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**Nashville-Davidson County
Coordinated Entry System
Policy and Procedures Manual**



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NASHVILLE-DAVIDSON COUNTY'S COORDINATED ENTRY SYSTEM POLICIES & PROCEDURES MANUAL

CONTINUUM OF CARE OVERVIEW

Nashville-Davidson County is a city/county government and capital of the state of Tennessee. The Metropolitan Development and Housing Agency (MDHA) is the Collaborative Applicant for the United States Department of Housing and Urban Development (HUD) Continuum of Care (CoC) funding application in Nashville-Davidson County. The Metropolitan Homeless Impact Division (HID) of Metro Social Services is the lead for the Coordinated Entry System (CES) management, oversight, protocols, training, and evaluation. The HID is also the lead for Nashville-Davidson County's Homeless Management Information System (HMIS). Both entities, along with an array of partners including non-profit homeless services providers, faith-based organizations, business and health sectors, and advocates, work hand-in-hand to build a housing crisis resolution system that strives to effectively end homelessness for all persons in the city. A critical piece of having a functioning housing crisis resolution system is CES.

INTRODUCTION TO COORDINATED ENTRY

CES was introduced in 2010 by the United States Interagency Council on Homelessness (USICH) through its *Opening Doors: Federal Strategic Plan to Prevent and End Homelessness*. The plan outlines four central goals: (1) Finish the job of ending chronic homelessness in five years; (2) Prevent and end homelessness among Veterans in five years; (3) Prevent and end homelessness for families, youth, and children in ten years; and (4) Set a path to ending all types of homelessness.¹ Similarly, coordinated entry aligns with the HEARTH Act of 2009, a bi-partisan legislative mandate that directs localities to implement a collaborative system to prevent and end homelessness.²

Nashville-Davidson County's CES uses the goals set forth by USICH as a foundational building block. In 2013, under the leadership of the HID and with guidance from a national organization called Community Solutions, community partners launched the *How's Nashville* campaign to end chronic and veteran homelessness. Through the *How's Nashville* collaboration, community agencies serving veterans and people experiencing chronic homelessness agreed to utilize a prioritization system to serve people with available resources, and in effect, started a CES process for individuals. This collaboration created the foundation for the Nashville-Davidson County CES.

CES is an important process through which people experiencing, or at imminent risk of experiencing homelessness, can access the crisis response system in a streamlined way, have their strengths and needs quickly assessed, and quickly connect to the appropriate housing and mainstream services within the community or designated region.

One of the main purposes of a CES is to ensure that people with the most severe service needs and highest levels of vulnerability are prioritized for housing and homeless assistance. The process is

¹ United States Interagency Council on Homelessness. *Opening Doors: Federal Strategic Plan to Prevent and End Homelessness*, 2010.

² Hearth Act of 2009 from: <https://www.hudexchange.info/resource/1717/s-896-hearth-act>.

designed to facilitate rapid entry into the crisis response system and exit into housing. CES also supports strategic allocation of currently available resources and identification of the need for additional resources.

CES helps communities effectively end homelessness for all populations by:

- 1) Helping people move through the system more quickly and gain access to the right permanent housing and supports as quickly as possible, thus reducing the amount of time people spend moving from program to program before finding the right services;
- 2) Reducing entries into homelessness by
 - a. Consistently offering prevention and diversion resources upfront, with the goal of limiting the number of people entering the system unnecessarily; and
 - b. Providing the right type of housing and services based on need, with the goal of limiting returns to homelessness; and
- 3) Improving data collection and quality by collecting accurate information on what kind of assistance individuals/families may need, ensuring accurate performance tracking, and allowing for in-depth system-level data analysis, interpretation, and on-going process improvement.³

PURPOSE OF THIS MANUAL

HUD established requirements for coordinated entry that CoC's recipients and sub recipients of HUD homeless program grant funds must meet.

The purpose of this manual is to provide the community with a set of agreed upon and standard CES policies as well as CES procedures. In addition this manual serves the purpose of documenting how the community is implementing (or in the process of implementing) the HUD established CES requirements. The manual covers the current processes and procedures as well as processes that are still in development by a committee of the CoC. This policies and procedures manual is based on guidance provided by HUD with the current CES requirement, HUD guidance regarding prioritization of limited housing resources, and local input from homeless service community-based organizations, which work tirelessly to end homelessness in Nashville.

Questions regarding this manual or Nashville-Davidson County's CES can be directed to NashvilleCES@nashville.gov.

NASHVILLE-DAVIDSON COUNTY-STANDARD OPERATING PROCEDURES

SYSTEM PURPOSE

A CES for all populations experiencing a housing crisis will help our community prioritize assistance based on vulnerability and severity of service needs to ensure that individuals receive the most appropriate assistance in a timely manner. The ultimate goal is housing for those who are experiencing literal homelessness (i.e., those individuals currently residing on the streets, in shelters, or in places not meant for human habitation.)

³ NAEH Toolkit from: <http://www.endhomelessness.org/library/entry/coordinated-assessment-toolkit>.

GOALS AND GUIDING PRINCIPLES

Nashville-Davidson County's goal are to effectively end homelessness in the city; to have a system in place that prevents homelessness whenever possible; and when prevention is not possible, to make literal homelessness a rare, brief, and one-time occurrence.

The following principles will guide the CES process in Nashville-Davidson County:

- All housing and services utilize a "housing first"/low barrier approach to serve all populations;
- Provide the right amount of support, at the right time, to the right person;
- Divert as many persons as possible who may be at risk of homelessness by connecting them to mainstream resources;
- Promote person-centered practices – including, but not limited to, Motivational Interviewing and Trauma Informed Care;
- Create an open, transparent system that allows for thoughtful decision making and open communication;
- Engage in continuous quality improvement efforts; and
- Consistently utilize a common database to evaluate and analyze needs and gaps in services.

A CES brochure has been distributed to social service agencies, libraries, government offices, places that serve community meals, and other known access points for people experiencing homelessness. This communication tool will help direct people to the best place to receive services based on their situation. In addition, dedicated CES coordinators will support service providers by holding "office hours" throughout the city to ensure that all persons experiencing a housing crisis are identified. The CES brochure can be found here: <https://nashvilleces.weebly.com/navigator-toolstenant-resources.html>

A Committee of the CoC supports the implementation of CES and assists with providing updates, evaluations, and further developments of CES in Nashville-Davidson County.

Agencies that receive CoC/Emergency Solutions Grant (ESG) funding must participate in CES by:

- Supporting efforts to streamline housing and homeless support services through CES
- Supporting the transition from first come-first served to a needs based access to services and housing
- Supporting the transition to a Housing First/low barrier approach and philosophy
- Complying with the CoC nondiscrimination policies and provide equal and fair access to all individuals and families who are experiencing a housing crisis
- Adhering to policies and procedures as detailed in the most recent CES manual
- Understanding that participation is required by the CoC through the funding requirements established by HUD for the CoC/ESG competitive funds
- Using the designated HMIS in regards to CES implementation
- Collecting and enter all needed data into the designated HMIS, on persons experiencing a housing crisis(this includes entries into and exits from the system)
- If operating a bed program, reporting project vacancies to the CES lead

- Accepting appropriate referrals from CES and accept participants based on need and vulnerability
- Working with CoC CES Lead to resolve project implementation challenges
- Participating in CES Care Coordination Meetings (CCMs), if appropriate
- Participating and provide input on CES policies and procedures and other CES topics
- Participating in project and system evaluation activities

Note: This language can change as CES continually improves. Funded agencies will be notified of any changes before they are implemented.

ACCESS

The following section describes the policies and procedures related to CES access for households experiencing homelessness or at risk of homelessness. In addition to physical CES access points, certain street outreach programs can serve as mobile access points. Households may access CES through either physical or mobile access points.

It is important to note that all access points are accessible for those with disabilities. Each access point must have the ability to provide the appropriate auxiliary aids and services necessary to effectively communicate with those who may be deaf and/or hard of hearing. There are coordinated outreach efforts to ensure that households who are unable or less likely to pursue services will be assisted. In addition, the CES Lead continuously reaches out to organizations who may serve homeless populations in the course of their normal delivery of services (e.g., health care providers; community services agencies such as youth, LGBTQ, or senior programs; and criminal justice entities, such as probation or parole) to ensure they are informed of CES and know where to direct those they work with who may be experiencing homelessness.

ELIGIBILITY

Any person experiencing a housing crisis in Nashville-Davidson County is eligible to participate in the CES process. A housing crisis is anything that can jeopardize, or has jeopardized, a person's ability to secure or maintain stable housing. Any person identified as experiencing a housing crisis must sign a release of information (ROI) before being entered into the CES process in our local HMIS. If a client refuses to sign the ROI, please contact nashvilleces@nashville.gov to determine next steps.

In addition, the Nashville-Davidson County CES does not and shall not discriminate on the basis of race, color, religion (creed), gender, gender expression, age, national origin (ancestry), disability, marital status, sexual orientation, or military status in any of its activities or operations.

GEOGRAPHIC COVERAGE

Currently, Nashville-Davidson County has designated access points where individuals and families experiencing homelessness can easily access and complete the Preliminary Assessment in HMIS. Each Access Point provides the same assessment approach for all households, including those who may fall into more than one designated subpopulation (e.g., a family with minor children, in which the head of household is a veteran.) In addition, street outreach programs can act as mobile access

points.

The HID's Homeless Outreach Team is currently leading efforts to coordinate Nashville-Davidson County's various outreach efforts to facilitate identification of all persons experiencing literal homelessness in Nashville-Davidson County. Street outreach staff uses the same assessment approach as physical access points

The following table provides an overview of physical access points for each subpopulation.

Subpopulation	Access Process Description	Specific Access Points
FAMILIES WITH MINOR CHILDREN	The process for families is a centralized approach in which all families receive their preliminary assessment by either walking into Metro Social Services or calling the Family CES Phone Line. This is the first step in getting connected to services that will assist the family in identifying housing options.	Metro Social Services 800 2 nd Ave N Nashville, TN 37210 Walk-In Hours: M-F 8:00am-3:00pm 615-862-6444
ADULT ONLY HOUSEHOLDS	The process for individuals is for them to come in contact with an outreach worker or to walk into an agency that serves persons who are experiencing homelessness, such as the large shelters. There are two recommended places where individuals can walk in to receive the CES preliminary assessment:	Street Outreach Worker Room In The Inn 705 Drexel St. Nashville TN 37203 New Participation Orientation: M-F 8:15am 615-251-7019 Metro Social Services 800 2 nd Ave N Nashville, TN 37210 Walk-In Hours: M-F 8:00am-3:00pm 615-862-6404
VETERANS WHO PREFER VETERAN SERVICES	Veterans can also be identified at one of the large shelters or through outreach workers. If they prefer veteran services, there are two recommended locations where they can walk-in to receive the CES preliminary assessment:	Street Outreach Worker Operation Stand Down Tennessee 1125 12 th Ave S Nashville, TN 37203 Walk-In Hours: M-F 8:00am-3:30pm 615-248-1981

		Tennessee Valley Health Care Systems (TVHS) Healthcare for Homeless Veterans (HCHV) 1310 24 th Ave S Nashville TN 37212 Walk In Clinic Hours: M-F 9:00am-3:00pm Mental Health Annex 615-873-6400
YOUTH AND YOUNG ADULTS	Youth and Young Adults (YYA) are individuals from the ages of 18-24. YYAs can be identified by the large shelters or street outreach workers.	Street Outreach Worker Oasis Center 1704 Charlotte Ave Nashville TN 37203 Walk-In Hours: M-F 8:00am-4:00pm 615-327-4455

PERSON FLEEING DOMESTIC VIOLENCE

A person who is fleeing domestic violence (DV) can access CES through any of the access points in the table above depending on the subpopulation category into which he/she falls or may be served through street outreach. Once the person is identified as someone who is fleeing domestic violence, the staff member at the Access Point will complete the following:

1. Immediately, the staff, together with the person, will contact a DV Shelter for placement.
2. If there are no DV shelter beds currently available, the staff will create a safety plan with the person and will remain in contact until a bed becomes available.

The specified CoC Committee overseeing the CES process will work with the numerous DV shelter providers in the Nashville-Davidson County CoC to identify the best methods and approaches to ensure that staff at all access points are trained on safety planning.

A person who is fleeing DV or who has been a victim of DV, sexual assault or stalking is eligible to be served at all CES access points and cannot be denied access. Once the person has engaged with an access point, he/she may determine the agency from which he/she would like to receive services.

A person who is fleeing domestic violence can also access DV services through the DV Hotline: 1-800-334-4628.

AFTER-HOURS SERVICES

A designated Nashville-Davidson County CoC Committee, in conjunction with other CoC agencies, is developing a plan to ensure that individuals who cannot connect to CES during normal business hours have access to after-hours services. This plan will establish an after-hours hotline that people

can call to be directed to a shelter or resource center; that agency will connect the individual with services until the following business day. At that point, a CES coordinator can follow up with the individual in regards to housing and needed services.

ENTRY INTO CES

Once a person has been identified as experiencing a housing crisis, including individuals and families who may be diverted from the homelessness system or prevented from entering homelessness with the utilization of prevention resources, the staff member at the access point should:

- Obtain a written ROI that is uploaded into HMIS. The ROI can be found here: <https://nashvilleces.weebly.com/navigator-toolstenant-resources.html>
 - A physical form needs to be signed, scanned and uploaded
 - In addition to the physical form, an electronic ROI must be documented in HMIS
- Enter the person into the CES Process in HMIS by completing the Preliminary Assessment
 - If you are an Outreach Worker and the person does not provide enough information to complete the Preliminary Assessment, you can complete the Outreach Assessment in HMIS and date the engagement
- Complete the appropriate Vulnerability Index-Service Prioritization Decision Assistance Tool (VI-SPDAT)

It is the goal of every outreach worker, intake staff member, and CES coordinator to ensure that individuals and families are connected to mainstream resources for which they are eligible. This includes, but is not limited to, community-based emergency assistance services, income assistance, food banks, etc.

ASSESSMENT

For the purposes of CES, the primary role of staff at the access points, street outreach staff, and CES coordinators is to conduct the community's CES Preliminary Assessment.

PRELIMINARY ASSESSMENT

The Preliminary Assessment (PA) is the common assessment for the Nashville-Davidson County CES. The PA collects HUD Universal Data Elements (UDEs) and other information needed for the CES Master List. The Master List contains all persons experiencing a housing crisis who have a PA entered into HMIS.

Any Access Point staff person, homeless service provider or outreach worker who has been trained on the Nashville-Davidson County Housing Navigator Process and completed HMIS Trainings conducted by the HMIS Lead is able to conduct the PA on households that are experiencing a housing crisis. Once a person's PA has been entered into HMIS he/she is added into the Master List. If the person is experiencing literal homelessness (HUD Category 1), he/she will be filtered into our By-Name List and prioritized for housing and service resources. All information gathered is used identify potential housing and services for which the household is eligible.

The PA is the first step in identifying a household as experiencing a housing crisis in Nashville-

Davidson County. The PA helps identify who needs to be diverted or prevented from entering the homeless shelter system. Once a person is identified as experiencing literal homelessness, the access point or outreach worker will work to build rapport to identify if housing is a goal; if so, the appropriate VI-SPDAT will be completed. Individuals or families that note housing is not a want or need are identified as needing additional outreach and engagement.

Households going through the CES process are to be made aware that they have the right to refuse to answer any question or complete any portion of any of the assessments conducted for CES without affecting the level of services they are eligible to receive.

Before any assessment is completed, the assessor must give the client a copy of the HMIS ROI and explain it to the head of household or client so that he/she is able to provide informed consent. These ROIs must be signed, uploaded, and electronically recorded in HMIS under the *MHC: Nashville: Coordinated Entry System (CES)* provider (CES Provider).

No household can be turned away from the Nashville-Davidson County CES assessment process due to perceived barriers to housing or services or because the household refused to sign the ROI form that would allow an agency to enter their personal information into CES. This includes, but is not limited to, too little or no income, active substance abuse or a history of substance abuse, domestic violence history, resistance to receiving services, the type or extent of a disability-related service or supports that are needed, history of evictions or poor credit, lease violations or history of not being a leaseholder, or criminal record.

To ensure uniformity in the referral process, all referrals must come from the Master and By-Name List, reviewed at the Care Coordination Meetings and using the prioritization protocol detailed below.

The PA, along with all housing/service applications, can be accessed in paper form from the Nashville CES Weebly Website (<https://nashvilleces.weebly.com/navigator-tooltenant-resources.html>) or via HMIS. However accessed, all information must be entered into HMIS under the CES Provider.

VULNERABILITY INDEX/SERVICE PRIORITIZATION DECISION ASSISTANCE TOOL

The VI-SPDAT is a housing assessment tool created and owned by Community Solutions and OrgCode Consulting, Inc. The tool helps to identify the most appropriate housing intervention based on the vulnerability of the household or individual. The VI-SPDAT can only be conducted by agencies who serve those who are experiencing a housing crisis and have been trained to use the assessment tool. There are three types of VI-SPDATs:

- VI-SPDAT – to be conducted with adult individuals experiencing literal homelessness,
- F-VI-SPDAT – to be conducted with families who have minor children in their care who are experiencing literal homelessness, or with an expectant mother who is experiencing literal homelessness and is in the third trimester of her pregnancy,
- TAY-VI-SPDAT – to be conducted with single young adult individuals in the age range of 18-24 who lack a key to a safe and stable residence

The VI-SPDAT should only be conducted with households and individuals who (1) have identified housing as a goal; and (2) are experiencing literal homelessness (HUD Category 1); or, if they are ages 18-24 and lack a key to a stable and safe residence.

The VI-SPDAT can be conducted on paper and entered into HMIS, or may be entered directly into the CES Provider in HMIS.

RIGHT TO REFUSAL

Every person who is identified as experiencing a housing crisis has the right to refuse to provide consent and/or to complete the CES assessment. If a person refuses to provide consent and/or to complete the assessment, it is imperative that the agency that identified the person continues to engage and build rapport in the case they become comfortable signing the ROI. Refusal to sign the ROI may limit the available housing options and resources however; agencies can still assist the person in accessing other community services.

A person who is next in the queue for a referral to a resource can also reject a resource without it having bearing on him/her being in queue for the next available resource. It is up to the Housing Navigator to identify the reasons for the refusal so that the person can be referred to resources for which he/she is eligible and interested.

PRIORITIZATION

Prioritization for the housing and support services in Nashville-Davidson County is dependent on the availability of each resource, and will be based on the following criteria:

1. Prioritize those who are chronically homeless as defined by HUD
 - If none, then prioritize those who are literally homeless as defined by HUD
2. Score of the VI-SPDAT assessment, with consideration taken from Care Coordination Meetings if a score is not representative of the person and their situation
3. Length of time homeless
4. Date of identification (only to be used if there are two households tied for the resource)

Prioritization ensures that those who are currently experiencing chronically homelessness, or at risk of experiencing chronically homelessness, are served as quickly as possible. It is important to note that all agencies participating in CES have eligibility requirements that the person being referred must meet.

EMERGENCY SHELTER PRIORITIZATION

Within the Nashville-Davidson County CoC, there are large shelters that rarely turn anyone away (except for in extenuating circumstances), and there are shelters that have limited beds for which they will take referrals from CES. As a result, there is prioritization for the following populations. This protocol can be changed as different populations and new shelters are identified.

- Single fathers with minor children in their care
- Mothers who have newborns that are 0-14 days old

If there is not a need in either of these populations, priority for admission is based on those individuals and families who are experiencing literal homelessness and have not been able to access the other shelters.

As noted in the eligibility section, the Nashville-Davidson County CES does not and shall not discriminate on the basis of race, color, religion (creed), gender, gender expression, age, national origin (ancestry), disability, marital status, sexual orientation, or military status, in any of its activities or operations.

MASTER LIST AND BY-NAME LIST (BNL)

Nashville-Davidson County manages two lists: the Master List and the By-Name List (BNL). These lists show in real time how many persons are experiencing a housing crisis in Nashville-Davidson County. Each list is extracted from HMIS and has the same protection of client-level data as HMIS does. Nothing is distributed without password protection and without the appropriate level of training.

The HID is responsible for management of these lists. With the assistance of CES coordinators, households who have been on the list for longer than six months without updates will be discussed in CCMs to see if the household can be contacted. Once the household has been discussed during two CCMs and there was still an inability to contact the household, they will be exited as inactive under the CES Provider in HMIS and removed from the list.

MASTER LIST

The Master List contains all households with a PA entered into the CES Provider in HMIS.. The Master List shows which households can be diverted or prevented from falling into the homeless shelter system and can identify those who may qualify for prevention resources.

BY-NAME LIST (BNL)

The BNL is extracted from the Master List. The BNL only contains those households who are experiencing literal homelessness. The BNL will be utilized during the Care Coordination Meetings to help assign housing navigators and link households to housing and support services, following the prioritization protocols detailed above.

REFERRAL

As noted above, to ensure uniformity in the referral process, all referrals must come from the Master and By-Name Lists and must be reviewed at the CCM using the prioritization protocol detailed above.

It is important to note that all agencies participating in CES have eligibility requirements which the person being referred must meet. Agencies are not permitted to screen out individuals or families based on perceived barriers related to housing or support services.

HOUSING NAVIGATOR TRAINING

Housing Navigator (HN) trainings are conducted by the HID on a quarterly basis to account for staff turnover. Recertification trainings are conducted annually for all HNs. The HN Training covers the basics of CES, the PA, the VI-SPDAT and all resources that can be accessed for those who are experiencing homelessness. The Housing Navigator Training slides can be found here: <https://nashvilleces.weebly.com/navigator-toolstenant-resources.html>

HMIS training is conducted by the HID, the current HMIS Lead for Nashville-Davidson County. To request CES Training via HMIS, Agency Administrators must submit a request for their new HNs through the HMIS Help Desk (hmishelp@nashville.gov).

Site visits are conducted with all agencies actively participating in CES. A CES Process Cheat Sheet has been created to assist agencies with CES data collection and data entry policies. The cheat sheet can be found here: <https://nashvilleces.weebly.com/navigator-toolstenant-resources.html>.

CARE COORDINATION MEETINGS (CCMs)

There are three scheduled CCMs (provider staff meetings) currently convening to address the following subpopulations: Families, Individuals (including Youth and Young Adults), and Veterans. These groups meet on a bi-weekly basis and must be attended by one representative from each agency. Immediate service needs or program vacancies that arise between meetings can be handled through emails to avoid unnecessary delays in service provisions. During these meetings, the following can occur:

- Connection to navigation services
- Updates to client cases (all updates will be recorded in HMIS)
- Identification of barriers in accessing housing and services
- Identification of emerging trends (e.g., increase in single fathers experiencing homelessness)
- Questions regarding processes
- Collaboration among homeless service providers
- Sharing of resources
- Any other client-related topics

The CES Manager will send out the updated, password-protected BNL for each meeting at least two days prior to the scheduled meeting and will send out meeting notes once the meetings have occurred.

Each person who attends a CCM signs a sign-in sheet that notes the following for the privacy and protection of each client discussed: All person(s) who participate in the Family/Individual/Veteran Care Coordination Meetings understand that any client or situation discussed during this meeting are private and confidential and are not to be discussed outside of this meeting without prior consent and authorization given by the client.

The homeless service provider who identifies a person who is experiencing a housing crisis is

responsible for initiating the connection to mainstream benefits and making sure that the person's immediate needs are met. If this homeless provider cannot serve as the person's HN, it is recommended that the provider attend the CCM to provide a warm hand-off to a different provider who can assist with navigation services.

EXITING PERSONS FROM CES

There are only two reasons why people should be exited from CES: either they are housed, and/or have become inactive. For more information on the inactive policy, see below. The exit is recorded in the CES Provider in HMIS. Additional guidance can be found in the CES Process Cheat Sheet.

DIVERSION/PREVENTION EXITS

Persons identified through CES for diversion and prevention should be exited from CES when the housing situation has been stabilized.

For instance, if a person facing eviction due to rental arrears, once the arrears have been paid, the person is no longer facing eviction, and a stabilization plan is in place, the person would be exited from CES.

INACTIVE POLICY

People become inactive if they have passed away; entered an institution (e.g., jail/prison, residential treatment facility) with an expected stay of 90 days or longer; or if a HN has been unable to contact them after at least three contact attempts have been made and 90 days have passed from the point of the last successful contact. All contact attempts must be documented in HMIS via a case note in the CES Provider.

After 30 days of unsuccessful contact attempts, the HN should bring the person up during the appropriate CCM so the larger group can work together on locating the person before he/she is exited from the system.

GRIEVANCE PROCEDURE

If there is a grievance in regard to CES, a client or a community-based organization may email NashvilleCES@nashville.gov with the names of those involved, the best contact information for them, and a description of the grievance. The CES Manager will provide a response to the grievance within two to three business days.

This grievance procedure only applies to those organizations participating in the CES process.

Grievances regarding particular providers must be filed according to that provider's grievance procedure.

NONDISCRIMINATION GRIEVANCE PROCEDURE

If a person who is being served through CES feels that they experienced discrimination, they can

appeal any decision made by the provider including but not limited to the following:

- Denial of services
- Denial of request to add a member to the household
- Termination of services after acceptance in the program

In general, providers must afford persons with a formal process outlined in their program procedures that recognizes the rights of the individuals affected. At a minimum, the required formal process must consist of:

- A written notice to the participant containing a clear statement of the reason for decision;
- Information on the how the participant can ask for a review/appeal of the decision and present written or oral objections to a person or committee other than the person who made or approved the decision;
- Inform them that they are allowed to have someone (i.e., legal aid, social worker, etc.,) present to represent them during the review/appeal at their own expense; and
- That they will receive prompt written notice of the final decision (typically no more than 30 days) after the appeal request is received.

All decisions to terminate assistance must be made in accordance with the requirements of 24 CFR 576.402. Providers must exercise judgement and consider all extenuating circumstances in determining when violations warrant termination so that a program participant's assistance is terminated only in the most severe cases. Providers are not prohibited from providing further assistance at a later date to the same family or individual if they qualify for services based on changed circumstances.

The initial appeal of any decision shall be made to the provider pursuant to the process described above. Should the person not be satisfied with the appeal decision, he/she has the right to appeal that decision to the board of the agency, and if not resolved to the participant's satisfaction, then appeal to the entity that awarded the funding.

DATA MANAGEMENT

All agencies entering data into the CES Provider in HMIS must abide by HMIS policies and procedures. The privacy protections of all participant information per the HMIS Data and Technical Standards of 24 CFR 578.7(a)(8), privacy rules associated with collection management, and reporting of client data; and all HMIS-related policies and information can be found here: (Enter Web Address)

Comment [AD1]:
HID is creating an HMIS website

CES participant information is entered into the CES Provider in HMIS. Every person who is identified, as experiencing a housing crisis will be entered into the CES Provider in HMIS once the ROI has been obtained. If an intake is completed via telephone, a verbal consent can suffice, but must be documented in HMIS until an in-person meeting is held. At that time, a written ROI must be obtained, uploaded and documented in HMIS.

Every person has the option of denying consent for their information to be entered into HMIS. Those cases will be addressed individually based on each agency's policy to ensure the client's information is protected and to ensure that the client is still able to access any and all resources for

which he/she is eligible.

EVALUATION OF CES

This section describes how CES is evaluated at the current point in time. There will be revisions to this as CES grows and additional policies are established. Currently, evaluation will take place through community meetings to provide community providers with a space to report out on how CES is working for their agencies and the clients they serve. Client advisory groups will be consulted to obtain feedback from clients who are currently in CES, or who have moved through CES. Lastly, the designated CoC Committee will compile feedback from the various stakeholder groups and analyze the aggregate data acquired through the CES Provider in HMIS to identify gaps and determine what steps should be taken to bolster CES. Aggregating data will ensure all participants' information is protected. This evaluation will be completed at least annually. Any resulting updates to the policies and procedures will be reflected in revisions to the manual and reported to the community.

CES Policies and Procedures Manual Evaluation and Revision

The CoC will be responsible for updating the CES Policies and Procedures Manual at least annually. The CoC Committee will allow the CoC General Body at least 30 calendar days for review and input before an updated draft of the CES Policies and Procedures Manual is presented to the Nashville-Davidson County CoC Homelessness Planning Council for final approval.

GLOSSARY

By-Name List

The By-Name List (BNL) is an active list of all persons, by name, in the Continuum of Care who are experiencing Category 1 - literal homelessness as defined by HUD.

Care Coordination Meetings

Care Coordination Meetings (CCM) are regularly convened for members of the community who are serving those experiencing homelessness to gather and discuss client cases, barriers and solutions. This space also provides the linkage to housing and support service resources.

Continuum of Care

A Continuum of Care (CoC) is a regional or local planning body that coordinates housing and services funding for homeless families and individuals.⁴

Coordinated Entry System (CES)

Coordinated Entry is a system that streamlines limited housing resources and support services for those persons who are experiencing homelessness and are most in need based on current living situation and vulnerability.

Domestic Violence Survivor

A domestic violence survivor is a person who has experienced or is experiencing a violent or

⁴ What is a Continuum of Care from: <https://endhomelessness.org/resource/what-is-a-continuum-of-care/>.

aggressive behavior from a loved one.

Diversion

Diversion is used when there is a housing crisis and a member of a community-based organization explores housing options with an individual or family. The goal of diversion is either to preserve an existing housing arrangement or to find an alternative one so that the individual or family may avoid staying on the streets, in a vehicle, shelter or other place not meant for human habitation. Other provisions may include arranging for them to stay with family, friends or some other appropriate ally. Diversion activities are based on a conversation that uses a strengths-based perspective to identify solutions. This includes an inventory of the individual or family's strengths as well as information about where they have been staying, how long they have been there, whether there is anywhere else they might be able to stay and what issues and circumstances might prohibit them from staying there. The client's responses to these and other questions will guide the process of linking them to housing and other needed resources.

Family

A family is a household that consists of a parent and at least one minor child under the age of 18.

F-VI-SPDAT

The Family Vulnerability Index and Service Prioritization Decision Assistance tool is developed and owned by OrgCode and Community Solutions. It is a tool that provides a recommendation for the type of housing intervention and support services needed for the family with minor children to resolve their homelessness.

Nashville-Davidson County CoC Homelessness Planning Council

Enacted into the CoC Charter Revision on 5/17/2018, the Nashville-Davidson County Continuum of Care Homelessness Planning Council serves as the CoC Governance Board.

HMIS – Homeless Management Information System

HMIS is the Nashville community database to collect information on homelessness. HMIS is currently managed by the HID as the current HMIS Lead Agency. The HMIS Advisory Committee, a committee of the Nashville Continuum of Care (CoC) Governance Board, provides oversight and non-binding strategic advice to the management and implementation of HMIS to the CoC Governance Board. HMIS is used to collect data from partner agencies as required by federal state and local funders including funding from the Department of Housing and Urban Development (HUD). Additionally, HMIS is used to collect data required for the local Nashville-Davidson County CES. HMIS enables service providers to collect uniform client information over time. HMIS is essential to streamlining client services and informing public policy decisions aimed at addressing and ending homelessness at local, state and federal levels. Through HMIS, households experiencing homelessness benefit from improved coordination in and between agencies, informed advocacy efforts, and policies that result in targeted services. Analysis of information gathered through HMIS is critical to systems planning. The data entered into the Nashville HMIS is owned by the Partner Agencies responsible for entering client-level information. The HMIS Lead Agency and partner agencies are jointly responsible for ensuring the HMIS data processing capabilities, including the collection, maintenance, use, disclosure, transmission or destruction of data, comply with the HMIS privacy, security and confidentiality policies and procedures. HMIS will contain client information that may be subject to the privacy and security protections and requirement of

federal HMIS Standards, HIPAA Privacy Rule, other law and local HMIS privacy and security policies and procedures.

Questions regarding the Nashville-Davidson County's HMIS can be directed to the HMIS Help Desk at hmishelp@nashville.gov.

Housing Crisis

A housing crisis is anything that can jeopardize, or has jeopardized, a person's stable housing. A few examples are: currently staying in an emergency shelter, DV shelter, or on the streets/car; residing in a motel/hotel and cannot continue to reside there due to lack of funds; or facing eviction for where a person is currently living.

Housing First

Housing first is a housing approach that quickly connects those experiencing homelessness to permanent housing without barriers to entry. Supportive services are offered within this approach to help the person stabilize in housing and to prevent returns to homelessness.

Imminent Risk as defined by HUD [Category 2]

Persons who will imminently lose their primary nighttime residence, provided that: i) residence will be lost within 14 days of the date of application for homeless assistance ii) no subsequent residence has been identified; and iii) the person lacks the resources or support networks needed to obtain other permanent housing.

Literal Homelessness as defined by HUD [Category 1]

Being literally homeless is defined by HUD as a person whose primary nighttime residence is the streets, a shelter or a place not meant for human habitation. If a person is exiting an institution within 90 days of being admitted and they entered that institution as literally homeless, they also are identified as being literally homeless.

Mainstream Resources

Mainstream resources are services such as Medicaid, Food Stamps, Supplemental Security Income (SSI), etc. These resources are available to people irrespective of housing status.

Master List

The Master List is a live active list of all persons, by name, in the Continuum of Care who are experiencing a housing crisis.

Prevention

Prevention is used when there is a housing crisis and an individual or family who are facing an eviction or some other crisis are able to maintain their current housing arrangement through additional assistance, monetary or otherwise. A community-based organization, for example, might work with the family or individual to raise funds for rent owed or to help them reconcile with their landlord. Another example of prevention would be when a young person has a disagreement with a parent with whom they are living and the conflict is resolved through mediation or some other intervention. For example, a young person may be asked to leave within 14 days unless they are able to monetarily pay for where they are staying. As with diversion, beneficiaries of prevention services may still need to be linked to other resources as needed.

TAY-VI-SPDAT

The Transition Age Youth Vulnerability Index and Service Prioritization Decision Assistance tool, also referred to as the Next Step Tool, is developed and owned by OrgCode and Community Solutions. It is a tool that provides a recommendation on the type of housing intervention and support services needed for the young adult, ages 18-24, to resolve his/her homelessness.

VI-SPDAT

The Vulnerability Index and Service Prioritization Decision Assistance Tool is developed and owned by OrgCode and Community Solutions. It is a tool that provides a recommendation on the type of housing intervention and support services needed for the individual to resolve his/her homelessness.

Youth and Young Adults

Youth and Young Adults (YYA) are those individuals in the age range of 18-24.

APPENDIX

KEY ROLES AND FUNCTIONS

- **CES MANAGER**— responsible for administrative duties such as:
 - Pulling the Master List and filtering for the By-Name List (BNL) by sub-population on a bi-weekly basis.
 - Facilitating subpopulation-specific bi-weekly care coordination meetings (CCM)
 - Facilitating monthly CoC CES Committee meetings
 - Providing direction or facilitation of trainings for CES
 - Conducting quarterly meetings with CES coordinator positions to identify gaps in services
 - Other tasks as deemed appropriate
- **CES COORDINATOR** – responsible for in-reach/outreach to large shelter providers in the community and other tasks as identified below:
 - Basic Housing Navigation tasks as deemed necessary
 - Assist with CES Trainings and facilitation of CES specific meetings
 - Data Entry into HMIS of new persons experiencing a housing crisis
 - Participation in quarterly CES-grant funded position meetings with CES Manager
 - Identification of service gaps and areas of improvement in the process of CES for the community
 - Offer guidance and assistance to their fellow community providers as needed
 - Participate in Care Coordination Meetings
 - Participate in the CoC CES Committee
- **OUTREACH STAFF** – responsible for identifying new persons who are experiencing a housing crisis. Once identified the outreach staff will acquire a signed ROI from the person and enter him/her into the CES process in HMIS.
- **FAMILY INTAKE STAFF** – enter preliminary data elements on families having a housing crisis into HMIS after receiving a verbal consent from families.

- **HOUSING NAVIGATORS** – responsible for working with persons who have been identified as literally homeless to acquire needed housing documentation and work with the person to identify a housing plan and connection to mainstream benefits/services as needed. Housing Navigators will be responsible for obtaining a written ROI, uploading it in HMIS, collecting any remaining information as needed in HMIS and conducting a VI-SPDAT once a person identifies housing as a goal.

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