

OPPORTUNITIES TO PARTICIPATE IN COORDINATED ENTRY

IDEAS TO SUPPORT ACTION PLANNING

System Entry

Clients seeking housing or services first make contact with the community's homeless response system, such as interacting with an outreach worker, calling 211, or showing up at a service provider site.

- **Learn basic eligibility requirements to identify patients who should connect to CE system**
- **Learn the entry points for your community's system and how to help your patients access them**
- **Develop protocol for notifying outreach or other "roving" entry points of potentially eligible clients**
- **Serve as an entry point**

Assessment

Clients' needs and vulnerability are assessed in a uniform manner within the entire community. Assessment should include a uniform decision-making process and use standardized assessment tools.

- **Work with homeless response system to review/develop assessment tool(s) to more accurately capture health-related vulnerability**
- **Notify CE system of patients needing assessments**
- **Provide space for assessments to take place**
- **Administer assessments**

Prioritization

Clients are prioritized for housing/services within the community, based on factors agreed upon by the community, ensuring that the limited resources are used in the most effective manner and that households that are most in need of assistance are prioritized for housing and services.

- **Work with CE system to review/design prioritization scheme**
- **Participate in case conferencing or other prioritization discussions**

Matching

Clients at the top of the community's priority list are given a choice of housing, as it becomes available, for which they are eligible and which appear to meet their needs.

- **Participate in case conferencing or other discussions about health-related needs of clients at the top of priority list to inform match decisions**
- **Help clients understand options and how each might impact health care access and outcomes**

Referral

Clients matched with an appropriate program are referred to that program, requiring communication between the entity in charge of matching, the client, and the program providing the housing/services.

- **Help facilitate communications between providers and client (including help locating clients)**
- **Offer support (providing health care and other supportive services to client) to provider to increase likelihood of referral acceptance and success**
- **Assist with procuring necessary eligibility documentation (e.g., disability verification)**

Placement

Clients are placed into the program (which can entail ensuring that the client is “document-ready” and has necessary transportation).

- **Assist with documentation collection**
- **Provide transportation assistance**
- **Follow up with clients to ensure continued connections to health care and other supportive services**
- **Support landlord engagement efforts**

Other

- **Assist with CE System Data Analysis**

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