Coordinated Access System (CAS) Scorecard Guide

What is the Coordinated Access System Scorecard (CAS Scorecard) Guide?

This Guide explains what the CAS Scorecard is, makes suggestions for how to use it, and walks you through the questions (providing a further description of what the question means along with tips and resources).

This Guide is not the CAS Scorecard itself. The on-line CAS Scorecard and further information about Coordinated Access Systems can be found on the Coordinated Access System page under Resources on the 20,000 Homes Campaign website at www.20KHomes.ca.

What is the CAS Scorecard?

The CAS Scorecard is a 23 question self-assessment tool to assist you to take a snapshot of your local progress towards a quality Coordinated Access System (CAS) that is robust enough to help you reach and sustain zero on chronic homelessness.

This scorecard's questions are aligned with US Housing and Urban Development (HUD) Coordinated Entry Requirements released in January 2017 and are informed by Community Solutions' work with communities to design and build high-functioning systems. 20KHomes then worked with Community Solutions to ensure the questions applied in the Canadian context.

While the 20,000 Homes Campaign is focused on ending chronic homelessness, a robust coordinated access system should work for all subpopulations served by your system. These scorecard questions will help you build a comprehensive system for ending all homelessness and will support 20KHomes communities to continue their efforts in ending chronic homelessness specifically.

Please read our thoughts on how to use this tool below before continuing onto the assessment questions.

How to Use the CAS Scorecard

Invite the right people to the room. Take the CAS Scorecard together with Community leaders, such as the governing board or planning group, your 20KHomes lead, and your data guru. Gathering stakeholders keeps everyone moving in the same direction as your plan changes.

The CAS Scorecard is organized into five sections: 1) Management and System Leadership, 2)

Access, 3) Assessment and Prioritization, 4) Referral, and 5) Data & Case Conferencing. Completing the CAS Scorecard should take 30-60 minutes, depending on how much conversation it sparks.

Your score is a baseline, not a judgement. It should help you create action plans and measure improvement towards a comprehensive Coordinated Access System. This tool is for your benefit and is not required by any funder or government. Work with the 20KHomes team to organize your work plan, get resources, and strategize your changes.

If you are a 20KHomes Campaign Community, you will be asked to complete the CAS Scorecard on a quarterly basis once you have achieved a Quality By-Name List. If you are a 20KHomes Campaign Reporting Hero and have received your Performance Management Tracker, you will find the CAS Scorecard results you submitted on-line in the system dashboard of your Performance Management Tracker.

CAS Scorecard Questions

(With Questions in black font, Further Information in red font and Tips & Sample Resources in blue font)

Which Community are you representing? _____

Your Name: _____

Your Email Address:_____

Part 1: Management and System Leadership

Governing Body
1. Does your Community have a governing body that makes timely CAS decisions that incorporate regular feedback from stakeholders, including people with lived experience of homelessness?

   o **Yes**
   o **No**

The governing body may be a working group, committee, or other planning group that is working on Coordinated Access within your community.

TIPS & Resources:
- Determine which entity within your community is responsible for the design, implementation and oversight of your Coordinated Access System (CAS). Establish roles and responsibilities early in the planning process.
- Appoint a planning committee (for CAS system design and implementation) that includes your CE/CBO/Service Manager, lead agency staff, funders, a diverse representation of providers, and community stakeholders, including people with lived experience
- Identify key partners, through existing or new relationships, to bring to the table for regular input during planning. Include mainstream or non-traditional partners
- Bring homeless service organizations together regularly to review shared data to inform an ongoing discussion of strategies for improvement towards collective goals
- Sample Resources – HUD Exchange Coordinated Entry Community Samples Toolkit – Planning & Management and Oversight, Cook County, Il CES Protocols, Waterloo Region PATHS Framework, Calgary Homeless Foundation Coordinated Access and Assessment

Documented Policies and Procedures
2. Does your Community have documented and approved policies and procedures for each of the following system components: (1) access, (2) assessment, (3) prioritization, and (4) referral?

    o **Yes**
    o **No**

Written policies and procedures are a best practice for the long-term success of your CAS. They clarify expectations and roles, help to train new staff, and serve as a crucial reference to partners.

TIPS & Resources:
- Designate a committee or workgroup to draft policies that will be proposed to the CAS governing body for approval. Make sure to include a diverse representation of providers.
- As you are designing/launching your CAS, develop an outline of all policies and procedures that need to be drafted and approved, ensuring it includes all aspects of the Coordinated Access System (CAS) process from Access to Referral.
- Review existing policy and procedure manuals from other communities for ideas or suggestions that may apply to your community.
- Establish a clear oversight and decision-making body and understanding of who is responsible for approving CAS policies.
- Ensure your policies outline who within your community is responsible for developing and updating CAS policies/procedures, as well as how new/revised policies will be transparently shared/communicated with relevant stakeholders.

- Sample Resources - HUD Exchange Coordinated Entry Community Samples Toolkit, Chicago Policies And Procedures, Sample By-Name List "Inactive Policy" – from Waterloo Region

Annual Evaluation

3. Does your Community conduct an annual evaluation of your intake, assessment, and referral processes that (1) consults with program participants as well as participating projects and (2) results in updates to the CAS policies and procedures?

   o **Yes**
   o **No**

Evaluations are a critical part of your community's continuous improvement efforts. They should use data to compare participant outcomes to agencies' outputs. They should also include qualitative data from program participants, whose perception of their experience will not be captured in numbers. Data from your evaluations should result in actionable improvements to your CAS.

TIPS & Resources:
- Adopt a CAS monitoring and evaluation plan that will identify inefficiencies in the system, as well as service needs and gaps.
- Set Coordinated Access System performance measures, both at the system- and project-level. Determine which measures you will track, where the data will come from, and how it will be shared
- Hold monthly leadership meeting to review data dashboards, evaluate gaps in resources, and find bottlenecks in the system
- Implement a process to gather feedback from program participants and providers on a regular basis. Ensure that your monitoring plan outlines how this feedback will be incorporated in system refinements
- Sample Resources - HUD Exchange Coordinated Entry Community Samples Toolkit - Evaluation, Cook County, Il CES Protocols (evaluation pg. 12), Minnesota CES Policies And Procedures (evaluation pg. 10 & 12), Dashboards - US Built for Zero, Chicago, and Edmonton

Documented and Trained Assessors

4. Does your Community keep a documented list of agencies who are responsible for conducting assessments, and are these agencies provided regular training opportunities, including staff onboarding on how to complete assessments?

   o **Yes**
   o **No**

Training should be offered for onboarding new staff, as well as at least one annual opportunity. It should cover how assessments are to be performed with fidelity to the written policies and

procedures, prioritization, uniform decision-making, and referrals.

TIPS & Resources:
- As part of your governance structure, identify who is responsible for ensuring all assessment sites/staff are trained
- Host regular/ongoing (at least annual) trainings on the use of your common assessment tool for all assessment sites/staff.
- Conduct community trainings on client-centered outreach for all providers conducting outreach including mental health providers and non-traditional partners that have regular contact with those experiencing homelessness. Sample Resources – CAEH Training and Technical Assistance, Homeless HUB – Street Outreach, T3 Tapas – Street Outreach, OrgCode – Street Outreach, and Sam Tsemberis Outreach Presentation

Part 2: Access

Overall Resources: HUD Exchange Coordinated Entry Community Samples Toolkit – Access

Full Coverage
5. Do your outreach engagement efforts and system access points cover the Community's geographic area, ensuring access to the system regardless of where people present?

   o **Yes**
   o **No**

A good CAS must be accessible to anyone experiencing homelessness, even if they are not actively seeking services. Consider how your community will engage people experiencing homelessness who might encounter the greatest difficulty reaching an access point due to geography, physical or mental disability, mistrust of the system or concerns about personal safety.

TIPS & Resources:
- Define the activities that should happen at system access points and identify agencies that could best carry them out; consider the best way to communicate these expectations and engage the agencies in participation.
- Facilitate a meeting with organizations doing outreach and serving as access points to map and grid the community's geography so that you can see together gaps as well as points of duplication. Sample Resource - Mapping Outreach Coverage Facilitation Guide
- Ensure outreach coverage at times and places the client is most likely to be present; coordinate with community partners (e.g. food pantries, emergency services, libraries) to make individualized outreach plans that maintain engagement via the client's social networks.

- Schedule weekly huddles with outreach workers, organized by geographic assignment, to discuss strategies for coverage and how to engage those who have been identified as a priority or difficult to engage
- Collaborate with the police department to identify encampments and ensure that geographic areas with high concentrations of homelessness - "hot spots"- are being added to the By-Name List.
- Sample Resources – Outreach and Engagement Lessons Learned from SAMSHA , Case Studies (access may be limited to Built for Zero Collaborative Communities): RIVERSIDE, CA; SPRINGFIELD, MA; WASHINGTON D.C.; and BERGEN COUNTY, NJ.

Outreach Protocol

6. Are persons encountered by your Community street outreach staff offered access to the system—and the services and housing provided through that system—exactly as people who present as homeless at physical access points?

   o **Yes**
   o **No**

Access to your system will be consistent and equitable only if each person or household experiencing homelessness is offered a similar process, regardless of whether they walk into an office or are located by outreach staff. Each staff member who comes into contact with a person experiencing homelessness must be trained to offer access consistently and fairly.

TIPS & Resources:
- Define the role for outreach teams and train them to serve as an access point; duties may include administering assessments, adding individuals to the by-name list, and linking to services or interventions.
- Create an outreach schedule showing who covers which parts of the community or area and at what times, and make sure it is known to all parties.
- Include permanent housing from the beginning of outreach conversations, considering other steps needed to build trust and relationships.
- Partner with emergency services providers, such as law enforcement, firefighters, and EMTs, to identify clients as they present for services and connect them to the coordinated entry system.
- Sample Resources – see above

Access to Emergency Services After Hours

7. Does your CAS allow for access to emergency services, such as emergency shelter or temporary accommodations for people experiencing a housing crisis, outside of traditional operating hours?

   o **Yes**
   o **No**

A crisis response system should be able to respond to emergencies or requests for assistance immediately, even in the middle of the night. Your CAS must be accessible when people need it.

TIPS & Resources:
- Identify agencies that provide services after normal business hours, such as shelter, outreach and crisis intervention, and assess their willingness to serve as access points
- Use 211 as a 24-hour central hotline to connect individuals to coordinated entry access points after normal business hours
- Review your shelter system to ensure:
    o Intakes are received outside of normal business hours, ideally 24 hours a day.
    o There are options for low- or no-barrier shelter that offer 24-hour access, with a focus on individuals who are highest priority for permanent supportive housing.
- Sample Resources - San Francisco Navigation Center Overview, and Case Study (access may be limited to Built for Zero Collaborative Communities): SACRAMENTO, CA

Marketing and Access to Vulnerable Populations
8. Is your Community proactively marketing and removing barriers to accessing the system, especially for people who are least likely to access it on their own?

    o **Yes**
    o **No**

Consider people experiencing chronic homelessness, youth, families, Indigenous/Aboriginal populations, LGBTQ populations, survivors of domestic violence, and people with disabilities. Your community should make special efforts to make these populations aware of your CAS and help them understand how to access it.

TIPS & Resources: (to be added when available)

Diversion and Prevention
9. Does your Community offer diversion services to people who are newly homeless and requesting access to emergency shelter, as well as prevention services to those who are not technically homeless but experiencing a housing crisis?

    o **Yes**
    o **No**

When a person presents at an emergency shelter, your community should assess them for diversion opportunities, such as staying with a relative or friend until they find a stable housing situation. Diversion keeps people out of the homelessness system and conserves resources. Similarly, prevention creates opportunities for people who may soon face homelessness and helps them preserve their current housing.

TIPS & Resources:
- Implement diversion practices and resources; begin by establishing agencies to serve as access points to ensure that all clients will have access to diversion services, regardless of where they enter the system.
- Implement a standardized diversion screening tool across all agencies that serve as access points. Sample Resource – <u>Prevention/Re-Housing VI-SPDAT – Single Adults</u> and <u>Prevention/Re-Housing VI-SPDAT – Families</u>
- Train frontline staff in the conflict-resolution approach, a conversational problem-solving method that assists individuals in identifying or returning to safe housing (thereby diverting them from entering the homeless system). Sample Resource – <u>Conflict Resolution Overview Presentation</u>
- Create a small, flexible funding pool to be used as targeted financial support for one-time needs, such as groceries, storage, or car repair, in service of helping people re-secure permanent housing; empower staff to provide this assistance immediately, without administrative delays, within the bounds of defined protocol and policies.
- Implement an eviction-prevention program for individuals who have been housed through the coordinated entry system.
- Sample Resources – <u>Waterloo Region Diversion Overview Report (2013)</u>, <u>Systematic Diversion Presentation</u>, <u>OrgCode Diversion Blog</u>, <u>Connecticut Coalition to End Homelessness Shelter Diversion Resources</u>, <u>Prevention and Diversion Toolkit</u>, <u>Shelter Diversion – Respite Housing for Youth</u>, Case Studies (access may be limited to Built for Zero Collaborative Communities): <u>ARLINGTON, VA</u>; <u>TACOMA, WA</u>; <u>CHICAGO, IL</u>, and <u>NEW YORK CITY, NY</u>

Safety
10. Has your Community ensured that victims of domestic violence, dating violence, sexual assault or stalking can safely access and participate in the system and that their safety is not jeopardized by participating in the CAS?

- o **Yes**
- o **No**

Your community should undergo safety planning to ensure that proper privacy measures are in place to safeguard victims. It is vital that your system protects these individuals' information and does not allow for misuse or accidental public view.

TIPS & Resources:
- Ensure that the CAS process addresses the physical and emotional safety, as well as privacy and confidentiality needs, of participants by developing strong relationships between the housing stability system and local domestic violence and victim service providers
- Create a virtual access point for victims of domestic violence, such as 211 or 211.org, that can be accessed from any location where the individual or household feels safe; consider

using a local domestic violence hotline as an access point, even when other access points are available.
- Consult with local victim service providers to incorporate screening questions regarding domestic and sexual violence into your assessment tool, taking care to ensure that assessment does not retraumatize the individual or household
- Train all CAS staff on the dynamics of domestic violence, privacy, confidentiality, and safety planning, including how to handle emergency situations at both physical and virtual access points
- Ensure that all CAS staff have up-to-date information on domestic violence shelters, general homeless shelters, and housing options best equipped to serve individuals or households experiencing domestic violence
- Design a referral process from CAS to victim service providers in partnership with local victim service providers, as well as provincial domestic and sexual violence coalitions; preferably referral happens with a warm hand-off
- Ensure that CAS process includes procedures for how referrals will be made to victim service providers that are not participating in the coordinated entry system
- Sample Resources – Domestic Violence – The Homeless HUB, HUD Victim Services FAQ, US Alliance to End Homelessness Checklist: Incorporating Domestic Violence Providers into a Coordinated Assessment Process, National Center on Family Homelessness Toolkit: Integrating Services for Survivors of Domestic Violence Experiencing Homelessness, and Women Shelter's Canada – Housing, Homelessness and Violence Against Women (2017)

Part 3: Assessment and Prioritization

Overall Resources: HUD Exchange Coordinated Entry Community Samples Toolkit – Assessment and Prioritization

Standardized Assessment
11. Does your CAS use a common assessment tool and process, including questions and scoring criteria?

- o **Yes**
- o **No**

Your CAS's method of assessment must be written, standardized, and consistently administered. Your CAS may use variations on the common assessment tool for specific populations, such as families, youth, Indigenous/Aboriginal individuals or single adults, but a process must be used consistently inside those populations.

TIPS & Resources:
- Consider the styles of assessment necessary at each stage of your system's process, as well as assessment tools that will be needed for each stage; for instance, an initial screening for diversion services might be completed before conducting a full assessment.

- Schedule a meeting with executive directors of community-based organizations, review the benefits of the common assessment tool(s) that your community has selected, and ask for their commitment to implement it with their staffs
- Develop additional questions or assessments needed to determine eligibility and priority for the available housing resources and programs.
- Train every person that administers the common assessment tool to use the same introductory script. This helps to protect against variation and promotes reliability of the tool.
- Sample Resources – Washington, DC Coordinated Assessment and Housing Placement Do's and Don'ts, VAT Canadian Training Manual, and Case Study (access may be limited to Built for Zero Collaborative Communities): LAS VEGAS

Prioritization Policy

12. Have you created a prioritization policy that (1) contains a specific, defined set of criteria, (2) is publicly available, (3) includes all housing types, and (4) has been approved by the planning group?

   o **Yes**
   o **No**

An individual's assessment data is matched against your community's prioritization policy to create a housing match and make a referral. Your prioritization policy should be transparent so that the general public, including anyone affected by the policy, can read and understand it. A transparent policy empowers users and creates accountability for providers.

TIPS & Resources:
- Use By-Name List data to understand levels of acuity and vulnerability across populations, then use this understanding to inform prioritization policies for available housing resources
- Incorporate Housing First principles into the prioritization policy and provide routine Housing First training to key providers, both staff and leadership, to ensure fidelity to the model.
- Adopt a prioritization policy within the CAS written standards.
- Require that all supportive housing subsidies and units are subject to prioritization policies, thereby closing "side doors" for referrals to supportive housing providers
- Sample Resources – Canadian Housing First Toolkit, Waterloo Region PATHS Framework – Prioritization Policy – Appendix C, Washtenaw Country CE Housing Program Prioritization – Prioritization Tie-Breakers (page 4)

Part 4: Referral

Overall Resources: HUD Exchange Coordinated Entry Community Samples Toolkit – Referral

Uniform Referral Processes
13. Does your CAS have a uniform referral process that matches individuals to available housing resources based on your documented and approved policies?

- o **Yes**
- o **No**

When a housing resource becomes available, it should set into motion a process that connects an individual from the by-name list to that resource, so long as the individual fits its eligibility criteria and affirmatively chooses the resource. The individuals being referred should be selected by the community's prioritization policy. The steps of this process should be communicated to housing providers, service providers, and the person experiencing homelessness. Some effective communities staff a role to coordinate these connections in a timely and consistent way.

TIPS & Resources:
- Identify all access points and establish a referral protocol to follow regardless of point of entry; use a process-mapping exercise to identify opportunities to eliminate unnecessary steps, streamline coordination, and create a uniform process across providers.
- Host regular trainings for all providers to ensure consistency in their referral processes and fidelity to the established protocols.
- Develop a referral and HMIS workflow that outlines each step of the process, including data entry points and persons responsible. Sample Resource - Houston Coordinated Access HMIS Workflow
- Assess the possibility of automating some parts of the referral process, which increases consistency with prioritization and saves staff time.
- Conduct focus groups or client interviews to identify problems in the existing referral process and inform development of a uniform and coordinated referral process.
- Sample Resource - See Santa Clara County Matching Process

Vacancies Filled According to Prioritization
14. Are providers filling all vacancies according to the prioritization and referral policy, using a central priority list? This means that all "side doors" have been closed.

- o **Yes**
- o **No**

Side doors, meaning housing or services that are matched outside the prioritization process, complicate the user's experience and may create problems for CAS-participating providers. In

order for your CAS to be effective, your prioritization policy should include, at minimum, all available housing types, with all referrals made according to the prioritization policy.

TIPS & Resources:
- Create community-wide standards that define the prioritization policy for each program type within the CAS.
- Close "side doors" for referrals to supportive housing providers by requiring that all new housing subsidies or units are entered into a central system and subject to prioritization policies; ensure that all applicable funders are aligned, set clear expectations for closing the side doors, and hold providers accountable.
- Set policy that non-dedicated permanent supportive housing beds are to be used first for people prioritized from the By-Name List and that such referrals come exclusively through the CAS.
- Ensure that all beds dedicated for people experiencing homelessness receive referrals exclusively form the CAS.
- Sample Resources - Houston Action Plan, Case Studies (access may be limited to Built for Zero Collaborative Communities): HOUSTON, TX; OAKLAND COUNTY, CA POLICIES; LANCASTER, PA; LOS ANGELES, CA

Vacancy Updates

15. Does your CAS have a process in place for housing program and permanent housing providers to regularly input updates about vacancies and new resources?

    o   **Yes**
    o   **No**

To be relevant, your CAS must contain up-to-date information about program and housing vacancies. Providers are more likely to submit information if the submission process is fast, uncomplicated, and has few technological barriers.

TIPS & Resources:
- Create a shared database, or use your HMIS, to which providers can submit units and bed openings to be filled through the CAS.
- Include permanent housing providers in case conferencing meetings and create structures to share information regarding vacancies and referrals between such meetings.
- Establish a process to give providers clear direction about how and when to submit openings and how they can expect referrals via the CAS. See
- Sample Resources - Santa Clara County Program Inventory, Washington D.C. Policies and Procedures, Minnesota Policies And Procedures

Housing Navigation Support

16. Does your community have the capacity to offer housing navigation support, with a clear point of contact, to people who are prioritized for housing and may need additional support to move from homelessness to housing?

   o   **Yes**
   o   **No**

Many communities are learning that providing housing navigation services is critical to supporting vulnerable people who, on their own, may encounter difficulty with the administrative duties necessary to secure housing. Individuals may need navigation once they have been prioritized, though not all users of your CAS will require it. Communities who are further along in designing a CAS often assign a single point of contact who an individual being housed can call for help; this point of contact is also accountable to their client for ensuring a timely and uncomplicated experience navigating the system through to program intake and/or housing move-in.

TIPS & Resources:
- Hire CAS staff to function as housing navigators who work with clients across the community or area. See sample Housing Navigator Job Description
- Develop protocol to prioritize individuals' need for housing navigators who provide additional support moving into housing; use case conferencing to triage and assign them.
- Adopt a team approach for navigation rather than assigning a single case manager per client.
- Expand capacity by recruiting and training volunteers to serve as housing navigators, with oversight provided by case managers. See Sample Volunteer Housing Navigator Job Description
- Sample Resources – Veteran's Affairs Navigator Toolkit, Washington D.C. Policies and Procedures (Housing Guide Specialist, p. 10).

Reduced Barriers

17. Do your Community's projects have minimal screening criteria, providing housing and services regardless of perceived barriers and limited to only that screening criteria required by funding contracts?

   o   **Yes**
   o   **No**

Perceived barriers may include substance use, no or low income, domestic violence history, sexual orientation, gender identity or expression, resistance to receiving services, and criminal record.

- Create standardized screening and eligibility criteria for all project types in the community or area and ensure that the minimum criteria required by funders are the only criteria in place.
- Pool local resources from the municipality, etc., to consolidate services into a single collaborative model focused on reducing barriers, streamlining screening, and moving people into housing as quickly as possible.
- Provide regular, shared trainings on the Housing First approach for providers and community alike; put forward strategies that inform the development of system-wide screening criteria that can serve all clients, regardless of perceived barriers.
- Sample Resources – Canadian Housing First Toolkit, Case Studies (access may be limited to Built for Zero Collaborative Communities): RIVERSIDE, CA; BERGEN CO., NJ; and HOUSTON, TX

Client Choice

18. Does your CAS have a process to allow potential program participants to reject referrals to housing and services and receive alternative referrals without retribution and without losing their place on the priority list?

   o **Yes**
   o **No**

CAS seeks to empower people experiencing homelessness, so including and responding to a client's choice is essential. Program participants have the right to reject a referral. Your prioritization and referral policies must be written so that the participant is not penalized for rejecting a referral but maintains their prioritization status and receives the next-best referral for which they are eligible. Your policies may cover how the community will document and respond to instances when a client is provided ample choices aligned with their preferences and continues to reject those opportunities.

TIPS & Resources:
- Develop policies that specify protocol by which a participant can reject a referral and a provider can deny a referral; protocol should document and communicate the reason for the denial or rejection, and also ensure that the participant remains on the prioritized list

Agency Accountability

19. In the event that an agency rejects a referral, has your Community instituted a review process to ensure adherence to housing first and fair housing principles, as well as a process for participants to appeal prioritization or referral decisions?

   o **Yes**
   o **No**

To protect program participants, the community should establish a way for participants to appeal decisions. It creates a helpful check on your system. Your community should review each instance of rejection and may ask the program to reconsider its rejection or, if the rejection was fair, offer the participant their next-best referral.

TIPS & Resources:
- Adopt a system-wide Housing First policy into the CAS written standards
- Bring providers together to complete a Housing First self-assessment; the assessment identifies areas for improvement and creates an opportunity for providers to redesign their existing programs or reallocate resources into a new program built on the Housing First model. See Canadian Housing First Toolkit – Self Assessment Resources
- Sample Resources – Canadian Housing First Toolkit

Part 5: Data & Case Conferencing

Overall Resources: HUD Exchange Coordinated Entry Community Samples Toolkit – Data Management

Privacy and Security
20. Has your CAS instituted privacy and security protocols for the following functions: (1) obtaining program participants' consent for collection, use, storage, and sharing of their information, such as a release of information, and (2) protecting their information that is stored or shared outside of the HMIS?

   o   **Yes**
   o   **No**

To freely engage program participants and maintain their legal rights, your community should create a standardized process for collecting a release of information. It is imperative that while collecting personal information you protect the privacy and security of victims of domestic violence so that their identities or locations will not be divulged outside the CAS. Additionally, your community should ensure that its data is stored securely with up-to-date technology.

TIPS & Resources:
- Develop necessary release of information (ROI) documents and data-sharing agreements to share participants' identifying information; include all participating agencies and eliminate the need for participants to sign multiple releases. See samples – 20KHomes Sample Consent Form, Calgary Homeless Foundation Release of Information Client Consent Form, Peterborough Homeless Coordinated Response Team Consent and Release of Information, US Maricopa County Consent Form, US Washtenaw County Customizable Acknowledgement and Release of Information
- Work with coordinated outreach to document encounters with individuals who are unwilling or unable to complete a full assessment; develop a process to account for

these individuals on the By-Name List and protect the way their information is stored and shared
- Initiate a project team to roll out consent forms that streamline consent and data sharing between partners
- Include consent collection and ROI rules and responsibilities in the CAS policies and procedures
- Sample Resources – 20KHomes Guidelines for Dealing with Personal Information, Guelph-Wellington Ethics Review Application Form, Case Studies (access may be limited to Built for Zero Collaborative Communities): FRESNO, CA; and WINSTON-SALEM, NC

Client-Centered Assessment
21. When an individual refuses to answer questions or receive services, does your assessment process consistently engage them and capture the necessary information to make informed referral decisions, without retribution?

   o **Yes**
   o **No**

On the By-Name List Scorecard, your community considered its process for accounting for individuals who do not consent to a full assessment. Further, your assessment process should be designed to serve and house those individuals even when only the minimum information has been collected. When an individual's consent is not documented, staff should adapt protocol to use and share the individual's information with the same degree of protection as if a signed release of information was secured.

TIPS & Resources:
- Track contact with individuals, anonymously and on a separate part of your list if needed, to improve understanding of how to engage with them
- Use case conferencing or appropriate forum to coordinate outreach and engagement for those unable to undergo the common assessment, while not disclosing identifying information
- Build trust with high-barrier individuals by giving them non-traditional, personalized items
- Partner with and train non-traditional or non-housing partners (e.g. food pantries, law enforcement, faith-based organizations) to identify and engage clients in conversation about housing

Chronic Homelessness Prevention
22. Does your Community take the following measures to prevent individuals' status from becoming chronically homeless: (1) identifying and tracking people who are close to meeting the definition of chronic homelessness, and (2) demonstrating that there are effective housing and service interventions in place to prevent their status from becoming chronically homeless?

    o   **Yes**
    o   **No**

Take note that this question pertains not to general prevention efforts but specifically to preventing an individual's status change into chronic homelessness. Prevention requires an effective, timely tracking method and service interventions that are prepared specially for people timing into chronicity.

TIPS & Resources:
- Track these data points: length of current episode at assessment; cumulative number of months spent homeless in last year; and date of identification
- Using fields above, sort list by those who meet all but one criterion and monitor them prior to case conferencing meetings
- Convene key providers and stakeholders to identify the common paths to chronic homelessness in your community and develop parameters for a chronic at-risk list
- Develop an "at-risk" policy to identify individuals most at risk of becoming chronically homeless. See sample - at-Risk Policy For Lancaster, PA, By-Name List HMIS Specifications
- Look at data on those who "age into" Chronic status to determine key "risk factors" for Chronic homelessness in your community
- Work with HMIS to create reports that further automate tracking Chronic Homeless status
- Sample Resources - SAMPLE SPREADSHEET, PROJECTING "AGING INTO" CHRONIC STATUS, Case Studies (access may be limited to Built for Zero Collaborative Communities): LANCASTER, PA; WAUKEGAN/NORTH COUNTY/CHICAGO, IL; CHICAGO, IL; MONTGOMERY COUNTY AND LANCASTER

Case Conferencing

23. Does your community utilize case conferencing throughout your Coordinated Access System as a routine, centralized process that helps community leaders and housing navigators monitor and advance the progress of various people toward housing?

    o   **Yes**
    o   **No**

Consider using case conferencing to support all steps along the coordinated access process including:
    ☐ To support the process to add people to the list (when needed)
    ☐ To support people on your list to become "document ready" for matching to housing and supports
    ☐ To support matching people to resources (if needed)
    ☐ To support the "match" to "move-in" process (when needed)

TIPS & Resources: See Case Conferencing Overview