who are prioritized for housing at CAS are often more entrenched which means their needs (i.e. mental health, addictions, trauma) overextend the supports in the units available, which means they are often unsuccessful at remaining stably housed.

There appears to be movement in some communities to adapt their CAS to reflect the unique needs of youth, from concentrated work with youth service providers to develop a system that works for youth, to engaging youth themselves in the design of CASs. The common denominator appears to be the need for youth-focused assessment and strategic mapping to identify a community-/region-wide model and best practices for youth to access and connect with services and support. The role and process of assessment and prioritization were areas where service providers felt a lack of consideration for youths’ needs. Assessment can and should result in enhanced resource-matching to meet youths’ needs and improved processes for working across organizations. If the assessment process can also improve community coordination and cohesion, better outcomes for youth will be realized.
“...this requires a “made for youth” strategy separate from the adults. Our systems and access points need to recognize that youth have different needs and more creative approaches to ending their homelessness.” Survey Respondent

Survey respondents were very clear about how communities should proceed to ensure youth are better connected to and served by CASs. Their feedback is distilled into the following phases of change necessary for youth focused CAS’ to take root:

Phase 1 - Aligning Stakeholders
- Building trust with different sectors or organizations
- Understanding the implications of not having key stakeholders at the planning table
- Sharing common data points across the sectors to create paths for alignment
- Engaging organizations that provide housing for specific populations such as LGBTQ2S*, youth and Indigenous participants and acutely understanding the continuum available for triage at CAS
- Ongoing engaging youth with lived experience of homelessness to test assumptions, focus the direction of the system and practice elements

Phase 2 - Understanding the Experience
- Gaining consensus on how to coordinate/triage services
- Understanding the roles, implications and opportunities for other sectors
- Navigating the legislation governing different sectors (If so, which ones?)

Phase 3 - System Design
- Agreement on a common intake/assessment with the youth-serving sector
- Agreement on a common intake/assessment with CAS participants outside of the youth-serving sector
- Development of a comprehensive training for youth CAS tables, including assessment tools
- Development of CAS fidelity agreements to hold systems accountable (arms-length organization to oversee the process)
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- Prototype or assess the service pathways youth would follow once prioritized for services to ensure the system is equipped to respond. The lens for this activity should focus on:
  → how the system functions now; and
  → the desired future state.

Phase 4 - Implementation of the experience
- Coordination of service providers to check in about the implementation of youth-focused CAS, including the development of policies and processes.
- Ongoing analysis of youth-focused assessment/triage tools to ensure they are supporting prevention and diversion activities
- Coordination of service providers to collaborate on particular youth cases
- Ongoing training and education for service providers and the community about CAS

Organizations across Canada work within different age mandates and in alignment with their legislated responsibilities. Given that the national definition of youth homelessness refers to young people between the ages of 13 and 24, survey respondents were asked: The current age of consent to be included on a By-Name List is 16 years old. Do you believe this age needs to be higher or lower, for the purposes of Coordinated Access?

Is the CAS age threshold of 16 appropriate?

- No: 50%
- Maybe: 28%
- Yes: 22%

Those who agreed that the age threshold of 16 was appropriate for referral to a By-Name List thought it was practical and clearly distinguished the responsibilities of Child Protection Services under provincial Child Intervention legislation. These respondents also felt that Child Protection Services ought to remain in their mandated role to support and be responsible for youth under 16 years old to ensure specific efforts are being made to provide housing access as well as appropriate family supports.
However, other respondents noted that there are youth under the age of 16 who are seeking access to housing and homelessness support. Engagement and participation in a youth-focused CAS is necessary to access a broader range of support. This highlighted the lack of housing, resources and options for youth under 16 years. Respondents noted that there are “significant” challenges and barriers to housing youth, such as age restrictions that prevent youth under 16 or 18 years from accessing market or subsidized rental units.

Some important questions emerged:

- Would youth under the age of 16 understand what “consenting” to having their name on a By-Name List meant?
- Would “consenting” lead to further disengagement from family when the priority for the under-16 age group is re-attachment to family where possible?
- If the age is lowered, does it unduly shift the responsibility away from the child welfare system and onto the homeless-serving system?

Respondents noted that youth typically have had their first experience of homelessness before the age of 16. Their support for the age of consent for By-Name Lists to be lowered illustrates the opportunity that exists to shift towards prevention efforts that are introduced earlier and integrated across the homeless-serving system. From a legislated perspective, if there are no “protection concerns” present that would warrant child welfare involvement, community-based Family and Natural Supports interventions ought to be available and accessible for youth that are at-risk of homelessness or already experiencing homelessness.

“We serve youth 15-25, but there are youth as young as 12 trying to access our services.” Survey Respondent
Youth-focused Coordinated Assessment Recommendations

Reaching Home: Canada’s Homelessness Strategy

Development of a youth-specific CAS strategy

- A collaborative approach that engages all stakeholders in the community who are working with youth that may be at-risk of or who are experiencing homelessness to hear their ideas and feedback.

- Integration of the broader continuum of youth services and supports and identifying unique and creative ways for engaging with youth i.e. outreach, warm transfer protocols.

- Embeds a focus on integration and prevention with particular emphasis on:
  - Ensuring that supports are in place for youth on priority lists and if housing is not immediately available, efforts are made to ensure they do not become further entrenched and chronically homeless.
  - Exploring options and resources that keep youth stably housed.

Communities should be required to broaden their scope for “required” CAS partners:

- Stakeholders outside of the homelessness-serving sector, who can positively impact a youth’s housing and homelessness outcomes should be brought into the required systems response.

Introduce a unified youth-focused assessment tool:

- A youth-focused tool that is strengths-based, underpinned by resiliency, and assesses for a suite of services across the prevention spectrum needs to be prioritized.

- The CAS assessment process should consider a more holistic, wellbeing orientation that is centred on positive youth development, not just who is the most unwell.

- Recommendations for services and supports that emerge through assessment processes should take into consideration a broader range of outcomes needed to address long-term housing stability and wellbeing for young people, such as mental and physical health, access to income and education, etc.

- Consider how a youth-focused assessment tool can bridge systems outside of the traditional homeless serving sector.
Community

Align yourselves across and within the cross-systems stakeholders to ensure integration can occur and utilize that knowledge to ensure that the diverse needs of youth are met.

- Embed a focus on prevention, in alignment with the Roadmap for the Prevention of Youth Homelessness, within the existing youth homelessness services and supports. As part of these efforts, existing agencies and organizations serving youth who are homeless should be supported to implement evidence-based prevention interventions for youth, including family mediation and reunification, systems navigation, rapid exits from homelessness, and supports that enable youth to remain in their communities and school.

Through integration, collaborate with other systems and sectors. Rather than have a singular point of access, this integrated system should adopt a ‘no wrong door’ approach.

- Ensure within every community, young people are able to access a continuum of supports and services that are guided by a ‘harm reduction’ philosophy whereby young people are able to choose from a range of supports (including abstinence only environments) based on their needs, desires, and where they are at.

- Ensure that the systems approach can proactively inform service gaps that are necessary to prevent youth homelessness.

- Staff in all services should be trained to support youth’s self-determination with respect to their preferred supports, and all young people should be able to access high quality supports irrespective of their use of substances.

Work with a range of sectors (e.g., healthcare, education) to dramatically increase public awareness of available services for young people who are at risk of homelessness or experiencing homelessness.

- Efforts should seek to ensure every young person is aware of available supports and services in their community.

Holistically review the range of assessment tools currently in use to determine where they are aligned, how the harmonization of the data captured by these tools can be maximized and efficiencies for the sector can be realized.

- Assess these tools to ensure they are focused on measuring assets and resilience in youth.
Conclusion

Understanding the dynamics of community systems and the factors that have to be mobilized quickly for youth homelessness prevention programs to be maximized is at the essence of why a youth-focused approach is needed within Coordinated Access Systems. It is abundantly clear that issues of eligibility and access are causing public and community systems to miss opportunities to prevent youth homelessness. The path forward for each community can only be determined through the active engagement and participation of those same young people. Their security, safety and overall well being hinges upon whether they are matched with and access the right services and supports.