



**CC Inter-Agency Council on Homelessness  
Coordinated Assessment Minutes  
11/19/14**

Attendees: Gwen Parrack, CCHD; Shelly Gullede, CCHD; Marianne Redding, CCHD; Paul Sheesely, CCDC; Earl Grey, Cecil County Housing Agency; Dana Brady, UBCSS; Kathryn Barakat, DSS; Pat Marks, Meeting Ground; Trish Dana, DSS; Jean Marie Donahoo, UHCC; Glenn Tosten, UHCC; Rose Capriotti, DSS; Eileen Ondra, SSCT; Barbara Bessicks, Union Hospital; John Blakely, Perry Point VA; Susan Lebowitz, UBCSS.

The first hour of the meeting was spent reviewing a webinar by the United States Interagency Council on Homelessness (USICH). The webinar gave an overview of what coordinated assessment is, the reasons for it, and what it might look like (offering 4 primary models) that communities use. It was emphasized that most communities use some sort of hybrid which is individualized to the particular community. Coordinated assessment is now in federal regulation and is mandated by any county that receives CoC funding.

After some discussion, the group agreed by consensus that some type of Multi-Site coordinated system, probably based on subpopulation type, would best serve Cecil County. This is the model that most rural jurisdictions use. Some basic tenets of coordinated assessment are:

- 1) Every agency that serves as a “gateway” or “site” for entrance into the homeless service system will use a standardized assessment that would yield exactly the same referrals regardless of who completes it. There is a vulnerability index associated with the assessment. Coordinated assessment is for all services, NOT just residential services. It also leverages mainstream resources.
- 2) HMIS is an integral part of a coordinated system and can only work as well as all agencies abilities to keep data in the system up to date. Bed availability information should be accessible in real time. Jason believes that our current HMIS set up can accommodate a coordinated assessment system. He will be at the next meeting to explain more.
- 3) There must be trust, transparency, and participation by major stakeholders in order to be successful as the system philosophy is changing from “should we accept this person into our program?” to “which services will best meet this individual/families’ needs?” (which any gateway agency can determine). People will not be able to enter programs through the “side door.” Programs must adhere to the process.
- 4) Guidance from the National Alliance to End Homelessness suggests that the planning phase of coordinated assessment can be done in 30-60 days with implementation phase lasting 4-6 months.
- 5) Once implemented, there must be a built in mechanism for trouble shooting, and addressing how things are working, any bumps in the road, etc.

Other comments/concerns noted during the meeting:

Cecil County does have 211 but there is no coordination on homeless services currently, they would be tied in somehow to a coordinated system.

Eileen Ondra – Maryland Access Point is already serving as a “no wrong door” for the aging and disabled population regardless of housing status, so they would naturally serve as a gateway point for that population. Need access to HMIS.

We will look for other rural counties in MD who may be further along with the process and see if they can offer some guidance.

Our existing structure is just “hodge podge” with people going to multiple agencies, having multiple intakes, wherever they happen to be referred.

Earl suggested mapping out existing subpopulations and what their resources are to help determine gateways and referral sources.

Someone raised the question as to the need for regional sites throughout Cecil County for individuals/families who are homeless outside of Elkton. Per Gwen, one decision the planning committee must make is whether coordinated assessment can be completed over the phone or whether an in-person interview is required. That is up to us. Jean Marie suggested Department of Emergency Services as a possible partner in the system.

Next steps will be to hear from Jason and do some mapping of current system. The next discussion on coordinated assessment will be incorporated into the **December 17<sup>th</sup>** meeting. **We will extend the meeting by an hour to be from 1:30-3:30pm.**