

Coordinated Access Improvement



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Meet your facilitators

- **Irene Peragallo**
- **Liz Drapa**
- **Margaret Palmer**

Meet your fellow participants

Two Truths and a Lie

- Turn to your neighbor and introduce yourself, share three things about you— 2 that are true, and 1 that is false
- Goal: attempt to identify which of three statements is bogus.

System Performance Measures

- **Reduced length of time homeless**
- **Reduced recidivism (returns to homelessness)**
- **Overall reduction in number of homeless persons**
- **Reduction in first time homeless**



Coordinated Entry System Outcomes

- **Close the “side doors”**
- **Most vulnerable populations are assessed and prioritized**
- **CoC projects aligned/reconfigured to address the needs of the most vulnerable**
- **Mainstream systems (public assistance, jails, hospitals, behavioral health systems) are partners in ending homelessness**

Local Metrics

Indicators of the effectiveness of the functioning of the Coordinated Access System itself, such as:

- Wait times for initial contact
- Extent to which expected timelines described in the manual are met
- Number/Percentage of referrals that are accepted by receiving programs
- Rate of missed appointments for scheduled assessments
- Number/Percentage of persons declined by more than one (1) provider
- Number/Percentages of Eligibility and Referral Decision appeals
- Number of program intakes not conducted through Coordinated Access System
- Completeness of data on assessment and intake forms

Local Metrics

Metrics shall also include indicators of the impact of the Coordinated Access System on system-wide Continuum of Care outcomes, such as:

- Persons referred have length of stays consistent with system guidelines
- Waiting lists are reduced for all services; eliminated for shelter
- Program components meet outcome targets
- Reductions in long term chronic homeless
- Reduction in family homelessness
- Reductions in returns to homelessness
- Reduced rate of people becoming homeless for first time

Coordinated Entry Policy Brief

Qualities of Effective Coordinated Entry

- Prioritization
- Low Barrier
- Housing First Orientation
- Person-Centered
- Fair and Equal Access
- Emergency Services
- Standardized Access and Assessment
- Inclusive
- Referral to projects
- Referral protocols
- Outreach
- Ongoing planning and stakeholder consultation
- Informing local planning
- Leverage local attributes and capacity
- Safety Planning
- Using HMIS and other systems for Coordinated Entry
- Full Coverage

Data collected for performance measurement should be able to indicate:

- Length of stay in shelter
- Incidence of new entries to homelessness
- Re-entry to the homeless system of previously homeless households
- Rate of match and mismatched referrals
- Time from when a client enters the system, is referred, and is placed into permanent housing
- Rate of inventory vacancies; different rates between providers
- Time on waitlists
- Wait time and housing placement time with needs level of household (high, medium, or low needs)
- Number of interactions the client has with different providers

Performance Measurement of Coordinated Entry Process Using Experiential Data

Survey clients

- How client came into contact with the system—were they able to understand the process?
- Was client matched appropriately to a provider?
- Did they have to be re-matched?
- Did they refuse housing placement, and if so, why?

Survey providers

- Appropriateness of client referrals and refusals (how and why?)
- Usefulness of common assessment forms
- Experience with shared database (training needs, system needs, etc.)
- Interaction with lead agency coordinating the system
- Policies and procedures review (helpfulness, changes, additions, clarity needs?)

Survey lead agency hosting the coordinated system

- Feedback on provider network (compliance issues)
- System accessibility and structure
- Experience with fiscal agency (support needs)
- Translation and interpretation needs
- Policies and procedures review (helpfulness, changes, additions, clarity needs?)

What is today all about?

Coordinated Access Process Improvement



Today's Agenda

8am – 8:30am	Registration
8:30am – 9:00am	Welcome!
9:00am – 9:45am	Improving the Business Rules
9:45am-10am	BREAK
10:00am-11:30am	Improving Technology & Pipeline Management for Coordinated Access
11:30am-12:30pm	LUNCH
12:30pm – 1:45pm	Coordinated Access Dashboards, Scoring, & Communication
1:45pm – 2:00pm	BREAK
2:00pm-3:15pm	The Role of Assessors, Dedicated Navigators, & Program Staff
3:15pm-3:30pm	BREAK
3:30pm – 4:45pm	Coordinated Access Staffing & Management

Coordinated Access...

What is working well?

What needs improvement?

BREAK

Back by 10:30am

Lab #1

IMPROVING THE BUSINESS RULES

IMPROVING THE BUSINESS RULES

- **Operations Manual:** What needs to be addressed that's not currently included
 - Index cards on your table
- **Prioritization**
 - What challenges are we seeing when trying to comply with the prioritization guidelines
- **Timeline from referral to acceptance:** *Extent to which expected timelines described in the manual are being met*
 - EX: The Housing Assessor notifies the client of eligibility and referral decision within 24 business hours. Once a referral is made, the Receiving Program has 24 business hours to contact the client and begins the process of scheduling intake appointments.
- **Case conferencing** (triggered when referral is rejected)

Lab #2

IMPROVING TECHNOLOGY & PIPELINE MANAGEMENT FOR COORDINATED ACCESS

- **Access Points** – Are we in the right locations?
Do we need more or less?
- **HMIS Bed Inventory and Unit Availability**
- **Anticipated Vacancy** – The goal is to notify
CA of a vacant unit within 14 days
- **Timeline to fill a unit** – how do we make this
shorter?

Lunch

Back at 12:30pm

Lab #3

**COORDINATED ACCESS DASHBOARDS, SCORING,
& COMMUNICATION**

System Performance Dashboard

Front

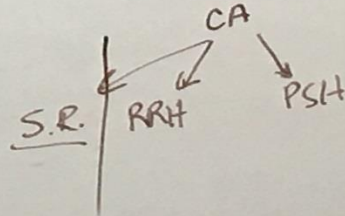
- ① # Assessed - monthly
- ② # on lists - #
- ③ Length of time on list - # / % avg or median
- ④ Referral outcomes - % monthly / cumulative
- ⑤ Prevention (sub pop)
 - # vets
 - families
 - youth
 - singlescumulative (yr.) / monthly

Middle

- ① Enrollment Source 95% CA 10% other
- ② Length from Referral to Move In # / % by region
- ③ # of placements (by sub pop)
 - monthly
 - cumulativechronics, vets, families, youth, household, individual
- ④ Income Now

Back Door

- ① PSH Retention & Returns assess & screen
- ② RRH Length of Ass. + Returns
- ③ No TH for now
- ④ Self Resolution / Income
- ⑤ Perm. Employment Placements



Communication with Coordinating Entity

- **Are there gaps in the information that is shared?**
- **Is information being shared in a timely manner?**

Lab #4

THE ROLE OF ASSESSORS, DEDICATED NAVIGATORS, & PROGRAM STAFF

Small Group Breakout Café Activity

Three group topics

- 1) **The Role of Assessors**
 - 2) **Mobile Outreach Housing Assessor/Navigators**
 - 3) **The Role of Navigators**
 - 4) **The Role of Program Staff**
- **Each table will have a “host” that remains at the table throughout the entire exercise**
 - **Everyone else at the table will rotate once**

Time to put on your HR hat!

Café Sessions

Café Session 1 – Are the job descriptions the right ones? What tasks are missing? What in the description isn't an accurate reflection of the responsibilities?

Café Session 2 – How do we make sure people can fulfill job responsibilities and competencies?

- **Do we have the resources we need to help people fulfill these roles as described**

Lab #5

COORDINATED ACCESS STAFFING & MANAGEMENT; MONITORING

Listening Session

Training -- Is the orientation adequate? How do we get it incorporated into all participating agencies' new hire processes?

Monitoring -- What people want monitoring to look like (quarterly, as needed, etc.)

- What kind of information do the programs want to get out of monitoring

Supervision

Thank You