

Reviewed and approved by the Lanc Co MyHome governance board 9-2019

The Lancaster County Coalition to End
Homelessness

PA 510
CONTINUUM OF CARE
STANDARDS AND
POLICIES

Vision: We will effectively end homelessness in Lancaster County.

*Mission: The Lancaster County Coalition to End Homelessness leads
community efforts to rapidly and sustainably house all people experiencing*

Document Revision History

Date Approved by Leadership Council	Page #	Revision Details
7/10/2018	7	Relocation, Displacement and Acquisition section added.
7/10/2018	15 & 16	RRH CM standards have additional inspection standards.
7/10/2018	15 & 16	Changed RRH (h) and TH (d) from 56% to 80%.
7/10/2018	Appendix A	Updated Annual Performance Measures for 2018.
7/10/2018	Appendix J	Removed Appendix J and replaced with VOH forms.
9/11/2019	N/A	No changes made, policy reviewed and approved as mandated by HUD yearly review policy

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Introduction

The HEARTH Act requires the Lancaster County Continuum of Care (CoC) to have written policies and procedures that govern the provision of assistance to individuals and families under the federally funded Continuum of Care programs in the City of Lancaster and the surrounding Lancaster County (24 CFR 576.400(e)). Lancaster County Continuum of Care is also requiring that these Standards and Policies be followed for all homeless organizations receiving funds through direct HUD funding, CoC sub-recipient funds, and any funding source managed by the Joint Funding Application process (United Way, HAP, ESG, CDBG). Lancaster County's Continuum of Care seeks to establish community-wide expectations on the operations of projects in the county and to ensure that the system is transparent to consumers and service providers who serve households experiencing homelessness. The Lancaster County Continuum of Care will establish a minimum set of standards and expectations in terms of the quality expected of these projects.

These standards and policies provide guidance to local providers in administering homeless assistance in the following areas:

- Eligibility standards for homeless programs.
- Standards for administration of rental and financial assistance.

All projects (with exception to Prevention and Diversion) must comply in full with the applicable standards described in this document, as well as all HUD regulations and NOFA requirements established for the CoC and ESG Programs. HUD regulations can be found at:

<https://www.onecpd.info/resources/documents/CoCProgramInterimRule.pdf>

The United States Interagency Council on Homelessness strongly encourages that communities have a goal of homelessness being: "Rare, Brief and Non-Recurring." The method utilized to meet that goal will be aggressive utilization of Housing First concepts and rapid re-housing programs. In order to measure our progress toward this goal, the Lancaster County Continuum of Care will follow the standards and policies listed below.

General Standards for all Funded Projects

General Standards for all Funded Projects

Consequences of Not Meeting Standards

Failure to meet the established standards shall trigger a review by the Lead Agency. This monitoring visit will provide technical support and guidance to improve performance standards. Organizations must show the efforts that they have undertaken to meet the standards. If the organization continues to fail to meet the performance standards established herein, despite technical assistance, funding reductions in future applications will occur.

Consumer Involvement

Projects are expected to engage consumers in ongoing program evaluation and quality improvement processes. At a minimum each project is required to survey consumers/residents and/or complete documented interviews with current consumers at least annually to obtain feedback on program service quality, the service/housing environment, and opportunities for improvement.

Cultural Competency

All homeless service providers (funded by HUD CoC, ESG and CDBG, United Way, and PA Homeless Assistance Funds) must have established cultural competency policies that provides for at least yearly training for staff that:

- value diversity;
- have the capacity for cultural self-assessment;
- is conscious of the dynamics inherent when cultures interact;
- have institutionalized culture knowledge; and
- have developed adaptations to service delivery reflecting an understanding of cultural diversity.

Data Collection

- a. All homeless service programs (funded by HUD CoC, ESG and CDBG, United Way, EFSP and PA Homeless Assistance Funds) must fully participate in Lancaster's Homeless Management Information System (HMIS) aka Empower Lancaster.
- b. All Homeless service programs will use the LCCEH HMIS Policies and Procedures (Appendix K) to provide specific guidance on collecting data.
- c. All performance measures (provider level, project type and system-wide) will be measured using data directly from the CoC's HMIS system. (See Appendix A)
- d. Programs that are specifically forbidden to use the local HMIS by other statutes or regulations (domestic violence services) cannot participate, but must collect the HMIS required data in a comparable database.
- e. As the HMIS system administrator the LCCEH will assist any CoC organization with HMIS requirements.
- f. Further information about data collection and policies can be found in Appendix I.

Displacement, Relocation, and Acquisition

Please refer to CFR578.83 for

involuntary displacement, relocation and acquisition regulations (applying to program closure, organizational bankruptcies or going out of business, etc.)

Optional/Voluntary relocation assistance. A permanent housing program participant can choose to move outside of the CoC's geographic area after consultation with PH providers and maintain PA-510 CoC rental assistance. Participants must comply with all current lease requirements. Approval will be granted on a case by case basis for

participants requesting the relocation by the LCCEH Funder's group or other ADHOC committee created by the LCCEH.

Educational Liaison

The PA-510 Lancaster City/County CoC Education Policy ensures system wide consistency for implementation of the HEARTH Act for providers to guarantee that children are enrolled in school and connected with community resources including early childhood education. (See Appendix D).

Equal Access Regardless of Sexual Orientation or Gender Identity

On September 21, 2016, HUD published a final rule in the Federal Register entitled "Equal Access in Accordance with an Individual's Gender Identity in Community Planning and Development Programs." Through this final rule, HUD ensures equal access to individuals in accordance with their gender identity in programs and shelter funded under programs administered by HUD's Office of Community Planning and Development (CPD), which includes ESG and CoC funds. This rule builds upon HUD's February 2012 final rule entitled "Equal Access to Housing in HUD Programs Regardless of Sexual Orientation or Gender Identity" (2012 Equal Access Rule), which aimed to ensure that HUD's housing programs would be open to all eligible individuals and families regardless of sexual orientation, gender identity, or marital status. The final rule requires that recipients and subrecipients of CPD funding, as well as owners, operators, and managers of shelters, and other buildings and facilities and providers of services funded in whole or in part by any CPD program to grant equal access to such facilities, and other buildings and facilities, benefits, accommodations and services to individuals in accordance with the individual's gender identity, and in a manner that affords equal access to the individual's family. The PA 510 CoC will apply this rule to all projects funded with CoC, ESG, PA HAP and United Way funding. (See Appendix E)

Evaluating Individuals and Families' Eligibility for Assistance

As set forth in the HEARTH Act, there are four categories of eligibility: 1) Literally Homeless, 2)

Imminent Risk of Homelessness, 3) Homeless Under Other Federal Statutes and (4) Fleeing/Attempting to Flee Domestic Violence. The Lancaster County Continuum of Care serves categories 1, 2 and 4. Clients "doubling up" (temporarily living with family and friends) are not eligible for assistance. (Please see attachment J for more information)

Households must be lacking sufficient resources or support networks immediately available to them that would otherwise prevent them from entering or exiting the homeless system.

Clients that are most vulnerable according to their VI-SPDAT score will be prioritized for services. See Appendix L for details.

Grievance and Appeals

See Appendix G & H

Housing First

All projects funded with CoC, ESG, CDBG, HAP and United Way funds shall adopt the Housing First philosophy. Housing First is a proven method of ending all types of homelessness, and is the most effective approach to ending chronic homelessness. Housing First offers individuals and families experiencing homelessness immediate access to permanent affordable, or supportive housing, without clinical prerequisites like completion of a course of treatment or evidence of sobriety and with a low-threshold for entry.

Mainstream Benefits and Resources

Project providers will ensure that all households they are working with are screened for and referred to all mainstream resources they may be eligible for. Notation of these referrals and any necessary follow up will be made in the HMIS system. (See Appendix K for additional information)

Other HUD Requirements

All HUD Program funded projects are expected to be familiar with and adhere to all HUD requirements as described in the CoC and ESG Program Interim Rule, applicable Notices, and HUD Program NOFA(s) under which the project is funded. This includes, but is not limited to:

- Participant eligibility.
- Prioritization.
- Allowable activities and costs
- Matching requirements.
- Calculating occupancy charges and rent.
- Displacement, relocation, and acquisition.
- Timeliness standards.
- Limitation on use of funds.
- Limitation on use of grant funds to serve persons defined as homeless under other federal laws.
- Termination of assistance to program participants.
- Fair Housing and Equal Opportunity.
- Conflicts of interest.
- Program income.
- Recordkeeping requirements.
- Grant and project changes.
- Other applicable federal requirements as explained in the CoC Program Interim Rule.

Performance Targets by Population and Program Type

CoC and ESG-funded programs must fully participate in Lancaster's Homeless Management Information System (HMIS). All performance targets will be derived from HMIS data. (See Appendix A for by project performance measures for the current year) Programs that are specifically forbidden to use the local HMIS by other statutes or regulations (domestic violence services) cannot participate but must collect the HMIS required data in a comparable database. The LCCEH is the System Administrator for the HMIS and will assist any organization with HMIS requirements.

Plain Language

All policies provided to consumers and all forms signed by consumers must be tested for and pass "plain language" testing and be available in both English and Spanish. Guidance on how to test policies can be located here:

<http://www.plainlanguage.gov/howto/guidelines/FederalPLGuidelines/usability.cfm>

Prioritization for Services

All CoC programs must follow the established LCCEH Prioritization Policies that are based on HUD's current prioritization notice(s). (See Appendix L)

Project Rejection/Denial Policies

PA 510 CoC homeless service providers and facilities must adopt policies outlining the acceptable reasons a client referred to a project can be rejected/denied access by that project. Each organization must submit their policy to the

Continuum of Care for approval annually by July 1st of each year to Jody Heinrich at jheinrich@lchra.com Any revisions or changes to project policies must be submitted to and approved by the Continuum of Care.

Security & Confidentiality Policies

The address or location of any housing or rental units of any program participant, including youth, individuals living with HIV/AIDS, victims of domestic violence, dating violence, sexual assault, and stalking; and individuals and families who have the highest barriers to housing will not be made public, except as provided under a preexisting privacy policy of the provider and consistent with state and local laws regarding privacy and obligations of confidentiality with written authorization of the person responsible for the operation of the rental unit.

Termination of Services

- a. Providers may terminate assistance to a program participant who violates program requirements or conditions of occupancy provided that they have a written policy that explains program rules and the termination process. Providers must exercise judgment and examine all extenuating circumstances in determining when violations warrant termination so that a program participant's assistance is terminated only in the most severe cases.
- b. The Termination Policy must include "due process" procedures. At a minimum, the procedures must consist of:
 - Providing the program participant with a written copy of the program rules and the termination process before the participant begins to receive assistance;
 - Written notice to the program participant containing a clear statement of the reasons for termination;
 - A minimum notice period for program termination appropriate in length for the nature of the service being provided;
 - A review of the decision, in which the program participant is given the opportunity to present written or oral objections before a person other than the person (or a subordinate of that person) who made or approved the termination decision;
 - Prompt written notice of the final decision to the program participant; and
 - When terminating hard-to-house populations programs must exercise judgment and examine all extenuating circumstances in determining when violations are serious enough to warrant termination so that a program participant's assistance is terminated only in the most severe cases.
- c. Termination under this section does not bar the recipient or sub recipient from providing further assistance at a later date to the same family or individual.
- d. Clients may use the LCCEH client grievance policy to appeal terminations after the provider's process has been completed. (See Appendix H)

Standards by Service Category

Standards By Service Category

Coordinated Entry (aka Coordinated Assessment/CHART)

All coordinated entry programs shall ensure that their programs are in compliance with Notice:

CPD-17-01 Notice Establishing Additional Requirements for a Continuum of Care Issued: January 23, 2017 (See Appendix B for details)

Pre-screening

- a. United Way 2-1-1 and street outreach workers will be the first point of entry for all persons seeking shelter services.
- b. The pre-screening will ask for basic demographic information and enter the information into HMIS.
 - Name
 - Gender
 - Social Security Number
 - Veteran Status
 - Date of Birth
 - Disabling Condition
 - Race
 - Residence Prior to Program Entry
 - Ethnicity
 - Housing Status
- c. The pre-screening completed by the United Way 211 will also ask for the following information to determine eligibility for homeless services:
 - Have you or any adult currently living in your household ever served in any branch of the US military?
 - Are you currently living on the street, or in a place that was not really meant for people to live in, or in an emergency or a transitional housing program?
 - Are you in danger of losing your housing?
 - Do you have a court order eviction notice?
 - When will you lose your housing?
- d. Individuals and families who would spend the night in an emergency shelter or on the streets without any assistance will be given 1st preference when scheduling intake assessments.
- e. Persons who are at imminent risk of homelessness within 24 hours will be given 2nd preference when scheduling intake assessments.

Assessments

- a. The assessment process documents the following:
 - Client needs based on assessment;
 - Eligibility based on written program standards for enrollment;
 - Referral, based on available resources; and
 - Disposition based on availability of housing and services in Lancaster County.
- b. Referrals for available service and available “beds or units” are made based on the approved CoC prioritization process. (See Appendix L)
- c. CA staff must provide mobile coordinated assessment services to clients unable or unwilling to utilize traditional access points. Assessments should be provided in the format and location of the client’s choice. Formats can include telephone assessments or in-person assessments.

- d. Coordinated entry assessments should last, on average, no longer than 45 minutes.
- e. Coordinated Entry assessments should be completed within 24 hours of initial referral; ideally the same business day unless the client chooses to schedule the assessment at a later time.
- f. Priority shall be given to people experiencing Category 1 literal homelessness.
- g. While Domestic Violence homeless service providers are exempt from participating in local coordinated assessment efforts, they are required to obtain and maintain similar data in a comparable database and share its aggregate data with the CoC. Coordination efforts between Lancaster's coordinated assessment efforts and DV providers will continue.

Diversion

- a. Diversion services should be provided immediately after the completion of the assessment.
- b. Diversion services will be prioritized for persons that are expected to be homeless within 24 hours.
- c. All diversion services should be used for front-door efforts. In other words, diversion is provided when an individual or family is calling for a shelter bed.
- d. The results of the diversion efforts shall be entered into HMIS.
- e. The amount, type and date of financial assistance or rental assistance provided on behalf of a client shall be entered into Lancaster's HMIS.
- f. No follow-up surveys, calls or other types of contact are required. HMIS data should indicate how and where clients exited the system.

Emergency Shelter

- a. Shelter facilities may accept clients that are not HUD-defined homeless but they must administratively segregate those clients so that HUD funds are not used for non-HUD- defined homeless clients. In order for a shelter, that does not receive government funding, to be included in the Housing Inventory Chart, 51% or more clients must be HUD-defined homeless.
- b. Shelter personnel must complete Homeless Verification forms for consumers in their shelters upon request.
- c. **Emergency shelters funded with federal funds must be a low-demand facility. In other words, there shall be no requirements for income or sobriety in order to access or maintain shelter.**
- d. Emergency shelter providers may not exit clients from emergency shelters to the streets for not obtaining permanent housing within the guideline of three (3) months if clients are enrolled and engaged in permanent housing programs (RRH & PSH).
- e. Emergency shelter facilities shall have a goal of an average length of stay of no more than 30 days.

Permanent Supportive Housing (PSH)

- a. In order to be eligible for PSH, at least one member of the household must have a disability of long duration, verified either by Social Security or a licensed professional that meets the state criteria for diagnosing and treating that condition.
- b. PSH must prioritize chronically homeless individuals and families for vacant units. The Coordinated Entry staff maintains a list (By Name list) of the most vulnerable chronically (or at risk of becoming chronically) homeless individuals and families.
- c. All funded providers must fill their program's vacant PSH beds through the Coordinated Access prioritization process outlined in Appendix L. Non-HUD funded CoC providers are strongly encouraged to fill their vacancies from this list as well.
- d. All persons served must have a completed Homeless Verification form in their file that verifies that the individual or family were homeless the night before PSH program entry.
- e. PSH programs may NOT have any requirements that are not in a standard lease. (i.e. no preconditions such as income or sobriety)

- f. People referred to PSH must have been living in a place not meant for human habitation, in emergency shelters, or institutions.
- g. Potential program participants coming from institutions must have previously lived in a place not meant for human habitation or in an emergency shelter prior to entering the institution or transitional housing. Additionally, people from institutions must have been in the institution for fewer than 90 days.
- h. Households waiting for PSH should be served in Rapid Re-Housing programs while waiting for an available PSH unit.
- i. All new PSH projects considered for funding must be tenant based or scattered site. Current project based PSH providers should consider changing current place- centered PSH to tenant based or scattered site.
- j. At least 56% of all program participants will be referred to mainstream benefits, which must be tracked in HMIS.

Prevention

- a. Any client receiving assistance must have proof of residence within Lancaster County and/or the City of Lancaster.
- b. Clients receiving homeless prevention services must have total household incomes less than 30 percent of Area Median Income (Median Family Income) for Lancaster Metropolitan Statistical Area (MSA) at initial assessment, AND who meet the criteria under the “at-risk of homelessness” definition, or who meet the criteria in paragraph (2), (3), or (4) of the “homeless” definition. ESG funds require 30% or less of AMI. All other funds should be case by case.
- c. Those clients that have been homeless previously (and received rapid rehousing assistance) should be prioritized for homeless prevention services because they are statistically shown to be more likely to become homeless.
- d. The amount, type and date of rental assistance provided on behalf of a client shall be entered into Lancaster’s HMIS. All homeless prevention consumers must have reassessments at a minimum of every three (3) months in order to continue receiving assistance.
- e. Even if only a minimal amount of financial assistance is provided—such as utility arrears/payments or housing stability case management, the HUD Housing Quality Standards apply to the unit and must be documented in the program participant’s file.
- f. At least 56% of all program participants will be referred to mainstream benefits, which must be tracked in HMIS.

Rapid Re-housing (RRH)

- a. All households served must have a completed Homeless Verification form in their HMIS file that verifies that the individual or family were homeless the night before program entry.
- b. Rapid re-housing is not designed to comprehensively address a recipient’s overall service needs or poverty. It is designed to assist persons back into permanent housing as quickly as possible.
- c. Caseload Ratios
 - Case Management Services: Staff serving clients maintaining housing should maintain a minimum caseload ratio of 40 clients to one staff member.
 - Housing Location Services: Staff serving initial clients seeking housing should maintain a minimum caseload ratio of 25 clients to one staff member.
- d. Low Barrier Entry: Conditions of service concerning substance abuse or other aspects of clients’ lives shall not be part of rapid re-housing programs. Clients are required to abide with the terms of the lease and no more.
- e. All rapid re-housing programs shall be tenant-based. No rapid re-housing programs shall be project based.

- f. All RRH case managers/programs must utilize the staff at the CoC Housing Location program (Community Housing Solutions (CHS)) to provide at a minimum the HUD quality standards inspection, rent reasonableness determination and authorization of initial rents/security deposits.
- g. Households waiting for PSH should be served in RRH programs while waiting for an available PSH unit.
- h. At least 80% of all program participants will be referred to mainstream benefits, which must be tracked in HMIS.
- i. Provision of Financial and Rental Assistance
 - There shall NOT be an income limit for receiving rapid re-housing services. The goal is to move persons experiencing homelessness out of shelter. If diversion is done properly, higher income persons will likely not end up in shelter.
 - Rapid re-housing activities can only be provided to persons in Category 1 and 4. (See attachment J)
 - Rapid re-housing services shall not guarantee financial assistance to landlords on behalf of clients.
 - The provision of financial assistance or rental assistance on behalf of a household must be calculated monthly based on financial need. Every three (3) months after enrollment, each household shall be carefully evaluated for the need for further financial assistance or rental assistance. In no case shall rental assistance be provided on behalf of a client for more than 24 months during any three-year period (24 CFR 576.106).
 - The amount, type and date of financial assistance and rental assistance provided on behalf of a client shall be recorded in Empower Lancaster-HMIS.
 - Amounts for financial assistance and rental assistance should be determined on the same basis across all programs. The basis for the provision of financial services should be flexible, using a case by case basis implementing the same budgeting format. (Example, no household pays more than 70% of its gross income on housing)
 - Financial assistance and rental assistance amounts should not have a maximum amount. The amounts should be determined solely on a case by case basis determined by need.
 - The goal for the average cost per household for rapid re-housing activities (rental assistance (including utilities), financial assistance AND the cost of providing services) should not exceed \$5,000 for individuals and \$12,500 for families.
 - The standard for the length of time from the determination of homelessness to placement into permanent housing is no more than an average of 45 days. The goal for the length of stay is 30 days.
 - Additional eligible costs may include moving costs such as truck rentals, hiring a moving company, and temporary storage fees not exceeding 3months
- j. Case Management
 - Participants must meet with a case manager at least once per month to reassess budget and address any issues that affect continued household stability.
 - Case managers will meet with participants in their unit at least quarterly, at which time a visual HGS inspection will be completed and documented in the participant's HMIS file.
 - A full HQS inspection must be completed and documented in the participant's HMIS file yearly.
 - Follow-up case management can be provided for up to six months after a financial subsidy ends. Case management services after the client has been housed is limited to evaluating progress and addressing crises and monitoring housing stability.
 - Income eligibility must be determined when the household reaches their twelfth month of service in the program. Household income for ESG requirements must be under 30% Area Median Income (AMI) for household to remain eligible for services and/or rental assistance beyond twelve (12) months. Other funding streams should be considered case by case.

- Organizations providing rapid re-housing services shall follow all requirements for HUD Housing Quality standards, rent reasonableness and if applicable, lead based paint.
- Even if only a minimal amount of RRH assistance is provided—such as security deposit and first month’s rent or housing stability case management (Services), the HUD Housing Quality Standards apply to the unit and must be documented in the program participant’s file.
- Per ESG requirements: At the annual assessment client households must fall BELOW 30% Median Family in order to continue receiving case management services

Street Outreach

- a. Workers will be an extension of the coordinated assessment program and will be expected to complete a pre-screening and assessment with individuals as they encounter them reducing the number of contacts individuals will need to get into the system.
- b. Street outreach should be targeted/provided to individuals or families living in places not meant for human habitation.

Transitional Housing (TH)

- a. Transitional housing should be designated for high barrier households. Transitional housing is the activity of last resort when other efforts have not resulted in placement in permanent housing.
- b. In order for a transitional housing facility to be included in the LCCEH HUD Housing Inventory Chart (HIC), it must serve 51% or more clients that meet the HUD definition of homeless. Transitional housing providers must document that clients do or do not meet the HUD definition of homelessness. Clients not meeting the HUD definition of homelessness shall be entered into designated non HUD programs in HMIS.
- c. HUD requires that households in transitional housing CANNOT qualify for permanent supportive housing unless prior to the TH placement, they were living on the streets, in an emergency shelter or a safe haven.
- d. At least 80% of all program participants will be referred to mainstream benefits, which must be tracked in HMIS.

Appendix A: Performance Measures

Being updated for FY2022-2023

Appendix B: HUD Additional Requirements for CoC

<https://www.hud.gov/sites/documents/17-01CPDN.PDF>

Appendix C: Data Quality Plan

Timeliness – entering data into the system in a timely manner in order to reduce data errors. This also ensures that data is accessible when needed by other users. This component will be assessed on the program level using a mean calculation across the entire program.

- Benchmarks for Timeliness:
 - Emergency Shelter Programs: All Universal Data Elements and relevant HUD required assessments entered within an average of 2.75 days of intake/program exit.
 - Transitional Housing: All Universal Data Elements and relevant HUD required assessments entered within an average of 7 days of intake/program exit.
 - Outreach Programs: All Universal Data Elements entered within two days of initial contact. Upon engagement for further services or three contacts, the remaining HUD required assessments should be entered within an average of 2.75 days.
 - Rapid Re-Housing and Supportive Services Only Programs: All Universal Data Elements and relevant HUD required assessments entered within an average of 7 days of intake/program exit.
 - Coordinated Assessment Programs: All Universal Data Elements and relevant HUD required assessments entered within an average of 2.75 days of intake/program exit.
 - Case Notes and all Program Services should be entered within 7 days of client contact/service provided.
 - Service providers should immediately contact the LCCEH via email when an authorized user is no longer employed by the provider to prevent unauthorized access to consumer information.

Completeness – entering data into HMIS so that none of the required data points have missing or incomplete data e.g. missing digits of SSN, misspellings, Data Not Collected, etc.

- Benchmarks for Completeness:
 - The goal of LCCEH is to collect 100% of all data elements. However, the Coalition recognizes that this is not always possible in all cases. Therefore, LCCEH has established an acceptable range of null/missing/Data Not Collected of less than 2% and Client Doesn't Know/Client Refused of less than 10% of required information system-wide. Individual programs will have different benchmarks according to their program type (See Appendix A-Acceptable Data Quality Levels by Program Type).
 - Complete data is critical to fully understand the demographic characteristics and service use of persons utilizing the programs/services in Lancaster County. Complete data allows for confident reporting and data analysis on the nature and extent of homelessness in Lancaster County, such as:
 - Unduplicated counts of clients served
 - Patterns of use for people entering/exiting services
 - Evaluation of program/system effectiveness
 - Complete data also helps LCCEH to meet compliance requirements set forth in the NOFA, by reporting on things such as system percentages of missing/null data.

- In addition to the HUD required data, LCCEH has also set some standards for a complete client file. The following items are required in every HoH file within HMIS, unless otherwise specified.
 - Release of Information forms can either be saved as an uploaded document or a case note template and are valid for 3 years.
 - Homeless Verification Forms must be uploaded within 7 days of a client seeking housing related services (outside of Emergency Shelters, Outreach or Coordinated Assessment).
 - Rapid Re-Housing requires financial assessments every three months while providing financial assistance to clients (this applies to all household members over 18 years of age).
 - Changes in income should be accompanied by uploaded verification (household members over 18 years of age).
 - Changes in address should be noted on the client demographics (and updated for all household members).
 - Case Notes should be completed.
 - Services should be logged.

Accuracy – all data entered into HMIS needs to be valid, i.e. it needs to accurately represent information collected by users. The data in HMIS needs to be the best possible representation of reality as it relates to clients and the programs that serve them.

All data entered into HMIS must be a reflection of information provided by the client, as documented by the intake worker or otherwise updated by the client and documented for reference. Intentionally recording inaccurate information is strictly prohibited and grounds for HMIS access being revoked. To ensure the most accurate data, programs should review active clients' information on a monthly basis and update records as needed.

Monitoring – LCCEH, as the HMIS lead agency, will monitor programs' HMIS activities and data quality based on the above benchmarks. LCCEH recognizes that data produced by the HMIS is critical in order to meet the reporting and compliance requirements of individual programs and the wider CoC. As such, all HMIS programs are expected to meet the data quality benchmarks described in this document. To achieve this, HMIS data will be monitored in order to identify and resolve issues that crop up related to Timeliness, Completeness or Accuracy of all data. All monitoring will be done according to the Data Quality Monitoring Plan and will happen at least annually.

Incentives and Enforcement

- All program administrators must ensure that the Universal Data Elements and other HUD required assessment data are being completed in HMIS in such a way that the data meets the standards laid out in the Data Quality Plan.
- Programs that do not adhere to the Data Quality Plan will be warned of their deficiencies and given training on how to correctly enter data into HMIS.
- Programs that receive two consecutive warnings yet continue to default will have HMIS access suspended until such time that LCCEH is presented with a plan to correct the data entry errors and maintain data quality that meets the standards laid out in the Data Quality Plan.

Appendix D: PA-510 Education Policy

The PA-510 Lancaster City/County CoC Education Policy ensures system wide consistency for implementation of the HEARTH Act for providers to guarantee that children are enrolled in school and connected with community resources including early childhood education.

Effective January 1, 2011 this policy establishes that:

(1) Each provider organization must identify a liaison within their organization to be responsible to disseminate information to parents with children to ensure that all school age children are enrolled in school by completing the CoC district notification form that is then sent to the Homeless Student Liaison in the district in which the shelter is located.

(2) At intake into a shelter, each parent is provided a packet of information on rights to education provided by the McKinney-Vento Act as well as contact information on all available early childhood education programs.

Adopted November 10, 2010

Appendix E: Equal Access in Accordance with an Individual's Gender Identity in Community's Planning and Development Programs

<https://www.govinfo.gov/content/pkg/FR-2016-09-21/pdf/2016-22589.pdf>

Appendix F: HUD Rapid Re-Housing: ESG vs. C

https://files.hudexchange.info/resources/documents/Rapid_Re-Housing_ESG_vs_CoC.pdf

Appendix G: Grievances and Appeals Policy

Applicability

This policy applies to organizations receiving Continuum of Care, Emergency Solutions Grant, Community Development Block Grant or other funds from the Lancaster County Coalition to End Homelessness and the County of Lancaster and the City of Lancaster, for the implementation of programs serving individuals experiencing or at-risk of experiencing homelessness, which contractually identify the requirement to follow the Written Standards and Policies for Ending Homelessness for Lancaster County.

Failure to comply with the Written Standards and Policies for Ending Homelessness for Lancaster County will trigger a review by one of the aforementioned funders. The procedures prescribed in this policy shall be applicable to grievances arising from monitoring (both remote and on-site) performed by the Lancaster County Homelessness Coalition or other government funders such as the County of Lancaster and the City of Lancaster.

This policy covers the implementation of the standards and policies, not the actual standards and policies themselves.

Procedures:

Funding agencies conduct periodic monitoring through the review of monthly reports, HMIS data and by conducting formal monitoring visits. When a subrecipient is found to be in non-compliance with the Written Standards and Policies, the funding agency will inform the Lead Agency for review, as described in Section VI of the Written Standards and Policies. However, this policy provides subrecipients with the right to contest the finding of non-compliance by way of the following:

1. First Step – The subrecipient should orally explain the grievance to the Director of the funding agency within seven calendar days after knowledge of the grievance or reason for which the grievance has occurred. The Director can request additional information to be submitted in writing. The Director shall attempt to resolve the grievance to the mutual satisfaction of both parties within seven calendar days after its presentation. The appropriate contacts are:
 - a. Lancaster County Housing and Redevelopment Authorities
28 Penn Square Suite 100
Lancaster, PA 17603
(717) 394-0793 x234
 - b. City of Lancaster
120 North Duke Street
Lancaster, PA 17602
(717) 291-4760

If the organization does not proceed with its grievance to the second step within seven calendar days after receiving the appropriate funding organization's decision, the grievance shall be considered satisfactorily resolved.

2. Second Step - If a satisfactory settlement is not reached at the first step, the organization shall, within seven calendar days after receiving the first-step decision, submit the grievance, in writing, to the Co-Chairs of the Lancaster County Homelessness Coalition at the following address:

Lancaster County Homelessness Coalition
28 Penn Square, Suite 100

Lancaster, PA 17603

The Co-Chairs of the LCHC shall review the grievance with the Director of the applicable funding organization, then with the subrecipient and render a written, final decision within thirty calendar days after submission of the grievance.

Implementation of Decision: If the decision requires action to be taken against the funding organization against whom the grievance has been filed, the Lead Agency will be charged with implementing any corrective steps. The Lead Agency will also be responsible for monitoring future compliance with all requirements.

If the decision is upheld, the Lead Agency will track the non-compliance. The Lead Agency will evaluate the number of occurrences and severity of non-compliance and determine corrective action to be taken against the agency.

Appendix H: Client Grievances and Appeals Policy

Applicability

This policy applies to organizations receiving Continuum of Care, Emergency Solutions Grant, Community Development Block Grant or other funds from the Lancaster County Homelessness Coalition and/or the Lead Agency (Lancaster County Department of Behavioral Health and Developmental Services) and the County of Lancaster and the City of Lancaster, for the implementation of programs serving individuals experiencing or at-risk of experiencing homelessness.

Client Grievance and Appeals Policy

Any organization or program receiving funds must have a written Grievance and Appeals Policy for clients who feel they were wrongfully terminated, exited or otherwise served by the organization or program. This policy must also be included as an attachment to the organization or program's policy.

The organization or program's policy must include procedures for clients to file a grievance and/or appeal against the agency or program. Clients must be made aware of their right to file a grievance and/or appeal and evidence must be maintained in the client file.

Policy Approval by Lead Agency

Client Grievance and Appeals Policies must be provided to the funding agency and approved by the lead agency.

Client Dissatisfaction

If a client engaged in the grievance and/or appeals process and is not satisfied with the result of the process, he or she has a right to appeal to the funder of the program. Clients may only file a grievance if the organization has violated a standard or policy established by the LCCEH. Grievances may not be filed simply because the client disagrees with the decision made by the organization. Client's grievance must be based on one of the following issues in order to file a grievance with the funder of the

program:

- Client was not prioritized in accordance with Standards and Policies
- Organization placed conditions for service that are not generally contained in a standard lease (sobriety, compliance with case management services, income, etc.)

- The organization did not conduct an on-site habitability review and/or lead paint assessment, as applicable
- The client believes their confidentiality was jeopardized
- The client believes they were discriminated against as per 24 CFR 5.105(a)
- The client's CHART Assessment was offered within 24 hours (not including weekends and holidays) of scheduling phone call.
- The client's case manager was absent and no contingency plan was followed to cover the absence

Procedures for a client to file a grievance with the funder are as follows:

1. First Step – The client should orally explain the grievance to the Director, or their designee, of the funding agency within seven calendar days after knowledge of the grievance or reason for which the grievance has occurred. The Director shall attempt to resolve the grievance to the mutual satisfaction of both parties within seven calendar days after its presentation. The appropriate contacts are:
 - a. Lancaster County Housing and Redevelopment Authorities
28 Penn Square Suite 100
Lancaster, PA 17603
(717) 394-0793 x211
 - b. City of Lancaster
120 North Duke Street
Lancaster, PA 17602
(717) 291-4743

If the client does not proceed with its grievance to the second step within seven calendar days after receiving the appropriate funding organization's decision, the grievance shall be considered satisfactorily resolved.

2. Second Step - If a satisfactory settlement is not reached at the first step, the organization shall, within seven calendar days after receiving the first-step decision, submit the grievance, in writing, to the Co-Chairs of the Lancaster County Homelessness Coalition at the following address:

Lancaster County Homelessness Coalition
28 Penn Square, Suite 100
Lancaster, PA 17603

Appendix I: HMIS Policy and Procedures

Appendix J: Homeless Verification

HUD requires that all of the clients who are enrolled in programs that are paid for by HUD funds fit the HUD definition of homelessness. That definition states that a person must be literally homeless, living in a shelter, fleeing domestic violence or exiting an institution (hospital, prison, etc.) after being there less than 90 days and otherwise meeting the definition before entering that institution. HUD also requires that clients go through some sort of verification process, to ensure that they are homeless when seeking services.

Studies have shown that many people will self-resolve in 10-14 days, which is why we have determined that after 14 days, an updated Homeless Verification Form should be obtained (see examples below).

The Homeless Verification Form is required for every client that is enrolled in a program paid for by HUD (except ES). Historically, CHART fills these forms out when clients meet the HUD definition. However, CHART also assesses people who do NOT meet the HUD definition (say, seeking shelter that day) and would therefore NOT be able to fill out Homeless Verification Form for that client.

Here are a few examples of how the system should flow:

1. Example 1: CHART send you a referral for client Jane Doe, but your program is full and is not taking on new clients. 4 weeks after the referral comes in a spot opens up, you will need to verify the clients is still homeless before enrolling them in your program. That would require getting a signed form from an emergency shelter (if that is where the client is staying) or an outreach worker (if the client is unsheltered). If the client has moved in with a family member or friend, they are no longer homeless per HUD's definition and would not be eligible for services.
2. Example 2: CHART sends you a referral and you have an immediate opening. Check the client's file and verify whether the CHART worker was able to fill out the Homeless Verification form. If the form has been uploaded into the client file, and you verify with the client at intake their prior residence meets HUD's definition (part of the "HUD Universal Assessment" in Empower Lancaster) you should be good to go. If there is no form and they are at a shelter, the shelter staff will need to fill out the form.

While CHART has historically filled out that initial verification form, we are requiring that all programs obtain an updated form (if older than 14 days) when enrolling a client in a HUD-funded program. This will mean reaching out to Emergency Shelters' staff or outreach workers and asking for a completed Homeless Verification Form to be sent to you.

If you have further questions, you can contact Jody Heinrich (jheinrich@lchra.com) at Lancaster County Homeless Coalition. The HUD requirements can also be found in our Performance Standards and Policies document, under the Recording Requirements in Appendix B.

Appendix K: Enlisting Mainstream Resources and Programs to End Homelessness

https://www.usich.gov/resources/uploads/asset_library/Enlisting_Mainstream_Resources_2016.pdf

Appendix L: Prioritization Policy

Helping Those First That Need It The Most.

PURPOSE: The HEARTH Act requires the Lancaster County Continuum of Care (CoC) to have written policies and procedures that govern the provision of assistance to individuals and families under the federally funded Continuum of Care programs in the City of Lancaster and the surrounding Lancaster County (24 CFR 576.400(e)). One of the policies within these performance standards and policies is the Prioritization Policy. This policy will provide guidance to local providers in administering homeless assistance in prioritizing individuals for service and housing based on their need. These polices are consistent with the HUD Notice CPD-14-012: Prioritizing Persons Experiencing Chronic

Homelessness in Permanent Supportive Housing and Recordkeeping Requirements for Documenting Chronic Homeless Status.

Priorities:

1. **First Priority: Homeless Individuals and Families with a Disability with the Most Severe Service Needs.** An individual or family that is eligible for CoC Program-funded PSH who has been living or residing in a place not meant for human habitation, a safe haven, or in an emergency shelter for any period of time, including persons exiting an institution where they have resided for 90 days or less, but were living or residing in a place not meant for human habitation, a safe haven, or in an emergency shelter immediately prior to entering the institution and has been identified as having the most severe service needs.
2. **Second Priority: Homeless Individuals and Families with a disability with a Long Period of Continuous or Episodic Homelessness.** An individual or family that is eligible for CoC Program-funded PSH who has been living or residing in a place not meant for human habitation, a safe haven, or in an emergency shelter continuously for at least 6 months or on at least three separate occasions in the last 3 years where the cumulative total is at least 6 months. This includes persons exiting an institution where they have resided for 90 days or less but were living or residing in a place not meant for human habitation, a safe haven, or in an emergency shelter immediately prior to entering the institution and had been living or residing in one of those locations for at least 6 months or on at least three separate occasions in the last 3 years where the cumulative total is at least 6 months.
3. **Third Priority: Homeless Individuals and Families with a Disability Coming from Places Not Meant for Human Habitation, Safe Havens, or Emergency Shelters.** An individual or family that is eligible for CoC Program-funded PSH who has been living in a place not meant for human habitation, a safe haven, or an emergency shelter. This includes persons exiting an institution where they have resided for over 90 days or less but were living or residing in a place not meant for human habitation, a safe haven, or in an emergency shelter immediately prior to entering the institution.
4. **Fourth Priority: Homeless Individuals and Families with a Disability Coming from Transitional Housing.** An individual or family that is eligible for CoC program-funded PSH who is coming from transitional housing, where prior to residing in transitional housing lived on the streets or in an emergency shelter, or a safe haven. This priority also includes homeless individuals and homeless households with children with a qualifying disability who were fleeing or attempting to flee domestic violence, dating violence, sexual assault, or stalking and are living in transitional housing- all are eligible for PSH even if they did not live on the streets, emergency shelters, or in safe havens prior to entry in the transitional housing.

Eligibility

All

- No additional requirements allowed beyond those of funders.
- Any requirements stipulated by funders would apply.

Emergency Shelter

- Only refer people to emergency shelter if all attempts at diversion have failed.
- Must be:
 - literally homeless; and
 - Can be safely maintained in a shelter, and
 - Not in need of emergency medical or psychiatric services or danger to self or others, and
- Cannot discriminate per HUD regulations (24 CFR 5.105(a)), no requirements for identification, income, employment and transgender placement based on client's gender identification.

Transitional Housing

- Only for clients for whom all efforts at rapid-re-housing have not resulted in placement in permanent housing within 3 months.
- Clients must come from emergency shelters and streets only.
- If in treatment, must have been in emergency shelter or on streets prior to treatment.
- In rare cases, can be used for persons on the waiting list for permanent supportive housing and awaiting vacancy (through coordinated access protocols).

Rapid Re-housing

- Unsheltered households, or sheltered households that are unable to attain their own housing within 10 days AND
- No sobriety requirements
- Use progressive engagement concept

Permanent Supportive Housing (PSH)

- Most vulnerable chronically homeless clients as defined in CPD Notice 14-012, or
- Clients who cannot be diverted, and
- Coming from streets or shelters, and
- Has a disability that requires support services to maintain housing and meet lease obligations, and
- Has high score on the vulnerability index, and
- a history of high utilization of services, i.e. hospitalizations, incarcerations, detox programs, foster care placement, etc.

Targeting

Transitional housing

- No income, or
- 2 or more homeless episodes in the past 3 years (defined as an exit from the homeless system of at least 30 days), or
- Coming from treatment program but homeless prior to entering treatment.

Permanent Supportive Housing

- Persons meeting the HUD definition of chronically homeless shall be prioritized first.
- Chronically homeless persons with the longest histories of living on the streets and/or in shelters shall be prioritized.

Rapid Re-housing

- Households fleeing domestic violence,
- People coming out of prison, or
- People who have applied for SSI or SSDI but have not received approval for benefits

Appendix L: Prioritization Notice

<https://www.hud.gov/sites/documents/16-11CPDN.PDF>

Appendix M: Record Keeping Requirements for Homeless Definition

https://files.hudexchange.info/resources/documents/HomelessDefinition_RecordkeepingRequirementsandCriteria.pdf