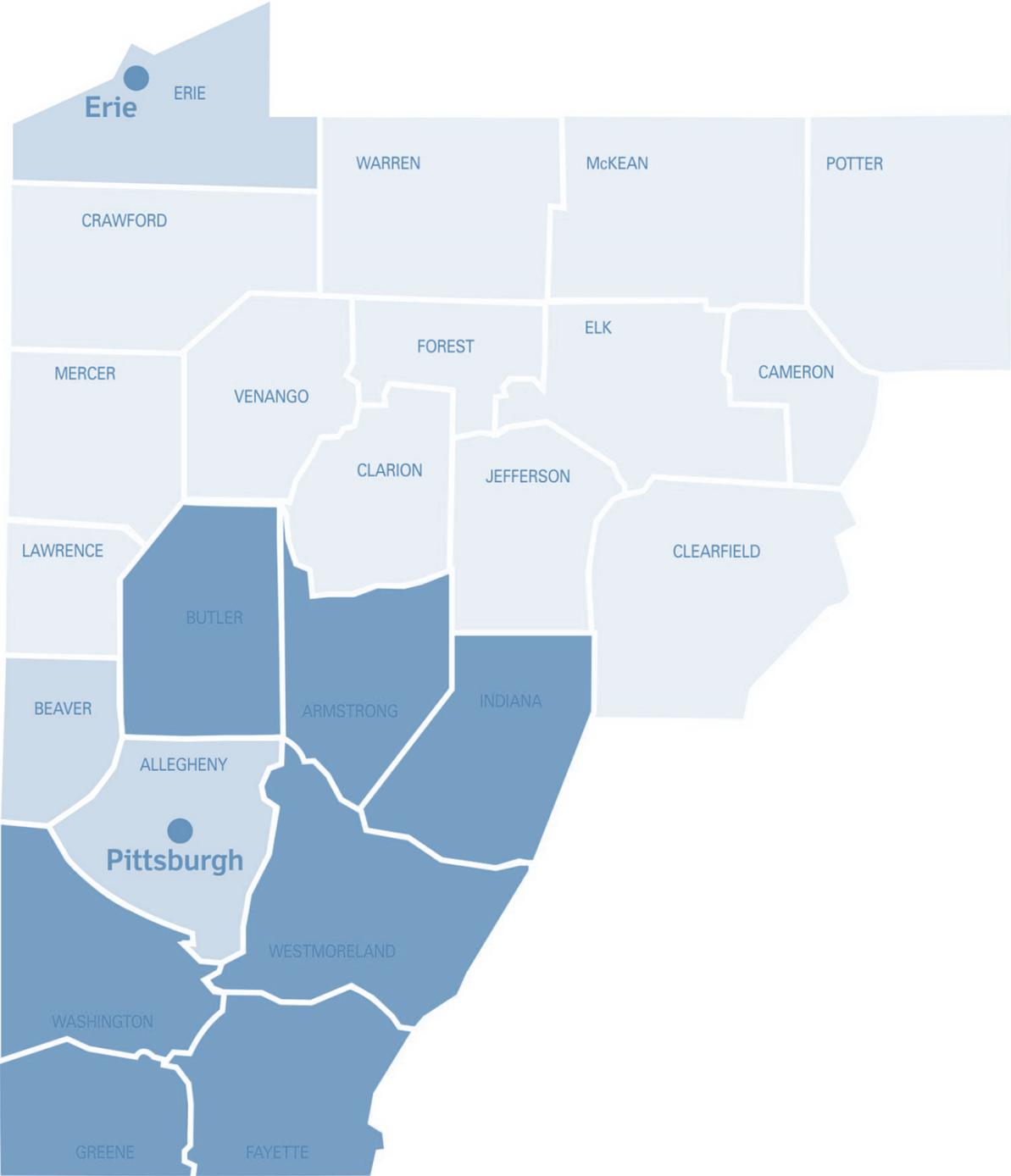


Western Pennsylvania Continuum of Care's Coordinated Entry Policies and Procedures Manual



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Overview Establishing Coordinated Entry is a complex and comprehensive endeavor. The Western PA Continuum of Care 601-Region also known as “One by One” is charged with standardizing a Coordinated Entry system across the region according to the priorities and particular needs of communities. These standards are intended to clarify and provide guidance around Coordinated Entry operations in the designated 601-Region. As systems and accompanying documents are developed, the Coordinated Entry System Leadership is committed to offering trainings and technical assistance as needed and determined. This Policy and Procedural Manual is a working document that will continue to be developed for years to come.

Purpose The One by One Coordinated Entry System (CES) purpose is to ensure that homeless households with the most severe service needs, longest periods of homeless history and most vulnerabilities are prioritized for housing assistance and receive those services within a very limited timeframe. The system is designed to guide housing providers’ connection to homeless households who are most in need and to direct program funding allocations to meet the need. These policies and procedures will direct the implementation, governance and evaluation of coordinated entry in the Western Pennsylvania CoC geographic areas as noted above and will be reviewed no less than annually by the Western CoC Board of Directors. Items which will trigger an emergency review include HUD rule change, people unable to access to the system or be housed quickly, Natural Disaster. Only the Western Continuum of Care (CoC) Board of Directors can make changes to this document based on recommendations from the Coordinated Entry Committee of the CoC and the Coordinated Entry Lead Agency. A list of CoC Board and committee members and their contact information can be found at www.pennsylvaniacoc.org. All policies approved and adopted by the board are included at the end of this manual as Appendices.

Furthermore, in accordance with the ESG & CoC regulations, all programs that receive ESG or CoC funding are required to abide by the written Coordinated Entry procedures established by their prospective continuum of care. Agency program procedures should reflect the policy and procedures described in this document. The CoC Executive Board strongly encourages programs that do not receive either of these sources of funds to also accept and utilize these procedures and standards. The Western Pennsylvania Continuum of Care (CoC) is responsible for coordinating and implementing a system to meet the needs of the populations and subpopulations experiencing or at risk of homelessness within the geographic area claimed by the CoC:

🏠 Northwest Counties

- Cameron
- Clarion
- Clearfield
- Crawford
- Elk
- Forest
- Jefferson
- Lawrence

- McKean
- Mercer
- Potter
- Warren
- Venango

🏠 Southwest Counties

- Armstrong
- Butler
- Fayette
- Greene
- Indiana
- Washington
- Westmoreland

The mission of One by One is to end homelessness through a coordinated community-based process of identifying needs and building an open and integrated system of housing and services that addresses those needs. As such, the purpose of the Western CoC is to:

- *Promote a community-wide commitment to the goal of ending homelessness;*
- *Promote access to funding for efforts for rapidly re-housing homeless individuals and families;*
- *Promote access to and effective use of mainstream programs;*
- *Optimize self-sufficiency among individuals and families experiencing homelessness.*

In order to carry out this mission and its responsibilities as defined in the CoC Interim Rule (§ 578.7 Responsibilities of the Continuum of Care), One by One has established and is operating a Coordinated Entry System (CES) designed to coordinate program participant intake assessment and provision of referrals into the housing crisis response system for all households and populations. This system covers the CoC's 20 county geographic area, is easily accessed by individuals and families seeking housing or services, is well advertised, and includes a comprehensive and standardized assessment tool. (24 CFR part 578.3)

Our Cause for the system (Who? What? Where?)

CES is a resource tool utilized by collaborating stakeholders to expand housing options for those experiencing homelessness.

Our Actions (What does the system do?)

Determine Eligibility
Empower Consumer Choice
Streamline process for everyone using the system

Our Impact (Changes for the better)

Reduce Homelessness significantly by 2021
Ensure most vulnerable persons are being served through prioritization

Ongoing enhancement of the system

🏠 Coordinated Entry refers to the process used to assess and assist in meeting the housing needs of people at-risk of homelessness and people experiencing homelessness. The Target Populations for this process include people who are:

- experiencing homelessness

AND/OR

- at imminent risk of homelessness

AND/OR

- fleeing/attempting to flee Domestic Violence

People with housing issues outside of these categories should be referred to other prevention-oriented resources available in the community.

Key elements of coordinated entry include:

ACCESS

- 🏠 A well-designed programmatic entry and/or access system across the geographic region
- 🏠 Provides complete coverage over the entire geographic area claimed by the CoC
- 🏠 Linked to local outreach programming
- 🏠 Inclusive of all subpopulations, including those experiencing chronic homelessness, Veterans, families, youth and survivors of domestic violence
- 🏠 Removes the delay in accessing emergency services such as shelter and includes a means for individuals to access these emergency services 24 hours per day
- 🏠 Provides protocols to ensure the safety and confidentiality of individuals seeking assistance, including victims of Domestic Violence
- 🏠 Ensures Fair and Equal Access to housing for all people located within the CoC's geographic area
- 🏠 Provides comprehensive marketing of the system to ensure people throughout the CoC's geographical area are aware of the Coordinated Entry System and how to access it

ASSESSMENT

- 🏠 The use of a standardized assessment tool to assess consumer needs
- 🏠 Utilizes a person-centered approach
- 🏠 Incorporates cultural and linguist competencies
- 🏠 Contains a plan for the CoC to engage in ongoing planning with all stakeholders utilizing the Coordinated Entry process

PRIORITIZATION

- 🏠 Prioritization of consumers with the longest length of time homeless and most barriers for housing opportunities available within the CoC

REFERRAL

- 🏠 Referrals, based on the results of the assessment tools, to ALL homelessness assistance programs (and other related programs when appropriate)
- 🏠 Provides a referral protocol to ensure that the programs accept all eligible referrals and rejections are justified and rare
- 🏠 Reduce, limit and remove barriers for individuals to access housing or services
- 🏠 Ensure a housing first approach is used throughout the CoC
- 🏠 Ensure that the process incorporates the participant's choice
- 🏠 Capturing and managing data related to assessment and referrals in a Homeless Management Information System (HMIS) and utilizing that the information to guide homeless assistance planning and systems change

Definitions

There are many key terms used throughout this document. In order to ensure appropriate understanding, definitions of those key terms are provided here.

- 🏠 **24/7 Emergency Services Referral Line:** The CoCs coordinated entry process does not delay access to emergency services such as shelter. The process includes a manner for people to access emergency services at all hours independent of the operating hours of the coordinated entry intake and assessment processes. For example, people who need emergency shelter at night are able to access shelter, to the extent that shelter is available, and then receive an assessment in the days that follow, even if the shelter is the access point to the coordinated entry process. A listing of Referral Lines to be connected to emergency shelter can be found in Attachment B.
- 🏠 **Access Points:** These are places, either virtual or physical, where individuals and families experiencing a housing crisis may present for initial referral and prescreening. These locations include the following but are not limited to:
 - Designated Coordinated Entry Assessment Centers and/or Auxiliary Agencies - a “no wrong door” approach in which a family or individual experiencing homelessness can present at any homeless housing and service provider in the geographic area but is referred and assessed with the same tool and methodology used throughout the Continuum.
 - Street outreach locations within the geographic area where individuals and families present needing access to homeless housing and services
 - Referral hotline systems (as available) that screen and directly connect callers to appropriate homeless housing and service providers in the geographic area
 - Mainstream Service Providers - Pre-screen and direct consumers to the designated Coordinated Entry Assessment Centers. Connections to appropriate assessment center are based off of questions asked in Attachment A - Prescreening and Referral Questionnaire.
- 🏠 **At Risk of Homeless:** An individual or family who will imminently lose (within 14 days) their primary nighttime residence provided that no subsequent residence has been identified and the individual or family lacks the resources or support networks needed to obtain other permanent housing.

🏠 **Auxiliary Agencies:** Service providers who have access to Client Track and the Coordinated Assessment Tool, but are not a Designated Assessment Center for their county. These providers include, but are not limited to, CoC, Emergency Solutions Grant, PATH, and Supportive Services for Veteran Families grantees. These agencies are not mandated to conduct coordinated entry assessments but can conduct coordinated entry assessments as needed and appropriate. Auxiliary agencies are trained on Coordinated Entry in Client Track and must only use the approved assessment tool and housing prioritization list. These agencies will connect consumers to the appropriate Coordinated Entry Assessment Center in their local community when they do not conduct the coordinated entry assessment themselves. Connections to the assessment center may be made over the phone or by walk-in.

🏠 **Chronically Homeless:** An individual or family head of household has a diagnosable substance use disorder, serious mental illness, developmental disability, and post-traumatic stress disorder, cognitive impairments resulting from brain injury, or chronic physical illness or disability.

AND

Is currently living in a place not meant for human habitation, a safe haven, or in an emergency shelter.

AND

Has been homeless for at least 12 months. This includes:

- at least 12 months of continuous homelessness living in a place not meant for human habitation, a safe haven, or in an emergency shelter;

OR

- Has experienced homelessness during at least 4 separate occasions in the last three years, where these 4+ occasions equal at least 12 months and each break in homelessness separating the occasions included at least 7 consecutive nights of not living in place not meant for human habitation, a safe haven, or in an emergency shelter. Stays in institutional care facilities for fewer than 90 days will not constitute as a break, but rather such stays are included in the 12 month total, as long as the individual was living or residing in a place not meant for human habitation, a safe haven, or an emergency shelter immediately before entering institutional care facility.

🏠 **Consumer:** Person at-risk or experiencing homelessness being served by the coordinated entry process.

🏠 **Coordinated Entry Assessment Tool:** A uniform tool used to assess shelter and other emergency needs, identify housing resources and barriers and evaluate vulnerabilities to prioritize for assistance. The CoC's primary tool is built within Client Track/HMIS. An alternative paper format may be used when the online tool is not accessible.

Coordinated Entry Committee: This committee is designated by the CoC Board and is charged with the development and oversight of the Coordinated Entry System and Coordinated Entry Lead Agency. The committee meetings are informal in style with any voting items being managed through utilization of the Roberts Rules of Order. The committee will meet at least twice a year with additional meetings as necessary and be scheduled by the Committee Chairperson (s). The committee membership will be set annually in June, unless an assessment center has been changed, or a major event has happened to require membership changes. The committee is made up of the following types of attendees:

Chairperson (s): Appointed by the CoC Board to provide leadership over the committee and CES Lead Agency to ensure the progressive movement of the Coordinated Entry System. Does not own any voting rights on the committee.

2 Voting Members per each Western PA CoC Region: Each County within the CoC must appoint two voting members to join the committee, designation must also be submitted to the CE Lead Agency through the Local Housing Options Team or Housing Coalition. Committee memberships belong to the agency and not the individual person in case of employment changes. Members must attend a minimum of two meetings (in order to be an eligible voter on this committee) within the membership year, to assure their understanding of the CoC CE Process and must have completed HUD, HMIS, and CoC Coordinated Entry Required Trainings.

Knowledge Experts: Members with experience utilizing systems, or representatives of specialty groups (i.e. HMIS, assessment centers, housing providers, etc). Does not own any voting rights on the committee.

Coordinated Entry Lead Agency Representative: Assist in the development, implementation, and monitoring of Coordinated Entry policies and procedures, workflows, training documents, and data collection efforts as well as assist in identifying best practices for the system. This particular person does not own any voting rights on this committee.

🏠 **Coordinated Entry Lead Agency:** The CoC has designated the Coordinated Entry SSO grantee as the Coordinated Entry Lead Agency. The Coordinated Entry Lead Agency is responsible for the implementation of the CoC's Coordinated Entry System and its Policies and Procedures, as well as monitoring and evaluating the overall coordinated entry system. The CE Lead Agency will provide regular updates to the CoC's Governing Board regarding the CoC funding supporting the Coordinated Entry System.

🏠 **Coordinated Entry Policies and Procedures:** Policies and procedures will be reviewed twice within a year, coordinating with the 2 major CoC Board meetings in October and April. Items which will trigger an emergency review include HUD rule change, people unable to access to the system or be housed quickly, Natural Disaster. Any and all changes to the CE policies and procedures must be approved by the CoC Board before put into effect.

🏠 **Designated Assessment Centers:** These are designated places by the Coordinated Entry Lead Agency where an individual or family in need of housing assistance can present and easily enter the CoC's Coordinated Entry System. Centers are accessible to individuals with disabilities, including accessible physical locations for individuals who use wheelchairs.

People experiencing homelessness will be assessed and referred to appropriate homeless assistance programs by the Designated Assessment Center:

- There shall be a minimum of one designated **General Assessment Center (GAC)** per each Western PA CoC Community and these centers are tasked with assessing the housing needs of the general public and serve as the lead in the local community.
- The CoC recognizes the importance of confidentiality and safety for all persons fleeing or attempting to flee from domestic violence. Therefore, in addition to the before mentioned GAC for each community, an approved domestic violence agency in each community will be trained and prepared to conduct the assessments on all persons fleeing and/or attempting to flee from a domestic violence situation and these agency are designated as the **Domestic Violence Assessment Center (DVAC)**. The CE Lead Agency shall be designated as the entity to determine the need for additional centers due to various specific community issues (to include barriers to transportation) and to ensure centers be easily accessed by individuals and families seeking homeless or homeless prevention services. Only those centers who have participated in the selection process to be an assessment center (including auxiliary agencies) by the Western CoC - which includes being selected by the CE Lead Agency, completing onboarding training requirements of the CoC and have signed a Memorandum of Understanding (MOU) (Attachment C) agreeing to the operational guidelines of the coordinated entry process will be permitted to complete the assessment tool and determine an individual's eligibility for homeless and at risk of homeless placement on the service priorities listing.

🏠 **Domestic Violence Households:** An individual or family fleeing, or attempting to flee from domestic violence for whom no subsequent residence has been identified and the individual or family has no resources or support networks to obtain permanent housing. This also includes households affected by human trafficking.

🏠 **Eligibility Documentation:**

Certification documents are required by each program funder which are used to document, establish and verify homeless programs eligibility. The process of collecting these required documents should never be a barrier to the consumer being accepted and enrolled into the homeless service agency's programming. The CoC has chosen for the securing of eligibility documentation to be a collaborative effort between both the assessment center and provider. To the degree possible, the assessment center should start the initial process of collecting and uploading documents to the Clienttrack/HMIS-Coordinated Entry record to assist CES participating Providers with verifying the consumer eligibility. At the point when the assessment center is unsuccessful with securing eligibility document the responsibility then falls on the provider to collect and have on file all required documentation to meet their funder's eligibility requirements.

🏠 **Emergency Mainstream Service Resources:** Each assessment center will connect with mainstream service providers. These resources include Medicaid, state Children's Health Insurance Program (CHIP), Veterans Health Care, Food Stamps, Temporary Aid for Needy Families (TANF), Supplemental Security income (SSI), Workforce Innovation Opportunity Act (WIOA), Substance Abuse Block Grant, Social Services Block Grant, and Welfare -to - Work. These mainstream resources may also act as a source or receiver of referrals.

🏠 **Homeless: (This is HUD's complete definition. Providers must adhere to directives written in their program guidelines.)**

Category 1: An individual or family who lacks a fixed, regular, and adequate nighttime residence, meaning:

- An individual or family with a primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings, including a car, park, abandoned building, bus or train station, airport, or camping ground;

OR

- An individual or family living in a supervised publicly or privately operated shelter designated to provide temporary living arrangements (including congregate shelters, transitional housing, and, hotels and motels paid for by charitable organizations or by federal, state, or local government programs for low income individuals);

OR

- An individual who is exiting an institution where he or she resided for 90 days or less and who resided in an emergency shelter or place not meant for human habitation immediately before entering that institution;

Category 2: An individual or family who will imminently lose their primary nighttime residence provided that:

- The primary nighttime residence will be lost within 14 days of the date of application for homeless assistance;

OR

- No subsequent residence has been identified;

AND

- The individual or family lacks the resources or support networks, e.g., family, friends, faith-based or other social networks, needed to obtain other permanent housing;

Category 3: Unaccompanied youth under 25 years of age, or families with children and youth, who do not otherwise qualify as homeless under this definition, but who:

- Are defined as homeless under section 387 of the Runaway and Homeless Youth Act (42 U.S.C. 5732a), section 637 of the Head Start Act (42 U.S.C. 9832), section 41403 of the Violence Against Women Act of 1994 (42 U.S.C. 14043e-2), section 330(h) of the Public Health Service Act (42 U.S.C. 254b(h)), section 3 of the Food and Nutrition Act of 2008 (7 U.S.C. 2012), section 17(b) of the Child Nutrition Act of 1966 (42 U.S.C. 1786(b)) or section 725 of the McKinney-Vento Homeless Assistance Act (42 U.S.C. 11434a);
- Have not had a lease, ownership interest, or occupancy agreement in permanent housing at any time during the 60 days immediately preceding the date of application for homeless assistance;

- Have experienced persistent instability as measured by two moves or more during the 60-day period immediately preceding the date of applying for homeless assistance;

AND

- Can be expected to continue in such status for an extended period of time because of chronic disabilities, chronic physical health or mental health conditions, substance addiction, histories of domestic violence or childhood abuse (including neglect), the presence of a child or youth with a disability, or two or more barriers to employment, which include the lack of a high school degree or General Education Development (GED), illiteracy, low English proficiency, a history of incarceration or detention for criminal activity, and a history of unstable employment;

OR

Category 4: Any individual or family who:

- Is fleeing, or is attempting to flee, domestic violence, dating violence, sexual assault, stalking, or other dangerous or life-threatening conditions that relate to violence against the individual or a family member, including a child, that has either taken place within the individual's or family's primary nighttime residence or has made the individual or family afraid to return to their primary nighttime residence;
- Has no other residence;

AND

- Lacks the resources or support networks, e.g., family, friends, faith based or other social networks, to obtain other permanent housing.

🏠 **Homeless individual with a disability:** which can be found in Section 401(9) of the McKinney-Vento Act, as amended by the HEARTH Act and applies to the CoC Program Standards (including CES and eligibility to be considered chronically homeless) is as follows: An individual who is homeless, and has a disability that -- Is expected to be long-continuing or of indefinite duration; Substantially impedes the individuals ability to live independently; Could be improved by the provision of more suitable housing conditions; and is a physical, mental, or emotional impairment, including an impairment caused by alcohol or drug abuse, post traumatic stress disorder, or brain injury or An individual who is homeless and has a developmental disability, as defined in section 102 of the Developmental Disabilities Assistance and Bill of Rights Act of 2000 (42 U.S.C. 15002); or An individual who has the disease of acquired immunodeficiency syndrome or any condition arising from the etiologic agency of acquired immunodeficiency syndrome.

🏠 **Housing Interventions:** Housing programs and subsidies; these include transitional housing, rapid re-housing, and permanent supportive housing programs, as well as permanent housing subsidy programs (e.g. Housing Choice Vouchers).

🏠 **Housing Prioritization List:** A prioritized waitlist of consumers in need of homeless assistance. Placement on this list is based off of the homeless assessment which takes into consideration the length of time homeless and the number of barriers experience by the household. All

available resources should be prioritized and offered to individuals at the top of the Housing Prioritization List, limited only by funding requirements

- 🏠 **Interim Housing:** To be used only when the individual/family is Chronically Homeless and has accepted a unit/voucher for permanent housing but there is some other situation that prevents them from moving immediately into housing (e.g. apartment getting painted, old tenant moving out, has a voucher but is looking for the unit, etc.). In such cases, where it has been determined to be absolutely necessary to keep the client engaged and moving towards housing, a temporary solution must be utilized and if transitional housing is used the client should then be identified upon move in to the permanent house as coming from “interim housing”. This will enable that individual/household to be identified as chronically homeless at intake for reporting purposes based on the responses to the elements that will follow. Note: This housing is not a substitute for a waiting list or for any situation other than identified here. Interim Housing should never be recorded as a friend stay/doubled up situations, jail or institution stays.

- 🏠 **Local Housing Option Team or Housing Coalition** - is a collaborative of social service agencies and other public and private organizations that serves Western PA communities and promotes safe, affordable, accessible **housing** choices for individuals and families. The CoC may look to these collaborative groups to support or approve the county’s coordinated entry designations when requested by the CoC. This group may also submit training request to the CE Lead agency for the entire county.

- 🏠 **Provider:** Organization that provides services or housing to people experiencing or at-risk of homelessness (e.g., shelters, transitional housing programs, permanent housing programs, rapid rehousing programs, etc.).

- 🏠 **Program:** A specific set of services or a housing intervention offered by a provider.

- 🏠 **Street Outreach:** Outreach that is designed to increase access and connection to services for people who are living unsheltered on the streets. Outreach includes the provision of urgent, non-facility based care to people who are unsheltered and unwilling or unable to access emergency shelter, housing, or an appropriate health facility.

Goals and Guiding Principles

The goal of the coordinated entry process is to provide each consumer with adequate services and supports to end their homelessness, with a focus on returning them to **permanent** housing as quickly as possible. Below are the guiding principles that will help the Western Pennsylvania CoC meet these goals.

- **Accurate Data:** Data collection on people experiencing homelessness is a key component of the coordinated entry process. To capture this data accurately, all assessment staff and providers must enter data into Client Track/HMIS in accordance with the Pennsylvania Department of Community and Economic Development’s HMIS Data Standards (see Attachment). Consumers’ rights around data will always be made explicit to them and no consumer will be denied services for refusing to share their data.

- **Consumer Choice:** Consumers will be given information about the programs available to them and have choice about which programs they want to participate in. Assessments will

be updated as often as needed to reflect any change in preference by the Consumer. They will also be engaged as key and valued partners in the implementation and evaluation of coordinated entry through forums, surveys, and other methods designed to obtain input on the effectiveness of the coordinated entry process. Best practices for a consumer choice approach include:

- Assist participants in clarifying their key values, challenges, and strengths
 - Allow participants to drive the process of identifying goals
 - Ask motivating questions to prompt participants to determine the best course of action and to take action when ready
 - Inform participants of resources and opportunities in the community based on the assessment and expressed interests and desires of the participant
 - Help participants understand the pros and cons of different approaches, and supporting them when they decide how best to meet their goals
 - Make referrals to services in partnership with participants' motivation and timeline, on the assumption that the participant is the expert
- **Collaboration:** Because coordinated entry is being implemented CoC-wide, it requires a great deal of collaboration between the CoC, providers, mainstream assistance agencies (e.g., Department of Human Services, hospitals, funders, and other key partners). This spirit of collaboration will be fostered through open communication, transparent work by a strong governing council (the Coordinated Entry Committee), consistently scheduled meetings between partners, consistent reporting on the performance of the coordinated entry process, and requests for assistance through the local community Housing Coalitions and Local Housing Options Teams (LHOTS).
- **Housing First:** A model of housing assistance that prioritizes rapid placement and stabilization in permanent housing that does not have service participation requirements or preconditions for entry (such as sobriety or a minimum income threshold). In accordance with the CoC policies, all CoC -funded projects are required to operate in accordance with a Housing First approach. Service delivery should be consumer-centered and culturally competent and work to connect households with the appropriate permanent housing opportunity.
- **Performance-Driven Decision Making:** Decisions about and modifications to the coordinated entry process will be driven primarily by the need to improve the performance of the homelessness assistance system on key outcomes. These outcomes include reducing new entries into homelessness, reducing lengths of episodes of homelessness, and reducing repeat entries into homelessness. Changes may also be driven by a desire to improve process-oriented outcomes, including reducing the amount of waiting time for an assessment and availability of particular housing options. **The Coordinated Entry System** will be evaluated at least annually by the CE Lead Agency in collaboration with Coordinated Entry Committee.
- **Prioritizing the Hardest to House:** Coordinated entry referrals will prioritize the most vulnerable households for program beds and services. This approach will ensure an appropriate match between the most intensive services and the people least likely to succeed with a less intensive intervention, while giving people with fewer housing barriers more time to work out a housing solution on their own. It is hoped that this approach is most likely to reduce the average number of episodes and length of time homeless and result in better housing outcomes for all.

Key Components of the Coordinated Entry System (CES)

This section outlines and defines the key components of coordinated entry system and how the coordinated entry process will work including:

- Component 1: General Structure
- Component 2: Identification of Assessment Center
- Component 3: Access to the Coordinated Entry System
- Component 4: Assessment of Consumer Needs
- Component 5: Determining and Making Referrals
- Component 6: Prioritization and Centralized Housing Prioritization List
- Component 7: Data Management, Privacy and Security
- Component 8: Outreach, Advertising and Marketing of CE System
- Component 9: Monitoring and Evaluation

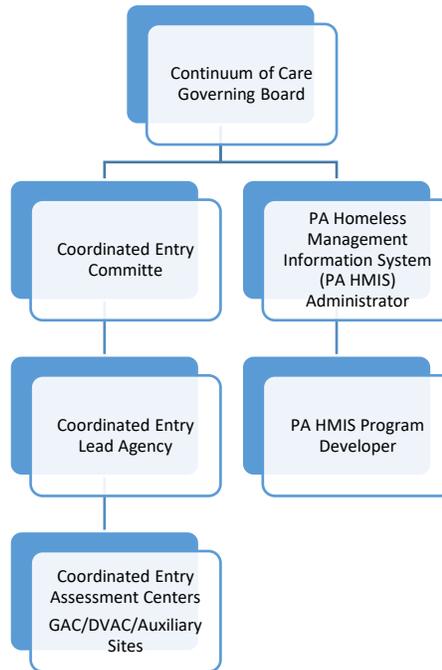
Component 1: General Structure

As required under 24 CFR 576.400(d) and 578.7(a)(8), each CoC and each ESG recipient operating within the CoC's geographic area must work together to ensure the CoC's coordinated entry process allows for coordinated screening, assessment and referrals for CoC and ESG projects. The Western PA CoC Board has opted to use the PA HMIS/Client Track Coordinated Entry Database throughout the entire Continuum to comply with this rule. The Coordinated Entry Database hosts a set of standardized assessment tools that prioritizes households for programs and/or services that are appropriate to meet the needs of consumers.

The Coordinated Entry Assessment Process uses/employs:

- ✓ Locally specific assessment approaches and tools that reflect the characteristics and attributes of the CoC and CoC/ESG participants.
- ✓ A valid, tested, reliable and publicly available assessment process which gathers only enough participant information to determine the severity of need and eligibility for housing and related services.
- ✓ A phased approach to assessment which progressively collects only enough participant information to prioritize and refer participants to available CoC and ESG housing and support services.
- ✓ A Housing First oriented assessment process which is focused on rapidly housing participants without preconditions.
- ✓ Fair, equitable and equal access to services within the Continuum to be compliant with HUD's Equal Access Rule at 24 CFR 5.105(a)(2)

the Coordinated Entry System has been designed and administered by the Western CoC in the following structure with duties for each stakeholder outlined on the following pages.



Coordinated Entry Stakeholder Roles and Responsibilities:

Western CoC Governing Board

- Designates the Coordinated Entry Committee Chairperson and Committee composition
- Designates the Coordinated Entry Lead Agency
- Designates CoC-wide priority populations
- Approves and adopts Policies and Procedures necessary for Coordinated Entry Implementation
- Provides oversight to the Coordinated Entry Committee
- Monitors budgets of Coordinated Entry grants
- Approve Assessment Center’s MOUs

Coordinated Entry Committee

- Provides oversight to the Coordinated Entry process and assists with implementation
- Develops CES Policies and Procedures for CoC Governing Board approval
- Evaluates and enhances the CES project
- Annually updates the Coordinated Entry Tool and Scoring to reflect the CoC’s priorities
- Reviews monitoring reports provided by the Lead Agency
- Monitors the Coordinated Entry System to ensure the system meets HUD’s regulations and to provide reports to the board
- Convenes at least twice annually to assess the Coordinated Entry System

Lead Agency of Coordinated Entry

- Responsible for the administration and implementation of Coordinated Entry throughout the CoC
- Ensures the CoC CES is fully covered
- Executes MOUs with each assessment center for Board approvals
- Provides trainings to all stakeholders on the Coordinated Entry System
- Ensures each county's local policies and procedures meet the CoC's CES procedural standards
- Monitors the CES to ensure compliance and that it meets HUD's regulations
- Monitors Designated Assessment Centers to ensure compliance
- Provides oversight of the Housing Prioritization List
- Provides updates and reports the Coordinated Entry Committee and CoC Board
- Creates a CoC Marketing Plan and provides universal marketing materials for local distribution
- Coordinates with HMIS Consultant to make necessary changes to the online system/tool
- Coordinates with the PA HMIS Administrator to make available CES onboarding trainings to all participating agencies.
- Provides CoC-wide and county-specific Technical Assistance regarding the implementation of the Coordinated Entry System.

HMIS Administrator/HMIS Consultant

- Coordinates with the Lead Agency
- Provides trainings and updates on the computer-based assessment tools
- Develops the computer-based assessment tools
- Develops monitoring and reporting functions in the computer-based tool

Designated Assessment Centers (General Assessment Center (GAC) and Domestic Violence Assessment Center (DVAC))

- Provides a point of contact who coordinates with the Coordinated Entry Lead Agency
- Provides local oversight of the Housing Prioritization list and fosters collaboration among local providers in serving consumers choosing to reside in their service area
- Conducts standardized assessment tools
- Coordinates with the Coordinated Entry Lead Agency to develop ~~local~~ CES coverage policies
- Notifies the Lead Agency of any changes to staffing that impact CES and provides regular supervision of staff participating in CES
- Utilizes and distributes CES marketing materials to local stakeholders and consumers
- Enters complete and quality data in coordinated entry online system as required by the CoC and does so in a timely manner
- Coordinates with the Coordinated Lead Agency to ensure that CE marketing materials are widely distributed within their service area
- Pulls consumers off the Housing Prioritization list to fill all housing program openings

Auxiliary Agencies

- Assists the Designated Assessment Centers and the Coordinated Entry Lead Agency in distributing Coordinated Entry marketing materials
- Conducts Coordinated Entry assessments as needed or appropriate
- Makes referrals to the Designated Assessment Centers as needed or appropriate
- Assists the Designated Assessment Centers with monitoring the local Housing Prioritization List
- Pulls consumers off the Housing Prioritization List to fill all housing program openings

Component 2: Identification and Operation of Assessment Centers

Assessment Center Designations:

There shall be a minimum of one designated General Assessment Center (GAC) per Western PA CoC Community. These centers are tasked with assessing the General Public for homeless services. The CoC recognizes the importance of confidentiality and safety for all persons fleeing from domestic violence. Therefore, in addition to the aforementioned GAC for each community, an approved domestic violence agency in each community will be trained and prepared to conduct the assessments on all persons fleeing from a domestic violence situation and these agency are designated as the Domestic Violence Assessment Center (DVAC). Assessment centers will be identified by the local provider community, who will demonstrate their support by providing a letter of support from their local Housing Coalition or Local Housing Options Team to the Coordinated Entry Lead Agency. Once approved, the Coordinated Entry Lead Agency will execute an MOU with Assessment Centers that further details assessment center roles and responsibilities (ATTACHMENT C).

The CoC's Approved Assessment Centers will be listed with contact information and their operational hours (ATTACHMENT B) and will be provided to each Access Point at time of training/outreach. These centers will also be listed on the Western Pa CoC website (www.pennsylvaniacoc.org) for easy access and reference. The list of Assessment Centers will be updated as necessary.

Types of Assessment Centers include the following:

- **Designated Assessment Center** - General Assessment Center (GAC) and Domestic Violence Assessment Center (DVAC) and
- **Auxiliary Agencies**

Operating Standards for Assessment Centers:

The Coordinated Entry process offers the same assessment approach at all access points and all access points are usable by all individuals and families who may be experiencing homelessness or at imminent risk of homelessness. While the coordinated entry system will assess all households universally, persons fleeing or attempting to flee domestic violence will have access to additional, separate access points which will ensure their safety and confidentiality. DVAC access points are also identified within Attachment B.

The following standards apply to all Assessment Centers:

1. Consumers requesting housing services will be assessed through Coordinated Entry and appropriately added on the housing prioritization list within the following timeframe:
Preferred: within the first 24 hours of the requested assessment for literally homeless.
Required: by the close of the next business day of the requested assessment for literally homeless and within 3 business days of the requested assessment for at risk of homelessness.
2. Assessment centers may only use the CoC's approved Coordinated Entry online assessment. A paper version (pdf) of the assessment is also available for use and may be utilized when the assessment staff is incapable of assessing the online assessment tool.
3. All assessments completed via paper form (pdf) must be entered into the online system by the close of the next business day.
4. Assessments must be completed in the presence of the consumer and are permitted to be conducted over the phone by an approved assessment center if the consumer is unable to reach the appropriate assessment center due to a disability, lack of transportation or other unexpected circumstance.
5. It is prohibited for assessment staff or service providers to screen people out of the coordinated entry process due to perceived barriers to housing or services, including but not limited to: too little or no income, active or history of substance use, domestic violence history, resistance to receiving services, the type or extent of a disability-related service or support, history of evictions or poor credit, lease violations or history of not being a leaseholder, or criminal record. Any positive answers on the referral and prescreening questionnaire will indicate that the person is appropriate for homelessness services and entry into CES.
6. Participating Providers will ensure that no participant be denied access to CES on the basis that the participant is or has been a victim of domestic violence, sexual assault or stalking.
7. Physical assessment areas must be made safe and confidential to allow for individuals to identify sensitive information or safety issues in a private and secure setting.
8. Assessment Centers must provide all persons referred to the Prioritization List as much support as possible with securing permanent housing, such as: obtaining documents and making appropriate referrals to providers for successful housing placement.
9. Each county must have a plan for referrals to emergency shelters, the designated general and domestic violence assessment center on a 24 hour / 7 day basis. Assessments should be completed during normal operating hours and referrals to emergency shelter may not be for immediate admission due to limited emergency shelter resources. The Lead Agency will approve each County's plan for 24/7 coverage.

Assessment Center Staff Training Requirements:

The CoC CE Lead Agency, in conjunction with the Coordinated Entry Committee and PA DCED's HMIS Administrator, will provide training opportunities at least once quarterly to organizations and or staff persons at organizations that serve as access points and administer assessments. The CE Lead Agency will update and distribute training protocols at least annually. The purpose of the

training is to provide all staff administering assessments with access to materials that clearly describe the methods by which assessments are to be conducted with fidelity to the CoC's coordinated entry written policies and procedures. All training materials can be found on the CoC webpage (<http://www.pennsylvaniacoc.org/westerncommittees/coordinated-entry/>) under the western CoC coordinated entry page.

System users of Coordinated Entry must 1st participate in the following onboarding trainings before gaining access to the coordinated assessment tool and to the CoC Housing Prioritization List:

1. [PA HMIS Privacy & Security Training - January 8, 2018](#)
2. [Complete Intake, Assessment and Prioritization List Review - October 18, 2018](#)
3. [Coordinated Entry 101 "Understanding the Bigger Picture" - May 17, 2018](#)

Once the aforementioned trainings are completed by the staff person requesting access to the appropriate PA HMIS Coordinated Entry System Workgroup, the next step is to complete Attachment J - PA HMIS Collaborative System User Agreement and return form back to the PA HMIS Program Administrator at email RA-pahmis@pa.gov.

The Program Administrator will verify that the onboarding trainings were completed and issue the appropriate login credentials.

Other required Coordinated Entry System Trainings to watch once access to the system is granted:

[Domestic Violence Survivors and Housing: What Housing and Homeless Organizations Need To Know](#) - September 12, 2018

Component 3: Access to the Coordinated Entry System:

The Coordinated Entry Committee designed the Coordinated Entry System Process to follow a no wrong door approach, in accordance with the CoC CES Access and Barriers Policy. Persons who require homeless assistance can be assessed in any county regardless of their desired residence. Assessments are permitted to be conducted over the phone by an approved assessment center, if the consumer is unable to reach the appropriate assessment center due to a disability, lack of transportation, or other unexpected circumstance.

Operating Standards for CES Access:

- Western CoC CES processes should never create more barriers for consumers trying to access emergency shelters and services when in a crisis. As such, Individuals or families presenting as unsheltered or fleeing DV should receive shelter first and within the first business day be connected to the local GAC or DVAC by the serving shelter in order to have the consumer's Coordinated Entry assessment conducted and to be placed on the CoC Housing Prioritization List.
10. Once more, each county must have a plan for referrals to emergency shelters, the designated general and domestic violence assessment center on a 24 hour / 7 day basis. Assessments should be completed during normal operating hours and referrals to emergency shelter may not be for immediate admission due to limited emergency shelter resources. The Lead Agency will approve each County's plan for 24/7 coverage.

- All Participating Providers of CES will ensure that no participant be denied access to the CES on the basis that the participant is or has been a victim of domestic violence, sexual assault or stalking.
- Assessment Centers cannot require consumers to schedule appointments or provide eligibility documentation to access the Coordinated Assessment.
- There is no expectation of any agencies including the CES assessment center or local housing provider to provide transportation, if there are no available resources. It is suggested that case management services, when available help the client to locate possible available options within their community.
- It is required for all CES participating agencies to connect consumers with the local DVAC to complete the coordinated assessment process when the household in crisis discloses that they are fleeing or attempting to flee domestic violence, identifies as feeling unsafe or afraid at their home, and/or when the consumer has made a request to be entered anonymously in the system due to safety reasons. These responses will trigger a “Yes” response to pre-screening question #3 and the assessing agency must collect consent from consumers first before the client hand-off to the DVAC can occur. Once consent is provided the local DVAC should assess these individuals/households and provide follow-up. Additionally, the consumer must also choose to having the locally designated DVAC complete the assessment on their behalf, when the above mentioned crisis situations are disclosed to a CES assessment center .

Entry via local Access Points:

Consumers may enter the Coordinated Entry System via any provider of social services coordinating with the Western PA CoC. These Access Points may be physical or virtual locations (reference definition) and not only includes CoC and ESG housing providers, but other recognized points of entry such as the 211 System, local emergency shelters, WIC office, County Assistance Office, Housing Authority, First Responders, Hospitals, etc. The consumers requesting housing assistance will initially be asked to complete the Coordinated Entry System Referral and Prescreening Questionnaire (ATTACHMENT A) through any one of those organizations. All persons experiencing homelessness or at imminent risk of homelessness should be directed to an assessment center to be assessed **prior to receiving any services or admission to any homelessness assistance program**, excluding emergency shelters programs. Access Points should send an immediate referral to these agencies first before referring consumers to the appropriate assessment center.

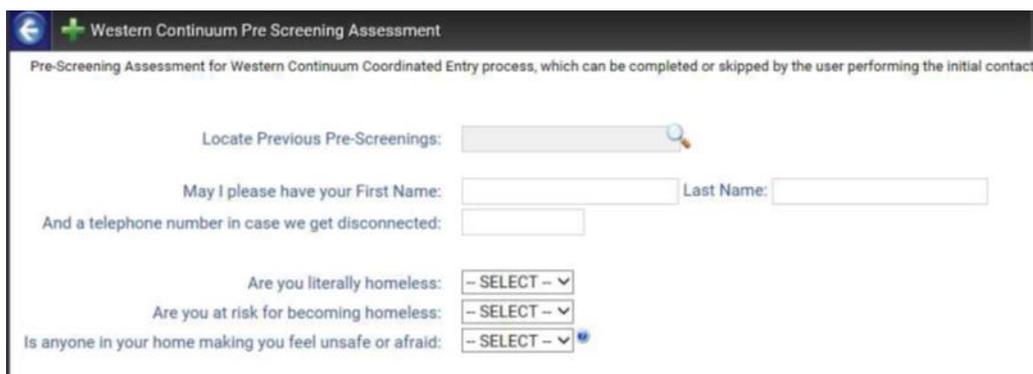
Any positive answers on the referral and prescreening questionnaire will indicate that the person is appropriate for the homelessness services as requested and the consumer shall be referred to the designated assessment center for access into the Coordinated Entry System:

1. General Assessment Center (GAC) -- All positive answers for question 1 OR 2 (on the referral and prescreening questionnaire) will be referred to the closest GAC.
2. Domestic Violence Assessment Center (DVAC) -- a positive answer for question 3 (on the referral and prescreening questionnaire) will be referred to the closest DVAC to ensure confidentiality and appropriate safety actions.

When assessment hours have ended for the day and the person needs emergency shelter, access points should immediately make a referral to the local emergency shelter. Consumers presenting themselves to emergency shelters for admittance may be admitted until the coordinated entry process is available again. These consumers should be directed to the designated assessment centers **as soon as** they are open for a complete assessment. If no shelter is available in the local community then the individuals and families will be referred by the access point or assessment center to the closest emergency shelter.

Entry via Assessment Centers:

The referral and prescreening questionnaire will be conducted by the local assessment centers through the coordinated entry database if the consumer approaches these agencies first. This process includes a short referral and prescreening assessment that gathers a small amount of information and records whether the consumer is literally homeless, at-risk of becoming homeless, or fleeing and/or attempting to flee domestic violence to determine whether the consumer(s) should continue with the Coordinated Entry process or be referred to another resource.



The screenshot shows a web-based form titled "Western Continuum Pre Screening Assessment". The form includes a search bar for "Locate Previous Pre-Screenings:", fields for "First Name" and "Last Name", and a field for "And a telephone number in case we get disconnected:". Below these are three dropdown menus for "Are you literally homeless:", "Are you at risk for becoming homeless:", and "Is anyone in your home making you feel unsafe or afraid:". The form is set against a dark header with a back arrow icon.

- Any positive answer to the pre-screening questions will indicate that the person is appropriate for homelessness services as requested and the assessor will then complete the next assessment screen with the consumer which is the Eligibility and Prioritization assessment tool.
- For those that are first-time callers or visitors to the assessment center, the assessor must complete as much personal information as possible, which includes First Name, Last Name and Telephone number. Then record whether the consumer(s) is Literally Homeless, At-Risk of becoming Homeless, and if anyone in their home/residence makes them feel unsafe within the appropriate fields.

For consumers that are returning to the CES, the assessor should first locate previous screenings and update screening classifications rather than to create a new one.

- Please Note: Only providers who have gained access to the Coordinated Entry database are able to conduct the initial Pre-Screening Assessment within Coordinated Entry. All other providers/access points will utilize the Referral and Prescreening Questionnaire (Attachment

- A) for purposes of assessing the individuals and families appropriateness to enter the Coordinated Entry System.
- If the consumer identifies as feeling unsafe or afraid the general assessor should immediately refrain from completing the assessment, collect client consent and then direct/connect the consumer to the locally designated DVAC, if they are presenting at a general assessment center for completion of their coordinated entry assessment.
 - Once the household is not “feeling unsafe or afraid”, the Assessor should first search for the consumer in the Coordinated Entry System before conducting the referral and prescreening assessment with the consumer.
 - None of the “DV” consumer’s personal information shall be shared with any service provider until enrollment into the program. Until that point, all contact will be done through the DVAC and the GAC must provide the HMIS Client number and/or DVAC identifier number when making reference to the DV consumer which will be used for identifying purposes.
 - Once the consumer is recognized as “feeling unsafe or afraid” the system will request the Domestic Violence Assessment Center (DVAC) to enter the consumer’s HMIS Client Number and/or DVAC Identifier and the only way for a service provider to connect with this consumer is by contacting the assessor at the DVAC to provide the consumer’s identifier number to initiate the sharing of information process.

Component 4: Assessment of Consumer Needs:

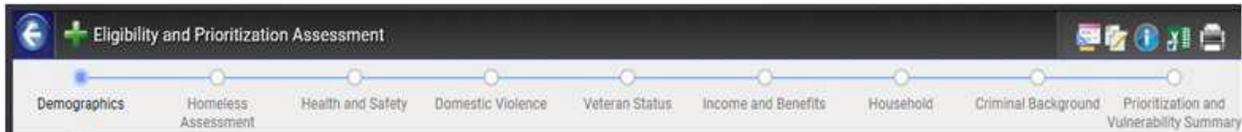
The Coordinated Entry System is designed to uniformly screen and prioritize households requiring assistance through the homeless assistance process. The tool asks a series of questions in order to collect information regarding the household’s history of homelessness and vulnerabilities.

The consumer will be asked to give consent to be entered into the Coordinated Entry system. GACs are permitted to verbally accept the consumer consent to sharing of information via the system consumer sharing option. DVACs must obtain written consent, following their agency’s sharing of information protocols, from the victim before sharing information with PA HMIS/CES participating agencies. Consumers who refuse to consent to the consumer sharing option will have the same access to services as a consumer who said yes to the consumer sharing policy. The assessor will proceed with the assessment process in order to place these individual on the Housing Prioritization List. Access to parts of each consumer record or assessment form may be restricted for safety reasons or by consumer request.

Eligibility and Prioritization Assessment:

The Eligibility and Prioritization Assessment Tool provides scoring for homeless history, specific vulnerabilities, and subpopulations and determines the consumer(s) overall supportive service need / coordinated entry prioritization score. This information is used to determine priority placement on the list (i.e., higher score = higher placement).

The Eligibility and Prioritization Assessment Tool is comprised of the following 9 sections, all of which are displayed on their own page in the system and contain questions and information pertaining to a specific area or vulnerability:



- Demographics (This section automatically turns off for DVAC)
- Homeless Assessment
- Health and Safety
- Domestic Violence
- Veteran Status
- Income and Benefits
- Household
- Criminal Background
- Prioritization and Vulnerability Summary

Each section consists of a list of questions to provide information on that consumer (head of household) and to provide a score based on the answers provided. Many of the questions have a point value placed on them. As questions related to the CoC's Prioritization target populations are answered, the assessment tool will update the overall score in real-time. Each section provides an individual score that is displayed in real-time at the bottom of the page in the red scoring area.

VETERAN STATUS TOTAL	SCORE: 75
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On the last page, a summary screen provides a breakdown of the consumer vulnerabilities/sub-populations, each individual section score and an overall vulnerability score.

PRIORITIZATION AND VULNERABILITY SUMMARY

CHRONICALLY HOMELESS	IDENTIFIED:
VETERAN	IDENTIFIED: X
FAMILY	IDENTIFIED:
YOUTH: Under the age of 25	IDENTIFIED: X
TOTAL # of current continuous days homeless	Days: 35

Scoring

HOMELESS ASSESSMENT	SCORE: 5
PHYSICAL HEALTH	SCORE: 5

Referral and Placement on the Housing Prioritization List:

Once the Eligibility and Prioritization Assessment Tool has been completed, the next step in the assessors' process is to place the consumer(s) on the CoC's Housing Prioritization List. Placement on this list allows Housing Providers to locate the consumer and offer housing placements when they are the highest prioritized consumer on the list. The placement is performed through a saved assessment tool by using the **Place on Prioritization List** button on the screen.



The assessor will then complete the placement screen with the consumer which will determine:

1. Referral Services Needed (All service needs are automatically selected. The Assessor only needs to "deselect" service needs that are not wanted/applicable.)
2. Consumer Preference for locations for Housing Placement

Wait List Category: * Priorization List - Homeless ▾

Referral Service Needs: *

- Diversion
- Emergency Shelter Housing
- Permanent Supportive Housing
- ✓ Rapid Rehousing Services
- Rental Assistance
- Transitional Housing (SHP)

Add to Waitlist Date: * 08/24/2017

Waitlist County: * Lawrence County ▾

Waitlist Priority: * Medium ▾

Status: * New ▾

Contact Phone Number:

Contact Email:

Comments:

Provider: * HMIS Service Agency ▾

Understanding
System Functions:

Coordinated Entry

Coordinated Assessment Functions:

- 🏠 **Save and Continue:** Choose this option when the consumer(s) has met the requirements to enter the Western CE system, are either Literally Homeless, At Risk of Becoming Homeless. This option will save the pre-screening and move the user forward with the intention of collecting the Screening Tool assessment.
- 🏠 **Save and Stop:** Choose this option when the consumer(s) has not met the requirements to enter the Western CE system, are not Literally Homeless, At Risk of Becoming Homeless, or Fleeing/Attempting to Flee Domestic Violence or when assessment ends prematurely. This option will save the pre-screening to preserve the contact and will end the process for the time being. It is recommended that the consumer(s) be referred to the appropriate resources outside the Western CE system, if available.
- 🏠 **Skip Pre-Screening Button:** This option should only be used when you know this is a returning caller / visitor that has already completed a Pre-Screening assessment and no significant change in homeless status has been noted. This option skips this screen and moves to the next step. Please note that even if it is a returning visitor, an existing pre-screening should be selected whenever possible before moving forward.
- 🏠 **Consumer Sharing:** When a consumer enters the Western CES, they have the ability to verbally consent to share their consumer record and Coordinated Entry information with other Assessment Centers within the continuum. Once a consumer is prompted for their sharing decision (Yes or No), it must be recorded in the consumer sharing response at the bottom of the intake screen. Please note that any answer other than “Yes” from the consumer should be recorded as “No” in the system. CE sharing is only allowable with the consumer’s permission. Consumers who choose not to share will be provided the same access into CE as persons who agree to the consumer sharing option.

Prioritization Record Functions:

- 🏠 **Referral Service Needs:** The consumer determines what types of services/ housing interventions are best suited to help their current housing situation and interventions. One or

more service needs can be selected for the consumer/household and should be based on their identified vulnerabilities (short-term vs. long-term housing needs) and consumer choice. “Referral service needs” options include:

- **Emergency Shelter Housing:** Refer all homeless in need of immediate shelter. These facilities provides temporary and emergency shelter for homeless households and do not require occupants to sign leases or occupancy agreements.
- **Permanent Supportive Housing Programs:** Refer Literal Homeless Category 1 and 4 with a disability to PSH. The most intensive intervention is permanent supportive housing (PSH). PSH should be reserved for those individuals and families who are unable to remain stably housed “but for” a permanent subsidy and ongoing supportive services. PSH Programs provide practical supportive services to assist homeless persons with a disability to live independently throughout the duration of their residence in these program.
- **Rapid Rehousing:** Refer Literal Homeless Category 1 and 4 individuals and/ or families with or without disabilities to RRH Rapid re-housing (RRH) who are most in need of temporary assistance.
- **Transitional Housing:** Refer all homeless individuals and/or family to transitional housing projects. Each individual shelter/program has its own eligibility criteria.

🏠 **Available County (s):** This helps determine the consumer’s county selections for housing and should be frequently edited to reflect any changes in the consumers’ choices. This list is used by programs and providers for filtering and searching on the Housing Prioritization List and locating the next person to be offered a housing opportunity (based on prioritization).

🏠 **Reset Days in Status:** By checking the “Reset Days in Status Option” the consumer’s days in status will reset to zero indicating that the record has been maintained by the required timeframe (excluding records marked as missing status as these records should not be reset). The CoC has chosen to not reset client records when the status has been set to missing.

🏠 **New Status:** Indicates that the consumer was recently added to the Housing Prioritization List. Newly added consumer records must be reviewed by the assessing center within the first seven days of being placed on the Western PA CoC Housing Prioritization List by the Assessment Center to ensure accuracy of the record (i.e. correct homeless classification). Once the record is reviewed, the assessment center will change the status of the prioritization list record from “New” to “Reviewed”.

🏠 **Reviewed Status:** Indicates that the consumer’s prioritization record has been reviewed for accuracy and potential fit for programs the assessing center and/or Service Providers. Records must be maintained and reviewed by the Assessing Center and/or Service Provider following the timeframes listed under section “Consumer Follow-up”.

- These consumers must still be prioritized for services.
- System Users may refer to the coordinated intake notes section for details of housing status.
- Users must document the review by selecting the Review Status or by pushing the Reset Days in Status Button next to the status menu option and save button contained at the bottom of the consumer prioritization record every time the review occurs.

🏠 **In Processing Status:** A Service Provider has determined the client appears to meet their program eligibility criteria, the client has indicated that they are interested in the available bed/opening within their program, and the program has initiated the service acceptance process and *documentation procurement*.

1. Upon programs listing the client as in-processing, all other Providers are permitted to consider the consumer as served and there overlook their name on the list when determining clients to be contacted for additional bed openings within their programs.
2. The provider who placed consumer in processing must add a coordinated intake note documenting the in-processing status listing the agency name and program.
3. In cases where a client becomes ineligible for services, the provider must change the status from “In Processing” to “Reviewed”. All reviewed clients are therefore now eligible for other services and shall be served in their list order by all providers.
4. It is preferred by this CoC for Providers to move consumers from in-processing status to placed status as quickly as possible. It is also understood that delays may occur during the enrollment process due to situations out of the Providers control, however, the expectation is for all records to be reviewed every seven days or by following the standards for consumer follow-up.
5. If the provider needs an extension to enroll a consumer into a permanent housing program after the 21 days has been reached, it is a requirement for the provider to then document extensions by selecting the “Reset Days in Status” option and adding a coordinated intake note explaining the reason(s) for the extension.

🏠 **Placed Status:** Signifies that the consumer has been placed into Permanent Supportive Housing or Rapid Re-housing or other permanent housing options by a provider. Selecting this option will place the consumer on the Historical Type List within the Housing Prioritization List. The consumer’s housing placement must be documented in a Coordinated Intake Note and listed on the household’s prioritization record via the service acceptance function after acceptance into Permanent Supportive Housing or Rapid Rehousing programs. In situations where the consumer is placed into permanent housing by means outside of CoC / ESG program funding the designated assessment center will update the consumer’s prioritization record to show this permanent housing placement.

🏠 **Closed Status:** Indicates that the consumer is no longer in need of housing assistance, did not meet homelessness/housing need requirements, or is deceased. A coordinated note must be entered by the user who closed the prioritization record and the note must then document the reason(s) for closure.

- To access “Closed” records the user can select “Historical” view under the Prioritization List category “Type”.
- It’s permitted for any provider or assessment staff to update the consumer record to “Closed Status” if they have first-hand knowledge that the consumer was no longer in need of housing services.
- To ensure that consumers placed in Emergency Shelter or Transitional Housing are not passed over for permanent housing programs † these records must remain active on the housing prioritization list and be prioritized for permanent housing options by providers required to pull from the list (following provider’s eligibility guidelines).
- Homeless consumers who enter an institutionalized agency (i.e. rehab, jail and hospital) while placed on the Western Pa CoC prioritization list must remain on the active list and be prioritized by providers required to pull from the list for at least 90 consecutive days as these clients remain classified as homeless by the HUD

standards. The CoC wants to ensure that these individuals are not passed over for services. Programs can and should begin the processing of documentation, etc while these participants are located within the institution, so that housing can be procured before their release.

🏠 **Missing Status:** A consumer will be marked as missing when an assessment agency is unsuccessful in contacting a client after exhausting all means. During the first 30 days in this status, a consumer's record will appear yellow. Providers will continue to make housing offers to missing consumers during this time. After 30 days, the missing status will appear red, at which time, providers will no longer be required to make housing offers to this consumer.

Throughout the entire time that a consumer is labeled missing, the assessment center will need to continue to demonstrate attempts to locate/contact client using all means available. During the first 30 days under the missing status, assessment agencies should continue contacting these consumers following the Operating Standards for Follow-up, with emphasis toward weekly reengagement attempts. From the period of 31 days to 90 days, reengagement attempts should continue following the Operating Standards for Follow-up, with emphasis toward biweekly reengagement attempts. From the period of 91 days to 180 days, no reengagement attempts will be required.

After 6 months, any non-chronic consumers will be made historical. Chronic consumers will remain on the list indefinitely until located and/or homeless classification has been re-determined.

🏠 **Coordinated Intake Notes:** Is an integrated note system within PA HMIS/Client Track built specifically for Coordinated Entry and allows all participating members to view and enter all notes entered by all providers for all consumers in the system.

The entering of coordinated intake notes will be a shared responsibility between both the Service Provider and the Assessment Center where the latest assessment was conducted. All system users must refrain from entering consumer's personal information in Coordinated Intake Notes to protect the privacy of our consumers. Coordinated Intake Notes should simply inform users of the consumer's housing situation. Required activities to be documented under Coordinated Intake Notes include, but are not limited to, the following:

- Eligibility documentation - note to inform agency to check the document storage location for uploaded eligibility documentation.
- Every attempt made to reach prioritized consumer(s)
 - 1) Notating contact methods and time/date of contact
 - Please note: It is required for the service provider to wait no fewer than 3 business days before attempting to service the next person in line with the highest screening score on the Western PA CoC Housing Prioritization List. Providers will follow the operating standards for Prioritization to determine the "next person in line".
- Present Location of Consumer
- Document attempts at locating a unit
- All placement and closure activities
- All referrals sent or received by participating agencies
- Every Consumer Refusal
- Every Program Refusal

- Any and all updates made to the consumer's assessment screening and / or prioritization list record.

Service Inquiry: The Service Inquiry feature assist Providers with finding potential matches on the Prioritization list by sending an electronic inquiry (email through CES) to communicate all housing program openings to the assessing center and consumer (if an email address has been provided). When Service Inquiry is used CES stores a record of the action taking place, along with the inquiry's status / outcome and reports become available and can be accessed by the system user through the prioritization list reports. All offers made by providers must be documented through this Service Inquiry Function and acknowledged by the receiving provider in five business days.

Service Acceptance/Rejection: allows Providers to record consumer's accepted or rejected program offers. Providers will use the service acceptance function once the consumer accepts the housing offer, completes the Funders' enrollment requirement(s) and is housed by the offering Provider. Additionally, CES Participating Provider will also use this system function to document the client's rejections and program refusals.

Rejections/Refusals of any kind are acceptable only in certain situations, including:

1. Consumer does not meet their Funder's eligibility guidelines
2. Consumer does not follow through with their Funder's set enrollment requirements.
3. Consumer has rejected the Provider's housing offer.
4. The consumer would be a danger to others or themselves if allowed to stay at this particular program; and
5. The consumer has previously caused serious conflicts within the program (e.g. was violent with another consumer or program staff).
6. Any situations outside of what is written in bullets 1-5 for Rejections must be communicated with the Coordinated Entry Lead Agency.

Furthermore, no more than 3 refusals, per program, are permitted. If an agency fails to meet this requirement, they must provide justification to the Coordinated Entry Committee. The committee will then determine if the justification is in compliance with HUD regulations.

Prioritization List Functions:

🏠 **Assigned County:** References the County that placed the consumer on the prioritization list.

🏠 **Assigned Provider:** Indicates the Assessment Center

🏠 **Sub-population filters:** List the various demographic categories which fit the consumer.

🏠 **Days in Status:** This notification tracks days that a consumer has been in the current status. When the number featured turns red, the consumer record must be reviewed by the assessment staff and/or service provider and the person assigned to follow-up will document the follow-up /activities in coordinated intake notes.

- Consumer follow-ups must occur weekly and will be a shared responsibility of both the assessment staff and service provider. All follow-up activities must be document in coordinated intake notes.

Please note: All aforementioned timeframes are subject to change and are based on the consensus of the Coordinated Entry Committee.

Component 5: Determining and Making Referrals

Once the assessment is completed, the assessor will indicate the referral needs of the consumer. The tool automatically selects all service needs (Emergency Shelter Housing, Permanent Supportive Housing, Rapid Rehousing Services, Permanent Housing, and Transitional Housing). The Assessor may deselect any service that is not wanted or needed (for instance, if the consumer is already in an emergency shelter, the assessor may deselect emergency shelter). Once the Assessor places the consumer on the Housing Prioritization List, the consumer's record is linked/searchable by service providers and able to receive the requested services.

Operating Standards for Making Referrals

Assessment staff/providers must:

- Adhere to civil rights and fair housing laws. These include the Fair Housing Act, Section 504 of the Rehabilitation Act, Title VI of the Civil Rights Act, Title II of the Americans with Disabilities Act, and HUD's Equal Access Rule.
- Ensure that, in accordance with Federal, State, and local Fair Housing regulations, consumers are not "steered" toward a particular housing facility or neighborhood because of race, color, national origin, religion, sex, disability, or family status.
- Agree to take responsibility for complying with Fair Housing and all other funding and program requirements. If an individual's self-identified gender or household composition creates challenging dynamics among residents within a facility, the host program should make every effort to accommodate the individual or assist in locating alternative accommodation that is appropriate and responsive to the individual's needs.
- Use the scores determined by the Coordinated Entry Assessment Tool to inform referrals for housing and services.
- Allow homeless households the choice to accept or decline referrals for housing assistance and maintain their position on the Housing Prioritization List without repercussions. All offers must be documented in the consumer's coordinated intake note section and via the service acceptance/rejection prioritization record function.
- CES participating providers must offer referrals to the local DVAC if the individual/household in crisis discloses that they are fleeing domestic violence and has chosen to be serviced by the locally identified DVAC or any DVAC within this CoC service region.
- Allow households to appeal CES decisions and register nondiscrimination complaints.

- Outline contingency plans that delineate the process for assisting homeless individuals and households when the community lacks certain homeless assistance resources and/or when those local resources are at capacity and not immediately available.
- Permit consumers to indicate which county/community resources they would like to utilize and to modify the list of areas in which they wish to reside or if a community lacks certain homeless assistance resources and/or when resources are at capacity and not immediately available.

Timeline for Making Referrals

All referrals to housing interventions must happen immediately after the completion of the Coordinated Entry Assessment Tool. Referrals are automatically created when a consumer is placed on the Housing Prioritization list.

- Staff who do not have access to the internet must utilize the paper or pdf version of the Coordinated Entry Assessment Tool and enter their assessment into the online computer-based system by the close of the next business day.
- If a consumer presents after assessment hours, Access Points, Assessment Street Outreach Staff and/or the County's 24/7 emergency referral services line must immediately send the referral to the local emergency shelters. The consumer will be referred to the appropriate GAC or DVAC for a complete assessment on the next available business day that the assessment center is open.

Receiving and Accepting Referrals for Housing Placement

In order to receive referrals from the Coordinated Entry System, an agency must first become a Participating Agency of PA HMIS and all agency users must participate with the required Coordinated Entry System Trainings. Once the inquiring agency/staff performs the aforementioned steps to gain access to the Housing Prioritization List, DCED will send to the agency's designated point of contact, confirmation of system access.

During the assessment process, the county selection and housing intervention(s)/referral service needs will be chosen by the consumer. Once selection occurs, the system will auto send referrals, via email, to each participating agency serving the selected housing intervention(s)/referral service needs and county(s).

Western PA CoC Transitional Housing (TH), Rapid Re-Housing (RRH), and Permanent Supportive Housing (PSH) and Emergency Solutions Grant (ESG) Rapid Re-Housing projects are required to only accept referrals and to only fill vacancies and/or turnover units using the Housing Prioritization list.

- It is prohibited for any CoC or ESG funded Program to admit or serve consumers without them having first gone through the coordinated entry process and appropriate referral to their agency.

- Note: As outlined above, referrals should be made immediately after completing the Coordinated Entry Assessment Tool and consumers have accepted the identified referral (per the previously outlined procedure above).
- Assessment staff may also make a manual referral to a housing provider or other type of homeless assistance provider to help end the homeless episode. Assessment staff should make every attempt to ensure that referrals to housing and service providers are made as quickly as possible after the homeless individual/household entered homeless assistance system.

Operating Standards for Accepting Referrals and Housing Placements:

The main purpose of the Western CoC Coordinated Entry System is to ensure that households with the most severe service needs, longest homeless history and most vulnerabilities be prioritized for housing assistance and receive those services within a very limited timeframe. It is imperative that providers are actively using the Housing Prioritization List so that they are able to offer housing opportunities quickly to the consumers who are prioritized.

- Housing Providers receiving referrals must report to the Housing Prioritization List within seven days to review the consumer’s prioritization record and coordinated entry assessment in order to initiate an enrollment, if appropriate. Once the record has been reviewed, the agency reviewing the record must update the community list status under the consumer’s prioritization record to either “reviewed” or “in processing” status (reference coordinated entry function definitions) and add a coordinated intake note to document the review. If the consumer accepts or declines an offer the provider also documents this response utilizing the service acceptance/rejection function in HMIS.

Component 6: Prioritization and Housing Prioritization List

All CoC and ESG funded projects are required to prioritize individuals and families with the longest history of homelessness and with the most severe service needs for all available CoC resources. The determination of severe service need will be based on the score created from the Coordinated Entry Assessment tool (ATTACHMENT G AND H). A higher score demonstrates a higher service need and length of homelessness. Priority populations (as designated by the CoC) are also weighted in order to ensure higher placement on the prioritization list.

In the event that two or more homeless households within the same geographic area are identically prioritized for the next available unit and each household is also eligible for that unit, the program should select the household that first presented for assistance in the determination of which household receives a referral to the next available unit.

The CES has established a community-wide list of all known homeless persons who are seeking or may need CoC or ESG housing and services to resolve their housing crisis. The community-wide list is known as the Housing Prioritization List and is housed within PA HMIS/Client Track in

the Coordinated Entry database. The Housing Prioritization List will prioritize households for access to different housing interventions:

- Diversion
- Transitional Housing
- Permanent Supportive Housing
- Rapid Re-Housing
- Rental Assistance (such as Homeless Assistance Program or Emergency Shelter Assistance)
- Emergency Shelter

These housing interventions are categorized as “**referral need services**” in the coordinated entry database and will serve as a jumping-off point for a discussion between the assessment staff member and the consumer about what referral(s) should be made. This coordinated process will be geared toward prioritizing those households with the most intensive service needs and housing barriers (e.g. chronically homeless households and households with multiple episodes of homelessness) taking into consideration any priority populations named by the CoC.

Utilizing the Housing Prioritization Waiting Lists to make Housing Offers

Prolonged stays on waiting lists for housing resources can have a negative impact on the wellbeing of participants and reduce the overall performance of a community’s homeless assistance system. It will be the goal of this Continuum to keep time spent on the housing prioritized list for housing resources at 90 days or less.

When a housing provider has an opening, the provider will be expected to utilize the Housing Prioritization List in order to determine the consumer who should be offered the opportunity. The Housing Prioritization List is automatically sorted by score, but can be filtered by the housing provider to “drill down” to the consumers who meet program eligibility. Filters include, subpopulations, specific barriers, service needs, county of operation, and household composition.

Housing providers should offer the housing opportunity to the individual with the highest acuity score that meets their program guidelines and must wait at least a period of 5 business days before permitted to move to the next person in line on the Housing Prioritization List. Providers must prioritize clients from the Chronically Homeless List first for any openings. Housing providers should document in the Coordinated Intake Notes any information pertinent to the placement of the consumer in housing. This might include, but is not limited to: any and all housing offers, housing placements, clarification on eligibility, etc. The Housing Provider should also upload any proof of homelessness documentation (Non-DV households only).

Programs with openings, will review the list daily to identify and engage the consumer with the highest acuity for services. Programs will indicate that the consumer is “in process” and provide details in a Coordinated Intake Note.

Operating Standards for Making Housing Offers to Consumers Placed on Prioritization List:

- To make a housing offer to a consumer placed on the CoC's Housing Prioritization List the provider must first make the housing offer directly (face to face, email, service inquiry or by phone) with the consumer and the assessment center. The offer must be acknowledged and accepted or rejected by the consumer or the assessment center on behalf of the consumer within at least 5 business days before the provider moves to the next person in line on the housing prioritization list. In circumstances where the assessment center communicates the consumer's response, the response shall also be communicated directly (face to face, email, service inquiry or by phone) to the requesting provider.
- Providers are permitted to contact and engage from the list, up to ten of the highest scoring households, per each program opening.
- Providers will start their search by reporting to the Chronically Homeless List to extend program offers to these Households first for all Transitional, Permanent Supportive Housing and Rapid Rehousing Program openings.
- Providers should engage households placed on their county's designated CE prioritization list first and if no Chronically Homeless Households are presenting at the time of the engagement, then move on to pull from the CoC - wide CE Prioritization List, selecting households who possess the highest screening score from the coordinated assessment.
- When no Chronically Homeless Households are available on the County or CoC-wide list, providers will report back to their County's designated Prioritization list and start the process of engaging Homeless households with the highest scoring. The available unit is then given to the household with the longest history of homelessness and highest screening scoring.
- Once the households accepts the program opening, the status of the household's prioritization record must be changed to in-processing by the offering provider. (See revised definition for in-processing.) When clients are placed in-processing they become unavailable to all other providers.
- The Service Accept/Reject function is used by the offering Provider to record all accepted and/or rejected referrals. This function is used to officially enroll households off the prioritization list into Provider's housing openings. This step is taken once all required documentation has been collected by the offering Service Provider and once a unit has been secured for the identified household.
- All attempts to make housing offers and /or collect a response should also be documented through the service acceptance/rejection and inquiry functions.
- The only way to make a housing offer to an anonymous consumer is by contacting the identified DVAC staff directly who will in return, collect and provide the response of the consumer and initiate their agency's sharing of information process to begin to make a connection to the accepted program/provider. Only the DVAC will add notes in the coordinated intake note section for the consumers they are serving. Please note: At all times, General Sites must refrain from updating DV/anonymous records including adding Coordinated Intake notes and changing statuses and excluding facilitation of the service acceptance/rejection function as this process will be completed by the offering provider. List Management of DV records will be completed only by the ASSESSING DVAC.

Personal Identification information of an identified DV consumer should never be disclosed in an email.

Maintaining the Housing Prioritization Waiting Lists

The Housing Prioritization List must be continuously updated in order to accurately reflect consumers' status and housing needs. The GAC will serve as "Leads" in each county and will be responsible for fostering the daily management of CES. Each assessment center and housing service provider are responsible for managing and updating their consumer entries daily, which would include, but not limited to:

- Changing/Updating the prioritization record to reflect the consumers current housing crisis
- Updating the consumers preferred counties to reside in
- Updating the consumer record to reflect the consumer's actual housing prioritization status. i.e. Placed, Closed, Turned Away, Reviewed, etc.
- Documenting Consumers Acceptances and Rejections
- Daily upkeep of the Client Tracking Database
- Housing Placements
- Additional or eliminated barriers
- Changes in household make up
- Homeless Documentation Obtained/Uploaded

Operating Standards for Consumer Follow - up and Maintaining the Prioritization List:

All participating providers making referrals to the Prioritization List are responsible to follow-up with the persons they referred to the list in order to determine whether or not the household is still in need of housing. It is preferred by the CoC for follow - up and list management activities (which includes updating the prioritization list record statuses) to occur every seven days or at a maximum of every 21 days. The CoC understands that this standard must be within each assessment centers capacity to serve and operate, therefore, the Coordinated Entry Committee has established the following scale to assist CES participating providers with measuring their follow-up response time with the consumer:

7 Days	Excellent List Management
14 Days	Proficient

21 days	Average
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During following the staff should gather the following information:

- 1. Confirm or update contact information
- 2. Confirm or update homeless situation
- 3. Confirm the person(s) still need housing assistance
- 4. Confirm the person(s) wish to remain on the Prioritization List

If the household is no longer in need of housing assistance or is deceased, the agency may appropriately close the referral by switching the record status to close to remove the individual or family from the Prioritization List. If a DV record should need closed from the prioritization list only the local DVAC holder of record is permitted to close the record.

In instances, where the provider contacts a referral to offer services and finds out the household is no longer in need of CES services, that provider should follow the steps necessary to properly close the referral on the prioritization list. If the client is a survivor of domestic violence the provider would contact the local DVAC to have them close the referral off the list, even if that provider did not make the original referral.

Agencies contacting consumers should document any and all attempts to reach clients in the coordinated entry notes section in HMIS. The assessment center must place individuals as “missing”, adhering to definition for missing, when unable to contact a person on the Prioritization List.

- Agencies must engage and attempt to stay in contact with identified, “Missing Chronically Homeless Individuals/family” as these households will remain on the priority list indefinitely until they’re housed or the homeless classification has been redetermined.
- Non - chronically homeless individuals are to be contacted in the order of priority by highest screening score and remain on the list for at least 6 months before the system can automatically move the consumer record from the active prioritization list.

If the person makes contact with a participating CES agency, s/he can request to be placed back on the Prioritization List by answering “yes” to any of the questions listed on the Pre-screening and Referral Questionnaire. This should be done by the agency that receives the request from the person. The agency should first search the client in the HMIS-CES databased, collect responses to the pre-screening questions, update the coordinated screening assessment tool and replace the client back on the prioritization list by switching status from closed to reviewed, which would make the consumer record active again.

Component 7: Monitoring and Evaluation

Monitoring and evaluation are critical for building a strong, evidence -based coordinated entry system around housing homeless individuals and families and for assessing the types of interventions being implemented to address it. The monitoring and evaluation of this Coordinated Entry System will be used to document gap in services, successes of programs, services and approaches and tracking progress toward meeting the goals of the Western PA CoC five-year Strategic Plan. The CES Lead Agency, in conjunction with the Coordinated Committee, and the

CoC Governing Board will create a plan for the CoC to engage in ongoing planning with all stakeholders utilizing the Coordinated Entry process.

Specifically:

- The CES Lead agency will consult with each participating project at least annually to evaluate the intake, assessment, and referral processes associated with coordinated entry.
- The CES Lead Agency will solicit feedback regarding the quality and effectiveness of the entire coordinated entry experience for both participating projects and households.
- The CES Lead Agency will survey, a sample of households for data analysis by the Lead Agency.
 - The participants selected to participate in the evaluation will include individuals and families currently engaged in the coordinated entry process or who have been referred to housing through the coordinated entry process in the last year.
 - Privacy protections of all participant information will be in place during the course of the annual evaluation.
- The CES Lead Agency will regularly monitor the Coordinated Entry tool and Housing Prioritization List accuracy of placement, priorities, ease of use, and understanding of consumer and users once the use of the tool has been established and the tool will be adjusted as needed.

Component 8: DATA MANAGEMENT

Privacy and Security

Assessment and Housing Prioritization List data will be maintained in the Pennsylvania Homeless Management Information System (PA HMIS):

- a. Agencies and all system user will agree to follow all PA HMIS standard privacy and security policies including but not limited to: PA HMIS Collaborative Agency Participation agreement, PA HMIS Collaborative System User Agreement, PA HMIS Privacy and Security Plan v.1.0., PA HMIS Data Quality and Functionality Plan v.1.0.
- b. Agencies will enter consumer data using the Coordinated Entry workflow within Client Track/HMIS.
- c. PA HMIS System Administrator will develop and update training around the Coordinated Entry workflow document for users. All training documents will be located on CoC Webpage www.pennsylvaniacoc.org. Refer to Coordinated Entry user guide (ATTACHMENT F).
- d. GACs are permitted to verbally accept the consumer consent to sharing of information via the system consumer sharing option. DVACs must obtain written consent from the victim before permitted to share information with PA HMIS/CES participating agencies.
- e. The assessment process cannot and does not require disclosure of specific disabilities or diagnosis. Specific diagnosis or disability information may only be obtained for purposes of determining program eligibility to make appropriate referrals.

Data Collection

Data will be collected on everyone that is assessed through the coordinated entry process. This section, in addition to instructions embedded within the assessment tool, will detail when and how consumer data going through coordinated entry will be collected.

When a consumer enters the Western PA Coordinated Entry system through the General Assessment Center (GAC) they have the ability to verbally consent to share their consumer record and Coordinated Entry information with other PA HMIS Participating Agencies within the Western PA CoC. Once a consumer is prompted by the assessor for their consumer sharing decision, Yes or No, it must be recorded in the consumer sharing response at the bottom of the intake screen.

Western Coordinated Entry Assessment | Western Coordinated Entry Client Intake

Client Intake (Head of Household) - enter in as much information as you can about the calling client and search the system for existing client matches using the Last Name field. If a match is found, you will be notified. Select "Begin Assessment Tool" to continue forward with the intake process.

First Name:

Last Name:

Date of Birth:

Social Security Number:

Home Phone (000-000-0000):

Local Client Type: **New Client**

Client Sharing: **-SELECT-**

Client Sharing - request client to provide verbal permission to share their HMIS record with affiliated Western Coordinated Entry Intake and Assessment operators

Please note that any answer other than “Yes” from the consumer should be recorded as No in the system. Sharing of Coordinated Entry data is only permissible through consumer’s consent.

Consumers who refuse to consent to the consumer sharing option will have the same access to services comparable to a consumer who said yes to the consumer sharing policy. The assessor will proceed with the referral process in order to place these individual on the Housing Prioritization List. Access to parts of each consumer record or assessment form may be restricted for safety reasons or by consumer request.

Component 9: Outreach and Marketing

In order to reach persons who are most vulnerable to homelessness, who are unsheltered, or who may have barriers to accessing programs and resources, the Coordinated Entry Lead Agency will ensure that access to local homeless systems and resources is well advertised to the entire community. This includes taking explicit steps to make advertising and communications materials easy to understand, making the system easily accessible, and taking specific action to reach out to those who may be least likely to seek out resources on their own. CE plans include advertising and outreach strategies that clearly communicate how persons in need can access the CE system. These strategies and related materials are explicitly aimed at persons who are homeless, vulnerable to homelessness, and/or who are unsheltered, disabled, and/or currently not connected to services. Outreach, advertising, and marketing tools will explicitly convey that services are available to all eligible persons regardless of race, color, national origin, religion, sex, age, familial status, disability, actual or perceived sexual orientation, gender identity, or marital

status. Marketing and outreach will be accomplished through, but shall not be limited to, the following strategies:

- The CE Lead Agency will ensure that all advertising materials clearly identify the local CE system and process for seeking assistance.
- CE Lead Agency will ensure that marketing materials are easily accessible to persons with developmental disabilities and are available in multiple languages to meet the needs of minority, ethnic, and groups with Limited English Proficiency as needed (based on local need/population).
- The CE Lead Agency will provide LanguageLine for usage across the CoC. LanguageLine is a language services provider that provides interpreting and document translation services in 240 languages, 24 hours a day, 7 days a week. (ATTACHMENT E)
- The CE Lead Agency will create consistent marketing materials which identify the CE system and point the consumer and community agencies to the local CE access by including: phone numbers, addresses, hours of operation, after-hours information, etc.
 - A list of CES Assessment Centers with phone number, address, hours of operation and county's afterhours plan is included in Attachment B.
- The CE Lead Agency will work with the local designated GAC to ensure the distribution of all advertising materials to local providers and stakeholders in the local CE system. GACs are encouraged to utilize their LHOT and/or Housing Coalitions to distribute marketing materials. The LHOT/Housing Coalitions include organizations who most frequently encounter homeless households, particularly households with the highest barriers and/or those not currently connected with services. LHOT/Housing Coalition members include:
 - Law enforcement
 - Other Housing Providers
 - Health Care Systems
 - Emergency Shelters
 - Mental Health Providers
 - Substance Abuse Providers
 - Education Systems
 - Community meal sites and food pantries
 - Faith-based organizations and churches
 - Street outreach teams (where applicable)

How To Order Universal Advertisement Materials

For tracking purposes any request for CE universal advertisement should be made through this jotform link <https://form.jotform.com/LCCAP/CE>. LCCAP will confirm your order after reviewing budgets. If adjustments are needed, LCCAP may request that you prioritize your items before confirming your order. Please allow at least 2 weeks for printing and shipping of materials. If you need assistance with completing the form, please email kpresnar@lccap.org or follow the How to Guide contained within the following link:

<http://files.constantcontact.com/b466018e301/715a4580-0ad4-47df-ab97-0c984d6c89e2.docx>.

Coordinated Entry Implementation

As of December 11, 2017, all CoC and ESG funded programs located within the Western CoC were directed by the CoC Governing Board and Pennsylvania Community of Economic Development to utilize the Coordinated Entry System. Trainings have been provided, were recorded, and will be posted on the CoC's website (www.pennsylvaniacoc.org). Ongoing trainings will be scheduled and advertised to all stakeholders. Both Individual agency and/or County-based technical assistance are available through the CoC's Lead Agency.

The following pages outline the formal policies have been adopted by the Western PA CoC Board to provide direction on the implementation of Coordinated Entry and the provision of homeless services throughout the CoC.

WESTERN PA CONTINUUM OF CARE (PA - 601)
Coordinated Entry Operating Standards
Date Adopted: 1/24/2018

In accordance with the CoC Program interim rule, HUD Coordinated Entry Notice CPD-17-01: Notice Establishing Additional Requirements for a Continuum of Care Centralized or Coordinated Assessment System (2017), and the Coordinated Entry Policy Brief (2015), the Western CoC establishes this policy to enact and establish the Western CoC Coordinated Entry System.

- The deadline for compliance for all CoC and ESG-funded programs is January 23, 2018.
- The Coordinated Entry System will cover all geographic areas claimed by the Western PA CoC.
- The Coordinated Entry System will ensure easy access for all individuals and families seeking housing or services.
- The Coordinated Entry System will be well-advertised.
- The Coordinated Entry System will include a comprehensive and standardized assessment tool.
- The CoC will establish a policy to address the very specific needs of individuals and families fleeing or attempting to flee domestic violence, dating violence, sexual assault, or stalking, and who are seeking shelter or services.
- The Coordinated Entry System will affirmatively market housing and supportive services, provide a strategy to ensure the availability of housing and supportive services, and ensure that all eligible households have fair and equal access to the system, especially those least likely to apply in the absence of special outreach.
- The Coordinated Entry System will be held to the Nondiscrimination Policy as set by the Governing Board.

Policy

WESTERN PA CONTINUUM OF CARE (PA-601) Housing Prioritization Policy for All CoC and ESG-Funded Projects Date Adopted: 1/24/2018

Policy:

The Pa-601 Continuum of Care commits to the prioritization of households who meet the HUD definition of homeless in all CoC and ESG funded projects within the CoC. This includes bed/units/assistance designated for chronically homeless and non-chronically homeless.

Order of Priority:

All CoC and ESG projects are required to follow the CoC's Prioritization of Chronically Homeless which prioritizes chronically homeless over all other target populations in a manner consistent with their current grant agreement. (See ATTACHMENT D)

All CoC and ESG funded projects are required to prioritize individuals and families with the longest history of homelessness and with the most severe service needs for all available CoC resources. ESG grantees should follow their current approved written standards on prioritization. The determination of severe service need will be based on the score created from the Coordinated Entry Assessment tool (ATTACHMENT G AND H). A higher score demonstrates a higher service need.

In the event that two or more homeless households within the same geographic area are identically prioritized for the next available unit, and each household is also eligible for that unit, the CoC selects the household that first presented for assistance in the determination of which household receives a referral to the next available unit.

Prioritizing Eligible Households for Permanent Supportive Housing

Providers will utilize the Housing Prioritization List to offer housing placements to the individual or family with highest acuity first. As a reminder, consumer choice is paramount to this process. Households will be able to indicate the counties they are willing to reside in and will be offered housing interventions in the areas in which they wish to reside. Consumers will be able to modify the list of areas in which they wish to reside to remove or add counties within the CoC.

Prioritizing Eligible Households for Rapid Re-Housing Programs

All CoC RRH projects are required to follow the CoC's order of prioritization which prioritizes households with the longest history of homelessness and with the most severe service needs. ESG grantees should follow their current approved written standards on prioritization in conjunction with this policy. The Coordinated Entry Assessment Tool will provide a score for each assessed household which is directly related to the household's length of time homeless and service needs. Providers will utilize the Housing Prioritization List to offer housing placements to the individual or family with highest acuity first. As a reminder, consumer choice is paramount to this process. Households will be able to indicate the counties in which they are

willing to reside in and will be offered housing interventions in the areas they wish to reside. Consumers will be able to modify the list of areas in which they wish to reside to remove or add Counties within the CoC.

Prioritizing Eligible Households for Transitional Housing

It is the goal of the Western CoC to place households experiencing homelessness into permanent housing as quickly as possible. The CoC recognizes that Transitional Housing is an important option for certain population groups (Youth, DV, etc.) and when no permanent housing is readily accessible. Transitional Housing facilitates the movement of homeless households to permanent housing within 24 months of entering transitional housing. It is the CoC's goal that Transitional Housing be used as a bridge to permanent housing and that households remain in Transitional Housing for less than 90 days.

All Transitional Housing projects are required to follow the CoC's order of prioritization which prioritizes households with the longest history of homelessness and with the most severe service needs. The Coordinated Entry Assessment Tool will provide a score for each assessed household which is directly related to the household's length of time homeless and service needs. Providers will utilize the Housing Prioritization List to offer housing placements to the individual or family with highest acuity first. As a reminder, consumer choice is paramount to this process and providers should notify consumers that placement in TH may affect their future eligibility for other projects such as PSH or RRH. Households will be able to indicate the counties in which they are willing to reside in and will be offered housing interventions in the areas they wish to reside. Consumers will be able to modify the list of areas in which they wish to reside to remove or add Counties within the CoC.

Policy

**WESTERN PA CONTINUUM OF CARE (PA-601)
Prevention Services
Date Adopted: 1/24/2018**

Prevention Services

Consumers seeking access to homeless prevention services through the coordinated entry system must be referred and connected to the appropriate service providers at time of visit. These consumers will not complete a coordinated entry assessment nor will they be placed on the Housing Prioritization List to be serviced by the homeless services providers.

- The exception to this rule are consumers meeting the at-risk of becoming homeless definition. These consumers must complete the coordinated entry assessment and be placed on the Housing Prioritization List and be prioritized by households with the most severe service needs. The Coordinated Entry Assessment Tool will provide a score for each assessed household which is directly related to the household's length of time homeless and service needs. Providers will utilize the Housing Prioritization List to offer housing placements to the individual or family with highest acuity first. As a reminder, consumer choice is paramount to this process. Households will be able to indicate the counties in which they are willing to reside in and will be offered housing interventions in the areas they wish to reside. Consumers will be able to modify the list of areas in which they wish to reside to remove or add Counties within the CoC.

WESTERN PA CONTINUUM OF CARE (PA - 601)
Non-Discrimination and Affirmative Fair Housing Policy
Date Adopted 1/24/2018

Nondiscrimination

24 CFR §578.93(a) requires All participating providers to operate in compliance with federal nondiscrimination and equal opportunity requirements; *see* 24 CFR 5.105 (a) for a full list of applicable laws, regulations and Executive Orders.

Fair Housing

The Fair Housing Act prohibits discrimination in housing on the basis of:

- Race
- color
- National origin
- Religion
- Sex
- Familial status (families with children)
- Disability

Additionally, each program, needs to address their state, local and municipality requirements regarding fair housing rules and regulation.

Reasonable Accommodations and Modification for Persons with Disabilities

Persons with disabilities may be entitled to reasonable accommodation and/or modifications. A request for reasonable accommodation must be made by or on behalf of a person with a disability. The request must be necessary i.e. there must be a disability related need for the reasonable accommodation or modification. In addition, the request must be reasonable. i.e. cannot impose an undue financial and administrative burden on the housing provider or fundamentally alter the nature of the provider's operations. The Act makes it unlawful to refuse to make reasonable accommodations to rules, policies, practices, or services when such accommodations may be necessary to afford persons with disabilities an equal opportunity to use and enjoy a dwelling. The Act also makes it unlawful for a housing provider or homeowners' association to refuse to allow a reasonable modification to the premises when such a modification may be necessary to afford persons with disabilities full enjoyment of the premises.

A "reasonable accommodation" is a change, exception, or adjustment to a rule, policy, practice, or service that may be necessary for a person with a disability to have an equal opportunity to use and enjoy a dwelling, including public and common use spaces.

A “reasonable modification” is a structural change made to existing premises, occupied or to be occupied by a person with a disability, in order to afford such person full enjoyment of the premises. Reasonable modifications can include structural changes to interiors and exteriors of dwellings and to common and public use areas.

A “disability” is defined as (1) individuals with a physical or mental impairment that substantially limits one or more major life activities; OR (2) individuals who are regarded as having such an impairment; OR (3) individuals with a record of such an impairment.

- The term “physical or mental impairment” includes, but is not limited to, such diseases and conditions as orthopedic, visual, speech and hearing impairments, cerebral palsy, autism, epilepsy, muscular dystrophy, multiple sclerosis, cancer, heart disease, diabetes, Human Immunodeficiency Virus infection, mental retardation, emotional illness, drug addiction (other than addiction caused by current, illegal use of a controlled substance) and alcoholism.
- The term “substantially limits” suggests that the limitation is “significant” or “to a large degree.”
- The term “major life activity” means those activities that are of central importance to daily life, such as seeing, hearing, walking, breathing, performing manual tasks, caring for one’s self, learning, and speaking. This list of major life activities is not exhaustive

Required Documentation

A provider is entitled to obtain information that is necessary to evaluate if a requested reasonable accommodation may be necessary because of a disability. If a person's disability is obvious, or otherwise known to the provider, and if the need for the requested accommodation is also readily apparent or known, then the provider may not request any additional information about the requester's disability or the disability-related need for the accommodation.

If the requester's disability is known or readily apparent to the provider, but the need for the accommodation is not readily apparent or known, the provider may request only information that is necessary to evaluate the disability-related need for the accommodation.

If the requesters disability is not obvious or the need for the request is not obvious, a housing provider may request reliable disability-related information that (1) is necessary to verify that the person meets the Act's definition of disability (*i.e.*, has a physical or mental impairment that substantially limits one or more major life activities), (2) describes the needed accommodation, and (3) shows the relationship between the person's disability and the need for the requested accommodation.

Guidance for Creation of Nondiscrimination and Fair Housing Policies: All provider agencies, including assessment centers are required to uphold and provide to the Western CoC designated Lead Agency of Coordinated Entry with the following:

- Verification that they have policies which ensures the agency does not tolerate discrimination and comply with all nondiscrimination, fair housing, and equal opportunity laws.
- Verification of availability of aids and services, upon request, to ensure effective communication, such as the availability of qualified sign language interpreters, documents in Braille, or other ways of making information and communications accessible to people who have speech, hearing, or vision impairments.
- Verification that a program has a reasonable accommodation policy that would allow a person with a disability equal opportunity to occupy and enjoy the full use of a housing unit will be provided.
- If the agency acts as a landlord, verification that the agency has a reasonable modification policy that would allow a person with a disability equal opportunity to occupy and enjoy the full use of a housing unit will be provided.
- Verification that the agency has a complaint procedure to report discrimination to be provided to and/or provided to program participant. The contact information should include the following:

Point of Contact Information from the Provider Agency:

Fair Housing Law Center

Attention: Southwestern PA Legal Services, Inc.
10 West Cherry Avenue, Washington, PA 15301
(877) 725 - 4472

US Department of Housing and Urban Development
10 Causeway Street, Room 321
Boston, Massachusetts 02222-1092
(617) 994-8300; (800) 827-5005; TTY (617) 565-5453

Affirmatively Furthering Fair Housing

24 CFR § 578.93(c) requires that CoC Programs must affirmatively market housing and supportive services to eligible persons--regardless of race, color, national origin, religion, sex, age, familial status, or handicap--who are least likely to apply in the absence of special outreach, and maintain records of those marketing activities. To ensure the coordinated entry process assists CoC Program and ESG Program recipients in meeting the Affirmatively

Furthering Fair Housing requirement, Western PA CoC is committed to providing marketing resources, auxiliary aids and other services necessary to ensure effective communication with persons accessing the homeless response system, which includes ensuring that information is provided in appropriate accessible formats as needed, such as Braille, audio, large type, assistive listening devices, and sign language interpreters, as well as accommodation for persons with limited English proficiency. Resources will be developed and made available by the CoC designated Lead Agency and marketing plans described within the Coordinated Entry Policy and Procedure Manual.

Housing assisted by HUD and made available through the CoC must also be made available to individuals and families without regard to actual or perceived sexual orientation, gender identity, or marital status in accordance with 24 CFR 5.105 (a)(2).

Resources

HUD template for creation of Affirmative Fair Housing Marketing Plan (HUD Form 935.2a):

Multi-Family Housing: <http://portal.hud.gov/hudportal/documents/huddoc?id=935-2a.pdf>

Single Family Housing: <https://www.hud.gov/sites/documents/935-2B.PDF>

Policy

Western Pa Continuum of Care (PA -601) Access/ Barriers Policy Date Adopted: 1/24/2018

HUD Coordinated Entry Notice: Section 11.B.4

Background

Housing First is an approach in which housing is offered to people experiencing homelessness without preconditions (such as sobriety, mental health treatment, or a minimum income threshold) or service participation requirements and in which rapid placement and stabilization in permanent housing are primary goals. CoC and ESG funded projects that use a Housing First approach promote the acceptance of applicants regardless of their sobriety or use of substances, completion of treatment, or participation in services. United States Department of Housing and Urban Development (HUD) encourages all recipients of Continuum of Care (CoC) Program to follow a Housing First approach to the maximum extent practicable. Any recipient that indicated they would follow a Housing First approach in their CoC Project Application must do so throughout the full grant term of any funded application.

Applicability

At minimum, all CoC- funded Permanent Supportive Housing (PSH), Rapid Rehousing (RRH), and Transitional Housing (TH) programs will maintain marketing and tenant selection policies and procedures that follow a Housing First approach as noted below.

Policy

The Pennsylvania Western Region Continuum of Care requires agencies and programs alike to have the following core elements incorporated in all program types:

- Admission/tenant screening and selection practices promote the acceptance of applicants regardless of their sobriety or use of substances, completion of treatment, and participation in services.

- Applicants may not be rejected by agencies on the basis of poor credit or financial history, income, poor or lack of rental housing, minor criminal convictions, or behaviors that indicate lack of “housing readiness.”
- Providers accept referrals directly from shelters, street outreach, drop-in centers, and other parts of crisis response systems that are integrated into Coordinated Entry, and are frequented by vulnerable people experiencing homelessness.
- Supportive services emphasize engagement and problem-solving over therapeutic goals. Services plans are highly tenant-driven without predetermined goals. Participation in services or program compliance is not a condition of permanent supportive housing. Rapid Re-Housing programs may require case management as condition of receiving rental assistance.
- Use of alcohol or drugs in and of itself (without other lease violations) is not considered reason for eviction by the Agency. Receiving approval from the CoC, agencies may adopt a “no use or consumption” on property rule.

Policy

WESTERN PA CONTINUUM OF CARE (PA -601) Domestic Violence, Dating Violence, Sexual Assault & Stalking Management Policy Date Adopted _____

HUD Coordinated Entry Notice: Section 11.B.10

Policy

The Western CoC Board of Directors are aware and understand the need for protection policies to address the safety planning needs of all individuals and families who are fleeing, or attempting to flee, domestic violence, dating violence, sexual assault, human trafficking or stalking that meet both the requirements of HUD and the laws of the Commonwealth of Pennsylvania. It is the intention of this Western CoC to ensure that the Coordinated Entry System has built into is core the safety factor as a major part of all parts and parcels of the Coordinated Entry System. Therefore the Coordinated Entry System shall meet the following:

- All persons who are fleeing, or attempting to flee, domestic violence, dating violence, sexual assault, human trafficking or stalking shall expect and receive safe, confidential access to the Coordinated Entry Process including immediate access to the emergency services necessary for their safety including, but not limited to, the domestic violence hotlines, shelter, safety planning and housing when possible.
- These persons shall remain anonymous within the PAHMIS/Client Track assessment tool and during the initial assessment processes.
- Participating providers of CES will ensure that no participant be denied access to the CES on the basis that the participant is or has been a victim of domestic violence, sexual assault or stalking.
- Safety and Confidentiality Training shall be provided at least annually to both DVACs and GACs to ensure that safety is in the forefront during assessment and housing determination periods.
- Domestic Violence Assessment Centers must obtain written consent from the victims before permitted to share information with PA HMIS/CE participating agencies following their agency’ sharing of information protocols.

- To further protect the confidentiality of victims, at all times, General Assessment Sites must refrain from updating DV/anonymous records including adding Coordinated Intake notes and changing statuses. List Management of DV records will be completed only by the ASSESSING Domestic Violence Assessment Center.
- Personal Identification information of an identified victim should never be disclosed in an email.

Policy

WESTERN PA CONTINUUM OF CARE (PA -601)

Fair and Equal Access Policy

Date Adopted _____

Policy

The Pennsylvania Western Region Continuum of Care will ensure fair and equal access to the Coordinated Entry system programs and services for all consumers regardless of actual or perceived race, color, religion, national origin, age, gender identity, pregnancy, citizenship, familial status, household composition, disability, Veteran status, sexual orientation, or domestic violence status.

To ensure fair access by individuals with disabilities, physical and communication accessibility barriers must be addressed by appropriate accommodation within each Coordinated Entry System.

All authorized user agencies are required to comply with Fair Housing Act, State and Local anti-discrimination laws and all other funding and program requirements.

Policy

WESTERN PA CONTINUUM OF CARE (PA -601) Evaluating and Updating Coordinated Entry Policies and Procedures Date Adopted _____

HUD Coordinated Entry Notice: Section II.B.15

Policy

The implementation of coordinated entry necessitates significant, community wide change. To help ensure that the system will be effective and manageable for homeless and at risk households and for the housing and service providers tasked with meeting their needs, particularly during the stages of implementation, the Pennsylvania Western Region Continuum of Care anticipates adjustments to the processes described in this manual. To inform those adjustments, the Coordinated Entry System will be periodically evaluated and there will be ongoing opportunities for stakeholder feedback.

The Western PA CoC has designated Lawrence County Socials Services, Inc. as the Lead Agency of Coordinated Entry and the entity responsible for:

- Leading periodic evaluation efforts to ensure that Coordinated Entry is functioning as intended. This will be completed annually at minimum.
- Leading efforts to make periodic adjustments to Coordinated Entry as determined necessary. This will be completed annually at minimum.
- Ensuring that evaluation and adjustment processes are informed by a broad and representative group of stakeholders.
- Ensuring that the Coordinated Entry System is updated as necessary to maintain compliance with all state and federal statutory and regulatory requirements. Changes will occur when a statutory or regulatory requirement is superseded, rescinded or amended.

WESTERN PA CONTINUUM OF CARE (PA -601)
Coordinated Entry Grievance Policies and Procedures
Date Adopted _____

Coordinated Entry grievance policy:

Coordinated Entry will respond to grievances in the following manner, depending on the nature of the concern or grievance. The CoC Executive Board prohibits retaliation of any kind against individuals who have submitted a grievance. This policy refers to complaints and grievances regarding the Coordinated Entry System only.

Definitions

Complaint is defined as a verbal expression of dissatisfaction by the participant, agency, or community member regarding Coordinated Entry services provided by the Western PA Continuum of Care member agencies which can be resolved at the point at which it occurs by the staff present. Complaints are considered resolved when the participant, agency, or community member is satisfied with the action taken by the agency in question.

Grievance is defined as a written expression of dissatisfaction with some aspect of Coordinated Entry service that has not been resolved despite attempts to do so by participants, agencies, or community members at the point of service. Any such written expression sent to the Coordinated Entry Oversight Committee will be considered a grievance.

Types of Grievances

Participant/Community Member grievances:

If an individual has a complaint or grievance regarding a particular agency, representative of that agency, it is recommended they follow that agency's procedure for collecting and resolving complaints or grievances. In addition, housing program grievances about experience(s) with homeless housing programs will be redirected back to the program to follow grievance policies and procedures of that organization. Agencies should maintain internal documentation of all complaints received. This information should not be sent to the Coordinated Entry Oversight Committee unless requested.

An effort to resolve complaints locally should be made before filing a formal grievance with the Coordinated Entry Oversight Committee. This can be done by contacting the Coordinated Entry Lead for your local Coordinated Entry System. The contact information for the Coordinated Entry Lead in every coalition can be found on the Pennsylvania Continuum of Care web site at: <http://www.pennsylvaniacoc.org/wp-content/uploads/2019/02/ATTACHMENT-B-2.8.19.pdf>

The provider completing the Pre-Screen, assessment, and referral shall address any complaints by the individual at the time they are made aware of the complaint or client dissatisfaction. The individual and the provider will try to work out the problem directly as a first step in the process. If the complaint is not resolved, the individual may initiate the Coordinated Entry Oversight Committee Grievance Procedure.

The individual has the right to be assisted by an advocate of his/her choice (e.g., agency staff person, co-worker, friend, family member, etc.) at each step of the grievance process. The grievance should be filed on the Coordinated Entry Grievance and Appeals form and if not, must include the following: his/her name and contact information, person/agency with whom the grievance is being filed, explanation of complaint/grievance, signature and date. Consent to have an agency or advocate work on an individual's behalf must be submitted in writing to the Coordinated Entry Oversight Committee. The individual has the right to withdraw his/her grievance at any time.

Provider Grievances:

It is the responsibility of all boards, staff, and volunteers of COC-funded and ESG-funded projects to comply with the policies and procedures of the Western Pennsylvania Continuum of Care Coordinated Entry System. Anyone filing a grievance concerning a violation or suspected violation of the policies and procedures must be acting in good faith and have reasonable grounds for believing an agency is violating the Coordinated Entry System policies and procedures.

An effort to resolve complaints locally should be made before filing a grievance with the Coordinated Entry Oversight Committee. This can be done by contacting the Coordinated Entry Lead for your local Coordinated Entry System. If this does not resolve the issue, the provider may begin the grievance procedure.

Procedure for filing a grievance with the Coordinated Entry Oversight Committee

Any person or agency wishing to file a grievance should submit a written statement to the CES Lead Agency describing the alleged violation of the Coordinated Entry System policies and procedures; and any actions taken on behalf of the person or agency to resolve the issue. The statement should be as specific as possible and contain the name and location of the agency, date and time of incident, and any other details that may be helpful to the Coordinated Entry Oversight Committee staff as they investigate the incident. Grievance paperwork filed with the CES Lead Agency must provide name and contact information of the individual(s)/agency filing the complaint, so the Coordinated Entry Oversight Committee can contact them to discuss the grievance. Identifiable information of the reporting person will be considered confidential and is only collected to enable further investigation of the grievance. Grievances that do not contain the contact information of the person filing the grievances, or grievances filed by a third party, will not be considered and no further action will be taken.

Grievances must be submitted by the person experiencing the grievance or their stated representative. Third party submissions, or grievances filed by a person or agency alleging an act between original parties, will not be considered. Grievances must be filed with the CES Lead Agency within 60 calendar days from the date of the incident. Grievances filed after 60 calendar days from the date of the incident will not be reviewed by the Coordinated Entry Oversight Committee.

Reasonable accommodations are available upon request.

Grievance Review Procedure (Agency Specific)

The first person to review the grievance is the CES Lead Agency. The Coordinated Entry Oversight Committee will notify the agency stated in the grievance within 14 calendar days of receiving the grievance. This notification will be sent to the staff member listed on the Agency

Participation Agreement. The notification will contain as much information as possible regarding the complaint without disclosing personally identifiable information of the individual and/or provider filing the grievance to ensure confidentiality. Agencies have 7 calendar days from receiving the grievance notification to provide a response if they would like it to be included in the grievance review by Coordinated Entry Oversight Committee.

The Coordinated Entry Oversight Committee will review all information, conduct interviews with the reporting person and agency stated in the grievance, and gather relevant information about the situation. This can include but is not limited to: reviewing agency client files, Clienttrack records, interviewing agency staff, or interviewing witnesses or other involved parties. The review process will be completed within 14 calendar days from the date the agency stated in the grievance was provided notification of the grievance.

Following the grievance review process, the Coordinated Entry Oversight Committee shall make a determination as to whether the grievance has been substantiated as a violation of the coordinated entry system policies and procedures. The Committee will provide written documentation to the agency in violation of the determination, the corrective action required, and timeline to complete corrective actions. A written statement summarizes the outcome of the grievance review will be provided to the reporting individual and/or agency. In the interest of transparency, the Coordinated Entry Oversight Committee reserves the right to notify the Local Coordinated Entry System participants, CE Leads, coalition Lead(s), or other parties impacted or potentially affected by the violation.

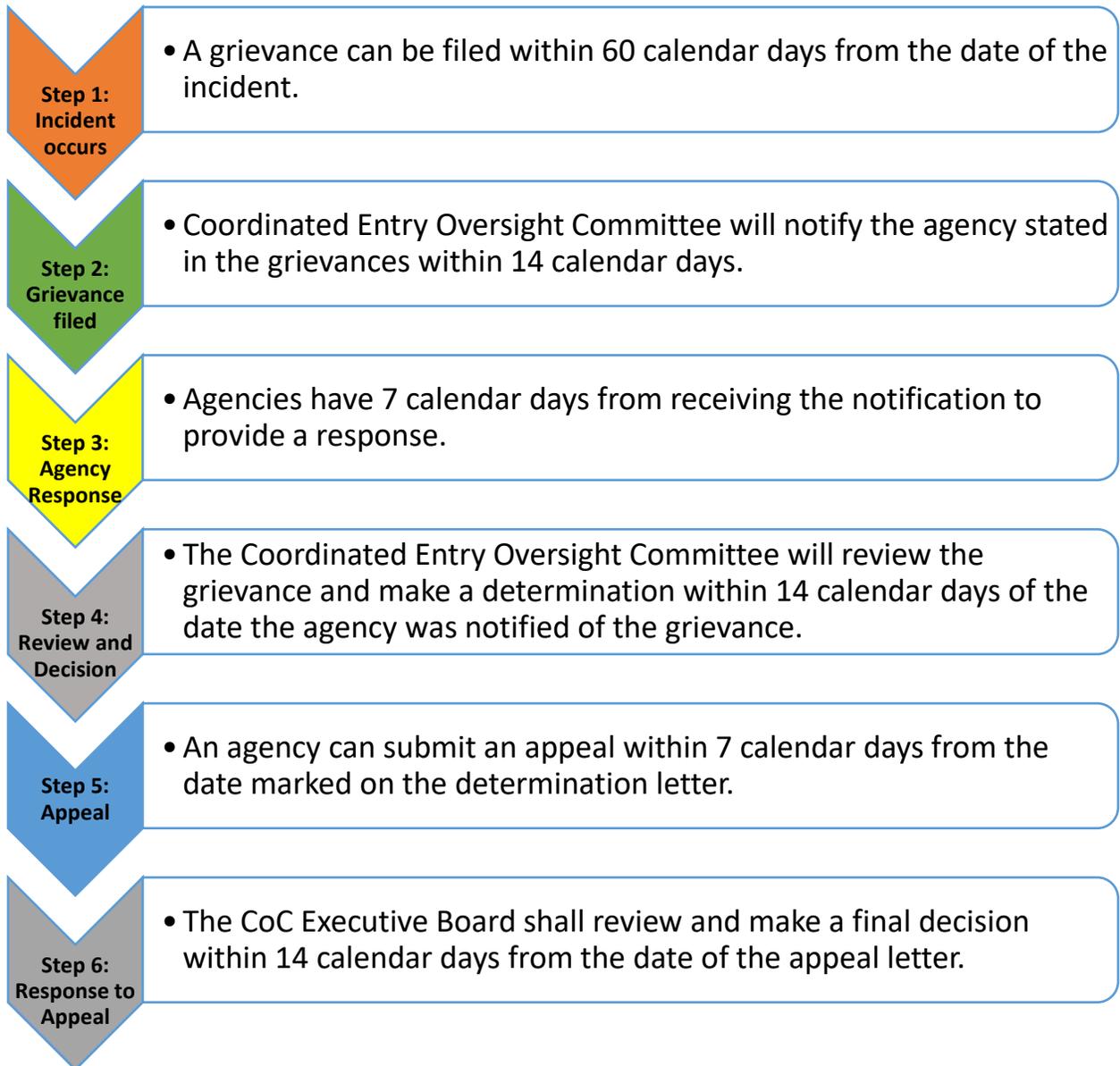
The agency issued corrective action plan may request a meeting, in person or via telephone, to discuss the implementation of corrective action plan. The Coordinated Entry Oversight Committee may provide training and reasonable assistance in the agency's effort to comply. All efforts shall be made to resolve grievances in a timely manner. The time frames provided indicate a maximum number of days for each step in the process.

Grievance Appeal Procedure

An appeal may be filed with the CoC Executive Board if either party believes the Coordinated Entry Oversight Committee failed to comply with the Coordinated Entry policies and procedures for investigating a grievance, acted in an unreasonable manner, would like to have new information considered that was not previously available, or do not agree with the findings based on the evidence presented. An appeal must be submitted in writing within 7 calendar days from the date marked on the determination letter from the Coordinated Entry Oversight Committee. Appeals received after 7 calendar days from the date of the letter will not be reviewed.

The CoC Executive Board will review the appeal and may designate one or more Board members or other assigned committee to review the appeal, supporting documentation, and collect additional information necessary to consider the appeal. After gathering relevant information, the review of all collected information and make a determination as to whether the Coordinated Entry Oversight Committee followed Coordinated Entry grievance procedure and the corrective action was reasonable based on the evidence presented. The Board President or designated Board member(s) or other assigned committee will inform the appealing party in writing of their determination within 14 calendar days from the date of the appeal letter. The decision of the CoC Executive Board is final.

Coordinated Entry Grievance Timeline



Coordinated Entry Grievance and Appeals Form

If there is a problem or concern, we want to know about it. The information on this form will be used to address your concerns and otherwise kept confidential. If you need assistance completing this form, please contact [as.coordinatedentry@co.ramsey.mn.us](mailto:coordinatedentry@co.ramsey.mn.us). You can expect a response within five working days. Completing this form will not negatively affect your status within the Coordinated Entry system.

Name of person completing this form: _____

Who should we follow up with in regards to this form:

Cell # _____ Email: _____

Secondary Phone # _____ Fax # _____

Preferred Method of Contact: Call Email Fax

Can we leave confidential info? Voicemail Email Fax Live call

Alternative contact information: _____ Can we leave confidential info?
Yes No

Program staff, agency/site involved in incident: _____

What is this in regards to:

- Housing Assessor
- The assessment
- Coordinated entry system score, homeless status, or recommended housing intervention
- Provider (housing, shelter, or other agency involved in Coordinated Entry)
- Denial from housing program
- Other

Narrative Description of Incident -

- Explain the complaint or issue (names of those involved and dates);
- How has your concern been addressed? (by yourself or others);
- What would you like to see happen?

Coordinated Assessment Center Application

PURPOSE

To have a successful coordinated assessment system, One by One has identified that each County have at least one General Assessment Center and one Domestic Violence Assessment Center, with the option to add additional Auxiliary Assessment Centers to ensure we can achieve coverage for the entire geographic region. These centers will assess for need based on agreed-upon forms, enter data into ClientTrack, and make appropriate referrals.

To identify the most appropriate coordinated assessment sites, the Coordinated Entry Committee has tasked each County's LHOT (Local Housing Options Team), or other similar local body, with identifying these initial centers. As the system continues to grow and expand, we have designed the following application for LHOT's to identify and refer new/replacement agencies interested in wishing to become assessment center sites. LHOT's should provide this application to any such agent.

Completed applications, along with an LHOT endorsement/recommendation letter should then be submitted to the Coordinated Entry Committee who will be review the application.

Applications can be mailed to: Ja'Von Clark, Western PA CoC Coordinated Entry Liaison
Lawrence County Community Action Partnership
Lawrence County Social Services, Inc.
Po Box 189
241 West Grant Street
New Castle, PA 16103

Applications can be electronically submitted to: Ja'Von Clark

Application Questions

If the space below is insufficient to answer the questions, agencies may attach additional sheets. Each answer should be numbered.

Agency Name:

Agency Address, City, State, and Zip Code:

Primary Staff Contact Name:

Primary Staff Contact Title:

Primary Staff Contact Phone Number:

Primary Staff Contact E-Mail Address:

Site Type: General Assessment Domestic Violence Assessment Auxiliary

Section 1: Population and Resources

Use no more than 300 words for the entire section.

1. Please check which populations your agency currently serves:

- People with pets
- People with service animals
- People who smoke
- Sex offenders
- Unaccompanied youth
- Unaccompanied women
- Unaccompanied men
- Families
- Childless couples
- People who are elderly
- Survivors of domestic violence
- People who identify as LGBTQ
- People with serious mental illness
- Adults who are active substance users
- Unaccompanied youth who are active substance users
- People whose primary language is not English

- People who are chronically homeless
- Veterans at-risk of or experiencing homelessness
- Other _____
- Additional comments about other populations your agency serves:

Regardless of who the agency serves, agencies will be expected to assess anyone that comes to them seeking homeless assistance services (with the exception of domestic violence agencies).

2. Are there any populations that due to federal/state/local regulations, zoning laws, or other restrictions out of your control that your agency CANNOT serve?

3. Please describe what financial/other resources, if any, your agency plans to devote to being an assessment center if you are selected.

Section 2: Location

Use no more than 600 words for the entire section.

4. Preference will be given to agencies that are located in a place that is convenient for people experiencing homelessness. Is your agency located at a site where people experiencing homelessness already go to seek homeless assistance? If so, please estimate the average number of people who go there daily.

If your organization is near at a site where people experiencing homelessness already go, please estimate the average number of people who go to this site daily.

5. Is your agency in a central location? Is it accessible by public transportation? Please provide the names of any bus routes with stops near your agency.

6. Describe how your agency will provide adequate physical space for assessment staff and clients, as well as private assessment space for people requesting to be assessed in private.
7. Why does your agency want to be a coordinated assessment site for the community?
8. Has your agency had any “NIMBY” (Not In My Backyard) issues around people experiencing homelessness walking up to your agency in the past? If, so please describe them and how your agency has dealt with them.

Section 3: Staffing

Use no more than 600 words for the entire section.

9. Name the staff member that will supervise assessment staff, their current position, and their qualifications and expertise with assessment.
10. Detail any current staff and current staff time that could be devoted to assessing clients.
11. Please discuss any experience your agency’s current staff have had with conducting assessments and making referrals.
12. Would your agency’s staff be willing and able to travel to other locations to do assessments?
13. Why does your agency and staff want to do coordinated assessment?
14. Will your staff be able to travel to other locations for in-person meetings or trainings related to Coordinated Entry?

General Expectations of Coordinated Assessment Centers

Once centers have been selected, they will sign a Memorandum of Understanding with more explicit directions in terms of operation. However, of agencies selected, here are some expectations:

- (For staffing): Allow their assessment staff to be evaluated on a regular basis by the CoC and any outside evaluators they might bring in
- (For staffing): Agree to receive training on the assessment, referral, and data entry processes associated with coordinated assessment
- Treat all people experiencing homelessness with respect and kindness
- (For locations): Agree to provide a walk-through of their facilities to evaluators of the assessment process or CoC board and committee members
- Exclusively accept referrals to their own organization that come to them as a result of the coordinated assessment process
- Participate in and enter coordinated assessment information into ClientTrack unless they are legally prohibited from doing so
- Follow the policies and procedures of the coordinated assessment process
- Meet with the CoC Coordinated Entry Committee or Staff on a regular basis to discuss concerns and issues around the coordinated assessment process
- Make referrals based on the agreed-upon system-wide prioritization criteria

Please sign and date below if you agree to these criteria.

Name: _____ Date: _____

Signature: _____

If you are not able to meet one or more of these criteria, please explain which ones and why you are not able to meet them below.