

Impact ICT Continuum of Care Coordinated Entry System Policies and Procedures

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Table of Contents

I. Coordinated Entry Policies and Procedures	1
A. Policies and Procedures Purpose	1
B. Coordinated Entry Overview	2
C. Elements of the Impact ICT Coordinated Entry	2
D. Housing Triage Tool / VI-SPDAT Assessor Training	4
E. By-Name List Policies and Procedures	4
II. Appendices	8
A. Appendix A – Glossary of Terms	8
B. Appendix B – List of Access Points and Participating Agencies	12
C. Appendix C – Definitions of Homelessness and Documentation Standards	13
D. Appendix D – Overview of the Coordinated Entry in Sedgwick County	15
E. Appendix E – Procedural Instructions for Assessing Individuals Experiencing Homelessness and Entering them onto the By-Name List	16

I. Coordinated Entry (CE) Policies and Procedures

A. Purpose

The Policies & Procedures detailed in this document focus on the intake, assessment, prioritization, and referral to homeless resources and housing for literally homeless individuals and families. The policies and procedures in this document outline the process and guiding principles for the implementation of the Wichita-Sedgwick County Continuum of Care, Impact ICT CoC. Procedures establish a series of steps to complete the coordinated entry process with guidance on eligible individuals and services. Policies develop the specific purpose of the program and the widespread application of the specific components of Impact ICT.

The purpose of Coordinated Entry is to ensure that all people experiencing homelessness have fair and equal access to housing, regardless of race, color, national origin, religion, sex, age, familial status, disability, actual or perceived sexual orientation, gender identify, or marital status. The system aims to work with households to understand their strengths and needs, provide a common assessment, and connect them with housing and homeless assistance. Using standardized tools and practices, CE aims to incorporate the principles of a system-wide Housing First approach and prioritize those with the highest service needs. Coordinated Entry is designed to:

- Allow anyone who needs assistance for a housing crisis to know where to go to get that assistance and to be assessed in a standard and consistent way;
- Ensure that households who are experiencing homelessness gain access as efficiently and effectively as possible to available community interventions;
- Prioritize households for limited housing resources based on need and vulnerability;
- Provide clarity, transparency, consistency, and accountability throughout the assessment and referral process for households experiencing homelessness, community partners, and homeless and housing service providers; and
- Facilitate exits from homelessness to stable housing in the most rapid manner possible.

To achieve these objectives, Coordinated Entry includes:

- A **standard assessment process** to be used for all households who are seeking assistance, and procedures for determining the appropriate next level of assistance;
- Establishment of **uniform guidelines** among homeless service providers (outreach programs, emergency shelter, transitional housing, rapid rehousing, and permanent supportive housing) participating in Coordinated Entry for screening criteria and prioritizing populations;
- Consistent **referral policies and procedures** from CE to housing programs and other resources;
- The **Operations Manual** is contained herein and details the operations of Coordinated Entry.

Circumstances will present themselves and adjustments to processes described in this manual will be made. Evaluation of quarterly data by stakeholders will provide ongoing opportunities for feedback, supporting continued improvement of the Coordinated Entry system. The necessary changes will be made by the Coordinated Entry Committee with approval from the Continuum of Care (CoC) Advisory Board.

The CE is person-centered, and prioritizes those with the greatest need without precondition, including all subpopulations. It is coordinated such that wherever individuals seeking services enter, they will be able to participate in the same assessment and linkage process where providers use a uniform decision-making

approach. Nationwide, this model efficiently uses available resources and unites the community in solving homelessness as a community.

A glossary of Terms Relevant to Coordinated Entry can be found in Appendix A.

B. Coordinated Entry Overview

Below is an overview of the Coordinated Entry Process, Step-By-Step:

1. **Accessing Coordinated Entry** – To ensure accessibility for all eligible households, Coordinated Entry enrollment is provided from Access Points and service providers located throughout the Services area (see Appendix B for a list of Impact ICT Access Points). Eligible households can initiate an appointment in person through any of the designated Access Points. Households can also complete an assessment through community-based case managers and service providers.
2. **VI-SPDAT Assessment** – Housing Navigators, Case Managers, and other CoC service providers are available to administer the Vulnerability Index – Services Prioritization Decision Assistance Tool (VI-SPDAT) with eligible households. This can happen at shelters, Access Points, or as part of outreach efforts. This assessment can take place after a household has accessed an emergency resource, such as a day shelter, food pantry, or emergency shelter. The tool is completed and tracked using ClientTrack.
3. **Offer Crisis Intervention Services** – At the time of assessment, Case Managers and Housing Navigators will connect households with emergency shelter or other crisis response services as appropriate and as available.
4. **Enroll in Coordinated Entry** – Once homelessness is determined for a household, the Housing Navigators, Case Managers, or any other CoC service providers trained in the Homeless Management Information System (HMIS) can enroll a qualifying household into Coordinated Entry and complete the Vulnerability Index Specialization Determination Assessment Tool (VI-SPDAT). Once the Coordinated Entry enrollment and VI-SPDAT are completed, the household is placed on the community By-Name List for prioritization.
5. **Prioritization** – After the household has been enrolled in Coordinated Entry, they are prioritized based on results of the VI-SPDAT score, the prioritization of subpopulations as outlined in section C, and length of time homelessness.
6. **Housing Referral** – Households are referred to housing as it becomes available and their place on the prioritization policy adopted by Impact ICT CoC. Housing referrals may happen at weekly community-wide Case Conferencing and/or by a Coordinated Entry Housing Navigator, staffed by the Coordinated Entry Lead Agency.
7. **Household is Housed** – After the household is referred to housing, the referring agency and the housing agency work together to move the household into housing. Once the household has moved into permanent housing, they are exited from Coordinated Entry on the same day as their move-in date. Housing providers have 7 days to make contact with a household once a referral has been made before moving to the next person on the By Name List. Housing Service providers are to document contact attempts in HMIS to ensure fair and equal access to housing for all referrals.
8. **Victim Service Providers (VSP)** – Victim Service Providers are to follow the process for Coordinated Entry as outlined section E, number 5 of this document.

See Appendix D for a map of Impact ICT's Coordinated Entry System.

C. Elements of the Impact ICT Coordinated Entry

1. Initial Contact and Determination of Homelessness

Inclusive of both outreach efforts and contact with a local agency, the first step of Coordinated Entry is initial contact with clients experiencing a housing crisis. For clients

experiencing homelessness, the VI-SPDAT (or Housing Triage Tool) is the appropriate next step.

2. **Housing Triage Tool**

The Wichita Impact-CoC Coordinated Entry Committee has selected the VI-SPDAT version 3 as our Housing Triage Tool. The VI-SPDAT can be conducted at any local participating agency (see Appendix B), or by the Housing Navigator (again, see Appendix B).

Neither the VI-SPDAT nor any part of the Coordinated Entry process requires the disclosure of specific disabilities or diagnoses. Specific diagnoses and/or disability information may only be obtained for purposes of determining program eligibility to make appropriate referrals.

VI-SPDAT

Impact ICT CoC uses Version 3 of the VI-SPDAT. There are three types of VI-SPDAT that are used depending on the household status. For individuals who would be housed alone, the Individual VI-SPDAT is most appropriate. For clients whose household would include a husband, wife, long-term partner, and/or minor children, the Family VI-SPDAT is most appropriate. For households that the head of household is a Transition-aged Youth (18-24), the TAY VI-SPDAT (version 2) should be used.

See Appendix E for step-by-step instructions on how to access the VI-SPDAT as a provider.

All clients completing the VI-SPDAT must complete an HMIS Consent form to share information to HMIS and the wider CoC.

3. **By-Name List**

After completing the enrollment into Coordinated Entry and VI-SPDAT assessment, the household is placed on the community-wide By-Name List. This list contains all the information provided by the client on the VI-SPDAT, as well as any updates to the client's housing status with dates and details of those updates. The By-Name List exists in the HMIS system, ClientTrack, and is managed by the United Way of the Plains.

4. **Prioritization by Sub-population:**

1. Chronically Homeless
2. Veterans (both honorable & dishonorable discharges)
3. Adults 65 and over
4. Youth (18-24)
5. Domestic Violence survivors
6. Families
7. Others

5. **Prioritization by VI-SPDAT score**

Once on the By-Name List, individuals and families are prioritized for housing interventions by their VI-SPDAT score, the highest scoring (and most vulnerable) individuals and families being prioritized *first*. Their scores will guide what types of housing programs (if any) are most appropriate given any situation. This is the guidance for those program matches based on VI-SPDAT scores, with the understanding that case conferencing and staffing meetings can provide more targeted matching of individuals and families to housing interventions.

Prioritization Tiebreakers

In the event that there is a housing resource available and two households of the same VI-SPDAT score and sub-population, the households who are unsheltered will be prioritized to receive the resource. In the event that both households are unsheltered,

the household who has been homeless the longest will receive prioritization.

In Case Conferencing, households are dynamically prioritized for available housing resources. It should be recognized that prioritization cannot be a mechanical algorithm, as at the core of Coordinated Entry is a household experiencing homelessness. As such, the below ranges for which VI-SPDAT Score should be assigned to which housing is a suggestion and not the rule. Prioritization should always be Housing Focused and Housing First.

1. Individuals 8+ & Families 9+: Permanent Supportive Housing and Housing Choice Vouchers.
2. Individuals 4-7 & Families 4-9: Rapid Re-Housing or Transitional Housing.
3. All Households 0-3: No housing intervention. Other community resources are provided.

D. Housing Triage Tool / VI-SPDAT Assessor Training

Individual agencies are encouraged to train their staff to conduct the VI-SPDAT, if their agency regularly serves people experiencing homelessness. To become a trained VI-SDPAT assessor, follow the below steps:

1. Watch the following video: https://youtu.be/z_pHYPTw0Zw
2. Contact the Associate HMIS Administrator (HMISTech@unitedwayplains.org) to set up a one-on-one training session on how to utilize VI-SPDAT in the ClientTrack system and enter clients experiencing homelessness onto the By-Name List. Step-by-step instructions are also provided in Appendix E.

Group training will also be provided for the general Impact ICT CoC Membership on an annual basis. These in-person trainings will include:

- Review of the Impact ICT CoC's written CE Policies and Procedures (including all adopted variations for specific subpopulations)
- Requirements for use of assessment information to determine prioritization
- Criteria for uniform decision-making and referrals
- An overview of Case Conferencing and the role of CE in reaching Functional Zero.

E. By-Name List Policies and Procedures

The By-Name List contains all known individuals experiencing homelessness in Sedgwick County. These individuals enter the By-Name List either by completing a VI-SPDAT and Coordinated Entry enrollment with a trained VI-SPDAT assessor, or by presenting to a trained VI-SPDAT assessor as currently experiencing homelessness, but unwilling or unable to complete the assessment. A person unwilling or unable to complete the assessment will be added to the By-Name List via the Coordinated Entry enrollment without VI-SPDAT assessment information, and the assessor will attempt to learn as much about that individual and his/her situation for a future discussion at case conferencing.

Once on the By-Name List, a CoC Housing Navigator will do the following:

- Work with housing providers and property owners/managers to find housing for the individuals on the By-Name List, starting with the most vulnerable household on the By-Name List (Highest VI score in the highest prioritized sub-population), and working downward. (See Section I.D. for more information on prioritization.)
- Follow up with all households actively homeless on the By-Name List once every 30 days to confirm their housing status and gather updated information.

1. Active Status on the By-Name List

A household on the By-Name List is “Active” on the By-Name List for as long as they are currently homeless with an enrollment in Coordinated Entry.

2. Inactivity Policy

The Inactivity Policy is a critical component of maintaining a real-time By-Name List and effective Coordinated Entry System. To ensure an efficient assessment and referral process, Housing Navigators and Outreach Teams must be able to contact and connect with households as soon as a housing opportunity is available. Without this policy, the CE can experience delays in its referral procedures due to the time spent searching for households in the community.

If a household has had no contact with any Access Point, Housing Navigator and/or Community Outreach for 60 days (about 2 months), AND they have had no services or shelters stays recorded in HMIS for the same period, the household should be brought to Case Conferencing to verify their inactive status. If there is no contact with the household, a CoC Housing Navigator will exit the household from Coordinated Entry. A household should not be exited for 60 days (about 2 months) of inactivity as recorded in HMIS without being brought to case conferencing to verify the household is no longer in the system.

If a household that was exited from Coordinated Entry contacts the homeless system, which includes outreach, day shelters, emergency shelters, and all access points, they are re-enrolled in Coordinated Entry. A VI-SPDAT assessment is required if it has been a year or longer since the household’s last assessment, or if there has been a significant change in the household’s life, such as an eviction or institutionalization.

Inactivity for the Veteran Population: CE staff coordinate with the VA team to access HOMES and Remote Data Systems to verify if a veteran has relocated or has accessed any other VA services locally. If a signed Release of Information was in place at the time a Veteran is to be exited from Coordinated Entry, the VA team will provide any pertinent information available.

3. Removal from the By-Name List for a Permanent Housing Destination

Besides being removed for inactivity, a household is only removed from the BNL if they have a permanent housing destination (they are exited on the move-in date to the permanent housing). A household should not be exited from BNL because they are exiting a program, unless they are exiting the program to a permanent housing destination.

4. Release of Information, Consent, and Information Sharing

When communicating about persons on the By-Name List, great care must be taken to maintain appropriate confidentiality. Whenever possible, Client IDs should be used. Personal information should not be sent via email unless encrypted and general security training offered by HMIS staff should be adhered to in all cases. Confidentiality for DV survivors is detailed in the next section.

HMIS CAS & Consent Agreements: Clients must consent to have their information entered into HMIS in accordance with the Impact ICT CoC HMIS Policies and Procedures. Client information entered on the VI-SPDAT and in ClientTrack is protected by Impact ICT CoC and its data security policies, which maintains the following: “Impact ICT CoC is committed to ensuring the confidentiality, privacy, integrity, and availability of all electronic protected health information (ePHI) it receives, maintains, processes and/or

transmits on behalf of its Users. To comply with the HIPAA Security Rule, HIPAA Privacy Rule, and Eccovia, utilizes a layering software that is Certified to protect the security and integrity of ClientTrack.”

Informed Consent and the VI-SPDAT: Per the OrgCode VI-SPDAT Manual, “An individual must provide informed consent prior to the VI-SPDAT (or SPDAT) being completed. You cannot complete an [assessment] with a client without that person’s knowledge and explicit agreement. You also cannot complete [an assessment] solely through observation or using known information within your organization. This applies to all participants in coordinated entry, including survivors of domestic violence.”

Data entered onto the By-Name List through ClientTrack will be protected by Impact ICT CoC. The ClientTrack platform is fully HIPAA- and FERPA-compliant, and clients entered into the system must consent to being entered into a community-wide database to have their information shared to enter the By-Name List. This consent will be documented and maintained within the ClientTrack platform. For clients who elect not to consent to entering the By-Name List, Housing Navigators will work with clients to collect any relevant information they are willing to provide and will raise the issue of housing nonconsenting households in staff meetings and case conferences.

Households Experiencing Domestic Violence

All CoC Staff will be trained in safety planning, emergency situations, and trauma-informed care at least annually. All VSP conducting assessments are specially trained in the complex dynamics of Domestic Violence (DV), how to handle emergency situations, and if they are DV Survivors at risk of harm. Survivors of domestic violence will have equal access to Coordinated Entry. Survivors of domestic violence, like all clients, are not required to have identified information entered HMIS to receive services, and providers must express this option to potential program participants. People fleeing or attempting to flee domestic violence and victims of trafficking are assured safe and confidential access to the coordinated entry process and victim services, including access to the comparable process used by victim service providers, as applicable, and immediate access to emergency services such as domestic violence hotlines and shelter. Where appropriate, DV service providers may wish to include the scoring of a Lethality Assessment in the prioritization process to indicate the need for project-based placement.

Steps To Enroll a Household Experiencing Domestic Violence on the By-Name List:

- Refer to CoC identified VSP Access Points
- Community advocates will work with survivors to access services, including safety plans and CoC DV Coordinated Entry documentation.
- VSP Advocate will lead the conversation by giving the right refuse items that affect the client’s safety and confidentiality when completing CoC DV Consent, CAS, and VI-SPDAT. VI-SPDAT can be completed with the minimum information necessary to determine eligibility, prioritization, and can exclude personally identifying information. Consent will list agency and staff contact information; all communication about Coordinated Entry, services, and referrals will be conducted through the VSP and with a unique HMIS Client ID.
- All documentation will be sent to CoC DV Housing Navigator with agency identified code. CoC Housing Navigator will respond with a unique HMIS Client-ID and By-Name ID, which will be used for any future communication to community case managers.
- Once survivor has been matched to a housing program, VSP will be contacted by Housing Navigator about the next steps to follow up with the housing program directly using the

HMIS ID. The Housing Program will provide new CAS and Consents to be entered into main HMIS database. Client will have option to remain de-identified and can refuse to share any demographic information.

- Once housing is secured, the client is no longer in contact with VSP, or locates secure housing aside from CE; VSP referral agency will complete exit assessment to housing navigator to remove them from the CE By-Name list. VSP are asked to submit an exit document to Housing Navigator within one week of secured housing.

Unique Populations

HUD and communities prioritize different populations – different resources are available for these populations. The following is a list of some of these populations (not to be confused with populations for whom our community may consider variations in procedures and assessment).

- **Chronically homeless:** For Impact ICT CoC to be on track to effectively end chronic homelessness, chronically homeless persons need to be prioritized for quick assessments and available services.
- **LGBTQ:** In accordance with Federal regulation and recent Federal guidance, individuals shall not be discriminated against due to sex, gender identity, or sexual orientation. Providers should offer services in safe and culturally competent ways.
- **Veterans:** Per USICH's ALL-IN plan, a Veteran is an adult who served on active duty in the U.S. armed forces, including the military reserves and the National Guard, regardless of how long they served or the type of discharge they received. Where an individual or family is eligible for veteran housing resources (SSVF or VASH), they should be prioritized for and strongly encouraged to take advantage of these resources. Where veterans are not eligible for VA services, providers should work with veterans to seek an appeal. If an appeal is unrealistic or the veteran is resistant to receiving VA services, veterans should be prioritized for non-Veteran resources.
- **Unaccompanied Children & Youth:** Unaccompanied homeless youth are persons under the age of 21 who are experiencing homelessness and not living with a parent or guardian. This population requires specialized service provisions, and service providers should maintain an awareness of current best practices for this population on an ongoing basis. Where unaccompanied youth tie for service prioritization, they should be served first.
- **Domestic Violence:** All CoC Staff will be trained in safety planning, emergency situations, and trauma-informed care at least annually. Survivors of domestic violence will have equal access to Coordinated Entry. Survivors of domestic violence, like all clients, are not required to have identified information entered HMIS to receive services, and providers must express this option to potential program participants. People fleeing or attempting to flee domestic violence and victims of trafficking are assured safe and confidential access to the coordinated entry process and victim services, including access to the comparable process used by victim service providers, as applicable, and immediate access to emergency services such as domestic violence hotlines and shelter. Where appropriate, DV service providers may wish to include the scoring of a Lethality Assessment in the prioritization process to indicate the need for project-based placement.
- **HIV+:** An additional resource, Housing Opportunities for Persons with AIDS (HOPWA), is available for persons who are HIV+. This resource is contracted through the Kansas Department of Health, and providers are encouraged to contact this office directly if they are not aware of who provides HOPWA within their community.
- **60+:** Persons age 60+ may have access to additional housing resources. Aging services divisions may be willing to offer support and advocacy, and many communities have affordable housing units set aside specifically for persons in these categories.

Reporting Requirements

Scoring, status, or placement reporting should be completed within 7 days of the assessment, status change, change in geography, or placement date in order to keep By-Name List data up to date.

1. Tracking Progress

Process evaluation, performance, and helpful information for decision-making requires data to be reported regularly and be readily available and coordinated assessment tools can be an excellent resource for doing so. The following modes are recommended for tracking progress:

Community Level: By-Name List Summary Reports.

Program Level: Program By-Name List Summary Reports are forthcoming. In the meantime, agencies can view their own placements through ClientTrack.

Client Level: Client Track also serves as a case management tool, and additional reporting options exist and can be utilized there.

Feedback on the Wichita ICT CoC Coordinated Entry process will be continually solicited through email to HMISTech@unitedwayplains.org. This feedback will be aggregated and reported anonymously to the Wichita Impact CoC Board and Wichita Impact general membership on an ongoing basis through monthly Board and General meetings.

II. Appendices

Appendix A – Glossary of Terms

Access Points – For the purpose of this document, Access Points are designated areas located within our continuum where individuals or families can go to for intake and assessment of homeless prevention and housing services for which they may qualify.

Admission – Using authority to admit a client into a program.

Assessment – A process that reveals the past and current details of a service seeker’s strengths, and needs, in order to match the client to appropriate services and housing. For the purpose of this toolkit, assessment will refer to a process (whether at primary screening and intake or at entry to a housing program) that reveals a client’s eligibility, needs, barriers and strengths.

Affordable Housing – Non-time limited housing that is available to households with incomes less than 30%, 50% or 80% of area median income (AMI), also sometimes known as workforce housing. Housing projects may receive tax credits or other incentives in exchange for agreeing to set aside a certain number of units in the development for households with total incomes less than a particular percentage of AMI. Households must meet income requirements to be eligible for the units. Affordable housing may or may not have a rental subsidy.

By-Name List – List of all persons currently experiencing homelessness in a region (in this case, Sedgwick County). Managed by the CE Housing Navigator of the Wichita Impact ICT CoC

CAS (Client Assessment Services)- The process of entering an individual/ family into the HMIS system.

CES (Coordinated Entry System) – The process where any eligible household can complete an assessment to be considered for homelessness assistance through Wichita Impact- CoC.

CES Participating Programs – Any program that is required by its funding source to participate in coordinated entry or has opted into the system to receive its referrals through coordinated entry.

Chronically Homeless – Chronically homeless means: (1) A “homeless individual with a disability,” as defined in section 401(9) of the McKinney-Vento Homeless Assistance Act (42 U.S.C. 11360(9)), who: (i) Lives in a place not meant for human habitation, a safe haven, or in an emergency shelter; and (ii) Has been homeless and living as described in paragraph (1)(i) of this definition continuously for at least 12 months or on at least 4 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 paragraph (1)(i). Stays in institutional care facilities for fewer than 90 days (about 3 months) will not constitute as a break in homelessness, but rather such stays are included in the 12-month total, as long as the individual was living or residing in a place not meant for human habitation, a safe haven, or an emergency shelter immediately before entering the institutional care facility; (2) An individual who has been residing in an institutional care facility, including a jail, substance abuse or mental health treatment facility, hospital, or other similar facility, for fewer than 90 days and met all of the criteria in paragraph (1) of this definition, before entering that facility; or (3) A family with an adult head of household (or if there is no adult in the family, a minor head of household) who meets all of the criteria in paragraph (1) or (2) of this definition,

including a family whose composition has fluctuated while the head of household has been homeless.

Coordinating Entity – The entity that manages the CE system. In the Wichita Impact CoC context, this refers to the Coordinated Entry Committee of the Wichita Impact - CoC.

Eligible Household – Coordinated entry serves all young adults, families, veterans, and single adults who are literally homeless according to the category 1 HUD definition of homelessness or fleeing/attempting to flee domestic violence, and single young adults (ages 18-24) who are imminently at risk of homelessness within the next 14 days. See “Eligibility” section for details.

Emergency Shelter – Temporary shelter from the elements and unsafe streets for homeless individuals and families. Emergency shelters typically address the basic health, food, clothing, and personal hygiene needs of the households that they serve and provide information and referrals about supportive services and housing. Emergency Shelters are indoors and range from mats on the floor in a common space to beds in individual units. Some shelters are overnight only, while others operate 24/7.

ESG (Emergency Solution Grant) – Grant from HUD that support homelessness prevention, emergency shelter, and related services.

Family – A household with more than one individual. This will include individuals with children or other dependents, couples without children, couples with children, and multi-generational households.

F-VI-SPDAT (Family Vulnerability Index – Service Prioritization Decision Assistance Tool) – A tool developed and owned by OrgCode that is utilized for pregnant or parenting households to recommend the level of housing supports necessary to resolve the presenting crisis of homelessness. Within those recommended housing interventions, the F-SPDAT allows for prioritization based on presence of vulnerability.

GPD (Grant Per Diem) – Funding offered through the VA to community agencies that provide supportive services and/or housing for homeless Veterans.

HEARTH – The Homeless Emergency Assistance and Rapid Transition to Housing (HEARTH) act of 2009 that includes Emergency Solutions Grant (ESG) and Continuum of Care (CoC) grants.

HMIS (Homeless Management Information System) – A web-based software application designed to record and store person-level information regarding the service needs and history of households experiencing homelessness throughout a Continuum of Care (CoC) jurisdiction, as mandated by HUD.

Homeless – HUD definition as of January 2012; an individual or family who lacks a fixed regular, and adequate nighttime residence, which includes a primary nighttime residence of: a place not designed for or ordinarily used as a regular sleeping accommodation (including car, park, abandoned building, bus/train station, airport or camping grounds); a publicly or privately operated shelter or transitional housing, including a hotel or motel paid for by government or charitable organizations. In addition, a person is considered homeless if he or she is being discharged from an institution where he or she has been a resident for 90 days or less and the

person resided in shelter (but not transitional housing) or place not meant for human habitation immediately prior to entering the institution.

Homeless Individual with a Disability – The term ‘homeless individual with a disability’ means an individual who is homeless, as defined in section 103, and has a disability that— (i)(I) is expected to be long-continuing or of indefinite duration; (II) substantially impedes the individual’s ability to live independently; (III) could be improved by the provision of more suitable housing conditions; and (IV) is a physical, mental, or emotional impairment, including an impairment caused by alcohol or drug abuse, post-traumatic stress disorder, or brain injury; (ii) is a developmental disability, as defined in section 102 of the Developmental Disabilities Assistance and Bill of Rights Act of 2000 (42 U.S.C. 15002); or (iii) is the disease of acquired immunodeficiency syndrome or any condition arising from the etiologic agency for acquired immunodeficiency syndrome.

HOPWA (Housing Opportunities for Persons With AIDS) – A Federal program dedicated to the housing needs of people living with HIV/AIDS.

Housing Assessors – Staff based at Wichita Impact-CoC Coordinated Entry Access Points and other identified individuals who administer the VI-SPDAT with individuals and families who are eligible for Coordinated Entry.

Housing Coordinators – Staff based at Wichita Impact-CoC Coordinated Entry Access Points who work with eligible households to prepare for a housing referral once they have completed an assessment. The Housing Coordinator role may alternatively be filled by an outreach worker or case manager.

HUD (The United States Department of Housing and Urban Development) – HUD requires Continuums of Care to establish a Centralized or Coordinated Assessment System where households experiencing homelessness are assessed and referred

Impact ICT CoC Geographic Region – This includes the City of Wichita and the County of Sedgwick, Kansas.

Permanent Supportive Housing- Permanent housing for a household that is homeless on entry, and has a condition or disability, such as mental illness, substance abuse, chronic health issues, or other conditions that create multiple and serious ongoing barriers to housing stability. Households have a long-term high level of service needs in order to meet the obligations of tenancy and maintain their housing. Tenants have access to a flexible array of comprehensive services, mostly on site, such as medical and wellness, mental health, substance abuse, vocational/employment, and life skills. Services are available and encouraged but are not to be required as a condition of tenancy.

Permanent Housing with Supports (i.e., other permanent housing) - Permanent housing for homeless households with a high to medium level of service needs. Services are needed in order for the homeless household to maintain housing stability and services are individualized and targeted based on the housing stability plan. Programs and services may be available on or offsite and the tenant holds a rental agreement.

Referral – Referring a client to a particular program for possible help.

RRH (Rapid Re-Housing) – A type of housing assistance that provides housing identification, move-in and rental assistance, and/or case management.

SSVF (Supportive Services for Veteran Families) – Rapid Rehousing assistance for veterans, including single individuals and families.

Subsidized Housing – Non-time limited housing that is supported by a rental subsidy. Generally, the tenant pays a portion of their monthly income towards rent and utilities, and the other portion of the rent is paid by the subsidy, up to a defined reasonable amount.

Targeting – Process of determining the population to whom assistance will be directed. That is, the target population. The targeting process can occur at both the system and the program levels.

Transitional Housing – A time-limited intervention intended to provide assistance to households who need more intensive or deeper levels of support services to attain permanent housing. Services continue to emphasize housing attainment through a housing-focused assessment and housing stability planning, which includes working with each household to identify resources in the community, to make referrals as needed, and to support on-going family and housing stability.

VA – The Department of Veteran Affairs; provides resources, including housing, for individuals and families who are veterans

VASH (Veterans Administration Housing Support) – The HUD-VASH program combines Housing Choice Voucher rental assistance for homeless veterans with case management and clinical services provided by the VA.

VSP (Victim Service Provider)- a nonprofit organization whose primary mission is to provide direct services to victims of domestic violence. This term includes permanent housing providers—including rapid re-housing, domestic violence programs (shelters and non-residential), domestic violence transitional housing programs, dual domestic violence and sexual assault programs, and related advocacy and supportive services programs.

VI-SPDAT (Vulnerability Index- Service Prioritization Decision Assistance Tool) – An assessment tool developed and owned by OrgCode and Community Solutions that is utilized for single individuals, including veterans, to recommend the level of housing supports necessary to resolve the presenting crisis of homelessness. Within those recommended housing interventions, the VI-SPDAT allows for prioritization based on presence of vulnerability.

YA (Young Adult) – An individual who is 18-24 years old. There are programs targeted to serve individuals in this age range. Young adults may also be eligible for single adult programs.

Appendix B – List of Access Points and Participating Agencies

- 1. Open Door Homeless Resource Center**
402 E. 2nd Street North
Wichita, KS 67202 316-265-9371
- 2. Breakthrough Episcopal Social Services**
1010 N. Main Street
Wichita, KS 67203 316-269-2534
- 3. The Lord's Diner**
520 N. Broadway Street
Wichita, KS 67203 316-266-4966

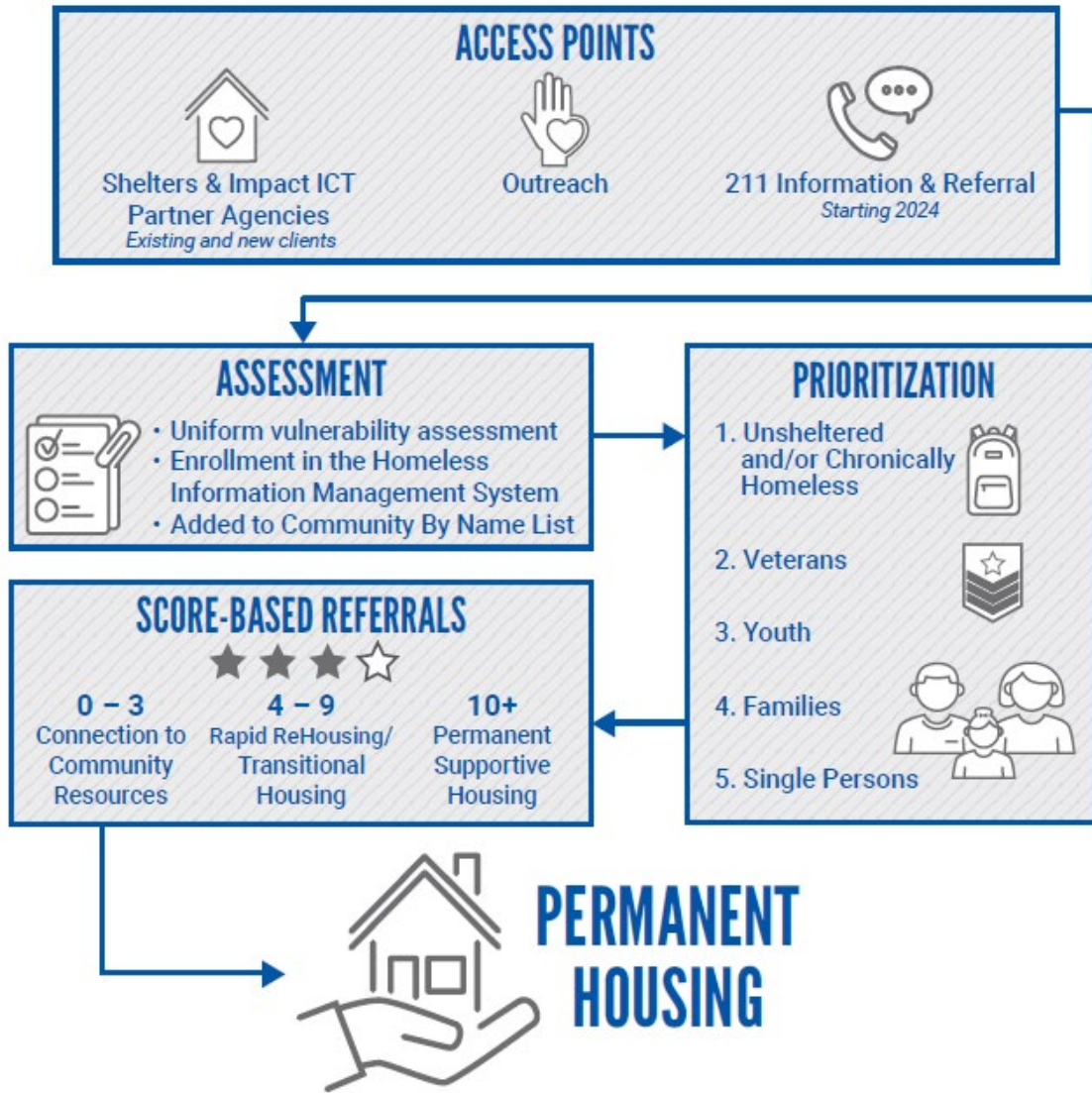
To inquire about becoming an assessment site, contact Jaraya Reynolds (316-267-1321 ext. 4154).

Appendix C – Definitions of Homelessness (Table One) & Documentation Standards (Table Two)

Category 1	Literally Homeless	<p>Individual or family who lacks a fixed, regular, and adequate nighttime residence, meaning:</p> <ul style="list-style-type: none"> • Has a primary nighttime residence that is a public or private place not meant for human habitation; • Is living in a 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 and local government programs); OR • Is exiting an institution where (s)he has resided for 90 days or less <u>AND</u> who resided in an emergency shelter or place not meant for human habitation immediately before entering that institution
Category 2	Imminent Risk of Homelessness	<p>Individual or family who will imminently lose their primary nighttime residence, provided that:</p> <ul style="list-style-type: none"> • Residence will be lost within 14 days (about 2 weeks) of the date of application for homeless assistance; • No subsequent residence has been identified; <u>AND</u> • The individual or family lacks the resources or support networks needed to obtain other permanent housing
Category 3	Homeless under other Federal statutes	<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"> • Are defined as homeless under the other listed federal statutes; • Have not had a lease, ownership interest, or occupancy agreement in permanent housing during the 60 days prior to the homeless assistance application; • Have experienced persistent instability as measured by two moves or more during in the preceding 60 days; <u>AND</u> • Can be expected to continue in such status for an extended period due to special needs or barriers
Category 4	Fleeing/ Attempting to Flee DV	<p>Any individual or family who:</p> <ul style="list-style-type: none"> • Is fleeing, or is attempting to flee, domestic violence; • Has no other residence; <u>AND</u> • Lacks the resources to obtain other permanent housing

<p>Category 1</p>	<p>Literally Homeless</p>	<ul style="list-style-type: none"> • Written observation by the outreach worker; <u>or</u> • Written referral by another housing or service provider; <u>or</u> • Certification by the individual or head of household seeking assistance stating that they were living on the streets or in shelter; • For an individual exiting an institution – one of the forms of evidence above <u>and</u>: <ul style="list-style-type: none"> ○ Discharge paperwork <u>or</u> written/oral referral, <u>or</u> ○ Written record of intake worker’s due diligence to obtain above evidence <u>and</u> certification by individual that they exited institution
<p>Category 2</p>	<p>Imminent Risk of Homelessness</p>	<ul style="list-style-type: none"> • A court order resulting from an eviction action notifying the individual or family that they must leave; <u>or</u> • For individual and families leaving a hotel or motel – evidence that they lack the financial resources to stay; <u>or</u> • A documented and verified oral statement; <u>and</u> • Certification that no subsequent residence has been identified; <u>and</u> • Self-certification or other written documentation that the individual lacks the financial resources and support necessary to obtain permanent housing
<p>Category 3</p>	<p>Homeless under other Federal statutes</p>	<ul style="list-style-type: none"> • Certification by the nonprofit or state or local government that the individual or head of household seeking assistance met the criteria of homelessness under another federal statute; <u>and</u> • Certification of no PH in last 60 days; <u>and</u> • Certification by the individual or head of household and any available supporting documentation, that they have moved two or more times in the last 60 days; <u>and</u> • Documentation of special needs <u>or</u> 2 or more barriers
<p>Category 4</p>	<p>Fleeing/ Attempting to Flee DV</p>	<ul style="list-style-type: none"> • <i>For victim service providers:</i> <ul style="list-style-type: none"> ○ An oral statement by the individual or head of household seeking assistance which states: they are fleeing; they have no subsequent residence; and they lack resources. Statement must be documented by a self-certification or a certification by the intake worker. • <i>For non-victim service providers:</i> <ul style="list-style-type: none"> ○ Oral statement by the individual or head of household seeking assistance they are fleeing. This statement is documented by a self-certification or by the caseworker. Where the safety of the individual or family is not jeopardized, the oral statement must be verified, <u>and</u> ○ Certification by the individual or head of household that no subsequent residence has been identified; <u>and</u> ○ Self-certification, or other written documentation, that the individual or family lacks the financial resources and support networks to obtain other permanent housing.

Appendix D – Overview of Coordinated Entry in Sedgwick County



Appendix E – Procedural Instructions for Assessing Individuals Experiencing Homelessness and Entering them onto the By-Name List

To enquire about training on the VI-SPDAT, contact HMISTech@unitedwayplains.org.

Steps to complete the VI-SPDAT:

1. First, determine if your client is literally homeless *right now* or if they will be come homeless in fourteen days. (Refer to Appendix C).
 - a. If your client does not meet qualifications for Category 1, 2, or 4 Homelessness, then the By-Name List is not an appropriate resource for them. Continue to work with your client to connect them to other community resources.
2. Complete a “Coordinated Entry Enrollment” in HMIS
3. Next, determine if your client would be best served by the **Individual, Family, or the Youth** version of the housing assessment (VI-SPDAT 3).
 - a. Ask your client: “Even if they are not with you today, would your household include a husband, wife, long-term partner, minor children, or others if you had a safe place to live?”
 - i. If NO: Ask if the individual is aged 18-24
 1. If NO: Follow the directions for the **Individual**
 2. If YES: Follow the directions of the **Youth**
 - ii. If YES: Follow the directions for the **Family**
4. For **Individuals:**
 - a. Log into your HMIS Account
 - b. Click on the client’s profile
 - c. Click on “SPDAT Assessments” on the left side at the bottom of the screen
 - d. Click “VI-SPDAT”
 - e. Click “Add new VI-SPDAT v3 Assessment”
 - f. Enter the following information:
 - i. First Name, Last Name, Date of Birth, Last 4 digits of SSN, email (optional)
 - ii. For enrollment: Select the household’s open CE enrollment. If the household does not have a CE enrollment, enroll them in CE before continuing or else they will not show up on the By-Name List.
 - iii. Ensure the client understands that you will be conducting a survey of what’s going on in their life and receive their consent to perform the survey.
 - g. Cover the opening speaking points
 - h. Administer the assessment.
 - i. Encourage clients to respond with “Yes,” “No,” or one-word answers.
 1. If a client does share specifics, allow them to finish and remind them that you are looking for one-word answers.
 - ii. Emphasize that skipping or refusing a question is okay.
 - iii. No matter what they client says, even if you believe it to be false, record what they say and do not react. This will help the client feel at ease with answering.
 - iv. Encourage clients to continue working with any case managers they are correctly seeing but expect that someone else my communicate with them about their housing needs.
 - v. Some questions end with “anything like that”; slow down to emphasize that you are not looking for a detailed answer.

- i. Set prioritization status as “Placed on the Prioritization List” only if the client meets Category 1, 2, or 4 homeless.
 - j. Click “Submit” once you are finished with the form.
 - i. Your client will automatically be added to the list, and someone will check in with your client about housing needs.
5. For **Families:**
- a. Log into your HMIS account.
 - b. Click on the Client’s profile.
 - i. Be sure to click on the profile for the Head of Household.
 - c. Click on “SPDAT Assessments” on the left side at the bottom of the screen
 - d. Click “VI-SPDAT”
 - e. Click “Add new Family-VI-SPDAT v3 Assessment”
 - f. Enter the following information:
 - i. First Name, Last Name, Date of Birth, Last 4 digits of SSN, email (optional)
 - ii. For enrollment: Select the household’s open CE enrollment. If the household does not have a CE enrollment, enroll them in CE before continuing or else they will not show up on the By-Name List.
 - iii. Ensure the client understands that you will be conducting a survey of what’s going on in their life and receive their consent to perform the survey.
 - g. Cover the opening speaking points
 - h. Administer the assessment.
 - i. Encourage clients to respond with “Yes,” “No,” or one-word answers.
 - 1. If a client does share specifics, allow them to finish and remind them that you are looking for one-word answers.
 - ii. Emphasize that skipping or refusing a question is okay.
 - iii. No matter what they client says, even if you believe it to be false, record what they say and do not react. This will help the client feel at ease with answering.
 - iv. Encourage clients to continue working with any case managers they are correctly seeing but expect that someone else my communicate with them about their housing needs.
 - v. Some questions end with “anything like that”; slow down to emphasize that you are not looking for a detailed answer.
 - i. Set prioritization status as “Placed on the Prioritization List” only if the client meets Category 1, 2, or 4 homeless.
 - j. Click “Submit” once you are finished with the form.
 - i. Your client will automatically be added to the list, and someone will check in with your client about housing needs.
6. For **Youth:**
- a. Log into your HMIS account.
 - b. Click on “SPDAT Assessments” on the left side at the bottom of the screen
 - c. Click “TAY-VI-SPDAT”
 - d. Click “Add new TAY-VI-SPDAT v2 Assessment”
 - e. Enter the following information:
 - i. First Name, Last Name, Date of Birth, Last 4 digits of SSN, email (optional)
 - ii. For enrollment: Select the household’s open CE enrollment. If the household does not have a CE enrollment, enroll them in CE before continuing or else they will not show up on the By-Name List.

- iii. Ensure the client understands that you will be conducting a survey of what's going on in their life and receive their consent to perform the survey.
 - f. Cover the opening speaking points
 - g. Administer the assessment.
 - i. Encourage clients to respond with "Yes," "No," or one-word answers.
 - 1. If a client does share specifics, allow them to finish and remind them that you are looking for one-word answers.
 - ii. Emphasize that skipping or refusing a question is okay.
 - iii. No matter what they client says, even if you believe it to be false, record what they say and do not react. This will help the client feel at ease with answering.
 - iv. Encourage clients to continue working with any case managers they are correctly seeing but expect that someone else my communicate with them about their housing needs.
 - v. Some questions end with "anything like that"; slow down to emphasize that you are not looking for a detailed answer.
 - h. Set prioritization status as "Placed on the Prioritization List" only if the client meets Category 1, 2, or 4 homeless.
 - i. Click "Submit" once you are finished with the form.
 - i. Your client will automatically be added to the list, and someone will check in with your client about housing needs.
7. If you are completing a paper assessment, ensure that you are using the correct assessment for the client. After completing the paper assessment, enter the data into HMIS following the steps outlined above.