Welcome to our SPACE
Happy Spring Equinox

We want to greet and celebrate your energy.

Use the chat and share your name (first/last) & your agency & identity.
February 25, 2021 Highlights

CIE Partner Highlights
- Multicultural Health Foundation/Prevention Alliance
- Neighborhood House Association/Project In Reach
- Metropolitan Area Advisory Committee (MAAC)/Early Head Start/Head Start

CIE Monthly Training Opportunity
- 2nd Wednesdays, 10 am to 11 am
- Join Zoom Meeting
  https://211sandiego.zoom.us/j/9100228786?pwd=WjZTQSs3U2pLYUx3NVNIS05IMWx2QT09
- Meeting ID: 910 0222 8786
- Passcode: 115961 One tap mobile +16699009128
- Special Focus: New features

Certificate of Insurance (COI) Request
- Reminder to send your updated Certificate of Insurance (COI) for your participation in CIE.
- A COI provides a summary of your business coverage. It serves as verification that your business is indeed insured.
- Please email us at ciepartners@211sandiego.org if you have any questions.
What's Happening Today

- Who's in the Room?
- New Direct Referrals
- Partner Highlight
- CIE Technology/User Experience
- Utilization Reports
- Initiatives
- CIE Training Offerings
- COVID-19: Updates and Support
- Open Forum
We hold space for community

In acknowledgment of the violence in recent weeks, we dedicate a few minutes for processing and reflection.

After listening to a statement from a local community member, we will take some time to reflect and process our personal feelings.

We all process differently. Some of us draw, write, meditate, pray, sing, dance, etc.

For those who would like to share, we will hold space for you to share your reflections.

In remembrance:

8 persons died in Atlanta, Georgia on 3/16/21
Six of the eight victims were women of Asian descent

10 persons died in Boulder, Colorado on 3/22/21

We honor the lives not listed here; lives lost through violence or otherwise
We need your Input

Please complete the survey to help inform to the value of CIE!

Should only take 6-10 minutes and helps to share the value.

We will share the link in chat for you to complete

Complete the Survey
COVID-19 Vaccine Appointment Support

Provides assistance to clients who are 65 and older with scheduling a COVID-19 vaccine appointment.

- Must be residents in San Diego County
- Direct Referral can be made in the CIE Partner Community
City of Escondido CV Homeless Prevention

Offers temporary rental assistance available to assist households whose employment income has been negatively impacted by COVID-19. Households must demonstrate an inability to meet rent obligations by documenting a loss of income and lack of assets available due to COVID.

- Serves individuals and families whose income is below 50% AMI, are at risk of experiencing homelessness, income was affected by COVID-19, and reside in the City of Escondido.
Interfaith Community Services

Communities in Action
Assists individuals and families living in North Inland of San Diego County who are looking for case management towards self-sufficiency.

- Can assist with benefit enrollments, emergency food, emergency hygiene, employment services, banking and budgeting

Communities in Action, CARES
Assists individuals and families living in North Inland of San Diego County who are looking for case management towards self-sufficiency and have been impacted by COVID-19.

- Can assist with clothing up to $200, childcare assistance up to $1,500 and utility assistance up to $300.

Communities in Action, Financial Literacy Program
Assists individuals and families living in North Inland of San Diego County who are looking for case management towards self-sufficiency.

- Offers assistance for credit and debit repair up to $300, housing assistance matches up to $1,000 and vehicle purchase matches up to $1,000.
MAAC’s Head Start, Early Head Start, and State Preschool Programs

Serves children (0-5) and their families, children with disabilities, and pregnant women that reside in North San Diego County in the communities of Carlsbad, Escondido, Fallbrook, Oceanside, San Marcos, Valley Center, Vista, and San Ysidro.
SBCS, aka: South Bay Community Services
Group Parenting Classes, Community Services for Families

Group-Based Parenting Classes offer parents the ability to learn about their child’s development, new parenting techniques and skills, and to receive support from other parents.
Vets’ Community Connection

Careers Networking
Offers local career networking opportunities for veterans, active-duty military, their spouses, and caregivers. Participants will have the opportunity to meet with local employers and get tips on how to gain employment.

Volunteer in the Community
Provides opportunities to volunteer in support of local veteran and military programs.
SAMPLE
The information in the client profile... (check all that apply)

- Influenced the referrals I offered
- Influenced care decisions or care plan I made with my patient/client
- Provided a comprehensive understanding of my patient/client
- Strengthened my relationship with my patient/client

- Didn’t affect my decisions or understanding of this patient/client

- Other: (Fill in large area text box. "Tell us how this information influenced you today!")

Recap
Pop-Up Survey Enhancements

Special Thanks!
Christy Yorty, YMCA
Isaias Sanchez, TrueCare
Jazmin Oregon, ICS
Megan Burt, SDHC
Dashboard Features

- Referral management
- Care Team
- Consents
- Referred by you

New Alerts

- Care Team updates
- Health Condition & Housing Status
Any Special Requests

Compare Utilization During Same Month in Different Years (i.e. March '20 and March '21)

Utilization Reports with Only One Month’s Data
Increased Login and Client Search Trends in February

In Fact, the Last 3 Months of Logins Have Been the Highest of this FY

Almost 40 New CIE User Accounts Created this Month Already

As of 3/15, Home Energy Assistance, Food Assistance, and Legal Services are Top Direct Referrals Sent to CIE Partners this Month
Initiatives: ACES AWARE

Through partnership with Be There San Diego, Community Brief on “How CIEs can Support ACES Responses?”

Feedback:
Conducted Listening Session in collaboration with YMCA
Network Partner Meetings
Health Center Partners and FQHCS
Medi-Cal Providers
Advisory Board

Goal: To share findings, gather additional insights and identify opportunities to leverage ACEs working being done in CIE for other initiatives, programs, etc.

In Collaboration:
Partners in Prevention
Building Resiliency
AAP Network of care
## ACES AWARE FINDINGS:

<table>
<thead>
<tr>
<th>Primary Use Cases</th>
<th>Description</th>
<th>ACES CIE Use Case Examples:</th>
<th>Challenges</th>
<th>Potential Solutions</th>
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| Shared Intake             | Ability to complete an intake and have it shared with other providers in the shared location to inform the care they will be providing to that individual or patient. | Use CIE to host ACES screening tool and/or trigger for need based on ACES screener for actionable interventions, also include a shared resiliency screener to account for individual strengths | • Identify who would need access to ACES score (role-based permissions)  
• Strength-based resiliency screening is not part of ACES, but necessary | • Use a working group of providers and CBOs to establish role-based permissions to user access |
| Support System            | Ability to understand an individual or families existing support system (family, care team or case managers) | Use historical record of information and Care Team in CIE to identify supports based on individual or family situation or connect with support to prevent future ACES | • Provider best practice communication with individual based on historical record | • Trauma-informed care and standards for healthcare intervention and understanding  
• Cost benefits to change care plan based on trauma |
| Community Reporting       | Ability to aggregate data from multiple sources, to better understand community, needs and available resources | Use CIE as a shared place to collect ACEs screening and action to share common needs, identify gaps and resource needs in our community. | • Resources to develop data sharing and interoperability between EHR and social service platforms to hold ACEs screening with CIE | • Investment in interoperability between healthcare and social services  
• Investment in more robust standards for social service providers to communicate |
### ACES AWARE FINDINGS:

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</table>
| **Informed Care** | Searching an individual or patient to see historical use of social or healthcare services and tailoring their services accordingly or reaching out to an existing organization working with that individual | Add the ACES Aware outcomes into CIE, in which organizations can view the completed screener based on role-based and HIPAA permissions to understand history of accessing services to support providers in a trauma informed approach, including avoiding triggers | • Providers may not receive training on how to use that information to provide trauma-informed interventions  
• Strength-based resiliency screening is difficult to manage and not part of ACES, but necessary | • Trauma-informed care training is provided and healthcare is funded to respond and coordinate with providers for trauma-informed care  
• Community develops resiliency screening to be included in CIE |
| **Referrals** | Ability to make referrals to external and healthcare organizations with the ability to track those referrals to partners and receive updates and outcomes. | Based on ACES scores, CIE providers can determine appropriate community supports identified via ACES screening (i.e. home visiting, parent support or education) with the potential identification or “badging” within the CIE of trauma-informed competency | • Need standardization for trauma-informed services/resources  
• Establishing community-curated resources related to each ACES screening question  
• Clinician’s training/understanding of non-traditional community-based resources with billable time/capacity  
• May not have the resources needed to adequately respond to needs (early childhood mental health, geographic reach, eligibility criteria, etc.) | • Establish working groups and standard policies to identify resources as trauma-informed competency, use CIE to track and document  
• Asset mapping of resources and funding streams to support |
| **Prioritization of Care** | Ability to identify immediate and long-term needs of an individual and hierarchy to tailor an intervention or care for an individual | Based on ACES screening, use CIE to understand historical access to services and enrollment of services to create a care plan based on individual patient needs and tailored and communicate patient readiness and interests | • Provider context of community resource capacity, regional resources and eligibility for programs  
• Traditional providers establishing social and healthcare care plans  
• Patient readiness around motivation and interest in accessing resources | • Documenting and accounting for patient readiness within the CIE, as a care plan tool |
OTHER UPDATES

Statement of COC Membership from Regional Taskforce on the Homeless

February 2021

The Regional Taskforce on the Homeless (RTFH) is a long-time partner with the Community Information Exchange (CIE) operated by 2-1-1 San Diego, and many homeless services providers across the county are users of the CIE. RTFH is excited to announce another step in the coordination and collaboration in service delivery at the regional level, as it relates to the sharing of data to better serve individuals and families experiencing homelessness.

The RTFH and 2-1-1 San Diego recently initiated a Multi-Party Authorization for individuals to opt in to sharing relevant information from the Homeless Management Information System (HMIS) to better coordinate their care among the larger CIE trust network. Building on the successful legal and technology infrastructure developed between the RTFH and 2-1-1 San Diego, the County of San Diego has initiated a project with 2-1-1 San Diego to receive select data elements from HMIS. This data will be accessible to users of the ConnectWellSD electronic information system for the purposes of person-centered service delivery. The County of San Diego is an existing partner within the CIE trust network and is required to only use information within the CIE, including HMIS, to better coordinate care. ConnectWellSD is guided by the County of San Diego’s overall LiveWell San Diego vision of a county that is healthy, safe, and thriving. ConnectWellSD has introduced person-centered service to the County which is a service model that places each individual at the center of their own personal development.

The confidentiality and privacy of our customers and their data is of the utmost importance to all parties involved. This includes, but is not limited to, the use of end-to-end encryption. Data found in the ConnectWellSD system will not be used for the determination of eligibility for programs or services. The information shared includes general demographic data already shared by 2-1-1 CIE (e.g. name, birthdate, contact information), which all ConnectWellSD users can view, the specific data elements from HMIS that will be shared from the CIE into ConnectWellSD include basic program enrollment information and primary team using this information will be the Whole Person Wellness Program.

RTFH will communicate regularly with 2-1-1 San Diego and the County as the project progresses. As always, the confidentiality and privacy of those experiencing homelessness and their data is of the utmost importance to all parties involved.

The RTFH, 2-1-1 San Diego, and the County of San Diego are excited to expand on our partnership as we continue to focus on strengthening our system to be more collaborative and connected.
CIE TRAINING OFFERINGS

Special Topic/Office Hours

Preview new features
• Dashboard
• Referral Search

Standing Topics
• Intro to CIE
• Overview of Features

Monthly Training

2nd Wednesdays, 10 am to 11 am
Join Zoom Meeting
https://211sandiego.zoom.us/j/91002228786?pwd=WjZTQSs3U2pLYUx3NVNIS05IMWx2QT09
Meeting ID: 910 0222 8786
Passcode: 115961 One tap mobile +16699009128
California will provide the Golden Status Stimulus payment to families and people who qualify. This is a one-time $600 or $1,200 payment per tax return. You may receive this payment if you receive the California Earned Income Tax Credit (CalEITC) or file with an Individual Taxpayer Identification Number (ITIN).

The Golden State Stimulus aims to:
- Support low-income Californians
- Help those facing a hardship due to COVID-19

### Your stimulus amount

<table>
<thead>
<tr>
<th>On your 2020 tax return…</th>
<th>Stimulus amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>You are a CalEITC recipient</td>
<td>$600</td>
</tr>
<tr>
<td>You:</td>
<td>$1,200</td>
</tr>
<tr>
<td>• Are a CalEITC recipient;</td>
<td></td>
</tr>
<tr>
<td>• File with an ITIN, and</td>
<td></td>
</tr>
<tr>
<td>• Made $75,000 or less (total CA AGI)</td>
<td></td>
</tr>
<tr>
<td>You are not a CalEITC recipient, but you:</td>
<td>$600</td>
</tr>
<tr>
<td>• File with an ITIN and</td>
<td></td>
</tr>
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<td></td>
</tr>
<tr>
<td>You file a joint return and:</td>
<td>$600</td>
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</table>
There are three new programs across the county of San Diego to assist with rental and utility payments to ease the financial burden for renters with earnings below 80% of the Area Median Income or those who experienced a loss of income due to the COVID-19 pandemic.

**City of Chula Vista Residents**

For City of Chula Vista information please Visit [www.ChulaVistaERAP.com](http://www.ChulaVistaERAP.com) to apply.

**City of San Diego Residents**

Visit [www.covidassistance.sdhc.org](http://www.covidassistance.sdhc.org) to apply.

**All other Residents in San Diego County**

Apply here for the County of San Diego COVID-19 Emergency Rental Assistance Program. Applications accepted from March 2, 2021 through March 16, 2021.

Visit [www.sdhcd.org](http://www.sdhcd.org) for the latest information about the Emergency Rental assistance program.

**Other rental assistance programs offered by CIE Partners**

Interfaith Community Services - City of Escondido CV Homeless Prevention

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COVID-19: Eviction Prevention Collaborative

Laura Ann Fernea, Executive Director
**OPEN FORUM**

**SPEAK OUT!**

- Share
- Inform
- Bring your voice into the space
- What’s new and exciting in your organization or agency
- I need support or help with
- I have an idea
HAVE A GREAT DAY!

NEXT CIE PARTNER MEETING
APRIL 22, 2021  @ 9:00 am
QUESTIONS? REACH OUT TO THE 211/CIE TEAM

Karis Grounds
VICE-PRESIDENT OF
HEALTH & COMMUNITY IMPACT

Tanissha Harrell
DIRECTOR OF
ENGAGEMENT

Alana Kalinowski
DIRECTOR OF PARTNER INTEGRATION

Aidee Roman
COMMUNITY PARTNERSHIP MANAGER

Richard Sacco
PROGRAM ASSISTANT

Roxanne Suarez
DIRECTOR OF PARTNER INTEGRATION