ALAMEDA COUNTY
HOUSING CRISIS RESPONSE SYSTEM MANUAL
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1 Using the System Manual

1.1 Purpose of the System Manual
The purpose of EveryOne Home’s Housing Crisis Response System Manual is to provide a general overview and description of Alameda County’s system for responding to homelessness and to outline the governance, principles, performance measures, and policies that guide the system. The System Manual is not intended to provide detailed operating procedures, rather to establish a framework and standards within which participating programs operate and provide services. However, when available and necessary to support standard and fair practice across the County, the System Manual may include standard forms and operating procedures for particular components of the system.

1.2 Developing the System Manual
The EveryOne Home System Coordination Committee, in partnership with funders and operators of the Housing Crisis Response System, has been authorized by the HUD CoC to develop and adopt policies and procedures for the Housing Crisis Response System. Those policies are documented in this manual, which is also reviewed and approved, at minimum, annually by the HUD CoC Committee to ensure compliance with federal requirements of the Department of Housing and Urban Development. Alameda County’s Housing Crisis Response System, and the System Manual, are work-in-progress. As policies and procedures are developed and amended, the Manual will be updated. New versions of the System Manual will be posted on the EveryOne Home website and distributed via the EveryOne Home distribution list.

1.3 Recent Updates to the System Manual
This is the Alameda County Housing Crisis Response System Manual (V.2019.12.09). This version of the System Manual has been developed and adopted by the System Coordination Committee. Updates in this version include:

- 6.2.8 Procedures for Unaccompanied Minor Youth
- 7.2.3.3 Status on the By Name List
- 7.2.3.4 Procedures for Updating Status on the By Name List
- 12 Matching to Permanent Supportive Housing

All organizations and agencies funded to provide services as part the Housing Crisis Response System are expected to operate according to this version of the System Manual.

2 Alameda County’s Housing Crisis Response System
The Housing Crisis Response System is Alameda County’s overall system of housing services and programs that are coordinated to prevent and end homelessness, including but not limited to:

- Information & Referral
- Coordinated Entry
- Homelessness Prevention Services
- Street Outreach
- Drop-In Centers
- Housing Resource Centers
- Housing Problem Solving Services
- Housing Navigation Services
- Warming and Seasonal Shelters
- Year-Round Shelters
- Navigation Centers
- Transitional Housing
- One-Time Financial Assistance
- Time-Limited Rental Assistance
- Tenant Support Services
- Permanent Subsidized Housing
- Permanent Supportive Housing
- Landlord Liaison Services and Incentive Programs
- Flexible Housing Subsidies
- Housing-Focused Health, Human, Social, and Legal Services
- Homeless Management Information System

The Housing Crisis Response System works urgently to address housing crises for all Alameda County residents who are homeless or at risk of homelessness, across all regions of the County. The goal is for each and every individual or family that seeks assistance through the Housing Crisis Response System to have a safe, supportive and permanent place to live.

Coordinated Entry is the front door and the central organizing feature of the Housing Crisis Response System. The purpose of Coordinated Entry is to assess the needs of people in crisis, connect them to available support, and track the outcomes and performance of the system. Coordinated Entry provides a standard and transparent way for the Housing Crisis Response System to effectively:

- Identify people in Alameda County who are experiencing a housing crisis and assess their needs
- Problem solve and mobilize immediate solutions to stay housed or find a safer and more permanent place to live without the need for on-going support from the Housing Crisis Response System
- Connect people to health, social, legal, financial services that are critical to resolving their housing crisis and that support on-going housing stability
- Comprehensively assess households with the greatest needs, then prioritize and match them to the most supportive services and housing programs for which they are eligible
- Manage access to and outcomes of a dedicated portfolio of countywide services and housing programs
- Ensure that services and housing resources are being used in the most effective ways and available to the people who need them the most
- Collect and analyze client and system-level data, and use that information to improve performance, inform policy, and strengthen advocacy to end homelessness

The communication backbone of the Housing Crisis Response System is the countywide, shared database called the Homeless Management Information System (HMIS). Essential to providing individualized, confidential, and responsive support to all people seeking assistance, the database ensures timely information and facilitates effective service, by allowing the Housing Crisis Response System to:

- Document and retrieve critical and up-to-date information to help households in crisis
- Understand the specific needs of households seeking assistance and make effective referrals and matches to services and housing programs
- Coordinate the provision of services and care across the County, focusing on the household’s needs and protecting client privacy and confidentiality
- Collect system-level data and analyze the overall Housing Crisis Response System’s performance

HMIS ensures that the Housing Crisis Response System can be responsive on both the client-level and the systems-level: by providing valuable information to directly support individuals and families in crisis, as well as, local system data to support reporting, fundraising, decision-making, performance evaluation, public policy and advocacy.

3 Governance
EveryOne Home—Alameda County’s collective impact organization and Continuum of Care lead agency—is responsible for the governance, planning, oversight and overall performance of the Housing Crisis Response System as a fundamental strategy of Alameda County’s plan to end homelessness, known as the EveryOne Home Plan. The Plan was adopted by the Alameda County Board of Supervisors, all 14 cities in the county and over 70 non-profit homeless and housing providers. The EveryOne Home Governance Charter outlines how EveryOne Home members and stakeholders:

- Govern the collective impact initiative to end homelessness
- Meet the federally-defined responsibilities of operating a HUD Continuum of Care as found in the Continuum of Care Program Rule at 24 CFR Part 578
- Meet federal, state, and locally defined responsibilities of operating a Housing Crisis Response System and its associated programs
- Plan, monitor, and evaluate the policies, standards, operations and performance of the Housing Crisis Response System

The Governance Charter establishes a participatory committee structure to ensure that the system operates in compliance with all regulatory requirements and is guided by the unified purpose of keeping and getting people housed. All committees are responsible for engaging individuals and communities across the county in the collective effort to end homelessness. Under the Governance Charter and the Committee Structure:

- The EveryOne Home Leadership Board and the Collective Impact/CoC Membership Committees are responsible for overall performance, governance, strategy, policy and resource management of the Housing Crisis Response System.
- The RBA Committee is responsible for evaluating performance of the Housing Crisis Response System.
- The HUD CoC Committee is responsible for ensuring that the Housing Crisis Response System complies with HUD requirements and conducts the work of the HUD NOFA and HMIS Oversight Subcommittees.
- The System Coordination Committee is responsible for improving performance of the Housing Crisis Response System and for overseeing HUD CoC delegated responsibilities of Coordinated Entry.
- The Advocacy Committee is responsible for promoting policy that enhances the Housing Crisis Response System’s performance.
- The Funders Collaborative is responsible for allocating resources and managing funding in a manner that is consistent with the collective impact strategic direction and policies of the Housing Crisis Response System.

4 GUIDING PRINCIPLES

Housing First and Low Barrier

- All homeless people are housing-ready right away and that the stability provided by permanent housing can transform lives.
- The first step to ultimately ending homeless people’s poverty is to end their homelessness right away. The focus is on ending as many people’s homelessness as quickly as possible given available resources.
Be Easily Accessible through a process that is Consistent, Transparent, Standardized and Equitable

- Incorporating multiple entry points, including a county-wide hotline and Housing Resource Centers located in each major region of the County.
- Providing Outreach Services, so people least likely to seek services independently have access to the resources of the system. Outreach teams will be trained to “bring the front door” to homeless people by performing all key CE functions in the field, rather than requiring clients to travel to a service site.
- Eliminating “side doors” by requiring providers to accept referrals from a centralized priority list, greatly enhancing consistency and data collection across the system and improving how we understand and address homelessness in Alameda County.
- Reducing clients’ confusion by screening, assessing, and referring clients with standardized protocols, tools, and processes.
- Ensuring that customer experience and resource eligibility is the same at every Coordinated Entry access point.

Keep Participant Safety, Confidentiality, Resiliency and Choice at the Forefront

- Information will be collected in a respectful, strengths-based and trauma-informed manner.
- Tools and decision/referral processes will require only as much information as is needed to assist or refer clients.
- With client consent and in accordance with applicable laws and regulations, information will be shared within the system to coordinate care and limit the number of times people have to repeat their stories.
- Client choice and the client’s service and personal networks will inform options for services, housing, and referrals.
- Throughout the system, safety screening and links to domestic violence services will be integrated.

Prioritize the Most Vulnerable

- Homeless people who are the most vulnerable and with the highest need will be prioritized for resources.
- Coordinated Entry will match the level of service intervention to the level of client need to resolve their housing crisis. CE believes that clients are resilient and frequently able to end their homelessness with well-targeted, time-limited resources.
- Assessment is ongoing and more intensive services will be offered as needed. Clients can opt for less intensive support than what is offered.

Provide Housing Problem Solving for those at risk of homelessness

- No one should ever have to enter the homeless services system to access resources. Strengths-based support and problem-solving services will be provided for people who are not yet literally homeless to help them maintain safe housing options without entering the homeless system.
- People are resilient, especially when offered a little help. Housing Problem Solving will use strengths-based conversations and, if resources permit, modest one-time resources to help people find creative but safe solutions for their housing crises.

Use Data and Stakeholder Experience to Drive Continuous Improvement
Achieving systems-alignment in Alameda County and optimal effectiveness will be a process and will require time and a commitment to continuous improvement.

Resources will be allocated to ensure that the Coordinated Entry process is managed and well-coordinated. Data will be used to assess the impacts and outcomes of the system to inform changes.

Stakeholders -- including service providers, funders, and people with lived experience of homelessness - will have an ongoing role in the oversight and refinement of the Coordinated Entry process.

Everyone—including those experiencing homelessness and those working to end it— deserves to understand how Coordinated Entry works and to participate in the decision-making process. Stakeholders will be given ongoing opportunities to participate in and learn about the ongoing Coordinated Entry effort.

Opportunities for involvement will be inclusive, open to as many affected stakeholders as resources allow and not limited to just those programs mandated to participate in Coordinated Entry.

5 COORDINATED ENTRY

5.1 PURPOSE
As the front door to Alameda County’s Housing Crisis Response System, the purpose of Coordinated Entry is to provide an accessible, fair, and transparent way for people experiencing a housing crisis to be connected to housing support. Since there is not enough housing or services for everyone in need, the main job of Coordinated Entry is to problem solve, assess, and match people to any available resources for which they are eligible, and to ensure that the people with the highest needs are prioritized.

5.2 TARGET POPULATION
Anyone experiencing homelessness or at-risk of homelessness in Alameda County must be able to access Coordinated Entry, be screened, and appropriately referred in a timely manner. Coordinated Entry uses standard and fair processes to assist all populations and to offer available services and housing resources to prioritized, eligible households.

5.3 GEOGRAPHIC COVERAGE
Coordinated Entry must serve the geographic entirety of Alameda County and ensure that access to services is consistent and equitable, regardless of one’s geographic location or the access point through which one seeks services.

5.4 COORDINATED ENTRY PROCESS
Alameda County’s Coordinated Entry operates through a network of Access Points (2-1-1, Housing Resource Centers, Outreach Teams) and Resource Zones (Administrative Coordination) to assess, prioritize, and match eligible people to a variety of housing programs including: homelessness prevention.
services, legal services, housing resource centers, housing navigation services, shelter, transitional housing, rapid rehousing, and permanent affordable and supportive housing.

Coordinated Entry must cover the geographic area of Alameda County, be easily accessed by individuals and families seeking housing or services, be well advertised, and use standard processes that include a comprehensive assessment tool to fairly determine need, priority, and eligibility for housing or services.

Any agency or person authorized to conduct any part of Coordinated Entry must follow the standard Coordinated Entry process procedures and use the tools approved for use in Alameda County by EveryOne Home. The standard components of Coordinated Entry are:

<table>
<thead>
<tr>
<th>ALAMEDA COUNTY</th>
<th>STANDARD COORDINATED ENTRY PROCESS</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>SCREENING</td>
</tr>
<tr>
<td>2-1-1 Call Center</td>
<td>Safety Screening</td>
</tr>
<tr>
<td>Outreach</td>
<td>X</td>
</tr>
<tr>
<td>Housing Resource Centers</td>
<td>X</td>
</tr>
<tr>
<td>RESOURCE ZONES</td>
<td>X</td>
</tr>
</tbody>
</table>

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5.5 ACCESS POINTS
Access Points are the places—either virtual or physical—where an individual or family seeks assistance from the Housing Crisis Response System.

<table>
<thead>
<tr>
<th>ACCESS POINTS</th>
<th>COVERAGE AND TARGET POPULATIONS</th>
</tr>
</thead>
<tbody>
<tr>
<td>2-1-1</td>
<td>24/7 Call Center offers Countywide virtual services to anyone experiencing or at-risk of homelessness. Conducts Screening and Housing Problem Solving.</td>
</tr>
<tr>
<td>Housing Resource Centers</td>
<td>Physical sites located across the County offering in-person and virtual services to homeless households. Housing Resource Centers may also provide services at specifically designate outreach locations. Conduct Screening, Housing Problem Solving, and CE Assessment for Literally Homeless. Supports Resource Zone Coordinators with Prioritization and Matching.</td>
</tr>
<tr>
<td>Outreach</td>
<td>Countywide outreach teams offering in-person and virtual services to homeless households who cannot or do not access services at HRCs. Conducts Screening, Housing Problem Solving and CE Assessment for Literally Homeless. Supports Housing Resource Centers and Resource Zone Coordinators with Prioritization and Matching.</td>
</tr>
</tbody>
</table>

5.6 RESOURCE ZONES
For the purpose of coordination, administration, and matching to housing resources, Alameda County’s Housing Crisis Response System is organized into Resource Zones. Resource Zone Coordinators are responsible for facilitating access to and coordinating the services and housing programs located in or associated with their Resource Zone. Resource Zone Coordinators are also responsible for ensuring that the activities of the Resource Zone are consistent with countywide standards and coordinated with countywide partners as necessary and required. Resource Zone Coordinators must hold regular Resource Zone Coordination meetings and case conferences to support successful matching, discuss operational improvements, and promote on-going housing stability.
<table>
<thead>
<tr>
<th>RESOURCE ZONE</th>
<th>ZONE COORDINATOR</th>
<th>COORDINATES FOR AFFILIATED HOUSING RESOURCE CENTERS</th>
<th>MATCHES TO</th>
</tr>
</thead>
<tbody>
<tr>
<td>Oakland Adults</td>
<td>City of Oakland</td>
<td>Downtown Oakland HRC (BACS) East Oakland HRC (EOCP)</td>
<td>Housing Navigation Year Round Shelter Transitional Housing Rapid Rehousing Certain SSI Advocacy and Behavioral Healthcare Programs</td>
</tr>
<tr>
<td>North County Adults</td>
<td>City of Berkeley</td>
<td>North County HRC (BFHP)</td>
<td></td>
</tr>
<tr>
<td>North County Families</td>
<td>City of Oakland</td>
<td>North County Family Front Door (EOCP, BFWC)</td>
<td></td>
</tr>
<tr>
<td>Mid County Adults + Families</td>
<td>Abode Services</td>
<td>Mid-County West - Alameda HRC (BFWC) Mid-County West – San Leandro HRC (BFWC) Mid-County East HRC (Abode Services)</td>
<td></td>
</tr>
<tr>
<td>East County Adults + Families</td>
<td>Abode Services</td>
<td>Tri-Valley County HRC (Abode Services)</td>
<td></td>
</tr>
<tr>
<td>South County Adults + Families</td>
<td>Abode Services</td>
<td>Tri-City HRC (Abode Services)</td>
<td></td>
</tr>
<tr>
<td>Countywide Adults + Families</td>
<td>Alameda County Health Care Services Agency, Home Stretch</td>
<td>Countywide</td>
<td>Permanent Supportive Housing HUD VASH Tenancy Sustaining Services</td>
</tr>
<tr>
<td>Countywide Veterans</td>
<td>Operation Vets Home</td>
<td>Countywide</td>
<td>Rapid Rehousing HUD VASH GPD Shelter</td>
</tr>
</tbody>
</table>

### 5.7 Countywide Resource Registry

The Countywide Resource Registry is a centrally managed and updated database of services and housing programs in Alameda County targeted to people experiencing homelessness. The Countywide Resource Registry is maintained in a shared database—either HMIS or a comparable shared information system.
designed for the specific purpose of maintaining a real-time registry of inventory, eligibility and criteria for placement, upcoming or current vacancies, and documentation of matching.

Resource Zone Coordinators are responsible for ensuring that the housing services and programs available within their Resource Zone are appropriately listed in the Countywide Resource Registry and maintained with up-to-date information necessary for referral and matching.

The Resource Registry will be developed within the HMIS system or a related database and will include all housing services and programs within the Alameda County Housing Crisis Response System. Until that time Resource Zones must maintain an interim registry with information including:

- Inventory of all housing services and programs available to the target population served by the Resource Zone
- Identification of housing services and programs are matched to through Coordinated Entry
- Identification of housing services and programs that are accessible using another referral process and the specifics of that referral process
- Specific prioritization, preference, eligibility and program requirements guiding a referral or match to a housing service or program
- Tracking of referrals and matches to the housing services and programs

All eligibility and program criteria must be consistent with countywide Coordinated Entry standards and approved by EveryOne Home and funder/contracting agency.

6  STANDARDS FOR COORDINATED ENTRY ACCESS & ASSESSMENT

6.1  STANDARD ACCESS

Coordinated Entry must cover the geographic area, be easily accessed by individuals and families seeking housing or services, be well advertised, and use standard processes that include a comprehensive assessment tool to fairly determine need, priority, and eligibility for housing or services.

All Access Points must offer the same Coordinated Entry process and be usable by all people who may be experiencing homelessness or at risk of homelessness. Any variations to the standard Coordinated Entry process, Access Points, or Assessment approaches must be approved by EveryOne Home and included in the System Manual.

All Access Points must ensure that:

- The same Coordinated Entry process is offered at all Access Points and be usable by all people who may be experiencing homelessness or at risk of homelessness.
- Households who present at any Access Point, regardless of whether it is an Access Point dedicated to the population to which the household belongs, can easily access an appropriate assessment process that provides Coordinated Entry with enough information to make prioritization decisions about that household.
Households who are included in more than one population can be served at all of the Access Points for which they qualify as a target population. For example, a parenting unaccompanied youth who is fleeing domestic violence could choose to be served at various Access Points.

Variations to standard access are offered 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.

Access points must be accessible to individuals with disabilities, including accessible physical locations for individuals who use wheelchairs, as well as people who are least likely to access homeless assistance.

Variations to the standard Coordinated Entry process, Access Points, or Assessment approaches are approved by EveryOne Home and included in the System Manual.

In order to facilitate access, improve quality of information gathered, remove population-specific barriers to accessing the Coordinated Entry process, and account for the different needs, vulnerabilities, and risk factors of the certain populations, Alameda County has allowed for the following targeted approaches:

- 2-1-1 is a virtual Access Point designated to provide an initial screening, a brief housing problem solving conversation, and a referral or warm-transfer to the appropriate next step of Coordinated Entry/Housing Crisis Response System.

- Outreach Teams operate as mobile Access Points and are closely linked to all parts of the Coordinated Entry process. All participating street outreach staff, regardless of funding source, offer the same standardized Coordinated Entry processes as site-based Access Points, including offering the Coordinated Entry Assessment. Outreach workers also support the matching process by locating a client when a service or program becomes available.

- Housing Resource Centers operate as site-based Access Points targeted to specific populations and are located across the County:
  - Three Housing Resource Centers are specifically designated Access Points for adults without children.
  - One Housing Resource Center is a specifically designated Access Point for adults accompanied by children.
  - Four Housing Resource Centers serve all populations seeking assistance.

- Unaccompanied and transitional aged youth have specifically designated Outreach Workers and Assessors.

- Households fleeing domestic violence, dating violence, sexual assault, stalking, or other dangerous or life-threatening conditions (including human trafficking) are given the option to seek housing assistance through the Coordinated Entry process or through the County’s network of domestic violence or victim services organizations.

- Persons at risk of homelessness are screened, offered Housing Problem Solving and immediately referred to Flexible Housing Funds, ESG Prevention Funds, or Homelessness Prevention services without the need to conduct the Coordinated Entry Assessment.

- Veterans can access Coordinated Entry through standard Access Points or, if they are seeking services through the Veterans Administration, Swords to Ploughshares, or other Veteran-specific organizations can be assessed by staff of these organizations who are certified to conduct Coordinated Entry Assessments without the need to go to another Access Point.

### 6.2 Standard Access & Assessment Procedures
All Access Points must offer the same Coordinated Entry process and be usable by all people who may be experiencing homelessness or at risk of homelessness. In order to ensure a standard and fair process and provide consistent and appropriate services, Access Points must use the following procedures and the standard forms and tools of Coordinated Entry.

6.2.1 SCREENING

6.2.1.1 Safety Screening

The Safety Screening is a standard set of questions that must be used by all Access Points to identify any emergency health or safety needs that a household seeking assistance may have, and to make an immediate connection to the appropriate response, including police, medical, or domestic violence services.

Persons fleeing domestic violence or seeking victim services, who are not in need of immediate emergency services, must be offered the option to seek housing assistance through the Housing Crisis Response System, through the County’s network of domestic violence or victim services organizations, or through both.

For those wishing to be assisted through the domestic violence or victim services organizations, they must be immediately and directly connected to a regional Domestic Violence hotline. Each regional DV hotline is available on a 24-7 basis.

All Access Points must use the Safety Screening included in the Coordinated Entry Access Packet or HMIS.

6.2.1.2 Housing Crisis Screening

For households whose immediate safety is confirmed and who choose to receive services from the Housing Crisis Response System, a standard Housing Crisis Screening must be used with each household to identify basic eligibility information and ensure immediate connection to the appropriate next step of the Coordinated Entry process. The Housing Crisis Screening follows a standard set of questions to determine if the household lives in Alameda County, which City or region of the County they are connected to, the type of household seeking assistance (adults, families, youth), and their current housing situation.

6.2.1.3 Referral

For households living out of County, the following steps must be taken:

- A referral is made to 2-1-1 in the appropriate County
- If appropriate out-of-county information is unknown by staff, a referral is made to Alameda County 2-1-1 for out-of-county information
- A standard Referral Summary should be given to the household

For households who are literally homeless in Alameda County, the following steps must be taken:

- Housing Problem Solving is conducted with the household
- The Assessment is conducted with the household, or a referral or warm hand-off is made to all Access Points for which their household type is served and at which they can participate in Assessment, in the region of their choice. These Access Points include Housing Workshops, Housing Resource Centers, and Outreach.
For households at risk of homelessness in Alameda County, the following steps must be taken:

- Housing Problem Solving is conducted with the household
- A referral is made to Homelessness Prevention Services, including a referral to agencies that administer ESG prevention funds for households at imminent or immediate risk of homelessness
- A standard Referral Summary should be given to the household

All Access Points must use the Housing Crisis Screening included in the Coordinated Entry Access Packet or HMIS.

### 6.2.2 HOUSING PROBLEM SOLVING

#### 6.2.2.1 Housing Problem Solving

All households seeking assistance must be offered Housing Problem Solving assistance. Housing Problem Solving assistance is a brief, focused intervention that does not require ongoing case management, but does require some support or limited, targeted interaction to help facilitate the resolution of a household’s housing crisis. Housing Problem Solving participants may be offered the following range of one-time assistance to address issues related to homelessness or imminent homelessness:

- A structured Housing Problem Solving conversation with staff to devise an actionable plan
- Referral to eviction prevention, legal, and financial services
- Relocation services
- Family reunification and mediation or conflict resolution
- Move-in assistance
- Flexible funds
- ESG and Other Prevention Funds

At minimum, All Access Points must use the Housing Problem Solving questions included in the Coordinated Entry Access Packet or HMIS and refer the households to any service or support that could assist the client to immediately avoid or exit homelessness.

#### 6.2.2.2 Flexible Funds for Housing Problem Solving

Resource Zone Coordinators and Housing Resource Centers have access to a flexible pool of funds to be used in support of Housing Problem Solving. Flexible Funds should be used when, in the course of a Housing Problem Solving conversation, staff assesses and determines that an individual/family would avoid homelessness and/or immediately end a homeless episode, and would not require ongoing support (housing navigation, case management, rapid rehousing interventions).

Staff that conduct Housing Problem Solving should assess the appropriateness of flexible funds using the following criteria:

- The individual/family has a one-time need that poses a barrier to accessing or maintaining housing
- Flexible funds are needed due to the barrier
- The individual/family has a mechanism to solve for the same need with their own resources and/or natural community supports in the future.
Funds are one-time, and categorized as follows:

- **Move-In Costs**: Eligible move-in costs including application fees, security deposit, first/last month rent, furniture set up, utilities start, etc.
- **Other Flexible Support**: Any immediate need for an individual/family that presents as a barrier to maintain housing or access immediate housing utilizing a life domains approach (physical, environmental, occupational, etc.). Examples of flexible support could include relocation support, legal fees, an outfit or tools to access employment, a public transportation ticket to get to an appointment, an out of pocket copay for a prescription; etc.

If Flexible Funds are deemed appropriate:

- A Flexible Funding Request is made by the direct staff to the HRC manager or Resource Zone Coordinator for review and approval.
- For move-in costs related to fees, deposit, rent, and utilities, payment will be made directly to the primary vendor. For other items the housing team will determine the most appropriate mechanism for payment.

**6.2.2.3 ESG Prevention Funds for Housing Problem Solving**

For Resource Zone Coordinators and Housing Resource Centers that have access to ESG Prevention Funds, these funds can be used in support of Housing Problem Solving in accordance with the County’s adopted policies and procedures for ESG Prevention Assistance which state:

Prevention assistance must be directed to persons who are not literally homeless but are at imminent risk of homelessness per the HUD Homeless definition (Category 2). Prevention assistance may include support to a household to retain its current housing or to move to other housing without having to become literally homeless. While the ESG regulations allow for ESG prevention to be provided to those categorized as “at-risk” but not necessarily at “imminent risk”, Alameda County ESG programs will target prevention services specifically to those that are at “immediate risk” defined as:

- An individual or family who will imminently lose their primary nighttime residence, provided that:
  - The primary nighttime residences will be lost within 14 days of the day of application for homeless assistance;
  - No subsequent residence has been identified; and,
  - The individual or family lacks the resources of support networks, e.g., family, friends, faith-based or other social networks, needed to obtain other permanent housing.

Within the category of “imminent risk” special attention and outreach will be done to target those households that are:

- Doubled up with family and friends, must move within 14 days and are seeking to enter shelter;
- Living in a hotel or motel using their own resources, must leave within 14 days, and are seeking to enter shelter;
- Living in their own housing, are being evicted for non-payment of rent, must leave within 14 days, and are seeking shelter;
- Fleeing domestic violence;
- Imminently leaving foster care or have recently left foster care and are at imminent risk of losing their current housing.

**6.2.2.4 Referral**
For households at risk of homelessness, Housing Problem Solving should focus on stabilizing their current housing situation, finding immediate or potential housing alternatives within their support systems, and making targeted referrals to housing, health, social, legal, and financial services that support housing stability.

For literally homeless households, Housing Problem Solving should focus on finding immediate or potential housing opportunities within their support systems, identifying short-term action steps to reduce barriers to housing, and making targeted referrals to housing, health, social, legal, and financial services that help the individual or family out of homelessness.

If the household’s housing crisis is not resolved through Housing Problem Solving:

At minimum, for households at risk of homelessness, the following steps must be taken:

- A referral is made to Homelessness Prevention Services, including a referral to agencies that administer ESG prevention funds for households at imminent or immediate risk of homelessness
- A standard Referral Summary should be given to the household

At minimum, for households who are literally homeless, the following steps must be taken:

- Assessment is offered to the household, or a referral or warm hand-off is made to all Access Points for which their household type is served and at which they can participate in Assessment, in the region of their choice. These Access Points include Housing Workshops, Housing Resource Centers, and Outreach.
- A standard Referral Summary should be given to the household

In addition, every effort should be made to provide up-to-date referral information to all households in crisis regarding services and programs that are available throughout the County including the broad range of health, housing, and human services available in Alameda County. These may include seasonal shelters, domestic violence shelters, legal services, case management services, financial support, and/or affordable housing programs that are not specifically matched to through Coordinated Entry process.

A standard Referral Summary should be given to the household to document referrals.

6.2.3 Coordinated Entry Assessment

The Coordinated Entry Assessment is the standard and comprehensive assessment tool used to assess and prioritize literally homeless households for homeless services and housing programs in Alameda County. For households unable to keep or find housing through Housing Problem Solving and who are literally homeless, the standard Coordinated Entry Assessment must be conducted.

6.2.3.1 Certified Assessors

Any person who administers Alameda County’s Coordinated Entry Assessment must receive approval, certification, and annual training from EveryOne Home or a designated training entity. The purpose of certification and training is to provide all staff administering assessments with access to information, materials, and standard tools by which assessments are to be conducted with fidelity to the Alameda County Coordinated Entry process.
Certified Assessors should be staff or subcontractors of Housing Resource Centers or specifically identified Outreach teams. When necessary to facilitate access or improve quality of information gathered through assessment or to remove population-specific barriers to accessing the Coordinated Entry Process and to account for the different needs, vulnerabilities, and risk factors of identified subpopulations, other designated staff or organizations may be certified to conduct assessments. Resource Zone Coordinators are responsible for coordinating Certified Assessors and assessment activities and for ensuring activities are in accordance with Coordinated Entry standards, policies, and procedures.

All CE Assessments must be conducted by Certified Assessors and they must use the standard process, tools and forms included in the Coordinated Entry Access Packet or HMIS.

6.2.3.2 **Universal ROI**

The Universal Release of Information documents or verifies permission to collect and share household information. The ROI must be explained and consented to by any new client prior to collecting any client information. For returning clients, staff must ensure that the Universal ROI is current and remedy any expired ROIs at each contact with the household.

6.2.3.3 **Client Profile**

The Client Profile is used to identify the individual or head of household seeking assistance and to gather basic household, demographic, and contact information. Client Profile information should be reviewed and verified with the client during each contact.

At minimum, client contact information must be verified and/or updated at each contact.

6.2.3.4 **Coordinated Entry Assessment**

The Coordinated Entry Assessment documents the individual or family’s current housing situation, housing history, barriers to housing, as well as, vulnerabilities and assets that may impact their ability to get and stay housed. In addition to providing the information necessary for prioritization, eligibility, and matching, the Coordinated Entry Assessment should also be used to understand the specific needs of the individual or family and to make targeted, immediate, and on-going referrals.

Households must be assessed by Certified Assessors using the standard Coordinated Entry Assessment in the Coordinated Entry Access Packet or HMIS.

6.2.3.5 **Referral**

The Coordinated Entry Assessment is completed by summarizing the steps that were taken in the conversation and any immediate action steps identified by the household, providing targeted referrals to resources that support the action steps and, if necessary, connecting the household to the next part of the Coordinated Entry process.

At minimum, upon completion of the Assessment, the following steps must be taken:

- The household is assigned to a Resource Zone
- The household is referred to an appropriate Housing Resource Center of their choice for follow-up
- A standard Referral Summary should be given to the household
In addition, every effort should be made to provide up-to-date referral information to all households in crisis regarding the Referred Services and Housing Programs that are available throughout the County. Referred Services and Housing Programs include the broad range of health and human services available in Alameda County and may include seasonal shelters, domestic violence shelters, legal services, case management services, financial support, and/or affordable housing programs that are not specifically matched to through Coordinated Entry process.

6.2.3.6 TBD: Right to Refuse Information

6.2.4 Staying in Touch
All homeless households who have been assessed with the Coordinated Entry Assessment are included in the countywide By Name List, assigned a Resource Zone, and referred to a Housing Resource Center of their choice. Resource Zone Coordinators are responsible for ensuring that the homeless households on the By Name List are actively outreached to and have the ability to easily access and maintain a helping relationship with the Housing Resource Center of their choice.

6.2.5 Giving a Clear Message
All clients who are assessed should be provided with the following information describing the next steps of the Coordinated Entry process and how to stay in touch with their Housing Resource Center:

- Standard Coordinated Entry marketing materials
- Housing Resource Center hours of operation, walk-in hours, and telephone numbers
- Info on how to update their contact information
- Info on how to update their assessment information
- Info about the prioritization process
- Info about the matching process
- A clear message that due to the limited resources available compared to the number of people who need them, most households who are assessed will not be prioritized for a housing service or program, and even those who are highest need may need to wait a period of time.

6.2.6 Updating Client Information
Households should be encouraged to stay in touch frequently and to update their information as often as needed. It is particularly important to update client contact information regularly and to update any change in circumstances may impact a household’s prioritization or eligibility for services or housing programs. Assessment information must be updated by a Certified Assessor and Coordinated Entry Assessments should be updated if:

- The household has a significant or life changing event with the potential to impact the household’s prioritization
- New and relevant information is reported by household or verified by 3rd party

New assessment information can be verified by:

- Case notes by HRC staff
- An external form on agency letterhead accompanied with an ROI from an agency with permissions to share private information and either form listed below:
  - A revised or new paper assessment, or
  - An internal form completed by HRC staff

6.2.7 Transferring Between Resource Zones/Housing Resource Centers
Transfers are necessary to ensure that the Coordinated Entry system covers the entire geography of the Alameda County and that households can be served by HRCs and Resource Zones in a fair, consistent, and client-centered manner.

- A household cannot be assigned to multiple zones or served by multiple HRCs at the same time unless agreed upon by both HRCs. Similar services cannot be provided concurrently by multiple HRCs to one household.
- Zone/HRC transfers should occur if either the client or HRC requests a transfer for the following reasons:
  - Household’s composition or characteristics change (family, single, TAY) and an alternate Resource Zone would better serve the household
  - Household moves permanently from one region to another, or to where they are predominately staying or receiving services
  - A transfer is necessary to ensure safety of any member of the household
  - A transfer is necessary as part a reasonable accommodation request

- Transfers should be considered on a case-by-case basis, and every reasonable effort should be made by staff to inform the household of the possibilities and implications of the transfer and support the transfer process.

- The following specific procedures should be taken to ensure a successful transfer of services:
  - The transfer process is initiated by the HRC at which the client is currently receiving services. If a client presents at another HRC and expresses the desire to access services there, the new HRC may initiate a transfer by contacting the current HRC.
  - Current HRC Manager completes a transfer form and sends to Manager of new HRC.
  - New HRC Manager reviews form and approves.
  - Managers and/or staff directly serving the client from both HRCs create a transfer plan with client to ensure that the client is successfully transferred. Ultimate responsibility for the warm-hand off is that of the current HRC.
  - If the transfer requires the household to be transferred out of their assigned Resource Zone, the new HRC staff/manager changes the Resource Zone assignment in HMIS by updating the client’s Coordinated Entry Assessment.
  - For AC3 billing, the current HRC is allowed to bill for the overlap month and the subsequent month would be transferred to new HRC.

6.2.8 PROCEDURES FOR UNACCOMPANIED MINOR YOUTH

An unaccompanied minor (any youth between the ages of 13-18 years of age) who presents via walk in, telephone call to 211, or outreach at any Alameda County Housing Crisis Response System program will be immediately engaged with and asked whether they have a safe place to sleep indoors that evening.

- If the answer is ‘yes’, the engaging staff member will inquire if they need assistance getting to their place of residence or in need of assistance in any way.
- If the answer is "no," the youth will be referred to the nearest shelter program that serves minor youth for shelter intake and/or other resources that temporarily exit the youth from unsheltered homelessness.
  - As of this writing, Dream Catcher Youth Shelter, a program of Covenant House California, is the only shelter within the County of Alameda, located in Oakland for youth ages 13-18. Dream Catcher Youth Shelter does open intake 24 hours a day, 365 days a year. Their hotline number is: 800-379-1114. No Coordinated Entry assessment is necessary as a prerequisite for this referral; the goal is to provide safety first.
Additional programs that serve minor youth in Alameda County, should they become available, will be added to this policy.

Programs that do not serve homeless youth may not turn unaccompanied minors away without making this referral and will make every effort to ensure a warm handoff to Dreamcatcher staff.

Dreamcatcher will provide case management services and coordinate linkage or referral to Coordinated Entry using the following procedure:

- Dreamcatcher will do an assessment within 24 hours to evaluate appropriate referrals, including CFS when appropriate or requested by the youth.
- Regardless of referrals, family is notified within 48 hrs that the youth is in a shelter program and safe. The address of the program will not be shared until safety has been fully assessed.
- Once the minor has been offered shelter or other resources to temporarily exit them from unsheltered homelessness, Dreamcatcher will work with Coordinated Entry to conduct additional assessments and coordinate any available housing resources or flex funds, if appropriate.
- Minor youth have special considerations when it comes to privacy. If the youth consents, their data will be entered into HMIS. Programs may store data in proprietary programs that are not shareable with other organizations.

### 7 STANDARDS FOR COORDINATED ENTRY PRIORITIZATION

#### 7.1 PRIORITIZATION

Prioritization is the process by which a community determines one household’s level of need relative to all other households experiencing homelessness. Prioritization policies must be documented, publicly available and applied consistently throughout the County for all populations. The Coordinated Entry process must, to the maximum extent feasible, ensure that people with more severe service needs and levels of vulnerability are prioritized for housing and homeless assistance before those with less severe service needs and lower levels of vulnerability. Alameda County uses different prioritization processes for people who are literally homeless and those who are at-risk of homelessness. The Coordinated Entry prioritization policies are established by EveryOne Home with input from all community stakeholders.

#### 7.2 PRIORITIZATION OF LITERALLY HOMELESS HOUSEHOLDS

##### 7.2.1 PRIORITIZATION FACTORS USED FOR LITERALLY HOMELESS HOUSEHOLDS

Alameda County has established a set of prioritization factors to be used as the basis of prioritization of literally homeless households for services and housing programs. The factors considered in prioritization are:

<table>
<thead>
<tr>
<th>Prioritization Factors</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Household Characteristics</strong></td>
</tr>
<tr>
<td>▪ Children aged 5 or under</td>
</tr>
<tr>
<td>▪ Seniors</td>
</tr>
</tbody>
</table>
### Homeless History
- Unsheltered
- In emergency shelter
- Episodes of homelessness
- Length of time homeless

### Housing Barriers
- Time since last held a lease
- History of eviction
- History of incarceration/law enforcement involvement
- Income

### Vulnerability
- Emergency service utilization
- Functional impairment/disability
- Life-threatening illnesses or acute medical conditions
- Unsafe or risky survival strategies
- Households whose members have run away from home
- Chronic homelessness

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#### 7.2.2 Countywide By-Name List
The Countywide By-Name List is intended to be an up-to-date list of people who are literally homeless that allows the Housing Crisis Response System to know each person by name and facilitate decisions around how best to refer them to housing resources. Households at-risk of homelessness are not included on, nor prioritized for services, using the Countywide By Name List.

#### 7.2.3 Management of the Countywide By-Name List
The Countywide By-Name List is centrally managed by EveryOne Home, maintained in HMIS, and governed by all applicable privacy and security policies. EveryOne Home, Resource Zone Coordinators, and designated Matchers must work in close collaboration to ensure effective management of the By-Name List and application of uniform standards. All information gathered or exchanged through any part of the process of prioritization, including assessment, By Name List management and case conferencing, is subject to HMIS data privacy and security protections.

#### 7.2.3.1 Scoring & Ranking
The By-Name List includes, and ranks in order of priority, all literally homeless households who have been assessed using the Coordinated Entry Assessment.

Once the responses to the Coordinated Entry Assessment are entered into HMIS, the CE Assessment is scored using a standard scoring method. The scoring method gives higher scores to households based on the prioritization factors including household characteristics, the greatest number of vulnerabilities, longer histories of homelessness, and significant housing barriers.

Households are then ranked according to the assessment score, relative to other households, on the By Name List. Ranking of the By-Name List is dynamic, meaning a person’s position on the list may change due to their circumstances or the circumstances of others.
While the Coordinated Entry Assessment must be used as the basis of prioritization on the By Name List, the information gathered might 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 address one or more of the prioritization factors. For these reasons, additional information may be provided through case conferencing, 3rd party verification, and other methods of updating assessment information outlined in this manual.

Only information relevant to the prioritization factors may be used to for prioritization.

7.2.3.2 Non-disclosure of Score or Rank
Due to dynamic prioritization and the complex layering of eligibility and preferences, an individual’s assessment score or rank on the By-Name List is not a definitive indication of whether or not that household will receive services or housing in a given time frame. For this reason, all staff who have access to a household’s score or current rank on the list, must not disclose either to the household. Instead households must be offered any immediately available referrals and informed if they are matched to a service or housing programs.

7.2.3.3 Status on the By-Name List
The By-Name List is updated according to standard protocols in order to fairly and effectively offer services and housing programs to households in a timely manner. Status on the By Name List is determined by the following:

- Active
  - Households are included on the By Name List if they are literally homeless in Alameda County and have completed a CE Assessment
  - Have documented contact in HMIS including enrollments, services, and/or assessments within the prior six months

- Inactive
  - No documented contact in HMIS including enrollments, services, and/or assessments within the prior six months or five unsuccessful attempts to outreach them for service enrollment and/or a resource referral.
  - Moved out of county
  - Entered an institutional setting where they will be residing for more than 90 days
  - Deceased
  - Households can become “active” again on the By Name List by updating their CE Assessment

- Housed
  - Exited to permanent housing

7.2.3.4 Procedure for Updating Status on the By-Name List
- For all clients currently “active” on the By Name List
  - Review the CE Assessment and ensure the CE Assessment information is up-to-date.

- For any client who is housed, moved out of county, entered an institutional setting where they will be residing for more than 90 days, is deceased, has no documented contact in HMIS including enrollments, services, and/or assessments within the prior six months, or for whom five
unsuccessful attempts to outreach them for service enrollment and/or a resource referral have been made:

- They should be marked “inactive.”

For the remaining “active” clients:

- For any client with a CE Assessment older than six months:
  - Mark them “inactive”, or
  - Conduct a new CE Assessment
    - The information from the previous assessment will populate in the new assessment. Make sure the date of the assessment is the current date and update any additional information
    - If someone is living in emergency shelter, transitional housing, or rapid rehousing, their homeless living situation should be retained as “homeless”, but their length of time homeless should be updated.

### 7.2.4 By Name List Case Conferencing

Case conferences using the By Name List allow teams to focus resources, actively contribute to discussions, and work in an interdependent manner with the goal of housing the highest priority households. Case conferencing is also used to gather up-to-date information in order to fairly and accurately prioritize households. Resource Zone Coordinators are responsible for ensuring that case conferences operate using the following standards of practice:

#### 7.2.4.1 Convening

Resource Zone Coordinators are responsible for ensuring that Case Conferences are held and that the necessary agencies, organizations, and service providers participate. If necessary to ensure participation, a Resource Zone Coordinator could determine or seek support from another entity with convening power or authority. Conveners may include EveryOne Home, County government agencies, City government agencies, elected officials or trusted service providers. This also may include funders making Case Conference participation required by contract.

Resource Zones Coordinators should convene Case Conferences, at minimum, one time per month, and best practice would be bi-weekly. Resource Zone Coordinators may convene Case Conferences focused on a specific sub-population (families, chronic homeless, etc) or resource (PSH, shelter, etc) if necessary, however sub populations and specific resource matchers should be included in the primary Case Conference for the zone. For example, domestic violence providers, veteran service providers, and countywide zone coordinator/matchers should attend the primary Case Conference, in addition to any subpopulation meeting.

#### 7.2.4.2 Staffing

The Case Conference should be staffed and facilitated by the Resource Zone’s Matcher or other designated staff. One person with sufficient knowledge of the system and of client cases should facilitate. Staff with data entry capability should be on hand to perform HMIS updates and document case notes in real-time.

The countywide Zone Coordinator and/or Matchers should be in attendance for each zone case conference in order to coordinate matching to countywide resources such as permanent supportive housing, tenancy sustaining services, etc.
EveryOne Home staff should be in attendance to represent countywide system performance and analysis, manage countywide by name list issues, and support cross-zone communication and coordination.

**7.2.4.3 Representing Organizations**

Each Resource Zone should determine which organizations/zones should be represented in Case Conferences based on who serves the people for that zone. This may be a mix of agencies providing shelter, TH, housing navigation, outreach, and drop-in/ancillary services, and at a minimum those agencies participating in Coordinated Entry matching.

Resource Zones should work with stakeholders to determine which specific staff should be present at Case Conferences. Ideal attendees are those who have in-depth knowledge about the status, needs and preferences of each person being reviewed and who are also able to make decisions regarding provision of shelter, services or housing assistance. This may be a program director, program manager, coordinator, housing specialist or case manager. There should be at least one attendee from each organization.

Representatives should participate in all of their agencies’ cases, specifically describing who works with each client, where each client is in the housing process, and what issues or barriers they are encountering.

**7.2.4.4 Meeting Structure and Agendas**

Structure and agenda of the Case Conferences may change and should be responsive to the shifting needs of a region’s homeless population and available resources at any time.

All efforts should be made to structure agendas and provide remote technology to support effective, efficient, and broad participation of key providers and stakeholders. For example, by structuring the first section of each meeting to deal with issues of a sub population or providing a teleconference number or screen sharing.

Case Conference agendas should be standardized, simple, and to the point. The primary focus of case conference meetings are the individuals who are being discussed.

**7.2.4.5 Privacy**

Participants in case conferences should, at minimum, be included in the list of participating agencies covered by the Alameda County HMIS Universal Release of Information and agree to follow all other applicable privacy and security standards.

**7.2.4.6 Suggested Best Practices**

Other suggested best practices for case conferencing may include:

- Focus on highest-needs: With limited time, it is important to keep the primary focus on reviewing the most vulnerable people on the by-name list and/or those with greatest barriers to shelter and rapid placement in permanent housing.
- Standard Agenda: A standard agenda may include the following suggested items and topics:
  - Welcome & Introductions
  - Key System Updates: Be sure to keep these brief and include any critical system indicators, such as average length of time for all persons to access housing.
  - Case Conferencing: Person-specific updates and discussion.
  - Follow Up Items: General follow-up or action items identified during the meeting.
- **Client-Level Review**: Consider creating a standard set of elements to review for each person so providers can be prepared to effectively discuss cases. Below are suggested elements to review:
  - **Current status**: For example: active in shelter, active unsheltered, missing and whether that status has changed since the last case conference review.
  - **Person Preferences**: Housing plans and next steps should be guided by the person’s preferences.
  - **Critical Housing Placement Barriers**: Review and problem-solve any barriers to housing placement, including but not limited to mainstream benefits, healthcare, and document collection.
  - **Critical Service Barriers**: Review and problem-solve any challenges to connecting persons to critical services, including evaluating the possible use of flexible funding for Housing Problem Solving.
  - **Current Safety**: To the extent possible, ensuring any unsheltered person has a relatively safe place to stay tonight and in near term.
  - **Next Steps**: Identify any immediate or critical action items related to the person, including roles and timelines.
  - **Participating Agencies**: Due to HIPAA and other privacy issues, participating agencies should agree to values and standards consistent with the system, as developed by the Committee at a later date.

### 7.3 TBD: Prioritization of Households At-Risk of Homelessness

### 7.4 Non-Discrimination in Prioritization

Information from the assessment may not be used, nor is the Coordinated Entry Assessment designed to allow, prioritization of households for housing and services on a protected basis, such as on the basis of a diagnosis or particular disability. Prioritization based on information gathered through the Coordinated Entry Assessment also does not discriminate based on race, color, religion, national origin, sex, age, familial status, disability, type or amount of disability or disability-related services or supports required, nor actual or perceived sexual orientation, gender identity, or marital status.

### 8 Standards for Coordinated Entry Matching

Matching is the step of Coordinated Entry by which designated services and housing programs are offered to households on the Countywide By Name List in order of highest priority. Services and housing programs that are not matched to through Coordinated Entry do not use the Countywide By Name List and are not governed by standards for matching. However, they may have specific referral processes, eligibility requirements, and methods for targeting resources to the people who need them.
8.1 Definitions for Matching

8.1.1 Eligibility
Eligibility refers to the criteria that clients must meet to receive services. These criteria are set by funding source or policy makers and should be documented clearly as part of the funding, contracts, and policies. Eligibility criteria cannot violate laws such as Fair Housing or the Americans with Disabilities Act.

- Example: Funder A funds shelter beds for disabled people experiencing homelessness. Having a disability is an eligibility criterion for beds funded by Funder A.

- Example: Households must be literally homeless (HUD Category 1 or 4) in order to be assessed, added to the countywide By Name List, and matched to services and housing programs.

8.1.2 Preferences
Preferences refer to criteria that, if met, would result in clients receiving preference to receive the resource over clients who do not meet that criteria. Funders, policy makers and service providers may set preferences. Preferences may not prevent a unit of service from being filled if there is no one who fulfills the preference criteria. In cases where there are no eligible clients who also fit the preference criteria, the unit will be filled by an eligible client who does not fit the preference criteria.

- Example: Funder A funds housing for disabled people experiencing homelessness. They have an additional preference for people from Hayward. Because this is a preference, and not an eligibility, if a disabled person from Hayward cannot be located to fill the vacancy within a certain amount of time, then another disabled person would be offered the unit. However, the intention is that available unit would go to a person from Hayward first, before being offered to others who are not from Hayward.

8.1.3 Prioritization
Prioritization refers to the criteria used to rank clients on the By Name List. In Alameda County’s Coordinated Entry process, a client’s prioritization score is the main determinant of their place in the overall By Name List. Ranking is determined based on the score of the client’s Coordinated Entry Assessment relative to other clients’ scores. Prioritization is dynamic, and the ranking of clients changes as either their circumstances change, as new clients are assessed and added to the By Name List, or as others become inactive on the list. In the current matching process, once eligibility and preferences filters are considered, the person with the highest prioritization will be selected to receive the service being matched.

9 Matching to Homelessness Prevention Services
Alameda County offers a variety of Homelessness Prevention Services including legal services, eviction and foreclosure prevention, and financial assistance. Only Homelessness Prevention programs funded by Emergency Solutions Grant are required to use the Coordinated Entry process. Households interested in Homelessness Prevention Services should start by calling 2-1-1.
9.1 HOMELESSNESS PREVENTION SERVICES FUNDED BY ESG

9.1.1 MATCHING PROCESS

10 TBD: MATCHING TO HOUSING NAVIGATION

11 MATCHING TO EMERGENCY SHELTER
Alameda County offers a variety of emergency shelters including Year-Round Emergency Shelter, Navigation Centers, Community Cabins, Seasonal Shelters, Domestic Violence Shelters, Veteran Shelters, Behavioral Health Shelter, Medical Respite, and other shelter not publicly-funded. Year-round, county-funded emergency shelters are required to fill shelter beds using the Coordinated Entry process. Any household interested in a bed in a year-round, county-funded emergency shelter should start the Coordinated Entry process by calling 2-1-1 or going to a Housing Resource Center.

Other Emergency Shelters are not governed by a standard set of policies and procedures and do not use the Coordinated Entry process to fill their shelter beds. They have a variety of referral processes. Any household interested in a bed in other emergency shelters should call 2-1-1.

11.1 COUNTY-FUNDED YEAR-ROUND EMERGENCY SHELTERS

11.1.1 MATCHING PROCESS
Year-Round Emergency Shelters are matched using the Coordinated Entry process as outlined in the Alameda County Emergency Shelter Standards for Year-Round Shelter as a requirement of county funding. The written standards can be found at: http://www.acbhcs.org/href_files/Shelter_Standards_for_Year_Round_Shelters.pdf

11.1.2 MATCHING ENTITY
Local Resource Zone Coordinators are responsible for matching to year-round emergency shelter.

11.1.3 MINIMUM ELIGIBILITY
To be eligible for a Year-Round Emergency Shelter bed, clients must be:

- Literally Homeless (HUD Definition, Category 1 or 4)
  - Individual or family who lacks a fixed, regular, and adequate nighttime residence, meaning:
(i) Has a primary nighttime residence that is a public or private place not meant for human habitation;
(ii) Is living in a publicly or privately operated shelter designated to provide temporary living arrangements (including congregate shelters, transitional housing, and hotels and motels paid for by charitable organizations or by federal, state and local government programs); or
(iii) Is exiting an institution where (s)he has resided for 90 days or less and who resided in an emergency shelter or place not meant for human habitation immediately before entering that institution

Any individual or family who:
(i) Is fleeing, or is attempting to flee, domestic violence
(ii) Has no other residence; and
(iii) Lacks the resources or support networks to obtain other permanent housing

- And currently resides in Alameda County and is on the Countywide By Name List

Individual shelter programs may have additional eligibility criteria if allowed by the Year-Round Shelter Standards.

11.1.4 Preferences
In addition, Resource Zone Coordinators will use the following preferences when matching:
- Preference 1: Geographic preference within region of Resource Zone and household has a Housing Navigator
- Preference 2: Geographic preference within region of Resource Zone

11.1.5 Prioritization
After eligibility and preferences, households will be matched to year-round shelter based on score and rank to the greatest extent possible. To maintain the principle of serving those with the highest needs, Resource Zones may still focus efforts on those with the highest prioritization scores among clients who fit preferences, though it is not required. Resource Zones may set threshold scores for matching to emergency shelters, though it is not required.

11.1.6 Denial of Admission
Any household matched to year-round emergency shelter through Coordinated Entry can only be denied admission for reasons outlined in the Emergency Shelter Standards for Year-Round Shelters. In addition, if shelter is denied, the shelter operator must inform the Resource Zone Coordinator immediately, so that the household may be matched to another available resource.

12 Matching to Permanent Supportive Housing

12.1 Permanent Supportive Housing
Alameda County offers permanent housing with supportive services to households with the greatest needs.

12.1.1 Matching Process
All Permanent Supportive Housing in Alameda County is matched using the Coordinated Entry process.

12.1.2 MATCHING ENTITY
Home Stretch is countywide Resource Zone responsible for matching to Permanent Supportive Housing.

12.1.3 MINIMUM ELIGIBILITY
- Literally Homeless (HUD Definition, Category 1 or 4)
  - Individual or family who lacks a fixed, regular, and adequate nighttime residence, meaning:
    1. Has a primary nighttime residence that is a public or private place not meant for human habitation;
    2. Is living in a publicly or privately operated shelter designated to provide temporary living arrangements (including congregate shelters, transitional housing, and hotels and motels paid for by charitable organizations or by federal, state and local government programs); or
    3. Is exiting an institution where (s)he has resided for 90 days or less and who resided in an emergency shelter or place not meant for human habitation immediately before entering that institution
- Any individual or family who:
  1. Is fleeing, or is attempting to flee, domestic violence
  2. Has no other residence; and
  3. Lacks the resources or support networks to obtain other permanent housing
- And disabled
  - The head of household has a disabling health condition(s) that is expected to be of long-continued and indefinite duration and substantially impedes the persons’ ability to live independently, such as a diagnosable substance use disorder, serious mental illness, developmental disability, or chronic physical illness or disability.
- And over 18 or emancipated youth
- And currently resides in Alameda County and is on the Countywide By Name List

12.1.4 PREFERENCES
Home Stretch will use the following preferences when matching:
- Preference 1: Non-VA Eligible Veteran and Geographic preference within region of Resource Zone
- Preference 2: Geographic preference within region of Resource Zone

12.1.5 PRIORITIZATION
After screening for eligibility and preferences, households will be matched to Permanent Supportive Housing using the PSH Target List and additional PSH Matching Factors.

12.1.6 PSH TARGET LIST
The PSH Target List is used for matching to PSH. Creating a PSH Target List is intended to focus attention on the highest need households on the BNL and to ensure that prioritized clients get connected to the supports necessary for them to transition from homelessness into PSH. The number of households on the PSH Target List is related to the number of PSH units that are likely to become available in a given
year. This allows staff and households seeking assistance to know if the household is reasonably likely to have a PSH unit become available to them within a year.

The PSH Target List is determined by:

- Estimating the number PSH vacancies in the upcoming year
- Determining a threshold score which targets a number of households that is roughly two times the anticipated PSH vacancies in the next 12 months AND to identifies clients with scores indicating a statistically significant difference from other clients with completed assessments.
- Placing households with a CE Assessment score equal to or higher than the threshold score on the list

The threshold score is determined by:

- The threshold score is established before the beginning of each calendar year based on inventory and client data from the prior 12 months.
- Threshold score can get revised prior to the annual revision if significantly more inventory becomes available.
- If the threshold score changes upon review, households identified on the previous PSH Target List are grandfathered onto the new list.

PSH Target List for December 1, 2019 – December 31, 2020

- Using a projected turnover of approximately 250 PSH vacancies in the upcoming calendar year
- A threshold score was identified that focuses the PSH Target List to approximately 500 people, which is the top 5% of households on the BNL
- The graphic below, shows the current CE Assessment score distribution among active clients on the BNL. Focusing on the top 5% results in approximately 500 people on the PSH Target List at any given time. The red line indicates the threshold score that determines the top 5% of clients on the BNL.
12.1.7 Additional Matching Factors
Households on the PSH Target List are matched to PSH based on the following additional factors, in this order:

- Eligibility criteria for the opening
- Document readiness status
- PSH project preferences stated in MOUs and/or contracts
- Date of first CE Assessment
- Household preferences
- Households with medical necessity for an ADA unit will get prioritized for these units when available. Matching will follow the above prioritization criteria with this filter added.
- If there is not a household on the PSH Target List that can get connected to the opportunity within 30 days or less, then households with the score directly below the threshold score will get screened for matching.

This process will continue until an appropriate number of eligible households get identified for match and referral.

12.1.8 Service Coordination for PSH
In order to ensure that the highest need households are being served and that the targeted list is used to support service and care coordination, Home Stretch will:

- Collect info on whether people are getting skipped due to lack of documents
- Make best efforts made to coordinate care and connect them with a provider, if the prioritized person does not have a service provider
- Create a public alert in HMIS if the client is on the targeted list
12.2 Veteran’s Administration Supportive Housing (VASH) - TBD
Matching to VASH units requires a separate process done in collaboration with the Veteran’s Administration.

13 Matching to Rapid Rehousing

13.1 Boomerang Rapid Rehousing
Policies and procedures for matching to Boomerang Rapid Rehousing are outlined in the Guidelines for Using Boomerang Rapid Rehousing Funds.

13.1.1 Matching Process
Boomerang Rapid Rehousing slots are matched using the Coordinated Entry process.

13.1.2 Matching Entity
Local Resource Zone Coordinators are responsible for matching households in their zone to Boomerang Rapid Rehousing.

13.1.3 Minimum Eligibility
To be eligible for Boomerang Rapid Rehousing, clients must be:

- Literally Homeless (HUD Definition, Category 1 or 4)
  - Individual or family who lacks a fixed, regular, and adequate nighttime residence, meaning:
    - (i) Has a primary nighttime residence that is a public or private place not meant for human habitation;
    - (ii) Is living in a publicly or privately operated shelter designated to provide temporary living arrangements (including congregate shelters, transitional housing, and hotels and motels paid for by charitable organizations or by federal, state and local government programs); or
    - (iii) Is exiting an institution where (s)he has resided for 90 days or less and who resided in an emergency shelter or place not meant for human habitation immediately before entering that institution
  - Any individual or family who:
    - (vii) Is fleeing, or is attempting to flee, domestic violence
    - (viii) Has no other residence; and
    - (ix) Lacks the resources or support networks to obtain other permanent housing
- And currently reside in Alameda County and is on the Countywide By Name List
- And have an assigned HRC Housing Navigator or a non-HRC Qualified Case Manager

13.1.4 Additional Eligibility
- Income level of 30% AMI or below at entry into the program.
Clients with no income are still eligible for RRH provided the housing stability plan shows a path to obtain income or a method to pay for housing long-term quickly.

No other source of RRH available for the client’s specific population (ex: Housing Navigators will assist their clients to access RRH targeted towards youth, families, people on probation, and veterans before using this source of funds).

Has a housing stability plan, approved by the HRC Manager, that shows a realistic path towards taking over rental payments within 12 months

Willing to work with a housing navigator on the housing stability plan

13.1.5 Preferences
In addition, Resource Zone Coordinators will use the following preferences when matching:

Preference 1: Geographic preference within Resource Zone

13.1.6 Prioritization
After eligibility and preferences, households will be matched to Boomerang Rapid Rehousing according to their score and rank on the Countywide By Name List.

13.1.7 Additional Matching Factors

Boomerang-funded Rapid Rehousing can be offered to literally homeless clients who have received a Coordinated Entry Assessment and who have an assigned HRC Housing Navigator or a non-HRC Qualified Case Manager.

If they do not have an HRC Housing Navigator, a non-HRC Qualified Case Manager must be identified by the HRC.

Prior to being approved for a RRH slot, the client and Housing Navigator or Qualified Case Manager must talk about realistic housing options given the client’s ability to pay for housing long-term. This assessment includes the client’s prior work history and is not based on current behaviors.

The Housing Navigator or Qualified Case Manager and client must create a written housing stability plan that outlines a reasonable path towards the client taking over his/her own rent in 9 months. Plans must include measurable goals and objectives and include realistic housing options such as increasing income (including for people on SSI) or ability to pay for housing long-term, utilizing shared housing, and moving to a community where rents are more affordable. Plans must include the maximum amount of rent that the client feels they will be able to take on in the future.

The Housing Navigator or Qualified Case Manager must submit the housing stability plan for approval to the HRC manager. The HRC manager must review the plan to ensure that it includes detailed, realistic steps for moving towards independent housing and that the maximum rent amount is realistic given the clients current and potential future income.

Once the HRC Manager approves the housing stability plan, the client is officially matched to the RRH intervention and can begin a housing search.

13.1.8 Qualified Case Managers

Qualified Case Managers must be approved by the HRC Manager
A Qualified Case Manager is defined as staff of a case management program that provides housing-related case management and that can provide specific RRH case management services including:

- Case Managers must actively work on the required housing plan
- Case Managers must be able to provide services to clients in their homes and community settings
- Case Managers must be able to provide regular support services at a frequency appropriate to the client
- Case Managers and/or the case management program must agree to collaborate and share information with HRC staff for on-going care coordination and funding requirements
- Case Managers may provide, but are not required to provide, housing search services.
- Examples of programs that may be Qualified Case Managers are Full Service Partnerships, Health Homes/CBCMEs, or MSSP – Multipurpose Senior Services Program

13.1.9 ADDITIONAL PROGRAM REQUIREMENTS

13.1.9.1 Administration by HRCs

- HRCs must conduct subsidy administration including completion of the housing paperwork and ensuring habitability.
- HRCs must assign an HRC Housing Navigator or identify and coordinate with a non-HRC Qualified Case Manager
- HRCs may elect to add an RRH Case Manager using Boomerang funds dedicated to RRH, if funding permits, mutually agreed upon by funder and operator, and if codified in writing allowing it contractually.
- HRCs are responsible for HMIS data entry, including any data that needs to be gathered from Qualified Case Managers
- If the Qualified Case Manager does not offer housing search assistance, HRCs may provide housing search services

13.1.9.2 Length of assistance

- Assistance will be provided for up to 12 months.
- Any extensions to be approved by HRC Manager.

13.1.9.3 Allowable Rent

- Will use a rent reasonableness standard but more importantly will use a client reasonableness standard.

13.1.9.4 Habitability

- HRCs must ensure the habitability of any unit subsidized through Boomerang funded RRH.
- HQS inspection prior to move in is the best practice standard for this funding source. However, a Housing Navigator may use a habitability standard in cases where HQS is not reasonable (ex: some shared housing situations).
- The HRC Manager must approve use of habitability standard instead of HQS and the reason must be documented in the client case file.

13.1.9.5 Eligible costs

- Rental deposits (up to 2 times the rent), Utility deposits, Rent
Late fees are not an eligible expense

13.1.9.6 Rental Assistance Amounts
- Clients must agree (by signing the participant agreement) to contribute to their rent on the following schedule:
  - Months 1-3: client pays 25% of rent
  - Months 4-6: client pays 40% rent
  - Months 7-9: client pays 60% of rent
  - Months 10-12: client pays 75% of rent
- Depending on a client’s situation they may be able to move towards 100% of the rent on a faster schedule. Any exceptions to the payment schedule which result in less rent being paid must be discussed with the Housing Navigator or Qualified Case Manager and a clear plan for getting back to the payment schedule as quickly as possible must be documented. This written exception request must be approved in advance by the HRC Manager.

13.1.9.7 Client Expectations
- Meet with Housing Navigator or Qualified Case Manager a minimum of 2 times per month (once housed, 1 of those meetings must be in unit) - required
- Sign and follow the participant agreement – required
- Contribute to the rent on the agreed schedule- required (note: schedule can be changed with HRC Manager approval)
- Work on increasing income or enhancing ability to pay for housing long-term
- Willing to consider shared housing or moving to more affordable community

13.1.9.8 Reassessments
- Clients will be approved for RRH in 3 month intervals.
- Housing Navigators or Qualified Case Managers will conduct formal assessments every three months (in month 3 and month 6) to ensure that clients are on track to take over full payment of their rent.
- The HRC Manager will review all reassessments and approve services for another 3 months.

13.1.9.9 Services after rental assistance ends
- After rental assistance ends client may receive up to 3 months of on-going Housing Navigation. This timeframe may be extended depending on a client’s needs.

13.1.9.10 Client’s refusal of services
- Clients retain the right to opt out of services at any time.
- While participating in the RRH program, if a client is offered a permanent supportive housing (PSH) unit, they will have the right to refuse in accordance with standard policies in effect.

14 Universal Access
The Housing Crisis Response System operates using client-centered, accessible, and confidential practices in order to assist anyone experiencing a housing crisis in a timely, professional, and respectful manner. The following polices are intended to make clear certain rights and responsibilities of clients, staff,
organizations, and funding agencies in supporting universal access to, and non-discrimination within, the Housing Crisis Response System in Alameda County.

14.1 HOUSING FIRST, HIGH-NEED & LOW-BARRIER
In order to ensure that the Housing Crisis Response System helps in a fair and standard way, and reaches the people who need assistance the most, the following standards must be followed:

- The Housing Crisis Response System and the Coordinated Entry process must ensure that people with more severe service needs and levels of vulnerability are prioritized for housing and homeless assistance before those with less severe service needs and lower levels of vulnerability.
- Emergency services—including all domestic violence and emergency services hotlines, drop-in service programs, emergency shelters, domestic violence shelters and other short-term crisis residential programs—must operate with as few barriers to entry as possible. Additionally, persons must be able to access emergency services independent of the operating hours of the coordinated entry’s intake and assessment processes.
- All programs in the Housing Crisis Response System funded by federal, state, or local funds are prohibited from screening people out of the Coordinated Entry process, services, and housing programs due to perceived barriers related to housing or services. Perceived barriers may include: too little or no income, active or history of substance use, domestic violence history, resistance to receiving services, the type or extent of disability-related services or supports that are needed, history of evictions or poor credit, lease violations or history of not being a leaseholder, or criminal record. Exceptions are made for state or local restrictions that prevent projects from serving people with certain convictions.

14.2 AFFIRMATIVE MARKETING
The Coordinated Entry process, and the housing and services that can be accessed through that process, must be widely marketed and advertised to ensure that anyone experiencing homelessness in Alameda County has fair and equal access.

- EveryOne Home, on behalf of the Alameda County Continuum of Care, must publish, distribute, and regularly update standard marketing materials that clearly and accessibly explain how anyone experiencing homelessness in Alameda County can access the Coordinated Entry process for use by participating agencies.
- Any program, organization, or agency participating in Coordinated Entry or the Housing Crisis Response System must affirmatively market their Coordinated Entry, housing programs, and supportive services to all eligible persons and maintain records of those marketing activities.

Marketing materials must:

- Advertise to all people in different populations and subpopulations in Alameda County, including people experiencing chronic homelessness, veterans, families with children, youth, and survivors of domestic violence, to ensure fair and equal access to the coordinated entry process, regardless of the location or method by which they access the system.
- Specifically target individuals and families who are least likely to apply in the absence of special outreach including eligible persons who experience barriers due to race, color, national origin,
Religion, sex, age, familial status, disability, sexual orientation, gender identity, marital status or Limited English Proficiency (LEP).

- Take reasonable steps to ensure the coordinated entry process can be accessed by persons with Limited English Proficiency (LEP).
- Ensure effective communication with individuals with disabilities including providing appropriate auxiliary aids, services and accessible formats as needed, e.g., Braille, audio, large type, assistive listening devices, and sign language interpreters.

14.3 Non-Discrimination

All programs must adhere to all non-discrimination laws intended to ensure universal and equitable access to Coordinated Entry and the Housing Crisis Response System for all people experiencing homelessness in the County, regardless of race, color, national origin, religion, sex, age, familial status, disability, actual or perceived sexual identity, or gender identity.

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

- Fair Housing Act prohibits discriminatory housing practices based on race, color, religion, sex, national origin, disability, or familial status;
- Section 504 of the Rehabilitation Act prohibits discrimination on the basis of disability under any program or activity receiving Federal financial assistance;
- Title VI of the Civil Rights Act prohibits discrimination on the basis of race, color or national origin under any program or activity receiving Federal financial assistance; and
- 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’s Equal Access Rule at 24 CFR 5.105(a)(2) prohibits discriminatory eligibility determinations in HUD-assisted or HUD-insured housing programs based on actual or perceived sexual orientation, gender identity, or marital status, including any projects funded by the CoC Program, ESG Program, and HOPWA Program.
- CoC Program interim rule also contains a fair housing provision at 24 CFR 578.93. For ESG, see 24 CFR 576.407(a) and (b), and for HOPWA, see 24 CFR 574.603.

14.4 Reasonable Accommodation

Anyone seeking assistance from Coordinated Entry or the Housing Crisis Response System has the right to request a reasonable accommodation.

14.5 Coordinated Entry Client Rights & Expectations
Any organization participating in the administration or service delivery of Alameda County’s Coordinated Entry process must inform clients of their Client Rights & Expectations. Client Rights & Expectation must be easily accessed, posted, and available upon request.

Anyone seeking assistance through Coordinated Entry, has the right to a process that:

- Is accessible, fair, and standard.
- Does not discriminate, and does not screen people out based on income, history of substance use or domestic violence, evictions, poor credit, poor housing history, and criminal records.
- Is accessible to individuals with disabilities and people who are least likely to access homeless assistance.
- Allows clients to choose and refuse housing and service options.
- Allows clients to consent to or refuse the collection, protection, and sharing of their private information.
- Makes reasonable efforts to provide the process in the client’s language.
- Offers reasonable accommodations for variations to any part of the standard process.
- Allows clients to update their information as needed.
- Allows clients to file a grievance, non-discrimination complaint, or to appeal Coordinated Entry decisions.

In order for Coordinated Entry to provide the best service possible, anyone seeking assistance through Coordinated Entry, is asked to:

- Provide sufficient information for Coordinated Entry staff to be able to screen, assess, prioritize and refer appropriately.
- Update contact information regularly.
- Update assessment information when significant changes occur in their housing status, health condition, or family composition.
- Stay in touch with Coordinated Entry staff.
- Respond immediately to any offer of service or housing.
- Ask for support through the Coordinated Entry process if needed.

### 14.6 Coordinated Entry Grievance Policy

Alameda County’s Coordinated Entry process is funded and administered by multiple government entities and conducted through a network of designated organizations and locations across the County. Any organization participating in the administration or service delivery of Alameda County’s Coordinated Entry process must follow the system-wide Coordinated Entry Grievance Policy. Organizational grievance policies must incorporate the Coordinated Entry Grievance Policy, and procedures and forms must be easily accessed, posted, and available upon request.

The Coordinated Entry Grievance Policy covers all services provided as part of the Coordinated Entry process including:

- Safety Screening
- Housing Crisis Screening
- Housing Problem Solving
- CE Assessment
Standards to be used for all services included in the standard Coordinated Entry process are outlined in this manual.

14.6.1 Coordinated Entry Grievance Procedure

To the greatest extent possible, any problem or concern that is identified by a client regarding service provided during any part of the Coordinated Entry process should be resolved quickly, supportively, and professionally by the organization that is most directly involved with the client’s experience.

If a client is dissatisfied with a service, decision, action or situation involving any part of Alameda County’s Coordinated Entry process, as outlined above and detailed in the Housing Crisis Response System Manual, or if the person wishes to file a complaint against perceived unfair treatment, the following procedure should be followed:

- The client can make a complaint by first following the complaint or grievance procedure of the organization or agency directly providing the service.
- Providers must acknowledge and initiate a response to the complaint according to the organization’s established procedure.
- Providers, funding agencies, and EveryOne Home must collect and share aggregate data on the subject matter and resolution status of all Coordinated Entry grievances for the purpose of evaluation and quality improvement.

14.6.2 Appeal Process for Coordinated Entry Grievance Procedure

TBD

15 Privacy and Security Standards

TBD

16 System Performance & Evaluation

16.1 Coordinated Entry Compliance Review

Annually, EveryOne Home must complete a Coordinated Entry Compliance Review using the HUD Coordinated Entry Self-Assessment Tool. The review is conducted by EveryOne Home staff in consultation with stakeholders and submitted to the System Coordination Committee, HUD CoC Committee, and Coordinated Entry funders.
17 HOUSING CRISIS RESPONSE SYSTEM TRAINING STANDARDS

17.1 CERTIFIED ASSESSOR TRAINING
EveryOne Home and/or a designated training entity must offer, at minimum, an annual training opportunity to participating staff at organizations that serve as Access Points or otherwise conduct the Coordinated Entry Assessment. Trainings may be in-person, a live or recorded online session, or a self-administered training.

EveryOne Home or the designated training entity must update and distribute training protocols, at minimum, annually. Training protocols must include written policies and procedures for following the standard Coordinated Entry Process, any adopted variations, requirements for prioritization, and the criteria for uniform decision-making and referrals to housing resources. Training must also include applicable privacy trainings.
18 APPENDIX OF NON-HUD FUNDING SOURCES

Background: EveryOne Home was tasked to “create an appendix to acknowledge non-HUD funding source requirements as they relate to services and resources participating in Coordinated Entry and referenced in the System Manual, and to the extent that information has been provided by those funding sources upon request.”

EveryOne Home contacted funders who may fund services and resources that may participate in Alameda County’s Coordinated Entry such as outreach, housing search, housing navigation, housing problem solving, HRC supportive services such as legal services and housing classes, flex funds, emergency shelter, transitional housing, PSH, rapid rehousing, other subsidy programs, and tenancy sustaining services. The Interim Executive Director of EveryOne Home requested this information, with reminders and follow-up emails, from the following jurisdictions:

- Alameda County Behavioral Health Care Services
- Alameda County Health Care Services Agency
- Alameda County Social Services Agency
- Cities of Alameda, Albany, Berkeley, Dublin, Emeryville, Fremont, Hayward, Livermore, Oakland, Piedmont, Pleasanton, San Leandro and Union City
- Veterans Affairs

Responses about the requirements are included in the table below, sorted into types of requirements. One-time funds such as California’s HEAP/ CESH and HHAP funds are not included.

18.1 NON-HUD FUNDING SOURCES

County BHCS-MHSA
- Client Eligibility: Individuals with severe mental health issues

County HCSA- Alameda County Care Connect
- Client Eligibility: Medi-Cal Beneficiaries

Alameda (City)
- Coordinated Entry activities and resources funded by source: Emergency Shelter, Housing navigation
- Client Eligibility: People who are literally homeless, preferably from/in the City of Alameda
- HMIS Participation: Yes
- Service Requirements: None. Matched to shelter and housing navigation through Family Front Door

Berkeley General Fund
- HRC, Emergency Shelters, Transitional Housing, SSI Advocacy, Alcohol/Other Drug Treatment Services
- Client Eligibility: Literally homeless in Berkeley
- HMIS: yes
- Reporting: Quarterly APRs submitted

Dublin General Fund Grant
- CE activities and resources funded by source: Homelessness Prevention/Crisis Intervention Services - Crisis intervention (case management) and direct financial help for Dublin residents who have a legitimate, urgent need that puts in jeopardy their housing security or household stability. Includes funds for auto repair so transportation to work or necessary destinations (medical, schooling, etc) are not interrupted, leading to loss of housing
Dublin General Fund Grant, continued

- Client Eligibility: Homeless or at risk of homelessness
- Data Collection: HMIS preferred, comprehensive data collection is covered by provider's custom database including HMIS if appropriate
- Service requirements: Need is verified by case worker, must be enrolled in case management to receive funds.
- Report: Quarterly

Hayward General Fund

- CE activities and resources funded by source: Navigation Center
- Client eligibility: literally homeless
- Service requirements: Upon receiving services through the Navigation Center all participants are assessed and prioritized through coordinated entry

Livermore General Fund

- CE activities and resources funded by source: Outreach, housing search, housing navigation, housing problem solving, HRC supportive services such as legal services and housing classes, flex funds, emergency shelter (hotel vouchers), transitional housing, rapid rehousing, other subsidy program, tenancy sustaining services and Domestic Violence Emergency Shelter
- Client eligibility: homeless or at risk of homelessness
- Data Collection: HMIS not required but preferred
- Service requirements: Cap in amount of funding due to limited general fund dollars. Duration is FY, meet deliverables in scope of work
- Reporting: Quarterly reporting.

Pleasanton General Fund

- CE activities and resources funded by source: Emergency Shelters
- Client Eligibility: Homeless or at risk of homelessness
- Data Collection: Track number of Pleasanton clients served, income levels
- Reporting: Quarterly reports submitted for review by staff and commissions

Pleasanton Lower Income Housing Fund (LIHF)

- CE activities and resources: Homelessness Prevention, Street Outreach, Emergency Shelters, Rapid Rehousing
- Client Eligibility: Homeless or at risk of homelessness
- Data Collection: HMIS, track number of clients served, income levels
- Reporting: Quarterly reports submitted for review by staff and commissions

Pleasanton Lower Income Housing Fund (LIHF)

- CE activities and resources: Rental assistance, home seeking, and shared housing
- Client Eligibility: At risk of homelessness
- Data Collection: Track number of Pleasanton clients served, income level
- Reporting: Quarterly reports submitted for review by staff and commissions

San Leandro General Funds

- CE Activities and Resources: Emergency shelter contracted to Building Futures with Women and Children; 211 CES access contracted through Eden I&R
- Client Eligibility: Homeless or at risk of homelessness
- Data Collection: HMIS participation
- Reporting: BI-annual reporting
Federal Veterans Affairs Supportive Housing (VASH)
- CE Activities and Resources: Initial case management is designed to help you work with the public housing authority in locating an apartment. This includes identifying the resources needed to move into your apartment.
  - Ongoing case management to provide support, identify resources and help you meet both short and long term goals
  - Assistance with coordinating your Primary Medical and Mental Health Care
  - Crisis Management
  - Information, referral and assistance with other needed benefits and assistance
  - Counseling and service planning regarding family issues, social skills and other issues identified by you in order to help you stay in housing and improve your quality of living.
- Client Eligibility: Must be eligible for VA healthcare services, not a registered sex offender, 50% AMI or lower, literally homeless or at imminent risk of homelessness
- Data Collection: HOMES and the veteran’s medical record
- Service Requirements: Regular home visits with HUD-VASH SW; frequency determined by clinical acuity, regular submission of eligibility documentation, as required by local Housing Authority
- Reporting: Monthly progress notes in veteran’s medical record, Admission/Exit note in HOMES

Federal Grant Per Diem (GPD)
- CE Activities and Resources: Transitional Housing (up to 24 months) with case management
- Client eligibility: Homeless/at risk, other than dishonorable discharge, at least one day of active duty, meets clinical definition of the model
- Data Collection: GPD grantee documents in HMIS, VA GPC Liaison documents quarterly contact in HOMES and the veteran’s medical record. If the veteran does not have a VA medical record, the GPD Liaison will keep paper records.
- Service requirements: Up to 24 months as indicated by CM and clinical needs
- Reporting: GPD grantee documents in HMIS. GPD liaison documents in vet's medical record and HOMES. If vet is ineligible for VA healthcare, vet may not be in medical cord, in which case GPD liaison will only document in HOMES and keep paper records

Federal Veterans Justice Outreach
- CE Activities and Resources: VA outreach program designed to help Veterans involved with the criminal justice system. The VJO provides linkage to resources and services to help you get through the criminal justice system successfully
- Client Eligibility: For vet treatment court: contact the VJO and your attorney assigned to the county in which charges took place. VJO CM services are available to vets who are eligible for VA healthcare
- Data Collection: VJO documents in HOMES and vet's medical record. If vet is ineligible for VA healthcare, vet may not be in medical cord, in which case VJO will only document in HOMES

Federally Contracted Emergency Residential Services
- CE Activities and Resources: Emergency shelter, usually up to 90 days
  - CM by the CERS contractor: housing, $, emp; Linkage to VA services by VA outreach SW
- Client Eligibility: Eligible for VA healthcare services; Homeless or at imminent risk of homelessness
- Data Collection: CERS contractor documents in HMIS; VA outreach SW documents in HOMES and vet’s medical record
Federal Supportive Services for Veteran Families (SSVF)

- CE Activities and Resources: Street encampment and venue-based outreach; wrap around case management; rapid rehousing; housing search and navigation; referrals and community linkages; temporary financial assistance; shallow subsidy; homelessness prevention

- Client Eligibility: Homeless; at imminent risk of homelessness; Other than Dishonorable D/C; <50% AMI

- Data Collection: HMIS data entry required; timely data entry, data quality; participation in CoC/CE

- Service Requirements: Recertification of eligibility required at least every 90 days; Rental and utility assistance for 6 months in 12 month period or 10 months in a 2-year period for low income (<50% AMI) 9 months in a 12-month period or 12 months in a 2-year period for ELI (<30% AMI); Security and utility deposit; once in a 2-year period Transportation: No restrictions on public transportation; Vehicle repair: maximum $1200 in a 2-year period Child care: for eligible HH, same restrictions as rental and utilities; Moving costs: once in a 2-year period, 3 months of storage assistance in 2-year period; General Housing stability: $1500 man in 2-year period; ~Emergency housing assistance: for eligible HH 45 day stay in a 2-year period

- Reporting: Monthly VA repository uploads; annual reports