

HOMELESSNESS

PREVENTABLE • SOLVABLE • UNACCEPTABLE



Homelessness Task Force of Greater KC Common Agenda: Coordinated Intake System Using Service Prioritization

Description: A coordinated intake or “front door” provides a single or coordinated method by which homeless people and those at risk find and access shelter, housing and/or services. Typically, the intake conducts outreach, initial prescreen survey intake (including eligibility determinations such as income and housing status), service prioritization assessment and program referral or program placement/reservations (such as shelter bed reservations.) Optimally, this is done with a standardized tool and process for identifying client/household’s resources and barriers to housing and for targeting interventions to meet their needs.

Benefits:

- Clear entry point for homeless and at-risk people in the community
- Greater opportunity to divert at-risk clients from homeless entry
- Faster access to beds/services for clients (reduces turnover time)
- Common understanding among programs of relevant client barriers and issues important to assess improving “fit” between clients and programs/services referred to/accepting
- Reduction of duplication of effort for intake/data collection and administrative burden at participation agencies
- Reduction of duplication for client having to give information repeatedly and/or different information to each agency
- Better data/feedback to system about trends in demand, needs and gaps
- Ability to base large portions of assessment on required/recommended HMIS data

Considerations:

- Single or multiple access points, including single location, phone based (2-1-1) paired with secondary intake at a site, or multiple locations using common assessment and intake process.
- Decisions about placements into homeless assistance programs should be made through the intake process instead of by individual providers.
- Common barrier assessment and targeting tool that categorize clients into different levels based on barriers/needs and targets program, resources and/or staff time accordingly
- Tools with combination of quantitative assessment (a score) and qualitative assessment
- Collect only as much information as needed
- Focus on immediate barriers to obtaining housing



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Needed to implement:

- Funding for central functions and identified operator(s)
- Agreement on basis for a referral or placement to each participating program
- Common and robust data system (used by both public and privately funded agencies)
- Programs and/or adequate supply of housing and supportive services that meet people’s needs
- Agreement on elements of assessment and targeting interventions
- Common training
- Ability to maintain/revise tool and process

Sample communities with this strategy: Hennepin County, MN (Families), Columbus, OH (full system), Cincinnati, OH (full system), Utah Balance of State (full system), Dayton, OH (full system)

Additional Information:

The Assessment and Referral Processes: Coordinated Assessment Checklist Addendum

 NAEH SOLUTIONS BRIEF | JANUARY 29, 2013

FILES: [THE ASSESSMENT AND REFERRAL PROCESSES: COORDINATED ASSESSMENT CHECKLIST ADDENDUM \(DOCX | 40 KB | 5 PAGES\)](#)

Coordinated Assessment Toolkit: Planning

 NAEH TOOLKITS | AUGUST 29, 2013

[Coordinated Assessment Checklist](#) (National Alliance to End Homelessness)

This checklist, developed by the Alliance, is meant to help communities conceptualize what issues they should begin considering and offers a timeline within which these actions might take place.

To learn more about how to incorporate prevention and diversion into your coordinated assessment process, please see our companion [Prevention and Diversion Toolkit](#).

Service Prioritization Tools Available

1. SPDAT (Service Prioritization Decision Assistance Tool) Versions:
 - a. Prescreen Assessment for Single Adults blended with the 100,000 Home Vulnerability Index (VI)
 - b. SPDAT v3 for Singles
 - c. F-SPDAT v1 for Families
2. DESC Vulnerability Assessment Tool
3. Community Supportive Housing (CSH) TAY (Transition Age Youth) Triage Tool
4. Synergy Intake and Screening Assessment Tool