

# Coordinated Entry System

## Transition to By-Name Lists

4/13/23



# Current State of Coordinated Entry

The purpose of a Coordinated Entry System is to ensure that all people experiencing homelessness have equitable access to housing resources.

## Values

- Equity
- Transparency
- Consistency
- Accountability
- Constant Improvement



# Current State of Coordinated Entry – COVID Prioritization

- **Coordinated Entry currently prioritizes those most vulnerable according to specific risk factors. These risk factors were developed in partnership with Seattle/King County Public Health. Current prioritization methodology is known as Covid Prioritization or CoPri.**
- **Data is currently sourced from four databases:**
  - **Homeless Management Information System (HMIS)**
  - **WA Medicaid**
  - **Health Care For the Homeless Network (HCHN), Public Health Seattle & King County**
  - **King County Behavioral Health and Recovery Division (BHRD) data**



# Current State of Coordinated Entry – COVID Prioritization

## *v2 COVID Prioritization, implemented April 2023 – Risk factors*

- **Individuals with pre-existing health conditions which put them at higher risk for mortality from COVID-19**
  - **Diabetes**
  - **Heart Disease**
  - **Kidney Disease**
  - **Lung Disease**
  - **Sickle Cell Disease**
  - **Weakened Immune Systems**
  - **Or the absence of any medical record**



# Current State of Coordinated Entry – COVID Prioritization

*v2 COVID Prioritization, implemented April 2023 – Risk factors cont.*

- **Individuals of any race and ethnicity disproportionately represented in the homeless system & disproportionately impacted by COVID-19**
  - **American Indian / Alaska Native**
  - **Black / African-American**
  - **Hispanic / Latinx**
  - **Native Hawaiian / Pacific Islander**
  - **OR Multi-Race with any of the aforementioned**
- **Households who are pregnant**
- **Individuals at higher risk for mortality from COVID-19 based on age**
  - **Between the Ages of 65 to 74**
  - **Over the Age of 75**



# Current State of Coordinated Entry – COVID Prioritization

*v2 COVID Prioritization, implemented April 2023 – Risk factors cont.*

- **Individuals with Behavioral Health Risk as recorded in BHRD Data:**
  - **Involuntary Treatment Act (ITA) calls that have occurred in the last two years**
  - **Outpatient Behavioral Health Treatment in last two years where the outpatient tier in the Mental Health Population Health Stratification is “high” OR where there is outpatient Substance Use Disorder treatment**
  - **Inpatient Substance Use Disorder treatment in the last two years**
  - **Inpatient Detox in the last two years**
- **Individuals with specific Gender Identity as recorded in HMIS:**
  - **Transgender**
  - **Non-binary, Genderfluid, Agender, Culturally Specific Gender**
  - **Cisgender Female**



# Current State of Coordinated Entry

- **For resources funded to serve Families, Single Adults, and Young Adults 18–24, Coordinated Entry currently operates weekly Case Conferencing opportunities for providers to nominate prioritized households to available housing resources.**
- **Coordinated Entry Priority Pools use a process known as Dynamic Prioritization and are currently limited in size based on:**
  - **System-wide navigation capacity**
  - **Projected available units**



# Current State of Coordinated Entry– Referral Pathways

- **COVID Prioritization Case Conferencing**
  - **Regional Priority Pool of Families, SA, and YA experiencing homelessness**
  - **Daily matching and meetings for Families, SA, and YA**
- **Housing Command Center Case Conferencing**
  - **BNL by the HCC Field Team as part of Partnership for Zero**
  - **Daily matching and meetings**
- **Right of Way Case Conferencing**
  - **State of WA site resolutions**
  - **Daily matching, Weekly meetings**
- **Trueblood Case Conferencing**
  - **BNL of eligible class members experiencing homelessness**
  - **Case Conferencing as units become available**





# Current State of Coordinated Entry– Referral Pathways

- **American Indian – Alaska Native Case Conferencing**
  - **BNL of neighbors experiencing homelessness by and for the AIAN community**
  - **Weekly matching and Biweekly meetings**
- **Veterans Case Conferencing**
  - **BNL of all Veterans experiencing homelessness**
  - **Weekly matching and meetings**
- **Mobility Transfers**
  - **Safety; Change in: Service Need, Family Size, Geographic Need, Age; or Request from the Office of the Ombuds**
  - **Processed within 1 business day for Safety, 3 business days otherwise**



# Current State of Coordinated Entry

- **A significant portion of available housing resources are filled outside of Coordinated Entry through a process known locally as External Fill.**
- **External Fills allow the housing operator to fill vacant units with households of their choosing.**
- **HUD has provided clear direction to our community to cease this practice and to ensure all available units are filled through Coordinated Entry.**
  - *"...it has come to our attention that some Continuum of Care (CoC) funded projects in the Seattle-King CoC are bypassing the CE System required by 24 CFR 578.7(a)(8) through a process known as "External Fill". Use of the CoC's CE System is required under 24 CFR 578.23(c)(9) for all CoC funded projects, and this process does not appear to meet this requirement. We urge you to ensure that all CoC projects comply with the CE requirements as soon as possible--other than for the exceptions provided for projects serving people fleeing Domestic Violence, all referrals are coming from the CE System."*



# Shifting to By-Name Lists

- **In an effort to align with HUD directives and increase throughput of the Coordinated Entry System, CE will be shifting to operating By-Name Lists for all populations.**
- **The provider community has consistently been advocating for this change. By Name Lists support a system that can be nimble and flexible while prioritizing equity and efficiency.**



# What is a By-Name List?

- **A By-Name List (BNL) is a comprehensive data set containing information about all people experiencing homelessness across a community.**
- **By-Name Lists will draw on data available from HMIS.**
- **BNLs are not waitlists. Matching to resources will be determined based on eligibility, interest, and service match.**



# How does it work?

- **Providers will support this process by completing Housing Needs Forms in HMIS. HNFs will contain the minimum information necessary to make strong matches to resources.**
- **If we have accurate and up to date information on households experiencing homelessness in our region, we can make informed decisions regarding matching to available units.**
- **Case Conferencing meetings for Single Adults, Young Adults, and Families will be daily starting 4/17/23**



# Case Conferencing

- Available units will be shared with providers on a daily basis.
- Units will be available for matching only for a limited timeframe.
- Providers may nominate engaged households based on
  - Eligibility
  - Interest
  - **Service Match** Service Match: process to match a housing intervention to an unhoused neighbor's particular circumstances so the unhoused neighbor's needs are met with judicious use of public resources.
- If tiebreaking is needed, COVID Prioritization will be used. Additional factors may be used as necessary.
- For households not yet service matched to PSH, providers will indicate confirmation of Severe Persistent Mental Illness (SPMI), severe Substance Use Disorder (SUD), co-occurring disorders, or validating service matching tool results in HMIS.



# What is needed to successfully implement BNLs?

- **Strong data stewardship**
  - **Our system is limited by what is currently known.**
  - **Accurate, up to date information about household eligibility, needs, and preferences is required to make strong matches to housing resources.**
  - **It is all of our responsibility to ensure this data does not decay past the point of relevancy.**



# What is needed to successfully implement BNLs?

- **Provider engagement and accountability**
  - **If providers are nominating households to resources, the expectation is that those providers are maintaining contact with households to navigate them into housing.**
  - **KCRHA is seeking formal commitments from agencies across the region as a requisite to case conferencing participation.**





# Summary of Changes

- **Coordinated Entry will be moving away from the Priority Pool process for Single Adults, Young Adults, and Families.**
- **By-Name Lists will be operated for all populations beginning in April 2023.**
- **Case Conferencing for Single Adults, Young Adults, and Families will move from weekly to daily starting 4/17/23 . Available units will be matched to on a daily basis.**
- **If tiebreaking is necessary, Covid Prioritization will be used.**



# Summary of Changes

- As per HUD directive, External Fills will end by 5/26/23. In the interim, units will be available for External Fill if unfilled 14 days after posting in HMIS.



U.S. DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT  
WASHINGTON, DC 20416-7000

November 10, 2022

Marc Dones, Chief Executive Officer  
King County Regional Homeless Authority  
400 Yesler Way  
Seattle, WA 98104

Dear Marc:

I am writing both to recognize the progress that the King County Regional Homeless Authority (KCRHA) and its many partners have made in housing people experiencing unsheltered homelessness and to clarify some requirements related to Coordinated Entry (CE).

The U.S. Department of Housing and Urban Development's Office of Special Needs Assistance Programs (SNAPS) supports communities in their work to end homelessness, especially unsheltered homelessness, by finding sustainable housing for every household experiencing homelessness. The Seattle-King County Continuum of Care's support for Emergency Housing Voucher implementation and recent steps to develop a Housing Central Command (HCC) are very positive steps, and I'd like to commend KCRHA for its leadership.

At the same time, it has come to our attention that some Continuum of Care (CoC) funded projects in the Seattle-King CoC are bypassing the CE System required by 24 CFR 578.7(a)(8) through a process known as "External Fill". Use of the CoC's CE System is required under 24 CFR 578.23(c)(9) for all CoC funded projects, and this process does not appear to meet this requirement. We urge you to ensure that all CoC projects comply with the CE requirements as soon as possible—other than for the exceptions provided for projects serving people fleeing Domestic Violence, all referrals are coming from the CE System. The availability of technical assistance from SNAPS for HCC offers a great opportunity to get any support the CoC and other partners need to come into compliance. Please contact me if you need any other technical assistance, support or if you have any questions.

Thank you for your interest in the Department's programs.

Sincerely,

Norm Suchar  
Director  
Office of Special Needs Assistance Programs

cc: Jack Peters, CPD Field Office Director, Seattle



# Thank you

Please reach out to [alex.ebrahimi@kcrha.org](mailto:alex.ebrahimi@kcrha.org) with questions.

