

**ORANGE COUNTY CONTINUUM OF CARE
COORDINATED ENTRY SYSTEM STEERING COMMITTEE
SPECIAL MEETING**

Wednesday, July 9, 2025

2:00 p.m. – 3:30 p.m.

Location:

Orange County Housing Authority (OCHA)

1501 E. St. Andrew Pl., 1st Floor,

Conference Room A, Santa Ana, CA 92705

[Click Here](#) for parking information.

Virtual Meeting Option:

Zoom Meeting Link: [Click here for meeting link](#)

Join by phone: +1 669 444 9171

Webinar ID: 981 5056 2103

****Listen-in option only****

Committee Chair: Andrew Crowe, Scholarship Schools

Purpose: The Coordinated Entry System (CES) Steering Committee will function as an advisory group to the Continuum of Care (CoC) Board and Policy, Procedures and Standards (PPS) Committee to align its efforts to those of the Orange County CoC Board Vision including but not limited to reviewing CES policies and procedures for process review, policy formation, assessment of current policies and procedures and formation and conduct of committees in the service of the CoC, CES and Homeless Management Information System (HMIS). The CES Steering Committee will support the CoC Board with policy development, supporting strategic implementation of the CES and evaluating the efficiency and effectiveness of CES.

AGENDA

Call to Order – Andrew Crowe, Chair

Public Comments – Members of the public may address the CES Steering Committee on items listed within this agenda or matters not appearing on the agenda so long as the subject matter is within the jurisdiction of the CES Steering Committee. Members of the public may address the CES Steering Committee with public comments on agenda items after the agenda item presentation. Comments will be limited to three minutes. If there are more than five public speakers, this time will be reduced to two minutes.

In order to address the CES Steering Committee, members of the public are to complete a Request to Address the Committee form prior to the beginning of each agenda item and submit

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it to Continuum of Care (CoC) staff. Staff will call your name in the order received. Members of the public may also submit public comment by emailing CareCoordination@ocgov.com. All comments submitted via email or at least 24 hours before the start of the meeting will be distributed to the CES Steering Committee members and all comments will be added to the administrative records of the meeting. Please include “CES Steering Committee Meeting Comment” in the email subject line.

BUSINESS CALENDAR

- 1. Welcome and Introductions** – Andrew Crowe, Chair
- 2. CES Updates** – Daniel Garcia, CES Administrator, Office of Care Coordination
 - a. **Individual CES** – Tianna Terry, Individual CES Manager, Friendship Shelter
 - b. **Family CES** – Jocelyn Morales, Family System Manager, Family Solutions Collaborative
 - c. **Survivor CES** – Tianna Terry, Individual CES Manager, Friendship Shelter
 - d. **Veteran Registry** – James Bacon, CES Staff Specialist, Office of Care Coordination
 - e. **Transitional Aged Youth Registry** – Julia Davis, CES Staff Specialist, Office of Care Coordination
 - f. **Virtual Front Door** – Amy Arambulo, Director, Community Impact, OC United Way
- 3. CES 2-for-1 Match Policy** – Daniel Garcia, CES Administrator, Office of Care Coordination
- 4. CES Policies & Procedures** – Daniel Garcia, CES Administrator, Office of Care Coordination

Next Meeting: September 3, 2025, from 2:00 p.m. – 3:30 p.m., in-person at the Orange County Housing Authority, 1st Floor, Conference Room A, 1501 E St Andrew Pl, Santa Ana, CA 92705



2-for-1 Match Policy and Procedure

July 9, 2025 DRAFT

CoordinationEntry@ocgov.com | ceo.ocgov.com/care-coordination/homeless-services/coordinated-entry-system

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2-for-1 Match Policy and Procedure

July 9, 2025 DRAFT

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Background

Housing Providers (housing provider, public housing authorities, developer, etc.) may request a secondary match for a single unit vacancy, commonly referred to as 2-for-1 matches. In this practice, the two (2) households from the Coordinated Entry System (CES) Community Queue are matched to one (1) housing opportunity, as made available by the Housing Provider. This updates the households to a “pending referral” status in the CES Community Queue as they work through the application process for the housing opportunity that were made available.

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

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

Scenarios for Requesting a 2-for-1 Match

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

1. Property has a unit(s) that is approaching the 120 day vacancy date. The request for 2-for-1 for one match can only be submitted after the unit has been vacant for at minimum 90 days.
2. A newly opened property needs to achieve a specified occupancy rate by a specified date. The request for 2-for-1 match can only be submitted no earlier than 45 days before the specified date.

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



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Criteria for 2-for-1 Match Requests

When requesting a 2-for-1 Match, the Housing Provider is agreeing to processing the matches as detailed below. The following guidance must be followed to ensure that any 2-for-1 match requests are handled appropriately and that households involved in the processed are treated with the most trauma informed way possible. All guidelines points below are in alignment with current CES policies and procedures.

1. "Primary" matches must proceed with the initial application process for the available unit.
2. "Secondary" matches may only proceed with the initial application process after the Primary match either declines, is denied, or is considered unresponsive after 14 days of no contact from the original match email, to the housing opportunity.
3. A "first come – first served" approach will not be utilized By Housing Providers who are requesting a 2-for-1 match.
4. Only when both matches are denied, decline, considered unresponsive, or a combination of the three, may the Housing Provider can submit another 2-for-1 match request form for that same unit for two new matches.
 - a. This means that a new Secondary match cannot be requested, after the Primary match is denied, decline, or considered unresponsive.
 - b. A matched household, Primary or Secondary, will be considered unresponsive after 14 calendar days from the original match email.
 - c. If a Primary match is unresponsive, the Secondary match will become the Primary match.
5. All stakeholders (Property Manager, Public Housing Authority, developer, supportive services provider, etc.) associated with the specific housing opportunity where a 2-for-1 match request is being requested must agree with the 2-for-1 match request. The Office of Care Coordination will verify via email with all stakeholders that this agreement exists.
6. The Secondary household matched must sign the 2-for-1 Secondary Match Confirmation indicating authorization of removal from the CES Community Queue and must be returned to the Office of Care Coordination via email to the original match email within seven (7) calendar days after being received.
 - a. The Office of Care Coordination will follow up with the staff member who submitted the 2-for-1 Secondary Match Confirmation form if the form has not been signed by the secondary household by the seven (7) days.
 - b. On the 8th day, the secondary household match will be voided and returned to the CES Community Queue.
7. Secondary matches reserve the right to be returned to the CES Community Queue for other housing opportunities in which the household wishes to be considered for at any time.
8. 2-for-1 Match Requests are only available for two referrals for every one housing unit. If there are two available units to accept referrals, Housing Providers must submit two separate match request forms and so on.



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

Procedure

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

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

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

CES Community Queue and matches to Housing Opportunities:

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

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

Matches may not be shifted to other units in cases where a property has more than one (1) approved 2-for-1 Match Requests. All secondary matches must maintain their originally matched unit.

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

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



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How to Request a 2-for-1 Match

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

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



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

All questions regarding 2-for-1 Match Requests should be directed to coordinatedentry@ocgov.com.

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Attachment A: 2-for-1 Match Request Form

Question:	Response:
Please list your CES participating agency name:	_____
Please list the Housing Opportunity or HMIS Program in which you would like to request a secondary match for:	_____
Please list the unit number that this request is being made for:	_____
Please list any criteria for this match (MHSA, Veteran preference, senior, etc). If none, type "N/A":	_____
Please indicate the public housing authority partnering with this housing community:	Anaheim Housing Authority Garden Grove Housing Authority Orange County Housing Authority Santa Ana Housing Authority N/A
Please list the property management organization partnering with this housing community	_____
Can the property manager confirm that the partnering Public Housing Authority, or supportive services agency, has approved this 2-for-1 Match Request?	Yes No
Please list your full name and title	_____
Please list your email address	_____
Please list your direct phone line	_____
Do you understand that your housing opportunities entered into HMIS must include a label of "primary" and "secondary" or will be subject to deletion or not receiving a second match?	Yes No
Do you understand that a "primary" match will begin the application process and either decline, be denied, or become unresponsive, prior to a secondary match beginning their application process? <u>*This means a "first-come-first-served" practice will not be utilized, and follows a trauma-informed care approach.*</u>	Yes No
Do you understand that failure to comply with these guidelines will result in future 2-for-1 match requests being denied?	Yes No



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Do you understand that you will only be able to enter both housing opportunities after receiving written approval from the Office of Care Coordination?	Yes No
Do you understand that a secondary match reserves the right to return to the CES Community Queue to be considered for other housing opportunities. <u>This will not allow for a new secondary only match.</u>	Yes No
The 2-for-1 Secondary Match Confirmation form must be filled out by both the CES Access Point and CES Household who is the secondary match. The secondary match has the right to deny being a secondary match, if there is a denial, this will not result in receiving a secondary match. Do you understand this?	Yes No



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Attachment B: 2-for-1 Secondary Match Confirmation

This form must be completed in its entirety and attached to the email reply, in the same thread as the original match email that was sent by the CES Match Maker. This form must be submitted within seven (7) calendar days from the date of the original match email. Failure to do so will result in the Office of Care Coordination voiding this secondary match.

The following section is to be completed by the CES Access Point:

1. CES Access Point who accepted the secondary match:

2. CES User who accepted this secondary match (first name, last name):

3. CES User email:

4. CES User contact phone number:

5. Name of housing opportunity that was accepted as used in the original match email:

6. Household's HMIS ID and full name as it appears in HMIS:



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The following section is to be completed by the CES Household:

*You have been matched to a housing opportunity as a secondary match. This means you are the second applicant to a unit in which a primary applicant was identified. This means you will only move forward with the application process should the primary applicant either decline or be denied for any reason. **There is no definitive timetable as to when you will proceed with the application process for this opportunity.***

*As a secondary match you will **not be matched to other housing opportunities** while the primary applicant goes through the application process. As a secondary match you can deny being a secondary match at any time and be considered for other housing opportunities as they become available. If you wish to deny being a secondary match at a later time, please communicate this with your case manager.*

The benefit of being a secondary match is that you are the next person to be matched to this specific housing opportunity, if and only if, the primary applicant declines or is denied for any reason. However, there is no definitive timetable, when the primary applicant will decline, or be denied for this opportunity.

You have the right to deny this secondary match for any reason and wait for a housing opportunity where you can be considered a primary match. A primary match gives you priority to the housing opportunity when matched.

1. Are you aware that by accepting this secondary match you will not be considered for any other housing opportunities (with no definitive timetable), including housing opportunities where you may have been considered a *primary* match?

☐ Yes

☐ No

2. Do you accept being a secondary match to this housing opportunity and understand you will only be considered for this housing opportunity only when and if the primary match declines or falls through for any reason? This means that as a secondary match you may have to wait an unknown amount of time before beginning your application process.

☐ Yes

☐ No

3. Please sign indicating you authorize accepting this secondary match:

_____ Date: _____

Item 4. Attachment A



COORDINATED ENTRY SYSTEM POLICIES AND PROCEDURES

Date Approved by Continuum of Care Board:

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Item 4. Attachment A

I. 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.

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

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

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

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

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

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

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

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

Item 4. Attachment A

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

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

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

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

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

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

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

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

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

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

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

Item 4. Attachment A

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

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

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

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

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

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

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

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

Transitional Aged Youth (TAY) is a household where the head of the household is someone aged 18 – 24. This can be either an adult only household or a family and can be eligible for the Individual or Family Coordinated Entry System, depending on household composition. This household will also be eligible for any TAY specific housing opportunities.

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

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

Item 4. Attachment A

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

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

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

II. Introduction

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

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

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

More information on these three CES subpopulations and two registries can be found on the Orange County [CES Learning Academy](#).

III. Goal

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

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

¹ <https://www.hud.gov/vawa#close>

Item 4. Attachment A

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

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

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

IV. CES Documents and Regulations

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

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

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

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

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

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

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

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

V. Roles and Responsibilities

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

A. CES Lead

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

The CES lead agency's responsibilities include:

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

B. CES Virtual Front Door (VFD)

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

The CES VFD's responsibilities include:

- Facilitating referrals to CES Access Points for eligible households.
- Screening for sub-population specific service needs, including Survivors, TAY, Veterans, and family status.

C. CES Access Points

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

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

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

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

D. CES Agency Administrators and CES Participating Agency Agreement Form

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

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

E. Matchmakers

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

Matchmaker responsibilities include:

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

F. Housing Providers

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

Housing Providers are required to enter any resources in HMIS every Friday by 12pm, Pacific Standard Time, when resources are available to ensure that those resources are available for matching the following

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week when there is a Housing Provider Match Meeting taking place. Any resources entered after this time may not receive a referral placement the following week.

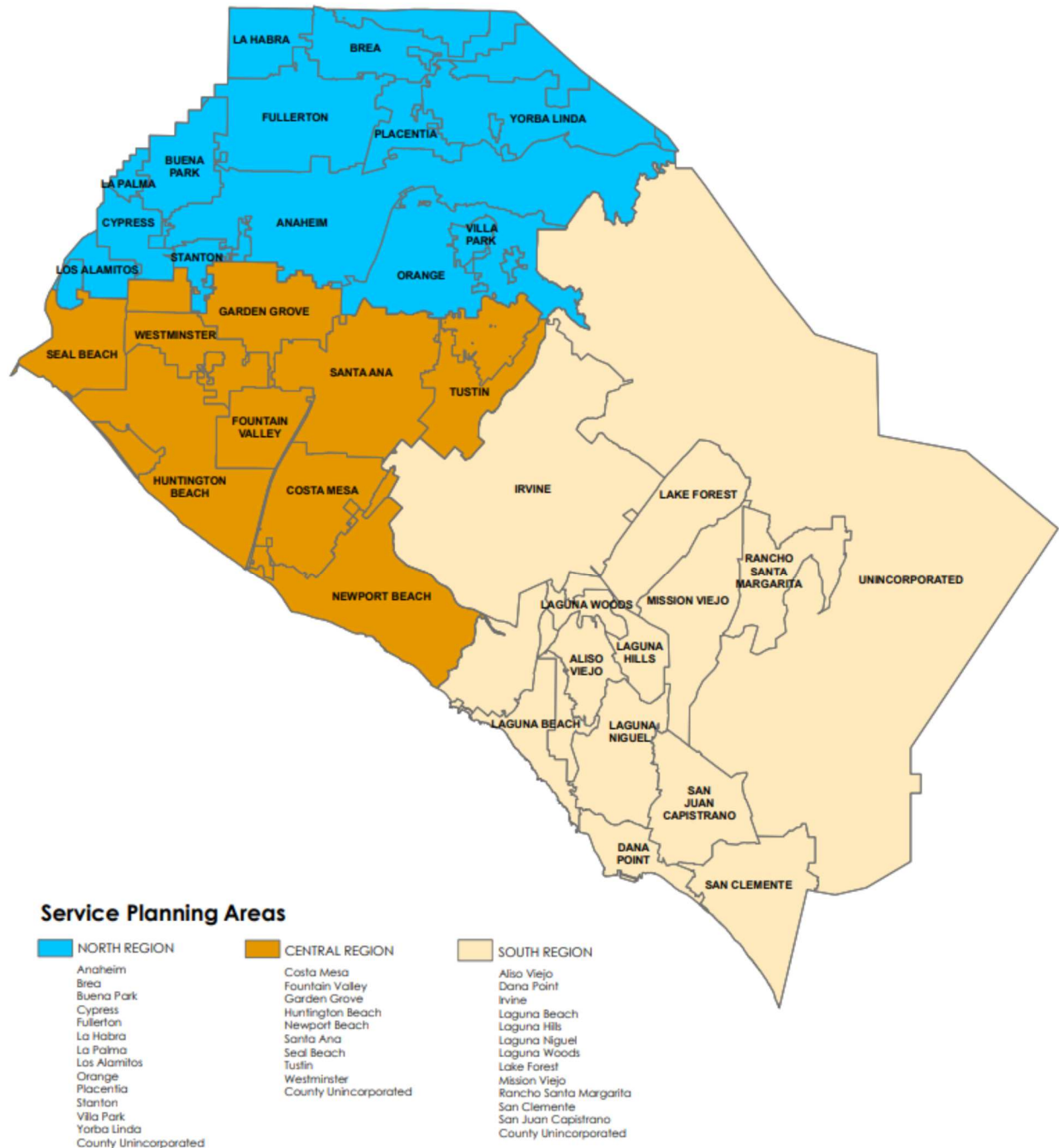
Housing Provider responsibilities include:

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

G. Planning

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

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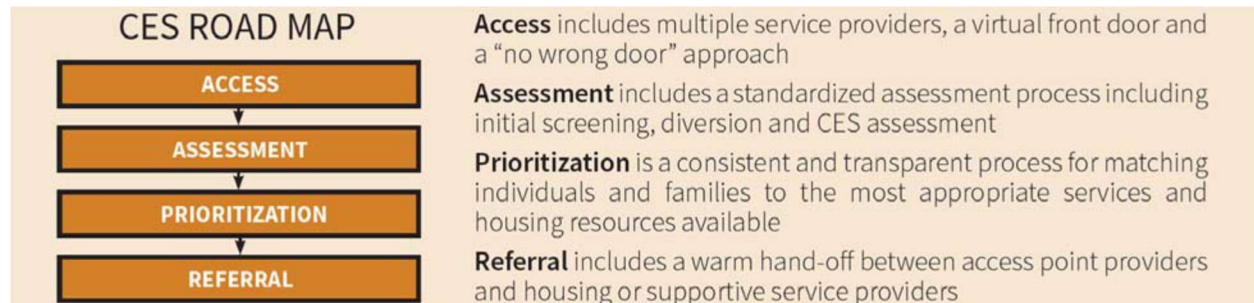


All households who meet the HUD definition of homelessness or at risk of homelessness are eligible to participate in CES. For definitions, please see [Attachment A](#).

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

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



VI. Access

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

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

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

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

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

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

A. Access Model

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

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

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

Survivors who are enrolled into CES for Survivors will not have the CES Authorization Form uploaded to HMIS due to not having an HMIS profile and Victim Service Providers (VSP) not being allowed to utilize HMIS. A Survivor being enrolled into CES for Survivors will count as their authorization. VSPs should inform Survivors that this will be their consent to be enrolled into CES for Survivors.

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

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

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

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

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

- Households experiencing homelessness or at risk of experiencing homelessness can call 2-1-1 at any time, day or night, and will be connected with a certified multi-lingual referral specialist who can make referrals to appropriate emergency services based on individual and family service needs and SPA location. 211OC, as the CES VFD will also provide referrals to CES Access Points.
- If the VFD referral specialists receive a call from a household that is experiencing homelessness or at risk of homelessness as defined by HUD, the VFD staff will screen the household for Survivor, TAY and veteran status as well as household composition.
- If the household identifies as including Survivors, and requests to be quickly connected to survivor-specific housing options or other assistance for survivors (such as emergency shelter, counseling, etc.), VFD staff will make a warm handoff to a VSP serving as a CES Access Point. Survivors are not required to be referred to a VSP and may accept a referral to any appropriate CES Access Point if there is not a specific request for survivor-specific services.
- If the head of household identifies as a TAY, VFD staff will provide referrals to CES Access Points that provide specialized TAY-specific services. TAY are not required to accept a referral to a TAY provider and may accept a referral to any appropriate CES Access Point if there is not a specific request for TAY-specific services.
- If the household identifies as included a Veteran, VFD staff will provide referrals to CES Access Points that provide specialized veteran-specific services. Veterans are not required to accept a referral to a Veteran provider and may accept a referral to any appropriate CES Access Point if there is not a specific request for Veteran-specific services.
- If a household identifies as a family that includes minor children, the household will be referred to a Family Access Point. If the household identifies as an adult-only household, the household will be referred to an Individual Access Point. Family and Individual Access Points include Access Points providing specialized subpopulation services for Survivors, TAY, and Veterans and Access

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

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

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

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

D. Accessibility

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

E. Safety Planning

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

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

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VII. Assessment

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

A. Prioritization

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

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

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

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

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

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

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

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

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

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

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

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

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

B. Prevention and Diversion Prioritization

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

C. Dynamic Match

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

D. Survivor Prioritization

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

E. Non-CoC Funded Project Prioritization

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

F. Stepping Up and Moving On

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

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G. Targeted Opportunities

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

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

H. Prioritization Scenario Examples

Scenario I

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

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

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

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

Scenario II

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

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

Scenario III

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

I. Disaster Prioritization

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

VIII. Referral and Match Meeting

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

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

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

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

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Referrals will be provided by email to the Access Point and the housing provider.

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

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

A. Declining a Referral/Match

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

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

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

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

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

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

IX. Emergency Transfer Request Policy

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

- a. A sexual assault occurred on the premises of their HUD-funded housing program; or

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- b. Who reasonably believed that they are imminently threatened by harm from further domestic violence, dating violence, sexual assault, stalking, or human trafficking if they remain in that designated HUD-Funded dwelling.

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

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

X. Privacy and Data Management

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

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

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

XI. Grievance Process

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

- For grievances with CES policies and procedures, contact the Office of Care Coordination at CoordinatedEntry@ocgov.com.
- For grievances with service providers communication should be directed to the appropriate service provider for resolution.
- For grievances with shelter and housing programs grievances should be directed to the appropriate shelter or housing provider for resolution.

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

XII. Evaluation

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

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

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

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

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XIII. Attachments

A. Attachment A

Chronic Homelessness Definition

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

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

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

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

Homeless Definition

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

Category 1. Literally Homeless

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

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

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Category 2. Imminent Risk of Homelessness

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

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

Category 3. Homeless under other Federal statutes

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

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

Category 4. Fleeing/Attempting to Flee Domestic Violence

Any individual or family who:

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

At Risk of Homelessness Definition

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

Category 1. Individuals and Families

An individual or family who:

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

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- 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.

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COORDINATED ENTRY SYSTEM POLICIES AND PROCEDURES

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

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I. Common Terms and Definitions

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

Transitional Aged Youth (TAY) is a household where the head of the household is someone aged 18 – 24. This can be either an adult only household or a family and can be eligible for the Individual or Family Coordinated Entry System, depending on household composition. This household will also be eligible for any TAY specific housing opportunities.

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

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

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

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

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

II. Introduction

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

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

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

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

III. ~~GOAL~~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:

- ~~d~~Dynamic prioritization
- ~~e~~Collaborative coordination

¹ <https://www.hud.gov/vawa#close>

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- ~~i~~Intentional resource utilization
- ~~e~~Equitable resource distribution
- ~~r~~Regional ~~s~~Service ~~p~~Planning ~~a~~Area prioritization

CES is required to incorporate all programs funded through the Continuum of Care (CoC), ~~and the Emergency Solutions Grants (ESG) and the Homeless Housing, Assistance and Prevention (HHAP) programs.~~ Other services, shelter and housing programs ~~s not receiving any of the funding listed above other than CoC and ESG funding~~ may voluntarily participate in CES. ~~While t~~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:

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

IV. ~~CES Documents and Regulations~~ 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.](#)

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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.

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~~**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.~~

V. Roles and Responsibilities~~ROLES AND RESPONSIBILITIES~~

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

A. CES Lead

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

The CES lead agency's responsibilities include:

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

B. CES Virtual Front Door (VFD)

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

The CES VFD's responsibilities include:

- Facilitating referrals to CES ~~Access~~ ~~Points~~ for eligible households.
- Screening for sub-population specific service needs, including ~~Survivors~~, ~~transitional-aged youth~~ {TAY}, ~~Veterans~~, and family status.

C. CES Access Points

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

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

- Connect eligible households with CES through a standard assessment process.
- Offer additional services and resources to support with housing crisis needs.
- Represent the household's needs in CES.

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- Submit a new/updated Current Living Situation Assessment, at minimum, every 90 days or the household will be automatically removed from the Community Queue.
- Maintain accurate and timely data in HMIS, as outlined in the annual CES Participating Agency Agreement form, or a comparable database for survivors.

D. CES Agency Administrators and CES Participating Agency Agreement Form

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

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

E. Matchmakers

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

Matchmaker responsibilities include:

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

F. Housing Providers

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

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

Housing Provider responsibilities include:

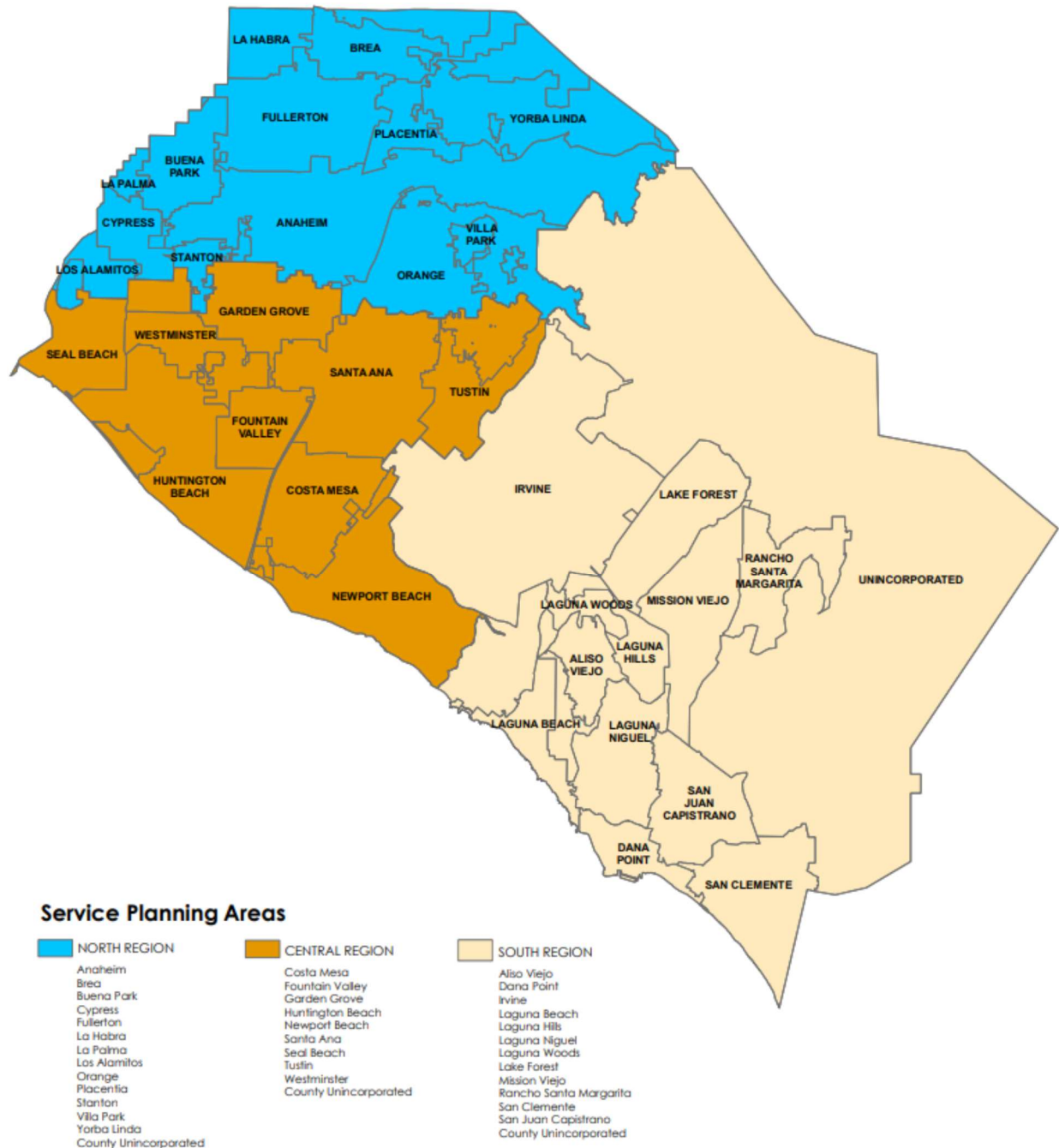
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- Notifying CES through HMIS or a comparable database for survivors when a program has an opening and is able to accept referrals.
- Clearly communicate eligibility requirements for available resources.
- Accept referrals for the available resources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

G. Planning~~PLANNING~~

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

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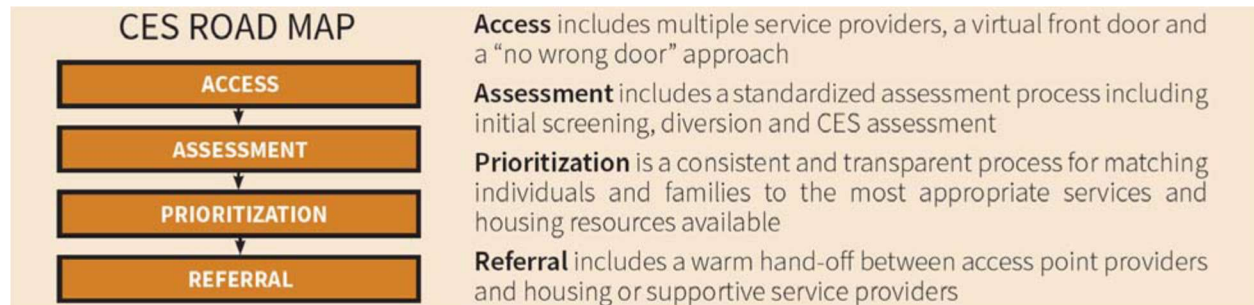


All households who meet the HUD definition of homelessness or at risk of homelessness are eligible to participate in CES. For definitions, please see [Attachment A](#).

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

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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 “~~s~~Survivors.”



VI. ~~Access~~ACCESS

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

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

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

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Prior to attaining access, ~~individuals or families~~households might encounter a referral partner - an entity or agency that can direct a person experiencing a housing crisis to a CES ~~a~~Access ~~p~~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~~households to CES, they play a critical, guiding role in connecting ~~individuals and families~~households to emergency services which serve as ~~a~~Access ~~p~~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 ~~s~~Survivors. Throughout Orange County, an array of homeless service providers serves as ~~a~~Access ~~p~~Points. Access ~~p~~Points include mobile street outreach teams, navigation centers, emergency shelters and ~~a virtual front door~~the VFD. Access ~~p~~Points are distributed geographically throughout the County in all three Service Planning Areas (North, Central, and South) and the ~~virtual front door~~VFD provides access 24 hours a day through a call center and online access.

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

A. Access Model

The Orange County CES is comprised of three systems: CES for Individuals, CES for Families, and CES for Survivors. In addition, CES operates two by-name registries, a Veteran Registry for Veterans composed of ~~v~~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, mental health treatment, or minimum income thresholds. The primary goals of the Housing First model are rapid placement and stabilization in permanent housing.

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

Survivors who are enrolled into CES for Survivors will not have the CES Authorization Form uploaded to HMIS due to not having an HMIS profile and Victim Service Providers (VSP) not being allowed to utilize HMIS. A Survivor being enrolled into CES for Survivors will count as their authorization. VSPs should inform Survivors that this will be their consent to be enrolled into CES for Survivors.

In addition, people experiencing homelessness may access emergency services not participating in CES and, when immediate access to emergency services is available at emergency services that participate in CES,

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people may access emergency services during hours when CES intake and assessment processes are not operating and then be connected ~~wot~~to 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 household~~ will be denied access to the crisis response system based on willingness to participate in the Housing Assessment process. Regardless of ~~people's—a household's~~ willingness to complete the standardized CES Housing Assessment, people will be warmly welcomed into emergency shelters and/or other emergency services, as available.

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

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

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

- ~~Individuals or families~~Households experiencing homelessness or at risk of experiencing homelessness can call 2-1-1 at any time, day or night, and will be connected with a certified multi-lingual referral specialist who can make referrals to appropriate emergency services based on individual and family service needs and ~~Service Planning Area~~SPA location. 211OC, as the CES VFD will also provide referrals to CES ~~a~~Access ~~p~~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 ~~s~~Survivor, TAY and veteran status as well as household composition.
- If the household identifies as including ~~s~~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~~VSP serving as a CES ~~a~~Access ~~p~~Point. Survivors are not required to be referred to a ~~victim service provider~~VSP and may accept a referral to any appropriate CES ~~a~~Access ~~p~~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 ~~a~~Access ~~p~~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 ~~a~~Access ~~p~~Point if there is not a specific request for TAY-specific services.
- If the household identifies as included a ~~v~~Veteran, VFD staff will provide referrals to CES ~~a~~Access ~~p~~Points that provide specialized veteran-specific services. Veterans are not required to accept a

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referral to a ~~v~~Veteran provider and may accept a referral to any appropriate CES ~~a~~A~~c~~cess ~~p~~P~~o~~int if there is not a specific request for ~~v~~Veteran-specific services.

- If a household identifies as a family that includes minor children, the household will be referred to a ~~f~~F~~a~~amily ~~a~~A~~c~~cess ~~p~~P~~o~~int. If the household identifies as an adult-only household, the household will be referred to an ~~i~~I~~n~~dividual ~~a~~A~~c~~cess ~~p~~P~~o~~int. Family and ~~i~~I~~n~~dividual ~~a~~A~~c~~cess ~~p~~P~~o~~ints include ~~a~~A~~c~~cess ~~p~~P~~o~~ints providing specialized subpopulation services for ~~s~~S~~u~~rvivors, TAY, and ~~v~~Veterans and ~~a~~A~~c~~cess ~~p~~P~~o~~ints that provide generalized services for people experiencing homelessness or who are at risk of homelessness.

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

Eligible households may access CES by connecting directly with a CES ~~a~~A~~c~~cess ~~p~~P~~o~~int. All ~~a~~A~~c~~cess ~~p~~P~~o~~ints will screen all households for ~~s~~S~~u~~rvivor, TAY and ~~v~~Veteran status using the Pre-Assessment Screening tool and receive regular training on conducting these screenings in a ~~s~~S~~u~~rvivor-centered, trauma-informed manner.

If the household identifies as including ~~s~~S~~u~~rvivors, and requests to be connected to ~~s~~S~~u~~rvivor-specific housing options or other assistance for ~~s~~S~~u~~rvivors (such as emergency shelter, counseling, etc.), ~~a~~A~~c~~cess ~~p~~P~~o~~int staff will immediately offer a referral to a ~~victim service provider~~VSP serving as a CES ~~a~~A~~c~~cess ~~p~~P~~o~~int.

D. Accessibility

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

E. Safety Planning

Individuals and ~~f~~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

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Sexual Assault Victim Services (North)	714-957-2737
Sexual Assault Victim Services (South)	949-831-9110
2-1-1 Orange County Helpline	211 949-646-4357 888-600-4357

VII. Assessment~~ASSESSMENT~~

CES utilizes a standardized assessment process. The standardized CES assessment process is consistent across all ~~a~~Access ~~p~~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 – The Pre-Assessment Screening~~ is completed to determine specialized services needs and guide referrals to appropriate subpopulation specific service providers.

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

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

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

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

~~Moving On Assessment – The standardized Moving On Assessment~~ is completed with household that are currently housed in a permanent supportive housing program who would like to be considered for a less

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intensive housing intervention and is separated into two sections to collect information on eligibility and housing stability.

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

Prior to completing the standardized CES assessment process, ~~a~~Access ~~p~~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 therefore~~ ~~a~~Access ~~p~~Points will also assist ~~individuals and families~~households with identifying services, shelter and/or housing resources and solutions available outside of CES. If referrals to shelter resources available through CES are required, ~~a~~Access ~~p~~Point staff begin completing the Shelter Assessment. If referrals to housing resources available through CES are required, ~~a~~Access ~~p~~Point staff begin completing the Housing Assessment with the ~~individual or family~~households experiencing homelessness. The CES assessments may be completed during a single session or over time as immediate needs are addressed and rapport is developed between ~~a~~Access ~~p~~Point staff and the ~~individuals or families~~household experiencing homelessness or at risk of homelessness.

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

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

Safety planning is done with all individuals and families who may be in danger or could be a danger to themselves or others including identifying appropriate supports and resources. These needs are uncovered through the assessment and responded to immediately to quickly offer appropriate referral linkages. Assessors will be trained on how to understand when a person is at risk of harming themselves or others and serve as mandated reporters so that they are equipped to call 911 when necessary or connect ~~individuals or families~~household 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 ~~a~~Access ~~p~~Points in HMIS except for ~~victim service providers~~VSPs who are prohibited from using HMIS. ~~Victim service providers~~VSPs will use the following process to communicate the outcome of the Survivor Assessment to CES for prioritization and referral to both survivor-dedicated resources and resources accessed through CES for Individuals and Families:

- Assessors will submit de-identified assessment information to CES through Microsoft Forms. De-identified information will include:
 - A unique identifier that ~~victim service provider~~VSP staff will create and use to identify the household.
 - Eligibility and vulnerability information necessary to determine prioritization for available housing and resources.

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- Housing interests in order to make the most appropriate housing referrals based on the household's identified housing needs.

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

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

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

Providers serving as ~~a~~Access ~~p~~Points have completed training on conducting the standardized CES assessments and entering data into HMIS or a comparable database for ~~victim service providers~~VSPs. Updated training is provided at least annually. ~~Ongoing support and training are~~ further support is needed, it will be made available upon request and as resources permit.

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

~~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.~~

A. Prioritization~~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~~households experiencing homelessness or at risk of homelessness with shelter, housing and supportive services available through CES. CES has no authority over services, shelter and housing programs that do not participate in CES.

CES prioritization is a dynamic process that applies to all CES Components (Individuals, Families, Survivors, TAY, and Veterans). For all services, shelter and housing opportunities available through CES, except Survivor-specific resources, CES will prioritize households with the longest length of homelessness in the community as collected in HMIS following the most recent HMIS Data Standards and highest service needs as determined using CES program intake, the standardized CES assessments and case conferencing

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amongst the CES participating agencies, as needed and appropriate. Case conferencing occurring with CES participating agencies is aimed at ensuring households are prioritized per the CES policy for services, shelter and housing opportunities appropriate to their service needs according to their current circumstances. A regional SPA distribution prioritization based on the most recent finalized point in time count is used to distribute non-geographically designated resources by SPA to avoid forcing households to move long distances unless by household choice.

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

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

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

1. Households experiencing Chronic Homelessness
 - a. Households with a chronic disability who are currently experiencing sheltered or unsheltered homelessness and who have been experiencing homelessness (a) for at least the last 12 months straight OR (b) on at least four separate occasions in the last three years for a combined minimum of 12 months.
2. Households with a Chronic Disability
 - a. Households who are experiencing homelessness but who do not meet the length of time requirements to be experiencing chronic homelessness but who have a disability that is expected to be ongoing, substantially, impedes their housing stability, and could be improved by more suitable housing.
3. Households without a Disability
 - a. Households experiencing literal homelessness who do not have a disability as defined above.
4. Households at risk of homelessness
 - a. Households at risk of homelessness are not eligible for many of the opportunities prioritized through CES, but if eligible will generally be the last priority group.

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

- ~~h~~ Housing navigation ~~and~~
- ~~s~~ Stabilization services-
- ~~Emergency Sshelter opportunities available through CES include some, but not all, of the emergency shelter,~~
- ~~i~~ Interim housing ~~and~~

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

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

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

B. Prevention and Diversion Prioritization

Prevention and diversion services are a critical part of CES and may occur prior to completing the CES assessments or during the process of participating in CES for households ~~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~~ households 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~~ Households at risk of homelessness and in need of homeless prevention services, should dial 2-1-1 to receive a referral to available homeless prevention services. In instances where there are no appropriate prevention referrals, 2-1-1 will attempt to connect ~~participants~~ households to alternate resources.

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

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~~to avoid forcing individuals or families/households to move long distances unless by participant household choice.~~

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

C. Dynamic Match

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

~~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.~~

D. Survivor Prioritization

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

E. Non-CoC Funded Project Prioritization

Housing opportunities provided by public housing authorities that are not funded through the CoC (ex. Housing Choice Vouchers) and receiving referrals through CES will be prioritized by CES in compliance with the administrative plan for each public housing authority jurisdiction. Prioritization and case conferencing

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amongst the CES participating agencies will be used to refer ~~individuals and families~~households who are the most appropriate ~~referral~~ to the available resource.

F. Stepping Up and Moving On

Tenant-based and project-based PSH tenants are permitted to move between PSH opportunities and/or graduate to HCVs, as available and eligible. Movement between PSH opportunities is determined and agreed upon by the housing providers. Rapid rehousing ~~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~~PSH for people experiencing chronic homelessness with severe service needs. Vacancies created through tenant movement must be refilled through CES using CES prioritization criteria.

G. Targeted Opportunities

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

~~Participants~~Households remain enrolled in CES until the ~~participant~~household is permanently housed, opts out of participating in CES, becomes inactive, or is otherwise exited. ~~or becomes inactive. Participants~~Households will be made inactive automatically in on the CES Community Queue (CQ) ~~when exited from access point services or~~ after 90 days of non-engagement with ~~a~~Access pPoints or ~~HMIS~~CES participating agencies as documented in HMIS or the comparable database for ~~victim service provider~~VSPs. ~~Participants~~Households are automatically removed from the ~~prioritization list~~Bed Reservation Queue (BRQ) for shelter referrals available through CES ~~when exited from CES or~~ after 7 days of non-engagement with an ~~a~~Access pPoint or ~~HMIS~~CES participating agencies as documented in HMIS. ~~Participants~~Households are automatically removed from the ~~prioritization list~~CQ for supportive services and housing opportunities ~~when exited from CES or~~ after 90 days of non-engagement with an aAccess pPoint s or ~~HMIS participating agencies as documented in HMIS.~~

H. Prioritization Scenario Examples

Scenario I

~~Scenario 1-~~CES receives five (5) Housing Choice Vouchers (HCVs). ~~for non-elderly individuals.~~ Based on the 20242 Point in Time Count results, homeless households were distributed throughout Orange County's

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~~SPAs Service Planning Areas~~ as follows: ~~4244~~% North, 47% Central, and ~~108~~% South. Therefore, these vouchers will be ~~designated~~allocated as follows:

~~Two (2) for the North SPAService Planning Area,~~
~~Two (2) for the Central SPAService Planning Area, and~~
~~One (1) for the South SPA Service Planning Area.~~

Individuals experiencing chronic homelessness with the longest lengths of homelessness are ~~matched~~referred 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.~~

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

Scenario II

~~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 III

~~Scenario 3:~~ A RRH opportunity becomes available for homeless individuals. Individuals experiencing chronic homelessness with the longest length of homelessness are ~~matched~~referred to these opportunities first. 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.~~

I. Disaster Prioritization

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

VIII. Referral and Match Meeting~~REFERRAL~~

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

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

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

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

Referrals will be provided by email to the ~~a~~Access ~~p~~Point and the housing provider.

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

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

A. Declining a Referral/Match

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

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

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

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

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

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

IX. Emergency Transfer Request Policy ~~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 households~~ who qualify for an emergency transfer will be given a priority referral over all other applications for the next available, safe unit through CES for which they qualify.

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

X. Privacy and Data Management ~~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~~VSPs are not required to use CES for emergency services and cannot participate in HMIS ~~to utilize~~

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~~the CES program.~~ ~~Victim service provider~~VSPs partnering with CES are required to use a comparable database managed by the CES lead.

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

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

XI. Grievance Process~~GRIEVANCE PROCESS~~

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

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

XII. Evaluation~~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 households~~ and participating agencies through feedback surveys and focus groups. Participating agencies will be surveyed at least annually and focus group feedback opportunities will also be provided annually to solicit consumer feedback. Annually, all ~~participants households~~ who utilize CES will be offered the chance to complete a feedback survey and/or participate in focus group feedback sessions held at geographically dispersed locations. The focus groups

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and surveys will cover all domains of the coordinated entry process, including intake, assessment and referral, and will be used to gauge ~~participant~~ household and agency perception of system quality and effectiveness.

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

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

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XIII. Attachments

A. Attachment AATTACHMENT 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

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

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

Category 3. Homeless under other Federal statutes

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

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

Category 4. Fleeing/Attempting to Flee Domestic Violence

Any individual or family who:

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

At Risk of Homelessness Definition

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

Category 1. Individuals and Families

An individual or family who:

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

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- 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.



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

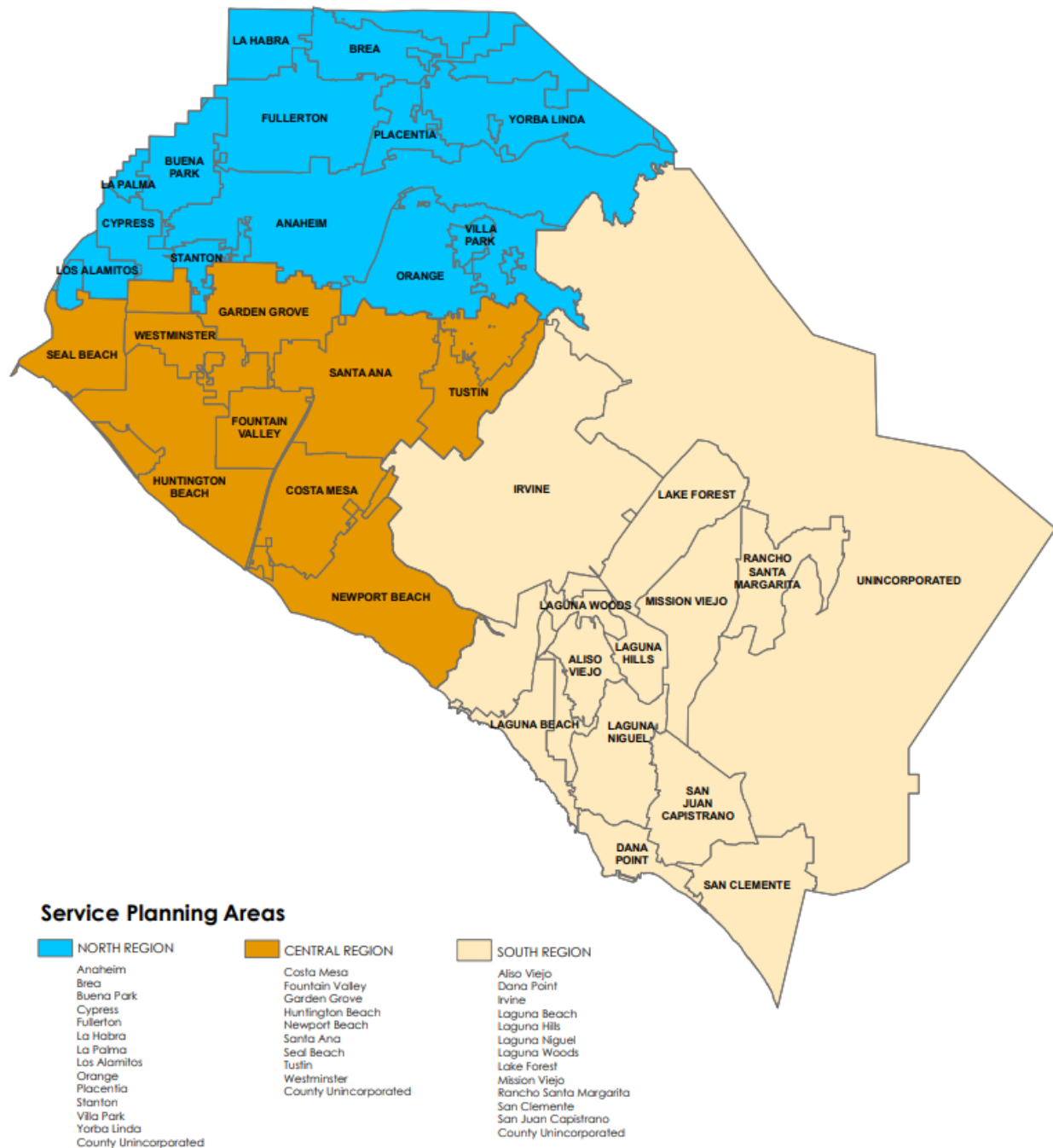
Housing Providers are agencies that provide resources for people at risk of homelessness or experiencing homelessness. Housing Provider resources include shelter, supportive services, homeless prevention assistance, rapid rehousing, permanent supportive housing and other permanent housing. All CoC- and 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

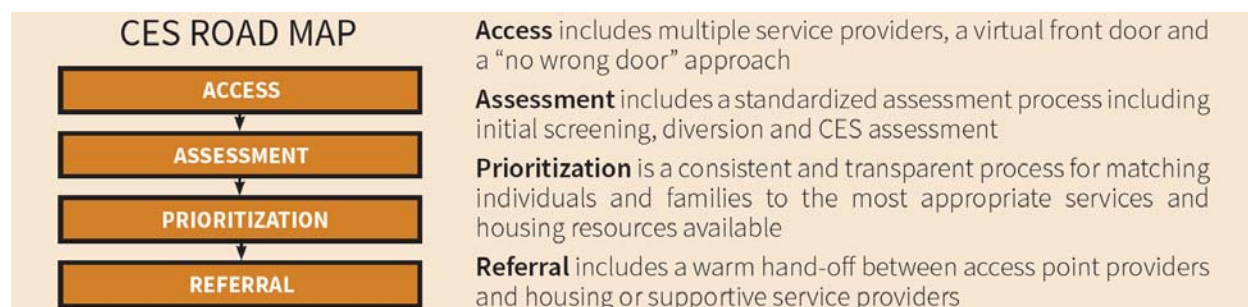
The Orange County CoC CES serves people experiencing homelessness in the CA-602 Orange County CoC, which covers the entire geographic area of Orange County. To ensure full coverage of Orange County's geographic area, the CoC utilizes SPAs to allow for targeted services and resource allocation and regional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

2025 CES POLICY FEEDBACK & QUESTIONS

The revised Coordinated Entry System (CES) Policies and Procedures were available for public review and feedback from June 26, 2025, through July 6, 2025. The feedback below was received in writing.

RAPID REHOUSING

Improved Match Timeliness & Responsiveness – Many RRH participants have time-sensitive needs (e.g., motel exits, limited assistance periods), and delays in the matching process can jeopardize housing stability. A streamlined timeline or expedited matching for high-priority cases could be beneficial.

Better Alignment Between Referrals and Program Eligibility – We often receive referrals for participants who don't meet our RRH program criteria (e.g., income level, housing readiness, or location fit). Improving how matches are filtered and aligned with specific program requirements would reduce back-and-forth and better serve participants.

Consistent Communication Channels Between Providers – It would help to establish clearer, faster communication between CES matchers and RRH providers, especially when participants are not responsive or when situations change (e.g., a new housing lead becomes available). This would allow us to act quickly and reduce missed opportunities.

Greater Flexibility to Re-Match or Reassign Quickly – If a participant declines or disengages, the re-match process can take too long. A more responsive system to return CTs to the queue—or allow providers to initiate that change—could reduce administrative delays.

Enhanced Transparency on Prioritization Criteria – It would be helpful for providers to understand how participants are prioritized for housing resources and what data is used. This transparency could help us set better expectations with clients and support their engagement in the process.

DYNAMIC MATCHING

Thank you for the opportunity to provide feedback on the revised policies and procedures. With regard to dynamic matches, I would like to request further clarification around what is needed in HMIS to ensure a successful match. Specifying necessary data entries could support a smoother process with dynamic matches.

Add clear language on what is an eligible request for dynamic match. Add clear language on what documents and data inputs are needed in HMIS to ensure match doesn't get denied. Add third party authorization process for agencies who are designated CES leads/administrators to ensure no conflict of interest when a dynamic match request is submitted on behalf of their own agency.

PRIORITIZATION

Add clarification language to enhance transparency on prioritization criteria, including transparent justifications for each dynamic match on reason for selection which would help inform providers on successful examples of matches they could use as reference for their own requests.

PROCEDURES

Section V – Roles and Responsibilities:

Section F – Housing Providers: Mandating providers to close out CES enrollments if they are no longer working with PTs to ensure matches do not get bottle necked with individuals who have not been engaged for over 90 days.

Section VI - Access:

Require training on CES policies and procedures, assessment procedures, prioritization, and referrals through CES prior to gaining access to match meetings. Add training on dynamic match process and offer best practices and examples on how to advocate for dynamic match on CES match meetings.

REFERRAL AND MATCH MEETING

Improve match timeliness and responsiveness. Participants have time-sensitive needs and delays in the matching process can jeopardize housing stability. A more streamlined timeline or expedited matching for high-priority cases could be beneficial. Add screening process for matches, particularly rapid re-housing, prior to match meeting to ensure program eligibility. Often, participants are matched to programs and do not meet the criteria, which causes delays in serving other individuals who can benefit from those services.

Section A – Declining a referral/match: Add requirements for referral/match denials returning back into the Community Que at a lower prioritization level to reduce individual's making multiple denials for the same match opportunity, which bottlenecks that opportunity for other individuals. Adding language that includes a more responsive system to return individuals to the community queue—or allow providers to initiate that change—could reduce administrative delays.

GENERAL FEEDBACK

In response to your request for input I submit the following document. It is based on over four years in <HAS Project “Supportive” housing in two locations in North and South County. These policies are extremely vague as such they render it difficult to provide truly meaningful input.

It appears that the biggest concern is how contract providers can use a lack of 90day lack of contact as justification to terminate clients. This makes no sense. Clients that are high functioning may not need services until the need them. For example, a client may be in MHSA Housing and go for many months or even years without issue. Then an issue may arid and they do require assistance.

You have no plan for success or describe how clients will go from homeless to house being exited. Further, in

Orange County you have made those of us in project housing prisoners to this housing! While most other counties do allow for successful housing clients to obtain a regular housing voucher after 12- or 24-months Orange County makes no provision. This makes no sense!

You need to make clients able to leave and maintain housing without the supportive services to make room for others to reside at locations that are delegated as specifically supportive service locations. The failure to address this will mean you will have clients trapped in housing when they might prefer to be able to obtain housing only. Further, this is discriminatory because those who receive vouchers can go to any place they like. Previously this was not so much of an issue because frankly landowners did not take HUD vouchers. However, with the changes in that law that requ9ires them to accept

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voucher housing the discrimination is blatant!

Also, how does the county intend to handle MHSA client when the properties end the required low-cost periods? You need to protect all clients, so we stop this insidious circle of homelessness!

We have been entrusted to you, and we have no voice and no way to enforce the contracts ALL of which are currently OUT OF COMPLIANCE AT EVERY SINGLE MHSA PROJECT/LIHTC location!

How do you intend to bring these into compliance?

Perhaps you. Need to understand the reality of this housing before you make more unenforceable policies that do nothing but place more of the burden upon the clients.

If you want further information about this you can contact me. I have lived here my entire life and been a CM, I have taken the PEER ADVOCATE Course, and with over 35 years of experience I can't get a part-time Peer advocate job. The contracts state I am to be able to be employed on-site, but you NEVER enforce the contracts!

You have abandoned clients left and right and to the point of death. In one instance a man jumped off the building after we were noticed! Shame on you and your policies that have been harmful!