Temporary Coordinated Entry Covid-19 Prioritization schema

Single Adults

PSH process: Chronically homeless clients (per HUD or Sacramento local definition) with all required documentation are eligible for PSH openings, prioritized as follows:

People who score 10+ on the VI-SPDAT will be further prioritized as follows:

- 1. People who are at higher risk of developing severe covid-19 symptoms.
 - a. Those 65+; and/or*
 - b. People of all ages with underlying medical conditions including
 - i. Chronic lung disease/moderate to severe asthma;
 - ii. Serious heart conditions;
 - iii. Those who are immunocompromised (including cancer treatment, smoking, bone marrow or organ transplant, immune deficiencies, poorly controlled HIV or AIDS, prolonged use of corticosteroids and other immune-weakening medications);
 - iv. Severe obesity (BMI 40 or higher);
 - v. Diabetes;
 - vi. Chronic kidney disease undergoing dialysis; and
 - vii. Liver disease.
- 2. Length of time homeless
- 3. Each group above will be further prioritized by VI-SPDAT score (highest to lowest)

Case Conferencing should be used whenever possible to affirm that PSH is a feasible housing setting for the person.

RRH process: Not required to be chronically homeless

People with VI-SPDAT scores of 5-9 further prioritized as follow:

- 1. People who are at higher risk of developing severe covid-19 symptoms.
 - a. Those 65+; and/or*
 - b. People of all ages with underlying medical conditions including
 - i. Chronic lung disease/moderate to severe asthma;
 - ii. Serious heart conditions;
 - iii. Those who are immunocompromised (including cancer treatment, smoking, bone marrow or organ transplant, immune deficiencies, poorly controlled HIV or AIDS, prolonged use of corticosteroids and other immune-weakening medications);
 - iv. Severe obesity (BMI 40 or higher);
 - v. Diabetes;
 - vi. Chronic kidney disease undergoing dialysis; and
 - vii. Liver disease.
- 2. VI-SPDAT score (highest to lowest)

^{*}Clients who are both 65 or older and have underlying medical conditions will be prioritized first.

*Clients who are both 65 or older and have underlying medical conditions will be prioritized first.

Case Conferencing should be used whenever possible to affirm that RRH is a feasible housing setting for the person.

Families

PSH process: At least one member of the family is Chronically homeless (per HUD or Sacramento local definition) with all required documentation are eligible for PSH openings, prioritized as follows:

Families who score 12+ on the F-VI-SPDAT will be further prioritized as follows:

- 1. At least one person within the family who is at higher risk of developing severe covid-19 symptoms. COVID 19 Response Shelter Survey forms may be recorded in HMIS even if the family does not want to be considered for placement in a Project Roomkey site.
 - a. Those 65+; and/or*
 - b. People of all ages with underlying medical conditions including
 - i. Chronic lung disease/moderate to severe asthma;
 - ii. Serious heart conditions;
 - iii. Those who are immunocompromised (including cancer treatment, smoking, bone marrow or organ transplant, immune deficiencies, poorly controlled HIV or AIDS, prolonged use of corticosteroids and other immune-weakening medications);
 - iv. Severe obesity (BMI 40 or higher);
 - v. Diabetes:
 - vi. Chronic kidney disease undergoing dialysis; and
 - vii. Liver disease.
- 2. Length of time homeless
- 3. Each group above will be further prioritized by F-VI-SPDAT score (highest to lowest)

Case Conferencing should be used whenever possible to affirm that PSH is a feasible housing setting for the family.

RRH process: Not required to be Chronically Homeless

Families with F-VI-SPDAT scores of 6-11 further prioritized as follow:

- 1. At least one person within the family who is at higher risk of developing severe covid-19 symptoms..
 - a. Those 65+; and/or*
 - b. People of all ages with underlying medical conditions including
 - i. Chronic lung disease/moderate to severe asthma;
 - ii. Serious heart conditions;
 - iii. Those who are immunocompromised (including cancer treatment, smoking, bone marrow or organ transplant, immune deficiencies, poorly

^{*}Clients who are both 65 or older and have underlying medical conditions will be prioritized first.

controlled HIV or AIDS, prolonged use of corticosteroids and other immune-weakening medications);

- iv. Severe obesity (BMI 40 or higher);
- v. Diabetes;
- vi. Chronic kidney disease undergoing dialysis; and
- vii. Liver disease.
- 2. F-VI-SPDAT score (highest to lowest)

Case Conferencing should be used whenever possible to affirm that RRH is a feasible housing setting for the family.

TAY

PSH, RRH and TH/RRH processes: Unchanged from normal prioritization process.

At this time Single/Family Transitional Housing and Diversion/Prevention resources are not prioritized within the CoC. Case Conferencing should be used whenever possible to determine eligibility for and feasibility of those available resources. We are in the process of looking at additional assessment tools which might allow for a later prioritization for these resources.

This temporary Covid-19 prioritization would remain in effect until the end of 2020. On January 1, 2021, the prioritization schema would revert to the current process unless additional action is taken to extend the temporary prioritization or adopt a new prioritization schema. There are tentative plans to return to the committee during the December meeting to propose additional action.

Side-by-side Comparison of Normal Prioritization vs. Temporary Covid-19 Prioritization

Normal PSH Prioritization - Single / Families*	Covid-19 PSH Prioritization - Single / Families*
Eligibility: Must be Chronically Homeless	Eligibility: Must be Chronically Homeless
Eligibility: VI-SPDAT Score of 10+ / F-VI-SPDAT Score of 12+	Eligibility: VI-SPDAT Score of 10+ / F-VI-SPDAT Score of 12+
Eligibility: Client does not need to be "doc ready"	Eligibility: Client does not need to be "doc ready"
Local Priority for VI-SPDAT scores 14+	Covid-19 Vulnerability (65+ or health conditions - see list)
2. Length of time homeless	2. Length of time homeless
	3. VI-SPDAT score (high to low)
<u>Does not</u> utilize Case Conferencing to affirm PSH appropriateness	Utilizes Case Conferencing to affirm PSH appropriateness

^{*}Clients who are both 65 or older and have underlying medical conditions will be prioritized first.

Normal RRH Prioritization - Single / Families*	Covid-19 RRH Prioritization - Single / Families*
Eligibility: VI-SPDAT Score of 5-9 / F-VI-SPDAT Score of 6-11	Eligibility: VI-SPDAT Score of 5-9** / F-VI-SPDAT Score of 6-11
1. VI-SPDAT score (high to low)	Covid-19 Vulnerability (see health conditions)
	2. VI-SPDAT score (high to low)
<u>Does not</u> utilize Case Conferencing to affirm RRH appropriateness	Utilizes Case Conferencing to affirm RRH appropriateness

^{*}TAY Prioritization for PSH, RRH, and TH/RRH is unchanged from the normal prioritization.