Abbotsford CIR

INVENTORY

Abbotsford community member Harvey Klause
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BACKGROUND

INTRODUCTION

The Coordinated Intake and Referral (CIR) process in Abbotsford arose out of a context that not a few stakeholders have described as "wounded." The infamous 2013 chicken manure incident made headlines just two years before the city received the HPS research grant for coordinated intake. While the municipality has taken concrete steps to address homelessness since the incident—including hiring a Homelessness Coordinator who is facilitating the CIR process—there still exists an element of mistrust expressed by some in the social service sector.

In addition to mistrust, at the outset of the interview process, the sector was largely characterized by a sense of fatigue and frustration at a perceived lack of meaningful action. Since 2004, four different homeless counts were conducted in Abbotsford, with another one scheduled for next year. Each count has been accompanied by additional research, analysis, and recommendations for the municipality. Furthermore, the Fraser Valley Regional District (FVRD), University of the Fraser Valley (UFV), the Mennonite Central Committee (MCC) and other entities have collaborated on three additional reports on rural homelessness, concurrent disorders, housing needs for seniors, and four additional major reports on affordable housing and homelessness in the region.

This context is a difficult one in which to conduct more research. The majority of social service stakeholders expressed the feeling that much had been done with little real results, and many stakeholders indicated that they felt the City had not been listening. Given this environment, one of the goals of the initial research phase was also setting the context for more fruitful and effective implementation. Communication, listening, and relationship-building were all part of the research alongside the City's homelessness staff's mutual efforts in like direction.

In contrast to mistrust, fatigue, and frustration, the research revealed a burgeoning climate of hope. Notoriously silo-ed in general, the social service sector in Abbotsford contains fairly high levels of informal collaboration, and research participants were hopeful at the prospect of greater collaboration. Additionally, the research validation process provided a public space from which to hear multi-level voices and highlight changes that had already been made—further contributing to a sense of hope and future engagement.

METHODOLOGY

The research was conducted by Mennonite Central Committee Community Enterprises (MCC CE). The research supervisor, Ron van Wyk, was co-author of many of the previous reports on housing and homelessness in the region and has served in advisory capacity to the City for several years. The research was conducted by van Wyk and MCC CE researcher Jennifer Hawkins between March and May of 2016.

The bulk of the research was done through qualitative interviews of members of the research partnership group. At the beginning phase, MCC CE interviewed more executive level positions; however, it became apparent that some of the interviewees in those positions were not as familiar with the details of intake and case management. Thus the research began to include more front line staff and outreach workers who would not necessarily be participating in designing the CIR system. In all, MCC CE conducted interviews with seven executive level positions, five management, and nine outreach workers from 14 different agencies. Three agencies were not interviewed after various attempts and cancellations. Out of those, two emailed intake forms.

Besides interviews, on two occasions, the MCC CE researcher accompanied outreach staff on walkabouts to camps and settlements in the bush in order to get a better sense of the informal intake or pre-intake that several participants stressed was necessary. Additionally, MCC CE conducted participatory focus groups and interviews with homeless or precariously housed community members. Four focus groups were held: one at a drop-in centre, one at a youth shelter, one with members of Drug War Survivors, and the other at a women's drop-in centre. MCC CE employed an individual with lived experience to coordinate one of the focus groups and worked with outreach and management staff to plan the rest. MCC CE provided meals and stipends for participation. In total, 33 people participated in the focus groups, plus an additional three people with lived experience and two management/outreach staff who facilitated the groups. Eight individual qualitative interviews were conducted following the focus groups. For the youth, the manager of the shelter conducted the individual interviews and sent MCC CE copies of the audio recordings.

SCOPE

This brief report is for the purpose of providing an inventory of coordinated intake; a more complete research report will be issued after the completion of the CIR system design process. It should also be noted that the inventory is still a living document. Some agencies who have not yet fully disclosed their practices and procedures may yet add to or change the document.

The inventory only includes agencies and organizations that are partners in the CIR research and design process. While this includes most homeless-serving agencies and organizations, it might not include every entity whose services overlap with the homeless-serving sector. It does not include food banks, recovery homes, or group homes. The inventory lists services as well as intake information collected. It also indicates whether or not intake information is coordinated with outside agencies.

FINDINGS

Out of the 14 agencies and organizations interviewed, two operated completely informally with no paper or digital intake. Three were in the midst of further formalizing or adjusting their intake procedures and systems from informal to more formal. Seven operated on a formal to semi-formal basis, with much relationship-based outreach and "pre-intake" conducted before anything formal was introduced. Two were highly formalized, as they were connected to a health authority and a provincial ministry.

Regarding coordinated intake and shared information, any collaboration was done almost exclusively on an informal basis. Frontline research participants placed high value on relationships and knowing "the person on the other end of the phone." That said, many expressed a desire for more formalized coordination—with important reservations that will be addressed throughout the design process.

Three agencies in Abbotsford use BC Housing's online system, which—while being an online database—is not coordinated in a true sense. Client information for BC Housing's various programs (see Inventory Key) is uploaded into the system; however, consent to release is between and individual client and the person conducting intake. The information is not shared with other agencies or caseworkers—including those administering BC Housing programs. Additionally, detailed case management information is not uploaded or coordinated through this system.

The ACT Team uses Fraser Health's internally coordinated system, and John Howard Society of the Lower Mainland (JHSLM) also uses an internally coordinated system, both of which would be inaccessible to other agencies; however, John Howard Society's system showed promise for coordinated intake in Abbotsford. Designed by youth outreach workers in Vancouver's Downtown East Side, the system has tiered levels of entry to accommodate JHSLM's numerous programs and their associated legal and practical issues. The system is mobile, easy to use, and appreciated by management and caseworkers alike. The privacy protocols and other features spoke to some of the concerns of research participants. During the interview process, JHSLM showed a willingness to share their system with the CIR design team.

Regarding relationships with landlords, at the time of the qualitative interviewing, nothing coordinated had been established. Not only was the housing stock spare, but willing and/or suitable landlords were in short supply. Thus, outreach workers and advocates expressed the special care they took to build trust with the landlords with whom they had existing relationships. Furthermore, they expressed a hesitation to lose these valued relationships—either in terms of a collective "pool" of landlords or to a centralized system of landlord referral. Existing efforts to find a suitable system in line with both community sensibilities/values and a Collective Impact framework are ongoing through the City of Abbotford's Rental Connect initiative.

Further ways in which the research is applied to the CIR design process will be detailed in the extended report.

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INVENTORY KEY

P - Personal
1- date
2 - name
3 - preferred name
4 - gender
5 - ethnicity
6 - religion
7 - DOB
8 - SIN number
9 - BC health number
10 - height/weight/eye colour
11 - phone
12 - marital status
13 - native language
14 - age estimate (if DOB unknown)
15 - Aboriginal y/n
16 - prison/parole status
17 - veteran status

HH- Housing and Homelessness
1 - address or last place of residence
2 - location of stay last night
3 - homelessness status/category
4 - living arrangements
5 - length of community residency
6 - type of housing need
7 - housing barriers
8 - housing barriers, self assessed
9 - housing costs
10 - evictions
11 - satisfaction with housing
12 - length of homelessness

E - Involved Entities
1 - emergency contact
2 - landlord contact
3 - professionals involved
4 - parole/probation officer
5 - family/children/significant other

F - Financial
1 - income source
2 - employment status

A - Addiction
1 - substance use y/n
2 - drug of choice
3 - treatment readiness
4 - suspected addiction substance

H - Health
1 - physician
2 - medical concerns
3 - medical conditions / diagnosis
4 - mental health diagnosis
5 - medications
6 - hospitalizations
7 - physical disability
8 - suspected mental health

G - General / Misc
1 - referral source
2 - previous program use
3 - reasons for requesting service
4 - requested service
5 - service needs assessment
6 - recent incarceration history
7 - refugee/immigrant status
8 - education levels
9 - quality of life indicators
10 -ID needs
11 - personal safety risks
12 - other safety risks
13 - "additional relevant info"
14 - restricted from program

S - Specialization
1 - screening score
2 - specialization questions*

*e.g. forensic history, sentence expiry, naloxone training, parent contact info, type of housing

Program Acronyms

ACT
Assertive Community Treatment
ES*
Emergency Shelter
EW*
Extreme Weather
HIP
Homeless Intervention Program
HOP*
Homeless Outreach Program
HPP*
Homeless Prevention Program
RAP*
Rental Assistance Program
SIL
Supportive Independent Living

*funded and managed by BC Housing, operated by non profits

Agency	Specialized Eligibility	Services	Intake Information	Coordinated
Abbotsford Community Services (ACS)	At-risk of homelessness (HPP)	case management, financial aid/ supplements, housing assistance, landlord liaison, outreach, referral	**P** 1, 2, 3, 4, 5, 7, 15, 16, 17 **HH** 1, 3, 5, 6, 7, 9, 10, 12 **E** 1, 2, 5 **F** 1, 2 **A** 1, 2, 4 **H** 2, 4, 5, 8 **G** 2, 3, 6, 7, 14 **S** 2	no
Buxton Consulting	None (HIP)	case management, clothing, financial aid/supplements, housing assistance, landlord liaison, outreach, referral		
Cyrus Centre	Youth	case management, clothing, drop-in, food, housing, housing assistance, meals, outreach, pastoral/spiritual, referral, shelter, shower, transportation, hosting other providers	**P** 1, 2, 3, 4, 5, 7, 10, 11 **HH** 1, 2 **E** 3, 4 **A** 1, 2 **H** 1, 2, 5 **G** 1, 3, 4 **S** 2	no
Elizabeth Fry Society (EFry)	Women	still awaiting response	**P** 1, 2, 3, 4, 5, 6, 7, 13 **HH** 3, 5, 7, 11 **E** 1, 3, 5, **F** 1, 2 **A** 1, 2 **H** 1, 2, 3, 4, 7 **G** 5, 6, 7, 8, 10, 11, 12	no
Fraser Health ACT Team	Mental health diagnosis	case management, clinical counselling, financial aid/ supplements, housing assistance, landlord liaison, mental health, nurse, other medical, outreach, referral, substance use counselling	**P** 1, 2, 4, 7, 8, 9, 10 **HH** 1, 3, 4, 9, 10 **E** 2, 4, 5 **F** 1, 2 **A** 1, 2, 3 **H** 1, 3, 4, 5, 6 **G** 6, 8, 9, 13 **S** 1, 2	no
John Howard Society of the Lower Mainland (JHSLM)	Justice system involvement	case management, drop-in, housing assistance, landlord liaison, outreach, referral	**P** 1, 2, 4, 5, 7 **HH** 3, 6, **E** 5 **G** 10 **S** 2	no
Lookout Emergency Aid Society	None	drop-in, shelter, shower, hosting other providers	**P** 1, 2, 3, 4, 5, 7 **HH** 1, 3, 6 **E** 1, 4 **F** 1, 2 **A** 1 **H** 2, 5 **G** 2, 3, 6, 7 **S** 2	no
Mamele'awt	Aboriginal	still awaiting response	**P** 1, 2, 5, 7, 11 **HH** 2, 10 **E** 5 **G** 2, **S** 2	no

Agency	Specialized Eligibility	Services	Intake Information	Coordi-nated
Mennonite Central Committee (MCC)	Low income, employment (RAP)	financial aid/supplements, meals, outreach, referral, clothing, landlord liaison, advocacy, financial literacy counselling	**P** 2, 4, 7, 8, 11, 12 **HH** 1, 4, 6, 8, 9 **E** 2, 5 **F** 2 **H** 2 **G** 3 **S** 2	no
Positive Living Fraser Valley PLFV	HIV, Hep C, viral STDs	case management, clothing, drop-in, food, harm reduction, housing assistance, nurse, outreach, referral, storage, transportation	**P** 1, 2 **HH** 4, 6, 8, 11 **F** 1 **A** 1, 2, 3 **H** 1, 2, 3, 4, 5, 6, 7 **G** 3, 10 **S** 2	no
Raven's Moon	None	case management, clothing, food, housing, housing assistance, landlord liaison, meals, outreach, referral	still awaiting response	no
Salvation Army	None (HOP, ES, EW)	case management, clothing, drop-in, financial aid/supplements, food, housing assistance, landlord liaison, meals, nurse, outreach, pastoral/spiritual, referral, shelter, shower, storage, transportation, hosting other providers	**P** 1, 2, 3, 4, 5, 7 **HH** 1, 3, 6 **E** 1, 4 **F** 1, 2 **A** 1 **H** 2, 5 **G** 2, 3, 6, 7 **S** 2	no
Salvation Army	Recovery - male (SIL program)	case management, housing, mental health, nurse, pastoral/spiritual, referral, shower, storage, substance use counselling, hosting other providers	**P** 1, 2, 3, 4, 5, 7, 8, 9, 11, 12, 13 **HH** 1, 3, 7 **E** 1, 4 **F** 1, 2 **A** 1, 2, 3 **H** 1, 3, 4, 5, 7 **G** 2, 3, 4, 5, 6, 8, 13 **S** 2	no
Ministry of Social Development Social Innovation (MSDSI)	Income assistance clients	financial aid/supplements, other medical, outreach, referral	MSDSI file, internal and confidential	no
Shalom Ministries	None	case management, housing assistance, landlord liaison, outreach, pastoral/spiritual, referral, substance use counselling	currently in transition	no
Women's Resource Society of the Fraser Valley (WRSV)	Women	case management, clinical counselling, clothing, drop-in, food, housing, housing assistance, landlord liaison, meals, outreach, referral, shelter, shower, storage, substance use counselling, hosting other providers	currently in transition	no
5&2 Ministries	None	case management, clothing, drop-in, food, harm reduction, housing assistance, landlord liaison, meals, other medical, outreach, pastoral/spiritual, referral, hosting other providers	**P** 1, 2, 3, 4, 7, 11, 12	no

CONTACT INFORMATION

If you have any questions, alterations, or additions to this document, please contact Mennonite Central Committee Community Enterprises (MCC CE).

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