

# Coordinated Entry Planning

## Leadership Council Direction

1. Leadership Council communicating directive to ECHO to develop CE improvement recommendations. This can include items already on the roadmap (PSH to PSH transfer policy, RRH prioritization, etc.) and new opportunities (BNL procedure).
2. ECHO returns with a project scope and work plan that includes a timeline and list of items to be reviewed.  
Workplan should include:
  - a. Conducting stakeholder interviews to identify system bottlenecks, including people with lived experience
  - b. Reviewing high-performing CE models nationally
  - c. Identifying opportunities to improve CE performance (timelines, housing outcomes, etc.)
3. ECHO presents draft recommendations to Leadership Council, including:
  - a. Updates to CE Written Standards
  - b. Operational changes to matching, referrals, and prioritization
  - c. Policy/process changes to improve efficiency
4. The draft recommendations are shared with the community for feedback/input
  - a. This can occur at a Leadership Council public meeting. This includes receiving input and feedback from people with lived experience and Leadership Council committees related to that improvement recommendation.
5. Leadership Council votes to incorporate recommendations
  - a. This can occur at a Leadership Council public meeting

# Scope of Work

## Mission Statement:

Coordinated Entry is easily accessible and understood, acknowledges the needs of people supported by the Homelessness Response System, efficiently and equitably connects people to resources available in the community, and identifies unmet needs.

## Overarching Goals

- Comprehensive Resource Connections for People Experiencing Sheltered and Unsheltered Homelessness
  - People experiencing homelessness are connected to resources to support them in their current circumstances, considering user experience, and the needs of people who are sheltered and unsheltered
  - Provide connections to crisis and permanent housing options to assist people to stabilize and ultimately become permanently housed.
  - Explore and connect as many supportive services as practicable and efficient to the CE system, including services such as workforce, healthcare, and support for daily needs.
  - Ensure the safety and needs of people who are survivors of domestic violence and human trafficking
  - Create transparency for the community and for people participating in CE on their likelihood for options and resources
  - Connect with adjacent systems, such as criminal justice and healthcare, to determine how data sharing can inform and streamline the CE process
- Supports the needs of Providers running programs in the Homelessness Response System
  - Ensure that the CE system will support community providers, including any related programmatic target populations, to receive referrals efficiently so that resources are utilized as effectively as possible
  - Funders of HRS related services have confidence in the CE system to be able to connect people to their resources efficiently and effectively
- Informed by People with Lived Experience, centering the equity of historically marginalized populations
  - People with lived expertise and lived experience are informing and centered in the design of the CE system

- Target population and marginalized community needs are evaluated and met equitably
- The CE system is data informed by design and is continuously evaluated to ensure impact as intended
  - Current inequities found in our current HRS, including racial, disability, medical vulnerability, etc. are evaluated and resources and prioritization systems are designed to counteract inequities
  - Understand demand, utilization, and outcomes of resources

## Overarching Deliverables

Design a Coordinated Entry system that has these core elements:

- *New Assessment Tool(s)/Survey(s)* - To determine people's eligibility and if appropriate prioritize for resources
- *New Assessment Process* - Determine how access is made available to people seeking services, creating efficient and transparent processes for people needing services (where to go, who does it, and who/how/when to follow up with client)
- *Updated Prioritization* - An efficient and equitable way to prioritize households for programs that have more demand than availability that includes meeting the timeframe programmatic needs of each program
- *Updated Referral Process and Matching* - Has the ability to identify potential dependencies between referral and program enrollment types to ensure collaboration and coordination between programs
- *Efficiency* - Has the ability to effectively manage assessments, referrals, enrollments, and exits to all resources in the HRS.

## Process for Achieving Deliverables

- SWOT analysis of current CE System to include perspectives of funders, Leadership Council and associated committees, clients, and cross section of participating agencies. Participating agencies will include at a minimum a cross section of providers from different intervention types, current CE and non-CE participating agencies, and differing size organizations. Analysis will include quantitative analysis of current inequities and inefficiencies within the system.

- Determine Universe of Resources that should be included in CE using information from SWOT analysis, stakeholder interviews, and best practices scan
- Create agency/funder buy-in and parameters for participating in CE system with a focus on new resource options. Includes details of type of resource available, eligibility criteria, and amount/number available.
- Ensure alignment with HUD requirements including the CoC Interim Rule and HUD Notice, CPD 17-10
- Determine inter-dependencies between universe of resources (example: should some resources be a steppingstone or referral source to other resources)
- Create prioritization system for all applicable referrals. Prioritization for RRH, PSH, and CoC funded TH, and associated changes to the CE written standards will be finalized by Leadership Council. All other resource prioritization decisions will be created outside of Leadership Council. *Note that Prevention resources have a separate planning process that will at its conclusion be incorporated into the coordinated entry system.*
- Create an assessment process in HMIS that includes conditional logic as needed (that automates resource options based on assessment answers) to connect people who are sheltered and unsheltered to resources
- Determine process for delivering assessment in the community
- Build out in HMIS the ability to implement the new CE design and determine how to make access to assessments for resources
- ECHO staff will provide Leadership Council updates and items to approve as needed. Items will include a list of who we got feedback from and what their feedback was

## Timeline

- Jan/February 2026 – get approval from Leadership Council for scope of work
- *May - July 2026*
  - *Finalize SWOT analysis and qualitative and quantitative analysis*
  - *Finalize list of current resources to be linked to CE system.*
  - *Create recommendations on how to operationalize assessments/resource connections in community and in HMIS*
  - *Create list of resource gaps and recommendations regarding next steps to develop*

- July 2026 – Create eligibility, inter-dependencies and prioritization drafts for each resource
- Aug 2026 – Build out assessments and referral processes in HMIS
- Aug-Sept 2026 – Pilot test prioritization and referral pathways in HMIS with new connection design
- October 2026 - Refine prioritization and resource matching based on pilot and retest
- December 2026 – Finalize prioritization and referral pathways draft within CE in HMIS/Adopt Finalized CE Written Standards
- January 2027 – Go Live