



POINTS NORTH HOUSING COALITION  
COORDINATED ENTRY  
POLICY AND PROCEDURE  
MANUAL



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## **Introduction**

### **Document Overview**

In order to implement and maintain a Tri-County-wide Coordinated Entry System (CE), Points North Housing Coalition's CE Committee, has developed the following Policies and Procedures Manual to outline and define the goals and objectives of the CE program. This document delineates the roles and responsibilities of each agency and user involved in the program while establishing protocol for program assessment, referral acceptance, client privacy, and consumer disclosure. Each participating agency must have the Director of that agency sign the Agency Agreement at the end of this document, indicating that the agency has reviewed these policies and procedures and will comply with them. These policies and procedures will govern the implementation, governance, and evaluation of the Coordinated Entry (CE) in PNHC's CoC. It is expected that the standards will adjust as programs evolve, members gain more experience, and Homeless Management Information System data from programs and services is analyzed. This Policy and Procedure will serve as the guiding principles for funding ESG and CoC programs. These policies may only be changed by the approval of the CoC PNHC CE Committee based on recommendations from the Coordinated Entry stakeholders through CE meetings.

### **Purpose:**

Points North CoC Coordinated Entry (CE) process is designed to identify, engage, and assist homeless individuals and families that will ensure those who request or need assistance are connected to proper housing and services.

### **History and Purpose of Coordinated Entry**

Coordinated Entry is considered one of the many interventions in a community's united effort to end and prevent homelessness. The process works best and provides the greatest value if it is driven by "What does the client need" rather than by provider eligibility. Coordinated entry refers to the process used to assess and assist in meeting the housing needs of people at-risk of homelessness and people experiencing homelessness. The implementation of coordinated assessment is considered national best practice. When implemented effectively, coordinated assessment can:

- Reduce the amount of research and the number of phone calls people experiencing homelessness must make before finding crisis housing or services;
- Reduce new entries into homelessness through coordinated system wide diversion and prevention efforts;
- Prevent people experiencing homelessness from entering and exiting multiple programs before getting their needs met;
- Reduce or erase entirely the need for individual provider wait lists for services;
- Foster increased collaboration between homelessness assistance providers; and
- Improve a community's ability to perform well on Homeless Emergency Assistance and Rapid Transition to Housing (HEARTH) Act outcomes and make progress on ending homelessness.

The coordinated entry process makes referrals to all projects receiving Emergency Solutions Grants (ESG) and CoC Program funds, including emergency shelter (ES), Rapid Re-housing (RRH), Permanent Supportive Housing (PSH), and transitional housing (TH), as well as other housing and homelessness projects. Projects in the community that are dedicated to serving people experiencing homelessness fill all vacancies through referrals, while other housing and services projects determine the extent to which they rely on referrals from the coordinated entry process.

### **Points North Coordinated Entry System Core Elements**

- **Access:** the engagement point for persons experiencing a housing crisis could look and function differently depending on the specific community. Persons (families, single adults, and youth) might initially access the crisis response system by calling a crisis hotline or other information and referral resource, walking into an access point facility, or being engaged through outreach efforts.
- **Assessment:** upon initial access, CoC providers associated with coordinated entry will assess the person's housing needs, preferences, and vulnerability. This coordination entry element is referred to as assessment. It is progressive with multiple layers of sequential information being gathered at various phases in the coordinated entry process, for different purposes, by one or more staff.
- **Prioritization:** during assessment, the person's needs and level of vulnerability will be documented for purposes of determining prioritization. Prioritization helps the CoC manage its inventory of community housing resources and services, ensuring that those persons with the greatest need and vulnerability receive the supports they need to resolve their housing crisis.
- **Referral:** the final element is referral. Persons are referred to available CoC housing resources and services in accordance with the CoC's documented prioritization guidelines.
- **Referral protocols:** Programs that participate in the CoC's coordinated entry process accept all eligible referrals unless the agency has documentation that would support rejecting a referral
- **Referral Rejection Policy:** Both CoC providers and program participants may deny or reject referrals from the defined CE access point, although service denials should be infrequent and must be documented with specific justification as prescribed by the CoC. The specific allowable criteria for denying a referral must be established by the CoC, must be shared with each project and client, and be reviewed and updated annually. All participating projects and client must provide the reason for service denial, and may be subject to a limit on number of service denials

### **Prioritizing people who are most vulnerable or have the most severe service needs:**

One of the main purposes of coordinated entry is to ensure that people with the most severe service needs and levels of vulnerability are prioritized for housing and homeless assistance. To fulfill this process Points North follows the guidelines set forth in HUDs CPD-16-11. People experiencing homelessness will be prioritized for permanent supportive housing. In addition to prioritizing people experiencing homelessness, the coordinated entry process prioritizes people who are more likely to need some form of assistance to end their homelessness or who are more vulnerable to the effects of homelessness.

### **Points to consider when prioritizing people for housing and homelessness assistance: Based on Vulnerability Scoring from Coordinated Entry Application**

- Chronic Homelessness (3 Points)
- Veterans (5 point)

- Youth (2 point)
- Physical or mental limitations that would prevent individual from obtaining housing (1 Point for each)

**The CoC PNHC members identified the following goals for the Coordinated Entry:**

- No Wrong Door, the principles of this approach are:
  - A consumer can seek housing assistance through any of the participating homeless services providers and will receive integrated services;
  - Consumers should have equal access to information and advice about the housing assistance for which they are eligible to assist them in making informed choices about available services that best meet their needs;
  - Participating providers have a responsibility to respond to the range of consumer needs and act as the primary contact for consumer who apply for assistance through their service unless or until another provider assumes that role;
  - Participating providers will provide a proactive service that facilitates the consumer applying for assistance or accessing services from another provider regardless of whether the original provider delivers the specific housing services required by a presenting consumer; and
  - Participating housing providers will work collaboratively to achieve responsive and streamlined access to services and cooperate to use available resources to achieve the best possible housing outcomes for consumer, particularly for those with high, complex or urgent needs
- Universal intake and assessment form
- Point of entry agency will complete appropriate paperwork and refer to all appropriate housing programs/agencies in addition to the prioritization list
- Recipient Agency will enter client data on prioritization list and track client activity
- Recipient and Sub-Recipient Agencies will co-lead monthly CE meetings
- Clients will be prioritized based on vulnerability score
- The process will be easy on the client, and provide quick and seamless entry into homelessness services
- Individuals and families will be referred to the most appropriate resource(s) for their individual situation
- The process will prevent duplication of services
- The process will reduce length of homelessness
- The process will improve communication among agencies

**Operating the Coordinated Entry System**

2014 was implementation and start of the pilot years for the Coordinated Entry program. During this time a path for establishing the system-wide coordinated entry was discussed, tested, and modified. Full implementation and operation of the CE Program includes:

- Secure Email
- Timely meetings

- Timely referrals to the CE system
- Recipient Facilitator will:
  - Enter client data in google doc spreadsheet/HMIS System
  - Track client activity
  - Share report data at regular CE meetings
- Sub-recipient will:
  - Contact CoC agencies

Points North CoC is responsible for coordinating and implementing a system to meet the needs of individuals and families experiencing homelessness within the CoC. The primary goals for coordinated entry processes are that assistance be allocated as effectively as possible and that it be easily accessible no matter where or how people present. The coordinated entry process is designed to facilitate prioritizing assistance based on vulnerability and severity of service needs to ensure that people who need assistance the most, can receive it in a timely manner. In addition, the coordinated entry process provides information about service needs and gaps which in turn provides a path to plan to identify and address needed resources.

**Addressing waiting times through coordinated entry:**

Often there is a discrepancy between the number of people in need of housing and the lack of available beds. When there is a waiting list due to a lack of available beds, other community resources will be accessed, such as rapid re-housing dollars. Although PSH is almost always the most effective resource for people with high levels of vulnerability and high service needs, including those experiencing chronic homelessness, the lack of available PSH should not result in people remaining in motel rooms or on the streets without further assistance.

**Homeless assistance organizations:**

All homeless assistance organizations should be involved in the coordinated entry process by helping people access the system and receiving referrals. Emergency shelter, transitional housing, rapid re-housing, and permanent supportive housing programs should receive referrals through the coordinated entry process.

**Mainstream housing and services:**

Affordable housing and mainstream services are crucial tools for ending homelessness and should be involved in the coordinated entry process. For instance, sources of referrals could include mental health service providers, substance abuse service providers, Department of Veterans Affairs (VA) Medical Centers, jails, or emergency rooms.

**Prevention Services:**

- Referral to Prevention Services Provider is made through the Coordinated Entry system.
- Prevention services within the CoC are available through the following agencies:
  - Watertown Urban Mission
  - Lewis County DSS

- Transitional Living Services of NNY
- Massena Independent Living Center
- Jefferson County DSS
- St. Lawrence County DSS
- Soldier On

### **Safety Planning**

The coordinated entry process ensures the safety of the individuals seeking assistance. This ensures that people fleeing domestic violence have safe and confidential access to the coordinated entry process and domestic violence services, and that any data collection adheres to the Violence Against Women Act (VAWA). The CoC coordinates with victim/ non-victim providers to ensure DV survivors are provided housing services that uphold safety by prioritizing programs that collaborate to offer victims a wide range of options. Households presenting at non-victim providers are linked with DV services via a phone assessment. Households are given options including VAWA and CoC services to guard personally identifiable information. If a client is eligible and elects DV services the provider will end intake, void electronic record and connect victim with DV service provider. If client elects for non DV services, the Client is referred to a nonvictim provider to fulfill CoC CE process. VAWA compliant informed consent is required to provide information to other providers. If a client chooses not to utilize one of the CE participating DV agencies, the CE POE agency will reach out to DV program for assistance in developing an anonymous safety plan for the client

### **The Coordinated Entry Policy and Procedures will:**

- Assist with the coordination of service delivery across the CoC and will be the foundation of the coordinated entry system;
- Assist in assessing individuals and families consistently to determine program eligibility;
- Assist in administering programs fairly and methodically;
- Establish common performance measurements for all CoC components; and

The Policy and Procedures have been established to ensure that persons experiencing homelessness who enter programs throughout the CoC will be given similar information and support to access and maintain permanent housing. All programs that receive ESG or CoC funding are required to abide by the Policy and Procedure guidelines. Agency program procedure should reflect the policy and procedures described in this document. The CoC strongly encourages the collaboration with programs that do not receive either of these sources of funds to provide comprehensive services to the community's homeless population.

### **Geographic Area: Jefferson, St. Lawrence, and Lewis Counties**

#### **Target Population:**

- Chronically Homeless
- Homeless
- Veterans
- Domestic Violence
- Substance Abuse
- Mental Illness

- Youth
- Physically Disabled
- Families
- Human Trafficking
- Re-Entry

### **Marketing and Non-Discriminatory Access**

CoC's and recipients of HUD CoC Program and ESG Program funding are required to affirmatively market their housing and supportive services projects to eligible persons who are least likely to apply in the absence of special outreach. This is regardless of race, color, national origin, religion, sex, age, familial status, marital status, handicap, actual or perceived sexual orientation, or gender identity. To ensure the coordinated entry process assists CoC Program and ESG Program recipients in meeting this requirement, a marketing strategy was developed.

### **Evaluation/Oversight:**

- **Grievance/Appeal process:** There will be formal grievance and appeals process managed by the coordinated entry committee. Consumer choice is central to coordinated entry and the appeals process will embrace that same person centered and easily navigable model. If a participant feels they did not receive fair treatment, they were denied resources or given an inappropriate referral, the participant may appeal these decisions or actions.
- The coordinated entry committee will engage in regular evaluations. The committee will recommend changes to the process after these evaluations. Changes will be recommended to and approved by the PNHC CE committee and Board.
- Coordinated Entry Committee formal meetings will occur monthly. This meeting should serve as a space for agency representatives to discuss participants' progress and referral status, troubleshoot any issues, and coordinate outreach. The agency representatives can make recommendations on suggested changes to the coordinated entry system.
- Programs will be evaluated on their level of participation in coordinated entry including having coordinated entry staff, participating in the monthly calls and meetings, taking referrals from coordinated entry, and regular updates on vacancies and waiting list. Participation in coordinated entry will be tracked through HMIS and Google Docs for quality, and agencies will be given the opportunity to submit their feedback on the process.

All components of the Coordinated Entry System will be reviewed and assessed by the CE Committee and the CoC Collaborative Applicant. Recommendations for policy change will be presented to the PNHC Board.



# Agency Agreement

I have received the Policy and Procedures Manual for the PNHC Coordinated Entry System and I understand that it is my responsibility to read and comply with the policies contained in this Manual and any revisions made to it.

Name of Participating Agency:

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Name of Designated Agency Representative authorized to sign:

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Title: \_\_\_\_\_

Signature of Designated Agency Representative:

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Date: \_\_\_\_\_

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