

Rhode Island Continuum of Care

Statewide Coordinated Entry System for Homeless Services

Policies and Procedures Addendum to address

COVID-19 Public Health Crisis

Updated April 15, 2020; in effect through June 15, 2020.

Please note: This is an ongoing and evolving public health crisis;
effective dates and policy addendums may change as the response evolves.

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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 to position the system to respond to the COVID-19 public health crisis. This CES 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](#) 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:

Model	Eligibility/Entry Requirements -	Priority Populations for Service – used to establish admission priorities relative to other eligible applicants
ALL Program Models	<p>No additional eligibility requirements can be applied beyond those required by funders or established as a Coordinated Entry policy</p> <p>All eligibility requirements stipulated by funders will apply</p>	<p>Households containing a person aged 60 years of age or older who also has a preexisting blood disorder, kidney, liver, heart or lung disease, diabetes, high blood pressure or any immunosuppressant illnesses</p> <p>Households containing a person aged 60 years of age or older</p> <p>Households containing a person with a preexisting blood disorder, kidney, liver, heart or lung disease, diabetes, high blood pressure or any immunosuppressant illnesses</p>
Permanent Supportive Housing/ COC Rental Assistance	<p>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</p> <p>Must include at least one family member with a disability</p> <p>Must meet any additional eligibility criteria specified by funding source</p> <p>Must have a completed VI-SPDAT</p>	<p>Households that have high VI-SPDAT scores or are deemed appropriate byway of Housing Priorities</p> <p>Households that have longer length of time homeless relative to other PSH eligible households</p>

<p>Rapid Re-Housing/CHF Rental Assistance</p>	<p>Must meet HUD’s definitions of: Literally homeless (Category 1) (all CoC funded projects) -or- Fleeing domestic abuse or violence (Category 4) Must have income below 30% of AMI Must have a completed VI-SPDAT Must meet any additional eligibility criteria specified by funding source</p>	<p>Households who are eligible for PSH but literally homeless and awaiting PSH placement Households that have high VI-SPDAT scores relative to other households targeted for RRH and/or are deemed appropriate by way of Housing Priorities</p>
<p>Transitional Housing (Includes: Substance use treatment/ sobriety programs, VA Grant/Per Diem, Family programs)</p>	<p>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</p>	<p>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)</p>
<p>Emergency Shelter</p>	<p>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</p>	<p>Households that have high VI-SPDAT scores</p>

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

Effective immediately [4/15/2020-June 15, 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 (CESteam@crossroadsri.org) 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](#) (fillable PDF form)

Rhode Island's Screening Tool Training: [15 minute video](#) | [pdf slideshow](#)