

Louisiana Balance of State Continuum of Care

Coordinated Entry Access Point

Memorandum of Understanding

# Purpose

This Memorandum of Understanding (MOU) establishes the terms and agreement under which [agency], hereafter referred to as “the Provider,” will operate a Coordinated Entry Access Point (Access Point) as a part of the Louisiana Balance of State Continuum of Care (LA BOSCOC)’s Coordinated Entry System (CES).

# Background

The LA BOSCOC is a coalition of people and organizations dedicated to ending homelessness. It serves more than 20 parishes across the state of Louisiana, including the cities of Baton Rouge, Lake Charles, and Houma, and those cities’ surrounding parishes.

The LA BOSCOC’s CES is designed to provide a coordinated community response to homelessness. Through the CES, people receive safe, confidential services to resolve episodes of homelessness, including access to housing and case management.

Because the LA BOSCOC’s homeless population significantly exceeds its resources, the CES uses two strategies to ensure that each person is served to the maximum extent possible according to their needs:

1. **Resiliency-Based Engagement:** the LA BOSCOC believes that each person’s most important resource for exiting homelessness is their own resiliency, including their existing support networks; as such, the CES attempts to serve each person with the ‘lightest touch’ intervention that might resolve their homelessness before escalating to more intensive interventions;
2. **Needs-Based Triage:** the LA BOSCOC uses the Vulnerability Index – Service Prioritization Decision Assistance Tool (VI-SPDAT) to triage people for housing and services, prioritizing those with the most acute needs first.

Access Points are a critical element of the CES. They make initial contact with people experiencing homelessness, direct them to emergency resources, assist them in returning to housing using their own support networks, and triage them for housing and supportive services.

# Roles and Responsibilities

The LA BOSCOC agrees to undertake and fulfill the following roles and responsibilities:

1. Grant the Provider a number of Homeless Management Information System (HMIS) user licenses; the number will be jointly determined by the LA BOSCOC and the Provider; the LA BOSCOC will make these user licenses available on an annual basis and at no cost to the Provider;
2. Provide training and technical assistance as needed for the Provider to establish and operate their Access Point; the timing and structure of the technical assistance will be jointly determined by the LA BOSCOC and the Provider;
3. Monitor the Provider’s Access Point to ensure it complies with the most recent version of the LA BOSCOC Coordinated Entry Policies and Procedures and that it is providing high quality services to people experiencing homelessness; the LA BOSCOC will consult with the Provider to determine the timing of all monitoring, but will monitor the Provider at least once annually.

The Provider agrees to undertake and fulfill the following roles and responsibilities:

1. Operate an Access Point in the following geographies: [Region]
2. Provide access to the CES via [street outreach and/or a stationary site located at address];
3. Provide CES services to the following population(s) of people experiencing homelessness: [EITHER “all people” OR specific allowable target populations, e.g. youth, veterans];
4. Provide all services listed under the following CES Components in the most recent version of the LA BOSCOC Coordinated Entry Policies and Procedures:
	* **Access,** which includes:
		+ Quickly determining whether a person is experiencing homelessness, and if so, according to which HUD definition;
		+ Referring people to emergency shelter or crisis housing as available;
		+ Entering each person’s information into HMIS or, if the Provider is a domestic violence service provider, into an HMIS-comparable database;
	* **Diversion,** which includes:
		+ Quickly assessing whether each person should be served with diversion case management;
		+ Serving each person for whom it is appropriate with diversion case management;
	* **Intervention,** which includes:
		+ If they do not return to housing through Diversion: serving each person with intervention case management within 30 days of their first contact with the CES;
		+ Remaining in contact with each person to determine whether, 30 days after their first contact with the CES, they are still experiencing homelessness;
	* **Assessment,** which includes:
		+ For all people who have received at least one instance of intervention case management AND whose first contact with the CES was more than 30 days ago: using the VI-SPDAT triage tool to determine each person’s level of need;
		+ Entering each person’s VI-SPDAT score and all other required information into HMIS or, if the Provider is a domestic violence service provider, an HMIS-comparable database;
		+ If the Provider is a domestic violence services provider: referring each person who completes the VI-SPDAT to the Prioritization List via the method prescribed by the LA BOSCOC.

The above descriptions of each CES Component are a summary; additional information and requirements are located in the most recent version of the LA BOSCOC Policies and Procedures, which can be found on the LA BOSCOC’s website: <https://laboscoc.org/policies-and-procedures>

# Costs

The Provider assumes all costs associated with operating an Access Point except the cost of HMIS user licenses provided by the LA BOSCOC as a function of this MOU.

# Termination

Either party may terminate their participation in this MOU by providing the other party with written notification via postal mail at the addresses below:

**LA BOSCOC:**Continuum of Care Manager
Louisiana Housing Corporation
1690 N. Boulevard 2nd Floor
Baton Rouge, LA 70802

**The Provider:**[address]

The written notice must be dated and must include a termination date. The termination date cannot be less than 30 days from the date of the written notice.

Certain funding sources and grant agreements may require the Provider to operate an Access Point. The requirements of those funding sources and grant agreements cannot be terminated by terminating this MOU. Terminating this MOU may negatively impact the Provider’s compliance with those requirements, as applicable.

# Agreement

By signing this agreement, I understand and agree to the terms of this MOU on behalf of my organization. This MOU is effective as of the date on which all parties have signed.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
*Signature Date*
[Provider Signatory]
[Organization]

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
*Signature Date*
Winona Connor, Board Chair
Louisiana Balance of State Continuum of Care

*Version 1.0
Released June 7, 2019*