

Coordinated Entry and Assessment-Based Housing Referral System (CEA-BHRS)

Policies and Procedures Manual

Philadelphia Continuum of Care
PA-500

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Coordinated entry is a consistent, streamlined process for accessing the resources available in the homeless crisis response system. Through coordinated entry, a CoC ensures that the highest need, most vulnerable households in the community are prioritized for services and that the housing and supportive services in the system are used as efficiently and effectively as possible.

(U.S. DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT)

TABLE OF CONTENTS

I. Overview.....	6
A. Background and Purpose	6
B. Vision.....	6
C. Guiding Principles	7
D. Scope.....	7
E. Goals	7
II. Management, Oversight, and Evaluation.....	8
A. Managing Entity	8
B. CoC CEA-BHRS Subcommittee	8
C. Grievances.....	8
D. Continuous Improvement and Evaluation.....	9
III. Participation Requirements.....	11
IV. Eligibility	12
A. At-Risk of Homelessness	12
B. Homeless Definition Categories.....	13
V. Non-Discrimination	15
A. Reporting Nondiscrimination Violations.....	16
VI. Accessibility	17
A. Communication with People with Disabilities	17
B. Language Access Plan	17
VII. Safety Planning.....	18
VIII. Marketing and Community Education	19
IX. Core Elements	20
A. Access.....	20
B. Assessment	21
C. Prioritization	27
D. Referral	32
X. Data Management.....	37
A. Data Management Systems	37
B. Privacy Protections	37
XI. Approval of the Policies and Procedures Manual	38
XII. Appendices	39

A. HUD At Risk of Homelessness Definition Categories	40
B. HUD Homeless Definition Categories	42
C. Homeless Assistance Services available through CEA-BHRS	44
D. Philadelphia Continuum of Care Nondiscrimination Policy	46
E. Order of Priority for Obtaining Evidence Verifying Literal Homeless Status	57
F. Process To Connect Households Staying At Women Against Abuse Shelter to CEA-BHRS	58
G. Common Terms, Acronyms, and Definitions	59
H. References and Resources	61
XIII. Forms	62
A. Program Participant Grievance Form	63
B. Nondiscrimination Violation Report Form	64
C. Disability Accommodation for the CEA-BHRS Housing Assessment Process	65
D. Documentation of Chronic Homeless Status Checklist	66
E. Written Third Party Verification of Homeless Status	68
F. Self-Certification of Homeless and Housing Status Form	71
G. Third Party Verification of Institutional Stays Form	73
H. Verification of Disability Form	75

I. OVERVIEW

A. BACKGROUND AND PURPOSE

The U.S. Department of Housing and Urban Development (HUD) requires that Continuums of Care (CoC) establish and operate a coordinated entry process—and that recipients of CoC Program and Emergency Solutions Grants (ESG) program funding within the CoC’s area must use that coordinated entry process.

This manual describes Philadelphia’s coordinated entry system (known as Coordinated Entry and Assessment-Based Housing Referral System (CEA-BHRS (pronounced “sea-breeze”)) policies and procedures, which meets HUD’s coordinated entry requirements as described in the following documents:

- [HUD Coordinated Entry Notice CPD-17-01 – Notice Establishing Additional Requirements for a Continuum of Care Centralized or Coordinated Assessment System](#)
- [CoC Program interim rule: 24 CFR 578.7\(a\)\(8\)](#)
- [ESG interim rule: 24 CFR 576.400\(d\)](#)
- [HUD Equal Access rule: 24 CFR 5.201\(a\)\(2\) and 5.106\(b\)](#)

Philadelphia’s Coordinated Entry and Assessment-Based Housing Referral System (CEA-BHRS) is a process designed to coordinate program participant access, assessment, and referrals to homeless assistance services and housing. CEA-BHRS shifts the focus from a strategy that says “Should we accept this household into our program?” to one that says “What housing /service assistance is best for each household and quickly ends their housing crisis permanently?”

The purpose of CEA-BHRS includes the following:

- Increase efficiency of the homeless assistance system
- Improve fairness and ease of access to resources
- Streamline and standardize processes to obtain housing assistance
- Prioritize those who are in most need of assistance
- Provide information about service needs and gaps to help strategically allocate current resources and identify need for additional resources

B. VISION

Philadelphia's Coordinated Entry and Assessment-Based Housing Referral System (CEA-BHRS) will ensure individuals and families at-risk of or experiencing homelessness have access to a streamlined and standardized process that links households to appropriate resources to end their housing crisis.

C. GUIDING PRINCIPLES

Philadelphia's CEA-BHRS processes are grounded in the following guiding principles:

- **Housing First**¹ – households at-risk of or experiencing homelessness are housed quickly without preconditions or service participation requirements
- **Housing Focused** – assistance provided to households at-risk of or experiencing homelessness is focused on moving to and maintaining permanent housing
- **Person-Centered** – a trauma-informed approach that is dignified, safe, and incorporates participant choice is utilized
- **Prioritization** – assistance is prioritized based on vulnerability and severity of service needs to ensure households needing help the most receive it in a timely manner

D. SCOPE

Projects included in Philadelphia's Housing Inventory Count (HIC) will be phased into CEA-BHRS in the following order:

- Phase I: Continuum of Care (CoC), Emergency Solutions Grant (ESG), and Office of Homeless Services funded homeless assistance housing programs (these projects are required to participate in CEA-BHRS)
- Phase II: Other publicly and privately funded homeless assistance housing programs

Affordable housing and mainstream resources will participate as possible over time.

E. GOALS

- Assistance is allocated effectively and households are linked to the most appropriate intervention strategy
- Reduction in number of households experiencing homelessness

¹ Housing First is a proven approach, applicable across all elements of systems for ending homelessness, in which people experiencing homelessness are connected to permanent housing swiftly and with few to no treatment preconditions, behavioral contingencies, or other barriers. It is based on overwhelming evidence that people experiencing homelessness can achieve stability in permanent housing if provided with the appropriate level of services. (USICH Housing First Checklist, 2016)

- Reduced length of time a households experiences homelessness
- Reduced returns to homelessness (recidivism)

II. MANAGEMENT, OVERSIGHT, AND EVALUATION

A. MANAGING ENTITY

The City of Philadelphia Office of Homeless Services is the Managing Entity is responsible for the day-to-day operations and oversight of CEA-BHRS. Responsibilities include, but are not limited to, the following:

- Designing and delivering training at least annually to all key stakeholders
- Leading evaluation to ensure CEA-BHRS is operating as intended, including designing and implementing ongoing quality control activities to ensure transparency and consistency throughout the CEA-BHRS process
- Managing case conferences to review and resolve program denials, participant refusals, and flag review of vulnerability score
- Managing grievance process and discrimination complaints
- Managing referral process
- Updating policies and procedures

B. COC CEA-BHRS SUBCOMMITTEE

The CoC CEA-BHRS Subcommittee is responsible for the following:

- Assisting the Managing Entity with evaluating CEA-BHRS
- Advising the Managing Entity on adjustments to the CEA-BHRS process based on evaluation information
- Approving policy and procedure recommendations to improve the efficiency and effectiveness of CEA-BHRS

C. GRIEVANCES

1. Program Participant Grievances

Program participant grievances and concerns should be resolved promptly and fairly. Organizations are to inform all program participants of the following process for filing a grievance or concern.

Organizations are prohibited from interfering with, coercing, or retaliating against any program participant who chooses to file a complaint.

Program participants have the right to be assisted by an advocate of his/her choice (e.g., agency, staff person, co-worker, friend, family member, etc.) with filing a grievance and at any point during the grievance process. Program participants have the right to withdraw his/her grievance at any time.

Depending on the nature of the concern or grievance, the CEA-BHRS Managing Entity will respond to grievances in the following manner:

- **Housing Program Grievance:** Grievances about the experience(s) with housing programs will be redirected back to the program to follow the grievance policies and procedures of that organization. Organizations are to maintain internal documentation of all complaints received. This information should not be sent the Office of Homeless Services unless requested, either by the program participant or by OHS. These procedures are in addition to, not in lieu of, the non-discrimination policies of the Philadelphia Continuum of Care. If the program participant does not believe the program has adequately addressed their complaint, s/he can call the OHS Comment Line at 215-686-4700.
- **CEA-BHRS Grievances:** Grievances about CEA-BHRS policies and procedures should be directed to the Office of Homeless Services either in writing or by phone. Program participants can call the OHS Comment Line at 215-686-4700 or submit a letter or the [CEA-BHRS Program Participant Grievance Form](#) to the Office of Homeless Services. The Office of Homeless Services will acknowledge the receipt of the grievance within two (2) business days and respond in writing within ten (10) business days

2. Provider Grievances

Grievances about CEA-BHRS policies and procedures, and/or grievances regarding non-compliance with policies and procedures by either the Office of Homeless Services or another provider should be directed to the Office of Homeless Services in writing. The Office of Homeless Services will acknowledge the receipt of the grievance within two (2) business days and respond in writing within ten (10) business days.

D. CONTINUOUS IMPROVEMENT AND EVALUATION

Implementation of the CEA-BHRS process requires significant, community-wide change. To ensure CEA-BHRS is effective for both households experiencing homelessness and homeless assistance providers, adjustments to the policies and processes described in this manual are anticipated. To inform those adjustments, CEA-BHRS is evaluated at least annually.

*“Coordinated entry is an evolving practice. New research, models, and assessment tools are continually being created. A CoC’s coordinated entry process must be flexible and responsive to new information about more effective approaches.”
(Coordinated Entry Core Elements, p. 12)*

The purpose of CEA-BHRS evaluation is to identify opportunities to improve the processes and policies. The Office of Homeless Services' Planning, Policy, and Performance Division is responsible for leading the evaluation process with assistance from the CoC CEA-BHRS Subcommittee. Responsibilities include, but are not limited to, the following:

- Ensuring the CEA-BHRS process is updated as necessary to maintain compliance with all Federal requirements
- Ensuring CEA-BHRS is functioning as intended
- Ensuring evaluation and adjustment processes are informed by a broad group of stakeholders, including participating projects and households
- Ensuring solicitations for feedback address the quality and effectiveness of the entire CEA-BHRS experience for both participating projects and households

Evaluation data is collected by directly surveying CEA-BHRS stakeholders and through the collection of aggregate data from HMIS. The Office of Homeless Services ensures adequate privacy protections of all participant information collected in the course of the annual CEA-BHRS evaluation.

CEA-BHRS annual evaluation reports will be given to stakeholders.

III. PARTICIPATION REQUIREMENTS

All projects receiving funding from the Continuum of Care (CoC) Program, Emergency Solutions Grant (ESG) Program, or the City of Philadelphia Office of Homeless Services (OHS) are required to participate in CEA-BHRS. Responsibilities of projects participating in CEA-BHRS include the following:

- Low Barrier – Admission to projects is not contingent on pre-requisites such as abstinence of substances², minimum income requirements, health or mental health history, medication adherence, age, criminal justice history, financial history, completion of treatment, participation in services, “housing readiness”, history or occurrence of victimization, survivor of sexual assault or an affiliated person of such a survivor or other unnecessary conditions *unless required by law or funding source*. (Housing First Assessment Tool, 2017)
- Housing Inventory Maintenance – In order for the CEA-BHRS referral process to match eligible households to housing, the housing inventory information must be kept up to date. Each provider must submit eligibility information for their housing projects and notify OHS of any changes that impact eligibility and referrals through CEA-BHRS.
- Submit upcoming housing vacancies to the Office of Homeless Services
- Only fill housing program vacancies through the CEA-BHRS referral process

² Per HUD’s Recovery Housing Policy Brief, where a person experiencing homelessness with a substance use disorder indicates that their preference is to live in a community that uses a peer community to support sobriety, *Recovery Housing* is an appropriate option. For example, while a *Recovery Housing* program is otherwise low barrier, programs can limit entry to persons who are not currently using drugs or alcohol and are committed to living in a housing setting with peers who are committed to abstinence and have chosen the program and its design. The key is that the program participant has sought out this type of program as their preferred choice for supporting their personal commitment to their sobriety and holistic recovery. (Recovery Housing Policy Brief, 2015, p. 7)

IV. ELIGIBILITY

CEA-BHRS is designed to coordinate and prioritize access to housing and homeless assistance programs for households at risk of or experiencing homelessness. There is no guarantee that the household will meet final eligibility requirements, be referred to a housing resource, or receive a referral to a particular housing option, nor does it ensure availability of resources for all eligible households.

Any household in Philadelphia that meets one of the following At Risk of Homelessness or Homeless definition categories (as defined by HUD) is eligible to access resources through the CEA-BHRS process:

A. AT-RISK OF HOMELESSNESS

Households who meet any of the following definitions may be eligible for homeless prevention resources:

1. At-Risk Category 1 – Individuals and Families: An individual or family who:
 - a. Has an annual income below 30% of median family income for the area; AND
 - b. 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
 - c. Meets one of the following conditions:
 - i. Has moved because of economic reasons two (2) or more times during the 60 days immediately preceding the application for assistance; OR
 - ii. Is living in the home of another because of economic hardship; OR
 - iii. Has been notified that their right to occupy their current housing or living situation will be terminated within 21 days after the dates of application for assistance; OR
 - iv. Lives in a hotel or motel and the cost is not paid for by charitable organizations or by Federal, State, or local government programs for low-income individuals; OR
 - v. 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
 - vi. Is exiting a publicly funded institution or system of care; OR
 - vii. Otherwise lives in housing that has characteristics associated with instability and an increased risk of homelessness
2. At-Risk Category 2 – Unaccompanied Homeless Children and Youth under Other Federal Statutes:
A child or youth who do not qualify as homeless under the homeless definition, but qualifies as

“homeless” under section 387(3) of the Runaway and Homeless Youth Act (42 U.S.C. 5732a(3)), section 637(11) of the Head Start Act (42 U.S.C. 9832(11)), section 41403(6) of the Violence Against Women Act of 1994 (42 U.S.C. 14043e– 2(6)), section 330(h)(5)(A) of the Public Health Service Act (42 U.S.C. 254b(h)(5)(A)), section 3(m) of the Food and Nutrition Act of 2008 (7 U.S.C. 2012(m)), or section 17(b)(15) of the Child Nutrition Act of 1966 (42 U.S.C. 1786(b)(15))

3. At-Risk Category 3 – Homeless Children & Youth under §725(2) of McKinney-Vento: A child or 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 (42 U.S.C. 11434a(2)), and the parent(s) or guardian(s) of that child or youth if living with him or her.

B. HOMELESS DEFINITION CATEGORIES

1. Category 1 – Literally Homeless: An individual or family who lacks a fixed, regular, and adequate nighttime residence, meaning:
 - a. Has a primary nighttime residence that is a public or private place not designated for or ordinarily used as a regular sleeping accommodation for human beings, including a car, park, abandoned building, bus or train station, airport, or camping ground; OR
 - b. Is living in a supervised 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
 - c. Is exiting an institution where he or she 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
2. Category 2 – Imminent Risk of Homelessness: An individual or family who will imminently lose their primary nighttime residence, provided that:
 - a. Residence will be lost within 14 days of the date of application for assistance; AND
 - b. No subsequent residence has been identified; AND
 - c. Household lacks the resources or support networks, e.g, family, friends, faith-based or other social networks needed to obtain other permanent housing
3. 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 Categories 1,2 or 4, but who:
 - a. Are defined as homeless under section 387 of the Runaway and Homeless Youth Act (42 U.S.C. 5732a), section 637 of the Head Start Act (42 U.S.C. 9832), section 41403 of the Violence Against Women Act of 1994 (42 U.S.C. 14043e–2), section 330(h) of the Public Health Service Act (42 U.S.C. 254b(h)), section 3 of the Food and Nutrition Act of 2008 (7

U.S.C. 2012), section 17(b) of the Child Nutrition Act of 1966 (42 U.S.C. 1786(b)), or section 725 of the McKinney-Vento Homeless Assistance Act (42 U.S.C. 11434a); AND

- b. Have not had a lease, ownership interest, or occupancy agreement in permanent housing during the 60 days prior to the homeless assistance application; AND
 - c. Have experienced persistent instability as measured by two (2) moves or more during the preceding 60 days of applying for homeless assistance; AND
 - d. Can be expected to continue in such status for an extended period of time because of:
 - Chronic disabilities,
 - Chronic physical health or mental health conditions,
 - Substance addiction,
 - Histories of domestic violence or childhood abuse (including neglect),
 - The presence of a child or youth with a disability, OR
 - Two (2) or more barriers to employment, which include:
 - Lack of a high school degree or GED,
 - Illiteracy,
 - Low English proficiency,
 - A history of incarceration or detention for criminal activity,
 - A history of unstable employment
4. Category 4 – Fleeing or attempting to flee domestic violence: Any individual or family who:
- a. Is fleeing, or is attempting to flee, domestic violence, dating violence, sexual assault, stalking, or other dangerous or life-threatening conditions that relate to violence against the individual or family member³, including a child, that has either taken place within the individual's or family's primary nighttime residence or has made the individual or family afraid to return to their primary residence; AND
 - b. Has no other residence; AND
 - c. Lacks the resources or support networks, e.g., family, friends, and faith-based or other social networks, to obtain other permanent housing

Documentation required to verify a household meets one of the above definitions is listed in [Appendix A](#) and [Appendix B](#).

³ HUD considers human trafficking, including sex trafficking, to be "other dangerous or life-threatening conditions that relate to violence against the individual or family member"

Assuring the contractual eligibility for housing is the responsibility of the housing and/or service provider, in accordance with the program's funding sources.

V. NON-DISCRIMINATION

Philadelphia's Coordinated Entry and Assessment-Based Housing Referral System process is available to all eligible persons regardless of race, color, national origin, religion, sex, age, familial status, disability, actual or perceived sexual orientation, gender identify, or marital status.

All eligible populations and subpopulations in Philadelphia, including people experiencing chronic homelessness, veterans, families with children, youth, and survivors of domestic violence, have fair and equal access to the coordinated entry process.

The CEA-BHRS process is prohibited from screening people out of the coordinated entry process due to perceived barriers to housing or services, including, but not limited to, too little or no income, active or a history of substance abuse, domestic violence history, resistance to receiving services, the type or extent of a disability-related services or supports that are needed, history of evictions or poor credit, lease violations or history of not being a leaseholder, or criminal record.

The CEA-BHRS referral process is informed by Federal, State, and local Fair Housing laws and regulations and ensures participants are not "steered" toward any particular housing facility or neighborhood because of race, color, national origin, religion, sex, disability, or the presence of children.

Data collected from the CEA-BHRS assessment process is not used to discriminate or prioritize households for housing and services on a protected basis, such as race, color, religion, national origin, sex, age, familial status, disability, actual or perceived sexual orientation, gender identity or marital status.

All recipients and sub-recipients of CoC Program and ESG Program funding must comply with the nondiscrimination and equal opportunity provisions of Federal civil rights laws as specified at 24 C.F.R. 5.105(a), including, but not limited to the following:

- **Fair Housing Act** prohibits discriminatory housing practices based on race, color, religion, sex, national origin, disability, or familial status;
- **Section 504 of the Rehabilitation Act** prohibits discrimination on the basis of disability under any program or activity receiving Federal financial assistance;
- **Title VI of the Civil Rights Act** prohibits discrimination on the basis of race, color, or national origin under any program activity receiving Federal financial assistance;
- **Title II of the Americans with Disabilities Act** prohibits public entities, which includes state and local governments, and special purpose districts, from discriminating against individuals with disabilities in all their services, programs, and activities, which include housing, and housing-

related services such as housing search and referral assistance. Title III of the Americans with Disabilities Act prohibits private entities that own, lease, and operate places of public accommodation, which include shelters, social service establishments, and other public accommodations providing housing, from discriminating on the basis of disability; and

- **HUD's Equal Access Rule** at 24 CFR 5.105(a)(2) prohibits discriminatory eligibility determinations in HUD-assisted or HUD-insured housing programs based on actual or perceived sexual orientation, gender identity, or marital status, including any projects funded by the CoC Program and ESG Program. The CoC Program interim rule also contains a fair housing provision at 24 CFR 578.93. For ESG, see 24 CFR 576.407(a) and (b). e

All housing projects must comply with the Philadelphia Continuum of Care Nondiscrimination Policy found in [Appendix D](#) and [the Philadelphia Code, Chapter 9-1100: Fair Practices Ordinance: Protections Against Unlawful Discrimination](#).

A. REPORTING NONDISCRIMINATION VIOLATIONS

Program participants are encouraged to promptly report any incidences of discrimination. Depending on the nature of the incident, the CEA-BHRS Managing Entity will respond to reports in the following manner:

- **Housing Program Violation:** Initially, reporters should contact administrators of the specific program demonstrating non-compliance with the [Philadelphia Continuum of Care Nondiscrimination Policy found in Appendix D](#), except in cases where retaliation is feared. If the concern is not resolved after administrators are involved, reporters may contact OHS Monitoring and Compliance analysts by submitting the [Nondiscrimination Violation Report Form](#) or calling the Office of Homeless Services Comment Line at 215-686-4700. Persons wishing to submit the reporting form in person may do so at one of the OHS Homeless Crisis Response Centers: Appletree at 1430 Cherry Street or Roosevelt Darby at 802 N. Broad Street. More detailed information regarding this process is outlined in [Appendix D](#).
- **CEA-BHRS Process Violation:** Reports about CEA-BHRS nondiscrimination violations should be directed to the Office of Homeless Services either in writing or by phone. Program participants can call the OHS Comment Line at 215-686-4700 or submit the [Nondiscrimination Violation Report Form](#) to the Office of Homeless Services. The Office of Homeless Services will acknowledge the receipt of the grievance within two (2) business days and respond in writing within ten (10) business days.

VI. ACCESSIBILITY

All CEA-BHRS access points must be accessible to individuals with disabilities, including accessible physical locations for individuals who use wheelchairs, as well as people in Philadelphia who are least likely to access homeless assistance

A. COMMUNICATION WITH PEOPLE WITH DISABILITIES

Under Title II of the Americans with Disabilities Act recipients of Federal funds must provide the auxiliary aids and services to individuals with disabilities when necessary to ensure effective communication. Organizations may not charge a fee to cover the costs of auxiliary aids and services designed to provide effective communication.

All documents must be made available in an alternate, accessible format to people who are blind or visually impaired upon request. Types of alternate formats include large print, audio, readers, and Braille. In many cases, people who are blind or visually impaired may simply require assistance to read or fill out a form or document. Such assistance should be provided upon request. If the document is lengthy or of a personal nature, providing the form or document in an alternate format may be more appropriate. People with low vision may require materials in large print, which is defined as 18 point font size or larger. It may be possible to accommodate such requests by enlarging a document on a photocopier, or reprinting materials from a computer in the larger font size.

All information provided orally must be made available in an alternate, accessible format to people who are deaf or hard of hearing upon request. Types of alternate formats include written materials, sign language interpretation, assistive listening devices and captioning services. Some people who are deaf or hard of hearing are able to read lips. This method should only be used for very brief encounters and only if the individual who is deaf or hard of hearing indicates that this method is effective. In some cases, people who are deaf or hard of hearing may request communication which is typically conducted verbally be conducted in writing instead. Such an accommodation should be provided upon request and is usually appropriate for brief and/or casual exchanges. Please keep in mind that not all people who are deaf are able to read written English.

B. LANGUAGE ACCESS PLAN

All CEA-BHRS access points follow the [Office of Homeless Services' Language Access Plan and Protocol](#) when providing services to, or interacting with, individuals who have limited English proficiency (LEP). Interpretation and translation services are provided at no cost to persons who have limited English proficiency.

If interpretation services are needed, access points have the following responsibilities:

- Provide language appropriate services
- Identify and record language needs

- Discourage the use of informal interpreters such as family, friends of the person seeking services, or others seeking services
- Prohibit minor children from acting as interpreters
- No staff may suggest or require that an LEP customer provide an interpreter in order to receive services.

The preferred methods of serving individuals who have limited English proficiency include the following:

- Using competent bilingual staff able to provide services directly to individual seeking assistance in his/her primary language without the need for an interpreter
- Available, trained, competent bilingual staff may be used for in-person or telephone interpreting to support other staff
- Staff should seek assistance from professional in-person or telephonic interpreters when staff cannot meet language needs
- Certain circumstances may require specialized interpretation and translation services even when staff with bilingual abilities are available (for example, situations concerning HIPAA, confidentiality or anything that may have a legal implication). Staff must be authorized to provide language services to communicate effectively even when such assistance is not requested by the person who has limited English proficiency

VII. SAFETY PLANNING

All households presenting at a CEA-BHRS Access Point complete a safety screening. When a household is identified as fleeing, or is attempting to flee, domestic violence, dating violence, sexual assault, stalking, or other dangerous or life-threatening conditions that relate to violence against the individual or family member, an offer to speak with a domestic violence specialist (either in person at Appletree Family Center or via the Domestic Violence hotline) is made to the household. The specialist screens for lethality and may connect the household to a domestic violence shelter. If the domestic violence specialist determines the household seeking domestic violence specific services is either not eligible for or cannot be accommodated by a domestic violence shelter, the Access Point will continue with the assessment and referral procedures described in this manual.

If the household does not wish to seek domestic violence specific resources, the household has full access to the CEA-BHRS process in accordance with all policies and procedures described in this manual. Information on domestic violence resources will be given to the household whether or not they decide to speak with a domestic violence specialist.

When a household is placed in a domestic violence shelter, the household is able to access the CEA-BHRS process in a safe and confidential manner as outlined in [Appendix F: Process To Connect Households Staying At Women Against Abuse Shelter to CEA-BHRS](#).

VIII. MARKETING AND COMMUNITY EDUCATION

CoC affirmatively markets housing and supportive services to eligible persons regardless of race, color, national origin, religion, sex, age, familial status, handicap or who are least likely to apply in the absence of special outreach. CEA-BHRS will be advertised through a variety of methods to ensure it is accessible to individuals and families with the highest barriers to accessing assistance, including but not limited to the following:

- Placing information about CEA-BHRS and how to access assistance on OHS website and sharing through social media and email communications
- Educate 311 and 211 systems on how to connect callers in need of homeless assistance to the coordinated entry process
- Ensuring that Street Outreach Teams have information on CEA-BHRS and communicate how to access housing through the coordinated entry process
- Provide Philadelphia's Federally Qualified Health Centers with information on coordinated entry process and with informational materials to distribute to patients needing homeless assistance
- Targeted marketing outreach to organizations who serve people with disabilities and persons with limited English proficiency
- Targeted communication and information to homeless assistance services not receiving funds from the City of Philadelphia, CoC, or ESG on how to connect those they are serving to the coordinated entry process
- Share information about CEA-BHRS through already-implemented Text to Share system through the link shared with users
- Sharing information with churches and schools in areas of highly-concentrated populations experiencing homelessness
- Posted information and advertisements at SEPTA stations in areas of highly-concentrated populations experiencing homelessness

IX. CORE ELEMENTS

A. ACCESS

1. Access Points

Households who are at risk of homelessness are able to access prevention resources at the Appletree Housing Crisis Response Center. Philadelphia has multiple access points available to households experiencing homelessness. The specific populations served by each access point are outlined in the below table:

	Appletree Housing Crisis Response Center 1430 Cherry St.	Roosevelt Darby Housing Crisis Response Center 802 N Broad St.	The Attic Youth Center 255 South 16 th St.	Valley Youth House 1500 Sansom St
Households At Risk of Homelessness (Prevention Resources)	✓			
Households <u>WITH</u> Children under age 18	✓			
Households <u>WITHOUT</u> Children under age 18	✓	✓		
Unaccompanied Youth ages 18-24 <u>WITH</u> Children under age 18	✓		✓	✓
Unaccompanied Youth ages 18-24 <u>WITHOUT</u> Children under age 18	✓	✓	✓	✓

2. Street Outreach

All persons living in an unsheltered location and encountered by street outreach workers are offered the same standardized process as persons who access CEA-BHRS through site-based access points. In order to facilitate placement on the Prioritized By-Name List, street outreach teams are trained in administering the VI-SPDAT for the persons assigned to their respective focus lists. Additionally, Mobile Assessors will be hired to connect those living in an unsheltered location to the CEA-BHRS process.

3. Emergency Services

The CEA-BHRS process allows emergency services, including all domestic violence and emergency services hotlines, drop-in service programs, and emergency shelters, including domestic violence shelters and other short-term crisis residential programs, to operate with as few barriers to entry as possible.

Households are able to access emergency shelter funded by the Office of Homeless Services through the CEA-BHRS Access Points. If a household is in need of emergency shelter during hours Access Points are not operating, they are able to access those services through after-hours sites.

Households fleeing or attempting to flee domestic violence can call the citywide, 24-hour Philadelphia Domestic Violence Hotline (1-866-723-3014) anytime for crisis intervention, safety planning, resources, and referrals. All calls are free, confidential, and anonymous.

B. ASSESSMENT

In order to achieve fair, equitable, and equal access to homeless housing and services within Philadelphia, CEA-BHRS utilizes standardized assessment tools and applies a consistent assessment process. CEA-BHRS also utilizes a Housing First oriented assessment process which is focused on rapidly housing participants without preconditions.

Participants have the autonomy to freely refuse to answer assessment questions and to refuse housing and service options without retribution or limiting their access to assistance.

The assessment process does not require disclosure of specific disabilities or diagnosis. Specific disability information may only be obtained for purposes of determining program eligibility to make appropriate referrals.

To the maximum extent possible, assessment locations must be made safe and confidential to allow for individuals to disclose sensitive information or safety issues in a private and secure setting.

1. Housing Assessors

Housing Assessors are staff located at Access Points and City-funded emergency shelter and safe haven programs. Housing Assessors' responsibilities include exploring resources other than homeless housing programs, and administering housing assessment tools and documenting the household's responses in HMIS.

2. Assessor Training

The purpose of assessor training is to provide all staff administering assessments with access to materials that clearly describe how assessments are to be conducted with

"In the context of the coordinated entry process, HUD uses the term 'Assessment' to refer to the use of one or more standardized assessment tool(s) to determine a household's current housing situation, housing and service needs, risk of harm, risk of future or continued homelessness, and other adverse outcomes. HUD does not intend that the term be confused with assessments often used in clinical settings to determine psychological or physical health, or for other purposes not related to preventing and ending the homelessness of persons who present to coordinated entry for housing-related assistance." (CPD-17-01, p. 4)

fidelity to the CEA-BHRS policies and procedures. All staff who administer assessments are required to attend training prior to conducting assessments. The CEA-BHRS process training curriculum includes the following topics for staff conducting assessments:

- Review of written CEA-BHRS policies and procedures, including any adopted variations for specific subpopulations;
- Requirements for use of assessment information to determine prioritization; and
- Criteria for uniform decision-making and referrals.

At a minimum, training opportunities are provided at least once annually to organizations and/or staff persons at organizations that serve as access points or administer assessments. The Office of Homeless Services updates and distributes training protocols at least annually.

3. Assessment Process

Philadelphia uses a phased assessment approach and each phase only includes questions needed to refer a household at that point. This allows for stabilization in emergency housing or safe haven before a more intensive assessment of housing needs and eligibility is conducted. The assessments build on each other to limit the number of times people have to repeat their stories as much as possible.

a) Assessment Phases and Information Collected

The CEA-BHRS phased approach to assessment segments the collection of participant information into the following stages:

- Phase I: Screening and Triage – The Screening and Triage assessment occurs at Access Points and collects the following information:
 - Basic demographics to create an HMIS record;
 - Safety Screening
 - Prevention/Diversion Screening to assess if there are resources or options that can be used to avoid entering the homeless assistance system
 - If a household cannot be prevented/diverted from entering the homeless assistance system, the Crisis Services Intake assessment collects the information necessary to place a household in a emergency shelter (i.e. Meghan’s Law, accessibility needs, unsafe areas, pets)
- Phase II: Prioritization, Eligibility, and Housing Needs/Preferences* – The Prioritization, Eligibility, and Housing Needs/Preferences, assessment occurs once a household is stabilized in a safe haven or emergency shelter and collects the following information:

- Severity of service needs (VI-SPDAT)
- Program/project eligibility screening
- Housing Needs/Preferences

***Please Note:** Households staying in an emergency shelter that does not receive referrals from a CEA-BHRS Access Point, or is not funded by the Department of Behavioral Health or the Office of Homeless Services will need to present at an Access Point to complete the CEA-BHRS Assessment Process.

(1) When to Administer Phase II

If the household's current living situation – the place where they slept last night – is the following...

A place not meant for human habitation, including a car, park, on the street, train/bus station, airport, abandoned building, etc

Conduct Phase II as soon as possible

In a hospital, rehab facility, or other institution *and* was homeless prior to entry, and institution stay was less than 90 days

Conduct Phase II

In safe haven or emergency shelter*

Wait 1 week after entry into the program; conduct during case management meeting, not during program intake

With family or friends, in a place meant for human habitation

DO NOT CONDUCT Phase II

Being evicted or facing foreclosure, but is not literally homeless today

DO NOT CONDUCT Phase II

***Please Note:** For safe havens and emergency shelters funded by the Department of Behavioral Health (including Journey of Hope programs), assessors should use professional judgment to determine the appropriate time to administer Phase II

4. Vulnerability Index – Service Prioritization Decision Assistance Tool (VI-SPDAT)

To determine severity of service needs, all households will be assessed with the Vulnerability Index – Service Prioritization Decision Assistance Tool (VI-SPDAT).

The Vulnerability Index – Service Prioritization Decision Assistance Tool (VI-SPDAT), is a pre-screening, or triage tool used to quickly assess the health and social needs of people experiencing homelessness and help match them with the most appropriate support and housing interventions that are available. Because the VI-SPDAT examines current vulnerability and future housing stability factors, it helps inform the type of support and housing intervention that may be most beneficial for a household experiencing homelessness. It is not intended to provide a comprehensive assessment of each person's needs.

There are three population-specific versions of the VI-SPDAT:

- **VI-SPDAT for Single Adults** should be completed with a single adult who is 25 years of age or older
- **VI-SPDAT for Families** should be completed with households who have at least one child under the age of 18
- **TAY-VI-SPDAT for Youth** should be completed with an individual who is between 18-24 years old and does not have children under the age of 18

Completing the VI-SPDAT does not guarantee a household will be eligible for or admitted into a housing program.

a) Who should be assessed with the VI-SPDAT?

The VI-SPDAT is an assessment of vulnerability for people who are literally homeless, and should only be used for people who are literally homeless and who do not already have a VI-SPDAT in the HMIS system that was conducted in the past year.

b) How to administer the VI-SPDAT

IMPORTANT: The client MUST provide informed consent prior to the VI-SPDAT being completed. The VI-SPDAT cannot be completed without the person's knowledge and explicit agreement. The VI-SPDAT cannot be completed through observation or using known information within your organization.

Prior to completing the VI-SPDAT, interviewers need to share and read the VI-SPDAT Screening and Match Initiation Consent form and request the person's signature (or mark). If an individual does not give consent, you may not administer the VI-SPDAT. Please retain the VI-SPDAT Screening and Match Initiation Consent forms in the client's file.

It is important for assessors to meet with households in an environment that protects privacy and confidentiality.

Assessors are encouraged to enter responses directly into HMIS. If the VI-SPDAT is completed on paper, please enter responses into HMIS within 2 business days.

To ensure fairness to households in need of housing assistance and to ensure that the right resources are utilized for the appropriate households, it is important the survey is conducted and scored consistently.

DO	DON'T
<ul style="list-style-type: none"> • Ensure the client has completed a VI-SPDAT Screening and Match Initiation Consent form prior to conducting the VI – SPDAT • Explain what the survey does. • Provide clarification when/if requested. • Encourage people to be honest. 	<ul style="list-style-type: none"> • Complete a survey without informed consent of the client • Complete the survey by observation • Tell people there is a score (number) • Lead people to believe there is a waiting list • Promise anything as a result of the survey • Change wording or scoring • Change the order of questions

c) VI-SPDAT Messaging

It is important to be clear about the benefits to participating in the survey in order to encourage people to participate, but it is equally important to make sure that individuals understand that participating does not guarantee housing placement.

Introductory Script:

“I am here today to talk to you about your housing and service needs. Participation in this survey is completely voluntary. No one will be upset or angry if you decide not to be interviewed today. If you give me permission, I will ask you questions for about 10 minutes. Your answers may help match you with housing and/or services available. Participation in this screening does not guarantee that you will be eligible for or admitted into a housing program.

Some of the survey questions are personal in nature, but they only require a Yes/No or one-word answer. I really only need that one-word answer. You don't need to give more detail. You can also skip or refuse to answer any question. Skipping multiple questions may make it harder for us to identify services for you, but it is your right to refuse to answer questions you don't feel comfortable with.

If you do not understand a question I can give you clarification, feel free to stop me and ask a question at any time. There are no 'right' or 'wrong' answers, so please be as honest as you can. Honest, accurate answers are important to help us identify the right services for you. In addition, if we are able to refer you to any services based on the information in this survey, that program will still need to verify all eligibility information.

The information is entered into HMIS, which is a secure database that only authorized users can access and may be shared to help match you with the appropriate housing and/or related services available. The information is shared so you don't have to complete the survey multiple times.”

5. Housing Assessment Disability Accommodation

This is a process designed specifically for households with a developmental disability and/or behavioral health need whose disabilities make them unable to participate in the process to consent and then complete the CEA-BHRS assessment process. A housing assessment disability accommodation is an adjustment to the process that allows a person with a disability to complete the CEA-BHRS housing assessment process, be referred to the CEA-BHRS prioritized by-name list, and then receive a housing referral based on prioritization.

1. A Housing Assessor must make at least three in-person attempts to complete the Homeless Management Information System (HMIS) Client Consent form and the VI-SPDAT.
2. Once it is determined that as a result of their disability the household will not be able to complete the HMIS Client Consent Form and/or the VISPDAT, the Housing Assessor should follow the Flag Review Process outlined in [Section IX.C.5](#)

C. PRIORITIZATION

1. Prioritized Services

CEA-BHRS prioritizes the following housing/service interventions for households with more severe service needs and levels of vulnerability:

- Prevention
- Transitional Housing
- Rapid Re-Housing
- Permanent Supportive Housing

City-funded emergency housing vacancies are not prioritized and are subject to availability. However, because of limited capacity access to emergency housing dedicated to those fleeing domestic violence is prioritized using a lethality assessment.

“In the context of the coordinated entry process, HUD uses the term ‘Prioritization’ to refer to the coordinated entry-specific process by which all persons in need of assistance who use coordinated entry are ranked in order of priority...the coordinated entry process must, to the maximum extent feasible, ensure that people with more severe service needs and levels of vulnerability are prioritized for housing and homeless assistance before those with less severe service needs and lower levels of vulnerability.” (CPD-17-01, p. 5)

2. Prioritization Factors

a) Prevention Resources

Diversion from shelter and prevention of homelessness will be explored with every household that presents at an access point. Prioritization factors for prevention resources include the following:

Prioritization Factor	Households <u>WITHOUT</u> Children	Households <u>WITH</u> Children
Head of household between 18-24 years old	✓	✓
Member of household is currently receiving public assistance	✓	✓
Household received an eviction notice (formal or informal) or was asked to leave current residence within the last 90 days	✓	✓
Previously stayed in a shelter	✓	✓
Released from prison, hospital, mental health facility, or substance abuse treatment facility in the past six months	✓	✓

Prioritization Factor	Households <u>WITHOUT</u> Children	Households <u>WITH</u> Children
Member of household has rental or utility arrears	✓	
Household includes a child two years old or younger		✓
Member of household is currently pregnant		✓
Household had or has active case with Dept. of Human Services or had children placed in foster care		✓
Household moved at least once in the past year		✓
Household does not have a lease		✓
Adults in household are not currently employed		✓
Adults in household do not have a high school diploma or GED		✓

b) Transitional Housing, Rapid Re-Housing, and Permanent Supportive Housing

Prioritization Factors for Transitional Housing, Rapid Re-Housing, and Permanent Supportive Housing are the following:

- Severity of service need (VI-SPDAT score)
- Verified chronic homeless status
- Length of time homeless
- Currently living in an unsheltered situation

Housing prioritization is implemented using a “Banding Order”, meaning the households’ VI-SPDAT score is associated with the type of housing resource a household is prioritized for.

CEA-BHRS Band	Family VI-SPDAT Score	Singles VI-SPDAT Score	Youth VI-SPDAT Score	Housing Resource
High	9-22	8-17	8-17	Permanent Supportive Housing
				Rapid Re-Housing (for households that are not eligible for PSH and are not part of a TH target population)
				Transitional Housing (for households that are not eligible for PSH and are part of a TH target population)
Medium	4-8	4-7	4-7	Rapid Re-Housing (for households that not part of a TH target population)
				Transitional Housing (for households that are part of a TH target population)
Low	0-3	0-3	0-3	Not prioritized for a housing resource through CEA-BHRS

3. Order of Priority

Individuals and families are prioritized for housing resources within the associated “band” based on their VI-SPDAT score. When there are multiple individuals or families with the same VI-SPDAT score, the housing unit is then prioritized using the following tie-breakers in the following order:

1. Chronic status, then
2. Length of time homeless, then
3. Current living situation (unsheltered prioritized above sheltered), then
4. Housing Assessment Date (oldest assessment date prioritized first)

For example, if there are two individuals who scored 18, and both are identified as chronically homeless, then the unit is prioritized for the household with the longest cumulative length of time homeless. If both individuals were experiencing homelessness for the same amount of time, then the unit is prioritized for the individual who is currently unsheltered. Lastly, if both are unsheltered, the unit is prioritized for the individual with the oldest assessment date.

The CEA-BHRS Order of Priority is based on the Order of Priority included in HUD’s Prioritization Notice (Notice CPD-16-11: Prioritizing Persons Experiencing Chronic Homelessness and Other Vulnerable Homeless Persons in Permanent Supportive Housing). Permanent Supportive Housing beds dedicated or prioritized for occupancy by persons experiencing chronic homelessness will only receive referrals for households who meet HUD’s definition of chronic homelessness. That means if none of the households who scored 18 meet the definition of chronic homelessness, then the highest prioritized household that scored a 17 and meets the chronic homeless definition will be referred. When there are there are no chronically homeless individuals or families prioritized for PSH, referrals are made following the

prioritization order below for beds not dedicated or prioritized for occupancy by persons experiencing chronic homelessness:

- First Priority – Individuals and families with a disability who has experienced fewer than four occasions of homelessness but where the cumulative time homeless is at least 12 months and has been identified as having severe service needs.
- Second Priority – Individuals and families with a disability experiencing homelessness and has been identified as having severe service needs.
- Third Priority – Homeless individuals and families with a disability coming from places not meant for human habitation, safe haven, or emergency shelter without severe service needs
- Fourth Priority – Homeless individuals and families with a disability coming from transitional housing

4. Prioritized By-Name-List

The prioritization order is managed through the use of a Prioritized By-Name-List, which is generated by HMIS during the prioritization process and serves as the basis of the CEA-BHRS referral process.

5. Flag Review Process

In cases where the assessment tool does not produce the entire body of information necessary to determine a household's prioritization, either because of the nature of self-reporting, withheld information, or circumstances outside the scope of assessment questions, the CEA-BHRS process allows housing assessors to provide additional information through the Flag Review Process. The purpose of this process is to provide a safety net for households where the assessment tool does not accurately reflect the household's vulnerability.

This is not a side door to the prioritization process and Housing Assessors must demonstrate professional judgment in this process. Those who repeatedly refer a large percentage of individuals needing a score review may be subject to additional training and/or other measures.

1. A Housing Assessor sends a request for a Flag Review to the Clearinghouse team. The Assessor certifies that a flag review is needed and a household meets ONE of the following criteria:
 - A severe medical condition is present that meets ONE of the following criteria:
 - Requires a medical device that is used to cure or treat a disease that needs electricity to operate.
 - Medical treatment that requires portable oxygen
 - Terminal illness
 - History of Frostbite, Hypothermia, or Immersion Foot
 - A member of the household is receiving treatment for a life-threatening condition

- A life-threatening medical event has occurred in the last 30 days
 - A severe behavioral health condition that presents barriers to daily functioning and housing that were not captured in the assessment. This includes individuals who are unable to complete the VI-SPDAT due to mental health or another concern. (Housing Assessors should complete and bring the [Disability Accommodation for the CEA-BHRS Housing Assessment Process Form](#) to the Flag Review Panel meeting)
 - Evidence of self-neglect. Observation by the Housing Assessor/case manager/outreach worker is sufficient to meet this condition.
 - Housing Assessors/case manager/outreach worker has knowledge about the household that conflicts with what was self-reported
 - Participant is deaf and/or blind
2. Housing Assessors must provide the following information.
- a. Which VI-SPDAT question/s need review because the current answer does not reflect their knowledge of the household's circumstances or history, and
 - b. Provide information and any available documentation that proves the need for a changed response to the question.

NOTE: If there is no information provided by the Housing Assessor relevant to why a household's triage tool questions should be reviewed then the case will not be discussed.

A Flag Review Panel will be convened on a regular basis with a standing meeting date, time, and location. The Clearinghouse staff will be responsible for scheduling, managing the team, reseating and training Review Panel members when their terms have ended, conducting the Flag Review meetings, and documenting the decisions made at Flag Review Panel meetings.

Flag Review Panelists will consist of a representative from DBH, OHS, and a housing provider representative. Each will serve for 3 months and can be reappointed. DBH and OHS will appoint their Panelists. A solicitation will be sent from the CoC to all ESG and CoC funded projects with a brief application form. In order to serve as a Panelist, the individual must have at least 3 years experience working directly with individuals or families and been trained in the use of the VI-SPDAT. There is no required title or educational degree. The first provider panelist will be selected by the DBH and OHS representatives, and thereafter all 3 panelists will select the provider to serve the next 3-month term. Terms will be staggered, such that the OHS panelist will serve for 5 months, the DBH panelist will serve for 4 months, and the provider representative will serve for 3 months.

The Review Panel will not see the actual names or identifying information of the individuals/families they are reviewing. The only guarantee related to the review panel process is that the case will receive a review. Not all cases will result in a VI-SPDAT score change. In some instances, the review panel may determine that the initial score and position on the Prioritized By-Name List is correct. In other situations, the flag review panel may determine that a higher or lower score is warranted.

D. REFERRAL

The Office of Homeless Services' Supportive Housing Clearinghouse serves as the CEA-BHRS Centralized Referral Entity and manages the process of referring households to available Transitional Housing (TH), Rapid Re-Housing (RRH), and Permanent Supportive Housing (PSH) programs (Receiving Programs).

Referrals are made based on funder required eligibility criteria. In order to ensure only eligible households are referred to each program, Receiving Programs must submit all of their eligibility criteria to the Office of Homeless Services. Eligibility cannot include criteria that screen potential project participants out for assistance based on perceived barriers related to housing or services unless required by a funder.

Receiving Programs are expected to use the CEA-BHRS referral process as the only source from which to consider filling vacancies in housing and/or services.

1. Referral Process

The CEA-BHRS referral process is informed by Federal, State, and local Fair Housing laws and regulations and ensures participants are not “steered” toward any particular housing facility or neighborhood because of race, color, national origin, religion, sex, disability, or the presence of children.

A person-centered approach is utilized and includes a household's ability to express preferences for location, type of housing, and level and type of services. Referrals are informed by those preferences whenever possible. Receiving Programs are expected to provide households with information on the program they are matched to, including entry requirements, services provided, and program expectations of participants.

The Clearinghouse will utilize the prioritized by-name list to identify the next eligible household for an available unit. Once a household is identified, a referral is made to the Receiving Program based on the following:

- Appropriate Match – eligibility criteria for available unit and services match household need and preferences
- Documentation requirements – if a vacancy has documentation requirements that must be satisfied prior to move-in, a household that does not have documents ready will be referred with the expectation that the Referring Program will ensure they are obtained prior to move-in.
 - For CoC and ESG-funded projects, the following documentation is required:
 - Documentation of homeless status (refer to [Order of Priority for Obtaining Evidence Verifying Literal Homeless Status](#) for more information on acceptable documentation).

- For PSH Projects – Third-party documentation of disability (refer to [Verification of Disability Form](#) for more information on acceptable documentation)
- Housing providers are expected to minimize or eliminate any other documentation requirements; a housing provider may maintain them only if they have a non-CoC funding source that requires them, for example:
 - Valid, state-issued photo ID – PHA-subsidized unit, LIHTC-funded unit
 - Proof of birth date (could be photo ID) – PHA-subsidized unit
 - Birth certificate/receipt showing birth certificate applied for – LIHTC-funded unit
- The referring agency is responsible for gathering required documentation prior to move in.
- Documentation is submitted to the Receiving Program, neither to the Clearinghouse nor in HMIS.

Clearinghouse staff will identify one (1) household to match for each program vacancy. Notification to the Receiving Program will include the head of household's HMIS ID and Referral Contact information.

Once a referral is made, the Receiving Program has two (2) business days to acknowledge receipt of the referral.

Receiving Program has ten (10) business days from receipt of referral to conduct an interview with the household.

During the interview, the Receiving Program is expected to provide the household information about the program, including entry requirements, services provided, and program expectations of participants.

The Receiving Program must accept or deny the referral within three (3) days of the interview.

The Receiving Program must communicate the enrollment decision with the household and applicable next steps. At a minimum, an enrollment decision notification includes the following:

- The first available move-in date, if applicable; or
- The reason the household cannot enroll in the program and instructions for appealing the decisions

When a Receiving Program accepts a household, the household has three (3) business days to accept or decline the match.

The Receiving Program must notify the Clearinghouse of the referral outcome:

- Referral Accepted – Household accepts and receiving program accepts match
- Household Declined Referral – Household declined match

- Receiving Program Denied Referral – Receiving program denied match
- Referral Returned – Program is at full capacity or household accepted referral to a different program

2. Unsuccessful Referrals

A referral may be unsuccessful due to a household denying the resource or, in limited circumstances, a receiving program denying the referral. As long as a household meets the definition of homelessness it will maintain its place on the prioritized by-name list until a referral is successful.

a) Household Denial

Eligible households are not limited in the number of referrals they can refuse⁴, but will not be considered for a project that is outside of its vulnerability band. CEA-BHRS will document refusals to better understand why referrals are refused and make changes to the type of referral provided as necessary. If the denial includes an adjustment to their preferences, the Clearinghouse will update the household record and future matches are informed by the update.

The Clearinghouse may recommend case conferencing to discuss a household that has declined three or more housing referrals.

b) Receiving Program Denial

Receiving Programs may only deny a referral made by the Clearinghouse for the following limited reasons:

- Unable to contact household –receiving program has been unable to make contact with household or household’s case manager/navigator to schedule interview appointment for five (5) consecutive business days
- Household ineligible – the referral was made based on the household’s apparent eligibility, but due to overlooked or undisclosed information, the household is not eligible for the program (i.e. additional information was disclosed/discovered impacting program eligibility)
- Household no-show –household missed two (2) interview appointments
- Inappropriate match – household cannot be safely accommodated or cannot meet participant requirements with the supports provided by the program

⁴ Some emergency shelter projects and/or funders may have restrictions on how long a household may remain in the project if a suitable housing option is denied. For the purposes of the CEA-BHRS process, the household will maintain its place on the prioritized by-name list as long as it meets the definition of homelessness

In the rare instances of referral denial, the Receiving Program must document the reason for the decision and communicate to the household the reason for the denial, along with instructions for appealing the decision. All projects participating in CEA-BHRS are required to have project-level appeal procedures in place. Projects must fully comply with their project-level appeals process and must respond to all appeals in writing.

(1) Denial Review Process

CEA-BHRS staff will review explanations of all Receiving Program referral denials and may follow up with the Receiving Program and the denied household in order to understand more fully the circumstances for the denial. If the Receiving Program also receives funds from another City agency, that agency will be consulted to determine if the denial was appropriate.

If a denial is deemed appropriate a new referral will be sent to the Receiving Program. If deemed inappropriate, the Receiving Program must proceed with accepting the referral or file a formal grievance as outlined in the [Provider Grievances](#) policy.

3. Transfer Procedures

There are circumstances which may require a household to transfer from one project to another within the same project type – meaning from one TH project to another TH project, from one RRH project to another RRH project, or from one PSH project to another PSH project; or from a TH or RRH to a PSH project.

a) Types of Transfers

The following are the types of transfer requests allowed through the CEA-BHRS process:

- Imminent safety issue that cannot be addressed within the current project
- Date-Specific Transfer Requests – the following transfer requests have a date associated with the needed transfer:
 - Household is at imminent risk of being evicted from current unit
 - The project is closing
 - Age restrictions of the current project and household is no longer eligible
 - Change in household size – increase or decrease
- Other Transfer Requests
 - Reasonable accommodation needed for that current housing provider cannot provide
 - Change in service need
 - An increase or decrease in the level of supportive services, or a change in the type of supportive services is needed within the same project type that cannot be addressed within the current project
 - Household is currently in TH or RRH and needs PSH

b) Transfer Request Process

Transfer requests are submitted to and handled by the Clearinghouse through HMIS.

Imminent safety requests will be followed up within one (1) business day; all others will be followed up within three (3) business days. Follow up means the requester is contacted and any additional information needed to determine eligibility for a transfer will be gathered. Additional information needed to determine eligibility for a transfer may include documentation verifying a transfer is needed, such as an eviction notice, proof of family reunification,

Decisions on transfer requests will be made within two (2) business days after submission for a safety issue, or within five (5) business days for all other requests.

If a transfer request is denied, next steps regarding housing for the household will be determined by the current housing provider and the household.

If a transfer request is approved, the household will be matched with a vacancy based on the order outlined below in Section IX.D.3.c.

c) Order of Matching Approved Transfer Requests with Vacancies

The ratio of filling vacancies from the Prioritized By-Name List to approved transfer requests is 5 to 1.

Approved imminent safety and date specific transfer requests are not subject to this ratio and will be prioritized over all other households on the Prioritized By-Name List. These requests will be matched with the next available vacancy the household is eligible for in the following order:

1. Approved imminent safety transfer requests: Within this group, households will be ordered according to when the transfer request was submitted. These transfers are contingent upon the availability of the appropriate sized and located unit.

***Because an appropriate sized and located unit may not be immediately available, program participants are encouraged to contact the Philadelphia Domestic Violence Hotline at 1-866-723-3014 for assistance in creating a safety plan. For persons with hearing impairments, the Philadelphia Domestic Violence Hotline can be accessed by calling 215-456-1529 (TTY).**

2. Approved date-specific transfer requests: these transfer requests are matched with the next available vacancy after transfer requests for imminent safety. Within this group, households will be ordered according to the date a new unit is needed (i.e. when housing or custody will be lost, child will move into or out of the household, etc). These transfers are contingent upon the availability of the appropriate sized unit.

When a household with an approved transfer request is matched to a vacancy, the same process as outlined in [Section IX.D.1: Referral Process](#) will be followed.

If a household with an approved transfer request turns down more than two (2) vacancies, the transfer request status will be denied unless the denial is because of safety reasons.

X. DATA MANAGEMENT

A. DATA MANAGEMENT SYSTEMS

Philadelphia uses its Homeless Management Information System (HMIS) as the CEA-BHRS data management system. HMIS is used to collect, store, share, and report participant data associated with the CEA-BHRS process. Additionally, HMIS automates CEA-BHRS processes including prioritization list management, eligibility determination, and referral processes.

B. PRIVACY PROTECTIONS

The data that is collected, stored, and shared through the CEA-BHRS process is often information that is of a highly personal and sensitive nature. The CEA-BHRS process must comply with the Philadelphia CoC HMIS Policies and Procedures and the HMIS Data and Technical Standards prescribed by HUD. All organizations and staff participating in the CEA-BHRS process are expected to adhere to the following privacy protocols:

- All participant information is protected per the HMIS Data and Technical Standards at (CoC Program interim rule) 24 CFR 578.7(a)(8), including but not limited to:
 - No Protected Personal Information (PPI) is sent over email unless it is encrypted; this includes first or last names, date of birth, or social security number
 - Any paper or other hard copy containing PPI, such as assessment forms, consent forms, or identification materials, is secured in a locked cabinet or office
 - Any paper with PPI that is not secured in a locked cabinet or office is shredded
- Participant consent is obtained in order to store and share information for the purposes of assessing and referring participants through the CEA-BHRS process. Verbal or written consent is obtained prior to administering assessments
- Participants are free to decide what information they provide during the CEA-BHRS process
- Participants must not be denied services if the participant refuses to allow their data to be shared unless a Federal statute requires collection, use, storage, and reporting of a participant's Protected Personal Information (PPI) as a condition of program participation.
- HMIS users are informed, understand, and comply with the privacy rules associated with the collection, management, and reporting of client data.

XI. APPROVAL OF THE POLICIES AND PROCEDURES MANUAL

The Philadelphia CoC Board approved the CEA-BHRS Policies and Procedures Manual Version 1.0 on January 11, 2018.

XII. APPENDICES

- Appendix A. [HUD At Risk of Homelessness Definition Categories](#)
- Appendix B. [HUD Homeless Definition Categories](#)
- Appendix C. [Homeless Assistance Services available through CEA-BHRS](#)
- Appendix D. [Philadelphia Continuum of Care Nondiscrimination Policy](#)
- Appendix E. [Order of Priority for Obtaining Evidence Verifying Literal Homeless Status](#)
- Appendix F. [Process To Connect Households Staying At Women Against Abuse Shelter to CEA-BHRS](#)
- Appendix G. [Common Terms, Acronyms, and Definitions](#)
- Appendix H. [References and Resources](#)

A. HUD AT RISK OF HOMELESSNESS DEFINITION CATEGORIES

Category	Definition	Required Documentation
At-Risk Category 1 – Individuals and Families At Risk	<p>An individual or family who:</p> <ol style="list-style-type: none"> Has an annual income below 30% of median family income for the area; <u>AND</u> 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; <u>AND</u> Meets one of the following conditions: <ul style="list-style-type: none"> Has moved because of economic reasons two (2) or more times during the 60 days immediately preceding the application for assistance; <u>OR</u> Is living in the home of another because of economic hardship; <u>OR</u> Has been notified that their right to occupy their current housing or living situation will be terminated within 21 days after the dates of application for assistance; <u>OR</u> Lives in a hotel or motel and the cost is not paid for by charitable organizations or by Federal, State, or local government programs for low-income individuals; <u>OR</u> 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; <u>OR</u> Is exiting a publicly funded institution or system of care; <u>OR</u> Otherwise lives in housing that has characteristics associated with instability and an increased risk of homelessness 	<ol style="list-style-type: none"> Income documentation Self-certification, supported by other documentation when practical such as termination notice, unemployment compensation statement, bank statement, health care/utility bill showing arrears Documenting one of the 7 conditions includes <ol style="list-style-type: none"> Self-certification AND Supporting documentation, as appropriate <ol style="list-style-type: none"> Third-Party – Source, Written, or Oral Intake Observation OR Documentation of Due Diligence

Category	Definition	Required Documentation
At-Risk Category 2 – Unaccompanied Homeless Children and Youth under Other Federal Statutes	A child or youth who do not qualify as homeless under the homeless definition, but qualifies as “homeless” under section 387(3) of the Runaway and Homeless Youth Act (42 U.S.C. 5732a(3)), section 637(11) of the Head Start Act (42 U.S.C. 9832(11)), section 41403(6) of the Violence Against Women Act of 1994 (42 U.S.C. 14043e– 2(6)), section 330(h)(5)(A) of the Public Health Service Act (42 U.S.C. 254b(h)(5)(A)), section 3(m) of the Food and Nutrition Act of 2008 (7 U.S.C. 2012(m)), or section 17(b)(15) of the Child Nutrition Act of 1966 (42 U.S.C. 1786(b)(15))	Certification by the nonprofit or state or local government that the individual or head of household seeking assistance met the criteria of homelessness under another federal statute;
At-Risk Category 3 – Homeless Children and Youth under §725(2) of McKinney-Vento	A child or youth who do not qualify as homeless under the homeless definition, but qualifies as “homeless” under section 725(2) of the McKinney- Vento Homeless Assistance Act (42 U.S.C. 11434a(2)), and the parent(s) or guardian(s) of that child or youth if living with her or him	Certification by the nonprofit or state or local government that the individual or head of household seeking assistance met the criteria of homelessness under another federal statute;

B. HUD HOMELESS DEFINITION CATEGORIES

Category	Definition	Required Documentation	Philadelphia Service Eligibility
Category 1 – Literally Homeless	<p>Household lacks a fixed, regular, and adequate nighttime residence, meaning:</p> <ul style="list-style-type: none"> 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); <u>or</u> Is exiting an institution where (s)he has resided for 90 days or less <u>and</u> who resided in an emergency shelter or place not meant for human habitation immediately before entering that institution 	<ul style="list-style-type: none"> Written observation by the outreach worker; <u>OR</u> Written referral by another housing or service provider; <u>OR</u> Certification by the individual or head of household seeking assistance stating that (s)he was living on the streets or in shelter; For individuals exiting an institution – one of the forms of evidence above; and: <ul style="list-style-type: none"> Discharge paperwork or written/oral referral, <u>OR</u> Written record of intake worker's due diligence to obtain above evidence and certification by individual that they exited institution 	<p>Emergency Housing</p> <p>Transitional Housing</p> <p>Rapid Re-Housing</p> <p>Permanent Supportive Housing</p>
Category 2 – Imminent Risk of Homelessness	<p>Household will imminently lose their primary nighttime residence, provided that:</p> <ul style="list-style-type: none"> Residence will be lost within 14 days of the date of application for assistance; <u>AND</u> No subsequent residence has been identified; <u>AND</u> Household lacks the resources or support networks needed to obtain other permanent housing 	<ul style="list-style-type: none"> A court order resulting from an eviction action notifying the household that they must leave; <u>OR</u> For households leaving a hotel or motel – evidence that they lack the financial resources to stay; <u>OR</u> A documented and verified oral statement; <u>AND</u> Certification that no subsequent residence has been identified; <u>AND</u> Self-certification or other written documentation that the household lacks the financial resources and support necessary to obtain permanent housing 	<p>Prevention</p> <p>Emergency Housing (if household will become Literally Homeless that night)</p>

Category	Definition	Required Documentation	Philadelphia Service Eligibility
Category 3 – Homeless under other Federal Statutes	<p>Unaccompanied youth under 25 years of age, or families with children and youth, who do not otherwise qualify as homeless under Categories 1,2 or 4, but who:</p> <ul style="list-style-type: none"> • Are defined as homeless under other listed federal statutes; <u>AND</u> • Have not had a lease, ownership interest, or occupancy agreement in permanent housing during the 60 days prior to the homeless assistance application; <u>AND</u> • Have experienced persistent instability as measured by two (2) moves or more during the preceding 60 days; <u>AND</u> • Can be expected to continue in such status for an extended period of time due to special needs or barriers 	<ul style="list-style-type: none"> • Certification by the nonprofit or state or local government that the individual or head of household seeking assistance met the criteria of homelessness under another federal statute; <u>AND</u> • Certification of no permanent housing in the last 60 days; <u>AND</u> • Certification by the individual or head of household, and any available supporting documentation, that (s)he has moved two or more times in the past 60 days; <u>AND</u> • Documentation of special needs <u>or</u> 2 or more barriers 	Prevention/Diversion
Category 4 – Fleeing/ attempting to flee domestic violence	<p>Any household who:</p> <ul style="list-style-type: none"> • Is fleeing, or is attempting to flee, domestic violence; <u>AND</u> • Has no other residence; <u>AND</u> • Lacks the resources or support networks to obtain other permanent housing 	<ul style="list-style-type: none"> • <u>For victim service providers:</u> <ul style="list-style-type: none"> ○ An oral statement by the individual or head of household seeking assistance which states: they are fleeing; they have no subsequent residence; and they lack resources. Statement must be documented by a self-certification or a certification by the intake worker • <u>For non-victim service providers:</u> <ul style="list-style-type: none"> ○ Oral statement by the individual or head of household seeking assistance that they are fleeing. This statement is documented by a self-certification or by the caseworker. Where safety is not jeopardized, the oral statement must be verified; <u>AND</u> ○ Certification by the individual or head of household that no subsequent residence has been identified; <u>AND</u> ○ Self-certification, or other written documentation, that the household lacks the financial resources and support to obtain other permanent housing. 	Prevention/Diversion Emergency Housing Transitional Housing Rapid Re-Housing Permanent Supportive Housing

C. HOMELESS ASSISTANCE SERVICES AVAILABLE THROUGH CEA-BHRS

Service Type	Description	Eligible Households	Target Populations
Homeless Prevention (HP)	Prevention services include financial assistance and case management to assist households with retaining or obtaining other permanent housing.	<ul style="list-style-type: none"> Head of household is 18 years of age or older; if not 18 years old, must provide documentation of legal emancipation; <u>AND</u> Defined as At Risk of Homelessness under one (1) of the following categories: <ul style="list-style-type: none"> Category 1 – Individuals and Families <u>OR</u> Category 2 – Homeless Children and Youth under Other Federal Statutes <u>OR</u> Category 3 – Homeless Children and Youth under §725(2) of McKinney-Vento <u>OR</u> Defined as Homeless under one (1) of the following categories: <ul style="list-style-type: none"> Category 2 – Imminent Risk of Homelessness <u>OR</u> Category 3 – Homeless Under Other Federal Statutes <u>OR</u> Category 4 – Fleeing/Attempting to Flee Domestic Violence; <u>AND</u> Resident of Philadelphia City/County for a minimum of 30 days; <u>AND</u> Household income in relation to family unit size for the thirty (30) day period immediately preceding the date of application for services is below 125% of the federal poverty level; <u>OR</u> Annual household income below 30% of AMI 	
Emergency Housing (EH)	Temporary housing services that address a household experiencing homelessness's immediate housing crisis.	<ul style="list-style-type: none"> Head of household is 18 years of age or older; if not 18 years old, must provide documentation of legal emancipation; <u>AND</u> Defined as Homeless under one (1) of the following categories: <ul style="list-style-type: none"> Category 1 – Literally Homeless <u>OR</u> Category 2 – Imminent Risk of Homelessness <u>OR</u> Category 4 – Fleeing/Attempting to Flee Domestic Violence 	

Service Type	Description	Eligible Households	Target Populations
Transitional Housing (TH)	Short term housing with services that facilitates the movement of households experiencing homelessness to permanent housing within 24 months.	<ul style="list-style-type: none"> Head of household is 18 years of age or older; if not 18 years old, must provide documentation of legal emancipation; <u>AND</u> Defined as Homeless under one (1) of the following categories: <ul style="list-style-type: none"> Category 1 – Literally Homeless <u>OR</u> Category 4 – Fleeing/Attempting to Flee Domestic Violence 	<ul style="list-style-type: none"> Youth age 18-24; <u>OR</u> Households that experienced domestic violence; <u>OR</u> Households in recovery
Rapid Re-Housing (RRH)	Rental assistance and supportive services that facilitates the movement of households experiencing homelessness to permanent housing as quickly as possible.	<ul style="list-style-type: none"> Head of household is 18 years of age or older; if not 18 years old, must provide documentation of legal emancipation; <u>AND</u> Defined as Homeless under one (1) of the following categories: <ul style="list-style-type: none"> Category 1 – Literally Homeless <u>OR</u> Category 4 – Fleeing/Attempting to Flee Domestic Violence 	<ul style="list-style-type: none"> Households exiting emergency housing Households with no previous episodes of homelessness Households with children Bridge for households waiting for PSH vacancy
Permanent Supportive Housing (PSH)	Permanent housing in which supportive services are provided to assist persons experiencing homelessness and have a disability to live independently.	<ul style="list-style-type: none"> Head of household is 18 years of age or older; if not 18 years old, must provide documentation of legal emancipation; <u>AND</u> Defined as Homeless under one (1) of the following categories: <ul style="list-style-type: none"> Category 1 – Literally Homeless (households coming from transitional housing must have originally come from the streets or emergency housing) <u>OR</u> Category 4 – Fleeing/Attempting to Flee Domestic Violence, <u>AND</u> One household member (adult <u>OR</u> child) has a disability 	

Philadelphia Continuum of Care: Nondiscrimination Policy

Background

The Philadelphia Continuum of Care (CoC) is committed to a service-delivery environment in which all individuals are treated with respect and dignity. Each individual has the right to live in an atmosphere that promotes equal treatment and opportunity and that prohibits unlawful discriminatory practices.

All programs must manage a responsible and sound operation in accordance with federal and local nondiscrimination and equal opportunity provisions, as codified in the [Fair Housing Act](#), Section 504 of the [Rehabilitation Act](#), Title VI of the [Civil Rights Act](#), Titles II & III of the [Americans with Disabilities Act](#), HUD's [Equal Access rule: 24 CFR 5.100, 5.105\(a\)\(2\) and 5.106\(b\)](#), and Philadelphia's [Fair Practices Ordinance: Chapter 9-1100 of the Philadelphia Code](#).

Applicability

This policy aims to ensure the safety, dignity, and well-being of all individuals and families housed in programs associated with the Philadelphia CoC. All projects funded through HUD CoC Program or Emergency Solutions Grant (ESG) Program grants or receiving other funds from the City of Philadelphia's Office of Homeless Services (OHS) shall operate in accordance with this policy, following all applicable law. Programs must affirmatively provide equal access to their housing and supportive services in a nondiscriminatory manner that ensures that all persons are afforded equal opportunities.

Nondiscrimination Policy

Each provider must have a policy prohibiting discrimination against persons based on race, ethnicity, color, sex, sexual orientation, gender identity, religion, national origin, ancestry, disability, marital status, age, source of income, familial status, or domestic or sexual violence victim status, ensuring that all participants are afforded equal opportunities, as stipulated in the Philadelphia Fair Practices Ordinance and Federal Law and regulations.

NOTE: Providers may not exclude potential participants based on their sex. A single-sex shelter is acceptable only under limited conditions in which the facility meets both of the following requirements:

Serving Individuals: only projects serving individuals can operate as single-sex facilities. A shelter that accepts families with children cannot be single sex. The ESG Interim Rule prohibits involuntary family separation, stating at 24 C.F.R 576.102(b) that, "[t]he age of a child under age 18 must not be used as a basis for denying any family's admission to an emergency shelter that uses Emergency Solutions Grant (ESG) funding or services and provides shelter to families with children under 18." There is no practicable way to operate a

shelter that serves families with children as a single-sex facility since families with children will necessarily include household members of different genders; AND

Single structure with shared bedrooms or bathing facilities: The shelter must not be considered a "dwelling unit" or it must have a shared bathing facility. This policy, which applies to ESG, is stated most clearly in the CoC interim rule, at 24 C.F.R 578.93: "The housing may be limited to one sex where such housing consists of a single structure with shared bedrooms or bathing facilities such that the considerations of personal privacy and the physical limitations of the configuration of the housing make it appropriate for the housing to be limited to one sex."

Definitions of Prohibited Discrimination

Age discrimination refers to situations in which how old an individual is determines whether or not the person has access to certain terms, conditions or services. In Philadelphia, all ages are protected from housing discrimination.

Ancestry refers to the nation, country, tribe or other identifiable group of people from which a person descends. It also can refer to the physical, cultural or linguistic characteristics of the person's ancestors. Ancestry discrimination may often overlap with, but is not always synonymous with, national origin discrimination.

Color discrimination refers to discrimination based on shade or hue of skin, such as Light-skinned or Dark-skinned. It is important that a variety of hues exist in every ethnic and racial group; therefore color discrimination is not always synonymous with race discrimination and can even occur within a single racial group.

Disability refers to a physical or mental impairment that substantially limits an individual's ability to perform a major life activity. The protections against disability discrimination cover (1) individuals who currently have a physical or mental impairment that substantially limits one or more major life activities; (2) persons who previously had a physical or mental impairment that substantially limits one or more major life activities; and (3) persons who are believed to have a physical or mental impairment that substantially limits one or more major life activities, regardless of whether that belief is correct. The protection against disability discrimination includes a duty to provide reasonable accommodations that would allow an individual with a physical or mental disability to access and obtain full enjoyment of employment, public accommodations or housing and real property.

Domestic or sexual violence refers to any act of domestic violence, sexual assault or stalking as defined by the Philadelphia Code or the sections of the Pennsylvania Code related to rape, incest, sexual abuse of children, unlawful contact with a minor, sexual exploitation of children, statutory sexual assault, involuntary deviate sexual intercourse, sexual assault, aggravated indecent assault or indecent assault.

Ethnicity refers to membership in a particular cultural group. It is defined by shared cultural practices, including but not limited to holidays, food, language, and customs. Ethnicity may often overlap with ancestry, and like ancestry discrimination, ethnic discrimination may often overlap with, but is not always synonymous with, national origin discrimination.

Family includes, regardless of actual or perceived sexual orientation, gender identity, or marital status: (1) A single person or (2) A group of persons residing together. Federal and local laws prohibit discrimination based on familial status, i.e., one cannot discriminate against households consisting of one or more individuals under 21 years of age and (1) a parent or other person having legal custody of the minor(s) or (2) the designee of such parent or other person having such custody, with the written permission of such parent or other person. The protections afforded against discrimination on the basis of familial status shall apply to any person who is pregnant or is in the process of securing legal custody of any individual who has not attained the age of 18 years. Projects funded under the CoC Program may limit housing to families with children, according to 24 CFR 578.93(b)(3). The age and gender of a child under age 18 must not be used as a basis for denying any family's admission to a project that receives CoC funds (24 CFR 578.93(e)).

Gender identity means the gender with which a person identifies, regardless of the sex assigned to that person at birth and regardless of the person's perceived gender identity. Perceived gender identity means the gender with which a person is perceived to identify based on that person's appearance, behavior, expression, other gender related characteristics, or sex assigned to the individual at birth or identified in documents. Programs must not ask participants to provide anatomical information or documentary (ID), physical, or medical evidence of gender identity.

Marital status refers to the state of being one of the following: Single, Married, Separated, Divorced, Widowed, Life Partner. Marital status discrimination includes discrimination based on assumed characteristics of people in particular marital status groups.

National origin refers to "the country where a person was born, or, more broadly, the country from which his or her ancestors came." National origin discrimination includes discrimination based on place of origin or on the physical, cultural, or linguistic characteristics of a national origin group. National origin discrimination includes discrimination on the basis of accent, manner of speaking, or language fluency.

Race discrimination includes discrimination on the basis of physical characteristics associated with a particular race, such as hair texture, facial features and hair color. Individuals of Hispanic or Latino ethnicity, or any ethnicity, may belong to one or more racial group. Race may be related to color, but is not synonymous with color. Race is associated with the following groups:

- American Indian/Alaska Native: A person having origins in any of the original peoples of North and South America (including Central America), and who maintain tribal affiliation or community attachment

- Asian: Persons having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam
- Black/African American: A person having origins in any of the Black racial groups of Africa
- Native Hawaiian/Pacific Islander: A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands
- White: A person having origins in any of the original peoples of Europe and the Middle East
- Bi-racial or Multi-racial: All persons who identify with more than one of the five above races

Religious discrimination refers to discrimination based on an individual's religious observances, practices or beliefs. It also includes discrimination based on moral or ethical beliefs as to what is right and wrong that are sincerely held with the strength of traditional religious views, regardless of how widespread the particular beliefs or practices are. Religious discrimination may manifest itself as a preference for or against members of a particular religious group. It may also be evidenced as intolerance for observation of religious laws regarding dress, dietary habits, and work schedules.

Sex encompasses both the biological differences between men and women and the cultural and social aspects associated with masculinity and femininity (i.e., gender). Sex discrimination refers to discrimination based on one of the following categories: male/Female; pregnancy, child birth or related medical conditions; sex stereotyping; change in sex. Sex-specific programs are acceptable only under the limited conditions noted above.

Sexual orientation means one's emotional or physical attraction to the same and/or opposite sex (e.g. homosexuality, heterosexuality, or bisexuality). Sexual orientation discrimination includes discrimination based on perception of an individual's sexual orientation, whether that perception is correct or not.

Source of income refers to any lawful income, subsidy or benefit with which an individual supports himself or herself and his or her dependents, including, but not limited to, child support, maintenance, and any federal, state or local public assistance, medical assistance, or rental assistance program.

Reporting

The Office of Homeless Services (OHS) has implemented a retaliation-free violation reporting policy to ensure adherence to policy regulations. Conduct prohibited by this policy and found to be unacceptable is subject to report, investigation, and response.

OHS encourages the prompt reporting of all incidents of discrimination and non-compliance with this policy. A formal complaint procedure for the reporting of violations of the Non-Discrimination Policy has been instituted. It is established that all program participants must be advised at intake of their legal rights, including an explanation of this policy, and must be given

the written policy and instructions for reporting violations, as well as an accompanying OHS reporting form (both attached to this policy), and must sign to acknowledge receipt.

Initially, reporters should contact administrators of the specific program demonstrating non-compliance with concerns, except in cases where retaliation is feared. If the concern is not resolved after administrators are involved, reporters may contact OHS Monitoring and Compliance analysts by submitting the attached reporting form or calling the Office of Homeless Services Comment Line at 215-686-4700. Persons wishing to submit the reporting form in person may do so at one of the OHS Centralized Homeless Intake sites: Appletree at 1430 Cherry Street or Roosevelt Darby Center at 802 N. Broad Street.

The acceptance, logging, tracking, investigation, and disposition of all reports will be centrally monitored by OHS Monitoring and Compliance analysts. The established time period for investigation of a report is 48 hours. Prompt investigation allows for constructive actions to be taken and relationships repaired, allowing housing placements to be sustained.

Monitoring & Enforcement

As CoC Collaborative Applicant, the Office of Homeless Services will make certain reasonable efforts are made to ensure that all CoC-funded, ESG-funded, and OHS-funded agencies are familiar with this policy and are adhering to the guidelines.

All funded projects are to keep timely written documentation regarding specifics of placement/treatment/incidents and exceptions regarding subject individuals and families for Office of Homeless Services' impromptu audit as merited.

Organizations will be found in violation of this Non-Discrimination Policy for actions including, but not limited to:

- Denial of services based on membership in a protected class;
- Publishing, circulating, issuing, displaying, posting, or mailing any written statement or utterance of any verbal statement disparaging any member of any protected class, that may result in exclusion from services or denial of fair treatment;
- Institution of rules limiting freedom of attire, especially affecting religious observance or gender identity, except in cases where decency, health, and safety are concerned;
- Real or implied creation of any quota system intent on limiting the number of protected class members to be served by an organization;
- Allowing an offensive and hostile living environment, promulgated by staff, other participants, or both, to discourage, demean, or otherwise disenfranchise participants as members of a protected class;
- Segregating any participant to a specific location based on protected class status;
- Refusal to make requested reasonable accommodations and modifications for members of a protected class; or

- Refusal or withholding of any accommodation, advantage, or privilege based on protected class status.

Confirmed acts of discrimination, harassment and misconduct will be dealt with appropriately. Responsive actions will include training, counseling and progressive correction measures. The purpose of these responses in cases of confirmed violation is to promote adherence to this policy.

Effective Date

This policy is effective as of January 23, 2018.

The Philadelphia CoC Non-Discrimination Policy was approved by the Philadelphia CoC Board on November 13, 2017.

Elizabeth G. Hersh
Director, City of Philadelphia Office of Homeless Services
Co-Chairperson, Philadelphia Continuum of Care Board

Date

John Ducoff
Co-Chairperson, Philadelphia Continuum of Care Board

Date

References and Resources

Fair Housing Act (42 USC 3601-19): <https://legcounsel.house.gov/Comps/civil68.pdf>

The Philadelphia Code, Chapter 9-1100: Fair Practices Ordinance: Protections Against Unlawful Discrimination: http://www.phila.gov/HumanRelations/PDF/FPO%20Ch9-1100%20-9-2016_%20nc.pdf

Philadelphia Human Relations Commission Chart of Protections Against Unlawful Discrimination Under the Philadelphia Fair Practices Ordinance:
<http://www.phila.gov/HumanRelations/PDF/ChartOfLegalProtections.pdf>

Philadelphia Commission on Human Relations intake form:
<http://www.phila.gov/HumanRelations/DiscriminationAndEnforcement/Documents/Property%20Discrimination.pdf>

HUD Equal Access Final Rule: <https://www.hudexchange.info/resource/1991/equal-access-to-housing-final-rule/>

HUD's Portal for Online Fair Housing Complaints:
https://www.hud.gov/program_offices/fair_housing_equal_opp/online-complaint

Materials from HUD 11/16/16 Equal Access and Gender Identity Rules Training:
<https://www.hudexchange.info/course-content/equal-access-and-gender-identity-rules-training/Implementing-HUDs-Equal-Access-and-Gender-Identity-Rules-Slides-2016-11-17.pdf>

National Gay & Lesbian Task Force, *Transitioning Our Shelters: A Guide to Making Homeless Shelters Safe for Transgender People*: <https://srp.org/wp-content/uploads/2012/08/TransitioningOurShelters.pdf>

APPENDIX A:

Equal Access Regardless of Sexual Orientation, Gender Identity, or Marital Status

HUD is charged with promoting the federal goal of providing decent housing and a suitable living environment for all. In January 2011, citing evidence suggesting that LGBT individuals and families do not have equal access to housing, HUD initiated rulemaking to ensure that HUD's programs remain open to all eligible persons regardless of sexual orientation, gender identity, or marital status. In order to support compliance with the Final Rule published on September 21, 2016, we include in this policy these additional guidelines for avoiding discrimination on these bases.

Common Definitions of Term

Assigned Sex: Determination of gender at birth, usually male, female, or intersex.

Cisgender: A term used by some to describe people who are not transgender.

Gender Expression: External expression of gender identity exhibited through: behavior, clothing, hairstyle, body language, and voice. Not all people feel safe expressing their gender identity.

Gender Identity: Internal or innate sense of being male, female, or another gender, which may or may not match assigned sex at birth.

Gender Non-Conforming: A term used to describe some people whose gender expression is different from conventional expectations of masculinity and femininity. Not all gender non-conforming people identify as transgender; nor are all transgender people gender non-conforming.

Non-binary and/or genderqueer: Terms used by some people who experience their gender identity and/or gender expression as falling outside the categories of man and woman. They may define their gender as falling somewhere in between man and woman, or they may define it as wholly different from these terms. Not a synonym for transgender and should only be used if someone self-identifies as non-binary and/or genderqueer.

Sexual Orientation: Physical or emotional attraction to the same and/or opposite sex. Distinct from one's gender expression or identity.

Transgender: Umbrella term for people whose gender identity is different from their assigned sex, often shortened to "trans."

Transgender man: Person who was assigned female at birth but who identifies as a man.

Transgender woman: Person who was assigned male at birth but identifies as a woman.

Transitioning (Gender Transition): Process that some transgender people go through to live as the gender with which they identify rather than the sex assigned to them at birth. A complex process that occurs over a long period of time and can include various personal, medical, and legal steps. Transitioning **does not** require medical treatment. **Avoid** the phrase "sex change."

Transsexual: An older term that originated in the medical and psychological communities. Unlike transgender, transsexual is **not** an umbrella term. Many transgender people do not identify as transsexual and prefer the word transgender.

Access to Sex-Segregated Services and Facilities

All individuals seeking services have the right to placement and services that align with their gender identity. This right is never contingent upon having received any medical treatment to physically change the body. Likewise, those who do not identify as male or female have a right to placement and services that best supports their own personal safety. No person's placement or acceptance for service in a sex-segregated facility can be refused based upon a determination that their appearance or behavior does not conform to gender stereotypes. Facilities that legally separate participants by sex must serve all who identify with that gender, without requiring documentation.

Access to Family Services and Facilities

All families, regardless of composition or gender identities within the family, have the right to placement and services in accordance with their needs, including placement in congregate facilities. Perceived non-congruence of gender identity or expression of any family member does not constitute an acceptable reason for refusal of services/placement.

Access to Restrooms/Bathrooms/Showers/Personal Care Areas

Facility restrooms/bathrooms/showers and personal care areas must be open for use consistent with gender identity by all program participants. No barriers to the use and availability of restrooms/bathrooms/showers and personal care areas can be imposed due to appearance or bodily/physical/biological characteristics. No participant can be required to produce legal documentation of gender identity to determine appropriate use of facilities. It is a violation of the Equal Access Rule to institute specific provisions such as schedules by which transgender program participants can use bathrooms/showers and personal care areas separate from cisgender program participants.

Ensuring Safety & Privacy

All individuals receiving services and placement have a right to safety and privacy. In instances when safety or privacy concerns are brought forth, programs and organizations must demonstrate non-discriminatory applied response. Fair and open use of a program and facilities space and

features is a right of all. Any client's discomfort with transgender and /or gender non-conforming identity is not cause for limiting the transgender or gender non- conforming person's enjoyment and use of the facility and its features, either physically or programmatically.

Affirming Use of Names and Personal Gender Pronouns

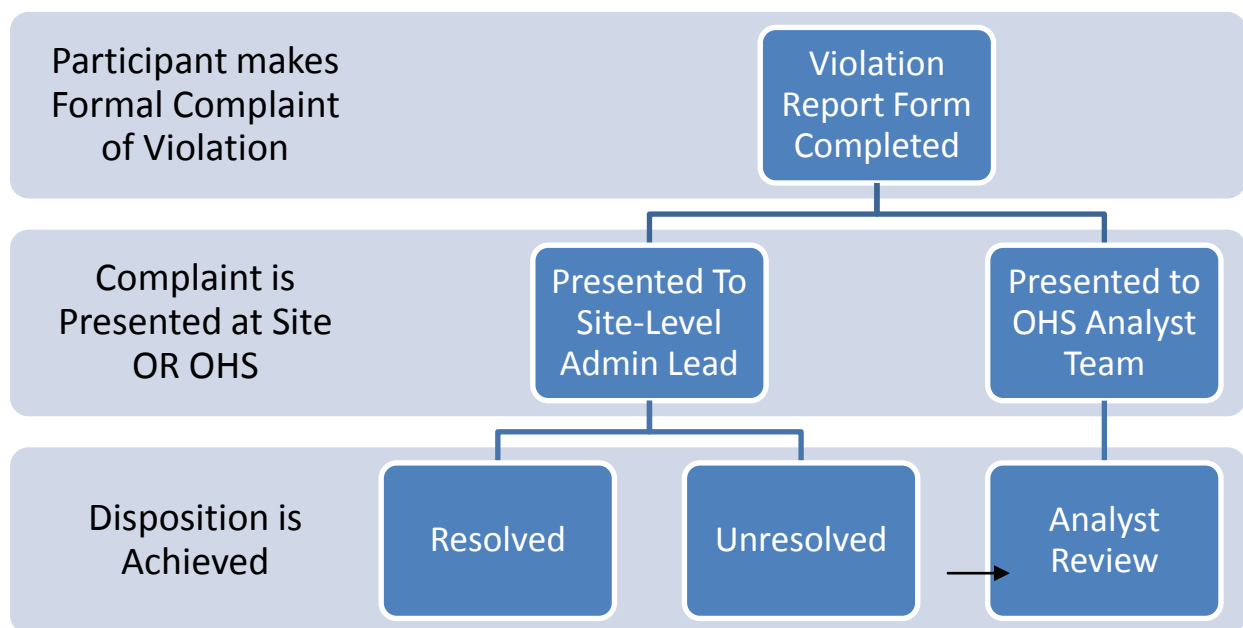
Program participants have the right to be called by preferred name and referred to by the gender pronoun that they designate and that matches their gender identity.

Homeless Management Information System (HMIS) Data Collection

With respect to gender questions in HMIS collection systems, program participants must be given all gender response choices and have their selection recorded accordingly.

Philadelphia CoC: How to File a Nondiscrimination Violation Report

1. At intake, all participants will be given the nondiscrimination policy and a violation reporting form.
2. Participants can submit a complaint form initially to program administration or to the Office of Homeless Services (OHS) in person at the Appletree Family Intake Center or Roosevelt Darby Center.
3. Program administration will address complaints at the provider level.
4. If a participant is not satisfied with the outcome, then a complaint can be filed with OHS by submitting the reporting form at Appletree or Roosevelt Darby or calling the Office of Homeless Services Comment Line at 215-686-4700.
5. OHS will review complaints within 48 hours and notify participants of the determination.



The Office of Homeless Services requires the reporting of all incidents of discrimination. Violation forms are generated for all complaints and logged into HMIS.

Office of Homeless Services Comment Line: (215) 686-4700

Reporting sites:

Appletree Center, 1430 Cherry Street, Philadelphia PA 19102.

Hours of Operation: 7am to 3:30pm weekdays

Roosevelt Darby Center, 802 N. Broad Street, Philadelphia, PA 19130

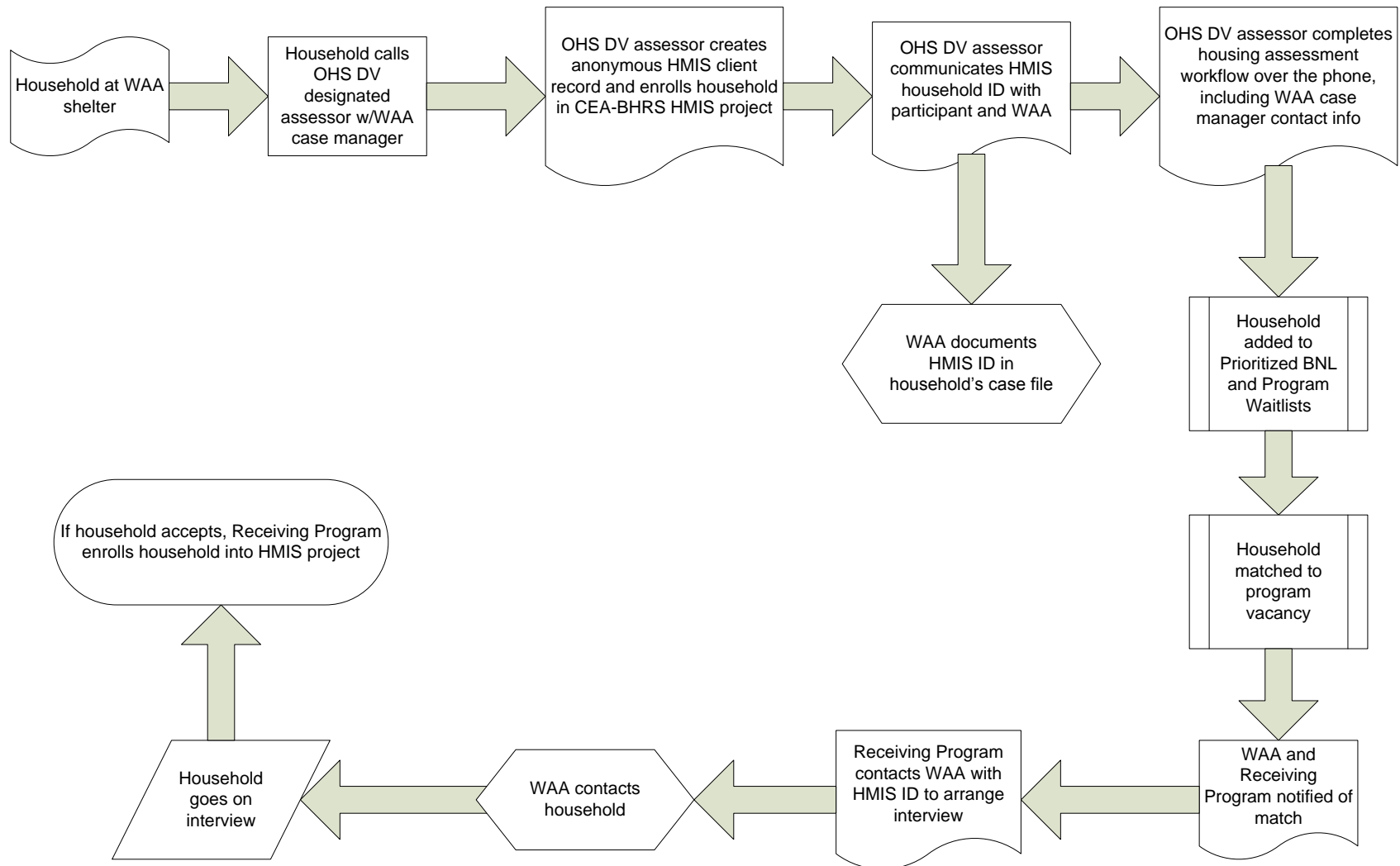
Hours of Operation: 7am to 3:30pm weekdays

E. ORDER OF PRIORITY FOR OBTAINING EVIDENCE VERIFYING LITERAL HOMELESS STATUS

- **1st Priority:** Third Party Documentation includes any of the following acceptable types of third-party verification of homelessness:
 - A print-out/screenshot from HMIS that includes the applicant's name and dates of enrollment in the agency's program.
 - A print-out from the street outreach database with the relevant contacts highlighted. Only outreach contacts identified as "Response" and "Outreach" can be used to document homelessness.
 - [Written Third Party Verification of Homelessness Form](#). If the applicant stayed at more than one program, a separate form must be completed by each program.
 - A letter written by another housing or service provider⁵ on agency letterhead which documents the applicant's homeless occasion. The letter must be dated and must contain all of the requested information on this form, including the name, title, and signature of the staff person.
 - For Verification of Stay(s) in a homeless assistance program, the letter must include:
 - The applicant's entry and exit dates
 - The type of program: Emergency Shelter (includes Journey of Hope Programs), Safe Haven, Rapid Re-housing, or Transitional Housing.
 - For Verification of unsheltered homelessness (stays in places not meant for human habitation, e.g. car, park, bus station, abandoned building), the letter must include:
 - The date(s) you encountered the applicant
 - The location of the encounter
 - A description of the applicant's unsheltered living conditions
 - If you did not encounter the applicant at the unsheltered location, you must state why you believe to the best of your knowledge and based on your professional judgment that the applicant was homeless at the time of the encounter.
- **2nd Priority:** Intake or Outreach Worker Observation
- **3rd Priority:** [Certification from the person seeking assistance](#)

⁵ HUD considers other housing or service providers to include members of law enforcement, a healthcare professional within the community, an educator, or another person that has encountered the individual or head of household while in their official capacity and not simply as a member of the community. If the other housing or service provider is not able to provide a written referral or observation, the intake worker may document their conversation with the housing or service provider. The housing or service provider's written referral or observation may only qualify as third party documentation for the specific months in which they encountered the individual or head of household. ([CoC FAQ ID 2760](#))

F. PROCESS TO CONNECT HOUSEHOLDS STAYING AT WOMEN AGAINST ABUSE SHELTER TO CEA-BHRS



G. COMMON TERMS, ACRONYMS, AND DEFINITIONS

Chronically Homeless (HUD definition):

(1) A “homeless individual with a disability,” as defined in the Act, who:

Lives in a place not meant for human habitation, a safe haven, or in an emergency shelter; and
Has been homeless (as described above) continuously for at least 12 months or on at least 4 separate occasions in the last 3 years where the combined occasions must total at least 12 months

(2) An individual who has been residing in an institutional care facility for fewer than 90 days and met all of the criteria in paragraph (1) of this definition before entering that facility; or

(3) 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 in paragraphs (1) or (2) of this definition, including a family whose composition has fluctuated while the head of household has been homeless.

Continuum of Care (CoC) – A collaborative planning body designed to address homelessness through a coordinated community-based process of identifying needs and building a system of housing and services to address those needs. It is the body responsible for meeting the goals of HUD’s Continuum of Care Program.

Emergency Shelter/Housing (ES or EH) – A facility with overnight sleeping accommodations, the primary purpose of which is to provide temporary shelter for persons experiencing homelessness

Homeless Management Information System (HMIS) – A computerized data collection system that tracks services received by homeless people, helps identify gaps in services within the continuum, and allows for greater collaboration among service providers as the system provides a “history” of a homeless person’s involvement in the system of care making it easier for caseworkers to evaluate the situation and provide services in the most efficient manner. In addition, the HMIS system can help accurately describe a community’s homeless population including unduplicated census counts, need for increased capacity to fill service gaps. This system is required by HUD for all continuums of care.

Household – Covers any configuration of persons in crisis, whatever their age or number (adults, youth, or children; singles, couples, or multiple adults; with or without children).

Organization – Organization refers to the entity that is the recipient of program funding for a specific project.

Permanent Supportive Housing (PSH) – Permanent housing in which supportive services are provided to assist homeless persons with a disability to live independently

Prevention Services – Financial assistance and/or services designed to prevent homelessness for an otherwise housed household.

Program – Program refers to the federal funding source (e.g. ESG, CoC, etc.)

Project – A project refers to a distinct unit of an organization, which may or may not be funded by HUD or the federal partners, that provides services and/or housing and is identified by the CoC as part of its service system.

Protected Personal Information (PPI) – Any information about an individual that 1) identifies a specific individual, 2) can be manipulated so that identification is possible, or 3) can be linked with other available information to identify a specific individual

Rapid Re-Housing (RRH) – An intervention that rapidly connects families and individuals experiencing homelessness to permanent housing through housing identification, rent and move-in assistance, and case management and services.

Safe Haven – Housing that serves hard-to-serve persons with mental illness experiencing homelessness who came from the streets and have been unable or unwilling to participate in supportive services. The housing must provide 24-hour residence for eligible persons for an unspecified period, have an overnight capacity limited to 25 or fewer persons, and provide low-demand services and referrals for the residents.

Transitional Housing (TH) – Supportive housing used to facilitate the movement of individuals and families experiencing homelessness to permanent housing within 24 months.

VI-SPDAT, F-VI-SPDAT, TAY-VI-SPDAT – Vulnerability Index-Service Prioritization Decision Assistance Tool; Vulnerability Index-Service Prioritization Decision Assistance Tool for Families; and Transition-Age Youth Vulnerability Index-Service Prioritization Decision Assistance Tool are the standardized housing triage tools used in CEA-BHRS. The VI-SPDAT series is a set of tools that are designed to be used to quickly assess the health and social needs of people experiencing homelessness and match them with the most appropriate support and housing interventions that are available.

H. REFERENCES AND RESOURCES

- City of Philadelphia Office of Homeless Services. (2017, September). Language Access Plan and Protocol. Philadelphia, PA. Retrieved from <http://www.philadelphiaofficeofhomelesservices.org/wp-content/uploads/2017/09/ohs-language-access-plan-9-17.pdf>
- U.S. Department of Housing and Urban Development. (2015). *Coordinated Entry Policy Brief*. Washington D.C.: U.S. Department of Housing and Urban Development. Retrieved from <https://www.hudexchange.info/resource/4427/coordinated-entry-policy-brief/>
- U.S. Department of Housing and Urban Development. (2016). *Notice CPD-16-11, Notice on Prioritizing Persons Experiencing Chronic Homelessness and Other Vulnerable Homeless Persons in Permanent Supportive Housing*. Washington D.C.: U.S. Department of Housing and Urban Development. Retrieved from <https://www.hudexchange.info/resources/documents/notice-cpd-16-11-prioritizing-persons-experiencing-chronic-homelessness-and-other-vulnerable-homeless-persons-in-psh.pdf>
- U.S. Department of Housing and Urban Development. (2017). *Coordinated Entry Core Elements*. Washington D.C.: U.S. Department of Housing and Urban Development. Retrieved from <https://www.hudexchange.info/resources/documents/Coordinated-Entry-Core-Elements.pdf>
- U.S. Department of Housing and Urban Development. (2017, September). Housing First Assessment Tool. Washington D.C.: U.S. Department of Housing and Urban Development. Retrieved from <https://www.hudexchange.info/resource/5294/housing-first-assessment-tool/>
- U.S. Department of Housing and Urban Development. (2017, January 23). *Notice CPD-17-01, Notice Establishing Additional Requirements for a Continuum of Care Centralized or Coordinated Assessment System*. Washington D.C.: U.S. Department of Housing and Urban Development. Retrieved from <https://www.hudexchange.info/resources/documents/Notice-CPD-17-01-Establishing-Additional-Requirements-or-a-Continuum-of-Care-Centralized-or-Coordinated-Assessment-System.pdf>

XIII. FORMS

- A. [Program Participant Grievance Form](#)
- B. [Nondiscrimination Complaint Report Form](#)
- C. [Disability Accommodation for the CEA-BHRS Housing Triage Tool](#)
- D. [Documentation of Chronic Homeless Status Checklist](#)
- E. [Written Third Party Verification of Homeless Status](#)
- F. [Self-Certification of Homeless and Housing Status Form](#)
- G. [Third Party Verification of Institutional Stays Form](#)
- H. [Verification of Disability Form](#)

A. PROGRAM PARTICIPANT GRIEVANCE FORM

**Philadelphia Coordinated Entry and Assessment-Based
Housing Referral System (CEA-BHRS)
Grievance Form**

Name:	
Date:	
Contact Information:	
Best Time/ Way to Reach You:	
Explanation of your concern/ grievance:	
Action you believe would solve the problem:	

Signature: _____ **Date:** _____

Please return your signed form to:

Philadelphia CEA-BHRS
c/o Office of Homeless Services
1401 JFK Blvd., 10th Floor
Philadelphia, PA 19102

The Office of Homeless Services will respond to your grievance in writing within 10 business days.

B. NONDISCRIMINATION VIOLATION REPORT FORM



**City of Philadelphia
Office of Homeless Services**

Elizabeth G. Hersh
Director
Municipal Services Bldg.
1401 J.F. Kennedy Blvd., 10th Floor
Philadelphia, PA 19102-1676

Office of Homeless Services (OHS)
Non-Discrimination Complaint Report

PLEASE SUBMIT THIS COMPLETED REPORT TO YOUR HOUSING PROGRAM ADMINISTRATOR.

Site: ☐ Emergency Shelter ☐ Transitional Housing ☐ Rapid Re-Housing ☐ Permanent Supportive Housing

Today's Date: _____ **Date of Incident:** _____ **Time:** _____

Person Making Report: _____ **Phone:** _____

Are you: ☐ Staff ☐ Participant ☐ Visitor ☐ Witness ☐ Other: _____

Please describe how you were discriminated against (where were you, what happened?)

Person(s) Involved: (Attach additional sheets or use the back of this form if necessary)

Name	Phone number (if known)	Staff member	Program Participant	Visitor	Witness

Complainant's Signature _____ **Date** _____

It is illegal to discriminate against any person based on race, ethnicity, color, sex, sexual orientation, gender identity, religion, national origin, ancestry, disability, marital status, age, source of income, familial status, or domestic or sexual violence victim status.

NOTE: Filing a Non-Discrimination Complaint Report with the Office of Homeless Services does not preclude an individual from filing a discrimination complaint with the Philadelphia Commission on Human Relations, the U.S. Department of Housing & Urban Development, or any other appropriate agency.

C. DISABILITY ACCOMMODATION FOR THE CEA-BHRS HOUSING ASSESSMENT PROCESS

Philadelphia Coordinated Entry and Assessment-Based Housing Referral System (CEA-BHRS)

Disability Accommodation for the CEA-BHRS Housing Assessment Process

A Disability Accommodation Request is used to place a household on the CEA-BHRS Prioritized By-Name List that was unable to participate in the HMIS Client Consent Form and the CEA-BHRS Housing Assessment process due to a disability. This accommodation should be used sparingly and must include evidence that at least three documented attempts have been made to complete the assessment with the household. Please fill out this form entirely. Please refer to the CEA-BHRS Policies and Procedures Manual for steps on how to complete and flag the assessment in HMIS.

Person Completing Assessment/Agency	
Client Unique Identifier/ Name:	

How many attempts have been made to offer this individual an assessment for CEA? When did these attempts occur?
What are the barriers or disabilities this individual is experiencing?
Why does the individual need this accommodation?

I certify that the information I have provided is accurate to the best of my knowledge.

Assessor Signature	Date
Print Name	Title
Phone Number	Email

D. DOCUMENTATION OF CHRONIC HOMELESS STATUS CHECKLIST

PHILADELPHIA CONTINUUM OF CARE DOCUMENTATION OF CHRONIC HOMELESS STATUS CHECKLIST

This checklist may be used for staff to assess an Applicant's chronic homeless status. It should serve as a cover page that is **accompanied by the appropriate documentation** and maintained in the Applicant's file.

Applicant Name:	Date of Birth: / /	Last 4 SSN Digits:			
Documentation of Disability					
The individual or head of household has been diagnosed with one or more of the following disabilities:					
<input type="checkbox"/> Substance use disorder	<input type="checkbox"/> Post-traumatic stress disorder	<input type="checkbox"/> AIDS/HIV			
<input type="checkbox"/> Serious mental illness	<input type="checkbox"/> Chronic physical illness or disability				
<input type="checkbox"/> Cognitive impairments from brain injury	<input type="checkbox"/> Developmental disability				
The evidence for the disability is provided by:					
<input type="checkbox"/> Verification by a qualified state professional	<input type="checkbox"/> Receipt of SSI/DI or VA Disability Benefits				
<input type="checkbox"/> Written Verification from the Social Security Administration or the U.S. Department of Veterans Affairs					
Documentation of Continuous or Cumulative Homelessness					
The individual or head of household is currently living in a place not meant for human habitation, a safe haven, or an emergency shelter AND has been living in a place not meant for human habitation, a safe haven, or an emergency shelter:					
<input type="checkbox"/> Continuously for at least 12 months OR					
<input type="checkbox"/> On at least 4 occasions in the last 3 years, where the combined occasions equal to at least 12 months, with each break in homelessness separating the occasions includes at least 7 nights of not living as described above.					
For Applicants currently residing in institutional care facilities:					
<input type="checkbox"/> Current stay in institution is fewer than 90 days AND applicant was staying in a place not meant for human habitation, safe haven, or emergency shelter immediately before entering the facility					
Evidence of Homeless/Housing Status					
Use the table below to certify the total duration of homelessness and breaks in homelessness. List where the Applicant is currently residing on the first row.					
Acceptable documentation/verification type include: HMIS records, Outreach Database Print-out, Written Third Party Verification Form, Oral Third Party Verification Form, or a Self-Certification Form. Self-certification can be used for up to 3 of the 12 months of homelessness and any of the breaks in homelessness.					
<u>Note:</u> Third-party verification of a single encounter with a homeless service provider on a single day of a month is sufficient to consider an Applicant to be homeless for the entire month, unless there is evidence of a break. (e.g. an outreach contact on January 19, 2016 counts for January 1-31, 2016)					
Occasion (# or break)	Location of Stay	Verification Type (HMIS/3 rd party/Oral/Self-Cert)	Start Date	End Date	Duration in months
			/ /	Still Residing at Location	
			/ /	/ /	
			/ /	/ /	
			/ /	/ /	
			/ /	/ /	
			/ /	/ /	
			/ /	/ /	
			/ /	/ /	
			/ /	/ /	
Total Months Homeless (must be at least 12 months):					

**PHILADELPHIA CONTINUUM OF CARE
DOCUMENTATION OF CHRONIC HOMELESS STATUS CHECKLIST**

Staff Certification I certify that the Applicant meets both criteria of having a disability diagnosis <u>and</u> 12 months continuous or cumulative homelessness, and have attached the necessary documentation.	
Name:	Date: / /
Title:	Signature:
Agency:	Email:

E. WRITTEN THIRD PARTY VERIFICATION OF HOMELESS STATUS

PHILADELPHIA CONTINUUM OF CARE WRITTEN THIRD PARTY VERIFICATION OF HOMELESSNESS

Applicant Name:	Date of Birth: / /	Last 4 SSN Digits:
------------------------	------------------------------	---------------------------

The above-named individual is seeking placement into Transitional (TH), Permanent (PH), Rapid Re-housing (RRH), and/or Permanent Supportive Housing (PSH). Documentation of the applicant's occasions of homelessness is required to determine eligibility.

Please provide one of the following acceptable types of written third-party verification of homelessness:

- A print-out/screenshot from HMIS that includes the applicant's name and dates of enrollment in the agency's program.
- 2. A print-out from the street outreach database with the relevant contacts highlighted. Only outreach contacts identified as "Response" and "Outreach" can be used to document homelessness.
- 3. The attached Written Third Party Verification of Homelessness Form. **If the applicant stayed at more than one program, a separate form must be completed by each program.**
- 4. A letter written on agency letterhead which documents the applicant's homeless occasion. The letter must be dated and must contain all of the requested information on this form, including the name, title, and signature of the staff person.
 - For Verification of Stay(s) in a Program, the letter must include:
 - i. The applicant's entry and exit dates
 - ii. The type of program: Emergency Shelter (includes Journey of Hope Programs), Safe Haven, Rapid Rehousing, or Transitional Housing.
 - For Verification of unsheltered homelessness (stays in places not meant for human habitation, e.g. car, park, bus station, abandoned building), the letter must include:
 - i. The date(s) you encountered the applicant
 - ii. The location of the encounter
 - iii. A description of the applicant's unsheltered living conditions
 - iv. If you did not encounter the applicant at the unsheltered location, you must state why you believe to the best of your knowledge and based on your professional judgment that the applicant was homeless at the time of the encounter.

**PHILADELPHIA CONTINUUM OF CARE
WRITTEN THIRD PARTY VERIFICATION OF HOMELESSNESS**

Instructions: Please complete the section of this form that corresponds to the type of occasion you are verifying. Only an authorized individual from the agency that provided the housing or services to the applicant can complete this form. **Please complete EITHER Section I OR Section II. Section III MUST be completed in all circumstances.**

Applicant Name:	Date of Birth: / /	Last 4 SSN Digits:
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Section I: Documentation of Unsheltered Living Situation

A Street Outreach or Service provider may complete this section. Service providers include but are not limited to: doctors/therapists/counselors/case managers, law enforcement officers, food pantry/soup kitchen workers.

You can only verify homelessness at the time in which you encountered the applicant. For example, the applicant came to your office on 8/12/2016. At that time, he stated that he was currently living in an abandoned building and had been since 5/1/2016. You can only verify that he was homeless on 8/12/2016, not the previous months.

If you did **NOT** physically observe the unsheltered living situation of the applicant, you must complete PART A **and** PART B.

PART A: Documentation of Unsheltered Living Situation

You may list additional encounters on a separate piece of paper, if needed.

Date(s) I Encountered the Applicant	Location of Encounter	Location and Description of Unsheltered Living Situation (e.g. car, park, street, bus station, abandoned building)
/ /	<input type="checkbox"/> Service Setting (e.g. doctor's office, police station) <input type="checkbox"/> At the Applicant's Unsheltered Living Situation	
/ /	<input type="checkbox"/> Service Setting (e.g. doctor's office, police station) <input type="checkbox"/> At the Applicant's Unsheltered Living Situation	
/ /	<input type="checkbox"/> Service Setting (e.g. doctor's office, police station) <input type="checkbox"/> At the Applicant's Unsheltered Living Situation	

PART B: Documentation of Unsheltered Living Situation

For all listed encounters that occurred at a **service setting**, you must state why you believe to the best of your knowledge and based on your professional judgment that the applicant was homeless at the time of the encounter.

Date(s) I Encountered the Applicant	Explanation of why I believe the Applicant was homeless at the time of the encounter:
/ /	
/ /	
/ /	

**PHILADELPHIA CONTINUUM OF CARE
WRITTEN THIRD PARTY VERIFICATION OF HOMELESSNESS**

Section II: Documentation of Stay(s) at a Program	
The above-named individual stayed at _____ (Program Name) during the following time period(s) within the last 3 years (start with the most recent period, if there is more than one occasion): <i>*If the applicant stayed at more than one program, a separate form must be completed by each program.</i>	
Entry Date (MM/DD/YY):	Exit Date (MM/DD/YY):
/ /	/ / or <input type="checkbox"/> Currently staying at facility/program
/ /	/ /
/ /	/ /
/ /	/ /
This facility/program is classified as <u>one</u> of the following: <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> Safe Haven <input type="checkbox"/> Emergency Housing, includes Journey of Hope Programs </div> <div> <input type="checkbox"/> Transitional Housing <input type="checkbox"/> Rapid Re-housing </div> </div>	

Section III. Verifying Agency/Person	
I certify that the information documented above is true and accurate.	
Printed Name:	Signature:
Date: / /	Title:
Organization:	Address:
Phone:	Email Address:

F. SELF-CERTIFICATION OF HOMELESS AND HOUSING STATUS FORM

PHILADELPHIA CONTINUUM OF CARE SELF-CERTIFICATION OF HOMELESS AND HOUSING STATUS

This self-certification form can be used to document homeless history or breaks in homelessness. **Documentation showing due diligence of obtaining third-party verifications** by staff and the outcomes or obstacles must be provided for **occasions of homelessness and stays in institutions**. Except in limited circumstances, no more than 3 months of homelessness should be documented with self-certification. There are no limits to the number of breaks that can be documented through self-certification.

A. Applicant Information				
Applicant Name:		Date of Birth: / /		Last 4 SSN Digits:
B. Self-Declaration of Homeless and Housing History				
<p>Definition of Location Type</p> <ul style="list-style-type: none"> A place not meant for human habitation (e.g. on the streets, abandoned building, airport, etc.) Safe Haven Institutions include prisons, substance abuse or mental health facility, hospitals or other similar facilities. Emergency Shelter, including Journey of Hope Programs 				
I certify that I am currently staying or have stayed in the following places:				
#	Start (MM/YY)	End (MM/YY)	Address or Location of Stay	Location Type (Check one only for each location)
1				<input type="checkbox"/> Place not meant for human habitation <input type="checkbox"/> Emergency Shelter <input type="checkbox"/> Safe Haven <input type="checkbox"/> Institution <input type="checkbox"/> Not Homeless / Break
2				<input type="checkbox"/> Place not meant for human habitation <input type="checkbox"/> Emergency Shelter <input type="checkbox"/> Safe Haven <input type="checkbox"/> Institution <input type="checkbox"/> Not Homeless / Break
3				<input type="checkbox"/> Place not meant for human habitation <input type="checkbox"/> Emergency Shelter <input type="checkbox"/> Safe Haven <input type="checkbox"/> Institution <input type="checkbox"/> Not Homeless / Break
4				<input type="checkbox"/> Place not meant for human habitation <input type="checkbox"/> Emergency Shelter <input type="checkbox"/> Safe Haven <input type="checkbox"/> Institution <input type="checkbox"/> Not Homeless / Break
5				<input type="checkbox"/> Place not meant for human habitation <input type="checkbox"/> Emergency Shelter <input type="checkbox"/> Safe Haven <input type="checkbox"/> Institution <input type="checkbox"/> Not Homeless / Break
Any other relevant information about homeless and/or housing history: <hr/> <hr/> <hr/>				
Applicant Certification				
I hereby certify that the above information is correct.				
Applicant Signature: _____			Date: ____/____/____	

**PHILADELPHIA CONTINUUM OF CARE
SELF-CERTIFICATION OF HOMELESS AND HOUSING STATUS**

C. Staff Efforts to Obtain Written Third Party Verification of Homeless Occasions and/or Institutional Stays

I made the following attempts to obtain written third-party verification of the applicant's self-certified occasion(s) of homelessness and/or stay(s) in institutional(s) (attach additional sheets if necessary):

D. Staff Certification

I understand securing written third-party verification is the preferred method of certifying occasions of homelessness and stays in institutions and self-declaration is only permitted when I have attempted but am unable obtain such verification.

Printed Name:	Date: / /
Title:	Signature:
Agency:	Email:

Please note: Projects have up to 180 days after the participant's project entry date to gather third-party documentation of homeless occasions. Therefore, participants can enter a project self-certifying more than 3 months of homelessness if third-party verification of at least 9 months of homelessness can be obtained within 180 days of the participants' entry into the program.

G. THIRD PARTY VERIFICATION OF INSTITUTIONAL STAYS FORM

PHILADELPHIA CONTINUUM OF CARE THIRD PARTY VERIFICATION OF INSTITUTIONAL STAYS

This form should be used to document the Applicant's stays in **Institutional Care Facilities ONLY**. This form is only necessary if:

- The institutional stay was less than 90 days (89 days or less) **AND**
- The institutional stay was within the previous 3 years **AND**
- The applicant had been staying in a place not meant for human habitation, safe haven, or emergency shelter immediately prior to entering the institution.

Institutional Care Facilities include, but are not limited to: Hospital, Jail/Prison, Nursing Home, Psychiatric Facility

Staff from Institutional Care Facilities: Please complete **Sections I and II**.

Staff from Housing Program: If unable to receive written verification from the institutional care facility, program staff may receive oral verification of the institutional stay. To do so, please complete **Sections I, II, and III**.

Applicant Name:	Date of Birth: / /	Last 4 SSN Digits:
Section I. Institution Information		
Name of Institution:		
Type of Institutional Setting:		
<input type="checkbox"/> Psychiatric facility	<input type="checkbox"/> Jail, prison, or juvenile detention	
<input type="checkbox"/> Substance abuse or detox center	<input type="checkbox"/> Foster care home or foster care group home	
<input type="checkbox"/> Hospital (non-psychiatric)	<input type="checkbox"/> Other (describe) _____	
Documentation of Stay(s)		
The above-named individual stayed at the institution named in Section A during the following time period(s) within the last 3 years (start with the most recent period, if there is more than one occasion): <i>*If the applicant stayed at more than one facility/program, a separate form must be completed by each program/facility.</i>		
Entry Date (MM/DD/YY):	Exit Date (MM/DD/YY):	
/ /	/ / or <input type="checkbox"/> Currently staying at facility/program	
/ /	/ /	
/ /	/ /	
Any other relevant information:		
Section II. Verification by Representative of the Institutional Care Facility		
The information in Section I was provided by:		
Name:	Verification Date: / /	
Title:	Agency:	
Phone Number:	Email:	
Verification was provided: <input type="checkbox"/> Over the phone <input type="checkbox"/> In Person		
<input type="checkbox"/> Institutional Care Facility Representative Completed this Form		
Signature of Institutional Care Facility Representative (if s/he is the one completing this form):		

PHILADELPHIA CONTINUUM OF CARE
THIRD PARTY VERIFICATION OF INSTITUTIONAL STAYS

Section III. Program Staff Certification

If the information in Section I was provided orally (over the phone or in person), program staff must complete this section.

Staff Certification

I certify that I received oral verification of the applicant's stay in an Institutional Care Facility by the identified Representative of the Institutional Care Facility.

Printed Name:

Date: / /

Title:

Signature:

Agency:

Email:

H. VERIFICATION OF DISABILITY FORM

PHILADELPHIA CONTINUUM OF CARE VERIFICATION OF DISABILITY

Applicant: _____ **DOB:** _____ **Last 4 SSN Digits:** _____

The Applicant is seeking placement into a HUD/Continuum of Care-funded Permanent Supportive Housing Program. To be eligible, the Applicant must have documentation of a HUD-defined disability.

Please complete EITHER Option 1 OR Option 2.

<u>OPTION 1: Verification by a Qualified State Licensed Professional</u>	
<p>This section must be completed by a professional licensed by the state to diagnose and treat the disability. Acceptable qualified sources include: physicians, state licensed psychologists/psychiatrists/clinical social workers.</p>	
<p>Instructions: Please check parts A, B, and/or C, if they apply to the Applicant. Please do not attach any psychiatric evaluations.</p>	
<input type="checkbox"/> A.	<p>I. The Applicant has a physical, mental, or emotional impairment which:</p> <ol style="list-style-type: none"> 1. is expected to be of long-continued and indefinite duration, 2. substantially impedes an individual's ability to live independently, and 3. is of a nature that could be improved by more suitable housing conditions; <p>Note: All three conditions above must be met.</p> <p>II. Additionally, please specify the nature of the Applicant's disability that meets all of the three conditions listed above (check all that apply):</p> <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> Substance use disorder <input type="checkbox"/> Serious mental illness </div> <div> <input type="checkbox"/> Post-traumatic stress disorder <input type="checkbox"/> Chronic physical illness or disability </div> <div> <input type="checkbox"/> Cognitive impairments resulting from brain injury </div> </div>
<input type="checkbox"/> B.	<p>The Applicant has a developmental disability as defined in Section 102 of the Developmental Disabilities Assistance and Bill of Rights Act of 2000.</p>
<input type="checkbox"/> C.	<p>The Applicant has the disease of acquired immunodeficiency syndrome (AIDS) or conditions arising from the etiologic agent for acquired immunodeficiency syndrome (HIV).</p>
Completed by:	
Signature of Licensed Professional:	Date:
Printed Name:	Practice/Agency Name:
Professional Credentials (e.g. M.D., D.O.)	Address:
State License Number:	Telephone:

**PHILADELPHIA CONTINUUM OF CARE
VERIFICATION OF DISABILITY**

<u>Option 2: Receipt of SSI/DI or VA Disability Benefits</u>	
Instructions: Receipt of SSI/DI or VA Disability Benefits must be documented using ONE of the following methods. Check the type of documentation used <u>AND</u> attach a copy of the documentation.	
<input type="checkbox"/> Written Verification from the Social Security Administration or the U.S. Department of Veterans Affairs <u>OR</u>	
<input type="checkbox"/> Copy of a disability check (e.g. SSI, SSDI, Veterans Disability Compensation)	
Agency Staff Member who Completed this Section:	
Name:	Date:
Title:	Signature:
Organization:	Email:

Please note: Project Intake staff can record an observation of a disability that, no **later than 45 days** from the **application** for assistance is confirmed and accompanied by written third party documentation.