**Vermont Coalition to End Homelessness - Coordinated Entry Workgroup**

Monday 12/16/2013, 11:00 am to 12:45 pm

**MINUTES**

submitted by Sarah Phillips

In attendance: Sarah Phillips (Office of Economic Opportunity, OEO), Paul Dragon (OEO), MaryEllen Mendl (2-1-1), Carol Flint (Central Vt Community Action Council), Brooke Salls (Good Samaritan Haven), Renee Weeks (Upper Valley Haven), Deb Hall (Rutland County Housing Coalition), Karis Williams (Rutland County Housing Coalition), Ashley Bride (Fair Haven Concerned), Elizabeth Eddy (BROC), Brian Smith (Dept of Mental Health), Richard Rankin (Data Remedies), Rick DeAngelis (Vt Housing & Conservation Board)

Missing: Meg MacAuslan (Champlain Valley Office of Economic Opportunity), Kathy Metras (Northeast Kingdom Community Action), Chris Dalley (Economic Services Division – DCF), Auburn Watersong (Vt Network Against Domestic and Sexual Violence)

Introductions. Sarah reviewed the agenda and shared who was not able to attend.

Reviewed the HUD Mandate for each Continuum of Care to “develop and implement a centralized or coordinated intake and assessment system”. Reviewed “Overview” (attached).

OEO has convened the initial meeting and volunteered staff resources to support the process. This is not an “advisory group”, OEO is not the decision-making authority. Later we discussed group process. This is a planning group focused on coordinated entry (intake, initial assessment, referral) for the Balance of State (BoS) Continuum of Care (CoC).

**Feedback on Coordinated Intake & Assessment**

* Having read the material
  + What does it mean to you?
  + What are the opportunities:
  + What are challenges?
  + What are the realistic expectations of what the assessment system can do?

How do affordable housing providers participate? What’s their role in the system

A central place or no wrong door – where folks in need of service can be connected to what they need – a single entry; reducing hoops that folks have to jump through

Positive: informed and appropriate referrals – better fit for clients and more “one-stop” shopping; from the local CoC – one agency collect and enter basic information

Look at internet based systems – BUT, the more systems, means that it becomes more complicated and costly to maintain. Do we have the resources? We each have different resources

Keep our eyes focused on the prize – permanent affordable housing – can this system make that link?

Rutland: 2009 universal referral form experience – the referral itself was not always made – no hand off process – but a client-driven process, good when used – RCWomen’s Network, RCHousing Coalition, BROC, Parent-Child Center – holds initial story, client takes it with them

What about churches and other groups?

What about the confidentiality piece? The social service community is large – how much info should we be sharing?

Where does the Housing Review Team fit in? warm hand off; general support

Reduce duplication – we can know who is being helped by whom?

Affordable housing world – common application – is there a connection between processes? Is there something we can learn from their process

Staff time and staff turnover – constant challenge of changing programs – can there be a web based interface? Suggested referrals “pop out” – Many HMIS systems have this ability

How will this tie in with AHS or GA homeless care? Chris Dalley will be on this workgroup

Can we get the voice of consumers in this process?

How will this tie into the Single HMIS workgroup? Uses the standards for collection of info and referrals

Will there be a requirement for “accepting” referrals into program? How will program eligibility be held by the individual provider and not the CoC/system? More “APPROPRIATE” referrals – prevention and diversion from shelter – accountability to “participating” in the system

2-1-1 collects identifying information when they need to, but not as general practice (i.e., program specific, like GA)

Realistic expectations?

* Appropriate referrals
* Reduced staff time collecting information/demographics/etc – less time doing intake and/or screening
* Not to duplicate databases or processes

**Developing a shared Mission, shared goals and shared accountability as work group (Paul)**

* What is the mission of the workgroup?
* What are the goals of the workgroup?
* What are the guiding principles of this workgroup?
* What are the end the results from this workgroup’s charge? What are we expecting?

Mission/Goals

* Develop a process that is inclusive, brings other voices/feedback (including consumers) into the process
* Fulfill the mandate – but develop a truly useful tool that will help people
* Satisfy HUD’s requirement for the Balance of State (BoS) Continuum of Care (CoC)
* Set a skeleton and the foundation – knowing the system will need to change and adapt
  + Entry first…and then what next?
* Educate and open up communication with local CoCs – do we have a rep from every local CoC?
* Link with access to affordable housing
* Deciding on a model and a tool – one that can be flexible to meet regional needs

Guiding Principles – How will we function and make decisions as a group?

* If not enough people “show up” for the meeting, then do we reschedule to ensure the group decides together –
* Need enough local CoCs participating – who is missing? Need a minimum number – **need to bridge/liaison with all CoCs**
  + Yes: Rutland, Washington, NEK, Orange/Windsor, Bennington, Lamoille
    - Can workgroup members make the connection to the local CoCs on a regular basis?
  + No Addison, No FGI, No Brattleboro – can there be a point person in the least?
* Currently: 17 workgroup members (orgs, not individuals)
  + **7 – a quorum to hold a meeting**
* Transparency and good communication
  + **Make notes available to BoS CoC**

Results?

* Written plan, approved by BoS CoC

**12:10 to 12:25 Communication plan (Sarah)**

* Building broad-based feedback and consensus
  + Local CoCs
  + Service Providers: Homeless Shelters, Community Action Agencies – PLUS –
    - Mental health agencies
    - Vt Psychiatric Survivors – consumer voice
      * **BRIAN EMAIL LINDA**
    - Vt Center Independent Living
    - AAAs?
    - Voc Rehab
* Consumer feedback – Do we have anyone we can invite?
  + Recent but not current
  + Consumer groups -
* Host a couple forums and invite groups – wide range of stakeholders
  + 2? Spring
* Survey large list
  + Now? Later?
* Chittenden CoC – has some tools in place
* Emergency rooms, hospitals
* Residential Substance abuse
* Dept of Corrections (yes yes)
* Military Assistance community – SSVF
* Youth
* Affordable Housing – Vt Housing Managers Association
* Public Housing Authorities
* Intake Staff – not just org leadership

**Reviewed Draft Timeline/Task List (attached)**

Next Steps:

Establish talking points about Coordinated Assessment System – are them some on National Alliance to End Homelessness that we can adapt?

* Who, what, when, where, why
* Link to video presentations

Invite Consumers – ALL, consider and invite to next meeting

Group Roles?

* Elizabeth, Paul – share the burden of facilitation or notetaking?
* Like Go To Meeting

Present at next CoC Meetings:

* MaryEllen
* Julia (with Sarah)

OEO will convene an early/mid January Meeting

**Regular Meeting: 4th Monday of every month – 10:30 – Noon**

Circulate some models prior to early January Meeting for Homework