Georgia Balance of State Continuum of Care Coordinated Entry Written Standards

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Introduction & Overview

The Coordinated Entry System (CES) is a Continuum of Care (CoC)-wide process for facilitating access to housing and service resources for individuals and families at risk of or experiencing homelessness, identifying and assessing needs in a transparent and consistent way and referring clients to the most appropriate service strategy or housing intervention. In doing so, the CES ensures that the Balance of State (BoS) CoC's limited resources are allocated to achieve the most effective results. The system ensures that people at risk of or experiencing homelessness obtain equitable and timely access to housing resources, provided in a personcentered approach that preserves choice and dignity.

The goal of these standards is to synthesize key elements of HUD regulations on Coordinated Entry along with Written Standards of the Georgia BoS CoC and ensure that the CES is administered fairly and consistently across the CoC.

These written standards govern the implementation, governance and evaluation of the Georgia BoS CoC CES. This is a living document and will be reviewed and updated regularly to reflect programmatic and regulatory changes.

All projects located within the GA BoS CoC that receive CoC and Emergency Solutions Grants (ESG) funding are required to participate in the CES and are therefore subject to complying with the written standards and policies and procedures as outlined and developed by the GA BoS CoC.

Guiding Principles

Most communities lack the resources needed to meet all the needs of people at risk of or experiencing homelessness. This combined with the lack of a coordinated and efficient approach to providing necessary services often results in severe hardships for people at risk of and experiencing homelessness, further exacerbated by lengthy waitlists and households being unnecessarily screened out for needed assistance. CES helps communities prioritize assistance based on vulnerability and severity of service needs to ensure that people who need assistance the most, receive it in a timely manner. CES also informs community planning by identifying gaps in services. The GA BoS CoC CES is governed by the following guiding principles, whereas the CES must:

- 1. Cover the entire geographic area claimed by the CoC
- 2. Be easily accessed by individuals and families seeking housing or services
- 3. Be well-advertised
- 4. Include a comprehensive and standardized assessment
- 5. Provide an initial, comprehensive assessment of individuals and families for housing and services
- 6. Include a specific policy to guide the operation of the CES to address the needs of individuals and families who are fleeing, or attempting to flee, domestic violence, dating violence, sexual assault, or stalking, but who are seeking shelter or services from non-victim specific providers

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Governance

Regional Planning groups will develop written CES plans describing the design and administrative policies for their community in accordance with these standards and CoC governance. The GA BoS CoC Board of Directors will appoint a standing Assessment, Placement and Services Committee that will review and approve Regional Planning Group CES plans and significant plan changes. The Assessment, Placement and Services Committee membership will consist of representatives from across the Balance of State and other state-level experts.

Role of Assessment, Placement and Services Committee

The Assessment, Placement and Services Committee is primarily responsible for identifying and maximizing use and coordination of mainstream resources, services and housing resources available for people at risk of or experiencing homelessness. The Committee will develop written standards for assessment and program admissions within the Continuum like those that will govern CES across the Balance of State. The Committee will assist in developing policy to be approved by the Board and will work to ensure that the Continuum's system of care meets the needs of homeless individuals and families by seeking to implement comprehensive prevention, outreach, engagement, assessment, shelter (or other short-term housing), transitional (in limited circumstances), and permanent housing strategies throughout its broad geographical area.

Role of Regional Planning Groups

Communities will organize into Regional Planning Groups made up of agencies receiving CoC and ESG funds as well as others stakeholders from the region. Each Regional Planning Group, with assistance from CoC staff, will be responsible for designing and implementing a local CES within the parameters of the written standards and policies and procedures described herein. The Written Standards provide Regional Planning Groups with a supportive framework to use when implementing their local CES. Regional Planning Groups will also utilize standardized assessment tools that will be uniform across the Balance of State CoC. These tools include the Prevention and Diversion Screening Tool and the VI-SPDAT Screening Tool which are described further in the following section. Regional Planning Groups will design and submit a CES plan, using the Regional Planning Guide, for approval by CoC staff.

Definitions

Terms and acronyms used throughout this document are defined below.

• Chronically Homeless:

- 1. A "homeless individual with a disability," as defined in section 401(9) of the McKinney-Vento Homeless Assistance Act (42 U.S.C. 11360(9)), who:
 - a. Lives in a place not meant for human habitation, a safe haven, or in an emergency shelter; and
 - b. Has been homeless and living in a place not meant for human habitation, a safe haven, or in an emergency shelter continuously for at least 12 months or on at least four separate occasions in the last 3 years, as long as the combined occasions equal at least 12 months and each break in homelessness separating

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the occasions included at least 7 consecutive nights of not living as described above. Stays in institutional care facilities for fewer than 90 days will not constitute as a break in homelessness, 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 an institutional care facility;

- 2. An individual who has been residing in an institutional care facility, including a jail, substance abuse or mental health treatment facility, hospital, or other similar facility, for fewer than 90 days and met all of the criteria in paragraph (a) of this definition, before entering that facility; or
- 3. A family with an adult head of household (or if there is no adult in the family, a minor head of household) who meets all of the criteria in paragraph (a) or (b) of this definition described above, including a family whose composition has fluctuated while the head of household has been homeless.
- <u>Continuum of Care (CoC)</u>: A CoC is a geographically based group of representatives that
 carries out the planning responsibilities required by the U.S. Department of Housing and
 Urban Development's (HUD) CoC Program. These responsibilities include planning,
 coordinating and implementing a system to meet the needs of the population and
 subpopulations experiencing homelessness within the CoC's geographic area. The GA
 BoS CoC consists of 152 suburban and rural counties in Georgia.
- <u>Coordinated Entry System (CES)</u>: Among other elements, CES is a coordinated process
 whereby any single individual or family at risk of or experiencing homelessness receives
 assistance as effectively and quickly as possible. CES employs the use of standardized,
 common assessments and screening tools to prevent and divert entry into the homeless
 system, to address emergent needs, and to evaluate severity of need and level of
 vulnerability.
- <u>Diversion</u>: Diversion is a strategy that prevents homelessness for people seeking shelter by helping them identify immediate alternate housing arrangements and, if necessary, connecting them with services and financial assistance to help them return to permanent housing. Diversion strategies can reduce the number of individuals/families becoming homeless, the demand for shelter beds and the size of program prioritization lists.
- <u>F-VI-SPDAT</u>: Family Vulnerability Index and Service Prioritization Decision Assistance Tool (F-SPDAT) developed and owned by OrgCode is utilized for families (and not single individuals) to recommend the level of housing supports necessary to resolve the presenting crisis of homelessness. Within those recommended housing interventions, the F-SPDAT allows for prioritization based on presence of vulnerability across twenty subcomponents within the broader four components of the VI-SPDAT: (a) history of housing and homelessness (b) risks (c) socialization and daily functioning (d) wellness including chronic health conditions, substance usage, mental illness and trauma, and (e) family unit.

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- <u>HMIS</u>: A Homeless Management Information System is a web-based software
 application designed to record and store person-level information on the characteristics
 and service needs of homeless persons throughout a CoC jurisdiction. Usage of the
 HMIS is mandated by HUD and locally by the GA DCA.
- <u>Homeless</u>: The Homeless definition is comprised of four categories:
 - 1. Literally homeless individuals/families
 - a. Literal homeless is further defines as homeless individuals/ families who lack a fixed, regular and adequate nighttime residence, meaning:
 - i. Sleeping in a place not designed for or ordinarily used as a regular sleeping accommodation, such as a place not meant for human habitation.
 - ii. Living in emergency shelter or transitional housing designated to provide temporary living arrangements (including hotel/motel stays paid for by charitable or government programs).
 - iii. Exiting an institution where the individual resided for less than 90 days and where the individual entered the institution immediately from emergency shelter (including hotel/motel stays paid for by charitable or government programs) or an unsheltered location.
 - Individuals/families who will imminently (within 14 days) lose their primary
 nighttime residence with no subsequent residence and no resources or support
 networks.
 - 3. Unaccompanied youth and families with children/youth who meet the homeless definition under another federal statute and three additional criteria.
 - 4. Individuals/families fleeing or attempting to flee domestic violence with no subsequent residence and no resource or support networks.
- <u>Prevention and Diversion Screening Tool</u>: A tool used to reduce entries into the homeless services system by determining a household's needs upon initial presentation to shelter or other emergency response organization. This screening tool gives programs a chance to divert households by assisting them to identify other permanent housing options and, if needed, providing access to mediation and financial assistance to remain in housing.
- Regional Planning Guide: A tool created by the GA BoS CoC used by Regional Planning
 Groups to guide the CES planning and implementation process. Regional Planning
 Groups will create a plan for their community's CES implementation and submit it to the
 Assessment, Placement and Services Committee for approval using the format outlined
 in the tool.
- VI-SPDAT: The Vulnerability Index and Service Prioritization Decision Assistance Tool (VI-SPDAT) developed and owned by OrgCode and Community Solutions is utilized for single individuals (and not families) to recommend the level of housing supports necessary to

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resolve the presenting crisis of homelessness. Within those recommended housing interventions, the VI-SPDAT allows for prioritization based on presence of vulnerability across four components: (a) history of housing and homelessness (b) risks (c) socialization and daily functioning (d) and wellness - including chronic health conditions, substance usage, mental illness and trauma.

Prioritization Standards

The GA BoS CoC employs a uniform process for prioritizing and matching housing interventions to households. Prioritization Standards for Coordinated Entry are as follows.

	anent Supportive Housing (PSH) beds dedicated and prioritized for individuals/families with a disability are chronically homeless
1st	Longest history of homelessness and with the most severe service needs
2 nd	Longest history of homelessness
3 rd	Most severe service needs
4 th	All other chronically homeless

PSH b	eds non-dedicated nor prioritized for individuals/families with a disability who are chronically homeless
1st	Most severe service needs
2 nd	Long period of continuous or episodic homelessness
3 rd	Coming from places not meant for human habitation, street, safe havens or emergency shelters
4 th	Coming from transitional housing

Housing Intervention	Prioritization	Subpopulation	Secondary Population
PSH	1	Chronic Youth	1. Veterans
			2. Prioritization Score
			3. Length of Homelessness
			4. Date of Assessment
	2	Chronic Families	1. Veterans
			2. Prioritization Score
			3. Length of Homelessness

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			4. Date of Assessment
	3	Chronic Singles	1. Veterans
			2. Prioritization Score
			3. Length of Homelessness
			4. Date of Assessment
PSH	4	Non-Chronic Youth	1. Veterans
			2. Prioritization Score
			3. Length of Homelessness
			4. Date of Assessment
	5	Non-Chronic Families	1. Veterans
			2. Prioritization Score
			3. Length of Homelessness
			4. Date of Assessment
	6	Non-Chronic Singles	1. Veterans
			2. Prioritization Score
			3. Length of Homelessness
			4. Date of Assessment

Housing Intervention	Prioritization	Subpopulation	Secondary Population
RRH	1	Non-Chronic Youth	5. Veterans
			6. Prioritization Score
			7. Length of Homelessness
			8. Date of Assessment
	2	Non-Chronic Families	5. Veterans
			6. Prioritization Score
			7. Length of Homelessness
			8. Date of Assessment
	3	Non-Chronic Singles	5. Veterans
			6. Prioritization Score
			7. Length of Homelessness
			8. Date of Assessment

System Requirements and Workflow Expectations

Regional Planning Groups determine the CES model that will serve individuals and families at risk of or experiencing homelessness within their community. All CoC and ESG-funded programs must actively participate in their Regional Planning Group's CES. Programs will remove and/or minimize program entry requirements to ensure that the most vulnerable individuals and families experiencing homelessness are served as quickly as possible.

Projects participating in the coordinated entry process must not screen potential project participants out for assistance based on perceived barriers related to housing or services, including, but not limited to, too little or no income, active or a history of substance abuse, domestic violence history, resistance to receiving services, the type or extent of a disability-related services or supports that are needed, history of evictions or poor credit, lease violations

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or history of not being a leaseholder, or criminal record. Regional Planning Groups will develop a strategy and timeline for removing project barriers and document that plan in the Regional Planning Group's CES Plan.

CoC and ESG-funded housing programs will not accept client referrals outside of their community's CES and will report all funded units and program availability to the CES through HMIS. Communities will use the Prevention and Diversion screening tool prior to entry into an emergency shelter and/or emergency housing program. In cases where prevention and diversion are not an option and households enter an emergency shelter or emergency housing program, each community must administer and complete the VI-SPDAT no greater than 7 days after entry. If a household is exiting emergency shelter to homelessness, the VI-SPDAT must be completed prior to the household exiting. Results from the VI-SPDAT will be used to determine the most appropriate housing intervention based on the household's specific needs and acuity.

Once CES implementation has begun in each region, communities should begin using the VI-SPDAT to assess households who are already in emergency housing. Projects should also begin to address existing waitlists by assessing households on those waitlists so that they can be added to the prioritization list and be considered for all available and appropriate resources.

Access CES access points must be easily accessed, in convenient physical locations, and offer non-physical access points as needed Access may occur in person, through any designated access point, via phone and/or community outreach teams Access point locations must be well-advertised in highly visible locations within the community and posted on the GA BoS CoC website **Prevention &** A diversion and prevention screening tool will be used to determine emergency housing needs and if alternative housing options other than emergency **Diversion** shelter/emergency housing entry are available Households who can solve their homelessness without housing assistance are diverted out of the system and referred to mainstream benefits and resources as needed. Households in need of prevention services are referred to an agency that provides prevention services If a household, screened for diversion or prevention at a location that is not a CES access point, is identified as needing housing assistance then they will be directed to a Coordinated Entry access point to complete a housing assessment **Emergency** CES will allow for quick access to emergency services with as few barriers to entry as possible Services Access to such services should be available outside of normal business hours Households should not be required to complete an assessment to gain access to emergency services Emergency services are not prioritized and may be accessed as needed

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Housing Assessors	 Housing assessors will be available to conduct housing assessments at the CES access points, the call center and/or via outreach teams The assessment must be completed using HMIS
Housing Referral	 Information gathered from the assessment must be used to determine the most appropriate housing and/or service intervention HMIS will be used to match households to a housing intervention and a housing program based on program eligibility, prioritization, geography and client choice
Housing Match	 Once the recommended intervention and eligible programs have been identified in HMIS and the household has decided which program they are interested in, an electronic referral to the provider can be completed and the following two options are available to the housing assessor: 1) A reservation can be made in HMIS or 2) The household can be added to the prioritization list if there are no vacant units or program availability
Housing Connection	 After the assessor makes an electronic referral to the housing provider, the assessor will complete a warm hand off to the agency The agency will accept the referral on HMIS and update the status of the referral as necessary

Housing Provider Responsibilities

In additional to CoC and ESG-funded programs that are required to participate in the CES, other organizations that provide housing to those experiencing homelessness, either due to program requirements and/or voluntarily, may dedicate all and/or a portion of their housing portfolio to CES. As such, organizations must identify and report the information listed below to the Regional Planning Group. This information is required to be included in the Regional Planning Guide and entered into HMIS.

- ✓ Housing Type
- ✓ Applicable program eligibility requirements for each housing type
- ✓ Unit and program availability/vacancies in HMIS

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The housing provider will also commit to following the Housing Matching Prioritization Process for PSH and Rapid Re-Housing

- ✓ Upon receiving the referrals, accept referral in HMIS and contact the individual referred to set up intake appointments within 48 hours
- ✓ Work with the Assessor to locate the individual or family and engage with them to see if the housing referral provides a good match
- ✓ Record in HMIS when a match does not lead to successful program entry and provide the reason why they were not housed so that the individual can be re-assigned in HMIS
- ✓ Update HMIS to reflect when each match leads to successful program entry and provide the date the individual moves into housing

Screening Tools & Guides

Standardized tools and guides are utilized to ensure consistency across the GA BoS CoC CES. The following chart illustrates the type of screening tools or guides used within the BoS CoC CES, and purpose for each.

Screening Tools & Planning Guide	Purpose
Prevention and Diversion Screening Tool	Used prior to entry in the homeless service system to
	determine 1) level of emergent housing and/or
	service needs, and 2) alternative prevention and
	diversion options other than entry into an emergency
	shelter/ emergency housing
Individual and Family VI-SPDAT V.2	Used, no later than 7 days after entry, to determine
	the best housing intervention
VI-SPDAT Assessment Results (Housing	Regional Planning Groups will utilize the
Intervention Recommendations/Score	recommended housing interventions and score
Ranges)	ranges as a basis for determining their own scoring
	ranges for the various housing interventions
Regional Planning Guide	The guide is used by Regional Planning Groups to
	illustrate community level CES operations, access
	points, policies, assessment processes, etc

Housing Assessment Process

Assessment Process

Accessors utilize the Vulnerability Index and Service Prioritization Decision Assistance Tool (VI-SPDAT) as the common assessment to screen any single individual experiencing homelessness.

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The VI-SPDAT and Family VI-SPDAT will be the ONLY tools used to assess individuals after entry into the CES. The assessment scores will be used to triage individuals and families into the appropriate category of intervention. Information on the VI-SPDAT and an explanation of its evidence based foundation can be found at http://100khomes.org. VI-SPDAT score ranges and their corresponding recommended housing interventions are listed below:

Individual VI-SPDAT Score	Housing Resource Referral
0-3	No housing referral/Basic information provided
4-7	Rapid Rehousing
8+	Permanent Supportive Housing
Family VI-SPDAT Score	Housing Resource Referral
0-3	No housing referral/Basic information provided
4-8	Rapid Rehousing
9+	Permanent Housing

Screening Tool Updates

The VI-SPDAT receives ongoing updates to incorporate new and stronger evidence and feedback from both staff who have conducted the assessment as well as from individuals who have received the assessment themselves. The BoS CoC currently utilizes version 2 of the VI-SPDAT and will shift to future updated versions of the tool as applicable.

Assessment Score Appeal Process

The CoC Written Standards outline that the most severe service needs will be determined by the household's VI-SPDAT score and will prioritize those with the highest scores within each category first. If an individual or family wishes to appeal a VI-SPDAT score, they may file an appeal to the CES Regional Planning Group using the Appeal and Grievance Policy as outlined in their Regional Planning Guide. Accessors must discuss the appeal process during the assessment so that households are aware of the process.

Accessor Training

The CoC will release an annual training calendar on the CoC website. Trainings will include an overview of the CES, CES Written Standards, the Release of Information, VI-SPDAT assessment

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and how to record its results within the Homeless Management Information System (HMIS). Additional trainings to address data quality concerns and continuous quality improvement will be offered as needed. If a need for additional trainings not offered by the CoC is identified, Regional Planning Groups should communicate that need to the Coordinated Entry System Coordinator for consideration.

Release of Information

A signed GA HMIS Release of Information is required for information to be shared between accessors and providers. A separate signed authorization is also required to complete the Vulnerability Index-Service Prioritization Decision Assistance Tool (VI-SPDAT). All adults must sign both the GA HMIS Release of Information and Assessment Authorization prior to the assessment process.

Housing Match and Prioritization Process

The CES makes referrals to projects receiving ESG and CoC Program funds within the GA BoS CoC geographic area and other housing and service resources as applicable. The match process occurs in HMIS and accounts for the following elements:

- 1. **Prioritization**: CFSs will follow the Prioritization Standards listed above.
- 2. Recommended Housing Intervention: Upon completion of the VI-SPDAT, the client will be assigned a score. That score will fall within a range that corresponds with a recommended housing intervention. Referrals are made based on the assessment's recommended intervention as well as the GA BoS CoC's prioritization standards that are listed above. If a household's recommended intervention is PSH and there is currently no PSH then a household can remain on the prioritization list until a unit is available or can be offered RRH if there is program availability at the time.
- 3. Program Eligibility: Referrals will be provided by the lead agency using a standardized set of eligibility criteria and program requirements. The CES will follow eligibility and program requirements based on the criteria agreed upon with the agency/organization. Agencies participating in CES must submit all program eligibility criteria to the Regional Planning Group to be submitted as part of the Regional CES Plan. If DCA has a concern that a program's or CES's requirements may be contributing to "screening out" or excluding households from housing and/or services, DCA may request a meeting with the provider or Regional Planning Group to further discuss creative and collaborative solutions for adjusting program requirements. In cases where a provider is unwilling to adjust program criteria, DCA may de-prioritize the provider for future CoC and/or ESG funding.
- **4. Client choice:** Households may decline a referral because of program requirements that are inconsistent with their needs or preferences. There are no limitations on how many referrals a client may decline. However, a household may decline 2 referrals before they are returned to the prioritization list and prioritized with others on the list at that time.

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5. Geographic Location: Client's actual location and preferred location will be considered when determining an appropriate referral.

Completion of the Assessment Process

Timeline

The housing assessor will inform the household of possible eligibility and referral options immediately after assessment. The assessor will then input a referral into HMIS and facilitate a warm hand off to the receiving program. The assessor should assist households in gathering eligibility documentation as needed and as able. After a referral is submitted, the receiving program will acknowledge receipt of the referral within 48 hours. Acknowledgement is recorded by accepting the referral in HMIS. The receiving program must then enroll or deny the referred household within seven days. The receiving program can reject or deny the referral but only for the reasons listed later in this document. If the receiving program has been unable to contact the household after seven days then they are able to deny the referral, but only after repeated attempts at contact by all available methods each day for all seven days. If a client is denied because they were not able to be reached then the client will return to the same spot on the prioritization list. Accessors must attempt to continue to contact the household for 45 days, calling twice a week for the first 30 days and at least twice in the following fifteen days. All attempts to reach the household should be documented in HMIS. After that 45 day period, the household should be removed from the prioritization list and marked as inactive. If a household presents after they are removed from the prioritization list, then the household must complete the assessment process again.

Refusals

When staff encounter individuals who do not provide a response to any of the first questions on the VI-SPDAT, they should stop and acknowledge that the assessment will not provide useful information if the individual is having difficulty participating in the assessment process. All efforts should be made to explore possible reasons why the individual or family is experiencing difficulty with the assessment process and the assessor and/or outreach worker should utilize continued progressive engagement and relationship building techniques until such time the individual or family is comfortable with completing the assessment process. For limited instances when individuals refuse specific questions throughout the assessment process, the assessor may use assessor observation, documentation and information from other professionals in order to provide responses. Individuals or families who do not complete the assessment process may be added to the prioritization list with an assessment score of 0. If the household meets the eligibility criteria for Rapid Re-Housing <u>and</u> there are no other individuals or families on the Prioritization List <u>and</u> there is program availability then the household may be referred for RRH services.

Households who refuse to sign a release of information and therefore do not give consent to share information through the CES, are still eligible for housing assistance. However, households must give authorization to be assessed. Assessors are then able to input the household's information on the prioritization list using an unidentifiable coded number.

Denials

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Receiving programs may only decline households found eligible and referred through the CES for reasons that are listed in the chart below. Denials should be infrequent. Agencies are required to record denial and reason for denial in HMIS. CoC staff will monitor denials and provide technical assistance to regions and/or agencies who are reporting high numbers of denials. Programs may not deny households found eligible for refusing to participate in mental health services. If a household is denied, for any reason, and does not have accommodation for the night then the receiving program must make all efforts to find appropriate emergency housing.

1.	There are no vacant units or program availability
2.	The receiving program is unable to reach the household after repeated attempts at contact by all available methods each day for 7 days
3.	The household missed two separate intake appointments
4.	The household presents with more people that reported when assessed and the receiving program cannot accommodate the increase
5.	The household was denied by independent property owner or landlord due to certain criminal behaviors
6.	The receiving program has determined, based on documented policies and procedures, that the household cannot be safely accommodated

Appeals

All clients have the right to appeal eligibility determination issued by the assessor or any receiving program. Instructions for submitting an appeal are provided to clients at the time that an intake decision is made by the receiving program. Housing assessors are responsible for assisting client in filing eligibility determination appeals, including but not limited to drafting a written appeal on behalf of the client. All appeals of decisions by receiving programs should be made in writing and submitted to the Regional Planning Groups.

Prioritization List

To facilitate prioritization, the GA BoS CoC will establish and maintain a centralized prioritization list that will be hosted on HMIS. The centralized prioritization list will be sorted by region. The CES Coordinator will oversee the continuum wide list while one lead agency in each region will be designated to oversee the regional prioritization list. Other participating agencies will have the ability to view the list as well. All individuals in need of permanent housing will be

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added to the prioritization list. Individuals will be prioritized based on VI-SPDAT score and CoC prioritization standards.

Special Populations

GA BoS CoC CES is designed to address the needs presented by special populations through a comprehensive screening tool whereby such populations are quickly identified and referred to and/or provided appropriate services.

Special populations include: Domestic Violence Survivors, Veterans, Transitional-age youth (18-24), Persons Living with HIV/AIDS & Seniors. With regard to Youth and Survivors of Domestic Violence, the following requirements are applicable to the GA BoS CoC CES:

Youth

Youth experiencing homelessness require developmentally appropriate outreach and services in order to successfully interact with the CES, such as: 1) More likely to access CES sites that are open in evenings and on weekends, and 2) More comfortable accessing the CES via text and/or phone apps.

The GA BoS CoC CES will provide outreach & training at youth-friendly sites that serve both youth under the age of 18, and youth ages 18-24.

Survivors of Domestic Violence

The GA BoS CoC CES is designed to ensure both safety and confidentiality. Assessments conducted at a CES access point and/or during street outreach, will explore any possibility of attempting to flee domestic violence, concerned for their safety, victim of stalking and any related violence.

In such cases, the following will occur:

- 1) Immediate referral to DV-specific resources
- 2) Participant information will not be automatically entered into HMIS
- 3) Households may choose to complete an assessment and receive services via the CES. Households will be added to the regional prioritization list using a unique unidentifiable code protecting safety and confidentiality.

VAWA

Under the HUD Final Rule Implementing VAWA Reauthorization Act of 2013, the Georgia BoS CoC, is adopting policies to include provisions for protection of victims of domestic violence, dating violence, sexual assault, sexual battery or stalking, regardless of sex, gender identity, gender expression or actual or perceived sexual orientation.

These policies and procedures apply to CoC-funded Rapid Re-Housing (RRH) and Permanent Supportive Housing (PSH) programs. ESG-funded programs are subject to VAWA policies issued by the administrator of ESG funds. As a part of these policies and procedures, the CoC has put in place a policy for emergency transfers. The full details of the policy can be found in the GA BoS CoC VAWA Policies and Procedures.

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For program participants who qualify for an emergency transfer, under VAWA, but a safe unit is not immediately available for an internal emergency transfer, the individual or family shall have priority over all other applicants for rental assistance and permanent supportive housing projects at another housing provider within the coordinated entry system, provided that the individual or family meets all eligibility criteria for such assistance. The individual or family shall retain their original homeless or chronically homeless status for the purposes of the transfer.

<u>Privacy Protections and Non-Discrimination Requirements</u> Privacy Protections

All local CESs must follow the policies outlined in the GA HMIS Privacy Policy which is attached at the end of this document. In addition, the assessment process may not require disclosure of specific disabilities or diagnosis. Documentation of disability may only be obtained for the purpose of determining program eligibility.

Non-Discrimination Requirements

Recipients and subrecipients of CoC Program and ESG Program-funded projects must comply with the nondiscrimination and equal opportunity provisions of Federal civil rights laws as specified at 24 C.F.R. 5.105(a), including, but not limited to the following:

- Fair Housing Act prohibits discriminatory housing practices based on race, color, religion, sex, national origin, disability, or familial status
- Section 504 of the Rehabilitation Act prohibits discrimination on the basis of disability under any program or activity receiving Federal financial assistance
- Title VI of the Civil Rights Act prohibits discrimination on the basis of race, color or national origin under any program or activity receiving Federal financial assistance
- Title II of the Americans with Disabilities Act prohibits public entities, which includes state and local governments, and special purpose districts, from discriminating against individuals with disabilities in all their services, programs, and activities, which include housing, and housing-related services such as housing search and referral assistance. Title III of the Americans with Disabilities Act prohibits private entities that own, lease, and operate places of public accommodation, which include shelters, social service establishments, and other public accommodations providing housing, from discriminating on the basis of disability.

In addition, HUD's Equal Access Rule at 24 CFR 5.105(a)(2) prohibits discriminatory eligibility determinations in HUD-assisted or HUD-insured housing programs based on actual or perceived sexual orientation, gender identity, or marital status, including any projects funded by the CoC Program, ESG Program, and HOPWA Program. The CoC Program interim rule also contains a fair housing provision at 24 CFR 578.93. For ESG, see 24 CFR 576.407(a) and (b), and for HOPWA, see 24 CFR 574.603

Low Barrier Entry & Housing First Orientation

Low Barrier Entry

The GA BoS CoC CES is designed so as to not screen people out due to perceived or actual barriers related to housing or services. Such barriers include, but are not limited to, little or no

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income, active or a history of substance use, domestic violence history, resistance to receiving services, the type or extent of disability-related services or supports that are needed, history or evictions or poor credit, lease violations or history of not being a leaseholder, or criminal record- with exceptions for state or local restrictions that prevent certain projects from serving people with certain convictions.

Housing First Orientation

The Coordinated Entry process is housing first oriented, such that people are housed quickly without preconditions or service participations requirements.

HMIS

HMIS is a web-based software application designed to record and store person-level information on the characteristics and service needs of homeless persons throughout a CoC. Usage of HMIS is mandated by HUD and locally by the GA DCA. HUD and other planners and policymakers use HMIS data to obtain better information about the extent and nature of homelessness over time. The GA BoS CoC's HMIS is staffed at the Department of Community Affairs. The software provider is Client Track. The HMIS staff is responsible for the administration of the HMIS software and providing technical assistance to participating agencies and end-users. Each participating agency needs to follow GA HMIS Privacy Policy which is attached at the end of this document.

Outreach, Advertisement and Marketing

Outreach

Local CES Systems are required to contact private and public agencies including those in the CoC, VA, social service agencies and state and/or local government agencies to educate and provide information on available programs. Outreach activities must occur at least annually. These activities may occur in conjunction with the Point in Time Count or at another time as determined by the CoC. The CES is required to coordinate with existing street outreach programs as well as private and public agencies, social service organizations, etc. for referrals, so that people sleeping on the streets are prioritized for assistance in the same manner as any other person assessed through the CES. Each community is encouraged to explore various outreach activities such as hosting a booth at local community events, resource fairs, festivals and county fairs to provide information and resources.

Marketing

Marketing the Regional CESs should include at a minimum, informational flyers posted and made available at the locations servicing households that are at risk of or literally homeless. Other forms of advertisement may include newspaper ads, radio, websites, etc. as to ensure broad outreach via various advertising methods. Marketing will focus on people experiencing literal homelessness and clearly state eligibility requirements in an effort to reach the target population as opposed to those who do not meet the criteria. Information about the CES will also be available on the GA BoS CoC Website. Efforts are made to affirmatively market housing

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and supportive services to eligible persons regardless of race, color, national origin, religion, sex, age, familial status, disability or who are least likely to apply in the absence of special outreach.

Evaluation

The CES process will be evaluated on a regular basis to ensure that it is operating at maximum efficiency. Evaluation will be carried out primarily through the GA DCA. Evaluation methods will include the following:

- 1. A monthly review of metrics from the Regional CES. The data to be reviewed, and the thresholds that should be met, will be developed.
- 2. An annual monitoring visit with each assessment site.
- 3. A report submitted annually by the Regional Planning Group. This report will include trends from the month-to-month analysis of coordinated entry data, as well as the total number of assessments and referrals made, length of time homeless, number of denials and successful placements.

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