

It is important to note that this Policy and Procedure manual is ever-changing as we encounter new client challenges, new agency challenges, and new HUD-related challenges.

Draft approved by Membership May 4, 2017

What is Coordinated Assessment?

- Coordinated Assessment refers to the practice of conducting in-depth assessments of needs and barriers of homeless people and people at imminent risk of homelessness at the earliest point possible. The goals are to divert people from the system of homeless shelters whenever possible, provide prevention services when indicated, objectively match people with the type, level, and duration of services that best meet their needs, and to house the most vulnerable people, including youth, families, Veterans, and our chronically homeless.

Benefits of a Coordinated Assessment System

- Coordinated Assessment provides streamlined access to the homeless services system thereby allowing households facing housing loss to quickly access the services they need and for which they are eligible without having to call multiple social service programs.
- Coordinated Assessment creates easier access to services, improves and streamlines referrals, and prioritizes and targets more effectively.
- By using a coordinated assessment system, this helps move people through the system, reduce duplication of efforts, serve clients effectively, assist with ending chronic homelessness, make a better match of services to client's needs, and reduce returns to homelessness.
- Through Coordinated Assessment, a housing and prioritization assessment is administered that determines which intervention would be most appropriate for a household and how high priority they are to be placed. Households with more urgent and immediate needs will be prioritized for placement over households that have less intensive needs.
- The Coordinated Assessment procedures incorporate mechanisms for determining whether potential participants meet project-specific requirements of the projects for which they are prioritized and to which they are referred. The process of collecting required information and documentation regarding eligibility may occur at any point in the coordinated assessment process, as long as that eligibility information is not being used as part of prioritization and ranking.

Qualities of Coordinated Assessment (Based on HUD's Coordinated Entry Policy Brief and HUD Notice CPD-17-01)

- Coordinated Assessment coordinates participant intake, assessment, and referrals through a comprehensive and standardized assessment tool.
- Coordinated Assessment does not delay access to emergency services such as domestic violence shelters/hotlines, emergency shelter, street outreach, drop-in service programs, and any other emergency services. Clients can access emergency services outside the operating hours of Coordinated Assessment. Upon accessing emergency services, providers will inform clients about Coordinated Assessment's operating hours and intake processes.
- Clients entering ESG and/or CoC-funded programs (excluding programs considered to be an emergency service) will first need to go through Coordinated Assessment and receive a program

referral.

- All coordinated assessment entry points and methods offer the same assessment approach and referrals using uniform decision making processes.
- Coordinated Assessment can be easily accessed by individuals and families seeking housing or services.
- Coordinated Assessment will maintain written standards that prohibit the coordinated assessment process from screening people out of the coordinated assessment process due to perceived barriers related to housing or services, including, but not limited to, too little 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 projects from serving people with certain convictions.
- Coordinated Assessment is completed over the phone, which is widely accessible and available to clients within the CoC's geographic service area. Walk-ins are also welcome.
- Outreach is conducted on a weekly basis with shelters, day centers, and Street Outreach teams. Partner agencies, shelters, and other street outreach staff, regardless of funding source, may also refer clients on a regular basis to Coordinated Assessment for the same standardized assessment process as a client who contacts Coordinated Assessment directly.
- All persons in the CoC's geographic area have fair and equal access to the Coordinated Assessment process, regardless of where or how they present for services.
- Information gathered through Coordinated Assessment is used to guide homeless assistance planning and system change efforts in the community.
- The One Roof Continuum of Care Coordinated Assessment covers Jefferson, Shelby, and St. Clair counties by providing an initial, comprehensive assessment of individuals and families for housing and services.

One Roof Coordinated Assessment Procedure

The following procedure outlines how individuals and families can access the One Roof Coordinated Assessment process.

- Client will contact Coordinated Assessment via phone, walk-in, or through outreach efforts.
- One Roof will complete pre-screening questions about the client's homeless status. If the client is fleeing a domestic violence situation, they are immediately referred to the CoC's domestic violence hotline for emergency assistance.
- Based on the client's answers, the client will then complete diversion questions to see if client has other support to help in the situation.
- If the client is in need of prevention and diversion services, the client will continue through the basic assessment and will be provided with referrals of resources in the community who provide assistance relating to the particular situation the client presents.
- If the client is in need of housing services, the client will be directed to complete a coordinated assessment and vulnerability index over the phone.
- The One Roof staff will explain a statement of understanding, the referral and waiting list process, and also provide resources in the community for immediate emergency services as well as other housing resources outside of the Continuum of Care.

- After the call is complete, the Coordinated Assessment Team will place the client on the waiting list based on the client's vulnerability score, set by the VI-SPDAT 2.0, and the priority ranking, based on the HUD Notice CPD-16-011, and with special consideration prioritization voted and approved by the One Roof Continuum of Care on May 4, 2017.
- All Coordinated Assessment partner agencies must notify the Coordinated Assessment Team by phone or email when there is an availability in their program.
- Once there is an availability, the Coordinated Assessment Team will check the waiting list and make the most appropriate referral for the next eligible client at the top of the waiting list. This referral is made electronically through PromisSE.
- The Corresponding Agency will then follow up with the client. The agency will accept, cancel, or decline the referral after meeting with the client to discuss the program.
- Using the notes section in PromisSE, the agency will notify One Roof about the meeting and the status of the housing process.
- If the client and agency accept the referral, then the client will work directly with the agency towards the housing placement. The Coordinated Assessment entry will be closed in PromisSE once the client starts working with the Corresponding Agency.
- If the client and/or agency declines or cancels the referral then the agency will close the referral and appropriately select an explanation for the cancellation. The client will remain on the waiting list until the next housing placement is available.

One Roof Coordinated Assessment Centralized Waiting List

In accordance with HUD Notice CPD-16-011, One Roof maintains a single prioritized list for referrals into CoC funded programs, which is created through the Coordinated Assessment process and CoC Priority Ranking. This list is updated frequently to reflect most up-to-date data and is informed by the CoC's street outreach initiatives. Data collected for clients on the centralized waiting list is based on self-reported information from the client and information gathered through PromisSE and street outreach. It is the responsibility of the Corresponding Agency to gather and confirm documentation related to homeless and/or disability status upon a client's intake and entry into their program.

Coordinated Assessment will conduct a semiannual follow up for clients remaining on the waiting list. Additional reassessment will be determined based on the update as needed. Clients who are unable to be contacted and/or deemed inactive will be exited from the waiting list and their Coordinated Assessment entry will be closed. Clients who self-resolve their homeless situation will be exited from the waiting list and their Coordinated Assessment entry will be closed.

Coordinated Assessment Tool

One Roof utilizes the Vulnerability Index – Service Prioritization Decision Assistance Tool (VI-SPDAT) Version 2 as the standardized assessment tool to measure homeless individuals' and homeless families' vulnerability to housing instability. The VI-SPDAT is a nationally recognized, evidence-based, best practice tool for measuring vulnerabilities and prioritizing services for individuals experiencing homelessness or at-risk of experiencing homelessness.

Recommendations for housing programs are based on the results of the assessment:

<i>Score:</i>	<i>Recommendation:</i>
0-3:	no housing intervention
4-7:	an assessment for Rapid Re-Housing
8+:	an assessment for Permanent Supportive Housing/Housing First

Per the 2015 NOFA application, all CoC funded programs agreed to prioritize chronically homeless individuals and families for permanent housing. Therefore, if a chronically homeless individual scores an 8 or above on the VI-SPDAT and a PSH bed is not available, Coordinated Assessment will still refer the individual/household to an appropriate RRH program.

Coordinated Assessment Priority Ranking*

(Originally approved by One Roof CoC June 10, 2015, and updated based on the HUD Notice CPD-16-011)

- 5 – Chronic person + Disability + 12 months or more of homelessness (continuously or on at least four occasions in the last three years where those occasions cumulatively total at least 12 months)
- 4 – Literal Homeless + Disability + 12 months or more of homelessness but fewer than 4 episodes
- 3 – Literal Homeless + Disability + less than 12 months of homelessness
- 2 – Literal Homeless without Disability + Any length of Homelessness
- 1 – HUD Transitional Housing + Literal Homeless prior to entry into TH OR TH+ DV Victim (not literal homeless prior)
- 0 – Category 2 Homeless

**Special consideration and prioritization will be made for Veterans, families, and youth per a motion voted and approved by the One Roof Continuum of Care on June 10, 2015.*

Priority Subdivisions for Veterans, Families and Youth

Voted and Approved by One Roof Continuum of Care on 5/4/17

Final Veteran Priority Subdivisions

- 1. Veteran Families
- 2. Exposure to elements (sleeping outside)

Final Family Priority Subdivisions

- 1. Exposure to elements (sleeping outside)
- 2. Pregnancy and/or with minor children
- 3. Age of family (parent(s) under 24 or over 55)

Final Youth Priority Subdivisions

- 1. Exposure to elements (sleeping outside)
- 2. Youngest youth
- 3. Youngest youth pregnant and/or with minor children

In accordance to HUD Notice CPD-17-01, data from the assessment may not be used to prioritize households for housing and services on a protected basis, such as on the basis of a diagnosis or particular disability. In the event that two or more homeless households within the same geographic area are identically prioritized for referral to the next available unit, the Coordinated Assessment Specialist will refer the household that first presented for assistance in the next available unit.

Priority ranking is based on the answers the client provides during assessment. The Corresponding Agency will verify eligibility and documentation. In accordance to Notice CPD-16-11, both Corresponding Agencies and Coordinated Assessment should follow the order of priority above while also considering the goals and any identified target populations served by the project for the client referral.

Receiving Referrals

Once a Corresponding Agency receives the referral, they will make contact with the client to set up an intake to verify all eligibility information. Coordinated Assessment is not responsible for collecting documentation that verifies a client's eligibility for programs. Coordinated Assessment serves as a prescreening tool to assess vulnerability. Corresponding Agencies will gather necessary documentation to determine eligibility to program.

Upon receiving a referral from Coordinated Assessment, the Corresponding Agency will make contact with the client within 3 business days to schedule an intake. Providers may schedule client intakes to collect additional data and assess for program fit. Interview must be conducted within 10 days of receiving a referral.

If the client cannot be contacted within 3 business days then the Corresponding Agency will notify the Coordinated Assessment Team and move to the next eligible person on the waiting list. This will be noted in HMIS, and the referral will be cancelled instead of declined.

If the client misses the appointment, the Corresponding Agency will schedule a new intake appointment and should hold the vacancy until the intake appointment is concluded. If the client misses a second appointment then the referral can be cancelled and noted in HMIS.

Accepting Referrals

If the client is accepted into a program and also accepts the referral, the Corresponding Agency must document that acceptance in HMIS through the referral system. The referral will then be complete and the client will be removed off of the waiting list and the Coordinated Assessment entry will be closed.

Refer to the 'Responding to a Referral Procedure' for further instructions on how to complete a referral in HMIS by accepting / declining / canceling.

If a client is accepted into a program and then either voluntarily leaves or contact with that client is lost, after due diligence in reaching out to contact, the Corresponding Agency can exit the client from their program. If/when a client returns or contacts the Corresponding Agency, the agency should direct them back to Coordinated Assessment. The client's entry will be reopened and the client will be placed back on the waiting list for another referral.

Referral Rejection Policy

Both CoC providers and program participants may decline or cancel referrals, although service denials should be infrequent and must be documented in HMIS. All participating projects and the client must provide the reason for service denial and may be subject to a limit on number of service denials.

If the Corresponding Agency declines a referral, it will need to be marked in HMIS as Referral Outcome Declined. If the client chooses to decline a referral, it will need to be marked in HMIS as Referral Outcome Cancelled. At a minimum, all projects' referral denial/cancellation reasons must include one of the following which will be marked in HMIS through the referral system.

Referral Outcome Declined -

- Program at bed/unit/service capacity at time of referral.
 - Mark in HMIS – *All Services Full*
- Based on the individual program policies and procedures, the Corresponding Agency has determined that the client/household cannot be safely accommodated or cannot meet tenancy obligations with the supports provided by the program.
 - Mark in HMIS – *Service Not Accessible*

Referral Outcome Canceled -

- Client/household does not meet required criteria for program eligibility.
 - Mark in HMIS – *Client Not Eligible*
- Client/household refused further participation or client moved out of CoC area.
 - Mark in HMIS – *Client Refused Services*
- Client/household unresponsive to multiple communication attempts.
 - Mark in HMIS – *Unable to Contact Client*
- Client resolved crisis without assistance.
 - Mark in HMIS – *Inactive*
- Client/household missed two intake appointments.
 - Mark in HMIS – *Client Not Compliant*
- Client/household presented with more people than referred by the Coordinated Assessment Specialist and the Corresponding Program cannot accommodate the increase.
 - Mark in HMIS – *Client Not Compliant*

If the reason for denial/cancellation is not listed above then the Corresponding Agency will need to add it in the referral notes of the reason and mark in HMIS – *Unknown*.

Corresponding Agencies must accept 1 out of every 4 eligible referrals.

Client Choice

Clients are allowed to decline 1 referral and placed back in the same spot on the waiting list. However, if the client declines a second referral then they are moved down to the bottom of the waitlist based on their VI-SPDAT score. If a client declines all available services, the CoC street outreach provider will continue to make attempts to engage those persons. Per HUD Notice CPD-16-011, Coordinated Assessment will continue to prioritize these clients until they are housed.

Client Appeal

All clients and Corresponding Agencies have the right to appeal the client's vulnerability score given by

Coordinated Assessment. If a client would like to appeal, it should be directed to the Coordinated Assessment Coordinator. All appeals of scores by clients or Corresponding Agencies should be made in writing and submitted to One Roof's Coordinated Assessment. Agencies' internal appeal process is separate from Coordinated Assessment and One Roof.

Referrals for Domestic Violence Services

The ESG and CoC program rules do not require ESG or CoC-funded victim service providers to use the CoC's coordinated assessment process, if they use an alternative coordinated entry for victim service providers in the area that meets HUD's minimum coordinated entry requirements. The process used by the victim service providers in the One Roof Continuum of Care meets these requirements.

When a homeless or at-risk individual/household is identified by the prescreening of Coordinated Assessment to be in need of domestic violence (DV) services, that individual/household is referred to the domestic violence crisis line immediately. If the individual/household does not wish to seek DV specific services, the individual/household will have safe and confidential access to the Coordinated Assessment System. If the DV crisis line determines that the individual/household seeking DV specific services is either not eligible for or cannot be accommodated by the DV specific system, the individual/household can contact Coordinated Assessment for a full assessment and referral as appropriate.

If a client is currently at a DV shelter and the individual/household contacts One Roof for other housing resources in the Continuum, then the client will complete a paper copy of the coordinated assessment. The Coordinated Assessment Team will contact the most appropriate agency when the client is next on the waiting list for a referral. Confidentiality is a high priority of the Continuum so the client will not be entered into PromisSE until the client leaves the DV shelter and enters another housing program. The intake will be kept in a locked file in the One Roof office.

Re-Assessment

If an individual/household is on the waiting list and more information is obtained which would alter a client's/household's vulnerability, the individual/household needs to contact Coordinated Assessment to update their status change to determine if a level of care change needs to occur.

If a Corresponding Agency meets with a client during an intake interview and feels there was pertinent information not shared at the initial coordinated assessment, a re-assessment will be required. The Corresponding Agency will need to refer the client back to Coordinated Assessment. Usually this can take place immediately over the phone, Monday - Friday 9:00 a.m. - 4:00 p.m.

Grievance Policy

Clients who complete the coordinated assessment process will be informed with the Coordinated Assessment Grievance Policy and their ability to file a grievance if they find their experience with Coordinated Assessment unsatisfactory. All individual's or family's concerns and grievances will be resolved promptly and fairly, in the most informative and appropriate manner. Corresponding Agencies will also inform clients of their individual grievance policy for their agency.

Coordinated Assessment Grievances are related to the policies and/or procedures of Coordinated

Assessment. All Coordinated Assessment related grievances should be directed to:

One Roof
Attn: Coordinated Assessment Coordinator
1515 6th Avenue South
Birmingham, AL 35233
info@oneroofonline.org

All grievances must be presented to One Roof in writing, either by letter or email. Client's requiring assistance to complete their written grievance may contact the One Roof office for special accommodations.

Nondiscrimination Statement

The One Roof CoC and all CoC Funded Programs will comply with all HUD and One Roof nondiscrimination requirements, 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, and HUD's Equal Access Final Rule as applicable.

One Roof is an Equal Opportunity Employer. One Roof supports and is committed to the principle of non-discrimination. It is our policy to hire, promote, train and to carry out all employment and service decisions without regard to race, color, religion, age, gender, perceived sexual orientation, national origin or ancestry, political affiliation or belief, veteran's status, marital status, or status as a qualified individual with a disability, and in accordance with applicable state and federal statutes, executive orders and regulations.

ADA Compliance

One Roof is committed to complying fully with the Americans with Disabilities Act (ADA) and ensuring equal opportunity for persons with disabilities. All coordinated assessment processes are conducted on a non-discriminatory basis.

"Disability" includes a physical or mental impairment that substantially limits one or more life activities, a record of such impairment, or being regarded as having such an impairment. "Physical or mental impairment" may include such things as orthopedic disorders, visual, speech and hearing impairments, cerebral palsy, epilepsy, HIV infection, cancer, heart disease, mental retardation, emotional illness and some learning disabilities.

One Roof is committed to ensuring non-discrimination in all terms. Reasonable accommodation is available to all clients as needed, e.g., Braille, audio, large type, assistive listening devices, and sign language interpreters, as long as the accommodation does not cause undue hardship on One Roof. Access points are accessible to individuals with disabilities, including accessible physical locations for individuals who use wheelchairs, as well as clients who are least likely to access homeless assistance.

Privacy Protections

PromisSE is a shared, computerized record keeping system that captures information about people experiencing homelessness or near homelessness, including their service needs. One Roof participates in PromisSE which collects information on clients served by its member agencies and the services they

provide.

One Roof collects and stores information in PromisSE for purposes of assessing and referring participants through the coordinated assessment process. Coordinated Assessment Privacy Policy abides by all HUD standards for HMIS and is HIPAA compliant by design.

With client permission as indicated by a signed Release of Information (ROI), client information can be shared with other HMIS participating Agencies throughout the implementation. The information entered by participating providers and shared with client consent includes: basic identifying demographic data (e.g., name, birthdate, and gender), the nature of the client's situation, and the services and referrals received from the participating Agency. The collection and use of all personal information is guided by strict standards of confidentiality.

Stakeholder Feedback

Coordinated Assessment will solicit feedback at least annually from participating projects and from households that participated in the Coordinated Assessment process during that time period. Feedback collected through this solicitation will be used to address the quality and effectiveness of the entire Coordinated Assessment process, including its policies and procedures.

Coordinated Assessment will utilize a combination of several methodologies to collect stakeholder feedback, including but not limited to surveys, focus groups, and individual interviews. Feedback collected using these methods will approximate the diversity of the participating providers and households served. Coordinated Assessment will solicit feedback from at least one provider within each housing/assistance type, e.g., PSH, TH, RRH, etc., and solicit feedback from a random sampling of households that participated in the Coordinated Assessment process. All feedback collected through these means will be presented to the Coordinated Assessment Committee for review and evaluation. Based on the collected feedback, this committee will propose any necessary updates to the Coordinated Assessment policies and procedures.

Assessor Training

One Roof will provide on-going training and support for participating staff at organizations serving as an access point for the Coordinated Assessment process or otherwise conduct assessments. Mandatory refresher trainings for staff will occur at least annually, and the written materials and protocols will be distributed.

The purpose of this annual training is to provide all staff administering assessments with access to materials that clearly describe the methods by which assessments are to be conducted with fidelity to the Coordinated Assessment, including its policies and procedures.