

# Coordinated Entry & Foundational Community Supports



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# Agenda

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- Intros & Framing
- Coordinated Entry 101
- Tips: Using FCS to Support People Through CE
- Approaches: FCS & CE Systems Collaborations
- Q/A

# Intros & Framing

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- Panelist Introductions
- Intended Audience
  - FCS Contracted Providers & CE System Administrators
- Goal of Today's Webinar
  - Give FCS Providers tools and approaches to further collaborate w/local CE systems to end homelessness among the shared population

# Alphabet Soup

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- **CoC**- Continuum of Care
- **CE/CES**- Coordinated Entry/Coord Entry System
- **FCS**- Foundational Community Supports
- **PIT**- Point in Time Count
- **PH**- Permanent Housing
- **SPM's**- System Performance Measures

# Coordinated Entry (CE) 101

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- Definition/Key Elements/Purpose/Benefits of CE
- HUD Requirements for CE

# CE Definition



A CoC's approach to organizing and providing services/housing to persons experiencing a housing crisis within a specific geographic area.

- *Rapid, effective, consistent client-to-housing matches*
- *Move from program-centric to person-centric system*
- *Not just “entry”; organization of pathways to exit to housing*

# Coordinated Entry

## Key Components

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- **Access:** Accessible no matter where a person presents
- **Assessment:** Assistance is allocated as efficiently as possible
  - *(Reduce duplicate intake processes, adopt a uniform assessment tool)*
- **Prioritization:** Assistance is prioritized most vulnerable
  - *Over-resourcing participants is addressed*
- **Assign (Match):** Most vulnerable are given supports to easily screen in to housing resources

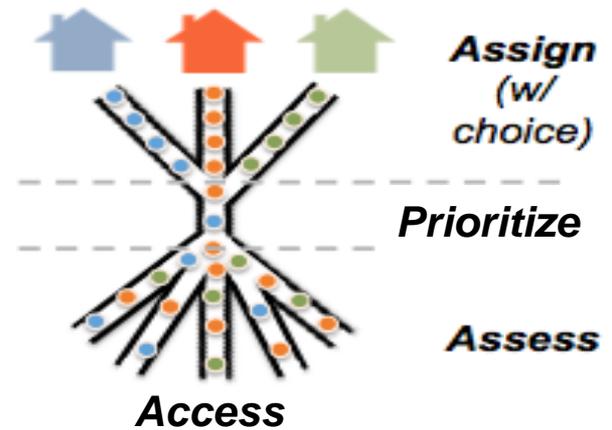
# CE Definition

## Coordinated Entry System

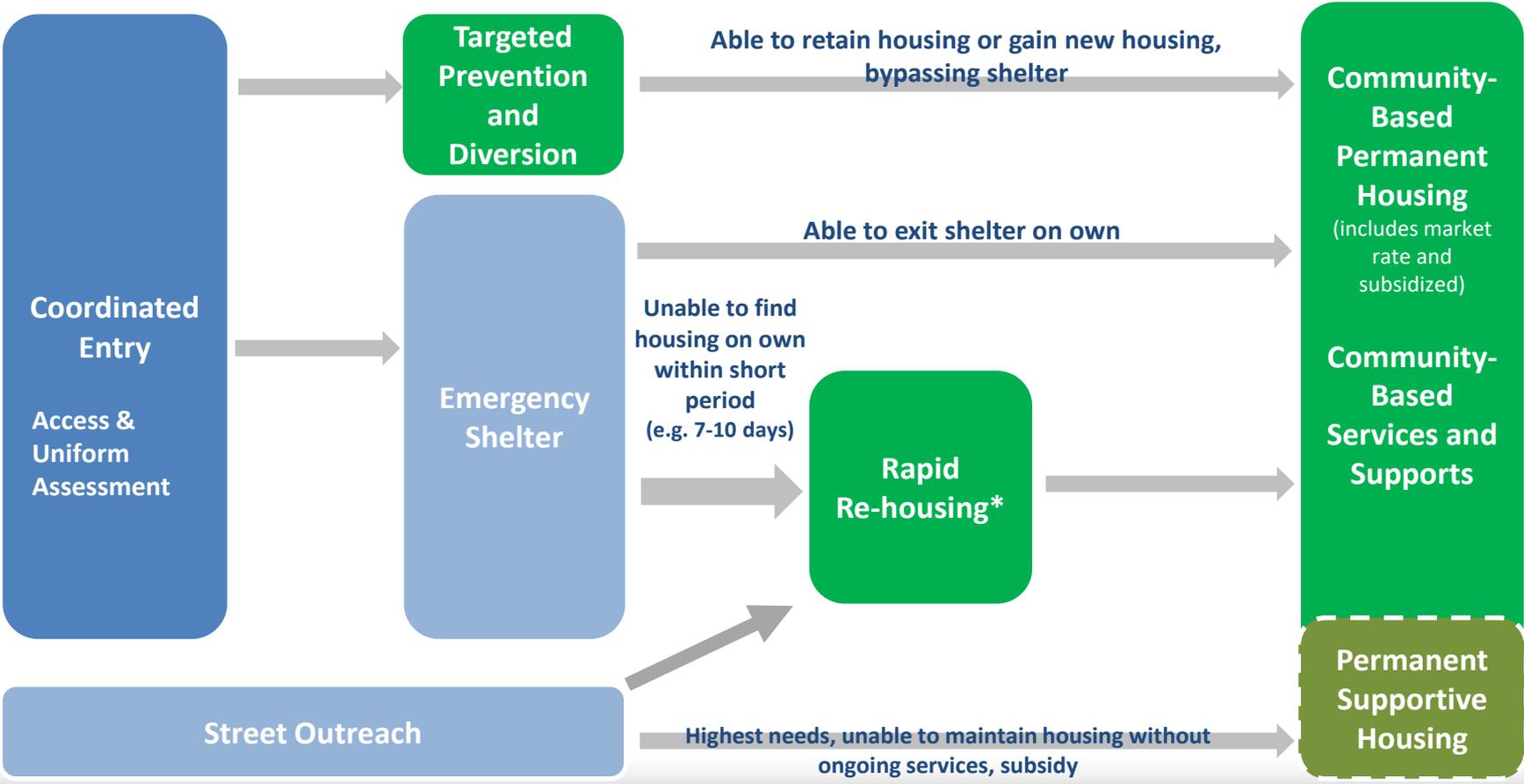
**Without CES**



**With CES**



# Coordinated Entry- Sample Visual



# Coordinated Entry Systems:

## Why?

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### Purpose

- Prioritize People Who Are Most In Need of Assistance
- Person-Centric
- Systematic Information Collecting About Gaps

### Reach the Goal- Make Homelessness...

- Rare
- Brief
- Non-Recurring (One Time)



# Coordinated Entry Systems:

## Why?

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### Benefits to Providers

- Clear, transparent ways to access housing/resources
- De-duplication of services/administrative work
- Whole system cares for participants rather than individual programs

**HUD Requirement for all CoC's by Jan. 23, 2018**

# Coordinated Entry Systems:

## Where Do I Find My Local CE Access Points (Hubs)?

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Access Points Are Listed by County

<https://deptofcommerce.app.box.com/s/8nt4mgmr3izkj9juizisji9w6igdgjd6>

# HUD'S REQUIREMENTS- CE

- HUD Requirements for CE
- Data/Evaluation of CE- System Performance Measures

# Key Compliance Points:

## What Housing Resources Are in CE?

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- Permanent Supportive Housing (PSH)
  - CoC-funded, locally funded if funder requires
- Rapid Re-Housing (RRH)
  - CoC-funded, ESG-funded, locally funded if funder requires, SSVF
- Homelessness Prevention (HP)
  - ESG & SSVF
- DV Providers may use alternative CE process
- May include emergency shelter, transitional housing & mainstream housing

# CE Requirements- Jan 23, 2018

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## Written Policies & Procedures- Required

- Full Coverage
- Standardized Access & Assessment
- Prioritization
- Low Barrier
- Marketing
- Street Outreach/Emergency Shelter/Homelessness Prev
- Participant Autonomy
- Referrals to Projects
- Safety Planning
- Privacy
- Assessor Training
- Stakeholder Consultation

# Assessment Tools

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- Requirement- Uniform Assessment Tool for CE
  - Tools may differ between sub-pop (5 allowed)
  - Tools may differ between phase of time
  - Still uniform practice across system
- May be phased assessments
  - Ex. Diversion assessment; wait 14 days- housing resource or vulnerability assessment; wait until chronic-vulnerability/PSH assessment



# HUD's System Performance Measures & CE

Data/Evaluation

# What are SPM's?

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Evaluates performance of an entire system

- In addition to individual project performance

Person-centric way of evaluating performance

CoC's compared to own baseline in \$ rounds

Any program in a CoC's HMIS

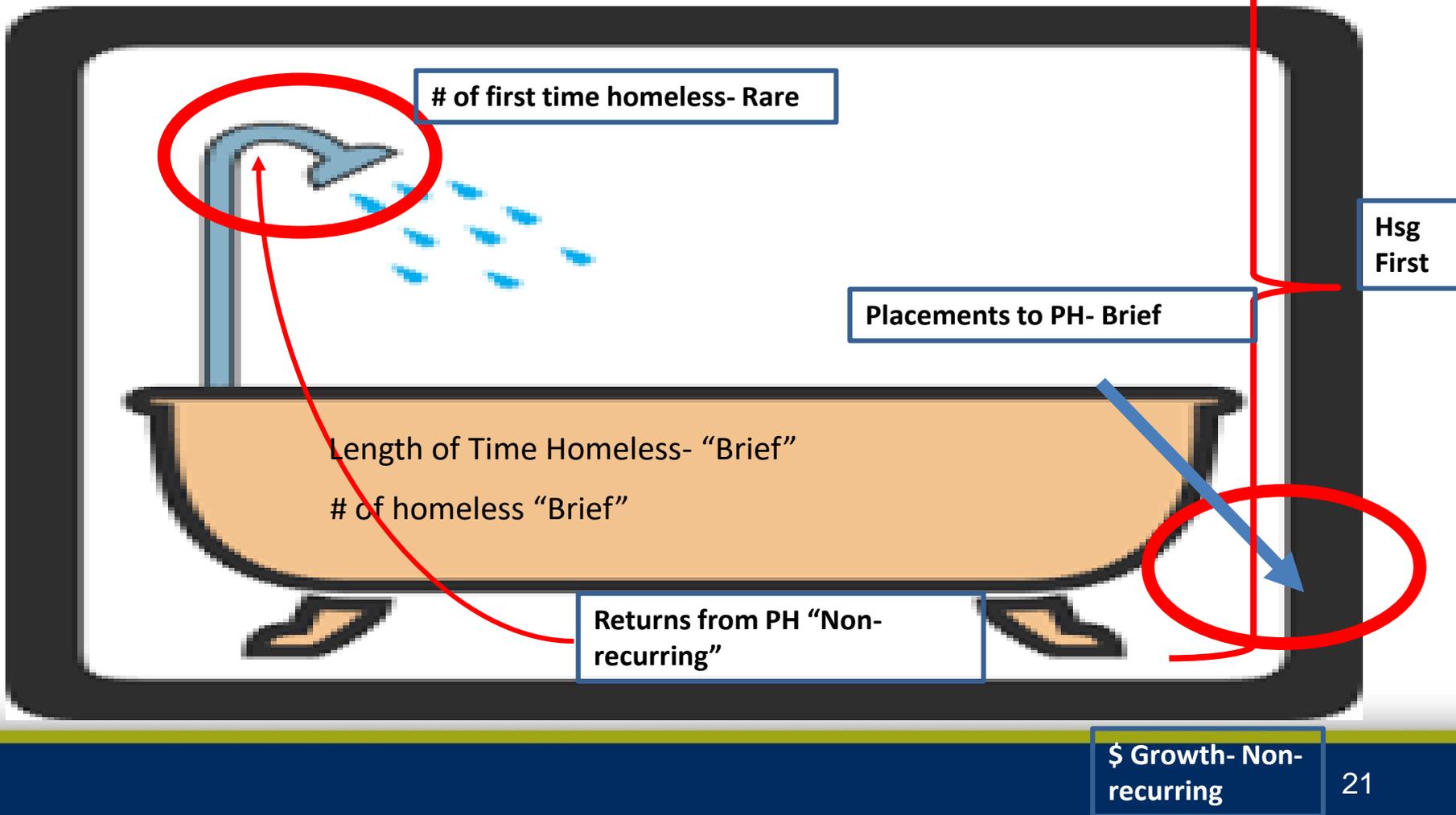
# 7 System Performance Measures

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- 1: The Length of Time Homeless- Brief
- 2: Returns from PH to Homelessness- Non-recurring
- 3: Number of Homeless Persons- Brief
- 4: Employment/Income Growth for CoC-\$ Projects- Non-recurring
- 5: # of first time homeless- Rare
- 6: ~~Homeless Prevention & Housing Placement Category 3~~- Rare
- 7: Placements In/Retention of PH (incl. street outreach)- Brief

Note- Rare, Brief & Non-Recurring Goals

# SPM's & Coordinated Entry



# Tips: Using FCS to Support People Through CE

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- FCS Services Provided
  - FCS Eligibility
- Key Points for CE/FCS Collaboration
- FAQ's re: FCS & CE

# FCS: Services Provided

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- Supportive Housing Services
- Supported Employment Services

# FCS: Supportive Housing Services

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Supportive Housing Services include both pre-tenancy services and services to sustain tenancies:

- Housing Assessments
- Identifying Housing Resources
- Support Obtaining a Lease
- Independent Living Skills Development
- Landlord Relations
- Crisis Management
- FCS will not supplant currently available services

# FCS: Supportive Housing Services

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Eligibility includes:

- 18+ y/o
- Medicaid Eligible
- Must have at least one assessed health needs-based criteria
  - Mental health, SUD, ADL assistance, complex physical health need
- Must meet at least one risk factor
  - HUD Chronic Definition
  - Dependence on institutional care
  - Dependence on adult residential care
  - Frequent turnover in caregivers
  - 1.5+ score on PRISM

# FCS: Supported Employment Services

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Supported Employment Services include:

- Assistance obtaining & maintaining a job
- Vocational/job-related discovery or assessment
- Planning for employment
- Job placement, development and coaching
- Skill-building for negotiating with employers
- Crisis Management
- FCS will not supplant currently available services

# Supported Employment Principles

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- **Attention to interests:** Support to work in fields that are of interest to clients.
- **Competitive employment:** Jobs that anyone can compete for/that pay full wages.
- **Systematic job development:** SE specialists systematically visit employers, based on worker interests, to learn about their business needs and hiring preferences.
- **Zero Exclusion:** Eligibility for SE program is based on clients' desire to work, regardless of client's history of illness or substance use.
- **Service Integration:** SE specialists work in partnership with behavioral health and housing providers to coordinate care.
- **Benefits Counseling:** SE specialist and client review the impact employment earnings will have on SSI, SSDI, SNAP, TANF and other benefits and entitlements.
- **Long-term individualized support:** Clients receive ongoing supports to assist with their successful maintenance of jobs, accommodations, departures, and career advancements.

# FCS: Supported Employment Services

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Eligibility includes:

- 16+ y/o
- Medicaid Eligible
- Must have at least one assessed health needs-based criteria
  - Mental health, SUD, ADL assistance, evidence of physical impairment to working
- Must meet at least one risk factor
  - Unable to be gainfully employed for at least 90 days due to mental/physical impairment
  - SUD w/repeated inpatient episodes
  - Mental health of SUD diagnosis that is at risk of deteriorating w/out intervention
  - Inability to obtain/maintain employment due to age, physical disability or traumatic brain injury

# Tips: Using FCS to Support People Through CE

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## Some Reminders...

- CE is a system configuration, it is not a wealth of new housing or services
- In fact, some CE systems may be missing critical services like housing navigation and stabilization services for their most vulnerable clientele
- Typically, the housing “slots” available in a CE in a given year are **tiny** compared to the need of eligible populations
- There is great overlap between the FCS eligibility and CE eligible populations
  - Coordinating FCS w/CE pops can help a CoC perform better, which makes them more competitive for increased HUD resources in each year’s annual funding competition
- CoC’s CE’s can be set up in many different ways; some of the following ideas may not be possible given the CE configuration

# Tips: Using FCS to Support People Through CE

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## Critical Points to Assist People Through CE

### Diversion/Rapid Exit/Problem-Solving (“Rare”):

- Some CoC’s have very flexible, short funds to assist people to move to a permanent housing destination such as shared housing, stays with family/friends, or other hosts
- These problem-solving conversations are often offered at the time someone presents for shelter or CE, and are ongoing throughout an episode of homelessness
- Team up with your CoC to see if you can play a role in assisting with diversion/rapid exit/problem-solving with FCS-eligible clients

# Tips: Using FCS to Support People Through CE

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## Critical Points to Assist People Through CE

### Access & Assessment (“Brief”):

- Assist people to find and go to access points to conduct an assessment for CE
- Become an approved access point where you conduct the uniform assessment tool on FCS-eligible clients
- Assist CE access point with gathering any required documentation to establish eligibility for housing resources

# Tips: Using FCS to Support People Through CE

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## Critical Points to Assist People Through CE

### Navigation & Housing Match (“Brief & One-Time”):

- Become a contact for the client the CoC may use if the client is matched to a housing resource
- Outreach to FCS-eligible clients who are at or near the top of a CE queue
- Gain an understanding from the CoC on when/if your client will ever be prioritized for a housing resource
  - *Pursue other housing resources outside of CE to ensure the episode of homelessness is as brief as possible*
  - *Engage client in FCS Supported Employment to increase income/create more housing options*
- Collect further eligibility documents
- Provide housing search and placement services
- Assist clients to secure supportive services to stabilize the housing placement

# Tips: Using FCS to Support People Through CE

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## FAQ's re: CE and FCS

### Can FCS pay for outreach to people experiencing homelessness?

- FCS cannot pay for staff to conduct outreach to a person who is experiencing homelessness unless the person is already enrolled in FCS. This is because FCS services must be tied to an individual person, and a person's eligibility must be assessed and authorized by Amerigroup in order to receive FCS services.

### Can an FCS participant transfer FCS providers?

- Yes, an FCS participant can transfer to a new FCS service provider at any time.

### How do people access FCS services?

- *Note that FCS is an independent benefit, regardless if someone is engaged with a CE system.* An individual can receive an assessment for FCS services by submitting a referral form ([bit.ly/fcs-referral](https://bit.ly/fcs-referral)) to the FCS program via [FCSTPA@amerigroup.com](mailto:FCSTPA@amerigroup.com) or by calling 1-844-451-2828 (TTY 711) Monday through Friday from 8 a.m. to 5 p.m. Once a referral form is submitted, Amerigroup assigns a person to an FCS provider to be assessed for eligibility and to receive services. Contracted providers can skip the referral step and immediately complete an eligibility assessment. Amerigroup reviews all assessments to confirm eligibility, and it assigns people to contracted FCS providers. At this point, FCS services can begin.

# Tips: FCS & CE Systems Collaboration

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## Data-Matches to Target CE Participants for FCS

- With data-sharing agreements in place, CoC's may be able to share those on CE queue who may be eligible for FCS
  - Ex. Those experiencing chronic homelessness on CE queue
  - Ex. Those at the top of the CE queue who need navigation, housing search or supportive services
  - Ex. "Surge" one-stop shop housing events
- Assists w/securing services for the most vulnerable that may be lacking within a CoC

# Tips: FCS & CE Systems Collaboration

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## Integrate Into CoC's Structure to End Homelessness

- CoC's should have CoC membership meetings, board meetings, and committee meetings. Some committees' sole mission may be to continue building and improving CE
- Check with your CoC to see where there are opportunities to actually integrate into the CoC's structure so you can share the FCS perspective

# Tips: FCS & CE Systems Collaboration

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## Case Conferencing & Special Population Initiatives

- Consists of bringing system partners together to secure both housing and services for people on a by-name list
  - Top of CE queue
  - Top of special population by name list (youth, chronic, Veteran, etc.)
- FCS staff may be able to join periodic case conference efforts to help secure services, and also troubleshoot challenging cases if available in your CoC
- Best practice has been for systems of care like FCS to assign a primary point of contact for each CoC to be a consistent presence at meetings, and a reliable resource for the CE staff

# Tips: FCS & CE Systems Collaboration

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## Join CoC's Capacity Building Efforts

- Some CoC's have made training, especially in the area of supportive service navigation, a priority.
- Inquire to your CoC about any learning circles, trainings or other capacity building efforts you can attend to share information on accessing your services
- Alternatively, ask the CoC what CE training is available, as well as obtain a copy of the CE policies and procedures so you can familiarize yourself and clients with the process

# FCS Resources

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Amerigroup Provider Info

[bit.ly/fcs-provider](http://bit.ly/fcs-provider)

FCS Provider Manual

[bit.ly/fcs-manual](http://bit.ly/fcs-manual)

FCS Eligibility Criteria

[bit.ly/fcs-eligibility](http://bit.ly/fcs-eligibility)

FCS Referral Form

[bit.ly/fcs-referral](http://bit.ly/fcs-referral)

FCS CH Documentation

[bit.ly/ch-documentation](http://bit.ly/ch-documentation)

Provider Resources Guide

[bit.ly/fcs-resources](http://bit.ly/fcs-resources)

FCS Newsletter

[bit.ly/fcs-news](http://bit.ly/fcs-news)

FCS Training Calendar

[bit.ly/fcs-calendar](http://bit.ly/fcs-calendar)

# Questions

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