Minutes of the Homeless Continuum of Care of Stark County's
November 14, 2017, Central Intake and Assessment Committee Meeting

Attendance The following members of the Central Intake and Assessment Committee (the Committee) attended the meeting: Renee Biggums; Amy Dornack; Amanda Fletcher; Jennifer Keaton; Tracey Lane; Natalie McCleskey; Teresa Ponchak; Scott Schnyders; Denise Smith (by phone); Kim Stanley; Shirene Starn Tapyrik; Lisa Waikem; and Jean Van Ness. HCCSC Board Chair and Stark Housing Network Executive Director Kurt Williams also attended the meeting along with the Network's Program Administrator, Melissa Terrell.

Introductions and Approval of Minutes from October Meeting. Because there was one new Committee member, the meeting began with introductions. After Committee members had introduced themselves, Jean requested a motion to approve the minutes of the October meeting. Jennifer moved that the minutes of the October meeting be approved, and Lisa seconded the motion. The motion passed with a positive vote of all Committee members except Teresa and Kim, both of whom abstained because were not present at the October meeting.

Review of Pending Issues. Jean led the Committee through a review of remaining issues that had to be decided and gaps that had to be filled in order to complete HUD-required changes to the coordinated entry policies and procedures. She asked for Committee input on the following:

- Methods for Evaluating the CoC System. The new HUD guidance requires that CoCs have some mechanism in place to collect feedback on the operation of their coordinated entry systems and make adjustments in response to that feedback. The Committee discussed the possibility of conducting an annual or ongoing survey of persons using the system, focusing particularly on the possibility of using a Web-based survey and sending system users a link to that survey. However, there was disagreement and confusion about who should be asked to complete the survey and at what stage they should be asked to complete it. Also, there was doubt about the percentage of people who would actually take the trouble to complete a Web-based survey. Ultimately, there appeared to be consensus that, at least initially, it would be easier for all if the HCCSC recruited someone outside the system to conduct annual focus groups to collect user feedback on the coordinated entry system (CES).

- Sentiments in Favor of Changing the System to Require Group Consensus on All Housing Placements. Jean indicated that she understood there had been some discussion of eliminating the practice of allowing providers to pull people off the prioritization list to fill vacancies and replacing it with a system in which all vacancies, or, at least vacancies in PSH, were filled by case conferencing among providers. She asked whether Committee members favored such a move. Overwhelmingly, members favored retaining the current system although they agreed that the weekly case conferencing that had begun to consider the hardest to serve people circulating at the top of the prioritization list was useful and should be continued.

- Data Management. Jean noted that the new HUD guidance requires that policies be put in place to ensure the privacy and security of data collected by coordinated entry system. She also noted that, although we have policies in place to secure the data entered in HMIS, we need to determine whether those policies are sufficient to cover HUD requirements to secure data

collected and shared during coordinated entry. Jennifer indicated that she had received confirmation that Google Docs is a secure environment in which data is encrypted at rest and that it is HIPAA-compliant. She suggested that the HMIS user agreement be extended to cover all coordinated entry documents and data and that everyone with access to coordinated entry data be asked to re-sign the agreement. Also, all people with such access should be required to attend annual data privacy and security classes.

- Reduction in the Size of Prioritization List. Jean noted (1) that, during last month's conference call with the Committee, Jon Cox had expressed concern about the size of the HCCSC's prioritization list and (2) that, in a subsequent conversation with Kurt, Jon had raised that concern again. Jean asked whether we had the means to do anything about this. In response, Kurt noted that "lots of communities" wait for a period before putting people on their prioritization lists to give them the opportunity to resolve their housing crises on their own. In addition, Jean noted that Jon had cited approvingly the practice of keeping people off the PSH prioritization who did not already have a verification of disability. However, after some discussion, there appeared to be no consensus in favor of either of these two measures. With respect to the suggestion that the Hotline place only those with a VOD on the PSH list, members argued that this would disadvantage those who had the least ability to help themselves, i.e., the precise population to whom CoC should be giving the highest priority.

  Ultimately, Committee members appeared to agree that the best ways to shorten the prioritization list would be to:

  - ➢ Continue case conference to find housing solutions for those circulating at the top of prioritization lists; and
  - ➢ Enlist housing projects to help the Hotline purge the list by requiring them to make clear notes in Google Docs instructing that a person be removed from the list whenever a project had tried unsuccessfully to contact a person for a vacancy.

- Use of Youth SPDAT. Jean noted that the new policies she had drafted indicated that we would be using the Youth SPDAT – as agreed during earlier Committee meetings. However, the Committee still needs to decide on the date on which use of the Youth SPDAT will begin, and it also needs to determine what scores on the Youth SPDAT will determine eligibility for different project types.

Review of Additions and Changes to Coordinated Entry Policies and Procedures. Jean next turned the Committee's attention to proposed changes she had made to *The Homeless Continuum of Care of Stark County's Coordinated Intake and Standardized Assessment Guide* (the Guide). Those changes are reflected in the version of the Guide attached to these minutes as Appendix A. Instead of reviewing those changes one-by-one, Jean asked Committee members to raise any question they had about particular changes or make suggestions for further changes. During the course of the subsequent discussion, Committee members made the following suggestions and comments:

- Section I.D.4.f. of the Guide should be amended to make it clear that Quality Assurance Workgroups are reviewing only a by-name list of people awaiting PSH.

- Section IV.D. will need to be changed because the Hotline staff does not have the capacity currently to do all of things listed there. Jennifer and Teresa indicated that, because the staff already counsels people to pursue other options if they are not likely to receive housing quickly, Section IV.D.4. could remain as it is without imposing any new burdens on the staff. Also, they agreed that IV.D.5, which indicates that Hotline staff will counsel people to obtain a verification of disability if they wish to qualify for PSH. However, Sections IV.D.1 through IV.D.3 should be eliminated.

- Section V.B.1. of the Guide should be changed to indicate that people will be given priority for shelter beds based on the rules outlined in the HCCSC's *Policies Governing Eligibility and Prioritization to Receive Assistance and Standards for Administering Assistance.*

- Section V.C.1. should be changed to indicate that people requesting PSH transfers will be at the top of the list.

- With respect to Section V.D., Teresa and Jennifer noted that bed inventories are not being kept current by housing providers and this needs to change to enable the Hotline to better manage the prioritization lists.

- Section V.D.2.b. should be changes to substitute "projects" for "rapid re-housing projects" in the second sentence of that section.

- Section V.E.2. needs to be changed to prevent providers from "putting a hold" on several people at once while trying to fill a vacancy and thereby removing more than one person at a time from consideration for vacancies that other projects are trying to fill.

- Section VI.C.2. should be changed to substitute "has changed" for "was incorrect" in the first sentence of that section.

- Section VII does not adequately address the issue of what happens when a client requests a transfer for reasons that the provider currently serving the client adjudges insufficient to justify a transfer under HCCSC policies? Does the provider have to process the request under those circumstances, and, if it does not do so, can the client file a grievance with the HCCSC?

- Questions were raised about the confidentiality of grievance procedures. However, there was no consensus about how to strike the right balance in preserving confidentiality while promoting transparency and fairness.

- Section VIII.C should be expanded to include the requirement that the provider against whom a grievance has been filed should receive a copy of the Collaborative Applicant's decision on the grievance.

Adjournment. There being no further business, the meeting was adjourned after Jean reminded the Committee that its next meeting was scheduled for December 4 at 1 p.m.

The Homeless Continuum of Care of Stark County's
C<u>oordinated Entry</u> ~~oordinated Intake and Standardized Assessment~~ Guide

I. **Overview of the HCCSC C<u>oordinated Entry</u> ~~entral Intake and Standardized Assessment, and Service Prioritization~~ System**

   A. <u>Purpose</u>. The policies and procedures below govern the operation of the <u>coordinated entry</u> system <u>(CES)</u> that the Homeless Continuum of Care of Stark County (HCCSC) has established ~~for central intake, standardized assessment, and prioritization of~~ <u>to register, assess, and prioritize</u> requests for shelter, housing, and <u>supportive</u> services made by <u>people</u>~~individuals and families~~ who are homeless or at risk of losing their housing. The purpose<u>s</u> of th<u>e CES</u>~~is system~~ <u>are</u>~~is~~ to ensure that Stark County:

      1. Affirmatively markets and provides <u>easy access to assistance for all people i</u>n the county <u>who are experiencing housing crises;</u>

      1. ~~Accurately tracks the number and characteristics of individuals and families that are homeless or at risk of homelessness; the assistance they receive; and the efficacy of that assistance in securing stable housing for those individuals and famili;~~

      2. Assesses in a fair and consistent manner all requests for help in securing or stabilizing housing ~~and~~ follows uniform rules in prioritizing those requests; and

      3. ~~~~<u>Makes available to people the assistance that best suits their needs and prefer</u>ence<u>s</u>.

   B. <u>Participation in the System and Use of this Guide</u>. All homeless service providers in Stark County that are receiving Continuum of Care <u>(CoC)</u> or Emergency Solutions Grant <u>(ESG)</u> funds or funds from Ohio Development Services Agency programs, including the Homeless Crisis Response Program, are required to (1) participate in the <u>CES described in this guide</u>~~central intake, standardized assessment, and service prioritization system~~ and (2) follow th<u>e</u>~~is~~ guide <u>and the HCCSC's *Policies Governing Eligibility and Prioritization to Receive Assistance and Standards for Administering Assistance* </u>in prioritizing eligible ~~individuals and families~~ <u>persons</u> for service. In addition, the <u>Collaborative Applicant</u>~~Continuum of Care Planner~~ will make every effort to encourage other Stark

County providers of housing and services for the homeless to participate in this system and follow the policies and procedures established for its operation~~in this guide~~.

C. <u>Management of Central Intake and Standardized Assessment</u>. The combined staff of the Homeless Navigation Hotline (the Hotline) and Homeless Management Information System (HMIS)~~HMIS staff~~ is responsible for operating the CES~~central intake and standardized assessment system~~; prioritizing people~~clients~~ for assistance based on their assessments and on the HCCSC's *Policies Governing Eligibility and Prioritization to Receive Assistance and Standards for Administering Assistance*; maintaining ~~a~~ one or more prioritization lists from which housing providers must select people for admission in order of their ranking, ~~list of clients prioritized for emergency shelter~~ [JVN1]~~or housing;~~ and referring people~~clients~~ to prevention services and emergency shelter. Quality Assurance Workgroups help Hotline and HMIS staff ensure that the CES~~system~~ is working properly, and the HCCSC Board's Central Intake, ~~Standardized~~ Assessment, and ~~Service~~ Prioritization Committee oversees the operations of the CES~~system~~ as a whole. The HCCSC Board is ultimately responsible for approving any changes to ~~the~~ CES policies and procedures~~system~~.

D. <u>Quality Assurance Workgroups.</u>

1. <u>Various Groups and Their Composition.</u> Every provider participating in HCCSC's CES~~central intake, standardized assessment, and service prioritization system~~ is expected to participate in each "Quality Assurance Workgroup" relevant to its projects. The workgroups are:

    a. Supportive Housing (Transitional Housing, Safe Haven, and Permanent Supportive Housing projects)

    b. Prevention and Rapid Re-housing

    c. Emergency Shelters; and

    c.d. ~~and~~ Outreach Programs.

2. <u>Workgroup Chairs.</u> A representative of the Collaborative Applicant ~~The CoC Planner~~ and the HMIS Program Manager will co-chair all of the workgroups.
    [JVN2]

3. <u>Frequency of Meetings.</u> Each Quality Assurance Workgroup will meet as often as necessary to ensure the prompt resolution of any problems regarding referrals and admissions to the projects within their purview.

4. <u>Scope of Work.</u> It is the responsibility of the Quality Assurance Workgroups to determine whether CES~~central intake and standardized assessment, prioritization, and project admissions~~ policies and procedures are working fairly and effectively for the projects within their purview <u>and for the people that need the help of these projects</u> and to recommend improvements where needed. Among other things, the workgroups are expected <u>to</u>:

    a. P~~To p~~rovide feedback on the accuracy of the Hotline's client assessments, prioritizations, and referrals for shelter and housing and ~~to~~ recommend changes to improve the quality of the Hotline's decisions in these areas;

    b. P~~To p~~rovide feedback on procedures governing intake, assessment, referral, and project admission ~~-~~and recommend changes where appropriate;

    c. P~~To p~~rovide feedback on policies governing the eligibility ~~of clients~~ for projects ~~within their purview~~ as well as on policies governing ~~client~~ exclusion and <u>expulsions from projects</u>~~termination~~ and recommend changes where appropriate;

    d. C~~To c~~onsider ~~cases in which clients or prospective clients make~~ complaints to the Collaborative Applicant about exclusions, terminations, or discriminatory treatment by projects within their purview[JVN3];

    e. R~~To r~~eview projects within their purview that have established a pattern of bypassing <u>more highly ranked person</u>~~higher priority clients on the central prioritization list~~ to <u>others on the applicable prioritization liast</u>~~serve lower ranked ones~~ when there are no approved or required eligibility restrictions that account for these deviations; analyze the reasons for these deviations; and make recommendations to ensure that projects <u>meeting HCCSC rules for serving people in the order in which they are ranked for service by the Hotline</u>~~are appropriately prioritizing individuals and families~~; and

    f. <u>Work together to review by-name lists of persons at the top of prioritization lists and persons that have proven difficult to serve in order to develop housing solutions for those persons.</u> ~~To work together to review individual cases and~~

~~develop housing solutions for chronically homeless or otherwise hard-to-serve clients.~~

II. ~~Central Intake and Standardized Assessment by the Homeless Hotline~~ **Access to the Coordinated Entry System Through the Hotline**

A. <u>Role of the</u>~~Homeless~~ <u>Hotline – Overview</u>. All persons seeking help in responding to a housing crisis ~~(clients)~~ must <u>contact</u>~~be referred initially to~~ the Homeless <u>Navigation</u> Hotline (the Hotline). Hotline staff will be responsible for:

1. <u>S</u>~~Pre-s~~creening <u>people</u>~~clients~~ to determine<u>:</u>

   a. <u>W</u>~~w~~hether they are victims of domestic violence <u>or veterans and, therefore, eligible for services from another system of care that they may wish to contact to maximize their options; and</u>

   • b. ~~and w~~<u>W</u>hether they have the resources to obtain shelter and housing without formal entry into the homeless system;

2. ~~1.~~ Diverting from the homeless system <u>persons</u>~~clients~~ who <u>do not meet the threshold criteria for eligibility to receive help from that system</u> ~~have other resources and support networks~~; and

3. ~~2.~~ Conducting a formal intake and ~~standardized~~ assessment of those who are not diverted.

B. <u>Marketing the Hotline. The HCCSC will take the following steps to market the Hotline to all eligible persons regardless of race, color, national origin, religion, sex, age, familial status, disability, actual or perceived sexual orientation, gender identity, or marital status:</u>

1. <u>Prominently publicize on its website the role of the Hotline in linking persons experiencing housing crises to housing and supportive services, both in English and in Spanish, along with contact information for the Hotline, including a phone number, e-mail address, and FAX number.</u>

2. <u>Ensure that, at least once a year, information about the role of the Hotline and contact information for the Hotline is delivered to all police department and all emergency services departments and agencies in Stark County as well as to all schools, hospitals, city councils, county commissioners, and township trustees</u>[JVN4];

3. Identify organizations that serve individuals with language barriers that may prevent them from accessing information about the Hotline and ensure that, at least once a year, they receive information about the role of the Hotline and contact information for the Hotline;

4. Identify organizations that target services to populations protected by fair housing and equal access laws and ensure that, at least once a year, they receive information about the role of the Hotline and contact information for the Hotline; and

5. Ensure that, when people in Stark County who are seeking help in solving a housing crisis call 2-1-1, they are referred to the Hotline.

C. Access for Non-English Speakers and Others With Communication Challenges.

1. Initial Access by Phone, E-mail, or FAX. Anyone seeking help through the Hotline to solve a housing crisis must make initial contact with the Hotline by phone, e-mail, or FAX.

2. Identifying Need for Communication Assistance. Hotline staff must respond promptly to each phone call, e-mail, or FAX requesting help and determine in each case whether the person requesting help requires special assistance in communicating his or her needs and completing the Hotline's standardized assessment process.

3. Addressing Need for Communication Assistance. It is the responsibility of the Hotline staff to do the following to address the needs of individuals who cannot communicate effectively with Hotline staff without special assistance:

    a. Maintain a list of resources available to provide translation services or other communication services or devices to individuals who need help in communicating with Hotline staff;

    b. Use those resources as appropriate to eliminate any barriers to communication with people contacting the Hotline; and

    c. As much as possible, honor the preferences of the caller in selecting the services or devices that will be used to eliminate communication barriers.

D. Access for People Encountered by Street Outreach Projects.

1. Responsibilities of Street Outreach Program Staff to Facilitate Access.

   a. Responsibilities in General. Street outreach projects funded by the CoC or ESG programs and other outreach programs cooperating with the HCCSC will encourage homeless people they encounter on the streets or in other places not meant for human habitation to register with the Hotline. In addition, outreach staff will facilitate registration by providing the homeless people they encounter with the means to contact the Hotline by phone, e-mail, or FAX and working with them to complete the coordinated entry process (CEP).

   b. Responsibilities When Homeless Person Declines to Contact the Hotline. When outreach staff cannot persuade a person living on the street or in another place not meant for human habitation to register with or undergo assessment by the Hotline, they will make every effort to collect basic information about the person (at least their name and date of birth) and share that information with Hotline staff so that staff can create a HMIS record of the person's episodes of homelessness. In addition, as long as the person remains on the street or in place not meant for human habitation, outreach staff will attempt to ~~maintain~~ contact ~~with~~ the person at least weekly [JVN5] and report those contacts to the Hotline.

2. Responsibilities of Hotline Staff.   In dealing with homeless persons encountered by street outreach, Hotline staff will follow the same policies and procedures it follows in dealing with other persons who make contact with the Hotline, using outreach staff as needed to facilitate completion of the CEP. In the case of homeless persons who decline to complete the CEP even with the help of outreach staff, as long as the Hotline has sufficient information to clearly identify those persons, it will preserve records of their homeless episodes as reported by outreach staff for at least three (3) years.

E. Hotline Hours and Access to Emergency Services After Hours. The Hotline staff is on duty from 8:30 a.m. to 4:00 p.m., Monday through Friday. During hours when the staff is not on duty, calls to the Hotline will be answered by the staff of Crisis Intervention and Recovery Service (Crisis Intervention). Crisis Intervention staff will maintain current information about homeless outreach services, shelters, and other emergency services and share that information with callers experiencing an urgent housing crisis. For all persons attempting to contact the Hotline after hours, Crisis Intervention staff will collect names and contact information and share them with Hotline staff on the next day Hotline

staff is on duty. It will be the responsibility of the Hotline to follow up with these person for formal intake and assessment as soon as possible it receives their names and contact information from Crisis Intervention.

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III. The Coordinated Entry and Assessment Process

A.   SPre-screening for Presence of Domestic Violence and Human Trafficking. When peopleclients initially contact the Hotline for help, Hotline staff will ask whether they are fleeing or attempting to flee domestic violence, dating violence, sexual assault, or stalking and whether they are victims of human trafficking.

1. Cases of Positive Screening for Domestic Violence. In cases where persons contacting the Hotlinecallers report that they are (1) fleeing or attempting to flee violence or stalking and are in imminent danger or (2) are experiencing homelessness to which domestic violence or stalking has been a contributing factor, Hotline staff will ask the callersclients their preference and refer them either to Domestic Violence Project, Inc. (with shelters in Canton and Massillon) or the Alliance Area Domestic Violence Shelter, informing them that these organizations specialize in serving people with current safety concerns. If eligible personsclients are unwilling to contact a domestic violence project, the Hotline staff will proceed to conduct intake and assessment following the policies outlined below in Section III.CD.3.

2. Cases of Positive Screening for Human Trafficking. In cases where persons callers report that they are victims of human trafficking, Hotline staff will ask whether they clients wish to be referred to Domestic Violence Project, Inc. (with shelters in Canton and Massillon), informing them that this organization specializes in serving survivors of human trafficking. If eligible personsclients are unwilling to contact Domestic Violence Project, Inc., the Hotline staff will proceed to conduct intake and assessment following the policies outlined below in Section III.CD.3.

B.   SPre-Screening for Diversion and Referral to Other Resources.
Before conducting a formal intake, Hotline staff will collect, at a minimum, a client's name, date of birth, the last four digits of their social security number, and information gathered through a HCCSC-approved diversion questionnair
1. Diversion Due to Lack of Eligibility for HCCSC Services. Before conducting an intake on persons contacting the Hotline for help, Hotline staff will collect, at a minimum, their name, date of birth, and the last four digits of their social security number, along with information gathered through an HCCSC-approved diversion questionnaire

which is designed to determine whether the persons meet the threshhold criteria for receiving assistance from the HCCSC's homeless programs. Persons only meet those criteria if:

   a. They are homeless within the meaning of 24 CFR Section 578.3 or if they are at risk of homelessness and are potentially eligible for any of the prevention or diversion programs that operate under the auspices of the HCCSC and participate in HMIS; and

   b. They lack other resources or support networks to help them solve their immediate housing crisis.

2. Referral to Mainstream Programs and Resources. If an initial screening reveals that people seeking help from the HCCSC do not meet threshhold eligibility criteria for HCCSC programs and services, Hotline staff will provide them with information about mainstream programs and resources they can contact for help. To that end, the Hotline will maintain and annually update a list of mainstream programs and resources in Stark County that could be useful to people experiencing problems that involving housing instability. ~~e to determine~~ ~~whether the client has the resources and support networks necessary to maintain or obtain housing. If clients have such resources, Hotline staff will advise them that they do not qualify for homeless services and refer them to appropriate mainstream resources.~~ In all cases in which callers~~lients~~ are safely housed, the Hotline staff will urge them to stay where they are as long as possible and work independently with appropriate mainstream resources~~(with appropriate referrals from the Hotline)~~ to stabilize their housing~~o pursue other options available to them~~.

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C. Formal Intake and Standardized Assessment of People ~~Clients~~ Not Diverted

1. Formal Intake – In General. If a person~~client~~ lacks alternatives to entering the homeless system, the Hotline staff will conduct a formal intake, collecting all the HUD-required universal data elements, program-specific elements, and other data required by federal regulations or HCCSC policies, and entering that data directly into HMIS ~~the HCCSC's Homeless Management Information System (HMIS)~~.

2. Standardized Assessment – In General.

a. Assessment Tools. For all persons~~clients~~ admitted to the homeless system through formal intake, the Hotline staff will conduct an assessment using the appropriate Service Prioritization and Assistance Decision Tool (SPDAT): the SPDAT for individuals, the Family SPDAT for persons presenting as a family or single household, or the Youth SPDAT.

[JVN6]

~~E.~~b. Right to Refuse to Answer Assessment Questions. All person undergoing assessment for intake and service prioritization may refuse to answer any of the questions on the assessment without forfeiting their right to assistance from the HCCSC. However, in the event that failure to answer certain questions may jeopardize a person's eligibility for certain categories of housing or services available through the HCCSC, the individual administering the assessment should so advise any person who declines to answer those questions.

~~a.~~c. Training to Administer Assessments. Any person who administers a SPDAT test must have undergone training within the previous 12 months by an instructor who has followed the protocols established by OrgCode Consulting, Inc., SPDAT's developer, to become qualified to train others in the use SPDAT assessment tools. By the end of January of each year, the Collaborative Applicant will publish on the HCCSC website the year's schedule of trainings that will satisfy this requirement.

~~2.~~3. Special Intake Protocols for Victims of Domestic Violence or Human Trafficking~~Intake and Standardized Assessment for Clients Who Have First Contacted Domestic Violence Projects~~.

a. People~~Clients~~ Not Admitted to Domestic Violence Projects. In cases where domestic violence projects cannot se~~se~~rve people~~clients~~ that have contacted them for help, the projects will refer the people~~clients~~ to or, in the case of people~~clients~~ referred to the project by the Hotline, refer them back to the Hotline and work with the Hotline as necessary to facilitate their completion of the CEP~~formal intake and standardized assessment~~.

b. Participants in~~Clients Admitted to~~ Domestic Violence Projects. For people~~clients~~ referred by the Hotline and admitted to a domestic violence project who need additional homeless services, the domestic violence project will help them contact the Hotline and work with the Hotline as necessary to facilitate their completion of the CEP~~heir formal intake and standardized assessment~~ as soon as possible after the~~y become participants in the domestic violence project~~ir admission.

c. Special Rules to Ensure Safety and Confidentiality~~Special Intake Protocols for Domestic Violence Victims~~.

In all cases where CES intake is conducted ~~for~~ for persons~~individuals~~ reporting that they are victims of domestic violence or human trafficking, the following rules will apply:

i. The Hotline staff will collect no more information about those persons~~e clients~~ than they are comfortable sharing and will make the accommodations necessary to preserve the safety of those persons~~clients~~ and protect ~~safeguard from disclosure~~ their identity and location~~;~~ from disclosure;

ii. The Hotline staff will contact staff from domestic violence projects for advice in any instances in which they are unsure about the best course of action to take to keep victims of domestic violence or human trafficking ~~clients~~ safe; and

iii. The effective date and time of the intake will be the date and time that the victims of domestic violence or human trafficking~~clients~~ first contacted the Hotline even if, at the time of the initial contact, they decline to complete the CEP and opted instead to work exclusively with a domestic violence project.

~~3.~~4. Special Intake Protocols for Veterans:

a. Hotline Duties. As part of its initial screening of persons seeking assistance~~callers~~, the Hotline will determine whether those persons~~callers~~ are veterans. If they are veterans, the Hotline will:

i. Give them contact information for the Veterans Services Commission of Stark County and the Veterans Administration's Community Resources and Referral Center in Akron and advise them to contact those agencies to find out what housing and services are available to them as veterans; and

ii. After conducting a full intake and assessment, alert the HCCSC's Veterans' Coordinator about~~to~~ that intake[JVN7].

b. Duties of Veterans' Coordinator. The HCCSC's Veterans' Coordinator will maintain a by-name ~~master~~ list of all homeless veterans in Stark County and will coordinate

efforts with the Veterans Services Commission and the Veterans Administration to:

    i.   Determine the eligibility of those on the list for special benefits and resources that are available to help veterans secure stable, affordable housing;

    ii.   Provide them with necessary assistance in accessing those special benefits and resources; and

    ~~iii.~~   Maximize use of the special benefits and resources <u>available to veterans</u> and, <u>in the event</u>~~where~~ <u>such benefits and resources are</u>~~they are~~ not available, other resources to house the veterans as quickly as possible.

    ~~Access to Hotline Services for Non-English Speakers and Others. The Hotline will have appropriate services and/or technology in place to enable staff members to communicate with non-English speakers and people with communication impairment~~

    ➢<u>iii.</u>   ~~Hotline Hours. The Hotline is available to receive calls from 8:30 a.m. to 4:00 p.m., Monday through Friday. During hours when the Hotline is not open, individuals and families needing emergency housing assistance may call Crisis Intervention and Recovery Services. Hotline and Crisis staff will work together to ensure that the Hotline (1) promptly receives notice of any clients who have called Crisis with emergency housing needs and (2) has the information it needs to contact those clients and process them as soon as possible for intake.~~

~~III.~~<u>IV.</u>   Service Referral and Prioritization by the Hotline

    ~~1.~~<u>A.</u>   Referral to Shelters. If, based on information collected during intake, the Hotline staff determines that <u>someone is</u> ~~clients are~~ eligible for emergency shelter, they will discuss available options with the <u>person</u>~~clients~~; determine which, if any, available options the <u>person</u>~~clients~~ prefer<u>s</u> and notify the shelter of the referral. If no shelter beds are available, Hotline staff will place the <u>person</u>~~clients~~ on <u>a</u> ~~the central~~ prioritization list ~~described in Section IV below~~, following the rules outlined in HCCSC's *Policies Governing Eligibility and Prioritization to Receive CoC Assistance and Standards for Administering Assistance*.

    ~~A.~~<u>B.</u>   Prevention Services for Those at Risk of Homelessness. If, based on information collected during intake, the Hotline staff determines that <u>people</u> ~~clients~~ are at risk of losing their home<u>s</u> within the next 21 days and are otherwise eligible for available prevention services, the Hotline staff will place them on a prioritization list for prevention services.

Pilot: Shelter Diversion ~~Ss~~ervices for Those Requesting Shelter. If, based on information collected during intake, the Hotline staff determines that ~~clients~~ someone on the Hotline's prioritization list of those precariously housed ~~is~~are eligible for shelter diversion pilot [JVN8]project services, the staff will inform th~~at~~e person ~~clients~~ of the shelter diversion pilot project using a ~~uniform~~ description provided by the project and instruc~~t~~ the person ~~them~~ to send income verification to the project to indicate a~~their~~ commitment to enrol~~ling~~.

~~B.~~C.

D. **Prioritization for Housing.** If, based on informatio~~n~~ gathered ~~n collected~~ during intake, Hotline staff determines that ~~clie~~certain persons~~n~~ are ~~ts are~~ likely to be eligible for housing from one or more HCCSC projects~~services~~, the staff~~y~~ will put those persons on the appropriate housing prioritization list as described in Section IV below, following the rules outlined in HCCSC's *Policies Governing Eligibility and Prioritization to Receive CoC Assistance and Standards for Administering Assistance*. Before doing so, however, Hotline staff will:

1. Discuss with those persons the type of housing they are seeking~~will place the clients on the Central Prioritization List~~;

2. Determine whether they have realistic expectations about the housing that is likely to be available to them from HCCSC projects;

3. Counsel them if they have unrealistic expectations about the type of housing available to them or the time period in which they are likely to receive a housing placement;

4. Advise them to vigorously pursue other options if, based on their low SPDAT scores or other factors influencing their prioritization, they are not likely to receive a housing placement within a year[JVN9]; and

5. If they hope to qualify for permanent supportive housing (PSH), counsel them to:

   a. Download a verification of disability form (VOD) from the HCCSC's website or obtain a VOD from the Collaborative Applicant; and

   Request a suitable licensed professional to complete and sign the VOD and fax it to the Hotline in accordance with directions that appear on that form. ~~described in Section IV below, following the rules outlined in HCCSC's Policies~~

Governing Eligibility and Prioritization to Receive CoC Assistance and Standards for Administering Assistance. [JVN10]

    b.

V. ~~IVThe~~ Central Prioritization List~~s~~

A. Hotline's Role in Maintaining ~~a~~ Central Prioritization List~~s~~. The Hotline will maintain ~~a~~ central prioritization list~~s~~ of persons~~clients~~ awaiting emergency shelter or~~or~~ housing of various types and assign places on the appropriate ~~that waiting~~ list~~s~~ to person~~registered clients~~ registered for services in the order prescribed by HCCSC's *Policies Governing Eligibility and Prioritization to Receive CoC Assistance and Standards for Administering Assistance*.

B. Referrals to Emergency Shelters.

1. Referrals from the Hotline.   All shelters receiving Emergency Solutions Grant, Homeless Crisis Response Program, or Ohio Development Services Agency funds as well as all other cooperating shelters will update their inventory of available beds ~~beds~~ as changes occur. Based on these inventories, the Hotline will refer persons~~the clients~~ to available shelter beds when ~~in the order in which~~ they register with the Hotline or, in the event that no shelter beds immediately available, in the order in which they are ranked on the shelter~~central~~ prioritization list. Participating shelters will not accept referrals from any other source except during hours when the Hotline is closed.

2. Referrals from Other Sources When the Hotline is Closed. The following rules apply when shelters accept referrals from sources other than the Hotline when the Hotline is closed:

   a. Within 24 hours after the Hotline has reopened, a shelter must notify the Hotline of any person~~clients~~ accepted during the time the Hotline ~~it~~ was closed and facilitate central intake for th~~at~~ person~~ose clients~~.

   b. No shelter may guarantee ongoing shelter to any person~~client~~ accepted from other sources during hours when the Hotline is closed.

3. Documentation by Shelter of Refusal to Admit or Retain Referred Client. In the event that a shelter refuses to admit a person~~client~~ referred to it or expels a client after admission, it must note the reasons for its action in HMIS and alert the Hotline[JVN11].

C. Creation and Required Use of the Prioritization Lists by Housing Projects.

1. Creation of Prioritization Lists. For each category all categories of housing, the Hotline will create a list of clients people awaiting service that will be accessible online to housing projects. On that list, people clients will be prioritized for service as follows:

    a. People Clients who have been verified as chronically homeless will be placed at the top of the list in descending order based on their SPDAT scores so that clients with higher SPDAT scores receive a higher placement on the list; and

    b. All other people clients will be placed on the list in descending order based on their SPDAT scores and on other factors outlined in HCCSC's *Policies Governing Eligibility and Prioritization to Receive CoC Assistance and Standards for Administering Assistance*.

2. Exclusive Provider Use of Prioritization Lists by Projects to Select Participants. To the extent they can do so without violating applicable legal or funding restrictions, rapid re-housing, transitional housing, safe haven, and permanent supportive housing projects receiving Continuum of Care, Emergency Solutions Grant, or Ohio Development Services Agency funds as well as other cooperating projects must should offer placement available units only to persons clients on the appropriate central prioritization list and only in the order in which they are ranked on that list. (Certain exceptions to this general rule are explained below and in HCCSC's *Policies Governing Eligibility and Prioritization for CoC Assistance and Standards for Administering Assistance.*)

D. Duty of Projects to Update the Hotline and the Prioritization Lists.

1. Informing the Hotline of Vacancies. When vacancies occur, housing projects must report them immediately to Hotline HMIS staff by secure means and inform the Hotline when the vacated bed or unit will be available for a new program participant client.

2. Using the Prioritization Lists and Documenting Interactions with Prospective Participants Clients.

    a. Direct Access to the List for Providers. All housing projects providers will have direct access to the central prioritization lists and to relevant information

regarding persons~~clients~~ on th~~ose~~ lists~~at list~~ so they can identify th~~e persons~~ose ~~clients~~ with highest priorit~~y for their projects and~~y who appear to be eligible for their projects and be ready to contact those clients when a vacancy~~unit~~ becomes available.

b. <u>Documenting Activities with Clients</u>. Projects will document in a manner prescribed by HMIS[JVN12] their activities with any person on~~client in~~ the central prioritization list~~s database~~ so the history of that person's~~client's~~ interactions with participating projects is available to all other participating projects and to Hotline and HMIS staff. Activities to be documented include, but are not limited to, ongoing efforts by rapid re-housing projects to find housing for a person~~a client~~; efforts in progress to evaluate~~evaluating~~ a ~~client~~ person for a current project vacancy, as further described in Section VI.D. of this guide; and decisions to offer or deny~~offering or denying~~ a vacancy to a client.

c. <u>Presenting People with One Housing Option at a Time~~Case Conferencing to Determine Best Options for Clients~~</u>. In cases where one provider ("the first provider") has documented attempts to contact a person or interactions with a person ~~client~~in preparation for admitting that person ~~client~~to a project (signified by red font), other providers with an opening will move to the next available participant on the prioritization list. If the first provider does not admit the person to its project, it will document the reason why, date and initial the explanation, and change the previous red font to black. Other projects are then free to contact the person about their next vacancy. ~~and another provider believes that he has a better option available for that client, the providers will confer together with the client and with other appropriate advisers to help the client determine what his best option is.~~

E. <u>Consequences of Inability to Reach Person on the Prioritization List or Certify Their Eligibility for Housing ~~Certify the Eligibility of a Client on the Prioritization List~~</u>

1. <u>Bypassing Persons~~Clients~~ Awaiting Emergency Shelter Who Cannot be Reached</u>. If, after using all available contact information to reach ~~notify a client of a shelter vacancy, the Hotline is unable to contact~~ the highest ranking person~~client~~ on the shelter prioritization list, the Hotline is unable to notify that person of a shelter vacancy, it will immediately offer the ~~bed~~ vacancy to the next person~~client~~ on the list.

2. <u>Bypassing Persons~~Clients~~ Awaiting Housing Who Cannot be Reached or Certified as Eligible</u>. To ensure that projects have the necessary flexibility to fill vacancies

promptly, when a vacancy occurs, they may note on the appropriate ~~central~~ prioritization list that one or more [JVN13]of the highest priority persons~~clients~~ on that list are "pending placement" ~~when a vacancy occurs~~ and make simultaneous efforts to contact those persons ~~se clients~~ and complete their certification of project eligibility[JVN14]. If, within 5 business days after a vacancy occurs, a project has been unsuccessful in contacting or certifying the eligibility of a more highly ranked ~~client~~ person or persuading that person~~client~~ to accept a placement ~~the available unit~~ despite diligent efforts, it may offer the vacancy ~~unit~~to a lower-ranked person ~~to a lower ranked client~~ whose eligibility has been confirmed. "Diligent efforts" must be documented and must include, at a minimum, two attempts to use all available contact information and resources to notify any client that has been bypassed ~~in favor of a lower ranked client~~ and make reasonable accommodations to enable that client to complete the certification process.

3. Consequences When Persons Cannot be Reached for Placement or Verification of Continuing Need for Help~~Impact on Prioritization List Placement of Inability to Reach Clients~~

   a. Consequences of Inability to Reach Persons~~Clients~~ for Program Placement. If, after making the efforts described in paragraphs 1 or 2 of this section to contact the person~~client~~ who is next in line for placement, the Hotline or a provider is unable to make contact, the person~~client~~ will be classified as "inactive," and no further efforts will be made to notify that person when shelter beds or housing units become available. ~~and removed from all prioritization list~~s.[JVN15] In such cases, inactive status will be documented on the appropriate Google Doc pages [JVN16]as follows:

      ~~o~~i. Outreach staff will note "Make Inactive" on the PATH page (of WHAT) under the "Program" column and enter their own initials, the name of their agency and the date of the entry;

      ~~i.~~ii. RRH staff will note "Make Inactive" under the "Provider Reported Outcome" column of the RRH Referral page and enter their own initials, the name of their agency, and the date of the entry;

      ~~ii.~~iii. PSH staff will note "Make Inactive" under the "Result" column on the PSH Priority List page and enter their own initials, the name of their agency, and the date of the entry;

iii.iv. SHAPE staff will note "Make Inactive" under the "Result" column on the SHAPE page and enter their own initials agency, and the date of the entry;

~~o~~v. HP Preferred and Prevention staff will note "Make Inactive" under the "Result" column on the HP Referred and Prevention 2017 pages and enter their own initials, the name of their agency, and the date of the entry; and

iv.vi. Shelter staff will note "Make Inactive" on the shelter notes page and enter their own initials, the name of their agency, and the date of the entry.

b. Consequences of Inability to Reach Persons~~Clients t~~ to~~o~~ Verify Continuing ~~Ongoing~~ Need. ~~If clients have been on the central prioritization list for 6 months without being contacted for placement,~~ If, after being on a prioritization list for 6 months people have not been contacted for possible placement by a project, the~~the~~ Hotline staff will try ~~use all available resources~~ to contact them to~~the clients,~~ verify their~~their~~ homeless status~~,~~ and confirm their ongoing need for HCCSC assistance. If the Hotline is unsuccessful in contacting them a ~~If, a~~fter three documented attempts extending over the course of at least 2 weeks and using~~efforts to use~~ all available contact information, it w~~ill~~ be reclassified the persons as "inactive" and remove from all prioritization lists[JVN17]~~efforts to contact such clients over the course of at least a two-week period, contact cannot be made, the clients will be classified as inactive~~.

c. Re-activation of People Removed from the ~~on the~~ Prioritization List.

~~o~~i. If, within 6 months after being classified as inactive, people~~clients~~ contact the Hotline to confirm their ongoing ~~that they still~~ need for HCCSC assistance, the Hotline will return them~~hey will be returned~~ to the appropriate prioritization lis~~t~~s, assigning them a rank based on an~~t and assigned a place on that list based on an~~ updated SPDAT score and on the date and time of the intake that resulted in their original placement on the list.

i.ii. If people contact the Hotline more than 6 months after they have been removed from the prioritization due to the inability of the Hotline or providers to contact them, they will be treated as new applicants for assistance.

F. Consequences When Persons ~~of Client's~~ Refuse ~~usal of~~ Referral or Placement.

1. ——Removal from the Prioritization List. During coordinated entry, people~~clients~~ will have the opportunity to express their preference to be sheltered or housed in one or more areas of Stark County ~~be given the opportunity to restrict the geographic area where suitable shelter or housing is available in more than one location in the county~~. In offering people~~clients~~ shelter or housing~~,~~. ~~t~~The Hotline and participating projects will honor these preferences to the best of their ability. However, people~~clients~~ will be classified as "inactive" and removed from the prioritization list ~~lose their place on the prioritization list, be dropped to the bottom of that list, and be given a new intake date and time based on the date and time of their second refusal~~ in the following cases:

   ~~4.~~a. Cases in which people have~~clients~~ declined two project placements that meet their geographical preferences~~restrictions~~ and otherwise serve their needs as reflected by their standardized assessment; and

   b.   Cases where no suitable options are available or likely to become available within four months~~soon~~ [JVN18] i~~n the~~ area<u>s</u> preferred by the people being served ~~by clients~~, and th<u>ose people</u> ~~e clients~~ have declined two referrals to otherwise suitable shelter or housing in other locations.

   ~~5.~~2. Reactivation of People Removed from the Prioritization List. If, six[JVN19] months or more after being removed from the prioritization list pursuant to Section V.F.1, people wish to be reinstated on the list, they may register with the Hotline and undergo intake and assessment in accordance with the procedures set out for new applicants.

G. Consequences of Failure to Appear or Remain at Shelter.

1. People~~Clients~~ referred to a shelter by the Hotline must present themselves at the shelter by the morning after the day on which they were referred or by any other deadline established by the shelter. If a person~~client~~ misses this deadline, the shelter will notify the Hotline, and the bed assigned to that person~~client~~ will be released unless he or she (a) is hospitalized, incarcerated, or at work or (b) has provided shelter staff with some other good reasons for his or her absence.

2.   A person~~client~~'s failure to appear at a shelter by the deadline identified above will constitute a refusal of service.~~e.~~

   ——
   ~~3.~~2.

V~~I~~. Procedures for Admitting People ~~Applicants~~ to Housing Projects

A. Duty to Follow Applicable Approved Eligibility Criteria~~Eligibility Standards~~ and Other HCCSC Rules.

- In selecting people~~clients~~ from a central prioritization list and admitting them~~clients~~ to their projects, housing providers must follow the eligibility criteria ~~standards~~submitted to and approved by the HCCSC for those projects~~for the projects that the providers have submitted to the HCCSC for approval~~. In addition, to the extent allowed by their funding sources, they ~~funding sources, they~~ must adhere to the system-wide eligibility criteria ~~addition, to the extent allowed by their standards~~ outlined in the HCCSC's *Policies Governing Eligibility and Prioritization to Receive CoC Assistance and Standards for Administering Assistance* and HCCSC's policies mandating adherence to Housing First principles and equal access and fair housing~~and fair access~~ laws.

B.   Duty of Providers to Interview Prospective Project Participants~~Clients~~ and Collect and Upload Documents to Prove Their Eligibility.

- Before admitting people ~~any client~~ to a project, project staff must meet them ~~client~~ to conduct a personal interview ~~and review~~ and, as necessary, collect the documentation required to certify their eligibility for the project. Every project must follow the recordkeeping requirements specified in HCCSC Policy No. F-10[JVN20]. If, when verifying a person~~client~~'s eligibility for a project, project staff finds that the documentation necessary to confirm eligibility is not already uploaded in HMIS, project staff must upload the documentation to ensure its availability to all HMIS users.

~~A.~~C.   Corrections to the Standardized Assessment and HMIS Data.

1. Corrections to HMIS Data. If, while certifying a person's~~client's~~ eligibility for a project or at any other time, a housing, shelter, or service project learns that any information about the person~~he client~~ that was entered in HMIS is incorrect, it will enter the correct information directly in HMIS and notify HMIS staff in writing within one working day.

2. Reassessment and Reprioritization. If, while certifying a person ~~client~~'s eligibility for a project or at any other time, a housing, shelter, or service project learns that material information obtained during the person~~client~~'s original assessment was~~is~~ incorrect, the project will complete a new assessment[JVN21], upload it to HMIS, and notify HMIS staff in writing within one working day. In cases where the new information suggests that the person~~client~~ is ineligible for a particular type of project

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for which he is being considered or that his need for housing assistance is much less or greater than previously supposed, Hotline staff will reassess the person~~client~~'s eligibility for housing interventions as well as his/her placement on the waiting list.

D. Duty of Housing Projects to Report on Person Being ~~Clients~~ Considered for Vacancies.

- A housing provider must take the following steps when filling a vacancy:

~~4.~~1.   Signify that a person~~client~~ is being considered for a vacancy by placing a "pending placement" notation on the applicable~~central~~ prioritization list;

~~5.~~2.   Notify the Hotline in writing within two working days [JVN22]after a vacancy is filled if the provider has bypassed the most highly ranked eligible person~~client~~ on the central prioritization list in favor of a person~~client~~ with a lower ranking;~~-~~ and

~~6.~~3.   Within two days after a vacancy is filled, update information in the ~~central~~ prioritization list database to reflect its interactions with persons~~clients~~ considered for the vacancy, indicating, among other things, why those persons~~clients~~ were or were not offered the available unit. All entries should include the initials of the staff member entering the information, the name of his or her agency, and the date of the entries.

~~B.~~E.   Actions Triggering Automatic Quality Assurance Reviews. If a housing project bypasses a person~~client~~ whom the Hotline has identified as eligible for that project and offers an available unit to a person~~client~~ to whom the Hotline has assigned a lower rank on the central prioritization list, the project must~~it will be required to~~ provide an explanation for that action to the Quality Assurance Workgroup that oversees that project unless notations on the prioritization list indicate that the project tried, in the manner required by Section ~~I~~V.E. of this guide, but was unsuccessful, in contacting the more highly ranked person~~client~~. In such cases, Quality Assurance Groups must verify that the housing provider has acted consistently with its own and system-wide eligibility standards and has honored Housing First principles.[JVN23]

~~C.~~F.   Consequences of Violating Applicable Eligibility Standards or Housing First Principles. If, based on a~~the~~ review that has taken place in a Quality Assurance Workgroup, the workgroup~~co-chairs of that workgroup~~ conclude~~s~~ that a provider has violated applicable eligibility standards or Housing First principles, the following steps will be taken:

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1. The Collaborative Applicant~~C Planner~~ will ensure that a record of that violation is maintained and that this record, along with any records of similar violations, ~~is~~ is made available to the Evaluation and Review Committee when it reviews, scores, and ranks the provider's applications for CoC or ESG funding; and

2. The workgroup, together with the Hotline, ~~co-chairs~~ will cooperate ~~work together~~ to develop a corrective action plan that will make appropriate housing available as soon as possible to the person~~client~~ who has been bypassed in violation of applicability eligibility rules or Housing First principles.

VII.~~VI~~ Procedures for Transferring Project Participants from one PSH ~~from One Permanent Supportive Housing~~ Project to Another

A. <u>Circumstances Justifying Transfers</u>. A permanent supportive housing (PSH) project may request that a participant~~client~~ be transferred to another PSH ~~permanent supportive housing~~ project when the participant~~client~~ no longer meets the project's eligibility criteria or when that project can no longer satisfy the participant~~client~~'s needs. Appropriate reasons for requesting a transfer include the following:

~~2.~~1. Changes in the size or composition of a participant's~~client's~~ household;

~~3.~~2. The existence~~emergence~~ of verified disabilities that cannot be reasonably accommodated by the project currently serving the participant~~client~~;

~~4.~~3. Circumstances that justify the participant~~client~~'s or the housing project's reasonable belief that the participant~~client~~'s continued residence in the project poses an imminent danger to participant~~himself~~ or others; and

~~5.~~4. The participant~~client~~'s need for easier access to a particular place of employment or schooling or to essential services, including health care and child care.

B. <u>Procedures for Effecting Transfers</u>. The following procedures will be observed in effecting transfers requested under the circumstances described above, regardless of whether they are transfers between housing projects operated by the same agency or projects operated by different agencies:

1. Any PSH~~permanent supportive housing~~ project seeking to transfer a participant~~client~~ (the "transferring project") to another PSH~~permanent supportive housing~~ project must:

a.   ~~-S~~submit to the Hotline [JVN24]a written request which explains the~~includes the specific~~ reason for the transfers and outlines and outlines the steps that the transferring project has taken to address the participant's needs; and~~request to the client's~~ HMIS[JVN25]

~~;~~

~~3.~~b.   ~~C~~complete a new assessment for the participant ~~SPDAT or FSPDAT in HMIS~~ and upload it in HMIS. ~~, and notify the Homeless Hotline promptly;~~

~~1.~~2.   The Hotline will review the request with the transferring project, determine whether there are available housing options that would better serve the participant~~client~~'s needs, discuss~~review~~ these options with the transferring project, and notify potential new projects of the transfer request.~~;~~

~~2.~~3.   After the transferring project has determined that there are appropriate available units and discussed those options with the participant~~client~~, the Hotline will work with the transferring project to negotiate the participant~~client~~'s transfer to a new unit acceptable to the participant~~client~~ and ensure that relevant information about the transfer is documented in HMIS.

C.   Transfers in Cases of Domestic Violence. The HCCSC has adopted a separate policy governing transfers in cases involving domestic violence. (See Policy D.8/F.8.) That policy conforms to the requirements of HUD's proposed rule to fully implement the Violence Against Women Act. (See 80 Fed. Reg. No. 66, April 6, 2015.)

D.   Transfers to Accommodate Disabilities. Transfers to accommodate disabilities should be expedited to the greatest extent possible in all cases where a disability and the need for a different housing to accommodate that disability has been documented.

E.   Effect of New SPDAT Score on Eligibility for Housing. Under no circumstances will a SPDAT score resulting from the re-administration of the SPDAT pursuant to the procedures for transferring a client from one PSH unit to another constitute cause for treating the client as no longer eligible for PSH.

VIII.   Procedures for Appealing Coordinated Entry Actions or Decisions

A.   The Right to Appeal. Persons who have been adversely affected by a decision or action that violates the policies or procedures outlined in this Guide or in any policies or procedures incorporated by reference into this Guide, including *HCCSC Policies Governing*

Eligibility and Prioritization to Receive CoC Assistance and Standards for Administering Assistance and HCCSC's *Fair Housing and Equal Access Standards,* may appeal the decision or action to the HCCSC's Collaborative Applicant.

B.   How to File an Appeal. Persons may exercise the right to appeal those actions or decisions described in Section VIII**.** A., above, by completing a HCCSC Appeal Form and following the instructions on that form to submit it to the Collaborative Applicant. The form may be found on the HCCSC's website under   .

C.   Procedures for Deciding Appeals.

   1.   Steps to be Taken by the Collaborative Applicant.

      a.   Within 5 working days after receiving a completed HCCSC Appeal Form, the Collaborative Applicant will contact the appellant to gather any additional information needed to help clarify the grounds for the appeal.

      b.   Within 7 working days after receiving a completed HCCSC Appeal Form, the Collaborative Applicant will contact the agency or agencies responsible for the decision or action being appealed and gather any information needed to clarify the reasons underlying the decision or action.

      c.   Within 10 working days after receiving a completed HCCSC Appeal Form, the Collaborative Applicant will prepare a written decision on the appeal and deliver it to the appellant by mail, e-mail, or in person. That decision will explain the decision reached, and, in the event that the decision is favorable to the appellant, explain the corrective action that will be taken to rectify any wrongdoing.

   2.   Postponement of Action by the Collaborative Applicant for Reconsideration by the Appellee Agency. In the event that an agency accused of wrongdoing has in place a process that people may use to resolve their complaints against the agency, appellants will be required to pursue that recourse first before the Collaborative Applicant will act on their appeals. However, in no event will the Collaborative Applicant postpone commencing its own review of an appeal longer than 15 working days following its receipt of a completed Appeal Form.