An Introduction to the CoC and Coordinated Entry

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Agenda

1. **Introductions - fill out linked Google form in chat!**
2. **Continuum of Care Overview**
3. **Coordinated Entry Basics**
4. **Coordinated Entry Deeper Dive**
5. **Closing and Questions (if time)**

QUICK Poll!

General Continuum of Care Overview

Establishing a CoC

CoC Program interim rule requires communities to establish a Continuum of Care in order to receive CoC Program funding:

- Must meet minimum requirements for CoC structure, governance and responsibilities
- Requires collaboration between CoC Program and Emergency Solutions Grant (ESG) recipients on certain responsibilities
- Evidence must be maintained in Collaborative Applicant records (578.103)

What is a CoC?

The CoC is the organizing body comprised of all interested stakeholders (you!) charged with planning and implementing strategies goals to end homelessness.

Representatives from relevant organizations within a geographic area shall establish a CoC for the geographic area to carry out the duties of this part.

When referencing “the CoC”, this is the full body of stakeholders as governed by the Governance Charter, not one single entity or group

CoC Operating Duties

1. Operate the CoC:
   - CoC governance and management
   - Overall and project-level performance
   - Coordinated assessment system
   - Written standards
2. Designate an HMIS for the CoC
3. Plan for the CoC geographic area:
   - Coordinated system of care

CoC Planning

CoC Planning

- The CoC must coordinate the implementation of a housing and service system that meets the needs of homeless persons throughout its geography
- Minimally, the system should encompass:
  - Outreach, engagement, and assessment
  - Shelter, housing, and supportive services
  - Homelessness prevention strategies

- CoC has other requirements under HUD, but primary focus today is system level Coordinated Entry requirements and practices

CoC and ESG Coordination

- Key Elements of coordination:
  - Centralized/coordinated assessment
  - Consolidated Plan homelessness strategy and goals
  - Allocation of ESG funding
  - ESG performance standards
  - ESG subrecipient participation in HMIS
  - ESG and CoC Program written standards

Coordinated Entry and Assessment

- CoC must establish and operate a coordinated assessment system, in consultation with ESG recipient(s):
  - Must provide an initial, comprehensive assessment of needs of individuals/families requesting assistance
  - Must cover the full CoC geographic area
  - Must be accessible and well-advertised to individuals/families seeking assistance

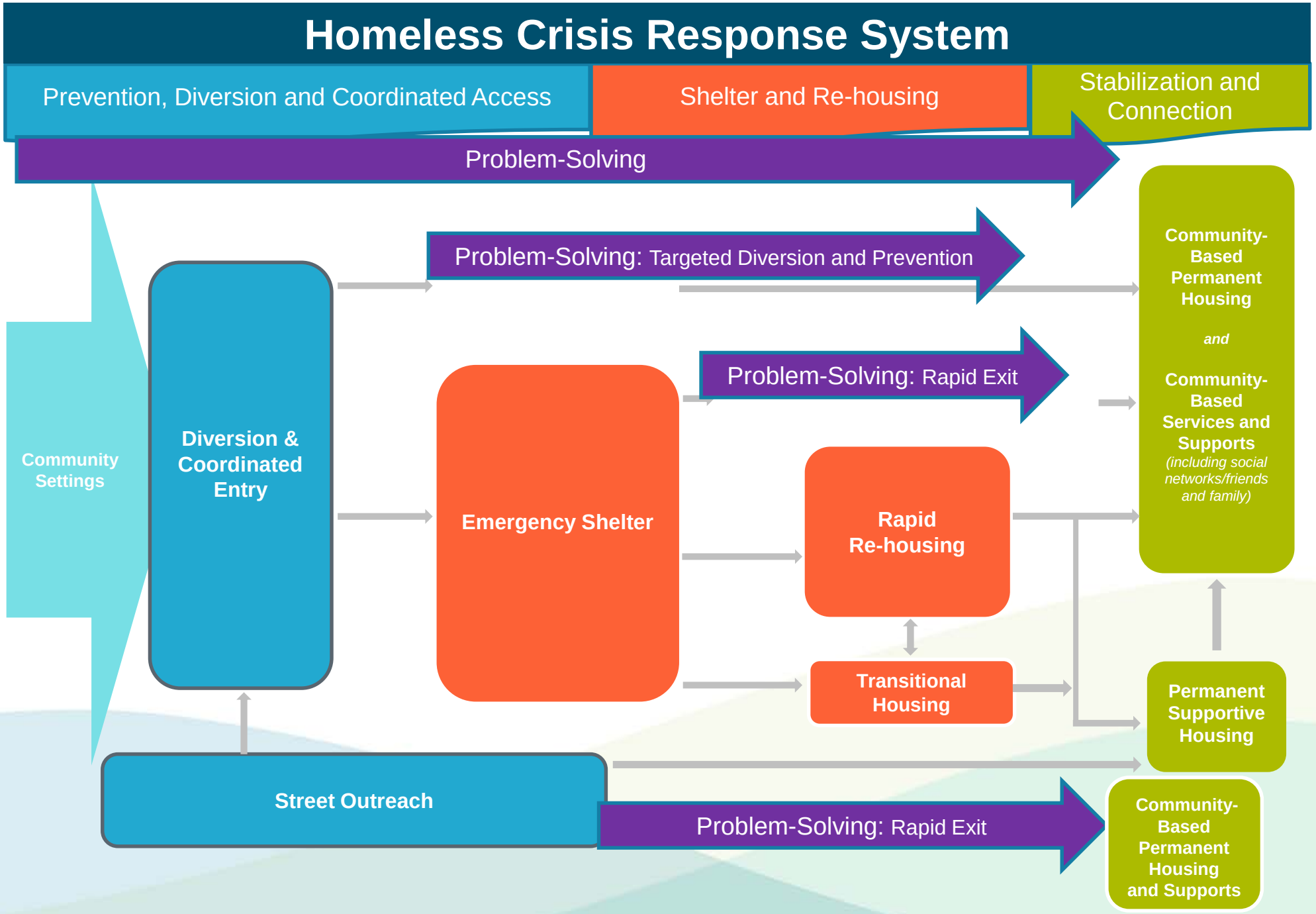
Coordinated Entry and Assessment

Core Elements

Coordinated Entry Overview

- A system wide approach to ensuring households in a housing crisis can are prioritized for available resources
- Ideally covers all homeless and housing program in a geographic area, not just those funded by HUD
- Recognizes that a “first come first served” approach fails to meet system goals and thoughtfully connect resources
- Promotes notion that those who are most vulnerable are served first, even if resource is less than ideal for that household’s needs (RRH serving individuals who may need PSH)
- Assumes programs are optimally designed. For instance:
  - RRH programs use the vast flexibility they have to serve high need households for whom no PSH available
  - Assumes PSH provides have capacity to provide deep, often clinical supportive services for most vulnerable
  - Recognizes that Transitional Housing is NOT permanent housing and those individuals are still considered homeless and made NOT eligible for PH resources once in TH
- Employs Prevention, Housing Problem Solving, Diversion and other creative approaches in helping to ease the pressure on limited housing resources
- Operates using Housing First, client-driven strategies that ensure client choice and target those with most significant barriers, including those with zero income, SUD and BH challenges

Homeless Crisis Response System



Core Elements of Coordinated Entry

NH 211
Regional Access Points (RAPS)
Emergency Shelters
Mobile Outreach Teams

ACCESS Basics

- Access refers to how people experiencing a housing crisis learn that coordinated entry exists and access crisis response services
- The first contact that most people experiencing a housing crisis will have with the crisis response system is through a coordinated entry access point
- Access points play a critical role in engaging people in order to address their most immediate needs through referral to emergency services
- Access points are key in providing Housing Problem Solving and Diversion interventions for those households with other, safe options
- Access points also play a critical role in beginning to determine which intervention might be most appropriate to rapidly connect those people to housing.

A note about Problem Solving & Diversion

- HPS should be a **community-wide system intervention**, both in formal CE access points and elsewhere
- HPS infuses a combination of **equity, engagement and creativity** to harvest and empower opportunities that don't seem obvious at first glance
- HPS happens at first points of contact, which **may be before formal Access Points**
- HPS is the first **(and ongoing)** step in a phased approach (NOT a checklist!)
- Seeks to relieve the CE and housing resources by **reducing inflow and pressure on scarce resources or keep people safe while linking to longer term interventions**
- Allows limited housing supply to focus effort on those **who truly have no other alternatives**

Common Access Challenges

- Access Points not accessible (eligibility, location, target population, technology)
- Persons not using designated Access Points
- Non-Access Point agencies continue to function as “front door”
- Too many persons seeking assistance
- Access Point staff not trained appropriate, lack necessary intake skills
- Access Points not conducting problem solving or rapid resolution conversations
- Access Point operational guidance not established, not clear, not followed
- Unclear workflows; lack of defined process creates confusion

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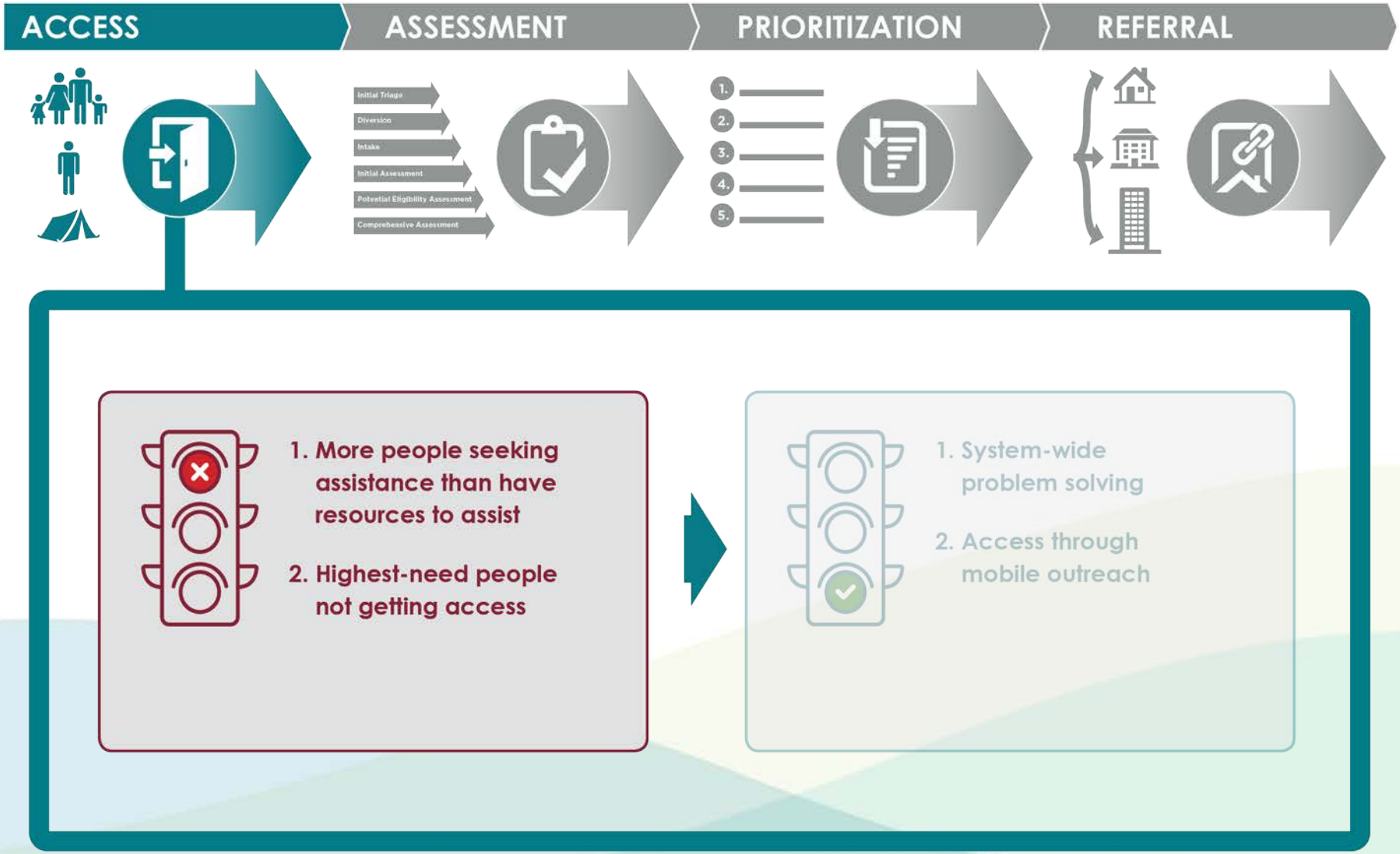

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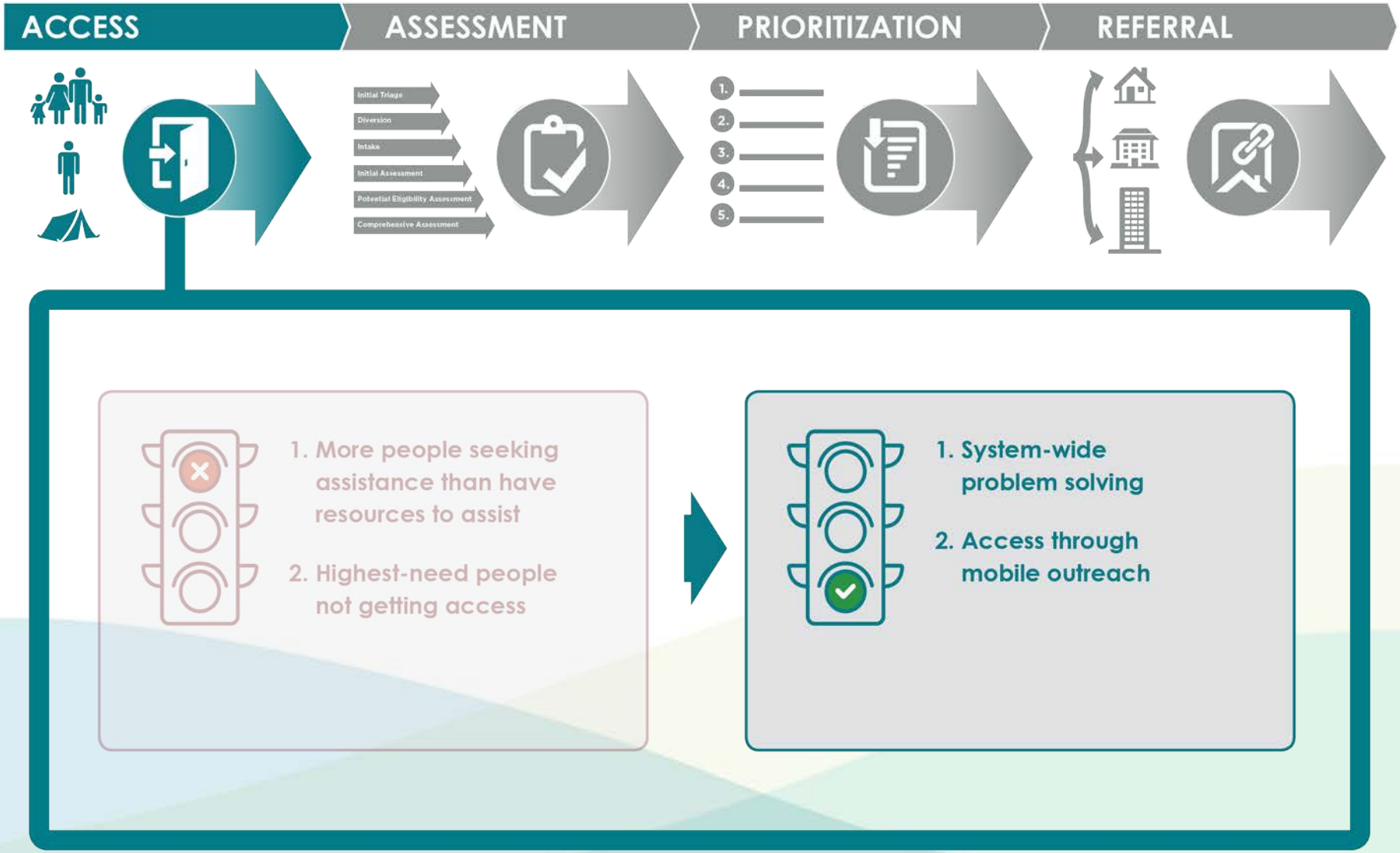


NH VI-SPDATT
COVID Assessment
Case Conferencing

***Assessment Tool being redesigned currently**

Assessment Basics

- Assessment is the **process** of gathering information about a person presenting to the crisis response system.
- Assessment includes documenting information about the barriers the person faces to being rapidly housed and any characteristics that might make him or her more vulnerable while homeless.
- Historically, assessment of persons experiencing a housing crisis included inordinately long and intrusive interviews, even if they were only seeking temporary emergency assistance. Persons might have to undergo the assessment process multiple times, at every place they accessed.
- With coordinated entry, assessment can collect information in phases—initially collecting only the information essential to ascertaining the person's immediate needs and to connecting that person to appropriate interventions.

Common Assessment Challenges

- Assessment process is too long
- Assessment doesn’t support active listening, client-centered empowerment
- Assessment doesn’t capture the necessary information to support quick, housing-focused resolution
- Problem-solving conversations not part of the defined CE Assessment process
- Assessment staff not trained appropriately, lack necessary assessment skills
- Assessment operational guidance not established, not clear, not followed
- Others?

Phased Assessment Example

What about assessment tools?

- Screening is different than assessment; screening is more about sorting
- Assessment tools are helpful to capture consistent information about clients; they should not dictate prioritization
- Assessment tools help identify housing and service needs – the score they generate should inform understanding a person's severity of need, but other factors should be considered
- There are no "federally-endorsed" assessment tools and all should be used with caution to make sure they meet the characteristics defined by VA and HUD
- Locally specific processes and tools may be used to reflect local conditions; tools and processes should be tested and assessed for reliability

Prioritization Policies
Scores and Case Conferencing
Use of RRH for vulnerable when no PSH available

Defining Prioritization

Prioritization = person's needs and level of vulnerability are documented and quantified *in relation to other people who are also seeking homeless assistance.*

- ✓Uses information learned from assessment
- ✓Manages the inventory of housing resources
- ✓Ensures persons with the greatest need and vulnerability receive priority or accelerated access to the supports they need to resolve their housing crisis.

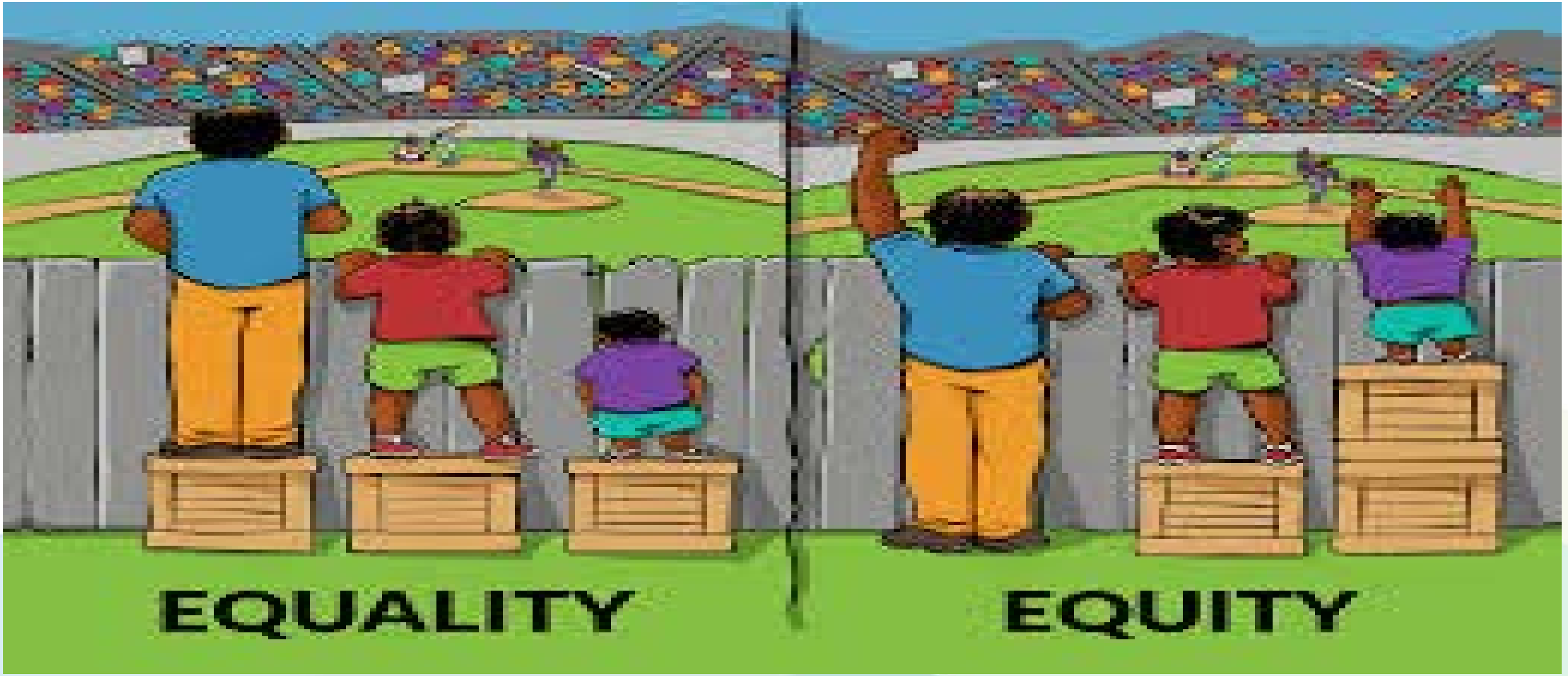
Understanding Prioritization

Prioritization is NOT a tool. It is a policy.

- The community decides which set of criteria to use for determining which households have priority access to homeless system resources
- Once a prioritization policy is decided, then the community should design or pick tool(s) to operationalize that policy

HUD Prioritization Policy for PSH

1. Chronically homeless persons with longest period of homelessness and greatest severity of service needs
2. Homeless persons with a disability, longest periods of homelessness, greatest severity of service needs
3. Homeless persons with a disability and greatest severity of service needs
4. Homeless persons with a disability without severe service needs
5. Homeless persons with a disability coming from TH


EQUALITY
EQUITY

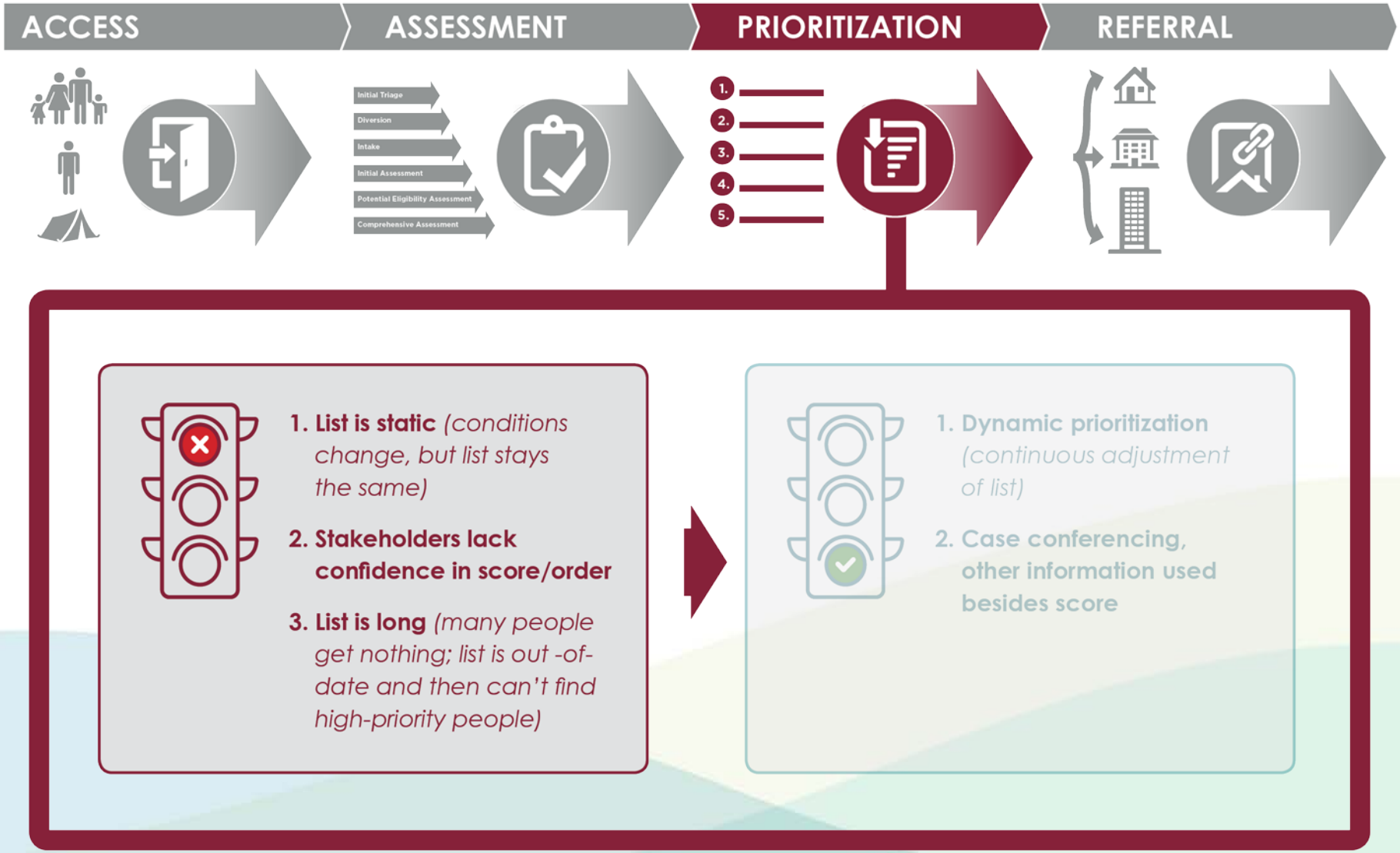
Prioritization Criteria

- A community may adopt different prioritization criteria for different groups – families, single adults, youth, survivors of DV, persons seeking homelessness prevention services.

- Examples:
  - ✓ A community may have few unsheltered families, so being unsheltered would not be most useful criteria to prioritize this population
  - ✓ Using time of current homeless episode homeless might be more relevant for single adults; a more appropriate criterion for families may be the number of past shelter stays

Prioritization and Scored Assessment Tools

- It is also important to remember that prioritization **cannot** be based exclusively on a specific disability type
- If an assessment tool consistently provides a higher score to persons with *specific* disabilities over other disabilities and prioritization is based exclusively on that score, this could violate fair housing statutes and regulations
- Assessment can be phased an include a combination of both objective factors as well as the use of case conferencing and other methods to help prioritize actual housing referrals/placements


ACCESS
ASSESSMENT
PRIORITIZATION
REFERRAL
Initial Triage
Diversion
Intake
Initial Assessment
Potential Eligibility Assessment
Comprehensive Assessment
1.
2.
3.
4.
5.
1. List is static (conditions change, but list stays the same)
2. Stakeholders lack confidence in score/order
3. List is long (many people get nothing; list is out -of-date and then can't find high-priority people)
1. Dynamic prioritization (continuous adjustment of list)
2. Case conferencing, other information used besides score

What is Static Prioritization?

In a static prioritization process:

- scores from one set of information are used, often gathered once, to place on a waitlist for a specific intervention type
- the order in which someone is selected for a vacancy is static once on the list and typically doesn't change
- actual availability of resources are not considered; people are referred to a waitlist for the intervention type indicated from the assessment tool score
- Results in long waitlists, with lower need households being served first in certain resource types

What is Dynamic System Management?

Dynamic System Management continually adjusts a CoCs prioritization list to achieve all of the following system objectives:

1. Most vulnerable persons are prioritized
2. Housing placements occur within 60 days or as quickly as possible
3. All available CoC resources are leveraged in most flexible manner possible
4. CoC is working towards continuous improvement of system improvement measures

This Deep Dive Institute will further explore what ***dynamic system management*** looks like in practical terms and how to do it.

Why Coordinated Entry? Why Dynamic System Management?

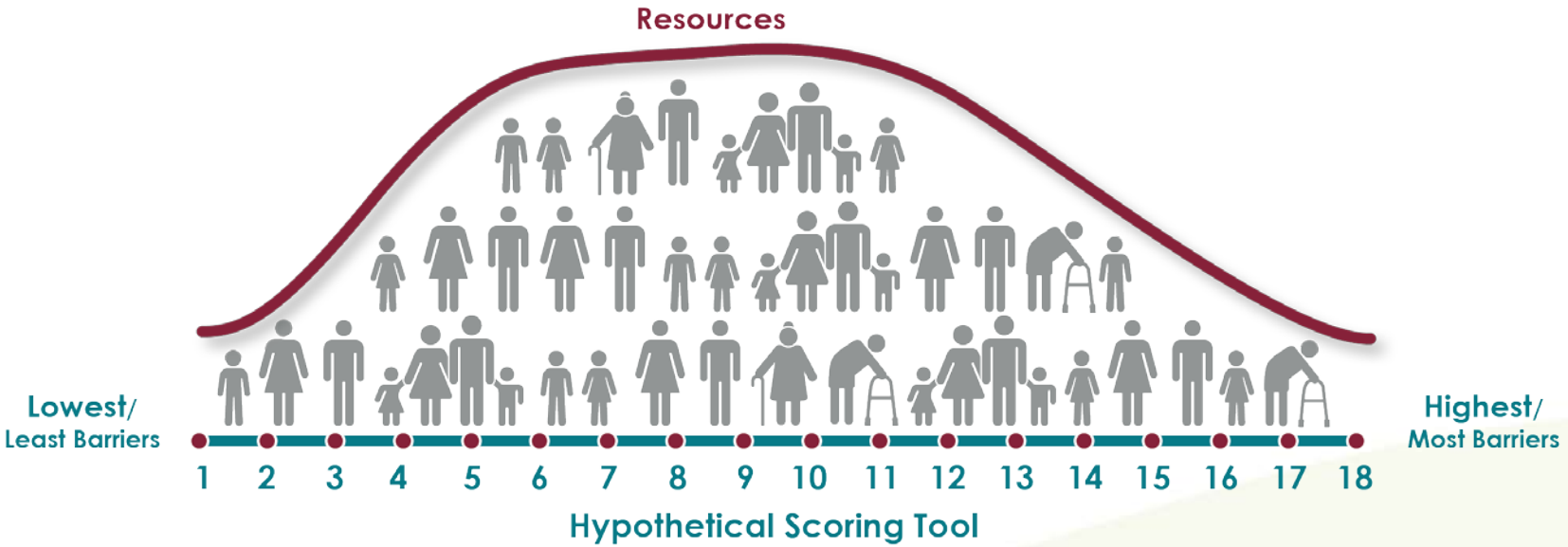
An effective **Coordinated Entry** approach:

- ✓ Ensures housing program openings are filled by the people who need them the most; and
- ✓ Implements strategies to serve the larger population that cannot immediately be assisted with available resource

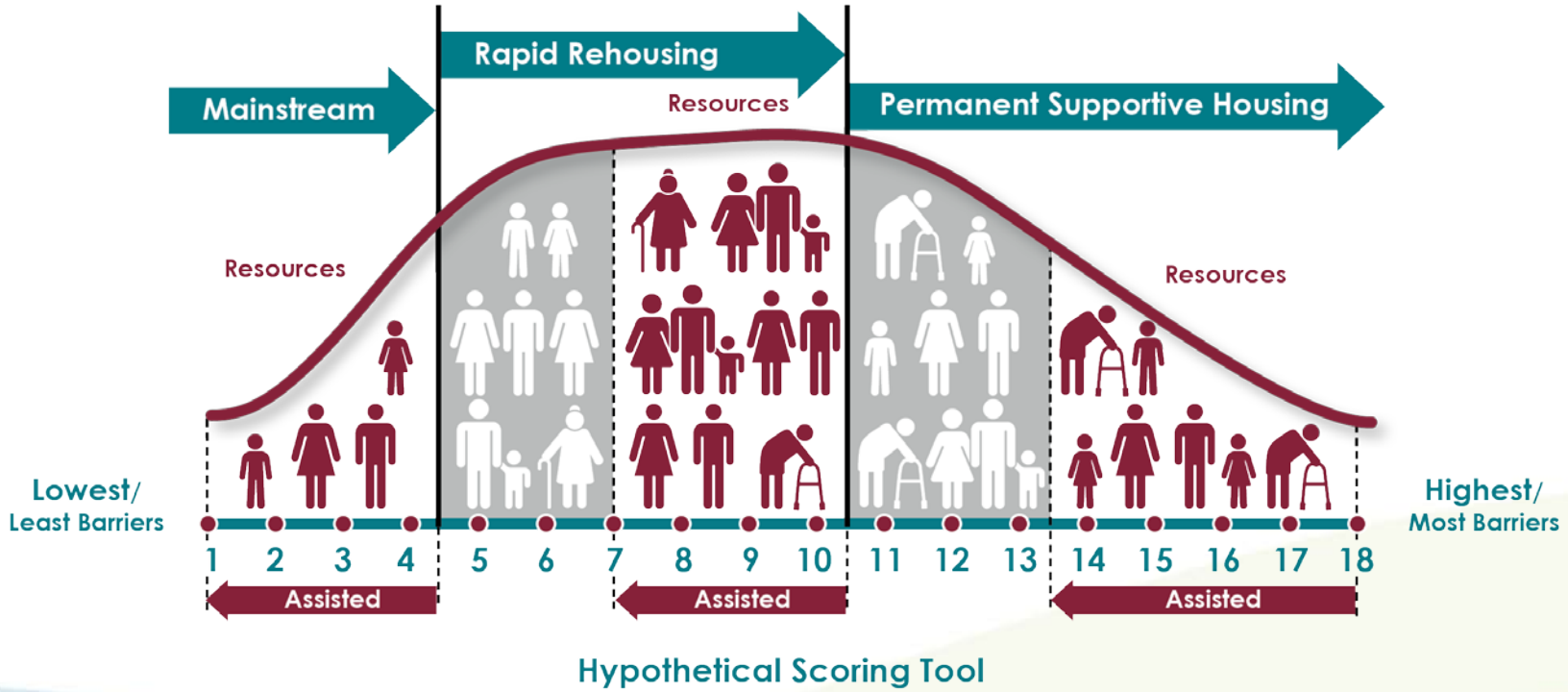
Dynamic System Management ensures more efficiency:

- ✓ All available resources are prioritized to serve the highest need persons first; and
- ✓ Highest need individuals wait no longer than 60 days for permanent housing placement and support services.

Sample of Static Prioritization with Scores

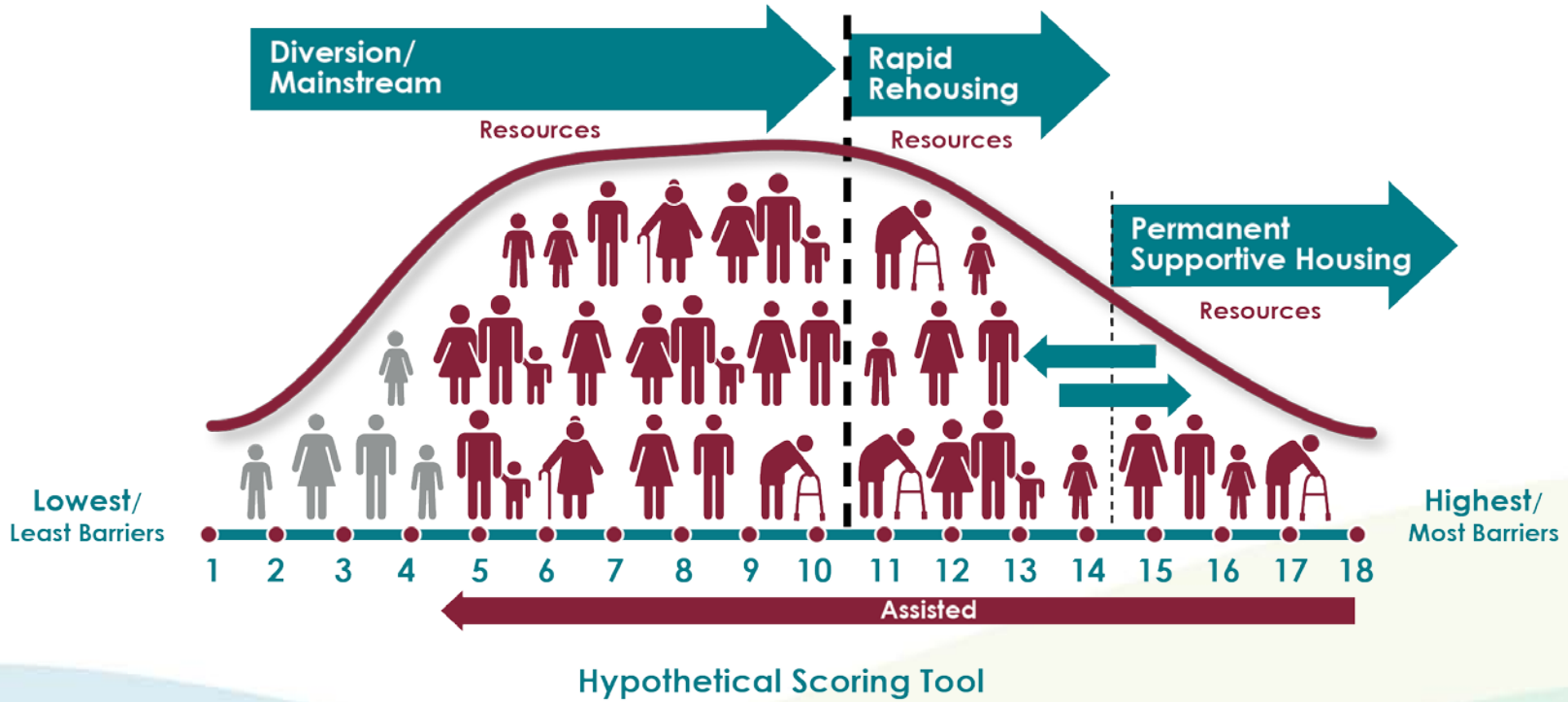


Using Score Ranges with Some Prioritization



Results of Static Prioritization

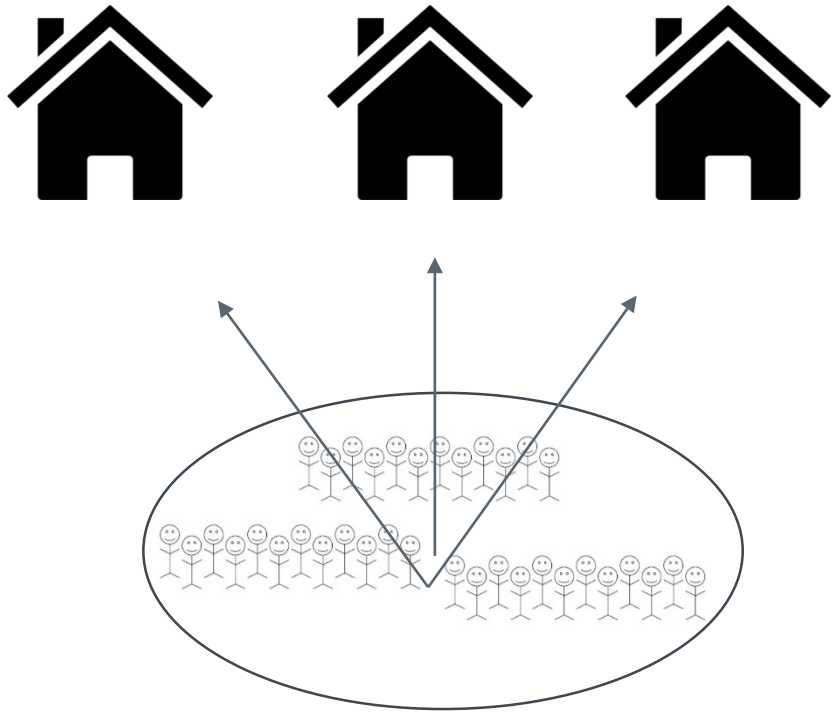
Result of Dynamic Prioritization



What about those who are not prioritized?

- Dynamic prioritization should not mean that those who are not prioritized for referral are simply ignored
- Households not prioritized for a system intervention should be offered problem-solving, diversion, help with self-resolution and referrals and supports to use mainstream services
- If circumstances change, people should be reassessed or new information should be added to a profile so they are reconsidered

Case Conferencing



Prioritized Group

Use case conferencing to discuss:

- What is vacant?
- Who is ‘ready’? (Locatable, has documents)
- Of those ‘ready’, who is highest need and eligible for vacancy?
- If multiple openings, make best referrals possible considering needs and client choice
- Bring in new or additional information or updated information to be current
- Follow up on what happened to last set of referrals

Scores and Prioritization

Core Take Home Message!

- A person's background, history and characteristics are not necessarily predictive of whether they will be successful in a specific intervention
- Prioritization is about deciding as a community how to best use the resources available
  - Not "they are a #, so they get X intervention" or "they got a # so they *need* X intervention to be successful".
  - Ask: "What is the best use of each of the currently *available* interventions? What is the best way to provide assistance to as many highest needs persons *right now*?"
- Case conferencing can help these conversations, while remaining focused on the highest need persons

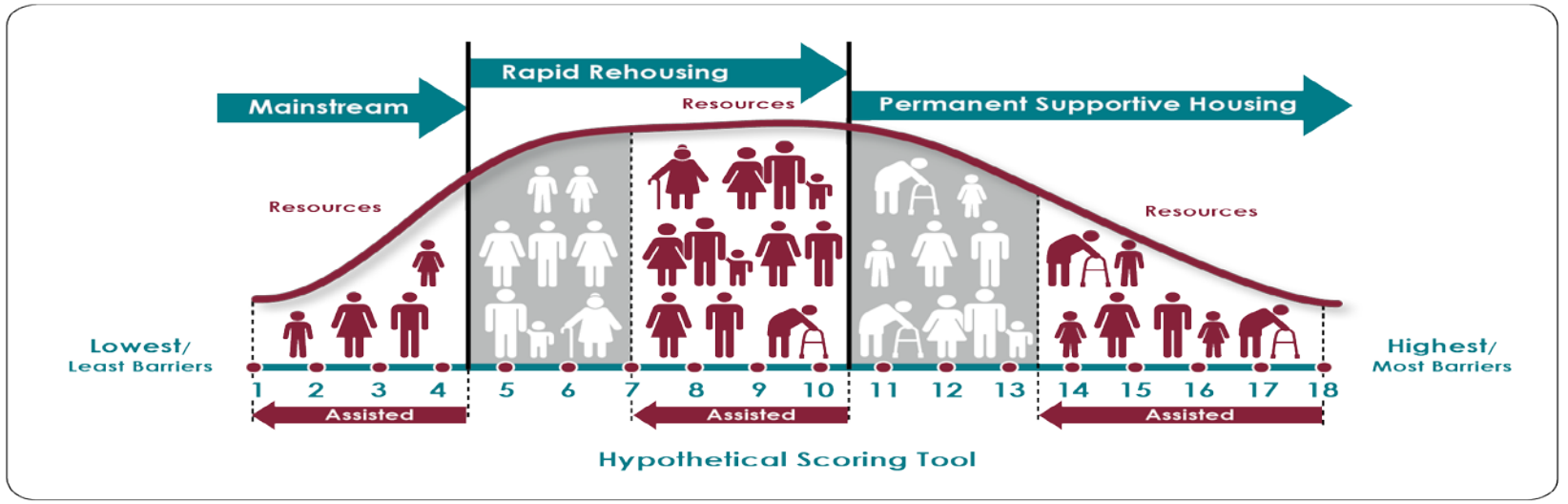
Case Conferencing

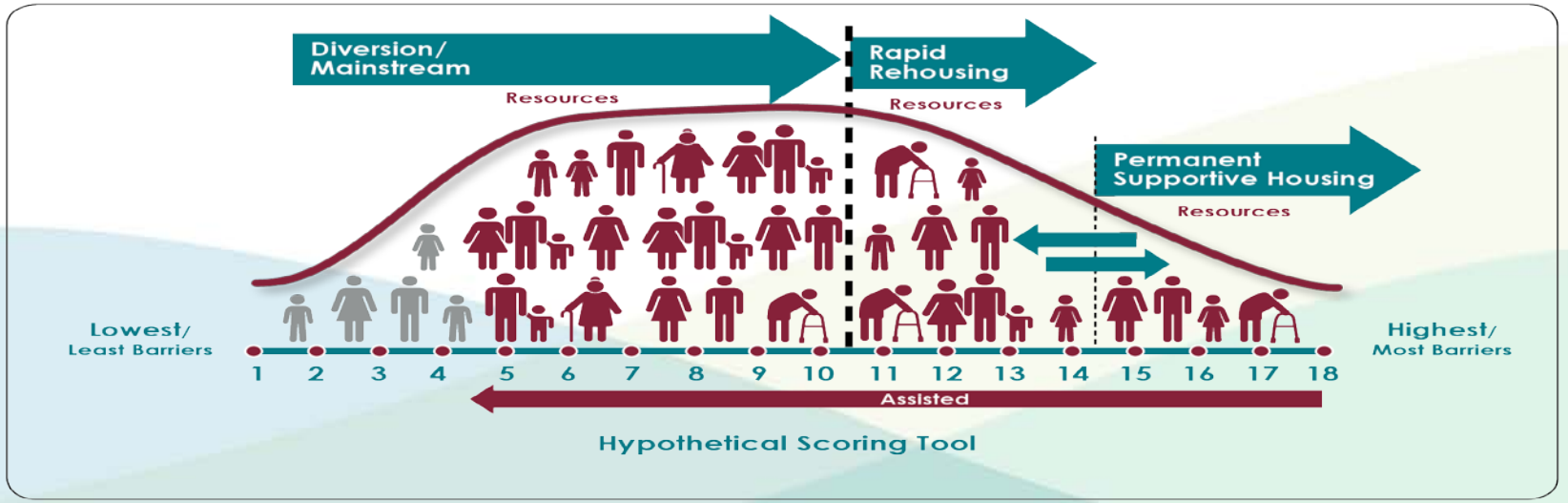
- Case conferences also offer an opportunity to:
  - Make adjustments when a CoC has defined a prioritization criterion [e.g. Length of Time Homeless (LOTH)], but that criterion is not known for all participants
  - Reconcile HMIS-based documentation or other sources against client self-report which may be less reliable
    - Rules about how these discrepancies are handled are part of the framework for what comes into the case conference conversation

Sizing the Priority List to the Inventory

- In a **dynamic** process**,** there is a clear policy that persons that meet the prioritization criteria (based on consistent factors, such as that they are unsheltered, have longest time homeless, are most vulnerable) become a part of a prioritized pool or group
- The pool is sized to make sure that the number of people prioritized roughly matches the availability of openings in a given time frame (e.g. 60 days)
- As openings arise, people are referred from the pool to vacancies using a dynamic process.

Result of Dynamic Prioritization





Using the information for system design

- A benefit of dynamic system management: it can be used to inform efforts to size the need for intervention types
  - How much more RRH is needed?
  - What types of PSH?
  - How much problem solving/diversion?
- Static systems can appear to indicate what is needed, but are likely to overestimate the lack of certain resources, based on the assigned score being considered to be the same as a proven need for a given intervention

REFERRAL

Available PSH Slots
Available RRH Slots
Mainstream Housing Supports
Diversion and Problem Solving

Prioritization and Eligibility Criteria

- Prioritization and eligibility are not the same
- Eligibility also matters for referral purposes
- Programs for specific populations must admit only those who qualify for their program
- BUT this is different from making those characteristics a criterion used to prioritize

Using Dynamic Prioritization for PSH

General rules of practice for ***PSH***:

- People who are Chronically Homeless & have highest vulnerability generally should be offered PSH *when it is available*
- We know from research that PSH is most effective and cost effective when used to serve CH households who have been homeless the longest and/or have significant service needs

Using Dynamic Prioritization for RRH/PSH

General rules of practice for ***RRH***:

- Reality = more people experiencing CH than there are PSH vacancies
- Consider Rapid Rehousing (RRH) or other program models as an alternative, bridge or flexible support
  - ✓ RRH programs will need to be *flexible* to work well with a higher need population
  - ✓ People in RRH ***can retain their eligibility*** for PSH and may be referred to PSH after an attempt at RRH
  - ✓ May need to ***adjust the RRH service model*** to accommodate higher vulnerability participants. Monitor returns to homelessness from RRH projects to determine if the assistance needs to be adjusted.

Using Dynamic Prioritization for Referral

- Dynamic prioritization works in real time based on available resources
- If the only currently available resource is Rapid Rehousing for single adults, consider referring the highest need eligible person to that resource
- If that household is not ready or interested, or the program is not the best option available to them, move on to the next person
- It is critical to go to the people at the top of the list each time there is an opening, so highest need people are not passed over

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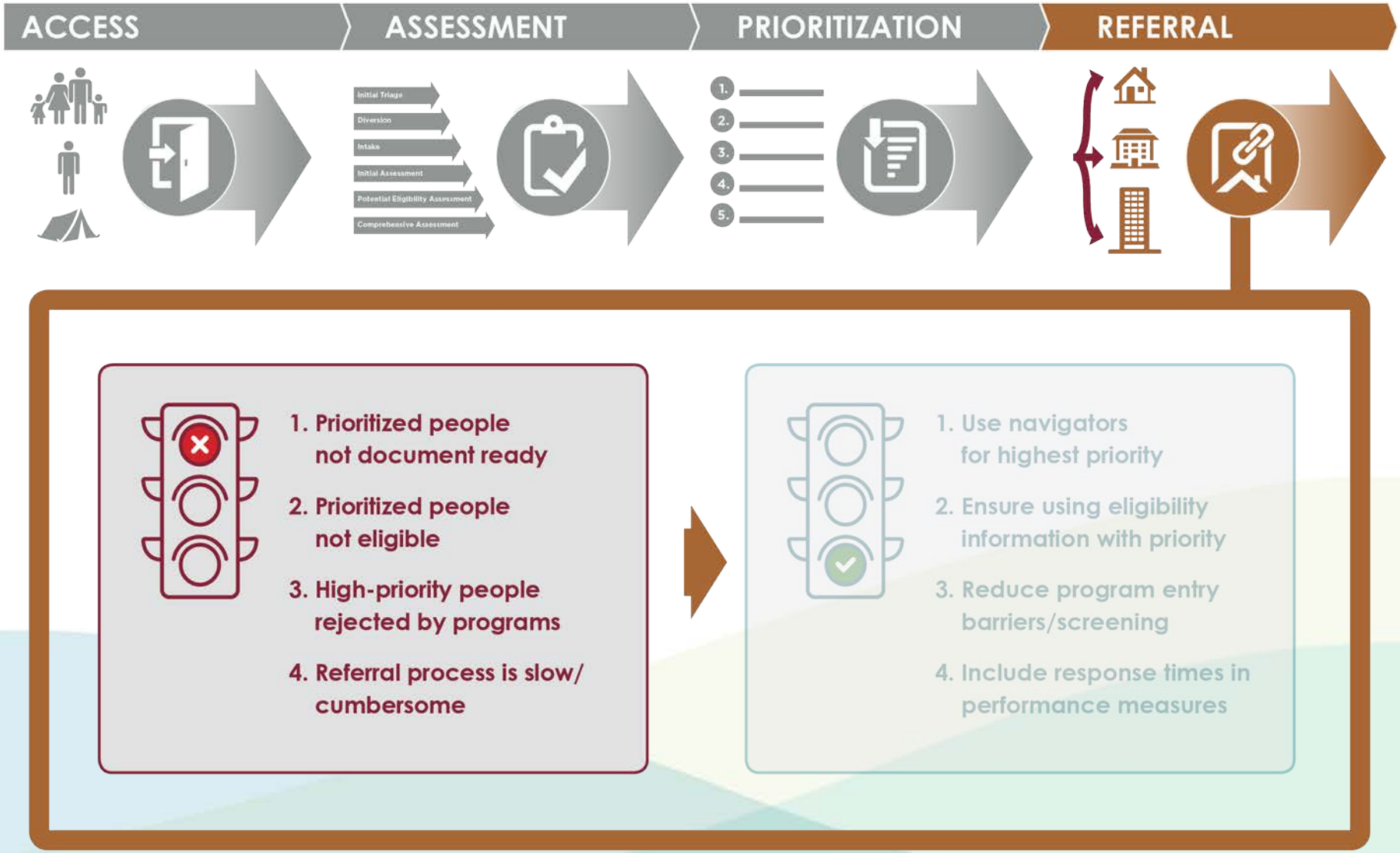

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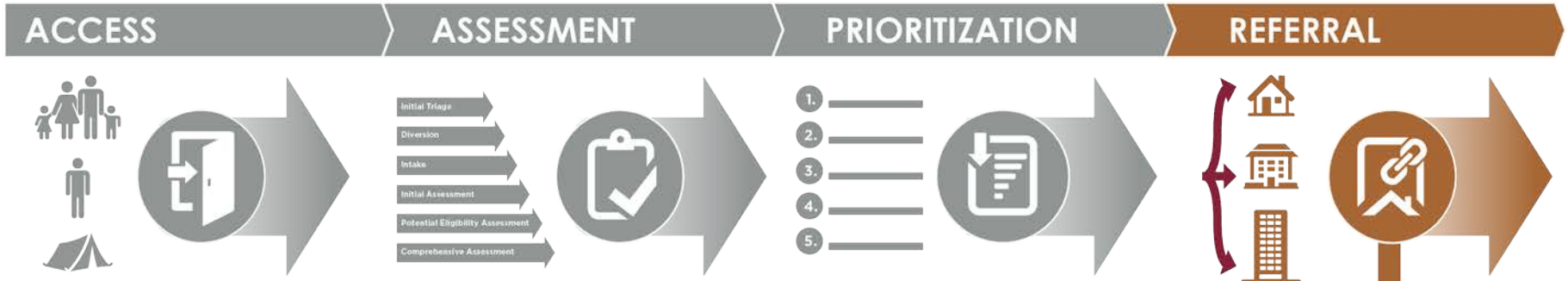

1. Prioritized people not document ready
2. Prioritized people not eligible
3. High-priority people rejected by programs
4. Referral process is slow/ cumbersome

1. Use navigators for highest priority
2. Ensure using eligibility information with priority
3. Reduce program entry barriers/screening
4. Include response times in performance measures

The Role of Navigation

Navigation:

- help to secure the documentation the participant will need for program enrollment, and
- help to access services that will be needed prior to housing, including applying for benefits, transportation support, and other immediate services.
- Ensure someone remains in touch with priority persons

- Navigation services may be provided by outreach workers, CES assessors, dedicated case managers or others connected to the CES.

Building in Accountability and Q/A

- What happens to high need people
  - Do they get admitted into openings?
  - How many are skipped
  - How many are rejected
  - How many are lost before getting housed?
- Track time frames
  - from prioritization to referral
  - From referral to approval or denial
- Reasons for denials or refusals by clients
  - Set targets and review progress

Strategies Effective System Management

1. All or most resources are included in the Coordinated entry system
2. CE Processes are effectively management and Documented
3. Data and feedback are used to evaluate effectiveness and support continuous improvement
4. All stakeholders receive clear messaging about the system and its purpose

Closing and Questions