



# **Homeless Management Information System (HMIS-Erie)**

## **Policies and Procedures Manual**

September, 2017

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# HOMELESSNESS MANAGEMENT INFORMATION SYSTEM

## POLICIES AND PROCEDURES MANUAL

*This manual is developed by HMIS-Erie Management and authorized by the Erie County Department of Human Services Housing Team*

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### HMIS-ERIE GOVERNANCE CHARTER

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#### INTRODUCTION

Erie County Department of Human Services (ECDHS) is the lead agency and Collaborative Applicant for the Erie County Continuum of Care (PA-605) as well as the designated lead agency for the PA-605 Homeless Management Information System (HMIS-Erie). The coverage area includes all of Erie County, PA. ECDHS has primary responsibility for all HMIS-ERIE activities.

HMIS-Erie Governance Charter serves to delineate the roles and responsibilities related to key aspects of the governance and operations of HMIS-Erie and includes the most recent **HMIS-ERIE Policies and Procedures Manual (Policy)** approved and adopted by the ECDHS, which is incorporated into this charter by reference. The Policy includes privacy, security, client consent and data entry requirements and may be modified from time to time at the ECDHS' discretion.

Beginning with the 2003 Continuum of Care (CoC) grants and continuing with the Emergency Solutions Grants (ESG), the United States Department of Housing and Urban Development (HUD) requires all grantees and sub-grantees to participate in their local Homeless Management Information System. This policy is consistent with the Congressional Direction for communities to provide data to HUD on the extent and nature of homelessness and the effectiveness of its service delivery system in preventing and ending homelessness.

HMIS-Erie and its operating policies and procedures are structured to comply with the most recently released **HUD Data and Technical Standards for HMIS**. Recognizing that the Health Insurance Portability and Accountability Act (HIPAA) and other Federal, State and local laws may further regulate agencies, the Continuum may negotiate its procedures and/or execute appropriate business agreements with Partner Agencies so they follow applicable laws.

The ECDHS uses all submitted data for analytic and administrative purposes, including the preparation of ECDHS reports to funders and the Continuum's participation in the Federal Annual Homeless Assessment Report (AHAR). Aggregate data taken from HMIS-Erie is used to inform Strategic Planning activities and the Consolidated Plans of Erie City and County and other entitlement communities.

## KEY SUPPORT ROLES & RESPONSIBILITIES

### Erie County Department of Human Services Housing Team

As lead agency for the Erie City and County Continuum of Care (CoC):

- Manages HMIS-Erie System Administrators, oversees HMIS-Erie project and has primary responsibility for all HMIS-ERIE activities
- Approves and facilitates enforcement of HMIS-ERIE policies as set forth in HMIS-Erie Policies and Procedures Manual
- Designates software to be used for HMIS-Erie in the geographic region
- Selects, approves and executes annual contract(s) with HMIS-ERIE vendor(s)

### HMIS-ERIE Management Team

- Guides the implementation/maintenance of the Homeless Management Information System
- Ensures HMIS-ERIE compliance with all HUD rules and regulations
- Encourages and facilitates participation
- Develops, informs, and reviews HMIS-ERIE policies and procedures
- Advises and recommends to the ECDHS Housing Team changes to HMIS-ERIE policies and procedures
- Cultivates ways in which future data measurement can contribute to fulfillment of strategic goals
- Provides training and support to partner agency users
- Facilitates continuing quality improvement via data analyses and knowledge of best practices
- Ensures compliance with HMIS-ERIE policies and HUD requirements
- Monitors data quality in accordance with Data Quality Plan benchmarks as set forth in HMIS-Erie Policies and Procedures Manual
- Acts as liaison between the ECDHS and regional or national HMIS-ERIE related organizations and participates in related activities
- Supervises contract(s) with vendor(s)

### HMIS-ERIE Partner Agencies

- Execute an HMIS-ERIE Agency Partner Agreement and, if applicable, a Network Data Sharing Agreement
- Agree to abide by the most current HMIS-ERIE Policy and Procedures Manual (Policy) approved and adopted by the ECDHS

- Ensure that all employees and agents comply with the Policy
- Ensure staffing and equipment necessary to implement and ensure HMIS-ERIE participation

#### **HMIS-ERIE Agency Administrators**

- Are the main communicators and the liaison between HMIS-Erie Management Team and their respective agency's users
- Ensure compliance with HMIS-ERIE policies within their agency
- Provide support for HMIS-ERIE use within their agencies
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## **HMIS-ERIE AGENCY IMPLEMENTATION POLICIES AND PROCEDURES**

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### **HMIS-ERIE PARTICIPATION POLICY**

#### **Mandated Participation**

All projects that are authorized under HUD's McKinney-Vento Act as amended by the HEARTH Act to provide homeless services and projects receiving HUD funding must meet the minimum HMIS-ERIE participation standards as defined by this Policies and Procedures manual. These participating agencies will be required to comply with all applicable operating procedures and must agree to execute and comply with an HMIS-ERIE Agency Partner Agreement.

#### **Voluntary Participation**

Although funded agencies are required to meet only minimum participation standards, the ECDHS strongly encourages funded agencies to fully participate with all their homeless programs. While the ECDHS cannot require non-funded providers to participate in HMIS-Erie, the ECDHS works closely with non-funded agencies to articulate the benefits of HMIS-Erie and to strongly encourage their participation in to achieve a comprehensive and accurate understanding of homelessness in Erie City and County.

#### **Minimum Participation Standards**

- Each participating agency shall execute an HMIS-ERIE Agency Partner Agreement.
- Agency staff shall collect the Universal and Program-Specific data elements as defined by HUD and other Federal Partners. Other data elements as determined by the Erie Home Team for all clients served by programs participating in HMIS-ERIE; data may be shared with other agencies subject to appropriate client consent and data sharing agreements.
- Agency staff shall enter client-level data into HMIS-Erie within two business days for emergency housing and five working days of client interaction.
- Participating agencies shall comply with all HUD regulations for HMIS-ERIE participation.

- Each agency shall designate at least one HMIS-ERIE Primary Point Person. This person may or may not also be the Agency Administrator (see below). HMIS-Erie Primary Point Person functions as the main liaison with HMIS-Erie Management Team and is responsible for organizing its agency's users, making sure proper training has taken place for the users and that all paperwork and confidentiality requirements are being followed by all users from that agency.
- Each agency having five or more users must designate at least one user to function as an Agency Administrator. Agencies with fewer than five users have the option of designating an Agency Administrator. The Agency Administrator is expected to provide on-site support to the agency's end-users, run agency reports, monitor the agency's data quality, and work with HMIS-Erie Management Team to troubleshoot HMIS-ERIE issues.

### **HMIS-ERIE PARTNERSHIP TERMINATION - DATA TRANSFER POLICIES**

In the event that the relationship between the ECDHS HMIS-ERIE and a Partner Agency is terminated, the Partner Agency will no longer have access to HMIS-Erie. HMIS-Erie Management Team shall make reasonable accommodations to assist a Partner Agency to export its data in a format that is usable in its alternative database. Any costs associated with exporting the data will be the sole responsibility of the Partner Agency.



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## HMIS-ERIE SECURITY PLAN

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### The Continuum has defined a security plan that:

- Ensures the confidentiality, integrity, and availability of all HMIS-ERIE information
- Protects against any reasonably anticipated threats or hazards to security
- Ensures compliance by end-users

## HARDWARE, CONNECTIVITY AND COMPUTER SECURITY REQUIREMENTS

### Workstation Specification

Computers should meet the **minimum** desktop specification:

- Operating System: Any system capable of running a current Internet browser as specified below
- Processor: 2 GHz Pentium processor or higher; dual core recommended
- Memory: 4gb recommended (2gb minimum)
- Hard Drive: 40 MB available space
- Web Browsers: The most current version of MS Internet Explorer, Chrome or Mozilla Firefox

### Internet Connectivity

Partner Agencies must have Internet connectivity for each workstation accessing HMIS-Erie. To optimize performance, all agencies are encouraged to secure a high-speed Internet connection with a cable modem, DSL or T1 line. Agencies expecting a very low volume of data may be able to connect using a dial-up connection; however, HMIS-ERIE management cannot guarantee satisfactory performance with this option.

Any network that has a Wi-Fi component must employ at least WPA2 level security.

### Security Hardware/Software

All workstations accessing HMIS-Erie need to be protected by a securely configured firewall. If the workstations are part of an agency computer network, the firewall may be installed at a point between the network and the Internet or other systems rather than at each workstation. Each workstation also needs to have anti-virus and anti-spyware programs in use and properly maintained with automatic installation of all critical software updates. Good examples of anti-virus software include McAfee and Symantec (Norton) Security systems, among others.

## HMIS-ERIE USER IMPLEMENTATION

### Eligible Users

Each Partner Agency shall authorize use of HMIS-Erie only to users who need access to the system for data entry, editing of client records, viewing of client records, report writing, administration or other essential activity associated with carrying out participating agency responsibilities.

HMIS-Erie Management Team shall authorize use of HMIS-Erie only to users who need access to the system for technical administration of the system, report writing, data analysis and report generation, back-up administration or other essential activity associated with carrying out central server responsibilities.

### User Requirements

Prior to being granted a username and password, users must sign an HMIS-ERIE confidentiality agreement that acknowledges receipt of a copy of the agency's privacy notice and that pledges to comply with the privacy notice.

Users must be aware of the sensitivity of client-level data and must take appropriate measures to prevent its unauthorized disclosure. Users are responsible for protecting institutional information to which they have access and for reporting security violations. Users must comply with all policies and standards described within this Policies and Procedures manual. They are accountable for their actions and for any actions undertaken with their username and password and should therefore, **never** share their unique user name and password with anyone.

Agency Administrators must ensure that users have received adequate training prior to being given access to the database.

### Setting Up a New User

If the Partner Agency wants to authorize system use for a new user, the agency's Executive Director or authorized designee must:

- Determine the access level of the proposed HMIS-ERIE user
- Execute an HMIS-ERIE user confidentiality agreement
- Review HMIS-ERIE records about previous users to ensure that the individual does not have previous violations with HMIS-Erie Policies and Procedures that prohibit their access to HMIS-Erie
- Verify that an HMIS-ERIE user confidentiality agreement has been correctly executed

- Verify that appropriate and sufficient training has been successfully completed
- Create the new user ID and password in ServicePoint™, or submit request for creation to HMIS-Erie Management Team

If any user leaves the agency or no longer needs access to HMIS-Erie, the Partner Agency is responsible for immediately terminating user access by deleting or inactivating the user account, or by notifying HMIS-Erie Management Team.

Volunteers have the same user requirements that paid staff have. They must have an individual user account, go through the same training, and have the same confidentiality and privacy documents signed and on file with the agency they are serving.

The Executive Director or authorized designee is responsible for ensuring that the user understands and complies with all applicable HMIS-ERIE Policies and Procedures.

### **Enforcement Mechanisms**

HMIS-Erie Management Team will investigate all potential violations of any security protocols. Any user found to be in violation of security protocols will be sanctioned.

#### **Sanctions include, but are not limited to:**

- A formal letter of reprimand
- Suspension of system privileges
- Revocation of system privileges

A Partner Agency's access may also be suspended or revoked if serious or repeated violation(s) of HMIS-ERIE Policies and Procedures occur by agency users.

## **HMIS-ERIE AGENCY IMPLEMENTATION**

### **Adding Partner Agencies**

Prior to setting up a new Partner Agency within HMIS-Erie database, HMIS-Erie Management Team shall:

- Review HMIS-ERIE records to ensure that the agency does not have previous violations
- Verify that the required documentation has been correctly executed and submitted or viewed on site, including:
  - Partner Agreement
  - Additional Documentation on Agency and Project(s)
  - Designation of HMIS-ERIE Agency Administrator
  - Fee Payment, if applicable
- Request and receive approval from HMIS-Erie Management Team to set up a new agency in HMIS-Erie

- Work with the Partner Agency to input applicable agency and program information
- Work with HMIS-Erie Management Team to migrate legacy data, if applicable

### **Agency Information Security Protocol Requirements**

At a minimum, Partner Agencies must develop security rules, protocols or procedures based on the final *HUD Data and Technical Standards* including but not limited to the following:

- Internal agency procedures for complying with HMIS-Erie Notice of Privacy Practices and provisions of other HMIS-ERIE client and agency agreements
- Maintaining and posting an updated copy of the agency's Notice of Privacy Practices on the agency's website
- Posting a sign in the areas of client intake that explains generally the reasons for collecting personal information
- Appropriate assignment of user accounts
- Preventing user account sharing
- Protection of unattended workstations
- Protection of physical access to workstations where employees are accessing HMIS-ERIE
- Safe storage and protected access to hardcopy and digitally generated client records and reports with identifiable client information
- Proper cleansing of equipment prior to transfer or disposal
- Procedures for regularly auditing compliance with the agency's information security protocol
- HMIS-Erie Management Team conducts annual site visits to monitor compliance with HMIS-ERIE policies, at which time agencies may need to demonstrate their procedures for securing client data.

### **User Access Levels**

All HMIS-ERIE users must be assigned a designated user access level that controls the level and type of access the user will have within the system. Users will have access to client-level data that is collected only by their own agency unless a client specifically consents in writing to share their information.

## **DATA ACCESS CONTROL POLICIES**

### **User Accounts**

Partner Agencies may be permitted to manage user accounts following the procedures documented in HMIS-Erie *User Implementation* section of this manual for user account set-up including verification of eligibility, the appropriate training, and the establishment

of appropriate user type. The assigned user type will determine each user's individual access level to data, and Partner Agencies must regularly review user access privileges.

Partner Agencies are responsible for inactivating and/or removing users from the system by contacting HMIS-Erie Management Team. They should discontinue the rights of a user immediately upon that user's termination from any position with access. When a user will be on leave for an extended period (longer than 30 days), his/her account should be temporarily suspended within 5 business days from the start of the leave.

## **User Passwords**

Each user will be assigned a unique identification code (User ID), preferably the first initial and last name of the user.

A temporary password will be assigned when a new user is created. The user will be required to establish a new password upon initial log-in. This password will need to be changed every 45 days. A password cannot be used again until another password has expired. Passwords must be between 8 and 16 characters long, contain at least two numbers or symbols, and should not be easily guessed or found in a dictionary. The password format is alphanumeric and is case-sensitive.

Users are prohibited from sharing passwords—even with supervisors. Sanctions will be imposed on the user and/or agency if user account sharing occurs. Any passwords written down should be securely stored and inaccessible to others. They should not be saved on a personal computer.

## **Password Reset**

Except when prompted by ServicePoint™ to change an expired password, users cannot reset their own password. HMIS-Erie Management Team and in some cases, the Agency Administrator, have the ability to temporarily reset a password. If an Agency Administrator needs to have his/her password set, a member of HMIS-Erie Management Team will need to reset that password.

## **Temporary Suspension of User Access to HMIS-ERIE**

### *System Inactivity*

Users must log off from HMIS-Erie application and either lock or log off their respective workstation if they leave the workstation. Also, password protected screen-savers or automatic network log-off should be implemented on each workstation. If the user is logged into HMIS-ERIE and the period of inactivity in HMIS-ERIE exceeds 30 minutes, the user will be logged off HMIS-Erie system automatically.

### *Unsuccessful Login*

If a user attempts to log in 3 times unsuccessfully, the User ID will be "locked out" and their access permission will be revoked; the user will be unable to regain access until the User ID is reactivated by the Agency Administrator or a member of HMIS-Erie Management Team.

## Electronic Data Control

### *Agency Policies Restricting Access to Data*

Partner agencies must establish protocols limiting internal access to data based on the final *HUD Data and Technical Standards*.

### *Downloaded Data*

Users have the ability to download and save client-level data. Once this information has been downloaded from HMIS-Erie server, the security of this data then becomes the responsibility of the user and the agency.

### *Ability to Export Agency-specific Data from HMIS-Erie*

Partner Agencies will have the ability to export a copy of their own data for internal analysis and use. Agencies are responsible for the security of this information.

## Hardcopy Data Control

Printed versions (hardcopy) of confidential data should not be copied or left unattended and open to compromise. Media containing HMIS-ERIE client-identified data will not be shared with any agency, other than the owner of the data, for any reason. Authorized employees using methods deemed appropriate may transport HMIS-ERIE data between the participating agencies that meet the above standard. Reasonable care should be taken, and media should be secured when left unattended. Magnetic media containing HMIS-ERIE data which is released and/or disposed of by the participating agency and the central server should first be processed to destroy any data residing on that media. Degaussing and overwriting are acceptable methods of destroying data. HMIS-ERIE information in hardcopy format should be disposed of properly. This could include shredding finely enough to ensure that the information is unrecoverable.

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## HMIS-ERIE PRIVACY PLAN

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**The Continuum has defined a privacy plan that includes:**

- Data collection limitation
- Purpose and use limitations
- Allowable uses and disclosures
- Access and correction standards
- Protection for victims of domestic violence, dating violence, sexual assault, and stalking

### DATA COLLECTION LIMITATION POLICY

Partner Agencies will solicit or enter information about clients into HMIS-Erie database only in order to provide services or conduct evaluation or research. Partner Agency management, in consultation with the ECDHS, will decide what qualifies as essential for services or research.

### CLIENT NOTIFICATION POLICIES AND PROCEDURES

The ECDHS has prepared standard documents for HMIS-ERIE Notice of Privacy Practices and Client Consent to Release Information which are available on the ECDHS web site. Partner Agencies may either use these forms or incorporate the content of HMIS-Erie documents into the agency's own documentation. All written consent forms must be stored in a client's case management file for record keeping and auditing purposes.

Agencies must make reasonable accommodations for persons with disabilities throughout the data collection process. This may include, but is not limited to, providing qualified sign language interpreters, readers, or materials in accessible formats such as Braille, audio, or large type, as needed by the individual with a disability.

Agencies that are recipients of federal assistance shall provide required information in languages other than English that are common in the community if speakers of these languages are found in significant numbers and come into frequent contact with the program.

HMIS-Erie Management Team conducts annual site visits to monitor compliance with HMIS-ERIE policies, at which time agencies may need to provide examples of the above-mentioned privacy documents and their procedures for protecting the privacy of client data.

## Definitions and Descriptions of Client Notification and Consent Procedures

### *Client Notice*

A written notice of the assumed functions of HMIS-Erie must be posted and/or given to each client so that he/she is aware of the potential use of his/her information and where it is stored. No consent is required for the functions articulated in the notice. However, as part of the notification process, clients must be informed of their right to designate their client records as hidden/closed and to view a copy of his/her record upon request. To fulfill this requirement, the agency may either adopt HMIS-Erie Notice of Privacy Practices or may develop an equivalent Privacy Notice that incorporates all the content of the standard HMIS-ERIE Notice. If the agency has a website, the adopted Notice of Privacy Practices or equivalent privacy notice must also be posted on the website.

### *Hidden/Closed Client Record*

After learning about HMIS-Erie, if a client does not wish to have his/her Primary Identifiers accessible to all HMIS-ERIE users, the originating HMIS-ERIE user or HMIS-Erie Management Team should close the client record by locking the security setting on the client screen. Closing a client record will allow the agency to access the client's information for agency purposes. This action will allow HMIS-Erie Management Team to view client-identifying information but will prevent any personal client-identifying information from being accessed by HMIS-ERIE users outside of the originating agency. Contact HMIS-Erie Management Team for assistance, if needed.

## Written Client Consent for HMIS-ERIE Data Sharing

At the initial intake, the client should be provided an oral explanation and written documentation about the option of sharing his/her Information within the CoC's HMIS-ERIE.

If a client is willing to share his/her information within HMIS-Erie, he/she must provide written consent pertaining to what he/she is willing to share and with whom (see exception below for the CoC's Coordinated Entry Process).

The client maintains a right to revoke written authorization at any time (except if that policy is overridden by agency policy or if the information is required to be shared as a condition of a provider agreement). Note that any such revocation will not be retroactive to any information that has already been released.



### *Client Authorization*

HMIS-ERIE users may share client information only if the client authorizes that sharing with a valid Client Release of Information form, or in the case of the CoC's Coordinated Entry Process, explicit oral consent.

Authorized users will be able to grant permission based on appropriate client consent to share individual client information with another agency's users. Random file checks for appropriate client authorization, audit trails, and other monitoring tools may be used to ensure that this data sharing procedure is followed. Specific monitoring procedures around program enrollment will be implemented to ensure appropriate client information access.

### *Applicability of Consents*

The Partner Agency shall uphold federal and state confidentiality regulations to protect client records and privacy. If an agency is covered by the Health Insurance Portability and Accountability Act (HIPAA), the HIPAA regulations prevail.

## **HMIS-ERIE DATA USE AND DISCLOSURE POLICIES AND PROCEDURES**

Each of HMIS-Erie Partner Agencies must comply with the following uses and disclosures, as outlined in the *HUD Data and Technical Standards: Notice for Uses and Disclosures for Protected Personal Information (PPI)*. A Partner Agency has the right to establish additional uses and disclosures if they do not conflict with the CoC-approved uses and disclosures.

### **Privacy Notice Requirement**

Each Partner Agency must publish a privacy notice that incorporates the content of the *HUD Data and Technical Standards Notice* as described below. Agencies that develop their own privacy and security policies must allow for the de-duplication of homeless clients at the Continuum level.

Each agency must post the privacy notice and provide a copy of the privacy notice to any client upon request. If an agency maintains a public web page, the agency must post the current version of its privacy notice on its web page.

#### *An agency's privacy notice must:*

- Specify all potential uses and disclosures of a client's personal information
- Specify the purpose for collecting the information
- Specify the time period for which a client's personal information will be retained at the agency
- Offer reasonable accommodations for persons with disabilities and/or language barriers throughout the data collection process
- Allow the individual the right to inspect and to have a copy of his/her client record and offer to explain any information that the individual may not understand

- Specify a procedure for accepting and considering questions or complaints about the privacy and security policies and practices

### **CoC-approved Uses and Disclosures**

Identifiable HMIS-ERIE client data may be used or disclosed for case management, billing, administrative and analytical purposes.

- Case management purposes include uses associated with providing or coordinating services for a client. As part of case management, the agency will share client information with other agencies based only on written client consent, or in the case of the CoC's Coordinated Entry Process, explicit oral consent (see p. 19)
- Billing example is invoicing funding sources for reimbursement of services
- Administrative purposes are uses required to carry out administrative functions, including but not limited to legal, audit, personnel, oversight and management functions. An example would be analyzing client outcomes to evaluate program effectiveness
- Analytical purposes are functions that are related to analyzing client data to understand homelessness, including but not limited to creating de-identified protected personal information, understanding trends in homelessness and the needs of persons who are homeless, and assessing the implementation of the CoC's Strategic Plan

Unless a client requests that his/her record remains hidden, his/her primary identifiers will be disclosed to other HMIS-ERIE agencies. This will allow agencies to locate the client within HMIS-Erie system when the client comes to them for services. This will allow the CoC to determine how many people are homeless in Erie County during any specified timeframe.

Identifiable client information may also be used, or disclosed, in accordance with the *HUD Data and Technical Standards* for:

- Uses and disclosures required by law
- Aversion of a serious threat to health or safety
- Uses and disclosures about victims of abuse, neglect or domestic violence
- Uses and disclosures for academic research purposes
- Disclosures for law enforcement purposes in response to a lawful court order, court-ordered warrant, subpoena or summons issued by a judicial office or a grand jury subpoena

Aside from the disclosures specified above, a client's protected personal information will be disclosed only with his/her written consent.

## HMIS-ERIE DATA RELEASE POLICIES AND PROCEDURES

### Client-identifying Data

No identifiable client data will be released to any person, agency, or organization for any purpose other than those specified in HMIS-Erie *Data Use and Disclosure Policies and Procedures* section of this manual without the written permission of the client.

### Data Release Criteria

HMIS-ERIE client data will be released only in aggregate, or in anonymous client-level data formats, for any purpose beyond those specified in HMIS-Erie *Data Use and Disclosure Policies and Procedures* section of this manual, such that the identity of any individual or household cannot be determined.

### Data Release Process

Beyond individual agency reports, or ECDHS reports on its funded programs, the ECDHS Housing Team Director must approve all data for public classification and release.

### Specific Coordinated Entry Process Exception to Written Consent Requirement

The CoC's Coordinated Entry Process will not be required to obtain written consent to share primary and general client information collected primarily through telephonic or other electronic means. However, all clients must be informed of their rights regarding HMIS-ERIE participation. Clients will be read the Coordinated Entry's consent and notifications script. Clients can view the Privacy Notice on the ECDHS website or pick up a copy at the ECDHS office. Callers who do not want their information shared in HMIS-ERIE will have their records closed and/or may be limited in their ability to obtain an agency referral.

### Specific Client Notification Procedures for Victims of Domestic Violence, Dating Violence, Sexual Assault, and Stalking

A mainstream agency that is serving a victim of domestic violence, dating violence, sexual assault, or stalking must explain the potential safety risks for victims and the client's specific options to protect her/his data, such as designating her/his record as hidden/closed to other agencies.

### Specific Client Notification Procedures for Unaccompanied Minor Youth

Based on their age and potential inability to understand the implications of sharing information, HMIS-Erie cannot be used to share information about unaccompanied minor youth outside of the originating agency. Thus, even with written client authorization, users cannot share any client information of unaccompanied minor youth. For the purposes of this policy, minor youth are defined as youth under 18.

### Privacy Compliance and Grievance Policy

Partner Agencies must establish a regular process of training users on this policy, regularly auditing that the policy is being followed by agency staff (including employees,

volunteers, affiliates, contractors and associates), and receiving and reviewing complaints about potential violations of the policy. Agencies may want to appoint a Chief Privacy Officer to be responsible for these tasks.

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## HMIS-ERIE DATA QUALITY PLAN

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### HMIS-ERIE DATA COLLECTION

#### The Continuum has defined a data quality plan that:

- Based on HUD data standards and CoC data requirements, specifies the importance of data quality and standards to be used by all participating agencies
- Provides a mechanism for monitoring adherence to the standards
- Provides the necessary tools and training to ensure compliance with the standard
- Includes strategies for working with agencies that are not in compliance with the standard

#### Data Quality Standard

- All data entered will be accurate
- Per HUD data standards, blank entries in required data fields will not exceed 5% per month
- All services provided will be compatible with providing program
- Data entry, including program Entry and Exit transactions, must be complete within 2 working days for emergency shelters and 5 working days for other projects

#### Data Quality Monitoring

HMIS-Erie Management Team will perform regular data integrity checks on HMIS-Erie data. Any patterns of error at a Partner Agency will be reported to the Agency Administrator and/or Executive Director. When patterns of error have been discovered, users will be required to correct data entry techniques and will be monitored for compliance.

#### *Partner Agencies are expected to:*

- Run and submit data completeness reports, data incongruities reports, and other data quality reports as required by HMIS-ERIE Lead staff
- Review monthly APRs to confirm accurate program entry and exit data
- Notify HMIS-ERIE Lead staff of findings and timelines for correction
- Rerun reports for agencies/programs to confirm data correction

## Data Collection Requirements

### *Required Data Elements*

A Partner Agency is responsible for ensuring that a minimum set of data elements, referred to as the Universal Data Elements (UDE's) and Program-specific Data Elements as defined by the *HUD Data and Technical Standards*, and other data elements as determined by HMIS-Erie Committee, will be collected and/or verified from all clients at their initial program enrollment or as soon as possible thereafter. Partner Agencies are required to enter data into HMIS-Erie within 2 working days for emergency shelters and 5 business days for other projects.

These required data elements are all included collectively on the *Client Profile*, *Client Demographics* section, *Entry*, and *Interim and Review* assessments and includes timely entry of program Entry and Exit transaction data.

Partner Agencies must report client-level UDE's and Program-specific Data Elements using the required response categories detailed in the *HUD Data and Technical Standards*. These standards are already incorporated into HMIS-Erie.

### *Entry/Exit Data*

Program entry and exit dates should be recorded upon any program entry or exit on all participants. Entry dates should be recorded in compliance with project funding. Typically, they are the first day of service or program entry with a new program entry date for each period/episode of service. Exit dates should record the last day of residence in a program's housing before the participant leaves the shelter or the last day a service was provided.

## Data Quality Training Requirements

### *End-User Training*

Each end user of HMIS-Erie system must complete ECDHS approved HMIS-ERIE training before being given HMIS-ERIE log-in credentials. It is recommended they also receive training from their Agency Administrator in order to understand agency-specific nuances in how they enter data. HMIS-ERIE Primary Point Persons and Agency Administrators should notify the ECDHS when they have specific training needs for their end-users.

### *Reports Training*

Reports training for Agency Administrators and other interested users will be made available as needed. These will include training on how to use Provider Reports in ServicePoint™, reports in the Advanced Reporting Tool (ART), and may include opportunities for training in report creation using ART. (Note: Use of ART requires a separate Report Viewer or Ad- hoc Report Creation license).

Agencies are expected to run their own data quality reports so that they can monitor their own data quality and become more effective in serving our clients across the Continuum.

## HMIS-ERIE DE-DUPLICATION OF DATA - POLICIES AND PROCEDURES

### De-duplicating Data Elements

HMIS-Erie application will use the following data elements to create unduplicated client records:

- Name (first, middle, last, suffix; aliases or nicknames should be avoided)
- Social Security Number
- Date of Birth (actual or estimated)
- Gender
- Race and Ethnicity

### User-mediated Look-up

The primary way to achieve de-duplication will be a user-mediated search of the client database prior to creating a new client record. The user will be prompted to enter a **minimum** number of the data elements into HMIS-Erie application, and a list of similar client records will be displayed. Based on the results, the user will be asked to select a matching record if the other identifying fields match correctly.

If the user is unsure of a match (either because some data elements differ or because of blank information), the user should query the client for more information and continue evaluating possible matches or create a new client record.

The user will not be able to view sensitive client information or program-specific information during the de-duplication process. After the client record is selected, the user will be able to view previously existing portions of the client record only if he/she has explicit authorization to view that client's record.

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## TECHNICAL SUPPORT

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### HMIS-ERIE TECHNICAL SUPPORT POLICIES AND PROCEDURES

#### HMIS-ERIE Application Support

As unanticipated technical support questions on the use of HMIS-Erie application arise, users will follow this procedure to resolve those questions:

*During the normal business hours of the ECDHS of 8:30 am – 5 pm:*

- Begin with utilization of the on-line help and/or training materials
- If the question is still unresolved, direct the technical support question to the Agency Administrator
- If the question is still unresolved, the Agency Administrator can direct the question to HMIS-Erie Management Team

- If the question is still unresolved, HMIS-Erie Management Team will direct the question to Bowman Systems technical support staff

#### *After the normal business hours of the ECDHS:*

- Begin with utilization of the on-line help and/or training materials
- If the question can wait to be addressed during the following business day, wait and follow the normal business hours procedure outlined above
- If the question cannot wait, direct the technical support question to the Agency Administrator, if available
- If unavailable, and the question is still unresolved, contact HMIS-Erie Management Team, or the duly appointed representative. They will determine the appropriate procedure to be followed

If it is determined that the issue needs immediate attention, the user's request will be forwarded to an appropriate HMIS-ERIE technical support representative. Otherwise, the user will be instructed to pursue assistance through normal channels on the following business day.

### **User Training**

HMIS-Erie Management Team will provide HMIS-ERIE application training periodically throughout the year. If additional, or specific, training needs arise, HMIS-Erie Management Team may arrange for special training sessions.

### **Agency/User Forms**

All Agency Administrators and Users will be trained in the appropriate on-line and hardcopy forms. If the Agency Administrator or User has questions on how to complete HMIS-ERIE forms, he/she shall contact HMIS-Erie Management Team.

### **Report Generation**

Each Agency may send its Agency Administrator to receive training on how to develop agency-specific reports using HMIS-Erie application. HMIS-Erie Management Team will be a resource to agency users as they develop reports but will be available to provide only a limited, reasonable level of support to each Agency.

### **Programming-related Service Requests**

If a user encounters programming issues within HMIS-Erie application that need to be addressed, that user should identify the error or suggest an improvement to the Agency Administrator. The Agency Administrator will forward this information to HMIS-Erie Management Team, identifying the specific nature of the issue or recommended improvement, along with the immediacy of the request.

HMIS-Erie Management Team will review all application service requests and determine the action to be taken. Requests to fix programming errors will be prioritized and

forwarded to Bowman Systems. Suggested application improvements will be compiled and periodically discussed by HMIS-Erie Committee and HMIS-Erie User Group. A prioritized list of improvements will be submitted to HMIS-Erie Management Team for review. Approved recommendations will be submitted to Bowman Systems.

## **HMIS-ERIE SYSTEM AVAILABILITY POLICIES**

There are times that ServicePoint™ is unavailable because Bowman Systems is performing necessary backup and maintenance of HMIS-Erie database. These are usually in the late evenings when as few people as possible need access to the system. However, when the ECDHS receives notice of a planned interruption of service for other reasons or for an abnormal amount of time, HMIS-Erie Management Team will notify Agency Administrators and Users via email. If there is an unplanned interruption to service, HMIS-Erie Management Team will communicate with Bowman Systems, and Agency Administrators and Users will be notified of any information regarding the interruption as it is made available.



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## APPENDIX A: GLOSSARY OF HMIS-ERIE ACRONYMS AND TERMS

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*Adapted from <http://www.HMIS-Erie.info/Resources/742/HMIS-ERIE-Acronyms-and-Definitions.aspx>*

### Acronyms

AIRS - ECDHS of Information & Referral Systems

AHAR - Annual Homeless Assessment Report

APR - Annual Performance Report

CHO – Contributing HMIS-ERIE Organization

CoC - Continuum of Care

DOB - Date of Birth

DV - Domestic Violence

ESG - Emergency Solutions Grants

eHIC – electronic Housing Inventory Chart

FIPS - Federal Information Processing Standards Codes for states, counties, and named populated places.

HEARTH – Homeless Emergency Assistance and Rapid Transition to Housing

HIPAA - Health Insurance Portability and Accountability Act of 1996

HMIS - Homeless Management Information System

HUD - U.S. Department of Housing and Urban Development

I&R - Information and Referral

MH - Mental Health

NOFA - Notice of Funding Availability

PIT - Point in Time

PKI - Public Key Infrastructure

PPI - Personal Protected Information

S+C - Shelter Plus Care (McKinney-Vento Program)

SA - Substance Abuse

SHP - Supportive Housing Program

SRO - Single Room Occupancy  
SSN - Social Security Number  
SSI - Supplemental Security Income  
SSO - Supportive Services Only  
SSVF – Supportive Services for Veteran Families Program  
TA - Technical Assistance  
TANF - Temporary Assistance for Needy Families  
VAWA - Violence Against Women Act  
XML - Extensible Markup Language

## **Terms**

### **Alliance of Information and Referral Systems (AIRS)**

The professional association for over 1,000 community information and referral (I&R) providers serving primarily the United States and Canada. AIRS maintains a taxonomy of human services.

### **Annual Performance Report (APR)**

A report that tracks program progress and accomplishments in HUD`s competitive homeless assistance programs. The APR provides the grantee and HUD with information necessary to assess each grantee`s performance.

### **Audit Trail**

A record showing who has accessed a computer system and what operations he or she has performed during a given period of time. Most database management systems include an audit trail component.

### **Bed Utilization**

An indicator of whether shelter beds are occupied on a particular night or over a period of time.

### **Biometrics**

Refers to the identification of a person by computerized images of a physical feature, usually a person`s fingerprint.

### **Chronic homelessness**

HUD defines a chronically homeless person as a homeless individual with a disabling condition who has either been continuously homeless for a year or more OR has had at least four (4) episodes of homelessness in the past three (3) years. To be considered chronically homeless, persons must have been sleeping in a place not meant for human habitation (e.g., living on the streets) and/or in an emergency homeless shelter during

that time. *Persons under the age of 18 are not counted as chronically homeless individuals.*

### **Chronically Homeless Household**

HUD defines a chronically household as a family that has at least one adult member (persons 18 or older) who has a disabling condition who has either been continuously homeless for a year or more OR has had at least four (4) episodes of homelessness in the past three (3) years. To be considered chronically homeless, persons must have been sleeping in a place not meant for human habitation (e.g., living on the streets) and/or in an emergency shelter/safe haven during that time.

### **Client Intake**

The process of collecting client information upon entrance into a program.

### **Consumer**

An individual or family who has experienced or is currently experiencing homelessness.

### **Continuum of Care (CoC)**

A community with a unified plan to organize and deliver housing and services to meet the specific needs of people who are homeless as they move to stable housing and maximize self-sufficiency. HUD funds many homeless programs and HMIS-ERIE implementations through Continuum of Care grants.

### **Coverage**

A term commonly used by CoCs or homeless providers. It refers to the number of beds represented in an HMIS-ERIE divided by the total number of beds available.

### **Contributing HMIS-ERIE Organization (CHO)**

Any organization (including its employees, volunteers, affiliates, contractors, and associates) that records, uses or processes data on homeless clients for an HMIS-ERIE. The requirements of HMIS-Erie Final Notice apply to all Contributing HMIS-ERIE Organizations.

### **Data Quality**

The accuracy and completeness of all information collected and reported to HMIS-Erie.

### **Data Standards**

See HMIS-ERIE Data and Technical Standards Final Notice.

### **De-identification**

The process of removing or altering data in a client record that could be used to identify the person. This technique allows research, training, or other non-clinical applications to use real data without violating client privacy.

### **Digital Certificate**

An attachment to an electronic message used for security purposes. The most common use of a digital certificate is to verify that a user sending a message is who he or she claims to be and to provide the receiver with the means to encode a reply.

**Disabling Condition**

A disabling condition in reference to chronic homelessness is defined by HUD as a diagnosable substance use disorder, serious mental illness, developmental disability, or chronic physical illness or disability, including the co-occurrence of two or more of these conditions. A disabling condition limits an individual's ability to work or perform one or more activities of daily living.

**Emergency Shelter**

Any facility whose primary purpose is to provide temporary shelter for the homeless in general or for specific populations of the homeless.

**Emergency Solutions Grant (ESG)**

A federal grant program designed to help improve the quality of existing emergency shelters for the homeless, to make available additional shelters, to meet the costs of operating shelters, to provide essential social services to homeless individuals, and to help prevent homelessness.

**Encryption**

Conversion of plain text into unreadable data by scrambling it using a code that masks the meaning of the data to any unauthorized viewer. Computers encrypt data by using algorithms or formulas. Encrypted data are not readable unless they are converted back into plain text via decryption.

**Final Notice**

See HMIS-ERIE Data and Technical Standards Final Notice.

**Hashing**

The process of producing hashed values for accessing data or for security. A hashed value is a number or series of numbers generated from input data. The hash is generated by a formula in such a way that it is extremely unlikely that some other text will produce the same hash value or that data can be converted back to the original text. Hashing is often used to check whether two texts are identical. For the purposes of Homeless Management Information Systems, it can be used to compare whether client records contain the same information without identifying the clients.

**HEARTH Act**

On May 20, 2009, President Obama signed the Homeless Emergency Assistance and Rapid Transition to Housing (HEARTH) Act of 2009. The HEARTH Act amends and reauthorizes the McKinney-Vento Homeless Assistance Act.

**Homeless Management Information System (HMIS-ERIE)**

Computerized data collection tool designed to capture client-level information over time on the characteristics and service needs of men, women, and children experiencing homelessness.

## ***HMIS-ERIE Data and Technical Standards Final Notice***

Regulations issued by HUD via the Federal Register describing the requirements for implementing HMIS-ERIE. HMIS-Erie *Final Notice* contains rules about who needs to participate in HMIS-ERIE, what data to collect, and how to protect client information.

### **Housing Inventory Chart (HIC)**

A calculation of the numbers of beds and housing units in a region on one particular night, usually coinciding with the annual Point-in-Time count.

### **Inferred Consent**

Once clients receive an oral explanation of HMIS-ERIE, consent is assumed for data entry into HMIS-ERIE. The client must be a person of age, and in possession of all his/her faculties (for example, not mentally ill).

### **Informed Consent**

A client is informed of options of participating in an HMIS-ERIE system and then specifically asked to consent. The individual needs to be of age and in possession of all of his faculties (for example, not mentally ill), and his/her judgment not impaired at the time of consenting (by sleep, illness, intoxication, alcohol, drugs or other health problems, etc.).

### **Information and Referral**

A process for obtaining information about programs and services available and linking individuals to these services. These services can include emergency food pantries, rental assistance, public health clinics, childcare resources, support groups, legal aid, and a variety of non-profit and governmental agencies. An HMIS-ERIE usually includes features to facilitate information and referral.

### **McKinney-Vento Act**

The McKinney-Vento Homeless Assistance Act was signed into law by President Ronald Reagan on July 22, 1987. The McKinney-Vento Act funds numerous programs providing a range of services to homeless people, including the Continuum of Care Programs: the Supportive Housing Program, the Shelter Plus Care Program, and the Single Room Occupancy Program, as well as the Emergency Solutions Grant Program.

### **Notice of Funding Availability (NOFA)**

An announcement of funding available for a particular program or activity.

### **Penetration Testing**

The process of probing a computer system with the goal of identifying security vulnerabilities in a network and the extent to which outside parties might exploit them.

### **Permanent Supportive Housing**

Long term, community based housing that has supportive services for homeless persons with disabilities. This type of supportive housing enables special needs populations to live as independently as possible in a permanent setting. Permanent housing can be provided

in one structure or in several structures at one site or in multiple structures at scattered sites.

### **Point in Time Count**

A snapshot of the homeless population taken on a given day. Since 2005, HUD requires all CoC applicants to complete this count every other year in the last week of January. This count includes a street count in addition to a count of all clients in emergency and transitional beds.

### **Privacy Notice**

A written, public statement of an agency's privacy practices. A notice informs clients of how personal information is used and disclosed. According to HMIS-Erie *Data and Technical Standards*, all covered homeless organizations must have a privacy notice.

### **Program-specific Data Elements**

Data elements required for programs that receive funding under the McKinney-Vento Homeless Assistance Act and complete the Annual Performance Reports (APRs).

### **Public Keys**

Public keys are included in digital certificates and contain information that a sender can use to encrypt information such that only a particular key can read it. The recipient can also verify the identity of the sender through the sender's public key.

### **Scan Cards**

Some communities use ID cards with bar codes to reduce intake time by electronically scanning ID cards to register clients in a bed for a night. These ID cards are commonly referred to as scan cards.

### **Single Room Occupancy (SRO)**

A residential property that includes multiple single room dwelling units. Each unit is for occupancy by a single eligible individual. The unit need not, but may, contain food preparation or sanitary facilities, or both. It provides rental assistance on behalf of homeless individuals in connection with moderate rehabilitation of SRO dwellings.

### **Shelter Plus Care Program**

A program that provides grants for rental assistance for homeless persons with disabilities through four component programs: Tenant, Sponsor, Project, and Single Room Occupancy (SRO) Rental Assistance.

### **Supportive Housing Program**

A program that provides housing, including housing units and group quarters, that has a supportive environment and includes a planned service component.

**Supportive Services**

Services that may assist homeless participants in the transition from the streets or shelters into permanent or permanent supportive housing, and that assist persons with living successfully in housing.

**Transitional Housing**

A project that has as its purpose facilitating the movement of homeless individuals and families to permanent housing within a reasonable amount of time (usually 24 months).

**Unduplicated Count**

The number of people who are homeless within a specified location and time period. An unduplicated count ensures that individuals are counted only once regardless of the number of times they entered or exited the homeless system or the number of programs in which they participated. Congress directed HUD to develop a strategy for data collection on homelessness so that an unduplicated count of the homeless at the local level could be produced.

**Universal Data Elements**

Data required to be collected from all clients serviced by homeless assistance programs using an HMIS-ERIE. These data elements include date of birth, gender, race, ethnicity, veteran's status, and Social Security Number (SSN). These elements are needed for CoCs to understand the basic dynamics of homelessness in their community and for HUD to meet the Congressional directive.

**Written Consent**

Written consent embodies the element of informed consent in a written form. A client completes and signs a form documenting the client's understanding of the options and risks of participating or sharing data in an HMIS-ERIE system and consenting to such participation and data sharing. The signed document is then kept on file at the agency.

# 2018 HDX Competition Report

## PIT Count Data for PA-605 - Erie City & County CoC

### Total Population PIT Count Data

	2016 PIT	2017 PIT	2018 PIT
Total Sheltered and Unsheltered Count	377	369	336
Emergency Shelter Total	219	241	238
Safe Haven Total	0	0	0
Transitional Housing Total	148	120	94
Total Sheltered Count	367	361	332
Total Unsheltered Count	10	8	4

### Chronically Homeless PIT Counts

	2016 PIT	2017 PIT	2018 PIT
Total Sheltered and Unsheltered Count of Chronically Homeless Persons	11	29	20
Sheltered Count of Chronically Homeless Persons	11	29	17
Unsheltered Count of Chronically Homeless Persons	0	0	3



2018 HDX Competition Report  
 PIT Count Data for PA-605 - Erie City & County CoC

**Homeless Households with Children PIT Counts**

	2016 PIT	2017 PIT	2018 PIT
Total Sheltered and Unsheltered Count of the Number of Homeless Households with Children	42	34	39
Sheltered Count of Homeless Households with Children	42	34	39
Unsheltered Count of Homeless Households with Children	0	0	0

**Homeless Veteran PIT Counts**

	2011	2016	2017	2018
Total Sheltered and Unsheltered Count of the Number of Homeless Veterans	36	23	29	29
Sheltered Count of Homeless Veterans	28	22	27	27
Unsheltered Count of Homeless Veterans	8	1	2	2

2018 HDX Competition Report  
HIC Data for PA-605 - Erie City & County CoC

**HMIS Bed Coverage Rate**

Project Type	Total Beds in 2018 HIC	Total Beds in 2018 HIC Dedicated for DV	Total Beds in HMIS	HMIS Bed Coverage Rate
Emergency Shelter (ES) Beds	247	55	187	97.40%
Safe Haven (SH) Beds	0	0	0	NA
Transitional Housing (TH) Beds	145	28	117	100.00%
Rapid Re-Housing (RRH) Beds	170	0	170	100.00%
Permanent Supportive Housing (PSH) Beds	461	0	357	77.44%
Other Permanent Housing (OPH) Beds	90	0	90	100.00%
<b>Total Beds</b>	<b>1,113</b>	<b>83</b>	<b>921</b>	<b>89.42%</b>

# 2018 HDX Competition Report

## HIC Data for PA-605 - Erie City & County CoC

### PSH Beds Dedicated to Persons Experiencing Chronic Homelessness

Chronically Homeless Bed Counts	2016 HIC	2017 HIC	2018 HIC
Number of CoC Program and non-CoC Program funded PSH beds dedicated for use by chronically homeless persons identified on the HIC	71	21	196

### Rapid Rehousing (RRH) Units Dedicated to Persons in Household with Children

Households with Children	2016 HIC	2017 HIC	2018 HIC
RRH units available to serve families on the HIC	0	6	38

### Rapid Rehousing Beds Dedicated to All Persons

All Household Types	2016 HIC	2017 HIC	2018 HIC
RRH beds available to serve all populations on the HIC	2	29	170

# 2018 HDX Competition Report

## FY2017 - Performance Measurement Module (Sys PM)

### Summary Report for PA-605 - Erie City & County CoC

#### Measure 1: Length of Time Persons Remain Homeless

This measure the number of clients active in the report date range across ES, SH (Metric 1.1) and then ES, SH and TH (Metric 1.2) along with their average and median length of time homeless. This includes time homeless during the report date range as well as prior to the report start date, going back no further than October, 1, 2012.

**Metric 1.1: Change in the average and median length of time persons are homeless in ES and SH projects.**  
**Metric 1.2: Change in the average and median length of time persons are homeless in ES, SH, and TH projects.**

a. This measure is of the client's entry, exit, and bed night dates strictly as entered in the HMIS system.

	Universe (Persons)		Average LOT Homeless (bed nights)		Median LOT Homeless (bed nights)	
	Submitted FY 2016	FY 2017	Submitted FY 2016	FY 2017	Submitted FY 2016	FY 2017
1.1 Persons in ES and SH	1333	1392	49	52	30	31
1.2 Persons in ES, SH, and TH	1518	1591	83	74	41	37
				Difference		Difference
				3		1
				-9		-4

b. This measure is based on data element 3.17.

This measure includes data from each client's Living Situation (Data Standards element 3.917) response as well as time spent in permanent housing projects between Project Start and Housing Move-In. This information is added to the client's entry date, effectively extending the client's entry date backward in time. This "adjusted entry date" is then used in the calculations just as if it were the client's actual entry date.

The construction of this measure changed, per HUD's specifications, between FY 2016 and FY 2017. HUD is aware that this may impact the change between these two years.

2018 HDX Competition Report  
**FY2017 - Performance Measurement Module (Sys PM)**

	Universe (Persons)		Average LOT Homeless (bed nights)		Median LOT Homeless (bed nights)		
	Submitted FY 2016	FY 2017	Submitted FY 2016	FY 2017	Submitted FY 2016	FY 2017	Difference
1.1 Persons in ES, SH, and PH (prior to "housing move in")	1312	1417	68	161	32	57	25
1.2 Persons in ES, SH, TH, and PH (prior to "housing move in")	1497	1626	101	188	44	70	26

# 2018 HDX Competition Report FY2017 - Performance Measurement Module (Sys PM)

## Measure 2: The Extent to which Persons who Exit Homelessness to Permanent Housing Destinations Return to Homelessness

This measures clients who exited SO, ES, TH, SH or PH to a permanent housing destination in the date range two years prior to the report date range. Of those clients, the measure reports on how many of them returned to homelessness as indicated in the HMIS for up to two years after their initial exit.

After entering data, please review and confirm your entries and totals. Some HMIS reports may not list the project types in exactly the same order as they are displayed below.

	Total # of Persons who Exited to a Permanent Housing Destination (2 Years Prior)	Returns to Homelessness in Less than 6 Months		Returns to Homelessness from 6 to 12 Months		Returns to Homelessness from 13 to 24 Months		Number of Returns in 2 Years	
		FY 2017	% of Returns	FY 2017	% of Returns	FY 2017	% of Returns	FY 2017	% of Returns
Exit was from SO	10	0	0%	1	10%	0	0%	1	10%
Exit was from ES	234	49	21%	15	6%	15	6%	79	34%
Exit was from TH	188	31	16%	9	5%	9	5%	49	26%
Exit was from SH	0	0		0		0		0	
Exit was from PH	160	4	3%	6	4%	14	9%	24	15%
TOTAL Returns to Homelessness	592	84	14%	31	5%	38	6%	153	26%

## Measure 3: Number of Homeless Persons

### Metric 3.1 – Change in PIT Counts

# 2018 HDX Competition Report

## FY2017 - Performance Measurement Module (Sys PM)

This measures the change in PIT counts of sheltered and unsheltered homeless person as reported on the PIT (not from HMIS).

	January 2016 PIT Count	January 2017 PIT Count	Difference
Universe: Total PIT Count of sheltered and unsheltered persons	377	369	-8
Emergency Shelter Total	219	241	22
Safe Haven Total	0	0	0
Transitional Housing Total	148	120	-28
Total Sheltered Count	367	361	-6
Unsheltered Count	10	8	-2

### Metric 3.2 – Change in Annual Counts

This measures the change in annual counts of sheltered homeless persons in HMIS.

	Submitted FY 2016	FY 2017	Difference
Universe: Unduplicated Total sheltered homeless persons	1572	1626	54
Emergency Shelter Total	1333	1403	70
Safe Haven Total	0	0	0
Transitional Housing Total	381	351	-30

2018 HDX Competition Report  
**FY2017 - Performance Measurement Module (Sys PM)**

**Measure 4: Employment and Income Growth for Homeless Persons in CoC Program-funded Projects**

Metric 4.1 – Change in earned income for adult system stayers during the reporting period

	Submitted FY 2016	FY 2017	Difference
Universe: Number of adults (system stayers)	121	104	-17
Number of adults with increased earned income	13	12	-1
Percentage of adults who increased earned income	11%	12%	1%

Metric 4.2 – Change in non-employment cash income for adult system stayers during the reporting period

	Submitted FY 2016	FY 2017	Difference
Universe: Number of adults (system stayers)	121	104	-17
Number of adults with increased non-employment cash income	22	25	3
Percentage of adults who increased non-employment cash income	18%	24%	6%

Metric 4.3 – Change in total income for adult system stayers during the reporting period

	Submitted FY 2016	FY 2017	Difference
Universe: Number of adults (system stayers)	121	104	-17
Number of adults with increased total income	32	36	4
Percentage of adults who increased total income	26%	35%	9%



## 2018 HDX Competition Report FY2017 - Performance Measurement Module (Sys PM)

Metric 4.4 – Change in earned income for adult system leavers

	Submitted FY 2016	FY 2017	Difference
Universe: Number of adults who exited (system leavers)	146	159	13
Number of adults who exited with increased earned income	28	21	-7
Percentage of adults who increased earned income	19%	13%	-6%

Metric 4.5 – Change in non-employment cash income for adult system leavers

	Submitted FY 2016	FY 2017	Difference
Universe: Number of adults who exited (system leavers)	146	159	13
Number of adults who exited with increased non-employment cash income	17	21	4
Percentage of adults who increased non-employment cash income	12%	13%	1%

Metric 4.6 – Change in total income for adult system leavers

	Submitted FY 2016	FY 2017	Difference
Universe: Number of adults who exited (system leavers)	146	159	13
Number of adults who exited with increased total income	40	40	0
Percentage of adults who increased total income	27%	25%	-2%

# 2018 HDX Competition Report

## FY2017 - Performance Measurement Module (Sys PM)

### Measure 5: Number of persons who become homeless for the 1st time

Metric 5.1 – Change in the number of persons entering ES, SH, and TH projects with no prior enrollments in HMIS

	Submitted FY 2016	FY 2017	Difference
Universe: Person with entries into ES, SH or TH during the reporting period.	1469	1445	-24
Of persons above, count those who were in ES, SH, TH or any PH within 24 months prior to their entry during the reporting year.	447	424	-23
Of persons above, count those who did not have entries in ES, SH, TH or PH in the previous 24 months. (i.e. Number of persons experiencing homelessness for the first time)	1022	1021	-1

Metric 5.2 – Change in the number of persons entering ES, SH, TH, and PH projects with no prior enrollments in HMIS

	Submitted FY 2016	FY 2017	Difference
Universe: Person with entries into ES, SH, TH or PH during the reporting period.	1660	1775	115
Of persons above, count those who were in ES, SH, TH or any PH within 24 months prior to their entry during the reporting year.	499	529	30
Of persons above, count those who did not have entries in ES, SH, TH or PH in the previous 24 months. (i.e. Number of persons experiencing homelessness for the first time.)	1161	1246	85

2018 HDX Competition Report  
**FY2017 - Performance Measurement Module (Sys PM)**

**Measure 6: Homeless Prevention and Housing Placement of Persons defined by category 3 of HUD’s Homeless Definition in CoC Program-funded Projects**

**This Measure is not applicable to CoCs in FY2017 (Oct 1, 2016 - Sept 30, 2017) reporting period.**

**Measure 7: Successful Placement from Street Outreach and Successful Placement in or Retention of Permanent Housing**

Metric 7a.1 – Change in exits to permanent housing destinations

	Submitted FY 2016	FY 2017	Difference
Universe: Persons who exit Street Outreach	383	242	-141
Of persons above, those who exited to temporary & some institutional destinations	304	133	-171
Of the persons above, those who exited to permanent housing destinations	22	25	3
% Successful exits	85%	65%	-20%

Metric 7b.1 – Change in exits to permanent housing destinations

2018 HDX Competition Report  
**FY2017 - Performance Measurement Module (Sys PM)**

	Submitted FY 2016	FY 2017	Difference
Universe: Persons in ES, SH, TH and PH-RRH who exited, plus persons in other PH projects who exited without moving into housing	1410	1407	-3
Of the persons above, those who exited to permanent housing destinations	646	683	37
% Successful exits	46%	49%	3%

**Metric 7b.2 – Change in exit to or retention of permanent housing**

	Submitted FY 2016	FY 2017	Difference
Universe: Persons in all PH projects except PH-RRH	466	458	-8
Of persons above, those who remained in applicable PH projects and those who exited to permanent housing destinations	434	413	-21
% Successful exits/retention	93%	90%	-3%

# 2018 HDX Competition Report

## FY2017 - SysPM Data Quality

### PA-605 - Erie City & County CoC

This is a new tab for FY 2016 submissions only. Submission must be performed manually (data cannot be uploaded). Data coverage and quality will allow HUD to better interpret your Sys PM submissions.

Your bed coverage data has been imported from the HIC module. The remainder of the data quality points should be pulled from data quality reports made available by your vendor according to the specifications provided in the HMIS Standard Reporting Terminology Glossary. You may need to run multiple reports into order to get data for each combination of year and project type.

You may enter a note about any field if you wish to provide an explanation about your data quality results. This is not required.

# 2018 HDX Competition Report FY2017 - SysPM Data Quality

	All ES, SH				All TH				All PSH, OPH				All RRH				All Street Outreach			
	2013-2014	2014-2015	2015-2016	2016-2017	2013-2014	2014-2015	2015-2016	2016-2017	2013-2014	2014-2015	2015-2016	2016-2017	2013-2014	2014-2015	2015-2016	2016-2017	2013-2014	2014-2015	2015-2016	2016-2017
1. Number of non-DV Beds on HIC	192	176	180	174	162	199	188	144	540	561	522	509		2	2	29				
2. Number of HMIS Beds	192	176	180	174	162	199	188	144	412	433	394	383		2	2	29				
3. HMIS Participation Rate from HIC ( % )	100.00	100.00	100.00	100.00	100.00	100.00	100.00	100.00	76.30	77.18	75.48	75.25		100.00	100.00	100.00				
4. Unduplicated Persons Served (HMIS)	1374	1200	1333	1403	415	403	381	309	363	377	363	458		136	314	501				12
5. Total Leavers (HMIS)	1209	1048	1170	1233	290	270	260	233	60	82	78	84		103	271	273				12
6. Destination of Don't Know, Refused, or Missing (HMIS)	298	299	163	227	0	0	8	2	9	2	5	11		0	0	6				2
7. Destination Error Rate (%)	24.65	28.53	13.93	18.41	0.00	0.00	3.08	0.86	15.00	2.44	6.41	13.10		0.00	0.00	2.20				16.67

# 2018 HDX Competition Report

## Submission and Count Dates for PA-605 - Erie City & County CoC

### Date of PIT Count

	Date	Received HUD Waiver
Date CoC Conducted 2018 PIT Count	1/26/2018	

### Report Submission Date in HDX

	Submitted On	Met Deadline
2018 PIT Count Submittal Date	4/27/2018	Yes
2018 HIC Count Submittal Date	4/27/2018	Yes
2017 System PM Submittal Date	5/29/2018	Yes



**Erie City & County Continuum of Care (PA-605)**

**Written Standards**

**October 2017**



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## **A. Introduction**

This document outlines the Erie City & County Continuum of Care (CoC) Written Standards, which meet The Housing and Urban Development's (HUD) minimum requirements and address CoC expectations for all Erie City & County CoC-funded projects as well as the Department of Community and Economic Development (DCED) Emergency Solutions Grant (ESG) funded projects. Erie County Department of Human Services (ECDHS) serves as the recipient/collaborative applicant for the CoC funds as well as DCED ESG Rapid Re-Housing funds. CoC and DCED ESG funds are distributed to providers in the community who are referred to as the sub-recipients. These program standards were created to insure: program accountability to individuals and families experiencing homelessness, program compliance with HUD regulations, and program uniformity across all programs in the geographic area. All sub-recipients of CoC and ECDHS ESG program funding are required to follow these standards. Sub-recipients of CoC and ECDHS ESG funds must develop additional standards for administering program assistance but these additional standards must not conflict with those established by the Erie City & County CoC or the CoC Program Interim Rule. All recipients or sub-recipients of CoC Program Funding must follow these standards and the standards must be applied consistently across the entire CoC's geographic area.

Per CFR 578.7 (a), The City of Erie Department of Economic and Community Development (DECD) maintains ESG Written Standards developed in consultation with the CoC and the Erie County Home Team. HUD's CoC and ESG regulations are similar, but may contain requirements specific to the funds and subject to local policies. Sub-recipients of City of Erie ESG funds must follow DECD ESG Written Standards and terms of the associated contract/agreement established when conducting ESG-funded activities or incurring ESG-funded costs. The City also consults with the CoC for determinations on performance standards and ESG Rapid Re-Housing policies that may vary from these CoC Written Standards. The City ESG Standards also require sub-recipients to participate in HMIS (or comparable databases or DV providers) and the CoC's coordinated entry system. Agencies should refer to the applicable standards for specific requirements and applicable terms of the funding stream when determining standards that govern.

To ensure the relevancy of these written standards against HUD requirements, these policies are subject to change depending upon updates to regulations, changes in the housing and service resources available in the CoC, or any other changes as deemed necessary by ECDHS and the CoC. Sub-recipients are also responsible for ensuring compliance with 24 CFR Part 578.

## **B. Standards for All Project Types**

The Erie City & County CoC is committed to ensuring that homelessness is rare, brief, and nonrecurring. As part of this effort, the CoC is focused on improving access to and coordination of housing services and enhancing services for highly vulnerable populations including Chronically Homeless, Veterans, Families with Children, and Youth (ages 18-24). The standards below are applicable to all project types and are intended to promote program compliance with regulations, program uniformity, and create evidence-based program guidelines for sub-recipients to follow.

## 1. Housing First

- Housing First is a concept that centers on providing individuals who are homeless with housing quickly, without preconditions, then providing supportive services to the individual to assist with any secondary concerns.
- All sub-recipients in the Erie City & County CoC are required to abide by Housing First Principles. As such, all programs are expected to ensure low barriers to program entry for participants and there should be few to no programmatic prerequisites to permanent housing entry. Projects must allow entry to participants regardless of income, substance abuse, criminal records, history of domestic violence, or other issues or concerns.
- Housing is not contingent on compliance with services. Supportive services are voluntary, but should be encouraged and used to persistently engage participants to ensure long term housing stability.

## 2. Equal Access and Non-Discrimination

- Recipients and sub-recipients of CoC funds must comply with all Federal Statutes and regulations including the Fair Housing Act, The Americans with Disabilities Act, and Equal Access to Housing Final Rule.
- Sub-recipients of CoC and ESG funds must have agency specific non-discrimination policies in place and assertively outreach to individuals who would be least likely to engage in the homeless system.
- Individuals who present together for assistance, regardless of age or relationship, are considered a household and should be evaluated for eligibility for assistance as a household.
- The age and gender of a child under 18 must not be used as a basis for denying any family's admission to a project.

## 3. Affirmative Marketing Policy and Procedures

In accordance with the regulations of the HUD CoC program as defined in 24 CFR Part 578.93 (c), Erie City & County CoC commits to non-discrimination and equal opportunity and further commits to affirmatively market all HUD CoC funded programs. Recipients and Sub-recipients of HUD CoC funded programs must comply with the County of Erie's Affirmative Marketing Policy and Procedure requirements. Erie City & County CoC recipients and sub-recipients will implement affirmative marketing of programs through the following set of steps:

- ECDHS will inform the public and potential program participants about this policy and Federal Fair Housing Laws as follows: Inform the general public about the ECDHS Affirmative Marketing Policy by placing these Written Standards on the Erie County Home Team Website under Resources; Make these Written Standards available on the Erie County Government Website; Make copies of this policy and written standards available at the ECDHS Mental Health/Intellectual Disabilities Office. The Coordinated Entry Provider, Erie County Care Management, will also make these written standards available on the Erie County Care Management Website.

- In order to inform as well as solicit referrals from persons in the geographic area who are not likely to apply for housing programs without special outreach, ECDHS has established methods that sub-recipients of HUD CoC funds must use in order to be in compliance with this policy and to reach this goal. ECDHS requires that all sub-recipients use special outreach methods as follows: sub-recipients must contact, at a minimum, one of the following organizations in Erie County at least once annually, to inform of program availability:

International Institute of Erie  
 517 East 26<sup>th</sup> Street  
 Erie, PA 16504  
 (814) 452-9335  
[www.refugees.org](http://www.refugees.org)

MultiCultural Community Resource Center  
 554 East 10<sup>th</sup> Street  
 Erie, PA 16503  
 (814)453-2363  
[www.mcrcerie.org](http://www.mcrcerie.org)

Saint Martin Center  
 1701 Parade Street  
 Erie, PA 16503  
 (814)452-6113  
[www.stmartincenter.org](http://www.stmartincenter.org)

Multi-Cultural Health Evaluation  
 Delivery Systems, Inc. (MHEDS)  
 2928 Peach Street  
 Erie, PA 16508  
 (814)453-6229  
[www.mheds.org](http://www.mheds.org)

#### 4. Coordinated Entry Participation

- All CoC funded and ESG funded projects are required to participate in the CoC's Coordinated Entry System to obtain referrals.
- Participation requires following all established policies and procedures for the Erie City & County CoC Coordinated Entry System.
- All other non-CoC or ESG-funded projects are strongly encouraged to participate in the CE System.

#### 5. HMIS Participation

- All CoC funded and ESG funded projects are required to participate in the Homeless Management Information System (HMIS). The only exception to HMIS requirement is dedicated Domestic Violence (DV) Providers. DV providers are not required to enter client data in to HMIS but are required to utilize a comparable database to track client information.
- The CoC actively encourages all non-CoC or ESG funded providers to participate in HMIS.
- HMIS users are responsible for ensuring that they are complying with all other Erie County Department of Human Services (ECDHS) HMIS Policies and Procedures, as outlined in the ECDHS Policies and Procedures Manual.

#### 6. Access to Mainstream Resources

- The CoC expects that all CoC or ESG funded programs will coordinate with and access mainstream and other targeted homeless resources.

- Sub-recipients should assess and assist participants with obtaining any mainstream resource for which they may be eligible for including: TANF, Medicaid/Medicare, Food Stamps, and any other eligible program.
- Where possible, sub-recipients should streamline processes of applying for mainstream benefits such as the use of a singular form to apply for benefits.

## 7. Recordkeeping Requirements

- All CoC and ESG funded programs will maintain Releases of Information, Case Notes, and all pertinent demographic and identifying data in HMIS. Paper files can also be kept so long as they are stored in an appropriate, locked and secure location.
- The file maintained on each participant should at minimum, include all pertinent information required by HUD such as verification of homeless status, verification of chronic homelessness (as applicable), participation agreements, service plans, case notes, information on the services provided both directly and through referrals to community agencies, and any follow-up and evaluation data that is compiled.
- Client information must be entered into HMIS in accordance with the data quality, timeliness, and additional requirements founds in the ECDHS HMIS policies and procedures manual.
- The sub-recipient will maintain each participant file in a secure place and shall not disclose information from the file without written permission of the participant, as appropriate, except to project staff and other agencies as required by law.
- All recipients and sub-recipients of Federal Grants must retain backup documentation for any administrative costs charged to the Federal Grant Programs. For staff time spent on Grant related activities, recipients and sub-recipients must document time spent and activity information.
- All records pertaining to CoC funds must be retained for the greater of five years or the participant records must be retained for five years after the expenditure of all funds from the grant under which the program participant was served. Where CoC funds are used for the acquisition, new construction, or rehabilitation of a project site, the records must be retained for 15 years after the date that the project was first occupied or used by program participants.
- Sub-recipients must make all records available to the Grantee as requested for program monitoring purposes.

## 8. Personnel

The sub-recipient shall adequately staff each program with qualified personnel to ensure effective program management and the safety and stabilization of program participants.

- The sub-recipient selects service staff who have appropriate knowledge or experiencing in working with individuals and families experiencing homelessness.
- The sub-recipient adequately trains all staff on the written standards of the program and on all pertinent skill areas determined by the program.

- All staff have written job descriptions that at minimum, address the tasks to be performed and the qualifications required for the position.
- For all programs that are required to use HMIS, all HMIS users must abide by the standard operating procedures found in the ECDHS policies and procedures manual. Users must adhere to the privacy and confidentiality terms set forth in the User Agreement.
- All staff will have appropriate child abuse clearances, as mandated by Pennsylvania Law.

## 9. Termination and Grievance Process

Termination is expected to be limited to only the most severe cases. Programs agree to exercise appropriate judgement and examine all extenuating circumstances when determining if violations are serious enough in nature to warrant termination.

- Sub-recipients must have a written termination policy outlining program rules and termination processes, including a formal due process.
- At a minimum, this process must consist of: 1) providing program participants with a written copy of the program rules and the termination process before the participant begins to receive assistance; 2) written notice to the program participant containing a clear statement of the reasons for termination; 3) a review of the decision, in which the program participant is given the opportunity to present written or oral objections before a person other than the person who made or approved the termination decision; and 4) prompt written notice of the final decision to the program participant.
- As outlined in 24 CFR 578.91, a program may terminate services when a participant violates the program requirements or conditions of occupancy. Termination does not bar the sub-recipient from providing further assistance at a later time to the same individual or family.
- Clients who are entering an institution (for example, jail, a mental health treatment facility, a hospital) should not immediately be terminated from projects. Providers are permitted to maintain open units for individuals and families who are institutionalized for a maximum of 60 days.

### **C. Permanent Supportive Housing**

Permanent Supportive Housing (PSH) is a housing type designed for persons with disabilities. PSH is permanent housing with indefinite leasing or rental assistance coupled with supportive services to assist individuals who are homeless with a disability or families with an adult or child member with a disability achieve long term housing stability. Successful PSH utilizes the Housing First Concept, that all persons can be housed immediately without preconditions of sobriety, income, or other behaviors. Evidence has shown that individuals experiencing homelessness, even chronic homelessness, can be placed in an apartment with case management services, abide by their lease, and successfully remain in housing over a long period of time. The CoC Program Notice of Funding Availability (NOFA) may impose additional eligibility requirements not reflected in these regulations for PSH. Projects

funded to perform PSH assistance under the CoC Program must follow the CoC program NOFA, the Interim Rule, and all written standards detailed in this document.

#### 10. Eligibility Criteria

- All adult program participants must meet the following program eligibility requirements: Literally Homeless or Fleeing Domestic Violence (Category 1 and Category 4 of the HUD Homeless Definition).
  - Households must have an individual member with a disability
- Projects with beds dedicated for chronically homeless persons must also evaluate and document eligibility for the HUD Chronic Homeless Definition.
- All sub-recipients shall use the standard Order of Priority for documenting evidence to determine homeless and chronically homeless status. That order shall be as follows: 1. Third-party documentation (including HMIS), 2. Intake worker observations through outreach and visual assessment, and 3. Certification from the person seeking assistance. Sub-recipients must document in the client intake that due diligence was done to obtain the evidence in the preferred order, as detailed above.
- Evidence of diagnoses with a disability must be evidenced by one of the following forms of documentation: written verification of the condition from a professional licensed by the State to diagnose and treat the condition, written verification from the Social Security Administration, copies of a disability check, intake or referral staff observation that is confirmed by written verification of the condition from a professional licensed by the State to diagnose and treat the condition that is confirmed no later than 4 days after the application for assistance and accompanied with one of the types of evidence above, or other documentation that is approved by HUD.
- Sub-recipients may not establish additional eligibility requirements beyond those specified in this document and those required by funding sources.
- The only reasons programs may disqualify an eligible individual or family from program entry are: household does not meet the homeless or disability standards, household make-up (provided that it does not violate HUD's Fair Housing and Equal Opportunity requirements- for example, singles-only programs can disqualify households with children, families-only programs can disqualify single households, etc.), all program beds are full, and if the housing has in residence at least one family with a child under age 18, the housing may exclude registered sex offenders and persons with criminal records that includes a violent crime from the project so long as the child resides in the same housing facility.
- Programs cannot disqualify an individual or family due to lack of income or employment status, due to prior evictions or poor rental history, or due to gender.

#### 11. Prioritization of Eligible Program Participants

The CoC has adopted the orders of priority for PSH as established in Notice CPD 16-11: Prioritizing Persons Experiencing Chronic Homelessness and other Vulnerable Homeless

Persons in Permanent Supportive Housing. As such, all PSH eligible households will be prioritized as follows:

**Dedicated/Prioritized PSH Beds:**

Dedicated PSH beds are those which are required through the project's grant agreement to only be used to house persons experiencing chronic homelessness unless there are no persons within the CoC that meet that criteria. If there are no persons within the CoC's geographic area that meet the definition of chronically homeless at a point in which a dedicated PSH bed is vacant, the recipient may then follow the order of priority for non-dedicated PSH established in CPD Notice 16-11.

1. Chronically Homeless individuals and families with a disability and with the longest history of homelessness and the most severe service needs (Chronically Homeless and 12 continuous months of homelessness or 4 occasions of homelessness over 3 years equaling 12 months cumulatively and having severe service needs- high incidences of ER, jail, behavioral, and physical health needs as indicated on the VI-SPDAT score).
2. Chronically Homeless individuals and families with a disability and with the longest history of homelessness (Chronically Homeless and 12 continuous months of homelessness or 4 occasions of homelessness over 3 years equaling 12 months cumulatively and not having severe service needs from the results of the VI-SPDAT score).
3. Homeless individuals and families with a disability and with the most severe service needs (4 occasions of homelessness over 3 years equaling less than 12 months cumulatively and having severe service needs as evidenced by high incidences of ER, jail, behavioral, and physical health needs per the VI-SPDAT).
4. Homeless individuals and families with a disability and with not as high of service needs (4 occasions of homelessness over 3 years equaling less than 12 months cumulatively and not having severe services needs from the VI-SPDAT).

**Non-Dedicated/Prioritized PSH Beds:**

1. Homeless individuals and families with a disability with the most severe service needs (any length of time homeless with a disability and very high needs).
2. Homeless individuals and families with a disability with a long period of continuous or episodic homelessness (long time-homeless with a disability, regardless of needs).
3. Homeless individuals and families with a disability coming from places not meant for human habitation, emergency shelters, or safe havens (literally homeless with a disability regardless of length of time homeless or severity of service needs).
4. Homeless individuals and families with a disability coming from transitional housing, where prior to residing in transitional housing, lived on the streets, in an emergency shelter, or a safe haven (coming from transitional housing with a disability, regardless of length of time homeless or severity of service needs).

12. Minimum Standards of Assistance



- There can be no predetermined length of stay in a Permanent Supportive Housing program.
- Supportive Services designed to meet the needs of the project participants must be made available to the participants throughout the duration of time in the Permanent Supportive Housing program.
- The sub-recipient provides assistance to the participant with accessing suitable housing. The sub-recipient will assist the participant with searching for appropriate housing. The program considers the needs of the individual or family experiencing homelessness when arranging for housing. The program participant may choose the unit of choice within reason.
- Fair Market Rent (FMR): rent reasonableness is the applicable rent standard
- Rent reasonableness: sub-recipient must ensure and document that units in a structure are in compliance with HUD's rent reasonableness standards.
- To verify that a unit's rent amount reflects what other comparable units are charging for rent, sub-recipient must obtain rental rates for at least two comparable units and maintain supporting documentation of the rental rates for the two comparable units. Examples of documentation for two comparable units include, but are not limited to, newspaper ads, internet searches, and documentation via phone conversations.
- Inspections of rental units are to be handled by the sub-recipient. The sub-recipient is responsible for ensuring that the unit is in compliance with HUD Housing Quality Standards. The sub-recipient is responsible to document the results of the unit inspection and maintain in the client file.
- In accordance with CFR 578.77, sub-recipients are not required to impose occupancy charges on program participants as a condition to reside in the program. If occupancy charges are imposed, they may not exceed the highest of: 30% of the household's adjusted gross income; 10% of the household's monthly income; or, if the household is receiving payments for welfare assistance from a public agency and a part of the payments is specifically designated by the agency to meet the household's housing costs, the portion of the payments that is designated for housing costs.
- Project participants in PSH must enter into a lease (or sublease) agreement for an initial term of at least one year that is renewable and is terminable only for a cause. Leases or subleases must be renewable for a minimum term of one month.
- All CoC-funded programs must meet any additional criteria stipulated under the CoC Notice of Funding Availability under which the program is operating.

#### **D. Rapid Re-Housing**

Rapid Re-Housing is a program created for the purpose of providing an immediate, permanent housing situation, for moderately vulnerable individuals. Recent research has found that RRH is one of the most effective types of housing in the fight to end homelessness from both a cost and housing stability perspective. RRH is a short to medium-term housing intervention designed to resolve the current housing crisis.

Eligibility and standards vary for different types of Rapid Re-Housing: HUD CoC Rapid Re-Housing (Erie County DHS) vs. DCED ESG Rapid Re-Housing (Erie County DHS) vs. HUD ESG-funded Rapid Re-Housing (City of Erie DECD).

HUD CoC-funded Rapid Re-Housing (Erie County DHS):

The CoC Program Notice of Funding Availability (NOFA) may impose additional requirements not reflected in these regulations for Rapid Re-Housing. Projects funded to perform Rapid Re-Housing assistance under the CoC Program must follow the CoC program NOFA, The Interim Rule, and all written standards detailed in this document.

13. Eligibility Criteria

- For HUD CoC-funded Rapid Re-Housing: All adult program participants must meet the following program eligibility requirements: Literally Homeless or Fleeing Domestic Violence (Category 1 and Category 4 of the HUD Homeless Definition).
- The program will have minimal entry requirements as to ensure that the most vulnerable of the population are being served.
- All adult program participants must meet the program eligibility requirements of their respective RRH Program.
- Re-evaluation of eligibility must include: need (amount and type of assistance) and whether the program participant is lacking resources and support networks.
- All sub-recipients shall use the standard Order of Priority for documenting evidence to determine homeless and chronically homeless status. That order shall be as follows: 1. Third-party documentation (including HMIS), 2. Intake worker observations through outreach and visual assessment, and 3. Certification from the person seeking assistance. Sub-recipients must document in the client intake that due diligence was done to obtain the evidence in the preferred order, as detailed above.
- The only reasons that programs may have the option to disqualify an eligible individual or family from program entry are: household does not meet the homeless or disability standard, household make-up (provided that it does not violate HUD's Fair Housing and Equal Opportunity requirements- for example, singles-only programs can disqualify households with children, families-only programs can disqualify single households, etc.), RRH funds have been exhausted, and if the housing has in residence at least one family with a child under the age of 18, the housing may exclude registered sex offenders and persons with a criminal record that includes a violent crime from the project so long as the child resides in the same housing facility.
- Programs cannot disqualify an individual or family due to lack of income or employment status (provided that the situation is temporary, for example, the individual will be receiving Section 8 disability within a reasonable amount of

time as determined by the sub-recipient), due to prior evictions or poor rental history, or due to gender.

#### 14. Eligible Costs

- Short-term (up to 3 months) and medium-term (4-24 months) rental assistance.
- Tenant-based rental assistance
- Housing relocation and stabilization services:
  - Financial assistance (eligible under rental assistance): up to 2 months security deposits, first and last month's rent, and property damage.
  - Supportive services: case management, child care, education services, employment assistance and job training, food, housing search and counseling services, including mediation, credit repair, and payment of rental application fee, legal services, life skills training, mental health services, moving costs, outpatient health services, substance abuse treatment services, transportation, and utility deposits.

#### 15. Prioritization for Eligible Program Participants

- Chronically Homeless households
- Households with the longest history of homelessness
- Households with the most severe service needs (as determined by the VI-SPDAT score)

#### 16. Minimum Standards

- Housing Standards: units must meet HUD Housing Quality Standards
- Fair Market Rent (FMR): rent reasonableness is the applicable rent standard
- Rent reasonableness: sub-recipient must ensure and document that units in a structure are in compliance with HUD's rent reasonableness standards.
- To verify that a unit's rent amount reflects what other comparable units are charging for rent, sub-recipient must obtain rental rates for at least two comparable units and maintain supporting documentation of the rental rates for the two comparable units. Examples of documentation for two comparable units include, but are not limited to, newspaper ads, internet searches, and documentation via phone conversations.
- Lease requirements: program participants receiving tenant-based rental-assistance must sign a lease of at least one year that is renewable (for a minimum term of one month) and terminable only for cause.
- Sub-recipients of Rapid Re-Housing programs must offer the core components to RRH: at minimum, housing identification, move in and rental assistance, and case management and support services.
- Rental Assistance is limited to 24 months per household.
- Case management must be provided throughout the duration of the stay in housing. However, continuation in the program does not depend on participation in Supportive Services offered.

- Case management should occur not less than once per month to assist the program participant in ensuring long-term housing stability.
- Inspections of rental units are to be handled by the sub-recipient. The sub-recipient is responsible for ensuring that the unit is in compliance with HUD Housing Quality Standards. The sub-recipient is responsible to document the results of the unit inspection and maintain in the client file.
- Rental assistance cannot be provided to a program participant who is already receiving rental assistance or living in a housing unit receiving rental assistance or operating assistance through other Federal, State, or local sources.
- Sub-recipient must re-evaluate at least once annually that the program participant lacks sufficient resources and support networks necessary to retain housing without assistance.
- The program will work with the participant to determine the amount of rent that is needed to ultimately achieve housing stability. The amount of rental assistance must be reviewed and documented by the sub-recipient on an annual basis and continued need determined through consultation with the participation and case management.
- The sub-recipient assists participants in locating and obtaining suitable housing. The sub-recipient will assist by methods that may include the following: assessment of housing barriers, needs, and preferences, development of an action plan for locating housing, housing search, outreach to and negotiation with potential landlords, tenant counseling, assessment of housing for compliance with HUD Habitability Standards, assistance with rental applications, arranging for utilities, and assisting with moving arrangements.
- The program participant may not receive Supportive Services for greater than 6 months from exit from the RRH program.
- All CoC-funded programs must meet any additional criteria stipulated under the CoC Notice of Funding Availability under which the program is operating.

#### DCED ESG-funded Rapid Re-Housing (Erie County DHS)

The DCED ESG Program Guidelines may also pose additional program requirements not reflected in these regulations. Programs must follow the DCED ESG Program Guidelines, The Interim Rule, and all written standards in this document.

#### 17. Eligibility Criteria

- For DCED ESG-funded Rapid-Re-Housing: All adult program participants must meet the program eligibility requirements detailed in the most current DCED ESG Program Guidelines which are currently listed as: Literally Homeless or Fleeing Domestic Violence (Category 1 and Category 4 of the HUD Homeless Definition). \*Eligible under Category 4 only if also literally homeless.
- Re-evaluation of eligibility must be done at least annually and include: income evaluation, need (amount and type of assistance) and whether the program participant is lacking resources and support networks.

- Income: the program participants household's annual income must be less than or equal to 30 percent of the Area Median Income (AMI).
- The program will have minimal entry requirements as to ensure that the most vulnerable of the population are being served.
- All sub-recipients shall use the standard Order of Priority for documenting evidence to determine homeless and chronically homeless status. That order shall be as follows: 1. Third-party documentation (including HMIS), 2. Intake worker observations through outreach and visual assessment, and 3. Certification from the person seeking assistance. Sub-recipients must document in the client intake that due diligence was done to obtain the evidence in the preferred order, as detailed above.

#### 18. Eligible Costs

- Short-term (up to 3 months) and medium-term (4-24 months) rental assistance
- Rental arrears (one-time payment of up to 6 months of rent arrears, including any late fees on those arrears)
- Tenant-based rental assistance or project-based rental assistance
- Housing Relocation and stabilization services:
  - Rental application fees
  - Up to 2 months security deposits
  - Last month's rent
  - Utility deposits and payments (up to 24 months, including up to 6 months for payment in arrears).
  - Moving costs
- Service Costs:
  - Housing search and placement
  - Housing stability case management
  - Mediation
  - Legal services
  - Credit repair

#### 19. Prioritization for Eligible Program Participants

- Chronically Homeless households
- Households with the longest history of homelessness
- Households with the most severe service needs (as determined by the VI-SPDAT score)

#### 20. Minimum Standards of Assistance

- Housing standards: sub-recipient must ensure and document that units pass HUD Habitability Standards
- Fair Market Rent: Rental assistance may cover up to the FMR for a unit and sub-recipient must maintain documentation in client file.
- Rent reasonableness: Units must comply with HUD's rent reasonableness standards

- The program will work with the participant to determine the amount of rent that is needed to ultimately achieve housing stability. The amount of rental assistance must be reviewed every 3 months and continued need determined through consultation with the participation and case management.
- Sub-recipients of Rapid Re-Housing programs must offer the core components to RRH: at minimum, housing identification, move in and rental assistance, and case management and support services.
- Case management should occur not less than once per month to assist the program participant in ensuring long-term housing stability.
- Rental assistance cannot be provided to a program participant who is already receiving rental assistance or living in a housing unit receiving rental assistance or operating assistance through other Federal, State, or local sources.
- Lease requirements: a written lease between the owner and the program participant is required for TBRA and PBRA; for program participants living in a housing with PBRA, the lease must have an initial term of one year. There is no minimum lease period for TBRA; the only exception to the written lease requirement is in the case of rental assistance provided solely for rental arrears.

HUD ESG-Funded Rapid Re-Housing (City of Erie, DECD)

The City of Erie’s Department of Economic and Community Development (DECD) maintains ESG Written Standards developed in consultation with the CoC and Erie County Home Team that contain requirements for the City’s ESG Rapid Re-Housing funding. The terms of eligibility, priorities, and amount of assistance of DECD’s ESG funds may be modified as needed based on input from the CoC and Erie County Home Team. HUD ESG regulations (24 CFR 576) and City ESG Written Standards may contain additional requirements not listed below.

21. Eligibility Criteria

- Participants must be Literally Homeless or Fleeing Domestic Violence (Category 1 and Category 4 of HUD’s Homeless Definitions);
- Participants must be referred by CoC members to the City’s ESG Rapid Re-Housing sub-recipient using current versions of universal forms and releases of information:
- DECD’s order of priority for documenting evidence is as follows: 1) Third party documentation (including HMIS); 2) Documented intake worker observations; and 3) Written self-certification of homelessness by the person seeking assistance;
- The household/participant may not already be receiving duplicative rental assistance from other programs;
- Initial income assessments will use the City’s current applicable income limits as provided on universal intake forms and subject to medication; and

- Participants may not have received ESG Rapid Re-Housing financial assistance within the prior twelve months unless a waiver is granted in accordance with the City's ESG Written Standards.

## 22. Eligible Costs

- Short-term rental assistance (typically one month, but up to three months) and security deposit. Maximum assistance limited to \$2,000.

## 23. Prioritization for Eligible Program Participants

- DECD Rapid Re-Housing assistance priority will be based on the CoC's Coordinated Entry standards and ESG Rapid Re-Housing sub-recipient procedures (waiting lists, written policies, etc.).

## 24. Minimum Standards of Assistance

- Housing units must meet City of Erie code standards for rental units; Emergency Solutions Grant (ESG) requirements for habitability and lead-based paint; and rent reasonableness based on the current HUD fair market rent (FMR) requirements for the local area;
- The ESG Rapid Re-Housing sub-recipient and landlords must follow the provisions of the City's requirements and HUDs Final Rule (effective December 16, 2016) for Violence Against Women Reauthorization Act, including providing notice of occupancy rights, inclusion of lease provisions, and other applicable protections; and
- The ESG Rapid Re-Housing sub-recipient must assess the appropriate amount of assistance from the various funding sources and document this assessment at least once annually.

## **E. Definitions**

*Chronically Homeless-* (1) An individual who : (i) is homeless and lives in a place not meant for human habitation, a safe haven, or in an emergency shelter; and (ii) has been homeless and living or residing in a place not meant for human habitation, a safe haven, or in an emergency shelter continuously for at least one year or on at least four separate occasions in the last 3 years; and (iii) can be diagnosed with one or more of the following conditions: substance abuse disorder, serious mental illness, developmental disability (as defined in section 102 of the Developmental Disabilities Assistance Bill of Rights Act 2000 (42 USC 15002), post-traumatic stress disorder, cognitive impairments resulting from brain injury, or chronic physical illness or disability; (2) an individual who has been residing in an institutional care facility, including a jail, substance abuse or mental health treatment facility, or other similar facility for fewer than 90 days and met all of the criteria in paragraph (1) of this definition, before entering that facility; or (3) a family with an adult head of household who meets all of the criteria in paragraph (1) of this definition, including a family whose composition has fluctuated while the head of household has been homeless. 24 CFR 578.3.

*Centralized or Coordinated Assessment System-*Means a process designed to coordinate program participant intake assessment and provisions of referrals. A centralized or coordinated assessment system covers the geographic area, is easily accessed by individuals and families seeking housing or services, is well advertised, and includes a comprehensive and standardized assessment tool. 24 CFR 578.3.

*Family-* Family includes, but is not limited to, regardless of marital status, actual or perceived sexual orientation, or gender identity, any group of persons presenting for assistance together with or without children and irrespective of age, relationship, or whether or not a member of household has a disability. A child who is temporarily away from the home because of placement in foster care is considered a member of the family.

*Homeless-* means (Category 1) an individual or family who lacks a fixed, regular, and adequate nighttime residence, meaning: (i) an individual or family with a primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodations for human beings, including a car, park, abandoned building, bus or train station, airport, or camping ground; (ii) an individual or family living in a supervised publicly or privately operated shelter designated to provide temporary living arrangements (including congregate shelters, transitional housing, and hotels and motels paid for by charitable organizations or by Federal, State, or Local Government programs for low-income individuals); or (iii) an individual who is exiting an institution where he or she resided for 90 days or less and who resided in an emergency shelter or place not meant for human habitation immediately before entering the institution; (Category 2) An individual or family who will imminently lose their primary nighttime residence, provided that: (i) The primary nighttime residence will be lost within 14 days of the date of application for homeless assistance; (ii) No subsequent residence has been identified; and (iii) The



individual or family lacks the resources or support networks, e.g., family, friends, faith-based or other social networks, needed to obtain other permanent housing; or (Category 4) Any individual or family who: (i) Is fleeing, or attempting to flee, domestic violence, dating violence, sexual assault, stalking, or other dangerous or life-threatening conditions that related to violence against the individual or a family member, including a child, that has either taken place within the individual's or family's primary nighttime residence; (ii) Has no other residence; and (iii) Lacks the resources or support networks, e.g., family, friends, and faith-based or other social networks, to obtain other permanent housing. 24 CFR 578.3.

*Housing First*- An approach to quickly and successfully connect individuals and families experiencing homelessness to permanent housing without preconditions and barriers to entry, such as sobriety, treatment or service participation requirements. Supportive services are offered continuously to maximize housing stability and prevent returns to homelessness, as opposed to addressing predetermined treatment goals prior to permanent housing entry.

*Permanent Housing (PH)*- Community-based housing without a designated length of stay, and includes both Permanent Supportive Housing (PSH) and Rapid Re-housing. To be permanent housing, the program participant must be the tenant on a lease for a term of at least one year, which is renewable for terms that are a minimum of one month long, and is terminable only for a cause. 24 CFR 578.3.

*Permanent Supportive Housing (PSH)*- Means permanent housing in which supportive services are provided to assist homeless person with a disability to live independently. 24 CFR 578.3.

*Rapid Re-Housing*- An intervention designed to help individuals and families exit homelessness as quickly as possible, return to permanent housing, and achieve stability in that housing. Rapid Re-Housing assistance is offered without preconditions (such as employment, income, absence of criminal record, or sobriety) and the resources and services provided are typically tailored to the unique needs of the household. The core component of a Rapid Re-Housing program are housing identification and relocation, short-and/or medium-term rental assistance and move-in (financial) financial assistance, and case management and housing stabilization services. The assistance is subject to the definitions and requirements set forth in 24 CFR 578

*VI-SPDAT*- (Vulnerability Index-Service Prioritization Decision Assistance Tool) The evidence-based prescreening tool that will be utilized by the Erie County Coordinated Entry System to determine initial acuity (the presence of an issue) and utilized for housing triage prioritization and housing placement.

**Racial Disparity Assessment 2018**  
**Erie City & County CoC**  
**PA-605**

1. Census Data 2016

**Erie County Population By Race & Ethnicity**

White	84.6%
Black	7.0%
Hispanic	4.1%
Multiracial	2.0%
Asian	1.8%
Other	0.2%
Native American or Alaskan Native	0.2%
Pacific Islander or Native Hawaiian	<0.1%

Source: Census Bureau, 2016 American Community Survey (ACS) 1-year estimate

2. Coordinated Entry Race Data 01/23/2018 - 08/13/2018

12/2018 - Race		Total
White		765
Black or African American		519
Asian		3
American Indian or Alaska Native		8
Native Hawaiian or Other Pacific Islander		3
Multiple races		50

<https://sp5.servicept.com/erie/com.bowmansystems.sp5.core.ServicePoint/index.html#reportsC>

13/2018		CoC-APR - Service
Client Doesn't Know/Client Refused		25
Data not collected		5
<b>Total</b>		<b>1378</b>

White	765	55.5%
Black or African American	519	37.7%
Asian	3	.2%
American Indian or Alaskan Native	8	.6%
Native Hawaiian or Other Pacific Islander	3	.2%
Multiple Races	50	3.6%
DK/Refused/Not Collected	30	2.2%
<b>Total</b>	<b>1378</b>	<b>100%</b>

Based on the above data, we have determined that we do have racial disparity in our homeless system. We will use this data by incorporating it into our Strategic Plan, currently under development. We will examine available resources to assist us in addressing this disparity in our homeless system of care.

**Erie County, PA  
Homeless Continuum of Care  
Coordinated Entry Policies and Procedures**

Created December 2017

Adopted by the Erie Home Team on January 11, 2018

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## Summary of Process – A Cheat Sheet

1. Clients seeking Homeless assistance in Erie County will contact the Coordinated Entry System – administered by Erie County Care Management (ECCM). ECCM will refer clients to emergency shelter or transitional housing based on availability.
  - a. All clients seeking Emergency Shelter will be placed in Emergency Shelter on a first come, first served basis.
    - i. If Emergency Shelter is not available, ECCM will NOT maintain an Emergency Shelter wait list. Instead, clients will be asked to call ECCM by 10:00 am the following morning if they are still in need of Emergency Shelter. ECCM will refer clients to emergency resources as needed.
2. No later than (7) days of a client’s entry into Emergency Shelter or Transitional Housing, ECCM will utilize the VI SPDAT to conduct an assessment of the client’s need for a housing intervention, either rapid re-housing or permanent supportive housing. The VI-SPDAT along with additional local criteria will prioritize each client for either no housing intervention at all, Transitional Housing, Rapid Re-Housing, or Permanent Supportive Housing.
  - a. ECCM will maintain a Master List for Rapid Re-Housing and a Master List for Permanent Supportive Housing.
  - b. At least every two (2) weeks, ECCM will contact each Rapid Re-Housing and Permanent Supportive Housing provider to find out how many households the provider can serve and will refer clients to each provider based on top priority on the Master List.
3. Participating service provider agencies must accept all referrals unless in the event of a “good cause.” Once a client is accepted into a program, the service provider agency can submit a request to a Case Review Committee that a client be moved to another program based on “good cause.” If the Case Review Committee approves the request, the client will be moved to another program once there is an open bed. The Case Review Committee may not approve the request.
4. Clients have the right to refuse a service. If they choose to refuse a service, they will remain on any wait lists for any housing interventions for which they are eligible.
5. The Coordinated Entry Sub-Committee of the Erie Home Team will meet regularly and will monitor overall progress, including stakeholder adherence to these policies and procedures.

## Coordinated Entry System - Program Overview

The US Department of Housing and Urban Development (HUD) requires every Continuum of Care (CoC) to form a Coordinated Entry System (CES) and begin implementation of CES by January 23, 2018.

CES is a centralized or coordinated process designed to create a standard community method for program participant intake and screening, assessment, and provision of referrals for individuals and families seeking Homeless assistance.

A centralized or Coordinated Entry System is required by HUD to:

- cover the entire geographic area;
- be well advertised;
- include a comprehensive and standardized assessment tool;
- provide an initial, comprehensive assessment for housing and services; and
- include a specific policy to guide the operation of the Coordinated Entry System to address the needs of individuals and families who are fleeing, or attempting to flee, domestic violence, dating violence, sexual assault, or stalking, but who are seeking shelter or services from non-victim specific providers.

The Erie CoC CES is part of a collaborative process led by the Home Team and is a community-wide strategy to quickly move people from Homelessness to permanent housing. It intends to:

- Establish a streamlined and uniform method of serving clients in need of housing crisis services, using a single point of entry model;
- Reduce burden on both client and provider by having a unified systemic approach to quickly identify, assess, and refer clients to the best intervention to meet clients' specific needs at first contact;
- Increase collaboration between agencies in serving client needs more effectively and efficiently; and
- Collect data on community trends of housing needs to better target limited resources.

## Definitions and Terms

### Defining Homelessness

Clients seeking assistance to prevent or end a Homeless episode must meet the following HUD definition of Homelessness in order to be eligible for any type of service. HUD has four categories of circumstances that define Homelessness.

#### 1. Literal Homelessness:

- An individual or family with a primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings, including a car, park, abandoned building, bus or train station, airport, or camping ground;
- An individual or family living in a supervised publicly or privately operated shelter designated to provide temporary living arrangements (including congregate shelters,

Emergency Shelter, Transitional Housing, and hotels and motels paid for by charitable organizations or by federal, state, or local government programs for low-income individuals);

- An individual who is exiting an institution where he or she resided for ninety (90) days or less and who resided in an Emergency Shelter or place not meant for human habitation immediately before entering that institution.

## 2. Imminent Risk of Homelessness

- An individual or family who will imminently lose their primary nighttime residence, provided that:
  - Residence will be lost within fourteen (14) days of the date of application for Homeless assistance;
  - No subsequent residence has been identified; and
  - The individual or family lacks the resources or support networks needed to obtain other permanent housing.

## 3. Unaccompanied youth under twenty-five (25) years of age, or families with children and youth, who do not otherwise qualify as Homeless under this definition, but who:

- Are defined as Homeless under the other listed federal statutes; Have not had a lease, ownership interest, or occupancy agreement in permanent housing during the sixty (60) days prior to the Homeless assistance application;
- Have experienced persistent instability as measured by two (2) moves or more during in the preceding sixty (60) days; and
- Are expected to continue in such status for an extended period of time due to special needs or barriers.

## 4. Fleeing/ Attempting to Flee Domestic Violence

- Any individual or family who:
  - Is fleeing, or is attempting to flee, domestic violence, dating violence, sexual assault, stalking, or other dangerous or life-threatening conditions that relate to violence against the individual or a family member, including a child, that has either taken place within the individual's or family's primary nighttime residence or has made the individual or family afraid to return to their primary nighttime residence;
  - Has no other residence; and
  - Lacks the resources or support networks e.g., family, friends, and faith-based or other social networks, to obtain other permanent housing to obtain other permanent housing.

## HUD's Definition for Chronic Homelessness

- A "Homeless individual with a disability," as defined in the Act, who:
  - Lives in a place not meant for human habitation, a safe haven, or in an Emergency Shelter; and

- Has been Homeless (as described above) continuously for at least twelve (12) months or on at least four (4) separate occasions in the last three (3) years where the combined occasions must total at least twelve (12) months
  - Occasions separated by a break of at least seven (7) nights
  - Stays in institution of fewer than ninety (90) days do not constitute a break
- An individual who has been residing in an institutional care facility for fewer than ninety (90) days and met all of the criteria in paragraph (1) of this definition, before entering that facility; or
- 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 paragraphs (1) or (2) of this definition, including a family whose composition has fluctuated while the head of household has been Homeless.

### Screenings and Assessments

When a person seeking Homeless assistance contacts Coordinated Entry (ECCM), the Coordinated Entry staff will conduct a brief screening to screen for eligibility for Homeless Services. This will be called the “screening.”

No later than seven (7) days after the client has resided in Emergency Shelter or Transitional Housing, ECCM will conduct the VI-SPDAT assessment. This will be called the “assessment.” ECCM will also conduct VI-SPDAT assessment on those individuals that are not residing in emergency shelter and will make a plan with the client to schedule a time.

### Housing Definitions

#### Prevention

- Activities or programs designed to prevent the incidence of Homelessness, including, but not limited to:
  - Short-term subsidies to defray rent and utility arrearages for families that have received eviction or utility termination notices;
  - Security deposits or first month’s rent to permit a Homeless family to move into its own apartment;
  - Mediation programs for landlord-tenant disputes;
  - Legal services programs that enable representation of indigent tenants in eviction proceedings;
  - Payments to prevent foreclosure on a Home; and
  - Other innovative programs and activities designed to prevent the incidence of Homelessness.

#### Diversion

- Assisting individuals/ families to examine his, her, or their resources and options other than entering the Homeless system

#### Emergency Shelter/ Housing



- Providing short-term Homeless prevention assistance to individuals or families at imminent risk of losing their own housing due to eviction, foreclosure, or utility shutoffs.

#### Transitional Housing

- The movement of Homeless individuals and families to permanent housing within a reasonable amount of time, usually twenty-four (24) months. Transitional Housing includes housing primarily designed to serve deinstitutionalized Homeless individuals and other Homeless individuals with mental or physical disabilities and Homeless families with children.

#### Rapid Re-Housing

- Rapidly connecting families and individuals experiencing Homelessness to permanent housing through a tailored package of assistance that may include the use of time-limited financial assistance and targeted supportive services.

#### Permanent Supportive Housing

- Housing for individuals or families experiencing Homelessness that provides additional wrap around services to provide individuals and families with the opportunity to remain stably housed

#### Permanent Housing

- Individuals or families experiencing Homelessness are placed into a stable, long term, and permanent housing opportunity

## Roles and Responsibilities

**The Home Team Executive Committee** is responsible to:

- Approve policies and procedures that guide daily implementation of the Coordinated Entry System;
- Consider and act on recommendations from the Coordinated Entry Committee regarding changes to the overall process;
- Ensure overall effective operation of the Coordinated Entry System;
- Ensure that the Coordinated Entry System meets HUD’s basic requirements.

The Erie Home Team is the **membership of the Continuum of Care**. The Home Team will

- Receive updates from the CoC Board and the Coordinated Entry Subcommittee on successes and challenges of Coordinated Entry implementation;
- Provide continual feedback about the Coordinated Entry process to the Coordinated Entry Committee; and
- Vote to approve changes to CES.

**The Coordinated Entry Sub-Committee** is an official sub-committee of the Erie Home Team. The Coordinated Entry Sub-Committee will:

- Oversee overall operations and policy compliance of the CES;

- Convene monthly meetings to provide a forum for the discussion of information and concerns to reevaluate Coordinated Entry policies and procedures;
- Review at least annually Coordinated Entry policies and procedures and make recommendations to the CoC Board on changes and revisions;
- Review data collected through the Homeless Management Information System (HMIS) and through other means to evaluate strengths and potential areas of improvement for the entire CES, provide this information to the Home Team for discussion, as well as approve any recommendations;
- Evaluate the performance of the administering agency on an annual basis at minimum;
- Evaluate the adherence of participating service provider agencies to the policies and procedures at least bi-annually.

Erie County DHS is responsible for overall oversight of CES in its role as the CoC Collaborative Applicant, the entity receiving funding through HUD for CES, and a funder of CES.

The Erie CoC has selected ECCM to act as the **Administering Agency** to implement Erie's CES and will hire Coordinated Entry Specialists, who will be supervised by the Mental Health Supervisor.

ECCM as the administering agency will:

- Adequately train Coordinated Entry staff, including in the use of the VI-SPDAT to assess client need, and effective and culturally competent practices for working with people experiencing and at risk of Homelessness.
- Coordinate with the HMIS Lead for HMIS training.
- Ensure that any questions, concerns, or complaints from clients are handled professionally and in a timely manner.
- Ensure that any questions, concerns, or complaints from participating service agencies or other stakeholders are handled professionally and in a timely manner.
- Coordinate the creation and dissemination of marketing materials.

The Administering Agency will hire **Coordinated Entry Specialists** who will:

- Perform the initial client screening to ensure call is housing-related, and if not, refer to 2-1-1 or another appropriate agency;
- Utilize the VI-SPDAT to conduct initial assessments on people seeking Homeless assistance services;
- Enter all VI-SPDAT assessment information into HMIS in real time;
- Enter clients into HMIS as needed;
- Review the queue, refer clients, and work with provider agencies to ensure that clients are receiving services in a timely fashion;
- Record any questions for case reviews with the larger Coordinated Entry Sub-Committee and the Home Team; and
- Assist participating agencies to address any issues and questions.

Service provider agencies that receive CoC, Emergency Solutions Grant (ESG), PATH, Homeless Assistance Program, Human Services Development Fund (HSDf), and any other County DHS funding must participate in CES. Service providers that are not required to participate are encouraged to participate.

**Participating Service Provider Agencies<sup>1</sup> will:**

- Refer any individuals that call or appear in person directly to ECCM for an initial screening ;
- Update ECCM at 9:00 AM or as changes occur regarding the number of available Emergency Shelter and / or Transitional Housing beds;
- Accept referrals only from ECCM for Emergency Shelter, Transitional Housing, and Permanent Housing with the Exception of Domestic Violence Providers and Veteran’s Affairs ;
- Refer to the Rapid Re-Housing Master List at least once every two (2) weeks and accept referrals from ECCM for Rapid Re-Housing from this list, based on availability of units and services;
- Refer to the Permanent Supportive Housing Master List at least once every two (2) weeks and accept referrals from ECCM for Permanent Supportive Housing from this list, based on availability of units and services;
- Follow the CES Referral Acceptance and Rejection Policy;
- Bring issues and concerns about the process from both the screening perspective as well as the client perspective to the monthly larger case review process; and
- Provide feedback to the Home Team, ECCM, and the Erie County Department of Human Services (DHS) to ensure that discussion of successes and challenges to Coordinated Entry implementation are regularly discussed and considered.

**VAMC and Domestic Violence Provider (s)<sup>2</sup> will:**

- Continue to provide initial screening to clients that present for assistance directly to them unless the client indicates that s/he would like to work with ECCM directly;
- Accept referrals when there are open beds that have not already been filled by the provider itself from ECCM for Emergency Shelter, Transitional Housing, and Permanent Housing with the Exception of Domestic Violence Providers and Veteran’s Affairs;
- Coordinate with ECCM and the overall Coordinated Entry system as needed;
- Direct clients the provider is unable to serve itself back to ECCM and ensure a “warm hand off” to ECCM;
- Bring issues and concerns about the process from both the screening perspective as well as the client perspective to the monthly larger case review process; and

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<sup>1</sup> This includes all service provider agencies participating in Coordinated Entry with the exception of the VA Medical Center and the domestic violence provider (s.) There is a separate list of roles and responsibilities for these two types of providers.

<sup>2</sup> Erie’s Coordinated Entry Policies and Procedures outlines a process by which those people that report they have served in the Armed Forces and / or are fleeing domestic violence will have a choice of whether or not to participate in ECCM’s initial screening or have their initial screening conducted by the VAMC or a Domestic Violence Provider. Therefore, the roles and responsibilities for VAMC and Domestic Violence differ slightly from those for the participating service providers.

- Provide feedback to the Home Team, ECCM, and the Erie County Department of Human Services (DHS) to ensure that discussion of successes and challenges to Coordinated Entry implementation are regularly discussed and considered.

The **Coordinated Entry Case Review Committee** will:

DHS will be the lead in recruiting members to and convening a Case Review Committee. The Case Review Committee will:

- Meet every two weeks to consider requests from service provider agencies to move a client and review the number and reason for immediate client rejections.
- Inform provider agencies of their decision.

All service provider agencies must accept all agency appropriate referrals unless there is a “good cause”; Once a client is in a program, the provider agency can request to move a client for “good cause.” “Good cause” is defined later in this document.

## Program Elements

### Access

#### **Accessing Services**

Clients will access the CES through a 24-hour hotline 814-SHELTER (814-743-5837).

To ensure 24-hour access to the CES, ECCM will assign a staff member to a cell phone after normal operating hours to answer calls to the hotline. ECCM will have up-to-date information on open emergency shelter beds in order to refer clients after hours. After the normal business hours of 8:30 AM to 5:00 PM, ECCM will conduct a screening only on clients seeking services. Arrangements will be made with the client to conduct a VI-SPDAT during business hours and no later than 7 days.

An option to do an in-person screening will be available at the ECCM main location at 1601 Sassafras Street, Erie, Pennsylvania 16502. In-person screenings are only offered during the normal operating hours of ECCM from 8:30 am to 5:00 pm Monday through Friday.

### Assessment Tools and Protocols

The goal is to consistently apply a standardized assessment tool to:

- Achieve fair, equitable, and equal access to services within the community, and
- Make appropriate referrals with a consistent and transparent process.

#### **Screening Tool**

The Erie CoC has chosen to utilize a set of basic questions that will screen individuals and households seeking homeless assistance for basic eligibility. ECCM will conduct the screening.

The Erie CoC has chosen to provide clients of certain subpopulations with the option of continuing the initial screening with another entity besides ECCM:

**Veterans:** One of the first questions asked in the screening will be: “Have you served on Active Duty in the Armed Forces?” Individuals will then be offered the opportunity to either continue the screening with ECCM or contact the Veterans Affairs Medical Center (VAMC) for housing eligibility determination. The Homeless Outreach Team at the VAMC may work with a client to help connect him or her to services offered through the VA.

If the VA is unable to serve the client with VA resources, the VA will either conduct the VI-SPDAT assessment with the client and provide the information to ECCM OR will refer the client back to ECCM who will conduct the VI SPDAT assessment.

The VI-SPDAT assessment will then enable a client that is ineligible for VA services or for whom services are unavailable so that the client can be prioritized for rapid re-housing or permanent supportive housing.

**People Fleeing Domestic Violence:** One of the first questions asked in the screening will be: “Are you fleeing domestic violence?” If the answer is yes, the next question will be “Are you fearful for your safety right now?” The caller will be asked if they would like to continue with the screening or be referred to a domestic violence provider. If the client chooses to continue the screening, ECCM will not include client identifying information within HMIS and would instead provide a unique ID and use that ID to identify the client. If the client chooses to work directly with the domestic violence service provider, the domestic violence service provider will conduct the VI-SPDAT assessment and provide the information to ECCM without client identifying information.

### **Nondiscrimination**

Coordinated Entry Specialists will ensure that no client is disqualified due to possible barriers to services and comply with equal access and nondiscrimination provisions of Federal civil rights laws. In addition, coordinated entry staff and participating agencies will ensure that no clients are referred to any particular housing program because of race, color, national origin, religion, sex, disability, or the presence of children.

### **Assessment Tool**

The Erie CoC has chosen to utilize the VI-SPDAT to create a standard way to identify clients that should be recommended for each housing and support intervention. According to OrgCode who developed the tool, the VI-SPDAT helps identify who is in the greatest need for each type of intervention and therefore who might benefit the most from the particular service.

ECCM will re-survey clients with the VI-SPDAT after one year or if the client has had significant enough changes in his or her life to warrant a new VI-SPDAT assessment.

## Wait Times

### *Emergency Shelter*

If an Emergency Shelter bed is available, clients will be referred to a shelter and placed in a program on the same day as their request. If someone is referred and does not show, the Emergency Shelter will not hold a bed more than three hours from the time of referral, unless prior arrangements were made with the referred client.

If an Emergency Shelter bed is not available, ECCM staff will make suggestions for organizations that the individual may be able to call. There will not be a wait list. Therefore, the client will be asked to call back the next day to reconfirm that s/he is in need of Emergency Shelter and to find out if there is availability the next day. For those clients not entering emergency shelter due to lack of availability, ECCM will either schedule a time with the client to conduct the VI-SPDAT in the next few days or will conduct the VI-SPDAT over the phone, if time permits.

### *Transitional Housing, Rapid Re-Housing, and Permanent Supportive Housing*

Clients may reside in each of these programs for varying lengths of time. Therefore, it will not be possible to provide clients on the Master List (wait list) with information on the date on which they will enter one of these programs.

## Who

ECCM will utilize the VI-SPDAT either in person or by phone with each person seeking homeless assistance. The VI-SPDAT data will be entered into HMIS.

## Training & Monitoring

ECCM supervisory staff will be trained to utilize the VI-SPDAT and will then either provide the training to their own staff on an annual basis or the Continuum of Care will arrange for an outside entity – either local or national – to provide training.

The Coordinated Entry Subcommittee will monitor use of the VI-SPDAT on a quarterly basis and will provide additional training and feedback as needed.

The Continuum of Care is responsible for updating and distributing training protocols at least annually.

## Additional Notes

ECCM's initial screening and the VI-SPDAT assessment will not include obtaining the necessary documentation that clients may require to enter some programs.

## Prioritization

## Tool

The assessment tool - the VI SPDAT - requires the surveyor to ask the client questions in the following four categories with the total possible score in each category included in parentheses:

1. pre-survey question asking if the person is age 60 or over (1),
2. history of housing and Homelessness (2),
3. risks (4),
4. socialization and daily functions (4), and
5. wellness (6).

Based on the client's answers, a score is assigned to them; it is this score that determines to which, if any, housing intervention the client will be referred. Possible housing interventions are rapid re-housing and permanent supportive housing. The highest possible score on the VI-SPDAT if used only as created is 17.

The VI-SPDAT score does NOT determine entry to emergency shelter as emergency shelter will remain a first come, first serve service as long as the client meets basic eligibility criteria.

The Erie CoC has decided to add one additional point for clients that report they are fleeing domestic violence thereby increasing the total possible score to 18.

The scoring information below only reflects one of the three versions of the VI-SPDAT. ECCM will utilize the appropriate version; versions are as follows (a) individuals, (b) families, and (c) youth. ECCM will utilize the correct scoring information based on the actual version used.

Total Score	Housing / Service Intervention Recommendation
0-3	No Housing Intervention
4-7	Rapid Re-Housing
8+	Permanent Supportive Housing

## Prioritization or Master List

ECCM as the CES Administrator will maintain a "Master List" for Rapid Re-Housing and a separate "Master List" for Permanent Supportive Housing.

The "Master List" prioritizes clients for rapid re-housing and permanent supportive housing with those with the highest scores at the top of the list. For those households with identical scores, they will be in order of the first that presented for assistance.

At least once a month, ECCM will meet with all rapid re-housing and permanent supportive housing providers to review the referrals accepted and any discussion points regarding the process. At this time, each provider will inform ECCM of the number of new households that

they can serve and ECCM can refer to them. ECCM will refer clients / households at the top of the priority list.

Because permanent supportive housing openings do not occur very often, ECCM and the permanent supportive housing providers can determine an alternative meeting schedule if monthly meetings are not productive due to lack of openings.

Prioritization criteria for each major housing intervention will include use of the VI SPDAT score along with additional criteria as follows:

- For Rapid Re-Housing (RRH), prioritization will be given to the most vulnerable families and individuals based on their VI-SPDAT score.
- For Transitional Housing (TH), current program eligibility criteria will be utilized.
- For Permanent Supportive Housing (PSH), prioritization will be given to families and individuals who are:
  - 1) chronically homeless as defined by HUD,
  - 2) have the longest history of Homelessness, and/or
  - 3) have the most severe service needs as determined by their VI-SPDAT score.

### **Client Refusal**

A client may choose to reject an offer of referral to a rapid re-housing or permanent supportive housing provider. In this event, the client remains on the master list in the same place of priority. The client can be offered a placement for rapid re-housing or permanent supportive housing up to three times. If the client refuses three times, then ECCM can choose to remove the client from the master list and require the client to call back to request to be placed on the master list once again.

If the client has been prioritized for a certain type of housing intervention and wishes to choose another, it is up to the Coordinated Entry Subcommittee to determine whether or not to agree to the client's request.

The client has the right to refuse service from one organization but remain on the rapid re-housing or permanent supportive housing master list and wait for another organization to have availability.

If a client requests a specific organization through whom to receive housing assistance, the client has the right to wait until an opening becomes available for rapid re-housing or permanent supportive housing provided by the desired organization.

### **Privacy and Security Protections**

The same HMIS data privacy and security protections that apply to HMIS practices apply to the Master List.



## **Nondiscrimination**

The CoC and Coordinated Entry process 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.

In some circumstances some projects may use disability status or other protected class information to limit enrollment, but only if Federal or State statute explicitly allows the limitation.

Coordinated Entry Specialists will ensure that no client is screened out due to possible barriers to services and comply with equal access and nondiscrimination provisions of Federal civil rights laws. In addition, coordinated entry staff and participating agencies will ensure that no clients are referred to any particular housing program because of race, color, national origin, religion, sex, disability, or the presence of children.

## Referral

All organizations required to participate in CES will utilize the coordinated entry process as the only referral source to fill any program vacancies.

## Nondiscrimination

Coordinated Entry Specialists will ensure that no client is screened out due to possible barriers to services and comply with equal access and nondiscrimination provisions of Federal civil rights laws. In addition, coordinated entry staff and participating agencies will ensure that no clients are referred to any particular housing program because of race, color, national origin, religion, sex, disability, or the presence of children.

## Process and Protocol by Intervention

### Emergency Shelter

- Prior to the implementation start date of coordinated entry, each emergency shelter provider must inform ECCM of the hour by which clients must arrive to their location in order to enter the emergency shelter program.
- ECCM will call or email emergency shelter providers informing them that a client has been referred to them. ECCM will send the referral through HMIS and emergency shelter providers will have access to client information including the initial VI SPDAT assessment.
- Emergency shelter providers must accept referrals and may reject some referrals by following the rejection policy.
- There is no priority list and clients will be served on a first come, first serve basis.

### *Emergency Shelter Low Barrier Policy*

In order to ensure that the most vulnerable individuals are able to access emergency shelter, all emergency shelters will be required to begin to operate as lower barrier shelters. For those emergency shelters that currently have several rules, Erie DHS and the Home Team will work with them in a phase-in process to begin to reduce their rules. Erie DHS and the Home Team will create a plan with the emergency shelter that specifies the barriers that will be removed and a timeline for doing so.

### *Emergency Shelter Wait List – Lack of Availability of Emergency Shelter Beds*

- If there are no available emergency shelter beds, clients will not be placed on a wait list. Clients will be asked to call by 10:00 am the next morning to indicate that they are still in need of an emergency shelter bed and will be provided with a bed if there is one available the next morning. ECCM will also assist the client with referrals to other available resources such as food pantries, hotel/motel vouchers, etc.

### *Transitional Housing*

ECCM will refer clients to transitional housing based on the households that score highest on the VI-SPDAT for either rapid re-housing or permanent supportive housing. If rapid re-housing or permanent supportive housing is not available, ECCM will then refer clients to transitional housing based on the eligibility criteria of current programs.

For example, a client is at the top of the Master List for rapid re-housing and there is no rapid re-housing available. The client has reported that she is fleeing domestic violence and there is an available transitional housing bed for people fleeing domestic violence. Therefore the client would be referred to the transitional housing program.

### *Rapid Rehousing, Permanent Supportive Housing, and Permanent Housing*

The Prioritization List - to be referred to as the “Master List” - prioritizes clients for rapid re-housing and permanent supportive housing with those with the highest scores at the top of the list. For those households with identical scores, they will be in order of the first that presented for assistance.

### *Rejection Policies*

Coordinated Entry is designed to ensure that clients receive needed housing interventions and that service providers aid clients in securing stable housing. However, coordinated entry can result in rejection by either the client or service provider.

#### **Consumers**

Consumers have the right to refuse the referral that was made by the Coordinated Entry Specialists.

#### **Service Providers**

Participating service provider agencies must accept all referrals unless there is a “good cause”. The number and reason for rejections will be reviewed by the Case Review Committee to analyze any potential trends.

Once a client is in a program, the service provider agency can submit a request to a Case Review Committee that a client be moved to another program based on “good cause.” If the Case Review Committee approves the request, the client will be moved to another program once there is an open bed. The Case Review Committee may not approve the request.

“Good cause” is defined as follows: the service provider must provide evidence that the client poses a real safety risk to other clients in the program and / or provider staff.

DHS will recruit members to and convene the Case Review Committee on a regular schedule.

Service providers with multiple refusals and rejections within a short time period will be reviewed by the Continuum of Care Board.

## Data Management

- Erie CoC will use HMIS as part of its coordinated entry process, collecting, using, storing, sharing, and reporting participant data associated with the coordinated entry process.
- At time of first contact ECCM will obtain participant consent to share and store participant information for purposes of assessing and referring participants through the coordinated entry process.
- Services to participants will not be denied in the event the participant refuses to allow their data to be shared unless federal statute requires collection, use, storage, and reporting of a participant’s personally identifiable information (PII) as a condition of program participation.
- Erie County CoC will ensure all users of HMIS are informed and understand the privacy rules associated with collection, management, and reporting of client data.

## Evaluation

- The Erie Continuum of Care and its coordinated entry process will participate in continuous editing and reviewing process to ensure that its policies and procedures reflect the service providers as well as the clients of Erie Continuum of Care.
- The evaluation of policies and procedures will be conducted by the lead agencies, ECCM and Erie County DHS, in coordination with the Coordinated Entry Subcommittee and Home Team. Policies and procedures will be reviewed on occasion during Coordinated Entry Subcommittee meetings as well as large Home team meetings. Suggestions to alter the policies and procedures will be made by the Coordinated Entry Subcommittee and approved by the Home Team at least annually.

- Erie Continuum of Care will actively solicit feedback on an ongoing basis to evaluate the screening, assessment, and referral processes associated with Coordinated Entry. Feedback should be provided to the chair of the Coordinated Entry Subcommittee.
- The Erie Continuum of Care and participating agencies will ensure adequate privacy protections of all participant information collected in the course of the annual coordinated entry evaluation

## Transportation

It is often a challenge for people experiencing homelessness to access transportation to a homeless assistance program. ECCM has a van that may be able to provide transportation if the driver is available. Transportation will remain a challenge that this coordinated entry system will be unable to solve. The Home Team Executive Committee and Home Team will review possible strategies to assist with transportation.

## Marketing and Outreach Strategy

The Home Team will utilize its Education and Outreach Committee in partnership with ECCM to implement a marketing plan to ensure all individuals and families within the County are aware of and know how to access Coordinated Entry through the following activities:

- Create informational cards and flyers to be distributed at all provider locations;
- Conduct trainings for all providers on coordinated entry;
- Add coordinated entry hotline and information to electronic sources, such as provider and county webpages, facebook, etc.;
- Make flyers and informational cards available at community locations where people experiencing homelessness congregate, such as bus stops, library, community meals, churches, etc.

Marketing materials will be annually reviewed by the Coordinated Entry Subcommittee and the Education and Outreach Committee may recommend or be asked to make changes to the marketing materials.

The Committee may also consider implementing the following activities:

- Conduct trainings on coordinated entry with all community partners who may come into contact with persons experiencing a housing crisis such as hospitals, schools, libraries, and human service providers outside of the Homelessness service delivery system.
- Create public service announcement of resources to be advertised through local television and radio.