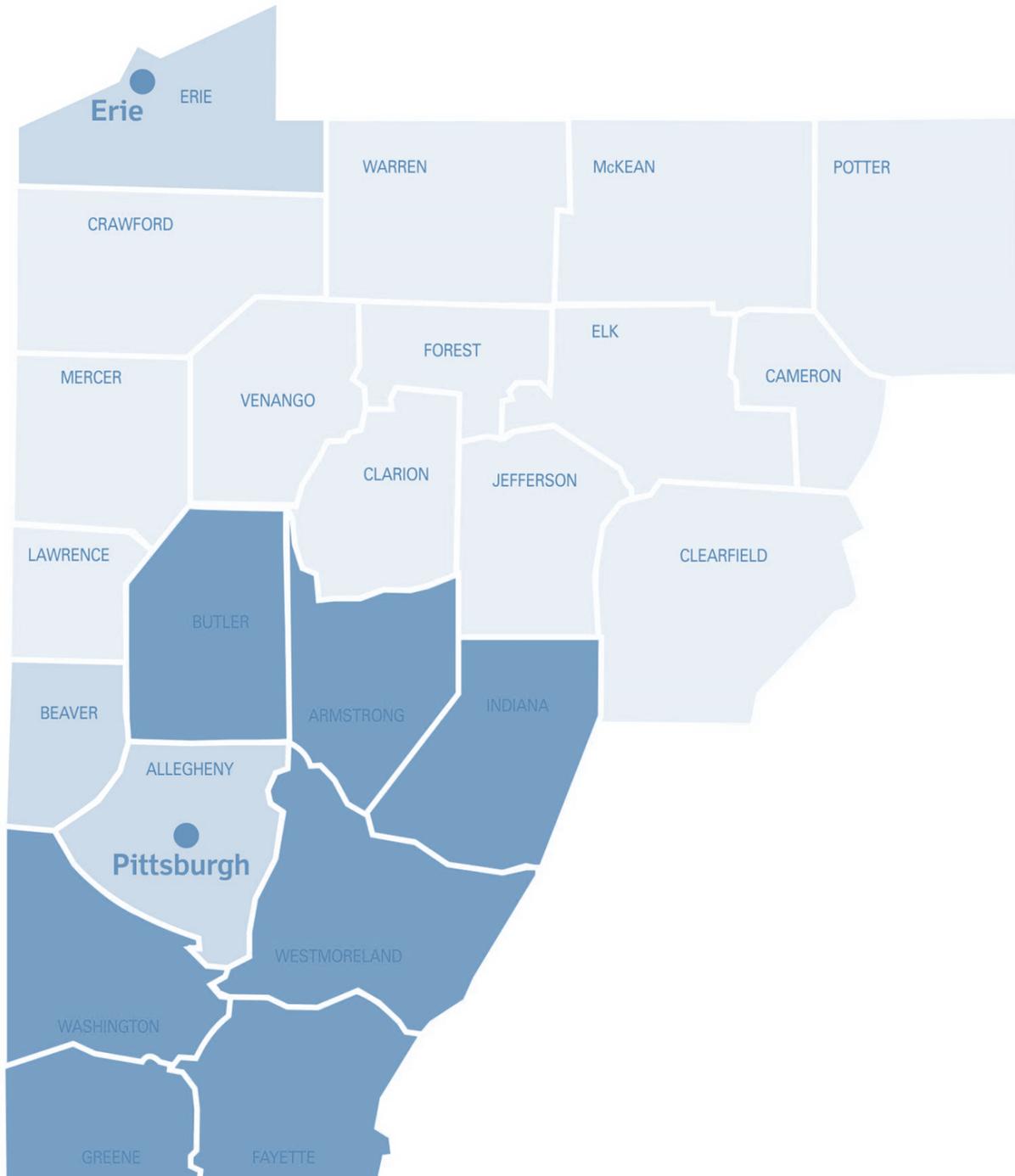


Western Pennsylvania Continuum of Care's Coordinated Entry Policies and Procedures Manual



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Establishing Coordinated Entry is a complex and comprehensive endeavor. The Western CoC is charged with standardizing Coordinated Entry systems across regions according to the priorities and particular needs of communities. These standards are intended to clarify and provide guidance around Coordinated Entry. As systems and accompanying documents are developed, Western CoC CE staff are committed to offering training and technical assistance as needed and determined. This Policy and Procedure Manual is a working document that will continue to be developed during the first year of Coordinated Entry operation. Additions and adjustments to the document will results based stakeholder input, data collected, and on lessons learned from experience.

Overview

The CoC Program interim rule requires that CoCs establish and operate a “**centralized or coordinated assessment system**,” hereafter referred to as *a coordinated entry process*.¹ *The rule defines coordinated entry as a centralized or coordinated process designed to coordinate program participant intake assessment and provision of referrals. [Such a] system covers the [CoC’s] 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)*

The main purpose of the Western CoC Coordinated Entry System (CES) is to ensure that households with the most severe service needs, longest homeless history and most vulnerabilities are prioritized for housing assistance and receive those services within a very limited timeframe. 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. 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.

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. 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

🏠 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 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 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 Committee:** This committee is designated by the CoC and consists of a small group of stakeholders including, CoC, ESG and other housing providers, consumers, and/or emergency mainstream service providers. This committee will meet at least twice a year, with additional meetings as necessary and is charged with the development and oversight of the Coordinated Entry System and the Coordinated Entry Lead Agency.

🏠 **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 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 Western PA CoC Community and these centers are tasked with assessing the General Public. The CoC recognizes the importance of confidentiality and safety for all persons fleeing 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 from a domestic violence situation and these agency are designated as the **Domestic Violence Assessment Center (DVAC)**. The 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 by the Western CoC - which includes being selected by the Lead Agency, completing onboarding training requirements of the CoC and having 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.

🏠 **Emergency Mainstream Service Resources:** Each assessment center will connect with mainstream service providers to ensure that services are not delayed by the coordinated entry process. 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.)**

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;

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;

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

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 Documentation:** Collection of required homeless documentation is a collaborative effort between the assessment center and service provider. To the degree possible, the assessment center should start the initial process of collecting documents and obtaining required consent forms and share information with the consumer's accepted service provider.

🏠 **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.

🏠 **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 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 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

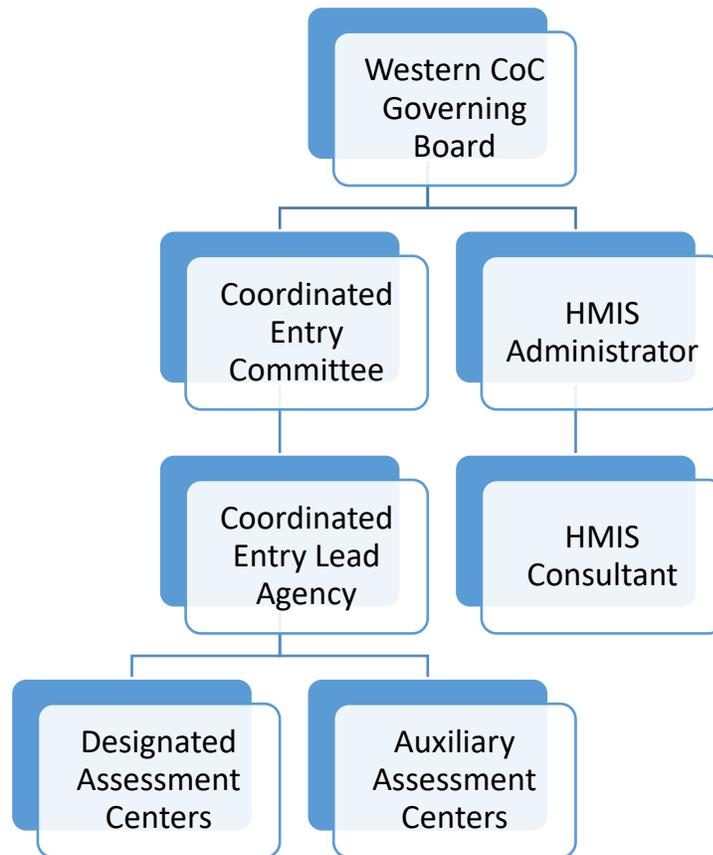
As required under 24 CFR 576.400(d) and 578.7(a)(8), each CoC and each ESG recipient operating within the CoC's geographic area must work together to ensure the CoC's coordinated entry process allows for coordinated screening, assessment and referrals for COC and ESG projects. The Western PA CoC Board 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
- Approves designated Assessment Centers selected by the Lead Agency

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 (including 24/7 coverage of each County)
- 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

- 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)

🏠 **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:

- Consumers requesting housing services will be assessed 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.
- 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.
- All assessments completed via paper form (pdf) must be entered into the online system by the close of the next business day.
- 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.
- 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.
- 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.
- 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.

- Each county must have a plan for referrals to emergency shelters and assessment centers on a 24 hour / 7 day basis. (Assessments should be completed during normal operating hours.) 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 or 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 (www.pennsylvaniacoc.org)

Staff assigned to Coordinated Entry must participate in the following onboarding trainings:

- Western Coordinated Entry in Client Track Training Class
- Coordinated Entry Policy and Procedure Training
- Housing Prioritization List Management Training
- Privacy and Security Training
- Safety Training
- Cultural and Linguistic Competency Training
- How to Conduct Trauma-Informed Assessment of Participants

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.

Consumers requesting housing services should be assessed 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.

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 consumer 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.**

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 will 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) -- positive answers for question 1 OR 2 AND 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 the Assessment Centers

The referral and prescreening questionnaire will also 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 or at-risk of becoming homeless to determine whether the consumer(s) should continue with the CE process or be referred to another system.

The screenshot shows a web-based form titled "Western Continuum Pre Screening Assessment". Below the title is a subtitle: "Pre-Screening Assessment for Western Continuum Coordinated Entry process, which can be completed or skipped by the user performing the initial contact." The form contains several input fields: a search box for "Locate Previous Pre-Screenings:" with a magnifying glass icon; two text boxes for "May I please have your First Name:" and "Last Name:"; a text box for "And a telephone number in case we get disconnected:"; and 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:". Each dropdown menu currently displays "-- SELECT --".

- 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.
 - 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 assessor should immediately refrain from completing the assessment and 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.
 - None of the “DV” consumer 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 DVAC identifier number when making reference to the DV consumer which will be used for identify 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 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.

- If 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.
 - 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 to update screening classifications.

Component 4: Assessment of Consumer Needs

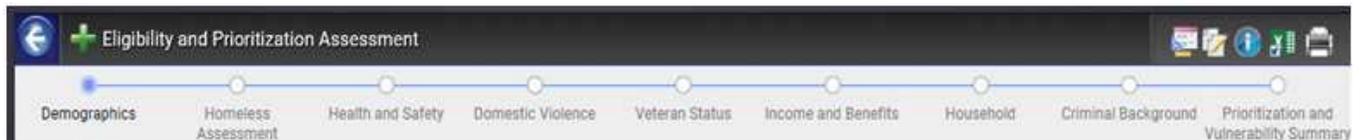
The Coordinated Entry System is designed to uniformly screen and prioritize households requiring assistance through the homeless assistance process. The tool asks a series of questions in order to collect information regarding the household's history of homelessness and the household's vulnerabilities.

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 from the victim before permitted to share information with PA HMIS/CE 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 / 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.



A red horizontal bar with the text "VETERAN STATUS TOTAL" on the left and "SCORE: 75" on the right.

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.



The screenshot shows a summary screen titled "PRIORITIZATION AND VULNERABILITY SUMMARY". It features a table with categories and their scores:

Category	Score
CHRONICALLY HOMELESS	IDENTIFIED: <input type="checkbox"/>
VETERAN	IDENTIFIED: <input checked="" type="checkbox"/>
FAMILY	IDENTIFIED: <input type="checkbox"/>
YOUTH: Under the age of 25	IDENTIFIED: <input checked="" type="checkbox"/>
TOTAL # of current continuous days homeless	Days: 35

Below this is a "Scoring" section with a blue background:

Category	Score
HOMELESS ASSESSMENT	5
PHYSICAL HEALTH	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 (Consumers can select up to five counties.)

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 Coordinated Entry Key Functions

- 🏠 Save and Continue Button:** Choose this option when the consumer(s) has met the requirements to enter the Western CE system and are either Literally Homeless or 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 and are not Literally Homeless or At Risk of Becoming Homeless. This option will save the pre-screening to preserve the contact and will end the process. 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.
- 🏠 Referral Service Needs:** The consumer determines what types of services/ housing interventions are best suited to help their current housing situation and interventions include the following services:

 - Diversion

- Emergency Shelter Housing
- Permanent Supportive Housing
- Rapid Rehousing Services
- Rental Assistance
- Transitional Housing

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.

 **Waitlist County:** This helps determine the consumer’s County of primary residence and most likely their 1st choice for housing services. The list will also indicate the counties in which the consumer has indicated s/he will accept a housing opportunity. This list should be edited to reflect any change in the consumer’s 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).

 **New Status:** Indicates that the consumer was recently added to the Housing Prioritization List. Newly added consumer records must be reviewed within the first seven days of being placed on the Prioritization List by the designated Prioritization List Manager to ensure accuracy of record (i.e. correct homeless classification). Once record is reviewed, the Prioritization List Manager will change status from “New” to “Reviewed”.

 **Reviewed Status:** Indicates that the consumer’s prioritization record has been reviewed for accuracy and potential fit for programs by all parties, i.e. Assessment staff, Prioritization List Manager and Service Providers. Records must be reviewed within the first seven days of being placed on the Housing Prioritization List and reviewed weekly until placement in permanent housing occurs.

- These consumers should 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 and save button contained at the bottom of the consumer prioritization record every time the review occurs.

 **In Processing Status:** Service Provider has determined the client meets their eligibility criteria and has assigned a case worker to begin the enrollment process and “service accept” the consumer into the program.

- The case worker reviewing the consumer record must document their contact information in the Coordinated Intake Notes Section (Name, email, phone number).
- In cases where a client becomes ineligible for services, the service provider must change the status from “In Process” to “Reviewed” or “Turned Away (reference definition below).
- Consumers may only remain in process for up to 7 consecutive days; once the 7 days expire, their status must change back to “Reviewed Status” which will make the consumer available to be serviced by other providers.

- If the provider needs an extension to enroll consumer into services after the seven day deadline the provider must then document extension by selecting the In-Processing Status and save button contained in the consumer prioritization record every time the consumer is kept as “In-Processing”. The Provider must add a consumer intake note explaining reasons for delay in enrollment.

 **Placed Status:** Signifies that the consumer has been placed into Permanent Supportive Housing or Rapid Re-housing or other permanent housing options by a service provider. Selecting this option will place the consumer on the Historical Type List in the Housing Prioritization List. The consumer’s housing placement must be documented in Coordinated Intake Notes.

 **Closed Status:** Implies 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 consumer prioritization record and the note must then document the reason(s) for closure.

- To access “Closed” records the user must select “Historical” view under the Prioritization List category “Type”.
- It is permitted for any provider or assessment staff to update the consumer record to “Closed Status” if they’ve heard first hand that the consumer was no longer in need of housing services.
- Please note: If consumer is currently placed in Emergency Shelter or Transitional Housing the record must remain on the active housing prioritization list to be prioritized for permanent housing.

 **Missing Status:** The consumer has failed to maintain contact with CES participating agencies over the past 90 days and for this reason the consumer record is placed on the missing persons list. In order to place a person as “missing” the must be weekly engagement attempts noted in a Coordinated Intake Note. When the “Missing Status” feature is chosen the user must continue attempts to re-engage the missing person and document all attempts by using Coordinated Intake Notes.

- To access “Missing” records the user must select “Missing” view under the Prioritization List category “Type”.

 **Turned Away Status:** Consumer’s status was “In Process” but due to changes in eligibility, funding or program standards is permitted to be changed from “In Process” to “Turned Away”. This consumer remains on the housing prioritization list and made available to be serviced by other providers. When the “Turned Away Status” is chosen the system user must then document reasons in Coordinated Intake Notes.

- Refusals are acceptable only in certain situations, including:
 - 1) The person does not meet the program’s eligibility criteria;

- 2) The person would be a danger to others or themselves if allowed to stay at this particular program; and
- 3) The person has previously caused serious conflicts within the program (e.g. was violent with another consumer or program staff).
- 4) Any situations outside of what is written must be communicated with the General Assessment Center – who will then inform the Coordinated Entry Lead Agency.)

Pertaining to option 2, 3 and 4 - 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.

🏠 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 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.

🏠 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 prioritization status. 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
 - 2) It is preferred for the service provider to wait no fewer than 3 business days before attempting to service the next person on the Housing Prioritization List.
- 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.

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 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 including the equal access rule..
- Use the scores determined by the Coordinated Entry Assessment Tool to inform referrals for housing and services.
- Must offer referrals to the local DVAC if the individual/household in crisis discloses that they are fleeing domestic violence.
- Allow homeless households the choice to accept or decline referrals for housing assistance and maintain their position on the Housing Prioritization List. All offers must be documented in the consumer’s coordinated intake note section.
- 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 and Street Outreach Staff 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) are required to only accept referrals and to only fill vacancies 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 paper or electronic 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 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 are 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.

1. Housing Providers receiving referrals must report to the Housing Prioritization List within seven days and 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.
2. Must allow at least 3 business days to receive an acceptance or declining response before the provider can move to the next person in line on the housing prioritization list. All attempts to collect a response must be noted in a Coordinated Intake note. (Response can be made by organizational staff OR consumer)
3. Those consumers needing emergency shelter will be directed to the appropriate emergency shelter immediately by the agency/access point where the consumer first presented. Once shelter is secured the emergency shelter will connect the consumer to the local GAC or DVAC for their assessment to be conducted.

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.

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. 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 Permanent 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 3 business day before permitted to move to the next person in line on the Housing Prioritization List. 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.

Please note, in order to further promote client choice and streamline operations for Housing Programs, the Coordinated Entry committee will explore revising this procedure during the first 3-6 months of full implementation of the Coordinated Entry committee. Programs will be solicited to gather ideas and suggestions before a formal change is made.

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.
- Daily upkeep of the Client Tracking Database
- Housing Placements
- Additional or eliminated barriers
- Changes in household make up
- Homeless Documentation Obtained/Uploaded

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.
- Contains a plan for the CoC to engage in ongoing planning with all stakeholders utilizing the Coordinated Entry process.

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.

The screenshot shows a web-based intake form titled "Western Continuum Coordinated Entry Client Intake". The form includes the following fields and options:

- First Name:** Text input field.
- Last Name:** Text input field with a magnifying glass icon.
- Date of Birth:** Date selection field.
- Social Security Number:** Text input field with a magnifying glass icon.
- Home Phone (xxx-xxx-xxxx):** Text input field with a magnifying glass icon.
- Local Client Type:** A dropdown menu currently set to "New Client".
- Client Sharing:** A dropdown menu currently set to "SELECT".

Below the form, there is a note: "Best Practice - request client to provide verbal permission to share their HMIS record with all listed Western Continuum Coordinated Entry Intake and Assessment operations".

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 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)

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.

Coordinated Entry Program Contacts:

1. Technical Support/CE Access email request to David Weathington @ dweathingt@pa.gov or RA-pahmis@pa.gov
2. Program questions direct to Ja'Von Clark @ jclark@lccap.org or Kathy Presnar @ kpresnar@lccap.org

Policy

WESTERN PA CONTINUUM OF CARE (PA – 601) Coordinated Entry Operating Standards Date Adopted _____

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 Coordinated Entry System will include a comprehensive assessment of individuals and families for housing and services.
- 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: _____

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.

WESTERN PA CONTINUUM OF CARE (PA-601)

Prevention Services

Date Adopted: _____

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. 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.

Policy

WESTERN PA CONTINUUM OF CARE (PA – 601)
Non-Discrimination and Affirmative Fair Housing Policy
Date Adopted _____

Nondiscrimination

24 CFR §578.93(a) requires CoC Programs 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 _____

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.
- 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.
- Well documented and laid out consent forms will be required for each phase of the assessment process.

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 who enter into an MOU for Coordinated Entry and agree to take full 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 is required to make every effort to accommodate the individual or assist in locating alternative accommodation that is appropriate and responsive to the individual's needs.

Policy

WESTERN PA CONTINUUM OF CARE (PA -601)
Evaluating and Updating Coordinates 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 Social 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.