Coordinated Entry Design Lab - Executive Summary

To date, the coordinated entry system (CES) in the South Dakota Statewide Continuum of Care (CoC) has not been created or implemented. In June 2017, CSH facilitated a half day meeting at the South Dakota Homeless Consortium annual meeting on the elements of a CES. In August 2017, CSH led a CES Design Lab. The CES lab was attended by 51 stakeholders from across the state who came together around a significant system-level shift that will result in the implementation of a robust CES serving all veterans, families with children, single adults, youth and young adults, survivors of domestic violence and other vulnerable populations experiencing homelessness in the South Dakota CoC. This CES will incorporate coordinated outreach, intake, assessment and referral processes, based on a prioritized by-name list of people experiencing homelessness in the South Dakota CoC. This system realignment represents a significant shift in the local understanding of the CES and current practices, reflects national best practices and correlates with federal funding requirements.

It is important to note that the recommendations included in this report are applicable and targeted to an initial launching of the CES. It is also important to recognize that the CES design will require frequent improvements and adjustments based on monthly data, learning post-launch, and changes in population needs over time.

High Level Recommendations:

- **Organize CES Implementation Infrastructure.** Develop an operational infrastructure to support the implementation of CES design developed in this CES Lab across the state. This infrastructure will be responsible for communications, coordination, reviewing policies, as well as providing guidance and decision making for the broader system. Collective ownership by the CoC and its member communities is a critical concept of the CES, and must be built into the design and implementation infrastructure. It is further recommended that the South Dakota CoC engage a Coordinated Entry System Project Manager to provide oversight/operational management of the CES by December 31, 2017. Primary responsibilities include supporting each region to design and implement CES at scale, oversight of the CES process and by-name list (BNL), incorporating the 211 helpline, partnering with direct service providers to become access points, and facilitate CES related workgroups. It’s common for this role to be positioned within the CoC lead entity to perform the oversight/operational management role of CES, or to subcontract with a neutral entity for general oversight.
- **Implement a Robust HMIS System.** Building capacity in the HMIS system is essential for the State to fully execute on the CES design developed by the community. It is recommended that the South Dakota CoC consider hiring an HMIS Administrator to build and manage the technology behind a fully developed CES. This role would also serve to improve the overall health of the South Dakota Homeless Response System to include: improved monitoring, higher quality system reporting, increased HMIS utilization across the system, and allow for more data-driven decision making.

- **Train on Quality Supportive Housing and Services.** To ensure high quality supportive housing programs are operated across the state it will be critical to complete and implement the South Dakota CoC Program Models (see Appendix IV) that highlights the range of housing interventions for those individuals and households coming in contact with the homeless system. Supportive housing program models set the minimum standards for each program type and standardize the services delivered across South Dakota’s housing inventory. In order to prepare for serving those prioritized through CES, those most vulnerable and those with significant barriers, it will be necessary to build provider capacity by developing and delivering a CoC-level and local training curriculum for direct housing and service providers and supervisors.

- **Expand Supportive Housing Inventory.** To end literal homelessness in South Dakota the community clearly identified the need for additional supportive housing inventory. To accomplish this goal it is recommended that the South Dakota CoC complete a supportive housing pipeline and financial Model to enable them to articulate the need and cost associated with the need. Following the pipeline and financial modeling, it is recommended that the South Dakota CoC develop and lead a Supportive Housing Pipeline Committee charged with developing and executing on strategies to develop supportive housing inventory state-wide.

- **Strengthen Diversion and Prevention Efforts.** Diversion is an important national strategy targeting households who come to the front door of the homeless system in need of immediate shelter. To reduce inflow into the homeless system and provide support for those not experiencing literal homelessness, develop and incorporate a diversion strategy state-wide. This strategy will work to organize and formalize the current informal efforts currently underway in many communities. Strengthening prevention efforts – those on the verge of losing their housing - will also help to reduce the inflow into the homeless system.

- **Implement Prioritization for Supportive Housing.** The CES is intended to prioritize individuals and households with the highest need for the housing intervention – including supportive housing that meets their need. Training and technical assistance will be needed to help communities implement the South Dakota prioritization policy for supportive housing projects.

- **Engage Public Housing Authorities.** The Public Housing Authorities have both resources and expertise that can expand housing to support the CES and CoC systems. Strategies for engaging the local PHA include:
  - Request consideration of preferences for people experiencing homelessness as a means of expanding resources for supportive housing; and
  - Require use of CES for access to vouchers with a “homeless preference”.


South Dakota Statewide CoC Coordinated Entry Design Lab: CES Consensus and Next Steps

In a coordinated entry system (CES), all providers of homeless housing and services in the community work together to ensure that from the moment a household first presents a housing crisis, there is a clear and consistent path towards ending their homelessness. A successful CES creates system change that shifts the focus of housing and service providers within the system from a strategy that says “Should we accept this household into our program?” to one that says “What housing/service assistance is best for each household to quickly and effectively end their housing crisis permanently?” Ultimately, the goals of a CES are to simplify access to housing and services for people experiencing homelessness, prioritize the most vulnerable households for the most intensive (expensive) housing/service resources, and improve overall system efficiency. CES provides a critical opportunity to intentionally collect and analyze system level data to inform and enhance decision-making and function.

Although communities have been working for many years to coordinate access to housing and service interventions, HUD provided further impetus when they published the Interim Final Rule for the Continuum of Care (CoC) Program. The Rule states,

“[E]ach Continuum is responsible for establishing and operating a centralized or coordinated assessment system that will provide a comprehensive assessment of the needs of individuals and families for housing and services.”

HUD further defines this requirement to mean a

“Centralized or coordinated process designed to coordinate program participant intake, assessment, and provision of referrals. A centralized or coordinated assessment system covers the geographic area, is easily accessed by individuals and families seeking housing or services, is well advertised, and includes a comprehensive and standardized assessment tool.”

HUD published CPD-17-01, Notice Establishing Additional Requirements for a Continuum of Care Centralized or Coordinated Assessment System, on January 23, 2017, which documents and details additional requirements and best practices of CES; and implemented a deadline for CES implementation of January 23, 2018. The agenda of the CES Design Lab in South Dakota aligned with requirements of this Notice and resulted in key decision points that, with further CoC progress, correspond with CES requirements.

Even with recent guidance, HUD continues to allow for flexibility in choosing a model that works best for an individual community based on geography, population, level of need, and other local factors. HUD strongly encourages communities to use their Homeless Management Information System (HMIS) for CES data collection and reporting. HMIS is a locally implemented database used to capture characteristics and services provided to individuals and families experiencing or at-risk of homelessness. Required by HUD in

3 The goal of the CSH Moving On Initiative and Toolkit is to help communities develop effective programs that enable residents to progress as their needs change. http://www.csh.org/moving-on/
order to receive homeless assistance funding, HMIS can provide critical information for community planning and service provision, and is an important analytical tool in reporting System Performance Measures annually. The South Dakota CoC is currently using XXXX. The South Dakota Housing for the Homeless Consortium/through the South Dakota Housing and Community Development Authority is managing the by-name-list (BNL). The HMIS system will need some refinements to meet the needs of a fully developed CES at scale.

CES Design Lab
On August 8-9, 2017, 51 members (See Appendix I – Registration List) of the South Dakota CoC (SD-500) Continuum of Care (CoC) came together to discuss the current homeless system, identify challenges within the processes, and develop solutions through a design practice that informs CES implementation. The CES Design Lab is structured to both convey baseline information on CES and to maximize stakeholder engagement in the CES design process. Participants were asked to take their “program hat” off, and put on their “system hat,” emphasizing the fact that individual projects are part of the larger housing system, and it’s the entire system that needs to work effectively for households experiencing homelessness. Participants agreed that the system must be designed for optimum efficiency for people experiencing homelessness, and that the burden to develop such a system; including constant reassessment and improvement to that system falls to housing and service providers as well as funders and planners. A significant amount work is required over the next several months and years to develop a system that works effectively for people experiencing a housing crisis.

The two day CES Lab focused the stakeholders’ attention on the major components of a coordinated entry system:

- **Access**: Entry points to a local housing and service system, which includes physical front doors, outreach teams, hotlines, virtual access, after-hours access, etc.
- **Assessment**: Standardized triage and assessment process that is adopted across the Continuum of Care (CoC) and intended to increase consistency and fairness in determining housing and service needs.
- **Assignment**: Process of referring households experiencing homelessness to housing and/or service openings, utilizing a CoC prioritization policy.
- **Accountability**: Outcomes, measurements, and a set of operating guidelines that enable a CoC to know if stakeholders are meeting system expectations, and if the coordinated entry system is effective.

In the South Dakota CES Lab, the participants covered significant territory and set the foundation for a cohesive statewide CES:

- Designated access points within each region, and underscored the potential of incorporating a statewide 211 system for CES;
Mapped the baseline timeline for accessing housing in each region as the system exists today to highlight the need to streamline the process;

- Designed the CES assessment workflow;
- Developed a draft prioritization tool;
- Determined the targeting and eligibility criteria that would be used to match households to appropriate housing resources;
- Began defining and examination of supportive housing program models;
- Developed a CES Performance Dashboard.

Within these discussions, critical decision points were addressed and the following recommendations were made by CES Design Lab participants and supported by CSH. It is important to note that these recommendations are applicable to the CES Launch Phase (now-August 2018), and that the CES will require frequent improvements and adjustments based on monthly data and local learning post CES launch.

**Access**

*Entry points to a local housing and service system, which includes physical front doors, outreach teams, hotlines, virtual access, after-hours access, etc.*

- **CES Front Doors/Access Points**

  The participants agreed to divide the state into 4 regions, which roughly correspond to the Community Action Agency regions (see Appendix II) for purposes of access points and inventory. See Table I for information on each Region. Region 1 includes Rapid City and Lakota County. Region 2 includes Aberdeen, Pierre and Huron. Region 3 includes Mitchell and Yankton. Region 4 includes Sioux Falls, which encompasses Minnehaha and North McCook counties.

  Within this CES shift, ‘front doors’ or access points will incorporate consistent intake, assessment, diversion and referral protocols at the system level. The access points identified in Table I below are places that a majority of people experiencing homelessness are already visiting. Region 4 and possibly other regions will incorporate current and expanded outreach efforts to align with CES protocols. Additional discussion regarding the specifics of how each location will be incorporated as a CES front doors/access point is necessary, and should be completed within the first year of CES implementation.
Table I – CES Access Points by Region

<table>
<thead>
<tr>
<th>Region</th>
<th>Organization/Access Point</th>
<th>Geography</th>
<th>Populations</th>
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<tbody>
<tr>
<td>Region 1</td>
<td>Cornerstone Lakota</td>
<td>Rapid City</td>
<td>Singles</td>
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<td></td>
<td>Lakota County Reservation</td>
<td>Families</td>
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<td>Tribes</td>
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<td>Region 2</td>
<td>Davis to fill in</td>
<td>Aberdeen</td>
<td>Singles</td>
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<td>Pierre</td>
<td>Families</td>
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<td>Huron - maybe</td>
<td>Youth</td>
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<td>Vets</td>
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<td>Tribes</td>
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<td>Region 3</td>
<td>Davis to fill in</td>
<td>Mitchell</td>
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<td>Yankton</td>
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<td>Reservations - maybe</td>
<td>Vets</td>
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<td>Tribes</td>
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<tr>
<td>Region 4</td>
<td>Bishop Dudley Union Gospel 4 Outreach teams</td>
<td>Sioux Falls, Minnehaha County North McCook County</td>
<td>Singles</td>
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<td>Families</td>
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- Virtual and Call-in Access
  Due to the geographic and transportation barriers throughout the State, a hotline/call-in and technology option is also necessary as part of the CES. The 211 system currently operational in various regions of South Dakota is a viable structure to build into the CES. Potential collaboration may include expansion of both the geographic coverage as well as the technological capabilities of the systems such as incorporating diversion screens as part of assessment. A representative from the 211 system present at the CES Design Lab expressed willingness to explore connections to CES.
Assessment

*Standardized triage and assessment process that is adopted across the Continuum of Care (CoC) and intended to increase consistency and fairness in determining housing and service needs.*

- The CoC will use the VI-SPDAT\(^2\) tool for prioritization purposes to identify the most vulnerable households to be prioritized first. Supplemental questions will be developed and integrated within the assessment tool to determine chronicity for intervention targeting and prioritization.
- Three versions of the VI-SPDAT adapted for subpopulations need to be included in the HMIS database. The CoC will begin using VI-SPDAT for families, and VI-SPDAT for young adults, in addition to using VI-SPDAT for single adults (currently being used by some of the veteran’s groups and the VA).
- Incorporate prevention and diversion screens (pre-VI-SPDAT) in an effort to redirect all households for whom safe, alternative housing options are available/viable to prevent them from entering the shelter and/or homeless housing system.
  - Prevention occurs when a household is imminently at risk of losing their housing. Prevention should focus on providing shelter for 1-7 and not greater than 14 days; as well as providing supports to steer households to alternative permanent solutions. Prevention efforts may include risk mitigation funds, connections with family, and affordable housing.
  - Diversion is an approach that helps households explore all other safe housing options, even temporary, with the support of trained professionals. Communities are experiencing initial diversion success rates between 30-50% for families and up to 30% for single adults. While long-term diversion data is not yet available, preliminary information points to assisting households in finding safe, alternative housing options and reserving limited shelter and housing resources for households who truly need it. *Tonight* is a common practice and shown to reduce inflow into the homeless system.
  - Flexible funding and highly trained staff are critical components of successful diversion and prevention program and should be subjects of future CoC training.
- Following completion of the VI-SPDAT and the subpopulation screens, the process moves to determination of eligibility for specific Supportive Housing Program Models (see Appendix IV) such as Permanent Supportive Housing, Rapid Rehousing and Transitional Housing. Determining eligibility criteria looks at both regulatory requirements and effectiveness of the specific housing intervention to address the household’s homelessness. Details on Eligibility and Targeting are highlighted in the next section:

Below is a depiction of the South Dakota CES Assessment Workflow:

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\(^2\)http://orgcode.nationbuilder.com/vi_spdat
South Dakota CoC CES Assessment Workflow

Prevention Screen ➔ Imminent risk of Housing Loss ➔ Referral to Agency with Prevention Resources

Universal Data Elements in HMIS (Demographic Information) ➔ Diversion Screen ➔ Alternative Housing Options Available

Victim of Violence Screen ➔ Household is a Good Fit for Homeless Housing Resources ➔ Chronic Screen

Family VI-SPDAT ➔ Youth VI-SPDAT ➔ Single VI-SPDAT ➔ Eligibility Screen ➔ Supportive Housing Match (PSH, RRH, TH)

Household is a Good Fit for Veteran Housing Resource ➔ Veteran Screen ➔ Household is a Good Fit for Veteran Housing Resource

No Alternative Housing Options Available ➔ Literally Homeless

Eligibility Screen ➔ Supportive Housing Match (PSH, RRH, TH)
Assignment

Process of referring households experiencing homelessness to housing and/or service openings, utilizing a CoC prioritization policy.

- The CES Prioritization Policy was drafted during the CES Design Lab with broad participation of community stakeholders. See Appendix III – Proposed Community-Wide Prioritization Standards for South Dakota CoC Coordinated Entry System. This draft Prioritization Policy references the sequential ordering of how populations are prioritized for housing interventions. This Prioritization Policy requires further review to advance decisions to accurately address both need and community priorities for target populations, eligibility criteria, and prioritization factors. Approval and implementation of the prioritization policy for transitional housing, rapid rehousing and permanent supportive housing projects will also require further action based on the CES Implementation Infrastructure put in place. A key component of the implementation of the Prioritization Policy includes extensive training for local staff and organizations.

- Per previous CoC Board policy approval, 100% of PSH in the South Dakota CoC is prioritized for chronically homeless households. Upon housing all chronically homeless households, in alignment with CPD-14-012, Notice on Prioritizing Persons Experiencing Chronic Homelessness and Other Vulnerable Homeless Persons in Permanent Supportive Housing, the CoC will prioritize (non-chronic) households with a disability with the most severe service needs. One aspect of the prioritization that requires further discussion and decision is whether the prioritization will follow recommended federal priorities or if they will prioritize families over youth.

- Targeted work groups with specific focus on elements and/or sub-populations will help build a comprehensive system that takes into account a wide range of needs and capacities:
  - Develop Domestic Violence (DV) Work Group to follow up on the following decision points: Where do people fleeing/attemping to flee DV fit within prioritization policy; How does lethality factors into prioritization policy and the CES?
  - Develop Transitional Housing (TH) Work Group to follow up on the following decision points: Who are the target priorities for TH; How to right-sizing/conversion of TH as part of the larger homeless housing system.
  - Connect CES planning to ongoing work with Veterans workgroups: Where in the process does veteran status and access to specific resources for veterans fit?

- BNL List Management is a key element of a working CES system.
  - Incorporate a single, sortable by-name list in HMIS that is used to understand current need and prioritize the most appropriate, targeted household to housing openings.
  - Develop and implement a policy to manage each region’s waitlist to include “active” and “inactive” households.
  - While waiting for CES to have the capacity to match households to inventory in HMIS, each region will need to hold “Case Conferencing” meetings to manually match households to supportive housing openings in the region. In most communities Case Conferencing occurs weekly to ensure that every vacancy is filled as quickly as possible. For communities that have very little turnover in their supportive housing inventory, in addition to “matching”, they typically use Case Conferencing as a time to update the BNL, discuss system performance, and...
discuss barrier buster strategies for those households that are currently in the housing search process.

- **Attach eligibility criteria to each housing development and housing intervention for the entire housing inventory in HMIS to ensure accurate and efficient housing matches.** This standardized information built into the referral system will decrease the pressure on the Case Conferencing agendas over time.

- **Mandate a date certain [insert date determined by the CES Implementation Infrastructure] for 100% of CoC and ESG-funded housing unit vacancies are filled from CES and all "side doors" are closed.** Although this may be a challenge to initiate, the success of the CES system relies on all housing opportunities and services working collaboratively.

- **Align with the Housing First Philosophy throughout the entire CES system, starting with implementation of the Prioritization Policy.** It will still be necessary to collect some identification and/or verification documents from households prior to housing/service enrollment, but those requirements should be as minimal as possible with the goal of housing people rapidly, and then working with them through the services offered to collect identification documents that will be necessary for goals including employment and education.

- **Using data to track CES activities,** such as completing a monthly analysis of inflow and outflow rates by region will help understand demand/need, capacity and gaps in the inventory, as well as opportunities to identify roadblocks in the process. Monthly analysis of CES data will enable both local and statewide adjustments to address capacity, and streamline processes.

### Accountability

*Outcomes, measurements, and a set of operating guidelines that enable a CoC to know if stakeholders are meeting system expectations, and if the coordinated entry system is effective.*

- In the spirit of holding the system as a whole, and all participating organizations accountable, the following goals were established for South Dakota CoC CES by CES Design Lab participants to be implemented by [date to be established by the CES Implementation Infrastructure]. These (and other identified) metrics will be part of a **CES Dashboard** that tracks outcomes on a monthly basis (See Appendix V):
  - 90% of supportive housing providers will participate in CES (PSH and RRH providers included on the HIC)
  - 90% of PSH & RRH enrollments come from CES (accounting for a few providers who may not participate in CES at launch).
  - 20% referral denial rate
  - The average length of time from referral to move-in is 30 days or less.
  - Additional metrics will be added during the remaining design process and also during implementation.

- At an earlier CES session in June 2017 with the South Dakota Homeless Consortium, CSH presented a preliminary **system map** of the current homeless service referral system using available data from the
HMIS and point in time counts. See Appendix VI for copy of the preliminary South Dakota System Map. Updated system map(s) can be created periodically with data from the implemented CES to track improvements in outcomes and timelines.

- Develop and implement the South Dakota CES Operations Manual/Policies and Procedures Manual through a community process. This manual should guide all operations to include identifying timelines for each step of the CES process.
- Consider developing and implementing a qualitative analysis of the SD CoC CES. Some communities have developed a client survey tool and a policy for administering the tool to those that have moved into supportive housing and those that remain on the waitlist at the time of survey. Once created and implemented, the community can utilize the results of the analysis to incorporate adjustments to the systems.

System Level Recommendations

Throughout the two-day CES Lab, system-level themes emerged and required in-depth group discussion. CSH utilized local discussions as well as national best practices to develop the following system-level recommendations.

-Regional Process Maps

- CES Design Lab participants engaged in a process of mapping the community’s current process for accessing housing in each region to identify the strengths and challenges of the process. Through this process we were also able to establish baseline data to measure improvement over time. (See Appendix VII – South Dakota CoC CES Vision Map). Themes of the process mapping exercise included:
  - There is a gap in understanding the true timeline for housing from entry into the homeless response system.
  - It is unclear where people go to access housing;
  - There has to be a standardized process for getting into line for housing;
  - We need to incorporate access to housing on tribal reservations;
  - The current system is not housing the most vulnerable;
  - There is a need to standardize the process of determining who goes to what housing type and in what order.
  - We need a standardized documentation collection processes for all supportive housing projects.
  - A placement team meeting/conversation already exists within the veterans’ initiative, but it needs to be restructured to incorporate all populations and become singularly focused on matching people to open housing slots/units and busting thorough barriers to housing, expediting the housing and lease up process.
  - It takes too long to house people. There is a need to ensure that all populations have access to CES quickly and easily. It was also made clear that we need to ensure accurate and
consistent messaging and adherence to the CES process across all CES locations to ensure the efficacy of the CES. We need to identify CES locations with dedicated CES staff in as few locations as possible while assessing the most people.

-Tribal Outreach

There was a consensus that there should be more tribal representation and input in the CES process. As part of this engagement with the tribes, there should be discussion of access points as well as a review of the VI-SPADT and its usefulness as an assessment tool for the Native American population. Additionally, discussions and consideration need to be made for the possibility of including supportive housing inventory on reservations in the South Dakota Coordinated Entry System.

-CES Implementation Infrastructure

It is recommended that the South Dakota CoC develop a formal CES implementation infrastructure to support a quick implementation, with good communication, and to achieve as much uniformity as possible across a huge geography. Below is an example of a possible structure:

**Proposed South Dakota CES Implementation Infrastructure**
- **Workgroups**
  
  - **CES Workgroup**
    - Participants – Housing provider leadership, PHA, CES Access Point/Front Door Leadership, and South Dakota CoC.
    - Function – Develop CES policies and procedures (CES Operations Manual), collect project eligibility criteria, finalize community prioritization tool, finalize community housing models, develop CES staffing roles, develop all CES job descriptions, develop all CES new staff orientations, develop case conferencing agenda (and its evolution to meet needs over time), etc.
    - Within the assessment tool, identify questions and work flow of:
      - Prevention Screen
      - Universal Data Elements
      - Diversion Screen
      - Lethality assessment / Domestic violence Screen
      - Veteran Screen
      - Chronicity
      - VI-SPDAT for three populations (singles, families, transition age youth)
  
  - **Domestic Violence Workgroup**
    - Participants – Domestic Violence providers, CoC leadership, HMIS.
    - Function – Determine role of lethality in targeting people experiencing homelessness for housing resources, and how the community will prioritize households fleeing domestic violence. Determine appropriate questions to be added to CES assessment tools, identify the access point(s) that is most appropriate for this population, and solve data collection challenges.
  
  - **Transitional Housing Workgroup**
    - Participants – Transitional housing providers, CoC leadership, transitional housing funders.
    - Function – Identify target population, how prioritization for openings will work, develop a transitional housing model, and develop a right-sizing and/or conversion plan. This is a time limited work group who has a very specific end goal; this workgroup will end when specific goals are met (ideally by January 2018).
  
  - **HMIS Workgroup**
    - Participants – South Dakota Housing Development Authority (HMIS lead), housing provider leadership.
    - Function – Explore full CES capacity, ensure system performance measurement standards are implemented effectively, update HMIS forms (Release of Information, Memorandum of Understanding, etc.), improve ability to generate reports, establish housing inventory functionality and an eligibility criteria matching engine, incorporate real-time unit availability function, ensure critical data elements can be tracked (and local outcomes

**Commented [JB5]:** Davis/Lorraine – need input on appropriate reference – DV and sex trafficking?
measured), embed VI-SPDAT assessment tools for families, youth, and single adults (Version 2). In addition, monitor and ensure HMIS utilization and data quality broadly, beyond just CES.

- **PSH Workgroup**
  - Participants – PSH housing provider program managers or directors of programs, housing authorities who establish (or are considering) homeless preference vouchers, and CoC leadership
  - Function – Standardize eligibility criteria, standardized enrollment processes, standardize documentation requirements, standardize service delivery package, and standardize the referral process from CES; as much as possible.

- **RRH Workgroup**
  - Participants – RRH housing provider program managers or directors of programs and CoC leadership.
  - Function – Standardize eligibility criteria, standardized enrollment processes, standardize documentation requirements, standardize service delivery package, and standardize the referral process from CES; as much as possible.

- **Landlord Marketing Workgroup**
  - Participants – Housing Authority Landlord Relationship Manager, Apartment Association, Marketing and Development staff from the provider community, CoC communication and media staff/representatives.
  - Function - Develop and execute on strategies to effectively engage and recruit landlords and property owners to participate in homeless response system housing programs. Host informational sessions, award landlords for participation, etc.

- **Pipeline Committee**
  - Participants – Public and private funders (not just the traditional homeless system funders, for example: Housing and Community Development Department), public housing authorities.
  - Function – Complete financial model and understand the number/type of units the CoC needs to meet overarching goals, and develop a concrete strategy to right-size housing inventory. Begin identification of resources available to redirect to implement the pipeline strategies.

**Veterans’ Workgroup (Already existing)**

- Participants – Current participants are the VA, SSVF providers, VOA and other veteran services providers.
- Function – Assure integration of veterans into the CES process. Determine how veterans will be assessed, where they will be assessed, and if the VA will incorporate all the VASH vouchers into the statewide CES inventory.
- Staffing Model/Hiring

Collective ownership of the CES is critical. It is recommended that CES Work Group work with CSH to prioritize discussion of the staffing model for CES, including a determination regarding who will oversee the CES, and further, the staffing structure/roles that will be necessary to support it. Here’s an example of a staffing structure that other communities have adopted:

- CES Project Manager
  - Team member responsible for facilitating workgroups, implementing workgroup recommendations, monitoring daily operations, and reporting on system level performance of the CES to the CoC. See Appendix VIII – Sample Job Description – CES Manager.

- CES Staff: General Comments
  - We did not get to this discussion during the CES Lab. It is recommended this discussion be a priority topic for the CES Workgroup. CES must have staff who are flexible, adaptable and expect their role to change as the system adjusts. Roles must change to meet current needs, requiring staff who embrace change and have the ability to quickly adjust. For example, while these team members may begin as CES Assessors, the community may learn that additional Housing Locators are needed to increase the rate that households are permanently housed and decrease the average length of time people experience homelessness. With these flexible positions, an Assessor can be (and expects to be) shifted into the Housing Locator role. See Appendix VIII – Sample Job Description – Housing Assessor

- Change Management

- Based on feedback from local stakeholders, the CES Design Lab was successful in promoting a shift in the level of community engagement around CES planning. The CES Design Lab was fairly well-attended and participants fully engaged in the process, taking on the challenge to think at a system level and set ambitious goals that lead to an effective system for people experiencing homelessness in the South Dakota CoC. The implementation work that results from this Lab will likely go a long way in improving community buy-in, and contribute to a larger system-level transformation. Opportunities for broad community participation are strongly encouraged in the future, whether it's focused on high level CoC Strategic Planning or more in the weeds, looking at system level data as decisions are considered. The community seems to be in a healthier and more optimistic place, ready to be a part of a larger shift for the benefit of people experiencing homelessness.

- To promote forward, effective movement, it is recommended that the CoC dig into the following topics:
  - CES Staffing Model
  - Navigation
Barriers to identifying market rate and affordable housing landlords came up several times throughout the CES Design Lab. A local Landlord Engagement & Recruitment Workshop is recommended (including two webinars and one onsite workshop) to provide foundational best practice information and an interactive event focused on building and refining skills necessary to effectively engage, recruit and sustain landlords who are willing to house people with housing barriers.

- Provider Training Series

- To effectively manage the culture shift that is required by the CES redesign and implementation of a low-barrier housing system that prioritizes the most vulnerable households, we recommend development of a CoC-level cross-systems training curriculum, or Provider Training Series, for direct service and supervisor level staff (advocates, case managers, program managers). Shifting to a system that truly prioritizes the most vulnerable households will put more demand on service providers, making training and support critical in the following areas:
  - Housing First
    - Reducing Barriers
    - Eviction Prevention
    - Tenant Leadership
  - Rapid Re-Housing and the Progressive Engagement Approach
  - Diversion
  - Supportive Services: Best practices within ES, TH, RRH & PSH
    - Critical Time Intervention
    - Harm Reduction
    - Motivational Interviewing
    - Mental Health First Aid
  - Moving On Initiative (aimed at public housing authorities)
  - Fair Housing
  - Eviction Prevention
  - “Vocationalizing” Supportive Housing
  - System Performance Measures
  - Others as identified

- It is recommended that South Dakota CoC host an up-to-date community training calendar on their website. The calendar should be well known by service and housing providers, and a tool that people can add to when trainings become available and need to be advertised broadly. A simple
example from Alameda County’s HMIS office can be found at
https://www.acgov.org/cda/hcd/hmis/training-calendar.htm.

- Funding sources likely need to be identified and are often a combination of community, state and federal and private resources. SSVF is suggested as a project with flexible funding for such training. CSH can assist in identifying low cost/free online trainings if funding sources are not available for specific topics. Due to staff turnover, this training cycle must be ongoing and/or available online through recorded trainings.
## Appendix I – Attendance List

### Attendance Sheet

**Coordinated Entry Design Lab**  
**August 8, 2017 - Pierre, SD**

<table>
<thead>
<tr>
<th>Name</th>
<th>Organization</th>
<th>Email</th>
<th>Phone</th>
</tr>
</thead>
<tbody>
<tr>
<td>Melissa Jungermann</td>
<td>VOA, Dakota</td>
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<td>Paul Miller</td>
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<tr>
<td>Jeri Smith</td>
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<td>605-773-7251</td>
</tr>
<tr>
<td>Davis Schiavello</td>
<td>SD HCA</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tammie Polak</td>
<td>SORFA</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Les Kinstad</td>
<td>City of Sioux Falls</td>
<td><a href="mailto:lkinstad@siouxfalls.org">lkinstad@siouxfalls.org</a></td>
<td>605-367-8177</td>
</tr>
<tr>
<td>Tammie Denning</td>
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<td>605-334-2803</td>
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<tr>
<td>Natalie-nordstrom</td>
<td>SF Housing</td>
<td><a href="mailto:d.nordstrom@siouxfallshousing.org">d.nordstrom@siouxfallshousing.org</a></td>
<td>605 532-0704</td>
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<tr>
<td>Melanie Bliss</td>
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<td>605-335-1418</td>
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<td>Susan West</td>
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<td>605-224-5811</td>
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<td>Tammy Hild</td>
<td>Black Hills VA</td>
<td><a href="mailto:jaimie.hild@va.gov">jaimie.hild@va.gov</a></td>
<td>605-490-6587</td>
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<tr>
<td>Shannice Troy</td>
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<td>605-347-7441</td>
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<td>605-490-1254</td>
</tr>
</tbody>
</table>
### Attendance Sheet
**Coordinated Entry Design Lab**  
**August 8, 2017 - Pierre, SD**

<table>
<thead>
<tr>
<th>Name</th>
<th>Organization</th>
<th>Email</th>
<th>Phone</th>
</tr>
</thead>
<tbody>
<tr>
<td>Karen Cherley</td>
<td>Southeastern BH</td>
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</tr>
<tr>
<td>Name</td>
<td>Organization</td>
<td>Email</td>
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<td>605-662-8994</td>
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<td>605-995-2705</td>
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</tr>
</tbody>
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Attendance Sheet
Coordinated Entry Design Lab
August 8, 2017 - Pierre, SD
# Appendix III - DRAFT – South Dakota CoC CES Prioritization Standards

## IF WE FOLLOW

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<td>AND PSH is for</td>
<td>1. Chronic Homeless Definition</td>
<td>2. VI-SPDAT #</td>
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<td>AND RRH is for:</td>
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## THEN Prioritize Based on:

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<td>1. Prioritization Score</td>
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<td>2. Length of Homelessness</td>
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<tr>
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<td>Non-Chronic households and a VI-SPDAT ??+</td>
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<td><strong>RRH</strong></td>
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<td>1. Prioritization Score</td>
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<td>VI-SPDAT ??+ waiting for PSH</td>
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<tr>
<td>TH</td>
<td>To Be Determined Locally</td>
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<tr>
<td>ES</td>
<td>First Come, First Served</td>
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</table>
## Permanent Supportive Housing

Permanent housing that is coupled with supportive services that are appropriate to the needs and preferences of residents. Individuals have leases, must abide by rights and responsibilities, and may remain with no program imposed time limits. Housing may include various combinations of subsidy resources and services. Supportive housing in South Dakota is Housing First, and follows a harm reduction philosophy.

<table>
<thead>
<tr>
<th>Program Description</th>
<th>Essential Program Elements</th>
<th>Time Frame</th>
<th>Population Criteria</th>
<th>Desired / Expected Outcomes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rental assistance with supportive services for persons who are coming from the street or shelter/interim housing. Programs can operate on a project-based or scattered-site model.</td>
<td></td>
<td>No time limits</td>
<td>• Any high needs individual with multiple barriers to housing that is literally homeless (lease-based program) • Specialized eligibility requirements for subsidies including veterans, disabled, long term homeless, or domestic violence</td>
<td><strong>Targeting:</strong> Chronic households and households with a VI-SPDAT score of X or higher</td>
</tr>
</tbody>
</table>
Rapid Re-Housing
Program of stabilization and housing relocation, focusing on re-housing all persons, regardless of disability, background, or income, as quickly as possible in appropriate permanent housing.

<table>
<thead>
<tr>
<th>Program Description</th>
<th>Essential Program Elements</th>
<th>Time Frame</th>
<th>Population Criteria</th>
</tr>
</thead>
<tbody>
<tr>
<td>Short-term rental assistance and supportive services program that rapidly re-houses and stabilizes persons who are homeless into appropriate permanent housing.</td>
<td>Up to 24 months</td>
<td>Literally homeless households or those residing in shelters. Households that show the ability to become self-sufficient in a short period of time as evidenced by: having income potential, and do not need intense services to remain housed; recently became homeless; no serious known disabilities. May be used as a bridge to PSH.</td>
<td>Targeting: Households with a VI-SPDAT score of X or lower</td>
</tr>
</tbody>
</table>
Transitional Housing
Time-limited housing where individuals that are homeless may stay and receive supportive services, designed to enable individuals to move into permanent housing.

<table>
<thead>
<tr>
<th>Program Description</th>
<th>Essential Program Elements</th>
<th>Time Frame</th>
<th>Population Criteria</th>
<th>Desired /Expected Outcomes</th>
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</thead>
</table>
| Short-term housing and supportive, wrap-around services (up to 2 yrs.) to prepare individuals that are homeless to secure and maintain permanent housing at exit. | Up to 2 years | - Literally homeless youth (16-24)  
- Literally homeless households needing intensive recovery services | |
## Emergency Shelter
Temporary shelter from which people experiencing homelessness access permanent housing.

<table>
<thead>
<tr>
<th>Program Description</th>
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<th>Time Frame</th>
<th>Population</th>
<th>Desired /Expected Outcomes</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Up to 30 days</td>
<td>Any literally homeless household</td>
<td></td>
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</table>
Appendix V - South Dakota CoC  
Coordinated Entry System  
Performance Dashboard

<table>
<thead>
<tr>
<th>Outcome</th>
<th>% of Housing Providers Engaged in CES</th>
<th>% of Program Denials from CES</th>
<th># of Days from Referral to Move-in</th>
<th>% of Program Enrollments from CES</th>
</tr>
</thead>
<tbody>
<tr>
<td>Target</td>
<td>90%</td>
<td>20%</td>
<td>30</td>
<td>90%</td>
</tr>
<tr>
<td>Actuals</td>
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</tr>
</tbody>
</table>
APPENDIX VI – South Dakota (2016) Homeless System Map

South Dakota Homeless System Map

1. Emergency Shelter
   - 364 exits in 2016
   - 77% LOS < 30 days
   - 21% LOS 1 - 3 mo
   - 2% LOS > 3 mo

2. Transitional Housing
   - 151 exits in 2016
   - 47% Average Utilization
   - 182 people (PIT): 2017

3. Permanent Supportive Housing
   - 118 exits in 2016
   - 47% Average Utilization

Homelessness
- 13% From ES
- 29% From TH

Unknown Destinations
- 70% From ES
- 15% From TH

Rapid Re-Housing
- 34% (40) Exiting Prison
- 30% (45) Place Not Meant for Hab.
- 15% (22) Transitional Housing
- 9% (13) Staying with Family/Friends
- 2% (4) Rental Housing
- 1% (1) Street

Permanent Housing
- 11% (6) Staying with Family/Friends
- 11% (6) Street

Unknown
- 2% (1) Other

Unknown
- 2% (1) Other

Staying with Family/Friends
- 28% (68) Literally Homeless
- 72% Other

Emergency Shelter
- 33% (668) Staying with Family/Friends
- 20% (411) Hospital/Psych/ Jail/ Foster Care/ Detox
- 15% (281) Place Not Meant for Habitation
- 11% (229) Rental Housing, no subsidy
- 8% (145) Emergency Shelter
- 6% (129) Hotel/Motel
- 9% (54) Other
- 1% (2) Rentals, with subsidy
- 1% (2) Safe Haven
- 1% (2) Owned by Client
- 1% (2) Transitional Housing
- 1% (2) Don’t Know/Refused
- 1% (2) Information Missing
- 0% (0) Permanent Supportive Housing

Literally Homeless
- 49% (37) Literally Homeless
- 49% Other

Literally Homeless
- 23% (14) Temporarily Staying with Family/Friends
- 15% (10) Don’t Know/Refused
- 6% (4) Hotel/Psych/ Jail/ Foster Care/ Detox
- 1% (1) Place Not Meant for Habitation

Exit too

Literally Homeless
- 24% (14) Rental by Client, No Subsidy
- 5% (4) Rental by Client, Subsidy
- 3% (2) Permanently Living with Family/Friends
- 0% (0) Exit to PSH
- 0% (0) Owned by Client

Exit too

Exit too
Appendix VII

Coordinated Entry System - The Vision
South Dakota Statewide CoC

1. Access
2. Assess
3. Assign
4. Navigate
5. Refer
6. Lease

**CES Access Points**
- Region 1: Cornerstone, Lakota
- Region 2: 
- Region 3: 
- Region 4: Bishop Dudley, Union Gospel, Outreach Teams
- Statewide: 211 Helpline

**CES Assessment**
1. Prevention Screen
2. Universal Data Elements
3. Diversion Screen
4. Violence Screen
5. Chronic Screen
6a. Single VI-SPDAT
6b. Family VI-SPDAT
6c. Youth VI-SPDAT
7. Eligibility Screen

Assessments will be completed by designated CES Housing Assessors at CES Access Points and in HMIS.

**CES Housing Match**
1a. PSH = Chronic or VI-SPDAT Score XX+
1b. RRH = Non-Chronic or VI-SPDAT X-X
1c. Income = Non-Chronic and VI-SPDAT 0-X
2. Prioritization
3. Eligibility

 Prioritization is determined by VI SPDAT scores and matching would happen in HMIS. After a housing type is determined people are added to the waitlist.

**CES Documentation Navigation**
Navigation will be completed by Housing Case Managers. Case Managers assist the clients referred to their programs to collect the necessary documents to enter housing.

**CES Housing Referral**
Referrals will be sent through HMIS and directly to housing providers. Housing providers will only enroll individuals and families into their programs that are referred by CES.
Appendix VIII – Sample Job Description – CES Project Manager

SUMMARY:
XXXXXXXXXX provides equitable opportunities for people to be healthy, happy, self-reliant and connected to community. On any given night over X,XXX people are homeless in XXXX. Both hidden and in plain sight, many families and individuals struggle to survive every day. XXXXXXXXX is leading the County's homeless work and the Coordinated Entry System. The Project Manager is a critical leader in our effort to reduce homelessness in the region. The Project Manager will work closely with XXX,XXX, local funders, and community partners to develop and implement Coordinated Entry. Coordinated Entry (CES) links people experiencing homelessness to housing programs across XXX. CES is a key innovation in reducing homelessness and the importance of this strategy has been underscored by the federal Department of Housing and Urban Development (HUD) setting requirements for communities to establish a coordinated engagement system. The CES Project Manager is responsible for implementing a state-wide initiative to address and end homelessness in XXX, and provides leadership to a team of staff that consists of a contract monitor and referral specialists. This challenging position directly impacts the lives of thousands of people in need in XXX and will reward effort and dedication with tangible results. To be successful, the CES Project Manager is a critical thinker, a change agent, and an implementer.

JOB DUTIES:
- Hire, train, and supervise the CES team which consists of a contracts monitor and referral specialists.
- Manage a complex inter-jurisdictional and inter-agency project implementing the new CES system and manage CES operations upon implementation.
- Resolve outstanding issues related to the CES system planning currently in process and develop infrastructure for the system, including operations, governance, budget and staffing.
- Manage competitive funding award processes, including working with the CES Contract Monitor on the development of Requests for Qualifications (RFQ) and Requests for Proposals (RFP).
- Develop and manage contracts and/or partnering agreements with and between various entities, including funding partners, and other non-profit agencies.
- Refine and develop CES assessment tools and ensure ongoing training and quality assurance for CES assessments.
- Create outreach and access plan to inform people experiencing homelessness and at risk of homelessness, homeless service providers, potential referral sources, and the general public about the new system.
- Direct the section in conducting public forums and processes with a variety of stakeholders to inform them about programmatic and policy matters and to gather meaningful input from them concerning programmatic and policy direction.
- Represent XXXXXXXX and serve as liaison to public and private funders with relation to implementation of CES.
- Work with XXX, XXX, XXX regarding project and program evaluation for continuous improvement, and in making project/program policy recommendations.
- Coordinate with XXXX and public and private funders to utilize CES to inform a comprehensive system approach to preventing and ending homelessness and on funding priorities, restrictions, contracts and outcomes so as to align with CES.
- Lead efforts to integrate resources cross systems resources with CES, in particular behavior health, employment, and others.
- Perform other duties as assigned.

**EXPERIENCE, QUALIFICATIONS, KNOWLEDGE, SKILLS:**
1. Bachelor's degree in a relevant field and five years of experience in planning and/or implementing affordable housing, social services, and/or homelessness programs; or equivalent combination of education and experience.
2. Experience leading inclusive planning processes that bring together constituencies representing diverse interests, and successfully result in concrete products.
3. Experience with managing RFP/RFQ processes.
4. Experience with contract development and management.
5. Skill in gathering, manipulating and using data utilizing a computer and other tools.
6. Strong communication skills.
7. Demonstrated ability to work as a team leader and as a liaison between systems both internally and externally with other jurisdictions and service providers.
8. Ability to work under deadlines, work on a number of tasks simultaneously, and organize and prioritize work quickly in response to changing needs.
10. Valid XXX State Driver's License or the ability to travel throughout the state in a timely manner.

**PREFERRED QUALIFICATIONS:** Demonstrated knowledge of and experience in working with people experiencing homelessness or homeless services. Ability to successfully manage challenging politically sensitive situations. Experience with Coordinated Entry and Homeless Management Information System (HMIS). Proven ability to support partner agencies undergoing organizational change.
APPENDIX VIII– Sample Housing Assessor Job Description

Job Title: Coordinated Access Housing Assessor
FLSA Classification: Exempt
Reports To: XXXX
Summary: Serves a key role in the system-wide assessment of homeless persons to match them to the appropriate housing intervention. The Housing Assessor will screen clients using an assessment workflow through the Homeless Management Information System (HMIS). The assessor will also collaborate with system partners. This position will work independently at times and as part of a team at other times.

Essential Duties and Responsibilities:

- Screens homeless persons for housing eligibility using the Coordinated Access assessment tool.
- Provides client referral to the correct housing intervention.
- Ensures all data is entered accurately into HMIS.
- Be available to conduct assessments at different Assessment Hubs located throughout the Continuum of Care.
- Attends all Housing Assessor and HMIS trainings in order to fully utilize the Coordinated Access system accurately.
- Provides high quality services to those accessing the homeless services system.
- Provides regular feed-back to management level staff of collaborating agencies regarding the front-line Coordinated Access process.
- Provides feed-back to Coordinated Access Workgroup regarding Policies and Procedures of the Coordinated Access system.
- Participates in case conferences as needed.
- Participates in Coordinated Access Transition Team meetings as needed.
- Performs other duties as assigned.

Competency: To perform the job successfully, an individual should demonstrate the following competencies:

- Oral Communication - Speaks clearly and persuasively in positive or negative situations, listens and gets clarification, responds well to questions, participates in meetings.
- Written Communication - Writes clearly, persuasively and informatively, edits work for spelling and grammar, and reads and interprets written information.
- Dependability - Follows instructions, responds to management direction, takes responsibility for own actions, keeps commitments, commits to long and/or non-traditional hours of work when necessary to reach goals, completes tasks on time or notifies appropriate person with an alternate plan.
- Judgment - Displays willingness to make decisions, responds compassionately to persons being served while maintaining appropriate and professional boundaries, exhibits sound and accurate judgment, supports and explains reasoning for decisions, includes appropriate people in decision-making process.
- Planning/Organizing - Prioritizes and plans work activities, uses time efficiently, plans for
- Additional resource needs, sets goals and objectives, develops realistic action plans.
- Innovation - Displays original thinking and creativity, meets challenges with resourcefulness, generates suggestions for improving work, and develops innovative approaches and ideas.
- Tenacity and thoroughness, with the ability to solve practical problems and deal with a variety of situations.
- Deadline and solutions oriented with the ability to handle multiple competing priorities and wide variety of responsibilities.
- Team player who can roll up their sleeves and get involved in everything from big projects to mundane, simple tasks.
- Not easily frazzled and strong time management skills during busy and slower periods throughout the day.

**Education/Experience:**
- High school diploma, Bachelor’s degree preferred.
- 5+ years related experience.
- Proficiency in Microsoft Office Suite.
- Clear and effective written and oral communication skills.