



HEART TO HOME COORDINATED ENTRY ACCESS POINT TRAINING

Heart of Texas Homeless Coalition

WHAT IS COORDINATED ENTRY?

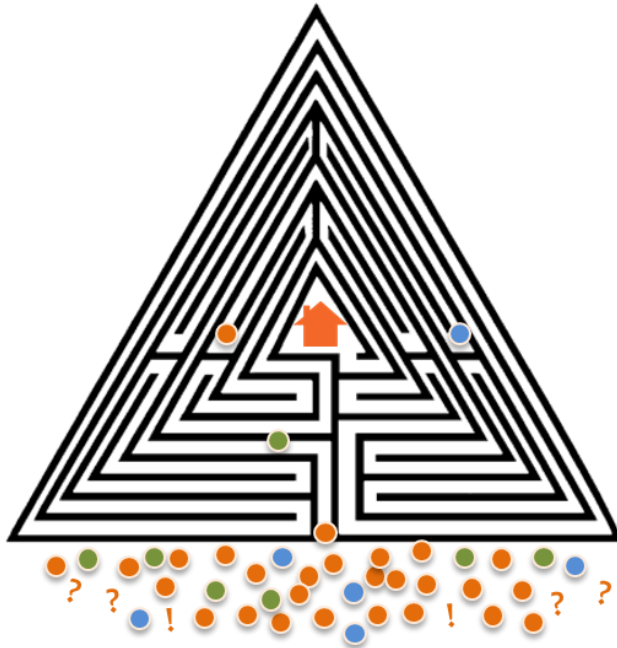
- “A centralized process designed to coordinate program participant intake, assessment, and provision of referrals.”
- “A centralized or coordinated system that covers the geographic area, is easily accessed by individuals and families seeking housing or services, is well advertised and includes a comprehensive and standardized assessment.”
- CE is not a PIT count, therefore, only those ready for assistance should be assessed and put on the Prioritization List.

WHY COORDINATED ENTRY?

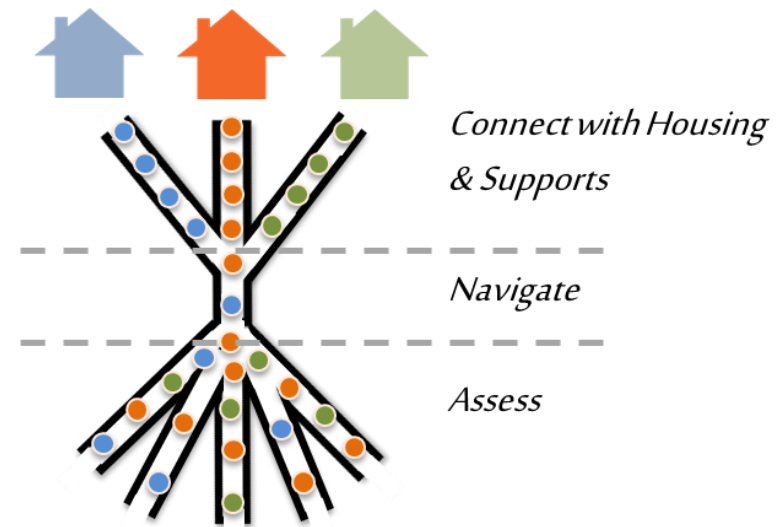
- Divert people away from the system who can solve their own homelessness.
- Quickly move people from the street to permanent housing.
- Create a defined and effective role for emergency shelters and transitional housing.
- Target the correct housing intervention to the correct household, particularly for those with high acuity and high need.
- Create an environment of less time, effort, and frustration on the part of case managers by targeting efforts.
- Greatly reduce the length of homelessness by moving people quickly into the appropriate housing.
- Greatly increase the possibility of housing stability by targeting the appropriate housing intervention to the corresponding needs.
- End homelessness across communities, versus program by program.

COORDINATED ENTRY SYSTEM IN CONTEXT

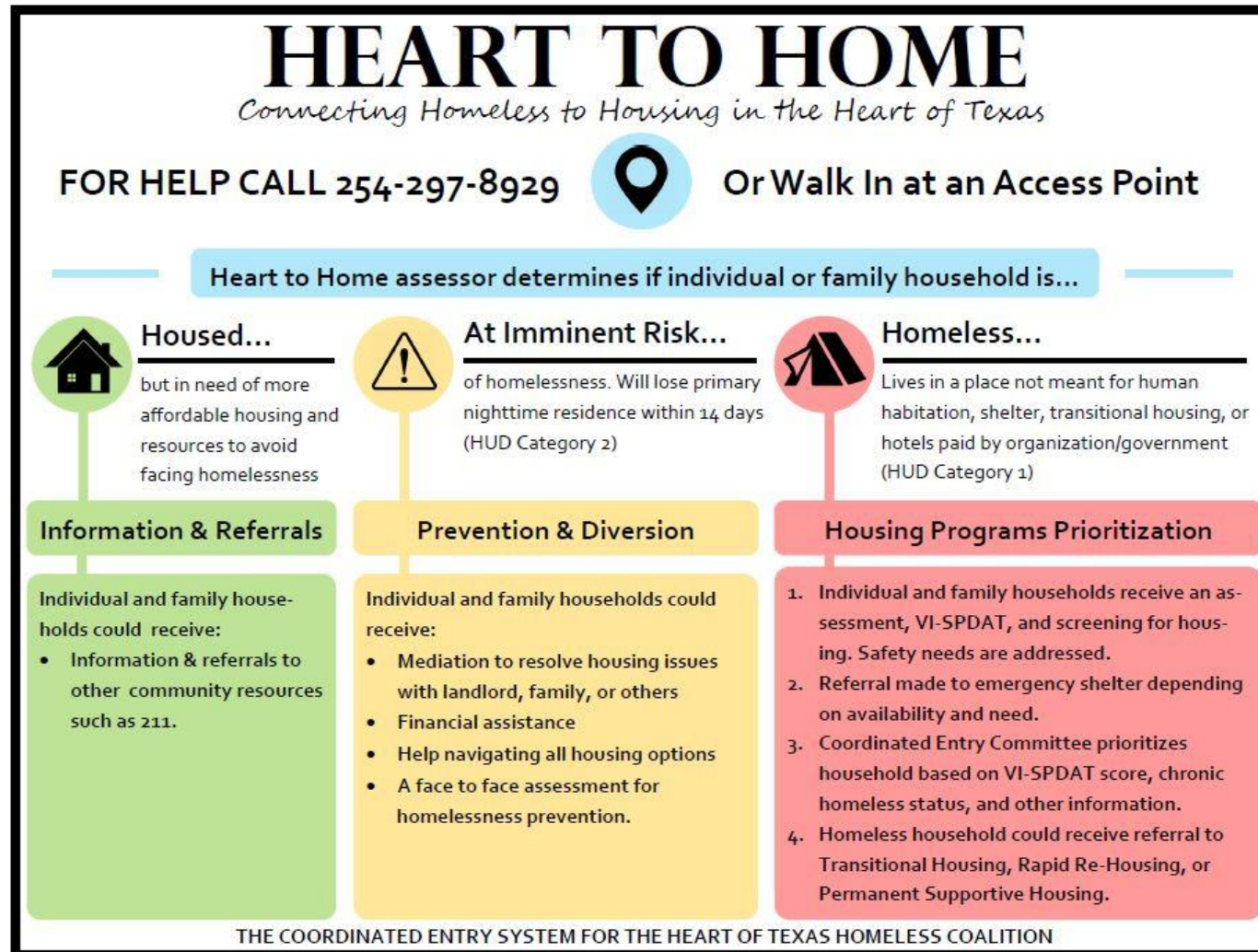
Without CES



With CES



HEART TO HOME OUR COORDINATED ENTRY



ACCESS POINTS & EMERGENCY SERVICES

Access Points

Call 254-297-8929 or Walk In to be Assessed for Housing

The Salvation Army
Red Shield Lodge & Community Kitchen
300 Webster Avenue in Waco
Monday-Friday 9am-5pm

Meyer Center (Mission Waco)
1226 Washington Avenue in Waco
Monday-Thursday 9am-10:30am

Resources

Domestic Violence

Family Abuse Center
Call 1-800-283-8401

Youth (under 18)

Waco ISD Homeless Outreach Services
254-755-9433

The Cove (Drop-in Center)
Mon-Thurs 4-8pm for Waco ISD 9-12th grade students
254-224-6095

Central Texas Youth Services
(Shelter & Drop-in Center)
Waco Office 254-217-1967

Veterans

VA Homeless Programs 254-297-5222

Endeavors 254-218-4455

Emergency Shelter

My Brother's Keeper (Mission Waco)
Shelter for Individual Men & Women ages 18+
Check in at 1217 Mary St. in Waco, 6:30pm-8:30pm
254-296-9866 ext. 200

The Salvation Army of Waco
Red Shield Men's Lodge (Men Only)
300 Webster Ave. in Waco, 254-757-1641
Sally's House (Women & Families)
Check in at 4721 W. Waco Dr. in Waco, 254-756-7271

Homeless Outreach

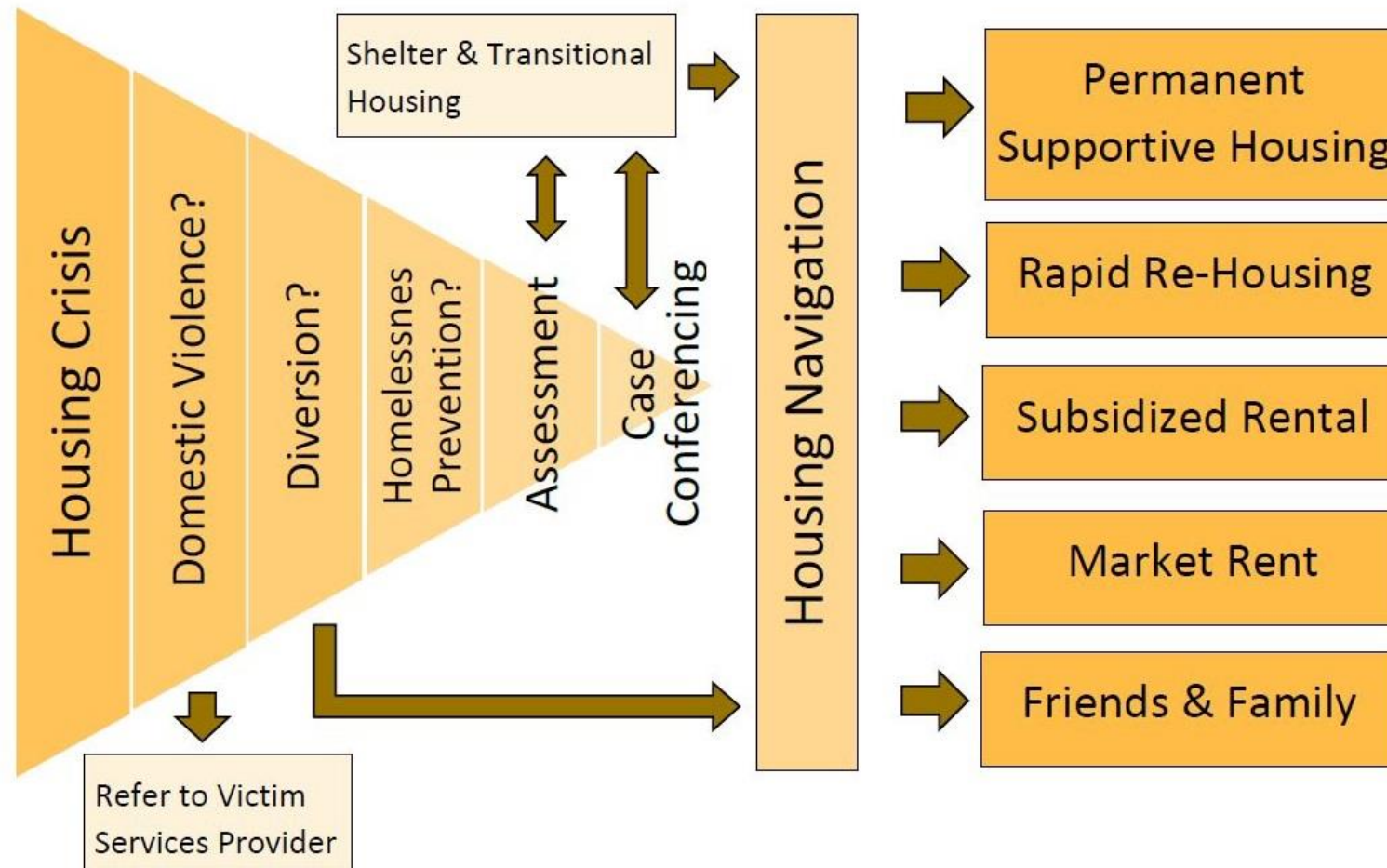
PATH Team
1200 Clifton St. in Waco, 254-297-7734

Community Resources

Call 211
www.heartoftexashomeless.org

HEART TO HOME SYSTEM FLOW

Heart to Home COORDINATED ENTRY SYSTEM



STEPS OF ENGAGEMENT

1. At the Access Points, assessors will determine if the household being served would be best served through a Victim Service Provider, Homelessness Prevention Assessment and Services, Diversion Assistance, or Assessment for Housing.
2. Assessor will obtain an HMIS Release of Information and Consent (or comparable document for Victim Service Providers).
3. Assessor will conduct a Coordinated Entry Assessment, utilizing the VI-SPDAT as the triage tool, to screen households experiencing homelessness or at imminent risk of homelessness.
4. After being assessed, participants will be put on the Prioritization List and matched to housing programs (as openings become available within the Continuum of Care region) through case conferencing conducted by the Coordinated Entry Committee.
5. Participants will be contacted by the housing program if they are found eligible for entry into the housing program they were referred to via the Coordinated Entry process.

STEP ONE

At the Access Points, assessors will determine if the household being served would be best served through a Victim Service Provider, Homelessness Prevention Assessment and Services, Diversion Assistance, or Assessment for Housing.



VSP OR CE SAMPLE SCRIPT

First, determine if the household would be best served by a Victim Service Provider by using an introduction such as:

"One thing I'd like to do before we begin is see if you'd like information about our local victim services provider? Have you experienced domestic violence? For instance, has a partner threatened to hurt you, or made you afraid, or hit, kicked, or otherwise physically hurt you or made you do something sexual you did not want to? If so, are you currently fleeing domestic violence, dating violence, sexual violence, or stalking? It might be helpful for you to talk to someone confidentially. Our local victim services provider can help you fill out this survey, the answers you give will be kept confidential and not become part of the shared database. Would you like to speak to someone at that program, and perhaps fill out the survey with them, or would you like to be assisted by non-victim services through Coordinated Entry?"

If the household would be best served through a Victim Service Provider, have the household call Family Abuse Center at 1-800-283-8401.

DIVERSION VIDEO

The next step is determining if the household can be served through diversion.

Here is a video that provides information on diversion:

<https://vimeo.com/69965862>

DIVERSION

Whenever possible, we want to divert households out of the homeless crisis response system. Below are some questions related to diversion:

- **Are you safe?**
- **Why do you think you need shelter?**
- **Where did you sleep last night?** *If they slept somewhere safe where they could potentially stay again, this might mean they are good candidates for diversion.*
- **Do you have any money you can use for temporary accommodation?**
- **What other options do you have for the next few days or weeks?** *Even if there is an option outside of shelter that is only available for a very short time, it is worth exploring if this housing resource can be used.*

DIVERSION

- **Do you have any family or friends you can stay with, even temporarily, that would be safe?**
- **(If staying in someone else's housing) What issues exist with you remaining in your current housing situation? Can those issues be resolved with financial assistance, case management, etc?** *If the issues can be solved with case management, mediation, or financial assistance (or all of the above) diversion is a good option.*
- **(If coming from their own unit) Is it possible/safe to stay in your current housing unit? What resources would you need to do that (financial assistance, case management, mediation, transportation, etc)?** *If the individual or family could stay in their current housing with some assistance, system should focus on a quick prevention-oriented solution that will keep the individual or family in their unit.*

STEP TWO

Assessor will obtain an Consent and HMIS Release of Information (or comparable document for Victim Service Providers).



NEXT STEPS

- If the person is ready for assistance (housing or homelessness prevention) and is not being referred to a Victim Services Provider or they are not a candidate for Diversion, proceed with obtaining consent to conduct the assessment by using the opening script and completing an ROI.
- If the person is housed and is in need of homelessness prevention assistance, you will proceed with the assessment in HMIS and conduct the Prevention VI-SPDAT.
- If the person is literally homeless and is ready for housing assistance, you will proceed with the assessment in HMIS and conduct the VI-SPDAT 2.0.

SAMPLE SCRIPT

If the household has been determined eligible for Coordinated Entry assessment, then use an introduction at the beginning of the assessment process such as:

“My name is [interviewer name] and I am conducting this assessment on behalf of the Heart to Home Coordinated Entry System. I know you are in crisis, and I want to assist you in connecting to resources that can provide solutions. Would you like to start this process? It may take 15 minutes. To begin, I have a short survey that I would like to complete with you called the Vulnerability Index and Service Prioritization Decision Assistance Tool (VI-SPDAT). The answers will help us determine how we can go about assisting you. Most questions only require a Yes or No. Some questions require a one word answer. All I need from you is to be honest in responding, so there isn’t a “correct” or preferred answer that you need to provide, or information you need to withhold. The more accurate your responses, the better suited we are to match you with the most appropriate services. You have the right to refuse to answer any of the questions. Understand that I respect your right to privacy and am committed to maintaining your privacy as I am allowed. If you experience discomfort during our interview, we can take a break or not answer those questions. If you do not understand a question, let me know and I would be happy to clarify.

SAMPLE SCRIPT CONT.

The information collected goes into the Homeless Management Information System. Other providers conducting this assessment, and the housing providers connected to the Coordinated Entry System, such as Heart of Texas Region MHMR, Mission Waco, and The Salvation Army, will have access to the information so that you do not need to complete the assessment multiple times. The primary benefit to doing the assessment is that it will help give you and me a better sense of your needs, determine what resources I can refer you to. You will be put on a prioritization list, which is used by Heart to Home partners to fill openings in housing assistance programs with those most in need. Please note that the Waco Housing Authority, who administers Section 8 and Public Housing, is a separate provider that will require an additional separate application. If you have a case manager who is helping you apply for housing, you should still work with them once you have finished this assessment. If you do not have a case manager, and would like to be referred to one, I can help you with that at the end of the assessment. Would you like to continue?"

RELEASE OF INFORMATION & HIPAA DISCLOSURE FORM

- Prior to completing the VI-SPDAT, an HMIS Release of Information will need to be completed.
- If you need copies of the ROI or VI-SPDAT tools, they can be found at <http://www.heartoftexashomeless.org/coordinated-entry-tool-box/>.
- If the household refuses provide consent, a VI-SPDAT assessment cannot be conducted. Households who are not able to complete a VI-SPDAT may be referred to the Coordinated Entry Committee for Case Conferencing.

STEP THREE

Assessor will conduct a Coordinated Entry Assessment, utilizing the VI-SPDAT as the triage tool, to screen households experiencing homelessness or at imminent risk of homelessness.



GETTING STARTED

- During Step 3, you conducting the Coordinated Entry Assessment in HMIS.
- If you are conducting this step on paper, you will need to go back after the engagement and enter the assessment questions and VI-SPDAT into HMIS within 1 business day for inclusion on the Prioritization List.
- Remember to store copies of any documents the household presented at the assessment (proof of income, verification of homelessness, etc.) into HMIS. Paper copies of assessments can also be uploaded into the client record on HMIS.
- Training Video on the CE Workflow in HMIS:
<https://vimeo.com/269066876>

HOMELESSNESS PREVENTION ASSESSMENT

- Determine if the household would be best served through Homelessness Prevention. Are they housed? Are they at risk of eviction? If so, conduct the Prevention VI-SPDAT and refer the household to The Salvation Army's Social Services Office.
- The Salvation Army will determine if the household is eligible to be served through their ESG Homelessness Prevention Projects.
- If the household is determined not eligible, or if there is a lack of funding available, the household will be referred to other community Homelessness Prevention services provided by community and faith-based providers.

ASSESSING THOSE EXPERIENCING LITERAL HOMELESSNESS

- If the individual being assessed stayed the previous night in a place not meant for human habitation, in an emergency shelter, or in a transitional housing program, proceed with the VI-SPDAT 2.0 assessment.
- VI-SPDAT 2.0 US Singles Training Video:
<https://vimeo.com/126548635>

CONCLUDING THE ENGAGEMENT

After conducting the assessment with the household:

- Thank the participant for their time to complete the assessment.
- Ask if they have any questions.
- Assess the participant for any discomfort or symptoms of trauma concluding the interview and offer referral and options for support as needed.
- If the participant has a case manager, they should be encouraged to continue to engage with their existing case management supports.
- If the participant has no case manager, staff can provide referrals to resources currently available within the community.
- Inform the participant that they will be placed on a Prioritization List for housing resources as they become available and ask if the participant is interested in specific forms of housing assistance, as this can be shared during case conferencing and documented in HMIS.



COMMUNITY RESOURCES

Visit The Heart of Texas Homeless Coalition
Community Resources Page at
<http://www.heartoftexashomeless.org> or call 211
for community resources in the Heart of Texas Region.

CE DO'S AND DON'TS

Dos

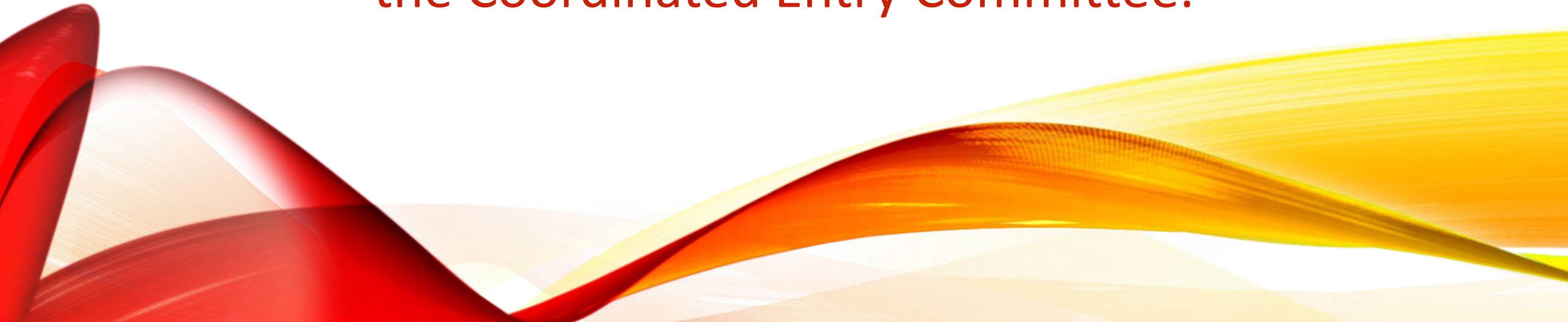
- Explain that HOTHC Coordinated Entry is a collaboration of service providers working to streamline services to help connect homeless individuals to available resources and appropriate housing.
- Obtain consent and sign releases prior to conducting the survey.
- Reiterate the importance of honest responses to assessment questions.
- Advise household to give the best contact information possible.
- Encourage households to continue seeking housing opportunities and to connect with their case managers.

DON'Ts

- Do not do a VI-SPDAT 2.0 if the household is not literally homeless, use the PR-VI-SPDAT.
- Do not mention that households will receive a score after participating in a VI-SPDAT, and don't give the score.
- Do not guarantee housing to a household or give them a timeframe in which they will be housed.
- Do not imply or tell the household that they will be eligible for your (or any other) program.
- Do not discuss program specifics (i.e. RRH can pay for a year).

STEP FOUR

After being assessed, participants will be put on the Prioritization List and matched to housing programs (as openings become available within the Continuum of Care region) through case conferencing conducted by the Coordinated Entry Committee.



PRIORITIZATION LIST

- Send referral to Coordinated Entry within HMIS to add the household onto the Prioritization List.
- Prioritization will be based on the score obtained from the VI-SPDAT and the Order of Priority.

Intervention Recommendation	VI-SPDAT Prescreen Score for Household
Permanent Supportive Housing	8+
Rapid Re-Housing	4-7
Diversion	0-3



ORDER OF PRIORITY

1. CH (longest episodic homelessness) + Highest Acuity (most severe service needs) + Disability
2. Highest Acuity (most severe service needs) + Longest Time Homeless (Non CH) + Disability
3. Acuity Score (not the most severe service needs) + Homeless + Disability
4. Exiting TH (those who were homeless prior to entry) + Disability

CASE CONFERENCING & PRIORITIZATION LIST

- Case Conferencing is required to occur a minimum of 1-2 x/month, or more if needed, by the CE Committee.
- Case Conferencing is currently being held every Wednesday at 3pm. Go to <https://join.me/heartoftexashomelesscoalition> to join in the conversation.
- The Prioritization List is emailed out at least a day before Case Conferencing to members of the CE Committee. It is password protected. If you need the password, call Nicole at 750-5777.
- Households will be referred through HMIS to fill openings in programs using the Prioritization List.

STEP FIVE

Participants will be contacted by the housing program if they are found eligible for entry into the housing program they were referred to via the Coordinated Entry process.



REFERRAL TO PROGRAMS

- Providers review the Prioritization List to identify households available to fill openings in programs.
- Providers are responsible for ensuring that referred households meet any eligibility requirements.
- Once a provider houses a participant on the list, they need to go into HMIS and close the CE referral.
- If referral is denied, household will be placed back on the Prioritization List and discussed at Case Conferencing for reassignment.

ADDITIONAL TRAINING AND RESOURCES



A TRAUMA-INFORMED APPROACH

- A program, organization, or system that is trauma-informed:

1. Realizes the widespread impact of trauma and understands potential paths for recovery;
2. Recognizes the signs and symptoms of trauma in clients, families, staff, and others involved with the system;
3. Responds by fully integrating knowledge about trauma into policies, procedures, and practices; and
4. Seeks to actively resist re-traumatization.

- Key principles of a trauma-informed approach:

1. Safety
2. Trustworthiness and Transparency
3. Peer support
4. Collaboration and mutuality
5. Empowerment, voice and choice
6. Cultural, Historical, and Gender Issues

- Remember to:

- Listen
- Be Open
- Have Respect

CULTURAL & LINGUISTIC COMPETENCY

A set of congruent behaviors, attitudes, and policies that come together in a system, agency, or among professionals that enables effective work in cross-cultural situations. “Culture” refers to integrated patterns of human behavior that include the language, thoughts, communications, actions, customs, beliefs, values, and institutions of racial, ethnic, religious, or social groups. “Competence” implies having the capacity to function effectively as an individual and an organization within the context of the cultural beliefs, behaviors, and needs presented by consumers and their communities.

From [Improving Cultural Competence Quick Guide for Clinicians](#)

CULTURAL & LINGUISTIC COMPETENCY

- Cultural competence comprises four components:
 1. Awareness of one's own cultural worldview
 2. Attitude towards cultural differences
 3. Knowledge of different cultural practices and worldviews
 4. Cross-cultural skills
- Developing cultural competence results in an ability to understand, communicate with, and effectively interact with people across cultures.
- Become aware of your own attitudes, beliefs, biases, and assumptions about others. Invest in gaining cultural knowledge of the populations that you serve.
- Be mindful of each household's linguistic requirements. For households with Limited English Proficiency, provide an interpreter who communicates well in the household's language and dialect and who is familiar with the vocabulary required to communicate effectively about sensitive subject matter.

CE RESOURCES

- The Heart of Texas Homeless Coalition Website <http://www.heartoftexashomeless.org/coordinated-entry/>
- HUD Coordinated Entry Resources <https://www.hudexchange.info/programs/coc/toolkit/responsibilities-and-duties/#coordinated-entry>
- HUD Definition of Homelessness https://www.hudexchange.info/resources/documents/HomelessDefinition_RecordkeepingRequirementsandCriteria.pdf
- HUD Definition of Chronic Homelessness <https://www.hudexchange.info/resources/documents/Flowchart-of-HUDs-Definition-of-Chronic-Homelessness.pdf>
- HUD Exchange Coordinated Entry Resource Page with Coordinated Entry Guidebook and Self-Assessment Tool <https://www.hudexchange.info/resources/documents/Coordinated-Entry-Core-Elements.pdf>
- HUD Coordinated Entry: Management and Data Guide <https://www.hudexchange.info/resources/documents/coordinated-entry-management-and-data-guide.pdf>
- Coordinated Entry Toolkit <https://endhomelessness.org/resource/coordinated-entry-toolkit-infrastructure/>
- Coordinated Entry and Systems Change Webinar <https://endhomelessness.org/resource/coordinated-entry-and-systems-change/>
- OrgCode training videos <https://vimeo.com/iaindejong>
- OrgCode Tools (VI-SPDAT & Prevention VI-SPDAT) <http://www.orgcode.com/spdat>