

Coordinated Entry System

Policy and Procedures

The Jackson County Continuum of Care has adopted this policy and related procedures in compliance with the interim rule found at 24 CFR 578.3 et seq. to meet all the required elements. The Jackson County Continuum of Care supports the philosophy of coordinated entry and commits to continuing to improve the process and protocols in place in this community, using best practices and lessons learned in implementing our coordinated entry protocols. Refinements on practices and protocols will be implemented through the written guidelines referenced throughout this policy and procedure.

Policies:

The Jackson County Continuum of Care Coordinated Entry System includes the following elements:

- Covers Jackson County
- Covers both recipients of ESG program funds and HUD program funds, including street outreach efforts funded under either, **as well as DHHS and PATH funded programs.**
- Provides written standards for determining eligibility for ESG and HUD programs.
- For those determined eligible, also have written standards determining prioritization to receive transitional housing assistance; rapid housing assistance; permanent supportive housing and the percentage of rent that is the participants' responsibility. These written standards will be followed consistently by ESG and HUD funded providers.
- Will be evaluated on the ease of access for individuals and families seeking housing services within the County
- Access points for the coordinated system will be well advertised to potential customers
- A Standard comprehensive assessment of potential participants will be made on all individual and families for housing and services using the MSHDA designated assessment, currently the VI-SPDAT
- The procedures will include a workflow for applying the coordinated assessment to address the needs of individuals and families fleeing domestic violence or related risks whether or not they are seeking assistance from the domestic violence provider.
- All aspects of the CoC's Non Discrimination policy (see attached) applies to participants in the Coordinated Entry System.
- All subpopulations including chronically homeless individuals and families, Veterans, youth, persons and households fleeing domestic violence, transgendered persons, refugees and new immigrants must be provided equal access to CoC crisis response services and Coordinated Entry System regardless of the characteristics and attributes of their specific subpopulations.

- Low Barrier as it refers to minimal eligibility and enrollment obstacles resulting in homeless persons being engaged and enrolled in homeless assistance projects regardless of perceived barriers such as lack of income, lack of sobriety, presence of criminal records, or historical non-compliance with program requirements. No client may be turned away from crisis response services or homeless designated housing due to lack of income, lack of employment, disability status, domestic violence status, or substance use, unless the project's primary funder or local government jurisdiction requires the exclusion. Funders restricting access to projects based on specific client attributes or characteristics will need to provide documentation to the CoC providing a justification for their enrollment policy.
- The Jackson CoC has committed to following a Housing First approach within all of its homeless programs. This commitment will continue to be enforced as part of the Coordinated Entry System.

Procedures:

Marketing

- The designated providers will carry out all marketing of housing and supportive services funded through the CoC. **These will include things such as 211 blasts, flyers that can be placed in strategic areas across the community.**
- The CoC will require that marketing and outreach is carried out in compliance with the CoC Non-discrimination Policy (attachment) as a condition of designation and funding a service provider
- The CoC will include an evaluation of the designated provider in the CoC monitoring of the agency and include an examination of a potential agency recipient on its compliance with this Non-discrimination requirement.
- **Coordinated Entry Policy and Procedures will be available on the CoC website at www.jxncoc.com**

Outreach

- All CoC outreach activities, projects, and initiatives must be integrated with the CoC's Coordinated Entry System (CES) design, serving as an engagement resource or designated access points for CoC resources, services, and housing.

Access Points

- The MSHDA designated Housing Assessment and Resource Agency (HARA) is the primary access point for all of Jackson County. The Jackson CoC also has adopted a "no wrong door" procedure for entering the CES, so subpopulations seeking assistance through our local shelters or through veterans providers start the assessment process on site, using the standard assessment. This is to operate our CES with as few barriers to entry as possible. Participants who are victims of domestic violence or human trafficking are not denied access to the coordinated entry process; they will always be provided a safe and confidential option for gaining access to services. Participants seeking emergency shelter, including at the domestic violence shelter, are not denied emergency services at any time during or outside of the HARA office hours.

- The Jackson CoC uses the same assessment criteria at all access points for those experiencing homelessness or those that are at risk of homelessness. The assessment tool used is modified for subpopulations, as required by MHSDA funding, for example: unaccompanied youth. Street outreach staff funded by either ESG or HUD will follow the same assessment process that is used through site-based access.
- The **process** for disabled persons seeking assistance through the CES is supported by the “no wrong door” procedures, intentionally **reducing** barriers to individuals with disabilities, as it increases the number of access sites with handicap accessibility and bus line accessibility as options for those with mobility limitations.
- The CoC requires and monitors funded providers to document the steps taken to ensure effective communication with 1) individuals with disabilities and 2) those with other than English proficient as a condition of funding.

Release of Information (ROI)

- All providers that input data and VI-SPDAT information into HMIS utilize a standardized ROI specific to Jackson County. This ROI is based on a Michigan statewide adopted, HIPAA-compliant ROI. Service providers serving Veteran households use an additional ROI developed by the Department of Veterans Affairs (VA). The veteran-specific ROI enables effective service coordination between the service providers and VA representatives.

Assessment Process

- The Jackson County coordinated entry utilizes a phased assessment approach to determine the appropriate housing intervention needed. CAA staff, as the HARA, screens to determine if households are **housed**, but need resources; **at imminent risk of homelessness** (U.S. Department of Housing and Urban Development (HUD category 2); or, **literally homeless** (HUD category 1). Through the “no wrong door” procedure another agency could also perform this same screening and coordinate with the HARA staff.
- Households that are **housed**, and in need of resources, may receive information and referral to resources, including affordable housing. They may also receive **prevention** and/or diversion assistance in order to resolve any issues related to housing. They may be referred to a case manager at CAA to assist in this process through their SSO program.
- Those households that are found to be **at imminent risk of homelessness** or who are **literally homeless** are given a more in depth assessment. To help solve their housing issue(s), at-risk households could receive **prevention** and/or diversion, as well as financial assistance if funding is available and they are eligible, through ESG. If the household is found to be **literally homeless**, providers administer the Vulnerability Index - Service Prioritization Decision Assistance Tool (VI-SPDAT) tool, a common assessment tool for prioritizing. The tool is not only used to determine each household’s housing and service needs, but also to provide a common approach to prioritize households for housing program referrals using the coordinated entry process. All funded providers have

access to this tool and are required to use it to determine prioritization, and therefore, participation in the funded program.

- The VI-SPDAT is designed to quickly assess the health and social needs of those experiencing homelessness, by building an acuity level, and helps to identify the best type of support and housing intervention by relying on three categories of recommendation:
 - Permanent Supportive Housing: Individuals or families who need permanent housing with ongoing access to services and case management to remain stably housed.
 - Rapid Re-Housing: Individuals or families who are likely to be able to achieve housing stability over a short time period through a medium or short-term rent subsidy and access to support services.
 - Diversion: Individuals or families who do not require intensive supports but may still benefit from access to affordable housing with some light touch services. In these cases, the tool recommends affordable or subsidized housing but no financial assistance from the homeless services world.
- As the VI-SPDAT is the assessment tool authorized by MSHDA, the CoC requires all organizations and staff funded to serve as access points to be trained in administering the VI-SPDAT. The CoC delegates the responsibility of ensuring assessment training is made available at least annually to train new staff, and to provide training as needed on revised VI-SPDAT assessment requirements to the designated HARA. The HARA will report to the CoC on training events held, and provider staff who have successfully completed such training. The CoC will monitor staff compliance with the training requirements through the program monitoring functions. The HARA is also the CoC's designated prioritization agency, charged with managing the process of determining and updating participation prioritization for available CoC housing and supportive services.
- After the VI-SPDAT is administered to a literally homeless household, the following happens:
 1. The staff person who completes the VI-SPDAT places the household on the housing prioritization list to be prioritized for referral to the identified PSH, RRH, or SSO (supportive services only) housing programs.
 2. As housing program openings become available, the Prioritization Committee prioritizes households for referral to the RRH or PSH program openings, per the prioritization process explained below.
 3. Once a household is referred, CAA as the HARA, sends the referral via HMIS or sends the HMIS # via private email if unable to send through HMIS, to the identified housing program provider. Provider staff begins to work with the household to find housing and provides appropriate supports.
 4. After housing is identified, provider staff administers ongoing assessment and case management as appropriate per program policy.
- The CoC assessment process is client centered. This means that:
 - Assessment participants are freely allowed to decide what information they provide in the assessment process, and what housing and service options they want to accept or refuse without retribution, including not

losing their place in the coordinated entry prioritization list when an option is rejected.

- Participant's data is protected by the written privacy procedures for data collected for HMIS.
- Participants are informed of their right to file a non-discrimination complaint
- As a best Practice, the CoC includes in the training for the Assessment Process:
 - How to use the Vi-SPDAT assessment tool specific for the subpopulation being served
 - Annual Cultural and linguistic competency training
 - How trauma informed assessment is conducted, based on the trauma informed training available in the Jackson community
 - How to address safety issues when they are identified in the participant assessment

Prioritization for Program Entry

- **Housing Prioritization Committee**

The Prioritization Committee will meet **at least monthly**, or more often as needed. In addition to referring households into housing programs, the committee makes procedural decisions and conducts case consultations during face-to-face meetings. To ensure housing program referrals are not delayed between the meetings, CAA staff, as the HARA, continues referrals between meetings as openings become available via the Prioritization process, **as noted above, as needed**.

Current agencies that are a part of the prioritization committee are:

- Aware, Inc
- Community Action Agency
- Do'Chas II
- Jackson Housing Commission
- Jackson Interfaith Shelter
- Offender Success
- Region 2 Area Agency on Aging
- Training and Treatment Innovations
- Veterans Affairs

- **Housing Prioritization List in HMIS**

All assessments and VI-SPDAT information must be recorded in HMIS within 48 hours of when the information was first collected. Immediately prior to each Prioritization committee meeting, the HMIS lead staff produces an HMIS-generated housing prioritization list. The lists are used during the meetings to facilitate prioritization and housing program referrals.

- **Prioritization Criteria**

The Jackson CoC will use the assessment tool results to prioritize entry for all non-emergency homeless assistance, for ESG and/or HUD funded programs. HUD regulations only allow RRH and PSH programs to serve people who are literally homeless (Category 1) or people who are homeless because they are fleeing domestic violence (Category 4). In addition, HUD mandates that

communities prioritize literally homeless households who are chronically homeless (CH) for housing and services. To this end, the Prioritization Committee first prioritizes literally homeless households (who meet the household size requirements for the available permanent housing unit) based on their VI-SPDAT scores, with CH households having first priority. If there are no CH households on the housing prioritization list, households are still prioritized based on their VI-SPDAT scores. If there are two or more households with the same score, households are prioritized based on the following criteria which are the CoC's local factors and are prioritized annually by the CoC (*only going to the next level as needed to break a tie between two or more households*):

1. Homeless unaccompanied youth
2. Unsheltered Sleeping Location: Prioritized over those with a sheltered sleeping location
3. Length of Time Homeless: Priority to those experiencing homelessness the longest
4. Date of VI-SPDAT: Priority given to the earliest date of assessment.
5. **Persons Fleeing Domestic Violence**
6. **Homeless Veterans that do not qualify for other Veteran programs (SSVF or HUD VASH)**
7. **Homeless or at risk of homeless individuals referred through drug court for recovery housing.**

Emergency Services funded by the CoC are prioritized by the need for an immediate crisis response and the funding eligibility requirements. The priority criteria used for non-emergency services are not used in the determination to provide emergency services such as emergency shelter. The CoC nondiscrimination policy and procedures covers data collected from assessments and used to prioritize services available to individuals or households. The CoC HMIS privacy and security procedures applies to data collected from assessments and used to prioritize services available to individuals and households

- **Updating the Housing Prioritization Lists**

The Prioritization Committee uses three lists for housing program referrals & prioritization: Diversion, RRH, and PSH. These lists will contain specific information about disability, chronic status, veteran status, household size, **youth**, as well as the referring agency and VI-SPDAT score and additional notes.

The staff member who conducts the VI-SPDAT enters the information into HMIS and sends a copy of the HARA Screening Assessment to CAA to enter into the HARA screening page.

For agencies listing available housing program openings, a notice is completed for each opening. CAA staff pulls together the information from each list in preparation for each Prioritization Committee meeting. It is important that all staff update household information in real time so the lists created are accurate to ensure the best use of meeting time.

Referral Procedures

All ESG and CoC funded agencies must participate in the CES to fill program vacancies. All agencies participating in the coordinated entry process will follow all the Non-discrimination and equal access provisions set out in the CoC Policies and Procedures. The written referral process will be used for all bed, units and services available at participating agencies so that the process is uniformly applied and coordinated for all participating beds in Jackson County.

As a condition for being a CoC agency participating in the coordinated entry process, the agency will not screen project participants out for assistance based on perceived barriers related to housing or services. As a condition for being a CoC agency participating in the coordinated entry process, the agency will incorporate a person centered approach into the referral process, including:

- Participant choice in decisions such as location and type of housing, level and type of services, and other project characteristics, including assessment processes that provide options and recommendations that guide and inform participant choice, as opposed to rigid decisions about what individuals and families need.
- Clear expectations concerning where participants are being referred, entry requirements and services provided.

The designed referral process is the only referral source for filling vacancies in housing and or services funded by the CoC and ESG programs. The CoC will monitor compliance with this referral requirement as a regular part of the monitoring process. The CoC adopts the following best practices in its coordinated referral system: **[LIST from p. 20]**

Data Management Procedures

The Coordinated Entry data collected and entered into HMIS will be covered by the CoC HMIS privacy protections for participant data. The CoC's written policy and protocols, including user training requirements, for sharing and storing participant data apply to data collected for the Coordinated Entry process.

Evaluation Procedures

The CoC will evaluate the intake, assessment and referral processes for each participating agency at least annually through established monitoring procedures.

As part of the CoC evaluation process, the CoC requires agencies to **administer** client satisfaction surveys **containing questions to document service provision quality, client satisfaction with the coordinated entry process and to inform discussions for program improvement strategies**. The surveys will be collected annually and will be distributed at a minimum to all participants who have entered the program through the coordinated entry within the past year.

Participating agencies collecting participant information as part of the coordinated entry evaluation will ensure adequate privacy protections for this participant information.