



TEXAS HOMELESS NETWORK

TX BoS CoC General Meeting

April 12, 2017

2:00 pm – 4:00 pm

CoC GENERAL MEETING MINUTES

Meeting held via webinar.

Attendance:

THN Staff and VISTA Members:

Caitlin Bayer – Balance of State Programs Coordinator

Kameron Fowler – CoC Director

Kraig Blaize-Fiero – CoC Program Assistant

Sophia Checa- Systems Change Coordinator

Jason Phillips – VISTA Program Manager

Mary Rychlik – CoC Manager

Kristin Zakoor- Data Coordinator

Alexis Williams – VISTA Member

CoC General Membership Attendees:

Hanna Adams, Daphne Adams, Stephanie Aguilar, Marisela Almeida, Jaime Arizpe, Ariel Arredondo, Adrienne Arthur, Melinda Baker, Holly Bates, Angela Belton, Jennifer Belyeu, Mark Bethune, Tierra Bishop, Magda Bolland, Angelia Bostick, Nikki Brennan, Rebecca Bromley, Rebecca Brune, Mercedes Cardenas, April Carl, Kelsey Carroll, Damian Clark, Sharell Clay, Jessica Collins, John Cooper, Ruby DeJesus, Krystle Durrett, Jean East, Bobby Ehrig, Jesse Elizondo, Christina Edmond, Brenda Fawbush, Cheryle Folkes, Mary Gaona, Edna Garcia, Teresa Garcia, Hermelinda Garcia, Condell Garden, Jessica Gonzalez, Roberta Gradel, Lisa Griffin, Erica Hitt, Debra Huffman, Angie Jones, Melissa Juarez, Chesley Knowles, Sabina Lang, Jennifer Laurent, Wendy Leonard, Monica Lerma, Norma Longoria, Daisy Lopez, Deanna Lowry-Green, Lisa Lozano, Susana Majors, Dawn Manor, Cheteva Marshall, Laura Martinez, Indus McDuff, Leslie Mosely, Karen Murfee, Jennifer Nieto, Kim Ogilvie, David Orr, Jo Ann Patillo, Monica Peña-Rasmussen, Tammie Porter, Tasha Prentice, Carol Racz, Joy Ranton, William Reagan, Ginny Reinhardt, Beth Rolingson, Tiffany Ross, Tanteta Scott, Dani Shaw, Troy Smith, Anne Spanyers, Ginny Stafford, Erika Thomas, Veronica Thomas, Melanie Thornton-Lewis, Amanda Tindell, Rosie Valdez, Kisha Vallejo, Molly Voyles, Chad Wheeler, Andrea Wilson, Rebekah Woodland, Michelle Yates

Minutes:

Meeting began at 2:09 PM.

I. Welcome and Introductions and Map

- a. Kameron welcomed attendees to the meeting and had staff in the room introduce themselves. We are pleased to see increased engagement in CoC General Meetings over the last few months, and are excited to see attendee representation across the state continue to grow.

- b. Kameron introduced the newest THN staff member- Kristin Zakoor, Data Coordinator. She will be taking on the role of leading the Point-in-Time (PIT) and Housing Inventory Counts in the TX BoS CoC, among other duties.

II. Announcements

- a. State Emergency Solutions Grant (ESG) Program – The Texas Department of Housing and Community Affairs (TDHCA) has extended the ESG Program due date, but they have not yet released the revised due date at this time, as they are still waiting on the budget allocation from the legislature. TDHCA's ESG Application process requires that applicants consult with their CoC Lead Agency and have the Lead Agency complete an Attachment A form on the applicants' behalf. THN is the CoC Lead Agency for the TX BoS CoC, so THN will complete the required consultation and Attachment A form with all ESG applicants in the TX BoS CoC geographic area. THN has heard from 23 projects so far, and will have forms ready for those applicants by the end of next week. THN staff will let applicants know if re-consultations are needed, should the TDHCA ESG NOFA change along with the deadline announcement. If the TDHCA NOFA does not change, THN will use the consultation applicants have already completed with Mary Rychlik to fulfill requirements. Any question or concerns regarding the Attachment A form should be directed to Mary Rychlik at mary@thn.org.
- b. HUD CoC Program competition updates: HUD recently released the CoC Registration Notice via the CoC Program listserv on HUD Exchange. CoC Program grantees do not need to take any action on the CoC Registration, as it is the Collaborative Applicant's, THN's, role to complete it on behalf of the TX BoS CoC. The registration is due to HUD on May 1. In prior years, the CoC NOFA has been released shortly after the CoC Registration process is completed. HUD had previously announced that the NOFA this year would be released in the "May-ish" timeframe. Thus, THN is moving forward with preparations for the CoC Program competition as though it will be starting in May. Kameron acknowledged the TX BoS CoC Board for their presence, service, and attendance. The TX BoS CoC will be exceptionally busy during competition time, as they will have many decisions to make regarding the local competition process. The CoC Board will be informed soon about special called Board meetings, which will be held throughout CoC Program competition time.
- c. Racial Equity and Homelessness- As part of ongoing professional development efforts, THN attended a webinar series on Racial Equity and Homelessness. Race is a major determinant of whether and individual or family is likely to experience homelessness. One study cites that black individuals are 16 times more likely to experience homelessness than their white peers, and black children are 29 times more likely to experience homelessness than white children, even when the statistics were controlled for other factors like poverty. The webinar series also discussed how to include the voices of marginalized communities in service delivery and policy decision-making. THN staff encouraged attendees to engage in courageous conversations about the intersection of race and homelessness and to consider how project designs might affect communities of color. Staff would like to hear how projects and communities are already addressing

racial equity issues. Staff mentioned resources for further reading, which will be distributed along with the meeting minutes.

- d. VISTA Updates- THN's AmeriCorps VISTA Program isn't just TX BoS CoC exclusive, we have projects across the state! There are currently 15 projects across Texas, 7 of which are in TX BoS communities. The THN VISTA Program is projected to add 5 more spots over the summer. Our VISTA Program Manager, Jason Phillips, will be prioritizing new projects to the TX BoS area as he goes forward in filling the 5 spots. Having a VISTA member onsite is a cost-effective way for organizations to increase program development capacity, develop community resources, or complete those special "wish list" projects. All members serve on a full-time basis for 1 year. The 5 new member openings are expected to be available starting in August and November. If you have any interest in hosting a VISTA member at your organization, contact Jason Phillips at Jason@thn.org. Texarkana has a VISTA starting next week- Lisa Sewell, who will be working on Coordinated Entry and capacity building support for the coalition. Thanks, Texarkana folks!
- e. NAEH Webinar: The Role of Shelter in the Crisis Response System- April 26, 1-2pm. NAEH webinars have been very useful in the past, and are typically high quality. It is highly recommended that Emergency Shelters in the BoS watch the webinar, if possible. The webinar is usually recorded and posted online within a few days, for those providers who are unable to attend the webinar at the scheduled time. Register here: <https://register.gotowebinar.com/register/1564475685598032386>
- f. OrgCode trainings on emergency shelter and housing stabilization- Kameron Fowler, Amanda Sisson and Zach Brown were in Denton and Abilene 2 weeks ago to administer the OrgCode learning clinics. The clinics were well received and staff collected great feedback from participants. Registration is now open for the clinics in Corpus Christi and Galveston (see bullets below for dates). If you didn't get an invitation to sign up for these events in your e-mail, please e-mail Kraig Blaize-Fiero (kraig@thn.org) to be added to our mailing list. Communities are looking forward to seeing the impact of these trainings. THN will continue work with OrgCode to produce a series of webinars based on these trainings and to help the TX BoS CoC develop policies and procedures for Emergency Shelter and Rapid Re-Housing. We encourage all to attend the next two learning clinics in June. Galveston has the most availability at this time, as the Corpus Christi location is filling up quickly. THN will keep attendees apprised of OrgCode Webinar scheduling when the schedule is finalized.
 - i. June 12 & 13th in Corpus Christi
 - ii. June 15 & 16th in Galveston
- g. RRH Clinic- In partnership with CSH, THN held a Rapid Re-Housing Program Design Clinic for CoC Grantees on March 21-22. Attendees reported that the clinic was very helpful, and had a lot of important information. For those CoC Grantees that attended, RRH Project Designs are due to THN by April 21st. ESG grantees are welcome to send their project designs to THN for review, but they are not required to do so.
- h. PSH Clinic CoC Grantees- CSH and THN will be holding a Permanent Supportive Housing (PSH) Program Design Clinic May 4th-5th in Austin TX. This clinic will be open only to CoC Grantees at this time. Clinic attendance is mandatory for CoC Program Grantees

operating a PSH project. This is a training that grantees have been requesting for a while now. CoC Program Grantees that have sub-recipients must require their sub-recipients to attend, too. There will be information for both those staff members that handle grant administration, as well as direct service best practices. We look forward to seeing you all.

III. CoC Current Priority Projects

- a. System Performance Measures Update: The HMIS team has tested and confirmed that the System Performance Measure (SPM) report works for individual projects. The team will be providing an instructional video soon on running this report on the organizational level. It should be noted that the SPM report only works for those HMIS-using projects providing housing. The HMIS team is still working on creating community-level SPM reports.
- b. Coordinated Entry (CE)-Notice, Webinars, Priority Communities- An effective Housing Crisis Response System (HCRS) is integral in the effort to end homelessness. CE is a critical piece of the HCRS, as it assists projects to prioritize the most vulnerable individuals and families for scarce community resources.
 - i. Systems Change Toolkit: TX BoS CoC staff sent out the Systems Change toolkit on March 15. Why is it called a “Systems Change” and not a “Coordinated Entry” toolkit? In order to implement CE in your community, you need to engage in planning/systems change to make your current systems more coordinated, transparent, and uniform. The toolkit will help facilitate these conversations around changing community systems, hence: Systems Change. The Systems Change Toolkit is based on research about collective impact, homelessness, and change management. If you didn’t receive the link to the Systems Change toolkit, subscribe to the TX BoS CoC listserv on the THN website: thn.org. The toolkit provides communities with tools for having in-depth, difficult conversations and provides meeting structure to implement systems change. The toolkit contains 8 weeks of meeting outlines to create the “fertile ground” to grow CE. The TX BoS CoC encourages Local Homeless Coalitions (LHCs) to take on the task of implementing CE. This will move LHCs from a resource-sharing body to a position of strategic action. Regardless of what community body chooses to lead the CE implementation process, it is imperative that someone “own” the process and serve as the community leader. To support the community lead entity, Facilitator Webinars will be held every Thursday from 2:00-3:00 starting April 20th for 8 weeks to provide coaching to community leaders responsible for implementing CE. It is not recommended for all community members to attend Facilitator Webinars, just the community leader who will be responsible for CE.
- c. Point-In-Time (PIT) Count Update/2018 Date Poll- We are still working with 4 communities to complete PIT reports. Communities apart from those 4 should have received a PIT report by now. As soon as community reports are finished, TX BoS CoC staff will work on the CoC-wide report. To help determine next year’s PIT Count date, Kameron launched a poll with several date options for attendees to choose from. The majority of attendees voted for Thursday, January 25, 2018. Staff will finalize the date

shortly. Staff will provide a PIT follow-up webinar with PIT leads and LHC leads once the CoC-Wide PIT report is completed.

- d. HMIS data UDOs- The HMIS Team issued data quality reports via e-mail on April 10 to those projects that use HMIS. They are due back by April 24th. Please reply to the HMIS team's email, indicating that you received your report. The team has emailed over 200 projects, and it takes them time to reach out and confirm receipt with each project. Please send the team an acknowledgement e-mail so they don't have to spend their time doing so. If you need support or assistance with corrections, reach out with the HMIS help desk at hmis@thn.org.
- e. CoC Written Standards- The CoC Written Standards is a document that the CoC Interim Rule mandates CoCs have to make service delivery across a CoC's geographic area consistent. The Written Standards were open for public comment from March 10-24. Caitlin reviewed collected comments, noting that there were 14 responses and that 35% of CoC Program grantees provided comment. Many comments expressed confusion about which projects were required to follow the Written Standards. CoC Program grantees *must* comply with the Written Standards. While ESG recipients/sub-recipients must set their own Written Standards, it is best practice for ESG projects to align their Written Standards with the CoC Written Standards. All other projects in the TX BoS CoC are invited and encouraged to implement the Written Standards in their projects in order to further the goal of providing transparent and accountable service standards. Projects that are not required to use the CoC Written Standards may choose not to use them, but please continue to be involved with the CoC and do not think that if you do not follow the standards, you are not allowed to participate in the CoC. Other comment areas were also reviewed. Next steps for the Written Standards include presenting the document to the CoC Board for approval and incorporating their feedback. Once the CoC Board votes to approve the Written Standards, a date for Written Standard implementation will be set.

IV. Q&A

V. Next Meeting – Wednesday, May 10th, 2:00 p.m., via webinar

Meeting adjourned at 3:29 PM

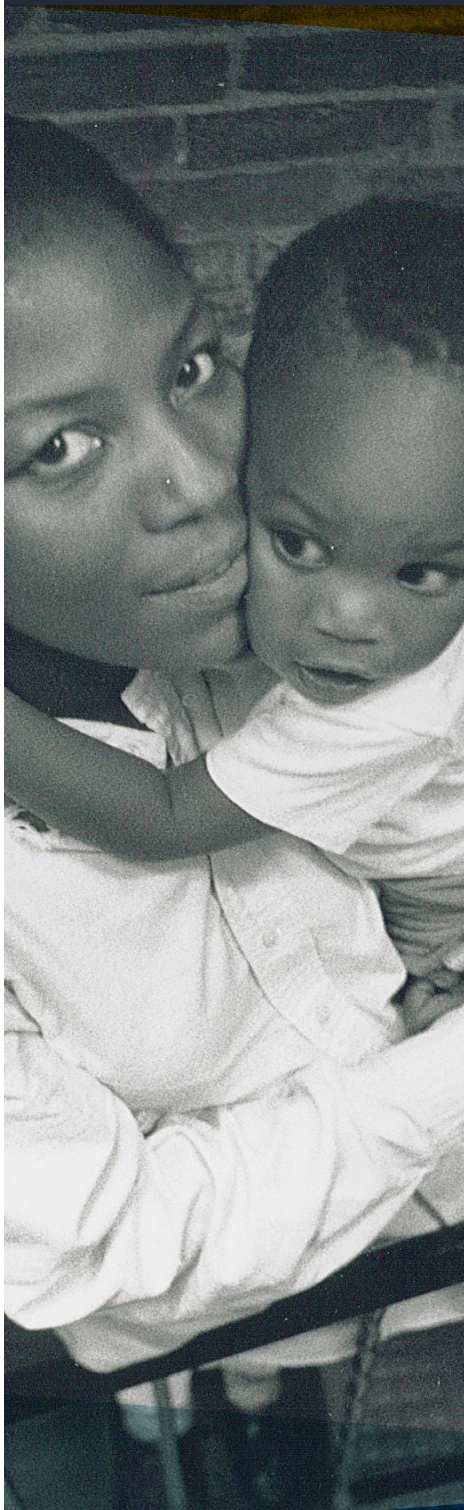
Meeting recording link: https://www.youtube.com/watch?v=vhh4QvG_qrg&feature=youtu.be



Consultation and Attachment A Forms for TDHCA's ESG Funds 4/12/2017 Update

1. THN is the TX BoS CoC Lead Agency. For TDHCA's ESG application process, CoC Lead Agencies:
 - a. Consult with applicants about project design, budget, and performance targets
 - b. Complete Attachment A forms indicating applicants' participation in CoC General Meetings, Point-In-Time (PIT) Counts, and Coordinated Entry (CE)
2. THN has consulted with 20 applicant projects and will consult with 3 more.
3. THN will send Attachment A forms soon.
4. TDHCA has not given a due date for applications.
5. If TDHCA makes any changes to the NOFA, applicants may need to consult with THN again.

ANTI-RACISM RESOURCES FOR HOMELESS SERVICE PROVIDERS



VIDEOS AND PODCASTS

- Visit the t3 (think.teach.transform) podcast page for conversations on racism, homelessness, and social justice: <http://us.thinkt3.com/podcast>
- "The House We Live In" is a brief clip from Race: The Power of Illusion that details how the post-World War II housing boom excluded families of color: https://www.youtube.com/watch?v=mW764dXEI_8
- For a more modern look at housing discrimination, listen to "House Rules" from This American Life: <http://www.thisamericanlife.org/radio-archives/episode/512/house-rules>
- Learn more about race and incarceration through this brief TED talk from the Equal Justice Initiative's Bryan Stevenson: <http://www.eji.org/ted>

BOOKS

- Alexander, M. (2010). *The New Jim Crow: Mass Incarceration in the Age of Colorblindness*. New York: The New Press.
- Bonilla-Silva, E. (2009). *Racism Without Racists: Color-Blind Racism and the Persistence of Racial Inequality in the United States*, 3rd ed. Lanham: Rowman & Littlefield.
- Foldy, E.G., & Buckley, T.R. (2014). *The Color Bind: Talking (and Not Talking) About Race at Work*. New York: Russell Sage Foundation.

FURTHER READING

- Carter III, G. R. (2011). From exclusion to destitution: Race, affordable housing, and homelessness. *Cityscape*, 13(1), 33-70. Available at http://www.jstor.org/stable/20868768?seq=1#page_scan_tab_contents
- Coates, T. (2014). The Case for Reparations. *The Atlantic*. Available at <http://www.theatlantic.com/magazine/archive/2014/06/the-case-for-reparations/361631/>
- Olivet, J. (2015, October 28). Homelessness is a symptom of racism. *The Huffington Post: The Blog*. Available at http://www.huffingtonpost.com/jeff-olivet/homelessness-is-a-symptom_b_8409582.html
- Feagin, J. R. (1999). Excluding blacks and others from housing: The foundation of white racism. *Cityscape*, 4(3), 79-91. Available at http://www.jstor.org/stable/20868476?seq=1#page_scan_tab_contents



Special Attention of:

All Secretary's Representatives
All Regional Directors for CPD
All CPD Division Directors
Continuums of Care (CoC)
Recipients and Subrecipients of the
Continuum of Care (CoC) Program
Recipients and Subrecipients of the
Emergency Solutions Grants (ESG) Program

Notice: CPD-17-01

Issued: January 23, 2017

Expires: This Notice is effective until it is amended, superseded, or rescinded

Cross Reference: 24 CFR Part 578,
42 U.S.C. 11381, *et seq.*, 24 CFR Part 576,
and 42 U.S.C. 11371, *et seq.*, Notice CPD-
014-12, 42 U.S.C. 13925, *et seq.*

**Subject: Notice Establishing Additional Requirements for a Continuum of Care
Centralized or Coordinated Assessment System**

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I. Purpose

Under the authority of 24 CFR 578.7(a)(8), this Notice establishes new requirements that Continuums of Care (CoC) and recipients of CoC Program and Emergency Solutions Grants (ESG) Program funding must meet related to the development and use of a centralized or coordinated assessment system. It also provides guidance on additional policies that CoCs and ESG recipients should consider incorporating into written policies and procedures to achieve improved outcomes for people experiencing homelessness.

The CoC and ESG Program interim rules use the terms “centralized or coordinated assessment” and “centralized or coordinated assessment system;” however, HUD and its Federal partners have begun to use the terms “coordinated entry” and “coordinated entry process.” “Centralized or coordinated assessment system” remains the legal term but, for purposes of consistency with phrasing used in other Federal guidance and in HUD’s other written materials, the Notice uses the term “coordinated entry” or “coordinated entry process.”

A. Background

In June 2010, the United States Interagency Council on Homelessness published *Opening Doors: Federal Strategic Plan to Prevent and End Homelessness*,¹ in which HUD and its Federal partners set goals to end veteran and chronic homelessness by 2015,² and end family and youth homelessness and set a path to end all homelessness by 2020. The development of a comprehensive crisis response system in each community, including new and innovative types of system coordination, is central to the plan’s key objectives and strategies. Although a relatively new concept at the time, communities had already begun to develop and operate coordinated entry processes independently in response to the same conditions identified by the plan, many through the implementation of the Homelessness Prevention and Rapid Re-Housing Program (HPRP) under Title XII of the American Recovery and Reinvestment Act of 2009.

HUD requires each CoC to establish and operate a “centralized or coordinated assessment system” (referred to as “coordinated entry” or “coordinated entry process”) with the goal of increasing the efficiency of local crisis response systems and improving fairness and ease of access to resources, including mainstream resources. Both the CoC and ESG Program interim rules require use of the CoC’s coordinated entry process, provided that it meets HUD requirements. Coordinated entry processes are intended to help communities prioritize people who are most in need of assistance. They also provide information to CoCs and other stakeholders about service needs and gaps to help communities strategically allocate their current resources and identify the need for additional resources. The CoC Program interim rule set the basic parameters for coordinated entry and left further requirements to be set by HUD notice. Since the CoC Program interim rule was published in 2012, HUD has learned a great deal about what makes a coordinated entry process most effective and has determined that additional requirements are necessary. This Notice establishes those additional requirements.³

¹ Amended in 2012 and 2015. <https://www.usich.gov/opening-doors>

² The goal of ending chronic homelessness has been extended to 2017.

³ Authority established in 24 CFR 578.7(a)(8), “This system must comply with any requirements established by HUD by Notice.”

B. Applicability and Deadlines for Compliance

This Notice establishes additional requirements for coordinated entry, as authorized under 24 CFR 578.7(a)(8). Each CoC must establish or update its coordinated entry process in accordance with the requirements of 24 CFR 578.7(a)(8) and this Notice by January 23, 2018. As required under 24 CFR 576.400(d) and 578.7(a)(8), each CoC and each ESG recipient operating within the CoC's geographic area must also work together to ensure the CoC's coordinated entry process allows for coordinated screening, assessment and referrals for ESG projects consistent with the written standards for administering ESG assistance established under 24 CFR 576.400(e).

Once the CoC establishes or updates its coordinated entry process to meet the requirements in this Notice and 24 CFR 578.7(a)(8), all CoC program recipients and subrecipients must begin using that process as required under 24 CFR 578.23(c)(9) and (11). However, as provided in section 578.23(c)(9), a victim service provider may choose not to use the CoC's coordinated entry process, if victim service providers in the area use a coordinated entry process that meets HUD's requirements and the victim service provider uses that system instead.

Similarly, once the CoC establishes or updates its coordinated entry process to meet the requirements in this Notice and 24 CFR 578.7(a)(8), HUD will expect that coordinated entry process to be used for all ESG programs and projects within the geographic area as required under 24 CFR 576.400(d). To be clear, however, section 576.400(d) allows but does not require victim services providers under ESG to use the CoC's coordinated entry process.

C. Key Terms

1. **Affirmative Marketing and Outreach.** The CoC Program interim rule at 24 CFR 578.93(c) requires recipients of CoC Program funds to affirmatively market their housing and supportive services to eligible persons regardless of race, color, national origin, religion, sex, age, familial status, or disability who are least likely to apply in the absence of special outreach, and maintain records of those marketing activities. Housing assisted by HUD and made available through the CoC must also be made available to individuals and families without regard to actual or perceived sexual orientation, gender identity, or marital status in accordance with 24 CFR 5.105 (a)(2).

Nondiscrimination and affirmative outreach requirements for the ESG program are located at 24 CFR § 576.407(a) and (b).

2. **“Coordinated Entry Process” and “Centralized or Coordinated Assessment System.”** The CoC Program interim rule at 24 CFR 578.3 defines centralized or coordinated assessment as the following:

“...a centralized or coordinated process designed to coordinate program participant intake assessment and provision of referrals. A centralized or coordinated assessment system covers the geographic area, is easily accessed by individuals and families seeking housing or services, is well advertised, and includes a comprehensive and standardized assessment tool...”

For the purpose of this Notice, HUD considers the terms “Centralized or Coordinated Assessment System” and “Coordinated Entry Process” to be interchangeable.

3. **Access Points.** Access points are the places—either virtual or physical—where an individual or family in need of assistance accesses the coordinated entry process. These can include the following examples:
 - a. a central location or locations within a geographic area where individuals and families present to receive homeless housing and services;
 - b. a 211 or other hotline system that screens and directly connects callers to appropriate homeless housing and service providers in the area;
 - c. a “no wrong door” approach in which a homeless family or individual can present at any homeless housing and service provider in the geographic area but is assessed using the same tool and methodology so that referrals are consistently completed across the CoC;
 - d. a specialized team of case workers that provides assessment services at provider locations within the CoC; or
 - e. a regional approach in which “hubs” are created within smaller geographic areas.

4. **Distinct elements of the assessment and referral processes.** The processes of *assessment, scoring, prioritization* and *determining eligibility* comprise four distinct elements of the coordinated entry process that connect coordinated entry participants to potential housing and services.
 - a. *Assessment.* In the context of the coordinated entry process, HUD uses the term “Assessment” to refer to the use of one or more standardized *assessment tool(s)* to determine a household’s current housing situation, housing and service needs, risk of harm, risk of future or continued homelessness, and other adverse outcomes. HUD does not intend that the term be confused with assessments often used in clinical settings to determine psychological or physical health, or for other purposes not related to preventing and ending the homelessness of persons who present to coordinated entry for housing-related assistance. Assessment tools often contain a range of questions and can be used in phases to progressively engage a participant over time. See the Additional Policy Considerations Section III.C. for more information on assessment processes and tools.
 - b. *Scoring.* In the context of the coordinated entry process, HUD uses the term “Scoring” to refer to the process of deriving an indicator of risk, vulnerability, or need based on responses to assessment questions. The output of most assessment tools is often an “Assessment Score” for potential project participants, which provides a standardized analysis of risk and other objective assessment factors. While assessment scores generally reflect the factors included in the prioritization process (see Section I.C.4.c), the assessment score alone does not necessarily determine the relative order of potential participants for resources. Additional

consideration, including use of case conferencing, is often necessary to ensure that the outcomes of the assessment more closely align with the community's prioritization process by accounting for unique population-based vulnerabilities and risk factors. See the Additional Requirements Section II.B.3. for more information on the weighting of assessment scores.

- c. *Prioritization.* In the context of the coordinated entry process, HUD uses the term "Prioritization" to refer to the coordinated entry-specific process by which all persons in need of assistance who use coordinated entry are ranked in order of priority. The coordinated entry prioritization policies are established by the CoC with input from all community stakeholders and must ensure that ESG projects are able to serve clients in accordance with written standards that are established under 24 CFR 576.400(e). In addition, the coordinated entry process must, to the maximum extent feasible, ensure that people with more severe service needs and levels of vulnerability are prioritized for housing and homeless assistance before those with less severe service needs and lower levels of vulnerability. Regardless of how prioritization decisions are implemented, the prioritization process must follow the requirements in Section II.B.3. and Section I.D. of this Notice.
- d. *Determining eligibility.* In the context of the coordinated entry process, determining eligibility is a project-level process governed by written standards as established in 24 CFR 576.400(e) and 24 CFR 578.7(a)(9). Coordinated entry processes incorporate mechanisms for determining whether potential participants meet project-specific requirements of the projects for which they are prioritized and to which they are referred. The process of collecting required information and documentation regarding eligibility may occur at any point in the coordinated entry process, i.e., after or concurrently with the *assessment, scoring, and prioritization* processes, as long as that eligibility information is not being used as part of prioritization and ranking, e.g. using documentation of a specific diagnosis or disability to rank a person. Projects or units may be legally permitted to limit eligibility, e.g., to persons with disabilities, through a Federal statute which requires that assistance be utilized for a specific population, e.g., the HOPWA program, through State or local permissions in instances where Federal funding is not used and Federal civil rights laws are not violated.

D. Non-Discrimination Requirements

The CoC must develop and operate a coordinated entry process that permits recipients of Federal and state funds to comply with applicable civil rights and fair housing laws and requirements. Recipients and subrecipients of CoC Program and ESG Program-funded projects must comply with the nondiscrimination and equal opportunity provisions of Federal civil rights laws as specified at 24 C.F.R. 5.105(a), including, but not limited to the following:

- Fair Housing Act prohibits discriminatory housing practices based on race, color, religion, sex, national origin, disability, or familial status;
- Section 504 of the Rehabilitation Act prohibits discrimination on the basis of disability under any program or activity receiving Federal financial assistance;
- Title VI of the Civil Rights Act prohibits discrimination on the basis of race, color or national origin under any program or activity receiving Federal financial assistance; and
- Title II of the Americans with Disabilities Act prohibits public entities, which includes state and local governments, and special purpose districts, from discriminating against individuals with disabilities in all their services, programs, and activities, which include housing, and housing-related services such as housing search and referral assistance. Title III of the Americans with Disabilities Act prohibits private entities that own, lease, and operate places of public accommodation, which include shelters, social service establishments, and other public accommodations providing housing, from discriminating on the basis of disability.

In addition, HUD's Equal Access Rule at 24 CFR 5.105(a)(2) prohibits discriminatory eligibility determinations in HUD-assisted or HUD-insured housing programs based on actual or perceived sexual orientation, gender identity, or marital status, including any projects funded by the CoC Program, ESG Program, and HOPWA Program. The CoC Program interim rule also contains a fair housing provision at 24 CFR 578.93. For ESG, see 24 CFR 576.407(a) and (b), and for HOPWA, see 24 CFR 574.603.

II. Requirements for a Coordinated Entry Process

A. The CoC Program interim rule establishes minimum requirements that all coordinated entry processes must meet.

Per the requirements at 24 CFR 578.7(a)(8) and the definition of a “centralized or coordinated assessment system” at 24 CFR 578.3, a CoC's coordinated entry process must:

1. Cover the entire geographic area claimed by the CoC;
2. Be easily accessed by individuals and families seeking housing or services;
3. Be well-advertised;
4. Include a comprehensive and standardized assessment tool;
5. Provide an initial, comprehensive assessment of individuals and families for housing and services; and,
6. Include a specific policy to guide the operation of the centralized or coordinated assessment system to address the needs of individuals and families who are fleeing, or

attempting to flee, domestic violence, dating violence, sexual assault, or stalking, but who are seeking shelter or services from non-victim specific providers.

This section also requires the coordinated entry process to comply with any additional requirements established by HUD through Notice. Section II.B. of this Notice establishes these additional requirements.

B. CoCs Must Incorporate Additional Requirements into Their Coordinated Entry Process

Each CoC must incorporate additional requirements into their written policies and procedures to ensure that its coordinated entry implementation includes each of the requirements described in this section:

1. **Full coverage.** Provisions at 24 CFR 578.3 require that a CoC's coordinated entry process cover the CoC's entire geographic area; however, 24 CFR 578.3 does not prohibit multiple CoCs from joining together and using the same coordinated entry process. Individual CoCs may only have one coordinated entry process covering their geographic area; however, for CoCs, such as Balance of State CoCs, whose geographic areas are very large, the process may establish referral zones within the geographic area designed to avoid forcing persons to travel or move long distances to be assessed or served. This Notice further establishes that CoCs that have joined together to use the same regional coordinated entry process must implement written policies and procedures that at a minimum describe the following:
 - a. the relationship of the CoC(s) geographic area(s) to the geographic area(s) covered by the coordinated entry process(es); and
 - b. how the requirements of ensuring access, standardizing assessments, and implementing uniform referral processes occur in situations where the CoC's geographic boundaries and the geographic boundaries of the coordinated entry process are different.
2. **Use of Standardized Access Points and Assessment Approaches.**
 - a. Unless otherwise provided in this Notice, the coordinated entry process must offer the same assessment approach at all access points and all access points must be usable by all people who may be experiencing homelessness or at risk of homelessness. The coordinated entry process may, but is not required to include separate access points and variations in assessment processes to the extent necessary to meet the needs of the following five populations:
 - (1) adults without children;
 - (2) adults accompanied by children;
 - (3) unaccompanied youth;

- (4) households fleeing domestic violence, dating violence, sexual assault, stalking, or other dangerous or life-threatening conditions (including human trafficking); and
- (5) persons at risk of homelessness. See II.B.8 for more information.

Variations for these five populations are permissible but not required.

- b. The CoC may not establish a separate access point and assessment process for veterans; however, a coordinated entry process may allow Veterans Administration (VA) partners to conduct assessment and make direct placements into homeless assistance programs, including those funded by the CoC and ESG programs, provided that the method for doing so is in collaboration between those VA partners and the CoC and that the method is included in the CoC's Coordinated Entry policies and procedures and the written standards for the affected programs.
- c. A CoC or recipient of federal funds may be required to offer some variation to the process, e.g., a different access point, as a reasonable accommodation for a person with disabilities. For example, a person with a mobility impairment may request a reasonable accommodation in order to complete the coordinated entry process at a different location.
- d. If determined necessary, variations in access and assessment approaches for the five populations listed in paragraph (a) may be used to remove population-specific barriers to accessing the coordinated entry process and to account for the different needs, vulnerabilities, and risk factors of the five populations in assessment processes and prioritization. Examples of variations could include the following:
 - (1) A dedicated access point for unaccompanied youth that provides a safe and supportive youth environment and that is located in a space easily accessible to and commonly frequented by youth to increase the likelihood that unaccompanied youth will access the coordinated entry process;
 - (2) An assessment tool used with unaccompanied youth that includes youth-friendly language to elicit a comparable answer to a similar but different question asked of adults over the age of 24;
 - (3) Assessment scoring criteria that weight the risk of immediate harm higher for households with young children when prioritizing persons for housing and services than for households without minor children;
 - (4) Assessment locations and information systems for people fleeing domestic violence that may include separate but comparable processes and databases in order to provide safety, security, and confidentiality; or
 - (5) Assessment scoring criteria that weight a single event of homelessness higher for pregnant women or families with children from the ages of 0 to

5 when prioritizing persons for housing and services than for individuals or families with older children.

- e. Variations in assessment locations and processes shall only be considered necessary for the five populations listed in paragraph a, if the CoC reasonably determines that the variations would facilitate access to the coordinated entry process and improve the quality of information gathered through the assessment.
 - f. CoCs must ensure that households who present at any access point, regardless of whether it is an access point dedicated to the population to which the household belongs, can easily access an appropriate assessment process that provides the CoC with enough information to make prioritization decisions about that household. Similarly, CoCs must ensure that households who are included in more than one of the five populations listed in paragraph a, e.g., a parenting unaccompanied youth who is fleeing domestic violence, can be served at all of the access points for which they qualify as a target population.
 - g. CoCs' written policies and procedures for coordinated entry must:
 - (1) Describe the standardized assessment process, including documentation of the criteria used for uniform decision-making across access points and staff. Criteria must reflect the prioritization process adopted to meet the requirements outlined in Section II.B.2. of this Notice. If the CoC is implementing different access points and assessment tools for the different populations listed above, written policies and procedures must separately document the criteria for uniform decision-making within each population for whom different access points and assessment processes are used.
 - (2) The CoC must have written policies concerning data collected through the assessment as described in Section II.B.12 "Privacy Protections." Additionally, data from the assessment may not be used to prioritize households for housing and services on a protected basis, such as on the basis of a diagnosis or particular disability. Note that determining eligibility is a different process than prioritization (see I.C.4.d for clarification).
3. **Use of Standardized Prioritization in the Referral Process.** The CoC must use the coordinated entry process to prioritize homeless persons within the CoC's geographic area for referral to housing and services. The prioritization policies must be documented in Coordinated Entry policies and procedures and must be consistent with CoC and ESG written standards established under 24 CFR 576.400(e) and 24 CFR 578(a)(9). These policies and procedures must be made publicly available and must be applied consistently throughout the CoC areas for all populations.

The assessment process described in Section II.B.3., including information gathered from assessment tools, case workers, and others working with households, must provide sufficient information to make prioritization decisions. CoCs' written policies and procedures must include the factors and assessment information with which prioritization decisions will be made for all homeless assistance, with caveats made in II.B.7. The CoC

should refer to [Notice CPD-016-11, Notice on Prioritizing Persons Experiencing Chronic Homelessness and Other Vulnerable Homeless Persons in Permanent Supportive Housing](#), or any subsequent notices that update or replace CPD-016-11 for detailed guidance on prioritizing Permanent Supportive Housing (PSH) beds. The prioritization process may use any combination of the following factors:

- a. significant challenges or functional impairments, including any physical, mental, developmental or behavioral health disabilities regardless of the type of disability, which require a significant level of support in order to maintain permanent housing (this factor focuses on the level of support needed and is not based on disability type);
- b. high utilization of crisis or emergency services to meet basic needs, including but not limited to emergency rooms, jails, and psychiatric facilities;
- c. the extent to which people, especially youth and children, are unsheltered;
- d. vulnerability to illness or death;
- e. risk of continued homelessness;
- f. vulnerability to victimization, including physical assault, trafficking or sex work; or
- g. other factors determined by the community that are based on severity of needs.

These factors are intended to help identify and prioritize homeless persons within the geographic area for access to housing and services based on severity of needs. CoCs are prohibited from using any assessment tool or the prioritization process, including the factors listed in items a. through g. or any other factors adopted by the community, if it would discriminate based on race, color, religion, national origin, sex, age, familial status, disability, type or amount of disability or disability-related services or supports required. In addition, CoCs are prohibited from discriminating based on actual or perceived sexual orientation, gender identity, or marital status.

Assessment tools might not produce the entire body of information necessary to determine a household's prioritization, either because of the nature of self-reporting, withheld information, or circumstances outside the scope of assessment questions that address one or more of the factors discussed above. For these reasons, it is important that case workers and others working with households have the opportunity to provide additional information through case conferencing or another method of case worker input. It is important to note, however, that only information relevant to factors listed in the coordinated entry written policies and procedures may be used to make prioritization decisions, and must be consistent with written standards established under 24 CFR 576.400(e) and 24 CFR 578.7(a)(9).

A community-wide list generated during the prioritization process, referred to variously as a "By Name List," "Active List," or "Master List," is not required, but can help communities effectively manage an accountable and transparent referral process. If a

community-wide list is used, CoCs must extend the same Homeless Management Information System (HMIS) data privacy and security protections prescribed by HUD in the HMIS Data and Technical Standards to “By Name List,” “Active List,” and “Master List” data. See III.E. for further recommendations on the maintenance of these lists.

In the event that two or more homeless households within the same geographic area are identically prioritized for referral to the next available unit, and each household is also eligible for referral to that unit, the CoC should refer the household that first presented for assistance in the next available unit. The CoC’s written policies and procedures must also include a process by which individuals and families may appeal coordinated entry decisions.

4. **Lowering Barriers.** CoCs must maintain Coordinated Entry written standards that prohibit the coordinated entry process from screening people out of the coordinated entry process due to perceived barriers related to housing or services, including, but not limited to, too little or no income, active or a history of substance use, domestic violence history, resistance to receiving services, the type or extent of disability-related services or supports that are needed, history of evictions or poor credit, lease violations or history of not being a leaseholder, or criminal record—with exceptions for state or local restrictions that prevent projects from serving people with certain convictions.
5. **Marketing.** CoCs’ written policies and procedures for the coordinated entry process must:
 - a. Include a strategy to ensure the coordinated entry process is available to all eligible persons regardless of race, color, national origin, religion, sex, age, familial status, disability, actual or perceived sexual orientation, gender identity, or marital status.
 - b. Ensure that all people in different populations and subpopulations in the CoC’s geographic area, including people experiencing chronic homelessness, veterans, families with children, youth, and survivors of domestic violence, have fair and equal access to the coordinated entry process, regardless of the location or method by which they access the system.
 - c. Document steps taken to ensure effective communication with individuals with disabilities. Recipients of federal funds and CoCs must provide appropriate auxiliary aids and services necessary to ensure effective communication, which includes ensuring that information is provided in appropriate accessible formats as needed, e.g., Braille, audio, large type, assistive listening devices, and sign language interpreters. Access points must be accessible to individuals with disabilities, including accessible physical locations for individuals who use wheelchairs, as well as people in the CoC who are least likely to access homeless assistance.
 - d. Take reasonable steps to ensure the coordinated entry process can be accessed by persons with Limited English Proficiency (LEP). HUD’s published Final Guidance to Federal Financial Assistance Recipients: Title VI Prohibition Against

National Origin Discrimination Affecting Limited English Proficient Persons (LEP Guidance) (72 FR 2732, published January 22, 2007) provides assistance and information regarding LEP obligations.

6. **Street Outreach.** Street outreach efforts funded under ESG or the CoC program must be linked to the coordinated entry process. Written policies and procedures must describe a process by which all participating street outreach staff, regardless of funding source, ensure that persons encountered by street outreach workers are offered the same standardized processes as persons assessed through site-based access points. CoCs may decide whether to incorporate the assessment process, in part or whole, into street outreach activities or separate the assessment process so that it is only conducted by assessment workers who are not part of street outreach efforts.
7. **Emergency services.** The coordinated entry process must allow emergency services, including all domestic violence and emergency services hotlines, drop-in service programs, and emergency shelters, including domestic violence shelters and other short term crisis residential programs, to operate with as few barriers to entry as possible. Additionally, persons must be able to access emergency services independent of the operating hours of the coordinated entry's intake and assessment processes. Written policies and procedures must:
 - a. clearly distinguish between the interventions that *will not* be prioritized based on severity of service need or vulnerability, such as entry to emergency shelter, allowing for an immediate crisis response, and those that *will* be prioritized, such as PSH. If emergency services are funded through the ESG Program, the project must follow the written standards required under 576.400(e)(3)(iv); and
 - b. document a process by which persons are ensured access to emergency services during hours when the coordinated entry's intake and assessment processes are not operating and how they will be connected, as necessary, to coordinated entry as soon as the intake and assessment processes are operating.
8. **Homelessness prevention services.** Persons must be able to access homelessness prevention services funded with ESG Program funds through the coordinated entry process. The coordinated entry process may include separate access point(s) for homelessness prevention so that people at risk of homelessness can receive urgent services when and where they are needed, e.g. on-site at a courthouse or hospital, provided that the separate access point(s) meet all requirements in II.B.2 of this Notice. Written policies and procedures must describe the process by which persons will be prioritized for referrals to homelessness prevention services. To the extent that other homelessness prevention programs participate in the coordinated entry process, the policies and procedures must also describe the process by which persons will be prioritized for referrals to these programs.
9. **Referrals to participating projects.** The coordinated entry process must implement a uniform and coordinated referral process for all beds, units, and services available at participating projects. Written policies and procedures must document:

- a. the uniform referral process, including standardized criteria by which a participating project may justify rejecting a referral; and
 - b. in the rare instances of rejection, the protocol that participating projects must follow to reject a referral, as well as the protocol the coordinated entry process must follow to connect the rejected household with a new project.
10. **Safety planning.** The ESG and CoC program rules provide several safeguards and exceptions to using coordinated entry for victims of domestic violence, dating violence, sexual assault and stalking. The ESG rule does not require ESG-funded victim service providers to use the CoC's coordinated entry process, but allows them to do so. The CoC program rule does not require CoC-funded victim service providers to use the CoC's coordinated entry process, if they use an alternative coordinated entry for victim service providers in the area that meets HUD's minimum coordinated entry requirements. Finally, section 578.7(a)(8) of the CoC program rule requires the CoC to develop a specific coordinated entry policy to address the needs of individuals and families who are fleeing, or attempting to flee, domestic violence, dating violence, sexual assault, or stalking, but who are seeking shelter or services from non-victim service providers.

This Notice further establishes that the coordinated entry process must not jeopardize the safety of the individuals and families seeking assistance. The written policies and procedures for coordinated entry must include protocols that ensure at a minimum that people fleeing or attempting to flee domestic violence and victims of trafficking have safe and confidential access to the coordinated entry process and victim services, including access to the comparable process used by victim service providers, as applicable, and immediate access to emergency services such as domestic violence hotlines and shelters.

11. **Participant autonomy.** The coordinated entry process must allow participants autonomy to freely refuse to answer assessment questions and to refuse housing and service options without retribution or limiting their access to assistance. Written policies and procedures must specify the conditions for participants to maintain their place in coordinated entry prioritized list when the participant rejects options. See Section III.A. for further guidance on ensuring participant choice in the assessment and referral process.
12. **Privacy protections.** The coordinated entry process must ensure adequate privacy protections of all participant information.
- a. CoCs must include written policies and procedures for obtaining participant consent to share and store participant information for purposes of assessing and referring participants through the coordinated entry process.
 - b. Participants must also be free to decide what information they provide during the assessment process.
 - c. CoCs are prohibited from denying assessment or services to a participant if the participant refuses to provide certain pieces of information, unless the information

is necessary to establish or document program eligibility per the applicable program regulation.

- d. CoCs are also prohibited from denying services to participants if the participant refuses to allow their data to be shared unless Federal statute requires collection, use, storage, and reporting of a participant's personally identifiable information (PII) as a condition of program participation.
 - e. Participants may not be denied access to the coordinated entry process on the basis that the participant is or has been a victim of domestic violence, dating violence, sexual assault or stalking. Further, section 578.103(b) of the CoC program rule requires that records containing PII are kept secure and confidential and the address of any family violence project not be made public.
 - f. The assessment and prioritization process cannot require disclosure of specific disabilities or diagnoses. Specific diagnosis or disability information may only be obtained for purposes of determining program eligibility to make appropriate referrals. Further requirements on the collection of disability information for the purposes of prioritization is described in II.B.3(a) of this Notice.
 - g. Participants must be informed of the ability to file a nondiscrimination complaint.
13. **Data security protections.** When a community uses a system other than HMIS to record information from a coordinated entry process, it must meet HUD's requirements in 24 CFR 578.7(a)(8) and Section II.A and be compliant with HUD's HMIS Privacy and Security Notice or any future regulations that update the requirements therein. Communities that do use HMIS as part of their coordinated entry process should include specific policies and procedures to allow for participation by victim service providers that are prohibited by law from entering personally identifying information in HMIS.
14. **Assessor training.** The CoC must provide training protocols and at least one annual training opportunity, which may be in-person, a live or recorded online session, or a self-administered training, to participating staff at organizations that serve as access points or otherwise conduct assessments.
- a. The purpose of the training is to provide all staff administering assessments with access to materials that clearly describe the methods by which assessments are to be conducted with fidelity to the CoC's coordinated entry process, including its written policies and procedures and any adopted variations described in Section II.B.2.
 - b. The protocols must include the requirements for prioritization and the criteria for uniform decision-making and referrals outlined in Section II of this Notice. CoCs must distribute training protocols and offer at least one training to all participating staff within 12 months of the publication of this Notice.
 - c. The CoC must update and distribute training protocols at least annually.

15. **Ongoing planning and stakeholder consultation.** The CoC must facilitate ongoing planning and stakeholder consultation concerning the implementation of coordinated entry.

- a. CoCs must solicit feedback at least annually from participating projects and from households that participated in coordinated entry during that time period. Solicitations must address the quality and effectiveness of the entire coordinated entry experience for both participating projects and households, and appropriate feedback methodologies include the following:
 - i. Surveys designed to reach either the entire population or a representative sample of participating providers and households;
 - ii. Focus groups of five or more participants that approximate the diversity of the participating providers and households; and
 - iii. Individual interviews with participating providers and enough participants to approximate the diversity of participating households.

CoCs may use any combination of these methods and must use the feedback that they receive to make necessary updates to their coordinated entry process written policies and procedures.

- b. The participants selected by the CoC to participate in the evaluation must include individuals and families currently engaged in the coordinated entry process or who have been referred to housing through the coordinated entry process in the last year.
- c. Written policies and procedures must describe the frequency and method by which the evaluation will be conducted, including how project participants will be selected to provide feedback, and must describe a process by which the evaluation is used to implement updates to existing policies and procedures.

III. Additional Policy Considerations

In addition to the requirements established in Section II. of this Notice, HUD strongly encourages CoCs to include the following elements as part of their coordinated entry process. This section contains recommendations and not requirements.

A. Incorporating a Person-Centered Approach

Written policies and procedures should include the following 6 principles that reinforce a person-centered approach throughout the coordinated entry process and have been observed in successful implementations of coordinated entry.

1. *Person-centered assessments.* CoCs should include assessments into coordinated entry that are based in part on participants' strengths, goals, risks, and protective factors.

2. *Accessible tools and processes.* CoCs should include tools and processes into coordinated entry that are easily understood by participants being assessed and referred, in addition to using required accessible formats for persons with disabilities and the requirement in II.B.5(c) of this Notice.
3. *Sensitivity to lived experiences.* CoCs should include sensitivity to participants' lived experiences in every aspect of coordinated entry, including the development of assessment tools and delivery protocols that are trauma informed, minimize risk and harm, and address potential psychological impacts.
4. *Participant choice.* CoCs should include participants' choices in coordinated entry process decisions such as location and type of housing, level and type of services, and other program characteristics, as well as assessment processes that provide options and recommendations that guide and inform participant choice, as opposed to rigid decisions about what individuals or families need.
5. *Clear referral expectations.* CoCs should include referral protocols into coordinated entry that ensure that participants will be able to easily understand to which program they are being referred, what the program expects of them, what they can expect of the program, and evidence of the program's rate of success.
6. *Commitment to referral success.* CoCs should include a commitment to successfully completing the referral process once a referral decision has been made through coordinated entry, including supporting the safe transition of participants from an access point or emergency shelter to housing, and supporting participants in identifying and accessing an alternate suitable project in the rare instance of an eligible participant being rejected by a participating project.

B. Incorporating Cultural and Linguistic Competencies

All staff administering assessments should use culturally and linguistically competent practices, and CoCs are strongly encouraged to incorporate cultural and linguistic competency training into the required annual training protocols for participating projects and staff members.⁴

Assessments should include culturally and linguistically competent questions for all persons that reduce cultural and linguistic barriers to housing and services for special populations, including immigrants, refugees, and other first generation populations; youth; individuals with disabilities; and lesbian, gay, bisexual, transgender, queer or questioning (LGBTQ) persons.⁵ HUD is encouraging CoCs to train participating projects that receive referrals in culturally and

⁴See the following materials to learn more about using culturally and linguistically competent practices:

<http://youth.gov/announcements/build-linguistic-and-cultural-competence-your-program>

<http://nccc.georgetown.edu/foundations/frameworks.html#ccdefinition>

<http://www.tapartnership.org/COP/CLC/>

⁵ Cultural competency and recovery within diverse populations; Ida, D. J, Psychiatric Rehabilitation Journal, Vol 31(1), 2007, 49-53.

linguistically competent practices so that appropriate resources available to participants are as comprehensive as possible.

C. Assessment Tools and Processes

1. CoCs should develop or select standardized tools to facilitate their standardized assessment process that gather only the information necessary to determine the severity of need and eligibility for housing and related services, and that can provide meaningful recommendations to persons being assessed.
2. The assessment component of the coordinated entry process may be implemented in phases in order to capture information on an as-needed basis as participants navigate the process, recognizing that trauma-informed approaches are necessary throughout these phases. For example, assessment phases may include the following:
 - a. screening for diversion or prevention;
 - b. assessing shelter and other emergency needs;
 - c. identifying housing resources and barriers; and
 - d. evaluating vulnerability to prioritize for assistance.

Assessments conducted in different phases should build on each other and limit the frequency with which a participant must repeat a personal story so as to reduce trauma and improve system efficiency. Information collection related to prioritization ranking and program eligibility may also occur concurrently with these different phases, even though assessment generally occurs before referral. Once connected to housing and services, project staff may conduct more sophisticated assessments to evaluate a participant's need for specialized services or resources. The phased assessment process used during coordinated entry is not intended to replace those more specialized assessments but rather to connect participants to the appropriate housing solution as quickly as possible. Similarly, the assessment process does not preclude the use of complementary assessments designed to support access to mainstream services that are made available during assessment or otherwise conveniently accessed.

D. Incorporating Mainstream Services

The CoC should include relevant mainstream service providers in the following activities: identifying people experiencing or at risk of experiencing homelessness; facilitating referrals to and from the coordinated entry process; aligning prioritization criteria where applicable; coordinating services and assistance; and conducting activities related to continual process improvement. Written policies and procedures should describe how each participating mainstream housing and service provider will participate, including, at a minimum, the process by which referrals will be made and received. Examples of mainstream housing and service providers include Public Housing Agencies; affordable housing operators; VA Medical Centers; public child welfare agencies; providers of mental, physical or behavioral health services; schools; early childhood care and education providers; out of school time providers; hospitals; correctional facilities; and workforce investment programs.

E. Using HMIS and Other Data Collection Systems

HUD does not require CoCs to use their HMIS as part of their coordinated entry process. However, many communities recognize the benefit of using this option to complement their mandatory HMIS recordkeeping and have incorporated HMIS into their coordinated entry. HUD encourages communities to use HMIS, but recognizes that other systems might be better or more quickly able to meet the community's coordinated entry needs. HUD expects that, even when using a data management system other than HMIS, the CoC works toward being able to use HMIS for coordinated entry or toward having a system that seamlessly shares data with HMIS. See requirements for data security for any system in II.B.12 of this Notice.

Further, communities maintaining a "By-Name-List," "Active List," or "Master List" outside the HMIS infrastructure will necessarily be managing client-level data. These data contain personally identifiable information and have the potential to cause harm to clients if data were inappropriately disclosed or unintentionally breached. CoCs should identify and implement data handling protocols to protect the confidentiality of personal information while allowing for reasonable, responsible, and limited uses and disclosures of data.

F. Addressing Waiting Lists

Prolonged stays on waiting lists for housing resources can have a negative impact on the well-being of participants and reduce the overall performance of a community's homeless assistance system. CoCs should keep the time spent on their single, prioritized list for housing resources at 60 days or less. If a community cannot offer a housing resource to every prioritized household experiencing homelessness in 60 days or less, then the CoC should tighten its prioritization standards in order to more precisely differentiate and identify for resources those households with the most needs and highest vulnerabilities. This will mean that CoCs will need to update their written standards appropriately and that some households that are eligible for homeless assistance will no longer be placed on a prioritized list for housing. In these instances, the CoC will need to develop strong relationships with providers of mainstream resources in order to offer these households as much assistance as possible to help resolve their homelessness outside of the dedicated homeless assistance system.

IV. Questions Regarding this Notice

Please submit questions regarding this Notice to HUD's Ask A Question at www.hudexchange.info/get-assistance/my-question.

Coordinated Entry News - Toolkit Release

Texas Homeless Network <sophia@thn.org>
Reply-To: sophia@thn.org
To: sophia@thn.org

Wed, Mar 15, 2017 at 5:47 PM



Coordinated Entry News

Coordinated Entry is an opportunity to streamline access, assessment, and referral processes for housing and other services across agencies in a community. Coordinated Entry has proven to be a more efficient and effective process that places the client at the center of the system rather than programs. Based on a household's unique needs, a household is matched to an appropriate provider who then works with the household to identify its strengths and resources; goals are set to move the household toward self-sufficiency.

If you have any questions, please contact Sophia Checa, the Systems Change Coordinator, at sophia@thn.org.

New Coordinated Entry Standards from HUD

After two years of waiting anxiously, HUD released new Coordinated Entry Standards, a follow up to the [2014 Coordinated Entry Policy Brief](#), on January 23. [Notice CPD-17-01](#) provides us with very important information:

1) There is now a deadline: January 23, 2018. What does this mean? Well, communities that have implemented Coordinated Entry Systems must edit their systems and policies to adhere to the new requirements OR, which will be the case in communities in the TX BoS CoC, implement Coordinated Entry Systems according to the new standards.

2) The notice also mentioned those requirements that must be included in our Coordinated Entry Written Standards.

*** Register Now ***

HUD released [registration links and instructions](#) for the webinars on the new Coordinated Entry Standards (mentioned in the blurb to the left). The purpose of this webinar is to, "connect the dots across all of HUD's Coordinated Entry requirements and recommendations, help communities understand the requirements, and what steps a community should consider to evaluate and ensure compliance." Their recommended audience is "...staff and programs working on coordinated entry design and implementation, as well as projects required to participate in coordinated process."

It appears they are holding the same webinar over the course of three dates. The following dates are hyperlinked:

I encourage everyone, especially CoC and ESG funded-projects, to read the notice; it'll give you an idea of what to expect from us.

- Monday, March 20, 2017 1:00–2:30 PM EDT/ 12:00-1:30 PM CDT
- Wednesday, March 22, 2017 2:00–3:30 PM EDT/ 1:00-2:30 CDT
- Tuesday, March 28, 2017 1:00–2:30 PM EDT/ 12:00-1:30 PM CDT

Hooray! It's here!

The Systems Change Toolkit can be found [here](#). The Toolkit is designed to support a facilitator or community leader who will guide the community through the systems change process. The set up of the meetings is intentional. Ultimately, it is to make a case for the development of a Housing Crisis Response System, of which Coordinated Entry is one piece.



We recommend that everyone read the document titled Toolkit-Version-1, which provides an overview of the systems change process. We will be updating the meeting materials over the course of the next few weeks. We do not recommend that you print those materials en masse right now.

The first step of the systems change process is the designation of a leadership structure - the LHC, a sub-committee of the LHC, or other entity - and the facilitator.

We will be holding meeting prep webinars to support the facilitator for the systems change process from 2:00-3:00pm every week starting April 20. [Here](#) is the registration link.

TX BoS CoC Coordinated Entry Written Standards

HUD requires that Continuum of Care develop Written Standards for Coordinated Entry. Written Standards are requirements, i.e., standards, for Coordinated Entry that are contained in a document, i.e., written. Once the Coordinated Entry Written Standards are approved by the TX BoS CoC Board local systems must adhere to these requirements in order to be considered operational in the TX BoS CoC. I have handed over the draft incorporating the new standards from Notice CPD-17-01 for review. The final draft will be released in early April.

Coordinated Entry Homeless Management Information System Workflow

The new Coordinated Entry Workflow was synced in the live site on Friday, February 24th. Victoria, one of our Homeless Management Information System (HMIS) superstars, and I have been working on maximizing the functionality of HMIS for the purposes of the CE Workflow. The old workflow should still be accessible.

The new CE Workflow will not be accessible until communities establish their Coordinated Entry Systems, ideally after engaging in systems change. A Coordinated Entry System proposal must be submitted TX BoS CoC for approval. Once the CES is approved, agencies must complete the required HMIS trainings specific to CE in order to be able to use the workflow.

Recommended Resources:

1. Check out this great [video](#) from Community Solutions regarding complex social challenges.

2. Coordinated entry, done right, involves a re-examination of a community's entire homelessness system. This webinar from the National Alliance to End Homelessness provides a comprehensive overview of [Coordinated Entry and Systems Change](#).
3. Film maker Gwen Haworth made a [series of amazing videos](#) about Housing First for Rain City Housing. They very clearly show that Housing First is not housing only!
4. [A Systemic Approach to Ending Homelessness](#) is an eight page article about the analysis that went in to developing a system in Calhoun County, Michigan, that effectively and efficiently addresses chronic homelessness.

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