Coordinated Entry for Permanent Supportive Housing
Chittenden County Homeless Alliance

Permanent Supportive Housing Inventory

A copy of the Permanent Supportive Housing section of the Housing Inventory Chart, with additional information on “gatekeepers,” basic eligibility and housing mobility options, is attached.

Prioritization

All Permanent Supportive Housing (PSH) beds in our Housing Inventory Chart, if not already dedicated to the Chronically Homeless, will be prioritized for Chronically Homeless. When a PSH bed opening occurs, candidates who are prioritized through the common assessment tool AND meet the basic eligibility requirements for the bed will be given first consideration for the opening by the program. The Alliance will review the number of program refusals as the process moves forward and will evaluate whether formal refusal limits need to be established?

Common Assessment Tool and Community Waitlist Management

The common assessment tool used for PSH will be the VI-SPDAT (or F-VI-SPDAT, for families). Assessments done through this tool will be used to refer people, where appropriate through the scoring, onto a community-wide waitlist for entry for PSH beds. The community waitlist will be managed outside of HMIS for now; this will be re-evaluated after the Alliance moves forward with its new HMIS later this year. A new part-time position at the Chittenden Valley Office of Economic Opportunity (funded through the Housing Opportunities Program grant) will work closely with the Burlington Housing Authority to set up the waitlist, transferring information from the paper assessments into an Excel spreadsheet and then ranking those on the list by overall vulnerability score. The paper assessments can then be shredded if confidentiality is a concern.

A PSH Review Committee, functioning as a subcommittee of the Coordinated Entry Committee, will be formed. It will include all of the “gatekeepers” of the PSH beds (including street outreach workers from the Howard Center and Safe Harbor) as well as Women Helping Battered Women. Agencies will be responsible for appointing their member to this group. The PSH Review Committee will meet once a month to review the waitlist and plan for future openings and potential issues/changes. The Committee will review ranking scores [AND LENGTH OF HOMELESSNESS?] as well as hear a qualitative overview by the agency putting forth a candidate. The Review Committee will follow HUD criteria for prioritization? The Coordinated Entry Committee recommends that within those criteria, the Review Committee pay special attention to medical vulnerability and unsheltered clients. The group may need to meet more often when there are housing opportunities available. There may be some individuals experiencing homelessness who refuse to take part in the VI-SPDAT, and those individuals can be evaluated for entry into a PSH bed by the Review Committee.

Process Evaluation

Clients will be recruited for a focus group to help inform the process as it evolves. This will allow for people within the PSH process to offer constructive feedback, but not lead to potential conflicts of interest by sitting on the PSH review committee and reviewing confidential information of vulnerable participants.

Release of Information

Each agency may use their own release for referrals and release of information as long as it names all of the agencies in the CoC as potential recipients of information.

Points of Access to Assessment

People accessing emergency housing services through Economic Services are currently referred to case management through an established process that includes assignment to a case manager. Those assigned case managers will be responsible for conducting assessments and making referrals, where scoring indicates that it is appropriate, to the PSH Review Committee. The Alliance will reassess the need for additional assessment capacity for other Agency of Human Services programs once the original process is operational.

Shelter guests, including guests of the future warming shelter, will be assessed by the shelter operator. Street outreach workers are encouraged to conduct assessments as they encounter unsheltered people. Other agencies (i.e., the hospital) will be encouraged to refer their clients to [a member of the Alliance?] for assessment. The agency conducting the assessment is responsible for making referrals, where scoring indicates that it is appropriate, to the PSH Review Committee.

To try to reduce the potential duplication burden on clients, people will be asked if they have previously taken this assessment, and those conducting an assessment can check with the waitlist organizer to see if someone is already on the waitlist.