

Continuum of Care Written Standards for NY- 508 Buffalo, Niagara Falls/Erie, Niagara, Orleans, Genesee, Wyoming Counties CoC

Table of Contents

[Introduction](#)

[Program Requirements for All Programs](#)

[Record Keeping Requirements for All Projects](#)

[Occupancy Standards for All Programs](#)

[Equal Access Regardless of Sexual Orientation, Gender Identity, or Marital Status](#)

[Coordinated Entry/Assessment System](#)

[Emergency Shelters](#)

[Permanent Supportive Housing](#)

[Rapid Rehousing for Families and Individuals](#)

[Transitional Housing for Families](#)

[Transitional Housing for Youth](#)

[Standard Outcomes](#)

[Appendix A--Homeless Definition](#)

[Appendix B--VI-SPDAT](#)

[Appendix C--VI-F-SPDAT](#)

[Appendix D--TAY-VI-SPDAT](#)

[Appendix E-Acronym](#)

[Appendix F: PSH Referral Form](#)

Created by Homeless Alliance of Western New York, 2014

This document is the intellectual property of the Homeless Alliance of Western New York. It is shared with a [Creative Commons Attribution-NonCommercial-ShareAlike 4.0 International \(CC BY-NC-SA 4.0\)](#) license. Materials may be shared and adapted, provided that attribution is given to the Homeless Alliance of Western New York.

Introduction

The Continuum of Care (CoC) is responsible for coordinating and implementing a system to meet the needs of the population and subpopulations experiencing homelessness within the geographic area, which for the NY-508 CoC includes the following geographic areas: Buffalo/ Erie, Niagara Falls/Niagara, Orleans, Genesee, and Wyoming Counties. Both the Emergency Solution Grant (ESG) Rules and Regulations and the Homeless Emergency Assistance and Rapid Transition to Housing (HEARTH) Continuum of Care Program Interim Rules state that the CoC, in consultation with recipients of Emergency Solutions Grants program funds within the geographic area, are responsible for (1) establish and consistently follow written standards for providing Continuum of Care assistance, (2) establish performance targets appropriate for population and program type, and (3) monitor recipient and sub-recipient performance.

The written standards have been established to ensure that persons experiencing homelessness who enter programs throughout the CoC will be given similar information and support to access and maintain permanent housing. All programs that receive ESG or CoC funding are required to abide by these written standards. Agency program procedure should reflect the policy and procedures described in this document. The CoC strongly encourages programs that do not receive either of these funding sources to accept and utilize these written standards.

The majority of these standards are based on the ESG and/or the HEARTH Interim Rules. There are some additional standards that have been established by the CoC to assist programs in meeting and exceeding performance outcomes that will help the CoC reach the goal of ending homelessness.

The Continuum of Care Written Standards will include policies and procedures for

- evaluating individuals' and families' eligibility for assistance
- determining and prioritizing which eligible households will receive TH, SH and PH assistance funded by the CoC and ESG
- standards for determining what percentage and amount of rent each household must pay while receiving RRH assistance
- common performance measurements for all CoC components.

These standards are in place in order to

- establish community-wide expectations on the operations of projects within the community
- ensure that the system is transparent to users and operators
- establish a minimum set of standards and expectations in terms of the quality expected of projects
- ensure the local priorities transparent to recipients and sub-recipients of funds
- create consistency and coordination between recipients' and subrecipients' projects

These written standards have been developed in conjunction with ESG recipients (City of Buffalo, City of Niagara Falls, Town of Tonawanda, and Erie County) and with service providers to allow for input on the procedure of coordinated entry/assessment system, standards, performance measures, and the process for full implementation of the standards throughout the CoC. Thus the implementation reflects the perspectives of those organizations that are directly providing homeless housing and services, including Emergency Shelter (ES), Transitional Housing (TH), Permanent Supportive Housing (PSH), Rapid Re-Housing (RRH) and Supportive Service Only (SSO).

The CoC Written Standards have been approved by the CoC, the County and City ESG recipients and providers. The Written Standards will be reviewed and revised as needed at a minimum of once per year. Agreement to abide by the Written Standards will be required to participate in the process for acquiring CoC or ESG funding.

Program Requirements for All Programs

- Programs must coordinate with other homeless services within the CoC
- Programs must coordinate with mainstream resources in the CoC including housing, social services, employment, education and youth programs for which participants may be eligible
- Programs must have written policies and procedures and must consistently apply them to all participants
- Programs that serve households with children:
 - A staff person must be designated as the educational liaison that will ensure that children are enrolled in school, connected to appropriate services in the community, including early childhood program such as Head Start, Part C of the Individuals with Disabilities Education Act, and the McKinney Vento education services.
 - The age and gender of a child under age 18 must not be used as a basis for denying any family's admission to a project that provides shelter for families with children
- Programs receiving ESG and CoC funding must participate in HMIS (Homeless Management Information System), unless otherwise stated by federal regulations. However, all homeless programs are strongly encouraged to participate in HMIS.
- Programs must meet minimum HMIS data quality standards
- Programs providing domestic violence or legal services may opt out of HMIS participation, but must utilize a comparable database to collect HUD required data elements.
- Programs must participate in Coordinated Entry System and use the prioritization criteria established in this documents.

- Programs must conduct an initial evaluation to determine the amount and type of assistance needed to regain stability in permanent housing.
- Program rules and regulations should be designed in the spirit of inclusion rather than as grounds for denial or termination. Programs should exercise judgment and examine all extenuating circumstances in determining when violations are serious enough to warrant termination so that a program participant's assistance is terminated only in the most severe cases.
- Programs must have a formal procedure for terminating assistance to a participant that recognizes the rights of the participant(s) involved.
 - Programs must use judgment and examine all extenuating circumstances in determining that a violation should result in termination
 - Every effort should be made to allow the participant to remain in the program; termination should only be exercised in the most severe cases.
 - Termination does not necessarily preclude assistance at a future date
- Programs must make known that use of the facilities and services are available to all on a nondiscriminatory basis.
- Programs may not engage in inherently religious activities such as worship, religious instruction or proselytization as part of the programs or services funded under the CoC or ESG. These activities can be conducted but must be separate and voluntary for program participants.

Record Keeping Requirements for All Projects

Participant Recordkeeping Requirements include:

- All records containing personally identifying information must be kept secure and confidential
- Programs must have written confidentiality/privacy notice a copy of which should be made available to participants if requested
- Documentation of homelessness (following HUDs guidelines)
- A record of services and assistance provided to each participant
- Documentation of any applicable requirements for providing services/assistance
- Documentation of use of coordinated assessment system
- Documentation of use of HMIS
- Records must be retained for the appropriate amount of time as prescribed by HUD

Financial Recordkeeping Requirements include:

- Documentation for all costs charged to the grant
- Documentation that funds were spent on allowable costs
- Documentation of the receipt and use of program income
- Documentation of compliance with expenditure limits and deadlines
- Retain copies of all procurement contracts as applicable
- Documentation of amount, source and use of resources for each match contribution

Occupancy Standards for All Programs

All housing units, including scattered-site programs owned and managed by private landlords, must meet applicable state or local government health and safety codes and have current certificate of occupancy for the current use and meet or exceed the following minimum standards: (For more detail refer to ESG regulations 576.403 (b) Minimum Standards)

- Buildings must be structurally sound to protect from the elements and not pose any threat to health and safety of the residents
- Must be accessible in accordance with Section 504 of the Rehabilitation Act, the Fair Housing Act and the Americans with Disabilities Act where applicable
- Must provide an acceptable place to sleep and adequate space and security for themselves and their belongings
- Each room must have a natural or mechanical means of ventilation
- Must provide access to sanitary facilities that are in operating condition, private and clean
- Water supply must be free of contamination
- Heating/cooling equipment must be in working condition
- Must have adequate natural or artificial illumination and adequate electrical resources to permit safe use of electrical appliances
- Food preparation areas must have suitable space and equipment to store, prepare and serve food in safe and sanitary manner
- Building must be maintained in a sanitary condition
- Must be at least one smoke detector in each occupied unit of the program; and where possible near sleeping areas. The fire alarm system must be designed for hearing-impaired participants. There must be a second means of exiting the building in case of fire or other emergency.

The Program, Record Keeping and Occupancy Standards as represented above apply to all programs regardless of the type of services/housing that they provide.

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

This policy applies to any recipient and subrecipient of funding under ESG or the CoC Program, including faith-based organizations that accept funds through these programs.

The following is in accordance with HUD regulations CFR part 5:

A determination of eligibility for housing that is assisted by HUD or subject to a mortgage insured by HUD shall be made in accordance with the eligibility requirements provided for such program by HUD, and such housing shall be made available without regard to actual or perceived sexual orientation, gender identity, or marital status.

Serving Families in Homeless Projects

Family includes, but is not limited to, regardless of marital status, actual or perceived sexual orientation, or gender identity, any group of persons presenting for assistance together with or without children and irrespective of age, relationship, or whether or not a member of the household has a disability. A child who is temporarily away from the home because of placement in foster care is considered a member of the family.

What this means is that any group of people that present together for assistance and identify themselves as a family, regardless of age or relationship or other factors, are considered to be a family and must be served together as such. Further, a recipient or subrecipient receiving funds under the ESG or CoC Programs cannot discriminate against a group of people presenting as a family based on the composition of the family (e.g., adults and children or just adults), the age of any member's family, the disability status of any members of the family, marital status, actual or perceived sexual orientation, or gender identity.

Here is an example of how this might apply:

An emergency shelter, transitional housing project, or permanent housing project that serves households with children. While it is acceptable for a shelter or housing program to limit assistance to households with children, it may not limit assistance to only women with children. Such a shelter must also serve the following family types, should they present, in order to be in compliance with the Equal Access rule:

- Single male head of household with minor child(ren); and
- Any household made up of two or more adults, regardless of sexual orientation, marital status, or gender identity, presenting with minor child(ren).

Equal access in accordance with the individual's gender identity

In accordance with the Equal Access to Housing Final Rule, admissions, occupancy, and operating policies and procedures of recipients and subrecipients, including policies and procedures to protect privacy, health, safety, and security, shall be established or amended, as necessary, and administered in a nondiscriminatory manner to ensure that:

- Equal access to programs, shelters, other buildings and facilities, benefits, services, and accommodations is provided to an individual in accordance with the individual's gender identity, and in a manner that affords equal access to the individual's family;
- An individual is placed, served, and accommodated in accordance with the gender identity of the individual;
- An individual is not subjected to intrusive questioning or asked to provide anatomical information or documentary, physical, or medical evidence of the individual's gender identity; and
- Placement and accommodation in temporary, emergency shelters and other buildings and facilities with shared sleeping quarters or shared bathing facilities—
 - Placement and accommodation: Placement and accommodation of an individual in temporary, emergency shelters and other buildings and facilities with physical

limitations or configurations that require and are permitted to have shared sleeping quarters or shared bathing facilities shall be made in accordance with the individual's gender identity.

- Post-admission accommodations: A recipient, subrecipient, owner, operator, manager, or provider must take nondiscriminatory steps that may be necessary and appropriate to address privacy concerns raised by residents or occupants and, as needed, update its admissions, occupancy, and operating policies and procedures.
- Documentation and record retention: Providers shall document and maintain records of compliance with these requirements for a period of 5 years.

Coordinated Entry/Assessment System

Planning Process of the Coordinated Entry

In working towards creating a new system, there were project-specific efforts made throughout the continuum towards coordinated entry/assessment in the past 3 years. It set a path for establishing the system-wide coordinated entry/assessment system.

Lt. Col. Matt Urban Human Services Center, the first provider who implemented the Housing First model in this area, has used a vulnerability index since 2011. It focuses on evaluating those who are most vulnerable and have highest risk of death. The tool has been effective in reflecting the vulnerability of clients that they have assessed and served. This tool has been reviewed and revised by a committee focusing on serving the chronically homeless in October 2014. The outreach team has been administering the score and the wait-list. The wait-list is available in both HMIS and a shared online tool with a mapping function that allows the outreach team to see where their client was last seen.

Erie County Department of Mental Health (ECDMH) has a Single Point of Access and Accountability (SPOA) system in place for years. In June, 2012, SPOA has integrated referral for housing, Care Coordination and Assertive Community Treatment (ACT) services. SPOA is intended for individuals who are at high risk of further system penetration, who are unable to maintain community based linkage and important supports, such as: psychiatric treatment and medication management, medical provider and treatment, housing and housing crisis management, substance abuse treatment, financial, social support and legal. The goal of SPOA is to have the right person, in the right service, at the right time, for the right length of time, achieving the right outcomes. The SPOA system prioritizes a person who has severe mental illness with the following factors: medical and behavioral health emergency room visits, medical and behavioral health inpatient stays, arrests, homelessness, and episodes of lethality (self-harm or harm to others), occurring in the past 12 months. A person with a risk score of 0 is technically eligible for services, though they are not likely to receive them. Anyone with homelessness is a priority for services. The more risk factors, the higher on the priority list you are. A person with a risk score of 8 will receive services before a person with a risk score of 2.

ECDMH obtains the risk score through an online referral and the referring agent enters the information and the system tallies the responses. The majority of the non-dedicated/prioritized PSH units are administered by ECDMH, or take referral from ECDMH. The CoC will use the SPOA system as the coordinated entry system for all PSH units that are not dedicated or prioritized for persons experiencing chronic homelessness.

A Common Assessment Committee was formed in early 2012. The common assessment that was developed at that point was based on client's income level, barriers of obtaining and retaining housing as per National Alliance of Ending Homelessness recommendation for triaging for Rapid Re-Housing. City of Buffalo Emergency Solutions Grant (ESG) funded Rapid Rehousing, as a pilot project, used the common assessment to screen clients through the program. Assessments were uploaded to HMIS and referrals are made through HMIS as well. The process is fairly successful: the CoC housed 114 households during last year's pilot project. However, while comparing the new tool to those that were nationally adopted, like the VI-F-SPDAT, our tool was less precise with barriers. While we accurately identified barriers, we did not clearly operationalize them, failing to include precise definitions in the assessment tool. We, as the CoC, decided to adopt the VI-F-SPDAT for families and also to learn from the past and develop other tools based on scientific research.

In the spring of 2014, the Homeless Alliance of WNY hosted four (4) focus groups which were facilitated by Dr. Diane Bessel, Assistant Professor at the Department of Social Work and Sociology of Daemen College, who has extensive experiences working on issues of homelessness. The aim of the focus group was to discuss and assess, the need of a coordinated entry/assessment, initial model recommendation, and key factors on implementing the coordinated entry/assessment system that is viable to our community. There were a total of 74 members from the Continuum who participated in the discussion. After the focus groups, there were two committees formed: Access and Assess. Representatives from different housing programs were present to discuss the two topics. The Assessment tools that are described below are developed and approved by the Assess Committee and the CoC.

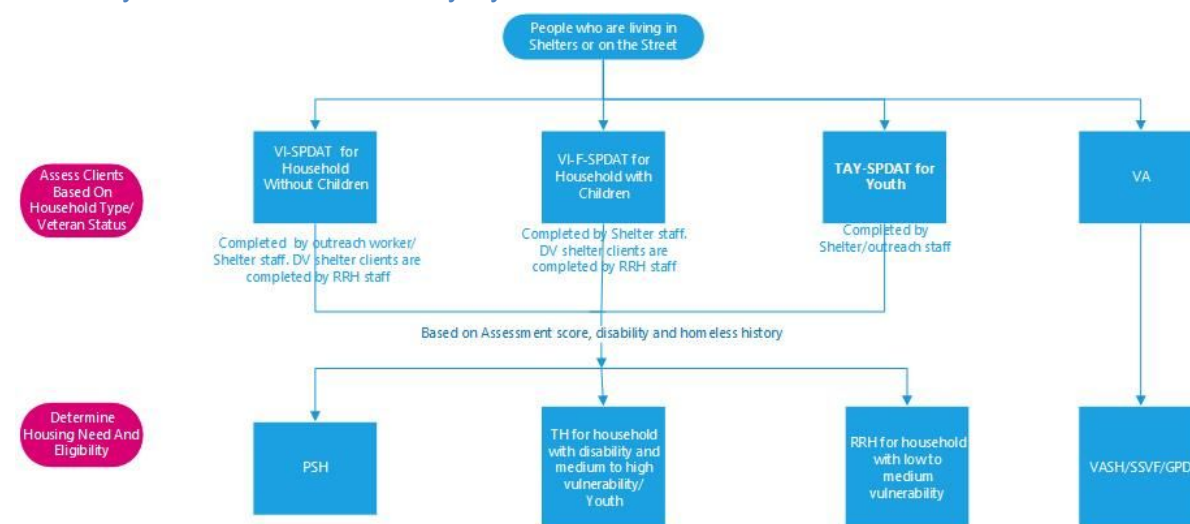
Being located in a right-to-shelter state has meant that the point of entry into our homelessness assistance system is the city/county department of social services. At the time that a person who is experiencing homelessness or at risk of being homeless applies for assistance, he/she is also screened for eligibility into other welfare and assistance programs, such as the Home Energy and Assistance Program run by the New York State Office of Temporary Disability Assistance, Supplemental Nutrition Assistance Program, and other aid. The department of social services provides many aid programs that assist county residents in staying in their own home and thus serves as the first point of access for homelessness prevention services. Other best practices, such as attempting diversion from the homeless shelters, have been standard practice at the department of social service for many years. ESG funds a prevention program in Erie County focus on those who are unjustly denied benefits at the department of social services, or are facing legal issues of eviction. The Erie County Department of Social Services is

required to conduct a face-to-face interview before clients are placed to shelters and which has proven effective. For this reason, and given a relative lack of other homelessness prevention programs in the area, it was clear that starting the coordinated entry at the point of shelter for housing and housing related services was most efficient, as opposed to setting up a new system to assess people before they entered the shelters. There are discussions about assessing all clients' need for future programing and funding purposes. However, due to lack of funding currently supporting such a function, it is considered as a 2nd phase plan for the Coordinated Entry/Assessment system.

Late 2014 to January of 2015, 4 different housing committees were formed based on the population and housing intervention types available to discuss the details of the wait-list criteria, referral process, and other implementation procedures. In February of 2015, the procedure for the coordinated entry system were added into the written standards and approved by the CoC. Implementation of the system wide coordinated entry for our region officially starts on February 18th, 2015. The four housing committees were merged into three, based on different service population and will be responsible for reviewing cases within its specific population. They are PSH housing committee, Family housing committee and Youth housing committee. Case conferences are held regularly. An accountability committee will be formed to monitor the overall process and evaluate the system performance.

In September, 2015 the Local Chronically Homeless Vulnerability Index (CH-VI) was modified again to accommodate the need of assessing all households without children, instead of only for those who are chronically homeless living on the street, due to new projects became available for that population. This tool (Appendix B-VI-SPDAT) has been approved by the CoC with other modification related to the coordinated entry in October 21, 2015.

Summary of the Coordinated Entry System



The CoC has adopted 3 different tools for 3 different population:

- *Population:* Households without children

- *Tools:* Vulnerability Index and Service Prioritization Decision Assistance Tool (VI-SPDAT was approved on 9/21/2016 to replace the local tool) Coordinated Assessment for household without children (Local VI for Single, see **Appendix B**)/Single Point of Access and Accountability (SPOA)
- *Population:* Homeless Households with Children
 - *Tool:* Vulnerability Index and Family Service Prioritization Decision Assistance Tool (VI-F-SPDAT, developed by OrgCode, see **Appendix C**)
- *Population:* Homeless Youth under 25
 - *Tool:* TAY-VI-SPDAT (see **Appendix D**)

All ESG or CoC funded shelters/outreach projects are required to use the coordinated assessment tools to assess clients. All ESG or CoC funded housing projects are required to take referrals from the coordinated entry system. All non-ESG or CoC funded projects are encouraged to participate in Coordinated Entry System. If a shelter doesn't have the ability to participate, or is not willing to participate, clients could still be referred to either the Assessment Team or the Housing Providers. Client will be assessed and determine eligibility.

Veterans

All assessment forms will be used to identify Veterans in need of assistance. Once identified, Veterans will be referred to the Veterans Administration for consideration for VASH or to a SSVF provider as appropriate. Eligible Veterans will be offered permanent housing first through VASH or SSVF. They will have a choice to enter the transitional Grant Per Diem programs offered by the VA if they need longer term support services. The goal will be to permanently house them within 90 days. All Veterans in the GPD program will be offered an option for permanent housing every two weeks but will not be forced out of GPD before they are ready. Veterans who are not eligible for VASH or SSVF assistance will be prioritized for CoC funded programs such as Permanent Supportive Housing if they are eligible, Transitional Housing for those with higher needs or Rapid Rehousing. The goal is to permanently house all Veterans regardless of VA eligibility within 90 days of the first engagement or within 90 of when they choose to accept an offer of permanent housing.

Use of HMIS in the Coordinated Entry

ServicePoint is our Homeless Management Information System (HMIS) software. It allows us to manage referrals, manage measurement score (for example, the VI-SPDAT score) and also allows us to create customized assessments and reports. Exception will be made to accommodate domestic violence shelters and domestic violence transitional programs.

The Local Chronically Homeless Vulnerability Index has been entered into HMIS by the outreach team since Oct. 2013. The new assessment for households without children was created in HMIS to replace the previous Local CH-VI, though previous records will be stored in HMIS. VI-F-SPDAT is going to be programmed into ServicePoint in the near future, so currently we are uploading the scanned intake into HMIS as an attachment to the client record and

manage the waitlist using HMIS customized assessment and report. The Youth assessment is also implemented in a similar manner as the family one.

The wait-list is managed by the Assessment Team (which includes shelter staff and outreach staff) and is monitored by the Homeless Alliance, who is the CoC and HMIS Lead agency. Meetings are held regularly to review cases and the process of referring and housing clients. Homeless Alliance staff will also manage a list of clients who are successfully housed and publish the total number/countdown on our website.

Emergency Shelters

The Emergency Shelter System in our CoC is currently composed of 18 providers with a total of 524 year-round beds. Seasonal beds are also available in various locations during the harsh winter months. Emergency shelter programs serve various sub-populations: households with children, individuals male or female, unaccompanied youth, and victims of domestic violence. The level of support services available to participants varies greatly from program to program. Currently, there are multiple entry points into the emergency shelter system. The local department of social services (DSS) is the largest single point of entry. The length of stay is generally expected to be less than 30 days; extensions may be granted at some shelters if participants are following through with their case plans.

Erie County DSS Emergency Shelter Access

There are several shelters where homeless persons must be approved for placement by DSS before entering the program. These include: My Place Home, Salvation Army Family Shelter, Faith Based Fellowship, Family Promise, Haven House, a portion of beds at Buffalo City Mission Men's Center (25 beds), and Matt Urban Hope House. In rural areas without any shelter, DSSs have to place eligible homeless people in hotel/motel. If shelters are full, DSSs have an obligation to place clients requiring shelter into hotels.

- Person(s) experiencing homelessness must go to the Rath Building, located at 158 Pearl Street between 8AM and 4PM and be screened for eligibility by the Emergency Housing unit. For additional information you may call the DSS Call Center at 716-858-2714.
- After hours, weekend and Holiday placements can be made by calling Crisis Services, Inc. at 716-834-3131. As of 1/1/16, Crisis Services will no longer be the DSS after hours provider. 2-1-1 is our new provider.
- If determined to be eligible, a placement will be made at one of the emergency shelters or a hotel/motel placement can be made if an appropriate shelter bed(s) is not available.
- While in shelter, the participant must fulfill all DSS requirements provided to them in writing; i.e. – housing search, getting additional documentation for public benefits eligibility determination, etc.

- If denied an emergency shelter placement, or placement is terminated before permanent housing is accessed, a fair hearing may be requested by calling 1-800-342-3334. Legal Services may be provided by calling Neighborhood Legal Services at 716-847-0650.

Other Erie County Emergency Shelter Access:

The other emergency shelters include: Non-DSS beds at Buffalo City Mission Men's Center and Cornerstone, Little Portion Friary, Haven House¹, St. Luke's Mission of Mercy, Compass House, and Transitional Services, Inc. Homeless persons access these programs by:

- calling or going directly to the shelters to find out about bed availability
- calling 2-1-1 or Crisis Services After Hours
- Haven House Domestic Violence Hot Line – 716-884-6000
- Compass House Runaway Homeless Youth Hot Line – 716-886-0935

Note: The Restoration Society, Inc. operates a Drop-in Center, Harbor House, that is often used as if it is an emergency shelter by the community. For example, after-hour homeless persons will be referred to Harbor House from other shelters or other homeless persons; people who are on "do not house" lists at other shelters, etc. However, Harbor House is not an emergency shelter and DSS cannot place people there in lieu of emergency housing. During November-March every year, is our "Code Blue" season, which defined as nights when temperatures are below 15 degree Fahrenheit. Harbor House, the Matt Urban Hope Center, and St. Luke's will offer cots for any homeless people. DSS must continually places eligible individuals or families into shelter and not to places them in Code Blue cots.

Niagara County Emergency Shelter Access:

In Niagara County, there are two DSS locations: 20 East Avenue, Lockport and 301-10th Street Niagara Falls. People who go to DSS and are eligible for emergency shelter will be placed into Shelters. After hours, weekend and holiday placements can be made by Community Mission of Niagara Frontier, Inc. (716-285-3403). There are shelters in Niagara County that take walk-in individuals and families as well.

- Community Missions of the Niagara Frontier (716-285-3403)
- Niagara Gospel Rescue Mission (716-282-0432)
- Lockport Cares (716-438-2273)

Shelter Access for domestic violence and youth:

- Family and Children's service of Niagara, Inc (domestic violence)-716-285-6984
- YWCA of Niagara domestic violence shelter and hotline-716-433-6716
- Casey House Runaway Hotline for Youth 716-285-6984

Genesee County Emergency Shelter Access:

¹ Haven House has multiple points of access: the Erie County Department of Social Services, Crisis Services, a national hotline number, and a local hotline number (listed above).

The Genesee County DSS office, located in County Building 2 at 5130 East Main Street in Batavia, NY 14020, serves as the primary source of housing service referrals in Genesee County. Person(s) eligible for housing services from Genesee DSS have access to temporary assistance, hotel/motel vouchers, and comprehensive referral options. For more information, contact the primary office during regular business hours (8:30AM-5PM) at (585) 344-2580.

For those in need of domestic violence services and shelter in Genesee County, the YWCA offers services, including a safe house. The YWCA is located at 301 North St. in Batavia and can be contacted at (585) 343-5808 during normal business hours of 8:30AM-5:00PM or after hours at their 24 hour hotline (585)343-7513.

If housing resources are not available through the Genesee County DSS, then applicants will be referred to Salvation Army for hotel/motel vouchers, located at 529 East Main Street in Batavia, NY. The Salvation Army can be contacted during normal weekday hours (9AM to 4PM) at (585) 343-6284.

During the winter months, those in need of shelter are referred to the seasonal Genesee Community Warming Center for men and women run by Batavia's First United Methodist Church at 8221 Lewiston Road in Batavia, NY. The shelter opens when the temperature is 15 degrees fahrenheit or lower and accepts clients from 8PM to 11PM, closing at 8AM. Additional Warming Center details and day-of operation status can be accessed through their 24-hour hotline: 585-993-6371.

Orleans County Emergency Housing Access:

Person(s) experiencing homelessness in Orleans County should go to the Orleans County DSS office at 14016 Route 31 West, Albion, NY 14411 for screening and eligibility of housing services, including temporary assistance, motel vouchers, and comprehensive referrals. Orleans DSS can be contacted during regular daytime hours (9AM to 5PM) by calling (585) 589-7000.

For transitional and domestic violence housing emergencies, applicants will be referred to one of two programs offer by Pathstone Corporation in Orleans County. Visions is Pathstone's transitional housing and supportive services program located at 7 Lydun Drive Extension, Albion, NY 14411 and can be contacted during normal office hours (9AM to 5PM) by calling (585) 589-7246. Domestic violence victims will be referred to Pathstone's Domestic Violence Prevention Program, located at an undisclosed location but can be reach during daytime hour of 9AM to 5PM and their 24-hour hotline at (866) 314-8716.

Wyoming County Emergency Shelter Access:

In Wyoming County, the DSS office is located at 466 North Main Street, Warsaw, NY 14569. During normal business hours (8AM to 4:30PM) they can be reached at (585) 786-8900. Walk-in services for clients experiencing a housing crisis, and who meet the office requirements, have access to motel vouchers, temporary assistance and a comprehensive referral list of

services throughout the region. After normal business hours, a DSS case manager is on-call for any crisis services through a 24-hour hotline at (585) 322-6490.

If an immediate placement through motel vouchers in Wyoming County cannot be found, then the Wyoming DSS will transport the client to either City Mission in Buffalo, NY or to a shelter in Rochester, NY. For a domestic violence emergency, Wyoming DSS contracts RESTORE Sexual Assault Services for counseling and preventive services, located in 4 West Buffalo Street, Warsaw, NY 14569 and can be contact by a 24-hour hotline number (800) 527-1757. Since there are no shelters for domestic violence victims in Wyoming County, RESTORE often will transport clients to surrounding Counties for domestic violence shelter services.

Participant Eligibility

Participants must meet the HUD definition of homelessness and with limited resources or supports. They also must meet the program's sub-population criteria, i.e. age (youth), gender, domestic violence, etc.

Permanent Supportive Housing

Participant Eligibility

All CoC programs need to follow the Referral Process and the Order of Priority discussed in this chapter and all participants of PSH need to have a disability.

Participants need to also meet any project specific requirements, for example, having a Serious and Persistent Mental Illness for Erie County Department of Mental Health funded beds.

Referral Process

The Local Assessment Team consisting of local outreach team and shelter staff (for all PSH beds, referrals are managed by Matt Urban outreach team) uses the Vulnerability Index and Service Prioritization Decision Assistance Tool (VI SPDAT) to assess homeless individuals who are living on the street or in shelters. They are recorded in HMIS. If a client presents to a service provider or institution, the provider could conduct the VI-SPDAT and refer the client to the Assessment Team if homeless status is confirmed (see Referral form in Appendix F). Matt Urban Outreach is the dedicated Assessment Team Lead and manages the list and makes referrals to PSH providers.

Although people who are reported as CH/Pre-CH/high VI in HMIS will be reviewed by the Lead, documentation will be required before the Lead marks an individual as "eligible" (refer to "PSH Eligibility Determination" in this chapter). Outreach workers/Service Providers/Shelter staff who submitted the referral or who have worked with the client will be responsible for obtaining the necessary documentations. If the referral agency is not able to submit the documentation, the case can be referred to Matt Urban Outreach team to become an outreach client.

PSH providers will inform the Assessment Team Lead of an opening within 2 weeks (exception may occur if the client left the program without notice) of a unit available (after the unit passes inspection and under rent reasonableness/ FMR). Assessment Team Lead will follow the Order of Priority below and refer the individual/household to the PSH provider. PSH providers will follow a no-denial policy and use a housing first approach.

For ECDMH funded beds, the referral will also be required to submit to the Erie County SPOA system, which is the aforementioned online referral system. ECDMH Coordinator of Housing Services will communicate with the Assessment Team Lead and select the client based on the Order of Priority. The appropriate client will then be referred to funded agencies.

Process Status Key Words and Definitions:

Declined: If a client is eligible for PSH but declines housing, outreach team will continue engage with them. He/she will not be assigned to the PSH providers. But he/she will remain on the waitlist, but be marked as “Decline for Housing”. This is then a separate list of individuals (“CH/Pre-CH active but declined” report in HMIS) that can be used by Outreach providers to coordinate continued engagement. Evidences of outreach efforts and continue engagement on offering housing should be recorded in HMIS.

PSH Eligibility Determination: Based on the PSH Program Eligibility and Order of Priority stated in this document. Assessment Team Lead will ensure the documentation is in place before a person will be marked as “PSH eligible” in HMIS or referred to PSH providers. Documentation that is necessary in this stage includes:

Proof of disability.

And

A completed VI-SPDAT in HMIS.

And

1. If a person is prioritized based on the 1st,2nd or 3rd order, homeless history, SPOA consent if the individual has mental illness/client consent and a PSH referral sheet are required
2. If a person is prioritized based on score, current homeless verification and SPOA consent if the individual has mental illness/client consent are required.

Referred: Clients who have been assigned to a PSH agency by the Assessment Team Lead/SPOA in writing or through SPOA. Referral date and referred agency should be recorded in HMIS. One client could be referred to more than one agency, especially those who are deemed hardest to serve. All assigned agencies should be aware that such client is working with multiple agencies.

Engagement period: PSH providers have 45 days to engage with the client. If no progress is made (not able to place a person in bridge housing or not able to show client apartments) the

PSH provider will receive a Negative Disengagement Notice and the client will be referred to another agency.

Please note that during the engagement period, a unit will be held for this participant and they will not be disqualified if they are temporarily housed with subsidy in the interim wait period.

72-hour rule: If there is more than one person on a PSH agency's waitlist and there is only one apartment available. The PSH provider will present the apartment to the highest ranked client. If the client cannot be found or is not willing to take the apartment within 72 hours, then the agency will move on to the next client while still working with the original client.

Housed: Housed means that a client is physically moved into an apartment or other permanent form of housing. The agency will also open this case in HMIS at this point in time. Once a participant has been housed in the program, they will retain their apartment unless it has been vacated without notice for more than thirty (30) days. After a person is housed, the housing providers have up to 180 days to obtain third-party Homeless documentation. Housing providers also have 45 days to obtain proof of diagnosis. Details refer to "Recordkeeping Requirements" in this chapter.

For clients who are housed but passed away, incarcerated or institutionalized temporarily, the housing provider could pay for the apartment for up to 90 days.

Disenroll: Successful disenrollment is often also called Graduation from programs, which means a person is getting section 8 or other subsidy and moving out of the PSH program. Other reasonable disenrollment includes circumstances in which client is extremely violent, incarcerated, in need of higher level of care, or a client abandoned the apartment. Agencies should not evict a client due to the following reasons: failure to participate in supportive services; failure to make progress on a service plan; loss of income or failure to improve income; domestic violence; or any other activities not cover in a lease agreement typically found in the project's geographic area.

Missing (MIA): If a client has no contact with any agency staff (not only the PSH provider who are assigned to, but any shelter, outreach team, or other clients) for at least 90 days, then a client will be marked as missing and become inactive on any list they are on. However, their name will not be taken off the homeless list until we know they are housed. If a person becomes homeless again, then their status will change from MIA back to homeless and the Assessment Team will reassess them if necessary.

Chronically Homeless Definition

The definition of "chronically homeless", as stated in Definition of Chronically Homeless final rule is:

(a) A "homeless individual with a disability," as defined in section 401(9) of the McKinney-Vento Homeless Assistance Act (42 U.S.C. 11360(9)), who:

i. lives in a place not meant for human habitation, a safe haven, or in an emergency shelter; and
ii. Has been homeless and living as described in paragraph (a)(i) continuously for at least 12 months or on at least four 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 in paragraph (a)(i). Stays in institutional care facilities for fewer than 90 days will not constitute as a break in homelessness, but rather such stays are included in the 12-month total, as long as the individual was living or residing in a place not meant for human habitation, a safe haven, or an emergency shelter immediately before entering an institutional care facility;

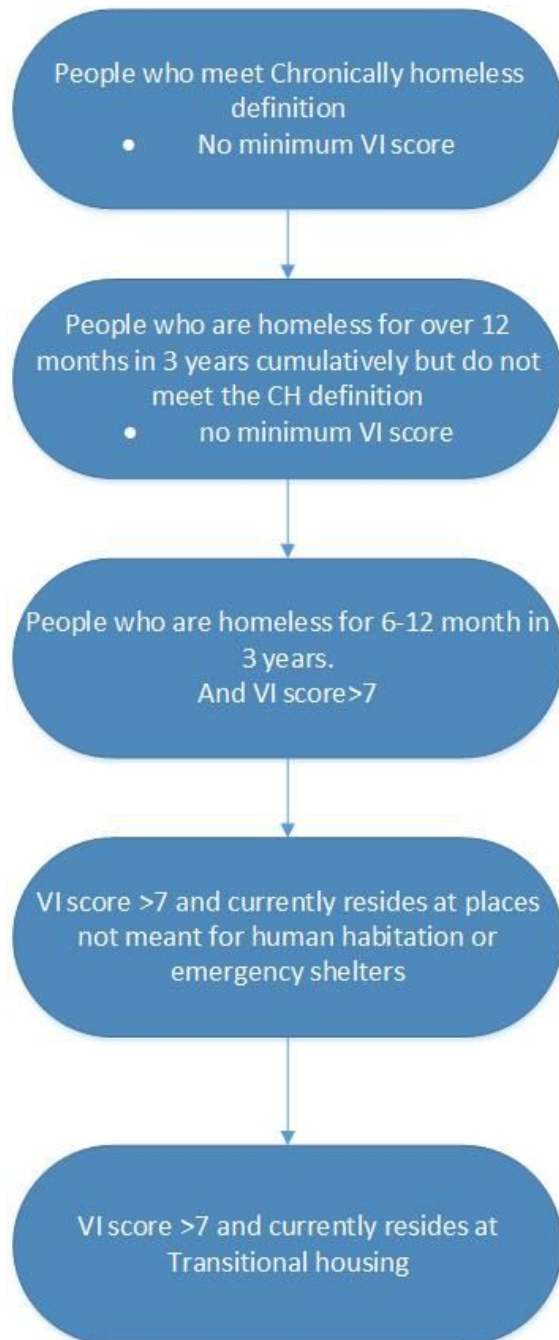
(b) An individual who has been residing in an institutional care facility, including a jail, substance abuse or mental health treatment facility, hospital, or other similar facility, for fewer than 90 days and met all of the criteria in paragraph (a) of this definition, before entering the facility;

(c) A family with an adult head of household (or if there is no adult in the family, a minor head of household) who meets all of the criteria in paragraph (a) or (b) of this definition (as described in Section I.D.2.(a) of this Notice), including a family whose composition has fluctuated while the head of household has been homeless.

Record keeping requirements are listed in the Final Rule. Additionally, CoC required PSH to have a letter from the Coordinated Assessment team Lead when serving non-CH to ensure the person placed in PSH followed the Order of Priority.

The final regulation was published in the Federal Register on December 4, 2015. CoC recipients must comply with the regulations promulgated by this rule as of January 15, 2016.

Order of Priority



In order to qualify for PSH, a person must have a long term disability.

1. First priority is given to chronically homeless individuals or families. The order of referral is based on their VI-SPDAT/VI-F-SPDAT score.

When there are no chronically homeless individuals or families on the waitlist, the order of priority will continue as:

2. Homeless individuals and families have cumulative time homeless for more than 12 months in 3 years and order of referral is based on their VI-SPDAT/VI-F-SPDAT score.
3. Homeless individuals and families homeless continuously or episodically for more than 6 months but less than 12 months in 3 years.
And scored 8 or above on the VI-SPDAT/VI-F-SPDAT.
Note: for people who are homeless over 6 months but score less than 8, they will be referred to Rapid Rehousing.
4. Homeless individuals and families with a disability coming from places not meant for human habitation or emergency shelters
And scored 8 or above on the VI-SPDAT/VI-F-SPDAT.
5. Homeless individuals and families with a disability coming from transitional housing
And scored 8 or above on the VI-SPDAT/VI-F-SPDAT.

All referrals must be based upon the Order of Priority and no waiver will be given to any individuals who do not meet the criteria. Based on Order of Priority, people who are eligible for PSH but due to capacity/vacancy will be less likely to be placed in PSH in a short period of time will be placed in Rapid Rehousing. Rapid rehousing will conduct re-evaluation using VI-SPDAT every 3 months and determine if RRH meets their needs. If not, the client will remain on the PSH list until the next available bed is open.

For people who do not meet the first 3 priorities but meet the 4th or 5th priority, they will be listed on a High VI List. Outreach, Housing, and Coordinated assessment team lead will take the following steps to connect individuals on High VI list:

1. Reach out to initial referral source via HMIS to gather info on client's whereabouts.
2. If no response, will work to contact other providers linked to client (Care Coordination services).
3. If all steps are taken but unable to reach the individual, then Coordinated Assessment Team Lead will mark as "Out of Contact" in HMIS and move on to next individual based on Order of Priority.

A person who has high VI score could be referred to Rapid Rehousing/CTI when it is appropriate. Situations include but are not limited to: first time homeless; Disability is not severe or client only has minor physical or medical disabling conditions; Have other resources/supports; No street homeless history. However, Rapid Rehousing/CTI should re-evaluate the client and determine if PSH is more appropriate once they are housed.

Dedicated and prioritized CH PSH beds must follow the Order of Priority above. For the 15% turnover beds that are not prioritized CH, it must at least follow from the 3rd priority.

Disability restrictions: Certain programs due to funding restrictions, have restrictions on the type of disability, e.g. Severe Persistent Mental Illness (SPMI). Thus when a bed opens in a disability restricted project, the order of priority may be overrode. For example, if there is a SPMI bed open, but the next most vulnerable person based on the above order does not have SPMI, then the coordinator will have to skip this person and refer the next person on the list with the highest VI score and SPMI. However, a diagnosis should not be required at referral.

When scores are tied: In each priority, when scores of vulnerability are tied, preference should be given to those who are living in places not meant for human habitation. For PSH openings that could take single and families, the project should prioritize households with children who fit the eligibility criteria over households without children.

For veteran prioritized programs, only veterans will be prioritized based on the Order of Priority.

All referrals should be documented both on paper and in HMIS with clients' homeless history and VI score.

The order of priority in this section is adopted from HUD's Notice on Prioritizing Persons Experiencing Chronic Homelessness and Other Vulnerable Homeless Persons in Permanent Supportive Housing and Recordkeeping Requirements for Documenting Chronic Homeless Status, which was revised and released on July 25, 2016.

Recordkeeping Requirement

Detail can be found in the final rule of Chronically homeless²:

Third party documentation preferred:

- At least 9 months of time homeless should be documented by third party; up to 3 months can be documented by self-certification alone
- Where third party absolutely cannot be obtained, up to the full time can be documented by self-certification
 - Provider must document attempts at collecting third party and the conditions the individual or family is living in.
 - No more than 25% of individuals and families assisted in a project can have more than 3 months documented by self-certification
- One documented encounter in a month, assume homeless for entire month unless there is evidence of a break (e.g., a stay in TH)
- Acceptable Third-Party Documentation:
- Individual record of a stay in emergency shelter, street outreach from HMIS or comparable database
- Written observation from outreach worker of encounters with household and description of where household was residing

² <https://www.hudexchange.info/resources/documents/Defining-Chronically-Homeless-Final-Rule.pdf>

- Written observation of community member: Community members include police officers, owners of businesses, etc. NOT friends/family
- Written referral by another housing or service provider

Documenting Disability:

- Qualifying disability must be documented by one of the following:
- Written verification of disability from licensed professional
- Written verification from SSA
- Receipt of disability check
- Intake staff-recorded observation (must be supported by evidence above within 45 days of entry)
- Appendix G listed credentials for diagnosing addictions and mental health disability

Rapid Rehousing for Families and Individuals

Payment Requirement

Prior to rental assistance, the apartment must pass the necessary inspections (HUD habitability/HUD Housing Quality Standard and visual lead for families & pregnant individuals). A one-year lease must be provided for CoC funded projects and ESG funded Tenant-based Rental Assistance (TBRA) has no minimum lease period requirement. The rent for the apartment must also be within Rent Reasonableness Guidelines and not exceed the Fair Market Rent. Short to Medium Term financial/rental assistance may be provided. Amounts may vary depending on household need. The total amount of financial assistant for one household cannot exceed \$10,000.

The following percentage is based on the client responsible rent, which is the actual rent minus rental allowance that the Department of Social Service provides, if there is any. The length of rental assistance should be determined by the client's need and should not be longer than 12 months. The percentage of rent will be scaled if client and caseworkers determine that a briefer stay is more appropriate; the below numbers represent the maximum subsidy that will be paid at the months of stay below. For instance, no more than 70% of the rent will be covered by the subsidy at month four, but a client could pay a higher share of rent at month four if they and their caseworker determine that is appropriate.

	<u>Client Pays</u>	<u>Subsidy</u>
0-3 Months	0%	100%
4-6 Months	30%	70%
7-9 Months	70%	30%
10-12 Months	100%	0%

A household can only be eligible for this program 2 times in 3 years and total rental assistance cannot exceed 24 months.

Participant Eligibility for Rapid Re-housing:

In order to qualify for either ESG or CoC program, they have to meet the following requirements:

1. For ESG funded programs, participants must meet the Literally Homeless definition. For FY2014 CoC funded program, client could only be from the shelter or living on street and has to be household with children. For FY2015 CoC funded program, client could be individual or families who are from the shelter or living on the street. Program may also have it's own priority, for example, domestic violence, geographic area, or other population.

2. Population specific requirements:

Household without children:

- A. Individuals who score 4 or above on the VI-SPDAT AND
- B. Household incomes less than 30% of AMI for ESG program and less than 50% of AMI for CoC program.

Household with Children:

- A. Homeless Families who are in shelter and whose VI-F-SPDAT score is 4 or above.
- B. Housing history, education level and employment history will also be considered when choice of transitional housing and rapid rehousing are both available
- C. Household incomes less than 30% of AMI for ESG program and less than 50% of AMI for CoC program.
- D. A household can only be eligible for this program 2 times in 3 years and total rental assistance could not exceed 24 months.

Youth:

- A. Young adults who are between the ages of 17-24.
- B. Household income less than 30% of AMI for ESG program and less than 50% of AMI for CoC program.
- C. TAY-VI-SPDAT score of 4 or above.

NOTE: In the event an individual who is enrolled in the program while residing in the shelter is asked to leave the shelter, the case manager may assist in securing alternative shelter placement. Individual must be homeless at the time of being housed.

Residential Requirements:

For the ESG funded projects, the project has to prioritize participants who are residents of the ESG geographic area.

Referral Process and Criteria

Assessment Team (include outreach team and shelter staff) will conduct an intake to all homeless clients who stayed at the shelter more than 7 days and interested in participating in CoC funded housing program by using the VI-F-SPDAT, Local VI for Single or Local Youth

assessment based on the household composition and enter their information within a week into HMIS. Case managers from Rapid Rehousing projects will take the highest scored client among the RRH score range at any point in time when there is availability present and meet with the client to perform the eligibility screening to determine final enrollment. In the case that shelters (for example domestic violence shelters) do not participate in HMIS or coordinated assessment, they can still make a referral to the RRH providers and RRH provider will be the one assess the clients.

Waitlist selection process:

1. Household has to be staying in shelter/street at enrollment.
2. Household with higher scores have higher priority than those who have lower scores, and households with higher scores will be considered first regardless date of entry.
3. Households who have already enrolled into a Rapid Rehousing project will not discontinue services because of higher score household enter shelter.
4. Households, who are in the referral/screening process but have not yet enrolled into the Rapid Rehousing project, will be treated like any other households in the waitlist.
5. If two or more households have the same score, whoever has the longest history of homelessness will be prioritized and served first.
6. Household with children whose score is 7 or above on the VI-F-SPDAT, and meet the barriers below will be referred to transitional housing first. Otherwise, Rapid rehousing should be considered the first referral.
 - a. Lack of stable housing history (3 evictions in 2 years)
 - b. Low education level (lower than a high school diploma or do not have GED)
 - c. Has little or no employment history
7. A family that left the shelter voluntarily before enrollment or during housing search period will not qualify for a housing subsidy unless they present as homeless again at a later time.
8. VI score for will be valid for 3 months from interview. After the 3 month period, Case managers will need to conduct another interview to reevaluate eligibility criteria. Reevaluation could also be conducted when there are significant changes to the household.

ESG project will have priority for its geographic area over the prioritization above. For example, if a family is presently homeless and scores 4 on the VI-F-SPDAT, and their residential area is within Erie County but outside the City of Buffalo (which has its own ESG funded program), then the Erie County's RRH project could take this household over another family who scored a 7 but lives in Buffalo. Some RRH programs have priority to domestic violence or youth and will prioritize those population as stated in their contract. For veterans who are not eligible for VA services, he/she who meet the program criteria listed above will be prioritized in CoC funded programs.

Transitional Housing for Families

HUD-funded transitional housing projects in our community include Gerard Place and the YWCA of WNY. Currently there are 27 units (Gerard Place has 14 units, YWCA of WNY has totaling 13 units) in total and both only serve homeless families. Both programs have committed to housing first approach and adopt low barriers policy on admission.

Participant Eligibility

- a. Households must meet the definition of homelessness and are currently staying at an emergency shelter before enrollment to the transitional housing project.
- b. Must have a VI-F-SPDAT score between 7-14. Clients who score 7-8 must also have 3 barriers described below. Clients who scored 9-14, without a long term disability will be referred to TH. Clients who scored 9-14 and are not considered chronically homeless will be referred to transitional housing projects first before considering assign to permanent supportive housing.

Referral Process and Criteria

Shelter staff will do an intake for all families who stayed at the shelter for more than 7 days and interested in participating in CoC funded housing program by using the VI-F-SPDAT and enter their information in HMIS within a week. Transitional housing program staff will follow the criteria below and select the candidate and notify the shelter staff. In the case that shelters do not participate in HMIS or coordinated assessment (for example, domestic violence shelters), they can still make a referral to the transitional housing providers and the transitional housing provider will be the one assess the clients. Rejection has to be reviewed by the Family Housing Committee and the Family Housing Committee will make the final decision.

1. Household has to be staying in shelter at enrollment.
1. Households with a higher score will have higher priority than those that have a lower score, and household with a higher score will be considered first regardless date of entry.
2. Household whose score is 9-14 and are not considered chronically homeless will be referred to transitional housing projects first before considering assign to permanent supportive housing.
3. Household whose score is 7-8, would need to meet all the barriers below. Otherwise, rapid rehousing should be considered the first referral.
 - a. Lack of stable housing history (3 evictions in 2 years)
 - b. Low education level (lower than a high school diploma or do not have GED)
 - c. Has little or no employment history
4. Households who have already been enrolled into a transitional housing project will not be displaced if a household with a higher score enters a shelter.
5. Households, who are in the referral/screening process but have not yet been enrolled into a transitional housing project will be treated like any other households in the waitlist.

6. If two or more households have the same score, whoever has the longest homeless history will be prioritized and served first.
7. If there are openings but there are no families score higher than 7, the Family Housing Committee could review clients on a case-by-case basis.
8. A family that leaves the shelter before enrollment or during housing search period will not qualify for transitional housing placement unless they present as homeless again at a later date.
9. The VI-F-SPDAT score for a family will be valid for 3 months from interview. After the 3 month period, Case Managers will need to conduct another interview to reevaluate eligibility. Reevaluation could also be conducted when there are significant changes to the household.

For veteran who doesn't qualify for VA services, he/she who meet the program criteria listed above will be prioritized in CoC funded programs.

Transitional Housing for Youth

Program Summary and Eligibility

There are two transitional housing projects for youth in our community. Teaching and Restoring Youth is a 10 unit single site facility that only accepts homeless female youth who are 16-21 years old. United Church Home is a 10 unit single site facility that only accepts homeless male youth who are 16-20 years old. Compass House, a youth shelter who takes clients under 18, is appointed as the point of entry. Currently we do not have a dedicated youth shelter for people aged 18-24 years old. However, Compass House has a resource center that assists clients up to 24 years-old for various needs. We find that most homeless youth do go to Compass House. Programs are required to adopt a Housing First approach and adopt low barriers policy on admission.

Referral Process and Criteria

Compass House case managers are the point of assessment for all the youth age under 25, which includes not only the one who goes to Compass House shelter/resource center, but also from any resources. Compass House will screen youth who are homeless and fit the program age requirement and make referrals accordingly. The Youth Housing Committee has developed a Coordinated Assessment Tool for Youth (see appendix D) The Transitional Housing case manager will perform a final assessment with the clients and determine final enrollment. Rejection has to be reviewed by the Youth Housing Committee and the Youth Housing Committee will make the final decision.

1. Participants with higher score have higher priority than those who has lower score, and Participants with higher score will be considered first regardless date of entry.
2. Participants have to be homeless or at imminent risk of being homeless youth. Preference is given to those who are currently living on the street, secondly to those who are staying at shelter.

3. Participants who have already enrolled into a transitional housing project will not be displaced if a person with a higher score enters a shelter.
4. Participants who are in the referral/screening process but have not yet enrolled into a transitional housing project, will be treated like any other participants in the waitlist.
5. If two or more clients have the same score, whoever has the longest homeless history will be prioritized and served first.
6. With each opening, a maximum 5 clients who are within 3 points difference on the top of the list will be canvassed for placement. However, if none of the 5 can be reached within 72 hours, the Compass House caseworker will reach out to the next 5 clients on the list.
7. Compass House caseworker will keep in contact with the people on the waitlist on a regular basis to determine housing status. If there are some significant changes in status, they may be reassessed by the caseworker.

Standard Outcomes

Standards listed below apply to all CoC and ESG funded programs.

Emergency Shelters

- Average length of stay is less than 35 days
- 50% of participants exit with a successful housing outcome³ and/or
- 30% of participants exit to permanent housing
- Less than 30% of participants exit to an unknown location
- 60% of participants exit with/linked to cash income
- 60% of participants exit with/linked to non-cash resources.

Rapid Rehousing

- 80% exit to permanent housing situation
- 54% or more of adult participants will have income from sources other than employment
- 40% or more of adult participants will increase income from sources other than employment
- 56% or more of all participants have mainstream (non-cash) benefits at exit from program
- 20% or more of adult participants have employment income
- 20% or more of adult participants increase employment income
- Less than 30 days from program entry to move into permanent housing
- At least 85 % of the households that exited a rapid rehousing program to permanent housing should not become homeless again within a year

Transitional Housing

³ Successful housing outcome for Emergency Shelter participants could be permanent housing or transitional housing for formerly homeless persons; living with family or friend as permanent tenure; owned or rental by client with or without subsidy; psychiatric facility; substance abuse or detox facility.

- 80% or more of all participants will exit to a permanent housing situation
- 54% or more of adult participants will have income from sources other than employment
- 56% or more of all participants have mainstream (non-cash) benefits at exit from program
- 20% or more of adult participants have employment income
- 20% or more of participants will increase employment income
- 40% or more of adult participants will increase income from sources other than employment

Transitional Housing for Youth

- 90% or more of all participants will exit to a safe destination⁴.
- 54% or more of adult participants will have income from sources other than employment
- 56% or more of all participants have mainstream (non-cash) benefits at exit from program
- 20% or more of adult participants have employment income
- 20% or more of participants will increase employment income
- 40% or more of adult participants will increase income from sources other than employment

Permanent Supportive Housing & Safe Haven

- 92% or more of all participants remain stable in PSH or exit to a different permanent housing situation
- 54% or more of adult participants will have income from sources other than employment
- 40% or more of adult participants will increase income from sources other than employment
- 56% or more of all participants have mainstream (non-cash) benefits at exit from program
- 20% or more of adult participants have employment income
- 20% or more of adult participants increase employment income
- Less than 90 days from client referred to housed
- Remains 95% or over occupancy rate

Supportive Service Only Projects

- 80% or more of all participants will exit to a permanent housing situation
- 54% or more of adult participants will have income from sources other than employment
- 56% or more of all participants have mainstream (non-cash) benefits at exit from program
- 20% or more of adult participants have employment income
- 20% or more of participants will increase employment income

⁴ Safe destination includes: refers to destinations such as: all permanent housing destinations listed above, emergency shelter, transitional housing for homeless persons, staying with family or friends with temporary tenure, Safe Haven, hotel or motel paid by client, foster care, psychiatric facility, substance abuse or detox facility, hospital (non-psychiatric). EXCLUDES Jail and Place not Meant for Human Habitation.

- 40 % or more of adult participants will increase income other than employment

Appendix A--Homeless Definition



Homeless Definition

CRITERIA FOR DEFINING HOMELESS	Category 1	Literally Homeless	<p>(1) Individual or family who lacks a fixed, regular, and adequate nighttime residence, meaning:</p> <ul style="list-style-type: none"> (i) Has a primary nighttime residence that is a public or private place not meant for human habitation; (ii) Is living in a publicly or privately operated shelter designated to provide temporary living arrangements (including congregate shelters, transitional housing, and hotels and motels paid for by charitable organizations or by federal, state and local government programs); <u>or</u> (iii) Is exiting an institution where (s)he has resided for 90 days or less <u>and</u> who resided in an emergency shelter or place not meant for human habitation immediately before entering that institution
	Category 2	Imminent Risk of Homelessness	<p>(2) Individual or family who will imminently lose their primary nighttime residence, provided that:</p> <ul style="list-style-type: none"> (i) Residence will be lost within 14 days of the date of application for homeless assistance; (ii) No subsequent residence has been identified; <u>and</u> (iii) The individual or family lacks the resources or support networks needed to obtain other permanent housing
	Category 3	Homeless under other Federal statutes	<p>(3) 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:</p> <ul style="list-style-type: none"> (i) Are defined as homeless under the other listed federal statutes; (ii) Have not had a lease, ownership interest, or occupancy agreement in permanent housing during the 60 days prior to the homeless assistance application; (iii) Have experienced persistent instability as measured by two moves or more during in the preceding 60 days; <u>and</u> (iv) 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 DV	<p>(4) Any individual or family who:</p> <ul style="list-style-type: none"> (i) Is fleeing, or is attempting to flee, domestic violence; (ii) Has no other residence; <u>and</u> (iii) Lacks the resources or support networks to obtain other permanent housing

source:https://www.hudexchange.info/resources/documents/HomelessDefinition_RecordkeepingRequirementsandCriteria.pdf

Appendix B--VI-SPDAT

SINGLE ADULTS

AMERICAN VERSION 2.0

Administration

Interviewer's Name _____	Agency _____	<input type="checkbox"/> Team <input type="checkbox"/> Staff <input type="checkbox"/> Volunteer
Survey Date DD/MM/YYYY ____/____/____	Survey Time ____:____ AM/PM	Survey Location _____

Opening Script

Every assessor in your community regardless of organization completing the VI-SPDAT should use the same introductory script. In that script you should highlight the following information:

- the name of the assessor and their affiliation (organization that employs them, volunteer as part of a Point in Time Count, etc.)
- the purpose of the VI-SPDAT being completed
- that it usually takes less than 7 minutes to complete
- that only "Yes," "No," or one-word answers are being sought
- that any question can be skipped or refused
- where the information is going to be stored
- that if the participant does not understand a question or the assessor does not understand the question that clarification can be provided
- the importance of relaying accurate information to the assessor and not feeling that there is a correct or preferred answer that they need to provide, nor information they need to conceal

Basic Information

First Name _____	Nickname _____	Last Name _____
In what language do you feel best able to express yourself? _____		
Date of Birth DD/MM/YYYY ____/____/____	Age _____	Social Security Number _____
Consent to participate		<input type="checkbox"/> Yes <input type="checkbox"/> No

IF THE PERSON IS 60 YEARS OF AGE OR OLDER, THEN SCORE 1.

SCORE:

A. History of Housing and Homelessness

1. Where do you sleep most frequently? (check one)

- ☐ Shelters
☐ Transitional Housing
☐ Safe Haven
☐ **Outdoors**
☐ **Other (specify):** _____

☐ **Refused**

IF THE PERSON ANSWERS ANYTHING OTHER THAN "SHELTER", "TRANSITIONAL HOUSING", OR "SAFE HAVEN", THEN SCORE 1.

SCORE:

2. How long has it been since you lived in permanent stable housing? _____

☐ Refused

3. In the last three years, how many times have you been homeless? _____

☐ Refused

IF THE PERSON HAS EXPERIENCED 1 OR MORE CONSECUTIVE YEARS OF HOMELESSNESS, AND/OR 4+ EPISODES OF HOMELESSNESS, THEN SCORE 1.

SCORE:

B. Risks

4. In the past six months, how many times have you...

a) Received health care at an emergency department/room? _____

☐ Refused

b) Taken an ambulance to the hospital? _____

☐ Refused

c) Been hospitalized as an inpatient? _____

☐ Refused

d) Used a crisis service, including sexual assault crisis, mental health crisis, family/intimate violence, distress centers and suicide prevention hotlines? _____

☐ Refused

e) Talked to police because you witnessed a crime, were the victim of a crime, or the alleged perpetrator of a crime or because the police told you that you must move along? _____

☐ Refused

f) Stayed one or more nights in a holding cell, jail or prison, whether that was a short-term stay like the drunk tank, a longer stay for a more serious offence, or anything in between? _____

☐ Refused

IF THE TOTAL NUMBER OF INTERACTIONS EQUALS 4 OR MORE, THEN SCORE 1 FOR EMERGENCY SERVICE USE.

SCORE:

5. Have you been attacked or beaten up since you've become homeless? ☐ Y ☐ N ☐ Refused

6. Have you threatened to or tried to harm yourself or anyone else in the last year? ☐ Y ☐ N ☐ Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR RISK OF HARM.

SCORE:

7. Do you have any legal stuff going on right now that may result in you being locked up, having to pay fines, or that make it more difficult to rent a place to live? ☐ Y ☐ N ☐ Refused

IF "YES," THEN SCORE 1 FOR **LEGAL ISSUES**.

SCORE:

8. Does anybody force or trick you to do things that you do not want to do? ☐ Y ☐ N ☐ Refused

9. Do you ever do things that may be considered to be risky like exchange sex for money, run drugs for someone, have unprotected sex with someone you don't know, share a needle, or anything like that? ☐ Y ☐ N ☐ Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR **RISK OF EXPLOITATION**.

SCORE:

C. Socialization & Daily Functioning

10. Is there any person, past landlord, business, bookie, dealer, or government group like the IRS that thinks you owe them money? ☐ Y ☐ N ☐ Refused

11. Do you get any money from the government, a pension, an inheritance, working under the table, a regular job, or anything like that? ☐ Y ☐ N ☐ Refused

IF "YES" TO QUESTION 10 OR "NO" TO QUESTION 11, THEN SCORE 1 FOR **MONEY MANAGEMENT**.

SCORE:

12. Do you have planned activities, other than just surviving, that make you feel happy and fulfilled? ☐ Y ☐ N ☐ Refused

IF "NO," THEN SCORE 1 FOR **MEANINGFUL DAILY ACTIVITY**.

SCORE:

13. Are you currently able to take care of basic needs like bathing, changing clothes, using a restroom, getting food and clean water and other things like that? ☐ Y ☐ N ☐ Refused

IF "NO," THEN SCORE 1 FOR **SELF-CARE**.

SCORE:

14. Is your current homelessness in any way caused by a relationship that broke down, an unhealthy or abusive relationship, or because family or friends caused you to become evicted? ☐ Y ☐ N ☐ Refused

IF "YES," THEN SCORE 1 FOR **SOCIAL RELATIONSHIPS**.

SCORE:

D. Wellness

15. Have you ever had to leave an apartment, shelter program, or other place you were staying because of your physical health? ☐ Y ☐ N ☐ Refused
16. Do you have any chronic health issues with your liver, kidneys, stomach, lungs or heart? ☐ Y ☐ N ☐ Refused
17. If there was space available in a program that specifically assists people that live with HIV or AIDS, would that be of interest to you? ☐ Y ☐ N ☐ Refused
18. Do you have any physical disabilities that would limit the type of housing you could access, or would make it hard to live independently because you'd need help? ☐ Y ☐ N ☐ Refused
19. When you are sick or not feeling well, do you avoid getting help? ☐ Y ☐ N ☐ Refused
20. **FOR FEMALE RESPONDENTS ONLY:** Are you currently pregnant? ☐ Y ☐ N ☐ N/A or Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR PHYSICAL HEALTH.

SCORE:

21. Has your drinking or drug use led you to being kicked out of an apartment or program where you were staying in the past? ☐ Y ☐ N ☐ Refused
22. Will drinking or drug use make it difficult for you to stay housed or afford your housing? ☐ Y ☐ N ☐ Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR SUBSTANCE USE.

SCORE:

23. Have you ever had trouble maintaining your housing, or been kicked out of an apartment, shelter program or other place you were staying, because of:
- a) A mental health issue or concern? ☐ Y ☐ N ☐ Refused
- b) A past head injury? ☐ Y ☐ N ☐ Refused
- c) A learning disability, developmental disability, or other impairment? ☐ Y ☐ N ☐ Refused
24. Do you have any mental health or brain issues that would make it hard for you to live independently because you'd need help? ☐ Y ☐ N ☐ Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR MENTAL HEALTH.

SCORE:

IF THE RESPONDENT SCORED 1 FOR PHYSICAL HEALTH AND 1 FOR SUBSTANCE USE AND 1 FOR MENTAL HEALTH, SCORE 1 FOR TRI-MORBIDITY.

SCORE:

VULNERABILITY INDEX - SERVICE PRIORITIZATION DECISION ASSISTANCE TOOL (VI-SPDAT)

SINGLE ADULTS

AMERICAN VERSION 2.0

25. Are there any medications that a doctor said you should be taking that, for whatever reason, you are not taking? ☐ Y ☐ N ☐ Refused
26. Are there any medications like painkillers that you don't take the way the doctor prescribed or where you sell the medication? ☐ Y ☐ N ☐ Refused

IF "YES" TO ANY OF THE ABOVE, SCORE 1 FOR MEDICATIONS.

SCORE:

27. YES OR NO: Has your current period of homelessness been caused by an experience of emotional, physical, psychological, sexual, or other type of abuse, or by any other trauma you have experienced? ☐ Y ☐ N ☐ Refused

IF "YES", SCORE 1 FOR ABUSE AND TRAUMA.

SCORE:

Scoring Summary

DOMAIN	SUBTOTAL	RESULTS
PRE-SURVEY	/1	Score: Recommendation: 0-3: no housing intervention 4-7: an assessment for Rapid Re-Housing 8+: an assessment for Permanent Supportive Housing/Housing First
A. HISTORY OF HOUSING & HOMELESSNESS	/2	
B. RISKS	/4	
C. SOCIALIZATION & DAILY FUNCTIONS	/4	
D. WELLNESS	/6	
GRAND TOTAL:	/17	

Follow-Up Questions

On a regular day, where is it easiest to find you and what time of day is easiest to do so?	place: _____ time: ____ : ____ or Morning/Afternoon/Evening/Night
Is there a phone number and/or email where someone can safely get in touch with you or leave you a message?	phone: (____) _____ - _____ email: _____
Ok, now I'd like to take your picture so that it is easier to find you and confirm your identity in the future. May I do so?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Refused

Communities are encouraged to think of additional questions that may be relevant to the programs being operated or your specific local context. This may include questions related to:

- military service and nature of discharge
- legal status in country
- children that may reside with the adult at some point in the future
- ageing out of care
- income and source of it
- safety planning
- mobility issues
- current restrictions on where a person can legally reside

This assessment can be downloaded from
<http://wnyhomeless.org/continuum-of-care/coordinated-assessment/>

Appendix C--VI-F-SPDAT

This assessment is the intellectual property of [OrgCode](#) and [Community Solutions](#). Originally shared as part of the 100K Homes Campaign. On 5/1/2015, OrgCode revised the VI-F-SPDAT and we also revised our criteria to reflect the changes. Below is the version 2 of the VI-F-SPDAT. A printable version of this assessment could be downloaded from www.wnyhomeless.org

VULNERABILITY INDEX - SERVICE PRIORITIZATION DECISION ASSISTANCE TOOL (VI-SPDAT)

FAMILIES

AMERICAN VERSION 2.0

Administration

Interviewer's Name	Agency	<input type="checkbox"/> Team <input type="checkbox"/> Staff <input type="checkbox"/> Volunteer
Survey Date DD/MM/YYYY ____/____/____	Survey Time ____:____ AM/PM	Survey Location

Opening Script

Every assessor in your community regardless of organization completing the VI-SPDAT should use the same introductory script. In that script you should highlight the following information:

- the name of the assessor and their affiliation (organization that employs them, volunteer as part of a Point in Time Count, etc.)
- the purpose of the VI-SPDAT being completed
- that it usually takes less than 7 minutes to complete
- that only "Yes," "No," or one-word answers are being sought
- that any question can be skipped or refused
- where the information is going to be stored
- that if the participant does not understand a question that clarification can be provided
- the importance of relaying accurate information to the assessor and not feeling that there is a correct or preferred answer that they need to provide, nor information they need to conceal

Basic Information

PARENT 1	First Name	Nickname	Last Name
	In what language do you feel best able to express yourself? _____		
	Date of Birth DD/MM/YYYY ____/____/____	Age	Social Security Number
	Consent to participate <input type="checkbox"/> Yes <input type="checkbox"/> No		
PARENT 2	<input type="checkbox"/> No second parent currently part of the household		
	First Name	Nickname	Last Name
	In what language do you feel best able to express yourself? _____		
	Date of Birth DD/MM/YYYY ____/____/____	Age	Social Security Number
			Consent to participate <input type="checkbox"/> Yes <input type="checkbox"/> No
IF EITHER HEAD OF HOUSEHOLD IS 60 YEARS OF AGE OR OLDER, THEN SCORE 1			SCORE: <div style="border: 1px solid black; width: 50px; height: 20px; margin-top: 5px;"></div>

Children

1. How many children under the age of 18 are currently with you? _____ ☐ Refused
2. How many children under the age of 18 are not currently with your family, but you have reason to believe they will be joining you when you get housed? _____ ☐ Refused
3. **IF HOUSEHOLD INCLUDES A FEMALE:** Is any member of the family currently pregnant? ☐ Y ☐ N ☐ Refused
4. Please provide a list of children's names and ages:

First Name	Last Name	Age	Date of Birth
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

IF THERE IS A SINGLE PARENT WITH 2+ CHILDREN, AND/OR A CHILD AGED 11 OR YOUNGER, AND/OR A CURRENT PREGNANCY, THEN SCORE 1 FOR FAMILY SIZE.

IF THERE ARE TWO PARENTS WITH 3+ CHILDREN, AND/OR A CHILD AGED 6 OR YOUNGER, AND/OR A CURRENT PREGNANCY, THEN SCORE 1 FOR FAMILY SIZE.

SCORE:

A. History of Housing and Homelessness

5. Where do you and your family sleep most frequently? (check one)
 - ☐ Shelters
 - ☐ Transitional Housing
 - ☐ Safe Haven
 - ☐ Outdoors
 - ☐ Other (specify): _____
 - ☐ Refused

IF THE PERSON ANSWERS ANYTHING OTHER THAN "SHELTER", "TRANSITIONAL HOUSING", OR "SAFE HAVEN", THEN SCORE 1.

SCORE:

6. How long has it been since you and your family lived in permanent stable housing? _____ ☐ Refused
7. In the last three years, how many times have you and your family been homeless? _____ ☐ Refused

IF THE FAMILY HAS EXPERIENCED 1 OR MORE CONSECUTIVE YEARS OF HOMELESSNESS, AND/OR 4+ EPISODES OF HOMELESSNESS, THEN SCORE 1.

SCORE:

B. Risks

8. In the past six months, how many times have you or anyone in your family...

- a) Received health care at an emergency department/room? ☐ Refused
- b) Taken an ambulance to the hospital? ☐ Refused
- c) Been hospitalized as an inpatient? ☐ Refused
- d) Used a crisis service, including sexual assault crisis, mental health crisis, family/intimate violence, distress centers and suicide prevention hotlines? ☐ Refused
- e) Talked to police because they witnessed a crime, were the victim of a crime, or the alleged perpetrator of a crime or because the police told them that they must move along? ☐ Refused
- f) Stayed one or more nights in a holding cell, jail or prison, whether that was a short-term stay like the drunk tank, a longer stay for a more serious offence, or anything in between? ☐ Refused

IF THE TOTAL NUMBER OF INTERACTIONS EQUALS 4 OR MORE, THEN SCORE 1 FOR EMERGENCY SERVICE USE.

SCORE:

9. Have you or anyone in your family been attacked or beaten up since they've become homeless? ☐ Y ☐ N ☐ Refused
10. Have you or anyone in your family threatened to or tried to harm themselves or anyone else in the last year? ☐ Y ☐ N ☐ Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR RISK OF HARM.

SCORE:

11. Do you or anyone in your family have any legal stuff going on right now that may result in them being locked up, having to pay fines, or that make it more difficult to rent a place to live? ☐ Y ☐ N ☐ Refused

IF "YES," THEN SCORE 1 FOR LEGAL ISSUES.

SCORE:

12. Does anybody force or trick you or anyone in your family to do things that you do not want to do? ☐ Y ☐ N ☐ Refused
13. Do you or anyone in your family ever do things that may be considered to be risky like exchange sex for money, run drugs for someone, have unprotected sex with someone they don't know, share a needle, or anything like that? ☐ Y ☐ N ☐ Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR RISK OF EXPLOITATION.

SCORE:

C. Socialization & Daily Functioning

14. Is there any person, past landlord, business, bookie, dealer, or government group like the IRS that thinks you or anyone in your family owe them money? ☐ Y ☐ N ☐ Refused

15. Do you or anyone in your family get any money from the government, a pension, an inheritance, working under the table, a regular job, or anything like that? ☐ Y ☒ N ☐ Refused

IF "YES" TO QUESTION 14 OR "NO" TO QUESTION 15, THEN SCORE 1 FOR MONEY MANAGEMENT.

SCORE:

16. Does everyone in your family have planned activities, other than just surviving, that make them feel happy and fulfilled? ☐ Y ☒ N ☐ Refused

IF "NO," THEN SCORE 1 FOR MEANINGFUL DAILY ACTIVITY.

SCORE:

17. Is everyone in your family currently able to take care of basic needs like bathing, changing clothes, using a restroom, getting food and clean water and other things like that? ☐ Y ☒ N ☐ Refused

IF "NO," THEN SCORE 1 FOR SELF-CARE.

SCORE:

18. Is your family's current homelessness in any way caused by a relationship that broke down, an unhealthy or abusive relationship, or because other family or friends caused your family to become evicted? ☐ Y ☐ N ☐ Refused

IF "YES," THEN SCORE 1 FOR SOCIAL RELATIONSHIPS.

SCORE:

D. Wellness

19. Has your family ever had to leave an apartment, shelter program, or other place you were staying because of the physical health of you or anyone in your family? ☐ Y ☐ N ☐ Refused

20. Do you or anyone in your family have any chronic health issues with your liver, kidneys, stomach, lungs or heart? ☐ Y ☐ N ☐ Refused

21. If there was space available in a program that specifically assists people that live with HIV or AIDS, would that be of interest to you or anyone in your family? ☐ Y ☐ N ☐ Refused

22. Does anyone in your family have any physical disabilities that would limit the type of housing you could access, or would make it hard to live independently because you'd need help? ☐ Y ☐ N ☐ Refused

23. When someone in your family is sick or not feeling well, does your family avoid getting medical help? ☐ Y ☐ N ☐ Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR PHYSICAL HEALTH.

SCORE:

VULNERABILITY INDEX - SERVICE PRIORITIZATION DECISION ASSISTANCE TOOL (VI-SPDAT)

FAMILIES

AMERICAN VERSION 2.0

24. Has drinking or drug use by you or anyone in your family led your family to being kicked out of an apartment or program where you were staying in the past? ☐ Y ☐ N ☐ Refused

25. Will drinking or drug use make it difficult for your family to stay housed or afford your housing? ☐ Y ☐ N ☐ Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR **SUBSTANCE USE**.

SCORE:

26. Has your family ever had trouble maintaining your housing, or been kicked out of an apartment, shelter program or other place you were staying, because of:

a) A mental health issue or concern? ☐ Y ☐ N ☐ Refused

b) A past head injury? ☐ Y ☐ N ☐ Refused

c) A learning disability, developmental disability, or other impairment? ☐ Y ☐ N ☐ Refused

27. Do you or anyone in your family have any mental health or brain issues that would make it hard for your family to live independently because help would be needed? ☐ Y ☐ N ☐ Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR **MENTAL HEALTH**.

SCORE:

28. IF THE FAMILY SCORED 1 EACH FOR PHYSICAL HEALTH, SUBSTANCE USE, AND MENTAL HEALTH: Does any single member of your household have a medical condition, mental health concerns, and experience with problematic substance use? ☐ Y ☐ N ☐ N/A or Refused

IF "YES", SCORE 1 FOR **TRI-MORBIDITY**.

SCORE:

29. Are there any medications that a doctor said you or anyone in your family should be taking that, for whatever reason, they are not taking? ☐ Y ☐ N ☐ Refused

30. Are there any medications like painkillers that you or anyone in your family don't take the way the doctor prescribed or where they sell the medication? ☐ Y ☐ N ☐ Refused

IF "YES" TO ANY OF THE ABOVE, SCORE 1 FOR **MEDICATIONS**.

SCORE:

31. YES OR NO: Has your family's current period of homelessness been caused by an experience of emotional, physical, psychological, sexual, or other type of abuse, or by any other trauma you or anyone in your family have experienced? ☐ Y ☐ N ☐ Refused

IF "YES", SCORE 1 FOR **ABUSE AND TRAUMA**.

SCORE:

E. Family Unit

32. Are there any children that have been removed from the family by a child protection service within the last 180 days? ☐ Y ☐ N ☐ Refused
33. Do you have any family legal issues that are being resolved in court or need to be resolved in court that would impact your housing or who may live within your housing? ☐ Y ☐ N ☐ Refused

IF "YES" TO ANY OF THE ABOVE, SCORE 1 FOR FAMILY LEGAL ISSUES.

SCORE:

34. In the last 180 days have any children lived with family or friends because of your homelessness or housing situation? ☐ Y ☐ N ☐ Refused
35. Has any child in the family experienced abuse or trauma in the last 180 days? ☐ Y ☐ N ☐ Refused
36. IF THERE ARE SCHOOL-AGED CHILDREN: Do your children attend school more often than not each week? ☐ Y ☒ N ☐ N/A or Refused

IF "YES" TO ANY OF QUESTIONS 34 OR 35, OR "NO" TO QUESTION 36, SCORE 1 FOR NEEDS OF CHILDREN.

SCORE:

37. Have the members of your family changed in the last 180 days, due to things like divorce, your kids coming back to live with you, someone leaving for military service or incarceration, a relative moving in, or anything like that? ☐ Y ☐ N ☐ Refused
38. Do you anticipate any other adults or children coming to live with you within the first 180 days of being housed? ☐ Y ☐ N ☐ Refused

IF "YES" TO ANY OF THE ABOVE, SCORE 1 FOR FAMILY STABILITY.

SCORE:

39. Do you have two or more planned activities each week as a family such as outings to the park, going to the library, visiting other family, watching a family movie, or anything like that? ☐ Y ☒ N ☐ Refused
40. After school, or on weekends or days when there isn't school, is the total time children spend each day where there is no interaction with you or another responsible adult...
- a) 3 or more hours per day for children aged 13 or older? ☐ Y ☐ N ☐ Refused
- b) 2 or more hours per day for children aged 12 or younger? ☐ Y ☐ N ☐ Refused
41. IF THERE ARE CHILDREN BOTH 12 AND UNDER & 13 AND OVER: Do your older kids spend 2 or more hours on a typical day helping their younger sibling(s) with things like getting ready for school, helping with homework, making them dinner, bathing them, or anything like that? ☐ Y ☐ N ☐ N/A or Refused

IF "NO" TO QUESTION 39, OR "YES" TO ANY OF QUESTIONS 40 OR 41, SCORE 1 FOR PARENTAL ENGAGEMENT.

SCORE:

Scoring Summary

DOMAIN	SUBTOTAL	RESULTS
PRE-SURVEY	/2	Score: Recommendation: 0-3 no housing intervention 4-8 an assessment for Rapid Re-Housing 9+ an assessment for Permanent Supportive Housing/Housing First
A. HISTORY OF HOUSING & HOMELESSNESS	/2	
B. RISKS	/4	
C. SOCIALIZATION & DAILY FUNCTIONS	/4	
D. WELLNESS	/6	
E. FAMILY UNIT	/4	
GRAND TOTAL:	/22	

Follow-Up Questions

On a regular day, where is it easiest to find you and what time of day is easiest to do so?	place: _____ time: ____ : ____ or Morning/Afternoon/Evening/Night
Is there a phone number and/or email where someone can safely get in touch with you or leave you a message?	phone: (____) _____ - _____ email: _____
Ok, now I'd like to take your picture so that it is easier to find you and confirm your identity in the future. May I do so?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Refused

Appendix D--TAY-VI-SPDAT

SINGLE YOUTH

AMERICAN VERSION 1.0

Administration

Interviewer's Name _____	Agency _____	<input type="checkbox"/> Team <input type="checkbox"/> Staff <input type="checkbox"/> Volunteer
Survey Date DD/MM/YYYY ____/____/____	Survey Time ____:____ AM/PM	Survey Location _____

Opening Script

Every assessor in your community regardless of organization completing the VI-SPDAT should use the same introductory script. In that script you should highlight the following information:

- the name of the assessor and their affiliation (organization that employs them, volunteer as part of a Point in Time Count, etc.)
- the purpose of the VI-SPDAT being completed
- that it usually takes less than 7 minutes to complete
- that only "Yes," "No," or one-word answers are being sought
- that any question can be skipped or refused
- where the information is going to be stored
- that if the participant does not understand a question that clarification can be provided
- the importance of relaying accurate information to the assessor and not feeling that there is a correct or preferred answer that they need to provide, nor information they need to conceal

Basic Information

First Name _____	Nickname _____	Last Name _____
In what language do you feel best able to express yourself? _____		
Date of Birth DD/MM/YYYY ____/____/____	Age _____	Social Security Number _____
		Consent to participate <input type="checkbox"/> Yes <input type="checkbox"/> No

IF THE PERSON IS 17 YEARS OF AGE OR LESS, THEN SCORE 1.

SCORE:

A. History of Housing and Homelessness

1. Where do you sleep most frequently? (check one)

- ☐ Shelters ☐ Couch surfing ☐ Other (specify): _____
☐ Transitional Housing ☐ Outdoors
☐ Safe Haven ☐ Refused

IF THE PERSON ANSWERS ANYTHING OTHER THAN "SHELTER", "TRANSITIONAL HOUSING", OR "SAFE HAVEN", THEN SCORE 1.

SCORE:

2. How long has it been since you lived in permanent stable housing? _____ ☐ Refused

3. In the last three years, how many times have you been homeless? _____ ☐ Refused

IF THE PERSON HAS EXPERIENCED 1 OR MORE CONSECUTIVE YEARS OF HOMELESSNESS, AND/OR 4+ EPISODES OF HOMELESSNESS, THEN SCORE 1.

SCORE:

B. Risks

4. In the past six months, how many times have you...

- a) Received health care at an emergency department/room? _____ ☐ Refused
b) Taken an ambulance to the hospital? _____ ☐ Refused
c) Been hospitalized as an inpatient? _____ ☐ Refused
d) Used a crisis service, including sexual assault crisis, mental health crisis, family/intimate violence, distress centers and suicide prevention hotlines? _____ ☐ Refused
e) Talked to police because you witnessed a crime, were the victim of a crime, or the alleged perpetrator of a crime or because the police told you that you must move along? _____ ☐ Refused
f) Stayed one or more nights in a holding cell, jail, prison or juvenile detention, whether it was a short-term stay like the drunk tank, a longer stay for a more serious offence, or anything in between? _____ ☐ Refused

IF THE TOTAL NUMBER OF INTERACTIONS EQUALS 4 OR MORE, THEN SCORE 1 FOR EMERGENCY SERVICE USE.

SCORE:

5. Have you been attacked or beaten up since you've become homeless? ☐ Y ☐ N ☐ Refused

6. Have you threatened to or tried to harm yourself or anyone else in the last year? ☐ Y ☐ N ☐ Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR RISK OF HARM.

SCORE:

NEXT STEP TOOL FOR HOMELESS YOUTH

SINGLE YOUTH

AMERICAN VERSION 1.0

7. Do you have any legal stuff going on right now that may result in you being locked up, having to pay fines, or that make it more difficult to rent a place to live? ☐ Y ☐ N ☐ Refused

8. Were you ever incarcerated when younger than age 18? ☐ Y ☐ N ☐ Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR **LEGAL ISSUES**.

SCORE:

9. Does anybody force or trick you to do things that you do not want to do? ☐ Y ☐ N ☐ Refused

10. Do you ever do things that may be considered to be risky like exchange sex for money, food, drugs, or a place to stay, run drugs for someone, have unprotected sex with someone you don't know, share a needle, or anything like that? ☐ Y ☐ N ☐ Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR **RISK OF EXPLOITATION**.

SCORE:

C. Socialization & Daily Functioning

11. Is there any person, past landlord, business, bookie, dealer, or government group like the IRS that thinks you owe them money? ☐ Y ☐ N ☐ Refused

12. Do you get any money from the government, an inheritance, an allowance, working under the table, a regular job, or anything like that? ☐ Y ☐ N ☐ Refused

IF "YES" TO QUESTION 11 OR "NO" TO QUESTION 12, THEN SCORE 1 FOR **MONEY MANAGEMENT**.

SCORE:

13. Do you have planned activities, other than just surviving, that make you feel happy and fulfilled? ☐ Y ☐ N ☐ Refused

IF "NO," THEN SCORE 1 FOR **MEANINGFUL DAILY ACTIVITY**.

SCORE:

14. Are you currently able to take care of basic needs like bathing, changing clothes, using a restroom, getting food and clean water and other things like that? ☐ Y ☐ N ☐ Refused

IF "NO," THEN SCORE 1 FOR **SELF-CARE**.

SCORE:

15. Is your current lack of stable housing...

- a) Because you ran away from your family home, a group home or a foster home? ☐ Y ☐ N ☐ Refused
- b) Because of a difference in religious or cultural beliefs from your parents, guardians or caregivers? ☐ Y ☐ N ☐ Refused
- c) Because your family or friends caused you to become homeless? ☐ Y ☐ N ☐ Refused
- d) Because of conflicts around gender identity or sexual orientation? ☐ Y ☐ N ☐ Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR **SOCIAL RELATIONSHIPS**.

SCORE:

- e) Because of violence at home between family members? ☐ Y ☐ N ☐ Refused
- f) Because of an unhealthy or abusive relationship, either at home or elsewhere? ☐ Y ☐ N ☐ Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR **ABUSE/TRAUMA**.

SCORE:

D. Wellness

16. Have you ever had to leave an apartment, shelter program, or other place you were staying because of your physical health? ☐ Y ☐ N ☐ Refused
17. Do you have any chronic health issues with your liver, kidneys, stomach, lungs or heart? ☐ Y ☐ N ☐ Refused
18. If there was space available in a program that specifically assists people that live with HIV or AIDS, would that be of interest to you? ☐ Y ☐ N ☐ Refused
19. Do you have any physical disabilities that would limit the type of housing you could access, or would make it hard to live independently because you'd need help? ☐ Y ☐ N ☐ Refused
20. When you are sick or not feeling well, do you avoid getting medical help? ☐ Y ☐ N ☐ Refused
21. Are you currently pregnant, have you ever been pregnant, or have you ever gotten someone pregnant? ☐ Y ☐ N ☐ Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR **PHYSICAL HEALTH**.

SCORE:

22. Has your drinking or drug use led you to being kicked out of an apartment or program where you were staying in the past? ☐ Y ☐ N ☐ Refused
23. Will drinking or drug use make it difficult for you to stay housed or afford your housing? ☐ Y ☐ N ☐ Refused
24. If you've ever used marijuana, did you ever try it at age 12 or younger? ☐ Y ☐ N ☐ Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR **SUBSTANCE USE**.

SCORE:

25. Have you ever had trouble maintaining your housing, or been kicked out of an apartment, shelter program or other place you were staying, because of:
- a) A mental health issue or concern? ☐ Y ☐ N ☐ Refused
- b) A past head injury? ☐ Y ☐ N ☐ Refused
- c) A learning disability, developmental disability, or other impairment? ☐ Y ☐ N ☐ Refused
26. Do you have any mental health or brain issues that would make it hard for you to live independently because you'd need help? ☐ Y ☐ N ☐ Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR **MENTAL HEALTH**.

SCORE:

IF THE RESPONENT SCORED 1 FOR **PHYSICAL HEALTH** AND 1 FOR **SUBSTANCE USE** AND 1 FOR **MENTAL HEALTH**, SCORE 1 FOR **TRI-MORBIDITY**.

SCORE:

27. Are there any medications that a doctor said you should be taking that, for whatever reason, you are not taking? ☐ Y ☐ N ☐ Refused
28. Are there any medications like painkillers that you don't take the way the doctor prescribed or where you sell the medication? ☐ Y ☐ N ☐ Refused

IF "YES" TO ANY OF THE ABOVE, SCORE 1 FOR **MEDICATIONS**.

SCORE:

Scoring Summary

DOMAIN	SUBTOTAL	RESULTS
PRE-SURVEY	/1	Score: Recommendation: 0-3: no moderate or high intensity services be provided at this time 4-7: assessment for time-limited supports with moderate intensity 8+: assessment for long-term housing with high service intensity
A. HISTORY OF HOUSING & HOMELESSNESS	/2	
B. RISKS	/4	
C. SOCIALIZATION & DAILY FUNCTIONS	/5	
D. WELLNESS	/5	
GRAND TOTAL:	/17	

Appendix E-Acronym

CoC: Continuum of Care

CH: Chronically homeless

ECDMH: Erie County Department of Mental Health

ES: Emergency Shelter

ESG: Emergency Solution Grant

HAWNY: Homeless Alliance of Western New York, which is the CoC collaborative applicant and HMIS administrator

HMIS: Homeless Management Information System, it is an online database

MIA: Missing in action

PH: Permanent Housing

SPOA: Single Point of Access and Accountability that Erie County Department of Mental Health administers

PSH: Permanent Supportive Housing

RRH: Rapid Rehousing

TH: Transitional Housing

VA: U.S. Department of Veterans Affairs

VI-SPDAT: Vulnerability Index Service Prioritization Decision Assistance Tool

VI-F-SPDAT: Vulnerability Index and Family Service Prioritization Decision Assistance Tool

TAY-VI-SPDAT: Transition Age Youth - Vulnerability Index - Service Prioritization Decision Assistance Tool

Appendix F: PSH Referral Form

Referral for PSH & Case Management Services for the Chronically Homeless

To be referred for Supportive Housing Programs, clients must be chronically homeless. HUD defines chronic homelessness as an individual or family with a disabling condition who has been continuously homeless for a year or more or has had at least four episodes of homelessness in the past three years.

Clients Name:	Referral Date:
Date of Birth:	SS#:
Clients Phone/location:	
Referral Source:	
Phone # of Referral Source:	

Disabling Condition:		
Alcohol/Substance Abuse:	<input type="checkbox"/> Alcohol	<input type="checkbox"/> Opiate
Mental Disability:	<input type="checkbox"/> Schizophrenic	<input type="checkbox"/> Bi-Polar
Physical Disability:	<input type="checkbox"/> Mobility Impairment	<input type="checkbox"/> TBI
	<input type="checkbox"/> Substance Abuse	<input type="checkbox"/> Depression
		<input type="checkbox"/> other _____
Major psychosocial or mental health concern:		
<input type="checkbox"/> drug/alcohol abuse	<input type="checkbox"/> depression/suicide	<input type="checkbox"/> grief
<input type="checkbox"/> developmental disability	<input type="checkbox"/> gang involvement	<input type="checkbox"/> pregnancy support
<input type="checkbox"/> eating disorder	<input type="checkbox"/> physical/sexual abuse	<input type="checkbox"/> neglect
<input type="checkbox"/> reactions to chronic illness	<input type="checkbox"/> self esteem	<input type="checkbox"/> family/relationship probs.
<input type="checkbox"/> anxiety/phobia	<input type="checkbox"/> legal problems	<input type="checkbox"/> Violent behavior
Other specific concerns: _____		

Current homeless episode and desire for assistance:			
Homeless episode:	<input type="checkbox"/> 6-8 months	<input type="checkbox"/> 9-11 months	<input type="checkbox"/> 12+ months
Client motivation for assistance:	<input type="checkbox"/> Highly motivated	<input type="checkbox"/> semi-Motivated	<input type="checkbox"/> low motivation
Is the client refusing housing:	<input type="checkbox"/> Y	<input type="checkbox"/> N	
Pre-Chronically Homeless	<input type="checkbox"/> Y	<input type="checkbox"/> N	Chronically Homeless
			<input type="checkbox"/> Y <input type="checkbox"/> N
Single Site Screening			
Does client have a history of arson?	<input type="checkbox"/> Y	<input type="checkbox"/> N	
Is client a registered sex offender?	<input type="checkbox"/> Y	<input type="checkbox"/> N	
Does client have a recent history of assault?	<input type="checkbox"/> Y	<input type="checkbox"/> N	
Has client ever resided in single site PSH?	<input type="checkbox"/> Y	<input type="checkbox"/> N	
PSH Program Referral (To be completed by coordinated entry staff only)			
Caz <input type="checkbox"/> Evergreen <input type="checkbox"/> Matt Urban <input type="checkbox"/> Spectrum <input type="checkbox"/> HOME <input type="checkbox"/> Safe Haven <input type="checkbox"/> Hope Gardens <input type="checkbox"/> SPOA <input type="checkbox"/>			

***Please complete this form along with a local VI and submit to the Matt Urban Homeless Outreach Department with a homeless verification and/or 3 year housing history attached. Forms can be faxed to (716)855-2110.**

Appendix G- Credentials for Diagnosing Disability

	TITLE	DIAGNOSE ADDICTIONS	DIAGNOSE MENTAL HEALTH DISABILITY
Psy.D	Psychiatrist/Psychologist	Yes	Yes
MD	Medical Doctor	Yes	Yes
NP	Nurse Practitioner	Yes	Yes
PA	Physician Assistant	Yes	Yes
PNP	Psychiatric Nurse Practitioner	Yes	Yes
PMHN	Psychiatric Mental Health Nurse	Yes	Yes
APRN	Advance Practice Registered Nurse	Yes	Yes
RN	Registered Nurse (<i>assignments are directed by MD, etc.</i>)	No	No
LPN	Licensed Practical Nurse (<i>operates under direction of RN, MD, etc.</i>)	No	No
LCSW	Licensed Clinical Social Worker	Yes	Yes
LMSW	Licensed Master Social Worker (<i>Yes, under supervision of LCSW, MD</i>)	No/Yes	No/Yes
LMHC	Licensed Mental Health Counselor	Yes	Yes
BSW	Bachelor of Social Work	No	No
CRC	Certified Rehabilitation Counselor	Yes	Yes
CASAC	Credentialed Alcohol & Substance Abuse Counselor	Yes	No
CATC	Certified Addictions Treatment Counselor	Yes	No