



## **Enhance Early Childhood Program and System Integration with the Continuum of Care (CoC) Coordinated Entry Process**

**This is an excerpt from the Joint Policy Statement on Meeting the Needs of Families with Young Children Experiencing and At Risk of Homelessness released by the Department of Health and Human Services, the Department of Housing and Urban Development, and the Department of Education. It focuses on the second of three policy recommendations related to Coordinated Entry Processes. For the full statement, please visit the following website:**

**<https://www.acf.hhs.gov/ecd/joint-policy-statement-on-meeting-the-needs-of-families-with-young-children-experiencing-and-at-risk-of-homelessness-released>.**

### **Recommendation #2 - Enhance early childhood program and system integration with the Continuum of Care (CoC)'s coordinated entry process**

CoCs are required to develop and implement [coordinated entry processes](#),<sup>5</sup> which can facilitate partnerships and coordination between homelessness and early childhood efforts. Because most communities lack the resources needed to meet the needs of all people experiencing homelessness, coordinated entry is designed to help communities standardize and prioritize housing and services for individuals and families experiencing homelessness based on vulnerability and severity of service needs to ensure that those who most need assistance can receive it in a timely manner, no matter where or how they request help. Coordinated entry processes can also provide information about service needs and gaps to help communities plan their assistance and identify needed resources.

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<sup>5</sup> Provisions in the CoC Program interim rule at 24 CFR 578.7(a)(8) require that CoCs establish a *Centralized or Coordinated Assessment System*.



Coordinated entry looks different in every community; therefore how early childhood programs and systems integrate with their local CoC's coordinated entry process will look different in every community. A community may offer access to the homeless assistance system's coordinated entry process through a single location, a few strategically identified locations, any housing or service provider, or a virtual access point, such as a 2-1-1 telephone service. Coordinated entry processes may incorporate different protocols into the needs assessment and referral processes, as CoCs will likely have vastly different relationships with the organizations providing the resources available to serve families with young children. Strategies for effectively integrating early childhood needs and services with the coordinated entry process will depend on local resources, processes, and context.

### **Specific Recommended Strategies and Activities**

HUD, HHS, and ED strongly encourage early childhood programs to help with planning, decision-making, and other aspects of the local coordinated entry process to ensure that an early childhood perspective and expertise is incorporated into its design and implementation. Below are specific recommendations for both early childhood and CoCs to support this kind of collaboration.

- **Get Involved.** Effective coordinated entry processes require a comprehensive knowledge of community resources, operations, and protocols from all stakeholders, which in turn requires that early childhood and homelessness agencies get involved in system-level and community-wide discussions to build a shared understanding of their systems and to promote collaboration.

#### ***Early childhood providers can do this by:***

- Participating in local CoC meetings, particularly those focused on coordinated entry, and joining the committees established to design and implement the local coordinated entry process;
- Getting involved in determining the most appropriate coordinated entry access point for families with young children and in developing the right screening tool that best assesses the vulnerabilities and needs of families with young children experiencing homelessness; and
- Identifying and tracking, either informally or formally, families who need to be connected to homeless programs and, through partnership with the CoC, directing those families to the correct access points within the community's coordinated entry process.

#### ***CoCs can do this by:***

- Identifying, inviting, and encouraging early childhood providers to become CoC members and active participants in the CoC, including on coordinated entry design and implementation committees;
- Working with early childhood providers to determine the most appropriate access point and screening and assessment tools for families with young children. For example, a community may decide to locate an access point within the local department of family services, or an early learning hub that is a well-known and inviting location;
- A community may also add or rephrase assessment questions compared to the tool used for other populations; this might help improve the information the community receives in order to more quickly move a family into the most appropriate housing; and
- Briefing staff from local hospitals, birthing centers, child care agencies, and IDEA Part C and Part B programs that include early interventionists and early childhood special educators as well as obstetricians, pediatric primary care providers, early learning providers, home visitors, and McKinney-Vento homeless liaisons in schools on the overall purpose of the CoC's



coordinated entry and the types of referrals that a family might receive if they go through the process.

### Spotlight

#### **Virginia Williams Family Resource Center in DC Serves as an Access Point that Connects Families to Housing and Services for Parents and their Young Children**

Families in the District of Columbia experiencing a housing crisis can seek services at the [Virginia Williams Family Resource Center](#), a central intake and referral shop with on-site, integrated support from homeless services and other key services, including child care and schools, health, child support, Temporary Assistance for Needy Families ([TANF](#)), and employment. This one-stop-shop model recognizes that many of the most vulnerable families are involved in multiple systems and coordinated case planning may improve service delivery and family outcomes.

- **Implement Phased Screenings and Assessments.** Screening and assessment<sup>6</sup> implemented through the coordinated entry process might happen over a period of hours, days, or weeks. A phased screening and assessment process first addresses the most immediate emergency needs quickly, and then follows with identifying housing resources and barriers, evaluating vulnerability to prioritize for ongoing housing assistance, screening for program eligibility, and facilitating connections to non-housing resources, such as early childhood supports and services for parents. Ongoing assessments after entry into stable housing, which are often not a part of the CoC's coordinated entry process, should address additional needs of parents and young children such as accessing high-quality early care and education. Communities should also use coordinated entry assessment tools that are valid and reliable, if available, and appropriate for families and children. Questions might be uniquely tailored to the needs of families with young children, and criteria for prioritizing access to housing and services might weigh their risk of immediate harm higher than the weight of risk for households without young children.

#### ***Early childhood providers can do this by:***

- Working with the CoC to implement homelessness and housing instability assessments in early care and learning settings, such as Head Start centers, child care centers, preschools, and family child care;
- Working with the CoC to integrate screening questions into the coordinated entry process to understand whether young children are connected with physical and mental health, early learning, IDEA early intervention and preschool special education and developmental supports;
- Providing the CoC with information about how to refer families to trained professionals who can conduct [standardized developmental](#) and behavioral screenings to understand young children's needs using valid and reliable screening tools for young children. These screenings can help determine if children are progressing as expected in regards to their health, early

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<sup>6</sup> In the context of coordinated entry, the term *assessment* involves a tool or tools that measure an individual's need for housing and services. *Behavioral screening and assessment* is used if the screening results are positive for a particular behavior or symptom. *Ongoing assessment* can occur both for behavioral services, such as mental health or addiction services, and for other types of services and supports, such as more intensive rental assistance, throughout a family's involvement in the homeless system.



learning, and developmental needs, or if additional evaluations and assessments are needed to identify a possible delay or disability; and

- Assisting shelter and housing providers to identify resources to assist families when additional needs are identified, including connections with health centers and providers, local behavioral health providers, developmental specialists, the local [IDEA](#) Part C or Part B, section 619 preschool program, early educators or the public school system depending on the child’s age, and the early learning and child care resources available in the community.

**CoCs can do this by:**

- Actively engaging early childhood providers in the design and implementation of coordinated entry screening and assessment tools and protocols for families with young children;
- Including staff trained to screen for children’s developmental, social-emotional, and behavioral health needs in the coordinated entry process to connect the children with needed resources;
- Actively connecting to appropriate partner agencies that can directly provide more detailed developmental evaluations and assessments later in the process. This includes working with McKinney-Vento homeless liaisons to ensure families and children experiencing homelessness are able to access early intervention services through IDEA Part C and preschool and special education services through local IDEA Part C and Part B, section 619 preschool programs; and
- Providing an assessment space and process that is inviting and trauma-informed to assure that parents’ and young children’s mental health needs are supported and that those who have experienced trauma are not re-traumatized during the screening and assessment process.<sup>xlviii</sup>

**Spotlight**

**Screening Children for Developmental Delays within the Homeless System**

In Chicago and Philadelphia, homeless shelter workers and those doing coordinated entry are trained to [screen children for developmental delays using tools such as the Ages and Stages Questionnaire](#). If screening results indicate the child might be suspected of having a disability or developmental delays, the family is quickly connected to programs that provide specialized developmental services. Detecting potential delays and intervening early can improve children’s long-term development and well-being.

In Columbus, OH, the McKinney-Vento program that serves homeless children and youth in schools supplements its early childhood efforts by using Title I funding to support an [early childhood advocate and parent consultant](#) at local emergency shelters. The early childhood advocate ensures that young children experiencing homelessness are screened for developmental delays and/or disabilities and connected with early childhood programs. The parent consultant works to encourage parents to become more involved in their children’s early education and care.

- **Engage in the Prioritization Process.** Coordinated entry aims to ensure that people experiencing homelessness with the most severe service needs and highest vulnerability are prioritized for housing and services. Informed by the [Coordinated Entry Policy Brief](#) and additional forthcoming guidance, communities should decide what factors are most important and use all available data and research to inform their prioritization decisions.



***Early childhood providers can do this by:***

- Working with the local CoC to develop the criteria used to assess the needs of and prioritize pregnant women and families with young children experiencing homelessness for housing assistance;
- Educating the local CoC on what makes young children and their families particularly vulnerable, including the immediate effects on children’s development and the long-term effects seen in outcomes later in life, and working with the CoC to determine how to prioritize these families – including those who are unsheltered – for assistance in the community among the other established community priorities;
- Prioritizing enrollment for children who are experiencing homelessness, as is currently done in Head Start,<sup>7</sup> and considering them “automatically eligible” for early childhood programs, such as Head Start and public preschool programs funded under Title I, Part A of the ESEA do; and
- Identifying appropriate high-quality child care available within the community.

***CoCs can do this by:***

- Actively engaging early childhood providers in the decision making process concerning coordinated entry prioritization criteria, leveraging their expertise in the unique vulnerabilities and needs of pregnant women and families with infants, toddlers, and young children;
- Working with early childhood providers to determine how to prioritize families with young children among the other established community priorities when there are limited resources; and
- Investigating whether the unique vulnerabilities and needs of pregnant women and families with young children are appropriately captured in the current community prioritization process, recognizing that current tools may unintentionally include biases that preference certain populations, vulnerabilities, and needs over others.

**Spotlight**

**Prioritizing Housing for Families At Risk of or Experiencing Homelessness**

The [Healthy Start in Housing](#) (HSiH) program is a collaborative initiative of the Boston Public Health Commission (BPHC) and the Boston Housing Authority (BHA) that helps pregnant and parenting families at risk of or experiencing homelessness, who have a child under the age of 5 who has a complex condition requiring specialty care, secure and retain housing. HSiH also offers intensive case management, including weekly home visits. BPHC and BHA, through HSiH, determined that these families should be prioritized and, as a result, set aside [75 housing units](#) for this population through a HSiH pilot project, allowing some women to bypass the normal 5-year waiting list. BPHC helped determine eligibility and facilitated the intake process. While not formally connected to the CoC coordinated entry process, this is an example of a local partnership to prioritize families with young children for access to housing supports.

- **Develop Two-Way Referral Processes.** Coordinated entry processes are designed to refer individuals and families to appropriate and available housing and service interventions as quickly as possible. As previously discussed, each early childhood program or system will connect differently

<sup>7</sup> In addition, the Head Start Program Performance Standards Final Rule, published in September 2016, includes an option for programs to reserve up to 3 percent of slots for children experiencing homelessness or in foster care. The standards require these slots to be filled within 30 days or they become vacant slots.



with coordinated entry depending on local factors, but the community should clearly define how families with young children who attend early childhood programs will connect to coordinated entry when appropriate and how families who present directly to a coordinated entry access point will be connected to early childhood supports when appropriate. Both providers at a coordinated entry access point and early childhood providers have a responsibility to make appropriate referrals to each other; these protocols could include procedures to ensure families are actually connected with other supports, such as through direct provider-to-provider communications, rather than simply offering a phone number for families to contact other supports themselves.

**Early childhood providers can do this by:**

- Collecting information about housing status when conducting intake for their programs. For example, early learning providers, child care agencies, home visitors, as well as other people who interact with young children including hospital obstetric departments and pediatric primary care providers, might include questions concerning housing stability during intake into their programs;
- Supporting families who need housing services by referring and connecting them with the coordinated entry process;
- Receiving referrals from the CoC's coordinated entry process as well as from other agencies, including housing providers, that participate in the CoC which may identify additional needs when a more comprehensive screening is conducted after entry into a specific housing project; and
- Becoming familiar with eligibility requirements for the major housing programs (e.g., public housing, voucher programs, CoC program, ESG program), and local housing and emergency shelter options (e.g. prevention services, emergency shelter, rapid re-housing, transitional housing, permanent supportive housing) to assist in referring families to the local CoC.

**Spotlight  
Head Start Program Helps  
Connect Families to Stable  
Housing**

Telamon Buen Inc. Pastor Ministries, a Migrant and Seasonal Head Start Program in Holland, Michigan, [assesses a family's housing status](#) when they enroll, and works closely with the National Farmworker Jobs Program to help families find housing, if needed. In 2013, Telamon Buen Inc. helped connect families, including approximately 115 children experiencing homelessness, to safe and stable housing.

**CoCs can do this by:**

- Collecting information about enrollment in early childhood programs through a CoC's Homeless Management Information System (HMIS) and making referrals to early childhood providers, including Head Start and child care supports, IDEA services if there is a developmental concern, and home visiting if appropriate and available. When these referrals occur will vary across communities. For some, they will occur *after* the initial assessment, which is designed to determine immediate shelter and housing needs, and *after* a family has already been connected to housing and services. For others, quickly understanding whether families are enrolled in early childhood programs and making appropriate referrals will occur in *tandem* with the initial assessment phase. Regardless, the goals of either strategy are to make sure that appropriate questions are actually asked early in the process, that connections to early childhood programs are actually made when needed, and that connections are made as quickly as possible. A CoC must ensure that this additional information collection and referral process does not delay or otherwise impact a family's access to housing;
- Becoming familiar with eligibility requirements for early childhood programs, and which of the programs prioritize children and families experiencing homelessness (including Head Start,



CCDF, Federal Home Visiting Program, IDEA Part C and Part B, section 619; and Title I, Part A of the ESEA), making referrals from coordinated entry when appropriate, and training their local housing providers on these eligibility requirements so that they can make referrals even after a household is being served by their project when it is appropriate; and

- Visiting the [Head Start Locator](#) to find area Head Start and Early Head Start programs; the [Federal Home Visiting Program State Fact Sheets](#) to learn about State and territory home visiting programming; the [listing of Tribal Home Visiting grantees](#); the U.S. Department of Education, Office of Special Education Programs' [IDEA website](#) and the [list of State Part C and Part B State Coordinators](#) to contact; identifying the local IDEA child find office; and [Child Care Aware](#) an organization that partners with The Office of Child Care to provide resources and information to parents with children in child care or who are seeking child care.