SYSTEM COORDINATION COMMITTEE AGENDA
5-08-2019

1. Director’s Report (Julie) 2:00-2:05pm

2. Urgent Items (Lara) 2:05-2:10pm

3. Discussion Items
   a. CE Evaluation Plan (Suzanne) 2:10-2:30pm
      i. Update from RBA Leadership/SCC Mtg (Jessica Lobedan)
      ii. Coordinated Entry Self-Assessment
   b. SCC 2019 Work Plan (Lara) 2:30-3:15pm
      i. Review and check if there any additions to workplan that would address
      ii. Begin work on defining high priority households
      iii. Discuss how to complete or move forward pending projects/topics
         1. Housing Blitz Mini-Evaluation
         2. Coordinated Entry Management Entity
         3. Rapid Rehousing Inventory
         4. Document Readiness Preference for PSH Matching
   c. Housing Crisis Response System Manual (Suzanne) 3:15-3:40pm
      i. History of the Housing Crisis Response System Manual is included in packet
      ii. Limit the scope of the manual to Coordinated Entry Manual
      iii. Review and revise Policy to Set Policies

4. Action Items for Vote (Lara) 3:40-3:50pm
   a. Vote on DV Provider Seat
      i. Presentation of candidates and recommendation from Chair/Vice-Chair
      ii. Discussion by Committee
      iii. Vote

5. Plan of Action (Suzanne) 3:50-4:00pm
   a. Send feedback on Policy to Make Coordinated Entry Policy
   b. Coordinated Entry Self-Assessment Work Group
   c. Upcoming Work Groups
      i. May 21 and June 4

6. Consent Items
   a. None
The U.S. Department of Housing and Urban Development (HUD) requires that Continuums of Care (CoC) establish and operate a coordinated entry (CE) process—and that recipients of CoC Program and Emergency Solutions Grants (ESG) program funding within the CoC’s area must use that CE process. The requirement was established in the 2012 CoC Program interim rule (24 CFR 578) and the 2011 Emergency Solutions Grants (ESG) interim rule (24 CFR 576). Details of the requirement, as well as additional policy considerations, are provided there and in several documents issued by HUD since:

- **HUD Coordinated Entry Notice CPD-17-01 – Notice Establishing Additional Requirements for a Continuum of Care Centralized or Coordinated Assessment System** (2017)
- **HUD Prioritization Notice CPD-16-11 – Notice on Prioritizing Persons Experiencing Chronic Homelessness and Other Vulnerable Homeless Persons in Permanent Supportive Housing** (2016)
- **Coordinated Entry Policy Brief** (2015)
- **CoC Program interim rule: 24 CFR 578.7(a)(8)**
- **ESG interim rule: 24 CFR 576.400(d)**
- **HUD Equal Access rule: 24 CFR 5.105(a)(2) and 5.106(b)**

Based on these documents, this tool identifies aspects of coordinated entry that HUD has determined are **Required**, as well as other aspects of CE functionality, operations, or management that it has **Recommended** as good practice but not required. Some unique design features of CE may be appropriate for some subpopulations or geographic areas but are not universally applicable across all CoCs; these are identified as **Optional**.

The source document(s) for each Required item is noted in **bold**, and for each Recommended item if appropriate.

CoCs can use this **Coordinated Entry Self-Assessment** as a reference to help them identify key aspects of CE design, implementation, and management; compare this list against their existing CoC plans and/or practices to gauge the extent to which the CoC currently includes these elements; and as a general outline for a set of policies and procedures a CoC must adopt to support the ongoing management of CE processes and functions.

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Version 1.1
This document is Version 1.1, which replaces the original version posted on the HUD Exchange on January 23, 2017. This Version 1.1 reflects the following changes:

1. **Section A. Planning.** Item #1 has been updated to correct the date that CoCs are expected to achieve full compliance with Coordinated Entry requirements established by the Notice. The correct date is January 23, 2018.

2. **Section C. Assessment.** Item #9 has been updated to correct an earlier error in citation. The privacy protections noted in the requirement are from HUD’s Coordinated Entry Notice: Section II.B.12.f.

3. **Section E. Referral.** Item #2, in “Referrals to Participating Projects,” has been moved from Required to Recommended. The CoC’s Coordinated Entry policies and procedures used to prioritize homeless persons within the CoC’s geographic area for referral to housing and services must be made publicly available and must be applied consistently throughout the CoC’s area for all subpopulations. HUD recommends that each CoC homeless assistance project also make its prioritization policies and procedures publicly available. That is, the requirement is at the CoC level, not the individual project level.
# Coordinated Entry Process Self-Assessment

## A. PLANNING

### Deadline for Compliance.

1. CoC establishes or updates its coordinated entry process in full compliance with HUD requirements by January 23, 2018.

   **CoC Program interim rule: 24 CFR 578.7(a)(8)**
   **HUD Coordinated Entry Notice: Section I.B**

### Core Requirements since 2012.

CoC’s coordinated entry process meets the requirements (below) established by the CoC Program interim rule.

**CoC Program interim rule: 24 CFR 578.3 & 24 CFR 578.7(a)(8)**

2. CES covers the entire geographic area claimed by the CoC.

3. CES is easily accessed by individuals and families seeking housing or services.

4. CES is well-advertised.

5. CES includes a comprehensive and standardized assessment tool(s).

6. CES provides an initial, comprehensive assessment of individuals and families for housing and services.

7. CES includes a specific policy to guide the operation of the centralized or coordinated assessment system 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.
### Core Requirements.

8. CoC, in consultation with recipients of Emergency Solutions Grants program funds within the geographic area, has established and consistently follows written standards for providing Continuum of Care assistance which can guide the development of formalized policies and procedures for the coordinated entry process:

- Written standards provide guidance for evaluating individuals’ and families’ eligibility for assistance under 24 CFR Part 578.
- Written standards provide guidance for determining and prioritizing which eligible individuals and families will receive transitional housing assistance.
- Written standards provide guidance for determining and prioritizing which eligible individuals and families will receive rapid rehousing assistance.
- Written standards provide guidance for determining what percentage or amount of rent each program participant must pay while receiving rapid rehousing assistance.
- Written standards provide guidance for determining and prioritizing which eligible individuals and families will receive permanent supportive housing assistance.

CoC Program interim rule: 24 CFR 578.7(a)(8)

9. 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 ESG projects consistent with the written standards for administering ESG assistance.

CoC Program interim rule: 24 CFR 578.7(a)(8)
ESG interim rule: 24 CFR 576.400(d) and (e)

### Full Coverage.

10. If multiple CoCs have joined together to use the same regional coordinated entry process, written policies and procedures describe the following:

- The relationship of the CoC(s) geographic area(s) to the geographic area(s) covered by the coordinated entry process(es); and
- How the requirements of ensuring access, standardizing assessments, and implementing uniform referral processes occur in situations where the CoC’s geographic boundaries and the geographic boundaries of the coordinated entry process are different.

HUD Coordinated Entry Notice: Section II.B.1
### Marketing.

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

   - **CoC Program interim rule:** 24 CFR 578.93(c)
   - **ESG Program interim rule:** 24 CFR 576.407(a) and (b)

12. Coordinated entry written policies and procedures include a strategy to ensure the coordinated entry process is available to all eligible persons regardless of race, color, national origin, religion, sex, age, familial status, disability, actual or perceived sexual orientation, gender identify, or marital status.

   - **HUD Coordinated Entry Notice:** Section II.B.5
   - **HUD Equal Access rule:** 24 CFR 5.105(a)(2) and 5.106(b)

13. Coordinated entry written policies and procedures ensure all people in different populations and subpopulations in the CoC’s geographic area, including people experiencing chronic homelessness, veterans, families with children, youth, and survivors of domestic violence, have fair and equal access to the coordinated entry process.

   - **HUD Coordinated Entry Notice:** Section II.B.5
Nondiscrimination.

14. CoC has developed and operates a coordinated entry that permits recipients of Federal and State funds to comply with applicable civil rights and fair housing laws and 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, including 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.

HUD Coordinated Entry Notice: Section I.D
**B. ACCESS**

<table>
<thead>
<tr>
<th>Access Models.</th>
<th>ASSESSMENT NOTES</th>
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<tbody>
<tr>
<td>1. CoC offers the same assessment approach at all access points and all access points are usable by all people who may be experiencing homelessness or at risk of homelessness. If separate access points are identified to meet the needs of one of the five populations allowable by HUD’s Coordinated Entry Notice, initial screening at each access point allows for immediate linkage to the appropriate subpopulation access point (e.g. unaccompanied youth who access CES at the access point defined for adults without children are immediately connected to the youth-specific access point).</td>
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<tr>
<td><strong>HUD Coordinated Entry Notice: Section II.B.2.a</strong></td>
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<thead>
<tr>
<th>Accessibility.</th>
<th>ASSESSMENT NOTES</th>
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<tr>
<td>2. CoC ensures that households who are included in more than one of the populations for which an access point is dedicated (for example, a parenting unaccompanied youth who is fleeing domestic violence) can be served at all of the access points for which they qualify as a target population.</td>
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<tr>
<td><strong>HUD Coordinated Entry Notice: Section II.B.2.f</strong></td>
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<tr>
<td>3. CoC provides the same assessment approach, including standardized decision-making, at all access points.</td>
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<tr>
<td><strong>HUD Coordinated Entry Notice: Section II.B.2.a</strong></td>
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<tr>
<td>4. CoC ensures participants may not be denied access to the coordinated entry process on the basis that the participant is or has been a victim of domestic violence, dating violence, sexual assault or stalking.</td>
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<tr>
<td><strong>HUD Coordinated Entry Notice: Section II.B.12.e</strong></td>
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<tr>
<td>5. CoC’s access point(s) must be easily accessed by individual and families seeking homeless or homelessness prevention services.</td>
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<td><strong>HUD Coordinated Entry Notice: Section II.B.8</strong></td>
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</table>
## Emergency Services.

6. CoC's CE process allows emergency services, including all domestic violence and emergency services hotlines, drop-in service programs, and emergency shelters, including domestic violence shelters and other short-term crisis residential programs, to operate with as few barriers to entry as possible. People are able to access emergency services, such as emergency shelter, independent of the operating hours of the system's intake and assessment processes.

**HUD Coordinated Entry Notice: Section II.B.7**

7. CoC’s written CE policies and procedures document a process by which persons are ensured access to emergency services during hours when the coordinated entry's intake and assessment processes are not operating. CE written policies and procedures document how CE participants are connected, as necessary, to coordinated entry as soon as the intake and assessment processes are operating.

**HUD Coordinated Entry Notice: Section II.B.7.b**

## Prevention Services.

8. CoC’s written CE policies and procedures document a process for persons seeking access to homelessness prevention services funded with ESG program funds through the coordinated entry process. If the CoC defines separate access points for homelessness prevention services, written policies and procedures must describe the process by which persons are prioritized for referrals to homelessness prevention services. To the extent to which other (i.e., non ESG-funded) homelessness prevention services participate in coordinated entry processes, the policies and procedures must also describe the process by which persons will be prioritized for referrals to these programs.

**HUD Coordinated Entry Notice: Section II.B.8**

## Full Coverage.

9. CoC’s access points cover and are accessible throughout the entirety of the geographic area of the CoC.

**HUD Coordinated Entry Notice: Section II.B.1**

## Marketing.

10. CoC’s written coordinated entry policies and procedures document steps taken to ensure access points, if physical locations, are accessible to individuals with disabilities, including accessible physical locations for individuals who use wheelchairs, as well as people in the CoC who are least likely to access homeless assistance.

**HUD Coordinated Entry Notice: Section II.B.5.c**
## B. ACCESS

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<th>ASSESSMENT NOTES</th>
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<tr>
<td>11.</td>
<td>CoC’s written CE policies and procedures document steps taken to ensure effective communication with individuals with disabilities. Recipients of Federal funds and CoCs must provide appropriate auxiliary aids and services necessary to ensure effective communication (e.g. Braille, audio, large type, assistive listening devices, and sign language interpreters.</td>
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<td>HUD Coordinated Entry Notice: Section II.B.5.c</td>
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<tr>
<td>12.</td>
<td>CoC’s access point(s) take reasonable steps to offer CE process materials and participant instruction in multiple languages to meet the needs of minority, ethnic, and groups with Limited English Proficiency (LEP).</td>
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<td>HUD Coordinated Entry Notice: Section II.B.5.d</td>
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<tr>
<td><strong>Safety Planning.</strong></td>
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<tr>
<td>13.</td>
<td>CoC has a specific written CE policy and procedure 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 service providers. At a minimum, people fleeing or attempting to flee domestic violence and victims of trafficking have safe and confidential access to the coordinated entry process and victim services, including access to the comparable process used by victim service providers, as applicable, and immediate access to emergency services such as domestic violence hotlines and shelter.</td>
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<td>HUD Coordinated Entry Notice: Section II.B.10</td>
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<td><strong>Street Outreach.</strong></td>
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<td>14.</td>
<td>Street outreach efforts funded under ESG or the CoC program are linked to the coordinated entry process. Written policies and procedures describe the process by which all participating street outreach staff, regardless of funding source, ensure that persons encountered by street outreach workers are offered the same standardized process as persons who access coordinated entry through site-based access points.</td>
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<td>HUD Coordinated Entry Notice: Section II.B.6</td>
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</table>
## B. ACCESS

### Accessibility.

| 15. | CoC’s access points, if physical locations, are sited in proximity to public transportation and other services to facilitate participant access. A CoC or recipient of Federal funds may be required to offer some variation to the process, e.g., a different access point, as a reasonable accommodation for a person with disabilities. For example, a person with a mobility impairment may request a reasonable accommodation in order to complete the coordinated entry process at a different location. |
| 16. | CoC’s access points provide connections to mainstream and community-based emergency assistance services such as supplemental food assistance programs and applications for income assistance. |

### Access Models.

| 17. | CoC’s access points provide virtual entry where individuals and families experiencing a housing crisis may present for initial assessment screening (e.g. a 211 or other hotline systems that screens and directly connects callers to appropriate crisis housing and service providers in the area). |
| 18. | CoC has multiple access points, each assigned to a specific sub-region within the CoC. |
| 19. | CoC has partnered with neighboring CoCs to create a single access point covering the multi-CoC region. |
| 20. | The CoC has multiple access points to facilitate access, coordinate entry processes, and improve the quality of information gathered for the following subpopulations:  
- Adults without children;  
- Adults accompanied by children;  
- Unaccompanied youth;  
- Households fleeing or attempting to flee domestic violence; or  
- Persons at risk of homelessness. |
| 21. | CoC has a “no wrong door” approach in which a homeless family or individual can present at any homeless housing and service provider in the geographic area. |
### Prevention Services.

22. CoC’s CE process includes separate access point(s) for homelessness prevention so that people at risk of homelessness can receive urgent services when and where they are needed. If separate access points for homelessness prevention services exist in the CoC, written CE policies and procedures describe the process by which persons will be prioritized for referrals to homelessness prevention services.

*HUD Coordinated Entry Notice: Section II.B.8*

### Safety Planning.

23. Victim service providers funded by CoC and ESG program funds are not required to use the CoC’s coordinated entry process, but CoC- and ESG-funded victim service providers are allowed to do so. Or, victim service providers may use an alternative coordinated entry process for victims of domestic violence, dating violence, sexual assault, and stalking.

*Note – if an alternative CE process is used for victims of domestic violence, dating violence, sexual assault and stalking, that alternative process must meet HUD’s minimum coordinated entry requirements.*
**C. ASSESSMENT**

### Assessment Process.

1. CoC consistently applies one or more standardized assessment tool(s), applying a consistent process throughout the CoC in order to achieve fair, equitable, and equal access to services within the community.

   **HUD Coordinated Entry Notice:** Section II.B.2.a

2. CoC’s written policies and procedures describe the standardized assessment process, including assessment information, factors, and documentation of the criteria used for uniform decision-making across access points and staff.

   **HUD Coordinated Entry Notice:** Sections II.B.2.g.1 and II.B.3

3. CoC maintains written policies and procedures that prohibit the coordinated entry process from screening 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 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 or history of not being a leaseholder, or criminal record.

   **HUD Coordinated Entry Notice:** Section II.B.4

### Assessor Training.

4. CoC provides training opportunities at least once annually to organizations and or staff persons at organizations that serve as access points or administer assessments. CoC updates and distributes 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.

   **HUD Coordinated Entry Notice:** Section II.B.14
5. CoC’s coordinated entry process training curricula includes the following topics for staff conducting assessments:
   - Review of CoC’s written CE policies and procedures, including any adopted variations for specific subpopulations;
   - Requirements for use of assessment information to determine prioritization; and
   - Criteria for uniform decision-making and referrals.

   **Required**

   **ASSESSMENT NOTES**

   HUD Coordinated Entry Notice: Section II.B.14

<table>
<thead>
<tr>
<th>Client-Centered.</th>
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<td>6. Participants must be informed of the ability to file a nondiscrimination complaint.</td>
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   **Required**

   **ASSESSMENT NOTES**

   HUD Coordinated Entry Notice: Section II.B.12.g

<table>
<thead>
<tr>
<th>Participant Autonomy.</th>
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<tr>
<td>7. CoC coordinated assessment participants are freely allowed to decide what information they provide during the assessment process, to refuse to answer assessment questions and to refuse housing and service options without retribution or limiting their access to other forms of assistance. Written policies and procedures specify the conditions for participants to maintain their place in coordinated entry prioritization lists when the participant rejects options.</td>
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   **Note – Programs may require participants to provide certain pieces of information to determine program eligibility only when the applicable program regulation requires the information to establish or document eligibility.**

   **Required**

   **ASSESSMENT NOTES**

   HUD Coordinated Entry Notice: Section II.B.11

<table>
<thead>
<tr>
<th>Privacy Protections.</th>
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<tr>
<td>8. CoC has established written policies and procedures concerning protection of all data collected through the CE assessment process.</td>
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   **Required**

   **ASSESSMENT NOTES**

   HUD Coordinated Entry Notice: Section II.B.12

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<tr>
<td>9. CoC has established written policies and procedures establishing that the assessment process cannot 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.</td>
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   **Required**

   **ASSESSMENT NOTES**

   HUD Coordinated Entry Notice: Section II.B.12.f
### Assessment Process.

10. CoC uses locally specific assessment approaches and tools that reflect the characteristics and attributes of the CoC and CoC participants.

11. CoC uses a valid, tested, and reliable assessment process which gathers only enough participant information to determine the severity of need and eligibility for housing and related services.

12. CoC uses a phased approach to assessment which progressively collects only enough participant information to prioritize and refer participants to available CoC housing and support services.

13. CoC employs a phased approach to assessment which segments the collection of participant information into the following stages:
   - **Initial Triage** – resolving the immediate housing crisis; identification of the CoC crisis response system as the appropriate system to address the potential participant’s immediate needs.
   - **Diversion and/or Prevention Screening** – examination of existing CoC and participant resources and options that could be used to avoid entering the homeless system of care.
   - **Crisis Services Intake** – information necessary to enroll the participant in a crisis response project such as emergency shelter or other homeless assistance project.
   - **Initial Assessment** – information to identify a participant’s housing and service needs with the intent to resolve participant’s immediate housing crisis.
   - **Comprehensive Assessment** – information necessary to refine, clarify, and verify a participant’s housing and homeless history, barriers, goals, and preferences. Assessment information supports the evaluation of participant’s vulnerability and prioritization for assistance.
   - **Next Step/Move On Assessment** – information revealed or known after an Initial Assessment is conducted when that new information may suggest a revised referral strategy. Or, re-evaluating participants who have been stably housed for some time and who may be ready for less intensive housing and service strategies.

14. CoC employs a Housing First oriented assessment process which is focused on rapidly housing participants without preconditions.
### C. ASSESSMENT

#### Assessor Training.

15. All staff administering assessments use culturally and linguistically competent practices, including the following:
   - CoC incorporates cultural and linguistic competency training into the required annual training protocols for participating projects and staff members; and
   - Assessments use culturally and linguistically competent questions for all persons that reduce cultural or linguistic barriers to housing and services for special populations.

16. All assessment staff are trained on how to conduct a trauma-informed assessment of participants. Special consideration and application of trauma-informed assessment techniques are afforded victims of domestic violence or sexual assault to help reduce the chance of re-traumatization.

17. All Assessment staff are trained on safety planning and other next step procedures if safety issues are identified in the process of participant assessment.

#### Client-Centered.

18. Physical assessment areas are made safe and confidential to allow for individuals to identify sensitive information or safety issues in a private and secure setting.

19. Assessment questions are adjusted according to specific subpopulations (i.e. Youth, Individuals, Families, and Chronically Homeless) and responses to questions. For example, if a participant is under the age of 18 questions related to Veteran status and experience with the armed services can be skipped.

20. Assessment questions and instructions reflect the developmental capacity of participants being assessed.

21. CoC’s assessment process incorporates a person-centered approach, including the following:
   - Assessments are based in part on participant’s strengths, goals, risks, and protective factors.
   - Tools and assessment processes are easily understood by participants.
   - Assessments are sensitive to participants’ lived experience.
   - Participants are offered choice in decisions about location and type of housing.
   - Participants are able to easily understand to which program they are being referred, what the program expects of them, what they can expect of the program, and evidence of the program’s rate of success.
### Incorporating Mainstream Services.

22. CoC includes relevant mainstream service providers in the following activities:
- Identifying people at risk of homelessness;
- Facilitating referrals to and from the coordinated entry process;
- Aligning prioritization criteria where applicable;
- Coordinating services and assistance; and
- Conducting activities related to continual process improvement.

23. CoC has established written CE policies and procedures describing how each participating mainstream housing and service provider will participate, including the process by which referrals will be made and received.

### Assessment Process.

24. CoC uses a publicly available, rather than locally specific, standardized assessment tool(s) to facilitate their assessment process (e.g. VI-SPDAT or vulnerability index-service prioritization decision assistance tool).

25. CoC allows Veteran Affairs (VA) partners to conduct assessments and make direct placements into any homeless assistance program, with the method for doing so included in the CoC’s coordinated entry policies and procedures and written standards for affected programs.

### Street Outreach.

26. Street outreach activities incorporate the assessment process, in part or whole, into street outreach activities or separate the assessment process so that it is only conducted by assessment workers who are not part of street outreach efforts.
## Core Requirements.

1. 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 CoC for all populations.
   - CoC’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.

   *Note – Refer to HUD Prioritization Notice: CPD-16-11 for detailed guidance on prioritizing persons experiencing chronic homelessness and other vulnerable homeless populations in permanent supportive housing.*

   **HUD Coordinated Entry Notice: Section II.B.3**

2. CoC’s written CE policies and procedures include the factors and assessment information with which prioritization decisions are made for all homeless assistance.

   **HUD Coordinated Entry Notice: Section II.B.3**

## Emergency Services.

3. CoC’s written CE policies and procedures clearly distinguish between the interventions that **will not** be prioritized based on severity of service need or vulnerability, such as entry to emergency shelter, allowing for an immediate crisis response, and those that **will** be prioritized, such as permanent supportive housing (PSH).

   **HUD Coordinated Entry Notice: Section II.B.7**
**D. PRIORITIZATION**

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<thead>
<tr>
<th><strong>Nondiscrimination.</strong></th>
<th>ASSESSMENT NOTES</th>
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<tr>
<td>4. CoC does not use data collected from the assessment process to discriminate or prioritize households for housing and services on a protected basis, such as race, color, religion, national origin, sex age, familial status, disability, actual or perceived sexual orientation, gender identify or marital status. CoC’s written policies and procedures for CE document how determining eligibility is a different process than prioritization.</td>
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<td><em>Note – In certain circumstances some projects may use disability status or other protected class information to limit enrollment, but only if Federal or State statute explicitly allows the limitation (e.g. HOPWA-funded projects may only serve participants who are HIV+/AIDS).</em></td>
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<tr>
<td>HUD Coordinated Entry Notice: Sections I.D and II.B.2.g(2)</td>
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<td>5. CoC’s written CE policies and procedures document process for participants to file a nondiscrimination complaint.</td>
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<td>HUD Coordinated Entry Notice: Section II.B.12.g</td>
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<tr>
<td>7. CoC’s written policies and procedures document conditions under which participants maintain their place in coordinated entry prioritization lists when the participant rejects referral options.</td>
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<tr>
<td>HUD Coordinated Entry Notice: Section II.B.9</td>
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<th><strong>Prioritization List.</strong></th>
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<td>8. If the CoC manages prioritization order using a “Prioritization List,” CoC extends the same HMIS data privacy and security protections prescribed by HUD for HMIS practices in the HMIS Data and Technical Standards.</td>
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<td>9. If separate access point(s) for homelessness prevention services exist in the CoC, written CE policies and procedures describe the process by which persons will be prioritized for referrals to homelessness prevention services.</td>
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<td>HUD Coordinated Entry Notice: Section II.B.8</td>
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### Prioritization List.

10. CoC has established a community-wide list of all known homeless persons who are seeking or may need CoC housing and services to resolve their housing crisis. The community-wide list generated during the prioritization process, variously referred to as a “By Name List,” “Active List,” or “Master List,” provides an effective way to manage an accountable and transparent prioritization process.

### Prioritization Factors.

11. CoC uses any combination of the following factors to prioritize homeless persons:
   - Significant challenges or functional impairments, including physical, mental, developmental, or behavioral health challenges, which require a significant level of support in order to maintain permanent housing.
   - High utilization of crisis or emergency services to meet basic needs.
   - Extent to which persons, especially youth and children, are unsheltered.
   - Vulnerability to illness or death.
   - Risk of continued homelessness.
   - Vulnerability to victimization, including physical assault, trafficking, or sex work.

**HUD Coordinated Entry Notice: Section II.B.3**

### Prioritization Process.

12. CoC identifies a prioritization entity, agency, or other decision-making entity empowered by the CoC to manage the process of determining and updating participant prioritization for available CoC housing and supportive services.

13. In cases where the assessment tool does not produce the entire body of information necessary to determine a household’s prioritization, either because of the nature of self-reporting, withheld information, or circumstances outside the scope of assessment questions, the CoC allows case workers and others working with households to provide additional information through case conferencing or another method of case worker input.

14. CoC maintains a prioritization list such that participants wait no longer than 60 days for a referral to housing or services. If the CoC cannot offer a housing resource to every prioritized household experiencing homelessness within 60 days or less, then the CoC adjusts prioritization standards in order to more precisely differentiate and identify resources for those households with the most needs and highest vulnerabilities.
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<th><strong>D. PRIORITIZATION</strong></th>
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<td>15. 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.</td>
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<td><strong>Prioritization Process.</strong></td>
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<td>16. CoC establishes scoring criteria that translate the participant’s current living situation and barriers impacting participant’s ability to obtain and/or maintain housing into a numerical score that can also be used to inform the referral process.</td>
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### Referrals to Participating Projects.

1. CoC’s CE process includes uniform and coordinated referral process for all beds, units, and services available at participating projects within the CoC’s geographic area for referral to housing and services.
   
   **HUD Coordinated Entry Notice: Section II.B.3**

2. CoC and projects participating in the coordinated entry process do not screen potential project participants out for assistance based on perceived barriers related to housing or services.
   
   **HUD Coordinated Entry Notice: Section II.B.3**

3. CoC- and ESG-program recipients and subrecipients use the coordinated entry process established by the CoC as the only referral source from which to consider filling vacancies in housing and/or services funded by CoC and ESG programs.
   
   **HUD Coordinated Entry Notice: Section I.B**

### Nondiscrimination.

4. CoC and all agencies participating in the coordinated entry process comply with the equal access and nondiscrimination provisions of Federal civil rights laws.
   
   **HUD Coordinated Entry Notice: Sections I.D and II.B.3**

5. CoC’s referral process is informed by Federal, State, and local Fair Housing laws and regulations and ensures participants are not “steered” toward any particular housing facility or neighborhood because of race, color, national origin, religion, sex, disability, or the presence of children.
   
   **HUD Coordinated Entry Notice: Sections I.D and II.B.3**
### Referrals to Participating Projects.

6. CoC maintains and annually updates a list of all resources that may be accessed through referrals from the coordinated entry process.

7. Each CoC project establishes and makes publicly available the specific eligibility criteria the project uses to make enrollment determinations.

8. Non HUD-funded CoC agencies participating in the coordinated entry process fill project vacancies only through referrals from the referring agency/entity.

9. CoC’s written CE policies and procedures include standardized criteria by which a participating project may justify rejecting a referral.

10. CoC’s written CE policies and procedures document uniform process for managing rare instances of referral rejection, as well as the protocol the coordinated entry process must follow to connect the rejected household with a new project.

11. Upon referral, CoC participants receive clear information about the project they are referred to, what participants can expect from the project, and expectations of the project.

12. CoC identifies a referral entity, agency, CoC-subcommittee, or other decision-making entity empowered by the CoC to manage the process of referring participants to available CoC housing and supportive services.

13. If a CoC participant is prioritized for permanent supportive housing (PSH) but no PSH resources are available, that participant is offered any other CoC resource available in the CoC’s geographic area.

14. CoC establishes a minimum set of participant information associated with a referral and which will be shared by a referring agency/entity with the project receiving the referral.

15. CoC establishes alternate processes to identify suitable options when projects reject a participant and when participants reject a project.
16. CoC employs a ‘Housing Navigator’ function to ensure efficient and effective enrollment, and subsequent movement from one CoC project to another. While specific ‘Housing Navigator’ functions will vary from CoC to CoC, typical duties include the following:

- Work closely with referral agencies regarding eligibility determination.
- Develop a Housing Stability Plan.
- Complete housing applications.
- Perform housing search and placement.
- Outreach to and negotiations with landlords.
- Assisting with submitting rental applications and understanding leases.
- Addressing barriers to project admissions.

### Participant Autonomy.

17. CoCs incorporate a person-centered approach into the referral process. That approach is documented in CoC’s written policies and procedures for coordinated entry management. A person-centered approach includes:

- 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.

### Referrals to Participating Projects.

18. CoC establishes referral zones or referral regions within the geographic area of the CoC. These referral zones are designed to avoid forcing persons to travel or move long distances to be assessed or served.

19. CoC transmits participant referral information electronically, via the CoC’s HMIS or other data management system.
### Core Requirements.

1. When using an HMIS or any other data system to manage coordinated entry data, CoC ensures adequate privacy protections of all participant information per the HMIS Data and Technical Standards at (CoC Program interim rule) 24 CFR 578.7(a)(8).

   **HUD Coordinated Entry Notice: Sections II.B.3 and II.B.13**

### Privacy Protections.

2. CoC’s written CE policies and procedures include protocols for obtaining participant consent to share and store participant information for purposes of assessing and referring participants through the coordinated entry process.

   **HUD Coordinated Entry Notice: Section II.B.12**

3. CoC prohibits denying services to participants if the participant refuses to allow their data to be shared unless Federal statute requires collection, use, storage, and reporting of a participant’s personally identifiable information (PII) as a condition of program participation.

   **HUD Coordinated Entry Notice: Sections II.B.12.c and II.B.13**

4. If using HMIS to manage coordinated entry functions, CoC ensures all users of HMIS are informed and understand the privacy rules associated with collection, management, and reporting of client data.

   **HUD Coordinated Entry Notice: Section II.B.12**

### HMIS Use.

5. CoC uses HMIS as part of its coordinated entry process, collecting, using, storing, sharing, and reporting participant data associated with the coordinated entry process.

### Recommended Privacy Protections.

6. CoC only shares participant information and documents when the participant has provided written consent.
### Data Systems Management.

7. CoC imports and exports data to support collaboration between homeless service providers and mainstream resource providers (Medicaid, criminal justice re-entry programs, healthcare services, etc.).

8. CoC integrates data between multiple data systems to reduce duplicative efforts and increase case coordination across providers and funding streams.

9. CoC manages and maintain a list of referral resources in a systematic way that encourages high data quality and utilizes the AIRS Taxonomy to ensure uniformity in naming and describing resources.

#### HMIS Functionality.

10. CoC automates coordinated entry processes including resource prioritization, prioritization list management, and eligibility determination.
# Evaluation

## Core Requirements.

1. CoC consults with each participating project and project participants at least annually to evaluate the intake, assessment, and referral processes associated with coordinated entry. Solicitations for feedback must address the quality and effectiveness of the entire coordinated entry experience for both participating projects and households.

   **HUD Coordinated Entry Notice: Section II.B.15**

## Evaluation Methods.

2. CoC ensures through written CE policies and procedures the frequency and method by which the CE evaluation will be conducted, including how project participants will be selected to provide feedback, and must describe a process by which the evaluation is used to implement updates to existing policies and procedures.

   **HUD Coordinated Entry Notice: Section II.B.15**

## Privacy Protections.

3. CoC ensures adequate privacy protections of all participant information collected in the course of the annual coordinated entry evaluation.

   **HUD Coordinated Entry Notice: Section II.B.12**

## Evaluation Methods.

4. CoC incorporates system performance measures or other evaluation criteria into their required annual coordinated entry evaluation plan.
5. CoC ensures that evaluation is part of the implementation planning process from the inception of CE:
   • Determine which aspects of the effectiveness of the system will be measured.
   • Determine which aspects of the process will be evaluated for fidelity to the policies and procedures.
   • Determine how to gather data to track the selected measures.
   • Determine whether and how to use the evaluation results to inform other aspects of the system planning and monitoring.

Stakeholder Consultation.
6. CoCs employ multiple feedback methodologies to ensure participating projects and households have frequent and meaningful opportunities for feedback. Feedback methodologies include the following:
   • Surveys designed to reach either the entire population or a representative sample of participating providers and households;
   • Focus groups of five or more participants that approximate the diversity of the participating providers and households; and
   • Individual interviews with participating providers and enough participants to approximate the diversity of participating households.
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RECOMMENDATION TO LEADERSHIP BOARD:

DEVELOPED BY:
EveryOne Home Staff/Governance Charter, 3/13/18

VOTE TO RECOMMEND WITH AMENDMENTS:
System Coordination Committee, 3/14/2018
13 yes, 0 no, 0 abstain
To be reviewed at 6 months, 9/2018

INTERIM APPROVAL:
Interim approval carried by Director of System Coordination until Leadership Board 4/26/2018

BACKGROUND
EveryOne Home, Alameda County’s collective impat organization for ending homelessness and HUD Continuum of Care Lead, is charged with the oversight and management of the Housing Crisis Response System, as detailed in the EveryOne Home Governance Charter. The Housing Crisis Response System Manual is intended to contain the policies and standards that guide the operation of the Housing Crisis Response System. When necessary, the Manual may contain guidelines or procedures required to operate a standardized countywide system.

PURPOSE
The purpose of this procedure is to summarize the authority and procedures by which policies, standards, guidelines or procedures are proposed, reviewed, revised and adopted for the Housing Crisis Response System and, if appropriate, included in the Housing Crisis Response System Manual.

DEFINITIONS
Policy: A formal, brief, and high-level statement or plan that embraces an organization’s general beliefs, goals, objectives, and acceptable procedures for a specified subject area. Policies always state required actions and may include pointers to standards. Policy attributes include the following:
- Require compliance (mandatory)
- Failure to comply results in disciplinary action
- Focus on desired results, not on means of implementation
- Further defined by standards and guidelines

Standard: A mandatory action or rule designed to support and conform to a policy.
- A standard should make a policy more meaningful and effective.
• A standard must include one or more accepted specifications for hardware, software, or behavior.

**Guideline:** General statements, recommendations, or administrative instructions designed to achieve the policy’s objectives by providing a framework within which to implement procedures.
• A guideline can change frequently based on the environment and should be reviewed more frequently than standards and policies.
• A guideline is not mandatory, rather a suggestion of a best practice. Hence “guidelines” and “best practices” are interchangeable

**Procedures:** Procedures describe the process: who does what, when they do it, and under what criteria. They can be text based or outlined in a process map. Represent implementation of Policy.
• A series of steps taken to accomplish an end goal.
• Procedures define “how” to protect resources and are the mechanisms to enforce policy.
• Procedures provide a quick reference in times of crisis.
• Procedures help eliminate the problem of a single point of failure.
• Also known as a SOP (Standard Operating Procedure)

**Work Instructions:** Describe how to accomplish a specific job. Visual aid, various forms of job aids, or specific assembly instructions are examples of work instructions. Work instructions are specific.

**Forms and Other Documents:** Forms are documentation that is used to create records, checklists, surveys, or other documentation used in the creation of a product or service. Records are a critical output of any procedure or work instructions and form the basis of process communication, audit material, and process improvement initiatives.

**AUTHORITY AND PURVIEW**
The following EveryOne Home Committees and entities have the authority to request, develop, propose and adopt policies, standards, guidelines and procedures for the Housing Crisis Response System Manual and operations:

1. The EveryOne Home Leadership Board has the authority to review, revise, and adopt policies, standards, guidelines, and procedures for the Housing Crisis Response System. The Leadership Board is primarily focused on creating policies and guidelines.
2. The EveryOne Home System Coordination Committee has the authority to review, develop, and recommend policies, standards, guidelines, and procedures to the EveryOne Home Leadership Board for adoption. The System Coordination Committee is primarily focused on developing and recommending standards and guidelines to Leadership Board.
3. The EveryOne Home HUD CoC Committee has the authority to review, develop, and recommend policies, standards, guidelines and procedures governing HUD CoC projects to the EveryOne Home Leadership Board for adoption and to request joint action by the System Coordination Committee which holds the same authority.
4. Contracting agencies have the authority to set policies on funding and eligible activities of that funding.
5. Government contracting agencies, programs participating in the operation of the Housing Crisis Response System, and Implementation and Learning Communities have the authority to review, develop, and adopt procedures for performing the functions and operations of the system. These entities also have the authority to request the development, revision, or clarification of policies or standards by the System Coordination Committee, HUD CoC Committee, and the Leadership Board.

6. Any individual, organization, agency or entity in Alameda County has the authority to request the review or development of any policy, standard, procedure, guideline included in the System Manual or practiced by the Housing Crisis Response System.

7. The EveryOne Home System Analyst has the authority to recommend changes to the standard Assessment.

8. The Director of System Coordination has the authority to make minor changes and corrections to the manual, forms, and guidance documents for clarification purposes or to ensure that procedures reflect actual practice. The Director also has the authority to approve emergency or interim changes if the System is out of compliance or if a time-sensitive development requires an immediate policy, standard, guideline or procedure. Any interim policies, standards, guidelines or procedures must be discussed and approved at the next regular or extraordinary meeting of System Coordination Committee and/or Leadership Board.

PROCEDURE

1. Adoption of revisions, additions, and deletions to System Manual by Leadership Board:
   a. At a minimum of one time per year, System Coordination Committee and the HUD CoC Committee jointly submit the System Manual to Leadership Board for review with recommendations for adoption of any revisions, additions, or deletions to policies and standards.
   b. Using the voting procedure outlined in the Governance Charter, the Leadership Board votes whether or not to adopt the recommendations.
   c. Recommendations that are approved by vote are adopted and included in the Manual.
   d. For recommendations not approved, the Leadership Board then votes whether to send the recommendation back to System Coordination Committee for reconsideration.
   e. If Leadership Board votes not to send the item back to Committee, the Committee cannot take further action on the item unless granted approval by the Leadership Board.

2. Review, development, and recommendation of policies, standards, guidelines, procedures or practices by the System Coordination Committee:
   a. To initiate the review or development of a policy, standard, guideline, or procedure included in the System Manual or practiced by the Housing Crisis Response System, a formal request is submitted by completing the EveryOne Home Improvement Request. Any individual, organization or agency can submit a request.
   b. At each meeting of the System Coordination Committee:
      i. Director and/or Chair presents the current Improvement Schedule and any new Improvement Requests that were submitted.
c. If calendared on the Improvement Schedule, the Committee empowers the Director of System Coordination to initiate and coordinate a process to research, develop, and propose an improvement:
   i. At the time of calendaring, Committee Members provide guidance to the Director of System Coordination on any specific process, timeline, or stakeholders to involve. Committee Members indicate if they are interested in participating in the process for the specific issue and what role they are interested in taking.
   ii. Director of System Coordination coordinates a process by which the policy, standard, guideline or procedure is reviewed and a proposal for improvement is developed.
   iii. The development process may include: review or audit of current or proposed policy and best practices, working groups with members of System Coordination Committee and other stakeholders, discussion with Implementation and Learning Communities, focus groups with consumers, and consultation with contracting agencies, responsible organizations, and funders.
   iv. Director of System Coordination and stakeholders involved in the process designate Proposal Representatives to present the proposal to the System Coordination Committee.

d. If the development process results in a proposal to the System Coordination Committee, the Committee uses the voting process outlined in the Governance Charter and the following procedure to consider the proposal and vote to recommend it to Leadership Board for adoption:
   i. Director of System Coordination or Proposal Representative present the proposal to the System Coordination Committee.
   ii. Director of System Coordination offers analysis or recommendations on the proposal to the Committee.
   iii. Committee asks clarifying questions.
   iv. Committee decides to vote on proposal as is, or to offer amendments.
   v. If the Committee decides to vote on the proposal as written, then the Committee takes a vote. If vote passes, the proposal is presented as a recommendation to the Leadership Board at the next scheduled meeting.
   vi. If the Committee decides to offer amendments, amendments are offered to the Director or Proposal Representative. If the Director or Proposal Representative accept the amendments, then the Committee takes a vote. If vote passes, the
proposal with amendments is presented as recommendation to the Leadership Board at the next scheduled meeting.

vii. If vote does not pass, the Committee votes whether or not to re-calendar the item. If the Committee re-calendars the item, they instruct the Director to take the proposal back into development and provide specific suggestions for how to improve the proposal.

viii. The same item can only come before the System Coordination Committee twice.

3. Joint Action by System Coordination Committee and HUD CoC:
   a. Joint action for the review or development of policies, standards, procedures or guidelines can be initiated by submitting the EveryOne Home Request for Improvement form and indicating the preference for joint action.
   b. The request will be reviewed by the Director of System Coordination and, if appropriate, forwarded to the System Coordination Committee for consideration at the time of calendaring. If Joint Action is granted then the Director of System Coordination will be instructed to include the HUD CoC in the process for development and recommendation of the policies.
Federal regulations identify the HUD Continuum of Care (CoC) as the body responsible for operating a Continuum of Care, coordinating a housing and service system, operating an HMIS, and developing policies governing the operations of Coordinated Entry. The regulations further require that the CoC designate a board to act on behalf of the CoC in fulfilling those responsibilities. The EveryOne Home Governance Charter designated the HUD CoC Committee as that board. The HUD CoC Committee has formally delegated the work of policy development to the System Coordination Committee in the Governance Charter. This report outlines a procedure for setting policies governing Coordinated Entry that reflects current practice.

COORDINATED ENTRY POLICY-MAKING PROCEDURE

1. Any individual, organization, agency or entity in Alameda County can request the review or development of any Coordinated Entry policy.

2. To initiate the review or development of a policy for Coordinated Entry, a request can be submitted to the System Coordination Committee by emailing the Committee staff using contact information posted on the System Coordination Committee page of the EveryOne Home website.

3. All requests will be reviewed by Committee staff and Committee Chairs prior to the next meeting of the System Coordination Committee.
   a. Staff or Chairs will communicate directly with the person or entity requesting the policy in order to understand the details of the request, gather data, and inform them of any progress on their request.
   b. Staff or Chairs will communicate directly with any other relevant parties related to the policy request including funders, agency administrators, or service providers to make them aware of the request and gather information.
   c. SCC Chair and Vice-Chair will determine if the request:
      i. Should be considered by SCC and included in the upcoming SCC agenda as an urgent item, action item, or discussion item
      ii. Is already included on the SCC annual workplan or should be considered by SCC for inclusion on the annual workplan

4. If the policy request is added to an SCC meeting agenda or the SCC annual workplan, the requestor and relevant stakeholders will be informed and may be invited to participate in any process to revise or develop the policy.

5. If a policy request is taken up by the SCC, the specific process to review or develop a policy will be determined by the SCC and may include the following in order to be responsive and inclusive:
   a. Requestor and/or relevant stakeholders are invited to attend and/or present the item at a SCC meeting.
   b. EOH staff presents any information gathered related to the request.
   c. Committee Members determine what further action to take related to the request and provide guidance to staff on any specific process, timeline, or stakeholders to involve.
d. Staff coordinates a process by which the policy is reviewed and a recommendation is developed.
e. The review or development process may include: data queries of HMIS, review or audit of current or proposed policy and best practices, working groups with members of System Coordination Committee and other stakeholders, focus groups with consumers, and consultation with contracting agencies, responsible organizations, and funders. If the development process results in a policy recommendation to the System Coordination Committee, the Committee will vote using the standard voting SCC procedures. Votes taken at a meeting in which a quorum (50% +1 of membership) pass with a majority of those present plus 1.

6. Approved policies are included in the Coordinated Entry Manual and distributed to stakeholders. Any agency or organization participating in Coordinated Entry is responsible for operating in accordance with all Coordinated Entry policies included in the Manual.

7. HUD CoC Committee annually reviews the Coordinated Entry Manual for compliance with HUD requirements. If corrective action is necessary, the HUD CoC Committee identifies the specific compliance concerns and instructs SCC to take corrective action.

BACKGROUND ON REGULATORY REQUIREMENTS AND GOVERNANCE CHARTER
Per the Governance Charter, the HUD CoC Committee is required to have County and City system funders as voting members. In addition, the procedure for developing policies makes clear that any stakeholder can request policy/procedure development/improvements, including local funders or agencies administering contracts. It also articulates the expectation that funders of services that are governed by CE policies must be consulted and need to provide input to craft P&Ps that meet their requirements as well as those of CoC and ESG. In cases of conflicts between funding sources, CoC/ESG requirements must be met in the CE, which may mean that some projects funded by sources with a conflicting requirement would be exempt from that policy. The goal is to have that be rare.

EveryOne Home is Alameda County’s collective impact organization for ending homelessness and is also Alameda County’s HUD Continuum of Care Lead. EveryOne Home’s HUD Continuum of Care Committee is designated as the Continuum of Care Board required by the Interim Rule at §578.7(b) to act on behalf of the membership to ensure the Continuum of Care responsibilities are fulfilled.

Those responsibilities include operating a Continuum of Care (§578.7(a), including, in coordination with recipients of ESG, establishing and operating either a centralized or coordinated assessment system that provides an initial, comprehensive assessment of the needs of individuals and families for housing and services (§578.(a)(8), designating and operating an HMIS (§578.7(b), Continuum of Care planning (§578.7(c), including coordinating the implementation of a housing and service system within its geographic area that meets the needs of the homeless individuals (including unaccompanied youth and families (§578.7(c)(1), and preparing an application for Continuum of Care funds (§578.9).

In addition, the HUD CoC Committee is responsible for making decisions about HMIS management and administration under §580, a separate rule establishing regulations for HMIS issued by HUD in the implementation of the HEARTH Act of 2009. For Coordinated Entry, the HUD CoC Committee must also follow all HUD requirements and guidance including HUD Notice: CPD-17-01, which establishes additional requirements for a Continuum of Care Coordinated Assessment System and the Coordinated Entry Management and Data Guide published in October 2018.
The HUD Continuum of Care Committee has delegated a number of these responsibilities to entities, Committees and Workgroups, including the CoC Collaborative Applicant, HMIS Lead, NOFA Committee, Appeals Panel, HMIS Oversight Committee, and the System Coordination Committee.

System Coordination Committee is delegated certain responsibilities of the HUD COC Committee that require the coordination and implementation of a housing and service system within its geographic area, including the responsibility to:

1. Convene system-wide stakeholders for coordinated planning and improvement of the Housing Crisis Response System
2. Review the performance and operations of the Housing Crisis Response System to determine if they are:
   a. Consistent with approved principles, policies, and standards
   b. Fair and transparent
   c. Compliant with funding regulations
   d. Working well and meeting performance benchmarks
3. Adopt and recommend changes to policies, standards, procedures, resources, and tools in order to improve the Housing Crisis Response System
4. Fulfill designated responsibilities of the HUD CoC Committee, including the annual submission of the Housing Crisis Response System Manual and the HUD CE Compliance Review to the HUD CoC Committee for approval
5. Establish and convene subcommittees and working groups to facilitate coordination, effective operations, and on-going improvement

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1HUD CoC Committee has delegated the responsibility of adopting and recommending changes to policies, standards, procedures, resources, and tools in order to improve the Housing Crisis Response System, including Coordinated Entry. Approval of the Housing Crisis Response System Manual the HUD Coordinated Entry Compliance Review means that HUD CoC Committee has reviewed the policies annually for compliance with HUD requirements and has directed System Coordination Committee to take corrective action where necessary.
Application for System Coordination Committee Membership

Name __Kate Hart__________________________

Phone 1: (510)574-2250, ext.114    Phone 2: (510)316-9692

Address  1900 Mowry Ave Ste. 201 Fremont, CA 94538

Email  kateh@save-dv.org

Committee(s) you are interested in joining: System Coordination Committee

Relevant Experience and/or Employment (may attach a resume)

See attached

Why are you interested in EveryOne Home?

I believe it is critical for DV service providers to be working side by side with the homeless providers. Despite the restrictions that prevent DV shelters from participating in HMIS, both groups of providers are serving clients that can benefit from all of the services. There are not enough beds and resources on the DV side to meet all of the needs and there are DV survivors in the homeless system who would benefit from being referred to DV services. Right now, those cross referrals are not happening efficiently or effectively.

Area of expertise/contribution you feel you can make?

I’ve been working with DV survivors in Alameda County for 22 years. I have good historical knowledge of what services and resources have looked like and what has been lacking. I oversee SAVE’s domestic violence housing first program and can speak to what’s working and not working for DV survivors in that area. I have good connections in the statewide DV community and can tap into expertise from other areas of the state in regards to how other continuums of care are
meeting the needs of DV survivors. Additionally, SAVE has an extremely well respected DV counselor training program and I feel I can speak to the DV training needs of staff who are working in the CES.

Please complete and send by email to Julie Leadbetter at jleadbetter@everyonehome.org
Kate E. Hart  
41158 Roberts Ave.  
Fremont, CA  
(510) 316-9692 cell

Professional Experience

Director of Programs  
Safe Alternatives to Violent Environments  
July 2014 – Present

- Responsible for the program operational success of SAVE, ensuring seamless team management and development, program delivery, and quality control and evaluation of secondary prevention/intervention programs.
- Develop innovative programs identified in the strategic plan and that strengthen client-centered offerings.
- Provide oversight to existing programs and staff to ensure quality and contract compliance.
- Participate in agency planning and development as a member of the Management Team.

Director of Residential Services  
Safe Alternatives to Violent Environments (SAVE), Fremont CA  
July 2005-July 2014

- Responsible for management and daily oversight of SAVE's residential programs (transitional housing and 30 bed emergency shelter) including staffing, operations, budgeting, developing reports and policies, community outreach, and ensuring sufficient staff coverage.
- Responsible for management of SAVE’s Community Oriented Prevention Services Program (COPS) including coordination with local police departments and ensuring provision of Temporary Restraining Order Clinics.
- Responsible for day to day operations of 24 hour domestic violence crisis line and oversight of emergency services provided via the crisis line including provision of motel vouchers and emergency transportation.

Senior Case Manager  
SAVE, Fremont, CA  
June 2000-July 2005

- Responsible for day-to-day operations of WINGS, a 15 unit transitional housing program including recruitment, hiring, and supervision of staff.
- Responsible for ensuring that WINGS is meeting goals for program deliverables.
- Oversaw all facility property management issues including capital improvements.

Employability Case Manager  
SAVE, Fremont, CA  
February 2000-June 2000

- Provided employment focused case management services for residents of WINGS.
- Provided employability workshops.
- Served as agency liaison to CalWORKs Collaborative.
- Assisted Program Manager in day-to-day operations of WINGS.

Children’s Counselor  
SAVE, Fremont, CA  
June 1997-February 2000

- Provided WINGS children with individual and group counseling services.
• Provided WINGS mothers with individual and group counseling services.
• Provided advocacy and support services for mothers and children with schools and outside service providers.

Shelter Manager
Humboldt Women for Shelter, Eureka, CA
September 1995- January 1997
• Participated in the planning and establishment of a newly funded domestic violence shelter house including securing the site and recruiting and hiring staff.
• Responsible for day-to-day operations of the shelter house including supervision of staff and program planning.

Counselor/Advocate
Humboldt Women for Shelter, Eureka, CA
November 1994- September 1995
• Provided direct crisis intervention services to women and children including counseling, shelter, food and clothing.
• Assisted with the planning and provision of Certified Domestic Violence Counselor training program and supervision of crisis line volunteers.
• Responsible for maintaining 24-hour crisis line schedule.

Education/Training

Blue Shield Strong Field Leadership Development Program
Cohort 3
June 2013- December 2014

Humboldt State University
Arcata, CA
Bachelor’s Degree, Social Work, 1998

James Logan High School
Union City, CA
Graduated 1989
Application for System Coordination Committee Membership

Name  Helen Ayala

Phone 1  510-931-5997              Phone 2  510-786-1246

Address  20880 Baker Rd. Castro Valley, CA 94546

Email  helen@rubysplace.org

Committee(s) you are interested in joining: System Coordination Committee

Relevant Experience and/or Employment (may attach a resume)

I have worked with Ruby’s Place for a period of over 5 years. I have held different positions throughout my time at Ruby’s Place, starting off as an advocate and recently being promote to Shelter Manager. I have gained numerous skills throughout my time here and find myself to be passionate about the work we do and the population we serve.

Why are you interested in EveryOne Home?

I am interested in participating and being part of this process, so we can all better serve survivors fleeing domestic violence, human trafficking, sexual assault, etc. Our Executive Director, Sophora Acheson personally talked to me about this opportunity and asked me if I was up for the challenge, to which I responded positively to, as I understand how important it is for us to work together to assist the clients seeking help. I strongly believe my knowledge and years of experience working at an agency serving survivors can be utilized for this great purpose.

Area of expertise/contribution you feel you can make?

I’ve had the opportunity to learn and grow as a professional while working at a shelter that serves survivors of domestic violence and human trafficking. I have been providing direct services to our clients, focusing on a trauma informed care and crisis de-escalation. I am also a trained and certified Domestic Violence and Human Trafficking counselor to provide peer counseling, safety planning, crisis intervention/de-escalation for clients both in person and on a crisis call. I believe
I can be a great asset to the committee.

Please complete and send by email to Julie Leadbetter at jleadbetter@everyonehome.org
HELEN AYALA  
650.771.7066  
hc.ayala89@gmail.com

SKILLS

• Bilingual (English/Spanish)  
• Certified California Domestic Violence Counselor  
• Certified California Human Trafficking Counselor  
• Case Management Skills  
• Proficient in Microsoft Office  
• Strong Organizational and Team Building Skills  
• Ability to maintain confidentiality and take personal decisions  
• Experience in Crisis Intervention  
• Excellent written Communication Skills  
• Strong Belief in Victim’s Rights  
• Good Interpersonal and Oral Communication Skills  
• Compassionate and Caring Approach  
• Good Documentation Skills  
• Mandated Reporter/CPS reporting knowledge

EXPERIENCE

Ruby’s Place, Inc.  
Hayward, CA  
Shelter Coordinator  
June 2018–Present

• Enforce agency policies, procedures and protocols.  
• Collaborate with team members to accomplish agency objectives.  
• Utilize database forms and spreadsheets for accurate and efficient reporting.  
• Responsible for the capacity of the shelter as well as for the admittance of clients.  
• Manage, oversee and maintain daily operations of 42 bed 24/7 emergency shelter as well as client/staff relations.  
• Responsible for the hiring process and supervision of advocates.  
• Responsible for monthly/quarterly reports.

Ruby’s Place, Inc.  
Hayward, CA  
Bilingual Case Manager  
July 2016–Present

• Provide crisis intervention, guidance and supportive counseling.  
• Attend court hearings to provide support to clients and provide necessary information regarding services.  
• Conduct intake with client when entering program and assist them develop a case plan.  
• Assess and resolve client concerns through advocacy and intervention.  
• Provide housing assistance and referrals for legal aid, health and mental care and other social service needs.  
• Responsible for clerical detail, documentation, charting notes and researching resources.  
• Attend professional trainings and meetings as required.  
• Provide translation services between client and outside agencies when needed.  
• Conduct individual sessions and write weekly progress notes.
• Provide crisis intervention in order to address immediate needs.
• Effectively manage client case files and reporting systems as directed by Director of Programs.
• Conduct life skills group for all clients residing in the shelter.
• Assist clients in procuring appropriate supportive services, such as, counseling services, job readiness, skills training, employment assistance, mental health services and available benefit programs.

Ruby’s Place, Inc. Hayward, CA
Shelter Advocate October 2013–February 2016
• Managed a high volume of incoming crisis line phone calls, providing individualized referrals and/or phone counseling to callers in an emotional crisis.
• Performed intakes with incoming residents regarding mental health, past domestic violence and homelessness, and past or current drug use.
• Supported residents in navigating and accessing services.
• Appropriately addressed conflicts between residents such as physical and verbal altercations, destruction of property, theft, etc.
• Upheld shelter guidelines and policies such as resident curfew and chore completion.
• Filed reports of suspected child abuse with Child Protective Services.
• Provided emotional support to residents.
• Maintained the general cleanliness of the shelter facility.
• Provided Case Management to shelter residents by assisting them in formulating relevant and realistic Case Plan Goals tailored to their individual needs and abilities. Advocated on behalf of residents to gain access to services with other service providers.

Ruby’s Place, Inc. Hayward, CA
Prevention and Outreach Coordinator July 2015–December 2015
• Provided preventive and informative presentations to local schools on Teen Dating Violence and Domestic Violence.
• Represented Ruby’s Place and the services provided at community events (such as fairs, chamber of commerce events, etc.).

Juvenile Justice Center, Transition Center Department San Leandro, CA
Intern/Front Desk September 2013–May 2014
• Provided Case Management for at-risk youth exiting the juvenile detention system by assessing what type of services the client needs to stay out of the system. These services included therapy, advocacy, mentorship programs, education or vocational programs, tattoo removal, after school programs, and various other resources tailored to at-risk youth.
• Translated meetings between monolingual Spanish-speaking parents and Probation Officers, School District Officials and Public Health Nurses.
• Electronically filed between 40-50 client intakes per week.
• Managed phone lines and provided parents with information regarding their child’s arrests.
EDUCATION

Devry University
Justice Administration
Newark, CA
January 2016–Present

Heald College
Associates in Applied Science in Criminal Justice
Hayward, CA
March 2012–October 2013

Helen Ayala
To: System Coordination Committee  
From: EOH Staff  
Re: Notes from the March 2019 Presentation to HUD CoC Committee  
Presented by: Director of System Coordination on behalf of System Coordination Committee

The HUD CoC delegated the authority for Coordinated Entry and the Housing Crisis Response System policy-setting to the System Coordination Committee.

This included the responsibility for developing the manual, maintaining an updated version, bringing it before the HUD CoC as requested, minimally annually.

Policies that are adopted by the SCC are understood to be operational after adoption and are immediately included in the manual and a new version is posted on the website.

The process that SCC uses to develop and adopt policy is inclusive of all necessary stakeholders be they committee members, funders, consumers, and any interested public participant.

SCC makes every effort to include HUD CoC members in joint conversations or actions at all phases of policy development.

It is the expectation that all stakeholders, but especially SCC and HUD CoC members, during the process of policy development are concerned with and watching for HUD compliance and also looking out for how to strengthen, leverage, and maximize our HUD dollars and programs.

It is the intention of the SCC and staff to bring forward policies that are well developed, engage all stakeholders, and are compliant.

So, the reason for bringing it before the HUD CoC is in order for HUD CoC to exercise your responsibility for ensuring that CE and the system is in compliance or flag areas of concern, not to debate or revise any particular policy here today.

We’re asking the committee to:

1. Acknowledge the work of the SCC in creating the manual
2. Discuss any HUD Compliance concerns, and direct staff or SCC to take action related to these concerns (HUD Compliance Review is coming up and we could do this together at this time)
3. Approve continued use of the Manual and policies within
History of the Housing Crisis Response System Manual

1. Draft 1: November 2017-January 2018
   a. CE Chapter of the Housing Crisis Response System was drafted by a consultant based largely on system design documents and early ideas about how the CE system would look and operate upon implementation.
   b. It was descriptive of what the system would or may look like, and many parts of the system design changed and some pieces were not determined through the system design.
   c. Implementation of CE changed some of the system design as determined by contracting, funding, and capacity.
   d. Manual needed to be rewritten to match implemented design and to be written as standards by which operators are required to act, not simply a description.

2. Draft 2: January 2018 – December 2018
   a. Housing Crisis Response System Manual was re-drafted based on actual implementation and written in the form of standards.
   b. New draft was created by:
      i. EOH staff collected current standards and policies to be included.
      ii. System Coordination Committee identified, developed, and adopted policies that did not yet exist or ones to be developed.
      iii. System Coordination Committee developed and adopted many policies over the course of the year.
      iv. Policies were then included in the Manual.
   c. Policy gaps:
      i. SCC recognized that there was a need to publish the System Manual, however many sections were in development or simply placeholders.
      ii. EOH staff was directed to create a publishable version of the manual and gave specific instructions to staff on what the published document should include/exclude.
      iii. Direction was also discussed with County agencies related to EOH contract deliverables and needs of funders.

3. Alameda County Housing Crisis Response System Manual V.2019.0215
a. Directed to publish the Alameda County Housing Crisis Response System Version 2109.02.15 and distribute broadly so that operators and system stakeholders can use
b. Directed to remove draft sections (text in red) that had not yet been approved by SCC and to identify sections that still need to be collected/developed/written with the term “TBD – To Be Determined” in the Table of Contents

4. Process for further policy development
   a. SCC is looking forward to working with HUD CoC to determine a management entity and understands that one possible role of this entity will be the creation of draft policies for CE. Anticipates working very closely in the future with the CE Management Entity in policy development and proposals.
   b. In April, SCC will also be reviewing the gaps that exist in the manual and create a plan for addressing these gaps focusing heavily on the inclusion of existing policies that have yet to be collected and included.
   c. SCC will request from operational partners, such as Home Stretch, HMIS, prevention partners, and RRH funders, any information that should be included or referred to in the current manual. For example, the section on data and privacy is currently empty. Are there existing HMIS standards that should be referred to? Similarly, policies already developed for integration of Vets, need to be collected and included.
   d. SCC has identified 10 major policies for development to be spearheaded by SCC in 2019 and included them on the SCC work plan.
   e. Any direction given by HUD CoC for policy development related to the HUD Compliance Review

**HUD CoC Compliance Concerns to be Addressed by SCC:**
1. Grievance Policy
2. Coordinated Entry Prioritization
   a. Standard assessment
   b. Criteria for uniform decision making across access points
3. DV Procedures and any language related to VAWA
4. Emergency transfer policy – DV