

**Long Beach Continuum of Care  
Coordinated Entry System (CES)  
Policies and Procedures**



**Department of Health and Human Services**  
Homeless Services Bureau

June 2023

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## OVERVIEW

Each CoC and ESG recipient operating within the CoC's geographic area must work together to ensure the CoC's coordinated entry process allows for coordinated screening, assessment, and referrals for ESG-funded and CoC-funded projects in compliance with CoC Program interim rule: 24 CFR 578.7(a)(9); ESG interim rule: 24 CFR 576.400(d) and (e). The Long Beach CE works collaboratively with regional CE partners to ensure that all households accessing the Long Beach CE are effectively linked to their corresponding CE where appropriate. Through the Long Beach Continuum of Care, the city and its community partners strive to create a balance of emergency, bridge, transitional, permanent housing, and supportive services that empower individuals and families who are homeless, or at risk of homelessness, to make the critical transition from housing crisis to self-sufficiency and stable permanent housing. The Long Beach Continuum of Care (CoC) is a comprehensive system of care that is committed to respond to the diverse needs of individuals and families in the City of Long Beach who are experiencing homelessness and those who are at risk of homelessness. The Long Beach Coordinated Entry's (CE) geographic boundaries are the same as the Long Beach CoC's geographic boundaries, which is the entire jurisdiction of the City of Long Beach (24 CFR 578.3). The CE provides linkages to services that are funded by the CoC, as well as non-CoC funded projects, such as those funded through the State and/or local Housing Authorities.

## June 2023 SUMMARY OF CHANGES

This version of the Coordinated Entry System (CES) Policies and Procedures (PnPs) document encompasses the general revision of the referral process for Permanent Supportive Housing. The Long Beach CoC was introduced to a new referral process in August 2019 which semi-automated the organization of the Housing Opportunity Pool (HOP) using technology. This obligated the CES team to revise the CES PnPs. In addition, a technology section has been added to assure the mindfulness of how technology will be used to omit redundancies in workflow while observing regulations (Federal, State, and Local) that does not dilute effectiveness in the process while recognizing the prioritization criteria. The Restorative Engagement to Achieve Collective Health (REACH) and Mobile Access Center (MAC) has also been added to this document as they are additional teams that have introduced within the last two years to help address homelessness in the City of Long Beach. The technical composition of the Homelessness Verification forms, and the Verification of Disability has been added to provide detailed instruction of how one is to populate these forms within federal HUD standards for compliance and integrity of CES. Lastly, demographical and external qualifications have been added to not only describe the types of resources the City of Long Beach has in their PSH inventory, it briefly displays how it also is utilized to determine qualifications of specific projects/programs.

## ROLES, TERMS & DEFINITIONS

**Assessor:** Person who can complete the Standardized Housing Assessment with Applicants. Skilled Assessors are trained to complete the coordinated entry assessments, enter data into HMIS, and obtain signed required confidentiality agreements.

**Case Conferencing:** Local process for CE staff to coordinate and discuss ongoing work with persons experiencing homelessness in the community, including the prioritization or active pool. The goal of case conferencing is to provide holistic, coordinated, and integrated services across providers, and to reduce duplication.

**CE Coordinator:** Staff position responsible for supporting or managing day-to-day functions of CE, which

may include any combination of the following: maintaining a housing opportunity pool, assisting with matching participants to available housing resources, communicating referrals, facilitating case conferencing meetings, assisting with grievance and appeal processes, monitoring CE activity, and preparing CE monitoring and evaluation reports.

**CE Subcommittee:** Primary governing body for coordinated entry. Meets at least monthly to oversee the implementation and evaluation of the CE system.

**CE Management Entity:** The City of Long Beach is the CE Management Entity and is responsible for the day-to-day operations of the CE system. Chronically Homeless: HUD's definition: Chronically homeless means: (1) A "homeless individual with a disability," as defined in Section 401(9) of the McKinney-Vento Homeless Assistance Act, who:

- Lives in a place not meant for human habitation, a Safe Haven, or an emergency shelter; AND
- Has been homeless continuously for at least 12 months or on at least four separate occasions in the last 3 years, as long as the combined occasions equal at least 12 months and each break in homelessness separating the occasions included at least 7 consecutive nights of not living as described in (i) above.

**CoC Board:** Responsible for the general oversight of the CE systems, including the approval of the CE Policies & Procedures document.

**Collaborative Applicant:** Entity that must (at the request of the CoC Board) apply for HUD funding for coordinated entry, including planning grants.

**Congregate Shelter:** Congregate shelter settings are those which serve as emergency shelter in a setting where the space is shared by multiple individuals.

**Coordinated Entry Lead:** The City of Long Beach is the lead agency for the CE Supportive Services Only grant. The City of Long Beach serves as the project manager for CE implementation.

**Coordinated Entry Matchers:** The City of Long Beach/matcher utilizes HMIS to review assessments and send appropriate matches to housing providers with vacancies and in need of referrals. The matching entity reviews the response to the referral and will connect the individual to subsequent housing options as needed.

**Coordinated Entry Outreach Coordination:** The City of Long Beach manages the Outreach Coordination process. This will include leading System Integration Teams and supporting coordination between outreach and housing providers to efficiently secure housing for households.

**Continuum of Care (CoC):** Group responsible for the implementation of the requirements of HUD's CoC Program interim rule. The CoC is composed of representatives of organizations, including nonprofit homeless providers, victim service providers, faith-based organizations, governments, businesses, advocates, public housing agencies, school districts, social service providers, mental health agencies, hospitals, universities, affordable housing developers, law enforcement, organizations that serve homeless and formerly homeless veterans, and homeless and formerly homeless persons.

**Continuum of Care (CoC) Program:** HUD funding source to (1) promote communitywide commitment to the goal of ending homelessness; (2) provide funding for efforts by nonprofit providers, and state and

local governments to quickly rehouse homeless individuals and families while minimizing the trauma and dislocation caused to homeless individuals, families, and communities by homelessness; (3) promote access to and effect utilization of mainstream programs by homeless individuals and families; and (4) optimize self-sufficiency among individuals and families experiencing homelessness.

**Developmental Disability:** as defined in section 102 of the Developmental Disabilities Assistance and Bill of Rights Act of 2000 (42 U.S.C. 15002):

- (1) A severe, chronic disability of an individual that—
  - (i) Is attributable to a mental or physical impairment or combination of mental and physical impairments;
  - (ii) Is manifested before the individual attains age 22;
  - (iii) Is likely to continue indefinitely
  - (iv) Results in substantial functional limitations in three or more of the following areas of major life activity:
    - (A) Self-care;
    - (B) Receptive and expressive language;
    - (C) Learning;
    - (D) Mobility;
    - (E) Self-direction;
    - (F) Capacity for independent living;
    - (G) Economic self-sufficiency.
  - (v) Reflects the individual's need for a combination and sequence of special, interdisciplinary, or generic services, individualized supports, or other forms of assistance that are of lifelong or extended duration and are individually planned and coordinated.
- (2) An individual from birth to age 9, inclusive, who has a substantial developmental delay or specific congenital or acquired condition, may be considered to have a developmental disability without meeting three or more of the criteria described in paragraphs (1)(i) through (v) of the definition of "developmental disability" in this section if the individual, without services and supports, has a high probability of meeting these criteria later in life.

**Emergency Shelter:** Short-term emergency housing available to persons experiencing homelessness.

**Emergency Solutions Grant (ESG) Program:** HUD funding source to (1) engage homeless individuals and families living on the street; (2) improve the quantity and quality of emergency shelters for homeless individuals and families; (3) help operate these shelters; (4) provide essential services to shelter residents; (5) rapidly rehouse homeless individuals and families; and (6) prevent families and individuals from becoming homeless.

**HMIS Administrator/Lead Agency:** The City of Long Beach is the CoC HMIS Lead. The City of Long Beach provides training for new users of the HMIS system and Coordinated Entry. The City of Long Beach creates agency and staff new user profiles. The City of Long Beach provides reporting on outcomes. As the HMIS Lead, the City operates the Homeless Management Information System on the CoC's behalf. Ensures the CE system has access to HMIS software and functionality for the collection, management, and analysis of data on persons served by coordinated entry.

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**Homeless Management Information System (HMIS):** Local information technology system used by a CoC to collect participant-level data and data on the provision of housing and services to homeless individuals and families and to persons at risk of homelessness. Each CoC is responsible for selecting an HMIS software solution that complies with HUD's data collection, management, and reporting standards.

**Household:** People experiencing literal homelessness including individuals and households of more than one person needing permanent housing. Applicants must be in the City of Long Beach, and their current living situation meet the definition of homelessness according to the Homelessness Emergency and Rapid Transition to Housing (HEARTH) Act. Youth between the ages of 18 to 25 who are unstably housed will meet the homeless definition for programs funded to serve this population.

**Intensive Case Management Services (I.C.M.S.):** these agencies typically provide services for clients that are housed in one of the Long Beach CoC housing inventories. What makes ICMS different from regular case management services is that ICMS staff provide supportive other variable types of supportive services to eliminate barriers that may place them at risk of being homeless again.

**Mainstream System Provider:** Agency or entity that can provide necessary services or assistance to persons served by coordinated entry. Examples of mainstream system providers include hospitals, mental health agencies, employment assistance programs, social services, and schools.

**Outreach Worker:** Outreach Workers assist the Household in accessing the CES, including assisting the Household in getting to a drop-in center to complete a Standardized Housing Assessment. Outreach workers may also be Assessors. Once a housing option is identified, Outreach Workers may serve as a secondary contact between Agencies and Households. Outreach Workers may assist Households with gathering the necessary documentation needed to complete formal housing applications.

**Participating Project:** Agency or organization that has agreed to provide homelessness supports/services on behalf of the CoC. A participating project must execute a CE Participation Agreement with the CoC. The Participation Agreement outlines the standards and expectations for the project's participation in and compliance with the policies and procedures governing CE operations. For a project to receive CoC or ESG Program funding from HUD, it is required to participate in coordinated entry.

**Projects for Assistance in Transition from Homelessness (PATH):** Substance Abuse and Mental Health Services Administration (SAMHSA)– funded program to provide outreach and services to people with serious mental illness (SMI) who are homeless, in shelter or on the street, or at imminent risk of homelessness.

**Project Homekey (PHK):** Project Homekey is a non-congregate shelter for individuals that meet the federal guidelines for vulnerability to COVID 19. Project homekey is located at a motel purchased by the City of Long Beach which will be converted to permanent supportive housing.

**Project Roomkey (PRK):** Project Roomkey is a non-congregate shelter for individuals that meet the

federal guidelines of vulnerability to COVID 19. Project roomkey are motels that have been master leased by the City of Long Beach for a set period of time and will not serve as permanent supportive housing.

**Public Housing Authority (PHA):** Local entity that administers public housing and Housing Choice Vouchers (HCV) (aka Section 8 vouchers).

**Permanent Supportive Housing (PSH):** Permanent housing with indefinite leasing or rental assistance paired with supportive services to assist homeless persons with a disability or families with an adult or child member with a disability achieve housing stability.

**Mobile Access Center (MAC):** a mobile unit providing and connecting people who are experiencing homelessness with basic services

**Rapid Re-Housing (RRH):** Program emphasizing housing search and relocation services and short- and medium-term rental assistance to move homeless persons and families (with or without a disability) as rapidly as possible into permanent housing.

**Restorative Engagement to Achieve Collective Health (R.E.A.C.H.) team:** team which consists the following staffing: one Public Health Nurse, one Mental Health Clinician, and one Outreach worker.

**Referral Partner:** A type of participating project. Referral partner will receive and consider referrals to its project from the CE system. It will sign a Referral Partner Agreement with the CE management entity affirming it is aware of and will adhere to all expectations for coordinated entry.

**Release of Information (ROI):** Written documentation signed by a participant to release his/her personal information to authorized partners.

**Transitional Housing (TH):** Program providing homeless individuals and families with the interim stability and support to successfully move to and maintain permanent housing. Transitional housing funds may be used to cover the costs of up to 24 months of housing with accompanying supportive services. Program participants must have a lease (or sublease) or occupancy agreement in place when residing in transitional housing.

**U.S. Department of Housing and Urban Development (HUD):** Federal agency responsible for administering housing and homelessness programs including the CoC and ESG Programs.

**U.S. Department of Veteran Affairs (VA):** Federal agency responsible for providing health care and other services, including assistance to end homelessness, to veterans and their families.



## GUIDING PRINCIPLES

This document describes the Long Beach Coordinated Entry's policies and procedures. It outlines the processes by which the Long Beach CoC ensures a consistent and fair process by which individuals and families who are experiencing homelessness, or at-risk of homelessness, receive the most appropriate levels of service and housing assistance to meet their unique needs.

The following are goals of the Long Beach CE:

- The CES will increase access and reduce barriers no matter where or how people present;
- The CE process will be participant-centered;
- The CE process will provide quick and seamless entry into homelessness services; Individuals and families will be referred to housing and services appropriate to their needs and eligibility;
  - Match those with the greatest needs to limited resources;
- The process will reduce length of homelessness;
- The process will ensure full occupancy across programs;
- The process will improve performance outcomes across funded projects;
- The process will emulate an equitable CES process for participants of all color, ethnicity, and gender identification as composed in page 15 of the [Equity Action Plan](#).

Assistance will be allocated as effectively as possible to avoid duplication; Housing First

Funded agencies will utilize a Housing First approach. Housing First is a best practice approach that offers permanent, affordable housing as quickly as possible for individuals and families experiencing homelessness, and then provides the supportive services and connections to community-based supports people need to keep their housing and avoid returning to homelessness. A proven approach in which all people experiencing homelessness are believed to be housing ready and are provided with permanent housing immediately and with few to no preconditions. Effectively implementing a Housing First approach involves prioritizing people with the highest needs and vulnerabilities, engaging more landlords and property owners, and making projects client-centered spaces without barriers to entering and remaining in the project: all of which being fully compliant to 24 CFR Parts 578 and 42 U.S.C. 11381, *et seq.*; Notice: CPD-16-11. Housing First does not have service participation requirements or precondition requirements for program enrollment.

There will be certain case-by-case basis when field and intake staff may encounter client(s) that may have many barriers that may serve as a challenge for clients to attain permanent supportive housing resources due to the following circumstances:

- Lack of life skills;
  - Financial stability and responsibility;
    - Mortgage payments;
    - Utility payments;
  - Job placement;
- Mental health barriers;
  - Developmental disability;
  - Drug related mental health disability;
  - Physical disability;
- Logistics;
  - Unfurnished vacancies;
  - External processes/procedures.

In cases such as these, they will be handled on a case-by-case basis with all necessary/relevant staff and

demonstrate a client-centered approach to determine if housing will act as a solution or be an additional barrier for the client(s).

#### **STANDARDS FOR FAIR AND EQUAL ACCESS AND INCLUSIVITY**

The Long Beach CoC and ESG program funded projects comply with the nondiscrimination and equal opportunity provisions of Federal civil rights laws, including, but not limited to, the following: Fair Housing Act, Section 504 of the Rehabilitation Act, Title VI of the Civil Rights Act, Title II or III of the Americans with Disabilities Act, and Title II of the Americans with Disabilities Act. Furthermore, The CoC Program interim rule at 24 CFR 578.93(c) requires recipients of CoC Program funds to affirmatively market their housing and supportive services to eligible persons regardless of race, color, national origin, religion, sex, age, familial status, or disability who are least likely to apply in the absence of special outreach, and maintain records of those marketing activities. Housing assisted by HUD and made available through the CoC must also be made available to individuals and families without regard to actual or perceived sexual orientation, gender identity, or marital status in accordance with 24 CFR 5.105(a)(2).

All funded CoC agencies must be compliant with nondiscrimination provisions of Federal civil rights laws. Subrecipients who leverage alternate funding which restricts access to partner projects based on specific program participant attributes or characteristics, shall disclose these additional restrictions to the City's Homeless Services Bureau in writing.

The Long Beach CoC ensures fair and equitable access to programs and services for all program participants regardless of actual or perceived race, color, religion, national origin, age, gender identity, pregnancy, citizenship, familial status, household composition, disability, Veteran status, or sexual orientation. The Long Beach CE includes provisions for all priority subpopulations including households experiencing chronic homelessness, veterans, families, youth, seniors, disabled and specialized provisions for those fleeing domestic violence. If an individual's self-identified gender or household composition creates challenging dynamics among residents within a facility, the host program should make every effort to accommodate the individual or assist in locating alternative accommodation that is appropriate and responsive to the individual's needs. CoC/ESG providers will enroll homeless households based on needs regardless of limiting barriers to housing. Households will not be turned away from emergency response services or homeless designated housing due to lack of income, lack of employment, disability status, or substance use.

#### ACCESSIBILITY OF ACCESS SITES

The CoC will ensure that CE services are physically accessible to persons with mobility barriers. All CE communications and documentation will be accessible to persons with limited ability to read and understand English. In addition, Pre-Screens may also be submitted by agencies not funded under the Long Beach Continuum of Care if in case the referring agency would like to refer their client(s) to the Multi-Service Center for service access.

#### Technology

Administrative and programmatic staff in the Long Beach CoC access points will make continuous efforts to adopt and introduce technology to eliminate duplications and redundancies in processes and procedures within the Long Beach CoC access points. Some cases may require staffing work collaboratively with the IT Department within the City of Long Beach to determine the risks of introducing the proposed hardware and/or software; other cases may require special attention to assuring that the human element is not excluded in internal processes and procedures. Implementing a client-centered approach requires human interaction with the unhoused population, and technology will only be utilized as a tool to make processes more efficient: methods of risk management will be applied to determine contingency plan(s) if proposed processes/procedures affect effectiveness.

There may be instances when technology may rapidly and dramatically alter internal processes to the extent when administration/programmatic staff are unable to adapt as fast as anticipated. Nonetheless, it is important for internal staff and/or partnering agencies involved in the testing stages to cooperate during testing trials in order for administration to determine its effectiveness and efficiency.

#### Language Access and Sensitivity

The City of Long Beach and the Long Beach CoC understands that removing language barriers is critical to equitable access to services. The goal of the City's Language Access Policy is to attain meaningful and understandable access for limited English language proficiency individuals. Therefore, the City has set up translation and interpretation services in these three languages: Spanish, Tagalog, and Khmer. The CoC will provide appropriate auxiliary aids and services necessary to ensure effective accessible formats as needed, e.g., Braille, audio, large type, assistive listening devices, and sign language interpreters (HUD Coordinated Entry Notice: Section II.B.5 c and d). (Joel – You noted in this section of the ad hoc that the city has a resource that grants access to language programs and Alvaro expressed interest in it. Also you might want to notate the resource into this section of the paragraph. )

In addition, it is advisable that all relevant staff that have direct contact with the homeless population that provide services are mindful of how they speak as some client(s) may be triggered to certain words. Language sensitivity shall be based on a client-centered approach and shall be recognized when encountering a client(s) in the field and during intake (however not limited to):

- Elderly
- TAY Youth
- LGBTQ community
- Clients with disabilities
  - Mental
  - Physical
  - Developmental
- Domestic Violence victims
- Human trafficking/smuggling victims

Trainings will be provided when necessary in regard to how to effectively communicate that encompasses a client-centered approach methodology.

#### **STANDARDS FOR PROJECT PARTICIPANT CONFIDENTIALITY**

All participant information collected, stored, or shared in the operation of CE functions, regardless of where or not those data are stored in HMIS, shall be considered personal and sensitive information worthy of the full force of protection and security associated with data collected, stored, or shared in HMIS. All HMIS users will adhere to the privacy standards set forth in the City of Long Beach Homeless Management Information System Policies and Procedures. To ensure the safety and security of program households, CoC partners are required to develop and implement written policies and procedures to guarantee the confidentiality of records concerning program participants. Confidentiality must always be protected. This includes all written information, any release of information, program participant records and adequate confidential space for services. To comply with these requirements, the CoC partner should, for example, keep written records or files under lock and key with only particular personnel granted access to those files. Confidentiality statements must be signed by every employee and kept on file. Standardized forms must be used to show program participant consent when program participant information is exchanged from agency to agency and kept in the program participant chart or file. Data must not be collected

without the consent of the households. The policy regarding program participant confidentiality and the completion of required forms must be in place.

## **AFFIRMATIVE MARKETING**

The Long Beach CE shall affirmatively market housing and supportive services to eligible persons regardless of race, color, national origin, religion, sex, age, familial status, disability, actual or perceived sexual orientation, gender identity, marital status, immigration status, limited English proficiency, or who are least likely to apply in the absence of specialized outreach in order to promote every individual's full and complete participation in CES. Promotional materials describing CE services shall include clear and concise language directly describing how CES processes are available to all eligible persons. CE participating agencies shall market their housing and supportive services to eligible persons and retain copies of marketing materials with evidence of affirmatively furthering fair and equal access to all CE processes; copies of which shall be provided upon request.

## **COORDINATED ENTRY ACCESS**

The CoC adopts a "no wrong door" approach to CE, which ensures that no matter which homeless services provider a household presents to for assistance, they will have access to the same resources, referrals, and assessment and prioritization process. CE is intended to increase and streamline access to housing and services for households experiencing homelessness to match appropriate levels of housing and services based on their needs. CE will help the Long Beach CoC prioritize assistance based on length of homelessness, vulnerability and severity of service needs to ensure that people who need assistance the most can receive it in a timely manner. Funded agencies will participate in the CE, ensuring that any point of entry into the CoC provides households with access to stabilization and housing. Agencies will participate in the CoC's CE intake process. Participation includes direct service for and referrals to: prevention and diversion, homeless programs, mainstream resources, and housing. Projects will prioritize referrals from CE, to fill project vacancies. All CE households will be screened in for services. Households will not be screened out due to perceived barriers to housing or services, including, but not limited to, too little or no income, active or a history of substance abuse, domestic violence history, resistance to receiving services, the type or extent of a disability-related services or supports that are needed, history of evictions or poor credit, lease violations or history of not being a leaseholder, or criminal record.

## **DESIGNATED ACCESS POINTS**

The Long Beach CoC has multiple CE service hubs purposed for access points into its system of care. The CoC offers the same assessment approach at both service hubs, and at all access points. All access points operate under a "no wrong door approach" in which a homeless family or individual can present at any homeless housing and service provider in the geographic area. Reasonable accommodations will be made for persons with disabilities to complete the coordinated entry process at a different location. Service hubs are usable by all people who may be experiencing homelessness or at-risk of homelessness. The CE service hubs provide connection to mainstream and community-based emergency assistance services such as supplemental food assistance programs and applications for income assistance. Lastly, service hubs have access to HMIS and have the ability to submit HOP Referral forms to the CES Matcher so case managers can place their clients in the pool.

The first example of a CE service hub is the Multi-Service Center (MSC), which functions as a main entry point into the Long Beach Continuum of Care. Long Beach CoC funded and non-funded agencies are co-located at the MSC to provide integrated, centralized assessment and a range of comprehensive services for at risk and homeless individuals and families in one location. These services include showers, mail, message services, outreach and prevention services, case management, crisis counseling, educational

assurances, life skills training, employment assistance, financial literacy classes, expungement workshops, fair housing workshops, housing placement, deposit assistance, advocacy services, health screenings, HIV/AIDs related services, substance abuse and mental health treatment referrals, veterans services, mainstream benefits and referrals to other community resources.

The second example of a CE services hub is the Homeless Assistance Program (HAP), which is delivered by Mental Health of America in Los Angeles (MHALA). The HAP serves as a CE access point for the CoC system of care. The HAP provides integrated, centralized assessment and comprehensive services for people experiencing homelessness. HAP streamlines service delivery minimizes barriers to obtaining and maintaining permanent housing, and ultimately reduces the length of homelessness experienced by individuals.

The third example is the MAC (Mobile Access Center) is a mobile unit providing and connecting people who are experiencing homelessness with basic services. The services mirror our actual access center site the Multi Service Center – located at 1301 W. 12th street between downtown and the west end of long beach. Through connection and collaboration with community partners to provide services and promote progress towards housing, targeting clients who may have barriers to accessing the multi service center by bringing services out to the community.

Some of the basic services we provide are the following:

- Document collection/navigation assistance (obtaining birth certificate, CA ID, SS card)
- Connection and support to connecting with basic benefits including GR, Cal work
- Referrals: to immediate Shelter, employment, mental and physical health resources, substance use resources
- Referral to Housing Opportunity pool and other housing resources

Due to the Covid-19 pandemic, new resources were made available to provide emergency shelter for individuals that are experiencing homelessness and meet the federal criteria for susceptibility to COVID 19. Federal and State funding for congregate and non-congregate shelter settings within the City of Long Beach. The City of Long Beach currently operates two Project Roomkey sites, one Project Homekey site. Additionally, the County of Los Angeles operates two Project Homekey sites in the City of Long Beach. These sites are operated by non-profit agencies contracted by the City of Long Beach to manage the day-to-day operations. The following agencies have also become access hubs as they are serving individuals experiencing homelessness within the City of Long Beach: Serenity Recuperative Care, Illumination Foundation, and Holidays for Helping Hands.

Households are triaged and assessed to determine homelessness and the least level of assistance to maintain or obtain sustainable housing. People presenting for assistance will be screened in for services. The household must meet the requirements of an applicable AND eligible category under the definition of “At Risk of Homelessness” OR definition of “Homeless” as established by HUD at 24 CFR §576.2, as well as any other applicable eligibility requirements for the projects.

#### Pre-Screen forms

Pre-Screen forms are utilized similarly to the HOP Referral form with the exception that non-designated access hubs will be submitting these forms to the CES Matcher(s). There will be occasions when external agencies would like to refer clients into the Long Beach CoC however do not have access to LB HMIS and the ability to submit a HOP Referral form. Therefore, the Pre-Screen form may be distributed to any partnering agency that would like to refer clients into the Long Beach CoC for housing resources.

Directions of how a Pre-Screen form is to be submitted to the MSC is composed in Exhibit A.

## FAMILIES ACCESS

The Long Beach CE currently partners with the Service Plan Area (SPA) 8 CES Family Solutions Center (FSC) to serve families and Catholic Charities in Long Beach. CES for Families includes referral partners with trained staff available to conduct initial screenings, such as 211 LA County (a 24-hour central phone system), specified City & County Offices, and Regional Partners. After an initial screening, these partners will refer a family to a regionally-based FSC. Each FSC serves as an Access Point, and utilizes the same intake process and coordinates housing interventions to assist homeless families to stabilize their situation. Please visit <https://www.lahsa.org/ces/> for more detailed information on CES processes, policies and procedures for LA County at Large.

The MSC also assist clients within the facility and will also refer the household to the proper resource on a case by case basis and needs.

## Program Eligibility

Housing status, annual income, and disability (when applicable) are verified by program staff prior to program enrollment. Additionally, the evidence relied upon to establish and verify homeless or at risk for homelessness status and annual income are included in the Homeless Management Information System (HMIS) record to demonstrate compliance with program regulations as well as to prevent duplication of services within the CoC. Please see Long Beach Continuum of Care Written Standards for more details and information on program eligibility.

## **DIVERSION AND PREVENTION SERVICES**

The CE system will ensure that all potentially eligible homeless prevention households will be screened for homelessness prevention assistance, regardless of the access point at which they initially seek assistance. Households are assessed for the smallest amount of need to ensure housing stabilization. CE staff will screen “at risk” households and will refer eligible households to the most appropriate homelessness prevention project. The goal of Homelessness Diversion and Prevention is to assist low-income participants who are at imminent risk of becoming homeless to secure and/or retain permanent housing. Program participants must be screened for Problem Solving Intervention to determine if it is possible for them to access other housing options and remain housed, family unification, be re-housed temporarily, or be permanently housed instead of utilizing transitional housing services. Prevention and Problem-Solving Intervention Programs must be done in coordination with the regionally located Coordinated Entry System (CES) Lead agencies.

CE staff rely on mainstream support systems and available prevention services to help divert households from accessing shelter altogether. Staff provides linkages to mainstream resources such as childcare, employment services and food resources to stabilize households. The Long Beach CoC provides homeless prevention services such as rental assistance and eviction prevention that are designed to prevent individuals and families from experiencing homelessness.

## **OUTREACH AND ENGAGEMENT**

### Guiding Principles

The Long Beach CoC has a multidisciplinary, coordinated outreach team comprised of partnering agencies called the Long Beach CoC Street Outreach Network (SON). The goal of the SON is to engage all unsheltered individuals and ensure that all agencies are connecting and sharing resources. SON uses a client-centered approach that meets people where they are at with transparency, compassion, and dignity with the belief that our community members experiencing homelessness can recover from their circumstances with a “whatever it takes” approach.

The City of Long Beach's Interdepartmental Outreach team is another component of outreach. This team consists of The Homeless Services Bureau, Long Beach Police Department-Quality of Life Unit, Long Beach Fire Department, Parks and Recreation, Public Works Department, and Library Services. The Interdepartmental Street team meets regularly to coordinate efforts and ensure that individuals experiencing homelessness are being connected to services and resources.

#### Purpose

SON provides services to clients where they reside, ranging from: intake, assessment and treatment planning, health assessments (physical and mental), minor wound treatment, medical screenings, referrals into mainstream programs, assistance navigating the medical and mental health systems, shelter and housing placement. This approach has been successful in providing services to clients that in the past did not access services due to significant physical and psychological barriers. Street Outreach teams will be trained on CE and the assessment process and will have the ability to offer CE access and assessment services to participants they contact through their street outreach efforts. Street outreach teams will be considered an access point for CE. All field-based services conducted with people experiencing homelessness are added to an HMIS or any applicable data base and to the Housing Opportunity Pool, as appropriate.

#### Restorative Engagement to Achieve Collective Health (REACH) Team

- Mobile response team focused on urgent community requests and low-level, non-violent calls for service related to people experiencing homelessness
- Two teams consisting of one public health nurse, one mental health clinician, and two outreach workers
- One FTE focused on field coordination
- Alternative response model focused on linking people to services such as interim and permanent housing, mental and physical health services, case management, crisis intervention, and trauma-informed care.
- REACH Teams currently operating on weekdays from 7am-5pm, with further expansion as additional staffing and resources are secured.

### **ASSESSMENT**

#### Assessment Process

The CoC's CE process will provide a standardized assessment process to all CE households, ensuring uniform decision-making and coordination of care for persons experiencing a housing crisis. Households have the right to complete a CE Housing standardized assessment and have the right to request an assessor who speaks their native language or translation services. Households are not required to be enrolled in a shelter or other temporary housing program to complete a CE Housing assessment. While completing an assessment, households are responsible for sharing information as accurately as possible. Households are responsible for updating their information with their case manager including, new hospitalizations or the diagnosis of a disabling condition, change in family composition, and change in income. These updates allow for a more accurate understanding of eligibility for housing programs and when matched to housing, updated contact information allows the housing provider to reach the household. Households are enrolled into CE at the completion of the assessment. Refusal of an assessment by a household will not preclude them from being enrolled into CE if they are requesting housing.

The CE Housing Assessment has been divided by sub-population groups (TAY, Single Adults, and Families), and each respective assessment ask similar questions with the exception of some that may inquire

information tailored specifically to the sub-population group type.

As part of this process households will be asked to sign a Homeless Management Information System (HMIS) consent that will ask what level of sharing, if any, they approve of. This consent will be explained and the applicant has the right to ask questions related to how their data will be used or shared so that they can make an informed decision. Households may opt out of sharing information in HMIS and doing so will not prevent the household from being matched to housing. They may also opt out of completing an assessment while retaining the right to receive all necessary emergency services.

## **PHASES OF ASSESSMENT**

All projects participating in CE will follow the assessment and triage protocols of the CE system. The assessment process will progressively collect only enough participant information to prioritize and refer participants to available CoC housing and support services. This section provides the step-by-step process by which a household would follow upon initial request for assistance. Exhibit A includes both the Pre-Screen process – if in case the referral was submitted by an agency that is not an access hub, the process of submitting a HOP referral form to place clients in the pool, and procedure of the match facilitation.

The CE process may collect and document household's membership in Civil Rights protected classes but will not consider membership in a protected class as justification for restricting, limiting, or steering participants to particular referral options.

## **HOP Referral Submission**

When case managers from access hubs submit a HOP Referral form to the CES Matcher, vital documentation which consist of the following may be submitted:

- Verification of Disability (provided by a license physician and/or mental health clinician)
  - Physical
  - Mental
  - Substance Abuse
  - HIV/AIDS
  - Developmental Disability
- Verification of Homelessness
  - Self-Certification
  - 3<sup>rd</sup> Party
  - 3<sup>rd</sup> Party (Oral)
- Social Security Card
- Birth Certificate
- Passport
- Certificate of Naturalization
- Green Card
- Proof of Income
  - Zero-affidavit, if in case the client does not receive income
- DD-214 (only for veterans)

3.8.3. Electronic Record Documentation in the City of Long Beach Homeless Management Information System Policies and Procedures document clearly states that HUD does not mandate a requirement of documentation maintenance in paper form and digitally uploaded in HMIS. However, it is encouraged that vital documentation is to be uploaded in HMIS for ease of accessibility. Also, submitting a completed HOP



Referral form will prevent the prolongment of the housing process when a household is matched for an available unit.

#### Homelessness Verification forms (Self-Certification, 3<sup>rd</sup> Party, and 3<sup>rd</sup> Party Oral) disclaimer

When a homelessness verification form (*Self-Certification, 3<sup>rd</sup> Party, and 3<sup>rd</sup> Party Oral*) is not accounted for and uploaded in HMIS Clarity while the client's name has been added into the HOP, the client will be deemed as not match ready. The HOP is purposed to store a list of clients who express interests in permanent supportive housing resources who are currently experiencing homelessness and/or at risk of homelessness clients. A HOP referral with a homelessness verification form not submitted implies that there is no documented proof of the client's homelessness status therefore not making the client homeless on record.

It is **not** advisable for case managers and outreach workers to verify homelessness status on their own clients as it suggests a conflict of interest. If a case manager and/or outreach worker verifies the homelessness status of their own client using the 3<sup>rd</sup> Party and 3<sup>rd</sup> Party Oral form, it defeats the purpose on verifying the client's homelessness status in the third party therefore making the form 1<sup>st</sup> party: this would make the homelessness verification form invalid.

#### Verification of Disability form disclaimer

If the internal Verification of Disability form is not utilized on verifying a client's mental and/or physical diagnosis, it is not advisable for licensed physicians, mental health clinicians, case managers, outreach workers, and/or other relevant staff to submit documentation of providing information regarding a client's physical and/or mental diagnosis if it does **not** provide the following:

- Wet signature and/or verifiable digital signature on the document itself
- License number of the physician and/or mental health clinician providing the diagnosis of the client they are diagnosing
- Verbiage of the actual diagnosis
- Signature of either the client or the appointed representative to release the diagnosis information.

If the medical document is missing one of the things listed above, the document will be invalid.

### **COORDINATED ENTRY PRIORITIZATION**

#### Housing Opportunity Pool

A By Name registry called the Housing Opportunity Pool (HOP) is a report that records all households experiencing homelessness in the City of Long Beach. Long Beach residents on the HOP will receive preference for matching. Eligibility requirements for Long Beach residency can be found in the "Housing Authority of the City of Long Beach Administrative Plan for the Section 8 Housing Choice Voucher Program." The HOP provides an effective way to manage an accountable and transparent prioritization process.

The CoC's HOP will be managed by the City of Long Beach, who serves as the CE coordinating entity. The CE coordinating entity utilizes HMIS to review assessments and is responsible for referring households to housing programs with vacancies. New households will be added to the HOP and existing households' rank order on the HOP will be managed according to the prioritization criteria as established in Federal HUD's cross reference to 24 CFR Parts 578 and 42 U.S.C. 11381, *et sep.*; Notice: CPD-16-11. Participating agencies are required to provide the following information/forms regarding households: CE Housing Assessment,

HOP Referral form, and ROI (only if this form has not been submitted).

The HOP includes an active and inactive pool.

- Active Pool
  - Household who stay longer than one night at a shelter and are currently enrolled in CE or have been enrolled within the last 90 days are part of the active pool. People enrolled in CE remain active if they have a minimum of one update every 90 days in HMIS.
- Inactive Pool
  - Households who only stay one night in a shelter and do not connect with any other homeless program within 30 days will be moved to the inactive pool on the 30th day following their shelter exit;
  - Households with at least one enrollment in any homeless program or a minimum of five nights of a shelter stay will be moved to the inactive pool on the 90th day after being exited from a homeless program unless they enroll in any other homeless program in the City of Long Beach;
  - Any household in the HOP will move to inactive status after 90 days of no enrollment into any other project and no updates in HMIS (or other updates if participant elects not to be put into HMIS);
  - When a case manager is unable to locate a client;
    - And/or when a case manager discovers other opportunities that does not involve permanent supportive housing.

Only active households in the Housing Opportunity Pool will be matched to a housing opportunity. This practice allows the limited housing opportunities to be matched to people experiencing homelessness to housing opportunities while accounting for the inconsistency of updates regarding people who are no longer homeless or live in the City of Long Beach. If a household is moved to the inactive pool due any of the following reasons mentioned above, the case manager must resubmit a HOP Referral form to the CES Matcher, reassess the client which includes the VISPDAT (considering that the client's conditions may change since the last encounter), and the client will be moved back into the active pool.

The Households active status is updated to "housed" and rendered inactive in CE when they are moved into housing or move out of the City of Long Beach by the providers updating HMIS with this information.

#### VI-SPDAT

The Long Beach CoC utilizes the Vulnerability Index and Service Prioritization Decision Assistance Tool (VI-SPDAT) to measure service need, which is embedded into the CE Housing Assessment. This tool allows providers to get to know a person on multi-dimensions to better meet their needs and work with them to find the best ways to achieve permanent housing. The tool measures the chronicity and vulnerability of a person, which. The tool provides for an unbiased assessment of a household's overall housing and service needs. The VI-SPDAT is not meant to replace any other programmatic assessment, but rather is a universal assessment tool that is used in combination with other appropriate program tools. The VI-SPDAT is centralized in the HMIS and shared across Long Beach CoC partners to increase coordination of care and to de-duplicate assessment efforts. Assessment may occur over time. The VI-SPDAT assessment in conjunction with other screening tools will assist in:

- Screening for diversion or prevention
- Assessing shelter and other emergency needs
- Identifying housing resources and barriers
- Evaluating vulnerability to prioritize for assistance
- Screening for program eligibility

- Facilitating connections to mainstream resources

The Long Beach CE services hubs provide preliminary triage and assessment to determine program eligibility and level of assistance needed. Households are assessed to determine the least level of assistance needed to maintain or obtain sustainable housing.

Housing status and annual income, where required, are verified by program staff prior to program enrollment. Additionally, the evidence relied upon to establish and verify homeless status and annual income are included in the Homeless Management Information System (HMIS) record to demonstrate compliance with program regulations, to establish history of homelessness, and to prevent duplication of services within the CoC. Households that are screened and determined to meet preliminary criteria will have a VI-SPDAT completed to identify the household's housing and service needs.

The VI-SPDAT score system has also been divided by sub-population groups (TAY, Single Adults, and Families) and have been merged with CE Housing Assessment for the convenience of the case manager in order to eliminate redundancy in the CE Housing Assessment process.

Lastly, case managers may have the ability to advocate for a client if in case the most recent VI-SPDAT score does not seem to reflect the client's present condition. Therefore, the VI-SPDAT score (not merged with the CE Housing Assessment) has been provided as an option for case managers as well (speculating on 30 day notification on assessment updates).

#### VI-SPDAT Scoring System

Points will be assigned for assessments in the following areas:

- Mental Health
- Alcohol and/or substance use disorder
- Physical health disability
- Risk of harm to self and/or others
- Frequent hospital and/or jail utilization
- Age 60 or older

Participants are freely allowed to decide what information they provide during the assessment process, to refuse to answer assessment questions, and to refuse housing and service options without retribution or limiting their access to other forms of assistance. Although households may refuse to answer assessment questions, doing so may limit the applicant's possible permanent housing and service opportunities if the questions that are not answered are related to eligibility criteria for specific programs. The assessment process does not require that the applicant share a specific disability if the applicant does not wish to do so.

#### Targeting Beyond VI-SPDAT

Housing programs that serve a specific target population may receive referrals for that target population. To target a specific population, agencies must provide documentation of receipt of funding that supports the unit and maintains funder-defined criteria. Examples of targeting criteria include:

- Area Median income
- Household Composition
- Gender
- Youth/Senior
- HIV/AIDS
- Veteran Status

- Disabling Condition (presence of, not specific condition)
- Dual diagnosis (presence of, not specific condition)
- Domestic Violence provider
- Other waiting lists

Agencies receive referrals from CE that meet the stated targeting criteria, following the same system wide prioritization for matches.

#### PRIORITIZATION CRITERIA

The Long Beach CE prioritizes Long Beach residential households first. The CE housing opportunities pool uses the other following vulnerability indices described below to rank households in order of vulnerability, with the most vulnerable households at the top of the pool. Households may be offered housing regardless of vulnerability score, but more vulnerable households will likely be offered housing before less vulnerable households. Households will be prioritized in the following order:

1. Chronic Homelessness (duration of homelessness and documented presence of a disability)
2. Number of days homeless (descending)
3. VI-SPDAT Score (descending)
4. Date of assessment

Long Beach CE fills all supportive housing units with people facing chronic homelessness first. If no person facing chronic homelessness can be found for the unit level of acuity will be taken into consideration as the next priority.

Programs with a less intensive program model can accommodate households with a lower VI-SPDAT score who may or may not be facing chronic homelessness. Those with lower acuity and facing chronic homelessness will be prioritized above those with lower acuity who are not facing chronic homelessness for permanent housing with short term supports and rapid rehousing programs.

Permanent housing with short term supports, permanent housing without supports, and Rapid Rehousing programs are geared toward households with a lower vulnerability score who may or may not be experiencing chronic homelessness. Transitional housing programs can accommodate any person who meets their funder driven eligibility criteria with a preference for those fleeing domestic violence and prioritizing the most vulnerable.

Specialized vulnerable populations such as victims of domestic violence are not included in the HOP by name lists or HMIS due to federal confidentiality laws. As such, the City of Long Beach will continue to work with victim service providers to ensure that victim service referrals can be matched with available resources within CE.

#### Demographical/external qualifications applied to Prioritization Criteria

The PSH resource inventory consists of diverse choices the clients may choose to apply for if they express interest and the criteria is met. There are demographical preferences and external underlying factors that are present in the Long Beach CoC PSH inventory, which is generally listed below:

- Age [55+, 62+, 18-24 (TAY population)]
- Household composition (Singles, couples, families, single families, and families with a minor)
- Mental Disability (Drug induced, non-drug induced)
- Vital Documentation requirements (some resources do not require a birth certificate)

- Veterans (Discharge Status)\*
- Victims of Domestic Violence
- External qualifications (additional program eligibility requirements)

The prioritization criteria will meet federal HUD's guidelines stated in *Federal HUD's cross reference to 24 CFR Parts 578 and 42 U.S.C. 11381, et sep.; Notice: CPD-16-11* as the minimum requirement. This guideline will be the baseline of how the list will be organized. The demographical/external qualifications will be applied only if the resource/program requires it.

## **NOTIFICATION OF VACANCIES**

**Intensive Case Management Service (ICMS) staff must complete a vacancy form and email it to the CE coordinating entity each time a new unit or set of units becomes available to indicate they require households to be matched to their program. The form must be filled out with the relevant information of the vacancy and include any funder-defined eligibility requirements. CE coordinating entity matches applicants to housing opportunities based on the established system-wide prioritization standards. It is also encouraged that Intensive Case Management Service (ICMS) staff agencies track vacancy notification forms submitted to the CE coordinating entity to avoid duplication.**

## **MATCHING PROCESS**

Agencies complete a vacancy request form and submit to [LongBeachCE@longbeach.gov](mailto:LongBeachCE@longbeach.gov) each time a new unit or set of units becomes available to indicate they require households to be matched to their program.

One household from the active pool is matched to each vacancy with a 1:1 ratio. A follow up notification will be sent by the CE lead to the assessor, the housing provider, and any case managers listed on the assessment. This note will include the HMIS identification numbers for inclusion of history of current and past programs if the applicant has signed the HMIS release allowing for sharing this information.

Unit vacancies may also be discussed during case conferences that may allow all constituents and all parties to provide updates on a client's pathway to housing once a match has been facilitated.

Housing Providers must follow the "Guidelines for Attempts to Gain Contact with individuals and Heads of Household" when receiving a match.

Lastly, the CES Matcher within the Long Beach CoC will remain unbiased when matching clients to available housing opportunities within the Long Beach CoC housing inventory. The selection process will be strictly based on data provided by case managers in HMIS Clarity and supplementary/vital documentation. Thus, the CES Matcher will observe the selection of households for available housing resources as stated on page 9 in Federal HUD's cross reference to 24 CFR Parts 578 and 42 U.S.C. 11381, *et sep.*, Notice: CPD-16-11; local preference will then be observed once the HOP is within compliance to federal guidelines.

## **GUIDELINES FOR ATTEMPTS TO GAIN CONTACT WITH HOUSEHOLDS**

### Initial Contact

- Housing Providers should attempt to contact the households for a period of 4 days from the date of the match.
- During this period, providers should attempt to contact the households on a minimum of three occasions using a variety of means during different days/weeks. The "Notes on

\*Eligibility criteria for chronicity is subject to change.

contacting client” section of the CoC Standardized Housing Assessment may include details to help identify the optimal means of contacting the individual or head of household.

- The first attempt may include a direct phone call using the number provided in HMIS. Subsequent attempts should include the use of email if need.
- When necessary, the corresponding Case Manager working with the client should be notified of the request to contact and meet with the household via both email and phone.
- The assessments frequently include information for the Emergency Contact. Efforts should be made to contact the individual and head of household via the Emergency Contact.
- All contact attempts will be documented in a case management note in HMIS.

#### Action after failed initial contact

- Housing Providers will notify the CE coordinating entity via email to indicate that they have not been able to contact the referral within the 4-day period following the Match
- The Housing Provider will no longer need to respond to the referral. The household will be connected to another housing opportunity when they re-establish contact with the CE.
- The household will be placed back into the HOP
  - Household will be placed as inactive if they fit the list criteria composed on page 18 in this document.

Referrals from the CE may not be denied unless a household does not meet the standardized eligibility criteria. The agency must notify the CE coordinator why the referrals was rejected and notify the applicant in writing of the refusal into the program. Refusals are only acceptable on certain situations including the following:

- The household does not meet the project’s eligibility criteria;
- The project is at capacity and is not available to accept referrals at this time;
- Other justifications as specified by the “referred to” project.

Households may decline a housing referral and may move to the next available option. If no other options are available, the household will go back onto the HOP based on their assessment until the next housing opportunity is available.

## **EMERGENCY SERVICES**

### EMERGENCY SHELTER

Emergency shelter will not be prioritized based on severity of service need or vulnerability allowing for an immediate crisis response. Several agencies in Long Beach provide temporary shelter for homeless families, individuals, and for specific sub-populations of the homeless with an average length of stay of less than 90 days.

### AFTER HOURS EMERGENCY SERVICES

When the two CE service hubs are not in operation, the outgoing messages for the call centers will inform callers of the following options: 1. To call 211 to be provided resources, or 2. To call 911 or go to the nearest hospital, if it is an emergency, or 3. To call the Domestic Violence hotline number, if the person or household is fleeing a domestic violence situation. The Long Beach Police Department is trained to call 211 and to call after hours shelters to check for availability. For any person or household that enters an after-hours shelter, an on-site case manager will refer the person or household to one of the CE services

hubs for intake the next morning of operation or assist in scheduling a follow-up appointment with a roaming CE case manager/outreach worker.

### **SAFETY PLANNING**

Special provisions are set in place for when households experiencing domestic violence (DV) seek services through CE. When an individual or household identifies as one that is fleeing, or is attempting to flee, DV, dating violence, sexual assault, stalking, or other dangerous or life-threatening conditions that relate to violence against the individual or a family member, and needs DV services, the individual or household is immediately referred to the domestic violence hotline. Intake staff shall coordinate additional services via telephone directly with shelter staff, as domestic violence shelters do not track program households in the local HMIS. Households seeking entry into domestic violence shelters are not required to access services through the CE so that households can access the system of care in the most seamless and safest manner possible. If the individual or household does not wish to seek DV specific services, the individual or household will have access to the usual CE process as described here.

Priority measures will be given to participants who qualify for emergency transfers under the Violence Against Women's Act. When an immediate unit is not available for an emergency transfer, the participant will place at the top of the Priority Pool with deidentified information.

### **DISCHARGE PLANNING**

The Long Beach CoC maintains a comprehensive approach to discharge planning of persons exiting systems of care. The Long Beach CoC coordinates both locally and regionally with regards to discharge planning from facilities. The Long Beach CoC Discharge Planning Collaborative meets monthly to address the complex needs of homeless populations with the objective to reduce recidivistic contacts and assist with productive discharge outcomes. This multidisciplinary group includes representation from Correctional facilities (City and County), Police and Fire Departments, Long Beach area medical centers, Los Angeles County Department of Mental Health and Non-profit service providers and interested stakeholders that serve homeless and vulnerable populations.

### **STANDARDS FOR DETERMINING TERMINATION OF ASSISTANCE**

CoC and ESG funded projects may terminate assistance to project participants who violate program requirements or conditions of occupancy. Termination under this section does not bar the housing provider from providing further assistance later to the same individual or family. The housing provider may terminate assistance in accordance with a formal process established by the housing provider that recognizes the rights of individuals affected by this process, at a minimum, must consist of:

- Providing the participant with a written copy of program rules and the termination process before the participant begins to receive assistance
- Written notice to the program participant containing a clear statement of the reasons for termination; 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 (or a subordinate of that person) who made or approved the decision to terminate;
- Prompt written notice of the final decision to the program participant.

### **CALCULATION OF ANNUAL INCOME**

Sufficient records must be established and maintained to enable the recipient and HUD to determine whether the applicable program requirements are being met. Long Beach Continuum of Care subrecipients must assess and document annual income for each program participant who receives Emergency Solutions Grant (ESG) homelessness prevention assistance or ESG rapid re-housing assistance, as well as for each Continuum of Care (CoC) program participant who receives housing assistance where

rent or an occupancy charge is paid by the program participant, as required by the applicable program regulations and local requirements. The subrecipient must calculate annual income in accordance with 24 CFR § 5.609 for ESG program participants and in accordance with 24 CFR § 5.609 and 24 CFR § 5.611(a); see Attachment A for more information. The evidence relied upon to establish and verify annual income must be included in the participant's file and be sufficient to demonstrate compliance with such regulation(s). It is strongly recommended that subrecipients utilize the CPD Income Eligibility Calculator, available at <https://www.hudexchange.info/incomecalculator/>, to document the calculation of a program participant's annual income. Please see the Long Beach CoC's Calculation of Annual Income and Recordkeeping Standards for information on documentation standards.

## **TRAINING AND PARTICIPATION REQUIREMENT**

The CoC is committed to ensuring that all staff who assist with CE operations receive sufficient training to implement the CE system in a manner consistent with the vision and framework of CE, as well as in accordance with the policies and procedures of the CE system. Subrecipients will participate in the annual CE training, CoC General Membership meetings, webinars, and any relevant subcommittees that support quality service delivery within the system of care.

### **INITIAL TRAINING**

All CoC CE staff will be trained in curricula that includes the following topics for staff conducting assessments:

- Review of CoC written CE policies and procedures
- Coordinated Entry flow
- Conducting standardized assessments (i.e., Diversion and Prevention, Standardized Housing Assessment, and VI-SPDAT)
- Requirements for use of assessment information to determine prioritization
- Criteria for uniform decision-making and referrals
- Homelessness Certification and Documentation

### **ANNUAL TRAINING**

The CoC lead will provide training opportunities at least annually to organizations that administer assessments. The purpose of the training is to provide all staff administering assessments with access to materials that clearly describe the methods by which assessments are to be conducted with fidelity to the CoC's CE's written policies and procedures. CE annual training will also be conducted to incorporate cultural and linguistic competency, trauma-informed practices, and safety planning, among other topics. The CoC lead will update and distribute training protocols at least annually.

## **EVALUATION**

In accordance with HUD Coordinated Entry Notice: Section II.B.15: Evaluation Methods the CoC will consult with each CE project and project participants, at least annually, to evaluate the intake, assessment, and referral processes associated with coordinated entry. Data from HMIS will be used to make data informed evaluations about performance outcomes, reduction in length of homelessness and occupancy rates from CE housing programs. Solicitations for feedback will address the quality and effectiveness of the entire coordinated entry experience for both CE projects and participants. Feedback will be gathered anonymously and participation will be voluntary. All feedback received will be evaluated by the CE subcommittee and used to implement improvements to CE and updates to existing policies and procedures.





**CITY OF LONG BEACH**  
COORDINATED ENTRY SYSTEM GRIEVANCE FORM

**GRIEVANCE PROCEDURE**

The Long Beach Continuum of Care (CoC) is committed to ensuring that no information is used 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. **A formal grievance may be filed by following the procedure outlined below:**

1. All grievances should be brought immediately to the attention of your primary Case Manager for first-level resolution.
2. If your Case Manager cannot resolve the grievance you will be referred to the Agency Supervisor of the staff person with whom the grievance is with for resolution.
3. If no resolution is met at the agency level, you may then complete a grievance form and submit to the Homeless Services Officer. **Assistance with completing the form will be provided upon request.**
4. You will then work with the Homeless Services Officer to discuss concerns and agreeable outcomes.
5. Please submit complete the enclosed form and submit a detailed written statement to:  
Long Beach Department of Health and Human Services  
Homeless Services Division c/o Homeless Services Officer  
1301 W. 12th Street, Long Beach, CA. 90813  
Phone:(562) 570-4581 Fax: (562) 570-4066

### GRIEVANCE FORM

<b>NAME:</b>	
<b>CONTACT INFORMATION:</b>	
<b>A. Please describe the situation you would like reviewed. Include agencies involved and those who may have been involved in the incident. If additional space is needed, please continue on the reverse side of this document.</b>	
<b>B. Please describe how you attempted to resolve this with your case manager or agency staff. If additional space is needed, please continue on the reverse side of this document.</b>	
<b>C. Please suggest a way you would like the situation resolved. If additional space is needed, please continue on the reverse side of this document.</b>	
<b>Program Participant Signature:</b>	<b>Date:</b>
<b>Did someone assist you in completing this form? (circle) Yes / No</b>	
<b>Name of person who assisted:</b>	<b>Signature of person who assisted:</b>
<b>Contact info (address and phone number):</b>	
<b>Name of staff who received grievance:</b>	

#### **ADMINISTRATIVE REVIEW**

<b>Action Taken:</b>	
<b>Homeless Services Officer:</b>	<b>Date:</b>
<b>Resolution outcome provided to client on the following date:</b>	

## Exhibit A

### Department of Health and Human Services Long Beach Continuum of Care – Homeless Services Division

Coordinated Entry System (CES) Process for Pre-Screen Forms	
Pre-Screen assists in the collection of preliminary information for assessment and linkage purposes.	
<b>STEP 1</b>	Referring entity (Faith-based, community member, service provider, etc.) will complete the Pre-Screen form and submit it to the <a href="mailto:LongBeachCE@longbeach.gov">LongBeachCE@longbeach.gov</a> mail box.
<b>STEP 2</b>	CE Matcher and support staff will monitor the CE mailbox for incoming Pre-Screen forms. <ul style="list-style-type: none"> <li>All received Pre-Screen forms will be tracked in a spreadsheet, which the CES Matcher will maintain and monitor</li> <li>All forms are stored and saved in an encrypted folder</li> </ul>
<b>STEP 3</b>	CE Matcher notifies the referring entity indicating that the form has been processed and referred to the CE access hubs (MHALA, MSC, Outreach).
<b>STEP 4</b>	CE Matcher dispatches the forms to the CE access hubs. <ul style="list-style-type: none"> <li>All necessary staff are notified for the arrival of the client indicated in the Pre-Screen form</li> </ul>
<b>STEP 5</b>	CE hub engages with the household upon arrival.
Overall Process for CE	
<b>STEP 1</b>	Client is assessed for Permanent Supportive Housing (PSH) and/or Rapid Re-Housing (RRH). CE case manager will assess for: <ol style="list-style-type: none"> <li>Client's homeless history and family composition; reviews demographic intake form</li> <li>Client's physical and mental health history and referrals to supportive services.</li> <li>Client's past case notes in Homeless Management Information System (HMIS)</li> </ol>
<b>STEP 2</b>	Coordinated Entry (CE) case manager works to complete the following tasks with client: <ol style="list-style-type: none"> <li>Verify client's current episode of homelessness.</li> <li>Gather source documentation (identification card, social security Card, birth certificate, and proof of income). – <b>if households do not have all documentation, they may still move forward in the housing process.</b></li> <li>Long Beach CE Housing Assessment in HMIS.</li> </ol>
<b>STEP 3</b>	CE case manager will complete a referral to the Housing Opportunities Pool (HOP) and submit to <a href="mailto:LONGBEACHCE@LONGBEACH.GOV">LONGBEACHCE@LONGBEACH.GOV</a> .
<b>Step 4</b>	Referral process begins: <ul style="list-style-type: none"> <li>CE matcher reviews referral and determines if vital documents are uploaded in HMIS.</li> <li>CE Matcher then populates bottom part of the referral indicating which documents are missing (if any) and displays proof that the referral has been processed.</li> <li>Referral is digitally stored in an encrypted folder in the shared city drive.</li> <li>CE Matcher notifies corresponding case manager that the referral has been processed via email <ul style="list-style-type: none"> <li>Instructions are provided that displays the status of referral (Complete, Conditional Complete, and Incomplete).</li> </ul> </li> </ul>
<b>Step 5</b>	CE case manager will communicate to client they have been referred to the HOP and continue to work with client to gather source documentation if referral is incomplete. Once documentation is obtained, CE case managers will scan documents into HMIS and notify CE Matcher and / or MSC Coordinator that the task has been fulfilled. <ul style="list-style-type: none"> <li>If / when vital documents are uploaded in HMIS, case manager notifies the updated via email to <a href="mailto:LongBeachCE@longbeach.gov">LongBeachCE@longbeach.gov</a></li> <li>CE Matcher shall respond to updated referral status only if / when new documents are uploaded in HMIS.</li> </ul>



Updated: 8/21/2020