



EASTERN SIERRA CONTINUUM OF CARE (CoC) MEETING

January 8, 2024, 1:00-2:30 PM

Inyo County Health and Human Services

Zoom: [Join on your computer](https://us06web.zoom.us/j/83070482119) <https://us06web.zoom.us/j/83070482119>

Meeting ID: [830 7048 2119](tel:83070482119) Passcode: [547199](#) Call in: +1-669-444-9171

AGENDA

Public Notice: In compliance with the Americans with Disabilities Act, if you need special assistance to participate in this meeting, please contact Inyo County HHS (760) 873-3305. Notification 24 hours prior to the meeting will enable Agency staff to make reasonable arrangements to ensure accessibility to this meeting.

1.0 Call Meeting to Order and Introductions

2.0 Public Comment: This time is set aside to receive public comment on matters not calendared on the agenda.

3.0 Approval of Minutes (Action Item): Review and consider approval of draft minutes from December 11, 2023.

4.0 HHAP (Informational Item): Receive an update on the transfer of HHAP 1 and 2 funds from IMACA to Inyo County to be administered on behalf of the ESCoC. Receive general updates on HHAP rounds 3 and 4.

5.0 2024 HIC/PIT Count Preparation:

- 1. 2024 HIC/PIT Ad Hoc committee report out (Informational Item)** date has been set for the count for Wednesday night, 1/24/24. Discussion on what each county will be doing on the night of the count.
- 2. PIT Count flyer (Informational Item):** See the attached draft flyer for partners and draft Public Service Agreement (PSA).

6.0 HMIS/CES Workgroup update (Action Item): Review and consider approval of the Coordinated Entry System Policy and Procedures. Comments received from Eastern Sierra Community Housing are to be considered in the discussion.

7.0 Roundtable

8.0 Future Agenda Items

1. Governance Charter Workgroup
2. HMIS/CES Update
3. HHIP Implementation
4. Program overview from Stanislaus Regional Housing Authority and MOU



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- 5. Accounting of Collaborative Applicant planning grants (2019-present)
- 6. Accounting of HHAP funds expended (Rounds 1-4)
- 7. Update on ESCoC Board Vacancies – pending updated Governance Charter

9.0 Next meeting – February 12, 2024 1:00-2:30

10.0 Adjournment



EASTERN SIERRA CONTINUUM OF CARE (CoC) MEETING

December 11, 2023, 1:00-2:30 PM

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1.0 Call Meeting to Order and Introductions

Members: Anna Scott, Amanda Greenberg, Jennifer Kreitz, Kris Kuntz, Patricia Robertson

Absent: None

Other: Danielle Murray, Olya Egorov, Isaura Ocampo, Vanessa Hayes, Amy Wyatt, Melissa Best-Baker

2.0 Public Comment: This time is set aside to receive public comment on matters not calendared on the agenda.

No Public Comment

3.0 Membership Updates (Action Item): Review and consider approval of CoC Board application for Eryn Dobyns, Alpine County HHS Deputy Director- Social Services.

Ms. Robertson made motion to approve and was seconded by Ms. Kreitz

Ayes: Ms. Scott, Ms. Greenberg, Ms. Kreitz, Mr. Kuntz, and Ms. Robertson

Nayes: -0-

Absent:

4.0 Approval of Minutes (Action Item): Review and consider approval of draft minutes from November 13, 2023

Ms. Kreitz made motion to approve and was seconded by Ms. Greenberg

Ayes: Ms. Scott, Ms. Greenberg, Ms. Kreitz, Mr. Kuntz, and Ms. Robertson

Nayes: -0-

Absent:

5.0 HHAP (Informational Item): Receive an update on the transfer of HHAP 1 and 2 funds from IMACA to Inyo County to be administered on behalf of the ESCoC. Receive general updates on HHAP rounds 3 and 4.

Ms. Scott reports that for HHAP 1 and 2 funds, an agreement was reached between Inyo County, IMACA and CalICH. The navigation center purchased by IMACA has sold- need to revisit amounts to be transferred over. Ms. Scott met with IMACA and CalICH and has made a plan, a small amendment is needed. Next step is IMACA to provide final accounting to CalICH and then amendment will be developed so full amounts of HHAP 1 and 2 can be transferred. Hopefully will be done in the next few days. Ms. Scott will reach out to subcommittee members to follow up regarding the planned distribution of funds from HHAP 1 and 2 that are not already earmarked. Solid update is expected in January.

HHAP 3 and 4- have received funds for and will be working with Thurmond to submit reports required for each round. Quarterly reports due 12/15.

Ms. Best Baker confirms there are no expenditures to date in HHAP 1-4.

HHAP round 5- NOFO from state is live, so process of completing app will begin, due 3/27/24. This month and next month more discussions from stakeholders will be completed. Reporting requirements are the same as HHAP 4- some eligible categories have been clarified. Subsidies for emergency shelter operations, and subsidies for supportive permanent housing have been separated out and will

need to be separated for reporting purposes. By July 1 of 2024- CalICH hands over everything to HCD.

Ms. Egorov asks- is there a noncompetitive allocation for each county or is it for the entire service area. Ms. Wyatt says allocation for each county and allocation for CoC.

With all HHAP rounds you get all payment up front- get one disbursement and then show you have spent, and you will get 2nd disbursement.

Ms. Krietz asks Ms. Wyatt if there will be a lot of changes when HCD takes over HHAP and Ms. Wyatt said it depends on if HCD contracts out to a consulting firm. HHAP is state funded (no federal funding tied) it should be more lenient but still unsure of what HCD will do.

6.0 2024 HIC/PIT Count Preparation:

1. **2024 HIC/PIT Ad Hoc committee (Informational Item)** set to meet later this week.
2. **PIT Count kits (Informational Item):** Inyo contacted Bomba socks and was able to receive an inventory for Inyo. Each County will need to request an inventory individually.

Ms. Wyatt- ad-hoc committee established and will be meeting this Friday, 12/15. Sara was able to go onto the Bomba Socks website- but was only able to get socks for Inyo. Each county must request inventory individually. Ms. Scott suggests working through subcommittee to make requests. Socks are quick to ship.

7.0 HMIS/CES Workgroup update (Action Item): Review and consider approval of the Coordinated Entry System Policy and Procedures. Comments received from Eastern Sierra Community Housing are to be considered in the discussion.

Ms. Scott states Coordinated Entry P&Ps were submitted, and comments were received. Ms. Best-Baker reviewed comments on the draft document.

Question around definition of Mainstream services - not just HHAP but for other services like case management, general community service connection. Ms. Egorov offered to add a definitive list of mainstream services. Ms. Scott suggests an addendum with definitions to ensure terms that are highlighted are defined.

Ms. Hayes states that Wild Iris clients have access to interpretation via an app on their cell phones.

Ms. Robertson says there are a lot of terms she has not been exposed to, for example, CES Master List. Re-emphasized the definition section.

Ms. Egorov states with VI SPIDAT specifically- we would be using that to help get clients on the list to then place them into a project like Innsbruck. Rental Relief funds would be a different scenario. ESG also has different requirements. If a household does not want to do a VI SPIDAT it is because they declined to enter a housing project via the COC.

Ms. Greenberg asks how closely will CES and HMIS policies be paired? Ms. Best Baker states there are some that will only use CES and some that will only use HMIS, which is why the policies are separate. Ms. Wyatt states HMIS is updated more frequently than CES.

Section where it states CES Coordinator who reviews recent referrals on a weekly basis- is this too frequent? Ms. Best- Baker states it was left on a weekly basis because there are new projects coming. Ms. Greenberg states since it is written P&P it would have to be weekly- can make it say monthly and do more as needed.

Ms. Greenberg states within HMIS there is a possibility for a program that is case management and housing navigation- we do not need to say, "mainstream services". Ms. Egorov states there is no other tool other than the coordinated entry system. If a household indicates they don't have CalFresh she will make a referral- the word mainstream services makes sense in this case. Want to connect everyone to all potential services.

Ms. Robertson states a broad stroke overview of transfer of benefits with details about who does what part of the process would be helpful.

Ms. Greenberg suggests removing the Housing First Approach.

Ms. Egorov states we should include definition of “protected classes” since they are different for federal and state. Ms. Greenberg to ask Ms. Wyatt for clarification.

Ms. Egorov states if a VI SPIDAT is completed, household is added to a housing connection list. Must close out from the VI SPIDAT, not CES. States that cannot be removed from CES because they will not be accessible later. Really is a profile that has general information.

Several other updates made to draft. Input will be incorporated into a final draft for the CoC Board to consider approving in January.

8.0 Roundtable

Ms. Robertson states ESCH is moving forward with Innsbruck Lodge. Expect to have 5 units ready by March. Rental assistance funds are available too. Ms. Scott states there are funds in HHAP that can be transferred over to help with this project.

Ms. Scott states she is in contact with a rep from CSAC and there is a member from CSAC that has helped with issues related to Valley Apts in Bishop and trying to move through process of moving project to a new organization. Hoping to see how we can improve access to vouchers. Will be meeting with them later this week. Stanislaus Regional Housing Authority has 98% of vouchers used. Still several questions that need to be answered.

2024 ANNUAL POINT IN TIME COUNT

The Point In Time is a count of individuals and families experiencing homelessness. The count provides vital information that helps Alpine, Inyo and Mono better understand homelessness in the communities and guides what funding to apply for and how to utilize it.

It is important that individuals and families experiencing homelessness are accurately represented in this count.



Alpine, Inyo and Mono Counties

**WEDNESDAY
JANUARY**

24th

2024

If your agency is interested in participating in the count, please reach out to Melissa Best-Baker



Eastern Sierra Continuum of Care

Policies and Procedures

Coordinated Entry System

Updated November 2023

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Definition of Terms

Access Point: Any agency, organization, or group who have the ability to enter individuals into Coordinated Entry System.

Contributing HMIS Organization (CHO): Any agency, organization, or group who has signed a HMIS Agency Agreement and is allowed access and contributes data to the HMIS database. CHOs are places where individuals experiencing homelessness or at risk of homelessness can go to be entered into the Coordinated Entry System.

Coordinated Entry System (CES): A regional database that helps connect individuals experiencing homelessness or at risk of homelessness with housing resources.

CES Coordinator: A designated agency point person to ensure that agreements related to the Coordinated Entry System are signed and data is complete. Also typically fulfills the role of CHO Administrator

Continuum of Care (CoC): means the governing body organized to carry out the responsibilities required in planning and implementing HUD funded efforts to end homelessness in Inyo, Mono, and Alpine counties. The CoC may be comprised 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, and organizations that serve homeless and formerly homeless persons to the extent that these groups are represented within the geographic area and are available to participate.

End User: An HMIS System Administrator staff person acting on behalf of a HMIS System Administrator or HMIS Lead Agency, who is responsible for compliance with the Memorandum of Agreement (MOA) and day-to-day operation of the data collection and uses or enters data into the HMIS Software System or another administrative database from which data are periodically uploaded to the HMIS

Homeless Management Information System (HMIS): A software application that houses databases such as CES to help connect individuals experiencing homelessness or at risk of homelessness with housing resources.

HMIS Lead Agency: An organization designated by a CoC to operate the CoC's HMIS means the entity designated by the Continuum of Care in accordance with the HMIS Proposed Rule (24 CFR Part 580) to operate the Continuum's HMIS on the Continuum's behalf.

HMIS Administrator: An organization that enters data into the HMIS Software System in compliance with the Memorandum of Agreement and under the oversight of the HMIS Lead Agency.

Housing Connection List: A list of active participants in the CES and other HMIS projects.

Housing Projects/Programs: Specific projects or programs within HMIS that may have specific funding or other requirements that dictate the population that can be served.

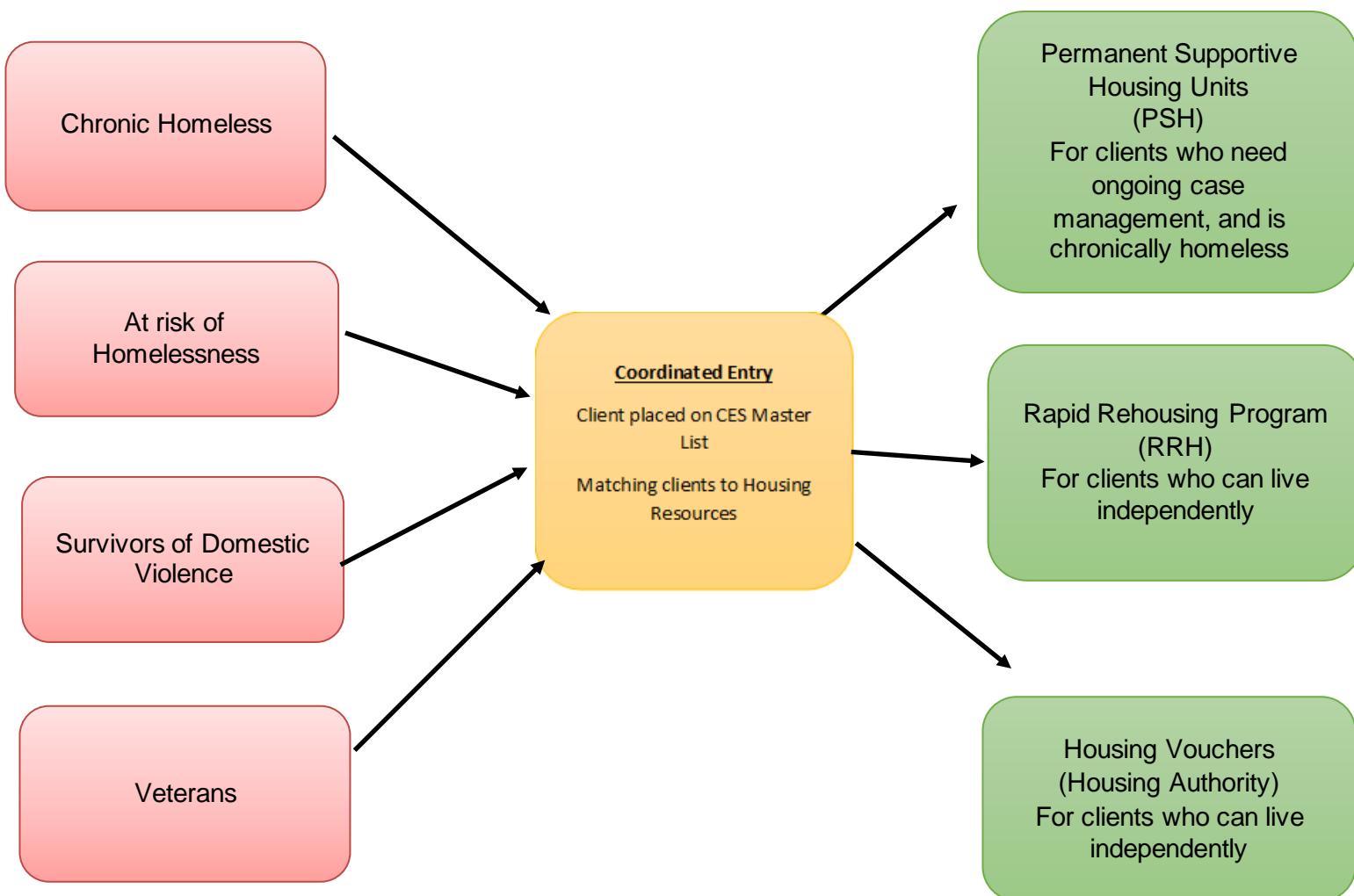
Mainstream services: Services provided to individuals who visit a CHO besides immediate housing placement, i.e. case management, housing navigation, rental subsidy, connection to social service eligibility, general community service connection, and food banks.

Specialized Access Point: Specialized Access Points are accessible for individuals or families who are fleeing domestic violence and/or are victims/survivors of domestic violence, dating violence, sexual assault, or stalking

Introduction

The Eastern Sierra Continuum of Care established a Coordinated Entry System (CES) under the Homeless Information Management System (HMIS) to ensure that access to Housing Projects/Programs, as well as mainstream services, are prioritized based on vulnerability to increase access amongst those who need it most.

The diagram below illustrates the many pathways to housing stability for those experiencing homelessness.



Geographic Coverage

The service area of the Coordinated Entry System covers the entire geographic area of Alpine, Inyo, and Mono counties. Individuals and families experiencing or at-risk of homelessness can present for services at any Housing and Service Provider that directly serves the population.

experiencing homelessness in these counties. For a list of active Contributing HMIS Organizations (CHOs) and Access Points, please see Appendix A.

Note: Not all Housing and Service Providers serve as an Access Point for CES, but providers may direct households to an Access Point.

Public Awareness

The Coordinated Entry System Intake process, Housing Projects/Programs, and mainstream services are affirmatively marketed to and available to persons regardless of race, color, religion, national origin, sex, marital status, age, sexual orientation, and disability with focus on those who are least likely to apply in the absence of targeted outreach to specific subpopulations.

Resources and marketing materials will be placed at each Contributing HMIS Organization (CHO) that serves populations experiencing or at-risk of homelessness, or that serve specific sub-populations, including but not limited to the severely mentally ill, those with chronic substance use disorder, veterans, victims of domestic violence, unaccompanied and/or parenting youth (under 18 and 18-24), and those who are experiencing chronic homelessness. The Eastern Sierra Continuum of Care and Contributing HMIS Organizations (CHOs) strive to reduce or eliminate obstacles for individuals experiencing communication, physical, policy, programmatic, transportation, social, and attitudinal barriers. To reduce or eliminate such barriers, resources will be posted online, translation and interpretation will be available upon request to the best of the CHOs ability utilizing the resources available, and free or low-cost transportation options will be identified. Materials may also be posted at police departments, parks, schools, and religious institutions to maximize potential reach.

Resources and marketing materials may include:

- Posters that list the location and phone number of Access Points.
- Flyers with information on Access Points and the Coordinated Entry System Intake process.
- Business cards with the location and phone number of Access Points.

HMIS and CES Management

The HMIS Lead Agency manages HMIS and CES Intake processes. The HMIS Administrator is responsible for ensuring that each Contributing HMIS Organization (CHO) and their CES Coordinator:

- Identifies and trains a CES Coordinator at each respective CHO.
- Monitors performance of CES, including CES Coordinators and End Users' compliance with Policies and Procedures.
- Reviews referrals between CHOs and Housing Providers to ensure that the Housing Connection List is kept current.

- Raises awareness of CES through the creation, circulation, and update of resources and marketing materials.
- Monitors and updates the CES Master List of users.

Each Contributing HMIS Organization (CHO) will assign a CES Coordinator who:

- Reviews recent referrals to Housing Projects/Programs and mainstream services on a monthly basis or more frequently as needed.
- Moves households on the Housing Connection List to inactive after 90 days of no activity after End Users have made significant attempts to make contact.
- Monitors performance of CES, including End Users' compliance with these Policies and Procedures.
- Raises awareness of CES through the creation, circulation, and update of resources and marketing materials.

Accessibility

All people in different populations and subpopulations in Alpine, Inyo and Mono Counties, including but not? limited to the severely mentally ill, those with chronic substance use disorder, veterans, victims of domestic violence, unaccompanied and/or parenting youth (under 18 and 18-24), and those who are experiencing chronic homelessness must have fair and equal access to the Coordinated Entry System and associated Housing Projects/Programs.

The Eastern Sierra Continuum of Care and Contributing HMIS Organizations (CHOs) have adopted a “No Wrong Door” approach to the CES Intake process. All households experiencing or at-risk of homelessness will be entered into CES and will be offered appropriate referrals to Housing Projects/Programs and mainstream services. The same assessment approach and standardized decision-making process is offered at all CHOs and Access Points. Access Points are available to those experiencing or at-risk of homelessness, regardless of permanent residency. For a list of active CHOs and Access Points, please see Appendix A.

Specialized Access Points are accessible for individuals or families who are fleeing domestic violence and/or are victims/survivors of domestic violence, dating violence, sexual assault, or stalking. For a list of active Specialized Access Points, please see Appendix A.

All CHOs and Access Points have completed a Memorandum of Agreement with the Eastern Sierra Continuum of Care reflecting their understanding of these CES Policies and Procedures and their commitment to fulfilling the roles and responsibilities associated with serving as an Access Point.

Emergency Services

Emergency Services, including all domestic violence service providers and emergency service hotlines, drop-in domestic violence service programs, safe houses and/or shelters for those

experiencing domestic violence, and other short-term crisis residential programs must operate with as few barriers to entry as possible. Households in the service area must be able to access Emergency Services independent of the operating hours of Contributing HMIS Organizations (CHOs). There will be no pre-screening required under such circumstances to enter Emergency Services and related programs. It is recommended that the household is screened by the end of the next business day.

Domestic Violence

Households will not be denied services at any Access Point or access to CES on the basis that the family or individual is fleeing domestic violence and/or are victims/survivors of domestic violence, dating violence, sexual assault, or stalking. These households, even if seeking shelter or services from non-domestic violence service providers, must have safe and confidential access to the CES Intake process, domestic violence service providers, and Emergency Services such as hotlines and shelters. A referral to a domestic violence service provider will be pursued at the household's discretion.

Non-Discrimination

Contributing HMIS Organizations (CHOs) that are recipients of Federal and State funds must comply with the Civil Rights Act and Fair Housing Act, and their related-State statutes. Steering households toward particular housing facilities or neighborhoods based on race, color, religion, national origin, sex, marital status, age, sexual orientation, and disability is strictly prohibited and subject to lawsuit. All individuals and families entered in the Coordinated Entry System must be informed of the ability to file a discrimination complaint through any CHO. For more information on this item, please visit HMIS Policies and Procedures.

Persons with Disabilities

Access Points will be accessible to households with disabilities, including those who use wheelchairs. The Eastern Sierra Continuum of Care and Contributing HMIS Organizations (CHOs) strive to reduce or eliminate obstacles for individuals experiencing communication, physical, policy, programmatic, transportation, social, and attitudinal barriers. To reduce or eliminate such barriers, resources will be posted online, translation will be available upon request (as possible?), and free or low-cost transportation options will be identified.

CES Intake Overview

The first step of the CES Intake process involves determining an individual or family's housing status. This helps the Eastern Sierra Continuum of Care ensure that only those experiencing or at-risk of homelessness are entered into the database. The Department of Housing and Urban Development (HUD) requires that households must fall under one of the following four categories to be entered into CES:

- Category 1 – Homeless.
- Category 2 – At imminent risk of losing housing.

- Category 3 – Homeless under other federal statutes.
- Category 4 – Fleeing domestic violence.

For additional information on definitions, please view Appendix D.

If an individual or family falls under one of the four categories, the End User should pursue the CES Intake process. If prevention or other mainstream services can address the housing needs of the individual or family, a referral to these services must be offered during this step. In cases of fleeing domestic violence or sexual abuse, an individual or family can choose to be immediately referred to a domestic violence service provider; the CES Intake process should continue at the provider's facility.

The first step must occur when an individual or family makes contact in-person with an Access Point/Contributing HMIS Organization (CHO). Phone and video appointments will also be made available upon request. In an emergency or after-hours situation, the individual or family should be contacted as soon as possible by the End User.

Note: The CES Coordinator will be trained to and may fulfill the role and responsibilities usually done by the End User.

CES Intake Process

The Eastern Sierra Continuum of Care uses a virtual set of standard questions (separate from the VI-SPDAT) created by the Department of Housing and Urban Development (HUD) during the CES Intake designed to:

- Screen for housing needs.
- Establish family unit (if unaccompanied).
- Identify barriers to housing.
- Collect the necessary client information for entry, including address history, income, and medical insurance.

Based on the information gathered during the interview, the End User may offer referrals to prevention or mainstream services at the household's discretion. Individuals or families who voluntarily seek entry into CES are allowed to decide what information is given to the End User at their own discretion. Households may refuse to answer questions and decline Housing Projects/Programs or mainstream services without retribution and will not be restricted from other forms of assistance based on the information provided (or not provided) during the CES Intake process.

Note: Certain Housing Projects/Programs may require the collection of specific information to determine eligibility.

VI-SPDAT Survey Overview

If the CES Intake indicates that an individual or family may be a potential candidate for a Housing Project/Program placement, the Housing Assessment tool, also known as a VI-SPDAT Survey, must be conducted within three (3) days upon entry into CES. The VI-SPDAT Survey is a prioritization tool created by the Department of Housing and Urban Development (HUD) and approved by the Eastern Sierra Continuum of Care. End Users will use their discretion to determine whether a VI-SPDAT Survey should be completed after the initial intake has been completed. End Users will use the most current instrument available in HMIS to conduct the VI-SPDAT Survey. In the unlikely event that a permanent housing unit is vacant, households deemed as potential candidates for that housing placement should be assessed immediately. End Users will consult the CES Coordinator at the respective Contributing HMIS Organization (CHO) if uncertain with how to proceed.

Note: The VI-SPDAT Survey will be reviewed, adapted, or updated annually as needed or required by HUD by the HMIS Lead Agency, HMIS Administrator, and the Eastern Sierra Continuum of Care.

The VI-SPDAT Survey Tool

After completion of the CES Intake, End Users from the different Contributing HMIS Organizations (CHOs) will use the VI-SPDAT Survey that is approved by the Eastern Sierra Continuum of Care. End User(s) who administer the VI-SPDAT Survey are required to have successfully completed HMIS and CES Training offered by the Eastern Sierra Continuum of Care.

CES Coordinators and/or End Users who administer the VI-SPDAT Survey are prohibited from denying households entry in the CES based the following perceived barriers, including but not limited to: too little or no income; history of active or past substance use disorder (SUD); history of domestic violence or sexual abuse; the type or extent of disability-related services or supports that are needed; history of evictions, poor credit, lease violations, and/or the absence of previous leases/landlord referrals; and/or history or record of criminal activity.

VI-SPDAT Survey Administration

As noted above, the VI-SPDAT Survey must be pursued within three (3) days of entry into CES. While three types of assessments exist for Individuals, Families, and Youth, each Housing Needs Assessment collects:

- History of Housing and Homelessness
- Vulnerability and Risk of Harm
- Socialization, Daily Functioning, and Wellness

The End User will select the proper assessment type (Individual, Family, or Youth) and conduct the VI-SPDAT Survey. Upon completion, the household will receive an Assessment

Result/Score based on individual responses to questions in the VI-SPDAT Survey. The score is generated automatically and is used to determine placement on a Housing Connection List that spans across the entire Eastern Sierra Continuum of Care. Scores will not exceed 15. A household's VI-SPDAT Survey must be updated annually to reflect a score that best represents a household's circumstances. If an individual or family experiences a life-altering event in which housing or other circumstances have changed before a year has passed, the End User will conduct a second VI-SPDAY Survey. The circumstance should be noted in the household's profile(s).

CES Coordinator and End User Training

The Eastern Sierra Continuum of Care conducts HMIS and CES Training for CES Coordinators and End Users on an as needed basis. The purpose of the training is to ensure that Contributing HMIS Organizations (CHOs), CES Coordinators, and End Users clearly understand and can fully comply with HMIS Policies and Procedures and subsequent CES Policies and Procedures. The training includes:

1. Review of HMIS and CES Policies and Procedures, including any variations for specific populations or subpopulations.
2. Instruction on how to perform a CES Intake and conduct the VI-SPDAT Survey when applicable.
3. Establish criteria for uniform referral and decision-making process across the service area of the Eastern Sierra Continuum of Care.
4. Use of recommended language and best practices based in Trauma-Informed Care (TIC).
5. Client confidentiality and best practices for in-person or virtual visits/appointments.

Note: HMIS and CES Training will be reviewed, adapted, or updated annually as needed or required by HUD by the HMIS Lead Agency, HMIS Administrator, and the Eastern Sierra Continuum of Care. Contributing HMIS Organizations (CHOs) will receive updated protocols and materials at least once per year.

Eligibility Determination

Information collected during the CES Intake and VI-SPDAT Survey may be used to determine eligibility for certain Housing Projects/Programs and mainstream services in the Eastern Sierra Continuum of Care and respective counties. Certain Housing Projects/Programs may serve a specific target population, such as individuals with disabilities, that may restrict enrollment for the general public. For example, the Housing Disability Advocacy Program (HDAP) under the California Department of Social Services (CDSS) may require an active Social Security Income (SSI), Social Security Disability Income (SSDI), or Cash Assistance Program for Immigrants (CAPI) application.

Prioritization in Eligibility Determination

The Eastern Sierra Continuum of Care uses the approved VI-SPDAT Survey in HMIS to place households on the Housing Connection List and prioritize referrals to mainstream services. The following factors based on vulnerability and risk of harm are used to determine connection to Housing Projects/Programs and mainstream services:

- Risk of harm, as evidenced by recent encounters with healthcare and crisis services; law enforcement and the criminal justice system; and legal issues and/or risk of exploitation.
- Issues with socialization and daily functioning, such as money management, meaningful daily activity, self-care, and social relationships.
- Wellness, as reflected by status of physical health and mental health, history of substance uses disorder (SUD), prescribed medication and use, tri-morbidity, domestic violence or sexual abuse, and/or other trauma.

The Assessment Result/Score produced by the VI-SPDAT Survey also considers length of homelessness and a household's entry to CES which consequently factors into the individual or family's placement on the Housing Connection List.

Data collected during the CES Intake and VI-SPDAT Survey must not be used to prioritize households by protected class defined by Federal and State of California statutes, including race, color, religion, national origin, sex, marital status, age, sexual orientation, and disability.

Housing Connection List

The Housing Connection List is maintained in real-time in HMIS. Households are automatically added to the Housing Connection List as soon as their VI-SPDAT Survey is completed. Likewise households are removed from the Housing Connection List when the household is permanently housed or have been exited from the Coordinated Entry System.

The Housing Connection List is monitored on a monthly basis by the HMIS Lead Agency and HMIS Administrator to ensure proper housing placement and referral activity amongst the Eastern Sierra Continuum of Care and Contributing HMIS Organizations (CHOs). Client information disclosed in the Housing Connection List is covered by the privacy and security protections prescribed by the Department of Housing and Urban Development (HUD) for HMIS practices in the HMIS Data and Technical Standards. For more information, please visit HMIS Policies and Procedures.

Households who become inactive for longer than 90 days after significant efforts to contact will be removed from the Housing Connection List by closing the VI-SPDAT Survey project in CES. End Users must attempt to make contact before the household is removed. Inactivity may be characterized by those who are no longer utilizing services through HMIS or the Eastern Sierra Continuum of Care; those who have identified other permanent housing opportunities, including moving out of the service area; and those who have indicated they are no longer interested in Housing Projects/Programs and mainstream services. When a household's VI-SPDAT Survey

project is closed by the End User, the cause should be noted in the household's profile in Coordinated Entry System.

Clients may re-enter the Housing Connection List in which a new Housing Needs Assessment or VI-SPDAT Survey will be conducted by the End User. A household may be added at any time to the Housing Connection List upon completion of the VI-SPDAT Survey; in no circumstances will a household be declined access or re-entry to CES due to past inactivity.

Referral Overview

The Eastern Sierra Continuum of Care practices a person-centered approach to its Referral Process including a warm handoff to partner agencies. Households will always have the right to decline a referral to a Housing Project/Program or mainstream services if they feel that it does not meet their needs.

Referral Process

The Eastern Sierra Continuum of Care strongly encourages Housing Project/Program participants to select participants using the Housing Connection List, beginning with the household with the highest score that aligns with any specific eligibility criteria that the Housing Project/Program may have. Those Housing Projects/Programs that have a requirement to use the CES Housing Connection List through their funding streams or other requirements, must do so.

Additionally, perceived barriers to housing or mainstream services will not be used to reduce or eliminate a household's housing opportunities. Barriers may include too little or no income; history of active or past substance use disorder (SUD); history of domestic violence or sexual abuse; the type or extent of disability-related services or supports that are needed; history of evictions, poor credit, lease violations, and/or the absence of previous leases/landlord referrals; and/or history or record of criminal activity.

Contributing HMIS Organizations (CHOs) and/or Housing Providers who serve the Eastern Sierra Continuum of Care are strongly encouraged to:

- Accept referrals using CES.
- Consider and prioritize the household's housing preferences.
- Use the Assessment Result/Score as the only means to fill vacancies in Housing Projects/Programs in the service area unless a Housing Project/Program serves a specific target population.
- Locate clients in ten (10) business days when a referral is made to a project/program in collaboration with the CHO.
- Verify client eligibility with documentation collected by CHO.
- Document if/when a client declines a referral to a Housing Project/Program in HMIS and notify the respective CHO that serves the client most directly.
- Notify the CHO if a referred client is not eligible for a Housing Project/Program.

CHOs and Housing Providers have the right to delay referrals if a household:

- Displays aggressive behavior toward staff.
- Gives verbal threats to staff.
- Vandalizes property.
- Making sexual advances to staff.

CHOs and Housing Providers use practices based in Trauma-Informed Care (TIC) to interact with households. Annual HMIS and CES Training will provide best practices and guidance for those interacting with directly with households, including the CES Coordinators, End Users, and Housing Providers.

Note: Housing Projects/Programs and Housing Providers may have Policies and Procedures independent of CES Policies and Procedures. Please contact the respective counties to inquire about Policies and Procedures for specific Housing Projects/Programs.

Data Management

HMIS

Contributing HMIS Organizations (CHOs), with the exception of domestic violence service providers, are required to use HMIS to collect and report data on persons served in CES. CHOs that access HMIS must participate and abide by CES Policies and Procedures. Domestic violence service providers may use a comparable database (as defined in HUD's HMIS Data and Technical Standards) and may choose not to link its database to HMIS of the Eastern Sierra Continuum of Care. For more information, please visit HMIS Policies and Procedures.

Privacy Protections

To protect the personal privacy of participants, CES Coordinators and Ends Users should collect only enough household information to make referrals to available Housing Projects/Programs and mainstream services. Disclosure of specific disabilities or diagnosis will not be required unless needed to determine specific project/program eligibility.

Personal information will not be shared between Contributing HMIS Organizations (CHOs) who participate in the CES Intake and Housing Needs Assessment Process unless the participant has provided written consent to information sharing. The consent must be properly documented by a Consent to Release of Information. Services will not be denied to participants who refuse to allow their data to be shared unless Federal or State statutes require the collection, use, storage, and reporting of a household's personally identifiable information as a requirement of program participation.

Secure Document Management

Physical documents that contain personal information (printed assessments, Housing Connection Lists, referral forms, etc.) must follow the best practices outlined below. This includes all documents created during the CES Intake and VI-SPDAT Survey process.

Limited Access

Access to these documents will be granted only to CES Coordinators and/or End Users who need the information contained in these documents to adequately pursue referrals.

Secure Storage

These documents, when not in use, must be securely stored and protected either in locked cabinets or a locked room.

Retention and Destruction

These documents must be destroyed (shredded or burned) when they are no longer needed or when the document retention period adopted by the organization that holds the documents expires, whichever is longer.

Other Standards and Requirements

Where a conflict arises between a CES privacy protection and statues, or licensing requirement or professional standard, the most stringent of the two applies.

Evaluation

The Eastern Sierra Continuum of Care and its Contributing HMIS Organizations (CHOs) continuously work to evaluate and enhance the CES Intake and Housing Needs Assessment process to adapt it to changing community needs. A formal evaluation of the performance metrics will be performed on a schedule outlined in the HMIS Policies and Procedures.

Performance metrics and related information is compiled in a formal evaluation report that is delivered to the Eastern Sierra Continuum of Care, which may approve changes to CES Policies and Procedures, and processes based on the report's recommendation.

Performance Metrics

Reports on key CES success metrics will be published and made available on a quarterly basis to the Contributing HMIS Organizations (CHOs). Metrics will include:

- The number of individuals and families on the Housing Connection List for the respective counties and Eastern Sierra Continuum of Care.
- The average length of time on Housing Connection List for the respective counties and Eastern Sierra Continuum of Care.

- The number of individuals and families placed in housing for the respective counties and Eastern Sierra Continuum of Care.
- The average and median assessment scores for the respective counties and Eastern Sierra Continuum of Care.
- The number of households removed due to inactivity for the respective counties and Eastern Sierra Continuum of Care.

Appendix A – Contributing HMIS Organizations (CHOs), Access Points, and Specialized Access Points

Contributing HMIS Organizations (CHOs)

Inyo County Department of Health and Human Services

Melissa Best-Baker, mbestbaker@inyocounty.us 760-878-0232

Mono County Department of Health and Human Services

Francie Avitia, favitia@mono.ca.gov 760-924-1770

Eastern Sierra Community Housing (formerly Mammoth Lakes Housing)

Patricia Robertson, patricia@eschousing.org 760-934-4740

Access Points

Inyo County Department of Health and Human Services

Melissa Best-Baker, mbestbaker@inyocounty.us 760-878-0232

Mono County Department of Health and Human Services

Francie Avitia, favitia@mono.ca.gov 760-924-1770

Mono County Department of Behavioral Health Services

Amanda Greenberg agreenberg@mono.ca.gov 760-924-1740

Eastern Sierra Community Housing (formerly Mammoth Lakes Housing)

Patricia Robertson, patricia@eschousing.org 760-934-4740

Specialized Access Points

Wild Iris Family Counseling & Crisis Center

Vanessa Hays VHays@wild-iris.org 760-873-6601

Appendix B – Action Plan

The Eastern Sierra Continuum of Care continuously seeks to develop and adapt the Coordinated Entry System Intake process during its first year of operation. Suggest action items include:

Monthly

- The CES Coordinator will review Housing Project/Program referrals between counties and follow-up if needed.
- The CES Coordinator will review the list of active households and inactive any households who are no longer utilizing services through HMIS or the Eastern Sierra Continuum of Care; those who have identified other permanent housing opportunities, including moving out of the service area; and those who have indicated they are no longer interested in Housing Projects/Programs and mainstream services.

Quarterly

- The CES Coordinator will review Quarterly Performance Metrics and System Performance Measure.
- The CES Coordinator will report to Eastern Sierra Continuum of Care Performance Measures.
- The CES Coordinator will work with the HMIS Administrator to clean the CES Master List. of users for their agency.
- The HMIS Administrator will share marketing materials with Contributing HMIS Organizations and Access Points as well as other community spaces.

Annually

- The HMIS Administrator will review and adapt HMIS and CES Training materials.
- The HMIS Administrator will offer HMIS and CES Training to CES Coordinators and End Users.
- The HMIS Administrator will review the CES Policies and Procedures and propose necessary changes to the Eastern Sierra Continuum of Care.
- The HMIS Administrator will review and adapt marketing materials.
- The HMIS Administrator will review and adapt assessment parameters based on local needs and priorities.
- The HMIS Administrator will review the VI-SPDAT Survey tool and propose necessary changes to the Eastern Sierra Continuum of Care.

Appendix C – *At a Glance – Criteria and Recordkeeping Requirements for Definition of Homeless*

Available at:

https://files.hudexchange.info/resources/documents/HomelessDefinition_RecordkeepingRequirementsandCriteria.pdf



Homeless Definition

CRITERIA FOR DEFINING HOMELESS	Category 1	Literally Homeless	(1) Individual or family who lacks a fixed, regular, and adequate nighttime residence, meaning: <ul style="list-style-type: none"> (i) Has a primary nighttime residence that is a public or private place not meant for human habitation; (ii) Is living in a 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 and local government programs); <u>or</u> (iii) Is exiting an institution where (s)he has resided for 90 days or less <u>and</u> who resided in an emergency shelter or place not meant for human habitation immediately before entering that institution
	Category 2	Imminent Risk of Homelessness	(2) Individual or family who will imminently lose their primary nighttime residence, provided that: <ul style="list-style-type: none"> (i) Residence will be lost within 14 days of the date of application for homeless assistance; (ii) No subsequent residence has been identified; <u>and</u> (iii) The individual or family lacks the resources or support networks needed to obtain other permanent housing
	Category 3	Homeless under other Federal statutes	(3) Unaccompanied youth under 25 years of age, or families with children and youth, who do not otherwise qualify as homeless under this definition, but who: <ul style="list-style-type: none"> (i) Are defined as homeless under the other listed federal statutes; (ii) Have not had a lease, ownership interest, or occupancy agreement in permanent housing during the 60 days prior to the homeless assistance application; (iii) Have experienced persistent instability as measured by two moves or more during in the preceding 60 days; <u>and</u> (iv) Can be expected to continue in such status for an extended period of time due to special needs or barriers
	Category 4	Fleeing/Attempting to Flee DV	(4) Any individual or family who: <ul style="list-style-type: none"> (i) Is fleeing, or is attempting to flee, domestic violence; (ii) Has no other residence; <u>and</u> (iii) Lacks the resources or support networks to obtain other permanent housing



Homeless Definition

RECORDKEEPING REQUIREMENTS	Category 1	Literally Homeless	<ul style="list-style-type: none"> Written observation by the outreach worker; <u>or</u> Written referral by another housing or service provider; <u>or</u> Certification by the individual or head of household seeking assistance stating that (s)he was living on the streets or in shelter; For individuals exiting an institution—one of the forms of evidence above <u>and</u>: <ul style="list-style-type: none"> discharge paperwork <u>or</u> written/oral referral, <u>or</u> written record of intake worker's due diligence to obtain above evidence <u>and</u> certification by individual that they exited institution
	Category 2	Imminent Risk of Homelessness	<ul style="list-style-type: none"> A court order resulting from an eviction action notifying the individual or family that they must leave; <u>or</u> For individual and families leaving a hotel or motel—evidence that they lack the financial resources <u>to stay</u>; <u>or</u> A documented and verified oral statement; <u>and</u> Certification that no subsequent residence has been identified; <u>and</u> Self-certification or other written documentation that the individual lack the financial resources and support necessary to obtain permanent housing
	Category 3	Homeless under other Federal statutes	<ul style="list-style-type: none"> Certification by the nonprofit or state or local government that the individual or head of household seeking assistance met the criteria of homelessness under another federal statute; <u>and</u> Certification of no PH in last 60 days; <u>and</u> Certification by the individual or head of household, and any available supporting documentation, that (s)he has moved two or more times in the past 60 days; <u>and</u> Documentation of special needs <u>or</u> 2 or more barriers
	Category 4	Fleeing/Attempting to Flee DV	<ul style="list-style-type: none"> <i>For victim service providers:</i> <ul style="list-style-type: none"> An oral statement by the individual or head of household seeking assistance which states: they are fleeing; they have no subsequent residence; and they lack resources. Statement must be documented by a self-certification or a certification by the intake worker. <i>For non-victim service providers:</i> <ul style="list-style-type: none"> Oral statement by the individual or head of household seeking assistance that they are fleeing. This statement is documented by a self-certification or by the caseworker. Where the safety of the individual or family is not jeopardized, the oral statement must be verified; <u>and</u> Certification by the individual or head of household that no subsequent residence has been identified; <u>and</u> Self-certification, or other written documentation, that the individual or family lacks the financial resources and support networks to obtain other permanent housing.