# Prince William Area Continuum of Care Changes for Coordinated Entry: For Permanent Housing Solutions Due As Part of the CoC's COVID-19 Response

### **Background Information**

To continue to advance the Prince William Area CoC (PWA CoC) response to the on-going COVID-19 crisis, the Department of Social Services/Homeless Services Division would like to propose some key changes Coordinated Entry System (CES) Policies and Procedures. These changes are specific to the permanent housing policies centered around the prioritization of households for Rapid Re-Housing and Permanent Supportive housing solutions for persons that are homeless.

This CES Policies and Procedures would reflect additional updates that are currently being reviewed by the Governance Committee and set to reviewed before the CoC in July. Please note this is a constantly evolving crisis and response, and dates and policies are subject to change as the PWA CoC continues to refine its COVID-19 response.

As a CoC System we are encourage changes as system in which the CoC community partners will begin working on:

- Changing coordinated entry prioritization and expedited matching;
- System-wide landlord engagement; and
- Supporting efforts to reduce system-wide barriers to housing (i.e. ID and documentation requirements)

Please note: If there are no clients to meet the temporary COVID-19 prioritization the PSH/RRH admission committee will follow the prioritization procedure outlined in the PWA CoC Coordinated Entry System Policies and Procedures Manual Version 3.1 (July, 2020).

Program Type	Eligibility Entry Requirements	Prioritization Populations
Permanent Supportive Housing	Must meet HUD definition of	Households that have high VI-
	literally homeless (category 1).	SPDAT scores.
	Must be chronically homeless.	Households that have longer
		length of time homeless relative
	Must include at least one family	to other PSH eligible
	member with a disability.	households.
	Must meet any additional	Households containing a person
	eligibility criteria specified by	aged 60 years of age or older
	funding source.	with an underlying health
		condition such a preexisting
	Must have a completed VI-	blood disorder, kidney, liver,
	SPDAT.	heart or lung disease, diabetes,
		high blood pressure or any
		immunosuppressant illnesses.
		Households containing a person
		aged 60 years of age or older.

### **Proposed Housing Changes**

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Program Type	Eligibility Entry Requirements	Prioritization Populations
Rapid Re-Housing	Must meet HUD's definitions of: Literally homeless (Category 1) (all CoC funded projects) -or-	Households that have high VI- SPDAT scores relative to other households targeted for RRH and/or are deemed appropriate by way of Housing Priorities.
	Fleeing domestic abuse or violence (Category 4)	Households containing a person aged 60 years of age or older with an underlying health
	Must have income below 30% of AMI.	condition such a preexisting blood disorder, kidney, liver, heart or lung disease, diabetes,
	Must have a completed VI- SPDAT.	high blood pressure or any immunosuppressant illnesses. Households containing a person
	Must meet any additional eligibility criteria specified by funding source.	aged 60 years of age or older.

### Parking Lot Process that Need to be Addressed

The following are a list of matters that will need to be addressed should these policies be implemented:

- Aftercare services: Will it be possible for the CoC permanent housing programs to provide some level of aftercare services for persons that complete the program (i.e. Rapid Re-housing programs)? Aftercare follow-up will be a key component to ensure that households remain housed once they have completed a permanent housing program.
- Verification of underlying health conditions: For the most part, persons have been able to inform the CES during the intake of their health concerns, however, proof these medical concerns are not required due to CES being an call center and the need to expedite an emergency housing solution during current pandemic (COVID-19).
- Process needs to be established more information beyond the SPDAT: It is clear that some case managers/social workers are sound in completing the SPDAT; however, there is a need for additional information to be provided to obtain a complete picture of the barriers to housing and supportive services needed. This may mean additional meetings to discuss all households.