

Continuum of Care Written Standards for NY-514

Chautauqua County

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This document was adopted from the Cattaraugus County(CoC NY-504).

Introduction

The Continuum of Care (CoC) is responsible for coordinating and implementing a system to meet the needs of the population and subpopulations experiencing homelessness within the geographic area of Chautauqua County. Both the Emergency Solution Grant Rules and Regulations (ESG) and the Homeless Emergency Assistance and Rapid Transition to Housing (HEARTH) Continuum of Care Program Interim Rules state that the Continuum of Care (CoC), in consultation with recipients of Emergency Solutions Grants program funds within the geographic area, (1) establish and consistently follow written standards for providing Continuum of Care assistance, (2) establish performance targets appropriate for population and program type, and (3) monitor recipient and sub-recipient performance.

All programs that receive ESG or CoC funding are required to abide by these written standards. Agency program procedure should reflect the policy and procedures described in this document. The CoC strongly encourages programs that do not receive either of these sources of funds to accept and utilize these written standards.

The written standards have been established to ensure that persons experiencing homelessness who enter programs throughout the CoC will be given similar information and support to access and maintain permanent housing.

The written standards have been created in conjunction with HUD Notice CPD-14-012 issued on July 28, 2014 titled Notice on Prioritizing Persons Experiencing Chronic Homelessness and Other Vulnerable Homeless Persons in Permanent Supportive Housing and Recordkeeping Requirements for Documenting Chronic Homeless Status that can be found online here:

<http://portal.hud.gov/hudportal/documents/huddoc?id=14-12cpdn.pdf>

The Continuum of Care Written Standards will:

- Assist with the coordination of service delivery across the geographic area and will be the foundation of the coordinated entry system;
- Assist in assessing individuals and families consistently to determine program eligibility;
- Assist in administering programs fairly and methodically;
- Establish common performance measurements for all CoC components; and
- Provide the basis for the monitoring of all CoC and ESG funded projects.

These written standards have been developed in conjunction with ESG recipients, New York State OTDA, with service providers and CoC Board to allow for input on the procedure of Coordinated Entry/Assessment System, standards, performance measures and the process for full implementation of the standards throughout the CoC from the perspective of those organizations that are directly providing homeless housing and services, Emergency Shelter (ES), Permanent Supportive Housing (PSH) and Rapid Rehousing (RRH).

The CoC Written Standards have been approved by the CoC. The Written Standards will be reviewed and revised as needed at a minimum of once per year.

Program Requirement for All Programs

- Programs must coordinate with other homeless services within the CoC.
- Programs must coordinate with, refer to, and ensure client access to mainstream resources in the CoC including housing, social services, employment, education and youth programs for which participants may be eligible.
- Programs must have written policies and procedures and must consistently apply them to all participants.
- Programs that serve households with children:
 - A staff person must be designated as the educational liaison that will ensure that children are enrolled in school, connected to appropriate services in the community, including early childhood program such as Head Start, Part C of the Individuals with Disabilities Education Act, and the McKinney Vento education services.
 - The age and gender of a child under age 18 must not be used as a basis for denying any family's admission to a project that provides shelter for families with children.
- Programs receiving ESG and CoC funding must participate in HMIS (Homeless Management Information System), unless otherwise stated by federal regulations. Homeless programs that are not federally funded are strongly encouraged to participate in HMIS.
- Programs must meet minimum HMIS data quality standards. Must correct data as needed to ensure the best possible data quality.
- Programs must participate in Coordinated Entry System and use the prioritization criteria established in this document.
- Programs must conduct an initial evaluation to determine the amount and type of assistance needed to regain stability in permanent housing.
- Program rules and regulations should be designed in the spirit of inclusion rather than as grounds for denial or termination. Programs should exercise judgment and examine all extenuating circumstances in determining when violations are serious enough to warrant termination so that a program participant's assistance is terminated only in the most severe cases.
- Programs must have a formal procedure for terminating assistance to a participant that recognizes the rights of the participant(s) involved.
 - Programs must use judgment and examine all extenuating circumstances in determining that a violation should result in termination.
 - Every effort should be made to allow the participant to remain in the program; termination should only be exercised in the most severe cases.
 - Termination does not necessarily preclude assistance at a future date.
- Programs must make known that use of the facilities and services are available to all on a nondiscriminatory basis.
- Programs may not engage in inherently religious activities such as worship, religious instruction or proselytization as part of the programs or services funded under the CoC or ESG. These activities can be conducted (but not supported with federal funds) but must be separate and voluntary for program participants.

Recordkeeping Requirements for All CoC Projects

Participant Recordkeeping Requirements include:

- All records containing personally identifying information must be kept secure and confidential;
- Programs must have written confidentiality/privacy notice a copy of which should be made available to participants if requested;
- Documentation of homelessness must be kept (following HUD's guidelines) if CoC funded;
- A record of services and assistance provided to each participant;
- Documentation of any applicable requirements for providing services/assistance;
- Documentation of use of coordinated assessment system;
- Documentation of consent forms for participation in the coordinated assessment system
- Documentation of use of HMIS;
- Records must be retained for a minimum of 5 years as prescribed by HUD.

Financial Recordkeeping Requirements for CoC Funded Projects include:

- Documentation for all costs charged to the grant;
- Documentation that funds were spent on allowable costs;
- Documentation of the receipt and use of program income;
- Documentation of compliance with expenditure limits and deadlines;
- Retain copies of all procurement actions as applicable;
- Documentation of amount, source and use of resources for each match contribution;
- Documentation of audits, financial statements, bank statements, general ledgers, and financial policies/procedures.

Occupancy Standards for All Programs

All housing units, including scattered site programs owned and managed by private landlords, must meet HUD Housing Quality Standards and Housing Habitability Standards.

The Program, Record Keeping and Occupancy Standards as represented above apply to all programs regardless of the type of services/housing that they provide.

Coordinated Entry System

The Local Department of Social Services is the primary contact during business hours to receive shelter services and to be assessed to determine whether shelter services is necessary for individuals and families (shelter diversion). Local law enforcement offices may be contacted for diversion to after-hours shelter services until the next business day when the Department of Social Services can be contacted.

The CoC has a Coordinated Entry workgroup meets to discuss how to move shelter residents and unsheltered people into our PSH/TH/RRH programs. The group is chaired by the CoC HMIS Administrator.

The Vulnerability Index Service Prioritization Decision Assistance Tool (VI-SPDAT) developed by OrgCode Consulting has been approved by the CoC and will be the coordinated entry tool for individuals who may be experiencing chronic homelessness and will be used by all projects that are dedicated or prioritized for the chronically homeless. The Family SPDAT (F-SPDAT) developed by OrgCode Consulting has been approved by the CoC and will be the coordinated entry tool for families who are experiencing

homelessness. For purposes of this document, the written standards will use the term “assess” or “assessment” which will refer to these tools and will specify the types of tools as needed.

The CoC has developed one streamlined waitlist that can be found in the CoC’s HMIS by invite only. The list is categorized by the highest assessment score of the most vulnerable and/or chronically homeless people who may also be experiencing the longest length of stays of homelessness in our CoC. Through this list, people at the top, will be prioritized for PSH/RRH/TH. All CoC and ESG projects, when there is a vacancy in their projects, must select from the Coordinated Entry list, which can be found in the CoC’s HMIS referral list, which is a current, “in real-time” list, to fill this vacancy.

Projects will no longer carry their own independent waitlist as this previously created “cherry-picking” and “side doors” to housing that more vulnerable individuals and families could have benefitted from.

Housing providers are required to review the HMIS referral list when there is an anticipated vacancy to immediately fill the bed with a new program participant. The housing provider must select the person with the highest assessment score and the individual/family that fits the housing project’s requirements (i.e. an adult cannot be accepted for a project that only accepts unaccompanied youth).

Lowering Barriers

All CoC and ESG funded programs are required to lower barriers to housing by ensuring applicants are not screened out of the coordinated entry process due to:

- Having too little or no income;
- Active or history of substance abuse;
- Having a criminal history (with exceptions for state-mandated restrictions);
- History of domestic violence (lack of order of protection, period of separation from abuser, law enforcement involvement).

A current, “real-time” vacancy list can be found on HMIS. Please contact the CoC’s HMIS Administrator to receive an HMIS license, HMIS access and for any needed training regarding this process and any additional HMIS trainings. For additional information, see the CoC training protocol.

Participant Eligibility:

HUD Chronic Homeless Definition:

For all dedicated/prioritized chronically homeless units, participants must meet the chronically homeless definition as stated in Definition of Chronically Homeless final rule which is:

(a) A “homeless individual with a disability,” as defined in section 401(9) of the McKinney-Vento Homeless Assistance Act (42 U.S.C. 11360(9)), who:

- i. lives in a place not meant for human habitation, a safe haven, or in an emergency shelter; and
- ii. Has been homeless and living as described in paragraph (a)(i) continuously for at least 12 months or on at least four separate occasions in the last 3 years, as long as the combined occasions equal at least 12 months and each break in homelessness separating the occasions included at least 7 consecutive nights of not living as described in paragraph (a)(i). Stays in institutional care facilities for fewer than 90

days will not constitute as a break in homelessness, but rather such stays are included in the 12-month total, as long as the individual was living or residing in a place not meant for human habitation, a safe haven, or an emergency shelter immediately before entering an institutional care facility;

(b) An individual who has been residing in an institutional care facility, including a jail, substance abuse or mental health treatment facility, hospital, or other similar facility, for fewer than 90 days and met all of the criteria in paragraph (a) of this definition, before entering the facility;

i. A family with an adult head of household (or if there is no adult in the family, a minor head of household) who meets all of the criteria in paragraph (a) or (b) of this definition (as described in Section I.D.2.(a) of this Notice), including a family whose composition has fluctuated while the head of household has been homeless.

The HUD Chronic Homelessness Final Rule can be found online:

<https://www.hudexchange.info/resources/documents/Defining-Chronically-Homeless-Final-Rule.pdf>

HUD Homeless Definition:

(1) Individuals and families who lack a fixed, regular, and adequate nighttime residence and includes a subset for an individual who is exiting an institution where he or she resided for 90 days or less and who resided in an emergency shelter or a place not meant for human habitation immediately before entering that institution;

(2) Individuals and families who will imminently lose their primary nighttime residence;

(3) Unaccompanied youth and families with children and youth who are defined as homeless under other federal statutes who do not otherwise qualify as homeless under this definition; or

(4) Individuals and families who are fleeing, or are attempting to flee, domestic violence, dating violence, sexual assault, stalking, or other dangerous or life-threatening conditions that relate to violence against the individual or a family member.

The HUD Homeless Definition with recordkeeping requirements can be found here:

https://www.hudexchange.info/resources/documents/HomelessDefEligibility%20SHP_SPC_ESG.pdf

For all non-dedicated/prioritized CH PSH units that are CoC funded, participants must meet the homeless definition and have a disability.

Severity of Needs:

Units will be prioritized for people meeting the chronic homeless definition or participants with the highest severity of service needs which means an individual for whom at least one of the following is true:

i. History of high utilization of crisis services, which include but are not limited to, emergency rooms, jails, and psychiatric facilities; and/or

ii. Significant health or behavioral health challenges, substance use disorders, or functional impairments which require a significant level of support in order to maintain permanent housing.

iii. For youth and victims of domestic violence, high risk of continued trauma or high risk of harm or exposure to very dangerous living situations.

This Severity of Needs criteria is a directive by HUD Notice CPD 16-11 titled Prioritizing Persons Experiencing Chronic Homelessness and Other Vulnerable Homeless Persons in Permanent Supportive Housing dated July 25, 2016 can be found online:

<https://www.hudexchange.info/resources/documents/notice-cpd-16-11-prioritizing-persons-experiencing-chronic-homelessness-and-other-vulnerable-homeless-persons-in-psh.pdf>

Orders of Priority:

(a) First Priority— Individuals and Families who are Experiencing Homelessness with a Disability with Long Periods of Episodic Homelessness and Severe Service Needs and a High Assessment Score

- An individual or family that is eligible for CoC Program-funded PSH who has experienced fewer than four occasions where they have been living or residing in a place not meant for human habitation or an emergency shelter but where the cumulative time homeless is at least 12 months and has been identified as having severe service needs and a VI-SPDAT score of 8 or higher.

(b) Second Priority—Individuals and Families who are Experiencing Homelessness with a Disability with Severe Service Needs.

- An individual or family that is eligible for CoC Program-funded PSH who is residing in a place not meant for human habitation or 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 not a minimum length of time required. The VI-SPDAT score should also be an 8 or higher.

(c) Third Priority—Individuals and Families Experiencing Homelessness with a Disability Coming from Places Not Meant for Human Habitation or Emergency Shelter Without Severe Service Needs.

- An individual or family that is eligible for CoC Program-funded PSH who is residing in a place not meant for human habitation or emergency shelter where the individual or family has not been identified as having severe 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. The VI-SPDAT score should be a 4 or higher.

(d) Fourth Priority—Individuals and Families Experiencing Homelessness 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 or 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 residing in that transitional housing project even if they did not live in a place not meant for human habitation, an emergency shelter prior to entry in the transitional housing. The VI-SPDAT score should be a 4 or higher.

A unit will be held for participants who have already been accepted to the program regardless of move-in status and will not be disqualified if they are able to secure a temporary housing situation in the interim wait period. However, the case will be discussed in the Coordinated Entry workgroup meeting

when the client has been absent from contact for thirty days.

Only clients who are permanently housed or voluntarily withdraw their application will be taken off of the list. Clients who have not been seen will remain in the list. Projects are not required to keep units vacant indefinitely while waiting for an identified eligible individual or family to accept an offer of PSH. Street outreach and shelter providers should continue to make attempts to engage those persons that have been resistant to accepting an offer of PSH and these individuals and families must continue to be prioritized until they are housed.

Participants who have already been enrolled in the program and moved into their apartment will retain their apartment unless it has been vacated without notice from the resident or a responsible entity for more than 30 days.

Other Provisions and Processes -

Outreach

Currently no Street Outreach programs are funded by the CoC or otherwise available within Chautauqua County.

Marketing

All CoC and ESG funded programs are required to affirmatively market housing and supportive services to eligible persons regardless of race, color, national origin, religion, sex, age, familial status, handicap or who are least likely to apply in the absence of special outreach. CoC and ESG funded programs must maintain an Affirmative Fair Housing Marketing Plan as confirmation of their marketing policy.

All CoC and ESG funded programs will ensure fair and equal access to Coordinated Entry system programs and services for all clients regardless of actual or perceived race, color, religion, national origin, age, gender identity, pregnancy, citizenship, familial status, household composition, disability, Veteran status, sexual orientation, or domestic violence status. All subpopulations including chronically homeless individuals and families, Veterans, youth, persons and households fleeing domestic violence, transgendered persons, and refugees and new immigrants must be provided equal access to CoC crisis response services regardless of the characteristics and attributes of their specific subpopulations.

To ensure fair access by individuals with disabilities, physical and communication accessibility barriers will be addressed by appropriate accommodation at each Coordinated Entry System access point. Reasonable steps must be taken to offer Coordinated Entry System materials and participant instructions in multiple languages to meet the needs of persons with Limited English Proficiency (LEP).

If an individual's self-identified gender or household composition creates challenging dynamics among residents within a facility, the host program should make every effort to accommodate the individual or assist in locating alternative accommodation that is appropriate and responsive to the individual's needs.

Non-discrimination

The CoC and recipients of CoC Program-funded PSH must comply with the nondiscrimination provisions of Federal civil rights laws, including, but not limited to, the Fair Housing Act, Section 504 of the Rehabilitation Act, Title VI of the Civil Rights Act, and Titles II or III of the Americans with Disabilities Act, as applicable. See 24 C.F.R. § 5.105(a).

Privacy and Participant Autonomy

Coordinated Entry System operations and staff must abide by all State privacy protections. Client consent protocols, data use agreements, data disclosure policies, and any other privacy protections offered to program participants as a result of each client's participation in the Coordinated Entry System should be the same as HMIS.

To ensure participant autonomy, written consent will be obtained from all participants using a standardized form. Participants will be free to decide what information they provide on the assessment and no services will be denied based on a participant's willingness to provide information.

Safety Planning

Service providers at all coordinated entry access points must provide necessary safety and security protections for persons fleeing or attempting to flee family violence, stalking, dating violence, or other domestic violence situations.

Training

The CoC will conduct an annual Coordinated Entry training plan to ensure all participating partners are knowledgeable of CoC-specific Coordinated Entry participation and performance expectations, are following statewide guidelines and protocols for Coordinated Entry operations, and strive to achieve national best practices and promising approaches for the most effective coordinated entry system. Needs or gaps in training effectiveness will be assessed annually as part an evaluation of CES processes. Training offerings will be made available remotely and posted online for continuous access.

Annual training shall include the following:

- Coordinated Entry System access points and access protocols
- Coordinated Entry System assessment tools, processes and uses of assessment information to coordinate client care
- General eligibility requirements for all CoC projects
- Prioritization standards and protocols for how client's placement on prioritization lists (i.e.waiting lists) will be managed
- Referral processes and protocols (rather than specific referral policies which will likely be more standardized across the state).
- Data collection, data management, data sharing and reporting requirements and responsibilities

Homeless Prevention -

At the time that a person who is experiencing homelessness or at risk of being homeless apply for assistance, s/he is also screened for eligibility into other welfare and assistance programs, such as the Supplemental Nutrition Assistance Program, Temporary Assistance and other financial assistance programs.

The CoC's Local Departments of Social Services (LDSS) provide many aid programs that assist county residents in staying in their own home and thus serves as the first point of access for homelessness prevention services. Other best practices, such as attempting diversion from the homeless shelters, have been standard practice at LDSS for many years.

County ESG funds prevention programs in Chautauqua County focusing on those facing issues such as eviction, including back rent and security deposits. Chautauqua County Department of Health and Human Services is required to conduct face to face interviews within 24 hours with clients being placed into shelters. There is an exception for domestic violence victims and direct hospital discharges.

In Chautauqua County, Chautauqua Opportunities, Inc. operates a homelessness prevention program using ESG and VA funds. The program provides short term case management, temporary financial assistance for back due rent, and other supportive services related to the prevention of homelessness.

Emergency Shelters

The Emergency Shelter System in the CoC is currently composed of 3 providers (UCAN City Mission, Chautauqua Opportunities, Inc., and The Salvation Army): a total of 53 year round beds. Placements can also be made at LDSS contracted hotels/motels if there is no appropriate shelter available. The level of support services available to participants varies greatly from program to program. The length of stay is generally expected to be less than 30 days; extensions may be granted at some shelters in some circumstances. Shelter services are available to all homeless persons and entry to these services will not be denied based on prioritization.

For after house shelter access, local law enforcement offices may be contacted for diversion to shelter services until the next business day when the Department of Social Services can be contacted. Thus, emergency shelter is available 24 hours a day/7 days a week.

Permanent Supportive Housing:

There are 37 Permanent Supportive Housing (PSH) beds funded by the CoC, which are allocated to Housing Options Made Easy and Southern Tier Environments for Living. All non-dedicated chronically homeless PSH projects have committed to prioritize 100% of their turnover beds to serve chronically homeless clients.

There are several non-CoC funded programs that are also managed by Housing Options Made Easy and Southern Tier Environments for Living. Many of these programs have separate eligibility requirements.

Rapid Rehousing:

Chautauqua Opportunities, Inc. operates a rapid rehousing program using ESG and VA funds. The programs provide short term case management, temporary financial assistance for security deposits and rent, and other supportive services related to the prevention of homelessness.

Prior to rental assistance, the apartment must pass the necessary inspections (habitability, and visual lead for families & pregnant individuals) and a one year lease must be provided. The rent for the apartment must also be within Rent Reasonableness Guidelines and not exceed the Fair Market Rent. Short to Medium Term financial/rental assistance may be provided. Amounts may vary depending on household need.

Transitional Housing

Eighty units of transitional housing (non-youth) are provided by: COI TILP (ages 18-24), Arrowhead Apartments, Fredonia Commons, Kids @ Home, YWCA of Jamestown for households that are homeless or at-risk of homelessness. While program requirements vary by age and geography, the purpose of

transitional housing is to provide a supportive environment to achieve stable and affordable housing.

