

# **Southeastern Oklahoma Regional Continuum of Care**

## **Coordinated Entry System Policies and Procedures**

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## Definitions

Terms used throughout these policies and procedures are defined below:

***Chronically Homeless (HUD Definition):*** To be considered chronically homeless, a person must have a disability and have been living in a place not meant for human habitation, in an emergency shelter (including hotels and motels paid for by charitable organizations or by federal, state and local government programs), or transitional housing for the last 12 months continuously or on at least four occasions in the last three years where those occasions cumulatively total at least 12 months

***Disability (HUD Definition):*** A physical, mental, or emotional impairment, including impairment caused by alcohol or drug abuse, post-traumatic stress disorder, or brain injury that is expected to be long-continuing or of indefinite duration, substantially impedes the individual's ability to live independently, and could be improved by the provision of more suitable housing conditions.

***Fleeing domestic abuse or violence (HUD Definition Category 4):*** Any individual or family who: (i) Is fleeing, or is attempting to flee, domestic violence; (ii) Has no other residence; and (iii) Lacks the resources or support networks to obtain other permanent housing

***Stalking*** means a course of conduct directed at a specific person that would cause a reasonable person to feel fear. (Oklahoma Attorney General) The full Oklahoma statute on stalking can be found at the following web address:

<http://www.oscn.net/applications/oscn/DeliverDocument.asp?CiteID=69647>

***Human trafficking*** is the recruitment, transportation, transfer, harboring, or receipt of persons by improper means (such as force, abduction, fraud, or coercion) for an improper purpose including forced labor or sexual exploitation. (National Institute of Justice)

***Homeless Under other Federal statutes (HUD Definition Category 3):*** Unaccompanied youth under 25 years of age, or families with Category 3 children and youth, who do not otherwise qualify as homeless under this definition, but who: (i) Are defined as homeless under the other listed federal statutes; (ii) Have not had a lease, ownership interest, or occupancy agreement in permanent housing during the 60 days prior to the homeless assistance application; (iii) Have experienced persistent instability as measured by two moves or more during in the preceding 60 days; and (iv) Can be expected to continue in such status for an extended period of time due to special needs or barriers

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

resided for 90 days or less and who resided in an emergency shelter or place not meant for human habitation immediately before entering that institution

# **Southeastern Oklahoma Regional Continuum of Care Coordinated Intake Policies and Procedures**

## **Background**

### ***What is Coordinated Intake?***

Coordinated intake (also known as coordinated entry) is a consistent, community wide process to match people experiencing homelessness to community resources that will most adequately address their situations. In a community using coordinated intake, homeless individuals and families complete a standard assessment survey that helps identify the services that are most well-suited to the needs of that household. Participating programs accept referrals from the system, reducing the need for people to traverse the city seeking assistance at every provider separately. When participating programs do not have enough space to accept all referrals, people are prioritized for services based on vulnerability.

### ***HUD Requirement***

A Continuum of Care (CoC) is a group of organizations that provide services to citizens who are homeless or impoverished within a defined geographic area. Through the Continuum of Care Program, the Department of Housing and Urban Development (HUD) allocates funds to several of these organizations for the provision of permanent supportive housing to disabled individuals who are homeless or families that are homeless and have a disabled family member. Under the interim rule for the Continuum of Care Program, each CoC must establish and operate a centralized or coordinated assessment system (24 CFR 578.7 (a)(8)). HUD defines a centralized or coordinated assessment system as “a centralized or coordinated process designed to coordinate program participants’ intake assessment and provision of referrals. A centralized or coordinated assessment system covers the geographic area, is easily accessed by individuals and families seeking housing or services, is well advertised, and includes a comprehensive and standardized assessment tool” (24 CFR 578.3)

Participation in the coordinated intake system is required for HUD CoC and ESG grantees. The Coordinated intake system described in this manual is designed to meet the requirements of the HEARTH Act, under which, at a minimum, Continuums of Care must adopt written standards that include:

- i. Policies and procedures for providing an initial housing assessment to determine the best housing and services intervention for individuals and families;
- ii. A specific policy to guide the operating of the centralized or coordinated assessment system on how its system will address the needs of individuals and families fleeing, or attempting to flee, domestic violence, dating violence, sexual assault, or stalking, but who are seeking shelter services from non-victim service providers;
- iii. Policies and procedures for evaluating individuals’ and families’ eligibility for assistance;
- iv. Policies and procedures for determining and prioritizing which eligible individuals and families will receive transitional housing assistance;
- v. Policies and procedures for determining and prioritizing which eligible individuals and families will receive rapid rehousing assistance;

- vi. Policies and procedures for determining and prioritizing which eligible individuals and families will receive permanent supportive housing assistance.

### ***Systems Change***

The implementation of the Coordinated Intake System necessitates significant, community-wide change. To help ensure that the system will be effective and manageable for homeless persons and persons at-risk of homelessness and for the housing and service providers tasked with meeting their needs, a group of stakeholders was involved in its design. In addition, particularly during the early stages of implementation, the Southeastern Oklahoma Regional Continuum of Care anticipates adjustments to the processes described in this manual. An evaluation of the Coordinated Intake System will occur at least annually or as needed and will provide ongoing opportunities for stakeholder feedback. This process will be initiated by the Coordinating Entity and will involve partner agencies. The Coordinating Entity will be responsible for monitoring the Coordinated Intake System.

### ***Benefits of Coordinated Intake***

Coordinated intake will benefit our community by:

- Providing a clearer and more streamlined path to accessing assistance for people who are currently or at imminent risk of experiencing homelessness;
- Reducing the need for people to contact multiple housing programs and fill out multiple applications to join waitlists. Coordinated intake will assess people for all participating permanent housing programs at the same time;
- Prioritizing scarce housing resources for the most vulnerable; and
- Improved data collection and quality that supports data-driven decision making based on client-level and system-wide needs.

## **Roles and Expectations**

### ***Coordinating Entity***

The Southeastern Oklahoma Continuum of Care (SEO CoC) Coordinated Entry Sub-committee is the designated Coordinating Entity. The Coordinating Entity is responsible for the day-to-day administration of the Coordinated Intake System, including but not limited to the following:

- Designing and delivering training at least annually to all key stakeholder organizations but not limited to the required training for sub recipients. This may include cultural and linguistic competency training;
- Ensuring pertinent information is entered into HMIS for monitoring and tracking the process of referrals including vacancy reporting and completion of assessments;
- Managing manual processes as necessary to enable participation in the Coordinated Intake System by providers not participating in HMIS;
- Designing and executing ongoing quality control activities to ensure clarity, transparency, and consistency in order to remain accountable to clients, referral source, and homeless service providers throughout the coordinated intake process. This will mean that controls are in place to ensure that data is a valid and up-to-date source to which the aforementioned parties can refer throughout the process;
- Updating the Coordinated Intake & By Name List Policies and Procedures;

- Leading periodic evaluation efforts to ensure that the Coordinated Intake System is functioning as intended; such evaluation efforts shall happen at least annually;
- Leading efforts to make periodic adjustments to the Coordinated Intake System as determined as necessary; such adjustments shall be made at least annually based on findings from evaluation efforts;
- Ensuring that the Coordinated Intake System process is informed by a broad and representative group of stakeholders;
- Ensuring that the coordinated Intake System is updated as necessary to maintain compliance with all federal statutory and regulatory requirements;
- Conducting annual monitoring of CoC and ESG agencies. This will ensure that the CES process is available to all eligible persons regardless of race, color, national origin, religion, sex, age, familial status, disability, actual or perceived sexual orientation, gender identity, or marital status. They also monitor that steps are taken to ensure effective communication with individuals with disabilities and limited English proficiency. Finally, they monitor CoC agencies to ensure that all access points to the CES are providing connections to other main-stream and community-based assistance services.

#### ***Homeless Program Coordinator***

The SEO CoC Coordinated Entry Committee will serve as the Homeless Program Coordinator.

- Helps communicate resources between partner agency staff and case managers;
- Convenes and coordinates the coordinated case management meetings for the purpose of staffing cases and prioritizing housing and case management resources;
- Coordinates the updating of housing placement and case management of vulnerable chronically homeless persons via the by-name list with partner agencies;
- Works with the HMIS Administrator to maintain and update the by-name list and run any necessary reports.
- Conducts trainings as the assigned Collaborative Applicant at least annually or as needed to ensure that staff persons at organizations that serve as CES access points are up to date on current common assessment tools. All staff administering the assessment should have access to materials that clearly describe the methods by which the assessments are conducted.

#### ***HMIS Administrator***

The HMIS Administrator is responsible for the administration of the HMIS software and providing technical assistance to participating agencies.

- Responsible for making sure agencies are entering data regularly and keeping data up-to-date.
- Responsible for making sure that all HMIS users have signed the HMIS memorandum of agreement.

## Access to Coordinated Entry System

From the HUD Core Elements of Coordinated Entry Guidebook: Written policies and procedures must describe the relationship of the CoC(s) to the coordinated entry process, addressing at a minimum how the core elements of ensuring access, standardizing assessments, and implementing uniform referral will operate in situations where the geographic boundaries of the CoC(s) and the boundaries of the crisis response system do not exactly align.

Access points are locations where people who are experiencing homelessness go to determine eligibility for emergency services. In the SEO CoC, certain providers and programs may serve as an access point for participants to help with emergency housing needs. Access points shall be easily accessed by individuals and families seeking services. These access points work in partnership with a household's existing community resources to complete the Coordinated Entry System (CES) assessment process. The SEO CoC shall strive to have a minimum of one access point in each county included in its geographic area. Please refer to **Appendix A** for a current list of agencies and programs serving as access points into the Coordinated Entry System. Resources and information about the CES access points are provided to various community locations and other places known to be frequented by the target population. In addition, each access point is encouraged to explore various outreach activities such as hosting a booth at local community events, resource fairs, festivals and county fairs to provide information and resources.

Due to the diversity and size of the SEO CoC, access to the Coordinated Entry System follows a "No Wrong Door" approach. The principles of this approach are:

- All people experiencing homelessness can access the Coordinated Entry System regardless of which participating agency (access point) they initially contact.
- Each participating agency shall use the same assessment tools and use the same assessment approach.
- Staff of participating agencies shall connect persons experiencing homelessness to the Coordinated Entry System and provide appropriate referrals to emergency services, even if that service is not available at their agency.
- Participating providers have a responsibility to respond to the range of service needs pertaining to homelessness and housing, and act as the primary contact for persons who apply for assistance through their project unless or until another provider assumes that role.
- People shall have equal access to information about the housing assistance for which they are eligible in order to assist them in making informed choices about available services that best meet their needs.

Participating housing providers shall work collaboratively to achieve responsive and streamlined access to services, and cooperate to use available resources to achieve the best possible housing outcomes for people, particularly for those with high, complex or urgent needs.



### ***Emergency Services and Prevention***

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

The Coordinated Entry System (CES) shall allow emergency services, including all domestic violence, and emergency services providers, emergency shelters, and short term crisis residential programs, to operate with as few barriers to entry as possible. Access to emergency services, such as domestic violence and emergency services hotlines, drop-in service programs, emergency shelters and motel voucher programs, or other short-term crisis residential programs, is not prioritized through the Coordinated Entry System. All persons in need of emergency services should be connected to those services as requested.

If a person(s) presents after hours, the following should occur:

People presenting at an emergency shelter shall be offered a bed in the emergency shelter where they arrived (if they are population-appropriate). If they are not population-appropriate, they are referred to a shelter that is population-appropriate or has available space.

- If no shelter has available space, the presenting participant is sent to any available crisis housing (churches, hotels or motels, etc.).
- If the participant does not initially present at an emergency shelter, he/she is referred to a population-appropriate one.

The next available day that assessment hours are open, the participant is asked the pre-screening questions and, if needed, referred to a designated access point for assessment.

Identified access points must provide directly, or make arrangements through other means to ensure universal access to crisis response services for participants seeking emergency assistance during operating hours.

The SEO CoC Coordinated Entry System shall utilize prevention and diversion services where possible. The intent of prevention and diversion is to help households end their housing crisis as rapidly as possible with minimal financial and support resources. Additional supports may be applied to households who struggle to stabilize after the initial assistance is provided. Prevention and diversion processes should utilize a multi-step approach, which includes crisis resolution, client choice empowerment, minimum amount of assistance, shortest time period of assistance, maximized use of existing community resources and targeting the resources to those most likely to eventually become homeless without the intervention.

Regional CES Committees shall identify community service providers who assist with keeping individuals and families in their current housing situation and prevent them from entering the homeless service delivery system altogether. If there are no other options, diversion strategies should be utilized to help keep the clients out of the homeless services delivery system. The

process for utilizing these strategies should be implemented with the approved SEO CoC CES prevention and diversion assessment tool. Each family who may be at-risk of homelessness should be assessed in a standard way to provide prevention and diversion services to meet the client's immediate housing crisis needs. Regional CES Committees may ask additional questions, as deemed necessary, to adjust for prevention and diversion services available in their assigned geographic area.

### ***Outreach***

From HUD Core Elements of CE Guidebook: Written policies and procedures must detail a process by which street outreach staff ensure that persons experiencing a housing crisis who are encountered on the streets are prioritized for assistance in the same manner as any other person who accesses and is assessed through coordinated entry.

All CoC and ESG funded street outreach efforts shall participate in the Coordinated Entry System. Street outreach programs shall work with their Regional CES Committee to ensure that outreach workers have adequate access to both paper and/or electronic methods of administering a CES assessment with the same standardized processes offered at site-based access points.

### ***Safety Planning***

From HUD Core Elements of CE Guidebook: Written policies and procedures must also describe the CoC's protocol for extending coordinated entry safety planning and protections to victims of domestic violence who are staying at non victim service provider projects. In addition, written policies and procedures for coordinated entry must include protocols that ensure at a minimum that people fleeing, or attempting to flee, domestic violence and victims of trafficking have safe and confidential access to the coordinated entry process and victim services, including access to the comparable process used by victim service providers, as applicable, and immediate access to emergency services such as domestic violence hotlines and shelters.

The SEO CoC CES Committee recognizes the importance of addressing the safety needs of those individuals and families who are fleeing, or attempting to flee, domestic violence, dating violence, sexual assault, human trafficking or stalking, but who are seeking shelter or services from non-victim specific providers. When an individual or family is actively fleeing and presents at a non-victim service provider, the provider should make every effort to connect the individual with a victim services provider. The services provided may be shelter, but may also be advocacy, safety planning and peer counseling. If, when an assessment is being conducted, a household is determined to be at imminent risk of harm due to domestic violence, the CES assessment staff should immediately assist the household to connect with Domestic Violence Services by calling the local domestic violence provider (see **Appendix B**) or local law enforcement and tending to their immediate transportation and security needs.

Individuals and families may not be denied access to the coordinated entry process on the basis that the participant is or has been a victim of domestic violence, dating violence, sexual assault, or stalking.

## **Assessment Process**

From the HUD Core Elements of Coordinated Entry Guidebook: Written policies and procedures must detail the standardized assessment process, including documentation of the criteria used for uniform decision-making across access points and staff. If the CoC is differentiating access points and assessment tools for any of the five HUD-designated subpopulations, written policies and procedures must separately document the criteria for uniform decision-making for each subpopulation. The criteria must be based on the prioritization standards adopted by the CoC that are used for its different access points and assessment processes.

The SEO CoC Coordinated Entry System shall consist of the following elements: assessment, scoring, prioritization and eligibility determination. The assessment element shall be composed of a preliminary assessment or pre-screening tool which determines if a more in-depth assessment is necessary. If a more detailed assessment is necessary, the most current version of the SEO CoC Assessment Tool shall be used for the appropriate population. This assessment shall be used to evaluate risk factors, vulnerabilities and severity of service needs. Once scoring is completed, individuals are prioritized according to the SEO CoC CES Policies and Procedures. Eligibility is then determined based on prioritization and program requirements. Individuals participating in the assessment process are allowed to decide what information they shall provide during the process, to refuse to answer assessment questions, and to refuse housing and service options without retribution or limiting their access to other forms of assistance.

Access points may encounter individuals or families who are fleeing, or attempting to flee, domestic violence, dating violence, sexual assault, or stalking, but who are seeking shelter or services from non-victim specific provider. These persons should be presented with the option of working with a victim service provider to continue the assessment or continuing with the initial assessment provider after they are thoroughly informed of the impacts of either decision. Each regional CES committee should identify the victim service provider(s) capable and willing to provide the standardized assessment for persons to access the CES in their assigned geographic coverage area. To ensure both safety for participants and consistency for accessing homelessness services, victim service providers must utilize the same assessment, scoring, prioritization and eligibility determination.

### ***Assessment Tool***

The SEO CoC CES shall utilize its own standardized assessment tool(s), developed by the CES Committee, to apply a consistent process throughout the Continuum's entire geographic area in order to achieve fair, equitable, and equal access to services (see **Appendix C**). The SEO CoC will utilize this tool as the assessment tool for all homeless populations. The tool gathers information and scores answers to assessment questions. Scores are tallied then used to determine which Priority Category (1 – 4) a participant will be assigned. Participants may refuse to answer assessment questions without limiting their access to assistance. Assessment staff will work to engage participants in an appropriate and respectful manner to only collect necessary assessment information. When participants refuse to provide complete answers, staff shall communicate how the refusal of information could impact referral options.

### ***Assessment Training***

The Coordinating Entity shall provide initial training protocols, and at least one annual training opportunity to organizations that serve as access points or otherwise conduct assessments. The training may be in-person, a live or recorded online session, or a self-administered training for participating staff at organizations serving as access points or otherwise conducting assessments. The training shall contain, at a minimum, the following:

- A review of the written CES policies and procedures;
- The requirements for use of the assessment information to determine prioritization; and
- The criteria for uniform decision-making and referrals.

### ***Special Cases***

While the SEO CoC Assessment is the chosen tool for coordinated intake in the Southeastern Oklahoma Regional CoC, it is to be used as a guide for prioritization, and may be overridden if necessary.

***Inaccurate SEO CoC Assessment:*** Occasionally a case will arise where the case manager or referring entity does not believe that the SEO CoC Assessment score is consistent with the actual vulnerability of the client. In these cases the case manager or referring entity may advocate for the client to receive a higher score during case conferencing. All present at the case conferencing must reach a consensus in granting the priority to the client in lieu of the SEO CoC Assessment score.

***No SEO CoC Assessment:*** Sometimes clients do not want to do the SEO CoC Assessment; this does not disqualify them from the by-name list or potential housing opportunities. In the event that a client does not have a SEO CoC Assessment, he/she can be added to the by-name list as long as they have signed a release of information. These people will also be prioritized for coordinated outreach in the hope that over time, continual contacts will lead to increased openness to engaging in services and completing the SEO CoC Assessment.

***Domestic Violence:*** This includes individuals who are fleeing, or attempting to flee domestic violence, dating violence, sexual assault, and stalking, but who are seeking shelter or services from non-victim service providers. These individuals must have safe and confidential access to the CES as well as victim-services. They must also have immediate access to emergency shelters such as domestic violence hotlines and shelter.

### ***Release of Information***

All clients shall sign a release of information prior to being entered into HMIS. This release of information allows client data to be shared between participating organizations in HMIS and allows the CoC to securely store client information in HMIS. Clients may opt out of the release entirely, or may choose to leave specific agencies and partners off of the release.

***Clients Fleeing Domestic Violence:*** No victim service provider shall enter any information for any client fleeing domestic violence into HMIS so long as that client is considered to be in danger from an abuser. If non-victim service providers come in contact with a person fleeing domestic violence, they will attempt to refer the client to a

victim service provider. If the client does not wish to be referred, the provider shall follow CoC protocols for serving victims fleeing domestic violence.

### **Prioritization and Eligibility**

From the HUD Core Elements of Coordinated Entry Guidebook: Written policies and procedures must include the process by which the CoC staff will make prioritization decisions for each project type (e.g., PSH, RRH) and the criteria used for prioritization decisions.

Prioritization refers to the process by which all persons in need of assistance who use Coordinated Entry are ranked in order of priority. Prioritization ensures that people with the most severe service needs and levels of vulnerability are prioritized for housing and homeless assistance before those with less severe service needs and lower levels of vulnerability. It is inappropriate to prioritize households based on severity of service need or vulnerability for emergency services, including all domestic violence and emergency services hotlines, drop-in service programs, emergency shelters, domestic violence shelters, and other short term crisis residential programs. Emergency services should operate with as few barriers to entry as possible and be available to anyone who needs and wants them.

Each sub-regional committee shall maintain their own prioritization list. Coordinated entry participants may elect to submit their name to one or multiple lists depending on their choice of desired geographic location.

The SEO CoC utilizes the HUD CPD-16-11 Notice on Prioritizing Persons Experiencing Chronic Homelessness and Other Vulnerable Homeless Persons in Permanent Supportive Housing to prioritize persons experiencing chronic homelessness and other vulnerable households for CoC funded Permanent Supportive Housing. (See **Appendix D**)

#### ***Permanent Supportive Housing***

Permanent Supportive Housing (PSH) is permanent housing paired with supportive services to assist homeless persons with a disability or families with a disabled adult or child member with a disability achieve housing stability.

#### ***Eligibility Criteria for PSH***

- Households must meet the HUD definition of homelessness.
- One adult or child member of the household must have a disability.
- Must follow any additional eligibility criteria set forth in the NOFA through which a project was funded (e.g. projects originally funded under the Samaritan Housing Initiative must continue to serve chronically homeless individuals and families; projects funded under the Permanent Supportive Housing Bonus must continue to serve the homeless population outlined in the NOFA under which the project was originally awarded) and the current grant agreement.

#### ***Prioritizing Dedicated/Prioritized CoC PSH***

Priority Categories from the Assessment Tool will be used to initially prioritize households. Households will be further prioritized within their category using the following parameters.

- Chronically Homeless Individuals and Families with the Longest History of Homelessness and with the Most Severe Service Needs.

In instances where two or more households have equal priority, applicants shall be further prioritized as follows:

- Veterans Not Eligible for Housing/Health VA Services
- Victims of Domestic Violence, Stalking, or Human Trafficking
- Youth (18 – 24 years of age)
- First presented for assistance

### ***Prioritizing Non-Dedicated/Prioritized CoC PSH***

Priority Categories from the Assessment Tool will be used to initially prioritize households. Households will be further prioritized within their category using the following parameters.

- Homeless Individuals and Families with a Disability with Long Periods of Episodic Homelessness and Severe Service Needs.
- Homeless Individuals and Families with a Disability with Severe Service Needs.
- Homeless Individuals and Families with a Disability Coming from Places Not Meant for Human Habitation, Safe Haven, or Emergency Shelter Without Severe Service Needs.
- Homeless Individuals and Families with a Disability Coming from Transitional Housing.
  - An individual or family that is eligible for CoC Program-funded PSH who is currently residing in a transitional housing project, where prior to residing in the transitional housing had lived in a place not meant for human habitation, in an emergency shelter, or safe haven.

In instances where two or more households have equal priority, applicants shall be further prioritized as follows:

- Veterans Not Eligible for Housing/Health VA Services
- Victims of Domestic Violence, Stalking, or Human Trafficking
- Youth (18 – 24 years of age)
- First presented for assistance

### ***Rapid Re-Housing***

Rapid Re-housing (RRH) is available to help those who are homeless become quickly and permanently housed. RRH Projects provide housing relocation and stabilization services and short or medium term rental assistance as needed to help a homeless individual or family move as quickly as possible to permanent housing and achieve stability in that housing

### ***Eligibility Criteria for RRH***

- CoC Program RRH
  - Households must meet the HUD definition of homelessness.
  - Must follow any additional eligibility criteria set forth in the NOFA through which a project was funded and the grant agreement (e.g. in the FY13/14 NOFA, new RRH projects could only serve families with children coming directly from streets or shelter).
  - Programs shall not establish additional eligibility requirements beyond those specified here and those required by funders.

- ESG Program RRH
  - Households must meet Category 1 or Category 4 the HUD definition of homelessness.
- SSVF Program RRH
  - Households must be a “Veteran family”.
  - Households must be “Very low-income” (income does not exceed 50% of area median income).
  - Household must be literally homeless, and at risk to remain in this situation but for grantee’s assistance.

***Prioritizing for RRH***

Priority Categories from the Assessment Tool will be used to initially prioritize households. Households will be further prioritized within their category using the following parameters.

- CoC & ESG Program RRH
  - Eligible participants are referred to the Rapid Re-housing program for which they are eligible and prioritized based the following prioritization:
    - Chronically Homeless individuals and families with the Longest History of Homelessness and with the Most Severe Service Needs
    - Non-Chronically Homeless individuals and families with the Longest History of Homelessness and with the Most Severe Service Needs
 In instances where two or more households have equal priority, applicants shall be further prioritized as follows:
    - Veterans Not Eligible for Housing/Health VA Services
    - Victims of Domestic Violence, Stalking, or Human Trafficking
    - Youth (18 – 24 years of age)
    - First presented for assistance
- SSVF RRH
  - Eligible participants will be prioritized or targeted based on the agreed upon standards set forth in the provider’s SSVF grant agreement.

***Other Housing Types***

For agencies providing other housing types of services, the SEO CoC has chosen to adopt the following priorities in this order:

- Length of time homeless
- SEO CoC Assessment XX score
- Veterans who are not eligible for other Veteran specific services
- Families with children or youth only households

The SEO CoC strongly encourages Other Housing Providers to utilize the CoC adopted priorities.

***Additional Prioritization and Eligibility Notes***

If an agency has identified a specific sub-population within the project’s competition process, it is expected they shall follow the above priorities within their subpopulation focus.

In addition to the prioritization of federally funded beds, it is also important to consider the following priorities:

- High utilization of crisis or emergency services, including emergency rooms, jails, and psychiatric facilities, to meet basic needs
- The extent to which people, especially youth and children, are unsheltered
- Vulnerability to illness or death
- Risk of continued homelessness
- Vulnerability to victimization, including physical assault or engaging in trafficking or sex work

## **Referral Process for CoC- and ESG-funded Resources**

[From the HUD Core Elements of Coordinated Entry Guidebook: Written policies and procedures must document the uniform referral process for all participating projects, including allowable entry requirements and protocol for a project rejecting a referral.](#)

To ensure appropriate quality referrals, individuals and families shall be matched to appropriate housing opportunities, based on availability and in accordance with CES Policy & Procedures regarding prioritization. A housing and service match can be made at any time when there is an opening at the Service Provider's request. Households highest on the prioritization list that match program eligibility have the opportunity to accept or deny housing and services. In addition, if multiple housing opportunities are available, the highest prioritized client that is eligible must have the opportunity to choose which housing option best fits their needs. It is essential that the CES maintain client choice during the referral process.

Both, Service Providers and households, may deny or reject a referral. Service Provider denials should be infrequent and must be documented with a specific justification for the denial or rejection. All Service Providers must provide the reason for a denial, and may be subject to a limit on the number of service denials allowed. If a program is consistently rejecting referrals (more than 25%) the Coordinating Entity will meet with the Service Provider to discuss the issues causing the denials.

### *Examples of specific justification for a denial:*

- Client/household does not meet required criteria for program eligibility
- Client/household unresponsive to three communication attempts
- Client resolved crisis without assistance
- Client/household safety concerns (The Client's/household's health or well-being or the safety of current program participants would be negatively impacted due to staffing, location, or other programmatic issues).
- Client/household needs cannot be addressed by the program (The program does not offer the services and/or housing supports necessary to successfully serve the household).
- Program at bed/unit/service capacity at time of referral
- Property management denial (include specific reason cited by property manager)



- Conflict of interest

## **Client Rights**

Client Rights may be based on partner agency client rights and grievance policies, which may vary from agency to agency. Appeals regarding eligibility decisions also occur at the agency level. If clients feel that they have been discriminated against, then a non-discrimination complaint may be filed through Legal Aid Services of Oklahoma, Inc.

***Fair Housing Act:*** Clients are protected by the Fair Housing Act, which protects from discrimination when people are renting, buying, or securing financing for any housing. Specifically, these policies and procedures are informed by Federal, State, and local Fair Housing laws and regulations to ensure that participants are not steered towards any particular facility or neighborhood because of race, color, national origin, religion, sex, disability, or the presence of children. For more information regarding Fair Housing Act or to address complaints or violations, clients and/or case managers can reach out to Legal Aid Services of Oklahoma, Inc. The CoC and all participating agencies in the coordinated intake process must comply with the equal access and nondiscrimination provisions of Federal civil rights laws.

***Disability Accommodations:*** CoC access points, if physical locations must be accessible to individuals with disabilities, including accessible physical locations for individuals who use wheel chairs, as well as people in the CoC who are least likely to access homeless assistance. This is monitored by the coordinating entity.

***Section 504 of the Rehabilitation Act:*** Clients are protected by Section 504 of the Rehabilitation Act, which prohibits discrimination on the basis of disability under any program or activity receiving federal assistance.

***Title VI of the Civil Rights Act:*** Clients are protected by Title VI of the Civil Rights Act, which prohibits discrimination on the basis of race, color, or national origin under any program or activity receiving federal funding.

***Title II of the Americans with Disabilities Act:*** Clients are protected under Title II of the Americans with Disabilities Act, which prohibits public entities, including state and local governments, and special purpose districts, from discriminating against individuals with disabilities in all their services, programs, and activities, which include housing-related services such as housing search and referral assistance.

***Title III of the Americans with Disabilities Act:*** Clients are protected under Title III of the Americans with Disabilities Act, which 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.

## **Privacy Protections**

The Coordinated Entry System shall follow the privacy protections outlined in the ShareLink HMIS Privacy Plan. In addition, the assessment process may not require disclosure of specific disabilities or diagnosis. Documentation of disability may only be obtained for the purpose of determining program eligibility.

## **Evaluating and Updating Policies and Procedures**

From CE Self-Assessment Tool: CoC consults with each participating project and project participants at least annually to evaluate the intake, assessment, and referral processes associated with coordinated entry. Solicitations for feedback must address the quality and effectiveness of the entire coordinated entry experience for both participating projects and households. CoC ensures through written CE policies and procedures the frequency and method by which the CE evaluation will be conducted, including how project participants will be selected to provide feedback, and must describe a process by which the evaluation is used to implement updates to existing policies and procedures.

As the implementation of the Coordinated Intake (Entry) System will require significant changes to the CoC homeless services system, the Southeastern Oklahoma Continuum of Care (SEO CoC) anticipates that numerous adjustments to the process shall be needed. To help facilitate the necessary revisions, the Coordinated Intake (Entry) System shall be evaluated by the SEO CoC Coordinating Entity annually or more frequently, if necessary, during implementation. During this time, partner agencies may give feedback as to how the system may be improved. Partners may also give feedback at any time outside of an evaluation by contacting the SEO CoC Coordinating Entity. Participants may provide feedback at any time to partner agencies. All feedback along with other data shall be analyzed by the Coordinating Entity or a sub-committee of the Coordinating Entity.

## **Appendix A: Participating Agencies**

Ada Homeless Services – 580-272-0211  
serving Pontotoc County

Deep Fork Community Action – 918-756-2826  
serving Hughes, McIntosh, Okfuskee, and Okmulgee Counties

INCA Community Action – 580-371-2352  
serving Johnston, Atoka, Marshall, and Murray Counties

KI BOIS Community Action – 918-967-3325 or 800-299-4479  
Serving Haskell, Latimer, LeFlore, Pittsburg, Sequoyah, and Muskogee  
Counties

Little Dixie Community Action – 580-326-3351  
serving Choctaw, McCurtain, and Pushmataha Counties

KI BOIS Supportive Services for Veteran Families – 918-681-7525  
serving Atoka, Bryan, Carter, Choctaw, Coal, Haskell, Hughes, Johnston,  
Latimer, LeFlore, Love, Marshall, McCurtain, McIntosh, Murray,  
Muskogee, Okfuskee, Okmulgee, Pittsburg, Pontotoc, and Pushmataha  
Counties, as well as three counties in OK-505 CoC

CREOKS PATH Program – 918-420-5343  
serving Atoka, Coal, Latimer, and Pittsburg Counties

## **Appendix B: Domestic Violence Service Providers**

Ada - Family Crisis Center

Hotline: 580-436-3504 Business: 580-436-6648

Ardmore – Family Shelter of Southern Oklahoma

Hotline: 580-226-6424 Business: 580-226-3750

Durant – Crisis Control Center

Hotline: 580-924-3030 Business: 580-924-3056

Idabel – SOS for Families

Hotline: 888-286-3369 Business: 580-286-7533

McAlester – KI BOIS Women’s Shelter

Hotline: 918-423-0032 Business: 918-423-0032

Muskogee – Women in Safe Homes

Hotline: 918-682-7878 Business: 918-682-7879

Okmulgee – Okmulgee County Family Resource Center

Hotline: 877-7756-2545 Business: 918-756-2545

Poteau – Women’s Crisis Services

Hotline: 918-647-9800 Business: 918-647-2810

Stigler – KI BOIS Women’s Shelter

Hotline: 877-810-5637 Business: 918-967-2512

## **Appendix C: Assessment Tool**

**Southeastern Oklahoma Continuum of Care  
Coordinated Entry System Assessment Tool**

Client Information		
Name (First, Middle, Last):		
Who referred you to us?		
What is your social security number?		
What is your birth date?		
What is your gender?	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Refused	
What is your race?	<input type="checkbox"/> Caucasian/White <input type="checkbox"/> African American/Black <input type="checkbox"/> Native American <input type="checkbox"/> Asian/Pacific Islander <input type="checkbox"/> 2 or more races <input type="checkbox"/> Refused <input type="checkbox"/> Other	
Are you Hispanic?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Have we spoken before?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Do you have a mailing address/post office box where we can reach you?		
Prioritization Assessment Questions	Prioritization Assessment Answers	Prioritization Points/Scoring
Where did you stay last night?	<input type="checkbox"/> Place not meant for habitation <input type="checkbox"/> Emergency Shelter <input type="checkbox"/> Hotel/Motel <input type="checkbox"/> Transitional Housing <input type="checkbox"/> Permanent Housing for Homeless <input type="checkbox"/> Psychiatric Hospital or Facility <input type="checkbox"/> Substance Abuse Facility <input type="checkbox"/> Hospital <input type="checkbox"/> Jail, Prison, or Juvenile Detention <input type="checkbox"/> Staying or living with family <input type="checkbox"/> Staying or living with a friend <input type="checkbox"/> Foster Care <input type="checkbox"/> Rental by client with subsidy <input type="checkbox"/> Rental by client with other subsidy <input type="checkbox"/> Rental by client with no subsidy <input type="checkbox"/> Owned by client with subsidy <input type="checkbox"/> Owned by client with no subsidy <input type="checkbox"/> Don't Know <input type="checkbox"/> Refused	<input type="checkbox"/> 2 <input type="checkbox"/> 1 <input type="checkbox"/> 1 <input type="checkbox"/> 0 <input type="checkbox"/> 0 <input type="checkbox"/> 1 <input type="checkbox"/> 1 <input type="checkbox"/> 1 <input type="checkbox"/> 1 <input type="checkbox"/> 0 <input type="checkbox"/> 0 <input type="checkbox"/> 1 <input type="checkbox"/> 0 <input type="checkbox"/> 0 <input type="checkbox"/> 0 <input type="checkbox"/> 0 <input type="checkbox"/> 0 <input type="checkbox"/> 0 <input type="checkbox"/> 0 <input type="checkbox"/> 0

**Southeastern Oklahoma Continuum of Care  
Coordinated Entry System Assessment Tool**

How long can you stay there?	<input type="checkbox"/> 1 week or less <input type="checkbox"/> More than 1 week, less than a month <input type="checkbox"/> 1 to 3 months	<input type="checkbox"/> More than 3 months, less than a year <input type="checkbox"/> 1 year or longer <input type="checkbox"/>
Annual HH Gross income amount?	<input type="checkbox"/> 0-14% AMI <input type="checkbox"/> 15-30% AMI <input type="checkbox"/> More than 30% AMI	<input type="checkbox"/> 2 <input type="checkbox"/> 1 <input type="checkbox"/> 0
What is the last grade of school you completed?	<input type="checkbox"/> Less than high school <input type="checkbox"/> Some high school <input type="checkbox"/> High school diploma/GED <input type="checkbox"/> Some College <input type="checkbox"/> Technical degree <input type="checkbox"/> College Degree 2 yrs <input type="checkbox"/> College degree 4 yrs <input type="checkbox"/> Post graduate <input type="checkbox"/> Other	<input type="checkbox"/> 2 <input type="checkbox"/> 2 <input type="checkbox"/> 1 <input type="checkbox"/> 0 <input type="checkbox"/> 0 <input type="checkbox"/> 0 <input type="checkbox"/> 0 <input type="checkbox"/> 0 <input type="checkbox"/> 0 <input type="checkbox"/> 0
At least one dependent child under age 6?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> 3 <input type="checkbox"/> 0
Single Parent with minor child(ren)?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> 3 <input type="checkbox"/> 0
Household size of 5 or more?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> 3 <input type="checkbox"/> 0
Are you pregnant?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> 1 <input type="checkbox"/> 0
Do you have disabling condition?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> 3 <input type="checkbox"/> 0
Are you currently residing in, or trying to leave, an intimate partner who threatens you or makes you fearful?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> 3 <input type="checkbox"/> 0
Do you want services that are specifically geared to domestic violence survivors OR do you need a confidential location to stay?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> 3 <input type="checkbox"/> 0
Number of times you have been on the streets, in Emergency Shelter or Safe Haven in the past 3 years including today?	<input type="checkbox"/> 4+ <input type="checkbox"/> 3 <input type="checkbox"/> 2 <input type="checkbox"/> 1 <input type="checkbox"/> Never	<input type="checkbox"/> 3 <input type="checkbox"/> 2 <input type="checkbox"/> 2 <input type="checkbox"/> 1 <input type="checkbox"/> 0

**Southeastern Oklahoma Continuum of Care  
Coordinated Entry System Assessment Tool**

Total number of months homeless in the past 3 years?	<input type="checkbox"/> Less than a month <input type="checkbox"/> 1 Month <input type="checkbox"/> 2-5 Months <input type="checkbox"/> 6+ Months	<input type="checkbox"/> 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3
Number of time you have had to move because of economic factors in the last 2 years?	<input type="checkbox"/> 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4+	<input type="checkbox"/> 0 <input type="checkbox"/> 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3
Court ordered rental evictions on your record within the past 3 years?	<input type="checkbox"/> 4 or more <input type="checkbox"/> 2-3 <input type="checkbox"/> 1 <input type="checkbox"/> No prior evictions	<input type="checkbox"/> 3 <input type="checkbox"/> 2 <input type="checkbox"/> 1 <input type="checkbox"/> 0
Criminal record for arson, drug dealing or manufacture, or felony offense against persons or property? *Convictions	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> 3 <input type="checkbox"/> 0
Registered Sex Offender	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> 3 <input type="checkbox"/> 0
Means of Transportation	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> 0 <input type="checkbox"/> 2
Have you ever served in the military or Armed Forces?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> 0 <input type="checkbox"/> 1
Do you have a DD-214?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> 0 <input type="checkbox"/> 1
Discharge Status?	<input type="checkbox"/> Honorable <input type="checkbox"/> General <input type="checkbox"/> Other Than Honorable <input type="checkbox"/> Bad Conduct <input type="checkbox"/> Dishonorable <input type="checkbox"/> Uncharacterized <input type="checkbox"/> Don't Know <input type="checkbox"/> Refused	<input type="checkbox"/> 0 <input type="checkbox"/> 0 <input type="checkbox"/> 1 <input type="checkbox"/> 1 <input type="checkbox"/> 1 <input type="checkbox"/> 1 <input type="checkbox"/> 0 <input type="checkbox"/> 0

Prioritization Scale		
Total Client Points		<input type="checkbox"/> Priority 1 20 or more <input type="checkbox"/> Priority 2 15-19
Client's Priority		<input type="checkbox"/> Priority 3 10-14 <input type="checkbox"/> Priority 4 9 or under

Interviewer's Name:		Date:
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**Please look at the next page for further prioritization instructions. You may also refer to the Coordinated Entry System Policies and Procedures Manual for additional guidance.**



**Southeastern Oklahoma Continuum of Care  
Coordinated Entry System Assessment Tool**

***Priority Categories from the Assessment Tool will be used to initially prioritize households. Households will be further prioritized within their category using the following parameters.***

**Prioritizing Dedicated/Prioritized CoC PSH**

- Chronically Homeless Individuals and Families with the Longest History of Homelessness and with the Most Severe Service Needs.

In instances where two or more households have equal priority, applicants shall be further prioritized as follows:

- Veterans Not Eligible for Housing/Health VA Services
- Victims of Domestic Violence
- Youth (18 – 24 years of age)
- First presented for assistance

**Prioritizing Non-Dedicated/Prioritized CoC PSH**

- Homeless Individuals and Families with a Disability with Long Periods of Episodic Homelessness and Severe Service Needs
- Homeless Individuals and Families with a Disability with Severe Service Needs.
- Homeless Individuals and Families with a Disability Coming from Places Not Meant for Human Habitation, Safe Haven, or Emergency Shelter Without Severe Service Needs.
- Homeless Individuals and Families with a Disability Coming from Transitional Housing.
  - An individual or family that is eligible for CoC Program-funded PSH who is currently residing in a transitional housing project, where prior to residing in the transitional housing had lived in a place not meant for human habitation, in an emergency shelter, or safe haven.

In instances where two or more households have equal priority, applicants shall be further prioritized as follows:

- Veterans Not Eligible for Housing/Health VA Services
- Victims of Domestic Violence, Stalking, or Human Trafficking
- Youth (18 – 24 years of age)
- First presented for assistance

**Prioritizing for RRH**

- CoC & ESG Program RRH
  - Eligible participants are referred to the Rapid Re-housing program for which they are eligible and prioritized based the following prioritization:
    - Chronically Homeless individuals and families with the Longest History of Homelessness and with the Most Severe Service Needs.
    - Non-Chronically Homeless individuals and families with the Longest History of Homelessness and with the Most Severe Service Needs.

In instances where two or more households have equal priority, applicants shall be further prioritized as follows:

- Veterans Not Eligible for Housing/Health VA Services
- Victims of Domestic Violence
- Youth (18 – 24 years of age)
- First presented for assistance

- SSVF RRH

- Eligible participants will be prioritized or targeted based on the agreed upon standards set forth in the provider's SSVF grant agreement.

## Appendix D: Order of Priority

FAQ ID:  
1892

### What is the order of priority for CoC Program-funded PSH beds that are either dedicated or prioritized for the chronically homeless?

Where the CoC has adopted the orders of priority described in the Prioritization Notice, recipients of either dedicated or prioritized CoC Program-funded PSH must select persons for permanent supportive housing in the following order:

**Order of Priority 1** - A household should be prioritized first in dedicated or prioritized PSH if all of the following are true:

1. Individual or head of household meets the definition of chronically homeless per 24 CFR 578.3; and,
2. The length of time the individual or head of household has been homeless is at least 12 months continuously or over a of at least four occasions in the past 3 years where the total length of time homeless totals at least 12 months; and,
3. The individual or head of household has been identified as having severe service needs.

**Order of Priority 2** - A household should be prioritized second in dedicated or prioritized PSH if all of the following are true:

1. Individual or head of household meets the definition of chronically homeless per 24 CFR 578.3; and,
2. The length of time the individual or head of household has been living in a place not meant for human habitation, a safe haven, or in an emergency shelter is at least 12 months continuously or over a period of at least four occasions in the past 3 years where the total length of time homeless totals at least 12 months; and,
3. The individual or head of household has *not* been identified as having severe service needs; and,
4. There are no chronically homeless households within the CoC's geographic area that meet the criteria under Order of Priority 1 for dedicated or prioritized PSH.

**Order of Priority 3** - A household should be prioritized third in dedicated or prioritized PSH if all of the following are true:

1. Individual or head of household meets the definition of chronically homeless per 24 CFR 578.3; and,
2. The length of time the individual or head of household has been living in a place not meant for human habitation, a safe haven, or in an emergency shelter is at

least four occasions in the past 3 years where the total length of time homeless totals less than 12 months; and,

3. The individual or head of household has been identified as having severe service needs; and
4. There are no chronically homeless households within the CoC's geographic area that meet the criteria under Order of Priority 1 and 2 for dedicated or prioritized PSH.

**Order of Priority 4** - A household should be prioritized fourth in dedicated or prioritized PSH if all of the following are true:

1. Individual or head of household meets the definition of chronically homeless per 24 CFR 578.3;
2. The length of time the individual or head of household has been living in a place not meant for human habitation, a safe haven, or in an emergency shelter is at least four occasions in the past 3 years where the total length of time homeless totals less than 12 months (see [FAQ 1897](#)); and,
3. The individual or head of household has *not* been identified as having severe service needs; and
4. There are no chronically homeless households within the CoC's geographic area that meet the criteria under Order of Priority 1, 2, and 3 for dedicated or prioritized PSH.

Taken from the HUD Exchange website:

<https://www.hudexchange.info/faqs/1892/what-is-the-order-of-priority-for-coc-program-funded-psh-beds-that-are/>