**VCEH Coordinated Entry Committee**

**MINUTES**

**January 17, 2017, 12:30 – 3pm**

**Randolph**

**Check in on Tasks from Last Meeting**

ROI Staff Tool – Everyone should have reviewed the ROI Staff Tool (attached) with respective teams and sent any feedback to Kara Casey [kara@vtnetwork.org](mailto:kara@vtnetwork.org)

* Kara will make final revisions.
* Update for ROI, change in expiration due to VAWA rules
  + ICA is going to work on figuring out a ServicePoint solution to tracking client release of information. Bethany and Brian will work with Meghan and Caitlin.

HMIS Data Sharing Agreement (attached) - Deb, dawn & Renee were going to review with internal staff and send feedback to Meghan Morrow [meghan.morrow@icalliances.org](mailto:meghan.morrow@icalliances.org). Meghan was going to have the HMIS Advisory Board review the HMIS data sharing agreement template

* On HMIS Advisory Board agenda for the next meeting. Meghan will resend to the Committee.

Staff Confidentiality Principles & Policies: Everyone was to send any example confidentiality policies or training materials to Alexa [Alexa.collesides@partner.vermont.gov](mailto:Alexa.collesides@partner.vermont.gov); Brian was going to send Alexa contact people at Community Mental Health Agencies.

**Review & Discuss Permanent Supportive Housing Protocols and Prioritization (from PSH small group:** Amos, Sarah, Elizabeth, Renee, Will Eberle, Daniel

* See notes. Discussion included:
  + Question: do we want to name specific reasons that are not legitimate for using the PSH prioritization? Are there other legitimate reasons besides eligibility for program or client choice/preference?
  + Shelter + Care/VSHA can generate a statewide PSH prioritization
    - VSHA will join each local CE Partnership (partnership agreement, data sharing agreement, ROI)
      * ICA and VSHA need to connect
      * Do we need allocations per CoC to facilitate decision-making on enrollment?
      * What does the interaction between the statewide list and the local list look like?
  + Question: Who is referred to the PSH Prioritization list? Is there a threshold criteria for referral to the list that we want to consider? The group discussed that every HH (families and individuals) that is homeless can be referred to the list. Prioritization for PSH is “sorting the list” according the PSH prioritization criteria
    - Family Supportive Housing has separate prioritization requirements.
  + Question: What does “Longest History of Homeless + Most Severe Service Needs” mean? Is it “sort by” longest history, then most severe service needs? Or do we want to consider each of these equally? How do we do that?
  + There are other demographic characteristics that need to be pulled onto the PSH prioritization list to facilitate assignment/referral – e.g., Vet, HH w/children, etc.
  + Need to provide some guidance around self-report or objective/substantial knowledge.

**Discuss & Begin Draft Guidance on use of HRTs in Coordinated Entry Process**

* Sarah, Renee, dawn and Sarah to have a meeting before the next meeting.

**Next Meeting: Tuesday, February 21, 12:30 – 3pm in Randolph**

* Review draft confidentiality principles & policies (does this need a VCEH vote?) Appendix to Partnership Agreement
* Housing Review Team Guidance
* 15% goal and Coordinated Entry – how do these efforts come together? Homeless preference at PHA & Coordinated Entry
* Rapid Re-housing Access