

HENNEPIN COC

COORDINATED ENTRY



# Hennepin Continuum of Care: Coordinated Entry System Policies and Procedures Manual

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## Prepared by the Hennepin County Office to End Homelessness

In 2013, the Hennepin County Office to End Homelessness (OEH), on behalf of the Heading Home Hennepin Strategic Plan and the Minneapolis/Hennepin County Continuum of Care, initiated a process to improve the delivery of housing and crisis response services and assistance to families and individuals who are homeless or at imminent risk of homelessness throughout Hennepin County by redesigning the community's process for access, assessment, and referrals within its homeless assistance system.

This process, the Hennepin Coordinated Entry System (CES) institutes consistent and uniform access, assessment, prioritization, and referral processes to determine the most appropriate response to each household's immediate housing needs. This new system of Coordinated Entry (CE) is not only mandated by HUD and many other funders, but is recognized nationally as a best practice, can improve efficiency in large systems like Hennepin CoC and can help serve more people more quickly and efficiently with assistance targeted to address their housing needs.

This CES Policies and Procedures document is an operational manual, providing guidance and direction for the day-to-day operation, management, oversight, and evaluation of Hennepin CoC's CE approach. This manual will be updated and revised by Hennepin County's Office to End Homelessness, in conjunction with the CES Leadership committees, on an ongoing basis as the actual application and practical experience of CES design principles are refined and improved. The Policies and Procedures manual is a publicly available document. Please refer to <https://www.hennepin.us/coordinated-entry> to view the most up to date version of this document as well as up to date forms and materials.

Version	Date Released	Key Changes
1.0	August 11, 2016	N/A
2.0	September 2018	
3.0	October 2019	<ul style="list-style-type: none"><li>• HMIS</li><li>• Category 4 Access</li><li>• Grievance and Appeals</li><li>• Veteran Policy</li><li>• Transfer Policy</li></ul>
4.0	October 2021	<ul style="list-style-type: none"><li>• VI-SPDAT Removal</li><li>• Updated Transfer Policy</li><li>• Multiple Denial Policy</li><li>• Assessor Determination Policy</li><li>• Assessor Role edit</li></ul>
5.0	April 2023	<ul style="list-style-type: none"><li>• Referral Timeline Expectations</li><li>• Training</li><li>• Updated Transfer Policy</li><li>• </li></ul>
6.0	January 2025	<ul style="list-style-type: none"><li>• Updated Transfer Policy</li><li>• Updated Emergency Transfer Plan (To include DAP)</li><li>• Unable to Fill Vacancy Policy</li></ul>

	<ul style="list-style-type: none"> <li>• Updated Singles Prioritization (to include medical fragility)</li> <li>• Updated New ROI language in Appendix</li> <li>• Provider expectations after referral</li> <li>• Added new Homeless Response System Survey under grievances section</li> <li>• Added new pre-referral eligibility checks conducted by Priority List Coordinators</li> <li>• Combined Singles and Family P&amp;Ps into unified document</li> </ul>
7.0 May 2025	<ul style="list-style-type: none"> <li>• Updated transfer policy</li> <li>• Updated re-referral policy</li> </ul>

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## Introduction and Purpose

CES is Hennepin Continuum of Care's approach to organizing and providing services and assistance to persons experiencing a housing crisis throughout Hennepin County. Persons who are seeking homeless services are directed to defined entry points, assessed in a uniform and consistent manner, prioritized for housing and services, and then linked to available interventions in accordance with the intentional service strategy defined by Hennepin's CoC leadership. Each service participant's acuity level and housing needs are aligned with a set of service and program strategies that represent the appropriate intensity and scope of services needed to resolve the housing crisis.

CES provides referrals to housing programs with homeless dedicated units. These programs receive specific federal, state, county, or city funding that requires their participants in the CES.

The CES design is informed by local planning efforts including homeless assistance providers from programs serving families, single adults, youth, and persons fleeing domestic violence.

## Guiding Principles

The design, operation, and evaluation of CES is informed by a set of Guiding Principles established by the Hennepin CoC CES Leadership Team and adopted by the Hennepin County/Minneapolis.

### Principle 1: Ensure service accessibility

- Allow anyone who needs homeless services to know where to get help and be able to access services as promptly as possible through an assessment process that is consistent and respectful
- Ensure staff conducting assessments are trained and competent in the assessment process

### Principle 2: Prioritize swift exit from homelessness

- Facilitate exits from homelessness in the most rapid and appropriate manner possible given available resources; shelter is not housing

### Principle 3: Align services to client need

- Ensure a homeless response system that includes a variety of program models targeted to serve a range of subpopulations driven by an analysis of client needs
- Ensure that clients gain access as efficiently and effectively as possible to safe placement options and the type of intervention most appropriate to their immediate and long-term housing needs and preferences
- Ensure that the CES is sufficiently flexible to enable tailored responses to individual client needs and circumstances

### Principle 4: Prioritize services for clients with the greatest need

- Establish uniform, consistent eligibility criteria and prioritization standards
- Limit eligibility criteria to those required by funding sources or other formal external requirements (i.e. tax credit requirements) to end homelessness for all people as promptly as possible
- Ensure that people who have been homeless the longest and/or are the most vulnerable have priority access to the project model to which they have been matched

## Principle 5: Build a system that works efficiently and effectively for clients, referral sources, and receiving programs

- Ensure clarity, transparency, consistency and accountability for homeless clients, referral sources and receiving programs throughout the assessment and referral process
- Incorporate provider and client choice in enrollment decisions, including the ability to opt into a less-intensive intervention
- Promote collaboration, communication, and knowledge sharing regarding resources among providers

## Principle 6: Invest in continuously strengthening the system

- Leverage Homeless Management Information System (HMIS) data and infrastructure whenever possible for system evaluation, monitoring, and client care coordination and ensure data quality
- Limit data collection to that which is relevant to the CE process
- Continue to make enhancements to the CES in response to emerging findings and needs and changes in City, State or Federal policy
- Continuously invest in opportunities to build provider capacity and enable more efficient and effective services

## Process for creating and amending the CES Policies and Procedures

CES Policies and Procedures, governing the management and oversight of Hennepin CES, shall be documented in the Hennepin County Policies and Procedures Manual. Updates and changes will be reviewed annually and approved by the CES Leadership Committee. Concerns about existing policies and procedures should be directed to the Chair of the Leadership Committee.

Provider engagement on the process and procedures will be critical in ensuring this CES works as well as possible. The leadership committee will solicit feedback from existing community committees to identify pain points in the system, these groups will include:

- |  |                                       |
|--|---------------------------------------|
| - Shelter Collaborative                                    | - Family Case Conferencing            |
| - HMIS User Group  | - Chronic Case Conferencing           |
| - LTH Housing Support Provider Meeting                     | - Hennepin County Youth Collaborative |
| - Homeless Prevention & Rapid Rehousing Advisory Committee | - Street Voices of Change             |
| - HUD McKinney-Vento CoC Funding Committee                 | - Unsheltered Community Meeting       |
| - Youth Case Conferencing                                  |                                       |
| - Veteran's Leadership Committee                           |                                       |

Beyond that, the CES website ([www.hennepin.us/coordinated-entry](http://www.hennepin.us/coordinated-entry)) will provide a clearinghouse for up to date information, forms, news, and a chance to provide feedback.

## Staffing Roles and Participation Responsibilities

### CES Leadership Committee

Oversight and monitoring of CE functions is conducted by the Leadership Committee of Hennepin CoC stakeholders to ensure consistent application of CES policies and procedures and high-quality service delivery for persons and families experiencing a housing crisis.

The Leadership Committee shall meet monthly to monitor progress, hear appeals, assess progress, and implement changes and updates to CES operations. Meeting minutes will be published publicly on the Hennepin CES website. Subcommittees shall be defined and created as necessary.

Membership is comprised of Hennepin CoC stakeholders originally selected via an application process facilitated by the Housing Stability Area of Hennepin County. Members serve three-year terms and are not eligible for re-nomination. Initially, this turnover will be staggered to ensure continuity in planning. As the openings in the Leadership Committee occur, the process of filling those spaces will be facilitated by members of the Leadership Committee itself with support from Hennepin County staff.

Membership is drawn from the following providers and population stakeholders:

- Black, Indigenous, People of Color Agency Representative
- Assessor Agency
- Domestic Violence Organization
- Shelter System
- Specialty Population (HIV/AIDS, LGBTQ, culturally specific)
- Housing Provider Service Representative
- Schools and Education Sector (PSH & RRH)
- Health/Mental Health
- State or Local Government Employee
- Lived experience or currently homeless
- Landlord / Property Manager
- Unsheltered Agency Representative
- Youth Provider Representative

The Leadership Committee will be led by appointed Co-chairs who are responsible for the following but not limited to:

- Soliciting monthly agenda items and compiling monthly agendas
- Facilitating monthly meetings
- Onboarding new members with CES staff

Co-chairs will serve a minimum two-year term commitment.

### *Roles:*

1. Review CES **operations** on a monthly basis and establishes and/or updates CES Policies and Procedures as necessary and in accordance with Guiding Principles
2. Approve an annual CES **evaluation plan** and reviews evaluation results prepared/compiled by Housing Stability. Evaluation findings and results are to inform updates and changes to CES operational practices
3. Review and approve all supporting CES **documentation**, including but not limited to, participation agreements among CoC and participating agencies, assessment tools, prioritization criteria and tools, case conferencing protocols, etc.



4. Review and respond appropriately to system grievances
5. Annually revise, review, and approve the CES Policies and Procedures Manual. Community members who are interested in submitting suggestions for revision to the document should submit them to [CES.Hennepin@hennepin.us](mailto:CES.Hennepin@hennepin.us).
6. Act as ambassadors – communicating CES information, decisions, and policies back to their respective agencies and homeless response system community

## Hennepin County Housing Stability Area – Policy and Planning

Hennepin County Housing Stability Area includes all staff associated with community planning, CES Team, HMIS staff, and CoC management staff.

1. Provide staff support to the CES Leadership Committee
2. Conduct CES analysis, evaluation, monitoring, and review
3. Maintain CES documentation tools and resources necessary to manage CES access points, ensure concise assessment, prioritize most vulnerable persons and families for assistance, and ensure timely linkage of persons to available housing and services
4. Provide guidance, training, capacity building support, communication updates, and other project support as needed to ensure all CES participating providers and referral sources have information and resources as necessary to operate and participate in CES successfully
5. Create and widely disseminate outreach materials to ensure that information about the services available through the CES and how to access those services is readily available and easily accessible to the public
6. Design and deliver training for Assessment Entities and homeless assistance providers throughout Hennepin County
7. Regularly review and analyze HMIS data, including reports on system-wide performance measures that will help gauge the success of the CES, including clients receiving diversion assistance, and completion of assessments
8. Participate in CES Leadership Committee

## Hennepin Coordinated Entry System (CES) Team

The CES Team provides coordination of services and referral management for Hennepin’s homeless continuum.

Primary responsibilities include the following:

- A. Oversight of day-to-day operations of CE Referral System
  - Oversees vacancy reporting, priority list management, and referral functions to:
    - facilitate exits from homelessness in the most rapid manner possible given available resources
    - ensure that clients are appropriately matched to the type of intervention most aligned with their immediate and long-term housing needs and preferences
    - ensure that people who have been homeless the longest and/or are the most vulnerable have priority access to the project model to which they have been referred
  - Oversees assessment functions to ensure client needs and preferences are promptly, regularly, respectfully, consistently, and accurately determined
  - Participates in case conferencing functions to review and resolve rejection decisions by receiving programs and refusals by clients to engage in a housing plan
  - Oversees appeals processes to resolve client grievances regarding eligibility decisions in accordance with relevant policies and procedures

- Uses data in HMIS to manage client and program level data including assessments, priority list, referrals, and referral outcomes

#### **B. Coordination with and Support for Partners**

- Assists in the design and provision of ongoing training for County staff and community partners conducting assessments
- Assists in planning and execution of a strategy to regularly obtain provider and consumer input and promote collaboration, communication, and knowledge sharing regarding resources among community stakeholders
- Leads coordination efforts with other local and state-wide CE efforts
- Develops and maintains strong working relationships with referring and receiving agencies including comprehensive knowledge of program types and provider attributes

#### **C. Compliance**

- Oversees referral functions in a manner that is in accordance with established eligibility criteria and prioritization standards
- Oversees updates to policies and procedures for the CES

#### **D. Program Evaluation, Quality Assurance and Quality Improvement**

- Leveraging HMIS data and infrastructure whenever possible, leads regular evaluation efforts to assess the extent to which the CES is:
  - achieving established performance objectives
  - providing clarity, transparency, consistency and accountability for homeless clients, referral sources and receiving programs
  - sufficiently flexible to enable tailored responses to individual client needs and circumstances
- Identifies opportunities to adjust the CES to strengthen performance
- Assists in implementation of process improvement adjustments
- Works to ensure that evaluation and adjustment processes are informed by a broad and representative group of stakeholders

### **Convene**

Convene LLC. is a contracted consulting entity that provides deliverables to assist in the ongoing planning, monitoring, and evaluation of the CES. Technical assistance is for the community and CE partners.

Will conduct the following activities:

- Research, observation, and stakeholder interviews
- Develop and inform CoC regarding emerging best practices
- Conduct ongoing system monitoring
- Assist in system automation improvements
- Create long term capacity for sustaining system compliance, evaluation, and monitoring
- Conduct regular trainings for housing providers and assessors

## Hennepin Coordinated Entry Assessor Role Description

All trained assessors are expected to be approved by Hennepin CES Team prior to obtaining access to Hennepin CES EDAs in HMIS and/or CES Connect. Determination of assessor is based on Assessor Determination policy (Appendix J). Assessors unable to comply with Hennepin CoC's CES Assessor Role will be asked to complete additional assessor training.

For Assessors completing assessments in HMIS:

- Complete HMIS New User Training with ICA
- Purchase HMIS User License
- Complete Hennepin specific Assessor Training

For Assessors completing assessments in CES Connect:

- Complete CES Connect training with Hennepin CES team
- Complete Hennepin specific Assessor Training

Assessors are expected to:

1. Assure compliance with data privacy and policies, including having those assessed sign the HMIS ROI as applicable and the CES ROI for all assessments completed. Please note, failure to complete CES ROI will result in removal from priority list.
2. Follow CES Process to complete assessment questions to determine appropriate service connections, linkages, and referrals
3. All assessments must be completed and submitted through HMIS or CES Connect by the trained assessor. Third party data entry is detrimental to the system and is not permitted.
4. Complete assessments in HMIS under the Hennepin CES Assessment EDA
5. Data entry of assessment and notes must be entered into HMIS or CES Connect within 3 business days from completed assessment
6. Assessors will receive notification of HMIS errors in the assessment (if applicable), corrections must be completed within **30 days** of receiving email
7. Contact the client and update assessment at least **once per month until the person** is removed from CE Priority List. Denote contact in "Current Living Situation" in assessment
8. Communicate limitations of CES system i.e., housing is not guaranteed, only homeless dedicated housing filled through CE, etc.
9. Aid clients in obtaining vital documents, store in appropriate application and denote in assessment
10. Remove individuals assessed when a person is no longer eligible for housing through CES or no longer in need
11. Attend required HMIS, CoC, and CES trainings
12. Provide feedback for annual CES evaluation
13. Attend annual Assessor Renewal Training
14. Facilitate a warm hand off to the Housing Provider if a referral is made. This includes but is not limited to, contacting the client to advise them of referral, facilitating communication between the client and housing provider, and providing saved vital documentation from time of assessment. Denote handoff in "Current Living Situation" sub assessment.
15. Assessor or Assessor's supervisor will notify CES Staff when the assessor is leaving the position and will no longer be assessing. Agency staff must update all completed assessments to reflect a change in point of contact (i.e., since the original assessor is no longer available, agency must provide new staff to act as assessor role). New assigned assessor will resume monthly contacts and warm handoff to housing provider if referral is made.
16. Assessors will be removed after 6 months of inactivity

### Assessor Performance Measures

For purposes of tracking performance measures, an Assessor Error is defined as an error that prevents the Priority List Coordinator from making a referral because the assessment is lacking in information needed. Both Priority List Coordinators and Convene LLC will provide ad hoc assessor assistance, technical assistance, guidance, and training as needed.

\*With upcoming HMIS transition to ClientTrack, new performance measures and improvement plans will be adopted.

### Onboarding of New Assessors

Onboarding starts with an online training, [New User Online Training](#), that new assessors can take at any time. Please notify the CES team at [CES.Hennepin@hennepin.us](mailto:CES.Hennepin@hennepin.us) once HMIS New User Training is completed. Upon completion, you will receive EDA access to assess to the Hennepin CES Assessment in HMIS.

New assessors are also required to attend a live training with Convene LLC., our contracted trainer. These live trainings are held every other month. (e.g. January, March, May, July, September, November)

### Annual Assessor Renewal

Training required to remain assessors moving forward. The training is offered in the fall and must be completed by the 1/1 of next year. The training consists of System Updates, HMIS training, and best practices for assessors.

### Hennepin County – HMIS Local System Administrator

1. HMIS Staff maintain HMIS database in accordance with the Local System Administrator (LSA) role as defined by the Minnesota HMIS
2. Housing Stability staff and HMIS LSA generate ad hoc CES reports and analysis as determined by the CES Leadership Committee and COC staff
3. Participate in other planning efforts as appropriate

### HMIS State System Administrator

1. Housing Stability staff and HMIS State System Administrator generate standard CES reports on an ongoing basis as defined by the CES Leadership Committee and Statewide CES Workgroup
2. Ensuring HMIS can collect the needed data for monitoring and tracking the process of referrals and system outcomes

### Hennepin County homeless assistance providers participating in CES

1. **Adopt and follow CES policies and procedures.** CES participating providers shall maintain and adhere to policies and procedures for CES operations as identified in this CES Operations Manual, and as established by the CES Leadership Committee for access points, assessment procedures, client prioritization, and referral and placement in available services and housing. Annually sign and adhere to CES Participation Agreement (See Appendix K).
2. **Annually, review, sign, adhere to the CES Participation Agreement** (see Appendix K). This agreement outlines what it means to a part of the CES and provides the provider's project specific information.

3. **Maintain low barrier to enrollment.** Homeless providers shall limit barriers to enrollment in services and housing. No client may be turned away from crisis response services or homeless designated housing due to lack of income, lack of employment, disability status, or substance use unless the project's primary funder requires the exclusion or a previously existing and documented neighborhood covenant/good neighbor agreement has explicitly limited enrollment to clients with a specific set of attributes or characteristics. Providers maintaining restrictive enrollment practices must maintain documentation from project funders, providing justification for the enrollment policy.

CoC providers offering Prevention and/or Short-Term Rapid Rehousing assistance (i.e. 0 – 24 months of financial assistance) may choose to apply some income standards for their enrollment determinations as determined by the funding source.

4. **Maintain Fair and Equal Access.** CES participating providers shall ensure fair and equal access to CES system programs and services for all clients regardless of actual or perceived race, color, religion, national origin, age, gender identity, gender expression, pregnancy, citizenship, familial status, household composition, disability, Veteran status, or sexual orientation.

If a program participant's gender identity or expression, or household composition, creates challenging dynamics among residents within a facility, the host program should make every effort to accommodate the individual or assist in locating alternative accommodation that is appropriate, provides equivalent quality of services, and is responsive to the individual's needs. Clients will never be forced to use alternative facilities as an accommodation for another client's discomfort about their gender identity or expression.

CES participating providers shall offer universal program access to all subpopulations as appropriate, including chronically homeless individuals and families, Veterans, youth, persons and households fleeing domestic violence, and transgender persons.

Population-specific projects and those projects maintaining affinity focus (e.g. women only, tribal nation members only, etc.) are permitted to maintain eligibility restrictions if discrimination within said identity groups is not occurring. Any new project wishing to institute exclusionary eligibility criteria will be considered on a case-by-case basis and receive authorization to operate as such on a limited basis from the Leadership Committee and their funders.

5. **Provide appropriate safety planning.** CES participating providers shall provide necessary safety and security protections for persons fleeing or attempting to flee family violence, stalking, dating violence, or other domestic violence situations. Minimum safety planning must include a threshold assessment for presence of participant safety needs and referral to appropriate trauma-informed services if safety needs are identified.
6. **Create and share written eligibility criteria.** Provide detailed written guidance for client eligibility and enrollment determinations. Eligibility criteria should be limited to that required by the funder and any requirements beyond those required by the funder will be reviewed and a plan to reduce or eliminate them will be discussed. Include funder specific requirements for eligibility and program-defined requirements such as client characteristics, attributes, behaviors, or histories used to determine who is eligible to be enrolled in the program. These standards will be shared with Housing Referral Coordinators as well as funders.

7. **Communicate vacancies.** Homeless providers must communicate project vacancies, either bed, unit, or voucher, to the CES team in a manner determined by the CES Leadership Committee and outlined in this Operations Manual.
8. **Limit enrollment to participants referred through the defined CES access point(s).** Each bed, unit, or voucher that is required to serve someone who is homeless must receive their referrals from the CES. Any agency filling homeless mandated units from alternative sources will be reviewed with funders for compliance. A finite number of boutique programs serving distinct populations may receive a waiver for this clause but will need to provide CES with detailed engagement and eligibility plans. CES access points will need to be informed of every opening and how and when they were filled.
9. **Participate in CES planning.** CoC projects shall participate in Hennepin's CoC CES planning and management activities as defined and established by the CES Leadership Committee.
10. **Contribute data to HMIS if mandated per federal, state, county, or other funder requirements.** Each provider with homeless dedicated units will be required to participate in HMIS to some extent. Providers should check with funding sources to determine what forms they will need to complete in HMIS.
11. Despite funding sources, all homeless providers, including but not limited to housing providers, will manage CES referrals in HMIS.
12. Participate in population specific case conferencing on a regular basis
13. **Ensure staff who interact with the CES process receive regular training and supervision.** Each provider must notify the CES team to changes in staffing, in order to ensure employees have access to ongoing training and information related to CES
14. **Ensure client rights are protected and clients are informed of their rights and responsibilities.** Clients shall have rights explained to them verbally and in writing when completing an initial intake. At a minimum, client rights will include:
  - The right to be treated with dignity and respect
  - The right to appeal CES decisions
  - The right to be treated with cultural sensitivity
  - The right to have an advocate present during the appeals process
  - The right to request a reasonable accommodation in accordance with the project's tenant/client selection process
  - The right to accept housing/services offered or to reject housing/services
  - The right to confidentiality and information about when confidential information will be disclosed, to whom, and for what purposes, as well as the right to deny disclosure

## Communication roles, responsibilities, and methods

With multiple stakeholders involved in the CES, it is important to know who is responsible for conveying information, how are they deliver that information, and when they are expected to do it. In this section we outline the roles and responsibilities of different stakeholders and give an overview of the methods used to communicate information.

### Communication roles and responsibilities

Entity	Role	Responsibility
Leadership Committees	<p>The CES Leadership Committees are responsible for establishing participation expectations for CE, determining local data collection and data quality expectations for CE, defining data sharing protocols and selecting a Data System for CE.</p> <p>The committees are comprised of various Hennepin County stakeholders to ensure consistent application of CES policies and procedures and high-quality service delivery for persons and families experiencing a housing crisis.</p>	<p>Monthly: Chairs meet with CES Team, Leadership team meetings,</p> <p>Quarterly: workplan updates</p> <p>Annually: Membership, new workplan, CE Evaluation</p> <p>As needed: onboard new members</p> <p>Members are expected to communicate updates with the group they are representative of.</p>
HC CES Team	Designated as the CE Management Entity and is expected to establish day-to-day management structures, develop and implement a clear, accessible communication plan, promote standardized screening and assessment processes, develop and deliver training, and conduct monitoring of projects that are participating in the CE system. Overall, provide oversight and management to the CES	Annually: updates to key stakeholders
HC Communication Planner	CES Communications Workgroup, leadership committee meetings as needed	<p>Monthly: CES Communications workgroup, leadership committee meetings as needed</p> <p>Annually: Publication of P&amp;P</p>
Convene	Convene is an organization that is contracted to provide training.	<p>Monthly: Assessor Training Tips</p> <p>Quarterly: CES 101</p>

### Communication Methods

Topic	Description	Frequency
CES Scoop	The Scoop is the primary method to communicate with the general CES audience. It is expected that all primary stakeholders in the CES read the Scoop.	Monthly, occasionally as needed
CES Website	The website is a central place for both service providers and participants in CE to go to obtain information	<p>Updated as needed</p> <p>Annually: thorough review</p>

CES Provider Contact List	The provider contact list contains contact information for all CES housing projects	The Provider Contact List is updated quarterly. It is used as needed
Assessor Email List	The Assessor email list contains contact info for all CES Assessors	As needed
Leadership Committee Members	Committee members should be sharing CES updates with the groups they represent	As needed
CES 101	CES 101 provides a basic overview of the CES to the community	Quarterly
CES Leadership Committee meetings	The Leadership Committee meetings are a forum for members, CES Team to update and progress CE business	Monthly
CES Communication Planning meeting	Meeting between CES Team, and Comm Planner to discuss external communication	Bi-weekly
Co-chair and CES Team meeting	Coordinating meeting	Monthly

## Case Conferencing

The goal of case conferencing is to discuss households from the priority list/by name list to identify supports and ensure appropriate housing referrals, brainstorm housing solutions, collaborate across providers, all with the ultimate goal of moving people into housing as quickly as possible. Reoccurring case conferences occur for youth, families, and chronic households. Case conferencing teams consist of HC CES Staff, HC Shelter Team staff, shelter providers, housing providers, case managers, etc. focus on:

- Pending referrals
- Bottom of the priority list (least likely to receive a referral)
- Recidivist households
- Updates on households with CES referrals
- Housing opportunities outside CES

## Access Policies

The four central components of the CES are Access, Assessment, Prioritization, and Referral. The Hennepin CoC utilizes these terms to establish continuity of services. The goal of access is that all people in the CoC's geographic area have fair and equal access to the CE process, regardless of where or how they present for services.

Access to the CES is available through three routes; staying in Emergency Shelter, staying in a place not meant for human habitation, and meeting HUD Category 4- Fleeing and Attempting to Flee Domestic Violence. Households need to be 16+ and have a "tie to Hennepin CoC".

## Emergency Shelter

For singles, assessment will be offered once in a Hennepin shelter. If individual is staying in community shelter where no trained Hennepin CES assessor is present, individual can contact the dedicated HC CES assessors to schedule an assessment.



For families in shelter, the family head of household will be contacted to set up a CE assessment. If not contacted, they can reach out to Agate Next Step Assessors at 612-361-4751 or fill out the [Families Coordinated Entry referral form](#) to set up a CES assessment appointment.

### **Staying in a Place Not Meant for Human Habitation or Community Shelter**

Unsheltered individuals can be connected with a street outreach agency and receive an assessment for CES through a worker. If individuals are not engaged with any street outreach agency, they can connect with the dedicated HC CES assessors to schedule an assessment. Visit CES website for contact information.

Unsheltered families can reach out to Agate Next Step Assessors at 612-361-4751 or fill out the [Families Coordinated Entry referral form](#) to set up a CES assessment appointment.

### **HUD Category 4: Fleeing/Attempting to Flee Domestic Violence**

Individuals can be assessed for CES by any assess point, however, if they want to be assessed through a Victim Service Provider, they can reach out to the contracted Domestic Violence assessors at [The Domestic Abuse Project](#).

Families are assessed by Agate Next Step Assessors, however, if they want to be assessed through a Victim Service Provider, they can reach out to the contracted Domestic Violence assessors, [The Domestic Abuse Project](#).

## **CES Assessment**

### **Assessment**

Assessment shall only take place for households experiencing literal homelessness or Hud Category 4 fleeing or attempting to flee domestic violence. It shall also only involve the collection of information essential to ascertain the immediate crisis and match the client to the appropriate interventions. The CES assessment process shall include the following:

- Document the household's homelessness history and housing barriers. Gather sufficient information to allow for appropriate placement and for the creation of an accurate housing and service plan to address a client's needs.
- Respect household preferences. Ask direct questions about needs and preferences of the client to ensure the best assessment.
- Capture enough data to meet project needs and funder requirements while using trauma informed care to reduce impact on the client.
- Obtain consent for sharing data with providers. Comply with local, State, and Federal requirements. Including, the CE Release of Information and for those participating in HMIS, the HMIS Release of Information.
- Draft, or at least initiate, a housing plan. Work with clients to begin development of a housing plan that can be transferred to the next stage of service.
- Standardized practice. Apply standard practices at every point of entry for every client to ensure consistent assessments.

## Assessment Workflow

CES providers shall administer the CES Assessment as defined by the CES Leadership Committee. The assessment process must be standardized with uniform decision-making across all assessment locations and staff. If access points or assessment processes are conducted or managed by providers who do not receive HUD, State of Minnesota, or Hennepin County funds, those providers shall nevertheless abide by assessment standards and protocols defined by the CES Leadership Committee. CES will operate using a client-centered approach, allowing clients to freely refuse to answer assessment questions and/or refuse referrals.

1. Households who have been identified as being eligible for a CES assessment will be assessed by a trained CES assessor.
2. Assessments will be completed in HMIS or CES Connect. If assessing agency is unable to complete assessments in HMIS or the household opts out of their information being shared in HMIS, Assessor staff will complete assessment via the secure Hennepin County application named CES Connect.
3. Once assessment is completed in HMIS or CES Connect, the household is placed on the priority list which determines future referrals to homeless dedicated housing.
4. Clients may reject a housing referral.
5. Households that leave shelter, that have been assessed for coordinated entry, should be made aware, if they go to a non-HC shelter or place not meant for human habitation, they are still eligible for CE and should communicate their new location to the CES team.
6. The priority list is for households who meet the definition of HUD Category 4 Population – Fleeing and/or Attempting to Flee Domestic Violence have the option of being assessed by a designated domestic violence service agency. If an individual chooses this option, the following workflow will apply:
  - a. Households who meet the HUD Category 4 definition can be referred for assessment directly from their local domestic violence shelter and/or agency to a designated domestic violence assessing agency.
  - b. Designated domestic violence assessing agency will return and schedule CES Assessment within 10 business days.
  - c. Domestic violence assessing agency will complete full CES Assessment, Release of Information (Appendix B) and Fleeing Violence Verification Form (Appendix F) with household.
  - d. CES Assessments will be completed via the secured application titled CES Connect. Assessing agency will store Fleeing Violence Verification Form for screened individuals and provide to housing provider if individual is referred.
  - e. Households will be prioritized equitably with all other households who have been assessed for CES.

## Updating an Assessment

Updating an assessment should be completed within HMIS following the directions for interim updates offered by Hennepin County and ICA unless the client has opted out of HMIS.

Examples of why an assessment should be updated include:

- a. Any change happened that needs to be reflected in the CES assessment
- b. A change to program preferences
- c. A client's housing history or homeless status has changed since point of assessment
- d. Income amount has changed
- e. New disability information is diagnosed or disclosed
- f. Contact and/or whereabouts have changed
- g. Program preferences and housing needs are learned and should be documented in notes
- h. A client has encountered a significant life change or event, which may directly impact and change the type of housing intervention they receive
- i. If a single adult or youth becomes pregnant or parenting, they are eligible for re-assessment in the family system
- j. If a family loses custody of a child/children, they are eligible for re-assessment in the singles system

## Prioritization

Only households who are experiencing literal homelessness or HUD Category 4 Fleeing or Attempting to Flee Domestic Violence are eligible to be prioritized for a referral.

Hennepin CoC CES is undertaking the change of static prioritization to dynamic prioritization. Households are prioritized based off designated prioritization criteria (see below). All available housing resources are offered to the households who need them most acutely in that moment, regardless of whether the household may/or could be better served in the future by a type of program that is not available at that time. By selecting a higher acuity household and having them housed more quickly the result is less time "waiting." Continued changes will be implemented until the system fully implements dynamic prioritization.

### CES Prioritization for Singles

Households will be referred to homeless dedicated units according to the following prioritization criteria:

1. Medical Fragility (Based on assessment score of medical vulnerability; 0-9)
2. Chronically Homeless? (Descending order: Yes, No, Missing)
3. HUD Months Homeless (Descending order)

### CES Prioritization for Families

Households will be referred to homeless dedicated units according to the following prioritization criteria:

1. Disability? (Descending order: Yes, No, Data not collected, Client doesn't know, Missing).
2. Chronically Homeless? (Descending order: Yes, No, Missing)
3. HUD Months Homeless (Descending order)

## Prioritizing on chronic by-name list

### Chronic Homelessness Definition

A household is considered chronically homeless if they are living with a disability and have been experiencing homelessness for at least 12 months consecutively or for at least 4 separate occasions (episodes) in the last 3 years, with the episodes equaling at least 12 months and each break in homelessness separating the occasions being 7 consecutive nights in length. Households can self-verify their homelessness for a maximum of 3 months.

### Chronic Homelessness by Name List Documentation Policy

Households are added to the Chronic by Name List based on verifiable information in HMIS including shelter stays, outreach engagements, and Current Living Situations (CLS.) If someone's chronic homelessness is not verified through these means, they still may be added to CBNL if sufficient documentation is provided.

Documentation must be in the form of third-party documentation and can be used to either document all 12 months of qualifying homelessness or supplement their existing shelter stays, outreach engagements, or CLS. Documentation must be uploaded to HMIS or provided to the Chronic Homelessness Planner via email. Written confirmation that documentation is acceptable will be provided. Household is only able to be nominated for resources through chronic case conferencing after that confirmation is received. Supporting documentation is only required to record instances of homelessness and is not required to record breaks in homelessness.

### Chronic Homelessness Documentation Options

Third-party documentation includes:

- Documentation from HMIS or a comparable database (note: The Housing History portion of the CES assessment is not considered sufficient documentation)
- Written observation by an outreach worker, housing provider, or service provider
- Documentation from hospitals, correctional facilities, or other institutions

### HUD Chronic Programs

The following table describes HUD's allowance for HUD Chronic designated units if no Chronically Homeless Individuals are on the Priority List.

Priority	Description	Length of Time Homeless	Documented Disability
1	HUD Chronically Homeless	>12 months cumulative or 4 episodes in 3 years totaling one year in an emergency shelter	Yes
2	Most Severe Service Need	High acuity, disability and most severe service need	Yes
3	Long History of Homelessness	Long period of cumulative or episodic homelessness	Yes
4	HUD Homeless	Place not meant for human habitation, safe haven or emergency shelter	Yes
5	Transitional Housing	Homeless families with a disability coming from transitional housing	Yes

## Prioritization and Referral Workflow for Hennepin County CES Team

1. A [Referral Request Online Form](#) is received in the CES inbox. The CES Team reviews *Referral Request Form* to obtain client eligibility information associated with the housing.
2. The CES Team generates Priority List report from HMIS ServicePoint and CES Connect to identify eligible individuals who may be appropriate for available housing and navigation services.
3. The CES Team reviews Priority List report and matches those prioritized to available housing provider based on known information about client demographics, housing preferences, background, income available in county databases, Housing Stabilization Services status, additional eligibility criteria.
4. CES Team refers individual referral to housing provider via HMIS ServicePoint or secure email when necessary.
5. If a replacement referral is requested, the CES Team will review previous associated denial to ensure denial is appropriate and allowable according to CES policies and procedures as established by CES Leadership Committee.
6. If the CES Team determines the denial is valid, staff will attempt to provide replacement to the housing provider and is provided in prioritized manner.
7. If the CES Team determines the denial is **not** valid, the staff will promptly initiate contact to further discuss the conclusion. The CES Team may meet with the provider to discuss the referral and encourage/instruct the provider they are obligated to accept the referral per funding requirements. If the provider continues to deny the referral, the CES Team will discuss with funder and contract manager as applicable.

## Referral Criteria

The matching process and eventual referral linkage process considers the prioritization criteria for Hennepin CoC and funding requirements for each CoC project and program criteria. The order of client priority on the prioritization list will under no circumstances be determined or adjusted based on disability type or diagnosis.

## Referral Expectations

Once a housing provider is onboarded to Coordinated Entry, that provider is entering a partnership with the homeless response system which includes, but is not limited to shelters, CE assessors, the HC CES team, people experiencing homelessness, and other housing providers. Together, we work to end homelessness in our community by ensuring housing vacancies are filled as quickly as possible.

When a housing provider submits a Referral Request Form, CE will refer a household to the housing provider. The Coordinated Entry team works diligently to fill all vacancies as quickly as possible. The CES strives to send referrals no more than *2 business days* from date of receiving the Referral Request form (please note, a business day is defined as before 3pm. Referral Request forms received after 3pm will be counted towards the next business day). The exception to that is when there are no households on the Priority List that are a match for a provider's specific funding requirements and/or programmatic preferences.

## Unable to Fill Policy

If there is no one meeting the provider's eligibility criteria, CE will reach out to the housing provider at the end of the 2<sup>nd</sup> business day to inform the provider that there is no one currently on the priority list meeting their program's eligibility criteria. The CES team will continue to check daily to see if an eligible household is added to the PL.

If the CES team cannot find an eligible household for the vacancy within 5 business days of receiving the referral request, the CES team will reach out to the housing provider to inform them that there isn't an eligible household currently on the PL. At that time, the housing provider will be asked if they are aware of any household(s) currently on the CES PL who they believe meet their program criteria. If the provider is aware of an eligible household on the CES PL, they will send the client HMIS# to the CES PLM. The CES PLM will review the household in HMIS and make the referral, if eligible and locatable.

If the housing provider is aware of households eligible for CES, but not on the PL, they are encouraged to have the households assessed and added to the PL.

### Housing Provider Referral Workflow

The process of managing referrals has two workflows based on which application was utilized for assessment, CES Connect or HMIS. For individuals assessed in HMIS referrals will be managed in HMIS. For individuals assessed in CES Connect referrals will be managed through encrypted email.

Refer to HMIS Workflow Instructions for detailed instructions at <https://hmismn.org/coordinated-entry/>.

### Request a Referral

1. Housing and service providers complete a [Referral Request Online Form](#) for available beds, units, or scattered site housing opportunities or vouchers
2. Vacancies that are unexpected should be reported at the earliest possible time
3. CES Team identify individual and complete referral process utilizing encrypted email
4. Housing Provider receives secure email with HMIS ID for those assessed in HMIS and referral packet for those assessed in CES Connect
5. Referral workflow should be followed per HMIS Workflow instructions.

### Referral Outcome

Outcome of referrals must be reported in HMIS, including but not limited to program enrollment, reason for denial, Housing Move-In Date, etc.

### Acceptance into Program

After the completion of intake, referred individuals that are accepted into program should create a Program Entry (project start date). The referral should be denoted as "successful" in the CE event. Once referred individual is housed, a Housing Move-In Date should be entered. Referral outcome for individuals assessed in CES Connect should be reported to CES Staff utilizing the Referral Outcome Form.

### Denials

Denied referrals should be processed in HMIS ServicePoint for individuals referred through HMIS. For households referred through encrypted email (assessed in CES Connect), denials need to be processed by utilizing the Referral Outcome Form (Appendix C) and submitting to CES Team (email at [CES.Hennepin@Hennepin.us](mailto:CES.Hennepin@Hennepin.us)). Provider will be required to provide justification for denial in detail, including, communication attempts with client, specific criminal or housing history that prevents acceptance of referral, or other similar details. Possible reasons for declining a referral: household does not meet program eligibility requirements (including property management), individual refuses referral, client safety concerns, etc.

If a denial is due to a household no longer needing housing through CES (self-resolved, deceased), unable to locate after 5 business days of diligent attempts, or placed in institutional setting, they need to be removed from the priority list.

If a denial occurs, housing provider should promptly (within 1 week) resubmit referral request form to CE Team, denoting that it is a replacement referral. CE Team will prioritize replacement referrals to the extent possible.

### Referral Denials

Denials must be recorded, by the housing provider, in HMIS or on the referral outcomes form (for CES Connect clients). When completing “when unsuccessful – reason”, housing providers need to use the chart below to determine if the reason is “provider rejected” or “client rejected”.

Unsuccessful Referral: Client Rejected	Unsuccessful Referral: Provider Rejected
Client refused services	Client unreachable Client unable to locate housing Client is eligible, but provider is unable to accept Client is not eligible, over income Client is not eligible, other Property management denial, criminal history Property management denial, eviction history, money owed Property management denial, both criminal and eviction/money owed Property management – other Client placed in institutional setting Client found housing/self-resolved Client moved outside CoC Deceased Client is out of shelter (families only) Other (if other, add detailed notes in referral notes section)

### By Individual

Clients may reject up to three housing referral placements but after the third reject, the client will be removed from the Priority List. A more purposeful engagement strategy will be employed (Access Team, Collaborative Review, Youth Case Conferencing). See Multiple Declined Referral Policy (Appendix I).

### By Housing Provider

Hennepin CoC providers and program participants may deny referrals from the CES, although service denials should be infrequent and must be documented in HMIS or other comparable system with specific justification as prescribed by the Hennepin CoC CES Leadership Committee. The specific allowable criteria for denying a referral shall be published by each project and be reviewed and updated annually. All participating projects and clients shall provide the reason for service denial reason for denial. Details should include communication attempts with client, specific criminal or housing history that prevents acceptance of referral, inability to meet household needs or safety, etc.

If a provider denies three referrals in a row, OR if the CES Team identifies a pattern of denials over time, the organization will be required to participate in a conferencing meeting with the CES Team and a staff person representing the funding source (e.g., CoC Coordinator, LTH Housing Support Planning Analyst, etc.).

If the denial is the result of a third-party property management/landlord (private or partner of service provider) rejecting the individual's application, the rejection will trigger a case conferencing meeting. If the household chooses to appeal this decision, a new referral will not be provided to the housing program until the appeal process has reached its conclusion.

If a private landlord is unable to be located for use with a voucher or scattered site program after an exhaustive search, the provider may request a new referral.

The responsibility of verifying homeless status and gathering required documentation is with the Housing Provider. Denial of referrals for such reasons are not acceptable.

### **Rectify Neglected Referrals**

There is a need to resolve referral/s that have been neglected by Housing Providers which if left unresolved has negative impacts on households. Neglected referrals can be defined as referrals without resolution (Acknowledgement, Referral Result, Housing Move-In Date) and an unresponsive housing provider.

By no fault of the client's, the housing provider has failed to work with the referral within an appropriate timeline. By leaving the referral open in HMIS, the household is not active on the Priority List and is therefore ineligible to be referred to another housing program. This could result in missed housing opportunities and thus prolong homelessness.

The CES Team will resolve these types of referrals when the below parameters have been met:

- The date of referral is three months old or longer
- The housing provider fails to communicate an update with the CES Team's inquires after 1 month and four attempts – fourth communication attempt will explain next steps if Housing Provider does not respond

An appropriate response to CES's inquiry is defined as the provider giving a detailed update of past and current situation, that has led to the delayed referral outcome, and future action steps to move the referral (household) into housing, including dates.

To rectify the situation the CES team will determine if the household is around, update the assessment, and refer to the soonest available opening that the household is eligible for.

## **Housing Provider Referral Expectations**

### ***CES Referral & Initial Contact***

- [Acknowledge CES referral in HMIS](#) within 2 business days (housing provider reporting that they see the referral in HMIS)
- Begin to reach out - email, call, or work to physically find the household - within 1 business day of receiving the CES referral.



- If after 24 hours there is no response from the household, housing provider should urgently reach out to alternative contacts, including shelter advocate, outreach worker, assessor, etc. to attempt to locate the household.
- Attempt to locate/contact client for at least 5 business days utilizing client contact information in HMIS, case management information in HMIS, shelter location, care coordination notes, etc.
- If a household cannot be located, after utilizing all methods outlined in this document, the household should be removed from the priority list.
- Housing provider should utilize and add to the HMIS care coordination tab in attempt to contact case manager(s) working with client referred through CES.
- Upon initial contact with household, update best ongoing contact method and alternative contact methods for the household in HMIS.

### **Program Intake & CES Referral Result**

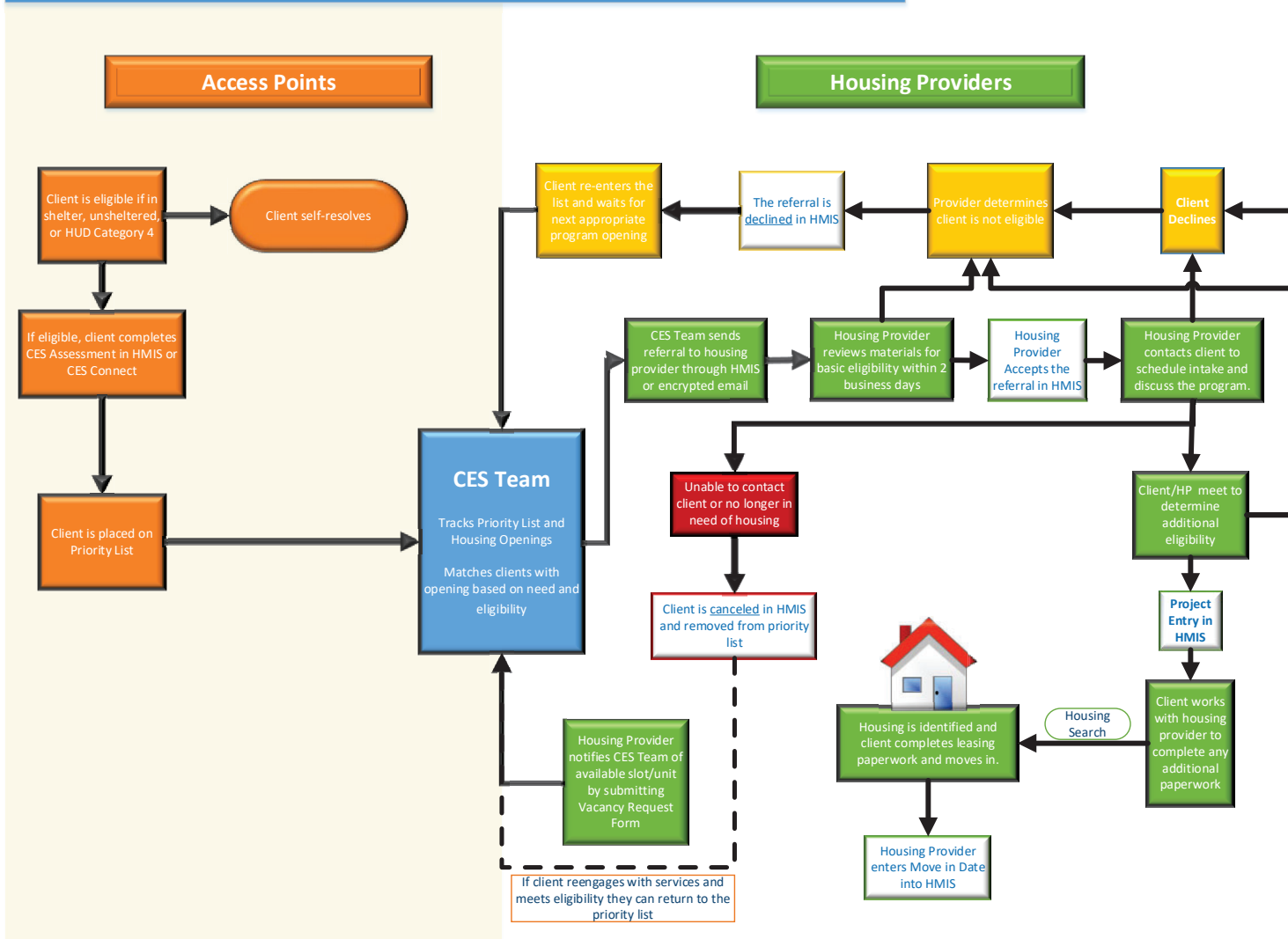
- Remain in contact (at least weekly) with household and their housing case manager (if they have one) throughout the housing search, application/intake, and move in process
- If contact between client and housing provider is lost after initial contact, housing provider should diligently attempt to contact for up to 30 days since last contact. If housing provider cannot reconnect with client, housing provider should cancel the referral (deny referral in HMIS and remove from priority list).
- If scattered site, the housing provider should be assisting and supporting the household identify, secure and select housing options based on their unique needs, preferences, and financial resources.
- Intake should be completed and recorded in HMIS within 1 month of referral.
- Referral outcome “successful” or “unsuccessful” needs to be reported by the housing provider in HMIS within 1 month of referral for every referral received.
- If a denial occurs, housing provider should promptly (within 1 week) resubmit referral request form to CE Team, denoting that it is a replacement referral. CE Team will prioritize replacement referrals to the extent possible.

### ***Housing Search, Move In, & CES Documentation in HMIS***

- Actively assist and support referred households in addressing credit history, arrears, legal issues, and other tenancy issues that may be a barrier to housing.
- Actively support and assist households with no income in getting connected to County and/or Social Security office to apply for benefits.
- Actively assist and support households negotiate manageable and appropriate lease agreements. Be with the person at their lease signing when possible.
- Assist Owner/Property Manager in completing and submitting [shelter verification form](#) to [MNbenefits](#).
- Housing provider is responsible for entering housing move in date in HMIS or send referral outcome form to CES inbox if in CES Connect household (within 1 week of move-in).
- Housing provider is responsible for removing household from CES priority list in HMIS at the same time as recording the housing move in date in HMIS.

## Visual of assessment and referral process workflow

## Hennepin County CES Assessment and Referral Process



## Fair Housing, Tenant Selection and Other Statutory and Regulatory Requirements

All CoC projects in Hennepin's CES must include a strategy to ensure CoC resources and CES options (referral options) are eligible to all persons regardless of race, color, national origin, religion, sex, age, familial status, disability, actual or perceived sexual orientation, gender identity, or marital status. Special outreach to persons who might be or identify with one or more of these attributes ensures CES is accessible to all persons.

All CoC projects in Hennepin's CES must ensure that all people in different populations and subpopulations throughout Hennepin County, including people experiencing chronic homelessness, veterans, families with children, youth, and survivors of domestic violence, have fair and equal access to the CE process, regardless of the location or method by which they access the crisis response system.

All CoC projects in Hennepin's CES must document steps taken to ensure effective communication with individuals with disabilities. Access points must be accessible to individuals with disabilities, including physical locations for individuals who use wheelchairs, as well as people in Hennepin County who are least likely to access homeless assistance.

## CES Monitoring and Evaluation.

### Monitoring and Reporting of CES

Hennepin County shall adhere to HUD's defined monitoring and reporting plans for CES. The monitoring process will report on performance objectives related to CES utilization, efficiency and effectiveness.

Hennepin County CES Reporting Requirements shall be reported quarterly by the CES Team to the CoC membership and the community at large and include the following elements:

- Narrative description of the status of CES implementation, barriers and challenges experienced, and plans for expansion and improvements in the future
- CES performance indicators may include the following:
  1. Number of persons and individuals receiving CES services
    - a. Number seeking assistance/referred to CES
    - b. Number completing initial triage/diversion screen
    - c. Number completing client intake/assessment
    - d. Number completing comprehensive/housing assessment
  2. Demographics and attributes of persons/households receiving CES assistance (from 1d above)
  3. Number of persons and individuals receiving CES referrals to the following
    - a. Rapid Rehousing
    - b. Transitional Housing
    - c. Permanent Supportive Housing
    - d. All other
  4. Destination of persons and individuals to each service strategy as a result of CES referral
    - a. Rapid Rehousing
    - b. Transitional Housing
    - c. Permanent Supportive Housing

- d. All other
- 5. Length of time from completion of CES comprehensive/housing assessment to program entry
  - a. Average length of time from assessment to referral for each component type
  - b. Average length of time waiting on prioritization list for each component type
- 6. Number of persons who waited for each CoC component type for greater than 30 days

## Evaluation

Hennepin County will contract with a third-party evaluator to conduct a comprehensive system evaluation of CES to ensure that both qualitative and quantitative information are collected and used to identify opportunities for continuous system improvements. Specifically, Housing Stability on behalf of the CES Leadership Committee is responsible for

- Leading periodic evaluation efforts to ensure that the CES is functioning as intended; such evaluation efforts shall happen at least annually
- Leading efforts to make periodic adjustments to the CES as determined necessary; such adjustments shall be made at least annually based on findings from evaluation efforts
- Ensuring that evaluation and adjustment processes are informed by a broad and representative group of stakeholders
- Ensuring that the CES is updated as necessary to maintain compliance with all state and federal statutory regulatory requirements

Evaluation efforts shall be informed by metrics established annually by the CES Leadership Committee in consultation with the community and county staff. These metrics will be displayed on dashboards located on the CES website and shall include indicators of the effectiveness of the functioning of CES itself, such as

- Wait times for initial contact
- Extent to which expected timelines described in this manual are met
- Number/Percentage of referrals that are accepted by receiving programs
- Rate of missed appointments for scheduled assessments
- Number/Percentage of CES Team Referral appeals
- Completeness of data on assessment and intake forms
- Equity across the CES

In addition, these metrics shall also include indicators of the impact of CES on system wide CoC outcomes, such as

- Individuals referred have length of stays consistent with system guidelines
- Reductions in long term or chronic homelessness
- Reduction in Individual homelessness
- Reductions in returns to homelessness
- Reduced rate of individuals becoming homeless for the first time.

## Grievance and Appeals

### Coordinated Entry System Grievance and Appeals Policy

The purpose of the grievance and appeals process is to ensure that if a client has a problem or concern with the CES they have a confidential means to report the concern. Completing the grievance form (see appendix D) will not negatively affect their status within CES.

The form should be completed if the grievance relates to one of the following:

- Access to CES (i.e. no assessment provided)
- Assessment
- Prioritization (i.e. disagreement with housing designation)
- Housing referral (i.e. lack of follow through at intake from a CE Referral, following their request to fill a vacancy)
- Other (please be specific)

Note: if a grievance is about an agency or the shelter system, the client should go through that agency's grievance process or fill out a [Homeless Response System Survey](#). In addition, CES cannot guarantee placement into permanent housing, as demand for housing is far greater than the supply.

### Grievance Procedure

1. Client should complete the CES Grievance and Appeals form. Please explain the complaint, grievance, or issue, and include the names of those involved and dates. The complaint should be as specific as possible.
2. Client and/or advocate should email the completed form to [CES.Hennepin@Hennepin.us](mailto:CES.Hennepin@Hennepin.us) with the subject line "CES Complaint". They can expect a response that the form was received within 5 business days.
3. Housing Stability Area will review the grievance, verify the grievance process is the appropriate place for the complaint, complete an investigation and clearly document their findings.
4. Housing Stability Area will respond to the complaint with recommended solutions within 10 business days of receiving the complaint.
5. Housing Stability Area will track all complaints to determine system wide patterns or problems that can be addressed. They will report the number of complaints received, types of complaints and the outcomes/resolutions of the complaints on a monthly basis to the CES Leadership committees. All identifying Information regarding individual clients will be kept confidential and not shared with the leadership committees.

## Transfers

### Transfer Policy/Procedure for Hennepin CoC CES

The HC CES Team created the transfer policies with feedback from the housing provider community. Please read the transfer policies below thoroughly and reach out to the HC CES Team if you have any questions.

Through Coordinated Entry, a process has been established for assessing, prioritizing, and referring people who are experiencing homelessness to homeless designated housing interventions. However, there are cases when the type of housing intervention and/or model may not meet the needs of the household.

When the household referred through CES requests a transfer to another homeless dedicated housing unit, the current housing provider and head of household may work together to locate another available homeless dedicated housing unit and begin the transfer process.

Eligibility for transfers through Hennepin CES:

- The household must have been referred by Hennepin CES to the current homeless dedicated housing program/provider
- The household has a current HMIS program entry for a homeless-dedicated housing program that reports to Hennepin County CES
- The needs or understanding of the needs of the household have changed since program entry

Steps to complete transfer through Hennepin CES:

- Confirm the household requesting the transfer was referred through Hennepin CoC CES to the current housing provider or program. If there is any question regarding whether the household was referred through CES initially, please contact the Hennepin CES team to verify.
- Confirm the household has an active HMIS program entry/enrollment for the current homeless-dedicated housing program
- Find new provider- The household and or current provider has identified another homeless dedicated housing unit for which they are eligible. If support and assistance is needed in locating a new provider:
  - ◊ Email [CES.Hennepin@hennepin.us](mailto:CES.Hennepin@hennepin.us) to Request a list of HC CES housing providers
  - If the housing provider has done their due diligence and detailed all efforts/resources to find an available unit for the transfer, the CES Team can be contacted to assist with the identification of a new housing unit for the transfer
- Confirm Program Eligibility-The new housing program has confirmed the opening and verified the household's eligibility for transfer.
- CES ROI- Upload HC CES Release of Information if one is not present in HMIS
- Notify CES Team- The current housing provider, working with the household to initiate the transfer, must complete and submit the [Transfer Notification form](#) to the Hennepin CoC CES team within 30 days of initiating the transfer.
- Current program will request a new referral to fill the vacancy created by the transfer from the appropriate system (singles/families) upon completion of transfer

Pre-CES and HMIS- \*If the household requesting a transfer was housed in a homeless dedicated housing unit prior to November 1, 2017 (before HC CES was established), the household can still be transferred to another homeless dedicated housing unit if current program entry is present in HMIS. This should be documented on the Transfer Notification Form submitted to the HC CES Team.

Transfers are not appropriate for reasons related to protected class status only, including race, color, national origin, religion, sex, disability, age, genetic information, marital status, sexual orientation, gender identity, and being a member of a local human rights commission.

### Emergency Transfer Policy/Procedure

CES will attempt to address the safety needs of domestic violence, dating violence, sexual assault, and stalking survivors who have been housed in Hennepin County homeless dedicated housing programs through Coordinated Entry. Throughout this process wherever possible, household information will be de-identified and kept confidential.

If no immediate, viable transfer is available through the current Housing Provider, the Housing Provider should follow the Emergency Transfer Procedure to initiate assistance from the Coordinated Entry System.

A Housing Provider may initiate the Emergency Transfer Policy as soon as possible by submitting the [Transfer Notification Form](#) to [CES.Hennepin@Hennepin.us](mailto:CES.Hennepin@Hennepin.us) indicating that an Emergency Transfer is needed. The Housing Provider should indicate household's ideal and needed housing setting for the purposes of safety and security. The household will then be prioritized for the next available housing vacancy. While CES will prioritize the household for the next available vacancy that would meet the indicated need, CES cannot guarantee a housing placement or timing. The current housing provider should continue to safety plan with household and follow best practices to ensure rapid, quick and safe resolution is met. If a match is able to be completed, CES Staff will collaborate with the Domestic Abuse Project's Program Supervisor to assist in safety planning and facilitating a warm hand off between the previous housing provider and new provider. The housing provider will need to complete and submit the [CES Connect referral outcome form](#) to the CES team reflecting the referral result, date housed, etc.

## Sub-Population Specific Protocols

### Veterans

Veterans identified through the CES will be strongly encouraged to sign an additional release of information to be added to the Veteran's Registry. Once on the Registry, veterans who are prioritized and who meet program eligibility criteria will have access to both homeless designated housing units available through the CES and to veteran-specific units not accessed through CES (i.e., VASH, SSVF, etc.).

The CES will work closely with representatives from MAC-V, the VA, the State, and other relevant stakeholders to ensure veterans are able to access the full spectrum of housing resources designated for that population.

### Accelerated Prioritization for Veterans Experiencing Homelessness Policy

Cases have been identified where veterans are not eligible or are otherwise unable to avail themselves of veteran specific resources and are also unlikely to be prioritized for homeless-designated housing in a timely fashion. In order to prevent these and other veterans from falling through the cracks between systems, the CES will utilize a targeted form of "veteran preference" to ensure that such veterans are our highest priority within the CES. Veterans can be residing in veteran specific transitional housing and be eligible for this policy (assuming the CES

assessment was completed during a time when the veteran was eligible to be assessed, in shelter, a place not meant for human habitation, or fleeing or attempting to flee domestic violence).

### Accelerated Prioritization for Veterans Experiencing Homelessness Procedure

Minnesota Department of Veterans Affairs (MDVA) or veteran-specific workers on the Hennepin Homeless to Housing Team will submit the Accelerated CE for Veteran's Form (see Appendix E) on behalf of the veteran who will then be referred to the next rapid rehousing or permanent supportive housing program that reports a vacancy and dependent upon which intervention their CE assessment has identified as most suitable. Accelerated CE for Veteran's Form shall be emailed to [ces.hennepin@hennepin.us](mailto:ces.hennepin@hennepin.us)

On the basis of the veterans identified in the case data review, and to allow for confirmation of veteran status and attempts at resolution through mainstream supports, the policy targets those identified as experiencing homelessness at least 45 days prior to the request.

This applies when:

- Veteran status is confirmed
- Needs can't be met by VASH or SSVF
- Eligible for homeless designated housing and assessed for the CE process
- Has not been referred to homeless designated housing and is unable to self-resolve.

### Victims of Domestic Violence

The CES will work in partnership with advocacy organizations/shelters serving victims of domestic violence to ensure considerations are made to address the specific safety and privacy needs of victims. This includes households having the ability to decline housing in neighborhoods that would compromise their location, the choice to be entered anonymously into database, and have full access to housing options.

The Survivor Service Provider community will continue to build coordination, communication and policy recommendations with the homeless response system and providers through:

- Ongoing annual training and cross-training for housing and domestic violence providers and CES staff
- Ongoing technical assistance for housing and victim service providers
- Analyzing and monitoring CES data specific to survivors unmet need for housing and services

### Youth

Youth ages 18-25 have access to the single adult CES. Families with heads of households 18-25 shall have access to the family CES.

### Unaccompanied Minor Youth

Unaccompanied minor youth within the ages of 16-17 years of age, shall have access to CES. Individuals can be assessed for CES in HMIS or CES Connect, where their information will not be shared statewide.

### Coordinated Entry System Unaccompanied Minor Youth Prioritization Policy

Policy: Unaccompanied minor youth within the ages of 16-17 years of age, shall have access to CES. Individuals can be assessed for CES in HMIS or opt out of HMIS and be assessed via CES Connect. Few programs exist that



serve unaccompanied minor youth, to ensure access to housing through CES, the CES Unaccompanied Minor Youth Prioritization Policy was created.

Procedure: CES will prioritize unaccompanied minor youth for any vacancy request that is able to serve an unaccompanied minor youth. The prioritization of these unaccompanied minor youth refers to youth that currently meet the eligibility for a CE assessment (i.e. in a shelter or in a place not meant for human habitation). When a housing provider submits a vacancy request, they will note the ages that the vacancy can serve (i.e. 16-21). If there is an unaccompanied case or youth that is currently on the CE priority list, that youth will be prioritized for the vacancy over other youth that would otherwise be eligible.

## Program Closure

### Program Closure Policy

Homeless dedicated, supportive housing programs which experience the need to cease operations may utilize CE as a resource for individuals enrolled in the effected program. However, this utilization should not be viewed as the primary solution to all households enrolled in the program and continued, individualized transition planning should continue for each household. CE should be viewed as a resource for families with a continued, ongoing need for supportive housing who are likely to experience homelessness again without continued services.

### Program Closure Procedure

1. When a program has been notified that its funding source is no longer available and no alternative funding sources have been identified for the continuation of services, CE will no longer continue to place households within reported vacancies.
2. If the program wishes to utilize CE for transition planning for any households still enrolled in the program, as depicted above, a written request is required to be submitted to the CE Leadership Committee Chair who will bring the request to the Leadership Committee for approval. Requests submitted within three months of program closure date will not be approved.
3. The housing provider will be asked to participate in case conferencing with the Housing Referral Coordinator per requested transfer- providers will be asked to provide homeless documentation from

program entry, disability documentation if applicable and updating current contact information and household composition within HMIS. Providers will be asked to participate in a warm hand off to the new provider if a transfer is made possible through CE.

CE will make every effort to match those approved for transfer to a new program prior to program closure, however, housing is not guaranteed through CES and the original provider should continue to make every effort to transition plan with the household accordingly.

## **Inactivity**

An Inactive Policy is a critical component of a functional and responsive CES. The Inactive Policy ensures that the Priority List is as close to a true snapshot of those who are in our homeless system and eligible

### **Coordinated Entry System Inactive Policy**

If a household has had no activity (no services, entry/exits, no shelter stays) in HMIS for 30 days or more, the household will be removed from the Priority List.

### **Coordinated Entry System Inactive Procedures**

Assessors and housing providers are required to remove households who they know to have not been active in Hennepin County's homeless response system for 30 plus days using the proper workflow in HMIS. In addition to their own knowledge of the household, the Service Transactions tab in HMIS should be used to determine if the household is "active" (had at least one interaction with the system in the past 30 days). All advocates and housing providers who have access to HMIS are responsible for this task. If an assessed household is working with a provider that is not utilizing HMIS and the household is active and eligible to continue being placed on the priority list, provider should reach out to a trained assessor or the CES team to create a service transaction to demonstrate household's activity in the homeless response system.

The Hennepin County CES team will regularly run an "inactive" report in HMIS to assist in identifying those are who are inactive and remove from the Priority List accordingly.

If, at any point, a household returns to the homeless response system, and they can be added back to the priority list after having their CES assessment updated. All advocates and housing providers who have access to HMIS are responsible for this task.

## **Re-Referral Policy**

Housing providers may request a re-referral through CES for a household that had a referral previously referred and declined for any reason. Re-referral of clients may occur if the original referral to the housing provider occurred within the last 12 months AND the client has no current pending housing referral. The client's CE priority list entry must also be open.

### **Request to Refer Additional Adult(s) Through CES**

The HC CES will approve adding/referring additional adults to homeless dedicated housing units when the client and current housing provider confirm that the additional adult is eligible and able to move into the current unit. If the additional adult is ineligible for the housing program, the referral will not be sent to the housing provider. The request to add household members to the unit will not be impacted by the length of time housed prior to making the request.

## Appendix A: Coordinated Entry System Terms

Coordinated Entry Terms & Definitions	
<p>HUD</p> <p>Chronically Homeless</p>	<p>HUD's definition:</p> <p><i>Chronically homeless</i> means: (1) A "homeless individual with a disability," as defined in Section 401(9) of the McKinney-Vento Homeless Assistance Act, who:</p> <ul style="list-style-type: none"> <li>i. Lives in a place not meant for human habitation, a Safe Haven, or an emergency shelter; AND</li> <li>ii. Has been homeless continuously for at least 12 months or on at least four separate occasions in the last 3 years, as long as the combined occasions equal at least 12 months and each break in homelessness separating the occasions included at least 7 consecutive nights of not living as described in (i) above.</li> </ul>
<p>Disability</p>	<p>HUD defines a person with disabilities as a person who:</p> <ul style="list-style-type: none"> <li>1. has a disability as defined in Section 223 of the Social Security Act (42 U.S.C.423), or</li> <li>2. is determined by HUD regulations to have a physical, mental or emotional impairment that: <ul style="list-style-type: none"> <li>a. is expected to be of long, continued, and indefinite duration;</li> <li>b. substantially impedes his or her ability to live independently; and</li> <li>c. is of such a nature that such ability could be improved by more suitable housing conditions, or</li> </ul> </li> <li>3. has a developmental disability as defined in the Developmental Disabilities Assistance and Bill of Rights Act (42 U.S.C. 15002(8)), or</li> <li>4. has the disease acquired immunodeficiency syndrome (AIDS) or any conditions arising from the etiologic agent for acquired immunodeficiency syndrome (HIV).</li> </ul> <p>For the purpose of qualifying for low income housing under HUD public housing and Section 8 programs, the definition does not include a person whose disability is based solely on any drug or alcohol dependence.</p>
<p>HUD Category 1</p> <p>(Literally Homeless)</p>	<p>An households who lacks a fixed, regular, and adequate nighttime residence</p> <ul style="list-style-type: none"> <li>a. An households with a primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings, including a car, park, abandoned building, bus or train station, airport, camping ground; or</li> <li>b. An households living in a supervised publicly or privately operated shelter designated to provide temporary living arrangements (including congregate shelters, transitional housing, and hotels and motels paid for by charitable organizations or by federal, state, or local government program for low-income individuals); or</li> </ul>

	<p>c. An individual who is exiting an institution where he or she resided for 90 days or less and who resided in an emergency shelter or place not meant for human habitation immediately before entering that institution.</p>
<p>HUD Category 2 (imminent risk of homeless)</p>	<p>Household is being evicted within <b>14 days</b> from their primary nighttime residence and:</p> <ul style="list-style-type: none"> <li>i. No subsequent residence has been identified; and</li> <li>ii. The household lacks the resources or support networks (i.e. family, friends, faith-based or other social networks) needed to obtain other permanent housing.</li> </ul>
<p>HUD Category 3 (homeless under other federal statutes)</p>	<p>Unaccompanied youth under 25 years of age, or families with children and youth, who do not otherwise qualify as homeless under this definition, but who:</p> <ul style="list-style-type: none"> <li>(i) Are defined as homeless under the other listed federal statutes;</li> <li>(ii) Have not had a lease, ownership interest, or occupancy agreement in permanent housing during the 60 days prior to the homeless assistance application;</li> <li>(iii) Have experienced persistent instability as measured by two moves or more during in the preceding 60 days; and</li> <li>(iv) Can be expected to continue in such status for an extended period of time due to special needs or barriers</li> </ul>
<p>HUD Category 4 (fleeing or attempting to flee domestic violence)</p>	<p>Any household who:</p> <p>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; has no other residence; and lacks the resources or support networks to obtain other permanent housing.</p>
<p>Case Conferencing</p>	<p>Local process for CE staff to coordinate and discuss ongoing work with persons experiencing homelessness in the community, including the prioritization or active list. The goal of case conferencing is to provide holistic, coordinated, and integrated services across providers, and to reduce duplication.</p>
<p>Continuum of Care (CoC)</p>	<p>Group responsible for the implementation of the requirements of HUD's CoC Program interim rule. The CoC is composed of representatives of organizations, including nonprofit homeless providers, victim service providers, faith-based organizations, governments, businesses, advocates, public housing agencies, school districts, social service providers, mental health agencies, hospitals, universities, affordable housing</p>

	developers, law enforcement, organizations that serve homeless and formerly homeless veterans, and homeless and formerly homeless persons.
<b>Continuum of Care (CoC) Program</b>	HUD funding source to (1) promote communitywide commitment to the goal of ending homelessness; (2) provide funding for efforts by nonprofit providers, and state and local governments to quickly rehouse homeless individuals and families while minimizing the trauma and dislocation caused to homeless individuals, families, and communities by homelessness; (3) promote access to and effect utilization of mainstream programs by homeless individuals and families; and (4) optimize self-sufficiency among individuals and families experiencing homelessness.
<b>Emergency Shelter</b>	Short-term emergency housing available to persons experiencing homelessness.
<b>Homeless Management Information System (HMIS)</b>	Local information technology system used by a CoC to collect participant-level data and data on the provision of housing and services to homeless individuals and families and to persons at risk of homelessness. Each CoC is responsible for selecting an HMIS software solution that complies with HUD's data collection, management, and reporting standards. In Hennepin County and the State of Minnesota we use a platform called ServicePoint to manage our HMIS. ServicePoint and HMIS have become synonymous in MN, but are really separate entities. Minnesota's System Administrator is Institute for Community Alliances (ICA).
<b>Permanent Supportive Housing (PSH)</b>	Permanent housing with indefinite leasing or rental assistance paired with supportive services to assist homeless persons with a disability or families with an adult or child member with a disability achieve housing stability.
<b>Rapid Re-housing (RRH)</b>	Program emphasizing housing search and relocation services and short- and medium-term rental assistance to move homeless persons and families (with or without a disability) as rapidly as possible into permanent housing.
<b>Release of Information (ROI)</b>	Written documentation signed by a participant to release his/her personal information to authorized partners.
<b>Transitional Housing (TH)</b>	Program providing homeless individuals and families with the interim stability and support to successfully move to and maintain permanent housing. Transitional housing funds may be used to cover the costs of up to 24 months of housing with accompanying supportive services. Program participants must have a lease (or sublease) or occupancy agreement in place when residing in transitional housing.

Minnesota Long Term Homeless (LTH)	<p>Persons including unaccompanied youth, or families with children who lack a permanent place to live continuously for a year or more or at least four times in the past three years. Any period of institutionalization or incarceration shall be excluded when determining the length of time a household has been homeless. Definition includes persons doubled up or “couch hopping” (doubled up or couch hopping is considered an episode of homelessness if a household is doubled up with another household and duration is less than one year or couch hops as a temporary way to avoid living on the streets or an emergency shelter).</p> <p>Time spent in transitional housing (TH) is a neutral event. Housing history prior to or after transitional housing should be evaluated to determine if it meets the state’s LTH definition.</p> <p>Minnesota's definition does not require that the person have a disabling condition.</p>
Minnesota High Priority Homeless (HPH)	<p>Households prioritized for permanent supportive housing by the CES. The eligibility change applies to all LTH units and HTF LTH rental assistance programs funded by Minnesota Housing (capital funding includes housing tax credits, deferred funding, bonds, etc.)</p> <p><b>NOTE:</b> The HPH eligibility option only applies to Minnesota Housing funded LTH units and HTF LTH rental assistance programs. If you have other funding for the LTH units that requires LTH eligibility, you will still need to follow the LTH eligibility and documentation requirements for that funding source (e.g., Housing Support (formerly GRH) and the LTH Supportive Services Grant Fund).</p>
Area Median Income (AMI)	<p>The Area Median Income (AMI) is the midpoint of a region’s income distribution – half of households in a region earn more than the median and half earn less than the median. For housing policy, income thresholds set relative to the area median income—such as 50% of the area median income—identify households eligible to live in income-restricted housing units and the affordability of housing units to low-income households. These are determined and published annually by HUD and can be found at <a href="https://www.huduser.gov/portal/datasets/il.html">https://www.huduser.gov/portal/datasets/il.html</a>.</p>
Hennepin CoC Tie	<p>Guidelines used to determine if household is eligible to be assessed for Hennepin CoC’s CES.</p> <ul style="list-style-type: none"> <li>• Common reasons/ties to Hennepin CoC <ul style="list-style-type: none"> <li>• Children/Head of Household attending or will be attending school in Hennepin County</li> <li>• Benefits from Hennepin County</li> <li>• Family in Hennepin County</li> <li>• Doctors/Healthcare established in Hennepin County</li> <li>• Working/employment in Hennepin County</li> </ul> </li> </ul>

	<ul style="list-style-type: none"> <li>Less common reasons/ties to Hennepin CoC <ul style="list-style-type: none"> <li>Households fleeing Domestic Violence in another county</li> <li>Households from other states <ul style="list-style-type: none"> <li>Doesn't matter where they get off the bus/transportation, if they want to live in Hennepin County, they can get a Hennepin CoC CES assessment</li> </ul> </li> <li>Don't have benefits with Hennepin County but are staying outside/unsheltered, and want to live in Hennepin County</li> </ul> </li> </ul> <p>The household must be willing to live in in Hennepin CoC (geographically this is Hennepin County)</p>
Hennepin County Continuum of Care Written Standards	<p>The Hennepin Continuum of Care (CoC) Operations Board, has worked in partnership with Hennepin County's Office to End Homelessness, in its capacity as the CoC's Collaborative Applicant, to develop the following set of Written Standards to guide the design, delivery and evaluation of homelessness prevention and homeless assistance that is provided through the community's CoC Program and Emergency Solutions Grant (ESG) Program funded projects, as required by § 578.7(a)(9) of the U.S. Department of Housing and Urban Development's (HUD) <a href="#">CoC Program interim rule</a>.</p> <p>These standards were developed after careful consultation and work with providers, agency leadership, funders, and community planners and evaluators that work across the CoC's geography, and are intended to reflect the core values, principles and evaluation criteria that projects within the CoC are expected to adhere to, and that projects that receive CoC Program and ESG Program funding are required to follow.</p> <p>As needed, these standards will be reviewed and revised by the CoC, to ensure that they remain relevant and reflective of the community.</p>
Single Adult	A single adult is an individual that is 18 years of age or older and does not have custody of children 51% of the time
Family	A family is an individual or couple that has a child under the age of 18 in their custody at least 51% of the time
Youth	Persons under age 25, including children under age 18 and young adults ages 18 to 24.
Decline	To deny the referral is to concede that the housing provider is either not going to or no longer working with the referred household. As part of the denial, households should be removed from the priority list when appropriate.
Housing Move-In Date	Date referred individual enters housing

CES Connect	A Hennepin County application utilized to capture CE participant assessment data for those who wish to remain outside of the Homeless Management Information System, minor youth aged 16-17 and those experiencing domestic violence, and those assessed by VAWA agencies. CES Connect captures minimum necessary information for minors and those experiencing domestic violence to directly make housing referrals, following national best practice. CES Connect also merges the priority list with the HMIS priority list report.
CES ROI	A form utilized to provide authorization for client's cases to be discussed and information shared to appropriate parties to coordinate services. All CE participants must sign in order to be added to priority list.



## Appendix B: Release of Information (ROI)

Client's Full Name: \_\_\_\_\_

DOB: \_\_\_\_\_

HMIS ID (if known): \_\_\_\_\_

I understand that I am signing this consent to release information collected by the Hennepin Coordinated Entry System (CES) so that organizations working with people experiencing homelessness can discuss my case and coordinate services to support me in finding housing. This information may be from the Homeless Management Information System (HMIS), CES Connect or CES paper forms.

I authorize the agencies and appropriate service groups that participate in the Hennepin CES to obtain the following information about my service use:

- History of shelter use and homelessness
- Barriers to housing – (including checking public data bases for criminal history to ensure program eligibility)
- Eligibility for housing programs
- Names of current and past social service providers
- Public benefits income verification – (including checking Hennepin County systems for benefit verification)
- Vital Documentation as defined by ID, Social Security Cards, and Birth Certificates.

This release allows the sharing of data with all providers in the Minneapolis-St. Paul metropolitan area that serve as the homeless response system, including but not limited to:

- Emergency shelter agencies,
- Street Outreach teams,
- Rapid Rehousing providers,
- Transitional Housing Providers,
- Permanent Supportive Housing Providers,
- Navigation services,
- Diversion services,
- Subsidy administrators, and
- County case workers.

I understand that:

- I have the right to refuse to sign this authorization.
- Information shared above and within the Homeless Management Information System (HMIS) may be used in case conferencing by the homeless response system to coordinate services offered.

- If I do not sign it, my services may not be fully coordinated. However, emergency services will not be withheld if I don't sign this.
- I can change or cancel this authorization at any time by contacting any staff in the emergency response system and asking that this form be rescinded.
- This authorization takes effect the day that I sign it and expires upon my request.
- *CES Connect* is an application where my information, for the purposes of Coordinated Entry, will be stored. Only authorized providers within the homeless response system will be able to utilize this application to check on CES Housing Referral Status or whether you are still active on the CES Priority List for the purposes of Care Coordination to assist in finding housing.
- A copy of this authorization is as valid as the original

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

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

## Appendix C: Housing Referral Outcome Form

Utilize this form to notify the CES of the referral outcome of referrals made through encrypted email. A narrative description is required for all denials. Submit form as soon as outcome is known.

### Housing Provider Contact Information

Agency Name:

Program Name & HMIS Provider ID:

Staff Name:

Email:

Phone:

### Referral Information

Client ID or HMIS ID:

Date referral received:

### Referral Outcome

☐ Declined (Referral Denied, placed back on Priority List)

☐ Canceled (Referral Denied, Needs to be removed from Priority List)

☐ Housed

Date Housed:

**If Declined or Canceled, Reason:**

- ☐ Participant unreachable- after initial contact
- ☐ Participant unreachable – disappeared
- ☐ Participant refused services
- ☐ Participant is eligible but provider unable to accept
- ☐ Participant is not eligible, over income
- ☐ Participant is not eligible, other
- ☐ Participant is placed in institutional setting
- ☐ Other
- ☐ Property management denial – criminal history
- ☐ Property management denial – eviction history/money owed
- ☐ Property management denial – both criminal and eviction/money owed
- ☐ Property management denial – other
- ☐ Participant found housing/Self resolved
- ☐ Participant moved outside of CoC
- ☐ Participant deceased

**Please provide a narrative description of the reason for denial. Be very specific:**

**How to submit this form:**

Please send completed form to:

[CES.Hennepin@hennepin.us](mailto:CES.Hennepin@hennepin.us)

## Appendix D: Grievance and Appeal Form

### Coordinated Entry System Grievance and Appeals Form

*If there is a problem or concern about the Coordinated Entry System, we want to know about it. The information on this form will be used to address your concerns and will be kept confidential. If you need assistance completing this form, please contact an advocate. Completing this form will not negatively affect your status within the Coordinated Entry System. Please bear in mind that the Coordinated Entry Process cannot guarantee placement into permanent housing, as demand for housing is far greater than the current supply in our community.*

Name of person completing this form (grievant): \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Cell # \_\_\_\_\_ Email: \_\_\_\_\_

Secondary Phone # \_\_\_\_\_

Preferred Method of Contact: ☐ Call ☐ Email

Alternative contact information: \_\_\_\_\_

Advocate and/or Interpreter Information: \_\_\_\_\_

Can we leave confidential info with the alternate contact? ☐ Yes ☐ No

What is this in regard to:

- ☐ Access to Coordinated Entry System (i.e. no assessment provided)
- ☐ Assessment (i.e. scoring)
- ☐ Prioritization (i.e. disagreement with housing designation)
- ☐ Housing referral (i.e. lack of follow through at intake from a CE Referral, following their request to fill a vacancy)
- ☐ Other (please be specific)

Note: if you have a grievance about an agency, the Hennepin Shelter Hotline or the shelter system please go through their grievance process.

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*Explain the complaint, grievance or issue, including the names of those involved and dates. Please be as specific as possible:*

---

What has been done to fix this (by yourself or others)?

Follow up:

---

Notes/comments from Housing Stability Area staff:

---

Recommended Solution and/or Timeline:

<b>Housing Stability Area Staff:</b>	<b>Position:</b>
Date Grievance Received:	Date Grievance Resolved:
Has the grievant been notified of the outcome? Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	
If no or N/A, please explain why?	

1. Have the resident and housing provider discussed the change requested? Yes ☐ No ☐
2. Is the resident requesting an increased level of support? Yes ☐ No ☐
3. How is the current level of support not meeting the resident's needs?
4. Was the resident's level of service need accurately captured during the initial housing assessment? Yes ☐ No ☐
  - a. If no, what was inaccurate or omitted? [Click here to enter text.](#)
  - b. If yes, what has changed since the initial assessment? [Click here to enter text.](#)
5. What other options have the resident and provider reviewed? [Click here to enter text.](#)
6. What options have been considered so the resident can maintain their current residence? [Click here to enter text.](#)
7. Did a specific incident initiate this request? Yes ☐ No ☐

If yes, please explain: [Click here to enter text.](#)

Name and Signature of Program Manager/Supervisor Approving this Request:

\_\_\_\_\_

Contact Email of Supervisor Approving Request: \_\_\_\_\_

## Appendix E: Accelerated Coordinated Entry for Veteran's Form

### Hennepin County Accelerated Coordinated Entry for Veterans

Date Completed:	Submitted by (name / agency):
-----------------	-------------------------------

CLIENT INFORMATION	
Name	HMIS ID
Date entered onto the Veterans Registry	DOB

OTHER IMPORTANT INFO	
Veteran Status	<p>Has veteran status been confirmed, as defined in the federal benchmarks for ending veteran homelessness?  <input type="checkbox"/> Yes   <input type="checkbox"/> No</p> <p>Date on which veteran status confirmed:</p>
Housing services	<p>Has this veteran been assessed for Coordinated Entry in Hennepin County?   <input type="checkbox"/> Yes   <input type="checkbox"/> No  <b>Please note that referrals cannot be made until a completed CES assessment is available</b></p> <hr/> <p>Can their housing needs be met by VASH resources?   <input type="checkbox"/> Yes   <input type="checkbox"/> No  <b>If no, please provide brief explanation</b></p> <hr/> <p>Can their housing needs be met by SSVF resources?   <input type="checkbox"/> Yes   <input type="checkbox"/> No  <b>If no, please provide brief explanation</b></p> <hr/> <p>Is this veteran in the process of applying for or accessing other forms of housing?   <input type="checkbox"/> Yes   <input type="checkbox"/> No  <b>If yes, please provide brief explanation and current status</b></p>

Please submit by e-mail to [CES.Hennepin@hennepin.us](mailto:CES.Hennepin@hennepin.us)

## Appendix F: Fleeing Domestic Violence Statement

### Fleeing Violence Statement

I, \_\_\_\_\_, work for \_\_\_\_\_  
Domestic Abuse/Trafficking/Sexual Assault Advocate or Counselor      Name of Organization

and do hereby verify as follows:

I have a reasonable basis to believe \_\_\_\_\_  
Name of Survivor(s)/Victim(s)

is homeless. They are an householdwho: 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; has no other residence; and lacks the resources or support networks to obtain other permanent housing.

\_\_\_\_\_  
Signature of Domestic Abuse/Trafficking/  
Sexual Assault Advocate or Counselor

\_\_\_\_\_  
Date



## Appendix G: Requesting Multiple Referrals

### Hennepin Coordinated Entry System Guide for Requesting Multiple Referrals

Single adult and non-parenting youth programs may request multiple referrals for each program opening. Programs that elect to do this must understand and adhere to the following parameters. Note that, depending on volume, the CES team may not be able to immediately fill all multiple requests, but will make every effort to do so. Housing providers may not seek additional referrals outside the CES.

- 1) Housing providers must make concerted attempts to locate every individual referred to them within two weeks of receiving referral and will work with each and every referral towards a housing outcome.**
  - You must initiate the search process with all referred individuals within the same time frame. Do not request more referrals than you can realistically engage concurrently.
  - Not allowed when receiving multiple referrals:
    - Attempting to identify which one seems the “easiest” or “most likely to succeed” and only contacting those.
    - Starting with one and not proceeding with the next until you have a resolution on the first one.
- 2) Housing providers must serve *a//* individuals who are able to be located, engaged, and wish to proceed with enrollment, within 1-2 months.**
  - If you have one immediate vacancy, you can request 2-3 referrals. If all three are located and engaged, the first one to complete the application and be approved would get the first available unit. The second/third individuals would be offered units that are known to be available within the next 1-2 months.
    - If the individual does not wish to wait, they can decline to participate and be sent back to the Priority List. However, please advise them that they may not be prioritized immediately for another opening if prioritized at all.
  - Providers should consider current and anticipated vacancies when deciding whether to request multiple referrals. Your program is responsible for examining turnover and determining realistic projections. A max of three referrals can be requested per opening.
- 3) Housing providers must report the outcome of every referral according to the timelines prescribed by CES.**
  - A referral that could not be contacted/located or is quickly determined to not be eligible for another reason should be returned within two weeks. Denials that come later in the process should be reported as soon as possible.



## Appendix H: Hennepin County CES Transfer Request Form

Today's Date: Click here to enter a date.	Client Date of Birth: Click here to enter a date.
Client Name: Click here to enter text.	Client HMIS ID: Click here to enter text.
Current Housing Provider, Program, & HMIS Provider ID: Click here to enter text.	Month/Year Client Moved In: Click here to enter text.
Month/Year of Planned Exit Date: Click here to enter text.	Homeless Status at Entrance: Click here to enter text.
Proposed Housing Provider, Program, & HMIS ID: Click here to enter text.	Family Size: Click here to enter text.
Name of Staff Completing Form: Click here to enter text.	Staff Contact Information: Click here to enter text.

Type of Transfer Request

Please check type of transfer (see CES policy and procedure manual for transfer policy descriptions):

- Intra-agency transfer (program to program within the same agency)? ☐
- RRH to PSH transfer? ☐
- Youth PSH to Adult PSH transfer? ☐
- Standard transfer (PSH to PSH, Single to Family)? ☐

If this is an intra-agency request, please check the box above and add an explanation for the transfer in the box below. You do not need to complete the remainder of the form.

Please provide 1 or 2 sentences to explain the reason for the intra-agency transfer. Again, you do not need to complete the remainder of the transfer request form.

If this is an agency to a different agency transfer, please complete the remainder of the transfer form below.

DESCRIBE CHANGE IN SERVICE NEED

8. Does the household agree/approve of the change/transfer requested? Yes ☐ No ☐

9. Is the household requesting an increased level of support? Yes ☐ No ☐

If yes, what is the household requesting?

10. Is there a funding requirement that prohibits the household from continuing in the current program?

Yes ☐ No ☐

11. What has the household expressed as being needed to obtain/maintain housing that this transfer will help fulfill? How is the current level of support not meeting the resident's needs?

12. Was the resident's level of service need accurately captured during the initial housing assessment? Yes ☐ No ☐

a. If no, what was inaccurate or omitted? [Click here to enter text.](#)

b. If yes, what has changed since the initial assessment? [Click here to enter text.](#)

6. What other options have the household and provider tried before requesting this transfer? [Click here to enter text.](#)

7. What options have been considered so the resident can maintain their current residence? [Click here to enter text.](#)

8. Did a specific incident initiate this request? Yes ☐ No ☐

If yes, please explain: [Click here to enter text.](#)

**Reason for Transfer Request:**

(Please be sure to include details about the household's circumstance that warrant a transfer request and the expected outcomes of approving or denying the transfer request)

[Click here to enter text.](#)

Name and Signature of Program Manager/Supervisor Approving this Request:

\_\_\_\_\_

Contact Email of Supervisor Approving Request:

\_\_\_\_\_

For a copy of the transfer policy please refer to Hennepin County Coordinated Entry System Operations Manual.

## Appendix I: Multiple Declined Referral Policy

### Background

Through CE, a clear process has been established for assessing, prioritizing and referring people who are experiencing homelessness to the different categories of homeless designated housing interventions. In order of intensity of support the interventions are:

- Rapid ReHousing (RRH)
- Transitional Housing (TH)
- Permanent Supportive Housing (PSH)

Trained assessors offer people who are experiencing homelessness a comprehensive assessment to enter the CE housing priority pool. Once people are placed in the pool, they may or may not receive a referral for housing based on priority criteria established by the CES Leadership Committee. The criteria is as follows:

- Disability
- Chronic homeless status
- Number of months HUD homeless

It has come to the attention of the CES Leadership Committee that there are a subset of people who meet the criteria for a referral and are choosing to decline referrals for various reasons. When a person repeatedly declines referral, they are tying up resources and taking referrals that could otherwise go to another person. In essence, a log jam occurs which negatively impacts other people experiencing homelessness who may also be eligible for referrals. The negative impact is felt by housing providers as well, who end up spending time working with the person only to have them decline the opportunity. CES Leadership Committee decided to pilot skipping over people who have declined 3 or more referrals. This created opportunity and movement for other people who are eligible for referral to accept a CES referral and move into housing.

### Skipping Procedure for Hennepin Coordinated Entry Priority List

When a client has declined 3 referrals from CES, the policy would be initiated.

Denials counting for policy initiation are listed below but not limited to:

- Client declines based on location
- Client isn't following through with housing provider
- Client missed multiple scheduled appointments and/or intake with the housing provider
- Client refuses size of unit
- Client changed mind on taking Housing Support (formerly GRH), sober, shared housing, and/or front desk

Denials disregarded toward policy initiation are as follows:

- Housing provider declines because client is unable to be located
- criminal background
- program funding qualifications

- landlord issues

**Policy initiated:** The following steps will be taken when the policy is initiated.

- The client will be removed from the priority list
- An email will be sent to the CES Assessor and case managers listed in the client's assessment informing them that the client was removed because they have declined 3 or more referrals, and the policy was initiated. The Assessor and case manager would work with the client to see if the CESS is the best fit.
- If it is determined that the CES is the best fit for the client, the Assessor and/or case manager will update the CES assessment and ensure that the client's information and preferences are accurate, and add the client back onto the priority list. The Assessor will add comments about the housing plan moving forward into the notes section.

### Data Review

CES Leadership Committees will receive quarterly updates on the number of clients removed from the priority list, including the reasons clients were bypassed. These data will help inform efficacy of the policy and will guide future decision-making efforts.

### Next Steps – Case Conferencing

Developing a case consultation model or case management structure in order to reach out to individuals who are being bypassed or removed from the priority list based on this policy will be considered as CES Leadership Committee and CES staff are able to review data and learn of the impact of this policy. It is recognized that a case review or case consultation model has potential to streamline this process.

## Appendix J: Singles & Youth Hennepin CoC CES Assessor Determination Policy

### Background

Through CE, a clear process has been established for assessing, prioritizing and referring people who are experiencing homelessness to the different categories of homeless designated housing interventions. In order of intensity of support the interventions are:

- Rapid ReHousing (RRH)
- Transitional Housing (TH)
- Permanent Supportive Housing (PSH)

In order to improve and maintain the overall performance of the Hennepin CoC CES, the need for a policy detailing who can be an assessor and in what capacity emerged in order to:

- Improve quality of data
- Increase equitable access to assessment
- Ensure assessors are strategically located
- Match the appropriate housing intervention to the client
- Ensure appropriate training and technical assistance for assessors
- Increase the referral to housed ratio
- Improve overall performance of the CES

### Assessors

Trained assessors offer people who are experiencing homelessness a comprehensive assessment to enter the CE housing priority pool. Once people are placed in the pool, they may or may not receive a referral for housing based on priority criteria established by the CES Leadership Committee. Hennepin CoC CES for Singles & Youth consists of contracted assessor agencies as well as assessors dispersed through the community based on access point and population specific needs.

Agency assessor approval will be contingent on:

- Agree to all roles & responsibilities as outlined in the Hennepin CoC CES Assessor Role document
- Agree to Assessor Performance Measures (outlined in the Hennepin CoC Assessor Role)
- Location such as shelter, street outreach, drop-in centers
- Specialty populations (HIV+, Native American, DV)

Agency request will be denied if they meet the following criteria:

- Location of proposed assessments fall outside of eligible population
- Individual or agency is unable to meet Hennepin CoC's CES Assessor Role
- Conflict of interest
  - For example, an agency that serves as a housing provider and offers no other services, such as outreach or drop-in. There must be a clear delineation between services and housing.



## Procedure for Agency Requesting New Assessors

Agency will complete the assessor request form (see appendix or form) and submit to [CES.hennepin@hennepin.us](mailto:CES.hennepin@hennepin.us) for consideration. Agency request will be approved if they meet the criteria in the policy.

**Policy initiated:** The following steps will be taken when the policy is initiated.

- Agency assessor request is approved
- CES Team sends employee and supervisor pertinent information & proceeds with onboarding

## Data Review

CES Leadership Committees will review data. This data will help inform efficacy of the policy and will guide future decision-making efforts.

## Appendix K: Coordinated Entry System Participation Agreement

### Hennepin County Continuum of Care

The purpose of this CES Participation Agreement is to document and communicate guidelines for agency participation in the Hennepin County CES. CES is a collaborative initiative designed to create a more effective and efficient homeless response system, as well as assure compliance with HUD mandates. By signing this Agreement, participating organizations formally acknowledge the guidelines, roles, and responsibilities outlined in this Agreement, the Hennepin County CES Policy and Procedures Manual, and the CoC Written Standards. Further, the undersigned organizations agree to adopt and comply with the Agreement in order to participate in CES.

#### **All partner agencies participating in Hennepin County Coordinated Entry agree to:**

- Participate in the Hennepin County CES, as outlined in the HC CES policy and procedure manual.
- Accept referrals for program vacancies from HC CE
- Provide up-to-date vacancy information as outlined in the HC CES policy and procedure manual.
- Treat all consumers with respect and kindness.
- Provide all program eligibility criteria to the HC CES team.
- Meet with the HC CES Team and CoC governing board when requested to discuss concerns and issues around CE as outlined in the HC CoC Written Standards.
- Make CE Partnership processes, including those related to access, assessment and referral to homeless programs and services, well-known to all clients.
- Use established CE policies and procedures to refer and accept clients into projects and programs named in Attachment A.
- Communicate with HC CES team when/if a referred household is not accepted into a project/program
- Make appropriate staff available for the training on CES policies and procedures.
- Attend/Participate in case conferencing to coordinate services for participants in your programs.
- Collaborate to address process issues for the purpose of evaluating service efficiency and effectiveness.
- Comply with the roles and responsibilities set forth in this Participation Agreement.
- Provide advanced (at least 30 days) notice of any changes in program service(s) and support(s) to the HC CES Team.

The Hennepin County Continuum of Care will serve as the administrator for the CES and will assume the responsibilities and requirements of CE as outlined in the CoC Interim Rule. The HC CoC will:

- Ensure the operation of CE and participation of all funder HMIS homeless dedicated beds required to participate in CES.
- Develop written guidance for the operation of CE.
- Monitor participation for consistency and adherence as outlined in the CoC Written Standards and CES policy and procedure manual.
- Conduct oversight of CE participation to ensure compliance with HUD regulations.
- Report to the Hennepin County CoC Operations Board on a regular basis with regard to CE participation, data quality, and compliance.
- Communicate with all agencies participating in the CES regarding changes to CE and upcoming meetings/calls/trainings.
- Maintain the CES inbox, oversee the policy and procedure manual, complete referrals to providers, and ensure providers' vacancies are updated and accurate.

Neither the CES Participating Organization nor the CES administrator may transfer the rights and responsibilities outlined in this agreement without the written consent of the other party. This Participation Agreement will be in force until revoked in writing by either party and then will be terminated without 30 days of written notice by the CES Participating Organization or the CES administrator.

This agreement will be reviewed and renewed annually, in accordance with federal guidance.

Signature Page

Please sign and date below if you agree to these criteria.

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

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

Agency: \_\_\_\_\_

ATTACHMENT A

Agency Name	Program Name	HMIS Project ID	Funding Source	Contact Name	Contact Information

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