# Scranton/Lackawanna County Continuum of Care Policies and Procedures

## ARTICLE I: PROCESS FOR MONITORING OUTCOMES OF ESG RECIPIENTS

ESG Recipients will provide the CoC with a copy of all ESG sub recipient executed contracts within 10 business days of execution in order to maintain an accurate inventory of assistance available for the Coordinated Assessment System and set up of ESG program and reporting tools in the HMIS system.

The HMIS Lead will cooperate with ESG Recipients in providing needed performance or client HMIS information. The CoC Collaborative Applicant will conduct at least a bimonthly monitoring of ESG sub-recipients to ensure data quality and quarterly monitoring to evaluate program outcomes. This quarterly monitoring will be shared with the ESG recipient.

The CoC Collaborative applicant will provide ESG Recipients with required Consolidated Action Plan and CAPER data.

## ARTICLE II: CoC Program Rapid Rehousing Rental Assistance

Rapid Rehousing Permanent Housing Projects are designed to provide flexible programming that will expedite a household’s ability to become self-sufficient through time-limited rental subsidy programs. Per 24 CFR part 578.37(a)(1)(ii), the CoC will establish annually priority populations to receive Rapid Rehousing assistance consistent with HUD Continuum of Care Program NOFA requirements and in response to analysis of point in time count and housing inventory and unmet needs reports.

The CoC will establish a Rapid Rehousing Rental Assistance Subsidy Policy to determine the amount or percentage of rent each program participant must pay and the maximum amount or percentage of rental assistance that a program participant may receive.

The CoC will also establish a Rapid Rehousing Rental Assistance Subsidy Policy to determine the maximum number of months that a program participant may receive rental assistance, the maximum number of times that a program participant may receive rental assistance, and the extent to which a program participant must share the cost of rent.

Program Participants may participate in a Rapid Rehousing Program a maximum of two times over a 24 month period including participation in an ESG Rapid Rehousing Program. Eligibility for frequency of participation will be determined by the Coordinated Assessment System review of client service history recorded in the HMIS and through consultation with any domestic violence Rapid Rehousing provider.

## ARTICLE III: RATING AND RANKING CRITERIA

The CoC has developed a *Rating and Ranking Policy.* Please refer to this document for the process whereby projects are evaluated and ranked for the annual NOFA process.

## ARTICLE IV: MID-TERM PROGRAM EVALUATION POLICY

The Collaborative Applicant will provide midterm project evaluations of CoC Program projects to measure individual Project progress in achieving goals established in the CoC Program Application and the Recipient Agency Project Application.  This evaluation assistance will be performed six months after the NOFA competition ends.

i. The Collaborative Applicant will review an Annual Performance Report from the HMIS system.  They will evaluate: progress in achieving project goals; contributions to meeting CoC level performance goals; and areas of concern for improvements.  Examples of areas of concern include missing data elements within HMIS, data inconsistent with agency targets as outlined in the project’s application, or significant shortfalls in CoC level performance benchmarks.

ii. The Collaborative Applicant will share findings with the Executive Director or designee of the Recipient Agency.  Technical assistance will be provided upon request of the agency or as determined needful by the Collaborative Applicant.   Technical assistance may include:

a) Review of client roles for accurate enrollment and exit documentation (as allowable by law)

b) Supplemental HMIS training

c) Review of project spending

d) Information sharing on local resources and best practices including training resources

## ARTICLE V: Prioritization Policy for Permanent Supportive Housing and Recordkeeping Requirements

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This CoC will base prioritization for permanent supportive housing on the Notices CPD-14-012 and CPD-16-11. Households meeting the definition of chronic homelessness will be prioritized for all Permanent Supportive Housing vacancies upon turnover.

All CoC Program-funded PSH must take new participants from the single prioritized Chronic Homeless list for individuals or for families as appropriate, which is created using the Coordinated Entry process along with the criteria outlined below.

**Order of Priority in CoC Program-funded Permanent Supportive Housing Beds Dedicated to Persons Experiencing Chronic Homelessness and Permanent Supportive Housing Prioritized for Occupancy by Persons Experiencing Chronic Homelessness**

1. **Key Terms**
2. **Chronically Homeless.** The definition of “chronically homeless”, as stated in Definition of Chronically Homeless final rule is:
3. 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:
4. 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 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;

1. 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;
2. 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.
3. **Severity of Service Needs**. This notice refers to persons who have been identified as having the most severe service needs.
4. For the purposes of this Notice, this means an individual for whom at least one of the following is true:
5. 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.

iv. When applicable CoCs and recipients of CoC Program-funded PSH may use an alternate criteria used by Medicaid departments to identify high-need, high cost beneficiaries.

1. Severe service needs as defined in paragraphs i.-iv. Above should be identified and verified through data-driven methods such as an administrative data match or through the use of a standardized assessment tool (i.e. SPDAT) and process and should be documented in a program participant’s case file. The determination must not be based on a specific diagnosis or disability type, but only on the severity of needs of the individual. The determination cannot be based on any factors that would result in a violation of any nondiscrimination and equal opportunity requirements, see 24 C.F.R. 5.105(a).
2. The CoC hereby adopts the provisions and requirements set out in HUD Notice CPD-14-012 and updated Notice CPD-16-11 which are to be applicable to all CoC Program-funded PSH that is dedicated or prioritized for persons experiencing chronic homelessness (which includes all PA-508 CoC Program-funded PSH):

(a) First Priority–Chronically Homeless Individuals and Families with the Longest History of Homelessness and with the Most Severe Service Needs. A chronically homeless individual or head of household as defined in 24 CFR 578.3 for whom both of the following are true:

i. The chronically homeless individual or head of household of a family has been homeless and living in a place not meant for human habitation, a safe haven, or in an emergency shelter for at least 12 months either continuously or on at least four separate occasions in the last 3 years, where the cumulative total length of the four occasions equals at least 12 months; and

ii. The CoC or CoC Program recipient has identified the chronically homeless individual or head of household, who meets all of the criteria in paragraph (2) of the definition for chronically homeless, of the family as having severe service needs

(b) Second Priority–Chronically Homeless Individuals and Families with the Longest History of Homelessness. A chronically homeless individual or head of household, as defined in 24 CFR 578.3, for which both of the following are true:

i. The chronically homeless individual or head of household of a family has been homeless and living in a place not meant for human habitation, a safe haven, or in an emergency shelter for at least 12 months either continuously or on at least four separate occasions in the last 3 years, where the cumulative total length of the four occasions equals at least 12 months; and,

ii. The CoC or CoC program recipient has not identified the chronically homeless individual or the head of household, who meets all of the criteria in paragraph (2) of the definition for chronically homeless, of the family as having severe service needs.

(c) Third Priority–Chronically Homeless Individuals and Families with the Most Severe Service Needs. A chronically homeless individual or head of household as defined in 24 CFR 578.3 for whom both of the following are true:

i. The chronically homeless individual or head of household of a family has been homeless and living or residing in a place not meant for human habitation, a safe haven, or in an emergency shelter on at least four separate occasions in the last 3 years, where the total length of those separate occasions equals less than one year; and

ii. The CoC or CoC program recipient has identified the chronically homeless individual or the head of household, who meets all of the criteria in paragraph (2) of the definition for chronically homeless, of the family as having severe service needs.

(d) Fourth Priority–All Other Chronically Homeless Individuals and Families. A chronically homeless individual or head of household as defined in 24 CFR 578.3 for whom both of the following are true:

i. The chronically homeless individual or head of household of a family has been homeless and living in a place not meant for human habitation, a safe haven, or in an emergency shelter for on at least four separate occasions in the last 3 years, where the cumulative total length the four occasions is less than 12 months; and

ii. The CoC or CoC program recipient has not identified the chronically homeless individual or the head of household, who meets all of the criteria in paragraph (2) of the definition for chronically homeless, of the family as having severe service needs.

2. Where a CoC or a recipient of CoC Program-funded PSH beds that are dedicated or prioritized is not able to identify chronically homeless individuals and families as defined in 24 CFR 578.3 within the CoC, the order of priority in Section II.B (below) of this Notice, as adopted by the CoC may be followed.

3. Recipients of CoC Program-funded PSH should follow the order of priority above while also considering the goals and any identified target populations served by the project. For example, a CoC Program-funded PSH project that is permitted to target homeless persons with a serious mental illness that has been identified as a project that will prioritize a portion or all of its turnover beds to persons experiencing chronic homelessness should follow the order of priority under section II (a) of this Notice to the extent in which persons with serious mental illness meet the criteria.

4. Recipients must exercise due diligence when conducting outreach and assessment to ensure that persons are served in the order of priority in this Notice. HUD recognizes that some persons – particularly those living on the streets or in places not meant for human habitation-might require significant engagement and contacts prior to their entering housing and recipients are not required to keep units vacant where there are persons who meet a higher priority within the CoC and who have not yet accepted the PSH opportunities offered to them. Street outreach providers should continue to make attempts to engage those persons and the CoC and CoC Program-funded PSH providers are encouraged to follow a Housing First approach to the maximum extent practicable and for those projects that indicated in the FY 2013 CoC Project Application that they would follow a Housing First approach will be required to do so for both the FY 2013 and FY 2014 operating year(s), as the CoC score for the FY 2013-FY2014 CoC Program Competition was affected by the extent in which project applications indicated that they would follow this approach and this requirement will be incorporated into the recipient’s FY 2014 and FY 2014 grant agreement. For eligibility in dedicated or prioritized PSH serving chronically homeless households, the individual or head of household must meet all of the applicable criteria to be considered chronically homeless per 24 CFR 578.3.

B. All beds in Scranton/Lackawanna County CoC PSH projects at this time are dedicated to persons experiencing chronic homelessness. However, if a chronic household **cannot** be identified after exercising due diligence, a non-chronic household should be placed in the unit based upon the following prioritization.

1. First Priority-Homeless Individuals and Families with a Disability with the Most Severe Service Needs.

An individual or family that is eligible for CoC Program-funded PSH who has been living or residing in a place not meant for human habitation, a safe haven or in an emergency shelter for any period of time including persons exiting an institution where they have resided for 90 days or less but were living or residing in a place not meant for human habitation, a safe haven or in an emergency shelter immediately prior to entering the institution and has been identified as having the most severe service needs.

1. Second Priority-Homeless Individuals and Families with a Disability with a Long Period of Continuous or Episodic Homelessness.

An individual or family that is eligible for CoC Program-funded PSH who has been living or residing in a place not meant for human habitation, a safe haven, or in an emergency shelter continuously for at least 6 months or on at least three separate occasions in the last 3 years where the cumulative total is at least 6 months. This includes persons exiting an institution where they have resided for 90 days or less but were living or residing in a place not meant for human habitation, a safe haven or in an emergency shelter immediately prior to entering the institution and had been living or residing in a place not meant for human habitation, a safe haven, or in an emergency shelter immediately prior to entering the institution and had been living or residing in one of those locations for at least 6 months or on at least three separate occasions in the last 3 years where the cumulative total is at least 6 months.

1. Third Priority – Homeless Individuals and Families with Disability Coming from Places Not Meant for Human Habitation, Safe Havens, or Emergency Shelters.

An individual or family that is eligible for CoC Program-funded PSH who has been living in a place not meant for human habitation, a safe haven or in an emergency shelter. This includes persons exiting an institution where they have resided for 90 days or less but were living or residing in a place not meant for human habitation, a safe haven or in an emergency shelter immediately prior to entering the institution.

1. Fourth Priority – 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 coming from transitional housing, where prior to residing in the transitional housing lived on streets or in an emergency shelter, or safe haven. This priority also includes homeless individuals and homeless households with children with a qualifying disability who were fleeing or attempting to flee domestic violence, dating violence, sexual assault, or stalking and are living in transitional housing – all are eligible for PSH even if they did not live on the streets, emergency shelters or safe havens prior to entry in the transitional housing.

Recipients of CoC Program-funded PSH should follow the order of priority above as adopted by the CoC, while also considering the goals and any identified target populations served by the project.

Due diligence should be exercised when conducting outreach and assessment to ensure that persons are served in the order of priority in this Notice and as adopted by the CoC. HUD recognizes that some persons – particularly those living on the streets or in places not meant for human habitation might require significant engagement and contacts prior to their entering housing and recipients are not required to keep units vacant where there are persons who meet a higher priority within the CoC and who have not yet accepted the PSH opportunities offered to them. Street outreach providers should continue to make attempts with those persons using a Housing First approach to places as few conditions on a person’s housing as possible.

Section V of Notice CPD – 014-12 **Recordkeeping Requirements**

This Notice establishes recordkeeping requirements for all recipients of CoC Program-funded PSH that are required to document a program participant’s status as chronically homeless as defined in 24 CFR 578.3 and in accordance with 24 CFR 578.103. In addition to the records required in 24 CFR 578.103, it is recommended that the CoC should supplement such records with the following:

1. Evidence of written standards that incorporate the priorities in Section II of this Notice, as adopted by the CoC. A CoC adopting the priorities in Section II of this Notice, may be evidenced by written CoC, or subcommittee, meeting minutes where written standards were adopted that incorporate the prioritization standards in this Notice, or an updated, approved, governance charter where the written standards have been updated to incorporate the prioritization standards set forth in this Notice.
2. Evidence of a standardized assessment tool. Use of a standardized assessment tool may be evidenced by written policies and procedures referencing a single standardized assessment tool that is used by all CoC Program-funded PSH recipients within the CoC’s geographic area.
3. Evidence that the written standards were incorporated into the coordinated assessment policies and procedures. Incorporating standards into the coordinated assessment policies and procedures may be evidenced by updated policies and procedures – that incorporate the updated written standards for CoC Program-funded PSH developed and approved by the CoC.
4. Recipient Recordkeeping Requirements

In addition to the records required in 24 DFR 578.103, recipients of the CoC Program-funded PSH that is required by grant agreement to document chronically homeless status of program participants in some or all of its PSH beds must maintain the following records.

1. Written Intake Procedures. Recipients must maintain and follow written intake procedures to ensure compliance with the definition of chronically homeless per 24 CFR 578.3. These procedures must establish the order of priority for obtaining evidence as: (1) third-party documentation, (2) intake worker observations, and (3) certification from the person seeking assistance. Records contained in an HMIS or comparable database used by victim service or legal service providers are acceptable evidence of third-party documentation and intake worker observations if the HMIS retains an auditable history of all entries, including the person who entered the data, the date of entry and the change made; and if the HMIS prevents overrides or changes of the dates entries are made.
2. Evidence of Chronically Homeless Status. Recipients of CoC Program-funded PSH whose current grant agreement includes beds that are dedicated or prioritized to the chronically homeless must maintain records evidencing that the individuals or families receiving the assistance in these beds meets the definition for chronically homeless at 24 CFR 578.3. Such records must include evidence of the homeless status of the individual or family (paragraphs (1)(a)(i) and (1)(a)(ii) of the definition), the duration of homelessness (paragraph (1)(a)(ii) of the definition), and the disabling condition (paragraph (2)(a)(i - ii) of the definition). When applicable, recipients must also keep records demonstrating compliance with sections (2)(a)(iii – iv) of the definition.
	1. Evidence of homeless status. Evidence of an individual or head of household’s current living situation may be documented by a written observation by an outreach worker, a written referral by a housing or service provider, or a certification by the household seeking assistance that demonstrates that the individual or head of household is currently homeless and living in a place not meant for human habitation, in an emergency shelter, or a safe haven. For paragraph (2) of the definition for chronically homeless at 24 CFR 578.3, for individuals currently residing in an institution, acceptable evidence includes;
		1. Discharge paperwork or a written or oral referral from a social worker, case manager, or other appropriate official of the institution, stating the beginning and end dates of the time residing in the institution that demonstrate the person resided there for less than 90 days. All oral statements must be recorded by the intake worker; or
		2. Where the evidence above is not obtainable, a written record of the intake worker’s due diligence in attempting to obtain the evidence described in the paragraph i. above and a certification by the individual seeking assistance that states that they are exiting or have just exited an institution where they resided for less than 90 days; and

b. Evidence that the individual was homeless and living in a place not meant for human habitation, a safe haven, or in an emergency shelter, and met the criteria in paragraph (l) of the definition for chronically homeless in 24 CFR 578.3, immediately prior to the entry into the institutional care facility.

(b) Evidence of the duration of homelessness. Recipients documenting chronically homeless status must also maintain the evidence described in paragraph i. or in paragraph ii. Below, and the evidence described in paragraph iii. Below:

 i. Evidence that the homeless occasion was continuous, for at least one year.

Using any combination of allowable documentation below, recipients must provide evidence that the homeless occasion was continuous, for a year period, without a break in living or residing in a place not meant for human habitation, a safe haven, or in an emergency shelter. For the purposes of this Notice, a break is considered at least seven or more consecutive nights not residing in a place not meant for human habitation, in shelter, or in a safe haven.

At least 9 months of the 1-year period must be documented by one of the following: (1) HMIS data, (2), a written referral, or (3) a written observation by an outreach worker. In only rare and the most extreme cases, HUD would allow a certification from the individual or head of household seeking assistance in place of third-party documentation for up to the entire period of homelessness. Where third-party evidence could not be obtained, the intake worker must obtain a certification from the individual or head of household seeking assistance, and evidence of the efforts made to obtain third-party evidence as well as documentation of the severity of the situation in which the individual or head of household has been living. An example of where this might occur is where an individual has been homeless and living in a place not meant for human habitation in a secluded area for more than 1 year and has not had any contact with anyone during that period.

Note: A single encounter with a homeless service provider on a single day within 1 month that is documented through third-party documentation is sufficient to consider an individual or family as homeless for the entire month unless there is an evidence that the household has had a break in homeless status during that month (e.g., evidence in HMIS of a stay in transitional housing).

ii. Evidence that the household experienced at least four separate homeless occasions over 3 years.

Using any combination of allowable documentation described in Section V.B.2.(a) of this Notice, the recipient must provide evidence that the head of household experienced at least four, separate, occasions of homelessness in the past 3 years.

Generally, at least three occasions must be documented by either: (1) HMIS data, (2) a written referral, or (3) a written observation. Any other occasion may be documented by a self-certification with no other supporting documentation.

In only rare and the most extreme cases, HUD will permit a certification from the individual or head of household seeking assistance in place of third-party documentation for the three occasions that must be documented by either: (1) HMIS data, (2) a written referral, or (3) a written observation. Where third-party evidence could not be obtained, the intake worker must obtain a certification from the individual or head of household seeking assistance, and must document efforts made to obtain third-party evidence, and document of the severity of the situation in which the individual has been living. An example of where this might occur is where an individual has been homeless and living in a place not meant for human habitation in a secluded area for more than one occasion of homelessness and has not had any contact with anyone during that period.

iii. Evidence of diagnosis with one or more of the following conditions: substance use disorder, serious mental illness, developmental disability (as defined in Section 102 of the Developmental Disabilities Assistance Bill of Rights Act of 2000 (42 U.S.C. 15002), post-traumatic stress disorder, cognitive impairments resulting from brain injury, or chronic physical illness or disability. Evidence of this criterion must include one of the following:

1. Written verification of the condition from a professional licensed by the state to diagnose and treat the condition;
2. Written verification from the Social Security Administration;
3. Copies of a disability check (e.g., Social Security Disability Insurance check or Veterans Disability Compensation);
4. Intake staff (or referral staff) observation that is confirmed by written verification of the condition from a professional licensed by the state to diagnose and treat the condition that is confirmed no later than 45 days of the application for assistance and accompanied with one of the types of evidence above; or
5. Other documentation approved by HUD.

## ARTICLE VI: WRITTEN STANDARDS FOR ADMINISTERING ASSISTANCE

**Vacancies**

If a unit assisted under this section is vacated before the expiration of the lease, the assistance for the unit may continue for a maximum of 30 days from the end of the month in which the unit was vacated, unless occupied by another eligible person. No additional assistance will be paid until the unit is occupied by another eligible person. Brief periods of stays in institutions, not to exceed 90 days for each occurrence, are not considered vacancies.

According to the Interim Rule: The recipient or sub recipient must provide leasing assistance funds as set forth in §578.49. Occupancy agreements and subleases are required as specified in § 578.77(a).

COORDINATED ASSESSMENT

The CoC has chosen to use the No Wrong Door Approach in regards to the Coordinated Assessment System whereby a client could come to any of the CoC’s six participating agencies and receive the same needs assessment for the purpose of identifying potential diversion resources and/or the level of housing need for the individual or family. This system eliminates the need for households to go from agency to agency telling the same story, and will lead to the appropriate referral for services or housing program. Please see the CoC document, *Coordinated Assessment Policy and Procedures* for more detail.

The CoC shall adopt the provisions and requirements set out in HUD Notice CPD – 14-012 for Prioritizing Persons Experiencing Chronic Homelessness and Other Vulnerable Homeless Persons in Permanent Supportive Housing and Recordkeeping Requirements for Documenting Chronic Homeless status as the baseline written standards for operations of the CoC Coordinated Assessment System. The CoC shall use the VI-SPDAT and the SPDAT as the standardized assessment tool to verify severity of service needs.

Housing First

Housing First is an approach in which housing is offered to people experiencing homelessness without preconditions (such as sobriety, mental health treatment, or a minimum income threshold) or service participation requirements and in which rapid placement and stabilization in permanent housing are primary goals. PSH projects that use a Housing First approach promote the acceptance of applicants regardless of their sobriety or use of substances, completion of treatment, or participation in services. HUD encourages all recipients of CoC Program-funded PSH to follow a Housing First approach to the maximum extent practicable.

Notice CPD 14-012 states that Projects that claimed to be Housing First in the 2013 NOFA must practice Housing First for both the FY 2013 and FY 2014 operating years. As follows, if a project has identified as practicing housing first for the FY 2015 operating year, it must practice that policy for the FY 2015 operating year.