



Reaching Home Coordinated Access Required Policies and Protocols Checklist

[Reaching Home Directives](#) require communities to develop, at minimum, the following four policies and protocols outlining how their coordinated access process operates. The following is a quick checklist of these policies and protocols and what needs to be included in each (at a minimum) to ensure alignment with the Directives.

1. Participant Consent

- Identifies protocols for obtaining participant consent to collect, retain and share information for the purposes of assessing and referring participants.

2. Standard Assessment

- Includes intake protocols for the entry of individuals and families into the system with access points that can be easily accessed by individuals and families seeking homeless or homelessness prevention services.
- A common assessment tool for all population groups so that there is a shared approach to understanding people's depth of need - includes the common assessment information that is collected (e.g., a specific tool or set of tools and any additional information to be collected).
- References that the common assessment information is collected for all population groups
- Includes an outline of the assessment protocols used in your community.
- Includes information about what is in place to ensure these assessment protocols are used consistently across all access points.

3. Prioritization

- Identifies that prioritization occurs from a community's priority list.
- Identifies prioritization factors in priority order (if use different prioritization factors for different populations, these are outlined).
- Includes prioritization criteria for each project type (e.g., rapid rehousing, supportive housing).
- Identifies that factors, outside of those listed in the prioritization policy, cannot be used.

4. Matching and Referral

- Outlines matching and referral protocols.
- Clarifies that referrals to housing services are made based on prioritization guidelines, project-specific eligibility requirements (e.g., age restrictions, geographic location) and the specific needs and preferences of the client.
- Includes standardized criteria by which a participating project may justify rejecting a referral.
- Includes methods for dealing with referral challenges, concerns or disagreements (e.g., those falling outside of the community's standardized criteria and process for referral rejection).
- References that referral must remain person-centred allowing participants self-determination and choice without repercussions or consequences, other than the natural consequences that occur with choice (e.g., clients who refuse a housing placement would maintain their spot on the priority list).