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

**Monday, July 28, 2014, 10:30am – Noon**

**10:30 - 10:35 Introductions and Review Agenda**

Sarah, OEO; Paul, OEO; MaryEllen, 2-1-1; Brian Smith, DMH; Angus, AHS; Tracy, Capstone Community Action (CVCAC); Elizabeth Eddy, BROC; Renee Weeks, Upper Valley Haven; Meg MacAuslan, CVOEO; Brooke, Good Samaritan Haven; Julia Paradiso, COTS; Marcy Krumbine, CEDO;

**10:35 –10:45 Report Back from Local Continua of Care Meetings**

BROC – Has been looking at the screening tools – Any tool will require a relationship and strong relational skills; many people are seeking financial assistance, but the tools go beyond. That’s a good thing – even if a change.

Brian – is wondering about data sharing – what level? Via HMIS? What are the implications? The group has had this conversation in previous meetings, but realizing that data sharing is an area that we have not made decisions about and may want to consider soon. Especially if there are opportunities within HMIS software to use different assessment tools.

**10:45 – 11:15 2-1-1 & Coordinated Entry (MaryEllen Mendl)**

MaryEllen will present some information gleaned at a recent 2-1-1 training from how other CoCs are implementing coordinated entry, and the role of 2-1-1

**King County, WA (Seattle)**

1.9 million

211 screens and makes assessment appointments

Coaching available for “ineligible” clients

Small scope 🡪 large scope

Placement denials & refusals by family

Communication about changes to the system requires a lot of effort

**Arizona**

[www.211arizona.org/hmis](http://www.211arizona.org/hmis)

14-15 counties

23,000 people served

Empty bed issues

Real-time bed availability

Fair housing violations

DV coordination presents challenges – what level is appropriate?

**QUESTIONS?**

HMIS systems? Funding for coordinated entry? Is 2-1-1 a part of the governance structure?

In some ways, we are looking for a simple system that is institutionalized

2-1-1 in Vermont:

* There is a bed log tool that has been used in the past so that 2-1-1 could coordinated GA emergency motel stays. It could be used in the future.
* Currently, 2-1-1 calls shelters a couple times a day to update it’s database
* There are some of the barriers or challenges to coordinating/communicating bed availability?

**11:15 to 11:25 Review of Screening Tool Criteria**

A screening tool gathers information about the client (and population) and helps determine what options are available to the client.

An assessment (not screening) establishes the nature/severity of problem(s), strengths/social supports and readiness to change.

Many tools serve the purpose of both screening and assessment.

**Choosing a tool?**

* Overall quality/reliability and validity
* Ease of scoring & interpretation
* Brevity of administration time
* Self-completion
* Cost to implement

**11:25 – 11:45 Review More Tools**

**MaryEllen will present a couple tools for consideration – will email to Sarah**

**VI SPDAT (Paul)**

* Introducting the VI SPDAT: <http://100khomes.org/blog/introducing-the-vi-spdat-pre-screen-survey>
* The tool: <http://100khomes.org/resources/the-vi-spdat>

Face-to-face tool, informal language

Long for a screening tool, like the information in it

Geared towards chronically homeless single adults

Being used community-wide vs. by individual programs

Any rural examples (Brian will check)

**National Alliance to End Homelessness “Assessment Tool” (Sarah)**

* + - * Discussed here: <http://www.endhomelessness.org/blog/entry/field-notes-the-new-comprehensive-assessment-tool#.U6hqYEBORpI>
      * Tool here: <http://www.endhomelessness.org/library/entry/alliance-coordinated-assessment-tool-set>

This tool is for the broad population – with the VI at the end for prioritization around permanent supportive housing

Can we get more info about the chronically homeless population to understand what tool might be useful?

Incorporates DV/safety protocol

Built in protocols in general – “skip to” also helpful

**11:50 - Noon Next Steps**

**Moving forward on:**

* ID Questions to be asked and begin mapping how referrals will work. (very basic)
* ID organizations that will host coordination or any other specific roles required

HMIS – Screening Tool capacity (at what point do we get more detailed?)

HOMEWORK – REVIEW SCREENING TOOLS

WHAT IS OUR PROCESS on MOVING FORWARD WITH A TOOL?

**NEXT MEETING: AUGUST 25th**

**SUMMER WORKGROUP TO DO LIST**

* Identify the Results Expected to be Achieved
* Sketch out a Preliminary Needs Assessment/Screening Tool & Other Forms
  + Screening tool to establish eligibility, triage services and make referrals
  + Client forms – informed consent, ROI to share info; client grievance form
  + MOU/A template for partners
* ID Questions to be asked and begin mapping how referrals will work. (very basic)
* ID organizations that will host coordination or any other specific roles required
* ID Additional Staffing and Resource Needs
* ID Role of HMIS or other database capabilities; ID Data and HMIS Needs

Data Sharing – real time data needs