



COORDINATED ENTRY SYSTEM POLICIES AND PROCEDURES

Date Approved by Continuum of Care Board: December 20, 2023

GOAL

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

- dynamic prioritization
- collaborative coordination
- intentional resource utilization
- equitable resource distribution
- regional service planning area prioritization

CES is required to incorporate all programs funded through the Continuum of Care (CoC) and the Emergency Solutions Grants (ESG). Other services, shelter and housing program receiving funding other than CoC and ESG funding may voluntarily participate in CES. While the goal is to incorporate as many homeless service programs as possible, including supportive services, shelter and housing, into CES, not all supportive service, shelter or housing programs participate in CES.

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

- all CoC- and ESG-funded programs, including survivor dedicated resources
- local and state funded programs required to participate in CES
- any resources that voluntarily participate in CES

CES DOCUMENTS AND REGULATIONS

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

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

[HUD Prioritization Notice CPD-16-11 – Notice on Prioritizing Persons Experiencing Chronic Homelessness and Other Vulnerable Homeless Persons in Permanent Supportive Housing: This Notice establishes a recommended order of priority for CoC-funded permanent supportive](#)

[housing to serve households experiencing chronic homelessness with the most severe service needs first.](#)

[Continuum of Care \(CoC\) Program Interim Rule 24 CFR 578: The CoC program interim rule provides guidance on the regulatory implementation of the CoC Program, including CES.](#)

[Emergency Solutions Grants Interim Rule 24 CFR 576: The ESG interim rule provides guidance on the regulatory implementation of the ESG Program, including the use of CES.](#)

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

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

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

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

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

COMMON TERMS AND DEFINITIONS

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

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

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

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

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

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

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

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

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

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

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

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

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

Permanent Supportive Housing (PSH) is housing that includes supportive service to assist formerly homeless individuals and families with a disabling condition to live independently and maintain housing stability.

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

Service Planning Area (SPA) is a regional sector within Orange County. The three geographic regions are the North, Central and South Service Planning Areas designated to improve service

coordination and align resources among regional cities in Orange County. Reference the Planning section for the Service Planning Areas.

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

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

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

ROLES AND RESPONSIBILITIES

CES involves cross-system collaboration and communication between the CES lead agency, the CES virtual front door (VFD), CES access points, and Housing Providers.

CES Lead

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

The CES lead agency's responsibilities include:

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

CES Virtual Front Door (VFD)

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

The CES VFD's responsibilities include:

- Facilitating referrals to CES access points for eligible households.
- Screening for sub-population specific service needs, including survivors, transitional aged youth (TAY), veterans, and family status.

CES Access Points

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

CES access point responsibilities include:

- Connect eligible households with CES through a standard assessment process.
- Offer additional services and resources to support with housing crisis needs.
- Represent the household's needs in CES.
- Maintain accurate and timely data in HMIS or a comparable database for survivors.

Matchmakers

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

Matchmaker responsibilities include:

- Facilitating referrals for shelter, housing, and supportive services resources, including survivor-specific ESG- and CoC-funded resources.
- Facilitating referrals between CES for Individuals, Families and Survivors.
- Providing support to CES access points and Housing Providers participating in CES.

Housing Providers

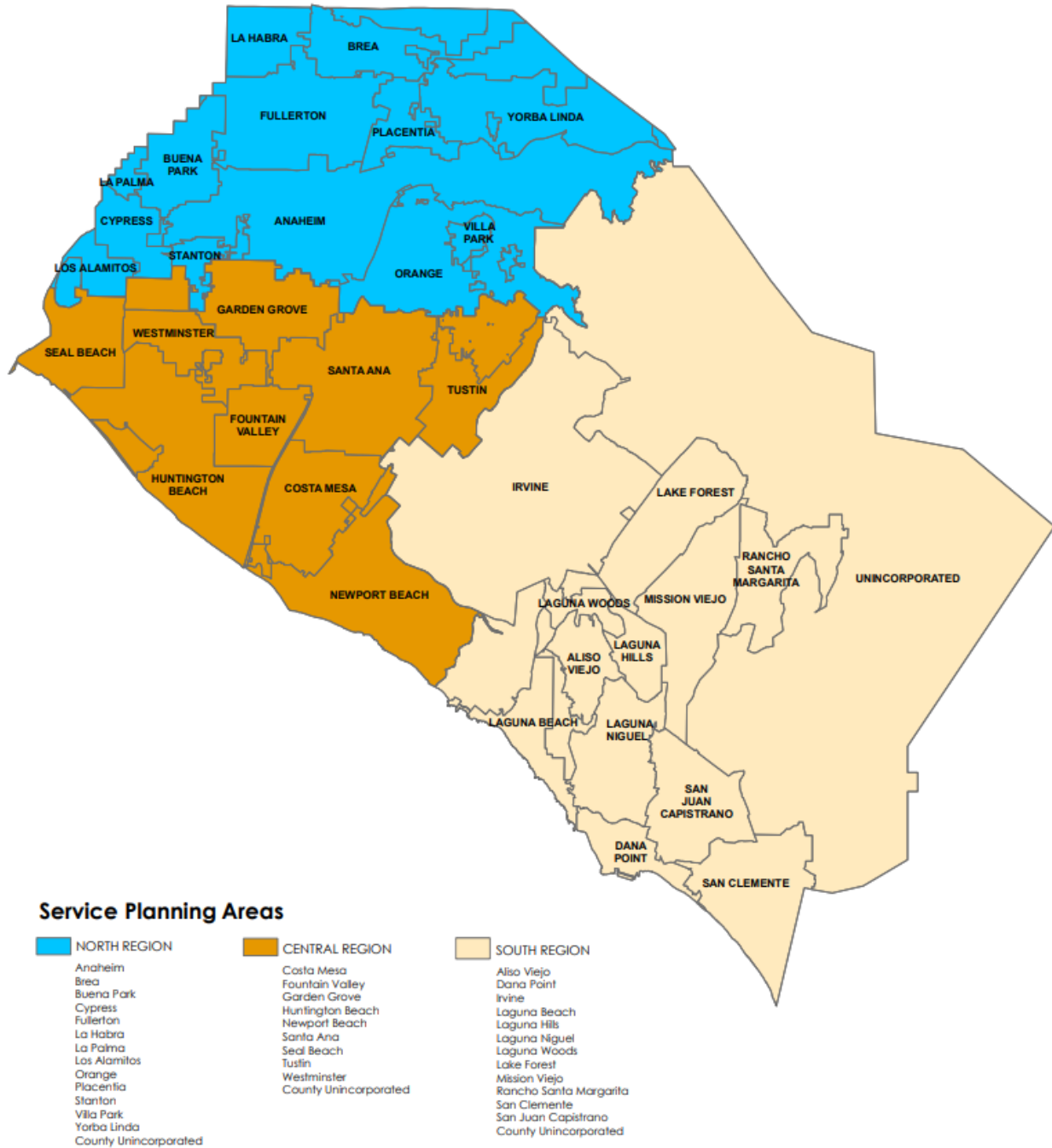
Housing Providers are agencies that provide resources for people at risk of homelessness or experiencing homelessness. Housing Provider resources include shelter, supportive services, homeless prevention assistance, rapid rehousing, permanent supportive housing and other permanent housing. All CoC- and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

Housing Provider responsibilities include:

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

PLANNING

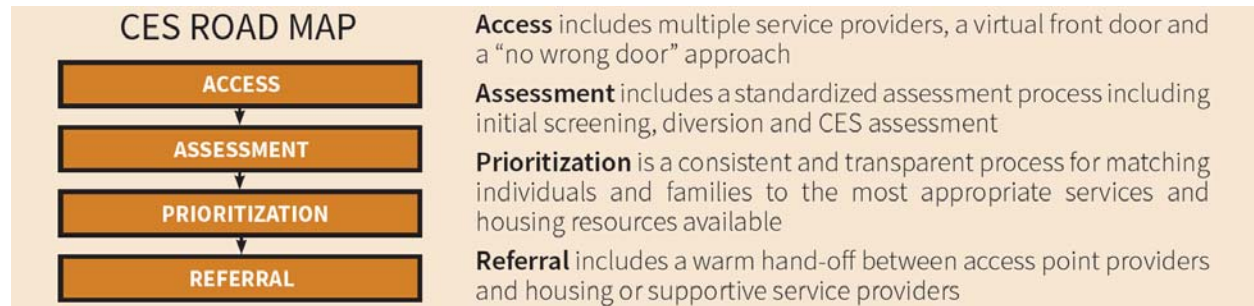
The Orange County CoC CES serves people experiencing homelessness in the CA-602 Orange County CoC, which covers the entire geographic area of Orange County. To ensure full coverage of Orange County's geographic area, the CoC utilizes SPAs to allow for targeted services and resource allocation and regional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



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

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

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



ACCESS

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

While marketing will encourage people who are part of a particular cohort to connect with particular access points for a referral to CES, everyone in need will be accommodated and assisted at any access point. All materials will be affirmatively marketed to eligible persons regardless of race, color, national origin, religion, sex, age, familial status, disability, actual or perceived sexual orientation, gender identity, marital status, criminal history, and those who are least likely to complete a CES Housing Assessment in the absence of special outreach. Marketing materials will also be provided in formats accessible to all individuals, including those with disabilities and Limited English Proficiency (LEP).

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

Access to CES occurs after a person’s immediate crisis needs have been identified and their basic client information has been entered into HMIS or a comparable database for survivors. Throughout Orange County, an array of homeless service providers serves as access points. Access points include mobile street outreach teams, navigation centers, emergency shelters and

a virtual front door. Access points are distributed geographically throughout the County in all three Service Planning Areas (North, Central, and South) and the virtual front door provides access 24 hours a day through a call center and online access.

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

Access Model

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

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

Orange County CES is intended to reduce barriers to available emergency services through streamlined and transparent access. In addition, people experiencing homelessness may access emergency services not participating in CES and, when immediate access to emergency services is available at emergency services that participate in CES, people may access emergency services during hours when CES intake and assessment processes are not operating and then be connected with CES as soon as the intake and assessment processes are operating. Completing the standardized Housing Assessment is not a requirement and no individual or family will be denied access to the crisis response system based on willingness to participate in the Housing Assessment process. Regardless of people's willingness to complete the standardized CES Housing Assessment, people will be warmly welcomed into emergency shelters and/or other emergency services, as available.

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

Individuals and families experiencing a housing crisis in Orange County have two ways to connect with CES:

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

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

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

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

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

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

If a household identifies as a family that includes minor children, the household will be referred to a family access point. If the household identifies as an adult-only household, the household will be referred to an individual access point. Family and individual access points include access points providing specialized subpopulation services for survivors, TAY and veterans and access points that provide generalized services for people experiencing homelessness or who are at risk of homelessness.

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

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

If the household identifies as including survivors, and requests to be connected to survivor-specific housing options or other assistance for survivors (such as emergency shelter, counseling, etc.), access point staff will immediately offer a referral to a victim service provider serving as a CES access point.

Accessibility

Orange County CES ensures that access points are accessible to all individuals and families, including those with disabilities and limited English proficiency. In cases where particular access points are inaccessible for participants for any reason including, but not limited to, structural

barriers, language barriers, or transportation limitations, individuals and families will be accommodated at alternative access points or by a street outreach team with the appropriate auxiliary aids and services necessary to ensure effective communication and completion of the standardized assessment.

Safety Planning

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

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

ASSESSMENT

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

- Pre-Assessment Screening
- Shelter Assessment
- Housing Assessment
- Survivor Assessment
- Stepping Up Assessment
- Moving On Assessment
- Prevention Assessment

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

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

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

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

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

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

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

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

If an individual or family is in crisis and requires and chooses shelter, the following steps must be taken:

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

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

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

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

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

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

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

Providers serving as access points have completed training on conducting the standardized CES assessments and entering data into HMIS or a comparable database for victim service providers. Updated training is provided at least annually. Ongoing support and training are available upon request and as resources permit.

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

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

PRIORITIZATION

When the need for services is greater than resources available, CES utilizes an established prioritization schema approved by the CoC Board to connect individuals and families experiencing homelessness or at risk of homelessness with shelter, housing and supportive services available through CES. CES has no authority over services, shelter and housing programs that do not participate in CES. Services available through CES include some, but not all, housing navigation and stabilization services. Shelter opportunities available through CES include some, but not all, of the emergency shelter, interim housing and transitional housing operating in Orange County. Housing opportunities available through CES include some, but not all, Permanent Supportive Housing, Housing Choice Vouchers, Rapid Rehousing, and other housing opportunities. At minimum, all CoC and ESG funded services, shelter and housing will prioritize individuals and families with the most urgent and severe needs on the CES prioritization list following the prioritization process described below who are eligible for the service, shelter or housing opportunity available through. Other service, shelter or housing resources will be encouraged, but not required, to participate in CES if privately or alternatively funded.

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

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

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

CES prioritization is a dynamic process. For all services, shelter and housing opportunities available through CES, CES will prioritize individuals and families with the longest length of homelessness in the community as collected in HMIS following the most recent HMIS Data Standards and highest service needs as determined using CES program intake, the standardized CES assessments and case conferencing amongst the CES participating agencies, as needed and appropriate. The case conferencing occurring with CES participating agencies is aimed at ensuring the individuals and families are prioritized per the CES policy for services, shelter and housing opportunities appropriate to their service needs according to their current circumstances. A regional SPA distribution prioritization based on the most recent finalized point in time count is

used to distribute non-geographically designated resources by SPA to avoid forcing individuals or families to move long distances unless by participant choice.

The primary factors considered during prioritization are chronic homelessness as defined in 24 CFR 578.3, length of the current episode of homelessness and permanent disabling conditions as defined in section 401(9) of the McKinney-Vento Homeless Assistance Act ([42 U.S.C. 11360\(9\)](#)). The current episode of homelessness starts when the individual or family begins experiencing homelessness as defined in Attachment A after residing in permanent or temporary housing for at least seven nights or staying in an institution for 90 days or more. Another factor in the prioritization process is connection to shelter, which is aimed at increasing system flow and maximizing limited shelter and housing resources. The sole prioritization factor for households experiencing chronic homelessness will be length of the current episode of homelessness. For households experiencing literal homelessness and not chronic homelessness, the prioritization factors are length of the current episode of homelessness, disabling conditions and shelter status. Exceptions to the prioritization may be made through case conferencing amongst the CES participating agencies as appropriate to meet specialized client needs and agreed to through consensus by the CES participating agencies. In addition, case conferencing amongst the CES participating agencies will be employed to ensure resources are aligned to client needs and promote effective resource utilization.

All services, shelter and housing opportunities available through CES, except survivor-specific resources, will prioritize chronically homeless individuals and families as defined in 24 CFR 578.3 that are the most appropriate and eligible referral to the available resource. Chronically homeless individuals and families with the longest length of the current episode of homelessness and with the most significant service needs will be prioritized over chronically homeless individuals and families with shorter lengths of homelessness and less significant needs following the prioritization process described above. Case conferencing amongst the CES participating agencies will occur as needed to ensure that the available resource best meets the needs of the individual or family being prioritized by the CES prioritization policy.

Survivor-specific resources will prioritize survivors with the highest score on the Survivor Assessment who are interested and eligible for the available survivor-specific housing resource.

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

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

Housing opportunities that serve a specific target population may receive referrals of that target population. To target a specific population outside of existing practices and community standards, housing providers must provide documentation to CES of receipt of funding that specifies the funder-defined targeting criteria prior to receiving a referral. Housing providers with targeted housing opportunities will receive referrals from CES that meet the stated targeting criteria, following the system wide prioritization policy for matches.

Participants remain enrolled in CES until the participant is permanently housed, opts out of participating in CES, or becomes inactive. Participants will be made inactive in CES when exited from access point services or after 90 days of non-engagement with access points or HMIS participating agencies as documented in HMIS or the comparable database for victim service providers. Participants are removed from the prioritization list for shelter referrals available through CES when exited from CES or after 7 days of non-engagement with an access point or HMIS participating agencies as documented in HMIS. Participants are removed from the prioritization list for services and housing opportunities when exited from CES or after 90 days of non-engagement with access points or HMIS participating agencies as documented in HMIS.

Scenario 1: CES receives 5 HCVs for non-elderly individuals. Based on the 2022 Point in Time results, homeless households were distributed throughout Orange County's Service Planning Areas as follows: 42% North, 47% Central, and 10% South. Therefore, the vouchers will be designated as follows: two (2) for the North Service Planning Area, two (2) for the Central Service Planning Area, and one (1) for the South Service Planning Area. Individuals experiencing chronic homelessness with the longest lengths of homelessness are matched to these opportunities. If no individuals experiencing chronic homelessness are available, sheltered individuals with a disabling condition and the longest length of homelessness will be considered followed by unsheltered individuals with a disabling condition and the longest length of homelessness. If no individuals with a disabling condition are available, sheltered individuals with the longest length of homelessness will be considered followed by unsheltered individuals with the longest length of homelessness.

Scenario 2: A project-based PSH unit becomes available in the North Service Planning Area for a family. Families experiencing chronic homelessness with the longest length of homelessness from the North Service Planning Area are considered first for this opportunity. If no families experiencing chronic homelessness from the North Service Planning Area are available, families experiencing chronic homelessness from any Service Planning Area will be considered.

Scenario 3: A RRH opportunity becomes available for homeless individuals. Individuals experiencing chronic homelessness with the longest length of homelessness are matched to these opportunities. If no individuals experiencing chronic homelessness are available, sheltered individuals with a disabling condition with the longest length of homelessness will be considered followed by unsheltered individuals with a disabling condition with the longest length of homelessness. If no individuals with a disabling condition are available, sheltered individuals with the longest length of homelessness will be considered followed by unsheltered individuals with the longest length of homelessness.

Disaster Prioritization

CES seeks to be a strong and effective partner to our community in the event of a local, state or national disaster. The County of Orange, as the CES lead, reserves the right to focus all

resources available through CES to affected populations who are eligible for the available resource. In these situations, CES may modify the prioritization policy to prioritize households impacted by the disaster using the prioritization process described above.

REFERRAL

Service, shelter and housing providers participating in CES share available service, shelter and housing opportunities through HMIS or a comparable database selected by the County of Orange. Service opportunities are matched as needed based on availability and the housing resource identified. Shelter opportunities are matched daily during business hours as opportunities become available. Housing opportunities are discussed weekly at the Housing Placement Match Meetings (HPMM) and matched to eligible individuals and families as prioritized by the prioritization schema. The meetings are attended by participating access points, referral partners and housing providers. All information shared at the HPMM is private and confidential. To attend the HPMM, attendees are required to review client privacy and confidentiality requirements and attest to complying with the privacy and confidentiality requirements. Victim service providers are not required to attend the HPMM. Survivors prioritized through CES for Individuals or Families will be considered for all resources available through CES for which they are interested and eligible.

Referrals will be provided by email to the access point and the housing provider.

Upon referral to service, shelter and housing opportunities, access points will continue to support participants throughout the intake and placement process and, ideally, for a month or more after housing placement to ensure housing stability is achieved.

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

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

Service, shelter and housing providers may deny a referral from CES under any of the following circumstances:

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

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

When an individual or family is denied by service, shelter or housing providers, the participant is returned to the prioritization list and remains on the prioritization list for a new service, shelter or

housing referral. The individual or family will continue to be prioritized for available service, shelter or housing resources following the prioritization process previously described.

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

EMERGENCY TRANSFER REQUEST POLICY

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

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

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

If a household is currently enrolled in a HUD-funded housing program and requests an emergency transfer, the household must follow the housing agency's internal emergency transfer housing process. If the housing program is unable to accommodate the emergency transfer request, the housing program may request an emergency transfer via CES.

PRIVACY AND DATA MANAGEMENT

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

During CES assessment, assessors are required to obtain participant consent to disclose their information. As needed, consent may be obtained verbally but, ideally, consent will be provided in writing or electronically. When participants consent to disclose their information, they enhance the ability of CES to assess needs and make appropriate housing referrals. If consent is not obtained, services will not be denied.

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

GRIEVANCE PROCESS

At any time during the coordinated entry process, participants have the right to file a complaint, should they feel that CES has not complied with the nondiscrimination and equal opportunity provisions of Federal civil rights law, fair housing laws and requirements, or the CES policies and procedures. During assessment, all CES participants will be provided with the process for filing a

complaint. All complaints will be addressed in a timely and fair manner. The following contacts are provided to participants for the purpose of addressing discrimination or grievance concerns:

- For grievances with CES policies and procedures, contact Orange County Community Resources at CoordinatedEntry@ocgov.com.
- For service provider related complaints, grievance should be directed to the appropriate service provider for resolution.
- For shelter and housing program related complaints, grievances should be directed to the appropriate shelter or housing provider for resolution.
- To file a discrimination complaint, contact the Department of Housing and Urban Development through the online portal: https://www.hud.gov/program_offices/fair_housing_equal_opp/online-complaint

EVALUATION

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

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

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

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

ATTACHMENT A

Chronic Homelessness Definition

HUD published the [Defining Chronically Homeless Final Rule](#) clarifying the definition of chronic homelessness. The definition of chronically homeless is:

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

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

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

Homeless Definition

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

Category 1. Literally Homeless

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

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

Category 2. Imminent Risk of Homelessness

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

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

Category 3. Homeless under other Federal statutes

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

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

Category 4. Fleeing/Attempting to Flee Domestic Violence

Any individual or family who:

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

At Risk of Homelessness Definition

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

Category 1. Individuals and Families

An individual or family who:

- Has an annual income below 30% of median family income for the area; and
- Does not have sufficient resources or support networks immediately available to prevent them from moving to an emergency shelter or another place defined in Category 1 of the “homeless” definition; and
- Meets one of the following conditions:
 - Has moved because of economic reasons 2 or more times during the 60 days immediately preceding the application for assistance; or
 - Is living in the home of another because of economic hardship; or
 - Has been notified that their right to occupy their current housing or living situation will be terminated within 21 days after the date of application for assistance; or
 - Lives in a hotel or motel and the cost is not paid for by a charitable organization or by Federal, State, or local government programs for low-income individuals; or

- Lives in an SRO or efficiency apartment unit in which there reside more than 2 persons or lives in a larger housing unit in which there reside more than one and a half persons per room; or
- Is exiting a publicly funded institution or system of care; or
- Otherwise lives in housing that has characteristics associated with instability and an increased risk of homelessness, as identified in the recipient's approved Con Plan.

Category 2. Unaccompanied Children and Youth

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

Category 3. Families with Children and Youth

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