Georgia Balance of State Continuum of Care
Draft Coordinated Entry
Written Standards, Policies and Procedures

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Introduction & Overview

The Coordinated Entry System (CES) is a Continuum of Care (CoC)-wide process for facilitating access to housing and service resources for individuals and families at risk of or experiencing homelessness, identifying and assessing needs in a transparent and consistent way and referring clients to the most appropriate service strategy or housing intervention. In doing so, the CES ensures that the Balance of State (BoS) CoC's limited resources are allocated to achieve the most effective results. The system ensures that people at risk of or experiencing homelessness obtain equitable and timely access to housing resources, provided in a person-centered approach that preserves choice and dignity.

The goal of these policies, procedures and standards is to synthesize key elements of HUD regulations on coordinated entry along with the Georgia BoS CoC's Written Standards and ensure that the CES is administered fairly and consistently across the CoC.

These policies, procedures and written standards govern the implementation, governance and evaluation of the Georgia BoS CoC CES. This is a living document and will be reviewed and updated regularly to reflect programmatic and regulatory changes. In the event of an Emergency Public Health Crisis or other State of Emergency, temporary or interim guidance may be issued for projects in the BoS CoC. Any interim guidance will be issued as an addendum to this document and may supersede the guidance in this document and be in effect for any amount of time designated by the CoC. Any substantial changes to this document will be approved by the BoS CoC Board of Directors.

All projects located within the GA BoS CoC that receive CoC and Emergency Solutions Grants (ESG) funding are required to participate in the CES and are therefore subject to complying with the CES written standards, policies and procedures as outlined and developed by the GA BoS CoC. All participating partners are strongly encouraged to follow the same set of standards.

Guiding Principles

Most communities lack the resources needed to meet all the needs of people at risk of or experiencing homelessness. This combined with the lack of a coordinated and efficient approach to providing necessary services often results in severe hardships for people at risk of and experiencing homelessness, further exacerbated by lengthy waitlists and households being unnecessarily screened out for needed assistance. CES helps communities prioritize assistance based on vulnerability and severity of service needs to ensure that people who need assistance the most, receive it in a timely manner. CES also informs community planning by identifying gaps in services. The GA BoS CoC CES is governed by the following guiding principles, whereas the CES must:

1. The system will provide low-barrier, easily accessible points of entry that cover the entire CoC. The system will coordinate with existing street outreach efforts to ensure that unsheltered individuals and families have access to the coordinated entry process.
2. The system will be person-centered; with respect to client choice, safety and cultural preferences.
3. The system will utilize a standard assessment tool and process across all access points.
4. All access points will serve or refer all sub-populations with respect for their unique needs.
5. The system will reduce barriers by increasing program accessibility, limiting restrictive program criteria, and focusing on matching level of service to level of need.
6. The system will be well-advertised. Communities will create a communication plan and branding in order to educate consumers and providers about coordinated entry.

7. Transparency and communication are fundamental principles of the GA BoS CoC's coordinated entry system.
8. The system will coordinate with other local and statewide systems of care.
9. In order to ensure an efficient system, training and evaluation are mandatory processes and will occur regularly. Data on system performance captured through the evaluation of the coordinated entry system will be used to evaluate housing and services, and contribute to the continued improvement of the system.
10. Providers in the coordinated entry system will take all reasonable steps to prevent clients from falling out of housing, through coordination with all available resources.

Governance

Role of Assessment, Placement and Services Committee

The Assessment, Placement and Services Committee is primarily responsible for identifying and maximizing the use and coordination of mainstream resources, services, and housing resources available for people at risk of or experiencing homelessness. The Committee will develop written standards for assessment and program admissions within the Continuum, like those that will govern CES across the BoS. The committee will assist in developing policy to be approved by the Board. It will work to ensure that the Continuum's system of care meets the needs of homeless individuals and families by seeking to implement comprehensive prevention, diversion, outreach, engagement, assessment, shelter (or other short-term housing), and permanent housing strategies throughout its broad geographical area.

Role of Regional Planning Groups

Communities will organize into Regional Planning Groups made up of agencies receiving CoC and ESG funds as well as others stakeholders from the region. Each Regional Planning Group, with assistance from CoC staff, will be responsible for designing and implementing a local CES within the parameters of the written standards and policies, and procedures described herein. The Written Standards provide Regional Planning Groups with a supportive framework to use when implementing their local CES. Regional Planning Groups will also utilize standardized assessment tools that will be uniform across the BoS CoC. These tools include the Prevention and Diversion Screening Tool and the Matching to Appropriate Placement (MAP) assessment , which are described further later in this document. Regional Planning Groups will design and submit a CES plan, using the Regional Planning Guide, for approval by CoC CES staff.

Definitions

Terms and acronyms used throughout this document are defined below.

- Chronically Homeless:
    1. 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:
        a. Lives in a place not meant for human habitation, a safe haven, or in an emergency shelter; and
        b. Has been homeless and living in a place not meant for human habitation, a safe haven, or in an emergency shelter 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 above. 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;

2. 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 that facility; or
3. 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 described above, including a family whose composition has fluctuated while the head of household has been homeless.

- Continuum of Care (CoC): A CoC is a geographically based group of representatives that carries out the planning responsibilities required by the U.S. Department of Housing and Urban Development's (HUD) CoC Program. These responsibilities include planning, coordinating and implementing a system to meet the needs of the population and subpopulations experiencing homelessness within the CoC's geographic area. The GA BoS CoC consists of 152 suburban and rural counties in Georgia.

- Coordinated Entry System (CES): Among other elements, CES is a coordinated process whereby any single individual or family at risk of or experiencing homelessness receives assistance as effectively and quickly as possible. CES employs the use of standardized, common assessments and screening tools to prevent and divert entry into the homeless system, to address emergent needs, and to evaluate severity of need and level of vulnerability.

- Diversion: Diversion is a strategy that prevents homelessness for people seeking shelter by helping them identify immediate alternate housing arrangements and, if necessary, connecting them with services and financial assistance to help them return to permanent housing. Diversion strategies can reduce the number of individuals/families becoming homeless, the demand for shelter beds and the size of program prioritization lists.

- (MAP) Matching to Appropriate Placement: assessment is a person-centered tool used within Coordinated Entry Systems to evaluate an individual's or household's unique needs, vulnerabilities, and circumstances to determine the most suitable housing intervention. By gathering health information, physical, interactions with public services, and homeless history, the MAP assessment helps ensure that clients are matched to the most appropriate and effective housing and service options available.

- HMIS: A Homeless Management Information System is a web-based software application designed to record and store person-level information on the characteristics and service needs of homeless persons throughout a CoC jurisdiction. Usage of the HMIS is mandated by HUD and locally by the GA DCA.

- Homeless: The Homeless definition is comprised of four categories:
  1. Literally homeless individuals/families

a. Literal homeless is further defines as homeless individuals/ families who lack a fixed, regular and adequate nighttime residence, meaning:
    i. Sleeping in a place not designed for or ordinarily used as a regular sleeping accommodation, such as a place not meant for human habitation.
    ii. Living in emergency shelter or transitional housing designated to provide temporary living arrangements (including hotel/motel stays paid for by charitable or government programs).
    iii. Exiting an institution where the individual resided for less than 90 days and where the individual entered the institution immediately from emergency shelter (including hotel/motel stays paid for by charitable or government programs) or an unsheltered location.
2. Individuals/families who will imminently (within 14 days) lose their primary nighttime residence with no subsequent residence and no resources or support networks.
3. Unaccompanied youth and families with children/youth who meet the homeless definition under another federal statute and three additional criteria.
4. Individuals/families fleeing or attempting to flee domestic violence with no subsequent residence and no resource or support networks.

- Prevention and Diversion Screening Tool: A tool used to reduce entries into the homeless services system by determining a household's needs upon initial presentation to shelter or other emergency response organization. This screening tool gives programs a chance to divert households by assisting them to identify other permanent housing options and, if needed, providing access to mediation and financial assistance to remain in housing.

- Regional Planning Guide: A tool created by the GA BoS CoC used by Regional Planning Groups to guide the CES planning and implementation process. Regional Planning Groups will create a plan for their community's CES implementation and submit it to the Assessment, Placement and Services Committee for approval using the format outlined in the tool.

Permanent Housing Interventions Prioritization Standards

The GA BoS CoC's prioritization process for permanent housing interventions includes the use of the Matching to Appropriate Placement (MAP) assessment. The MAP assessment is an evidence-based triage tool that assesses vulnerability. Once assessed using the MAP assessment, an individual or family is given a score that corresponds with a recommended intervention. That score takes into account vulnerability across many levels, including health history, physically experiences, interaction with public services, and homeless history.. Assessment scores are not meant to be eligibility thresholds. A household should not be boxed into any interventions by its assessment score. Instead, assessments should be used in conjunction with other information gathered during the intake and assessment process and case conferencing to determine what intervention best meets a household's needs and preferences. Each intervention is first prioritized by assessment score, then by subpopulation and secondary population.

The prioritization process, including the use of the MAP assessment and order of subpopulation and secondary population for PSH, is based on HUD's guidance in CPD-16-11. Further details on the

prioritization for Dedicated, Non-Dedicated, and DedicatedPLUS PSH beds can be found in the Georgia BoS CoC Written Standards.

Housing Intervention	Prioritization	Subpopulation	Secondary Population
PSH	**1**	**Chronic Youth**	**1. Prioritization Score**
			2. Veterans
			3. Length of Homelessness
			4. Date of Assessment
	2	**Chronic Families**	**1. Prioritization Score**
			2. Veterans
			3. Length of Homelessness
			4. Date of Assessment
	3	**Chronic Singles**	**1. Prioritization Score**
			2. Veterans
			3. Length of Homelessness
			4. Date of Assessment
PSH	**4**	**Non-Chronic Youth**	**1. Prioritization Score**
			2. Veterans
			3. Length of Homelessness
			4. Date of Assessment
	5	**Non-Chronic Families**	**1. Prioritization Score**
			2. Veterans
			3. Length of Homelessness
			4. Date of Assessment
	6	**Non-Chronic Singles**	**1. Prioritization Score**
			2. Veterans
			3. Length of Homelessness
			4. Date of Assessment

Housing Intervention	Prioritization	Subpopulation	Secondary Population
RRH	**1**	**Non-Chronic Youth**	**1. Prioritization Score**
			2. Veterans
			3. Length of Homelessness
			4. Date of Assessment
	2	**Non-Chronic Families**	**1. Veterans**
			2. Prioritization Score
			3. Length of Homelessness
			4. Date of Assessment
	3	**Non-Chronic Singles**	**1. Veterans**

			2. Prioritization Score
			3. Length of Homelessness
			4. Date of Assessment

Housing Intervention	Prioritization	Subpopulation	Secondary Population
TH	**1**	**Households with head of household between the ages of 18-24**	**1. Prioritization Score**
			2. Veterans
			3. Length of Homelessness
			4. Date of Assessment
	2	**Households fleeing or attempting to flee domestic violence with no subsequent residence and no resource or support networks**	**1. Prioritization Score**
			2. Veterans
			3. Length of Homelessness
			4. Date of Assessment
	3	**Households with persons with behavioral health needs**	**1. Prioritization Score**
			2. Veterans
			3. Length of Homelessness
			4. Date of Assessment
	4	**Households including persons with substance abuse disorders**	**1. Prioritization Score**
			2. Veterans
			3. Length of Homelessness
			4. Date of Assessment

Homeless Prevention Prioritization Standards

Housing Intervention	Prioritization	Category		Population	Subpopulation
HP	1	Rental Assistance		1. Youth (18-24) 2. Families 3. Singles	1. Veteran 2. Eviction Date 3. Date of Assessment
	2	Financial Assistance		1.Youth (18-24) 2.Families 3.Singles	1. Veteran 2. Eviction Date 3. Date of Assessment

	3	Services		1. Youth (18-24) 2. Families 3. Singles	1. Veteran 2. Eviction 3. Date of Assessment

Income Limits

Homelessness Prevention Income Requirements. The ESG Program interim rule limits eligibility for homelessness prevention assistance to individuals and families with incomes below 30% of AMI at intake and incomes that do not exceed 30% of AMI at re-evaluation, which must take place not less than once every 3 months. Applicant households must meet the AMI to qualify for prevention services.

Prioritization

1. Rental Assistance - Applicant household must at risk of losing their primary night-time residence and/or have no other residence, and/or does not have sufficient resources or support networks (e.g., family, friends, faith-based or other social networks) available to prevent them from becoming literally homeless.

2. Financial Assistance **-** Applicant household can receive rental application fees, security and utility deposits, utility payments, and moving costs.

3. Services - Applicant household can receive housing search and placement, housing stability case management, landlord-tenant mediation, tenant legal services, credit repair services

System Requirements and Workflow Expectations

Regional Planning Groups determine the CES model that will serve individuals and families at risk of or experiencing homelessness within their communities. All CoC and ESG-funded programs must actively participate in their Regional Planning Group's CES. Programs will remove and/or minimize program entry requirements to ensure that the most vulnerable individuals and families experiencing homelessness are served as quickly as possible.

Projects participating in the coordinated entry process must not screen potential project participants out for assistance based on perceived barriers related to housing or services, including, but not limited to, too little or no income, active or a history of substance abuse, history of domestic violence, resistance to receiving services, the type or extent of a disability-related services or supports that are needed, history of evictions or poor credit, lease violations or history of not being a leaseholder, or criminal record. Regional Planning Groups will develop a strategy and timeline for removing project barriers and document that strategy in the Regional Planning Group's CES Plan.

CoC and ESG-funded housing programs will not accept client referrals from outside the CES and will report all funded units and program availability to the CES lead agency. Communities will use the Prevention and Diversion screening tool prior to entry into an emergency shelter and/or emergency housing program. In cases where prevention and diversion are not an option and households enter an emergency shelter or emergency housing program, each community must administer and complete the MAP assessment for individuals and families needing housing assistance no greater than 14 days after entry. If a household is exiting emergency shelter to homelessness, the MAP assessment must be completed prior to the household exiting. Results from the MAP assessment will be used to determine the most appropriate housing intervention based on the household's specific needs and acuity.

Once CES implementation has begun in each region, communities should begin using the MAP assessment to assess households who are already in emergency housing. Projects should also begin to address existing waitlists by assessing households on those waitlists so that they can be added to the prioritization list and be considered for all available and appropriate resources.

Access	• CES access points must be easily accessed, in convenient physical locations, and offer non-physical access points as needed • Access may occur in person, through any designated access point, via phone and/or community outreach teams • Access points must be well-advertised in highly visible locations within the community and posted on the GA BoS CoC CES website
Prevention & Diversion	• A diversion and prevention screening tool, used prior to entry into emergency shelter and homeless system, determines emergency housing needs and if alternative housing options other than emergency shelter/emergency housing entry are available • Households who can solve their homelessness without housing assistance are diverted out of the system and referred to mainstream benefits and resources as needed. Households in need of prevention services are referred to appropriate and available resources • If a household, screened for diversion or prevention at a location that is not a CES access point, is identified as needing housing assistance, then they will be directed to a coordinated entry access point to complete a housing assessment
Emergency Services	• The CES will allow for quick access to emergency services with as few barriers to entry as possible • Access to such services should be available outside of normal business hours • Households should not be required to complete an assessment to gain access to emergency services • Emergency services are not prioritized and may be accessed as needed
Housing Assessors	• Housing assessors will be available to conduct housing assessments at the CES access points, the call center, and/or via outreach teams. The assessment results must be recorded in HMIS
Housing Referral	• Information gathered from the assessment will be used to determine the most appropriate housing and/or service intervention • Households will be matched to a housing intervention and a housing program based on program eligibility, prioritization, geography and client choice

Housing Match	• Once the recommended and available intervention(s) have been identified, eligibility confirmed, and the household has decided which program they are interested in, an electronic referral to the provider will be completed
Housing Connection	• After the assessor makes an electronic referral to the housing provider, the assessor will complete a warm hand-off to the agency • The agency will acknowledge the referral on HMIS and update the outcome of the referral as necessary

Housing Provider Responsibilities

In addition to CoC and ESG-funded programs that are required to participate in the CES, other organizations that provide housing to those experiencing homelessness, either due to program requirements and/or voluntarily, may dedicate all and/or a portion of their housing portfolio to CES. As such, organizations must identify and report the information listed below to the Regional Planning Group and CES Lead Agency. This information is required to be included in the Regional Planning Guide.

- ✓ Housing Type
- ✓ Program eligibility requirements for each housing type
- ✓ Unit and program availability/vacancies

The housing provider will also commit to following the housing matching and prioritization process for Homeless Prevention, PSH, TH, and Rapid Re-Housing

- ✓ Upon receiving a referral, acknowledge the referral in HMIS and contact the household referred to set up an intake appointment within 48 hours
- ✓ Work with the Assessor to locate the individual or family and engage with them to see if the housing referral provides a good match
- ✓ Record the referral outcome in HMIS
- ✓ Maintain case notes in the appropriate workflow regarding referral status, client choice, and other pertinent information
- ✓ When a match does not lead to successful program entry, record the reason why in HMIS

Screening Tools & Guides

Standardized tools and guides are utilized to ensure consistency across the GA BoS CoC CES. The following chart illustrates the type of screening tools or guides used within the BoS CoC CES, and purpose for each.

Screening Tools & Planning Guide	Purpose
Prevention and Diversion Screening Tool	Used prior to entry into shelter and into the homeless service system to determine 1) level of emergent housing and/or service needs, and 2) alternative prevention and

	diversion options other than entry into an emergency shelter/emergency housing
Matching to Appropriate Placement (MAP) assessment.	Used, no later than 14 days after emergency housing entry, to determine a recommended housing intervention and to determine vulnerability for prioritization purposes
Regional Planning Guide	The guide is used by Regional Planning Groups to illustrate community level CES operations, access points, policies, assessment processes, etc

Housing Assessment Process

Assessment Process

Assessors utilize the Matching to Appropriate Placement (MAP) assessment as the common assessment to screen any single individual or family experiencing homelessness.

Individual MAP Score	**Housing Resource Referral**
0-3	No housing referral/Basic information provided
4-7	Rapid Rehousing
8-11	Transitional Housing
8+	Permanent Supportive Housing
Family MAP Score	**Housing Resource Referral**
0-3	No housing referral/Basic information provided
4-8	Rapid Rehousing
9-12	Transitional Housing
9+	Permanent Supportive Housing
Transition Age Youth MAP Score	**Housing Resource Referral**
0-3	No housing referral/Basic information provided
4-7	Rapid Rehousing

8-11	Transitional Housing
8+	Permanent Supportive Housing

Screening Tool Updates

The MAP assesmentT receives ongoing updates to incorporate new and stronger evidence and feedback from both staff who have conducted the assessment as well as from individuals who have received the assessment themselves. The BoS CoC utilizes the MAP assessment for all coordinated entry related processes.

Appeal Process

The GA BoS CoC Written Standards outline the prioritization and matching process. If a household wishes to appeal a decision made during the assessment and referral process, they may file an appeal to the CES Regional Planning Group using the Appeal and Grievance Policy outlined in their Regional Planning Guide. Assessors must discuss the appeal process during the assessment so that households are aware of the process.

The CoC does not use data collected from the assessment process to discriminate or prioritize households for housing and services on a protected basis, such as race, color, religion, national origin, sex, age, familial status, disability, actual or perceived sexual orientation, gender identity or marital status.

Assessor Training

The CoC will release an annual training calendar on the CoC website. Training topics will include CES Written Standards, Policies and Procedures, prioritization and prioritization standards, MAP assessment, and the CES workflow in HMIS. The CoC will provide training to CES lead agencies at least annually. This training will focus on ensuring that assessments and access to housing are provided in a manner that is consistent with the CoC CES Written Standards and Policies and Procedures. Additional trainings to address data quality concerns and continuous quality improvement will be offered as needed. If a need for additional trainings not offered by the CoC is identified, Regional Planning Groups should communicate that need to a Coordinated Entry System Coordinator for consideration.

Housing Match and Prioritization Process

The CES makes referrals to projects receiving ESG and CoC Program funds within the GA BoS CoC geographic area and other housing and service resources if available. The match process accounts for the following elements:

1. **Prioritization**: CESs will follow the prioritization standards listed above.

2. **Recommended Housing Intervention:** Upon completion of the MAP assessment, the household will be assigned a score. That score will fall within a range that corresponds with a recommended housing intervention. Referrals are made based on the assessment's recommended intervention as well as the GA BoS CoC's prioritization standards that are listed above. If a household's recommended intervention is PSH and there is currently no PSH then a household can remain on the prioritization list until a unit is available or can be offered RRH if there is program availability at the time. If a PSH and/or RRH vacancy occurs and there is no

individual or family scoring in the appropriate range for that intervention, then the community can prioritize the individual or family with the highest MAP score at the time that vacancy occurs.

3. **Program Eligibility**: Referrals will be provided by the lead agency using a standardized set of eligibility criteria and program requirements. The CES will follow eligibility and program requirements based on the criteria agreed upon with the agency/organization. Agencies participating in the CES must submit all program eligibility criteria to the Regional Planning Group to be submitted as part of the Regional CES Plan. If DCA has a concern that a program's or CES's requirements may be contributing to "screening out" or excluding households from housing and/or services, DCA may request a meeting with the provider or Regional Planning Group to further discuss creative and collaborative solutions for adjusting program requirements. In cases where a provider is unwilling to adjust program criteria, DCA may de-prioritize the provider for future CoC and/or ESG funding.

4. **Client choice:** Households may decline a referral because of program requirements that are inconsistent with their needs or preferences. There are no limitations on how many referrals a client may decline. However, a household may decline 2 referrals before they are returned to the prioritization list and prioritized with others on the list at that time.

5. **Geographic Location:** Client's actual location and preferred location are considered when determining an appropriate referral.

6. **Case Conferencing**: Coordinated Entry Regions should have routine case conferencing meetings. These meetings are designed to manage the Coordinated Entry Prioritization List. Regions should create policies and procedures around case conferencing, paying close attention to privacy. CE leads should facilitate these meetings. Participants should include appropriate CE partners, representatives from permanent housing providers, emergency shelter staff, street outreach staff, advocates (especially in cases when the MAP score doesn't reflect client need), and any other direct service providers that can assist with case conferencing.

Completion of the Assessment Process

Timeline

The housing assessor will inform the household of possible eligibility and referral options immediately after assessment. As availability occurs, the assessor will input a referral into HMIS and facilitate a warm hand-off to the receiving program. The assessor should assist households in gathering eligibility documentation as needed and as able. After a referral is submitted, the receiving program will acknowledge receipt of the referral within forty-eight hours. Acknowledgement is recorded in HMIS. The receiving program must then enroll or deny the referred household within seven days. The receiving program can reject or deny the referral, but only for the reasons listed later in this document. If the receiving program has been unable to contact the household after seven days, then they are able to deny the referral, but only after repeated and documented attempts at contact by all available methods each day for all seven days. If a client is denied because they cannot be reached, then the client will return to the prioritization list. The assessor must attempt to continue to contact the household for 45 days, calling twice a week for the first 30 days and at least twice in the following fifteen days. All attempts to reach the household is documented in HMIS case notes. After that 45 day period, the household should be removed from the prioritization list. If a household presents after they are

removed from the prioritization list, then the household must complete the assessment process again. The receiving program must update the referral status on HMIS as updates occur. Individuals or families are exited from the prioritization list when they are enrolled in a permanent housing intervention, find stable temporary or permanent housing outside of the system, or are unable to be reached for a period of 45 days. Lead agencies are responsible for monitoring referral outcomes and updating the prioritization list as needed.

Refusals

When staff encounter individuals who do not provide a response to any of the first questions on the MAP, they should stop and acknowledge that the assessment will not provide useful information if the individual is having difficulty participating in the assessment process. All efforts should be made to explore possible reasons why the individual or family is experiencing difficulty with the assessment process and the assessor and/or outreach worker should utilize continued progressive engagement and relationship building techniques until such time the individual or family is comfortable with completing the assessment process. Individuals or families who do not complete the assessment process may be added to the prioritization list with an assessment score of 0. If the household meets the eligibility criteria for Rapid Re-Housing and there are no other individuals or families on the prioritization list and there is program availability, then the household may be referred for RRH services.

Denials

Receiving programs may only decline households found eligible and referred through the CES for reasons that are listed in the chart below. Denials should be infrequent. Agencies are required to record denial and reason for denial in HMIS. CoC staff will monitor denials and provide technical assistance to regions and/or agencies who are reporting high numbers of denials. Programs may not deny households found eligible for refusing to participate in mental health services. If a household is denied, for any reason, and does not have accommodation for the night then the receiving program must make all efforts to find appropriate emergency housing.

1.	There are no vacant units or program availability
2.	The receiving program is unable to reach the household after repeated attempts at contact by all available methods each day for 7 days
3.	The household missed two separate intake appointments
4.	The household presents with more people that reported when assessed and the receiving program cannot accommodate the increase
5.	The household was denied by independent property owner or landlord due to certain criminal behaviors
6.	The receiving program has determined, based on documented policies and procedures, that the household cannot be safely accommodated

Appeals

All clients have the right to appeal eligibility determination issued by the assessor or any receiving program. Instructions for submitting an appeal are provided to clients at the time that an intake decision is made by the receiving program. Housing assessors are responsible for assisting client in filing eligibility determination appeals, including but not limited to drafting a written appeal on behalf of the client. Coordinated entry participants must be informed of their right to file an appeal and nondiscrimination complaint. Access Points must provide participants with a copy of the CES grievance and nondiscrimination policy at time of assessment or clearly display the policy in the assessment area.

Prioritization List

To facilitate prioritization, the GA BoS CoC will establish and maintain prioritization lists in HMIS for each regional coordinated entry implementation. The BoS CoC will also establish a supplemental prioritization list for each regional coordinated entry implementation. The supplemental list will be hosted on a password protected excel document. De-identified information needed to prioritize households fleeing or attempting to flee domestic violence will be entered on the supplemental list. Access to this document will be limited to the CES lead agency, CoC CES Staff and the DV agency. Lead agencies will consider both households on this list and the HMIS prioritization list when making matches to available resources. CES lead agencies are responsible for monitoring and updating the prioritization lists as needed. The CES Coordinators will oversee the prioritization lists and process for all regional coordinated entry implementations. All individuals in need of permanent housing will be added to the prioritization list. Individuals will be prioritized based on MAP score and CoC prioritization standards.

Special Populations

GA BoS CoC CES is designed to address the needs presented by special populations through a comprehensive screening tool whereby such populations are quickly identified and referred to and/or provided appropriate services.

Special populations include: Domestic Violence Survivors, Veterans, Transitional-age youth (18-24), Persons Living with HIV/AIDS & Seniors. With regard to Youth and Survivors of Domestic Violence, the following requirements are applicable to the GA BoS CoC CES:

Youth

Youth experiencing homelessness require developmentally appropriate outreach and services in order to successfully interact with the CES, such as: 1) More likely to access CES sites that are open in evenings and on weekends, and 2) More comfortable accessing the CES via text and/or phone apps.

The GA BoS CoC CES will provide outreach & training at youth-friendly sites that serve both youth under the age of 18, and youth ages 18-24.

Survivors of Domestic Violence

The GA BoS CoC CES is designed to meet the needs of victims of violence accessing services through both victim service providers and providers with services that are not specific to victims. The CES process is designed to ensure both safety and confidentiality. Assessments conducted at a CES access point and/or during street outreach, will explore any possibility of a participant attempting to flee domestic violence, concerned for their safety, victim of stalking and any related violence.

In such cases, the following will occur:
1. Assessor will ensure that there is not an immediate threat to a participant's safety. If there is an immediate threat, measures to ensure the participant's safety should be taken.
2. Participants are offered an immediate referral to DV-specific resources
3. Households may choose to complete an assessment and receive services via the CES or can receive an immediate referral to a DV-specific agency

If being assessed by a DV-specific agency, participant information will not be entered into HMIS. De-identified information (DV comparable database client key, MAP score, family size, veteran status, and chronicity) will be added to the supplemental prioritization list. Lead agency will follow the standard assessment, prioritization, and referral process.

CES lead agencies are responsible for ensuring that participants are not 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.

VAWA

Under the HUD Final Rule Implementing VAWA Reauthorization Act of 2013, the Georgia BoS CoC is adopting policies to include provisions for protection of victims of domestic violence, dating violence, sexual assault, sexual battery or stalking, regardless of sex, gender identity, gender expression or actual or perceived sexual orientation.
These policies and procedures apply to CoC-funded Rapid Re-Housing (RRH) and Permanent Supportive Housing (PSH) programs. ESG-funded programs are subject to VAWA policies issued by the administrator of ESG funds. As a part of these policies and procedures, the CoC has put in place a policy for emergency transfers. The full details of the policy can be found in the *GA BoS CoC VAWA Policies and Procedures.*

For program participants who qualify for an emergency transfer, under VAWA, but a safe unit is not immediately available for an internal emergency transfer, the individual or family shall have priority over all other applicants for rental assistance and permanent supportive housing projects at another housing provider within the coordinated entry system, provided that the individual or family meets all eligibility criteria for such assistance. The individual or family shall retain their original homeless or chronically homeless status for the purposes of the transfer.

Privacy Protections and Non-Discrimination Requirements

Privacy Protections

All participating projects must follow the policies outlined in the GA HMIS Privacy Policy which is attached at the end of this document. 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.

Non-Discrimination Requirements

Recipients and subrecipients of CoC Program and ESG Program-funded projects as well as all participating projects must comply with the nondiscrimination and equal opportunity provisions of Federal civil rights laws as specified at 24 C.F.R. 5.105(a), including, but not limited to the following:

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

In addition, HUD's Equal Access Rule at 24 CFR 5.105(a)(2) prohibits discriminatory eligibility determinations in HUD-assisted or HUD-insured housing programs based on actual or perceived sexual orientation, gender identity, or marital status, including any projects funded by the CoC Program, ESG Program, and HOPWA Program. The CoC Program interim rule also contains a fair housing provision at 24 CFR 578.93. For ESG, see 24 CFR 576.407(a) and (b), and for HOPWA, see 24 CFR 574.603

Regional planning groups must create a grievance policy that is compliant with the aforementioned requirements. Coordinated entry participants must be informed of their right to file a nondiscrimination complaint. Access Points must provide participants with a copy of the CES grievance and nondiscrimination policy or clearly display the policy in the assessment area.

Low Barrier Entry

The GA BoS CoC CES is designed so as to not screen people out due to perceived or actual barriers related to housing or services. Such barriers include, but are not limited to, little or no income, active or a history of substance use, domestic violence history, resistance to receiving services, the type or extent of disability-related services or supports that are needed, history of evictions or poor credit, lease violations or history of not being a leaseholder, or criminal record- with exceptions for state or local restrictions that prevent certain projects from serving people with certain convictions.
The Coordinated Entry process is oriented, such that people are housed quickly without preconditions or service participations requirements.

HMIS

Homeless Management Information System (HMIS) is a web-based software application designed to record and store person-level information on the characteristics and service needs of homeless persons throughout a CoC. Usage of HMIS is mandated by HUD and locally by the GA DCA. HUD and other planners and policymakers use HMIS data to obtain better information about the extent and nature of homelessness over time. The GA BoS CoC's HMIS is staffed at the Department of Community Affairs. The

software provider is Client Track. The HMIS staff is responsible for the administration of the HMIS software and providing technical assistance to participating agencies and end-users. Each participating agency needs to follow GA HMIS Privacy Policy which is attached at the end of this document.

Marketing and Outreach

Community outreach activities must occur at least annually. These activities may occur in conjunction with the Point in Time Count. Local CESs are required to contact private and public agencies including social service agencies and state and/or local government agencies to educate and provide information on available programs and the CES process.

Marketing the Regional CESs should include at a minimum, informational flyers posted and made available at the locations servicing households that are at risk of or literally homeless. Other forms of advertisement may include newspaper ads, radio, websites, etc. as to ensure broad outreach via various advertising methods. Marketing will focus on people experiencing literal homelessness and clearly state eligibility requirements in an effort to reach the target population. Information about the CES will also be available on the GA BoS CoC website. Efforts are made to affirmatively market housing and supportive services to eligible persons regardless of race, color, national origin, religion, sex, age, familial status, disability or who are least likely to apply in the absence of special outreach.

The CES is required to coordinate with existing street outreach programs as well as private and public agencies, social service organizations, etc. for referrals, so that people sleeping on the streets are prioritized for assistance in the same manner as any other person assessed through the CES. CoC CES staff will ensure that training on administering the CES process will be available to outreach workers. Outreach staff should be prepared to administer the CES process in conjunction with outreach activities when there is a reasonable expectation that they will locate unsheltered people.

Evaluation

The CES process will be evaluated on a regular basis to ensure that it is operating at maximum efficiency. Evaluation will be carried out primarily through the GA DCA. Evaluation methods will include the following:

1.	A monthly review of metrics from the Regional CES**.** The data to be reviewed, and the thresholds that should be met, will be developed.
2.	A report submitted annually by the Regional Planning Group. This report will include trends from the month-to-month analysis of coordinated entry data, as well as the total number of assessments and referrals made, length of time homeless, number of denials and successful placements.