

Coordinated Entry System Committee (CESC) Meeting Minutes

Thursday, June 24th, 2021 || 2:30 PM – 4:00 PM



SACRAMENTO
STEPS FORWARD

Ending Homelessness. Starting Fresh.

[Recording of Zoom Meeting](#). The chat and material(s) discussed at the meeting (not provided before the meeting) are below the minutes.

Attendance:

| Member | Area of Representation / Organization | Present |
|-------------------------|--|---------|
| Cheyenne Carraway | SHRA | Yes |
| Derrick Bane | Turning Point Community Programs | No |
| Desirae Stermer | Hope Cooperative | Yes |
| Erica Plumb | Mercy Housing | No |
| Gabriel Kendell | 2-1-1 | No |
| Jenna Abbott (Co-Chair) | River District | Yes |
| John Foley (Co-Chair) | Sacramento Self Help Housing | Yes |
| Julie Field | Sac. County Dept. of Human Assistance | Yes |
| Kate Hutchinson | Lutheran Social Services | Yes |
| Kelsey Endo | Cottage Housing | Yes |
| Maggie Marshall | Kaiser Sacramento | No |
| Monica Rocha-Wyatt | Sac. County Dept. of Behavioral Health | Yes |
| Paula Kelley | Sacramento Self Help Housing | No |
| Phillip Scott Reed | US Department of Veterans Affairs | Yes |
| Rose Aghaowa | Wellness & Recovery North | No |
| Tina Glover | SACOG | Yes |
| Stephanie Cotter | City of Citrus, Heights | Yes |

| SSF Staff | SSF Title |
|-----------------|----------------|
| Andrew Geurkink | CoC Specialist |

| | |
|-------------------|-------------------------------------|
| Lisa Bates | CEO |
| Michele Watts | Chief Planning Officer |
| Michelle Charlton | CoC Coordinator |
| Peter Bell | CES Program Manager |
| Sarah Schwartz | RAPS Specialist |
| Scott Clark | Systems Performance Analyst |
| Stacey Fong | CE Analyst |
| Tiffani Reimers | CES Operations Coordinator |
| Ya-yin Isle | Chief Strategic Initiatives Officer |

| Guests |
|--|
| Angela's Phone, Christie Gonzales, Christina Kitchen, Danielle Foster, Debbie Hughes, Debbie M., Emerald Balonso, Joseph Smith, Julie McFarland, Kyle Stefano, Maria Avdalas, MaryLiz Paulson, Rebecca Sterling, Samantha Earnshaw, Shannon Hus, Shaunda LSS, and Tahirih. |

| Agenda Item | Presenter(s): | Time | Item Type |
|--|---|------------------------|-----------|
| I. Welcome & Introductions | John Foley, & Jenna Abbott, CESC, Co-Chairs | 2:30 PM (5 minutes) | Informal |
| Jenna called the meeting at 2:36 PM. Attendees placed their name and organization in the chat. Attendance of 31 participants. | | | |
| II. Approval of 6/10/2021 CESC Minutes | John Foley | 2:35 PM (5 minutes) | Action |
| <p>Motioned for approval of 6/10/21 meeting minutes: 1st - Jenna Abbott , 2nd - Cheyenne Carraway.</p> <p>Motion approved.</p> | | | |

| | | | |
|---|--|-------------------------|--------------------------|
| III. Emergency Housing Vouchers (EHVs) Overview | Michele Watts, SSF Chief Planning Officer & Peter Bell, SSF CES Manager | 2:40 PM (15 minutes) | Presentation |
| Michele briefly described the EHV plan regarding the timeline, prioritization, and planning. Please see the recording and chat for more details. | | | |
| IV. EHVs Prioritization | Michele Watts & Peter Bell | 2:55 PM (45 minutes) | Presentation / Action |
| <p>Peter discussed the SHRA EHVs presentation shared at the June CoC Board meeting. He shared a SSF presentation on EHV discussing targeted subpopulation (chronically homeless, literally Homeless, at-risk seniors (63+ years old), survivors, PSH Move-on ready, RRH bridge to EHV) eligibility requirements, EHV assessment, prioritization factors, and referral benchmarks. Please see the recording and chat for more details.</p> <p>Motioned for approval of EHVs Prioritization to CoC Board: 1st - Jenna Abbott , 2nd - Kate Hutchinson.</p> <p>Motion approved.</p> | | | |
| V. COVID-19 PSH Prioritization Extension | Michele Watts & Peter Bell | 3:40 PM (20 minutes) | Presentation / Action |
| <p>Peter described and recommended the COVID-19 PSH prioritization extension through the end of the year. He shared and discussed the CE COVID-19 PSH Prioritization Extension schema document, comparing the normal and COVID-19 PSH prioritization (see materials below chat).</p> <p>Motioned for approval of COVID-19 PSH Prioritization Extension: 1st - Jenna Abbott , 2nd - Tina Glover</p> | | | |

Motion approved.

VI. Meeting Adjourned at 4:02 PM. Attendance of 25 participants.

Next Meeting: Thursday, July 8th, 2021 (2:30 PM - 4:00 PM)

Potential Topics to cover: Policy Updates, Quarterly Data, RAPS updates

Meeting Chat

14:37:52 From Tina Glover (she/her) to Everyone:

Tina Glover, Sacramento Area council of Governments (SACOG)

14:37:54 From christina kitchen to Everyone:

Christina Kitchen The Salvation Army Emergency Shelter Supervisor

14:37:54 From Monica Rocha-Wyatt to Everyone:

Monica Rocha-Wyatt (she/her), BHS

14:37:56 From Danielle Foster to Everyone:

Danielle Foster, Housing Policy Manager, City of Sacramento

14:37:56 From Kate Hutchinson to Everyone:

Kate Hutchinson, Lutheran Social Services

14:37:56 From Andrew Geurkink (he/him/his) to Everyone:

Andrew Geurkink, SSF

14:37:57 From Desirae Stermer to Everyone:

Desirae Stermer, Hope Cooperative

14:37:58 From Stephanie Cotter to Everyone:

Stephanie Cotter, City of Citrus Heights

14:37:58 From Samantha Earnshaw, LSS to Everyone:

Samantha Earnshaw, Lutheran Social Services (LSS)

14:37:59 From Kyle Stefano - Sacramento Covered to Everyone:

Kyle Stefano - Sacramento Covered

14:37:59 From Kelsey Endo to Everyone:

Kelsey Endo Cottage Housing, Quinn Cottages

14:38:03 From Stacey Fong (she/her) to Everyone:

Stacey Fong, SSF

14:38:05 From Ya-yin Isle (she/her), SSF to Everyone:

Ya-yin Isle, SSF

14:38:06 From Rebecca Sterling to Everyone:

Rebecca Sterling, Sacramento Covered

14:38:17 From Christie Gonzales to Everyone:

Christie Gonzales, WellSpace Health

14:38:18 From Shannon Hus - Sacramento Covered to Everyone:

Shannon Hus - Sacramento Covered

14:38:18 From Cheyenne Caraway to Everyone:

Cheyenne Caraway-SHRA

14:38:20 From Debbie Hughes to Everyone:

Debbie Hughes Martinez Goodwill Shelter Director for Project Room Key

14:38:27 From Jenna Abbott to Everyone:

Jenna Abbott, River District and co chair of this committee

14:38:31 From tahirih to Everyone:

Tahirih Kraft Sacramento Self Help Housing

14:38:46 From Peter Bell (he/him) to Everyone:

Peter Bell, Sacramento Steps Forward

14:39:23 From Shaunda-LSS to Everyone:

Shaunda Davis, LSS

14:40:12 From Tiffani Reimers (She/ Her) to Everyone:

Tiffani Reimers, SSF

14:40:23 From Julie Field to Everyone:

Julie Field, DHA

14:47:08 From Michelle Charlton (She/Her/Hers) SSF, CoC Coordinator to Everyone:

Update: we have quorum - 11 of 17 members

14:50:22 From Kate Hutchinson to Everyone:

Is the prioritization of Seniors in the at-risk category, HUD's prioritization or our community

14:51:19 From Samantha Earnshaw, LSS to Everyone:

How do we find out if someone is a "life" 290?

14:51:56 From Michele Watts, she/her/hers, SSF Chief Planning Officer to Everyone:

At risk is HUD's category, at risk seniors is a local prioritization that we will get into in a slide that is coming up.

14:57:32 From Michele Watts, she/her/hers, SSF Chief Planning Officer to Everyone:

We can get a definition of lifetime 290 status out to the committee, and will cover it in more detail at the referral training stage to begin soon, once this prioritization is approved by the CESC and the CoC Board.

14:59:04 From Desirae Stermer to Everyone:

Can the at risk definition be added to the power point?

14:59:29 From Kate Hutchinson to Everyone:

I'll advocate for TAY to also be prioritized in the at-risk category. We want to

prevent homelessness for TAY before they spend time on the streets - to ensure that Homeless TAY don't become homeless adults & seniors.

15:00:03 From Samantha Earnshaw, LSS to Everyone:

I appreciate this for our Seniors!! Awesome news! Thank you.

15:02:39 From Michele Watts, she/her/hers, SSF Chief Planning Officer to Everyone:

1- re. the at risk definition: the definition in the notice is pretty lengthy, we may not add it to the PPT but we can share the HUD notice and tell you where to find the parameters within the notice. 2- TAY- TAY qualify under other eligible categories as defined in the notice, more so than HUD CoC definitions, beside at risk, Peter can speak to this further during the discussion.

15:06:30 From Kate Hutchinson to Everyone:

Thanks, Michele

15:07:53 From tahirih to Everyone:

My concerns are making sure households are able to live independently.

15:10:37 From Monica Rocha-Wyatt to Everyone:

We've started informing our BHS system to

15:10:44 From Stephanie Cotter to Everyone:

Is this similar to how a Housing Choice Voucher works? It follows the individual?

15:11:04 From tahirih to Everyone:

Can we add a 6 month follow up for stabilization. We can not put people in

housing and walk away.

15:11:04 From Lisa Bates (She/Her) - SSF to Everyone:

I would suggest that members continue to inform City and County of need to make system infrastructure investments (not just SSF or CES) as has been identified in the gaps analysis and CES evaluation. The County Survey is one avenue to share needs for community for the ARP.

15:12:54 From Michele Watts, she/her/hers, SSF Chief Planning Officer to Everyone:

It does work like HCV in terms of following the individual. It just has a ten year limit, as opposed to a lifetime voucher like HCV.

15:13:27 From Stephanie Cotter to Everyone:

Ok thanks

15:14:19 From Stephanie Cotter to Everyone:

The affordability covenant on Normandy Senior Apartments is ending soon and the affordable units will convert to market rate. Could it be used for something like this?

15:14:21 From tahirih to Everyone:

We need to realize we have a housing shortage and we will be competing with each other

15:16:22 From Stephanie Cotter to Everyone:

Why couldn't we refer people like through HEAP?

15:19:01 From Tina Glover (she/her) to Everyone:

Excellent point Kate

15:20:19 From tahirih to Everyone:

What about deposit and first months rent?

15:20:34 From Ya-yin Isle (she/her), SSF to Everyone:

Stephanie: HEAP was not referred through Coordinated Entry. One of the requirements of this program is that referrals are done through CE.

15:22:00 From tahirih to Everyone:

We need to focus on individual or families with low barriers.

15:22:40 From Stephanie Cotter to Everyone:

Would we refer people to 2-1-1 in order to have access to this program?

15:23:01 From Danielle Foster to Everyone:

Agree Tahirih, and/or those at-risk of losing housing due to loss of subsidy/assistance in order to maintain housing

15:23:27 From Joseph Smith to Everyone:

What is the deadline date for vouchers to be used?

15:23:43 From Peter Bell (he/him) to Everyone:

Stephanie, Access is still a significant issue that we're looking at.

15:24:29 From Peter Bell (he/him) to Everyone:

We'll talk about referral process in the next portion of our presentation.

15:25:44 From Peter Bell (he/him) to Everyone:

Vouchers must be leased within 12 months but our goal is to lease up within 4-6 months.

15:26:06 From Monica Rocha-Wyatt to Everyone:

BRB

15:26:18 From Joseph Smith to Everyone:

What is that date?

15:26:26 From Danielle Foster to Everyone:

Peter, and that's because the first threshold is Nov 1 (date?) in order to get more vouchers, right?

15:26:32 From Stephanie Cotter to Everyone:

Ok it would be great to ensure these are equitably distributed throughout the entire county and having access points throughout the county to the referral process would help in that effort.

15:26:58 From Peter Bell (he/him) to Everyone:

Under the EHV notice, TAY have a much broader definition of homelessness which includes couch surfing. I'll provide a link to the notice shortly.

15:27:35 From Monica Rocha-Wyatt to Everyone:

back

15:27:35 From MaryLiz Paulson to Everyone:

Yes, Danielle. If we can lease up the vouchers by 11/1/21, we have a good chance of receiving additional vouchers.

15:27:45 From Ya-yin Isle (she/her), SSF to Everyone:

<https://www.hud.gov/ehv>

15:28:02 From Peter Bell (he/him) to Everyone:

Hi Danielle, it's not entirely clear what date HUD is looking at for reallocation but there are greater incentives (which may include more vouchers) for faster lease up.

15:28:04 From Ya-yin Isle (she/her), SSF to Everyone:

<https://www.hud.gov/sites/dfiles/PIH/documents/PIH2021-15.pdf>

15:28:18 From Ya-yin Isle (she/her), SSF to Everyone:

Here is the link to HUD's webpage on this and also a link to the notice.

15:34:10 From Danielle Foster to Everyone:

I like the percentage approach, SSF Team!

15:36:35 From Kate Hutchinson to Everyone:

I like this process

15:37:22 From Samantha Earnshaw, LSS to Everyone:

Agreed

15:37:26 From Stephanie Cotter to Everyone:

I like the percentages but worried about access to the CES system. Will people know how they can "sign up"?

15:40:18 From Julie McFarland (she/her) to Everyone:

The only thing coming up for me - besides that this is really fantastic - is that PSH Move On interest may have a fairly small number of people interested. If 10% minimum isn't possible, when then? Perhaps lower than minimum with hopes for higher rates of success, but give the system some flexibility there based on what we see elsewhere with fairly low rates of PSH Move On interest?

15:43:25 From Michelle Charlton (She/Her/Hers) SSF, CoC Coordinator to Everyone:

Update: we have 10 of 17 CESC members

15:44:38 From Michelle Charlton (She/Her/Hers) SSF, CoC Coordinator to Everyone:

approval of EHV's Prioritization to CoC Board

15:44:42 From Jenna Abbott to Everyone:

aye

15:44:45 From Tina Glover (she/her) to Everyone:

aye

15:44:46 From Monica Rocha-Wyatt to Everyone:

aye

15:44:47 From Kelsey Endo to Everyone:

aye

15:44:50 From Cheyenne Caraway to Everyone:

aye

15:44:54 From John Foley to Everyone:

yes

15:44:57 From Desirae Stermer to Everyone:

aye

15:44:59 From Stephanie Cotter to Everyone:

Yes

15:45:06 From Scott Reed to Everyone:

aye

15:45:21 From Kate Hutchinson to Everyone:

aye

15:55:31 From Michelle Charlton (She/Her/Hers) SSF, CoC Coordinator to Everyone:

Approval of COVID-19 PSH Prioritization Extension

15:55:39 From Jenna Abbott to Everyone:

aye

15:55:42 From Desirae Stermer to Everyone:

yes

15:55:42 From Tina Glover (she/her) to Everyone:

aye

15:55:47 From Cheyenne Caraway to Everyone:

yes

15:55:48 From Scott Reed to Everyone:

aye

15:55:52 From Kate Hutchinson to Everyone:

aye

15:55:55 From John Foley to Everyone:

yes

15:55:55 From Kelsey Endo to Everyone:

aye

15:57:00 From Tina Glover (she/her) to Everyone:

aye

15:57:12 From Kate Hutchinson to Everyone:

aye

15:57:16 From Michelle Charlton (She/Her/Hers) SSF, CoC Coordinator to Everyone:
approval of 6/10/21 meeting minutes

15:57:19 From Desirae Stermer to Everyone:
yes

15:57:19 From Jenna Abbott to Everyone:
aye

15:57:25 From John Foley to Everyone:
yes

15:57:27 From Monica Rocha-Wyatt to Everyone:
aye

15:57:33 From Cheyenne Caraway to Everyone:
yes

15:57:33 From Tina Glover (she/her) to Everyone:
aye

15:57:35 From Kate Hutchinson to Everyone:
aye

15:57:40 From Tina Glover (she/her) to Everyone:

aye

16:00:15 From Danielle Foster to Everyone:

What does RAPS stand for?

16:00:25 From Peter Bell (he/him) to Everyone:

Rapid Access and Problem-Solving

16:00:31 From Cheyenne Caraway to Everyone:

I have to jump off for another meeting, thanks everyone!

16:00:33 From Danielle Foster to Everyone:

thanks, Peter!

16:01:22 From Maria Avdalas, SHRA to Everyone:

Thank you everyone!

16:01:27 From Samantha Earnshaw, LSS to Everyone:

Thanks everyone and your hard work SSF team!

16:01:44 From Peter Bell (he/him) to Everyone:

Thanks, everyone! Have a wonderful rest of your week and see you after the holiday.

16:01:48 From Samantha Earnshaw, LSS to Everyone:

Yes and SHRA too! Thank you!

16:02:03 From Scott Reed to Everyone:

thank you!

Emergency Housing Vouchers

Sacramento Continuum of Care



Overview

- Targeted subpopulations
- Prioritization factors
- Referral benchmarks



Targeted Subpopulations

The Sacramento Continuum of Care is choosing to target subpopulations in all four eligible categories, including:

Category 1 - Experiencing Homelessness: **Chronically homeless, Literally homeless**

Category 2- At-risk of Experiencing Homelessness: **Seniors**

Category 3- Fleeing or attempting to flee, domestic violence, dating violence, sexual assault, stalking or human trafficking: **Survivors**

Category 4- Recently homeless and for whom providing rental assistance will prevent the family's homelessness or having high risk of housing instability: **Move-on eligible residents in current PSH programs (not limited to CoC-only); Recently homeless eligible residents in RRH programs**



Eligibility Requirements

In addition to meeting specific eligibility requirements applicable to each category, a household is considered ***ineligible***, if:

- Any member of the household is subject to a lifetime registration requirement on a state sex offender registration program
- Any member of the household has ever been convicted of manufacturing methamphetamines on the premises of federally assisted housing
- There are no members of the household who are U.S. citizens or noncitizens with eligible immigration status



EHV Assessment

Each factor is worth one point. A household would be prioritized based on the highest score:

- No or a very low source of income
- Previously experienced homelessness (HMIS)
- Long-term disability as defined by the HEARTH Act that impedes their ability to work
- History of eviction
- Other housing barriers, such as a criminal background (excluding lifetime 290s)
- Is able to meet most basic needs independently and does not require long-term supportive services OR is receiving sufficient CBO services to meet their needs

Other factors to consider:

- Recently homeless: rent burden if household were to remain in their unit when assistance ends
- At-risk: urgency/# of days when household will exit to homelessness

Subpopulation: Chronically Homeless

- Reasoning: Targets existing CoC and CES programs, who serve the most vulnerable
- Prioritization factors: Connected to ongoing supportive services, COVID-19 prioritization factors
- Referral sources: Behavioral Health Programs, Health Homes/Pathways, FSRP, and other programs serving this population
- Estimated number of **weekly** referrals: 25+ (depends on eligible supportive services)



Subpopulation: Literally Homeless

- Reasoning: Targets existing CoC and CES programs
- Prioritization factors: *EHV assessment questions*
- Referral sources: Varies
- Estimated number of **weekly** referrals: 30



Subpopulation: At-Risk Seniors (63+ years old)

- Reasoning: (1) Seniors are prioritized within the CES temporary COVID-19 prioritization schema. (2) There is a lack of sufficient dedicated housing services for seniors and seniors are ineligible for mainstream vouchers.
- Prioritization factors- *EHV assessment questions*
- Referral sources- n/a
- Estimated number of **weekly** referrals: 5



Subpopulation: Survivors

- Reasoning: (1) Victim service providers have not been well-connected to the homeless response system, despite the intersectionality between intimate partner violence and homelessness. (2) EHV notice requires pathway(s) for all survivors.
- Prioritization factors: Severity of needs questions, *EHV assessment questions*
- Referral sources: My Sister's House, Opening Doors, WEAVE, CASH, IRC, St. John's Women's Shelter, and possibly others.
- Estimated number of **weekly** referrals: 25



Subpopulation: PSH Move-on Ready

- Reasoning: Creates more flow through coordinated entry PSH units for most vulnerable populations
- Prioritization factors: Do you still need supportive services?
 - Trauma Informed / Motivational Interviewing questions – Are you ready?
- Referral sources: All permanent supportive housing programs
- Estimated number of **weekly** referrals: 15



Subpopulation: RRH Bridge to EHV

- Reasoning: Prevents returns to homelessness
- Prioritization factors: *EHV assessment questions*
- Referral sources: All RRH programs (?)
- Estimated number of **weekly** referrals: ???



Prioritization and Referral

- Within each of the six subpopulations, clients will be prioritized based on the highest assessment score
- Clients with the same score will be ranked by length of time homeless, and then first come first served
- Referrals will take place through HMIS (anonymous profiles will be used for Survivor System referrals)



Weekly Benchmarks – 100 Referrals / week

| Subpopulation | Number of Weekly Referrals |
|----------------------------------|----------------------------|
| Chronically Homeless | 25+ |
| Literally Homeless (non-chronic) | 30 |
| At-Risk Seniors | 5 |
| Survivors | 25 |
| PSH Move On | 15 |
| RRH Bridge | TBD |
| Total | 100 + |



Weekly Benchmarks – 100 Referrals / week

100 households referred to SHRA on a weekly basis

If there are not enough eligible clients within a subpopulation to complete the target number of referrals per week, eligible households within the other subpopulations will be referred.





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)

**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 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.*

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)

**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 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 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)

**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 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+ |
| 1. Local Priority for VI-SPDAT scores 14+ | 1. 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 |

| | |
|---|---|
| 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) | 1. 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.*