Policy: Coordinated Entry System Prioritization	**Date Issued: March 29, 2017**
Procedures: Prioritization	**Effective Date: July 25, 2017**
	Review Date: January 23, 2019

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BACKGROUND

In 2012, the US Department of Housing and Urban Development required every Continuum of Care (CoC) to implement a Centralized or Coordinated Entry System. With guidance from the Homeless Emergency Assistance and Rapid Transition to Housing Act (HEARTH Act), Housing and Urban Development (HUD) guidelines, regulations, and strategic agreement amongst partner agencies, the Ventura County Continuum of Care (VCCoC), Coordinated Entry System- Pathways to Home was designed.

POLICY

CoC uses the coordinated entry process to prioritize homeless persons within the CoC's geographic area: Prioritization is based on a specific and definable set of criteria that are documented, made publicly available and applied consistently throughout the VCCoC for all populations. The VCCoC's written policies and procedures include the factors and assessment information with which prioritization decisions are made. CoC's prioritization policies and procedures are consistent with CoC and ESG written standards under 24 CFR 578(a) (9) and 24 CFR 576.4.

KEY TERMS

1. Case Conference: Weekly meetings by all homeless services, housing providers and stakeholders to coordinate services to those clients most in need in the most expedient fashion.

2. Severity of Service Needs

   This definition refers to persons who have been identified as having the most severe service needs:

   (a) an individual for whom at least one of the following is true: i. History of high utilization of crisis services, which include but are not limited to, emergency rooms, jails, and psychiatric facilities; and/or 6 ii. Significant health or behavioral health challenges, substance use disorders, or functional impairments which require a significant level of support in order to maintain permanent housing. iii. For youth and victims of domestic violence, high risk of continued trauma or high risk of harm or exposure to very dangerous living situations. iv. When applicable CoCs and recipients of CoC Program-funded PSH may use an alternate criteria used by Medicaid departments to identify high need, high cost beneficiaries.

   (b) Severe service needs as defined in paragraphs i.-iv. Above should be identified and verified through data-driven methods such as an administrative data match or through the use of a standardized assessment tool and process and should be documented in a program participant's case file. The determination must not be based on a specific diagnosis or disability type, but only on the severity of needs of the individual. The determination cannot be made based on any factors that would result in a violation of

any nondiscrimination and equal opportunity requirements, see 24 C.F.R. § 5.105(a).

3. Chronically Homeless for Head of Household:

The definition of "chronically homeless", as stated in Definition of Chronically Homeless final rule is:

(a) 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: i. lives in a place not meant for human habitation, a safe haven, or in an emergency shelter; and ii. Has been homeless and living as described in paragraph (a) (i) 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 the occasions included at least 7 consecutive nights of not living as described in paragraph (a) (i).

(b) 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 the facility; (c) 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 (as described in Section I.D.2.(a) of this Notice), including a family whose composition has fluctuated while the head of household has been homeless.

Literally Homeless:

At Risk of Homelessness:

Currently Fleeing or Attempting to Flee Domestic Violence:

4. Eligibility

Determining eligibility is a project level process governed by written standards as established in 24 CFR 576.400€ and 24 CFR 578.7 (a) (9). Coordinated entry processes incorporate mechanisms for determining whether potential participants meet project-specific requirements of the projects for which they are prioritized and to which they are referred.

5. Prioritization:

HUD has determined that an effective coordinated entry process ensures that people with the greatest needs receive priority for any type of housing and homeless assistance available in the VC CoC.

a. Single: Individual who presents as head of household and meets the Chronic homeless definition

b. Family/ couple: The head of household in the unit must meet chronic homeless status. Children are not required to currently be staying with the Head of household. A child who is temporarily away from the home because of placement in foster care is considered a member of the family in determining the family unit size. A family that consists of a pregnant

woman (with no other persons) must be treated as a two-person family

c. Transitional Age Youth: Individual between the ages of 18-24 who presents as head of household and meets the chronic homeless definition.

CASE CONFERENCE:

People with the greatest needs receive priority for any type of supportive housing and homeless assistance available in the Ventura County Continuum of Care. Case conferencing is the forum to address those whom are most vulnerable and in need of PSH or TH.

1. Present Case for Prioritization of PSH/ PH *(refer to HMIS CES Entry, Assessment, Referral and Exit procedures for Entry and eligibility steps prior to case presentation)*

   Note: Chronic Homeless Documentation should have been submitted to your agency SME and reviewed by CES team prior to case conference (see Chronic Homeless Documentation policy and procedure).

2. Receive recommendations on placement from the CoC team. Recommendations are based off the potential of the participant meeting project-specific requirements for the project they are being referred to.

   a. For PSH/PH, prioritization is the next step

Prioritization Process:

The following criteria establish how homeless individuals/families will be prioritized for shelter and housing programs in Ventura County Continuum of Care: The VI-SPDAT will be used by the Coordinated Entry Assessment Sites to assess individuals experiencing homeless. Provider points of entry will complete the Pathways to Home eligibility module to determine which programs the individual or family is for prior to complete the VI-SPDAT survey. The VI-SPDAT will be one of the prioritization criteria in determining housing placement. The following criteria will be used to prioritize placement, with the first three serving as the primary methods of ranking individuals and the remaining two prioritizations serving as tie breakers if the first three prioritization methods result in tied rankings.

1. Chronic Homeless Status: This first prioritization criteria focus on those individuals with a disability who have experienced long-term or multiple episodes of homelessness and are generally those with the highest need and vulnerability. In addition, this population has been identified as being the largest user of homeless system resources. This will be determined by the documented length of time of homelessness (episodic or continuous) and the reported service needs of individuals including chronic health, mental health, substance use or other service needs that impact vulnerability. Persons with the document longest length of time homeless and documented highest service needs will receive first priority.

2. VI-SPDAT Score: This second prioritization factor targets the most vulnerable clients in the homeless system as determined by their total VI-SPDAT score. VI-SPDAT score will be utilized in determining the ranking on the prioritization list in combination with the factors in the section above. VI-SPDATS may be updated every 6 months and/or when there are substantial changes to the client's Service Level Needs (factor #4). If there changes to their service level needs, documentation must be submitted to the CES coordinator and case noted in the

HMIS system detailing the changes.

3. Length of Time Homeless: The third prioritization factor is the length of time an individual has experienced homelessness, giving priority to the person that has experienced homelessness the longest.

4. Service Level Needs: The fourth prioritization factor targets individuals with medical needs who will be prioritized when they have behavioral health conditions or histories of substance use which may either mask or exacerbate medical conditions. Our continuum will use the Risk Domain in the VI-SPDAT to determine severity of service need.

5. Date of VI-SPDAT Assessment: The final prioritization criteria will be the date of the individual's assessment, giving priority to the earliest date of assessment.

Levels of Priority

Prioritizing chronically homeless persons in CoC program-funded Permanent Supportive Housing beds dedicated or prioritized by persons experiencing chronic homelessness:

1 (a) First Priority–Homeless Individuals and Families with a Disability experiencing chronic homelessness that is based on the length of time in which an individual or family has resided in a place not meant for human habitation, a safe haven, or an emergency shelter and the severity of the individual or families' service needs.

(b)If there is not a person that meets specific program eligibility criteria of a target population (i.e.: mental illness), the agency would then accept the next prioritized person on the list. This means, if the CoC has served everyone with self-reported target disability (i.e. mental illness), the agency may be referred another person that meets the chronic homeless status (i.e. with a different disability).

Prioritizing when there are no chronically homeless individuals and families within the VCCoC's geographic area:

b. First Priority-Homeless Individuals and Families with a Disability with long-term or multiple episodes of homelessness (May not meet chronic homelessness definition) and Severe Service Needs.

c. Second Priority–Homeless Individuals and Families with a Disability with Severe Service Needs.

d. Third Priority—Homeless Individuals and Families with a Disability Coming from Places Not Meant for Human Habitation, Safe Haven, or Emergency Shelter Without Severe Service Needs

e. Fourth Priority–Homeless Individuals and Families with a Disability Coming from Transitional Housing

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Applicants who do not meet Chronic homeless status, but meet at risk or literally

Non Chronic Homeless dedicated beds- Permanent Housing:	homeless as defined by HUD, will be matched with the appropriate housing and service placement as vacancies become available. Prioritization will occur based on Vulnerability Index Service Prioritization Score and the first household who meets target criteria for the Non-CoC funded program will be matched.
Rapid Re-Housing and Emergency Shelter:	Unsheltered persons receive priority for emergency shelter and rapid re-housing.
Vacancies:	1. Prioritizes client on the list (Single, Family, or TAY). 2. Reviews list each week for updates and when vacancies are reported 3. The prioritization process is used to fill vacancies throughout the VCCoC
Referrals:	1. Generate a direct referral within 48 hours business hours of match, once client has been prioritized, and recommended for housing, *(refer to HMIS CES Entry, Assessment, and Referral and Exit procedures for referral steps in HMIS).* A backup match will also be identified. 1. Client has 7 days to determine acceptance or decline of vacancy. On 5th day, if client has not been located or provided an answer, the backup match will be notified, they will begin their 7 days determination timeline. a. If client accepts, receiving agency moves forward with referral and closes CES entry. b. If client declines, agencies notify CES immediately and the backup match is notified. i. Client is placed back on prioritized list ii. Agency re-runs eligibility for client iii. Refers client for immediate sheltering or basic needs
Forms	VCCoC Chronic Homeless Documentation Packet (VCCoC Website)
References	*24 CFR 578.7 (a) (8)* *CPD-17-01 /2017; CPD-16-11 /2016*