



Coordinated Entry Committee Regular Meeting Minutes

Roll Call - 5/28/2026

Name	
Devin Konick-Seese	P
Noah Fay	Absent - Excused
Eddy Matlock-Mahon	P
Martha Lindner	P
Porscha Anderson	Absent
Patricia Sam	Absent
Elliot Hart	Absent - Excused
Kelsey Beckmeyer	P
Zsa Zsa Floyd	P
Sherry Tillman	P
Finn Rogers	P
Mustafa Mohammed	P

- Roll Call – 8 members present – 4 members absent
- Quorum - Yes

Land Acknowledgement & Theory of Change

- **Land Acknowledgement:** The King County Continuum of Care Board acknowledges that we work on the unseated traditional lands of the Coast Salish peoples, especially the first peoples of Seattle, the Duwamish people. The original stewards of the land, past and present. We honor with gratitude the land itself and the Duwamish tribe. This acknowledgement only becomes meaningful when combined with accountable relationships and informed action and is the first step in honoring the land that we today sit on and their peoples.
- **Theory of Change** – If we create a homelessness response system that centers people who have lived experience of homelessness, then we will be able to meet needs and eliminate inequities, in order to end homelessness for all.

Minutes Review

- Motion: Approve April Meeting Minutes – Eddy Matlock-Mahon
- Second – Kelsey Beckmeyer
- Vote: Approved

Public Comment – No public comments were received

Meeting Topic: Update on the CE Assessment Development Project – Tom Regan

Tom Regan presented drafts of the new Phase 1 and Phase 2 coordinated entry assessments currently under development for the coordinated entry system. The presentation included an overview of the assessment structure, guiding principles, and next steps for community engagement and implementation.

Background and Purpose

The redesigned assessments were developed following prior direction from the committee to move away from prioritizing households primarily based on length of homelessness and instead adopt a more robust, vulnerability-based prioritization approach. The assessment work group conducted a national landscape analysis of alternatives to the VI-SPDAT and used findings, along with existing local tools, to inform the new assessment design.

Two-Phase Assessment Structure

The work group proposed a two-phase assessment process:

- **Phase 1 (Triage Assessment):**
Designed to determine:
 - Whether a household is literally homeless, chronically homeless, or at risk of homelessness;
 - Whether prevention or diversion services are appropriate; and
 - Whether the household may require rapid rehousing, transitional housing, or permanent supportive housing.
- **Phase 2 Assessment:**
Intended for households with higher needs or vulnerabilities requiring a more in-depth assessment to determine appropriate housing interventions.



Key Components of the Phase 1 Assessment

The Phase 1 assessment includes:

- Assessment tracking and updating procedures to avoid duplicate assessments in HMIS;
- Identification of assessment location and assessor information;
- Questions regarding language access and translation needs;
- Screening for domestic violence/intimate partner violence, including referral procedures to the DV Hope Line and Domestic Violence Coordinated Entry System;
- Clear guidance on determining literal homelessness versus housed situations using simplified “Where did you sleep last night?” questioning;
- Household composition and population type identification (individual adult, family, youth, etc.);
- Income, benefits, and insurance information;
- Health and disability-related questions sufficient to determine intervention level without overburdening participants;
- Questions regarding eviction history, legal barriers, social supports, and interest in culturally specific services.

Key Themes and Priorities

The redesign emphasizes:

- Transparent communication with participants regarding eligibility and available resources;
- Earlier identification of prevention and diversion opportunities;
- Reduced collection of unnecessary or invasive information;
- Better alignment between participant needs and available housing interventions;
- Increased consistency and clarity for coordinated entry assessors and housing navigation staff;
- Protection of participant privacy, particularly for survivors of domestic violence.

Tom noted that some portions of the assessment, including scripts and certain rapid rehousing prioritization questions, are still under development and will continue to be refined before broader community rollout and implementation.



Phase 2

Tom Regan discussed the purpose and structure of the proposed Phase 2 assessment process for individuals identified through initial triage as potentially needing Permanent Supportive Housing (PSH).

A key theme was that many coordinated entry and triaging assessments, including prior tools such as the VI-SPDAT, were effective at identifying broad intervention categories (e.g., PSH, rapid rehousing, diversion, transitional housing) but were less effective at accurately prioritizing the highest-needs individuals for PSH. Participants noted that high assessment scores did not always correlate with PSH being the most appropriate intervention.

The workgroup emphasized the need for a second-phase assessment that more effectively identifies vulnerability and prioritizes individuals with the highest needs within the PSH-eligible population. The proposed two-phase approach aligns with HUD guidance on coordinated entry systems, allowing communities to first identify broad service needs and then conduct a deeper assessment for individuals with chronic homelessness and multiple disabilities.

The assessment design was heavily informed by the Vulnerability Assessment Tool developed by the Downtown Emergency Service Center (DESC). While the original tool is recognized nationally and internationally as a strong model for assessing vulnerability, implementation barriers have included the extensive training requirements and challenges maintaining scoring reliability and validity across large assessor teams.

To address these barriers, the proposed assessment adapts key elements of the DESC tool into a more structured and scalable format. Questions are designed to allow open-ended responses while enabling assessors to select standardized response options from dropdown menus or yes/no categories. This structure is intended to support consistent scoring and prioritization without relying on lengthy narrative responses or complex scoring procedures.

The assessment begins with screening questions intended to identify individuals whose care needs may exceed the scope of PSH services, such as those requiring significant physical assistance, skilled nursing care, or medical intervention. Questions address mobility limitations, cognitive impairments, medical equipment needs, and other indicators that may suggest the need for higher levels of care, including hospitals, skilled nursing facilities, or adult family homes.

Additional assessment domains include:

- Survival skills and basic needs access
- Connection to service systems and providers
- Food access and hygiene practices
- Medical conditions and mortality risk indicators



- Mental health symptoms, diagnoses, and crisis service utilization
- Substance use patterns and associated vulnerabilities
- Social functioning and interpersonal tolerance
- Homelessness history, including age and circumstances of first homelessness episode

The assessment aims to better understand both vulnerability and barriers to service engagement, including whether individuals are disconnected from providers, reliant on harmful social networks, or unable to safely meet basic needs independently.

Tom concluded by reiterating that the overall goal is to create a more practical, standardized, and reliable vulnerability assessment process that improves prioritization decisions for limited PSH resources while remaining feasible for broad community implementation.

Next Steps / Action Items

- Final drafts of the two assessment tools will be distributed to committee members prior to the June 25 meeting for final review and feedback.
- The Coordinated Entry Committee will be asked to vote on June 25 to endorse moving forward with implementation of the new assessment process.
- Continued coordination will occur with Pelle Tracey the University of Washington Information School, who remains engaged to support evaluation of the assessment process.
- Prior to full public implementation, the assessment will undergo a pilot phase with a small group of real participants and assessors to gather feedback on usability, participant experience, and assessor experience.
- Pilot evaluation will focus on how the assessment “lands” with participants and staff rather than measuring housing placement outcomes at this stage.
- Feedback from the pilot will inform readiness for broader rollout and any final refinements needed before implementation.
- KCRHA leadership review and approval processes will continue, including review by the Chief Programs Officer, Office of the CEO, and other leadership stakeholders.
- An update on the assessment development process will be presented to the CoC Board at an upcoming meeting next month.
- If endorsed by both KCRHA leadership and the Coordinated Entry Committee, the CoC Board will be asked in July to vote on moving forward with piloting and implementation.



- Following implementation, the evaluation process will compare the new assessment and prioritization approach against the current coordinated entry process, including qualitative feedback from participants and assessors.
- Evaluation findings may contribute to a future scholarly article documenting the community-developed assessment process and lessons learned.
- Long-term implementation goals include updating and improving coordinated entry prioritization practices, replacing the interim prioritization system currently based primarily on length of time homeless.

Meeting Topic: Emergent Needs Prioritization for CCS Sacred Heart Family Shelter – Tom Regan

Tom Regan provided an update regarding the potential closure of the Sacred Heart Family Shelter operated by Catholic Community Services (CCS). The shelter’s current location has been slated for closure, and KCRHA, CCS, and the City of Seattle are actively working to identify a new site for the program. At the time of the meeting, a replacement location had not yet been secured.

Tom shared that, consistent with prior committee endorsements for programs facing closure, families residing at Sacred Heart Family Shelter would be prioritized through the family coordinated entry system to help ensure that no families are displaced if a new location is not identified before the current site closes.

The program currently serves approximately nine families and the anticipated closure date for the current location is June 15, though partners are continuing efforts to secure a replacement location before that date.

Tom emphasized that the goal remains to transition the program to a new site without disrupting services or displacing families. The prioritization plan is intended as a contingency measure should relocation efforts not be completed in time.

Next Steps & Adjourn

Motion to adjourn meeting – Zza Zsa Floyd

- **Next meeting: June 25, 2026; 10:00 AM – 11:30 AM**

