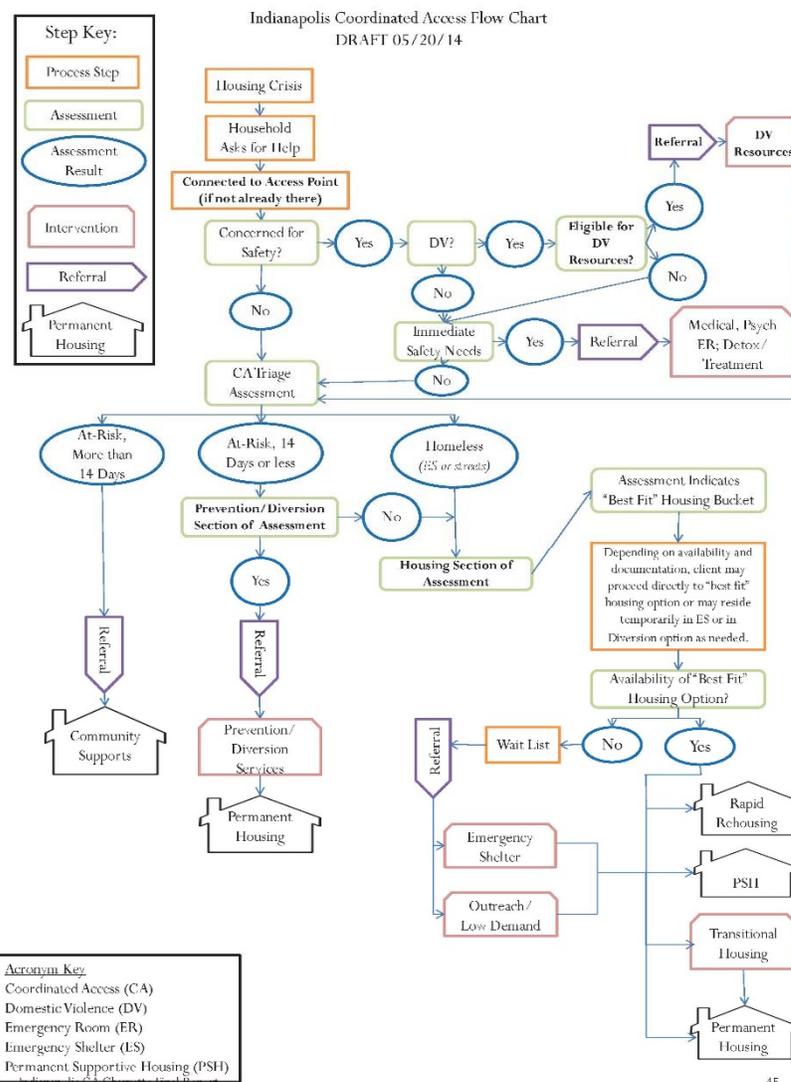


CHIP
Coordinated Entry Workgroup Meeting
Tuesday, May 3, 2016

- I. *Present: Zach Alexander (CHIP), Michael Butler (CHIP), Rachael Candee (UWCI), Damon Clark (IU Health), Nathan Ferreira (Julian Center), Rev. David Greene (Purpose of Life), Colleen Gore (Wheeler Mission Ministries), Traci Johnson (Damien Center), Leslie Kelly (Horizon House), Keisha Knight (CHIP), Wendy Noe (Dove House), Natalie Phillips (DVN), Tricia Smith-Peck (VA), Kirk Taylor (volunteer), Karin Thornburg (Midtown), Jeremy Turner (Damien Center), Kay Wiles (HIP), Alan Witchey (CHIP),*
Staff: Kaley Martin and Lisa Osterman (Community Solutions)
- II. **Introductions and Purpose**
- a. Lisa Osterman welcomed the group and explained that CHIP has brought Community Solutions on board to help move the Coordinated Entry work forward.
 - b. The purpose of today's meeting is to bring everyone together in terms of their knowledge and understanding of what CE is, timeline of where the work has been, related efforts that are underway, and the plan for moving CE forward.
 - c. Michael and Alan from CHIP updated the group on the HUD Tier 2 funding – none of the Tier 2 projects in Indianapolis were funded. While CHIP is investigating an appeal, there is a lot of ground to make up because the application received such low scores as to not meet the Tier 2 threshold. Many of the issues were related to things HUD had strongly recommended, such as CE, and the application did not reflect any of those suggestions. As far as next steps, Alan is hoping to meet with the directors of the programs who are most impacted by this to understand the impact and strategize what other support may be available.
- III. **Overview of Coordinated Entry**
- a. The group reviewed some of HUD's guidance on CE:
 - i. *"Each Continuum is responsible for establishing and operating a **centralized or coordinated assessment system** that will provide a comprehensive assessment of the needs of individuals and families for housing and services."*
 - ii. **Centralized or coordinated process** designed to coordinate program participant **intake, assessment, and provision of referrals**. A centralized or coordinated assessment system covers the geographic area, is easily accessed by individuals and families seeking housing or services,

is well advertised, and includes a comprehensive and standardized assessment tool.

- b. The group reviewed the main functions/processes to CE:
 - i. Intake – single or multiple entry points; initial assessment; universal data elements
 - ii. Assessment – common tools; target populations; needs and vulnerability
 - iii. Referral – strategies; programs; providers
- c. CE is important because HUD says it is a requirement, because it can make the process and collaborating partners stronger, and because it removes luck from the equation, so the clients in most need of services are prioritized.
- d. Participants reviewed the history of CE in Indianapolis, going back to June 2012, with the most recent activity in February 2016. They reviewed the draft CE flow chart for CE that was developed by CoC stakeholders during a two-day session with the Corporation for Supportive Housing in May 2014 design charrette.



IV. Overview of Current Efforts Similar to Coordinated Entry

- a. While little has happened comprehensively, there are microcosms and sectors that have taken up the work of coordination in intake, assessment, and referral for subpopulations in the community. These efforts will probably be incorporated as to components into the CE design.
- b. Permanent Supportive Housing List/Housing Committee
 - i. Karin Thornburg discussed the work on the Permanent Supportive Housing List. There is a common application for all of the PSH programs, a combined waiting list, and a weekly Housing Committee meeting where the top people on the waiting list are discussed to see if they are a good fit for any openings. 50+ agencies send their applications to Karin who enters the information into a spreadsheet. Assessment includes the vulnerability index, homeless documentation, disability documentation, chronic documentation, veteran status, release of information, then date of application.
- c. Veterans Master List
 - i. Rachael Candee discussed the work on the Veterans List. The list of literally homeless veterans is “by name” with ROI, or unique ID if no ROI, with most of the names pulled from HMIS or added by other partners. There are six current partners contributing to the list, which is managed by United Way, which organizes the list and facilitates discussion at bi-weekly case conferencing. Assessment includes chronic, transitional exit date, unsheltered, etc. The list allows the group to measure key results like actual length of stay as a community in transitional housing, the length until housed in PH, and similar metrics, but there is still work to be done on how to calculate those results. Their progress is being measured against a set of criteria & benchmarks established by the interagency council on homelessness with specific sets of metrics that we have to meet.
- d. Families Homelessness Resources Group
 - i. Colleen Gore and Kay Wiles
 - ii. discussed the work of the Families Homelessness Resources Group. The process is earlier in the development phase than the others that have been discussed. The purpose is to address the capacity issue with shelters and use the Rapid Re-Housing model with those who are housing ready. For assessment, the group reviewed some common tools and created a Rapid

Re-Housing tool based on the Permanent Supportive Housing tool to quickly categorize individuals or families into categories and move them to appropriate lists for referral. Much of this work depended on Tier 2 funding, so there are some questions about funding and resources.

e. Emergency Shelter List

i. Alan Witchey shared information about the Emergency Shelter List, which is a weekly email that says how many beds are open where based on calls the Salvation Army makes to the various shelters. The goal is to have a community-wide tool that would show open beds without having to dig through emails. There is interest from the Reuben Engagement Center.

V. Next Steps

a. This group will come together monthly to figure out how it will happen.

i. Zach will send a Doodle poll to group members to determine a regularly-occurring meeting date and time.

b. At the next meeting, the group will tackle intake, reviewing a couple of models of what intake could look like in Indianapolis. There have been conversations with organizations interested in serving as the sole or collaborative entry point.

i. Anyone with ideas or suggestions of what entry or intake should look like is asked to contact Lisa.