COORDINATED ENTRY SYSTEM POLICIES AND PROCEDURES

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I. Common Terms and Definitions

Access Point refers to the point of entry into CES for households experiencing homelessness or at risk of homelessness.

> **Open Access Points** will assist anyone (within their SPA/ subpopulations) with completing the CES Assessment or provide a warm hand-off to an appropriate Access Point to meet the household's needs. Open Access Points will receive direct referrals from 2-1-1 Orange County United Way's Virtual Front Door.
>
> **Closed Access Points** will assist only those enrolled in their program(s) to complete the CES Assessment. Households will need to reach out to your agency directly to be referred to the agency's program and determine eligibility. If the household is not eligible for the agency's program, the household will provide a warm handoff to an Open Access Point for CES enrollment.

Bed Reservation System Assessment is a standardized process for determining a household's shelter needs and interests.

Case Conferencing involves exchanging information between service providers participating in CES to enhance service coordination, minimize duplication in services and expedite access to services when needed and available. The case conferencing is aimed at ensuring that individuals and families being prioritized for a housing resource per the CES policy can have their service needs adequately met and the housing resource is an appropriate match.

Community Queue (CQ) is the *list* that holds all CES households awaiting to be referred, or matched, to opportunities such as emergency shelter, supportive services, or housing opportunities. The CQ may be referred to as the *prioritized list*.

Continuum of Care (CoC) is a regional or local planning body that coordinates housing and service funding for individuals and families experiencing homelessness. The CoC strategizes the community plan to organize and deliver housing and services to meet the specific needs of people who are experiencing homelessness as they move to stable housing and maximize self- sufficiency.

Developer is a participating CES partner organization that constructs or renovates a housing community with the intention of making units available to CES and for those experiencing homelessness.

Diversion in CES refers to problem-solving strategies used to reduce the length of time that people experience homelessness by accessing alternatives to entering emergency shelter or living in places not meant for human habitation.

Dynamic Prioritization is a process in which households enrolled into CES who are referred to the Community Queue (CQ) to be referred to a housing opportunity. The way in which names appear on the CQ is dependent on a number of factors, including but not limited to, length of verifiable homeless experience, ongoing physical or mental health conditions verified by a licensed professional, verifiable ties to a city, last city in which the household was in prior to beginning their current episode of homelessness, and more.

Emergency Shelter means any facility with the primary purpose of providing temporary shelter for people experiencing homelessness which does not require a household to sign leases or occupancy agreements.

Episode of Homelessness is a period of time that an individual or family is experiencing homelessness as defined in the homeless definition included in Attachment A. Episodes of homelessness are separated by permanent or temporary housing of at least seven nights or stays in an institution of 90 days or more.

Family is a household that consists of at least one adult aged 18+ and has either, at least one child aged 0 – 17, a pregnant mother, or is in the process of reunification. This type of household is eligible for the Family Coordinated Entry System program enrollment.

Homeless Management Information System (HMIS) refers to the United States Department of Housing and Urban Development mandated database used to collect participant-level data on the provision of housing and services to individuals and families experiencing homelessness, as well as individuals and families at risk of homelessness. HMIS is required to follow data standards established by the United States Department of Housing and Urban Development.

Homeless Prevention is services and/or financial assistance to prevent people from experiencing homelessness.

Household is a group of people that are enrolled into any of the three components of the Coordinated Entry System program. A household can be defined as a Family with any number of adults aged 18+ and any number of children aged 0 – 17, or pregnant mother, or a household can be defined as any number of Individuals aged 18+ without children or a pregnant mother. One household will equal one Coordinated Entry System program enrollment. Household may be referred to *participant*.

Housing means community-based housing without a designated length of stay and includes permanent supportive housing and rapid rehousing.

Housing Assessment is a standardized process of determining a household's permanent housing and service needs and interests.

Housing First is an approach that prioritizes connecting people experiencing homelessness to housing as quickly as possible to end their homelessness. Housing fist prioritizes client choice in the housing process and supportive service participation.

Housing Provider is a participating CES partner agency that creates housing opportunities in HMIS that are available for CES households through weekly match meetings. These opportunities can be rapid re-housing, permanent supportive housing, or other tenant-based vouchers.

Individual is an adult aged 18+. This type of household is eligible for the Individual Coordinated Entry System program enrollment, regardless of the number of adults in the household.

Interim Housing is a type of emergency shelter that provides temporary shelter for people experiencing homelessness, meet basic needs such as food, safety, and hygiene, and be supported to see and obtain housing.

Match Meeting is the virtual meeting where households are referred to supportive services or housing opportunities made available by supportive service providers and housing providers. These meetings are moderated by the Individual and Family CES administrative agencies, as well as the Office of Care Coordination for the Transitional Aged Youth and Veteran registries. These meetings are required to take place weekly, unless there are no opportunities made available for that week, or during a *dark week* (explained in a later section).

Permanent Supportive Housing (PSH) is housing that includes supportive service to assist formerly homeless individuals and families with a disabling condition to live independently and maintain housing stability. These housing opportunities utilize two different models, entire housing developments, and scattered sites where units can be in different housing developments.

Public Housing Authority (PHA) a participating CES agency that is a public entity, often at the local or state level, authorized to develop, operate, or assist in the development of housing. These authorities manage publicly owned housing and other federally subsidized housing programs. In Orange County, there are four PHAs, Anaheim Housing Authority, Garden Grove Housing Authority, Santa Ana Housing Authority, and Orange County Housing Authority.

Rapid Rehousing (RRH) is housing with time limited rental assistance and supportive services to assist individuals and families experiencing homelessness, with or without a disabling condition, move as quickly as possible into housing and maintain housing stability. For RRH opportunities, the maximum amount of rent that a household may pay can be up to 100% of the rental amount. In general, the goal will be that households pay no more than 50% of their income in rent at RRH program completion.

Referral is a successful match for a CES participating household to an appropriate CES service such as emergency shelter, supportive services, or housing opportunity. This may also be known as a *match*.

Referral Partner is a CES participating agency that makes matches (referrals) to programs and services made available by housing, emergency shelter, and supportive service providers for CES households.

Service Planning Area (SPA) is a regional sector within Orange County. The three geographic regions are the North, Central and South Service Planning Areas designated to improve service coordination and align resources among regional cities in Orange County. Reference the Planning section for the Service Planning Areas.

Shelter collectively refers to emergency shelter, including Interim Housing, and transitional housing. These are temporary living situations provided to meet basic needs while the individual or family experiencing homelessness does not have permanent housing.

Street Outreach is a program where an organization will perform direct service referrals for those who are experiencing unsheltered homelessness.

Survivor is any individual or family who is fleeing, or attempting to flee, domestic violence; has no other residency; and lacks the resources or support networks to obtain permanent housing. This type of household is eligible to be enrolled into Coordinated Entry System for Survivors, if applicable.

Transitional Aged Youth (TAY) is a household where the head of the household is someone aged 18 – 24. This can be either an adult only household or a family and can be eligible for the Individual or Family

Coordinated Entry System, depending on household composition. This household will also be eligible for any TAY specific housing opportunities.

Transitional Housing (TH) means temporary, supportive housing, where all households have signed a lease or occupancy agreement, with the primary purpose of facilitating movement of individuals and families experiencing homelessness into permanent housing. Transitional housing is generally provided for a limited time period, from two weeks up to 24 months.

United States Department of Housing and Urban Development (HUD) is a cabinet-level agency that oversees federal programs designed to help Americans with their housing needs. HUD seeks to increase access to affordable housing.

Veteran an individual who has served in the United States Armed Forces (Army, Marines, Navy, Coast Guard, Space Force, either in active or reservist status) and has had their service verified by the office of Veteran Affairs.

Victim Service Provider (VSP) HUD defines a VSP to mean a private nonprofit organization whose primary mission is to provide direct services to victims of domestic violence. This term includes permanent housing providers- including rapid re-housing, domestic violence programs (shelters and non-residential), domestic violence transitional housing programs, dual domestic violence and sexual assault programs, and related advocacy and support services programs.

Violence Against Women Act (VAWA)[1] a federal law that, in part, provides housing protections for people applying for or living in units subsidized by the federal government and who have experienced domestic violence, dating violence, sexual assault, or stalking, to help keep them safe and reduce their likelihood of experiencing homelessness.

II. Introduction

The Coordinated Entry System (CES) standardizes the way individuals and families at risk of homelessness or experiencing homelessness access are assessed for and referred to the housing and services that they need for housing stability.

The Office of Care Coordination is the lead CES Agency for the Orange County Continuum of Care (CoC). The Orange County CoC utilizes three different components that comprise CES across the CoC. These three components are Individual CES (ICES), Family CES (FCES), and CES for Survivors (SCES).

Additionally, the Office of Care Coordination manages two additional registries: one for Veterans, and one for Transitional Aged Youth (TAY). These two additional subpopulations may have specific housing opportunities and supportive services that verified Veterans and TAY eligible households may qualify for.

More information on these three CES subpopulations and two registries can be found on the Orange County CES Learning Academy.

[1] https://www.hud.gov/vawa#close

III. Goal

The goal of the Coordinated Entry System (CES) is to effectively connect individuals and families experiencing homelessness or at risk of homelessness to appropriate services and housing interventions to address and end homelessness in Orange County through:

- Dynamic prioritization
- Collaborative coordination
- Intentional resource utilization
- Equitable resource distribution
- Regional Service Planning Area prioritization

CES is required to incorporate all programs funded through the Continuum of Care (CoC), the Emergency Solutions Grants (ESG) and the Homeless Housing, Assistance and Prevention (HHAP) programs. Other services, shelter and housing programs not receiving any of the funding listed above may voluntarily participate in CES. The goal is to incorporate as many homeless service programs as possible into CES.

These policies and procedures cover referrals for all resources available through CES, including:

- All CoC, ESG, and HHAP -funded programs, including survivor dedicated resources.
- Federal, State, and Local funded programs required to participate in CES.
- Any resources that voluntarily participate in CES.

IV. CES Documents and Regulations

The below policies and procedures replace all previous versions of the CES policies and procedures and are intended to ensure that CES and all agencies participating in CES comply with the following federal regulations required for all coordinated entry systems:

HUD Coordinated Entry Notice CPD-17-01 - Notice Establishing Additional Requirements for a Continuum of Care Centralized or Coordinated Assessment System: This Notice establishes new requirements that CoC and ESG programs must meet regarding participation in CES.

HUD Prioritization Notice CPD-16-11 – Notice on Prioritizing Persons Experiencing Chronic Homelessness and Other Vulnerable Homeless Persons in Permanent Supportive Housing: This Notice establishes a recommended order of priority for CoC-funded permanent supportive housing to serve households experiencing chronic homelessness with the most severe service needs first.

Continuum of Care (CoC) Program Interim Rule 24 CFR 578: The CoC program interim rule provides guidance on the regulatory implementation of the CoC Program, including CES. Emergency Solutions Grants Interim Rule 24 CFR 576: The ESG interim rule provides guidance on the regulatory implementation of the ESG Program, including the use of CES.

McKinney-Vento Homeless Assistance Act, As Amended by S. 896 Homeless Emergency Assistance and Rapid Transition to Housing (HEARTH) Act of 2009: McKinney-Vento and the HEARTH Act establish a definition of homelessness and consolidated three HUD programs into a single program known as the CoC Program.

Criteria and Recordkeeping Requirements for Definition of Homelessness and Homeless Definition Final Rule: The Homeless Definition Final Rule defines homelessness and record keeping requirements, including the use of third-party verification and self-certification of homelessness.

Defining Chronically Homeless Final Rule: This rule establishes a definition of chronic homelessness and record keeping requirements, including the use of third-party verification and self-certification of homelessness and sources of verification of disabling conditions.

HUD Equal Access rule: 24 CFR 5: This rule ensures equal access to programs and shelters administered by HUD in accordance with their gender identity, sexual orientation, or marital status.

Homeless Management Information Systems (HMIS) Data Standards: These documents describe the standardized data collection and the documentation requirements for the programming and use of all HMIS and comparable data systems.

V. Roles and Responsibilities

CES involves cross-system collaboration and communication between the CES lead agency, the CES Virtual Front Door (VFD), CES Access Points, and Housing Providers.

A. CES Lead

The CES lead agency, the County of Orange, is empowered by the CoC to manage the process of determining and updating the prioritization for all CoC funded PSH, RRH, homeless prevention, interim housing and emergency shelter programs, including any survivor- dedicated resources as well as any other housing resources that voluntarily or are required locally or by the State to participate in the CES. The CES lead agency will work collaboratively with the CES Steering Committee, a committee of the CoC Board, to develop and review CES policies and procedures every five years, at minimum. The CES lead agency operates the CES based on the CoC Board approved CES policies and procedures.

The CES lead agency's responsibilities include:

- Facilitating referrals between CES for Individuals, Families and Survivors.
- Collecting CES data to report to HUD.
- Providing support to CES Access Points and Housing Providers participating in CES.

B. CES Virtual Front Door (VFD)

The CES VFD is contracted by the CES lead to develop and manage a VFD infrastructure, including the operation of a centralized information and referral process for connecting eligible households to a CES Access Point.

The CES VFD's responsibilities include:

- Facilitating referrals to CES Access Points for eligible households.

- Screening for sub-population specific service needs, including Survivors, TAY, Veterans, and family status.

C. CES Access Points

CES Access Points are homeless service providers in the community that serve as entry points into CES as well as offer additional assistance via referrals and other services to help support households experiencing a housing crisis. Access Points include mobile street outreach teams, navigation centers, emergency shelters and supportive services agencies.

CES Access Point responsibilities include: (but not limited to)

- Connect eligible households with CES through a standard assessment process.
- Offer additional services and resources to support with housing crisis needs.
- Represent the household's needs in CES.
- Submit a new/updated Current Living Situation Assessment, at minimum, every 90 days or the household will be automatically removed from being referred to any housing opportunities.

Maintain accurate and timely data in HMIS, as outlined in the annual CES Participating Agency Agreement form, or a comparable database for survivors.

D. CES Agency Administrators and CES Participating Agency Agreement Form

The CES Participating Agency Agreement Form will be sent out to all CES participating agencies annually in July. The CES Participating Agency Agreement Form will detail roles and responsibilities as a CES participating agency. This form will be submitted electronically and will be submitted by a manager or supervisor on behalf of the agency. The form will also identify the agency's CES Agency Administrators.

Each agency participating in CES will assign up to two staff as CES Agency Administrators. Agency Administrators will be required to attend an annual training provided or coordinated by the County of Orange for CES Agency Administrators. Agency Administrators are responsible ensuring all CES data entered into HMIS is timely and accurate as outlined in the CES Agency Agreement, and for communication and training for all CES users and assessors within their organization. Agency Administrators are also responsible for quality assurance of assessments and communication with the County of Orange regarding staffing changes.

E. Matchmakers

Matchmakers are CES Administrators that manage the CES prioritization and referral process. Matchmakers work collaboratively with Access Points and housing providers to support a successful referral process while prioritizing the most vulnerable households.

Matchmaker responsibilities include:

- Facilitating referrals for shelter, housing, and supportive services resources, including survivor-specific CoC, ESG, and HHAP funded resources.

- Facilitating referrals between CES for Individuals, Families and Survivors.
- Providing support to CES Access Points and Housing Providers participating in CES.

F. Housing Providers

Housing Providers are CES participating agencies that provide resources for people at risk of homelessness or experiencing homelessness. Housing Provider resources include shelter, supportive services, homeless prevention assistance, rapid rehousing, permanent supportive housing and other permanent housing. All CoC, ESG, and HHAP funded programs are required to participate in CES as Housing Providers.

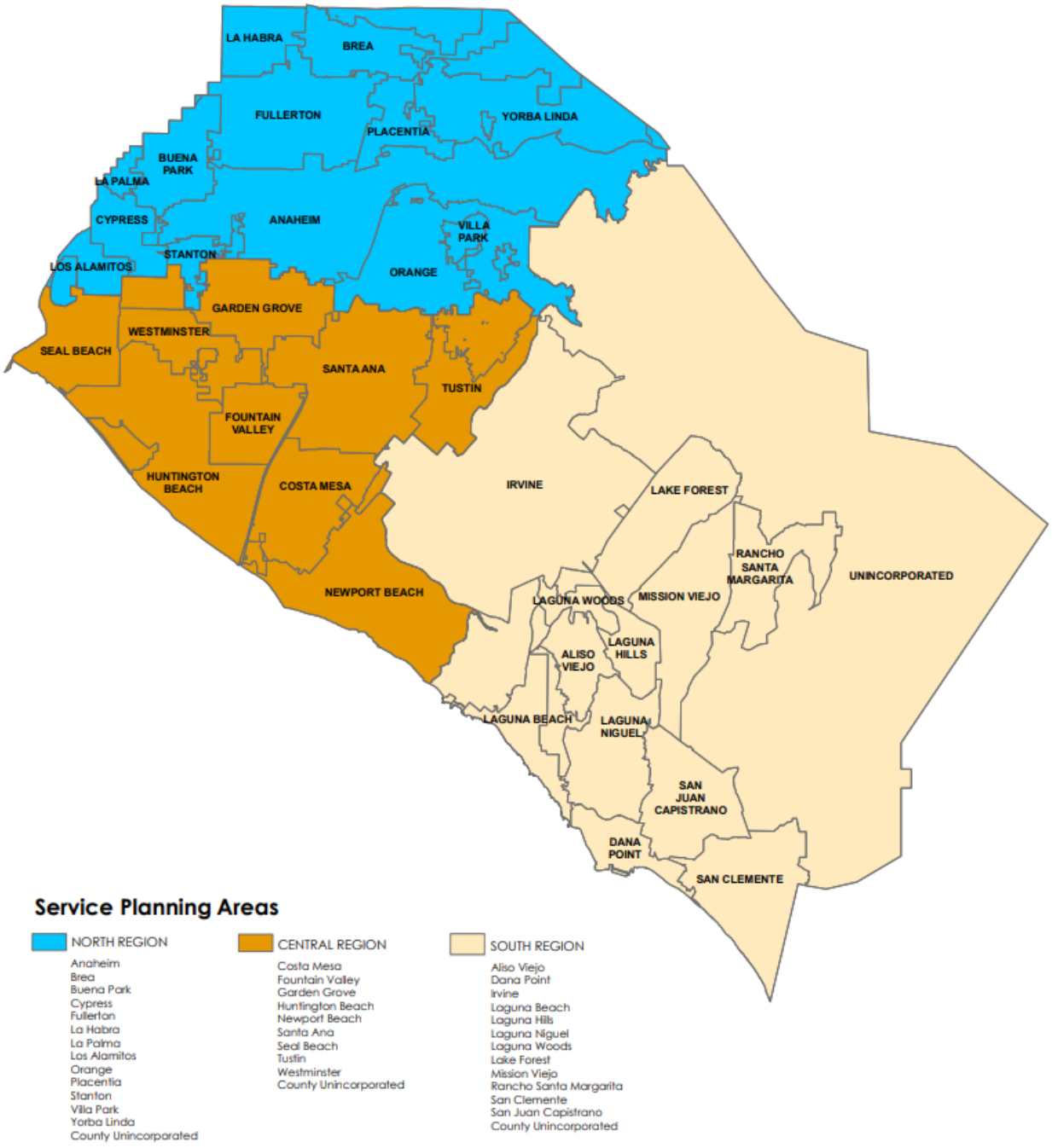
Housing Providers are required to enter any resources in HMIS every Friday by 12pm, Pacific Standard Time, when resources are available to ensure that those resources are available for matching the following week when there is a Housing Provider Match Meeting taking place. Any resources entered after this time may not receive a referral placement the following week.

Housing Provider responsibilities include:

- Notifying CES through HMIS or a comparable database for survivors when a program has an opening and is able to accept referrals.
- Clearly communicate eligibility requirements for available resources.
- Accept referrals for the available resources exclusively through CES.
- Maintain accurate and timely data in HMIS, as outlined in the annual CES Participating Agency Agreement, or a comparable database for Survivors.

G. Planning

The Orange County CoC CES serves people at-risk of and experiencing homelessness in the CA-602 Orange County CoC, which covers the entire geographic area of Orange County. To ensure full coverage of Orange County's geographic area, the CoC utilizes SPAs to allow for targeted services, resource allocation and regional coordination.

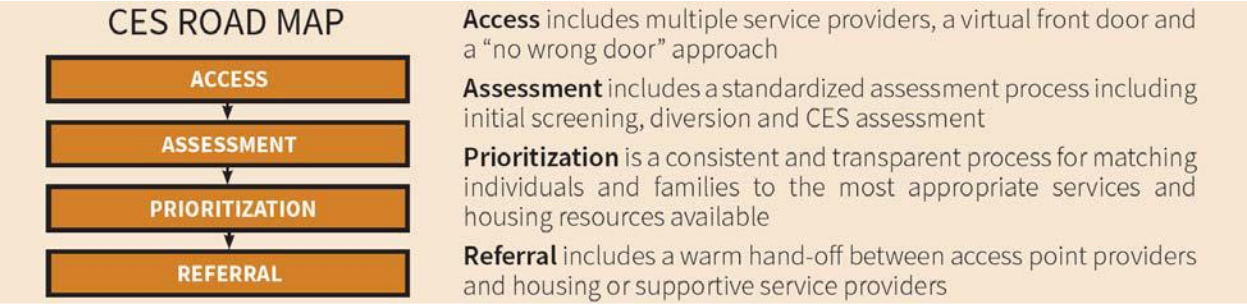


All households who meet the HUD definition of homelessness or at risk of homelessness are eligible to participate in CES. For definitions, please see Attachment A.

CES serves all individuals and families experiencing homelessness in Orange County regardless of race, color, national origin, religion, sexual orientation, gender identity, disability, age, sex, familial status, marital status, income, criminal record, or experience with domestic violence, dating violence, sexual assault or stalking. In addition, CES Access Points, housing providers, and shelter providers are expected

to competently and fairly serve households regardless of any of these factors, within their identified CES subpopulation.

CES is dedicated to ensuring that households fleeing or attempting to flee domestic violence have safe, low-barrier, survivor-centered access to all resources available through CES. HUD defines "domestic violence" as including dating violence, sexual assault, stalking, and other dangerous or life-threatening conditions that relate to violence against the individual or family member that either takes place in, or they are afraid to return to, their primary nighttime residence (including human trafficking). These policies and procedures refer to this population collectively as "Survivors."



VI. Access

The Orange County CES is operated so that households seeking housing or supportive services can easily access services. CES and available housing and supportive services are widely advertised throughout the CoC. Marketing strategies include digital and printed media. By displaying posters, flyers, and resource guides, participating agencies within each SPA will support marketing efforts and mainstream partners such as libraries, schools, police stations, and community centers will be invited to support marketing efforts as well. Training explaining how the Orange County CES works is available for a wide variety of partners at egovoc.com/ces-training. In some cases, mainstream partners, such as U.S. Department of Veteran Affairs (VA), the Orange County Health Care Agencies (HCA) and Social Services Agency (SSA) Family Resource Centers, may serve as Access Points.

Any required or recommended training will cover CES policies and procedures including assessment procedures, prioritization, referrals through CES, household privacy, cultural humility and linguistic competency, safety planning and trauma-informed practices. Training resources are regularly reviewed and updated as needed but no less than once a year. Training is provided or coordinated by the County of Orange.

While marketing will encourage people who are part of a particular cohort to connect with certain Access Points for a referral to CES, everyone in need will be accommodated and assisted at any Access Point. All materials will be affirmatively marketed to eligible persons regardless of race, color, national origin, religion, sex, age, familial status, disability, actual or perceived sexual orientation, gender identity, marital status, criminal history, and those who are least likely to complete a CES Housing Assessment in the absence of special outreach. The CES lead will make efforts to incorporate Access Points and other partners who serve populations who have been traditionally over-represented in the homelessness population but may not always receive the appropriate connection to resources and services. Marketing materials will also be provided in formats accessible to all individuals, including those with disabilities and Limited English Proficiency (LEP).

Prior to attaining access, households might encounter a referral partner - an entity or agency that can direct a person experiencing a housing crisis to a CES Access Point. Examples of referral partners include medical providers, law enforcement and public agencies such as Parks and Recreation and the Public Library. Though referral partners cannot directly connect households to CES, they play a critical, guiding role in connecting households to emergency services which serve as Access Points into CES.

Access to CES occurs after a person's immediate crisis needs have been identified and their basic client information has been entered into HMIS or a comparable database for Survivors. Throughout Orange County, an array of homeless service providers serves as Access Points. Access Points include mobile street outreach teams, navigation centers, emergency shelters and the VFD. Access Points are distributed geographically throughout the County in all three Service Planning Areas (North, Central, and South) and the VFD provides access 24 hours a day through a call center and online access.

To facilitate access to CES for Veterans and people with disabilities, the VA and HCA are CES partners with the ability to conduct the standardized CES assessment and participate in the prioritization and referral process.

A. Access Model

The Orange County CES is comprised of three systems: CES for Individuals, CES for Families, and CES for Survivors. In addition, CES operates two by-name registries, a Veteran Registry for Veterans composed of Veteran households with or without minor children participating in any of the three components of CES and a TAY Registry composed of all households with an adult head of household aged 18-24 years old with or without minor children participating in any of the three components of CES. All CES systems work collaboratively and follow all CES policies and procedures.

Orange County CoC embraces a Housing First approach and, as such, CES, offers services, shelter and housing to people experiencing homelessness without preconditions or service participation requirements, such as sobriety, mental health treatment, or minimum income thresholds. The primary goals of the Housing First model are rapid placement and stabilization in permanent housing.

Orange County CES is intended to reduce barriers to available emergency services through streamlined and transparent access. All households will be required to complete minimal documentation to participate in CES, including the CES Authorization Form, homeless verification forms, including self-certification, Third Party Verification of Homelessness, and the Disabling Condition Form if applicable, which will be uploaded into their HMIS profile.

VSPs who enroll survivors into CES will also obtain and record informed consent to enter survivors into CES for Survivors prior to doing so. This will be recorded using the CES authorization form in the comparable database used for CES for Survivors.

In addition, people experiencing homelessness may access emergency services not participating in CES and, when immediate access to emergency services is available at emergency services that participate in CES, people may access emergency services during hours when CES intake and assessment processes are not operating and then be connected to CES as soon as the intake and assessment processes are operating. Completing the standardized Housing Assessment is not a requirement and no household will

be denied access to the crisis response system based on willingness to participate in the Housing Assessment process. Regardless of a household's willingness to complete the standardized CES Housing Assessment, people will be warmly welcomed into emergency shelters and/or other emergency services, as available.

Although there are separate systems for Individuals, Families and Survivors, the Orange County CES offers a "no wrong door" approach with a standardized assessment at all Access Points. Initial standardized screening using a Pre-Assessment Screening tool at the VFD and each Access Point allows for immediate linkage to the appropriate subpopulation Access Point. CES ensures that Veterans, TAY and Survivors can access their respective CES subpopulation specific resources and non-dedicated resources referred through CES regardless of the Access Point where they present. This provides households experiencing homelessness a variety of avenues from which to access housing and supportive services, and no one is turned away.

Households experiencing a housing crisis in Orange County have two ways to connect with CES:

B. Virtual Access by Contacting the Virtual Front Door (VFD):

- Households experiencing homelessness or at risk of experiencing homelessness can call 2-1-1 at any time, day or night, and will be connected with a certified multi-lingual referral specialist who can make referrals to appropriate emergency services based on individual and family service needs and SPA location. 211OC, as the CES VFD will also provide referrals to CES Access Points.

- If the VFD referral specialists receive a call from a household that is experiencing homelessness or at risk of homelessness as defined by HUD, the VFD staff will screen the household for Survivor, TAY and veteran status as well as household composition.

- If the household identifies as including Survivors, and requests to be quickly connected to survivor-specific housing options or other assistance for survivors (such as emergency shelter, counseling, etc.), VFD staff will make a warm handoff to a VSP serving as a CES Access Point. Survivors are not required to be referred to a VSP and may accept a referral to any appropriate CES Access Point if there is not a specific request for survivor-specific services.

- If the head of household identifies as a TAY, VFD staff will provide referrals to CES Access Points that provide specialized TAY-specific services. TAY are not required to accept a referral to a TAY provider and may accept a referral to any appropriate CES Access Point if there is not a specific request for TAY-specific services.

- If the household identifies as included a Veteran, VFD staff will provide referrals to CES Access Points that provide specialized veteran-specific services. Veterans are not required to accept a referral to a Veteran provider and may accept a referral to any appropriate CES Access Point if there is not a specific request for Veteran-specific services.

- If a household identifies as a family that includes minor children, the household will be referred to a Family Access Point. If the household identifies as an adult-only household, the household will be referred to an Individual Access Point. Family and Individual Access Points include Access Points providing specialized subpopulation services for Survivors, TAY, and Veterans and Access

Points that provide generalized services for people experiencing homelessness or who are at risk of homelessness.

C. Direct Access by Presenting at an Individual or Family Access Point:

Eligible households may access CES by connecting directly with a CES Access Point. All Access Points will screen all households for Survivor, TAY and Veteran status using the Pre-Assessment Screening tool and receive regular training on conducting these screenings in a Survivor-centered, trauma-informed manner.

If the household identifies as including Survivors, and requests to be connected to Survivor-specific housing options or other assistance for Survivors (such as emergency shelter, counseling, etc.), Access Point staff will immediately offer a referral to a VSP serving as a CES Access Point.

D. Accessibility

Orange County CES ensures that Access Points are accessible to all households, including those with disabilities and limited English proficiency. In cases where particular access points are inaccessible for households for any reason including, but not limited to, structural barriers, language barriers, or transportation limitations, households will be accommodated at alternative Access Points or by a street outreach team with the appropriate auxiliary aids and services necessary to ensure effective communication and completion of the standardized assessment.

E. Safety Planning

Individuals and Families who are fleeing, or attempting to flee, domestic violence, dating violence, sexual assault, or stalking need specialized assistance that promotes and protects their confidentiality and safety. Therefore, while they will have unencumbered access to emergency services and CES, appropriate and prompt referrals to services, including hotlines, and emergency shelters specializing in domestic violence are critical. The following domestic violence resources are available in Orange County:

Human Options	877-854-3594
Interval House	714-891-8121
Laura's House	866-498-1511
Radiant Futures	714-992-1931 877-531-5522
Sexual Assault Victim Services (North)	714-957-2737
Sexual Assault Victim Services (South)	949-831-9110
2-1-1 Orange County Helpline	211 949-646-4357 888-600-4357

VII. Assessment

CES utilizes a standardized assessment process. The standardized CES assessment process is consistent across all Access Points including street outreach teams. CES uses the following standardized assessment tools:

Pre-Assessment Screening – The Pre-Assessment Screening is completed to determine specialized services needs and guide referrals to appropriate subpopulation specific service providers.

Shelter Assessment – The Shelter Assessment is completed to connect people with shelter opportunities available through CES and is used to collect information to assist with determining homelessness, vulnerability, accessibility needs and eligibility for shelter programs.

Housing Assessment – The standardized Housing Assessment is completed to connect people with housing opportunities available through CES and is separated into sections which assist in determining homelessness, vulnerability, strengths, barriers and other criteria related to eligibility for housing programs.

Survivor Assessment – The Survivor Assessment is completed by VSPs to assess for Survivor -dedicated resources available through CES for Survivors as well as resources available through CES for Individuals or Families. Only VSPs can administer the Survivor Assessment which is used to submit de-identified vulnerability, housing interests and eligibility information to CES.

Stepping Up Assessment – The Stepping Up Assessment is completed with households that are currently housed through a rapid rehousing program who need a more intensive housing intervention to maintain housing stability and is separated into two sections to collect information on eligibility and vulnerability.

Moving On Assessment – The standardized Moving On Assessment is completed with household that are currently housed in a permanent supportive housing program who would like to be considered for a less intensive housing intervention and is separated into two sections to collect information on eligibility and housing stability.

Prevention Assessment – The Prevention Assessment is completed with households at risk of homelessness and is separated into sections which assist in determining at risk of homelessness status, vulnerability and eligibility for homeless prevention resources.

Prior to completing the standardized CES assessment process, Access Points assess and address immediate needs followed by efforts to prevent homelessness or divert from experiencing ongoing homelessness. Services, shelter and housing resources available through CES are limited, therefore Access Points will also assist households with identifying services, shelter and/or housing resources and solutions available outside of CES. If referrals to shelter resources available through CES are required, Access Point staff begin completing the Shelter Assessment. If referrals to housing resources available through CES are required, Access Point staff begin completing the Housing Assessment with the households experiencing homelessness. The CES assessments may be completed during a single session or over time as immediate needs are addressed and rapport is developed between Access Point staff and the household experiencing homelessness or at risk of homelessness.

If a household is in crisis, is eligible for shelter and chooses shelter, the following steps must be taken:

- First, provide triage including diversion and prevention;
- Then, connect the household with shelter as needed and capacity allows and;
- Finally, follow up to complete the Housing Assessment process with consent.

Safety planning is done with all individuals and families who may be in danger or could be a danger to themselves or others including identifying appropriate supports and resources. These needs are uncovered through the assessment and responded to immediately to quickly offer appropriate referral linkages. Assessors will be trained on how to understand when a person is at risk of harming themselves or others and serve as mandated reporters so that they are equipped to call 911 when necessary or connect household to a local hospital for crisis support.

CES assessments can and should be updated as contact information or life circumstances change to ensure a successful referral to an available shelter or housing resource and corresponding shelter or housing provider.

CES assessments are completed by Access Points in HMIS except for VSPs who are prohibited from using HMIS. VSPs will use the following process to communicate the outcome of the Survivor Assessment to CES for prioritization and referral to both survivor-dedicated resources and resources accessed through CES for Individuals and Families:

- Assessors will submit de-identified assessment information to CES through Microsoft Forms. De-identified information will include:
    - A unique identifier that VSP staff will create and use to identify the household.
    - Eligibility and vulnerability information necessary to determine prioritization for available housing and resources.
    - Housing interests in order to make the most appropriate housing referrals based on the household's identified housing needs.

VSPs are still required to submit a new CES Assessment every 90 days, or the Survivor will be removed from being considered for additional housing opportunities.

In support of the household's self-determination and autonomy, CES households are freely allowed to decide what information they provide during the assessment process, to refuse to answer assessment questions and to refuse housing and service options without retribution or limiting their access to other forms of assistance. Households who decline to complete CES assessments or provide incomplete information will be informed by the assessor that incomplete assessment information may limit housing opportunities if the incomplete questions are related to eligibility criteria for specific programs.

Unaccompanied minors (children ages 17 and younger) will be immediately connected to Casa Youth Shelter (800-914-2272) or Huntington Beach Youth Shelter (714-842-6600) for emergency shelter and supportive services. The standardized CES assessment may be completed with an unaccompanied minor, as appropriate.

Providers serving as Access Points have completed training on conducting the standardized CES assessments and entering data into HMIS or a comparable database for VSPs. Updated training is provided

at least annually. If further support is needed, it will be made available upon request and as resources permit.

The training covers CES policies and procedures including assessment procedures, prioritization, referrals through CES, participant privacy, cultural humility and linguistic competency, safety planning and trauma-informed practices. Training resources are regularly reviewed and updated as needed but no less than once a year. Training is provided or coordinated by the County of Orange.

A. Prioritization

When the need for services is greater than resources available, CES utilizes an established prioritization schema approved by the CoC Board to connect households experiencing homelessness or at risk of homelessness with shelter, housing and supportive services available through CES. CES has no authority over services, shelter and housing programs that do not participate in CES.

CES prioritization is a dynamic process that applies to all CES Components (Individuals, Families, Survivors, TAY, and Veterans). For all services, shelter and housing opportunities available through CES, except Survivor-specific resources, CES will prioritize households with the longest length of homelessness in the community as collected in HMIS following the most recent HMIS Data Standards and highest service needs as determined using CES program intake, the standardized CES assessments and case conferencing amongst the CES participating agencies, as needed and appropriate. Case conferencing occurring with CES participating agencies is aimed at ensuring households are prioritized per the CES policy for services, shelter and housing opportunities appropriate to their service needs according to their current circumstances. A regional SPA distribution prioritization based on the most recent finalized point in time count is used to distribute non-geographically designated resources by SPA to avoid forcing households to move long distances unless by household choice.

The primary factors considered during prioritization are chronic homelessness as defined in 24 CR 578.3, length of the current episode of homelessness and permanent disabling conditions as defined in section 401(9) of the McKinney-Vento Homeless Assistance Act (42 U.S.C. 11360(9)). The current episode of homelessness starts when the individual or family begins experiencing homelessness as defined in Attachment A after residing in permanent or temporary housing for at least seven nights or staying in an institution for 90 days or more. The main prioritization factor for households experiencing chronic or literal homelessness will be the length of their current episode of homelessness.

The prioritization groups will be as follows: (all criteria must be verified through proper documentation and uploaded into the household's HMIS profile).

Within each group, all households are sorted by the date their current homelessness began, starting with who has experienced homelessness the longest. If two households in the same group have the same length of homelessness (in days), they will be sorted alphabetically by their randomly assigned HMIS Unique Identifier. Other opportunity specific factors such as local preference may affect prioritization if applicable.

1. Households experiencing Chronic Homelessness
    a. Households with a chronic disability who are currently experiencing sheltered or unsheltered homelessness and who have been experiencing homelessness (a) for at least

the last 12 months straight OR (b) on at least four separate occasions in the last three years for a combined minimum of 12 months.

2. Households with a Chronic Disability
    a. Households who are experiencing homelessness but who do not meet the length of time requirements to be experiencing chronic homelessness but who have a disability that is expected to be ongoing, substantially, impedes their housing stability, and could be improved by more suitable housing.
3. Households without a Disability
    a. Households experiencing literal homelessness who do not have a disability as defined above.
4. Households at risk of homelessness
    a. Households at risk of homelessness are not eligible for many of the opportunities prioritized through CES, but if eligible will generally be the last priority group.

Services available through CES include some, but not all the following:

- Housing navigation
- Stabilization services
- Emergency shelter
- Interim housing
- Transitional housing
- Permanent Supportive Housing
- Housing Choice Vouchers
- Rapid Rehousing
- Other housing opportunities

At minimum, all CoC, ESG, and HHAP funded services, shelter and housing will prioritize households with the most urgent and severe needs on the CES prioritization list following the prioritization process described below who are eligible for the service, shelter or housing opportunity available through. Other service, shelter or housing resources will be encouraged, but not required, to participate in CES if privately or alternatively funded.

The Orange County CES is integrated into the emergency response services in Orange County to meet basic needs, including emergency shelters, interim housing and transitional shelters. Households experiencing homelessness or at risk of homelessness should work with emergency service providers and/or call 2-1-1 to receive an initial referral to emergency services. Participating emergency response services will utilize the Orange County CES to connect households experiencing homelessness with services, shelter and housing opportunities available through CES by completing the Shelter Assessment and/or the Housing Assessment.

In addition, some shelters in Orange County receive referrals through CES. CES will prioritize individuals and families for shelter opportunities available through CES using the prioritization process described above.

B. Prevention and Diversion Prioritization

Prevention and diversion services are a critical part of CES and may occur prior to completing the CES assessments or during the process of participating in CES for households experiencing homelessness or at risk of homelessness. Prevention and diversion are key components of CES that should be utilized in case management and housing plans for all households experiencing homelessness or at risk of homelessness in Orange County. Some, but not all, prevention and diversion services are available through CES. Households at risk of homelessness and in need of homeless prevention services, should dial 2-1-1 to receive a referral to available homeless prevention services. In instances where there are no appropriate prevention referrals, 2-1-1 will attempt to connect households to alternate resources.

C. Dynamic Match

Exceptions to the prioritization may be made through case conferencing a dynamic match request, where the CES administrators of both the Family and Individual CES components will be the responsible parties for approving or denying those dynamic match requests and presenting any approved dynamic match requests amongst the CES participating agencies as appropriate to meet specialized client needs and agreed to through consensus by the CES participating agencies, during the respective Housing Provider Match Meeting. In addition, case conferencing amongst the CES participating agencies will be employed to ensure resources are aligned to client needs and promote effective resource utilization.

D. Survivor Prioritization

Survivor-specific resources will be prioritized for Survivors with the highest score on the Survivor Assessment who are interested and eligible for the available Survivor-specific housing resource. If two or more Survivors have the same score, the Survivors will be randomized to determine priority to a housing opportunity if the number of Survivors with the same score exceeds the number of housing opportunities available.

E. Non-CoC Funded Project Prioritization

Housing opportunities provided by public housing authorities that are not funded through the CoC (ex. Housing Choice Vouchers) and receiving referrals through CES will be prioritized by CES in compliance with the administrative plan for each public housing authority jurisdiction. Prioritization and case conferencing amongst the CES participating agencies will be used to refer households who are the most appropriate to the available resource.

F. Stepping Up and Moving On

Tenant-based and project-based PSH tenants are permitted to move between PSH opportunities and/or graduate to HCVs, as available and eligible. Movement between PSH opportunities is determined and agreed upon by the housing providers. Rapid rehousing and permanent supportive housing tenants eligible to complete the Stepping Up and Moving On Assessments are prioritized for housing opportunities available through CES. Households with the highest score on the Moving On Assessment will be prioritized first followed by households with the highest score on the Stepping Up Assessment. Moving On Assessments with the highest score will be prioritized for all housing opportunities available through CES to increase access to PSH for people experiencing chronic homelessness with severe service needs. Vacancies created through tenant movement must be refilled through CES using CES prioritization criteria.

G. Targeted Opportunities

Housing opportunities that serve a specific target population may receive referrals of that target population. To target a specific population outside of existing practices and community standards, housing providers must provide documentation to CES of receipt of funding that specifies the funder-defined targeting criteria prior to receiving a referral. Housing providers with targeted housing opportunities will receive referrals from CES that meet the stated targeting criteria, following the system wide prioritization policy for referrals. Housing opportunities that do not state serving a specific target population will be allocated to any CES Component, applicable to local, county, and state zoning laws based on square footage of the unit made available, using the most recent Point in Time Count data, by the County of Orange as the CES lead agency.

Households remain enrolled in CES until the household is permanently housed, opts out of participating in CES, becomes inactive, or is otherwise exited. Households will automatically be made inactive on the CES Community Queue (CQ) after 90 days of non-engagement with Access Points or CES participating agencies as documented in HMIS or the comparable database for VSPs. Households are automatically removed from the Bed Reservation Queue (BRQ) for shelter referrals available through CES after 7 days of non-engagement with an Access Point or CES participating agencies as documented in HMIS. Households are automatically removed from the CQ for supportive services and housing opportunities after 90 days of non-engagement with an Access Point.

H. Prioritization Scenario Examples

Scenario I

CES receives five (5) Housing Choice Vouchers (HCVs). Based on the 2024 Point in Time Count results, homeless households were distributed throughout Orange County's SPAs as follows: 44% North, 47% Central, and 8% South. Therefore, these vouchers will be allocated as follows:

Two (2) for the North SPA
Two (2) for the Central SPA
One (1) for the South SPA

Individuals experiencing chronic homelessness with the longest lengths of homelessness are referred to these opportunities. If no individuals experiencing chronic homelessness are available, individuals with a disabling condition and the longest length of homelessness will be considered If no individuals with a disabling condition are available, individuals with the longest length of homelessness will be considered.

If these HCVs do not designate a specific target population of CES, the County of Orange as the CES lead agency, reserves the right to allocate the HCVs among any CES Component as long as the household size is within the HCV's parameters and any local, county, or state zoning occupancy standards.

Scenario II

A project-based PSH unit becomes available in the North Service Planning Area for a family. Families experiencing chronic homelessness with the longest length of homelessness from the North Service

Planning Area are considered first for this opportunity. If no families experiencing chronic homelessness from the North Service Planning Area are available, families experiencing chronic homelessness from any Service Planning Area will be considered.

Scenario III

A RRH opportunity becomes available for homeless individuals. Individuals experiencing chronic homelessness with the longest length of homelessness are referred to these opportunities first. If no individuals experiencing chronic homelessness are available, individuals with a disabling condition with the longest length of homelessness will be considered. If no individuals with a disabling condition are available, individuals with the longest length of homelessness will be considered.

I. Disaster Prioritization

CES seeks to be a strong and effective partner to our community in the event of a local, state or national disaster. The County of Orange, as the CES lead, reserves the right to focus all resources available through CES to affected populations who are eligible for the available resource. In these situations, CES may modify the prioritization policy to prioritize households impacted by the disaster using the prioritization process described above.

VIII. Referral and Match Meeting

Service, shelter and housing providers participating in CES share available service, shelter and housing opportunities through HMIS or a comparable database for CES for Survivors selected by the County of Orange. Service opportunities are matched as needed based on availability and the housing resource identified. Shelter opportunities are matched weekly, at minimum, during business hours as opportunities become available. Housing opportunities are discussed weekly at the Match Meetings (and referred to eligible households as prioritized by the prioritization schema.

Match Meetings take place weekly and are scheduled at the discretion of the CES administrators. Match Meetings are not required to take place if there are no housing opportunities available for referrals that week, or if the scheduled HPMM falls on a holiday where the Office of Care Coordination is closed in observance of that holiday, or during the week of the 4th of July, Thanksgiving (the fourth Thursday of November) and Christmas (December 25).

The meetings are attended by participating Access Points, referral partners and housing providers. All information shared at the HPMM is private and confidential. To attend the Match Meetings, attendees are required to review client privacy and confidentiality requirements and attest to complying with the privacy and confidentiality requirements, as well as being fully approved CES participating agencies by both the Count of Orange and the CES administrators of the Family and/or Individual CES components. VSPs are not allowed to attend the HPMM for any CES components. Survivors prioritized through CES for Individuals or Families will be considered for all resources available through CES for which the Survivors have indicated their interest and eligible for as indicated in the CES for Survivors Assessment

There is no live Match Meetings for CES for Survivors. Referrals are made weekly by the CES for Survivors administrator, as housing opportunities are made available. Case conferencing for CES for Survivors takes place at the discretion of the CES for Survivors administrator.

Referrals will be provided by email to the Access Point and the housing provider.
Upon referral to service, shelter, and housing opportunities, Access Points will continue to support households throughout the intake and placement process and, ideally, for a month or more after housing placement to ensure housing stability is achieved.

Upon referral to service, shelter, and housing opportunities, service, shelter and housing providers will provide an overview of program expectations including the share of rent and utility costs to participants if applicable and maintain regular communication with Access Point staff and CES.

A. Declining a Referral/Match

When a household declines a service, shelter or housing referral, the household is returned to the CQ and remains on the CQ for a new service, shelter or housing referral. The household will continue to be prioritized for available service, shelter or housing resources following the prioritization process previously described.

Service, shelter and housing providers may deny a referral on the household's behalf from CES under any of the following circumstances:

- Inappropriate referral (ex. Accessibility needs cannot be met)
- Ineligible referral (ex. new intake information fails to meet eligibility requirements)
- Household obtained other permanent housing.
- Household is unresponsive after multiple contact attempts to all available contact information.

Referrals denied by service, shelter and housing providers must be made in writing if not matched through HMIS or electronically in HMIS and include the reason for denying the referral as well as any information obtained during the referral process that ensures accurate household information and helps improve future referral processes.

When a household is denied by service, shelter or housing providers, the household is returned to the CQ and remains on the CQ for a new service, shelter or housing referral. The household will continue to be prioritized for available service, shelter or housing resources following the prioritization process previously described.

Service, shelter and housing provider denials may be contested by conference between the service, shelter or housing provider, the referring agency and the County of Orange. The referred household may also be involved as able and appropriate.

B. 2-for-1 Match Policy

The 2-for-1 Match Policy and Procedure provides guidance to when and how 2-for-1 matches can be requested by Housing Providers, as well as the needed communication with households who are the identified secondary match.

Housing Providers (housing provider, public housing authorities, developer, etc.) may request a secondary match for a single unit vacancy, commonly referred to as 2-for-1 matches. In this practice, the two (2)

households from the Coordinated Entry System (CES) Community Queue are matched to one (1) housing opportunity, as made available by the Housing Provider. This updates the households to a "pending referral" status in the CES Community Queue as they work through the application process for the housing opportunity that were made available.

The Homeless Management Information System (HMIS) does not have the technical capability to keep a household active on the CES Community Queue, while also matched to a housing opportunity as the "secondary match". As such, households who have a "pending referral" status may not be considered for additional housing opportunities concurrently. The 2-for-1 matches will only be used with Office of Care Coordination approval.

Scenarios for Requesting a 2-for-1 Match

2-for-1 matches can only be requested by the Housing Provider, when one of the two following scenarios is applicable:

1. The request for 2-for-1 match can only be submitted when the following conditions are met:
    a. Unit has been vacant for at minimum 15 days;
    b. Unit has been in the possession of the housing provider for at minimum 15 days; and
    c. Unit is move-in ready
2. A newly opened property needs to achieve a specified occupancy rate by a specified date. The request for 2-for-1 match can only be submitted no earlier than 60 days before the specified date.

The Office of Care Coordination as the CES Lead reserves the right to request documentation confirming either of the data points previously listed with any 2-for-1 Match Request submissions.

Criteria for 2-for-1 Match Requests

When requesting a 2-for-1 Match, the Housing Provider is agreeing to processing the matches as detailed below. The following guidance must be followed to ensure that any 2-for-1 match requests are handled appropriately and that the process is trauma-informed by promoting safety, ensuring participant choice and autonomy, building trust, and providing a strengths-based, compassionate approach for all households involved. All guidelines points below are in alignment with current CES policies and procedures.

1. "Primary" and "Secondary" matches will proceed with the initial application process for the available unit. Housing opportunity will be reserved for Primary match and not utilize a "first come – first served" approach.
2. If a Primary match declines, is denied (including an appeal period if applicable), or is considered unresponsive after 14 days of no contact from the original match email date, then the housing opportunity will be made available for the Secondary match.
    a. The Primary match will be returned to the Community Queue.
    b. Should the Primary Match become unresponsive for a period of 30 consecutive days after beginning the application process, they will be considered unresponsive and can be returned to the Community Queue with approval from all parties including the assigned case manager.

3. In the event that both Primary and Secondary matches become fully approved, the Secondary match is not allowed to be returned to the Community Queue (unless requested by the Secondary Match). Should the Secondary Match not request to be returned to the Community Queue the requesting housing provider will provide the Secondary match a housing opportunity in their respective housing inventory with the next available unit, and with the goal of housing the Secondary match within 45 days.
    a. Whenever possible, the housing provider will prioritize offering the Secondary match a similar and/or comparable housing opportunity to the original housing opportunity.
        i. (Mental Health Service Act Units to Mental Health Service Act Units, Project Based Voucher to Project Based Voucher, location, unit size, ADA needs, etc.)
4. Only when <u>both</u> matches are denied, decline, considered unresponsive, or a combination of the three, may the Housing Provider can submit another 2-for-1 match request form for that same unit for two new matches.
    a. This means that a new Secondary match cannot be requested, after the Primary match is denied, declines, or considered unresponsive.
    b. A matched household, Primary or Secondary, will be considered unresponsive after 14 calendar days from the original match email date.
5. All stakeholders (Property Manager, Public Housing Authority, developer, supportive services provider, etc.) associated with the specific housing opportunity where a 2-for-1 match request is being requested must agree with the 2-for-1 match request. The Office of Care Coordination will verify via email with all stakeholders that this agreement exists.
6. The Secondary household matched must sign (wet or digitally) the 2-for-1 Secondary Match Confirmation indicating authorization of removal from the CES Community Queue and must be returned to the Office of Care Coordination via email to the original match email within seven (7) calendar days after being received.
    a. The Office of Care Coordination will follow up with the staff member who submitted the 2-for-1 Secondary Match Confirmation form if the form has not been signed by the secondary household by the seven (7) days.
    b. On the 8th day, the secondary household match will be voided and returned to the CES Community Queue.
7. Secondary matches reserve the right to be returned to the CES Community Queue for other housing opportunities in which the household wishes to be considered for at any time.
8. 2-for-1 Match Requests are only available for two referrals for every one housing unit.
    a. If there are two available units to accept referrals, Housing Providers must submit two separate match request forms and so on.

If any of the following steps are not followed, the Office of Care Coordination reserves the right to deny any future requests submitted by the same housing provider, public housing authority, or developer.

Procedure

The Secondary match will only be matched once all other primary matches have been identified based on the number of housing opportunities available for the specific match meeting taking place. This procedure is meant to ensure that the CES Prioritization Policy is followed, and that a household is not considered as a secondary match prior to being matched as a primary to other housing opportunities based on their length of homelessness, disabling conditions and other eligibility criteria.

Example: If there are three (3) units who received approval from the Office of Care Coordination for 2-for-1 Matches, this means that six (6) households will be removed from the CES Community Queue.

The first secondary match, would be the fourth household to appear on the CES Community Queue, and not the second household to appear on the CES Community Queue.

CES Community Queue and matches to Housing Opportunities:

1. John Doe ← Primary match to unit #1
2. Jane Doe ← Primary match to unit #2
3. John Smith ← Primary match to unit #3
4. Jane Smith ← Secondary match to unit #1
5. John Jones ← Secondary match to unit #2
6. Jane Jones ← Secondary match to unit #3

This practice will ensure that the higher prioritized households will be the primary match in the order of prioritization and maintain the integrity of the CES Community Queue that align with the CES policies and procedures as approved by the Orange County Continuum of Care.

Matches may not be shifted to other units in cases where a property has more than one (1) approved 2-for-1 Match Requests. All secondary matches must maintain their originally matched unit. This process will only be utilized after Office of Care Coordination approval and is outlined using the example above:

1. Both John Doe (primary) and Jane Smith (secondary) were matched to unit #1
2. Both John Doe and Jane Smith were returned to the Community Queue.
3. John Jones and as the highest prioritized remaining secondary match can be moved to the Primary match for unit #1.
    a. A new 2-for-1 Match Request can be requested if John Jones is returned to the Community Queue.
4. All other remaining secondary matches will remain to the original matched unit.

Any Secondary Matches are only to be made after all current housing opportunities available have identified Primary Matches.

If any of the following steps are not followed, the Office of Care Coordination reserves the right to deny any future requests submitted by the same housing provider, public housing authority, and developer.

How to Request a 2-for-1 Match

Housing Providers requesting a 2-for-1 match shall complete the following steps:

1. The Housing Provider must submit the 2-for-1 Match Request Form for a specific housing opportunity to the CES Lead Agency, through the linked Google Form.
    a. The Office of Care Coordination can supply this link as requested.
2. Once the Office of Care Coordination reviews a request for completion and additional verification as needed, the Office of Care Coordination will respond with an approval or denial of the request within three (3) business days from the date of form submission.

    a. If approved proceed to step 3
    b. If denied proceed to step 5
3. If the Office of Care Coordination has approved the request in writing, the Housing Provider may proceed to enter the two separate housing opportunities into HMIS.
    a. All 2-for-1 match requests entered in HMIS must include a label of "Primary" or "Secondary" or be included in the opportunity description.
    b. All 2-for-1 match requests will require a unit number to be entered into the HMIS opportunities.
    c. These housing opportunities will receive matches the following week in which they were approved, and if the housing opportunities were entered by Friday, or last business day of the week, at 12pm, Pacific Standard Time.
4. A 2-for-1 Secondary Match Confirmation must be filled out by both CES Access Point case manager and the Secondary matched household (once the matches have been confirmed).
    a. This document will be provided by the Office of Care Coordination via the original match email for the secondary matched household.
    b. The 2-for-1 Secondary Match Confirmation must be completed and returned within seven (7) calendar days from the date of the original match email.
5. If the 2-for-1 Match Request is denied, the Office of Care Coordination will provide reason for the denial via email to the original requesting staff member as indicated in the 2-for-1 Match Request Form. The Housing Provider may appeal the decision by responding to the denial email that was sent by the Office of Care Coordination indicating that the 2-for-1 Match Request was denied. The appeal should include any pertinent information that clearly illustrates the need for a secondary match.
6. The Office of Care Coordination will respond to all appeals in a timely manner to ensure that if the decision is overturned, two matches can be received by the next planned match meeting.
7. For all approved 2-for-1 Match Request, weekly updates on the application process for the Primary match must be provided to the Office of Care Coordination via email at the coordinatedentry@ceo.oc.gov every Friday by 2pm with the most updated information. While updates are provided on the Secondary match regularly.
    a. Failure to provide weekly updates on the application process and status for both households will result in automatic denial of future requests.

If any of the following steps are not followed, the Office of Care Coordination reserves the right to deny any future requests.

All questions regarding 2-for-1 Match Requests should be directed to coordinatedentry@ceo.oc.gov.

IX. Emergency Transfer Request Policy

Per the Violence Against Women Act (VAWA), any household who is a victim of domestic violence, dating violence, human trafficking, sexual assault, or stalking can request an emergency transfer under the following circumstances:

a. A sexual assault occurred on the premises of their HUD-funded housing program; or
b. Who reasonably believed that they are imminently threatened by harm from further domestic violence, dating violence, sexual assault, stalking, or human trafficking if they remain in that designated HUD-Funded dwelling.

A request for an emergency transfer, under these circumstances, does not guarantee immediate placement, but households who qualify for an emergency transfer will be given a priority referral over all other applications for the next available, safe unit through CES for which they qualify.

If a household is currently enrolled in a HUD-funded housing program and requests an emergency transfer, the household must follow the housing agency's internal emergency transfer housing process. If the housing program is unable to accommodate the emergency transfer request, the housing program may request an emergency transfer via CES by reaching out to the Office of Care Coordination at CoordinatedEntry@ceo.oc.gov.

X. Privacy and Data Management

CES, as an extension of HMIS, is required to comply with all HMIS policies and procedures. All agency staff participating in CES are required to sign and comply with all HMIS policies and procedures. VSPs are not required to use CES for emergency services and cannot participate in HMIS to utilize the CES program. VSPs partnering with CES are required to use a comparable database managed by the CES lead.

During CES assessment, assessors are required to obtain household consent to disclose their information. In unavoidable circumstances consent may be initially obtained verbally, and the signed CES Authorization Form must be obtained and uploaded into the client HMIS profile within 30 calendar days of verbal consent. When a household consents to disclose their information, they enhance the ability of CES to assess needs and make appropriate housing referrals. If consent is not obtained, services will not be denied.

In the case that full consent is not obtained, please note these special instructions: Do not enter personal identifiable information into HMIS. HMIS will automatically generate an anonymous ID. Please retain at least the first page of the CES assessment part one with the HMIS ID and household name for your records and future housing referrals.

XI. Grievance Process

At any time during the coordinated entry process, households have the right to file a complaint, should they feel that CES has not complied with the nondiscrimination and equal opportunity provisions of Federal civil rights law, fair housing laws and requirements, or the CES policies and procedures. During assessment, all CES households will be provided with the process for filing a complaint. All complaints will be addressed in a timely and fair manner. The following contacts are provided to households for the purpose of addressing discrimination or grievance concerns:

- For grievances with a CES Access Point's services as an Access Point, please file a grievance with the Access Point using their established grievance procedures. If the grievance cannot be resolved internally, please contact the Office of Care Coordination at CoordinatedEntry@ceo.oc.gov.
- For grievances with CES Access Points, unrelated to their services as Access Point, communication should be directed to the appropriate Access Point for resolution.
- For grievances with shelter and housing programs grievances should be directed to the appropriate shelter or housing provider for resolution.

- To file a discrimination grievance, contact the Department of Housing and Urban Development through the online portal: https://www.hud.gov/program_offices/fair_housing_equal_opp/online-complaint

XII. Evaluation

CES will be regularly evaluated to analyze effectiveness and to identify areas for improvement. System performance metrics will be examined semi-annually, at minimum, to monitor adherence to system benchmarks. Length of time on priority list, placement rates, and returns to homelessness are sample metrics that will be used to understand system capacity and determine where additional resources are needed.

In addition, feedback will be solicited from CES households and participating agencies through feedback surveys and focus groups. Participating agencies will be surveyed at least annually and focus group feedback opportunities will also be provided annually to solicit consumer feedback. Annually, all households who utilize CES will be offered the chance to complete a feedback survey and/or participate in focus group feedback sessions held at geographically dispersed locations. The focus groups and surveys will cover all domains of the coordinated entry process, including intake, assessment and referral, and will be used to gauge household and agency perception of system quality and effectiveness.

The County of Orange, as the lead CES agency, will collect household and agency evaluations and analyze system performance. The information collected will be used to recommend updates to CES, in consultation with a committee of relevant stakeholders. This committee will meet at least annually to adopt and implement system changes.

For the purpose of the evaluation, data analyzed will be de-identified, and feedback will not require a name or other identifiable information. This will be used to ensure household and participating agency privacy during the evaluation process.

XIII. Attachments

A. Attachment A

Chronic Homelessness Definition

HUD published the Defining Chronically Homeless Final Rule clarifying the definition of chronic homelessness. The definition of chronically homeless is:

- A homeless individual with a disability as defined in section 401(9) of the McKinney-Vento Assistance Act (42 U.S.C. 11360(9)), who:
  - Lives in a place not meant for human habitation, a safe haven, or in an emergency shelter, and
  - Has been homeless and living as described for at least 12 months* or on at least 4 separate occasions in the last 3 years, as long as the combined occasions equal at least 12 months and each break in homelessness separating the occasions included at least 7 consecutive nights of not living as described.
- An individual who has been residing in an institutional care facility, including jail, substance abuse or mental health treatment facility, hospital, or other similar facility, for fewer than 90 days and met all of the criteria of this definition before entering that facility**; or
- A family with an adult head of household (or, if there is no adult in the family, a minor head of household) who meets all of the criteria of this definition, including a family whose composition has fluctuated while the head of household has been homeless.

*A “break” in homeless is considered to be 7 or more nights.

**An individual residing in an institutional care facility for less than 90 days does not constitute a break in homelessness.

Homeless Definition

Information on the definition of homeless can be found on HUD Exchange at https://www.hudexchange.info/resource/1928/hearth-defining-homeless-final-rule/ and is summarized below. The following four homeless categories are eligible to participate in CES.

Category 1. Literally Homeless

Individual or family who lacks a fixed, regular, and adequate nighttime residence, meaning:

- Has a primary nighttime residence that is a public or private place not meant for human habitation;
- Is living in a publicly or privately operated shelter designated to provide temporary living arrangements (including congregate shelters, transitional housing, and hotels and motels paid for by charitable organizations or by federal, state and local government programs); or
- Is exiting an institution where (s)he has resided for 90 days or less and who resided in an emergency shelter or place not meant for human habitation immediately before entering that institution

Category 2. Imminent Risk of Homelessness

Individual or family who will imminently lose their primary nighttime residence, provided that:

- Residence will be lost within 14 days of the date of application for homeless assistance;
- No subsequent residence has been identified; and
- The individual or family lacks the resources or support networks needed to obtain other permanent housing

Category 3. Homeless under other Federal statutes

Unaccompanied youth under 25 years of age, or families with children and youth, who do not otherwise qualify as homeless under this definition, but who:

- Are defined as homeless under the other listed federal statutes;
- Have not had a lease, ownership interest, or occupancy agreement in permanent housing during the 60 days prior to the homeless assistance application;
- Have experienced persistent instability as measured by two moves or more during in the preceding 60 days; and
- Can be expected to continue in such status for an extended period of time due to special needs or barriers

Category 4. Fleeing/Attempting to Flee Domestic Violence

Any individual or family who:

- Is fleeing, or is attempting to flee, domestic violence;
- Has no other residence; and
- Lacks the resources or support networks to obtain other permanent housing

At Risk of Homelessness Definition

Information on the definition of at risk of homelessness can be found on HUD Exchange at https://www.hudexchange.info/resource/1927/hearth-esg-program-and-consolidated-planconforming-amendments/ and is summarized below. The following three at risk of homelessness categories are eligible to participate in CES.

Category 1. Individuals and Families

An individual or family who:

- Has an annual income below 30% of median family income for the area; and
- Does not have sufficient resources or support networks immediately available to prevent them from moving to an emergency shelter or another place defined in Category 1 of the “homeless” definition; and
- Meets one of the following conditions:
    - Has moved because of economic reasons 2 or more times during the 60 days immediately proceeding the application for assistance; or

- Is living in the home of another because of economic hardship; or
- Has been notified that their right to occupy their current housing or living situation will be terminated within 21 days after the date of application for assistance; or
- Lives in a hotel or motel and the cost is not paid for by a charitable organization or by Federal, State, or local government programs for low-income individuals; or
- Lives in an SRO or efficiency apartment unit in which there reside more than 2 persons or lives in a larger housing unit in which there reside more than one and a half persons per room; or
- Is exiting a publicly funded institution or system of care; or
- Otherwise lives in housing that has characteristics associated with instability and an increased risk of homelessness, as identified in the recipient's approved Con Plan.

Category 2. Unaccompanied Children and Youth

A child or youth who does not qualify as homeless under the homeless definition but qualifies as homeless under another Federal statute.

Category 3. Families with Children and Youth

An unaccompanied youth who does not qualify as homeless under the homeless definition but qualifies as homeless under section 725(2) of the McKinney-Vento Homeless Assistance Act, and the parent(s) or guardian(s) or that child or youth if living with him or her.