



Coordinated Entry Policies and Procedures (Version 2.2)

Effective October 6, 2020

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I. Introduction

The Louisiana Balance of State Continuum of Care (LA BOSCO) has established a Coordinated Entry System (CES) to coordinate intake, assessment, and referral to resources for all people experiencing homelessness and at risk of homelessness in its geography. CES seeks to provide people experiencing homelessness with the fastest possible access to housing while prioritizing the LA BOSCO's limited housing resources to those people who have the greatest need and length of time (LOT) homeless. CES is implemented in accordance with the Continuum of Care (CoC) Program final interim rule, which requires that all CoCs implement a Coordinated Entry System in collaboration with their local Emergency Solutions Grant (ESG) recipients.

Red text in this document is temporary; it exists as part of the LA BOSCO's response to the Coronavirus Disease 2019 (COVID-19) pandemic. It has been included in this document rather than a separate document for ease of reference. The LA BOSCO expects to remove all red text once the COVID-19 pandemic has been resolved.

When red text contradicts other text in this document, the red text takes precedence.

A. Guiding Principles

CES has adopted the following guiding principles; they inform these Policies and Procedures and the work performed by all organizations that provide one or more components of CES. CES is:

1. Person-Centered

Every person experiencing homelessness will be treated with dignity and respect through a person-centered system that reflects their needs, choices, and experiences. Participant choice will be fostered and respected, and person-centered practices such as trauma-informed care and tailoring services to the needs and choices of individuals and families will be used whenever possible.

2. Low Barrier

Whenever possible, CES will eliminate barriers to housing, including systemic biases, project eligibility criteria, and project termination processes, in order to equitably prioritize the most vulnerable people and ensure they receive support until they achieve self-sufficiency in permanent housing.

3. Transparent

CES's processes, performance, communication, decision-making, and governance will be clear and transparent to internal and external stakeholders, including people experiencing homelessness. The LA BOSCO will ensure that households are assessed in a standardized, uniform manner by all CES Access Points and outreach workers.

4. Efficient

CES will be efficient and easy to navigate for both housing providers and people experiencing homelessness. In order to preserve the most limited resources for the most vulnerable people, CES will serve each person experiencing homelessness with the 'lightest touch' possible based on their needs. When possible, the LA BOSCO will collaborate with internal and external stakeholders to ensure each person is served with the appropriate level of resources.

5. Culturally Competent and Equitable

CES will pursue human equity and reduce housing barriers for marginalized and special needs populations via culturally and linguistically competent practices. To ensure the system is accessible by all individuals and families, the LA BOSCO will proactively develop accessibility features for households that include people from marginalized communities or who are otherwise protected by federal law.

6. Data Driven

To the extent possible, CES's decision-making, evaluation, and system improvements will be driven by qualitative and quantitative data.

II. Overview

A. People Experiencing Homelessness

When CES and these Policies and Procedures refer to "people experiencing homelessness," they refer to all people experiencing homelessness and at risk of experiencing homelessness regardless of their household size and subpopulation. "People experiencing homelessness" includes single-person households, multi-person households, and members of all subpopulations, including but not limited to unaccompanied youth and people fleeing domestic violence; it is used interchangeably with "individuals and households."

The LA BOSCO and this document use the definitions of "homeless," "at risk of homelessness," and "chronically homeless" found in 24 CFR 578.3.

B. People Fleeing Domestic Violence

When any person initially presents for housing at a Coordinated Entry Access Point (CES Access Point) or to an outreach worker, that CES Access Point or outreach worker shall ask questions to determine whether that person is fleeing domestic violence (these questions shall be determined by the Coordinated Entry Committee).

If that person is determined to be fleeing domestic violence, the initial CES Access Point or outreach worker shall offer that person the opportunity to connect with a service provider explicitly dedicated to serving people fleeing domestic violence ("DV service provider") and receive CES services through that provider instead of the initial CES Access Point or outreach worker, in addition to emergency shelter, advocacy, safety planning, and/or peer counseling.

If the person fleeing domestic violence chooses to be connected with a DV service provider, the initial CES Access Point or outreach worker shall, within 1 business day, connect that person with a DV service provider.

If the person fleeing domestic violence does not choose to be connected with a DV service provider, the initial CES Access Point or outreach worker shall, within 1 business day, tend to that person's immediate transportation and safety needs.

C. Core Components

The core components of CES are as follows:

| Core Component | Details | Timing | Data |
|----------------|--|--|---|
| Access | People experiencing homelessness initially access resources by contacting a CES Access Point, outreach worker, or emergency shelter; their data is entered into the statewide Homeless Management Information System (HMIS) database | When a person experiencing homelessness initially presents for housing | In the LA BOSCO, approximately 3,000 people per year experience first time homelessness |

| Core Component | Details | Timing | Data |
|-----------------------|--|--|--|
| Diversion | People experiencing homelessness will work with a CES Access Point case manager, outreach worker, or emergency shelter worker to determine they can most quickly exit homelessness | On the day a person initially presents for housing | 75% of people who experience first time homelessness will return to housing either on their own or after receiving diversion/intervention |
| Intervention | People experiencing homelessness will work with a CES Access Point case manager, outreach worker, or emergency shelter worker to determine they can most quickly exit homelessness | Ongoing as needed until applicant returns to non-subsidized housing or is enrolled in a housing project | 75% of people who experience first time homelessness will return to housing either on their own or after receiving diversion/intervention |
| Assessment | People experiencing homelessness who are unable to return to housing after receiving diversion are assessed by a CES Access Point or outreach worker to determine their level of need using an objective questionnaire | At least 30 days after initial presentation for housing if the person has not returned to non-subsidized housing AND after at least one intervention session | The CoC has housing resources for just 5% of the people who experience first time homelessness |
| Prioritization | People experiencing homelessness are prioritized for referral to resources based on their level of need and their length of time homeless | People are added to the Prioritization List immediately after Assessment | Because the Prioritization List is <u>not</u> 'first come, first served,' it is not possible to determine when a given person will receive housing from their current position on the list |
| Referral | When a housing provider has a project opening, they request and receive one or more referrals from the top of the Prioritization List | Housing providers request referrals when they have available resources | People who are relatively low on the Prioritization List may not be referred for a long time |
| Intake | Projects contact their referrals; once a referral accepts an offer of housing, projects verify their housing eligibility, begin serving the referral, and return the referrals that did not receive housing to the Prioritization List | Once a referred participant has accepted an offer of housing | Referrals are much more likely to receive housing if their HMIS or HMIS-comparable database entry includes good information about how to contact them |

D. Who Uses Coordinated Entry?

Any organization that serves people experiencing homelessness can become a CES Access Point.

Any project that provides transitional housing or permanent housing (including rapid re-housing and permanent supportive housing) to people experiencing homelessness can request referrals from CES.

Certain projects funded by certain programs are **required** to use CES. Those funding sources, their projects, and the ways in which they are required to use CES are as follows.

1. Continuum of Care (CoC) Program

All projects funded by the CoC Program are required to use CES in the following ways:

| CoC Program Project Type | CES Requirement |
|--|--|
| Supportive Services Only (SSO) | <ul style="list-style-type: none"> SSO projects that conduct outreach are required to provide Access, Diversion, Intervention, and Assessment to the extent required by this document to all participants served by outreach |
| Coordinated Entry (SSO-CES) | <ul style="list-style-type: none"> SSO-CES projects are required to provide Access, Diversion, Intervention, and Assessment to the extent required by this document to all participants served |
| Transitional Housing (TH) | <ul style="list-style-type: none"> TH projects are required to Intake participants exclusively through the Prioritization List TH projects that conduct outreach are required to provide Access, Diversion, Intervention, and Assessment to the extent required by this document to all participants served by outreach |
| Joint Transitional and Rapid Re-Housing (TH-RRH) | <ul style="list-style-type: none"> The TH component of TH-RRH projects are required to Intake participants exclusively through CES The RRH component of TH-RRH projects may conduct Intake for open project slots from EITHER from the TH component of that project OR through the Prioritization List¹ TH-RRH projects that conduct outreach are required to provide Access, Diversion, Intervention, and Assessment to the extent required by this document to all participants served by outreach |
| Rapid Re-housing (RRH) | <ul style="list-style-type: none"> RRH projects are required to Intake participants exclusively through the Prioritization List RRH projects that conduct outreach are required to provide Access, Diversion, Intervention, and Assessment to the extent required by this document to all participants served by outreach |
| Permanent Supportive Housing (PSH) | <ul style="list-style-type: none"> PSH projects are required to Intake participants exclusively through the Prioritization List PSH projects that conduct outreach are required to provide Access, Diversion, Intervention, and Assessment to the extent required by this document to all participants served by outreach |

2. Emergency Solutions Grant (ESG) Program

All projects funded by the ESG program² are required to use CES in the following ways:

¹ TH-RRH project are encouraged to work with the LA BOSCOG to ensure their policies and procedures comply with the Coordinated Entry Policies and Procedures and with federal regulations related to participant intake

² This applies to all projects funded by ESG in the LA BOSCOG's geography, including those funded through the State of Louisiana and through the City of Baton Rouge

| ESG Project Type | CES Requirement |
|------------------------------------|--|
| Street Outreach (SO) | <ul style="list-style-type: none"> SO projects are required to provide Access, Diversion, Intervention, and Assessment to the extent required by this document to all participants served |
| Emergency Shelter (ES) | <ul style="list-style-type: none"> ES projects are required to provide Access, Diversion, Intervention, and Assessment to the extent required by this document to all participants served EITHER by directly providing those services OR via an MOU with another project that provides those services³ ES projects provide very short-term emergency shelter and therefore do not intake participants through the Prioritization List |
| Transitional Housing (TH) | <ul style="list-style-type: none"> TH projects are required to Intake participants exclusively through the Prioritization List TH projects that conduct outreach are required to provide Access, Diversion, Intervention, and Assessment to the extent required by this document to all participants served by outreach |
| Rapid Re-housing (RRH) | <ul style="list-style-type: none"> RRH projects are required to Intake participants exclusively through the Prioritization List RRH projects that conduct outreach are required to provide Access, Diversion, Intervention, and Assessment to the extent required by this document to all participants served by outreach |
| Permanent Supportive Housing (PSH) | <ul style="list-style-type: none"> PSH projects are required to Intake participants exclusively through the Prioritization List PSH projects that conduct outreach are required to provide Access, Diversion, Intervention, and Assessment to the extent required by this document to all participants served by outreach |

3. Exemptions

The Board may, at its discretion, designate a CoC Program-funded project as exempt from one or more specific requirements of this document.

To qualify for an exemption from the Board, a project must meet all of the following criteria:

- The project was originally funded before CoC Program Funding Year 2015;
- The project type is TH, RRH, or PSH.

The Collaborative Applicant shall maintain an internal list of projects that have received an exemption according to this section and the requirements of this document from which they are exempt.

E. Access Points and Outreach Workers

CES Access Points and outreach workers provide the Access, Diversion, Intervention, and Assessment components of CES.

³ MOUs must be approved by the Collaborative Applicant; MOUs must, at minimum, detail how (1) the second entity will provide equivalent Access, Diversion, Intervention, and Assessment and (2) the MOU will not create an additional transportation burden for people experiencing homelessness

Any organization can become a CES Access Point. There are no fees, and the LA BOSCOCC coordinates training for all CES Access Points on the Access, Diversion, Intervention, and Assessment components of CES.

Any organization can employ outreach workers who contribute to CES. There are no fees, and the LA BOSCOCC coordinates training for outreach workers on the Access, diversion, Intervention, and Assessment components of CES.

For more information, or to register/request training for a CES Access Point outreach worker, please contact the Continuum of Care Manager at glevine@lhc.la.gov or 225-242-1388.

The LA BOSCOCC maintains a list of stationary site CES Access Points in each Region on its website at <https://laboscoc.org/housing-and-services/>

1. What's the Difference?

These Policies and Procedures distinguish between CES Access Points in the following way:

- CES Access Points generally have one or more fixed locations, pre-determined 'business hours,' etc.;
- Outreach workers are mobile, and while they may serve specific geographies, the locations and times at which they perform outreach are not fixed.

In addition, while most CES Access Points serve all people experiencing homelessness, some are exclusive to one or more of the following subpopulations:

- Youth
- Families with children
- Single adults
- People fleeing domestic violence

2. Geographic Coverage

The LA BOSCOCC covers more than 20 parishes. The LA BOSCOCC's geography is divided into several Regions. The LA BOSCOCC's parishes and Regions are listed in the most recent version of its Governance Charter, which can be found online at <https://laboscoc.org/policies-and-procedures>. Each Region is served by at least one CES Access Point.

The Prioritization List is subdivided by Region. When a participant is entered onto the Prioritization List, they must specify the Region(s) in which they will accept housing. Participants may specify any Region regardless of the Region in which they currently reside.

3. System Disclaimer

CES is designed to coordinate and prioritize access to housing and services for people experiencing homelessness. CES does not guarantee that any given household will be referred to housing in general, to a specific housing provider, or to a specific kind of housing; once a given household is referred, CES does not guarantee that household will meet all final eligibility requirements for the project to which they were referred. The LA BOSCOCC encourages all people experiencing homelessness to pursue housing resources both through CES and outside CES, including resources available through their own support networks.

4. Coordinated Entry Outcome Metrics

The LA BOSCOCC's goal is ending homelessness in its geography. "Ending homelessness" means ending functional homelessness by ensuring homelessness is:

- Rare;
- Brief;
- Non-recurring.

The LA BOSCOCC uses the following metrics to assess its progress toward ending homelessness. These metrics are based on national standards for high-performing communities; they are aspirational and intended to guide CES development over several years.

| Goal | Metric |
|---------------|--|
| Rare | Each year, the total number of people experiencing first time homelessness will decline by 10% from the previous year. ⁴ |
| Brief | Each year, the mean length of time homeless for all households that engage CES will be 20 days or fewer. Each year, the mean length of time homelessness will decline by 10% from the previous year. |
| Non-Recurring | Each year, the rate of recidivism from permanent housing ⁵ will be 10% or fewer Each year, the rate of recidivism from all CES-participating ES, TH, RRH, PSH, and other permanent housing projects ⁶ will be 5% or fewer |

III. Access

A. Summary

Under the Access component of CES, people experiencing homelessness shall:

1. Be quickly assessed to determine whether they are experiencing homelessness according to HUD's definition;
2. Receive access to emergency shelter and crisis housing (e.g. churches, hotel/motel vouchers, etc.) as available;
3. Have their information recorded in the LA BOSCOCC's HMIS database;
4. Receive the Diversion component of CES.

The Access component of CES is provided by:

- CES Access Points;
- CoC Program-funded SSO and SSO-CES projects;
- ESG-funded SO and ES projects;
- Any other CoC Program- or ESG-funded project that conducts outreach.

B. Determining Homelessness

The first time a person experiencing homelessness contacts a CES Access Point or outreach worker is variously referred to in the homeless housing and services sector as "presenting for housing/services," "initially presenting for housing/services," and "requesting housing/services"; CES uses these terms interchangeably.

When a person experiencing homelessness initially presents for housing, the CES Access Point or outreach worker shall, at that time, make a preliminary assessment of whether or not the person is experiencing homelessness, and if so, under what HUD definition. The purpose of this preliminary assessment is to determine whether, and to what extent, the CES Access Point or outreach worker shall continue engaging that person.

⁴ The LA BOSCOCC may choose to exclude people experiencing homelessness as the result of a natural disaster from this metric, as the LA BOSCOCC has no mechanism to affect the number of people who experience first-time homelessness as the result of a natural disaster

⁵ E.g. the number of people who return to homelessness within 24 months of exiting a permanent housing project

⁶ E.g. the number of people who exit the project to the streets, emergency shelter, or an unknown location

The CES Access Point or outreach shall also, at that time, determine whether the person is fleeing domestic violence, and if so, take the actions prescribed by this document. Refer to the [People Fleeing Domestic Violence](#) section of this document (above) for more information.

The CES Access Point or outreach worker shall make this determination at the time of presentation and exclusively based on the person's self-report; the CES Access Point or outreach worker shall not request or require documentation of any kind.

1. Specific Subpopulations

When a person experiencing homelessness presents at a CES Access Point that does not serve that person's subpopulation, the CES Access Point shall, as soon as possible within 1 business day:

- Refer that person to a CES Access Point that serves that person's subpopulation;
- Provide reasonable accommodations (e.g. transportation) to assist that person in traveling from the first to the second CES Access Point.

2. At Risk of Homelessness

When a CES Access Point or outreach worker determines that a person is at risk of homelessness, the CES Access Point or outreach worker shall enter their information into HMIS (see the [HMIS](#) section of this document, below) and refer them to homeless prevention resources, including ESG-funded Homeless Prevention (HP) projects, as available.

People at risk of homelessness shall not be served by any of the other elements of CES outlined below.

C. Access to Emergency Shelter and Crisis Housing

After determining that a person who initially presents for housing is experiencing homelessness, the CES Access Point or outreach worker serving them shall, at that time and if that person is interested, refer them to emergency shelter or crisis housing as available.

D. HMIS

When a person experiencing homelessness initially presents for housing, the CES Access Point or outreach worker serving them shall, within three business days, enter that person's information into HMIS or, if that person is being served by a DV service provider, into that DV service provider's HMIS-comparable database.

The CES Access Point or outreach worker shall, before entering any person's information into HMIS or an HMIS-comparable database, secure a Release of Information covering each person whose information will be entered.

1. Declining a Release of Information

People experiencing homelessness may, at their discretion, decline to sign a Release of Information. The LA BOSCOG shall serve people who decline to sign a Release of Information through CES to the extent possible based on the information each person provides.

2. Refusing to Answer Questions

People experiencing homelessness may, at their discretion, refuse to provide answers or information related to any portion of the Access component.

If a person refuses to provide information relevant to their certification as experiencing homelessness, chronic homelessness, or other criteria relevant to project eligibility, that person's access to housing may be limited by their refusal.

E. Referral to Diversion

When a person experiencing homelessness initially presents for housing, the CES Access Point or outreach worker serving them shall, as soon as possible within 24 hours, either:

- Provide the Diversion component of CES to that person; or,
- Refer that person to a project that provides the Diversion component of CES, if:
 - Such a referral mechanism exists in an MOU between the original project and the project providing the Diversion component, and
 - The MOU between the two projects has been approved by the Collaborative Applicant.

1. MOUs for Diversion and Intervention

Projects that are required to provide the Diversion and Intervention components of CES may enter into an MOU with another project to provide Diversion and/or Intervention on the project's behalf.

Such MOUs must be approved by the Collaborative Applicant. They must, at minimum, include the following elements:

- An expiration date that establishes the MOU for no longer than 12 months;
- Details about how the secondary project shall provide Diversion and Intervention within the same timeframe as the primary project would do in absence of the MOU, including information about participant transportation as applicable.

F. HMIS-Comparable Databases

DV service providers are prohibited from using HMIS. In place of HMIS, they are required to use an HMIS-comparable database.

In the LA BOSCOG, all DV service providers are required to use EmpowerDB as their HMIS-comparable database. More information about EmpowerDB, including pricing, can be found here:

<https://www.empowerdb.com/>

Legal service providers may choose to use either HMIS or an HMIS-comparable database. Legal service providers shall designate whether they will use HMIS or an HMIS-comparable database in their program policies and procedures. For legal service providers that choose to use an HMIS-comparable database, the LA BOSCOG strongly encourages they confirm with CoC staff that their database qualifies as HMIS-comparable before purchasing or entering participant data.

G. After Hours

CES Access Points are required to implement policies and procedures for responding to people experiencing homelessness outside of their regular hours of operation.

At minimum, CES Access Points shall have a written protocol specifying how people who attempt to contact the CES Access Point outside its regular hours of operation shall be assisted in accessing the CES Access Point as soon as possible during regular hours of operations.

IV. Diversion

A. Summary

Under the Diversion component of CES, people experiencing homelessness shall:

1. Be quickly assessed to determine their housing needs and whether diversion is appropriate for them;
2. If diversion is appropriate: receive diversion case management;
3. If diversion is unsuccessful or not appropriate: be referred to the Intervention component of CES.

The Diversion component of CES is provided by:

- CES Access Points;
- CoC Program-funded SSO and SSO-CES projects;
- ESG-funded SO and ES projects;
- Any other CoC Program- or ESG-funded project that conducts outreach.

B. What is Diversion Case Management?

The National Alliance to End Homelessness (NAEH) defines diversion case management as "a strategy that prevents homelessness for people seeking shelter by helping them identify immediate alternate housing arrangements and, if necessary, connecting them with services and financial assistance to help them return to permanent housing."⁷

Diversion case management is designed to return people experiencing homelessness to housing within the first few days after they initially present. It should be quick, flexible, creative, and very short-term.

C. Assessing for Diversion Eligibility

When a person experiencing homelessness is referred to the Diversion component of CES, the project providing diversion shall identify a staff member responsible for providing diversion to that person (the "diversion case manager").

The diversion case manager shall immediately assess whether diversion case management is appropriate for the person experiencing homelessness.

The diversion assessment shall involve but is not necessarily limited to the following questions:⁸

| Diversion Assessment Question | Determination |
|---|--|
| Where did you sleep last night? | If the person slept somewhere they could potentially safely stay again, this might mean they are a good candidate for diversion case management. |
| What other housing options do you have for the next few days? | If the person has an option outside of emergency shelter, even if only for a very short time, this might mean they are a good candidate for diversion case management. |
| <i>If they are staying in someone else's housing: what barriers exist between you remaining in your current housing? Can those barriers be eliminated with financial assistance, case management, etc.?</i> | If the person's barriers can be eliminated with case management, financial assistance, mediation, or other "low hanging fruit" methods, they are a good candidate for diversion case management. |

⁷ National Alliance to End Homelessness. "Closing the Front Door: Creating a Successful Diversion Program for Homeless Families." Page 1. Retrieved October 24, 2018. <http://endhomelessness.org/wp-content/uploads/2011/08/creating-a-successful-diversion-program.pdf>

⁸ Adapted from Page 2 of "Closing the Front Door."

| Diversion Assessment Question | Determination |
|---|--|
| <i>If they are staying in their own housing:</i> is it possible/safe for them to stay in their current housing? What resources would they need to do it (e.g. financial assistance, case management, etc.)? | If the person could stay in their current housing with some assistance, they are a good candidate for diversion case management. |

D. Diversion Case Management

If the diversion case manager determines the person experiencing homelessness should receive diversion case management, that diversion case manager shall, within 24 hours, provide that person with diversion case management.

Diversion case management may include but is not limited to connecting the person experiencing homelessness with the following resources and services:⁹

- Existing support networks, including the person's familial and social networks
- Housing search assistance
- Rental subsidies
- Other financial assistance as available (e.g. funds for food, transportation, etc. as necessary to help the person achieve and remain in housing)
- Utility assistance
- Case management
- Mediation
- Other mainstream resources
- Legal resources

E. Referral to Intervention

The diversion case manager shall, within 3 business days, refer the person experiencing homelessness to the Intervention component of CES if the person experiencing homelessness did not return to housing after receiving diversion case management.

1. People Fleeing Human Trafficking

People fleeing human trafficking are not referred to the Intervention component of CES.

Instead, if they do not return to housing after receiving diversion case management, people fleeing human trafficking should be provided with the Prioritization component of CES as soon as possible within 24 hours.

F. Assessing the Effectiveness of Diversion

The CoC shall, on a quarterly basis, assess the effectiveness of the Diversion component of CES using metrics for individual projects, for each LA BOSCO Region, and for CES as a whole.

The Collaborative Applicant shall conduct this assessment and report its conclusions to the Coordinated Entry Committee and, at its discretion, to other stakeholders.

The Collaborative Applicant shall, at minimum, use the following metrics in this assessment (in this case, "projects" means "projects that provided diversion to at least one person experiencing homelessness in the last year):

⁹ Adapted from Page 2 of "Closing the Front Door."

| Assessment Level | Metric |
|------------------|---|
| Project | How many people initially presented as experiencing homelessness or at risk of homelessness to a CES Access Point or outreach worker? |
| Project | What percentage of people exited homelessness before being referred to the Intervention component of CES? |
| Region | How many people initially presented for housing? |
| Region | What percentage of people exited homelessness before being referred to the Intervention component of CES? |
| CES | How many people initially presented for housing? |
| CES | What percentage of people exited homelessness before being referred to the Intervention component of CES? |

V. Intervention

A. Summary

Under the Intervention component of CES, people experiencing homelessness shall:

1. Receive access to intervention case management for 30 days after initially presenting for housing;
2. If they remain homeless 30 days after initially presenting for housing: be referred for the Assessment component of CES;
3. Continue receiving access to intervention case management until they return to housing.

The Intervention component of CES is provided by:

- CES Access Points;
- CoC Program-funded SSO and SSO-CES projects;
- ESG-funded SO and ES projects;
- Any other CoC Program- or ESG-funded project that conducts outreach.

Participants who meet both of the following criteria shall not be served by the Intervention component of CES:

- The participant is being served by a CES Access Point in the Houma Region;
- The participant specifies during the CES process that they wish to live exclusively in the Houma Region.

When a CES Access Point serves a participant who meets the above criteria, it shall deliver the Diversion component of CES; then, if the participant is unable to return to housing after the Diversion component's problem-solving session, the CES Access Point shall, during that session or as soon as possible after within 1 business day, deliver the Assessment component of CES.

B. What is Intervention Case Management?

Intervention case management is a response to two realities about homelessness:

- The majority of people experiencing homelessness return to stable housing on their own or with the help of diversion/intervention case management;
- The LA BOSCOG does not have enough housing resources for every person who experiences at least one night of homelessness and must therefore reserve its housing resources for those people with the greatest need and LOT homeless.

Intervention case management is similar to diversion case management. It involves the same elements as diversion case management: primarily, connecting people experiencing homelessness with their existing support networks, with mainstream benefits, and with other 'lighter touch' responses.

However, intervention case management differs from diversion case management in the following ways:

- Access to intervention case management is available to all people experiencing homelessness except those whose homelessness is resolved during the Diversion component of CES;
- Intervention case management is not expected to provide an overnight solution; it is intended to support people experiencing homelessness as they attempt to return to housing without housing resources or before housing resources become available to them.

C. Intervention Case Management

When a person experiencing homelessness is referred to the Intervention component of CES, the project providing intervention case management shall identify a staff member responsible for providing intervention case management to that person (hereafter referred to as "the intervention case manager"). The goal of

intervention case management is to help that person return to housing without housing resources or before housing resources become available to them.

Intervention case management may include but is not limited to the methods outlined in the "Diversion Case Management" subsection, above.

Each interaction between a person experiencing homelessness and their intervention case manager during which the intervention case manager attempts to connect the person with at least one intervention resource is hereafter referred to as a "session."

The intervention case manager shall continue providing intervention case management sessions to the person experiencing homelessness as needed by the person but not less than monthly until the person meets one of the following criteria:

- The person declines further intervention case management (note: this does not disqualify them from other components of CES);
- The person returns to housing without housing resources;
- The person successfully enrolls in a housing project.

D. Referral to Assessment

Intervention case managers shall, within 3 business days, refer a person experiencing homelessness to the Assessment component of CES if that person meets both of the following criteria:

- At least 30 days earlier, the person was determined to be experiencing homelessness by a CES Access Point or outreach worker;
- The person has received at least one session of intervention case management.

E. Assessing the Effectiveness of Intervention

The CoC shall, on a quarterly basis, assess the effectiveness of the Intervention component of CES using metrics for individual projects, for each LA BOSCO Region, and for CES as a whole.

The Collaborative Applicant shall conduct this assessment and report its conclusions to the Coordinated Entry Committee and, at its discretion, to other stakeholders.

The Collaborative Applicant shall, at minimum, use the following metrics in this assessment (in this case, "projects" means "projects that provided intervention case management to at least one person experiencing homelessness in the last year):

| Assessment Level | Metric |
|------------------|---|
| Project | How many people initially presented as experiencing homelessness or at risk of homelessness to a CES Access Point or outreach worker? |
| Project | What percentage of people exited homelessness after being referred to the Intervention component of CES but before being referred to the Assessment component of CES? |
| Region | How many people initially presented for housing? |
| Region | What percentage of people exited homelessness after being referred to the Intervention component of CES but before being referred to the Assessment component of CES? |
| CES | How many people initially presented for housing? |
| CES | What percentage of people exited homelessness after being referred to the Intervention component of CES but before being referred to the Assessment component of CES? |

VI. Assessment

A. Summary

Under the Assessment component of CES, people experiencing homelessness shall:

1. Be assessed for their level of need using the Vulnerability Index - Service Prioritization Decision Assistance Tool (VI-SPDAT);
2. Be referred for the Prioritization component of CES.

The Assessment component of CES is provided by:

- CES Access Points;
- CoC Program-funded SSO and SSO-CES projects;
- ESG-funded SO and ES projects;
- Any other CoC Program- or ESG-funded project that conducts outreach.

B. The VI-SPDAT

The VI-SPDAT is "an evidence-informed approach to assessing an individual's or family's acuity [i.e. level of need]."¹⁰

The VI-SPDAT is a product of OrgCode Consulting. It has been adopted by many CoCs and communities in the United States and Canada as their primary tool for determining the order in which people experiencing homelessness receive access to those communities' limited housing resources. All of the CoCs in Louisiana, including the LA BOSCOG, have adopted the VI-SPDAT.

There are three versions of the VI-SPDAT; the project providing the Assessment component of CES shall use the version that is most appropriate for each person experiencing homelessness. Those versions are:

- SINGLE (sometimes called the "SPDAT" or "the individual VI-SPDAT") should be used with households composed of one single adult;
- FAMILY (sometimes called the "F-SPDAT," "F-VI-SPDAT," or "the family VI-SPDAT") should be used with households composed of more than one person;
- YOUTH (sometimes called the "TAY-VI-SPDAT," "Y-VI-SPDAT," or "the youth VI-SPDAT") should be used with households composed of one single youth (e.g. an unaccompanied youth).

All versions of the VI-SPDAT can be downloaded at no cost from OrgCode Consulting's website:

<http://www.orgcode.com/products>

Participants shall not be assessed using the VI-SPDAT. Participants shall instead be assessed using the LA BOSCOG Participant Triage Tool (PTT). The PTT can be found online at <https://laboscoc.org/policies-and-procedures>

C. Assessment with the VI-SPDAT

When a person experiencing homelessness is referred to the Assessment component of CES, the project providing the Assessment component of CES shall, within 1 business day, identify a staff member (hereafter referred to as the "assessor") responsible for taking the following actions:

- Assessing the person's level of need using the VI-SPDAT;
- Entering the person's updated information, including their VI-SPDAT outcome, into HMIS.

¹⁰ OrgCode Consulting. "Our Products." Service Prioritization Decision Assistance Tool (VI-SPDAT). Retrieved October 25, 2018. <http://www.orgcode.com/products>

Assessors are legally prohibited by the VI-SPDAT's terms of use from "modify[ing] the SPDAT or creat[ing] any derivative work of the SPDAT or its accompanying documentation [...] without the express written consent of OrgCode Consulting, Inc."¹¹ As such, assessors shall adhere to the following guidelines:

- Assessors shall only use the 'official' VI-SPDAT forms downloaded from OrgCode Consulting;
- Assessors shall not modify the 'official' VI-SPDAT forms in any way;
- To ensure all people experiencing homelessness are assessed using comparable methods: assessors shall use the entirety of the VI-SPDAT tool, proactively seeking answers to each question.

Assessors are strongly encouraged to tailor each assessment to each person experiencing homelessness. Although assessors must attempt to provide an answer for each of the VI-SPDAT's questions, assessors should approach each question with each person experiencing homelessness in the way or ways that the assessor believes are most likely to yield accurate information without traumatizing the person being assessed.

When possible, the LA BOSCOG encourages the diversion case manager for each person experiencing homelessness to provide the Assessment component of CES (rather than referring that person to a secondary entity).

Participants will not be assessed using the VI-SPDAT. Participants will instead be assessed using the LA BOSCOG Participant Triage Tool (PTT). The PTT can be found online at <https://laboscoc.org/policies-and-procedures>

D. Referral to Prioritization

Referral to the Prioritization component of CES differs depending on whether the assessor enters the person experiencing homelessness's information into HMIS or an HMIS-comparable database.

1. HMIS

When an assessor enters a person experiencing homelessness's VI-SPDAT score into HMIS, they shall, within 1 business day, also indicate in HMIS that the person should be included on the Prioritization List according to the mechanism specified by the Collaborative Applicant.

2. HMIS-Comparable Databases

When an assessor enters a person experiencing homelessness's VI-SPDAT score into an HMIS-comparable database, the assessor shall, by the end of the next business day following the assessment, take the actions in this sub-section to refer that person to the Prioritization component of CES.

The assessor shall designate an alias for the person experiencing homelessness. That alias may be a name ("Alex Doe"), a random number ("615283"), a linear designation based on the project or organization name ("Acme Corporation 0001"), or any other alias that cannot be identified with the person experiencing homelessness. The assessor shall record the person's alias in the HMIS-comparable database.

The assessor shall request the Collaborative Applicant add the person experiencing homelessness to the Prioritization List. The assessor shall submit this request by the method, in the form, and including the information specified by the Collaborative Applicant. The assessor shall use the person's alias in place of the person's name.

The Collaborative Applicant shall only require information that is necessary to providing equal access to the Prioritization List for people experiencing homelessness whose information is recorded in HMIS-comparable databases. Such information may include but is not limited to:

¹¹ OrgCode Consulting. "Service Prioritization Decision Assistance Tool (SPDAT)." Terms and Conditions Governing the Use of the SPDAT. Version 4.01.

- Alias
- VI-SPDAT score
- Household size
- Information necessary to establish homelessness status
- Information necessary to establish chronic homelessness status (e.g. length of time homeless, number of episodes of homelessness, disability status)
- Information necessary to establish membership in a target population (e.g. age, household size and composition, veteran status)
- The Region or Regions in which the person will accept an offer of housing
- Current services being provided to the person

E. Recontacting Participants for Intervention and/or Assessment

Access Points shall recontact participants using the methodology below to ensure that participants are not waiting longer than absolutely necessary to receive Intervention case management or Assessment.

On a weekly basis, the Collaborative Applicant shall send each Access Point a list of participants who initially presented at that Access Point and who are immediately eligible to receive the Intervention and/or Assessment components of the CES. Access Points should make recontacting those participants a high priority.

Access Points shall define their process for recontacting participants, including their mechanism for triaging which participants are contacted according to which have been ‘waiting for action’ the longest, in their written policies and procedures.

F. Removing Participants from the Coordinated Entry Project

Access Points may remove a participant from the Coordinated Entry project in HMIS when the participant has met all of the following criteria:

- The Access Point has attempted to contact the participant at least once using each contact mechanism (e.g. phone, email, known location) listed for the participant in HMIS;
- The Access Point has attempted to contact the participant on at least three separate days, and recorded each contact attempt and its result in HMIS;
- The Access Point has been unable to contact the participant using any of the above contact mechanisms.

Access Points shall define their process for removing participants from the Coordinated Entry project, including how they decide when a participant should be removed, in their written policies and procedures.

G. Assessor Training

Individual projects and organizations are responsible for ensuring their assessors receive training in administering the VI-SPDAT, entering data into HMIS, and serving people fleeing domestic violence.

On at least an annual basis, the LA BOSCOG provides training on the above topics either through the Collaborative Applicant or an affiliate. Training is available to all CES Access Points. The Collaborative Applicant shall announce training in advance to all currently registered CES Access Points and, at its discretion, through other distribution lists (e.g. its full email list). When possible, the Collaborative Applicant shall make training materials available online at its website.

Online training materials can be found at <https://laboscoc.org/members/>

VII. Prioritization

A. Summary

Under the Prioritization component of CES, the Collaborative Applicant shall:

1. Determine who will update the Prioritization List and when it will be updated;
2. Add people experiencing homelessness from HMIS to the Prioritization List;
3. Add people experiencing homelessness from HMIS-comparable databases to the Prioritization List;
4. Add people experiencing who qualify for the RRH to PSH Bridge to the Prioritization List;
5. Add people experiencing homelessness who trigger provisions of LA BOSCO's Emergency Transfer Plan to the Prioritization List.

The Prioritization component of CES is provided by:

- The Collaborative Applicant.

B. The Prioritization List

The CES's Prioritization List is the list of people experiencing homelessness who can be referred to transitional housing, rapid re-housing, permanent supportive housing, and other permanent housing projects, including those funded by the CoC Program and ESG.

The Prioritization List provides equal access to all people experiencing homelessness in the CES. A person's position on the Prioritization List is determined exclusively as defined in the "Prioritization Order" subsection of this document. A person's position on the Prioritization List is not affected by their Region of origin, their CES Access Point or outreach worker, whether their data was entered into HMIS or an HMIS-comparable database, or any other factor not listed in the "Prioritization Order" subsection.

The Collaborative Applicant shall determine, at its discretion, an auditable database or software with which the Prioritization List is created.

The Collaborative Applicant shall not release or otherwise make available the Prioritization List to any person not employed by the Collaborative Applicant. The Collaborative Applicant may, at its discretion, release and make available de-identified aggregate information about the Prioritization List.

C. Prioritization Order

All non-red text in this subsection is replaced by the following mechanism of prioritization.

For each project type, participants will be referred in descending order of priority as listed below. Participants from a given priority bracket will not be referred unless no participants are currently present in any higher priority bracket.

Participants in the same bracket will be prioritized in descending order based on their PTT scores. Participants in the same bracket with the same PTT scores will be prioritized in descending order based on their total length of time homeless as recorded in HMIS or an HMIS-comparable database.

Notes:

- “Trimorbid households” are households in which all three of the following are present among one or multiple household members: physical disability, mental illness or disability, and substance abuse disorder
- “Comorbid households” are households in which any two of the following are present among one or multiple household members: physical disability, mental illness or disability, and substance abuse disorder

- For the purposes of RRH and TH, below, PSH openings are determined at the participant's time of referral

| PROJ. TYPE | BRACKET | ORDER OF PRIORITY | TIEBREAK #1 | TIEBREAK #2 |
|---|---------------------------------------|---|------------------------|-------------------------|
| Permanent Supportive Housing | Non-Congregate Shelter Residents | 3rd Party Documented CH | Total Housing Barriers | Length of Time Homeless |
| | | Trimorbid Households | | |
| | | Comorbid Households | | |
| | | All Other Families | | |
| | | All Other Singles | | |
| | People in All Other Eligible Settings | 3rd Party Documented CH | Total Housing Barriers | Length of Time Homeless |
| | | Trimorbid Households | | |
| | | Comorbid Households | | |
| | | All Other Families | | |
| | | All Other Singles | | |
| Rapid Re-Housing & Transitional Housing | Non-Congregate Shelter Residents | Chronic Homelessness -- only if all PSH projects are 100% utilization | Total Housing Barriers | Length of Time Homeless |
| | | Veterans Not Eligible for SSVF | | |
| | | Youth | | |
| | | All Other Families | | |
| | | All Other Singles | | |
| | People in All Other Eligible Settings | CH -- only if all PSH projects at 100% utilization | Total Housing Barriers | Length of Time Homeless |
| | | Veterans Not Eligible for SSVF | | |
| | | Youth | | |
| | | All Other Families | | |
| | | All Other Singles | | |

People experiencing homelessness are listed on the Prioritization List in descending order of their VI-SPDAT scores.

People experiencing homelessness who are included on the Prioritization List due to any of the following criteria are listed on the Prioritization List in descending order of their VI-SPDAT scores ahead of all people who do not meet any of the following criteria:

- The person is included on the Prioritization List because they triggered the "Emergency Transfer Plan" section of the LA BOSCO's *Written Standards*;
- The person is a member of a special population (see the "Special Populations" subsection, below);
- The person has been referred and rejected.

If multiple people share the same position on the Prioritization List based on the above criteria, they shall be listed within that position in descending order of their length of time (LOT) homeless. LOT homeless shall be determined solely using HMIS or HMIS-comparable data.

D. Prioritization of Dedicated Permanent Supportive Housing Beds

When there are no persons experiencing chronic homelessness on the Prioritization List for a given project's Region, permanent housing projects with beds dedicated to people experiencing chronic homelessness shall fill their beds using the following order of priority¹²:

1. Homeless individuals or families with a disability who have experienced fewer than four occasions where they have been living or residing in a place not meant for habitation, a safe haven, or an emergency shelter but the cumulative time homeless is at least 12 months and has been identified as having severe service needs.
2. Homeless individuals or families with a disability who are residing in a place not meant for human habitation, a safe haven, or in an emergency shelter and has been identified as having severe service needs. The length of time in which households have been homeless should also be considered when prioritizing households that meet this order of priority, but there is no minimum length of time required.
3. Homeless individuals or families with a disability who are residing in a place not meant for human habitation, a safe haven, or an emergency shelter where the individual or family has not been identified as having server service needs. The length of time in which households have been homeless should be considered when prioritizing households that meet this order of priority, but there is not a minimum length of time required.
4. Homeless individuals or families with a disability who are currently residing in a transitional housing project, where prior to residing in the transitional housing had lived in a place not meant for habitation, a safe haven, or an emergency shelter. This priority also includes individuals and families residing in transitional housing who were fleeing or attempting to flee domestic violence, dating violence, sexual assault, or stalking and prior to entry in the transitional housing.

E. Updating the Prioritization List

The Collaborative Applicant shall, at its discretion, designate a staff person who will be responsible for updating the Prioritization List according to the schedule specified by the Collaborative Applicant.

The Collaborative Applicant shall, at its discretion, specify the schedule on which it shall update the Prioritization List. The Collaborative Applicant may specify a day or days of the week ("on Mondays," "on Tuesdays and Thursdays") or an interval ("every day, every three days"); regardless of the schedule, the Collaborative Applicant must update the Prioritization List at least once per week.

¹² Notice CPD-16-11. "Notice on Prioritizing Persons Experiencing Chronic Homelessness and Other Vulnerable Homeless Persons in Permanent Supportive Housing."

The Collaborative Applicant may, at its discretion, suspend the update schedule in response to a significant disruption of normal operations (e.g. a natural disaster). The LA BOSCO Board may, at its discretion, vote to override any suspension of the update schedule.

F. Prioritizing from HMIS

When the Collaborative Applicant updates the Prioritization List, it shall include all people experiencing homelessness whose data has been entered into HMIS who meet the following criteria:

- The person has been flagged for inclusion on the Prioritization List according to the mechanism defined by the Collaborative Applicant;
- The person has not been included in the Prioritization List for more than 90 sequential days during which time no housing provider successfully made contact with the person.

If the Collaborative Applicant identifies that a person has been included on the Prioritization List for more than 90 sequential days during which time no housing provider successfully made contact with the person, the Collaborative Applicant shall un-flag them for inclusion on the Prioritization List.

When the Collaborative Applicant un-flags a household for inclusion on the Prioritization List, the Collaborative Applicant or its designee shall attempt to contact the household at least once via each contact method available in HMIS to inform them that they have been un-flagged and, if the household is still interested in receiving housing and/or services, to redirect that household to their nearest CES Access Point(s) for reassessment.

G. Prioritizing from HMIS-Comparable Databases

When the Collaborative Applicant updates the Prioritization List, it shall include all people experiencing homelessness whose data has been entered into an HMIS-comparable database who meet the following criteria:

- The person has been referred to the Collaborative Applicant for inclusion on the Prioritization List during the Assessment component of CES;
- The person has not been flagged to the Collaborative Applicant for removal from the Prioritization List during the Intake component of CES;
- The person has not been included in the Prioritization List for more than 90 sequential days during which time no housing provider successfully made contact with the person.

If the Collaborative Applicant identifies that a person has been included on the Prioritization List for more than 90 sequential days during which time no housing provider successfully made contact with the person, the Collaborative Applicant shall respond to the owner of the HMIS-comparable database indicating that the person has been removed from the Prioritization List.

H. Prioritizing from the RRH to PSH Bridge

When the Collaborative Applicant updates the Prioritization List, it shall include all people experiencing homelessness who are currently enrolled in a CoC Program- or ESG-funded RRH project who meet the following criteria:

- They were experiencing chronic homelessness according to the definition in this document immediately prior to entering the RRH project;
- They have been approved in writing for inclusion on the Prioritization List by the Continuum of Care Manager.

The "RRH to PSH Bridge" is intended to be used rarely, and the Continuum of Care Manager is required to approve each use to ensure that the LA BOSCO's RRH resources do not become a 'feeder system' for its PSH resources.

The process for requesting a participant be added to the Prioritization List under the "RRH to PSH bridge" is as follows:

- The RRH project in which the participant is currently enrolled must submit a request in writing (via email or postal mail) to the Continuum of Care Manager no later than 30 days before the participant is projected to exit the RRH project;
- The request must provide sufficient detail for the Continuum of Care Manager to determine that:
 - The participant will, without the "RRH to PSH bridge," return to literal homelessness upon exiting the RRH project;
 - The participant was, upon entry into the RRH project, expected to successfully exit the RRH project to self-sufficient permanent housing;
 - The participant fulfills one or more situational indicators that the "RRH to PSH bridge" is necessary.

The situational indicators that the "RRH to PSH bridge" might be necessary for a given participant include but are not limited to:

- Participant has been served more than once by RRH projects;
- Participant has significant legal and/or criminal histories that would present a disproportionately large barrier to achieving self-sufficient permanent housing;
- Participant is unable to meet basic needs, e.g. food, hygiene;
- Participant has significant health issues that would present a disproportionately large barrier to achieving self-sufficient permanent housing;
- Participant has disproportionately large economic barriers that would prohibit them achieving self-sufficient permanent housing;
- Other indicators or patterns in the participant's case and service use history indicate that the participant will most likely not ever achieve self-sufficient permanent housing, and that they will continue to experience literal homelessness for the foreseeable future without advanced housing resources.

The Continuum of Care Manager will respond in writing to all requests within 14 days.

The Continuum of Care Manager may approve or deny any request for the "RRH to PSH bridge" for any reason at their discretion, including on the basis of evidence that a project intended to use the "RRH to PSH bridge" for a given participant upon their admission to the RRH project or that a project is overusing the "RRH to PSH bridge."

I. Prioritizing from the Emergency Transfer Plan

When the Collaborative Applicant updates the Prioritization List, it shall include all people experiencing homelessness who trigger the "Emergency Transfer Plan" section of the LA BOSCO's *Written Standards* who meet the following criteria:

- The person is currently enrolled in a housing project that serves a given Region;
- For their safety, the person would prefer to live in a different Region;
- The project in which the person is currently enrolled does not serve that different Region.

J. Rejoining the Prioritization List

People experiencing homelessness who are removed from the Prioritization List for any reason can be re-added to the Prioritization List without re-completing any of the core elements of CES. Access Points are required to advise each household that that household may be re-assessed using CES' current triage tool if the household has experienced any significant changes that might affect the outcome of its assessment.

K. Special Populations

The Board may, at its discretion, designate "special populations" for the purposes of the Prioritization List.

Special populations may comprise members of certain subpopulations, people living in certain geographies or locations, or other characteristics as determined by the Board.

Special populations may be designated for a limited or open-ended period of time.

VIII. Referral

A. Summary

Under the Referral component of CES:

1. Housing providers request referrals from the Collaborative Applicant;
2. The Collaborative Applicant filters the Prioritization List according to the parameters of housing providers who request referrals;
3. The Collaborative Applicant refers people experiencing homelessness to housing providers.

The Prioritization component of CES is provided by:

- The Collaborative Applicant;
- All CoC Program-funded TH, RRH, TH-RRH, or PSH projects;
- All ESG-funded TH and RRH projects;
- Any other transitional or permanent housing project that serves people experiencing homelessness, uses HMIS or an HMIS-comparable database, and chooses to request a referral from the Prioritization List.

B. Housing Projects: Requesting a Referral

This subsection applies to the following entities:

- All CoC Program-funded TH, RRH, TH-RRH, or PSH projects;
- All ESG-funded TH and RRH projects;
- Any other transitional or permanent housing project that serves people experiencing homelessness, uses HMIS or an HMIS-comparable database, and chooses to request a referral from the Prioritization List.

Any project that meets the above criteria (hereafter referred to as a "housing project") may request a referral from the Prioritization List when that housing project is able to provide the Intake component of CES (e.g. "when they have an opening"). CES strongly encourages projects to request referrals as soon as possible once a project slot or bed is open.

Requests must be sent to the Collaborative Applicant by the method, in the form, and including the information specified by the Collaborative Applicant.

C. Collaborative Applicant: Filtering the Prioritization List

This subsection applies to the Collaborative Applicant.

When the Collaborative Applicant receives a referral request from a housing project, it shall filter the Prioritization List according to the housing project's eligibility parameters.

Generally, eligibility parameters are set exclusively by the housing project's application to the CoC Program, ESG, or another funding source.

The Collaborative Applicant may, at its discretion, disqualify any eligibility parameter except those eligibility parameters established by a federal or other governmental funding source or a project application to a federal or other governmental funding source.

D. Collaborative Applicant: Fulfilling Referral Requests

This subsection applies to the Collaborative Applicant.

When the Collaborative Applicant receives a referral request from a housing project, it shall, within 72 hours, respond by referring one or more people experiencing homelessness from the Prioritization List, after the

Prioritization List has been filtered according to that housing project's eligibility parameters, to that housing project.

The Collaborative Applicant shall refer people experiencing homelessness from the Prioritization List in descending order.

A person experiencing homelessness who has been referred by the Collaborative Applicant to a housing project is hereafter referred to as an "open referral." The Collaborative Applicant shall track open referrals on the Prioritization List. The Collaborative Applicant shall not refer an open referral to any other housing project.

The Collaborative Applicant may, at its discretion, respond to a referral request by referring more than one person experiencing homelessness to the housing project. The Collaborative Applicant is encouraged to do so under the following circumstances:

- If the housing project has more than one "opening";
- If the Collaborative Applicant's current anticipated response time to referral requests is greater than one business day.

The Collaborative Applicant shall determine the method, the form, and the information included in its response to a referral request.

IX. Intake

A. Summary

Under the Intake component of CES:

1. Housing providers contact people experiencing homelessness who have been referred to them;
2. Housing providers fill "open slots" in their housing projects;
3. Housing providers inform the Collaborative Applicant about the resolution of each person experiencing homelessness who was referred to them;
4. The Collaborative Applicant repopulates all people experiencing homelessness who were not successfully enrolled in a housing project to the Prioritization List.

The Prioritization component of CES is provided by:

- The Collaborative Applicant;
- Housing projects.

B. Housing Projects: Contacting Referrals

This subsection applies to housing projects.

When a housing project receives one referral from the Prioritization List, that project shall begin attempting to contact that person experiencing homelessness on the next available business day.

When a housing project receives multiple referrals from the Prioritization List, that project shall begin attempting to contact as many households as they have open slots on the next available business day.

Housing projects that receive multiple referrals shall contact people in descending order of their VI-SPDAT scores; if two or more of those referrals share the same VI-SPDAT scores, housing projects shall contact those referrals in descending order of their LOT homeless.

Housing projects shall attempt to contact each referral for, at minimum, three business days. At minimum, "contact" must include the following:

- The project attempts to contact the referral each day via at least one mechanism of contact;
- At least once per phone number and address, the project must attempt to contact the referral via all phone numbers and addresses entered within the previous 6 months in the referral's profile in HMIS or HMIS-comparable database;
- If the project is unable to contact the referral using their phone numbers/addresses in the referral's profile in HMIS or HMIS-comparable database, the project must, at least once, attempt to contact the referral by connecting with the organizations that most recently entered service transactions for that referral in HMIS or an HMIS-comparable database.

After three business days, housing projects may, at their discretion and on a case by case basis, either:

- Continue attempting to contact the referral; or,
- Return the referral to the Prioritization List via the mechanism outlined in the "Housing Projects: Resolution" subsection, below, and either (1) move on to another referral, if the project received multiple referrals, or (2) return to the Referral component of CES.

C. Housing Projects: Filling Slots

This subsection applies to housing projects.

Once a housing project has successfully contacted a referral, that housing project shall attempt to establish that person's eligibility to enroll in that project. Determining eligibility usually involves documenting, at minimum, the following:

- That the person experiencing homelessness meets the applicable HUD definition of homelessness;
- That the person is a member of at least one of the project's subpopulation(s);
- *For projects serving people experiencing chronic homelessness:* that the person experiencing homelessness meets the HUD definition of experiencing chronic homelessness, including that the head of household has a documented disability.

If the housing project is able to successfully document that the person experiencing homelessness is eligible to enroll in that project, that project shall enroll that person.

If the housing project is unable to successfully document that the person experiencing homelessness is eligible to enroll in that project, that project shall return that person to the Prioritization List via the mechanism outlined in the "Housing Projects: Resolution" subsection, below.

D. Housing Projects: Resolution

This subsection applies to housing projects.

Housing projects shall inform the Collaborative Applicant about the outcome of each referral that they receive.

The following is a list of possible resolutions, and for each resolution, when the housing project shall inform the Collaborative Applicant and the information they shall provide:

| Resolution | Timing | Information |
|-------------------------------------|---|--|
| Successful Enrollment | Within three business days of enrollment | <ul style="list-style-type: none"> • Referral was successfully enrolled |
| Referral Could Not Be Contacted | After at least three business days of attempted contact | <ul style="list-style-type: none"> • Referral could not be contacted |
| Eligibility Could Not Be Documented | After attempting to document eligibility | <ul style="list-style-type: none"> • Which element(s) of eligibility could not be documented • Why those elements could not be documented |
| Referral Rejected | Within three business days of rejection | <ul style="list-style-type: none"> • Referral was rejected <p><i>Note: referrals can only be rejected according to the "Rejecting Referrals" subsection, below.</i></p> |
| Participant Declined Enrollment | Within three business days of declination | <ul style="list-style-type: none"> • Participant declined enrollment |

E. Collaborative Applicant: Repopulation

This subsection applies to the Collaborative Applicant

When a housing project informs the Collaborative Applicant about a referral's resolution, the Collaborative Applicant shall take the following action(s) in response to that resolution:

| Resolution | Collaborative Applicant Action(s) |
|---------------------------------|--|
| Successful Enrollment | <ul style="list-style-type: none"> • Remove the participant from the Prioritization List • <i>HMIS participants:</i> un-flag participant as eligible for the Prioritization List |
| Referral Could Not Be Contacted | <ul style="list-style-type: none"> • <i>If participant has been returned for this Resolution 3+ times:</i> remove the participant from the Prioritization List |

| Resolution | Collaborative Applicant Action(s) |
|-------------------------------------|---|
| | <ul style="list-style-type: none"> • <i>Otherwise:</i> re-add the participant to the Prioritization List and mark down the number of times they have been returned for this Resolution |
| Eligibility Could Not Be Documented | <ul style="list-style-type: none"> • <i>If homeless eligibility could not be documented:</i> remove the participant from the Prioritization List • <i>If chronic homeless eligibility could not be documented:</i> remove the chronic homelessness flag from the participant in HMIS, or contact the appropriate service provider to remove that flag in their HMIS-comparable database • <i>Other eligibility could not be documented:</i> take the appropriate action to remove that eligibility flag in HMIS, or contact the appropriate service provider to remove that flag in their HMIS-comparable database |
| Referral Rejected | <ul style="list-style-type: none"> • Re-add the participant to the Prioritization List |
| Participant Declined Enrollment | <ul style="list-style-type: none"> • Re-add the participant to the Prioritization List |

F. Rejecting Referrals

Under normal circumstances, housing projects cannot reject referrals.

If a housing project believes that a specific referral presents a credible threat of harm to that project's staff or other participants, that housing project may request a waiver from the Collaborative Applicant to allow that project to reject that specific referral. (Housing projects operated by the Collaborative Applicant may instead request a waiver from the CoC Board.)

The Collaborative Applicant (or Board) shall, on a case by case basis, approve or deny waivers based on its review of whether the referral presents a credible threat of harm to the requesting project's staff or other participants.

If the Collaborative Applicant (or Board) determines that a specific referral would present a credible threat of harm to the staff and other participants of any housing project, the Board may, at its discretion, take any action it deems appropriate within the scope of all applicable federal, state, and local laws and regulations to ensure the safety of all people who engage CES.

G. Participants Declining Referrals

Participants may, at their discretion, decline to be enrolled in any project for any reason.

The Collaborative Applicant shall re-add to the Prioritization List without penalty any participant who declines enrollment in any project.

At its discretion, the Collaborative Applicant may choose not to re-add a participant to the Prioritization List if that participant has refused an offer of housing three or more times in the last 6 months.

H. Temporary Removal from the Prioritization List

Under normal circumstances, participants cannot be removed from the Prioritization List except at their request or as otherwise outlined in this document.

If the Coordinated Entry Committee or Collaborative Applicant have evidence that a given participant has met all of the following criteria, they may submit a written appeal to the Board, including the relevant evidence, requesting that the participant be removed from the Prioritization List for a given period of time. The period of time specified must be specific and appropriate to the situation; it cannot be indefinite or open-ended.

The criteria are:

- The participant has, in the past, engaged in activities (e.g. fraudulent, illegal and dangerous) related to CES or a CES-participating agency that would render them prohibitively difficult for any CES-participating agency to serve in a way that is both ethical and compliant with federal, state, and local laws and regulations;
- The participant is likely continue engaging in those activities even if they receive housing and appropriate case management.

The Board will review the appeal and render their decision in writing to the appealing entity (the Collaborative Applicant or the Coordinated Entry Committee) and to the participant in question.

The appealing entity or the participant may appeal the Board's decision within 30 calendar days of the date on the Board's written response. The Board's response to any appeal is final.

Appendix A: Homeless Prevention Projects

ESG-funded Homeless Prevention (HP) projects shall define how they assess, prioritize, and intake participants in their project policies and procedures. HP projects shall create their project policies and procedures in accordance with their project applications and all applicable federal, state, and local regulations.

HP projects shall record their participants' information in HMIS or an HMIS-comparable database as required by federal regulations.

Appendix B: The Louisiana Permanent Supportive Housing Project

The CoC Program-funded Louisiana Permanent Supportive Housing (LAPSH) project shall intake participants according to its written policies and procedures and within the scope of all applicable federal laws and statutes instead of according to the procedures laid out in this document.

Appendix C: Grievance Procedure

Participants may file a grievance related to any component of CES. Grievances should be submitted by postal mail to the LA BOSCOG at the following address:

Continuum of Care Manager
1690 North Boulevard, 2nd Floor
Baton Rouge, LA 70802

Grievances can also be submitted by phone to the Continuum of Care Manager at 225-242-1388 or by email at glevine@lhc.la.gov.

The Collaborative Applicant shall, for all grievances in which it does not have a conflict of interest, respond to the participant within ten business days.

The Board shall, for all grievances in which the Collaborative Applicant has a conflict of interest, respond to the participant within ten business days.

Appendix D: Equal Access, Accommodations, and Communication

A. Non-Discrimination and Fair Housing

The Collaborative Applicant shall take all necessary steps to ensure CES is administered in accordance with the Fair Housing Act¹³ by promoting housing that is accessible to and usable by persons with disabilities. CES complies with the non-discrimination requirements of the Fair Housing Act, which prohibits discrimination in all housing transactions on the basis of race, national origin, sex, color, religion, disability status and familial status. This also includes protection from housing discrimination based on source of income. In addition, the Louisiana Equal Housing Opportunity Act¹⁴ prohibits discrimination on the basis of color, race, religion, sex, national origin, disability, and familial status, including children under the age of 18 living with parents or legal custodians, pregnant women, and people securing custody of children under the age of 18.

B. Civil Rights and Fair Housing Law

Recipients and subrecipients of projects funded by both the CoC Program and ESG must comply with applicable civil rights and fair housing laws and requirements, including 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:

- The Fair Housing Act prohibits discriminatory housing practices based on race, color, religion, sex, national origin, disability, or familial status;
- Section 504 of the Rehabilitation Act prohibits discrimination on the basis of disability under any program or activity receiving Federal financial assistance;
- Title VI of the Civil Rights Act prohibits discrimination on the basis of race, color or national origin under any program or activity receiving Federal financial assistance;
- Title II of the Americans with Disabilities Act prohibits public entities, which includes state and local governments, and special purpose districts, from discriminating against individuals with disabilities in all their services, programs, and activities, which include housing, and housing-related services such as housing search and referral assistance;
- Title III of the Americans with Disabilities Act prohibits private entities that own, lease, and operate places of public accommodation, which include shelters, social service establishments, and other public accommodations providing housing, from discriminating on the basis of disability.

In addition, HUD's Equal Access Rule¹⁵ 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, and Housing Opportunities for Persons with Aids (HOPWA).

The CoC Program interim rule also contains a fair housing provision¹⁶, as do ESG¹⁷ and HOPWA¹⁸.

In certain circumstances, some projects may use disability status or other protected class information to limit enrollment, but only if Federal or State statute explicitly allows the limitation (e.g. HOPWA-funded projects may only serve people living with HIV/AIDS).

¹³ 24 U.S.C 3601-3619

¹⁴ <https://www.lhc.la.gov/fair-housing-basics#>

¹⁵ 24 CFR 5.105(a)(2)

¹⁶ 24 CFR 578.93

¹⁷ 24 CFR 576.407(a) and (b)

¹⁸ 24 CFR 574.603

C. Reasonable Accommodation

The Fair Housing Act prohibits discrimination in housing on the basis of race, color, religion, sex, national origin, familial status, and disability. One type of disability discrimination prohibited by the Act is the refusal to make reasonable accommodations in rules, policies, practices, or services when such accommodations may be necessary to afford a person with a disability the equal opportunity to use and enjoy a dwelling.

A reasonable accommodation is a change, exception, or adjustment to a rule, policy, practice, or service that allows a person with a disability to use and enjoy housing, including public and common use areas. Recipients and subrecipients of projects funded by both the CoC Program and ESG must at all times provide reasonable accommodations to households accessing CES. In addition, through contracting, projects are required to have reasonable accommodations such as accessible entrances, TTY, and other aids readily available. Any reasonable accommodation requests received by any organization participating in CES shall be redirected back to the housing program(s) affected to follow policies and procedures of that organization. Reasonable accommodations may be requested by the household verbally or in writing, whichever is most accessible for the household. Examples of reasonable accommodations that a household may request include but are not limited to:

- Safety issues (may affect housing choice, transfer between CES resources, etc.);
- Change in service need or choice of housing interventions;
- Refusal to provide data or responses to assessment questions;
- Mobility or language/communication accommodations;
- Providing forms in large print;
- Allowing a service animal in a "no pets" building;
- Granting a move to the ground floor when someone can no longer climb stairs;
- Offer to move a resident to a different (more accessible) unit instead of allowing a modification in the person's current unit (but cannot insist that the person moves).

If a housing provider can accommodate a person's needs by moving them to another housing unit, the housing provider has permission to move the resident within their own housing portfolio. The housing provider is expected to make the original housing unit available to another CES participant.

D. Affirmative Marketing

The CoC affirmatively markets housing and services to eligible persons regardless of race, color, national origin, religion, sex, age, familial status, or disability. The CoC affirmatively markets housing and services to those who are least likely to apply in the absence of special outreach. CES Access Points and outreach workers provide access throughout the LA BOSCO's entire geography. Street outreach programs that contribute to CES intentionally seek out people living with disabilities, co-occurring conditions, and other barriers that make them least likely to apply for or seek out resources. Through ESG-funded projects, CES conducts outreach to the lesbian, gay, bisexual, transgender, queer, and associated peoples population (LGBTQ+) and to the runaway and homeless youth (RHY) population, two groups the LA BOSCO has identified as least likely to engage emergency shelter and other CoC resources.

E. General Marketing

The Collaborative Applicant shall provide marketing information about the CES to community stakeholders. Stakeholders may include but are not limited to 24-hour establishments, restaurants, hospitals, hot meal programs, churches, schools, check cashing locations, and other places known to be frequented by people experiencing homelessness.

CES Access Points and outreach workers are encouraged to explore outreach activities such as hosting booths at local community events, resource fairs, festivals, and county fairs.

Appendix D: Change Log

Overview

This section contains a running list of changes to this document beginning with Version 2.1.

The changes listed in this section are not necessarily all changes made in a given Version; instead, they are intended to give a high-level overview of the most significant changes made in a given Version.

Version 2.2

- Incorporated all text from the former Coordinated Entry COVID-19 supplement as red text in this document
- Participants in the Houma Region are exempt from the Intervention component until further notice
- Reduced the 'time out' period on the Prioritization List from 180 to 90 days
- The Collaborative Applicant is now required to attempt to contact all participants who 'time out' of the Prioritization List
- People can now join the Prioritization List without redoing any of the previous components of CES

Version 2.1

- Added outline formatting elements to the document.
- Created an Approval section at the end of the document.
- In II.A. "People Experiencing Homelessness," replaced the definitions of homelessness with citations for the Code of Federal Regulations.
- Created II.D.3, "Exemptions," which empowers the Board to exempt certain older CoC Program projects from one or more requirements of this document.
- Created IV.E.1, "People Fleeing Human Trafficking," which states that people experiencing homelessness who are fleeing human trafficking are not required to receive the Intervention Component or wait 30 days from their date of presentation before receiving the Assessment and Prioritization Components.
- Created VI.E, "Recontacting Participants for Intervention and/or Assessment," which clarifies (1) the process by which CES Access Points should recontact participants for the Intervention and Assessment Components and (2) when CES Access Points should exit those participants from the BOS CES project in HMIS.
- Created VII.D, "Prioritization of Dedicated Permanent Supportive Housing Beds," which creates an order of priority for filling PSH beds dedicated to people experiencing chronic homelessness when no participants who meet the definition of chronic homelessness can be found.
- Created Appendix B, "The Louisiana Permanent Supportive Housing Project," which states that the LAPSH project shall intake participants according to its project's policies and procedures rather than the process in this document.
- Created Appendix D, "Change Log," which contains a running list of changes to this document beginning with Version 2.1.

Approval

Approval Process Timeline

- October 6, 2020 -- CES P&P (Version 2.2) approved by the Board (merges in all language in Coordinated Entry COVID-19 Supplement [Version 1.1])
- October 2, 2020 -- Coordinated Entry COVID-19 Supplement (Version 1.1) approved by Coordinated Entry Committee
- September 25, 2020 -- Coordinated Entry COVID-19 Supplement (Version 1.1) released for public comment
- July 2020 -- Coordinated Entry COVID-19 Supplement (Version 1.0) approved by Board
- July 2020 -- Coordinated Entry COVID-19 Supplement (Version 1.0) approved by Coordinated Entry Committee
- July 2020 -- Coordinated Entry COVID-19 Supplement (Version 1.0) released for public comment
- October 23, 2019 -- initial version approved by the Board
- October 18, 2019 -- initial version approved by the Coordinated Entry Committee
- August 14, 2019 -- initial version released for public comment

Signature

For this document to take effect, it must bear the signature of either the Board Chair or the Board Vice Chair.

This document is effective as of the date on its first page, not as of the date of this page's authorizing signature. This document's effective date cannot be earlier than the date of this page's authorizing signature.

By signing below, the signatory certifies that this document has been reviewed and approved for release according to the procedures of both the LA BOSCOB's Coordinated Entry Committee and the LA BOSCOB Board. If the signatory is the Board Vice Chair, the signatory also certifies that they have the authority to sign this document as granted by most recently approved version of the LA BOSCOB Governance Charter.

Winona Connor

Winona Connor, Chair
LA BOSCOB Board

10/12/2020

Date

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