



HOME-ARP: Introduction to Coordinated Entry and Homeless Management Information Systems



Coordinated Entry (CE) and Homeless Management Information System (HMIS)

Purpose and Objectives for this webinar:

- PJs will better understand what the standard Coordinated Entry (CE) process is and its role in the Continuum of Care (CoC).
- PJs will be able to describe the core elements of the CE process and the populations served.
- PJs will know what HMIS is, who uses HMIS and what information is tracked in HMIS.
- PJs will be able to identify data in HMIS that is useful for the HOME-ARP allocation plan.

Role of Continuum of Care



Key Terms

Continuum of Care (CoC)

- Is the **system of services and housing interventions** designed to meet the needs of people at risk of and experiencing homelessness.

CoC Planning Body

- Is a regional or local **planning body** that coordinates housing and services funding for families and individuals at risk of and experiencing homelessness. This includes work with Emergency Solutions Grants (ESG) recipients and Consolidated Plan jurisdictions.

CoC Board

- Is the **collective of individuals designated to provide oversight and governance on behalf of the CoC planning body**. The CoC Board's responsibilities are defined by the CoC Planning Body.

CoC Responsibilities



Operate the Continuum of Care



Designate and operate a Homeless Management Information System (HMIS)

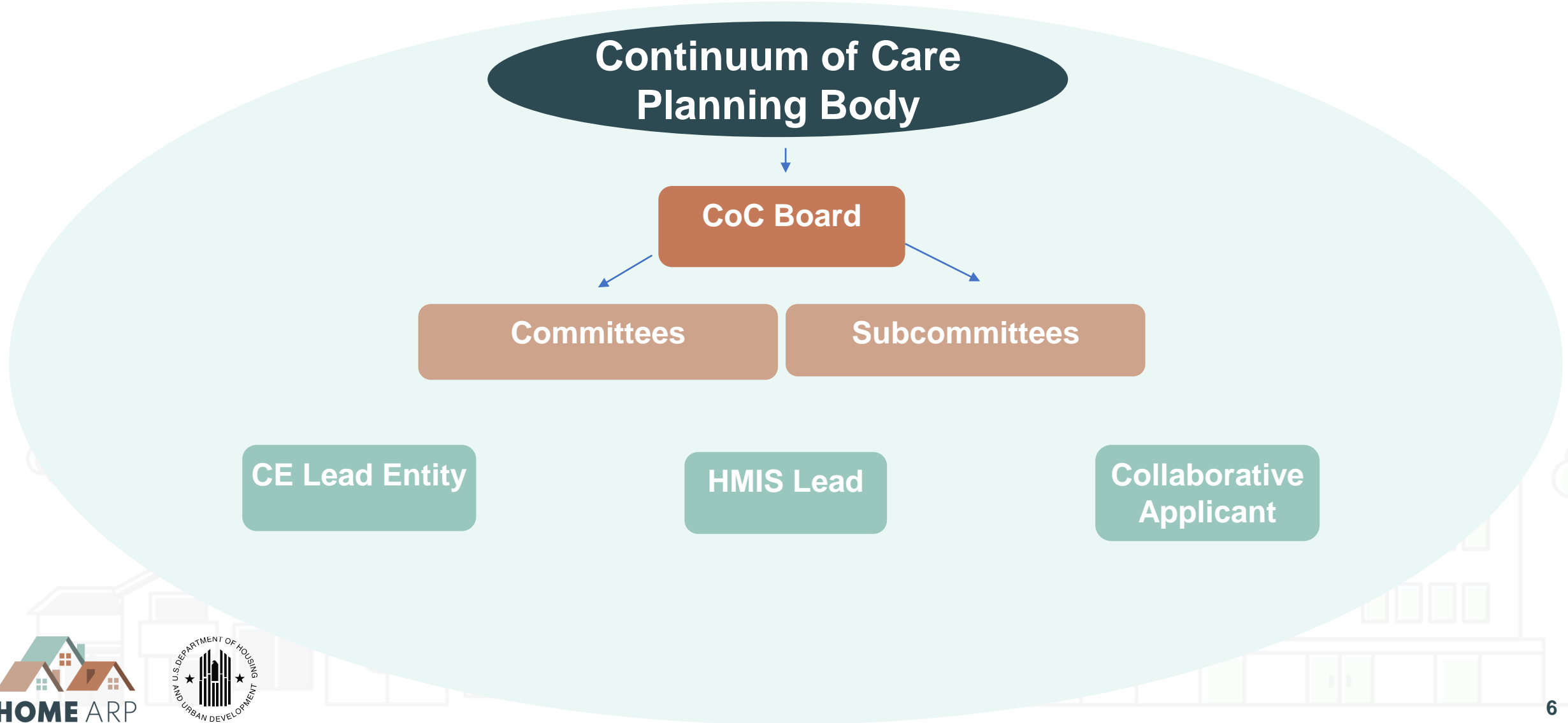


Plan and coordinate the CoC system of services and housing interventions



Create and enact the Violence Against Women Act (VAWA) emergency transfer plan

CoC Model



Overview of the Coordinated Entry Process



What is Coordinated Entry (CE)?

- 24 CFR 578 and Notice CPD-17-01 established that all CoCs must create, adopt and meet all requirements related to the use of standard Coordinated Entry (CE).
- CE is a centralized or coordinated process designed to coordinate program participant intake and assessment and provision of referrals within a defined area.
- There are four key components to CE: Access, Assessment, Prioritization and Referral.
- CE makes it possible for emergency shelters, housing and service providers to manage high demand for limited housing resources.
- CE makes it possible for the CoC to prioritize preferences and meet grant requirements for serving specific populations, like the chronically homeless.

How is CE established?

- A CoC's CE is created through consultation and collaboration with the ESG grantee and service providers within the CoC, other stakeholders, and people with lived experience of homelessness.
- The CE is approved by the CoC Board in accordance with the current Governance Charter requirements adopted by the CoC.
 - Changes, additions or expansions of the CE system may require review and approval by the CoC Board or other bodies designated for that task.
- Not all CoCs have the same governance structure and approval processes.

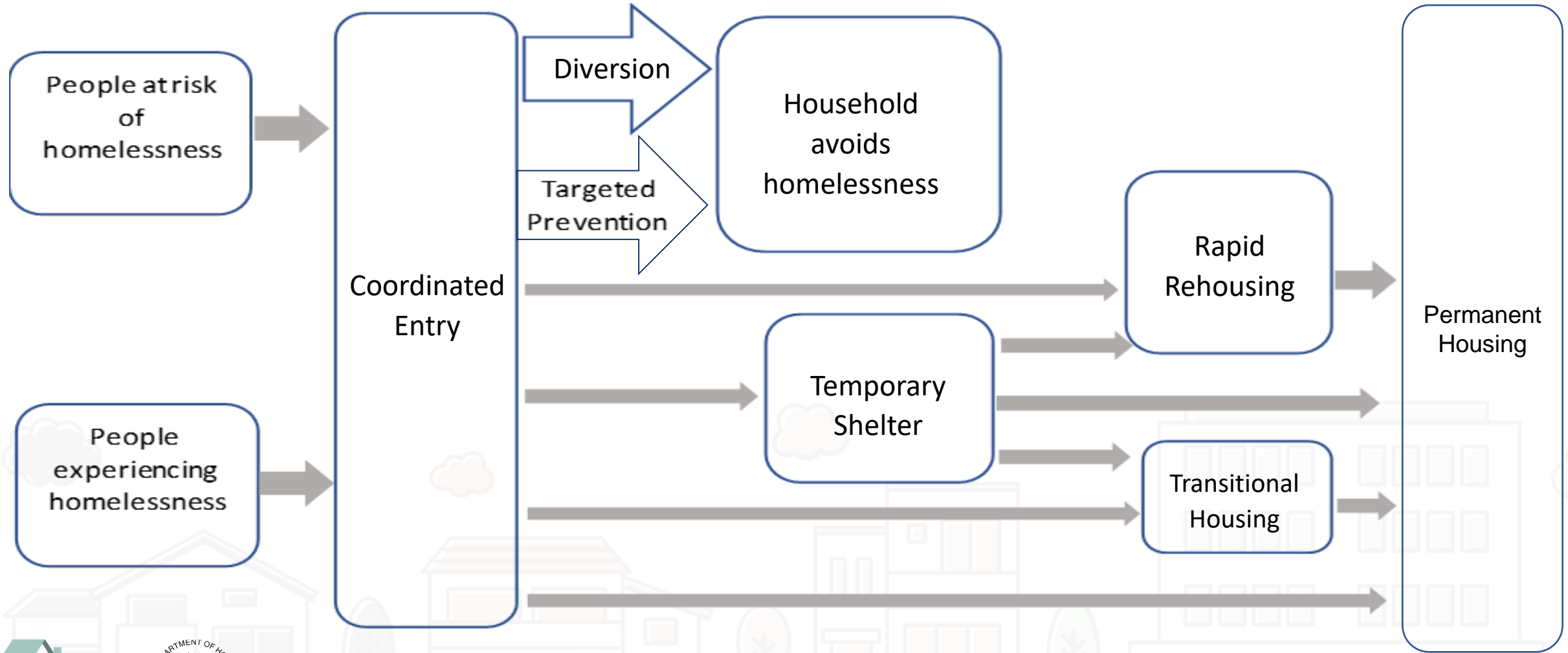
CE Geographic Requirements

- CE must cover the entire geographic area of the CoC.
 - A CoC operates in a geographic area (one or more metropolitan cities, urban counties, and other counties) that it will cover with its housing and service plan for homeless persons and persons experiencing a housing crisis.
 - Before using a CoC's CE as a referral method, a PJ must consider whether the CE covers the same service area as the HOME-ARP project or activity.
 - The [CoC/HOME-ARP/CDBG/ESG Recipient Crosswalk](https://www.hudexchange.info/resource/6484/coc-home-home-arp-cdbg-esg-recipient-crosswalk/) can be used to identify the CoCs within a PJ's geographic area.

<https://www.hudexchange.info/resource/6484/coc-home-home-arp-cdbg-esg-recipient-crosswalk/>



Model of Current CE Processes Before HOME-ARP



Components of Standard CE Systems

Access

Access refers to how households contact the CE system.

CoC's may create a centralized access point or a "no wrong door" (multiple sites) approach.

CoC's may create separate access points for specific populations.

Assessment

CoC's must adopt one or more standardized assessment tool(s) for the CE system.

Staff at access points complete an assessment protocol on all households presenting for services.

The assessment gathers information on household strengths, needs, preferences, barriers to regaining housing.

Components of Standard CE Systems cont.

Prioritization

CoC's must establish written policies and procedures to prioritize households based on level of vulnerability and need.

Those with higher acuity and needs are prioritized for housing and homeless assistance before those with lower acuity and needs.

Prioritization policies reflect the needs of the community.

Referral

CoC's must establish and follow a written process to make referrals to prevention, housing and services.

The CE referral process does not determine eligibility for housing or services.

For HUD CoC and ESG projects determining eligibility is a project level requirement.

CE Under HOME- ARP: Considerations for PJs



HOME-ARP Referral Methods

Use of HOME-
ARP expanded
Coordinated
Entry

Use of
Coordinated
Entry with other
referral methods

Use of a
project/activity
waiting list

PJs Should Consider

If the PJ uses CE as a referral method for its HOME-ARP projects or activities, the PJ and CoC should discuss:

- What are the CoC's priorities and how do they align with the PJ's HOME-ARP priorities?
- That the CoC's process for determining eligibility will need to be updated to incorporate the HOME-ARP QP definitions.
- What is the CoC's process for amending CE requirements or processes?



PJs Should Consider (cont.)

Does the CoCs CE geographic area align with the HOME-ARP project or activity geographic area?

- If the areas differ, how will the PJ combine referral methods to ensure access across the entire jurisdiction?

How will the CoC need to expand the CE to include all four HOME-ARP QPs?

- What outreach is needed to ensure that all four QPs can apply?

Is it feasible for the PJ to use HOME-ARP Expanded CE as the sole referral method for all or some HOME-ARP projects or activities?

- If not, can the CE be used in conjunction with other HOME-ARP referral methods and how will that coordination work?

Overview of Homeless Management Information System (HMIS)



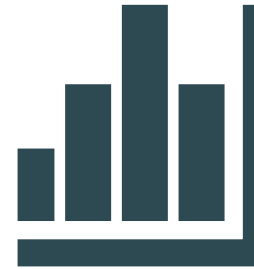
What is HMIS?

- HMIS is a locally implemented web-based data system used to record and analyze client, service, and housing data for individuals and families who are homeless or at risk of homelessness.
- HMIS is a general term used to refer to the data system used in a CoC.
 - Several web-based software packages exist that conform to HUD's HMIS data standards.
 - CoC's may build additional data elements, assessments or reports into the system, but they may not make changes that fall below HUD's HMIS data standards.

HMIS and HOME-ARP



Data collected by the CoC in HMIS can be used to complete sections of the HOME-ARP allocation plan needs assessment and gaps analysis.



CoCs may have additional data or information that would be helpful to the PJ as they plan to allocate HOME-ARP funds.



PJs may consider using HMIS to collect client level data and participate in system performance measures with the local CoC. The use of HMIS is not required under HOME-ARP.

Who Uses HMIS?

- All program participants of CoC and ESG program funds are required to use the HMIS system selected by the CoC.
- Service providers who are not recipients of CoC and ESG program funds are strongly encouraged to use HMIS to provide a comprehensive view of the performance of the local system and programs.
- Providers funded by HUD who provide services for victims of domestic violence, as described in the Violence Against Women Act (VAWA), are required to use a comparable database to ensure the privacy and safety of individuals and families served.

Uses of HMIS Data

- CoCs annually submit HMIS data to HUD to fulfill the congressional mandate to report on national homelessness.
- CoCs use HMIS data for local evaluation. This includes:
 - The number of households at risk of or experiencing homelessness;
 - The vulnerability and needs of those experiencing homelessness;
 - The inventory of housing interventions available, often broken down by sub-populations.
- At the program level, HMIS can produce reports on client characteristics, use of services, and outcomes. Some systems also include financial and other management data.

What Kind of Information is Collected?

Universal Data Elements (UDEs)

- Required for all projects participating in HMIS regardless of funding source
- Include demographic, household composition and homeless status

Program Specific Data Elements

- Collected to meet requirements of federally funded programs using HMIS
- May help CoCs in monitoring and planning service delivery and identifying client outcomes

Universal Data Elements

Universal Identifier Elements

- 3.01 Name
- 3.02 Social Security Number
- 3.03 Date of Birth
- 3.04 Race*
- 3.05 Ethnicity*
- 3.06 Gender
- 3.07 Veteran Status

Universal Project Stay Elements

- 3.08 Disabling Condition
- 3.10 Project Start Date
- 3.11 Project Exit Date
- 3.12 Destination
- 3.15 Relationship to Head of Household
- 3.16 Client Location
- 3.20 Housing Move-In Date
- 3.917 Prior Living Situation

**Denotes data elements also required by IDIS*

Program Specific Data Elements

Common Program Specific Data Elements

- **4.02 Income and Sources ***
- 4.03 Non-Cash Benefits
- 4.04 Health Insurance
- 4.05 Physical Disability
- 4.06 Developmental Disability
- 4.07 Chronic Health Condition
- 4.08 HIV/AIDS
- 4.09 Mental Health Disorder
- 4.10 Substance Use Disorder
- 4.11 Domestic Violence
- 4.12 Current Living Situation
- 4.13 Date of Engagement
- 4.14 Bed-Night Date
- 4.19 Coordinated Entry Assessment
- 4.20 Coordinated Entry Event

**Denotes data elements also required by IDIS*

HMIS Considerations for PJs



PJs Should Consider

What data does the CoC have that may be beneficial to PJ developing its HOME-ARP allocation plan?

- Does HMIS data describe who is experiencing homelessness and how the system is serving them?
- Does HMIS have data about the current homeless services and housing available in a CoC and any gaps in the service system?
- Does the CoC have other resources or data on race and ethnicity, gender, subpopulation characteristics (Veteran status or fleeing DV), and household size to understand gaps in the service system?



PJs Should Consider (cont.)

Should a PJ utilize HMIS to collect client level data and participate in system performance measures with the local CoC?

- Does the HOME-ARP project/activity include funding that requires the use of HMIS?
- Can using HMIS assist the PJ to track progress toward community-wide goals on housing and homelessness?

Conclusion



Conclusion

- CoCs are required to develop a standard CE process that provides access, assessment, prioritization and referral to services and housing for all individuals at risk of or experiencing homelessness.
- If a PJ is considering HOME-ARP Expanded CE as a referral method the PJ should collaborate with the CoC Board to make the required changes to the CE.
- CoCs are required to designate and operate a HMIS to track information about program and system performance.
- HMIS data may be a valuable resource for PJs in planning for HOME-ARP. However, HMIS data does not cover all QPs or contain a complete inventory of local housing and services available in the geographic area.

Disclaimer

This material is based upon work supported, in whole or in part, by Federal award number Z-21-TA-MD-0001 awarded to Abt Associates Inc. by the U.S. Department of Housing and Urban Development. The substance and findings of the work are dedicated to the public. Neither the United States Government, nor any of its employees, makes any warranty, express or implied, or assumes any legal liability or responsibility for the accuracy, completeness, or usefulness of any information, apparatus, product, or process disclosed, or represents that its use would not infringe privately-owned rights. Reference herein to any individuals, agencies, companies, products, process, services, service by trade name, trademark, manufacturer, or otherwise does not constitute or imply an endorsement, recommendation, or favoring by the author(s), contributor(s), the U.S. Government or any agency thereof. Opinions contained herein are those of the author(s) and do not necessarily reflect the official position of, or a position that is endorsed by, HUD or any Federal agency.

