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 June 1, 2020; in effect through September 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 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:

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	Households in non-congregate shelter Households containing a person aged 50 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 Households containing a person aged 50 years of age or older Households containing a person with a preexisting blood disorder, kidney, liver, heart or lung disease, diabetes, high blood pressure or any immunosuppressant illnesses
Permanent Supportive Housing/ COC Rental Assistance	Must meet HUD definition of literally homeless (category 1) or 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 VI-SPDAT	Households that have high VI-SPDAT 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 homeless, transition aged, youth (CoC funded projects)
	
	Must have a completed VI-SPDAT
	
	Must meet any additional eligibility criteria specified by funding source
		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 byway of Housing Priorities

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	Households that have high VI-SPDAT scores

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

Effective immediately [4/15/2020-September 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 (PDF; updated 5/6/20)

Rhode Island's Screening Tool Training: 15 minute video | pdf slideshow

Housing Help Rhode Island (HHRI)

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. <u>Other Options Not Available</u>

Households must have no other housing options and resources and there are no other community resources available to prevent literal homelessness. In other words, "<u>but for</u>" 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.

<u>Note(s):</u>

<u>Mainstream Resources:</u>

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

    - 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 Referral Form

The CES Housing referral form has been updated to reflect the paperwork required for low barrier permanent housing programs, such as ESG and COC programs.

Recipient agencies may require additional paperwork in their policies and procedures, however this document summarizes paperwork required by federal regulation for program entry. **The RICOC encourages its recipient agencies to be as low-barrier as possible while aligning with federal regulations.**

[The remainder of this page is intentionally blank, please find the updated CES Housing referral form on the following 2 pages. Please note, the CES Housing referral form is a total of 3 pages, however, page 3 remains unchanged from the previous and therefore is not included in this addendum; it is the chronic homelessness documentation checklist.]

Coordinated Entry System: Housing Referral Application

Client Name: _____   Date Submitted to CES: _____

Client Phone: _____   HMIS#: _____

Client Email: _____   # in Household: _____

Program: _____

Contact Info for Person Submitting Packet: ADA Accessibility Requirements: _____

    Name: _____

    Phone: _____

    Email: _____

VI Score (Head of Household):				Subpopulation (Check all that apply):				
VI 2.0	TAY VI	Fam VI	Full SPDAT	DV	Individual	TAY	Family	Veteran

RRH and PSH Referrals

Required Documentation: Please check off when included in packet

	Chronic Homeless Checklist (P.3)	ROI made out to RICH	Brief Case Summary	For Foster Forward Referrals RI CoC ROI	Note 1: At the present time, CES is not requiring any other documentation for CoC and ESG Programs.
Household					Note 2: After referral, the following documents may be required: Disability Verification & Income Verification

HCVP and New Lease Referrals

Required Documentation: Please check off when included in packet

	Photo ID (Adults Only)	Birth Certificate	S.S. Card	Chronic Homeless Checklist (P.3)	ROI made out to RICH	Brief Case Summary	Note 1: After referral, the following douments may be required: Disability Verification, Income Verification, BCI, and DD214.
Household Member 1							
Household Member 2							Note 2: Clients referred to New Lease must have a VI 4-7 and be a current client from one of the following agencies: Better Lives RI, Crossroads, House of Hope, Lucy's Hearth, or Sojourner.
Household Member 3							

Process: Upload all documentation in the File Attachments section within the Client Profile tab in HMIS. Once the referral application is uploaded in HMIS, email CESHousing@rihomeless.org advising the packet is uploaded. Please include HMIS ID # in the email. CES will audit the packet and follow up with you if any documentation is missing or incomplete. If you are a non-HMIS using agency, please request a secure email be sent to you by emailing CESHousing@rihomeless.org. When a subsidy is available CES will make the referral and introductions between the Advocate and the Housing Agent. At this point the Advocate submitting this application will provide the Agency with the documents in this application and assist the client with filling out additional paperwork when necessary.

**********CES Placement Personnel Only**********

    CES Personnel Signature: _____

Updated 5.27.20

Coordinated Entry System: Housing Referral Application

The Coordinated Entry Housing portfolio includes an opportunity that is directly connected to the Providence Community Health Center (PCHC). Please confirm you are a current patient of PCHC: Yes   No

Would you live in a unit where common areas are shared but you have your own bedroom? Yes   No

Would you live in a unit where all areas of the apartment are shared **including** the bedroom? Yes   No

Which towns/cities/neighborhoods would you like to live in most? _____

Which towns/cities/neighborhoods would you rather not live in? _____

Is there any other information about your housing preferences that you would like to share?

The Rhode Island Coordinated Entry System works to house our most vulnerable individuals and families who are experiencing homelessness. The referral process is not a first come first serve system. A housing referral is not a guarantee. Our housing providers include but are not limited to Community Care Alliance, Crossroads RI, East Bay Community Action Program, Foster Forward, House of Hope, Newport County Community Mental Health Center, Sojourner House, The Providence Center, Thrive Behavioral Health, WARM, West Bay Community Action Program, and YWCA.

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. ServicePoint 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. 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.