

Orange County Continuum of Care

Policy #: CE-CA602-15-007

Policy: Street Outreach

Effective Date:

Reviewed and approved by: Implementation Group #1 (IG1) - Outreach

Approved by Implementation Group #1 – Outreach on:

Approved by the Commission to End Homelessness on:

Background

The Coordinated Entry System (CES) is linked to street outreach efforts so that individuals and families sleeping on the streets are prioritized for assistance in the same manner as any other person reaching out to an emergency shelter or other housing provider. The CES is also linked to housing providers that serve as an in-reach site to assess and help prioritize individuals and families who are currently homeless and looking for assistance. The CES covers the Orange County Continuum of Care entire geographic area (per [Coordinated Entry Policy Brief](#), 2015).

The CES incorporates and defers to any funding requirements under the Continuum of Care (CoC) Program Interim Rule, Emergency Solutions grant (ESG) Program Interim Rule, or/and Notice of Funding Availability (NOFA) under which a project was awarded. In addition, the following is recommended as the minimum criteria for the effective implementation and management of a Coordinated Entry System, (per [Notice CPD-14-012](#)).

Standardized Assessment Tool –The assessment process should rely upon a standardized method and criteria to determine the appropriate type of intervention for individuals or families. This standardized process could encompass the CoC-wide use of a standardized assessment tool, as well as data driven methods. The Orange County Continuum of Care will be using the Vulnerability Index-Service Prioritization Decision Assistance Tool (VI-SPDAT), American Version 2.0 for Single Adults and for Families.

Street Outreach – The Coordinated Entry System should ensure that connections and ongoing engagement occurs with individuals and families not accessing services and housing on their own.

Applicability

At minimum all Continuum of Care (CoC) and Emergency Solutions Grants (ESG) funded Street Outreach Program recipients will abide by the Street Outreach Policy. The Orange County Continuum of Care will promote the utilization of this Street Outreach Policy among privately and alternatively funded Street Outreach in the County.

Additionally, this policy applies to Coordinated Entry Street Outreach teams who have signed the Coordinated Entry System – Street Outreach & In-Reach Teams Agreements and are conducting street outreach for the purposes of the Coordinated Entry System. These are trained street outreach teams

that are currently working or have demonstrated outreach to special or high acuity populations, understand the Transtheoretical Model, Progressive Engagement, and have a safety plan in place.

At minimum, Coordinated Entry Street Outreach teams will be trained in the following areas:

1. Coordinated Entry Policies & Procedures
2. Coordinated Entry Assessments
 - a. Pre Screening Tool
 - b. Coordinated Entry Intake
 - c. VI – SPDAT for Single Adults and Families
 - d. Housing Preference Survey
3. Record Keeping Requirements

As additional technology becomes available, Coordinated Entry Street Outreach teams will be trained in the following areas:

1. Homeless Management Information System (HMIS)
2. Coordinated Entry Module
3. Google Forms and Spreadsheets

Coordinated Entry Street Outreach teams must continue attending necessary trainings as the CES Administrator, or Implementation Group #1 – Outreach to At-Risk/Homeless.

Coordinated Entry Street Outreach must also commit to providing case management for chronically homeless individuals and families, homeless individuals and families, and individuals and families fleeing from domestic violence while waiting for a housing opportunity and as they transition to being housed.

Definitions

Case management includes assessing housing and service needs, arranging, coordinating, and monitoring the delivery of individualized services to meet the needs of the program participant. Eligible services and activities are as follows: using the centralized or coordinated assessment system as required under §576.400(d); conducting the initial evaluation required under § 576.401(a), including verifying and documenting eligibility; counseling; developing, securing and coordinating services; obtaining Federal, State, and local benefits; monitoring and evaluating program participant progress; providing information and referrals to other providers; and developing an individualized housing and service plan, including planning a path to permanent housing stability (**24 CFR 576.101**).

Category 1 – Homeless

An individual or family who lacks a fixed, regular, and adequate nighttime residence, which includes a primary nighttime residence of:

- Place not designed for or ordinarily used as a regular sleeping accommodation (including car, park, abandoned building, bus/train station, airport, or camping ground)
- Publicly or privately operated shelter or transitional housing, including a hotel or motel paid for by federal, state, or local government programs or charitable organizations;

In addition, an individual is considered homeless if he or she is being discharged from an institution where he or she has been a resident for 90 days or less and the person resided in a shelter (but not transitional housing) or place not meant for human habitation immediately prior to entering that institution.

Category 4 – Fleeing Domestic Violence

Any individual or family who:

- Is fleeing, or is attempting to flee, domestic violence, dating violence, sexual assault, stalking, or other dangerous or life-threatening conditions that relate to violence against the individual or a family member 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;
- Has no other residence; and
- Lacks the resources or support networks to obtain other permanent housing.

Chronically Homeless The definition of "chronically homeless" currently in effect for the CoC Program is that which is defined in the Defining "Chronically Homeless" Final Rule, 24 CFR parts 91 and 578, which states that a chronically homeless person is:

1. An individual who:
 - i. Is homeless and lives in a place not meant for human habitation, a safe haven, or in an emergency shelter; and
 - ii. Has been homeless and living or residing in a place not meant for human habitation, a safe haven, or in an emergency shelter continuously for at least one year or on at least four separate occasions in the last 3 years, where the cumulative total of the four occasions is at least 12 months and each break in homelessness separating the occasions included at least 7 consecutive nights of not living as described in paragraph (1)(i). Stays in institutions of 90 days or less will not constitute as a break in homelessness, but rather such stays are included in the cumulative total, as long as the individual was living or residing in a place not meant for human habitation, a safe haven, or an emergency shelter before entering the institutional care facility and
 - iii. Can be diagnosed with one or more of the following conditions: substance use disorder, serious mental illness, developmental disability (as defined in section 102 of the Developmental Disabilities Assistance Bill of Rights Act of 2000 (42 U.S.C. 15002)), post-traumatic stress disorder, cognitive impairments resulting from brain injury, or chronic physical illness or disability;
2. An individual who has been residing in an institutional care facility, including a jail, substance abuse or mental health treatment facility, hospital, or other similar facility, for fewer than 90 days and met all of the criteria in paragraph (1) of this definition, before entering that facility; or
3. A family with an adult head of household (or if there is no adult in the family, a minor head of household) who meets all of the criteria in paragraph (1) or (2) of this definition, including a family whose composition has fluctuated while the head of household has been homeless.

Street Outreach (SO) provides "essential services necessary to reach out to unsheltered homeless people; connect them with emergency shelter, housing, or critical services; and provide urgent, non-facility-based care to unsheltered homeless people who are unwilling or unable to access emergency shelter, housing, or an appropriate health facility (**24 CFR 576.101**)."

Coordinated Entry Street Outreach – Programs that are staffed by outreach workers who spend time with people and with special and high acuity populations without housing, build relationships with them, identify and address their needs, and assist with linkage to direct services. Coordinated Entry Street Outreach Teams also address the individuals and families housing needs by completing Coordinated Entry assessments and ongoing engagement occurs with individuals and families not accessing services and

housing on their own and also provides client follow-up while the client waits for a housing opportunity and as they transition to being housed.

Policy

Coordinated Entry Street outreach will target chronically homeless individuals and families, homeless individuals and families, and individuals and families fleeing from domestic violence. Coordinated Entry Street outreach will focus on getting individuals and families off the streets and into housing through a standardized assessment tool. Street outreach workers will build a rapport with individuals and families. Through a phased assessment process outreach will conduct a prescreening and referrals to divert or prevent anyone from entering the homeless system. In cases where prevention and diversion are not possible, outreach will begin the VI – SPDAT assessment process and refer the client to the Coordinated Entry System.

Coordinated Entry Street outreach will identify and assist with other resources available to the individual or family while housing is being secured.

At minimum, Coordinated Entry Street Outreach will provide case management while the individual or family wait for a housing opportunity through CES and 30 days following a housing placement as a hand-off period with the permanent housing provider. The case management provided will include helping individuals and families collect the documentation as indicated in Attachment A – Housing Document Checklist. Coordinated Entry Street Outreach will also provide follow up and updates as necessary for the Coordinated Entry Assessments, collect verification of length and episodes of homelessness and disabling condition per Recordkeeping Requirements, and linkage to additional supportive services as needed.

Attachment A – Housing Document Checklist

Housing Documents Checklist

Required Documents for PSH and RRH		Complete	Notes
1	<ul style="list-style-type: none"> • Pre-Screening Tool • VI-SPDAT • Housing Preference Survey 		
2	HMIS Client Consent Form *all persons 18 & over must complete		
3	Declaration of Homelessness Status Form (including one of the following)		
	(1) Third Party Verification		
	(2) Outreach Worker Observation		
	(3) Self-Certification		

Additional Required Documents for PSH

4	Chronic Homeless Status Form (including one of the following)		
	(1) Third Party Verification		
	(2) Outreach Worker Observation		
	(3) Self-Certification		
5	Disabling Condition Verification (including one of the following)		
	(1) Written verification of the condition from a professional licensed by the state to diagnose and treat the condition		
	(2) Written verification from the Social Security Administration		
	(3) Copies of a disability check (e.g. social security disability check or Veterans Disability Compensation)		

Optional Documents

1	Copy of Identification (DL and/or ID) *for all adults (18 & older)		
2	Copy of SS Cards *for ALL household members		
3	Copy of Birth Certificates *for all children (17 & younger)		
4	Verification of income *for all adults (18 & older)		
5	Companion Animal Letter		