

GRCoC Case Conferencing Participation Policy

Background:

Case conferencing is a collaborative and structured process where service providers and designated community partners within the Greater Richmond Continuum of Care (GRCoC) come together to discuss and coordinate care for individuals and families experiencing homelessness. Case conferencing is a key mechanism for aligning resources and services to meet the needs of program participants within the GRCoC's Coordinated Entry System (CES), to reduce fragmentation of services, and to support GRCoC service providers in meeting the housing and service needs of their program participants.

Governance and Funding:

Homeward is designated as the Coordinated Entry System Coordinator for the GRCoC and serves as the management entity for the GRCoC CES. The roles and responsibilities of Homeward in this role are laid out in a Memorandum of Understanding publicly available at www.endhomelessnessrva.org. One of the roles of Homeward as the CES Coordinator is to facilitate case conferencing to support program participants who would benefit from a collaborative approach to developing a housing plan.

Funding support for case conferencing facilitation comes from a variety of sources including federal Continuum of Care funding, Virginia Homeless Solutions Program funding, and private fundraising by Homeward.

Person-centered and system-focused:

Case conferencing focuses on the coordination of limited, centrally prioritized resources and is intended to strengthen the designated service provider's engagement with the participating household (individual or family with children). Case conferencing does not replace case management or care coordination. Households do not attend case conferencing sessions but continue in their engagement with their case manager(s) and care coordinators. This collaborative approach to housing and service planning and resource allocation provides a system-level review of the allocation and coordination of limited homeless assistance resources and ensures that households seeking homeless assistance receive the best available services and resources.

Key components of Case Conferencing:

- 1) Case conferencing is a support provided to GRCoC service providers to serve our most vulnerable neighbors and to maximize and optimize GRCoC resources and services.
- 2) GRCoC service providers participating in case conferencing must sign a CES Memorandum of Understanding each year to confirm that they will
 - a. adhere to the federally required, locally-developed CES Policies and Procedures,
 - b. ensure that services are provided without discrimination,
 - c. comply with GRCoC written standards for the programs they offer,
 - d. maintain client confidentiality including appropriate use of social media, and
 - e. use the HCIS data collection system (or comparable database) as required for their program type.
- 3) Case conferencing is a collaborative way to engage mainstream service providers in resolving the housing stability and service needs of households experiencing homelessness. Community partners must demonstrate a compelling business reason to participate in case conferencing, as determined in coordination with Homeward in its role as CES Coordinator. Community partners agree to
 - a. Maintain client confidentiality and sign written data sharing or relevant agreements,
 - b. Serve households identified as eligible or prioritized for homeless assistance in the GRCoC, and
 - c. Collaborate with GRCoC providers to develop housing and service plans for the targeted households.

Roles and Responsibilities

The following outlines the responsibilities of all participants in case conferencing:

- **Homeward (designated CES Coordinator):**
 - Facilitates case conferencing meetings.
 - Manages scheduling, logistics, and operational details.
 - Ensures eligibility requirements of organizations are met before participation.
 - Oversees and maintains confidentiality agreements and other required documentation.

- Provides support to providers in navigating CES procedures during case conferencing.
- Consults with community partners to determine if participation in case conferencing meets the criteria laid out above.
- **Homeless assistance providers with a current CES MOU:**
 - **Using HCIS:** Enter and share up-to-date client information through HCIS, present cases, and collaborate on the meeting the housing and services needs of households during meetings.
 - **Not using HCIS:** Share client updates verbally during case conferencing and collaborate with HCIS-using providers to coordinate care.
 - In both cases: Support the needs of program participants, share resources and openings, and work collaboratively to develop housing and service plans.
- **Community/mainstream providers:**
 - Participate to reduce fragmentation of care across systems.
 - Provide updates or services relevant to households being served in the GRCoC.
 - Sign and uphold non-HMIS user agreements or other required agreements.
- **Other participants:**
 - May include representatives from related sectors
 - Participation is permitted only when appropriate agreements are in place and criteria laid out above are met.
 - Contribute specialized expertise to help address barriers to housing stability.
- **Households seeking assistance:**
 - Are not present in case conferencing.
 - Collaborates with their GRCoC service provider to meet their housing and service needs.

GRCoC Case Conferences:

There are several distinct types of case conferencing, each tailored to specific client populations and needs, including:

- **Access Case Conferencing:** providers discuss individuals and families in need of emergency shelter, as well as youth in need of transitional housing.

- **Singles Case Conferencing:** providers collaborate to address the housing and support needs of individual men and women experiencing homelessness.
- **Family Case Conferencing:** providers discuss the unique challenges of households that may include couples with minor children, single parents, or pregnant individuals.
- **MCO Case Conferencing:** involves CES staff and Managed Care Organization (MCO) representatives (and other providers) to coordinate care when a program participant has signed a two-way consent form or when an MCO partner seeks a CES connection for an eligible household.

As community needs and agency resources allow, additional case conferencing sessions may be added.