



**SACRAMENTO  
STEPS FORWARD**

Ending Homelessness. Starting Fresh.

**Sacramento Continuum of Care**  
**COORDINATED ACCESS SYSTEM**  
**POLICIES AND PROCEDURES MANUAL**

Revised October 2023

# **TABLE OF CONTENTS**

<b>Table of Contents.....</b>	<b>1</b>
Context & Audience.....	2
Committees and Decision Making Structure.....	3
Policy Requests & Policy Changes.....	4
Components of the Coordinated Access System.....	5
<b>ACCESS.....</b>	<b>6</b>
Access Points.....	6
2-1-1 Sacramento.....	6
Crisis Resources.....	6
Problem-Solving Services.....	8
Survivor System for People Fleeing Domestic Violence or a Dangerous Situation.....	9
<b>ASSESSMENT.....</b>	<b>11</b>
Triage.....	11
Shelter Assessment.....	12
Housing Assessment.....	12
<b>PRIORITIZATION.....</b>	<b>13</b>
Emergency Shelter.....	13
Coordinated Access Navigation (CAN).....	15
Permanent Housing.....	17
<b>REFERRAL PROCESS.....</b>	<b>18</b>
Referral to Emergency Shelter Opening.....	18
Coordinated Access Referral Process to Permanent Housing Options.....	21
Rapid Rehousing (RRH) Coordinated Access Referral Process.....	21
Permanent Supportive Housing (PSH) Coordinated Access Referral Process.....	23
Permanent Housing (PH) Coordinated Access Referral Process.....	25
Referral to Other Housing Resources.....	25
Housing Case Conferencing.....	25
<b>SURVIVOR COORDINATED ACCESS SYSTEM (S-CAS).....</b>	<b>26</b>
VSP Access Point Referral Process to S-CAS.....	28
S-CAS Case Conferencing.....	31
<b>VIOLENCE AGAINST WOMEN ACT (VAWA).....</b>	<b>32</b>
<b>TRANSFER POLICIES.....</b>	<b>34</b>
VAWA Emergency Transfer Policy.....	34
RRH to PSH Transfer Policy.....	36
PSH to PSH Transfer Policy.....	38
<b>LIST MANAGEMENT.....</b>	<b>42</b>

Grievances.....43

**APPENDICES.....44**

Appendix A: Grievance Escalation Process.....44

Appendix B (211 Standardized Triage Questions).....46

Appendix C: HMIS Steps.....49

Appendix D: Housing Problem-Solving Conversation Sample Questions.....54

Appendix E: CAS Participating Shelters.....56

Appendix F: CAS Shelter Transfer Request Form.....58

Appendix G: CAS RRH to PSH Transfer Request Form.....62

Appendix H: Universal Interim Shelter Prioritization.....66

Appendix I: VAWA FAQs.....67

Appendix J: VAWA Notice of Occupancy Rights.....71

Appendix K: VAWA Certification of Domestic Violence, Dating Violence, Sexual Assault, or Stalking and Alternate Documentation.....76

Appendix L: VAWA Emergency Transfer Request.....79

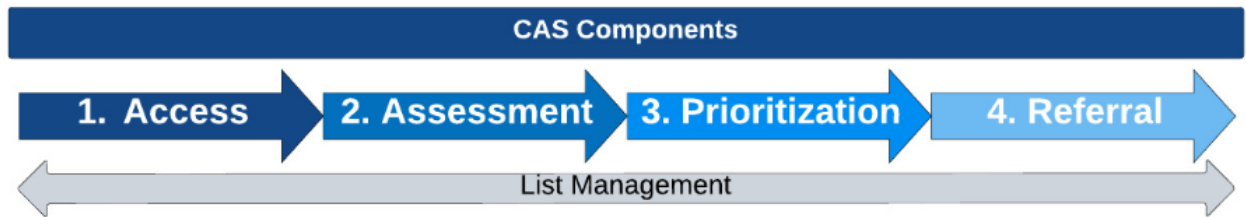
Appendix M: VAWA Model Emergency Transfer Plan.....82

Appendix N: Document Ready Lists.....85

Appendix O: Grievance Form.....87

**Context & Audience**

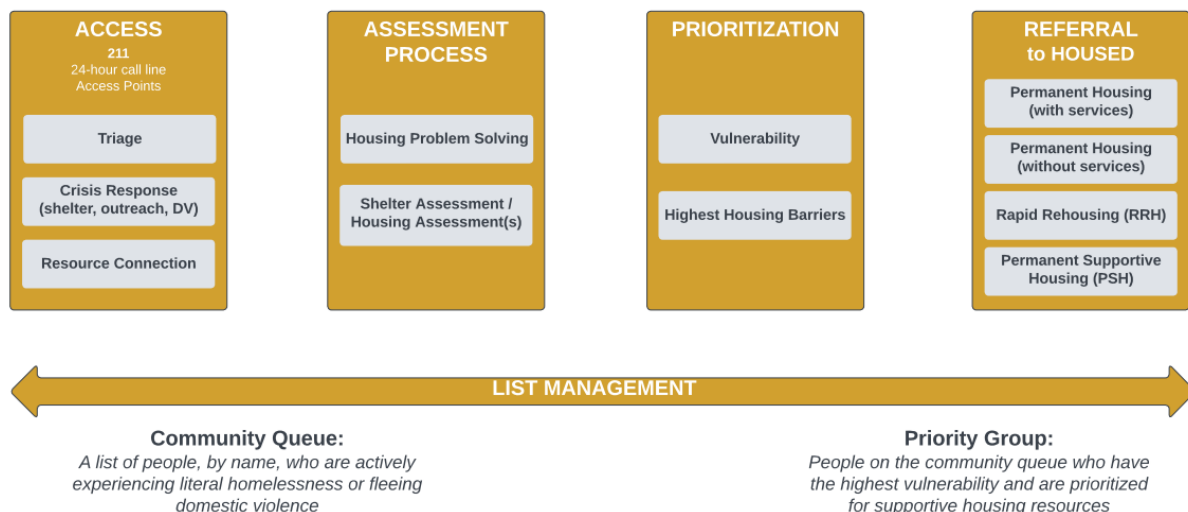
This manual was drafted by the Coordinated Access System (CAS) team at Sacramento Steps Forward (SSF) in September 2023 for homelessness response system partners, including but not limited to 2-1-1 partners, emergency shelter, outreach, housing providers, CAS Access Points, housing problem solving specialists, planners, funders, and other interested partners. This manual aims to provide clear information in the plainest possible language. This manual is a reference tool that provides policies and procedures (detailed descriptions of how to carry out a policy) related to CAS and its five components:



CAS policies and procedures align with federal requirements in [HUD Notice CPD-17-01](#) (Notice Establishing Additional Requirements for a Continuum of Care Centralized or Coordinated Assessment System.) This Manual will be continuously updated over time as system improvements and changes occur.

## Coordinated Access System (CAS)

A network designed to match people experiencing homelessness with shelter, housing and service options. CAS helps connect people with the highest needs to housing and support services as quickly as possible.



### Glossary of Terms

This glossary includes a *living* list of terms you may find in this document, along with definitions to help explain the terms.

[https://docs.google.com/document/d/1joZLNw\\_vKQ5eXRjuc7QN3gBycglciP\\_V0wJ8WvEi6Hs/edit?usp=sharing](https://docs.google.com/document/d/1joZLNw_vKQ5eXRjuc7QN3gBycglciP_V0wJ8WvEi6Hs/edit?usp=sharing).

### *Committees and Decision Making Structure*

#### CAS Core Team

The CAS Core Team is responsible for driving system-level change within the Coordinated Access System, and has helped determine the policies and processes in this manual. It includes representation from the City, the County, providers, persons with lived experience, SSF and consultants.

CAS Core Team Community Agreements:

- We commit to naming and elevating alignment, and building collaboratively, giving equal power to every voice in the space.
- We acknowledge and respect that in our group, there are differing political analysis, theories of change, and organizational structures.
- Power shows up in many different ways, and we are aware of how we use our privilege and power
- We choose to lean into discomfort

- We practice “stepping up and stepping back”. We are mindful of taking up too little or too much space.
- We will call each other in with love and support, and hold each other accountable. We will be open to receiving feedback from one another.
- We recognize that this is not a whole space. There are people, perspectives and voices missing. We will hold ourselves accountable as a collaborative to elevate and empower folks who have historically been under-resourced and underrepresented.
- We emphasize relationship building and agree to move at the speed of trust.
- We commit to bringing our whole selves and fostering a brave space.
- We honor vulnerability and messiness when building something meaningful, and hold strong boundaries around not sharing externally, what isn't ours to share. What's learned here, leaves here.

### **CAS Committee**

The Coordinated Access System Committee (CASC) oversees the design and implementation of the local coordinated access system (CAS), evaluates its functioning, and assesses its impact on improving access and connection to services to resolve homelessness.

Responsibilities include:

- In consultation with ESG jurisdictions and CoC recipients, establishing policies and procedures, including specific policies to guide operation for persons fleeing domestic violence to ensure HUD requirements and local goals are met;
- Developing performance metrics and evaluative tools specific to oversight and administration of the CAS;
- Regularly seeking feedback from providers, consumers, and others engaging with the CAS; and
- Reporting regularly on the activities of the CAS to Sacramento CoC Board and broader CoC community on access, resources, and functioning.

For more details about the CASC purpose, responsibilities, and more, please review the [CASC Member Orientation materials](#) and [recording](#).

### ***Policy Requests & Policy Changes***

CAS is a constantly evolving system under continuous improvement. The following process, and recommended timeline, is followed when developing, revisiting, and/or reviewing CAS processes:

- A policy need is elevated by the CAS Core team, SSF, or through other feedback
- SSF drafts the policy utilizing local, state, federal guidance if applicable (1-2 weeks)
- SSF gathers feedback from the Persons with Lived Expertise group and integrates changes (1 week)
- SSF reviews the draft policy with the CAS Core Team

- SSF integrates feedback into the draft and brings final policy to CAS Core Team for approval (2 weeks)

### ***Components of the Coordinated Access System***

This section includes process, policy and procedural information about the five components of CAS.

#### Access

Access refers to how individuals experiencing homelessness enter and exit the CAS system. In Sacramento, individuals can access CAS by contacting 211 and pressing 8 to connect with 211 staff to discuss emergency shelter, housing problem solving and housing resources .Additionally, individuals can gain entry into CAS through the following: street outreach teams ,CAN navigators and through other partnering agencies who have staff trained to complete shelter and VISPDAT assessments in HMIS.

#### Assessment

Assessment refers to the process of gathering and documenting an individual's housing and shelter barriers, preferences and needs. CAS assessments determine how individuals are prioritized and referred to shelter, housing and supportive services openings in the CAS system.

#### Prioritization

Prioritization refers to determining an individual's priority for shelter, housing and supportive services. Prioritization helps SSF manage its inventory of community housing resources and services, ensuring that those individuals with the greatest need and vulnerability receive the support they need to resolve their housing crisis first.

#### Referral

Referral refers to an individual with the highest priority being referred to shelter, crisis resources, housing and supportive services. When and How referrals occur is determined by multiple factors; such as CAS available resources and individual preferences and needs.

## **ACCESS**

“Access” refers to how people seeking housing crisis resources can connect to critical and immediate support through the homeless response system. Sacramento’s Housing Crisis Line (2-1-1 press 8) is available for households to call to be triaged to resources including emergency shelter, problem-solving support and victim services. Currently, the CAS is focused on providing resources to households who are at-risk of or currently experiencing homelessness, and fleeing or attempting to flee domestic violence or a dangerous situation.

### ***Access Points***

Access Points are defined as, “Virtual and physical connection points to the Sacramento homeless system. Access Points provide a person-centered approach for people who are facing homelessness tonight.

Services include triage and system referral, housing problem solving, shelter connection, housing assessment support, and community resource connection. Access Points are publicly advertised and are organizations where people experiencing homelessness are intended to feel supported when going for assistance.”

### ***2-1-1 Sacramento***

[2-1-1 Sacramento](#) is a free, confidential information and referral service for community, health, social services, and acts as the point of access for housing crisis resources and emergency shelter. Households can call The Housing Crisis line at 2-1-1 (select the number 8 when prompted), or toll free at 1-844-546-1464, 24 hours a day, seven days a week. Flyers can be found [here](#).

Callers are triaged to appropriate resources based on their homelessness risk level and information gathered from a problem-solving conversation to better understand their current situation. All client information and referrals to CAS housing crisis resources are managed and maintained by 2-1-1 Sacramento within the Homelessness Management Information System (HMIS) database. The housing crisis resources that 211 can make a direct referral to are included below.

### ***Crisis Resources***

#### **Emergency Shelter**

Emergency shelters provide a temporary residence for individuals and/or families who have neither a safe home nor the means to obtain safe housing or other temporary lodging. Emergency shelter may be provided for general populations or specific populations, in congregate or non-congregate facilities, and do not require occupants to sign leases or occupancy agreements. All Emergency Shelters strive to be low-barrier to entry (without extensive requirements or rules) and, at a minimum, provide basic needs, housing-focused services, and linkage to voluntary mainstream services.

Emergency shelters participating in the Coordinated Access System can only receive direct referrals from 2-1-1 Sacramento. This means that openings within participating emergency shelters are filled exclusively through the CAS and 2-1-1 process. Providers trained in HMIS are able to conduct the shelter assessment to place their clients onto the shelter waitlist, but are not able to make referrals directly into shelter. Due to limited emergency shelter resources, this process supports community wide prioritization of households deemed most vulnerable per the CoC's Prioritization Policy (below). See Appendix E for the list of CAS participating shelters.

#### Eligibility

Individual or family households residing in Sacramento, with at least one member 18 years or older, and staying in one of the following tonight:

- Car/Vehicle
- Motel/hotel paid for by an organization
- Outside and/or In a tent
- Respite Center
- With friends or family tonight (applies to transitional aged youth only)

#### Waitlist Management

211 receives an updated shelter waitlist 3 times per day, which captures all households with a completed shelter assessment. 211 also receives real time updates on shelter openings in HMIS, with the goal to fill bed openings by the end of the day. As openings occur, 211 will attempt to contact waitlisted clients for shelter placement based on bed availability and the following criteria:

1. Shelter-specific eligibility, prioritization and appropriate fit
2. Universal interim prioritization (see Appendix H)

#### **Priority Group 1**

- Meets shelter-specific eligibility, prioritization and appropriate fit
- Highest universal interim prioritization score
- Last system engagement <30 days

#### **Priority Group 2**

- Meets shelter-specific eligibility and appropriate fit
- Highest universal interim prioritization score
- Last system engagement <90 days

Based on CAN team capacity, households on the shelter waitlist who are not currently connected to outreach or a caseworker, can be connected to the CAN team. Priority will be given to those households with the highest interim prioritization score.



### Active & Inactive Status - Shelter Waitlist

Households with shelter assessments completed within the last 90 days remain on the shelter waitlist. Households with shelter assessments older than 90 days or who have an active shelter or housing enrollment are removed from the waitlist.

### **Coordinated Access Navigation (CAN) Team**

The Coordinated Access Navigation (CAN) team is managed by Elica Health Centers, and provides shelter placement facilitation and housing problem-solving support to eligible households on the shelter waitlist. Each CAN member maintains an active caseload of no more than 25 individual or 15 family households. 2-1-1 Sacramento facilitates a connection to a CAN team member for eligible households seeking navigation support.

### Eligibility

Individual or family households residing in Sacramento, with at least one member 18 years or older, and staying in one of the following tonight:

- Car/Vehicle
- Motel/hotel paid for by an organization
- Outside and/or In a tent
- Respite Center
- With friends or family tonight (applies to transitional aged youth only)

*and*

- On the shelter waitlist
- Not connected to a case manager or outreach worker

Once a client is connected to CAN navigator, the CAN navigator works on a case plan based on the needs the client has expressed. CAN provides individualized support to connect and explore available safe alternative housing options, through resources like housing stabilization services, financial assistance, and other housing-problem solving services. CAN connects clients to resources, (provide vouchers for ID, Birth Certificate, etc.) and helps make appointments. After September 2023 (training), CAN may assist clients to apply for Medi-cal & Cal-Fresh. CAN remains connected to clients until a shelter opening becomes available and an intake appointment is scheduled for the client. The CAN navigator will meet clients at shelter, and proceed to do a warm hand off with the shelter staff.

### ***Problem-Solving Services***

211 and Problem-Solving Access Points are trained to conduct an exploratory conversation as the first intervention for someone seeking housing crisis support. This includes a focus on housing history, income, safety, and other potential resources to support the household in stabilizing or helping them find alternative, safe housing. The goal is to work with the household to identify any safe housing options, even if temporary, to help resolve the housing crisis.

Whether that includes landlord mediation, conflict resolution, connection to existing networks and resources, or one-time financial assistance, the conversation is centered on the household's strengths. The Continuum of Care is working towards a system-wide approach in which all access points are trained to conduct housing problem-solving conversations prior to assessing.

### ***Survivor System for People Fleeing Domestic Violence or a Dangerous Situation***

If the caller expresses that where they are staying is unsafe housing, 2-1-1 can gather more information using the following questions. Ensure they understand they do not have to answer any questions they do not feel comfortable answering in order to be eligible for housing assistance. Instead, ensure they understand that the questions are designed to identify all resources in the community that may be able to support their needs. If at any point the caller is in immediate crisis or begins exhibiting signs of a trauma response at any point during your interaction, immediately stop the pre-screening, engage in de-escalation strategies and crisis interventions, and call one of the crisis hotlines listed in the resources section below.

1. *Are you being hurt or have you been hurt (physically, emotionally, sexually, etc.) in the past by someone you know?*
2. *Have you ever worked [or done other activities] without getting the payment you thought you would get?*
3. *Has anyone forced or pressured you to touch them or someone else sexually in exchange for safety, money, or something of value (for example, food, shelter, drugs, gifts, etc.) If any of the above have ever occurred, when was the last incident?*
4. *Is there anything else that you would like to tell me about your safety?*

If the caller is in need of services due to lack of safety related to domestic violence, human trafficking or sexual assault, you can share the appropriate local resources for Victim Service Providers (VSPs) in the community with the qualifications and training to meet survivor-specific needs:

#### [Coordinated Access System - Victim Service Providers \(VSP\)](#)

<b>Agency</b>	<b>Service Type</b>	<b>Crisis Line/Contact</b>	<b>Populations Served/Services</b>
<a href="#">My Sister's House</a>	RRH Program	(916) 428-3271 24-Hr Multilingual Helpline	Domestic Violence, Human Trafficking, Sexual Assault
<a href="#">WEAVE</a>	<b>PSAP (takes 211 calls)</b> PSH Program	(916) 920-2952 Support/Information Line	Domestic Violence, Human Trafficking, Sexual Assault
<a href="#">Sacramento Regional Family Justice Center</a>	PSAP (does not take 211 calls)	(916) 875-4673	Domestic Violence, Human Trafficking, Sexual Assault
<a href="#">Community Against</a>	Access Point	(916) 856-2900	Sex Trafficking

<a href="#">Sexual Harm (CASH)</a>			
<a href="#">Opening Doors Inc.</a>	RRH Program	(916) 492-2591 ext. 202	Human Trafficking, Refugees
<a href="#">International Rescue Committee (IRC)</a>	Access Point	(916) 482-0120	Human Trafficking, Refugees
<a href="#">Shelter Inc.</a>	RRH Program	(925) 335-0698	Domestic Violence
<a href="#">Lao Family Community Development (LFCD)</a>	RRH Program PSAP (does not take 211 calls)	(916) 393-7501	Domestic Violence
<a href="#">City of Refuge</a>	Shelter	(916) 970-5164 (866) 733-8438	Domestic Violence, Human Trafficking, Sexual Assault
<a href="#">National Human Trafficking Hotline</a>	Crisis Resources	1(888) 373-7888	Human Trafficking
<a href="#">National Domestic Violence Hotline</a>	Crisis Resource	1(800) 799-SAFE (7233)	Domestic Violence

## **ASSESSMENT**

“Assessment” refers to the process utilized to determine the types of resources that would be most useful based on a participant’s current situation. It helps determine what resources the participant may be prioritized for based on the CAS Prioritization Policy. The CoC is working towards a fully integrated approach of conducting assessments in phases, in order to capture information as-needed as households navigate the system.

The assessment process begins once someone calls into 2-1-1. A series of triage questions are asked along with a more in-depth problem solving conversation for 211 staff to better understand their living situation and determine their risk level of homelessness. Based on their risk, the household is triaged to the appropriate resources. Trained problem-solving access points also conduct housing problem-solving conversations with clients, but they are not able to directly refer a person to shelter.

### ***Triage***

Prior to conducting assessments, triage questions are asked at the initial point of contact or integrated into a housing problem-solving conversation to help determine a person’s homelessness risk level. The questions also include asking about safety to ensure the household can continue with the triage process safely. This may lead to connecting or sharing information to appropriate survivor resources. With the client’s consent, data is collected in HMIS.

#### **Homelessness Risk Levels**

- 4- Literally Homeless Tonight
- 3- Imminent Risk of Literal Homelessness (within 14 days)
- 2- At-Risk of Literal Homelessness (within 30 days)
- 1-0- Unstably Housed and Stably Housed

Clients are triaged to the appropriate crisis resources based on risk level and eligibility, including shelter, housing problem-solving supports, and connection to a Coordinated Access Navigator. 211 also shares information about community resources not within the Coordinated Access System.

### ***Shelter Assessment***

If someone is needing shelter, 211 and trained agencies are able to conduct the shelter assessment in HMIS to place someone on the waitlist. A shelter assessment can be conducted for households who will be experiencing homelessness tonight- specifically outside, unsheltered or in a respite center.

The shelter assessment is designed to capture client information to help determine eligibility, prioritization and appropriateness for each participating shelter. Anyone with a completed shelter assessment is automatically placed on the waitlist. Shelter assessments must be updated or a new one must be completed within 90 days for the household to remain active on the shelter waitlist

### **Problem-Solving Access Point (PSAP) Assessment**

If a person is seeking limited financial assistance that would help resolve their housing crisis, 211 can conduct the PSAP assessment. If eligible, a household is scheduled for an intake appointment at any designated PSAP. PSAPs who do not receive direct referrals from 211 go through a similar process to determine eligibility.

### ***Housing Assessments***

#### **VISPDAT (Vulnerability Index-Service Prioritization Decision Assistance Tool)**

The VISPDAT is the primary housing assessment tool for the Sacramento COC. The VI-SPDAT is a pre-screening, or triage tool that is designed to be used by all providers within a community to quickly assess the health and social needs of homeless persons and match them with the most appropriate support and housing interventions that are available.

Our community is currently utilizing 3 different VISPDAT assessments: VISPDAT for Single Adults, VISPDAT for Transition Age Youth and VISPDAT for Families.

Service providers must receive HMIS and VISPDAT training before they can conduct the VISPDAT assessment. Anyone with a completed VISPDAT will be referred to the Community Queue to be prioritized for CAS participating housing opportunities. The VISPDAT assessment must be updated annually in HMIS for all clients in the community queue.

The following CAS housing assessments can be found in the HMIS Assessment Tab. These housing assessments are specific to a housing program/project and can only be completed if the client meets eligibility criteria for that specific program.

- Emergency Housing Voucher Assessment (EHV)
- Foster Youth to Independence Assessment (FYI)
- Landlord Engagement Assistance Program Assessment (LEAP)
- Permanent Housing Assessment- Families (PH)

## **PRIORITIZATION**

“Prioritization” refers to how individuals or households are prioritized for resources based on the CoC’s Prioritization Policy. Prioritization is based on an individual or household’s vulnerability or need level. To determine prioritization, assessment data is used to compare the participant’s level of need with the needs of others on the community queue, and people are prioritized for shelter, housing and supportive services based on the CoC’s Prioritization Policy. Prioritization must be based on a specific and definable set of criteria that are made publicly available through written prioritization standards, conducted according to the CoC’s written prioritization policies and procedures, and applied consistently throughout the CoC to all households being prioritized.

### ***Emergency Shelter***

Prioritization is determined through the shelter assessment tool and details are self-reported unless physically verified by outreach program staff (e.g. location). As openings occur, 211 will attempt to contact waitlisted clients for shelter placement based on bed availability and the following criteria:

1. Shelter-specific eligibility, prioritization and appropriate fit
2. Universal interim prioritization (see Appendix H)

#### **Priority Group 1**

- Meets shelter-specific eligibility, prioritization and appropriate fit
- Highest universal interim prioritization score
- Last engagement <30 days

#### **Priority Group 2**

- Meets shelter-specific eligibility and appropriate fit
- Highest universal interim prioritization score
- Last contact <90 days

Any households on the shelter waitlist who are not currently connected to outreach or a caseworker can be connected to the CAN team. Priority will be given to those households with the highest interim prioritization score.

### **2-1-1 Emergency Shelter Prioritization Procedures**

1. Filter the Shelter Assessment Report for households that meet the shelter’s specific eligibility, prioritization and appropriate fit criteria, based on the shelter needing to be filled (indicated by a ‘yes’ in each column)
2. Identify the household with the highest universal interim prioritization score and recent service engagement within the last 30 days
3. Reach out to the client and service provider

- a. If contact is made, offer the shelter bed and submit the referral
  - b. If no contact is made, 211 will continue contacting households in order of priority
  - c. If a client meets eligibility and appropriate fit criteria, but refuses a shelter bed, 211 will continue contacting households in order of priority and gather recent information about if their situation has changed.
4. If Priority Group 1 households have been exhausted, filter the Shelter Assessment Report for households that meet the shelter's specific eligibility and appropriate fit criteria, based on the shelter needing to be filled
  5. Identify the household with the highest universal interim prioritization score
  6. Identify the household with the highest universal interim prioritization score and recent service engagement within the last 90 days
  7. Reach out to the client or service provider
    - a. If contact is made, offer the shelter bed
    - b. If no contact is made, continue contacting households in order of priority
    - c. If a client meets eligibility and appropriate fit criteria, but refuses a shelter bed, 211 will continue contacting households in order of priority and gather recent information about if their situation has changed.

211's process if there's no contact:

1. 211 notifies household of the bed availability, leaving a text/voicemail to call 211 back as soon as possible
2. 211 continues contacting households in order of priority
  - Typically it takes ~1-2 hours to fill an opening (average 1 min call & 3 mins buffer per case for 20 households)
3. If a client calls back and the bed is filled, that client is prioritized for the next opening.
  - 211 also provides client context on projected bed availability

### Interim Universal Shelter Prioritization Policy

#### *Individual Shelter Prioritization*

#### *Family Shelter Prioritization*

Pregnancy	2pt	Pregnancy	2pt
Any household member who has experienced a physical health crisis within the last 3 months	1pt	Any household member who has experienced a physical health crisis within the last 3 months	1pt
Any household member who has experienced a mental health crisis within the last 3 months	1pt	Any household member who has experienced a mental health crisis within the last 3 months	1pt

Actively fleeing from DV, human trafficking, sexual assault	3pts	Actively fleeing from DV, human trafficking, sexual assault	3pts
Ongoing and diagnosed mental or physical health disability	1pt	Ongoing and diagnosed mental or physical health disability	1pt
Age (over 55)	1pt	Age (over 55)	1pt
Households living in a tent or outside	1 pt	Single-parent household	1pt
Experiencing homelessness for more than one year	1 pt	Number of children	1pt per child
		Children under the age of 5 years old	1pt
		Households living in a tent or outside	1 pt
		Experiencing homelessness for more than one year	1 pt

In addition to these prioritization factors, some shelters have unique prioritization factors that are also considered when determining the top prioritized household. The interim universal prioritization factors (above) were designed by the CAS Core Team to capture a household's vulnerability.

### ***Coordinated Access Navigation (CAN)***

Prioritization is based on highest vulnerability, determined by the shelter assessment score:

- Individual shelter assessment score 6 or higher
- Family shelter assessment score of 10 or higher

### ***CAS Participating Permanent Housing***

Prioritization for CAS participating permanent housing including; Permanent Supportive Housing (PSH), Rapid Rehousing (RRH) and Permanent Housing with and without services (PH) resources is based on the following factors:

1. Age 65+ with or without underlying medical conditions
2. All ages with underlying medical conditions



3. All ages without underlying medical conditions

Tiebreaker: Length of time homeless (Longest to shortest)

100% of PSH in the Sacramento CoC is dedicated to people who meet the definition of Chronic Homelessness (See [Glossary](#) ; Chronic Homelessness Definition: [2015-30473.pdf \(govinfo.gov\)](#)).

## **REFERRAL PROCESS**

The referral process connects people experiencing homelessness to emergency shelter and permanent housing resources that they are prioritized for and eligible. The referral process tracks the process from the point of identification for an available resource, to the point of the referral outcome (ex: person is accepted and enrolled in shelter or housed, person refused the referral/resource, person was denied by provider).

### ***Referral to Emergency Shelter Opening***

Once the next prioritized and eligible household has been identified for a specific shelter opening, 2-1-1 coordinates transportation and warm handoff details with the household and CAN or dedicated outreach teams and notifies the shelter of the appointment. The shelter will receive the household's information, appointment time and referral through HMIS. To complete the intake process, shelter staff will indicate in HMIS if the referral was received, and the intake appointment was attended. If present, the household will then be enrolled in the shelter's program.

If 2-1-1 identifies a household assigned to a CAN team for shelter referral, the CAN team will contact the household within 24 hours to re-assess the immediate housing situation. The CAN team will confirm the client's need and desire for emergency shelter. If shelter is no longer needed, they will notify 2-1-1. If shelter is still needed, the CAN navigator will meet the client at shelter, and proceed to do a warm hand off with the shelter staff.

### **Transfers**

Transfers between shelters can be requested by shelter staff, clients or advocating providers. All requests are reviewed by 2-1-1 Sacramento, and determined if eligible for transfer within 7 business days. All transfers must be requested and approved based on the criteria and through the procedures outlined below. See Appendix E for Transfer Request Form.

### ***Transfer Procedures***

Shelter providers can submit a completed Transfer Request Form to 2-1-1 at [cas@211sacramento.org](mailto:cas@211sacramento.org) with the subject line including 'shelter transfer request.' 2-1-1 CAS manager will notify the provider of the approval or denial via email within 7 business days.

If approved, 2-1-1 will refer the participant to the new shelter placement as soon as it is available, ensuring the participant meets the shelter's eligibility and appropriate fit criteria. Shelters must accept the transfer unless the client has been exited from the shelter and cannot return. The former shelter agency will facilitate a warm handoff to the new shelter agency to ensure that the client is fully transferred. If a shelter opening is not identified specifically to the client's request, clients will remain on the transfer waitlist to be considered when the next appropriate shelter opening becomes available. CAS staff will regularly monitor the list for vacancies and appropriate matches.

Once an opening becomes available, 2-1-1 will complete transfers in the order of the date they were submitted. 2-1-1 will contact the shelter before making the transfer referral.

If denied, 2-1-1 will provide a written emailed response of the determination to the requesting program, including the rationale for denials in *Table 2- Transfer Denial Reasoning* within 2 business days of the request.

### **Pregnant Women**

Pregnant women can transfer from an individual to a family shelter. When possible, a transfer can be made ahead of time before anticipated delivery. Just to allow for the family to settle in ahead of time. Within 6 weeks of expected delivery, a provider can request the transfer

### **Shelter Options Offered**

If a household denies or no shows 3 times to shelter, household will no longer be at the top of the list for a shelter referral

### **Non-CAS Participating Shelters**

For transfer requests from shelter beds/programs that are non-CAS participating, shelter providers will need to assess the client to get them on the shelter waitlist. For transfer requests from shelters that do meet shelter standards, providers can follow the current CAS shelter transfer policy. Note: SSF will provide training to help shelters adhere to the policies and procedures.

**Table 1. Approved Transfer Reasoning**

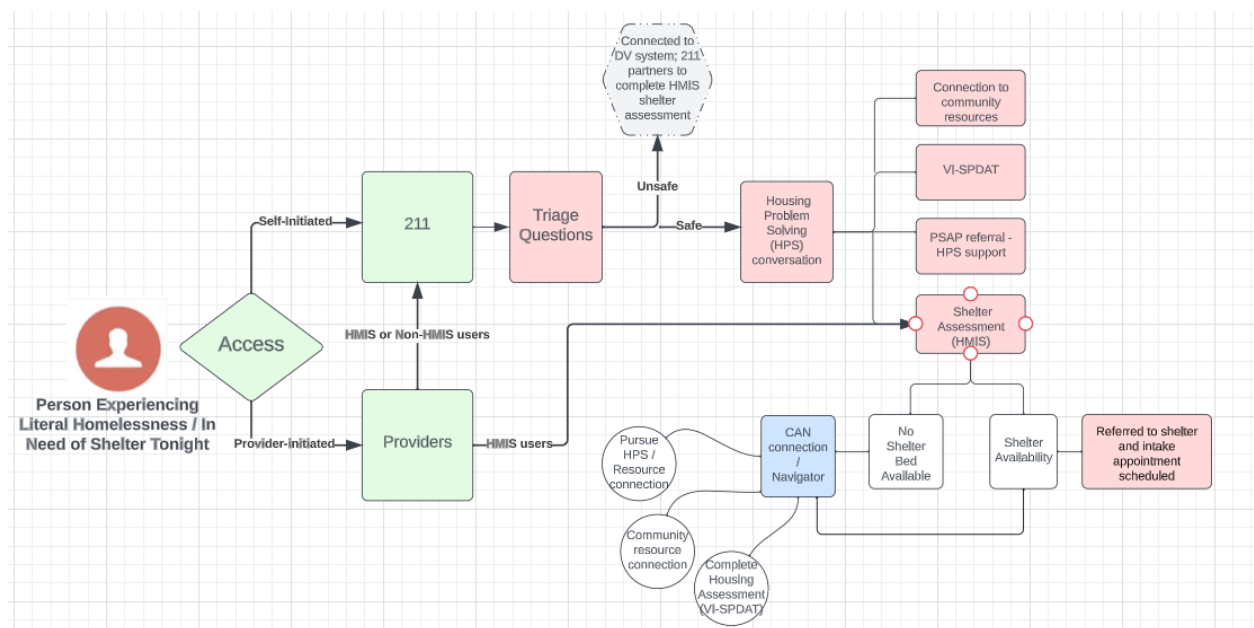
Reason	Definition	Insufficient Reason
Safety Concerns due to Domestic Violence	Unsafe due to domestic violence, dating violence, sexual assault, stalking and/or human trafficking	N/A
Safety Concerns and Conflicts Due to Reasons Other than Domestic Violence	Unsafe due to violence or threatening conditions, such as bullying, LGBTQ+ and gender/sexuality-related conflicts or concerns	Crime in the neighborhood that is not specifically targeting the household or shelter.
Pregnancy	A transfer can be made ahead of time before anticipated delivery. Just to allow for the family to settle in ahead of time. Within 6 weeks of expected delivery, a provider can request the transfer	N/A
Change in Household Composition or Aging out	Household size changes require that the household move due to shelter eligibility.	Change in the type of accommodation not

	(ex. Single household member regaining custody of a minor dependent and needing to reside in a family shelter); TAY aging out and needs to move to an adult shelter	required to remain eligible for shelter.
Location Accommodation	Wanting to be closer to employment/child's school	
Health and medical reasons/reasonable accommodation	Medical and health reasons that present risks if not moved to another shelter, such as near pregnancy, mobility issues, or other health concerns	Health and medical reasons/ reasonable accommodations that exceed services that CAS shelters can provide. Must be referred to an external resource to meet needs.

**Table 2. Denied Transfer Reasoning**

Reasons	Definition
Insufficient Transfer Reasoning	The documentation submitted does not meet the threshold criteria demonstrating the need for approval of a transfer.
Current existing resources are not able to meet the request needs	There is currently no shelter that meets the identified needs of the participant.

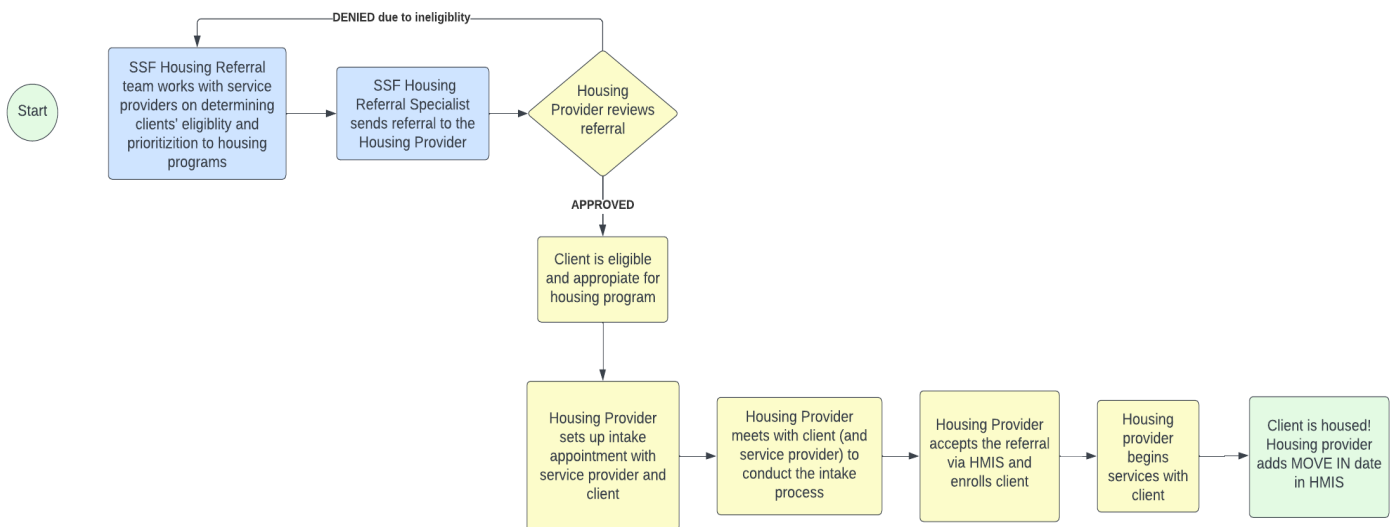
*Participant Journey Map, from Literal Homelessness to Sheltered*



## Coordinated Access Referral Process to Permanent Housing Options

Types of Permanent Housing include:

1. Rapid ReHousing
2. Permanent Supportive Housing
3. Permanent Housing with Services
4. Permanent Housing without Services



### Rapid Rehousing (RRH) Coordinated Access Referral Process

*This is the CAS referral process for a referral to an eligible RRH program. Please note that not all Sacramento County RRH programs go through the Coordinated Access System and may have a separate referral process and referral agency.*

Eligibility Requirements:

1. Experiencing literal homelessness (Category 1) OR fleeing/attempting to flee domestic violence, sexual violence, or/ and human trafficking (Category 4)
  - a. [Definitions of HUD's four categories of homelessness](#)

RRH Required Documentation:

1. VI-SPDAT V2 Assessment (within the last year)
2. Homeless Certification
3. Social Security Card\*

4. Valid ID\*
5. Birth Certificate\*
  - a. Only needed for minor household members (under 18 y.o)

*\* Some RRH programs work with clients to obtain these documents after a referral*

#### Coordinated Access RRH Referral Steps:

1. If a household has been selected to be referred, the CAS Referral Specialist will send an email confirmation to the household's primary provider.
  - a. This email confirmation will confirm which RRH program the client is referred to.
2. The RRH program coordinators will then reach out to the household and provider to coordinate an intake appointment.
3. After the intake appointment, the program coordinators from the RRH housing agency will verify eligibility. If eligible, they will enroll the client into their RRH program and begin housing navigation assistance.

### ***Permanent Supportive Housing (PSH) Coordinated Access Referral Process***

*This is the CAS referral process for a referral to PSH programs for people who are eligible.*

#### Eligibility Requirements:

Meets one of the following criteria at project entry:

1. Experiencing chronic homelessness, or
2. Residing in a transitional housing project that will be eliminated and meets the definition of chronically homeless in effect at the time in which the individuals or family entered the Transitional Housing (TH) project, or
3. Residing in transitional housing funded by a Joint TH and rapid re-housing (PH-RRH) component project and who were experiencing chronic homelessness as defined prior to entering the project.

#### Permanent Supportive Housing (PSH) Required Documentation:

- VI-SPDAT V2
- Valid Identification Document (ID)
- Social Security Card
- If they have dependents/ minors:
  - Birth Certificates and Social Security Cards (for all dependents)
- Homeless Certification **(expires after 90 days)**
- Chronic Homelessness Certification (never expires)
  - Chronic Homelessness History - make sure to check off all the forms of verification that you are submitting

- Disability Certification (never expires)
  - Fill out only ONE section of the form:
    - Section 1: Any staff member can fill this section out. Must upload proof of disability by written verification from the Social Security Administration (i.e. SSI, SSDI) or receipt of a disability check (e.g. Veteran Disability Compensation) onto HMIS.
    - Section 2: Must be signed by a license profession and include license number.
- 12 Months of [Verified Homelessness](#)
  - There needs to be clear documentation that the client experienced homelessness continuously for at least the last 12 months or at least 4 occasions in the last 3 years, where the combined occasions total at least 12 months.
  - This can be done through the following:
    - Homelessness History Mapping Tool: This form clearly lays out their months of homelessness and verifications needed to document homelessness. The bottom of this form can be completed to verify attempts to obtain third party verification
    - Third Party Homelessness History Verification Form: HUD biggest priority is to collect these forms. This form is for Homeless providers to verify that they witnessed the client homeless and the months they are verifying for.
      - Family members CANNOT complete third party verifications
      - Outreach worker cannot provide third party documentation for months in which they did not encounter the individual or head of household
      - Stays in institution of fewer than 90 days count towards homelessness and do not constitute a break OR
      - An individual who has been residing in an institutional care facility for fewer than 90 days and met chronic status prior to admission to institutional care facilities
      - One day of experiencing homelessness within a month will be counted towards the whole month (ex: If a client is experiencing homelessness one day of the month for every month in January until April, that is 4 months of experiencing homelessness. It is also considered 4 separate episodes of homelessness)
    - [Third Party Letters](#): A written observation by an outreach or intake worker, community member, or housing or service provider of encounters with the individual or head of household that includes a description of the conditions where the individual or head of household was living or is currently living and the dates they witnessed the client homeless. This can be in place or in conjunction with the Third Party Homelessness History Verification form.
    - Self-Certification of Homelessness: The client can only certify for up to 3 months of homelessness they experienced within the last 3 years.
    - HMIS Printout

These forms can be located on our website: [Documents – Sacramento Steps Forward](#)

#### Coordinated Access System PSH Referral Steps:

1. If the household has been prioritized for a PSH referral, the CAS Referral Specialist will send an email confirmation to the household's primary service provider.
  - a. This email confirmation will confirm which PSH program the client is referred to.
2. The program staff from the PSH housing agency will then reach out to the household and provider to coordinate an intake appointment.
3. After the intake appointment, the PSH program staff will verify eligibility. If eligible, they will enroll the client into their PSH program and begin providing housing assistance.

### ***Permanent Housing (PH) With and Without Services Coordinated Access Referral Process***

The following programs are considered Permanent Housing with services; Vista Nueva, Mutual Housing on the Boulevard, Central Sacramento Studios, Villa Jardin/Coral Gables and Sunrise Pointe.

#### Eligibility Requirements:

1. Experiencing one of the following criteria:
  - At risk of experiencing homelessness
  - Experiencing homelessness
  - Fleeing from domestic violence, sexual violence, dating violence, and/ or human trafficking
  - Other as defined by:
    - a. currently housed but at risk of repeat homelessness
    - b. income below 30% Ami and severely cost burdened
    - c. meet the definition of homeless but have income between 30-50% AMI
    - d. Veterans

*Note that category four can be any one of these four types of individuals/household*

#### PH Required Documentation:

1. Completed Homeless Certification or At-Risk of Homelessness Certification form
2. Completed Permanent Housing Assessment with the head of household in HMIS
3. Current ID
4. Social Security Card
5. Birth Certificate and Social Security Card for any minor children

#### Coordinated Access PH Referral Steps:

1. Sacramento Steps Forward (SSF) CAS Housing Referral team reviews and prioritizes the list of households with a completed Permanent Housing Assessment based on the following:
  - a. Prioritization score
  - b. Geographic location
  - c. Length of time homeless



2. If a household is prioritized, the CAS referral specialist will submit a referral to Sacramento Housing and Redevelopment Agency (SHRA).
3. SSF will send a notification email to the provider and SHRA that the household has been referred to the permanent housing program.

The following programs are considered Permanent Housing without services; Foster Youth to Independence (FYI) SHRA Voucher program, Emergency Housing Voucher SHRA Voucher Program (EHV), Landlord Engagement Assistance Program (LEAP) and have different program eligibility requirements.

#### Foster Youth to Independence SHRA Voucher Program Eligibility

- Enrolled in foster care system before the age of 16
- Between the age 18-24
- At Risk OR experiencing homelessness
- Below 50% AMI

#### Emergency Housing Voucher SHRA Voucher Program Eligibility

- Homeless;
- At Risk of Homelessness;
- Fleeing or attempting to flee domestic violence, dating violence, sexual assault, stalking or human trafficking;
- Recently homeless and for whom providing rental assistance will prevent the family's homelessness or having a high risk of housing instability.

#### Landlord Engagement Assistance Program Eligibility

- Verifiable income and/or pathway to sustainable income
- Housing voucher in hand and voucher expiration date
- Literally homeless or at risk of homelessness
- Currently linked to supportive services

### ***Housing Case Conferencing***

The goal of housing case conferencing (CC) is to track prioritized households' journeys into housing, discuss potential housing program referrals, allow time for the provider community to brainstorm housing solutions and share resources to address and resolve household barriers.

Housing case conference meetings are facilitated by the Sacramento Steps Forward Case Conferencing Specialist. This is a space for providers to discuss household status and potential

housing opportunities, receive updates, announcements, share resources and collaborate on shared households experiencing homelessness.

SSF facilitates and/or supports the following population-specific CC meetings via Zoom.

1. Family CC bi-weekly on Tuesdays from 9:00am-10:30am
2. Chronic CC bi-weekly on Wednesdays from 9:00am-10:30am
3. Behavioral Health Services CC bi-weekly on Thursdays from 9:00am-10:30am
4. RRH CC bi-weekly on Fridays from 9:00am-10:00am
5. Veteran CC bi-weekly (starting in November 2023)
6. TAY CC bi-weekly on Thursdays from 1:00pm- 2:30pm facilitated by Waking The Village

### **Case Conferencing Tool**

The case conferencing tool notes are used to track clients current housing status and progress towards permanent housing. The SSF team reviews clients notes prior to making a referral to a housing program with current available units. In the CC tool, providers must keep client information up to date to assist SSF with understanding how to prioritize clients based on their housing needs and preferences.

## **SURVIVOR COORDINATED ACCESS SYSTEM (S-CAS)**

**Currently at this time, only authorized Victim Service Providers (VSPs) are able to add participants to the Survivor Coordinated Access System (S-CAS).** S-CAS is a confidential system for HUD's definition of Category 4 Homelessness: Fleeing or Attempting to Flee Domestic Violence (DV)(See full definition below). S-CAS is aimed to be inclusive of VSPs and those with training and knowledge for how to best support survivors in our community.

### **HUD's Definition of Category 4 Homelessness: Fleeing/Attempting to Flee Domestic Violence (DV):**

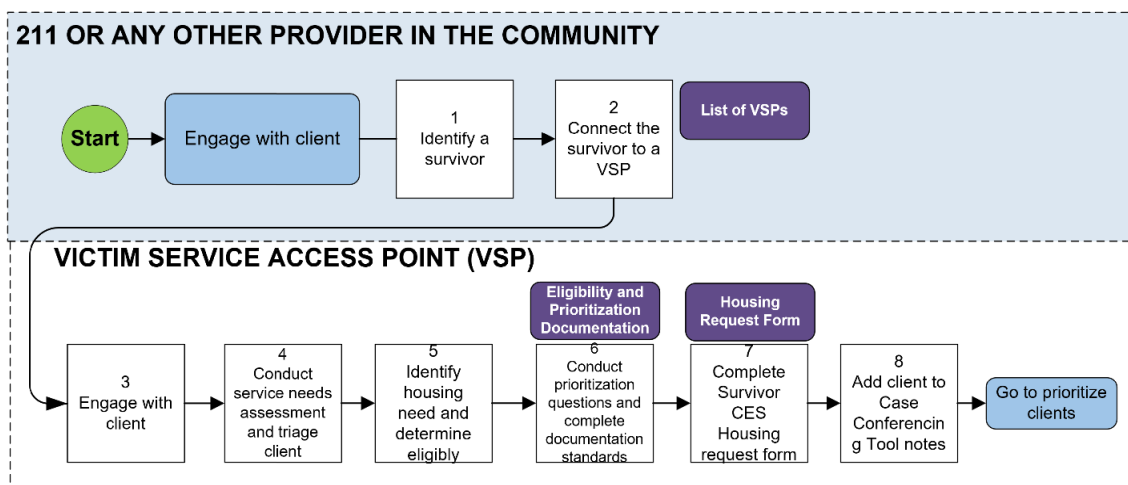
In order to be **eligible** for SSF's S-CAS, participants must meet all three of the following:

1. Is fleeing, or is attempting to flee, domestic violence, human trafficking, dating violence, sexual assault, stalking, or other dangerous or life-threatening conditions that relate to violence against the individual or a family member, including a child, that has either taken place within the individual's or family's primary nighttime residence or has made the individual or family afraid to return to their primary nighttime residence\*; **AND**
2. Has no other residence; **AND**
3. Lacks the resources or support networks to obtain other permanent housing.

\*HUD uses "domestic violence" to consolidate and make it easy to follow. However, when HUD uses "domestic violence," it means all individuals and families who meet HUD's Category 4 of homelessness mentioned above.

**For those who are not a current VSP Access Point, you will need to refer your client to one of the VSP Access Points below in order for them to add participants to the S-CAS Priority List.**

Agency	Service Type	Crisis Line/Contact	Populations Served/Services
<a href="#">My Sister's House</a>	RRH Program	(916) 428-3271 24-Hr Multilingual Helpline	Domestic Violence, Human Trafficking, Sexual Assault
<a href="#">WEAVE</a>	<b>PSAP (takes 211 calls)</b> PSH Program	(916) 920-2952 Support/Information Line	Domestic Violence, Human Trafficking, Sexual Assault
<a href="#">Sacramento Regional Family Justice Center</a>	PSAP (does not take 211 calls)	(916) 875-4673	Domestic Violence, Human Trafficking, Sexual Assault
<a href="#">Community Against Sexual Harm (CASH)</a>	Access Point	(916) 856-2900	Sex Trafficking
<a href="#">Opening Doors Inc.</a>	RRH Program	(916) 492-2591 ext. 202	Human Trafficking, Refugees
<a href="#">International Rescue Committee (IRC)</a>	Access Point	(916) 482-0120	Human Trafficking, Refugees
<a href="#">Shelter Inc.</a>	RRH Program	(925) 335-0698	Domestic Violence
<a href="#">Lao Family Community Development (LFCD)</a>	RRH Program PSAP (does not take 211 calls)	(916) 393-7501	Domestic Violence



**VSP Access Point Referral Process to S-CAS**

- I. Assess for housing need

- A. If participant is in need of immediate crisis resources and housing options, VSPs will engage in crisis resolution and triage client to various resources, both within CAS and outside of CAS
- II. Determine if the household meets eligibility criteria for CAS
  - A. RRH Eligibility:
    - 1. Meets Category 4 Homelessness: Fleeing or attempting to flee DV, etc. **AND** has no other place to live **AND** does not have the financial resources and support networks to obtain other permanent housing
  - B. PH Eligibility:
    - 1. RRH Eligibility **AND** has Social Security Card **AND** U.S. Identification Document (ID)
  - C. PSH Eligibility:
    - 1. Same criteria as PH **AND** has been chronically homeless (by [HUD's definition](#)) **AND** has a [verified documented long-term disability](#)
    - 2. Most PH/PSH programs require AMI to be under 30%
- III. If eligible, [collect documentation](#) and information needed to add survivor to S-CAS Priority List:
  - A. Collect client information on [Client Intake Form](#) (your agency may have a similar form it uses to intake a client into your program, if so, feel free to use your own to collect similar data)
  - B. Sign S-CAS [Release of Information](#)
    - 1. Ensure client fully understands the information that may be shared with other organizations, including de-identifiable data that is entered to the priority list, and obtain client's consent on what you may or may not share
  - C. Conduct the VI-SPDAT ([family](#) or [individual](#))
  - D. Answer [Eligibility, Prioritization, and Housing Preferences](#)
    - 1. Part 1: Determine Eligibility - In Step 1, all 3 questions answers need to say Yes to be eligible for S-CAS
  - E. Collect client-signed document [Self-Certification of Homelessness Category 4: Fleeing or Attempting to Flee Domestic Violence](#) (Translated Forms available [Here](#))
    - 1. Client needs to initial all three lines and sign the form
  - F. Collect provider-signed document [Homeless Certification](#) (expires after 90 days)
    - 1. Check 4th box: 'Individual is fleeing or attempting...'
  - G. Use information collected to submit a [Housing Request Form](#)
    - 1. The information submitted through the Housing Request Form will then populate the client onto the S-CAS Priority List, in which SSF staff will prioritize based upon Total Score (VI-SPDAT + Survivor Prioritization Questions) and Total Months Homeless to prioritize households for appropriate housing options.
  - H. Keep documents in confidential file until referral is made
- IV. Add client de-identifiable information to [Survivor CAS Case Conferencing Tool - Notes](#)

### **S-CAS RRH Referral Steps:**

1. VSPs will then attend bi-weekly S-CAS Case Conferencing and provide updates, via the S-CAS Case Conferencing Tool - Notes, to inform S-CAS staff of participants status until a unit becomes available
2. VSP RRH Program providers will email S-CAS Referral Specialist, or inform S-CAS staff of current unit availability during Case Conferencing

3. Once a open unit is identified, S-CAS Referral Specialist will identify highest prioritized and review Case Conferencing Tool Notes to identify eligible participants for RRH programs
4. S-CAS Referral Specialist will then send an Interest Email or phone call to the referring caseworker to determine eligibility and appropriateness for RRH program.
  - a. Referring caseworker will check with client on their understanding of what the program entails and verify the appropriateness for the program
5. Once a client is confirmed eligible and appropriate for the RRH program, S-CAS Referral Specialist will send Official Referral Email to the referring caseworker and the RRH Program.
  - a. Referrals are made on Mondays to allow RRH programs 5 full business days to schedule intake with the client
6. After the referral email is sent, the referring caseworker will provide the RRH program with the documentation collected to add the client to the priority list
7. The referring caseworker and RRH program will then work together to schedule an intake appointment with the client and conduct a warm hand-off into the RRH program
8. Participants will remain on the S-CAS Priority List until:
  - a. They are housed in the RRH/PH/PSH program; or
  - b. They obtain housing through other sources; or
  - c. They are no longer in contact; or
  - d. They ask caseworkers to be removed from the list.

### **S-CAS Permanent Supportive Housing (PSH) Requirements**

For those on the S-CAS Priority List that would like to be eligible for Permanent Supportive Housing (PSH) options, need to meet the following eligibility requirements and documentation standards.

#### **Eligibility Requirements:**

1. Meets HUD's definition of Category 4 Homelessness (definition above)
2. Meets HUD's definition of Chronically Homeless
3. Under 30% AMI
4. WEAVE PSH Program currently only accepts families of 2-5 persons

#### **PSH Documentation Requirements:**

1. VI-SPDAT V2
2. [Homeless Certification](#) (expires after 90 days)
3. [Certification of Homelessness Category 4: Fleeing or Attempting to Flee Domestic Violence](#)
4. [Chronic Homelessness Certification](#)
5. [Disability Certification](#)
6. 12 Months of [Verified Homelessness](#)
  - a. There needs to be clear documentation that the client experienced homelessness continuously for at least the last 12 months or at least 4 occasions in the last 3 years, where the combined occasions total at least 12 months.
  - b. This can be done through the following:
    - i. [Homelessness History Mapping Tool](#)

- ii. [Third Party Homelessness History Verification](#)
  - iii. [Third Party Letters](#)
  - iv. [Self-Certification of Homelessness](#) (can verify up to 3 months)
  - v. HMIS Printout
7. Valid Identification Document (ID)
  8. Social Security Card
  9. If they have dependents/ minors:
    - a. Birth Certificates and Social Security Cards (for all dependents)

#### **Priority to be referred to PSH is based on the PSH Priority List**

1. Once a client is added to the S-CAS Priority List, VSPs can send PSH Documents via encrypted email to S-CAS Referral Specialist to review
2. S-CAS Referral Specialist will review PSH Documents to ensure documents are fully completed and ready to go. S-CAS Referral Specialist and Caseworkers can use the [PSH Doc Ready Tab in the Survivor CAS Case Conferencing Tool - Notes](#) to communicate document readiness for participants.
3. Once S-CAS Referral Specialist confirms that participant is PSH Document Ready, they will then update the participants Status on S-CAS Priority List to “PSH Doc Ready”
4. Once a PSH opportunity arises, those highest on the priority list that are PSH Doc Ready are prioritized for those openings first.

#### **S-CAS PSH Referral Steps**

1. For those highest on the priority list and “PSH Doc Ready,” when a PSH unit becomes available, S-CAS Referral Specialist will review PSH Docs again to ensure documents are up to date and ready for referral
2. S-CAS Referral Specialist will then send an inquiry email or phone call to the referring caseworker to confirm interest and eligibility (and update any documents if needed)
  - a. Caseworker will confirm with client interest in the program and ensure client knows what the program entails
3. Staff will ensure that necessary assessments are completed in HMIS to make the referral
  - a. For VSPs with access to HMIS: VSP will create an anonymous profile for the participant and upload necessary documents/assessments (ROI, VI-SPDAT, etc.)
  - b. For VSPs without access to HMIS: S-CAS staff will create [Google Form Assessments](#) with the information needed for S-CAS staff to create an HMIS profile and upload an Assessment for the VSP without access
4. Once eligibility, interest, and necessary documents are confirmed, S-CAS Referral Specialist will make a referral to appropriate programs in HMIS and send an Official Referral email to the referring caseworker and the housing program(s)
5. Referring caseworker and housing agency will then work together to ensure participants applications are completed for both SHRA and property. Roles should be established after referral on who will be handling what aspects of the application with clients.

## ***S-CAS Case Conferencing***

- 1. What is S-CAS Case Conferencing?**
  - a. S-CAS case conferencing is a bi-weekly meeting for client care discussion held between Sacramento Steps Forward representatives and victim service providers (VSP) across Sacramento County.
- 2. What is the purpose of S-CAS Case Conferencing?**
  - a. Collaborate and provide community wide support on clients' housing plans and other available resources
  - b. Create action plans and goals to house clients more effectively and quickly
  - c. Stay updated on the housing openings and/or opportunities, trainings, and other resources
  - d. Identify appropriate housing opportunities (ex: are they more appropriate for RRH, PH, or PSH)
- 3. When is S-CAS Case Conferencing held?**
  - a. Case Conferencing is held every other Tuesday from 3-4:30pm via Zoom
  - b. Please contact S-CAS staff for the zoom meeting link
- 4. What do I need to do to prepare for Case Conferencing?**
  - a. The week prior to Case Conferencing, S-CAS staff will send a reminder email about Case Conferencing to have caseworkers review their clients in the [Survivor CES Case Conferencing Tool Notes](#) and provide any necessary updates for each client on the agencies tab
  - b. The Monday prior to Case Conferencing, S-CAS staff will review the priority list and Case Conferencing Tool - Notes to identify clients to be discussed during case conferencing.
  - c. Come to Case Conferencing prepared to discuss your cases (if you only have one representative showing from your agency, make sure the representative is up to date on all the cases from your agency)
  - d. S-CAS will also provide an Agenda for each Case Conferencing meeting, where information about any changes or openings in programs can be collected.
  - e. The following agenda items are discussed at the beginning of each Case Conferencing meeting:
    - i. Introductions: Name, agency, position, and ice breaker
    - ii. VSP Program Updates: Including any new staff or changes in staff, new or changes in programs, client success stories, and any current openings in any of the RRH/PSH programs
    - iii. SSF Program Updates: Includes any new housing opportunities, changes to program, updates, and information about upcoming training and/or office hour agendas
    - iv. Generate Client Housing Plans: this is where we review clients on the Priority List, by agency, and identify any action items, resources, or collect information helpful for SSF to know
- 5. What is the [Survivor CES Case Conferencing Tool Notes](#)?**
  - a. Reminder: No identifiable information should be written anywhere in the Case Conferencing Tool - Notes

- b. The Survivor CES Case Conferencing Tool Notes is used for tracking the client's current situation and readiness for housing referrals. The SSF team reviews these notes prior to making a referral to a program with current units available
- c. In the Case Conferencing Tool Notes, you'll want to ensure that the information is correct for your client, and you are tracking things, such as their current housing status, their income, size of their household, their preferred program (RRH/PH/PSH), and any other information you may find helpful for us to know as we prioritize clients for housing (pets, barriers, etc.)
- d. When entering a new note for a client, do not erase the previous note. Instead in the notes section, press Alt. + Enter, which will allow you to add a new line in the notes section. Always include the date you are entering in notes.
- e. Anytime you enter a client into the Google Housing Request Form, you should be entering the clients under your tab in the Case Conferencing Tool
- f. Anytime the client has been referred and housed, please indicate in the Case Conferencing Tool
- g. We will be updating the Case Conferencing Tool over time to make it easy to track clients, but our hope is to have this be the primary place where we input updates for clients, which allow us to use Case Conferencing more effectively in the future

### [VIOLENCE AGAINST WOMEN ACT \(VAWA\)](#)

The original Violence Against Women Act (VAWA), passed in 1994, was the first federal legislation acknowledging domestic violence and sexual assault as crimes and provided federal resources to encourage community-coordinated responses to combating violence against women. VAWA, in part, provides housing protections for all participants (not only women) applying for or living in units subsidized by the federal government and who have experienced domestic violence, dating violence, sexual assault, or stalking, to help keep them safe and reduce their likelihood of experiencing homelessness.

All efforts will be made to protect the rights, privacy and safety of survivors of domestic violence, dating violence, sexual assault or stalking. Programs are prohibited to deny, terminate, or evict a person as "a direct result of the fact that the applicant or tenant is or has been a victim of domestic violence, dating violence, sexual assault, or stalking, if the applicant or tenant otherwise qualifies for admission, assistance, participation, or occupancy."

#### I. Required Forms and Notices

- A. The program must provide each applicant and participant with a "[Notice of Occupancy Rights under the Violence Against Women](#)" and a [Certification of Domestic Violence](#) form in the following situations:
  - 1. When the applicant is denied housing assistance;
  - 2. When the participant is provided housing assistance or admitted into the housing program;



3. With any notification of eviction or notice of termination or assistance; and
  4. During the annual recertification or lease renewal process, whichever is applicable, or if there is not recertification or lease renewal, through other means
- B. The [Notice of Occupancy Rights](#) must include:
1. VAWA protections, including survivor rights of confidentiality and the prohibited bases for denial or termination of assistance or eviction; and
  2. Limitations of VAWA protections, including a housing provider's compliance with court orders and right to evict or terminate assistance to tenants for any violation not premised on an act of domestic violence, dating violence, sexual assault, or stalking.
- C. The [Certification Form](#) will provide space for the applicant to state:
1. That they are a survivor of domestic violence, dating violence, sexual assault or stalking;
  2. That the incident that is the ground for protection meets the applicable definition for such incident under 24 CFR 5.2003; and
  3. The name of the individual who committed the violent act, if the name is known and safe to provide.
- D. For tenant-based rental assistance (TBRA), the program must ensure that the landlord or manager of the housing provides the "Notice of Occupancy Rights under the Violence Against Women" and a *Certification of Domestic Violence* form to the program participant with any notification of eviction.

## II. Contracts and Leases

- A. For tenant-based rental assistance (TBRA), a program must require the following:
1. The lease between the landlord and participant includes a provision for all requirements that apply to tenants under 24 CFR part 5, including the prohibited bases for eviction and restrictions on construing lease terms under 24 CFR 5.2005(b) and (c);
  2. A statement that the "owner/landlord will comply with 24 CFR part 5, subpart L";
- B. Programs that are not TBRA, must include the following provisions in any lease or occupancy agreement between the program and the participant:
1. The program allows the participant to terminate the lease, sublease or occupancy agreement without penalty if the program determines that the participant qualifies for an emergency transfer under the requirements of the emergency transfer plan
  2. The program must follow the terms of the VAWA Final Rule (24 CFR part 5, subpart L). The term may be narrowed to specify this requirement is for only as long as CoC assistance is being contributed to the unit.

**Confidentiality:** Any information submitted to the program or landlord, including the fact that an individual is a victim of domestic violence, dating violence, sexual assault, or stalking (confidential information), shall be maintained in strict confidence.

The program shall not enter confidential information into any shared database or disclose to another entity, except to the extent that the disclosure is: (i) Requested or consented to in writing by the individual in a time-limited release (ii) Required for use in an eviction proceeding or hearing regarding termination of assistance from the covered program; or (iii) Otherwise required by applicable law.

Further information and forms may be obtained on the HUD VAWA site: [Violence Against Women Act \(VAWA\) | HUD.gov / U.S. Department of Housing and Urban Development \(HUD\)](#)

**FAQ's on the VAWA can be located in Appendix I**

**Notice of Occupancy Rights under the Violence Against Women Act can be located in Appendix J**

**The Certification of DV, SA, or stalking can be located in Appendix K**

## **TRANSFER POLICIES - PERMANENT HOUSING**

### ***VAWA Emergency Transfer Policy***

Below is SSF's VAWA Emergency Transfer Policy for CoC participants. However, each housing provider is also required to have a [VAWA Emergency Transfer Plan](#) in place for participants in your housing program to know the steps to request a VAWA Emergency Transfer.

**Qualifications:** A participant is eligible for an emergency transfer if:

- a) The client expressly requests the transfer
- b) The client is a survivor of domestic violence, dating violence, sexual assault or stalking; ***and***
- c) Either:
  - i. The client reasonably believes there is a threat of imminent harm from further violence if the client remains in the same dwelling unit;
  - ii. or if the client is a survivor of sexual assault, the sexual assault occurred on the premises 90-calendar-day period preceding the date of the request for transfer.

**Emergency Transfer Process:** Participants can submit a [Emergency Transfer Request](#) directly to program staff, certifying that they meet the emergency transfer qualification requirements. The program may – but is not required to – request additional documentation of the event for which the participant is requesting an emergency transfer. No other documentation is required.

The program must notify the Coordinated Access System (CAS) team that a request is being made and whether the request is an internal transfer (where the participant is relocated to a new unit within the same program, without having to undergo a new application process), external transfer or both. If the participant resides in a tenant-based rental assistance program, the program will take reasonable steps to support the participant in securing a new, safe unit as soon as possible and a transfer may not be necessary.

### ***Internal Transfer***

Where the participant requests an internal emergency transfer, the program should take steps to immediately transfer the participant to a safe unit, if available. The transfer should receive at least the same priority as other transfer requests within the program.

If a safe unit is not available immediately, program staff will notify the participant that a unit is not immediately available and explain the available options:

- a) Wait for a safe unit to become available for an internal transfer,
- b) Request an external emergency transfer, and/or
- c) Pursue both an internal and external transfer at the same time in order to transfer to the next available safe unit in the CoC

### ***External Transfer***

Where the participant requests an external emergency transfer, top priority will be given over any other applicants for CoC-funded housing assistance, provided the household meets all eligibility required by HUD and the program. After the program notifies the CAS team of the emergency transfer request, CAS staff will facilitate a referral of the participant to the next available appropriate unit. The household retains their original homeless or chronically homeless status for purposes of the transfer.

***Confidentiality:*** Programs will ensure strict confidentiality measures are in place to prevent disclosure of the location of the client's new unit to a person who committed or threatened to commit an act of domestic violence, dating violence, sexual assault, or stalking against the client.

The housing provider must keep a record of all emergency transfers requested, and the outcomes of such requests, and retain these records for a period of 5 years following the grant year of the program of which the household was a participant. Requests and outcomes of such requests will be reported to HUD annually.

***Family Separation:*** Where a family receiving TBRA separates as part of the emergency transfer, the family member(s) receiving the emergency transfer will retain the TBRA assistance when possible. The program will work with CES staff and the household to support an effective transfer in situations where the program is not a good fit for the family member(s) receiving the emergency transfer.

The [VAWA Emergency Transfer Request](#) can be located in Appendix L

HUD's Model [VAWA Emergency Transfer Plan](#) can be located in Appendix M

### ***RRH to PSH Transfer Policy***

The RRH-PSH policy acknowledges that there are some RRH participants that even after stabilization services will require longer-term or permanent support to maintain their housing. The Sacramento Continuum of Care supports the transfer of program participants who may need specific services or accommodations to support long-term housing stability.

Requests may be used in rare instances when all other options have been exhausted to prevent returns to homelessness. In the case of transfer requests submitted to prevent program termination, documents that show the reason for termination and due diligence of explored options, attempts at resolution and reasons for lack of resolution may be requested.

Vacancies to programs are filled by clients at the top of the priority list when an opening is reported. This excludes transfer requests due to fleeing/experiencing domestic violence, dating violence, sexual assault, stalking and/or human trafficking, which are prioritized over all other requests and follow the specific processes outlined in Sacramento's Continuum of Care Violence Against Women Act (VAWA) Emergency Transfer Plan (see Appendix J). This policy also does not cover the process of transferring clients when a HUD-CoC project is closing. When an entire project is closing, SSF will work with the applicable agency and HUD to develop a plan of action to ensure that, to the extent possible, no participants return to homelessness (see the CoC's Defunded Project Policy).

### **Eligibility**

Transfer requests from RRH to PSH are appropriate when the following criteria have been met:

- The housing provider has diligently met and worked with the client to search for/obtain housing, provided case management services, and done everything possible to stabilize the household in housing while in the RRH program.
- Despite best efforts, the housing provider and household identify needs impacting housing stability that will not be met within 24 months of RRH services and/or the household will exit to homelessness once RRH services end.
- At least one of the two criteria below must be met:
  - Client was housed through RRH, has reached at least 15 months of RRH services, and will need additional assistance with housing and services to remain in housing.
  - Housing provider has been working with households to find housing for at least 5 months and identified other barriers supporting the need for more intensive PSH services.

- The household must have a disability and have met the length of time homeless requirement (last 12 consecutive months homeless or 4 instances within the last 3 years, totaling 12 months) prior to entering the RRH program, to qualify for PSH.
- The current housing provider has tried to find another provider/program of the appropriate typology that is willing to accept the household and all coordination. However, if another appropriate provider/program cannot be found, the CAS Housing team will add the approved household to a transfer list and wait for the next appropriate vacancy.

### **Transfer Procedures**

A transfer request form is required for all transfer requests and will be reviewed by the CAS Housing team. The transfer form should be sent to the CAS inbox ([referrals@sacstepsforward.org](mailto:referrals@sacstepsforward.org)).

#### **All transfer requests must include:**

- Narrative on the efforts made with the household to help them stabilize in RRH housing.
- Narrative including the reason for transfer and the need for PSH services.
- Release of Information if one is not present in HMIS.

#### **Upon denial:**

A written response of the determination will be provided to the requesting program, including rationale. For example, there are cases when the type of housing intervention may not meet the needs of the household post-program entry, such as a transfer from single RRH to family PSH.

If the transfer is denied, the housing program will continue to assist the client with their housing situation. Clients can remain on the transfer roster, in order of priority to be considered when housing becomes available if the transfer denial reason was because current existing resources were not able to meet the request. CAS Housing staff will regularly monitor the list for vacancies and appropriate matches. If the client has been on the list for more than 6 months, a new request form will need to be submitted by the housing program. Clients will be removed if they have been on the list for more than 6 months without a new request, no longer need a transfer, or turn down more than three housing options. If the client is removed due to not accepting three housing options, the program must wait 3 months before submitting a new request. Requests for exceptions can be submitted on the Transfer Request Form.

#### **Upon approval:**

1. Current program will provide all eligibility paperwork to the program accepting the transfer.
2. Current program will request a new referral from CAS housing staff ([referrals@sacstepsforward.org](mailto:referrals@sacstepsforward.org)) upon completion of the transfer.
3. Receiving provider is responsible for confirming eligibility and enrolling the client.

Please see Appendix G for Transfer Request Form.

## ***PSH to PSH Transfer Policy***

The Sacramento Continuum of Care supports the request and transfer of program participants who may need specific services or accommodations to support long-term housing stability. Transfer requests may be used in rare instances when all other options have been exhausted to prevent returns to homelessness and are applicable to PSH-to-PSH transfers only. In the case of transfer requests submitted to prevent program termination, documents that show the reason for termination and due diligence of explored options, attempts at resolution and reasons for lack of resolution may be requested.

Transfer policy and procedures are centered in housing first principles and participant-choice practices. Transfer requests due to fleeing/experiencing domestic violence, dating violence, sexual assault, stalking and/or human trafficking are prioritized over all other requests and follow the specific processes outlined in Sacramento's Continuum of Care Violence Against Women Act (VAWA) Emergency Transfer Plan (see Appendix I and Appendix J). This policy also does not cover the process of transferring clients when a HUD-CoC project is closing. When an entire project is closing, SSF will work with the applicable agency and HUD to develop a plan of action to ensure that, to the extent possible, no participants return to homelessness (see the CoC's Defunded Project Policy).

All other transfers must be requested and approved through the procedures outlined below.

### **Procedures**

#### **Internal Transfer**

HUD-CoC housing providers can request an internal transfer between projects within the same agency.

Housing providers must complete a Transfer Request Form, which includes the reason for transfer, and submit it to the CAS Manager. Case conferencing or additional information including the acknowledgement of client choice about the transfer may be needed prior to approving the transfer. After review, the CAS Manager will send a notification email to the provider of the approval or denial. Standard HMIS practices will still apply.

#### **External Transfer**

HUD-CoC housing providers can request a participant transfer to a program with a different provider, if the participant meets eligibility. Providers requesting an external transfer must complete a Transfer Request Form (Appendix G) and submit it to the CAS Manager. If possible, the provider requesting the transfer will provide written advocacy from a third-party service provider, and documentation from the participant acknowledging the transfer is their choice.

All requests will be reviewed based on meeting the outlined transfer criteria in *Table 1 - Transfer Reasoning*, demonstrated need, and available resources that match the participant's needs to support a successful transfer. The request will be approved on the condition that appropriate housing is available, and that the transfer is warranted. Initial decisions will be based on the information received in the transfer request form.

A written response of the determination will be provided to the requesting program, including rationale for denials in *Table 2- Transfer Denial Reasoning*. If the transfer is denied, the housing program will continue to assist the client with their housing situation. Clients can remain on the transfer roster, in order of priority to be considered when housing becomes available if the transfer denial reason was because current existing resources were not able to meet the request. CAS staff will regularly monitor the list for vacancies and appropriate matches. If the client has been on the list for more than 6 months, a new request form will need to be submitted by the housing program. Clients will be removed if they have been on the list for more than 6 months without a new request, no longer need a transfer, or turn down more than three housing options. If the client is removed due to not accepting three housing options, the program must wait 3 months before submitting a new request. Requests for exceptions can be submitted on the Transfer Request Form.

If necessary, requests will be reviewed in case conferencing with the provider requesting the transfer and the receiving provider, prior to facilitation of the transfer. The group may also meet with the program participant to better understand their housing situation and to confirm their choice.

### Facilitating a Transfer

Approved transfer requests will take priority over new referrals to all eligible and appropriate intervention types which can meet the identified needs of the transferring participant.

Agencies submitting the transfer request must share eligibility documentation with the receiving provider. The receiving provider must verify participant eligibility criteria before enrolling the client into their project. Both agencies are required to maintain documentation of the process and approval, including:

- Copies of all documentation used to determine eligibility into the original housing program (i.e. Homelessness Certification, Chronic Homelessness Certification, etc.).
- Transfer request as submitted by original housing provider.
- Notification email and HMIS records

Providers submitting the transfer request must continue to provide services and support to the participant to be transferred, including supporting attaining housing or maintaining housing, and to assist with the logistics of the transfer (transportation to appointments, etc.).

**Table 1. Transfer Reasoning**

<b>Reason</b>	<b>Definition</b>	<b>Insufficient Reason</b>
Conflict and Safety Concerns Outside of VAWA	The space has become unsafe for the household that does not qualify for emergency transfer criteria under VAWA Housing Protection. As examples, someone has taken over the unit and the household can no longer live there, violence taking place in the apartment building, or tenants in the building harassing the participant.	Crime in the neighborhood that is not specifically targeting the household or building.
Reasonable Accommodations and/or Modification	The household is unable to live in their home due to requiring accommodations that cannot be made. Examples can include requiring an elevator or larger door frame for a wheelchair in a building without these features, larger units required due to medical equipment or needing an additional room to accommodate a live-in aid.	Feasible accessibility accommodations needed in the current project that can be put into place such as grab bars or a lift.
Change in Household Composition	The family size changes so that the household requires a smaller or larger unit. This can include the unit size impacting the household retaining or obtaining custody of children or households that included children and now only include the parent(s)/adults. This can include the need for a young adult to move from a TAY program to an adult program to accommodate service needs.	Desire for a larger unit that is not required based on family size.
Client Choice	The household would be able to reach employment and educational goals, or not have their health jeopardized living in a different location that cannot be obtained in the current program. An example can include needing to be located closer to a medically necessary service such as dialysis. Or the household has identified that they require a different housing provider to successfully maintain housing.	Geographic preference that is unrelated to employment/education/ health, preference for a larger unit, or preference for a different provider when challenges with the current provider can be resolved. Client is challenging to engage in services or has ongoing conflicts with agency staff.



**Table 2. Transfer Denial Reasoning**

<b>Reason</b>	<b>Definition</b>
Insufficient Transfer Reasoning	The documentation submitted does not meet the threshold criteria demonstrating the need for a transfer to be approved.
No Community Capacity Currently	There are currently no projects within the CoC, which has capacity or is expected to have capacity within the near future which could meet the needs outlined in the transfer request.
Current existing resources are not able to meet the request needs*	There are currently no projects within the CoC which could meet the participant's identified needs.

*\*Clients can remain on the transfer roster for up to 6 months before a new request is needed.*

## **LIST MANAGEMENT**

### **Emergency Shelter Waitlist Management Policy & Procedures**

The Housing Crisis Line (2-1-1) operates from 7:30 a.m. – 11:00 p.m., Monday - Friday to connect people in need of housing support resources and emergency shelter. The shelter waitlist and referrals are managed by 211. A household must be unsheltered tonight, staying in a respite center, or living in a short-term hotel/motel paid for by a third party in order to be eligible for emergency shelter.

### **Emergency Shelter Shelter Waitlist**

211 receives an updated shelter waitlist 3 times a day, which captures all households with a completed shelter assessment. 211 also receives real time updates on shelter openings in HMIS, with the goal to fill bed openings by the end of the day.

### **Updating the Emergency Shelter Waitlist**

Households with shelter assessments completed within the last 90 days remain on the shelter waitlist. Households with shelter assessments older than 90 days or who have an active shelter enrollment households are removed from the waitlist.

### **Housing Priority List**

Households with a completed VISPDAT within the last 15 months and have “active” status (a logged service within 90 days) are further prioritized by chronicity, 65+, chronic conditions, and length of time homelessness. These clients are then set into subpopulations such as Chronic, Transitional Age Youth, Families, Behavioral Health Services, and Veterans.

### **Community Queue**

The Community Queue is a list of people, by name, who are actively experiencing literal homelessness or fleeing domestic violence. It is important to manage and keep the Community Queue updated so the CoC has a reliable understanding of how many people are in need of assistance, who they are, as well as what type of assistance may be necessary based on information provided within assessment phases.

The Priority Group includes households on the Community Queue who have the highest vulnerability and are prioritized for supportive housing resources. Housing placements are based mostly from this Priority Group.

Individuals can be exited from the Community Queue from 90 days to the last service. To re-enter the Community Queue, an individual would need to have an assessment completed and/or services must be logged in HMIS by a service provider at least one time within 90 days to maintain status in the Community Queue.

## **Grievances**

Whenever possible, a client's grievance should be handled at the programmatic level. When a program grievance is unable to be resolved, it should be escalated to the funder of the program. If a grievance is given to a CAS staff member, staff will attempt to redirect to the appropriate grievance level.

SSF is committed to providing a transparent process to addressing problems arising within the CAS system. A client issuing grievances should have their complaints addressed promptly, fairly and without fear of retaliation. SSF will make every effort to ensure the complaint is addressed at the appropriate level before intervening.

CAS entities (Shetlers, outreach, Access Points) should maintain an internal grievance process ensuring prompt and fair attention, guarding clients from retaliation. A client should be given a copy of the program's grievance procedure at intake and have the process explained to them.

Requests for SSF advocacy regarding The Grievance Form should be within 30 days of the internal decision. If a client is requesting a SSF review, SSF will follow the following procedure.

## **Procedure**

1. Client contacts CAS staff either verbally or in writing
2. CAS staff will work to identify where in the grievance process the client is currently
3. Upon identification of current steps, CAS staff will support the client in contacting the appropriate programmatic or funder level staff to complete the internal grievance process
4. If a client has already contacted appropriate staff and completed requisite steps, SSF will request any applicable documentation including the client's complaint and the entity's response.
5. CAS staff will offer clients a Grievance Form, offering and providing any reasonable accommodation in filling the form.
  - a. If Grievance Form is completed will be submitted to [cas@sacstepsforward.org](mailto:cas@sacstepsforward.org)
  - b. A written acknowledgement of receipt will be provided by email within 7 business days
6. CAS staff will determine whether the next steps including but not limited to:
  - a. further information regarding grievance should be gathered, including interviewing any involved staff members
  - b. Arranging a meeting with client, entity representative for a mutually agreeable resolution. The client should be involved and aware of every aspect of the process
7. CAS staff will provide clients with the resolution in writing.
8. If the client is not satisfied with the resolution, The Planning Director will provide a written statement
9. If the issue is not satisfactorily resolved after this, the client will be provided with external resources for additional resources.

## **APPENDICES**

### *Appendix A: Grievance Escalation Process*

#### **Policy**

A client's grievance should be handled at the programmatic level whenever possible. When a program grievance cannot be resolved at the program level, it should be escalated to the program's funder. If a request for grievance support is given to a CAS staff member, staff will attempt to redirect it to the appropriate grievance level.

CAS entities (shelters, outreach, Access Points) should maintain an internal grievance process, ensuring prompt and fair attention and guarding clients against retaliation. A client should be given a copy of the program's grievance procedure at intake and have the process explained to them.

SSF will request and file the program's internal grievance procedure during CAS program onboarding. The grievance procedure must include applicable forms, the point of contact, and escalation processes.

If a CAS-participating client notifies CAS staff (SSF, 2-1-1, CAN) about a grievance, requests a grievance review, or asks for additional assistance, the CAS staff will utilize the following procedure.

#### **Procedure**

1. The client contacts CAS staff either verbally or in writing
2. CAS staff will add the client's information to the [grievance tracker](#)
3. CAS staff will work to identify where in the grievance process the client is currently (filed, not-filed, resolved, etc.)
4. CAS will review the client's stated progress within the program's grievance procedure and guide the client on how to move forward, including providing the program's grievance form, the point of contact, and any applicable next steps as noted in the shelter's grievance policy and procedure
5. Upon review, if CAS staff determine a client has followed the program's grievance process but is requesting further support - CAS staff will alert the Access Coordinator
6. The Access Coordinator will contact the program and request any applicable documentation to be sent over within 72 hours, including the client's original complaint and the entity's response
  - a. If no response is received within 72 hours, CAS staff will escalate the grievance to the appropriate funder level.
    - i. For County programs, the Access Coordinator will email the project planner and outline the original complaint and the current unresolved issues. If necessary, the county will utilize an MDT meeting to seek to resolve the issue.
    - ii. For Sacramento City funded programs
    - iii. For Elk Grove City funded programs...
7. The Access Coordinator will review the original complaint and the entity's response. The Access Coordinator will organize and summarize the complaint, steps taken, and the requested action from the program's funder.
  - a. For County programs, the Access Coordinator will email the program's Project Planner and outline the original complaint and the current unresolved issues. If necessary, the county will utilize an MDT meeting to seek to resolve the issue.

- b. For Sacramento City funded programs...
  - c. For Elk Grove City funded programs...
- 8. Upon successful connection to the funder's grievance process the Access Coordinator will update the grievance tracker to reflect the steps taken to resolve and any noted outcomes
- 9. If a client completes the funder's grievance process but is still unsatisfied with the result - CAS will document the outcome and notes in the grievance tracker but no further action will be taken

## *Appendix B (211 Standardized Triage Questions)*

### 211 Triage Questions

Purpose: conducted by 211 staff to triage households to appropriate resources and determine if eligible for shelter, problem-solving access points, CAN or other resources

Project Start Date



ASK THE FOLLOWING TRIAGE QUESTIONS TO DETERMINE A HOUSEHOLD'S INITIAL HOMELESSNESS RISK LEVEL

Is the place where you have been staying safe for you?

Do you have a place to sleep tonight?

Do you need to or have to leave the place where you're currently staying?

Do you have another safe housing option where you could stay if needed?

When will you no longer have any safe place to stay – yours or someone else's – based on the housing options and resources available to you?

- Tonight (Literally Homeless)
- Within 14 Days (Imminent Risk Homeless)
- Within 30 days (At Risk)
- Within 31-60 Days (Unstably Housed)
- Unsure, Client doesn't know (Unstably Housed)
- Do Not Have to Leave (Stably Housed)

Do you have a housing voucher or subsidy and seeking support finding housing?

CONTINUE WITH A HOUSING PROBLEM-SOLVING CONVERSATION TO EXPLORE AVAILABLE OPTIONS FOR SAFE HOUSING

Text box to capture conversation

PRIOR LIVING SITUATION (WHERE THE CLIENT SLEPT LAST NIGHT.)

Type of Residence

Length of Stay in Prior Living Situation

Approximate Date Homelessness Started



Number of times on the streets, in ES, or SH in the past three years

Total number of months homeless on the streets, in ES, or Safe Haven in the past three years

DISABLING CONDITIONS AND BARRIERS

Disabling Condition

INCOME FOR INDIVIDUAL (MONTHLY)

Income from Any Source

Earned / Employment Income

Income from Any Source is set to "Yes", but no income source is selected. Please update the Income from Any Source field or select at least one income source AND enter a valid amount greater than \$0 for each income source selected, as appropriate.

NON-CASH BENEFITS (WIC, FOOD STAMPS, CHILD CARE, ETC.)

Receiving Non-Cash Benefits

Receiving Non-Cash Benefits is set to "Yes", but no non-cash benefit is selected. Please update the Receiving Non-Cash Benefits field or select at least one non-cash benefit, as appropriate.

HEALTH INSURANCE

Covered by Health Insurance

EMPLOYMENT STATUS

Is Client Employed

Employment Tenure

Hours Worked Last Week

EDUCATION STATUS

Is Client Currently Enrolled in School

If Yes, Is Client Enrolled in Vocational Training or Apprenticeship

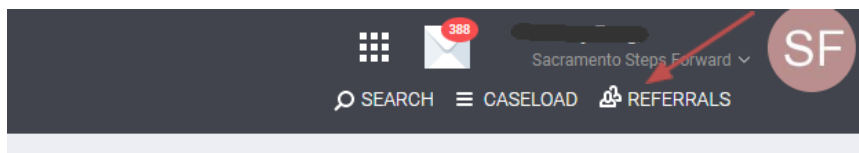
Highest Level of School Completed



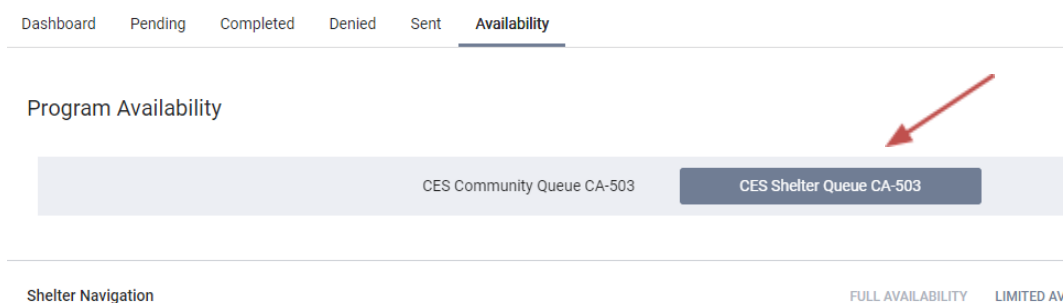
## Appendix C: HMIS Steps

**[Shelters only] When a shelter bed becomes available, input bed availability:**

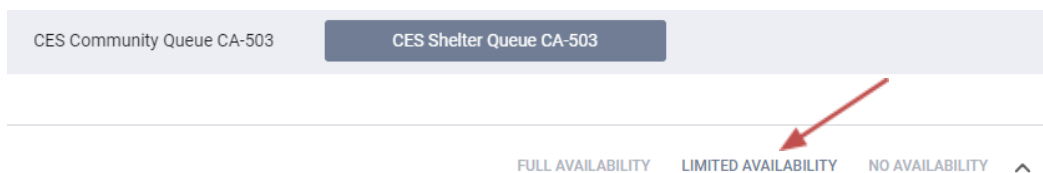
1. Log in under your shelter agency
2. Select the 'Referrals tab'



3. Select 'Availability'
4. Select the CES Shelter Queue



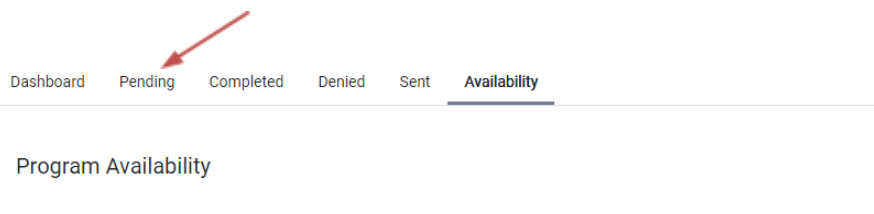
5. Select 'Limited Availability' under your shelter program



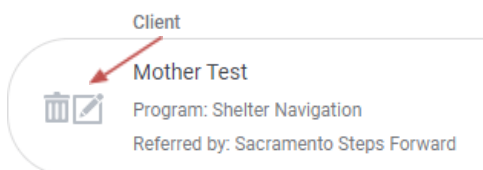
6. Click 'add single or multiple openings'
7. Complete the date field and other relevant sections then click 'Save Changes'
  - a. If there is a pet/kennel attached, please include it in the notes section
8. Complete Steps 1-6 for all bed vacancies

**[Shelters only] After 211 notifies shelter of a referral and scheduled intake appointment (also known as a bed reservation in HMIS), receive the referral and log the outcome:**

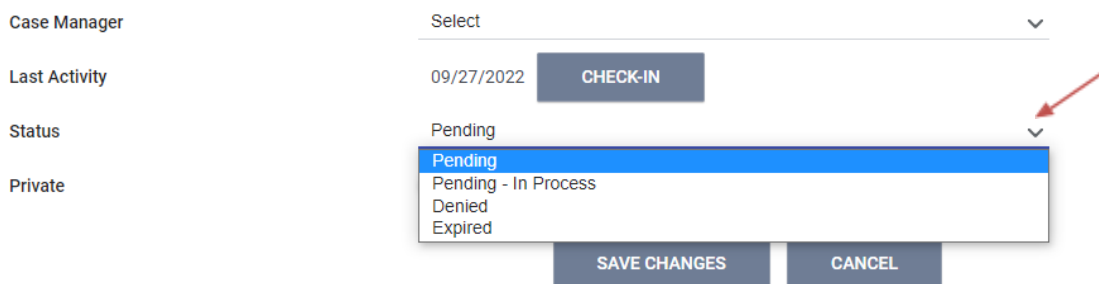
1. Under the 'Referrals' tab, select the 'Pending' to see all clients currently pending referrals for your agency



2. If your agency has multiple program referrals you can adjust the filter settings by clicking on the “Sort By” field to see referrals by program name or by “mode” and click on Shelter Survey V3
3. Hover over the client until the edit icon (box with a pencil) appears

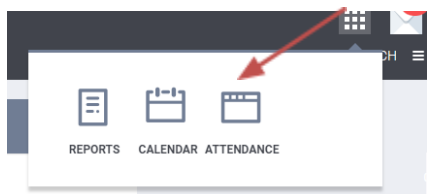


4. Click on the edit icon and scroll down to the status line – change the status from “pending” (default) to “pending – in process” – this confirms you have received the referral
5. Once the referral has been updated, click ‘Save Changes’



**[Shelter only] After a client arrives on-site (or does not show), record:**

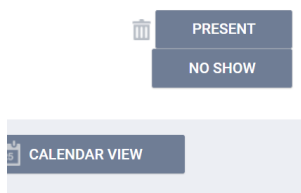
1. Click on the ‘Attendance’ screen



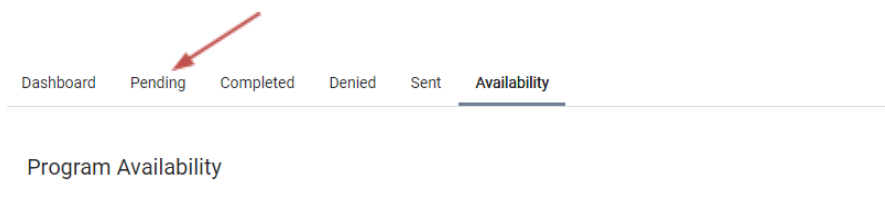
2. Click ‘Reservation’ next to the “\*Shelter intake Appointment: Emergency Shelter (ES)” service



3. Click the blue ‘Reserve’ button next to the client’s DoB
4. On the right side of the screen, select ‘Present’ or ‘No show’ (clicking on either field will instantly update the record)



5. For no-shows:
  - a. Update the referral status by navigating back to the home screen
  - b. Select the 'Referrals' tab and 'Pending'



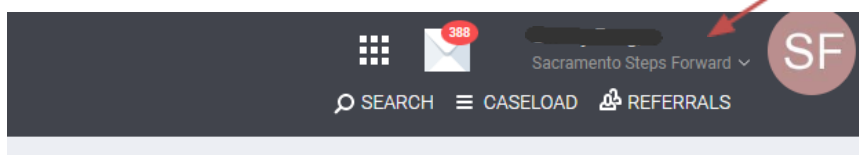
- c. Select the edit button next to the current client's name
  - d. Update the status to 'denied,' update denial type to 'client' and update reason under denied reason. They can be resent back to the community queue.

#### [Shelter only] Enrolling a client into the shelter program

1. Navigate to the client's 'Programs' screen
2. From this screen, scroll down to the 'Programs: Available' section and find the emergency shelter program
3. Click on the program name and scroll down, and include any group members (as appropriate – typically family or couples may do this) and then click 'Enroll'
4. Complete the HMIS enrollment

#### [211 only] Submitting a shelter referral

1. Switch the agency in HMIS to the shelter agency that will be receiving the referral

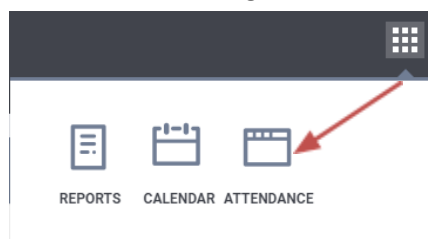


2. Send a referral in HMIS:
  - a. Under the client's record, navigate to the 'Assessment' tab
  - b. Select the most recently completed shelter survey V3 (verify the assessment is no older than 30 days) – and click on 'Eligibility'

- c. On this screen, refer client “directly to the CES Shelter Queue” (if message “Client pending on Community Queue - CES Shelter Queue” is showing, go to ALTERNATE REFERRAL PROCESS in the next section), otherwise continue
- d. Click ‘Send Referral’ - Providing notes is optional
- e. Under the ‘Reassign’ section, select the emergency shelter program in the program bar
- f. After selecting the program an “Opening” bar should appear
- g. Select the appropriate opening from the list (work from the oldest opening to newest)
- h. Click ‘Save Changes’;
- i. Once completed, the referral will automatically close out the bed vacancy

### [211 only] Scheduling a shelter intake appointment

3. Select Attendance on the navigation menu



- a. Select the ‘\*Shelter intake Appointment: Emergency Shelter (ES)’ service and click ‘Reservation’
- b. After selecting an appointment slot, a ‘Make Reservation’ screen will pop up on the right-hand side
  - i. Search for the client, by entering the client/HoH’s UID
  - ii. Click ‘Enter’ (or alternative search for the client using other identifying information)
  - iii. Click ‘Preview Reservation’
  - iv. Scroll down to ‘Table Info,’ and select ‘Confirm’ if details are correct

### [211 only] Submitting a shelter referral for clients currently in the Shelter Queue

1. If the client is already on the CES Shelter Queue go back to the HMIS home screen and navigate to the ‘Referrals’ tab
2. From here, click on the Community Queue tab and highlight the CES Shelter Queue
3. Scroll down and input the client’s UID in the search bar and click search
4. Scroll down and hover the pointer over the client until the edit icon (box with a pencil) appears to the left of the client’s name
5. Click on the edit button
6. On this screen, scroll down to the ‘Reassign’ section and select the emergency shelter program in the program bar
  - a. After selecting the program an “Opening” bar should appear

- b. Select the appropriate opening from the list (work from the oldest opening to newest)
  - c. Click save changes
  - d. Once completed, the referral will automatically close out the bed vacancy
7. In HMIS, go to the attendance screen
8. On this screen, scroll down to the “\*Shelter intake Appointment: Emergency Shelter (ES)” service and click ‘Reservation’
9. After selecting an appointment slot, a ‘Make Reservation’ screen will pop up on the right-hand side
  - a. Search for the client, by entering the client/HoH’s UID
  - b. Click ‘Enter’ (or alternative search for the client using other identifying information)
  - c. Click ‘Preview Reservation’
  - d. Scroll down to ‘Table Info,’ and select ‘Confirm’ if details are correct

## Appendix D: Housing Problem–Solving Conversation Sample Questions

1. Try to put the household at ease by making some small talk, ask about their family, or comment on the weather. Offer some water or coffee. Begin to build rapport and indicate that this is not a “normal” meeting with a provider, but rather one where they take their time and try to have a conversation.
2. Ask about situation and safety:
  - a. *“What led you to reach out to us today?”*
  - b. *“Tell me a little bit about your current situation.”*
  - c. *“Are you fleeing domestic violence or is there any other potential threat to you or your household’s safety?”*
  - d. *“Can you tell me more about that?”*
3. Explore possible family, social or other support assets
  - a. *“Where and with whom did you stay last night? What caused you to leave?”*
  - b. *“Would it be safe to stay there tonight? A couple of days? A week?”*
  - c. *“Are there other reasons you needed to leave?”*
  - d. *“Tell me about your family, friends, and other people important to you. Where are they? Are they available to help you? Would they be available to help you if we provided you or them with some help or services?”*
  - e. *“Do you think you could possibly stay there again if we provided you or them some help or services?”*
  - f. *“Do you have friends, who if they were in the same situation, you would help? Maybe they would be willing to help you? What about people at work?”*
  - g. *“Are you active in a religious group? Could they be helpful?”*
  - h. *“Have you been in touch with any other organizations you are a member of? A union for example?”*
  - i. *“What would your family or friends say if they knew you were entering a shelter?”*
  - j. *“Who has you helped in the past? Have there been times when you have been of help or support to others?”*
  - k. *“If you recently stayed with a family member, how did you contribute to the household?”*
  - l. *“Can you increase the amount of work or funds you contribute to the household?”*
  - m. *“What did your situation look like when things were going better?”*
4. Choose options and contact the support person/network. Now that you have identified potential options, assess whether the housing option is safe and how the person would like you to assist with the process. Ask questions like:
  - a. *“Would this be a safe place to stay?”*
  - b. *“Are you comfortable calling the person? How can I help?”*
  - c. *“Can I help you call the person (or the landlord) to mediate a past conflict or assist with the arrangements?”*

- d. *“What do you think would make the request more acceptable to them? Are their services you think they could benefit from?”*
- e. *“Would you prefer that I call them to break the ice? Can I help you explain the situation to them? What exactly do you think would be the way to start the conversation and explain the situation?”*

*Appendix E: CAS Participating Housing Programs*

**Current CAS Participating Housing Programs**

<b>Housing Program Name</b>	<b>Housing Type</b>	<b>Population Focused</b>
LSS: Senior Connect	PSH	Seniors
LSS: Achieving Change Together (ACT)	PSH	Single Adults
LSS SUS: Single Adults	PSH	Single Adults
LSS: Lavender Court	PSH	Seniors
Hope Cooperative: New Direction	PSH	Single Adults
Hope Cooperative: La Mancha	PSH	Single Adults
Hope Cooperative: RA HUD PSH	PSH	Single Adults
Cottage Housing: Quinn Cottage	PSH	Single Adults
Next Move: Adult SUS	PSH	Single Adults
Next Move: Senior SUS	PSH	Seniors
Next Move: Omega SSO	PSH	Single Adults
SHRA + Shelter Plus Care: Shasta Hotel	PSH	Single Adults
SHRA: Shelter Plus Care (SPC)	PSH	Single Adults
VoA- ReStart	PSH	Families
Next Move: SUS Adult Families	PSH	Families
LSS Saybrook	PSH	Families
LSS: Youth Connect	PSH	TAY
LSS: SUS TAY Families	PSH	TAY Families
LSS: Connections	RRH	TAY
VOA: Cares	RRH	Single Adults
VOA: County ESG RRH	RRH	Single Adults
VOA: City ESG RRH	RRH	Single Adults
VOA: State ESG RRH	RRH	Single Adults
VOA: Bringing Families Home: ER-IS	RRH	Single Adults
VOA: Bringing Families Home	RRH	Single Adults
Sac County APS Housing: Home Safe	RRH	Single Adults
BACS: LEAP	RRH	Single Adults
Capital Park Hotel	PSH Units (Chronic)	Single Adults



	PH Units w/ Services (Literally Homeless)	
Central Sac Studios	PH w/ Services	Single Adults
Sunrise Pointe Apartments	PSH	Single Adults and Families
Jamboree Housing: Vista Nueva - Transitional	TH	Single Adults
Vista Nueva	PH w/ Services and PSH	Single Adults and Families
LSS: Mutal housing on the Boulevard	PSH	Single Adults and Families
SSHH: New Community	PSH	Single Adults
SSHH: Friendship Housing	PSH	Single Adults
TPCP: Fairview & Bravado Project	PSH	Single Adults and Families
TPCP: Pathways Alternative Housing	PSH	Single Adults and Families
Life Steps: Villa Jardin/Coral Gables	PH w/ Services	Single Adults and Families
SHRA: Foster Youth to Independence (FYI)	FYI Voucher	TAY
SHRA: Emergency Housing Voucher (EHV)	EHV Voucher	Single Adults
SHRA: Move On	Move On Voucher	Single Adults
SSHH: Shared Community	PSH	Single Adults
MSH: Rehousing Project	RRH	Survivors
Opening Doors: Housing for HT	RRH	Survivors
Lao Family Community Development: Joy of Living	RRH	Survivors
Shelter Inc: Esperanza DV RRH	RRH	Survivors

*Appendix F: CAS Participating Shelters*

<b>Program Name</b>	<b>Operator</b>	<b>Location</b>	<b>Description</b>
Meadowview	VoA / SHRA	2700 Meadowview Rd, Sacramento, CA 95832	100-bed shelter (congregate/ 2 rooms), serving individual adult women
EBH at the Grove	FSC / SHRA	2787 Grove Ave Sacramento, CA 95815	49 tiny-cabin community, providing emergency bridge housing for transitional age youth (TAY) ages 18-24
North 5 <sup>th</sup> Street	Shelter Inc.	700 N 5th St Suite 200, Sacramento, CA 95811	163 capacity (congregate/bunk beds), co-ed, individual adults
X Street	VoA / SHRA	2970 X Street, Sacramento, CA 95817	100 beds (congregate), co-ed, individual adults
North A Street	First Step Communities	1400 North A Street, Sacramento, CA 95811	80 beds (congregate/bunk beds), co-ed, individual adults
Center Of Hope ARPA	Salvation Army	1200 North B Street, Sacramento, CA 95811	70 beds (congregate, bunk beds), individual adults
Common Ground	Wind Youth	Shelter: 3671 5th Ave, Sacramento CA 95817  Drop-in Center: 815 S Street, Sacramento, CA 95811	20 rooms (shared rooms in a 5-bedroom house), serving individual transitional age youth (TAY) ages 18-24
The Village	Waking the Village	TBD	8 units serving pregnant or parenting transitional age youth (TAY) ages 18-24

STEP Shelter	LGBT Center	TBD	14 units serving transitional age youth (TAY) ages 18-24
Next Move Family Shelter	Next Move	4516 Parker ave, Sacramento CA 95820	20 rooms, up to 85 beds; (maximum 6 or 7 people per room)
Bannon Street	Volunteers of America	470 Bannon Street, Sacramento, Ca 95811	20 rooms
Step up on Second Family Motel Shelter	Step up on Second	Various motel sites	214 rooms
TOTAL			858 beds/units

## Appendix G: CAS Shelter Transfer Request Form



### CAS Shelter Transfer Request Form

The Coordinated Access System (CAS) Transfer Request Form is used to request for a shelter participant to be transferred from a CAS-contracted shelter to another CAS-contracted shelter.

Please read the CAS Shelter Transfer Policy and Procedure prior to filling out this form. This form is valid for up to 1 month.

**Client Name:** \_\_\_\_\_ **HMIS UID (or DOB):** \_\_\_\_\_

#### Section 1. Completed by Requesting Agency

Date: \_\_\_\_\_

Requestor Name: \_\_\_\_\_

Requestor's Contact Information: \_\_\_\_\_

Current Shelter/ Program: \_\_\_\_\_

Which new agency and/or program are you requesting for (if any)?

\_\_\_\_\_

Transfer Reason(s):

- Conflict and safety concerns due to domestic violence
- Conflict and safety concerns due to reasons other than domestic violence
- Change in household composition/aging out
- Health and medical reasons/reasonable accommodation
- Other \_\_\_\_\_

Is case conferencing/additional information needed for this request?

- Yes
- No

Did the participant request the transfer?

- Yes
- No

Please include additional details and incidences on the transfer reason(s). Include date(s), time(s), location(s).

---

---

---

---

---

---

---

---

Please describe current shelter barriers that require the shelter participant to be transferred to a new shelter.

---

---

---

---

---

---

---

---

Please describe all options and interventions used to maintain shelter participant enrollment before transfer request. Please attach documentation and proof if needed.

---

---

---

---

---

---

---

---

Section 2. Shelter Participant Questionnaire	
Which areas are you not willing to accept shelter?	
How many household members, including yourself, are there?	
Do you have a pet or companion/ service animal?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, what type of animal and how many?	

Do you require or request reasonable accommodations (ADA)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are there other requirements or requests around housing that we need to be aware of?	

Section 3. To be completed by 211 Coordinated Access System (CAS) Manager:							
<p><b>Date:</b> _____</p> <p><b>Transfer Request Status:</b></p> <p><input type="checkbox"/> Approved</p> <p><input type="checkbox"/> Denied</p> <p><b>Denial Reason:</b></p> <p><input type="checkbox"/> Insufficient transfer reasoning</p> <p><input type="checkbox"/> Current existing resources are not able to meet the request needs</p> <p><input type="checkbox"/> N/A</p>							
<table border="1"> <thead> <tr> <th style="background-color: #cccccc;">Reason</th> <th style="background-color: #cccccc;">Definition</th> </tr> </thead> <tbody> <tr> <td>Insufficient Transfer Reasoning</td> <td>The documentation submitted does not meet the threshold criteria demonstrating the need for a transfer to be approved.</td> </tr> <tr> <td>Current existing resources are not able to meet the requested needs</td> <td>There is currently no shelter that meets the identified needs of the participant.</td> </tr> </tbody> </table>		Reason	Definition	Insufficient Transfer Reasoning	The documentation submitted does not meet the threshold criteria demonstrating the need for a transfer to be approved.	Current existing resources are not able to meet the requested needs	There is currently no shelter that meets the identified needs of the participant.
Reason	Definition						
Insufficient Transfer Reasoning	The documentation submitted does not meet the threshold criteria demonstrating the need for a transfer to be approved.						
Current existing resources are not able to meet the requested needs	There is currently no shelter that meets the identified needs of the participant.						
<p><b>CAS Department Statement:</b></p> <p>_____</p> <p>_____</p> <p>_____</p>							

--

CAS Staff Member reviewing the request: \_\_\_\_\_

CAS Manager Signature: \_\_\_\_\_

## Appendix H: CAS RRH to PSH Transfer Request Form



### RRH to PSH Transfer Request Form

The RRH to PSH Transfer Request Form is used to request for a program participant to be transferred from an eligible rapid rehousing (RRH) program to a permanent supportive housing program (PSH). This form is to be filled out after all other options to stabilize the household in the RRH program have been exhausted.

Please read the RRH to PSH Transfer Policy and Procedure prior to filling out this form. This form is valid for up to 6 months.

**Client Name:** \_\_\_\_\_ **HMIS UID (or DOB):** \_\_\_\_\_

#### Section 1. Completed by Requesting Agency

**Date:** \_\_\_\_\_

**Requestor Name:** \_\_\_\_\_

**Requestor's Contact Information:** \_\_\_\_\_

**Current Agency and Program:** \_\_\_\_\_

**Type of Transfer:**

Internal

External

**Which new agency and/or program are you requesting for?**

\_\_\_\_\_

**Transfer Reason(s):**

Conflict and safety concerns

Reasonable accommodations

Client needs longer term or permanent support to maintain housing

Current program project is closing

Other \_\_\_\_\_

**Is a case conferencing meeting needed for this request?**

Yes

No

Please include additional details and incidences on the transfer reason(s). Include date(s), time(s), location(s).



Please describe current program barriers that require the program participant to be transferred to a new program.

Please describe all options and interventions used to maintain program participant's enrollment prior to transfer request. Please attach documentation and proof if needed.

**Section 2. Client Housing Preference Questionnaire**

Which areas would you prefer to live in?

Which areas are you not willing to accept housing?

How many household members including yourself are there?	
Is the client self-sufficient- does NOT need assistance with activities of daily living (ADLs)? Examples: Bathing, feeding, medication administration, getting up on their own, etc.	<input type="checkbox"/> Yes <input type="checkbox"/> No
If they are not self-sufficient, is there a caretaker who will be assisting the client with their ADLs?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you have a pet or companion/ service animal?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, what type of animal and how many?	
Do you require or request a ground floor unit?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you require or request parking accommodations?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you open to shared housing? <i>Shared Housing is a space that has common areas, such as a living room and bathroom but a private bedroom.</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are there other requirements or requests around housing that we need to be aware of (ADA unit, assistance with activities of daily living, clean and sober living, etc.)?	

**Section 3. To be completed by Coordinated Access System (CAS) Department:**
**Date:** \_\_\_\_\_

**Transfer Request Status:**

- Approved  
 Denied

**Denial Reason:**

- Insufficient transfer reasoning
- No community capacity currently
- Current existing resources are not able to meet the request needs
- Not eligible for PSH/ insufficient PSH documentation
- N/A

Reason	Definition
Insufficient Transfer Reasoning	The documentation submitted does not meet the threshold criteria demonstrating the need for a transfer to be approved.
No Community Capacity Currently	There are currently no projects within the CoC, which has capacity or is expected to have capacity within the near future which could meet the needs outlined in the transfer request.
Current existing resources are not able to meet the request needs	There are currently no projects within the CoC which could meet the participant's identified needs.
Not eligible for PSH/ insufficient PSH documentation	Client does not meet the eligibility requirements to be enrolled into a Permanent Supportive Housing program or lacks the documentation to prove eligibility.

**CAS Department Statement:**

\_\_\_\_\_

\_\_\_\_\_

CAS Staff Member reviewing the request: \_\_\_\_\_

CAS Staff Member Signature: \_\_\_\_\_

CAS Title: \_\_\_\_\_

## Appendix I: Universal Interim Shelter Prioritization

### Interim Universal Shelter Prioritization Policy

#### **Individual Shelter Prioritization**

#### **Family Shelter Prioritization**

Pregnancy	1pt	Pregnancy	1pt
Any household member who has experienced a physical health crisis within the last 3 months	1pt	Any household member who has experienced a physical health crisis within the last 3 months	1pt
Any household member who has experienced a mental health crisis within the last 3 months	1pt	Any household member who has experienced a mental health crisis within the last 3 months	1pt
Actively fleeing from DV, human trafficking, sexual assault	3pts	Actively fleeing from DV, human trafficking, sexual assault	3pts
Ongoing and diagnosed mental or physical health disability	1pt	Ongoing and diagnosed mental or physical health disability	1pt
Age (over 62)	1pt	Age (over 62)	1pt
Households living in a tent or outside	1 pt	Single-parent household	1pt
		Number of children	1pt per child
		Children under the age of 5 years old	1pt
		Households living in a tent or outside	1 pt

## Appendix J: VAWA FAQs

For further information on VAWA, please visit [HUD's official VAWA Website](#)

### **VAWA FAQ's:**

1. What are VAWA's Housing Protections?
  - a. Under VAWA, someone who has experienced domestic violence, dating violence, sexual assault, and/or stalking (VAWA violence/abuse):
    - i. **Cannot be denied admission to or assistance** under a HUD-subsidized or assisted unit or program because of the VAWA violence/abuse committed against them.
    - ii. **Cannot be evicted** from a HUD-subsidized unit **nor have their assistance terminated** because of the VAWA violence/abuse committed against them.
    - iii. **Cannot be denied admission, evicted, or have their assistance terminated for reasons related to the VAWA violence/abuse**, such as having an eviction record, criminal history, or bad credit history.
    - iv. **Must have the option to stay** in their HUD-subsidized housing, even if there has been criminal activity directly related to the VAWA violence/abuse.
    - v. **Can request an emergency transfer from the housing provider for safety reasons** related to the VAWA violence/abuse committed against them.
    - vi. **Must be allowed to move with continued assistance**, if the survivor has a Section 8 Housing Choice Voucher.
    - vii. **Must be able to provide proof to the housing provider by self-certifying** using the HUD VAWA Self-certification ([Form HUD-5382](#)), and not be required to provide more proof unless the housing provider has conflicting information about the violence/abuse.
    - viii. **Must receive HUD's Notice of VAWA Housing Rights** ([Form HUD-5380](#)) and HUD's VAWA Self-certification Form ([Form HUD-5382](#)) from the housing provider, when they are denied admission to a HUD-subsidized unit or HUD program, when they are admitted to a HUD-subsidized unit or HUD program, and when they receive a notice of eviction from a HUD-subsidized unit or notice of termination from a HUD program.
    - ix. **Has a right to strict confidentiality** of information regarding their status as a survivor.
    - x. **Can request a lease bifurcation** from the owner or landlord to remove the perpetrator from the lease or unit, and if the housing provider bifurcates, it must be done consistent with applicable federal, state, or local laws and the requirements of the HUD housing program.
    - xi. **Cannot be coerced, intimidated, threatened, or retaliated against** by HUD-subsidized housing providers for seeking or exercising VAWA protections.
    - xii. **Has the right to seek law enforcement or emergency assistance** for themselves or others without being penalized by local laws or policies for these requests or because they were victims of criminal activity.
2. Who is Covered?
  - a. VAWA's housing protections, in part, are available to someone who has previously or is currently experiencing domestic violence, sexual assault, dating violence, or stalking. The survivor does NOT

have to be married to, related to, or living with the perpetrator to be protected by VAWA. It does not matter how long ago the survivor experienced the violence. A survivor's immigration status in itself does not impact a survivor's right to VAWA's housing protections.

- b. VAWA's housing protections, in part, apply to a survivor if they are applying for or living in shelter, transitional housing, or permanent housing that is subsidized by a federal homeless assistance program or federal affordable housing program. See below for a list of HUD programs covered by VAWA.
- c. **VAWA protects survivors, regardless of their sex, gender identity, or sexual orientation AND regardless of the sex, gender identity or sexual orientation of the person who caused harm.**

### 3. What HUD Programs are Covered?

- a. Public Housing; Housing Choice Voucher; Project-based Section 8; Section-8 Moderate Rehabilitation Single Room Occupancy (SRO); Section 202 Supportive Housing for the Elderly; Section 202 Direct Loan; Section 811 Supportive Housing for Persons with Disabilities; Housing Opportunities for Persons with AIDS (HOPWA); HOME Investment Partnerships (HOME); Emergency Solutions Grants; Continuum of Care; Section 221(d)(3)/(d)(5) Below-market Interest Rate (BMIR), Multifamily Rental Assistance; Section 236 Multifamily Assistance; Housing Trust Fund

### 4. What Forms of Violence are Covered?

- a. VAWA's housing safeguards apply to survivors of domestic violence, dating violence, sexual assault, and/or stalking. These forms of violence (collectively called "VAWA violence/abuse") are defined below.
- b. **Domestic Violence** includes felony or misdemeanor crimes committed by a current or former spouse or intimate partner of the victim under the family or domestic violence laws of the jurisdiction receiving grant funding and, in the case of victim services, includes the use or attempted use of physical abuse or sexual abuse, or a pattern of any other coercive behavior committed, enabled, or solicited to gain or maintain power and control over a victim, including verbal, psychological, economic, or technological abuse that may or may not constitute criminal behavior, by a person who —
  - i. is a current or former spouse or intimate partner of the victim, or person similarly situated to a spouse of the victim;
  - ii. is cohabitating, or has cohabitated, with the victim as a spouse or intimate partner;
  - iii. shares a child in common with the victim; or
  - iv. commits acts against a youth or adult victim who is protected from those acts under the family or domestic violence laws of the jurisdiction.
- c. **Dating violence** means violence committed by a person—
  - i. who is or has been in a social relationship of a romantic or intimate nature with the victim; and
  - ii. where the existence of such a relationship shall be determined based on a consideration of the following factors:
    - iii. The length of the relationship.
    - iv. The type of relationship.
    - v. The frequency of interaction between the persons involved in the relationship.

- d. **Sexual Assault** is any nonconsensual sexual act proscribed by Federal, tribal, or State law, including when the victim lacks capacity to consent.
  - e. **Stalking** means engaging in a course of conduct directed at a specific person that would cause a reasonable person to— (A) fear for his or her safety or the safety of others; or (B) suffer substantial emotional distress.
  - f. **Economic Abuse**, in the context of domestic violence, dating violence, and abuse in later life, means behavior that is coercive, deceptive, or unreasonably controls or restrains a person’s ability to acquire, use, or maintain economic resources to which they are entitled, including using coercion, fraud, or manipulation to—(A) restrict a person’s access to money, assets, credit, or financial information; (B) unfairly use a person’s personal economic resources, including money, assets, and credit, for one’s own advantage; or (C) exert undue influence over a person’s financial and economic behavior or decisions, including forcing default on joint or other financial obligations, exploiting powers of attorney, guardianship, or conservatorship, or failing or neglecting to act in the best interests of a person to whom one has a fiduciary duty. (34 U.S.C. 12291(a)(13))
  - g. **Technological Abuse** means an act or pattern of behavior that occurs within domestic violence, sexual assault, dating violence or stalking and is intended to harm, threaten, intimidate, control, stalk, harass, impersonate, exploit, extort, or monitor, except as otherwise permitted by law, another person, that occurs using any form of technology, including but not limited to: internet enabled devices, online spaces and platforms, computers, mobile devices, cameras and imaging programs, apps, location tracking devices, or communication technologies, or any other emerging technologies
5. What VAWA Requirements are Programs Responsible for Complying with?
- a. Programs must have the following forms on file:
    - i. Program participants are provided the VAWA Notice and Transfer Request Form upon program admission or denial and at eviction or termination. Client files contain notification of VAWA forms at exit.
    - ii. [Notice of Occupancy Rights under the Violence Against Women Act](#)
    - iii. [Emergency Transfer Plan](#) - The plan identifies program participants who are tenants and who are eligible for emergency transfer, documentation needed to request an emergency transfer, confidentiality protections, how an emergency transfer may occur, and guidance to tenants on safety and security.
    - iv. [Section 8 VAWA Lease Addendum](#)
    - v. VAWA [Certification of Domestic Violence, Sexual Assault, or Stalking, and Alternative Documentation](#)
    - vi. [Emergency Transfer Request for Certain Victims](#)
  - b. Survivors of domestic violence, dating violence, sexual assault, or stalking can request an emergency transfer from the current unit to a new unit.

- c. Emergency transfer requests for permanent supportive housing[GU1] are managed via CAS.
- d. VAWA protections are included in all leases and housing assistance contracts between agencies and housing owners/landlords, and in all leases or rental assistance contracts with tenants. Except for tenant-based rental assistance, this must include the right to break the lease without penalty if the tenant qualifies for an emergency transfer.



## Appendix K: VAWA Notice of Occupancy Rights

[Link to Official HUD Document](#)

[Insert Name of Housing Provider]

### Notice of Occupancy Rights under the Violence Against Women Act

#### To all Tenants and Applicants

The Violence Against Women Act (VAWA) provides protections for victims of domestic violence, dating violence, sexual assault, or stalking. VAWA protections are not only available to women, but are available equally to all individuals regardless of sex, gender identity, or sexual orientation. The U.S. Department of Housing and Urban Development (HUD) is the Federal agency that oversees that **[insert name of program or rental assistance]** is in compliance with VAWA. This notice explains your rights under VAWA. A HUD-approved certification form is attached to this notice. You can fill out this form to show that you are or have been a victim of domestic violence, dating violence, sexual assault, or stalking, and that you wish to use your rights under VAWA.”

#### Protections for Applicants

If you otherwise qualify for assistance under **[insert name of program or rental assistance]**, you cannot be denied admission or denied assistance because you are or have been a victim of domestic violence, dating violence, sexual assault, or stalking.

#### Protections for Tenants

If you are receiving assistance under **[insert name of program or rental assistance]**, you may not be denied assistance, terminated from participation, or be evicted from your rental housing because you are or have been a victim of domestic violence, dating violence, sexual assault, or stalking.

Also, if you or an affiliated individual of yours is or has been the victim of domestic violence, dating violence, sexual assault, or stalking by a member of your household or any guest, you may not be denied rental assistance or occupancy rights under **[insert name of program or rental assistance]** solely on the basis of criminal activity directly relating to that domestic violence, dating violence, sexual assault, or stalking.

Affiliated individual means your spouse, parent, brother, sister, or child, or a person to whom you stand in the place of a parent or guardian (for example, the affiliated individual is in your care, custody, or control); or any individual, tenant, or lawful occupant living in your household.

#### Removing the Abuser or Perpetrator from the Household

HP may divide (bifurcate) your lease in order to evict the individual or terminate the assistance of the individual who has engaged in criminal activity (the abuser or perpetrator) directly relating to domestic violence, dating violence, sexual assault, or stalking.

If HP chooses to remove the abuser or perpetrator, HP may not take away the rights of eligible tenants to the unit or otherwise punish the remaining tenants. If the evicted abuser or perpetrator was the sole tenant to have established eligibility for assistance under the program, HP must allow the tenant who is or has been a victim and other household members to remain in the unit for a period of time, in order to establish eligibility under the program or under another HUD housing program covered by VAWA, or, find alternative housing.

In removing the abuser or perpetrator from the household, HP must follow Federal, State, and local eviction procedures. In order to divide a lease, HP may, but is not required to, ask you for documentation or certification of the incidences of domestic violence, dating violence, sexual assault, or stalking.

### **Moving to Another Unit**

Upon your request, HP may permit you to move to another unit, subject to the availability of other units, and still keep your assistance. In order to approve a request, HP may ask you to provide documentation that you are requesting to move because of an incidence of domestic violence, dating violence, sexual assault, or stalking. If the request is a request for emergency transfer, the housing provider may ask you to submit a written request or fill out a form where you certify that you meet the criteria for an emergency transfer under VAWA. The criteria are:

**(1) You are a victim of domestic violence, dating violence, sexual assault, or stalking.** If your housing provider does not already have documentation that you are a victim of domestic violence, dating violence, sexual assault, or stalking, your housing provider may ask you for such documentation, as described in the documentation section below.

**(2) You expressly request the emergency transfer.** Your housing provider may choose to require that you submit a form, or may accept another written or oral request.

**(3) You reasonably believe you are threatened with imminent harm from further violence if you remain in your current unit.** This means you have a reason to fear that if you do not receive a transfer you would suffer violence in the very near future.

**OR**

**You are a victim of sexual assault and the assault occurred on the premises during the 90-calendar-day period before you request a transfer.** If you are a victim of sexual assault, then in addition to qualifying for an emergency transfer because you reasonably believe you are threatened with imminent harm from further violence if you remain in your unit, you may qualify for an emergency transfer if the sexual assault occurred on the premises of the property

from which you are seeking your transfer, and that assault happened within the 90-calendar-day period before you expressly request the transfer.

HP will keep confidential requests for emergency transfers by victims of domestic violence, dating violence, sexual assault, or stalking, and the location of any move by such victims and their families.

HP's emergency transfer plan provides further information on emergency transfers, and HP must make a copy of its emergency transfer plan available to you if you ask to see it.

### **Documenting You Are or Have Been a Victim of Domestic Violence, Dating Violence, Sexual Assault or Stalking**

HP can, but is not required to, ask you to provide documentation to "certify" that you are or have been a victim of domestic violence, dating violence, sexual assault, or stalking. Such request from HP must be in writing, and HP must give you at least 14 business days (Saturdays, Sundays, and Federal holidays do not count) from the day you receive the request to provide the documentation. HP may, but does not have to, extend the deadline for the submission of documentation upon your request.

You can provide one of the following to HP as documentation. It is your choice which of the following to submit if HP asks you to provide documentation that you are or have been a victim of domestic violence, dating violence, sexual assault, or stalking.

- A complete HUD-approved certification form given to you by HP with this notice, that documents an incident of domestic violence, dating violence, sexual assault, or stalking. The form will ask for your name, the date, time, and location of the incident of domestic violence, dating violence, sexual assault, or stalking, and a description of the incident. The certification form provides for including the name of the abuser or perpetrator if the name of the abuser or perpetrator is known and is safe to provide.
- A record of a Federal, State, tribal, territorial, or local law enforcement agency, court, or administrative agency that documents the incident of domestic violence, dating violence, sexual assault, or stalking. Examples of such records include police reports, protective orders, and restraining orders, among others.
- A statement, which you must sign, along with the signature of an employee, agent, or volunteer of a victim service provider, an attorney, a medical professional or a mental health professional (collectively, "professional") from whom you sought assistance in addressing domestic violence, dating violence, sexual assault, or stalking, or the effects of abuse, and with the professional selected by you attesting under penalty of perjury that he or she believes that the incident or incidents of domestic violence, dating violence, sexual assault, or stalking are grounds for protection.
- Any other statement or evidence that HP has agreed to accept.

If you fail or refuse to provide one of these documents within the 14 business days, HP does not have to provide you with the protections contained in this notice.

If HP receives conflicting evidence that an incident of domestic violence, dating violence, sexual assault, or stalking has been committed (such as certification forms from two or more members of a household each claiming to be a victim and naming one or more of the other petitioning household members as the abuser or perpetrator), HP has the right to request that you provide third-party documentation within thirty 30 calendar days in order to resolve the conflict. If you fail or refuse to provide third-party documentation where there is conflicting evidence, HP does not have to provide you with the protections contained in this notice.

### **Confidentiality**

HP must keep confidential any information you provide related to the exercise of your rights under VAWA, including the fact that you are exercising your rights under VAWA.

HP must not allow any individual administering assistance or other services on behalf of HP (for example, employees and contractors) to have access to confidential information unless for reasons that specifically call for these individuals to have access to this information under applicable Federal, State, or local law.

HP must not enter your information into any shared database or disclose your information to any other entity or individual. HP, however, may disclose the information provided if:

- You give written permission to HP to release the information on a time limited basis.
- HP needs to use the information in an eviction or termination proceeding, such as to evict your abuser or perpetrator or terminate your abuser or perpetrator from assistance under this program.
- A law requires HP or your landlord to release the information.

VAWA does not limit HP's duty to honor court orders about access to or control of the property. This includes orders issued to protect a victim and orders dividing property among household members in cases where a family breaks up.

### **Reasons a Tenant Eligible for Occupancy Rights under VAWA May Be Evicted or Assistance May Be Terminated**

You can be evicted and your assistance can be terminated for serious or repeated lease violations that are not related to domestic violence, dating violence, sexual assault, or stalking committed against you. However, HP cannot hold tenants who have been victims of domestic violence, dating violence, sexual assault, or stalking to a more demanding set of rules than it applies to tenants who have not been victims of domestic violence, dating violence, sexual assault, or stalking.

The protections described in this notice might not apply, and you could be evicted and your assistance terminated, if HP can demonstrate that not evicting you or terminating your assistance would present a real physical danger that:

- 1) Would occur within an immediate time frame, and

2) Could result in death or serious bodily harm to other tenants or those who work on the property.

If HP can demonstrate the above, HP should only terminate your assistance or evict you if there are no other actions that could be taken to reduce or eliminate the threat.

### **Other Laws**

VAWA does not replace any Federal, State, or local law that provides greater protection for victims of domestic violence, dating violence, sexual assault, or stalking. You may be entitled to additional housing protections for victims of domestic violence, dating violence, sexual assault, or stalking under other Federal laws, as well as under State and local laws.

### **Non-Compliance with The Requirements of This Notice**

You may report a covered housing provider's violations of these rights and seek additional assistance, if needed, by contacting or filing a complaint with **[insert contact information for any intermediary, if applicable]** or **[insert HUD field office]**.

### **For Additional Information**

You may view a copy of HUD's final VAWA rule at **[insert Federal Register link]**.

Additionally, HP must make a copy of HUD's VAWA regulations available to you if you ask to see them.

For questions regarding VAWA, please contact **[insert name of program or rental assistance contact information able to answer questions on VAWA]**.

For help regarding an abusive relationship, you may call the National Domestic Violence Hotline at 1-800-799-7233 or, for persons with hearing impairments, 1-800-787-3224 (TTY). You may also contact **[Insert contact information for relevant local organizations]**.

For tenants who are or have been victims of stalking seeking help may visit the National Center for Victims of Crime's Stalking Resource Center at <https://www.victimsofcrime.org/our-programs/stalking-resource-center>.

For help regarding sexual assault, you may contact **[Insert contact information for relevant organizations]**

Victims of stalking seeking help may contact **[Insert contact information for relevant organizations]**.

**Attachment:** Certification form HUD-5382 **[form approved for this program to be included]**

## *Appendix L: VAWA Certification of Domestic Violence, Dating Violence, Sexual Assault, or Stalking and Alternate Documentation*

[Link to Official HUD Document](#)

### **CERTIFICATION OF DOMESTIC VIOLENCE, DATING VIOLENCE, SEXUAL ASSAULT, OR STALKING, AND ALTERNATE DOCUMENTATION**

**Purpose of Form:** The Violence Against Women Act (“VAWA”) protects applicants, tenants, and program participants in certain HUD programs from being evicted, denied housing assistance, or terminated from housing assistance based on acts of domestic violence, dating violence, sexual assault, or stalking against them. Despite the name of this law, VAWA protection is available to victims of domestic violence, dating violence, sexual assault, and stalking, regardless of sex, gender identity, or sexual orientation.

**Use of This Optional Form:** If you are seeking VAWA protections from your housing provider, your housing provider may give you a written request that asks you to submit documentation about the incident or incidents of domestic violence, dating violence, sexual assault, or stalking.

In response to this request, you or someone on your behalf may complete this optional form and submit it to your housing provider, or you may submit one of the following types of third-party documentation:

(1) A document signed by you and an employee, agent, or volunteer of a victim service provider, an attorney, or medical professional, or a mental health professional (collectively, “professional”) from whom you have sought assistance relating to domestic violence, dating violence, sexual assault, or stalking, or the effects of abuse. The document must specify, under penalty of perjury, that the professional believes the incident or incidents of domestic violence, dating violence, sexual assault, or stalking occurred and meet the definition of “domestic violence,” “dating violence,” “sexual assault,” or “stalking” in HUD’s regulations at 24 CFR 5.2003.

(2) A record of a Federal, State, tribal, territorial or local law enforcement agency, court, or administrative agency; or

(3) At the discretion of the housing provider, a statement or other evidence provided by the applicant or tenant.

**Submission of Documentation:** The time period to submit documentation is 14 business days from the date that you receive a written request from your housing provider asking that you provide documentation of the occurrence of domestic violence, dating violence, sexual assault, or stalking. Your housing provider may, but is not required to, extend the time period to submit the documentation, if you request an extension of the time period. If the requested information is not received within 14 business days of when you received the request for the documentation, or any extension of the date provided by your housing provider, your housing provider does not need to grant you any of the VAWA protections. Distribution or issuance of this form does not serve as a written request for certification.

**Confidentiality:** All information provided to your housing provider concerning the incident(s) of domestic violence, dating violence, sexual assault, or stalking shall be kept confidential and such details shall not be entered into any shared database. Employees of your housing provider are not to have access to these details unless to grant or deny VAWA protections to you, and such employees may not disclose this information to any other entity or individual, except to the extent that disclosure is: (i) consented to by you in writing in a time-limited release; (ii) required for use in an eviction proceeding or hearing regarding termination of assistance; or (iii) otherwise required by applicable law.

**TO BE COMPLETED BY OR ON BEHALF OF THE VICTIM OF DOMESTIC VIOLENCE, DATING VIOLENCE, SEXUAL ASSAULT, OR STALKING**

1. Date the written request is received by victim: \_\_\_\_\_

2. Name of victim: \_\_\_\_\_

3. Your name (if different from victim's): \_\_\_\_\_

4. Name(s) of other family member(s) listed on the lease: \_\_\_\_\_

\_\_\_\_\_

5. Residence of victim: \_\_\_\_\_

6. Name of the accused perpetrator (if known and can be safely disclosed): \_\_\_\_\_

\_\_\_\_\_

7. Relationship of the accused perpetrator to the victim: \_\_\_\_\_

8. Date(s) and times(s) of incident(s) (if known): \_\_\_\_\_

\_\_\_\_\_

10. Location of incident(s): \_\_\_\_\_

In your own words, briefly describe the incident(s): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

This is to certify that the information provided on this form is true and correct to the best of my knowledge and recollection, and that the individual named above in Item 2 is or has been a victim of domestic violence, dating violence, sexual assault, or stalking. I acknowledge that submission of false information could jeopardize program eligibility and could be the basis for denial of admission, termination of assistance, or eviction.

Signature \_\_\_\_\_ Signed on (Date) \_\_\_\_\_

**Public Reporting Burden:** The public reporting burden for this collection of information is estimated to average 1 hour per response. This includes the time for collecting, reviewing, and reporting the data. The information provided is to be used by the housing provider to request certification that the applicant or tenant is a victim of domestic violence, dating violence, sexual assault, or stalking. The information is subject to the confidentiality requirements of VAWA. This agency may not collect this information, and you are not required to complete this form, unless it displays a currently valid Office of Management and Budget control number.



## Appendix M: VAWA Emergency Transfer Request

[Link to Official HUD Document](#)

### **Emergency Transfer Request for Certain Victims of Domestic Violence, Dating Violence, Sexual Assault, or Stalking**

**Purpose of Form:** If you are a victim of domestic violence, dating violence, sexual assault, or stalking, and you are seeking an emergency transfer, you may use this form to request an emergency transfer and certify that you meet the requirements of eligibility for an emergency transfer under the Violence Against Women Act (VAWA). Although the statutory name references women, VAWA rights and protections apply to all victims of domestic violence, dating violence, sexual assault or stalking. Using this form does not necessarily mean that you will receive an emergency transfer. See your housing provider's emergency transfer plan for more information about the availability of emergency transfers.

#### **The requirements you must meet are:**

**(1) You are a victim of domestic violence, dating violence, sexual assault, or stalking.** If your housing provider does not already have documentation that you are a victim of domestic violence, dating violence, sexual assault, or stalking, your housing provider may ask you for such documentation. In response, you may submit Form HUD-5382, or any one of the other types of documentation listed on that Form.

**(2) You expressly request the emergency transfer. Submission of this form confirms that you have expressly requested a transfer.** Your housing provider may choose to require that you submit this form, or may accept another written or oral request. Please see your housing provider's emergency transfer plan for more details.

**(3) You reasonably believe you are threatened with imminent harm from further violence if you remain in your current unit.** This means you have a reason to fear that if you do not receive a transfer you would suffer violence in the very near future.

**OR**

**You are a victim of sexual assault and the assault occurred on the premises during the 90-calendar-day period before you request a transfer.** If you are a victim of sexual assault, then in addition to qualifying for an emergency transfer because you reasonably believe you are threatened with imminent harm from further violence if you remain in your unit, you may qualify for an emergency transfer if the sexual assault occurred on the premises of the property from which you are seeking your transfer, and that assault happened within the 90-calendar-day period before you submit this form or otherwise expressly request the transfer.

**Submission of Documentation:** If you have third-party documentation that demonstrates why you are eligible for an emergency transfer, you should submit that documentation to your housing provider if it is safe for you to do so. Examples of third party documentation include, but are not limited to: a letter or

other documentation from a victim service provider, social worker, legal assistance provider, pastoral counselor, mental health provider, or other professional from whom you have sought assistance; a current restraining order; a recent court order or other court records; a law enforcement report or records; communication records from the perpetrator of the violence or family members or friends of the perpetrator of the violence, including emails, voicemails, text messages, and social media posts.

**Confidentiality:** All information provided to your housing provider concerning the incident(s) of domestic violence, dating violence, sexual assault, or stalking, and concerning your request for an emergency transfer shall be kept confidential. Such details shall not be entered into any shared database.

Employees of your housing provider are not to have access to these details unless to grant or deny VAWA protections or an emergency transfer to you. Such employees may not disclose this information to any other entity or individual, except to the extent that disclosure is: (i) consented to by you in writing in a time-limited release; (ii) required for use in an eviction proceeding or hearing regarding termination of assistance; or (iii) otherwise required by applicable law.

**TO BE COMPLETED BY OR ON BEHALF OF THE PERSON REQUESTING A TRANSFER**

1. Name of victim requesting an emergency transfer: \_\_\_\_\_

2. Your name (if different from victim's) \_\_\_\_\_

3. Name(s) of other family member(s) listed on the lease: \_\_\_\_\_

\_\_\_\_\_

4. Name(s) of other family member(s) who would transfer with the victim: \_\_\_\_\_

\_\_\_\_\_

5. Address of location from which the victim seeks to transfer:

\_\_\_\_\_

6. Address or phone number for contacting the victim: \_\_\_\_\_

7. Name of the accused perpetrator (if known and can be safely disclosed): \_\_\_\_\_

8. Relationship of the accused perpetrator to the victim: \_\_\_\_\_

9. Date(s), Time(s) and location(s) of incident(s): \_\_\_\_\_

\_\_\_\_\_

10. Is the person requesting the transfer a victim of a sexual assault that occurred in the past 90 days on the premises of the property from which the victim is seeking a transfer? If yes, skip question 11. If no, fill out question 11. \_\_\_\_\_

**11. Describe why the victim believes they are threatened with imminent harm from further violence if they remain in their current unit.**

---

---

**12. If voluntarily provided, list any third-party documentation you are providing along with this notice:**

---

This is to certify that the information provided on this form is true and correct to the best of my knowledge, and that the individual named above in Item 1 meets the requirement laid out on this form for an emergency transfer. I acknowledge that submission of false information could jeopardize program eligibility and could be the basis for denial of admission, termination of assistance, or eviction.

Signature \_\_\_\_\_ Signed on (Date) \_\_\_\_\_

## Appendix N: VAWA Model Emergency Transfer Plan

[Link to Model HUD Document](#)

[Insert name of covered housing provider]

### Model Emergency Transfer Plan for Victims of Domestic Violence, Dating Violence, Sexual Assault, or Stalking

#### Emergency Transfers

[Insert name of covered housing provider (**acronym HP for purposes of this model plan**)] is concerned about the safety of its tenants, and such concern extends to tenants who are victims of domestic violence, dating violence, sexual assault, or stalking. In accordance with the Violence Against Women Act (VAWA), HP allows tenants who are victims of domestic violence, dating violence, sexual assault, or stalking to request an emergency transfer from the tenant's current unit to another unit. The ability to request a transfer is available regardless of sex, gender identity, or sexual orientation. The ability of HP to honor such request for tenants currently receiving assistance, however, may depend upon a preliminary determination that the tenant is or has been a victim of domestic violence, dating violence, sexual assault, or stalking, and on whether HP has another dwelling unit that is available and is safe to offer the tenant for temporary or more permanent occupancy.

This plan identifies tenants who are eligible for an emergency transfer, the documentation needed to request an emergency transfer, confidentiality protections, how an emergency transfer may occur, and guidance to tenants on safety and security. This plan is based on a model emergency transfer plan published by the U.S. Department of Housing and Urban Development (HUD), the Federal agency that oversees that [insert name of program or rental assistance here] is in compliance with VAWA.

#### Eligibility for Emergency Transfers

A tenant who is a victim of domestic violence, dating violence, sexual assault, or stalking, as provided in HUD's regulations at 24 CFR part 5, subpart L is eligible for an emergency transfer, if: the tenant reasonably believes that there is a threat of imminent harm from further violence if the tenant remains within the same unit. If the tenant is a victim of sexual assault, the tenant may also be eligible to transfer if the sexual assault occurred on the premises within the 90-calendar-day period preceding a request for an emergency transfer.

A tenant requesting an emergency transfer must expressly request the transfer in accordance with the procedures described in this plan.

Tenants who are not in good standing may still request an emergency transfer if they meet the eligibility requirements in this section.

#### Emergency Transfer Request Documentation

To request an emergency transfer, the tenant shall notify HP's management office and submit a written request for a transfer to [HP to insert location]. HP will provide reasonable accommodations to this

policy for individuals with disabilities. The tenant's written request for an emergency transfer should include either:

1. A statement expressing that the tenant reasonably believes that there is a threat of imminent harm from further violence if the tenant were to remain in the same dwelling unit assisted under HP's program; OR
2. A statement that the tenant was a sexual assault victim and that the sexual assault occurred on the premises during the 90-calendar-day period preceding the tenant's request for an emergency transfer.

### **Confidentiality**

HP will keep confidential any information that the tenant submits in requesting an emergency transfer, and information about the emergency transfer, unless the tenant gives HP written permission to release the information on a time limited basis, or disclosure of the information is required by law or required for use in an eviction proceeding or hearing regarding termination of assistance from the covered program. This includes keeping confidential the new location of the dwelling unit of the tenant, if one is provided, from the person(s) that committed an act(s) of domestic violence, dating violence, sexual assault, or stalking against the tenant. See the Notice of Occupancy Rights under the Violence Against Women Act For All Tenants for more information about HP's responsibility to maintain the confidentiality of information related to incidents of domestic violence, dating violence, sexual assault, or stalking.

### **Emergency Transfer Timing and Availability**

HP cannot guarantee that a transfer request will be approved or how long it will take to process a transfer request. HP will, however, act as quickly as possible to move a tenant who is a victim of domestic violence, dating violence, sexual assault, or stalking to another unit, subject to availability and safety of a unit. If a tenant reasonably believes a proposed transfer would not be safe, the tenant may request a transfer to a different unit. If a unit is available, the transferred tenant must agree to abide by the terms and conditions that govern occupancy in the unit to which the tenant has been transferred. HP may be unable to transfer a tenant to a particular unit if the tenant has not or cannot establish eligibility for that unit.

If HP has no safe and available units for which a tenant who needs an emergency is eligible, HP will assist the tenant in identifying other housing providers who may have safe and available units to which the tenant could move. At the tenant's request, HP will also assist tenants in contacting the local organizations offering assistance to victims of domestic violence, dating violence, sexual assault, or stalking that are attached to this plan.

### **Safety and Security of Tenants**

Pending processing of the transfer and the actual transfer, if it is approved and occurs, the tenant is urged to take all reasonable precautions to be safe.

Tenants who are or have been victims of domestic violence are encouraged to contact the National Domestic Violence Hotline at 1-800-799-7233, or a local domestic violence shelter, for assistance in creating a safety plan. For persons with hearing impairments, that hotline can be accessed by calling 1-800-787-3224 (TTY).

Tenants who have been victims of sexual assault may call the Rape, Abuse & Incest National Network's National Sexual Assault Hotline at 800-656-HOPE, or visit the online hotline at <https://ohl.rainn.org/online/>.

Tenants who are or have been victims of stalking seeking help may visit the National Center for Victims of Crime's Stalking Resource Center at <https://www.victimsofcrime.org/our-programs/stalking-resource-center>.

**Attachment:** Local organizations offering assistance to victims of domestic violence, dating violence, sexual assault, or stalking.

## Appendix O: Document Ready Lists

[PSH Documents can be located on SSF's Website](#)

### Permanent Supportive Housing (PSH) Document-Ready List

- Valid Identification Document (ID)
- Social Security Card
- Homeless Certification (Expires after 90 days)
- Disability Certification (Never expires)
  - Fill out only ONE section of the form:
    - Section 1: Any staff member can fill this section out. Must upload proof of disability by written verification from the Social Security Administration (i.e. SSI, SSDI) or receipt of a disability check (e.g. Veteran Disability Compensation) onto HMIS.
    - Section 2: Must be signed by a license profession and include license number.
- Chronic Homeless Certification (Never Expires)
- 12 months of verified homelessness

This can be done through:

- Third Party Homelessness History Verification Form/ Third- Party Verification Letter
- Have experienced homelessness (as defined in #2) continuously for at least the last 12 months or at least 4 occasions in the last 3 years, where the combined occasions total at least 12 months.
  - Occasions must be separated by a break of at least seven nights
  - Stays in institution of fewer than 90 days count towards homelessness and do not constitute a break OR
  - An individual who has been residing in an institutional care facility for fewer than 90 days and met chronic status prior to admission to institutional care facilities
- A written observation by an outreach or intake worker, community member, or housing or service provider of encounters with the individual or head of household that includes a description of the conditions where the individual or head of household was living or is currently living.
- The outreach worker or intake worker cannot provide third-party documentation for months in which they did not encounter the individual or head of household
- One day of experiencing homelessness within a month will be counted towards the whole month
  - Ex. if a client is experiencing homelessness one day of the month for every month in January until April, that is 4 months of experiencing homelessness. It is also considered 4 separate episodes of homelessness.

- Family members do not count as a third party.
- o Self-Certification: Within the last 3 years; only up to 3 months can be self-certified
- o HMIS Homeless History Mapping Tool

If they have dependents/ minors:

- Birth Certificates and Social Security Cards (for all dependents)

**Rapid Rehousing (RRH) Document-Ready List:**

- Homeless Certification (Expires after 90 days)
- Valid Identification Document (ID)\*
- Social Security Card\*
- Birth Certificates and Social Security Cards (for all dependents) \*

\*Some programs work with client to obtain these after the referral is sent.



## Appendix P: Grievance Form



### Grievance Form

Grievant Name: _____	Date: _____
Email: _____	Phone Number: _____

Did anyone assist you in filling out this form?  Yes  No`

If yes, who? \_\_\_\_\_ Contact Information: \_\_\_\_\_

<b>Section 1. Date, Time, and Location of Events</b>

<b>Section 2. Details of the event (please include people if possible)</b>

<b>Section 3. How would you like to see this resolved?</b>

Client Printed Name: \_\_\_\_\_

Client Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Shelter Staff Received by (Printed Name): \_\_\_\_\_

Staff Signature: \_\_\_\_\_

Date Received: \_\_\_\_\_

<b>Section 4. To be completed by Coordinated Access System (CAS) Department</b>
Grievant Name: _____
Was the grievance resolved? <input type="checkbox"/> Yes <input type="checkbox"/> No
Date of resolution: _____
Steps taken to address grievance: _____ _____ _____ _____ _____ _____
CAS Department Statement: _____ _____ _____

CAS Staff Member reviewing the grievance: \_\_\_\_\_

CAS Staff Member Signature: \_\_\_\_\_

CAS Title: \_\_\_\_\_