

included in the form, the questions match the standard assessment. The only difference is the form does not collect contact information or other personally identifiable information.

Additional information regarding data sharing and the HMIS ROI can be found on the MN HMIS website.

<https://hmismn.helpscoutdocs.com/category/1781-data-sharing-hmis-roi>

C. Prioritization

Prioritization is utilized for all dedicated supportive housing programs to help strategically and fairly target available resources, better assuring that those who are most vulnerable receive housing more rapidly than those with who are less vulnerable.

The prioritization process uses the information gathered from the assessment stage to analyze a person's level of vulnerability. The persons priority is set based on the NWCoC prioritization guiding values and eligibility through discussions at case conferencing meetings. This process values client choice and a strength-based client-centric approach. In order to provide the best possible outcomes, the NWCoC will use a Dynamic Prioritization process. Dynamic Prioritization is a dynamic process that uses prioritization criteria (i.e., assessment result, unsheltered status, length of time homeless) to identify the most vulnerable (preferably through a case conferencing process) based on the number of anticipated housing placements across all resources that will occur in a set number of days.

a. Guiding Values

1. Serve the most vulnerable clients who without supportive services, case management and/or ongoing rental assistance will remain homeless or become homeless.
2. Addressing disparities in the homeless response system and improving access to programs.
3. Clients are referred through a case consultation process to the best available resource.
4. Clients who are not referred to supportive services are offered help problem solving to end their housing crisis.
5. Prioritization is client-centric and strength focused. Clients are referred to services they identified are appropriate to end their housing crisis.
6. Through prioritization clients will be referred to programs they are in fact eligible to receive support from.

The Coordinated Entry System Priority List is a centralized list of persons **in need of and seeking** designated supportive housing in Northwest Minnesota. It is **NOT a Waitlist** for those seeking services. The Priority List is meant to be a real time up to date list of the most vulnerable persons in the region seeking services. Persons who are a better fit for less intensive programs should not be on the list.

The length of time someone has been homeless is an indicator of vulnerability and a factor in being prioritized for services. The length of time a person has been on the priority list is not.

b. Priority List Location

The NWCoC has two priority lists. One is located in the statewide HMIS system, this is the most widely used priority list. Due to requirements from HUD that state a minor (unaccompanied youth under 18 without consent of parent), or person fleeing DV is not allowed to be entered into HMIS another list exists. The Alternative Priority List is in a secure location and can only be accessed through connecting with the NWCoC Priority List Manager.

c. Household Prioritization Criteria

Individuals will be prioritized based on eligibility and NWCoC prioritization criteria for housing vacancies. Prioritization outcomes will be informed by client choice, program eligibility, and a set of client-centric and strength based focused questions to inform housing programs. Final prioritization of clients will be determined through case conferencing, additional details on case conferencing can be found at [Section 5. D. Placement](#) and [Section 5. C. j Case Conferencing](#).

The questions are meant to inform the case conferencing process for making a referral to an eligible program opening.

- What households on the priority list are eligible for the particular housing program opening being discussed?
- What is the length of time the eligible households have been homeless? Are any of them Chronic Homeless?
- What households have indicated having the greatest amount barriers to accessing housing?
- Where do the identified households wish to live? Does it align with the program opening location?
- Does the program opening align with the clients identified housing needs? Does it match client choice?
- Of the identified households which household is eligible, has the greatest barriers, and aligns with the program opening?

Figure 6 Client Barriers and Choice outlines the client barriers and choices to be considered, and Figure 7 Client Eligibility outlines the eligibility criteria considered.

d. Barriers and Client Choice

The following criteria is meant to inform the case conferencing process and assist in prioritization of individuals. Clients who meet these criteria should be determined to be the most vulnerable and prioritized based on the guiding values for prioritization.

Barrier or Client Choice	Explanation
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Impact from Societal Issues and Discrimination	The client answers “Yes” to being asked if discrimination or other societal issues have impacted the ability to access housing. This can include but is not limited to racism, medical diagnosis, disability, gender, or sexual orientation.
Interaction with Institutional Systems	The client answers “Yes” to being asked if time spent in institutional settings has impacted their ability to find housing. This can include but it’s not limited to, foster care, jail/prison, chemical healthcare, or registered sex offender.
Clients Physical and Emotional Health Needs	Without housing clients will have difficulty meeting their current and future emotional or physical health needs.
Client Choice	Clients have choice in determining where they want to live, and are offered a variety of supportive housing options to determine what is best for them.
School Stability	Certain programs in the NWCoC require school aged children for eligibility. Keeping children safe and in a stable school environment is a consideration for prioritization.
Client Reported Barriers	Client may have additional barriers including, but not limited to, communication access, transportation access, and in general unable to access mainstream resources or benefits on their own.
Family Reunification	Clients may require housing in order to safely reunite with children.

FIGURE 6 CLIENT BARRIERS AND CHOICE

e. Eligibility Criteria

Eligibility Criteria	Explanation
Current Living Situation (Where is someone living the night before being placed on priority list?)	Where a client is currently living impacts the current level of vulnerability and eligibility of programs. The following current living situations are prioritized for referrals. <ol style="list-style-type: none"> 1. Literally Homeless (HUD Homeless) 2. At-Risk of Homelessness (Will lose housing within 14 days) 3. MN Homeless (doubled up less than 1 year) 4. Institutional; Situation (jail, foster care, hospital, nursing home, psych. Hosp., substance abuse treatment facility)
Length of Time Homeless	The length of time a person remains homeless increases the level of vulnerability and increased the difficulty in accessing stable housing. The following lengths of time homeless are prioritized for referrals: <ol style="list-style-type: none"> 1. Chronic Homelessness 2. High Priority Homeless (Long Term Homeless)

	3. Total Months HUD Homeless 4. Total Months MN Homeless (Doubled-Up, less than one year)
Fleeing Domestic Violence	Fleeing domestic violence is a consideration for prioritizing referrals, some programs require this for eligibility.
Veteran Status	A person's veteran status is a determining factor in prioritizing for referrals, the CoC will first look to fill program openings specifically for veterans with homeless veterans before other openings.
Disability Information	A person's disability status can determine eligibility to certain programs and the definition of homelessness they will be categorized in. When reviewing disability information whether the client has a documented or self-reported disability will not impact prioritization for vulnerability of client, however it may impact whether not the client is eligible for the program.
Household Type	Household size may determine eligibility for certain projects, it does not determine a client's vulnerability level for prioritization.
Household Type	Household type may determine eligibility for certain projects, it does not determine a clients' s vulnerability level for prioritization.

FIGURE 7 CLIENT ELIGIBILITY

f. Violence Against Women Act and Prioritization

No household fleeing a domestic violence situation and is literally homeless should be denied services due to the coordinated entry prioritization policy. DV specific providers do not use HMIS and will place clients on the Alternative Priority List.

g. Timeline for Checking Priority List

Providers need to access the HMIS Prioritization to check their data after they have entered into HMIS, made changes, and for data accuracy to make sure that the people on the list should be on the list. The frequency of this should be determined by each agency based on amount of people added to the list.

h. Adding Households to the Priority List

Providers use the HMIS system or the Alternative List to add clients to the Priority List.

Households are added to the Alternative List through using the Alternative Assessment which is for Victim Services providers, youth under age 18 who do not have parental consent, and persons unwilling to **share** data in HMIS, but wish to still access housing through coordinated entry.

Appendix C Diversion and Coordinated Entry Data Instructions of this document includes detailed instruction for completing the NWCoC Coordinated Entry Assessment and placing a household on the priority list.

The NWCoC will also provide training to all assessors to add households to the appropriate Priority List.

i. CoC Transfers

In the event that an assessor determines a household is interested in moving to geographic area outside of the NWCoC the assessor may stop the assessment. At this time the assessor will refer the household to a known organization in the CoC they wish to live in. If you do not know of an organization you may e-mail the Priority List Manager who can work with the other CoC to determine the pathway to access that CoC coordinated entry.

j. Case Conferencing for Prioritization

The NWCoC uses a case conferencing model to prioritize households for available openings. Case Conferencing will lead to greater collaboration of supportive housing organizations. The peer to peer support is beneficial to providers to learn from one another. Peer to peer decision making also offers a level of accountability to the system for making referrals to programs based on CES criteria. Additional information regarding Case Conferencing can be found in Appendix D Case Conferencing Outline of this document.

In the event of an urgent, time-sensitive situation, a referral may be scheduled by contacting the Priority List Manager.

Case Conferencing Meeting Outline

Case Conferencing meetings are routine meetings designed to manage the Coordinated Entry Priority List. The Priority List Manager will facilitate these meetings. Before each Case Conferencing meeting, the Priority List Manager will pull the current Priority List. The list is organized by Housing Category and the Priorities previously established by the NW CoC.

There are three Case Conferencing groups based on geography and population served. The groups set meeting times based on need, at a minimum meeting are held twice per month. The groups are outlined as follows:

- Youth Homelessness (Entire Geographic area of NWCoC)
- East Area (The county boundaries of Beltrami, Clearwater, and Hubbard)
- West Area (The count boundaries of (Kittson, Roseau, Lake of the Woods, Marshall, Pennington, Red Lake, Polk, Norman, and Mahnomen)

Case Conferencing Attendance

A housing provider will e-mail the NWCoC Priority List Manager to receive access to Case Conferencing. The following housing provider staff should attend case conferencing:

- Housing Navigators
- Case Managers
- Street Outreach Staff

- Public Housing Providers
- Anyone who provides direct service to clients and working to enroll clients in housing programs.

Case Conferencing Steps

1. Review current or potential future program openings and how many eligible households should be referred to the program opening;
2. Determine which clients on the list may be eligible for the program opening;
3. Review households to determine which has the highest need for additional supportive housing services; (who is most likely to remain homeless without access to the program opening) then
4. Determine which household or households to refer to the program opening.

D. Placement (The Referral Workflow)

Placement, or better known as referral is the process of actually making a referral to a housing program opening. Referrals are determined by the prioritization process. Housing case managers and service providers will meet at case conferencing and determine which clients will be referred from the list to available openings. The list is not a wait list, it is a priority list and people are served based on vulnerability and need not time on the list. The system cannot be used to screen people out based on perceived barriers, but should assist in addressing barriers to stably house the client.

The referral process can be broken into the following phases, these phases are outlined in further detail in Figure 8 NWCoC Referral Workflow. Figure 9 NWCoC Referral Workflow Map provides a visual reference of the referral process. A larger version of this graphic can be found as Appendix F Referral Workflow Map of this document.

Request a Referral

When you have an opening in one of your housing programs, you will notify the Priority List Manager through the **Referral Request form**. Contact the Priority List Manager for access to this form.

Case Conferencing

Housing providers meet for peer to peer discussion to review current households on the priority list and make recommendations for openings in accordance with the NWCoC prioritization procedures outlined in [Section 5 C. Prioritization](#).

Program Referral

The Priority List Manager in accordance with the case conferencing peer to peer discussion will make the referrals to the programs through the HMIS, or through e-mail from the Alternative List.

Acknowledge the Referral

The Housing Provider acknowledges in the HMIS or through e-mail (if using the Alternative List) that the referral has been received.

Resolve the Referral

The Housing Provider will contact the client to offer entry into the program opening, then document whether the referral was successful or unsuccessful. An unsuccessful referral occurs if you are unable to contact the client, if the client declines entry into the program, or if the client does not actually meet eligibility requirements. Contacting the client and the client accepting program entry is a successful referral, even if the client does not locate housing.

Program Entry

Once the client accepts entry into a program and the housing provider has determined the client is eligible the housing provider will enter the client into the housing program using HMIS, or a comparable database for DV providers.

Housing Navigation Assistance

Once the client is entered into your program begin to aid the client to locate a unit and assist with lease up. Some geographic areas may have additional support staff specializing in Housing Navigation services. Some geographic areas or subpopulations may also have access to Landlord Risk Mitigation Funds. Use this time to connect client to additional support programs as needed.

Record Housing Outcome

Once the client has obtained housing the housing provider will document that in HMIS as the Housing Move-in-Date. If the client is unable to find housing, or you lose contact with the client you will exit the client from the program. At this time, you will also exit the client from Coordinated Entry.

Interim Assessment

If determined that contact with the client can be maintained and the client should access a different program complete an Interim Assessment to update the record in coordinated entry.

REFERRAL WORKFLOW STAGES	GOAL/ACTIVITY	WHEN TO COMPLETE	RESOURCE	RESPONSIBLE STAFF
Request a Referral	The housing provider informs the Priority List Manager of a program opening. All programs required to fill slots through the coordinated entry priority list need to	Within 3 working days from having a program opening or anticipating you will have a program	Referral Request Form (E-mail Priority)	Housing Provider

	request referrals from the Priority List Manager.	opening that needs to be filled through coordinated entry.	List Manager for Form link)	
Case Conferencing	Housing providers meet for peer to peer discussion to review current households on the priority list and make recommendations for openings in accordance with the NWCOC prioritization procedures outlined in Section 5 C. Prioritization.	Case Conferencing occurs a minimum of twice per month. Currently a region-wide meeting on youth, a meeting for the east, and a meeting for the west.	Case Conferencing Meetings	Housing Providers and Social Service Providers. Attendance at Case Conferencing is allowed for anyone with resources who has completed the NWCOC CES Training.
Program Referral	The Priority List Manager in accordance with the case conferencing peer to peer discussion will make the referrals to the programs through the HMIS, or through e-mail form the Alternative List.	Once a client has been identified through Case Conferencing to be referred.	HMIS or E-mail for Alternative List	Priority List Manager
Acknowledge the Referral	The Housing Provider acknowledges in the HMIS or through e-mail (if using the Alternative List) that the referral has been received.	Within three working days after receiving communication from the Priority List Manager that the referral was made.	HMIS or E-mail for Alternative List	Housing Provider
Resolve the Referral (Successful)	The Housing Provider will contact the client to offer entry into the program opening. The client accepting program entry is a successful referral, even if the client does not locate housing.	The Housing Provider will make 3 attempts over a 10-working day period to contact the client. The Client will have 5 working	HMIS or E-mail for Alternative List	Housing Provider

		days to accept entry into the program. The referral outcome (successful/ unsuccessful) should be documented within 3 working days.		
Resolve the Referral (Unsuccessful)	The Housing Provider will contact the client to offer entry into the program opening. An unsuccessful referral occurs if you are unable to contact the client, if the client declines entry into the program, or if the client does not actually meet eligibility requirements.	The Housing Provider will make 3 attempts over a five-day period to contact the client. The Client will have 5 working days to accept entry into the program. The referral outcome (successful/ unsuccessful) should be documented within 3 working days.	HMIS or E-mail for Alternative List	Housing Provider
Program Entry	Once the client accepts entry into a program and the housing provider has determined the client is eligible the housing provider will enter the client into the housing program using HMIS, or a comparable database for DV providers.	Complete the Program Entry in HMIS or Comparable Database within 3 working days of acceptance into a housing program.	HMIS or Comparable Database for DV Providers	Housing Provider
Housing Navigation Assistance	Once the client is entered into your program begin to aid the client to locate a unit and assist with lease up. Some geographic areas may have additional support staff specializing in Housing Navigation services. Some geographic areas or subpopulations may also have access to Landlord Risk Mitigation Funds. Use this time to connect client to additional support programs as needed.	Immediately upon entry into the program.	Case Conferencing Meetings	Housing Provider

Record the Housing Outcome (Successful)	Once the client has obtained housing the housing provider will document that in HMIS as the Housing Move-in-Date.	Record the Housing Move-In-Date within 3 days of move in.	HMIS or Comparable Database for DV Providers	Housing Provider
Record the Housing Outcome (Unsuccessful)	If the client is unable to find housing, leaves the area or self-resolves. you will mark the referral as "client exited program without Housing and exit them from the Housing Program. If the client should be removed from the Priority list, exit them from Coordinated Entry.	Clients will be given a minimum of 10 days to access housing. Continue to work with the client as long as the client remains engaged in finding housing. If client disengages and you are unable to maintain contact it becomes an unsuccessful housing outcome. Exit the client from your program, and exit the client from CES within 3 days of determining the client is unable to access housing. Note: This is still a successful referral.	HMIS or Comparable Database for DV Providers	Housing Provider
Interim Assessment	If determined that contact with the client can be maintained and the client should access a different program complete an Interim Assessment to update the record in coordinated entry.	Immediately upon exiting from the program and determining the client should remain on the priority list.	HMIS or E-mail for Alternative List	Housing Provider

FIGURE 8 NWCOC REFERRAL WORKFLOW

a. Completing the Referral Process

Appendix E Coordinated Entry Referral Process of this document outlines the referral process and provides details for completing the process in HMIS.

b. Refusal of Referrals

Refusals by projects are acceptable only in certain situations, including these:

- The client does not meet the project's eligibility criteria.
- The person would be a danger to self or others if allowed to stay or enter into a site-based project.
- The services available through the project are not sufficient to address the intensity and scope of the participant need, as determined by the project and the client.
- The project is at capacity and is not available to accept referrals at this time.

The agency must communicate the refusal to the Priority List Manager within three (3) working days upon receiving the referral. The agency may communicate the refusal update through e-mail. The Priority List Manager may ask the agency to report the following information to the Case Conferencing group.

- Why was the referral rejected?
- How the referred participant was informed of the rejection?
- What alternative resources the client was provided?
- Whether the project staff foresee additional, similar refusals occurring in the future. How could this be avoided?

If an agency refuses three (3) referrals in a row the Priority List Manager will share the reasons for refusal with the Coordinated Entry Committee. The Committee will discuss the projects future participation in the CES.

c. Referrals with a "Warm Handoff"

Whenever possible Housing Providers are encouraged to contact the original assessor of the client being referred to them. The original assessor may have information about the client to help contact, or to help build trust. The original assessor may have a positive relationship with the client and can use that to assist in creating a successful referral.

d. Referral Timeline

Request a Referral	Acknowledge the Referral	Contact Client	Client Choice	Program Entry	Housing Search	Housing Move-In-Date or Exit
3 Days	3 Days	10 Days	5 Days	3 Days	10+ Days	3 Days
Within 3 working days of knowing about the opening.	Within 3 working days of receiving the referral from Priority List Manager.	Make 3 attempts over 10 working days and all communication methods to contact.	Client is allowed 5 working days to accept entry into the program.	Enter the client into the housing program within 3 working days of client accepting.	Client is allowed a minimum of 10 days to obtain housing. Client is allowed to search for housing until finding it, no long contacting provider, or choosing to leave the program.	Record the housing move-in-date within 3 working days of client moving in. Or, exit the client from the program and coordinated entry.

Northwest Continuum of Care Coordinated Entry Referral Workflow

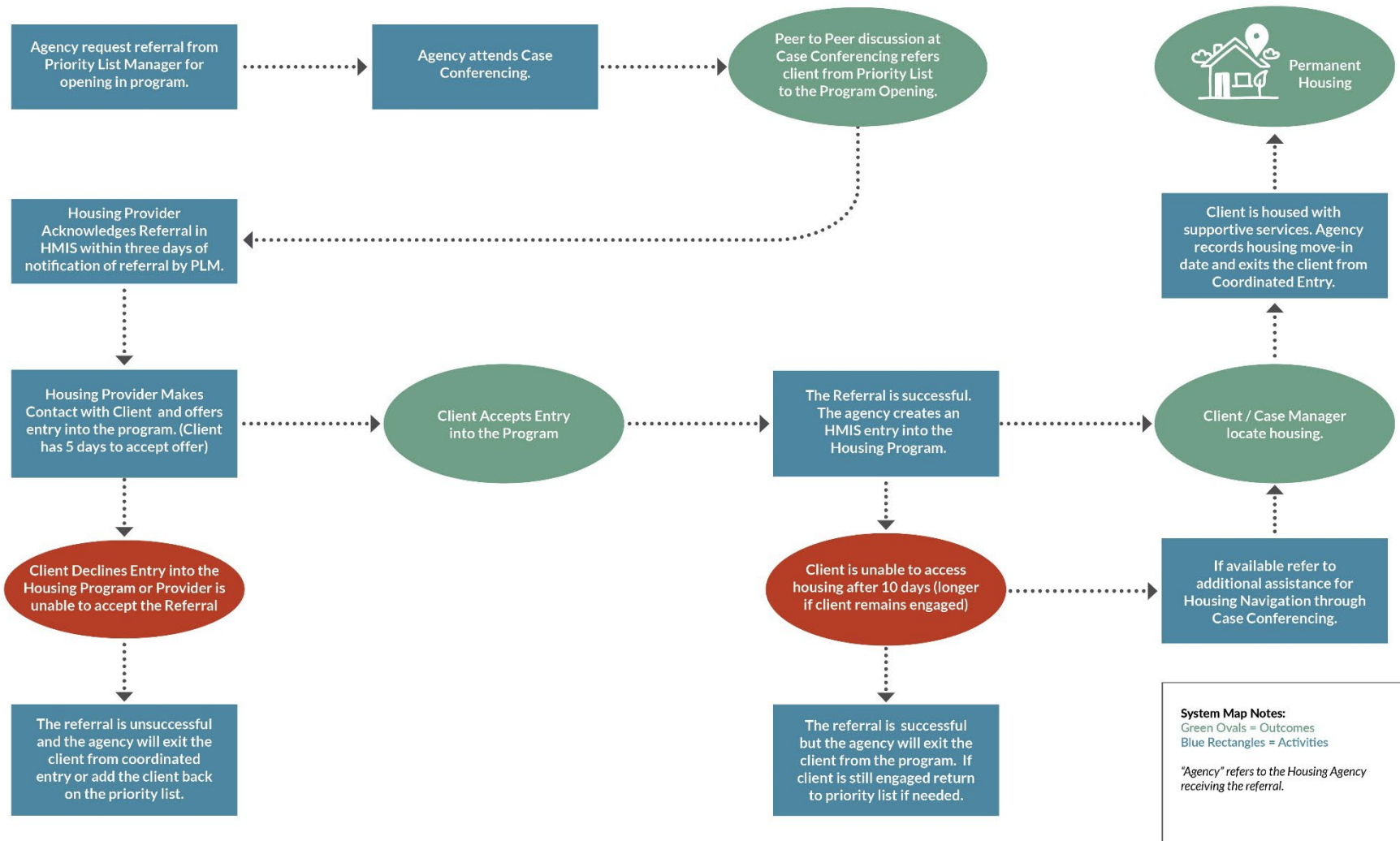


FIGURE 9 NWCOC REFERRAL WORKFLOW MAP