Rhode Island Continuum of Care

Statewide Coordinated Entry System for Homeless Services and

Homeless Management Information System

Policies and Procedures Addendum to address

COVID-19 Public Health Crisis

Updated October 7, 2021; in effect through December 31, 2021.

Please note: This is an ongoing and evolving public health crisis;

effective dates and policy addendums may change as the response evolves.

Table of Contents

Introduction

In December 2019, a new coronavirus known as SARS-CoV-2 was first detected. It has since caused outbreaks of the coronavirus disease COVID-19 that has spread globally. The first case was reported in the United States in January 2020 and in Rhode Island in March 2020. In March 2020, the World Health Organization declared the coronavirus outbreak a pandemic and the President declared the outbreak a national emergency. Since March 2020, Rhode Island has declared a state of emergency and made a disaster declaration; shut down large gathering places; and limited the movement of residents. As a consequence, many RICOC stakeholders and provider agencies are facing challenges in ensuring appropriate shelter and housing options are available for program participants who need to be separated from others because they are exhibiting symptoms; training staff on how to safely work with program participants and prevent spreading the virus; obtaining supplies to prevent the spread of the virus; and maintaining necessary staffing levels during the outbreak. Further, many program participants are suffering economic consequences from the mass shutdown of businesses and lack of availability of traditional mainstream benefits.

In response to COVID-19 the Rhode Island Continuum of Care (RICoC) has updated and changed some of its Rhode Island Statewide Coordinated Entry System (CES) Policies and Procedures and Homeless Management Information System (HMIS) Policies and Procedures to position the system to respond to the COVID-19 public health crisis. This CES and HMIS Policies and Procedures addendum ("the addendum") reflects those updates made to date and the date they are currently planned to expire. Please note this is a constantly evolving crisis and response, and dates and policies are subject to change as the RICoC continues to refine its COVID-19 response.

Wherever applicable, the addendum supersedes the currently adopted RI Statewide CES Policy and Procedure Manual and the HMIS Policy and Procedure Manual for the duration of the COVID-19 crisis in Rhode Island, which is the timeframe during which this addendum is intended to be in effect.

Determination of Eligibility and Priority for Shelter and Housing Options

To facilitate access to the most appropriate response to each household's immediate and long-term housing needs and ensure that scarce permanent housing resources are targeted to those who are most vulnerable and/or have been homeless the longest, the *Statewide Coordinated Entry System* uses the following criteria. Please note: in all instances where the term "family" is used, the RICOC is using HUD's definition of a family; here is a link to more information on the HUD definition of a family:

Model	Eligibility/Entry Requirements -	Priority Populations for Service – used to establish admission priorities relative to other eligible applicants
ALL Program Models	No additional eligibility requirements can be applied beyond those required by funders or established as a Coordinated Entry policy All eligibility requirements stipulated by funders will apply	
Permanent Supportive Housing/ COC Rental Assistance	Must meet HUD definition of literally homeless (category 1) <u>or</u> have met that definition prior to entering transitional or other COC assisted housing Must include at least one family member with a disability Must meet any additional eligibility criteria specified by funding source Must have a completed CES Standard Assessment	Households that have high CES Standard Assessment scores or are deemed appropriate byway of Housing Priorities Households that have longer length of time homeless relative to other PSH eligible households

Rapid Re-Housing/CHF Rental Assistance	Must meet HUD's definitions of:
	Literally homeless (Category 1)
	(all CoC funded projects)
	     -or-
	Fleeing domestic abuse or violence (Category 4)
	     -or-
	Unaccompanied Youth may meet Category 2 homeless definition if the projects have received HUD approval to serve category 2
		Households who are eligible for PSH but literally homeless and awaiting PSH placement
		
		Households that have high Standard Assessment scores relative to other households targeted for RRH and/or are deemed appropriate byway of Housing Priorities

	homeless, transition aged, youth (CoC funded projects) Must have a completed Standard Assessment Must meet any additional eligibility criteria specified by funding source	
HUD's Emergency Housing Voucher program (COC partnership with Providence Housing Authority and RIHousing)	Individuals and families who are: homeless; at risk of homelessness; fleeing, or attempting to flee, domestic violence, dating violence, sexual assault, stalking or human trafficking; or recently homeless and for whom providing rental assistance will prevent the family's homelessness or having high risk of housing instability.	"Moving on from Rapid Rehousing": Households enrolled in Rapid Rehousing (RRH) or State Rental Assistance program who are approaching the expiration of their rental assistance and no longer require supportive services as measured by the housing assessment but do require ongoing subsidy of their rent to afford their housing. Households Enrolled in Rapid Rehousing or State Rental Assistance who are approaching the expiration of their rental assistance, continue to require supportive services to maintain their housing as measured by the housing assessment, and have a confirmed supportive services plan documented with the CES lead agency, the COC and the housing authority.

Transitional Housing (Includes: Substance use treatment/ sobriety programs, VA Grant/Per Diem, Family programs)	Not able to be diverted Income below 30% AMI Individuals or families who meet HUD's definition of literally homeless (category 1) homelessness Persons for VA supported programs (Grant/Per Diem) must meet VA eligibility criteria	Young adults under age 25 Households headed by young adults Households headed by persons with histories of foster care involvement Families with children Fleeing DV and DV is cause of recent homeless episode Households not in need of PSH At least one prior episode of homelessness (except unaccompanied youth)
Emergency Shelter	Households experiencing homelessness who cannot be diverted and with no other safe place to sleep Households who can be safely accommodated in shelter – not presenting danger to self or others A shelter may **NOT** require a negative COVID test as eligibility criteria to enter shelter. If a person is exhibiting COVID symptoms and cannot safely Q/I in the shelter program, that person should be supported to access testing and Q/I shelter as needed through established RIDOH protocol for homeless programs.	Unsheltered households identified by an outreach worker and/or CES lead Households that have high acuity based on standard assessment score
Non-congregate hotel winter and COVID emergency shelter program	Households experiencing homelessness who cannot be diverted and with no other safe place to sleep	Unsheltered households identified by an outreach worker and/or CES lead Individuals who are medically compromised and at high risk of medical complication if assisted in congregate shelter

| Non-Congregate Medical Respite Emergency Shelter program | iseholds experiencing homelessness b cannot be diverted and have no other safe place to sleep and have a medical condition which requires clinical care/medical oversight. All households who meet eligibility requirements must be approved by the Coordinated Entry System and Medical Respite Admissions Committee. | Households experiencing homelessness, identified by an outreach worker or CES lead who are admitted for clinical/medical care whose treatment does not warrant a continued hospital stay but whose condition will be exacerbated if living in a congregate setting or place not meant for human habitation.

Initial length of stay is 14 days, additional stay may be extended after consultation with their care team/primary care provider and CES lead. |

Change to HUD's Definition of Homelessness

On September 30, 2020 HUD issued a new waiver for COC programs, which is summarized below. The RICOC's CES is therefore amending its definition of homelessness (effective November 5, 2020) to broaden to the 120-day definition described in the available HUD waiver. This will allow COC programs that choose to apply for this waiver, to continue to operate in accordance with the RICOC's CES policy. Please note, this definition change is to HUD's homeless definition, not to HUD's Chronic Homelessness definition.

Waiver	Applicable Program/Project Type	Timeframe	Citation	Policy Waived
Homeless Definition - Temporary Stays in Institutions of **90 days or Less**	All CoC Projects and YHDP ESG-CV and Annual Entitlement ESG	Six months starting on 9/30/20, extended through 6/30/21; extended through 12/31/21	24 CFR 578.3 24 CFR 576.2	An individual may qualify as homeless so long as he or she is exiting an institution where they resided for **120 days or less** and resided in an emergency shelter or place not meant for human habitation immediately before entering that institution.

Addendum to the process for Individual Shelter Referral and CES/HMIS entry expectations

Effective 7/1/2020, the Rhode Island Continuum of Care (RICOC) and Consolidated Homeless Fund (CHF) are **ending** the "pause" previously in place on the Rhode Island's Statewide Coordinated Entry System's (CES) requirement for a completed shelter assessment to enter a shelter serving individuals.

This means that an eligible shelter referral must have a completed shelter assessment and be referred to shelter through the designated CES Lead agency for shelter referrals.

The policy below has since been updated (above) and is no longer in effect; it is being included here for reference only:

> Effective immediately [4/15/2020-6/30/2020], the Rhode Island Continuum of Care (RICOC) and Consolidated Homeless Fund (CHF) are continuing to pause Rhode Island's Statewide Coordinated Entry System's (CES) requirement for a completed shelter assessment to enter a shelter serving individuals. The CES hotline remains open for shelter assessments for families, housing, diversion and shelter resources.

Those persons entering individual shelters must be reported to CES (phone: 401-277-4316) within two (2) business days by the shelter provider in order to assure eventual completion of the CES assessment. The CES assessment should be completed in HMIS within five (5) business days.

The HMIS Lead (HMIS@rihomeless.org) may be contacted for assistance needed in meeting HMIS entry expectations throughout the duration of the COVID-19 crisis.

The policy below has since been updated (above) and is no longer in effect; it is being included here for reference only:

Effective [3/19/2020 – 4/14/2020], the Rhode Island Continuum of Care (RICOC) and Consolidated Homeless Fund (CHF) are pausing Rhode Island's Statewide Coordinated Entry System's (CES) shelter assessment process for shelters serving individuals. Please message this to all staff and constituents within shelter provider agencies today. The RICOC/CHF will reassess the situation in approximately one month, on April 15th, and provide guidance going forward.

Agencies should make every effort to have clients shelter in the same location and bed whenever possible. Programs should continue to accept new clients for available beds until the individual shelter reaches capacity. Established procedures and protocols to screen clients and address any clients presenting with symptoms, should be followed to protect the safety of clients and staff.

The CES hotline will remain open for diversion and shelter resources. Additionally, those entering shelter should be referred to CES in order to complete assessments as soon as possible for housing placement.

Please note this change applies only to shelter assessment, the RICOC and CHF housing providers must still adhere to CES policy.

Individual and Family Shelter and Outreach expectations regarding CDC guidelines

Agencies should make every effort to have clients shelter in the same location and bed whenever possible. Programs should continue to accept new clients for available beds until the individual shelter reaches capacity. Established procedures and protocols to screen clients and address any clients presenting with symptoms, should be followed to protect the safety of clients and staff. These include:

> Rhode Island's Shelter/Outreach COVID Screening Tool (PDF; updated 12/16/20)
>
> Rhode Island's Screening Tool Training: 15 minute video | pdf slideshow

Housing Help Rhode Island (HHRI)
__Please note: This program has closed__; the information below is maintained here for reference only:

HHRI is a homelessness prevention program; its access point is the website: https://www.housinghelpri.com/

Threshold/Eligibility:
1. HUD Definition of "at-risk of homelessness"

Households must meet one of the following criteria:

- Is doubled up with another family because of economic hardship;

- Has been notified that their right to occupy their current housing or living situation will be terminated within twenty-one (21) days after the date of application;

- Has moved because of economic reasons two or more times during the sixty days immediately preceding the application;

- Is exiting a publicly funded institution or system of care;

- Lives in a hotel or motel, the cost of which is not paid for by charitable organizations or by federal, state, or local government programs for low-income individuals;

- Lives in an SRO (Single Room Occupancy) or efficiency apartment unit with at least one other person, or a larger housing unit in which there are more than one and a half persons per bedroom; or

- Otherwise lives in housing that has characteristics associated with instability and an increased risk of homelessness.

2. Income Eligible

   Households must earn (immediately prior to crisis) no more than 50% of Area Median Income, based upon family size and area, as published by HUD.

3. COVID Impact

   Households must have suffered an income reduction during the COVID19 health crisis. This is documented by comparison of income prior to crisis (March) and current income (which may factor underemployment and other income).

4. Other Options Not Available

   Households must have no other housing options and resources and there are no other community resources available to prevent literal homelessness. In other words, "but for" this assistance, the household would experience homelessness.

   In some instances, households not eligible/suitable for this initiative may be referred to other programs/resources able to meet their need.

Targeting/Prioritization

Primary Criteria: Income*

0%-30% AMI	5 points
31%-40% AMI	4 points
41%-50% AMI	3 points

*While other factors such as history of evictions/homelessness and household indicators were considered for prioritization purposes, the COC/CES believes income alone is, during this current crisis, sufficient to target resources to those households most likely to experience homelessness but for this emergency assistance. Other criteria such as "urgency" and "sudden decrease of income" is factored due in the eligibility criteria for this program. Implementation of this program by Crossroads RI, the COC/CES Diversion lead, further assures consistency with CES.

Note(s):

Mainstream Resources:

Participants in this program will be referred to mainstream resources which may assist the households in meeting their needs. When homelessness is unable to be prevented, a household may be referred to appropriate shelter, housing and/or resources through use of the State's Coordinated Entry System (CES).

<u>Documentation:</u>

When third-party documentation is not feasible and when allowed by federal regulations, self-certification/reporting of criteria may be accepted. Note that strict requirements for written documentation of income and loss of housing (eviction) are required.

<u>Process – Approval:</u>

Crossroads will review applications currently submitted. Denials will be sent to those households not currently meeting eligibility criteria. Applicants in the highest priority (lowest income) category will continue to be assessed and may be provided assistance once eligibility/prioritization is confirmed.

<u>Reporting:</u>

Information on households served will be tracked through HMIS and/or other means.

<u>Screening:</u>

The two-tier process summarized above is designed to help staff assess, document and determine those households who are most at-risk of becoming homeless.

Eligibility:

- "At-risk" conditions, as defined by HUD   Documentation in file

- Income Eligibility   Documentation in file

     o including COVID impact

- Options (below)   Documentation in File

HHRI is not solely an eviction prevention program. It is intended to prevent households from losing all housing and ending up in an emergency shelter or on the street. Some households applying for HHRI may be losing their housing but have another safe and appropriate housing option including temporary options, where they can stay while they work to obtain their own housing. Or, an application may have another resource they can sue to maintain current housing or obtain new housing. Such applicants would not be considered at imminent risk of literal homelessness "but for" this assistance.

Staff may use the following screening questions as a starting point, to better understand an applicant's current circumstances and options. Staff should seek to determine whether the household has safe, viable, immediate housing options and resources to keep them from becoming literally homeless.

Imminent housing loss – A household should be required to leave their current housing arrangement within 21 days. Staff could explore whether the household could avoid literal homelessness by negotiation directly with their landlord. Staff should also seek to determine if the household is in immediate need of assistance to ensure they have a safe and appropriate place to stay in the near term.

Other Housing Options & Resources – Staff should assess if the household has other friends, family or close support networks that could assist them in avoiding literal homelessness. Staff should engage in a conversation with the household regarding potential support and use this information to determine whether the household has other housing options and resources available to them. Staff should be particularly mindful of any inappropriate, unsafe, or otherwise unhealthy relationship the household is reluctant or refuses to pursue and not assume such options are viable to prevent the household's homelessness.

Financial Resources – Staff should determine if the household has financial resource to pay for their immediate housing costs. This may include their own resources, community resources, or financial assistance they are eligible for an is available in time to prevent literal homelessness.

CES Housing Referrals

On January 7th, 2021 the CoC Board approved the new CES Assessment and Workflow which has since changed the way by which clients are referred for housing opportunities through CES. Housing applications (aka "packets") are no longer required in order for households to be considered for referrals.

Households in need of housing referrals must have a Housing Assessment completed in HMIS in order to be considered for upcoming housing opportunities. As clients reach the top of the vulnerability range for PSH and RRH, the Coordinated Entry staff will contact the clients case manager to confirm the client's homeless status and respective eligibility for PSH or RRH.

Referring case managers will receive email notification informing that their respective client has fallen into the top-twenty range for the next upcoming housing opportunity. Case Managers will then be asked to update their client's current living situation, and upload homeless history documentation to their HMIS profile. This required documentation is reflective of low-barrier permanent housing programs, such as CHF, ESG and CoC programs.

Recipient housing agencies *may* require additional paperwork in their policies and procedures when accepting housing referrals. For this reason, referring case managers are strongly encouraged to collect additional documentation which will be required for housing programs that are not considered low-barrier. Collection of this documentation will expedite the housing process if and when a referral has been made. **However, the RICOC *does* encourage its recipient agencies to be as low-barrier as possible while aligning with federal regulations.**

Prospective Housing Assessment Score Range

While continuing to gather data, the Coordinated Entry Team will be referring clients who score in the 30+ range on the Housing Assessment for PSH and clients who score 20-29 on the Housing Assessment for RRH. These ranges are subject to change as data evaluation continues

[Please find the updated CES Housing referral form on the following page.]

Coordinated Entry System: Housing Referral Cover Sheet

Client Information

Client Name:

Client Phone:

Client Email:

Client Gender Identity:

Client DOB:

 # in Household:

Current Program Information

CES Enrollment Date:

Client UID:

Client's Current Program:

Date of Program Entry:

Housing Assessment Score:

Referring Case Manager Contact Information

Name:

Phone:

Email:

Agency:

Subpopulation (Check all that apply):

Veteran	Individual	Family	DV	TAY

Rhode Island Coalition for the Homeless

Referral Information

Date of Referral:

Referral To:

CM Provider When Housed:

Additional Notes:

CES Personnel Signature:

The Landlord Challenge

<u>**Please note: This program has closed**</u>; the information below is maintained here for reference only.

In June 2020, Governor Raimondo announced [The Landlord Challenge](#), an incentive program run by the State Office of Commerce to support landlords in pledging vacant units to help combat COVID and end homelessness in Rhode Island. The program provides:

- $2,000 signing bonus for the first pledged unit
- $500 for each additional unit
- Up to $2,000 per unit move-in upgrades and repairs
- Guaranteed first and last month's rent

To be eligible to receive the incentives, vacant units must be pledged by the landlord or property manager contacting United Way Rhode Island's 211. An attestation and a W9 form must also be submitted to United Way of RI to receive incentive payment.

If vacant units pledged are available to lease, homeless services provider agencies can request units on behalf of their clients by contacting RI Coalition for the Homeless' (RICH) Housing Navigator. The Housing Navigator may give vacant unit information to provider agencies working to house (or rehouse) homeless (or formerly homeless) households, that are currently eligible to be subsidized under one of the following funding sources: the Continuum of Care (CoC) PH programs; the Consolidated Homeless Fund (CHF) PH programs; the Supportive Services for Veteran Families (SSVF) PH programs; the HOME Emergency TBRA program, the Mainstream (Housing Choice) Voucher programs operated by Providence Housing Authority and Pawtucket Housing Authority.

Homeless Management Information System

The following are amendments to the RIHMIS Policies and Procedures that was amended and approved by the RI COC Board of Directors on February 6, 2020. These amendments shall remain in effect until noted or until further guidance is issued.

P&P Element	Effective Date	Amendment
Training	5/5/2020	New User Training: New Users shall complete the series of Training Videos in the RIHMIS Learning Management System (LMS). Homework will be completed in the training site and upon completion, they will present it to their Agency HMIS Administrator for accuracy prior to a singular submission of homework to LMS. The HMIS Team will continue to provide review of homework for new agencies or agencies with new HMIS administrators. New User Group Training will be held virtually for 2.5 hours. Once users are trained and licensed, they must attend and successfully complete: 1. ANY two group HMIS trainings annually 2. One Privacy and Security Group training annually 3. Ad-Hoc training as needed

		Agency HMIS Administrators or their designee can receive credit for one group training for every 3 Agency HMIS Administrator Weekly meetings attended. Additionally, attendance at the May 5th, 2020 and May 12, 2020 Administrator Weekly meetings will satisfy the requirement for Security Compliance Training. The Security Compliance Training scheduled on June 2, 2020 will count towards the training requirement for the 2019-2020 training year (6/1/2019-5/31/200). June 1st, 2020 - May 31st, 2021 Training Year Requirements will be amended to the following: New User Training process will remain the same. All users will be required to be trained in our new HMIS database Clarity prior to September 18, 2020. All HMIS users will be required to attend one Security Compliance Training per year.
Agency HMIS Administrator Requirements	Effective Date 3/31/2020	Agency HMIS Administrators are required to attend a weekly hour-long virtual meeting in lieu of the requirement for quarterly attendance at the HMIS Steering Committee Meeting. Agency HMIS Administrators can designate another agency HMIS user to attend in their place.
COVID-19 Survey	3/31/2020	HUD has issued guidance about tracking COVID-19 throughout our community in HMIS. Service Point released the survey in our database and we will be implementing the survey in HMIS workflows this week. On April 7, 2020 , Agency HMIS Administrators were provided with a full training on the use and functionality of the COVID-19 survey in HMIS. It is expected that all SO, ES and TH type projects complete the survey at each client contact or at least daily. On April 30, 2020, the survey was made available to all projects in HMIS. It is expected that all projects are using the COVID-19 survey at project entry and regularly, using the interim assessment feature, to track symptoms, testing and test results.

Data Security	5/19/2020	When the HMIS team detects or receives a report of a potential security or privacy violation, the following may occur.

When the HMIS team detects or receives a report of a potential security or privacy violation, the following may occur.

1) The HMIS team will send an email to user(s) involved in the alleged violation along with their supervisor and Agency Administrator documenting the violation

2) The HMIS team will request all senders and recipients to delete the email containing Personally Identifying Information (PII) and provide a response documenting the deletion within 24 hours.

To prevent future breaches the following corrective actions may occur with each violation.

3) 1st Violation: notification as indicated in steps 1 and 2 and requirement to attend and additional security training and the Agency HMIS Administrator will be required to create a written compliance plan with the HMIS user and submit to the HMIS team via email.

4) 2nd Violation: notification as indicated in steps 1 and 2, additional requirement to attend security training and the Agency HMIS Administrator will be required to review the written compliance plan and document the review. Review documentation shall be submitted to the HMIS team.

5) 3rd Violation: deactivation and investigation with HMIS Steering Committee

Deactivation can occur at 1st & 2nd violation ~ depending on the severity Current HMIS P & P related to security and privacy remain in place.

The HMIS Team reserves the right to take additional corrective action where appropriate to ensure the safety of clients, users, and organizations.

Training	3/16/2021	New User Training:
		Effective: the remainder of the current training year(6/1/2019-5/31/2020) and for the upcoming training year June 1st, 2020 - May 31st, 2021
		New Users shall complete the series of 4 Onboarding Training Videos in the RIHMIS Learning Management System (LMS).
		Once users are trained and live in HMIS, they must attend and successfully complete annually: ANY two HMIS trainings (e.g. Street Outreach training, CE Training) and One Privacy and Security Training. New Users are encouraged to take additional trainings that offered by the HMIS team or on the LMS..
		Agency HMIS Managers or their designee can receive credit for one group training for every 3 Agency HMIS Manager Weekly meetings attended. Additionally, attendance at the May 5th, 2020 and May 12, 2020 Administrator Weekly meetings will satisfy the requirement for Security Compliance Training.
		The Security Compliance Training scheduled on June 2, 2020 will count towards the training requirement for the 2019-2020 training year (6/1/2019-5/31/2020).
		June 1st, 2020 - May 31st, 2021 Training Year Requirements will be amended to the following: New User Training process will remain the same.
		All users will be required to be trained in our new HMIS database Clarity prior to September 18, 2020.

Agency HMIS Administrator Requirements	3/16/2021	Agency HMIS Administrators are required to attend a biweekly hour long virtual meeting in lieu of the requirement for quarterly attendance at the HMIS Steering Committee Meeting. Agency HMIS Administrators can designate another agency HMIS user to attend in their place.

COVID Vaccine Tracking	3/16/2021	HUD has issued guidance about tracking COVID 19 vaccinations throughout our community in HMIS. On
		March 2, 2020, all Agency Managers were provided with guidance and training related to the HMIS Vaccine documentation initiative.
		All vaccine clinics and single event of a vaccine administration (vaccine administered at a community clinic) shall be tracked in HMIS by identifying the date, dose manufacturer and dose # (if applicable). This information will be used for supporting clients to become fully vaccinated, identifying people at risk for outbreaks in congregate shelter and assisting clients in maintaining their vaccination record.
Agency HMIS Administrator Requirements	8/5/2021	Agency HMIS Administrators are required to attend a monthly virtual meeting in lieu of the requirement for quarterly attendance at the HMIS Steering Committee Meeting. Agency HMIS Administrators can designate another agency HMIS user to attend in their place.
		Agency HMIS managers must participate in an additional agency specific meeting with the HMIS lead. The HMIS lead will determine frequency of the meeting for each agency, meetings will be at least quarterly and may be as frequently as monthly. Agency HMIS Administrators can designate another agency HMIS user to attend in their place.