Amendment for River Valleys CES Transfer Policy
Affects page 7, section E in the River Valleys Continuum of Care Coordinated Entry System Policies and Procedures.

Voluntary transfers: If an opening in an equal program type becomes available within the River Valleys CoC region, and a participant is eligible and is requesting a transfer, then the housing provider must contact the Coordinated Entry Specialist.

Involuntary transfers: If a non-emergency housing project/program designated for homeless persons is closing and participants affected were referred via CES (or would have been had CES been in place when they entered the program), currently enrolled clients may be transferred to another program. Households should be assessed for coordinated entry and entered into either HMIS or the non-HMIS Referral Form. The agency with the closing program and Coordinated Entry Specialist will discuss each case individually and determine potential eligible program referrals for each household. For program openings where they are eligible, households that are exiting from a closing program will be given priority over current CES participants. Mainstream housing and services may also be considered.

Effective date: July 1, 2018

New Amendment for River Valleys CES Transfer Policy
Affects page 7, section E in the River Valleys Continuum of Care Coordinated Entry System Policies and Procedures.

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Emergency transfers: As required by the Housing and Urban Development’s (HUD) final rule, “Violence Against Women Reauthorization Act of 2013: Implementation in HUD Housing Programs” (published November 16, 2016), the River Valleys Continuum of
Care requires all Continuum of Care (CoC) & Emergency Solutions Grant (ESG) funded programs to adopt and implement certain protections and develop emergency transfer plan protocols that are available to all victims of domestic violence, dating violence, sexual assault and stalking, regardless of sex, gender identity or sexual orientation. This requirement is in response to the Reauthorization of the Violence Against Women Act (VAWA) of 2013 which extends the enhanced housing protections and options to all HUD housing programs. See attachment D for more details about emergency transfers.

Effective date: September 4, 2018
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- A- River Valleys Coordinated Entry System (CES) Access Points
- B- River Valleys Coordinated Entry System Participant Notice and Consent for Release of Information
- C- Order of Priority in CoC Program-funded Permanent Supportive Housing
Introduction

The River Valleys Continuum of Care (CoC) has a long history of trying to coordinate services for our region’s homeless population including Family Homeless Prevention and Assistance and Long-term Homeless partnerships. The Coordinated Entry System (CES) is an evolution from these efforts intersecting with Federal and state mandates and initiatives to shift from managing homelessness to preventing and ending homelessness. In addition to partners who are mandated (HUD CoC, ESG, State funded) to participate in the CES by their funding source, all agencies providing housing assistance are encouraged to participate in our efforts to streamline coordinated access to housing for those who are in the greatest need and to fill program openings by CES referrals.

In May 2009, President Obama signed the Homeless Emergency Assistance and Rapid Transition to Housing (HEARTH) Act into law. The HEARTH Act amended and reauthorized the McKinney-Vento Homeless Assistance Act with substantial changes. One of these changes, the Continuum of Care (CoC) Program interim rule, was published on July 31, 2012. This rule established requirements for the administration and implementation of Continuum’s of Care, including Coordinated Entry.

A coordinated entry system is defined as a coordinated process designed to coordinate program participant intake, assessment, and provision of referrals, which covers the entire geographic area. It must be easily accessed by individuals and families seeking housing or services, well-advertised, and include a comprehensive and standardized assessment tool. Additionally, Congress mandates CoCs to “collect an array of data on homelessness in order to prevent duplicate counting of homeless persons and to analyze their patterns of use of assistance, including how they enter and exit the homeless assistance system and the effectiveness of the systems.”

In August 2015, the combined Continuum of Care regions and state partners in Minnesota approved a shared Strategic Plan for Coordinated Entry.

River Valleys Continuum of Care CES is not a new program, but a new way of providing service. The CES will help our CoC better identify, document, and evaluate system needs, as well as prioritize limited resources, assuring those who are most in need of services are prioritized for services.

**Coordinated Entry is** a way to help those seeking housing and services to access programs more efficiently by:

- Making fewer phone calls;
- Undergoing fewer screenings;
- Being realistic with participants about their near-term options, giving them the opportunity to assess their situation honestly and identify alternatives to public assistance;
- Identifying and prioritizing individuals and families based on vulnerability and severity of service needs.

**Coordinated Entry is not** a stand-alone solution to end homelessness or a solution to the shortage of affordable housing stock. The CES supports the purpose of River Valleys Continuum of Care to prevent, respond to, and help end homelessness in Southeastern Minnesota.
Guiding Principles

In alignment with the Minnesota Coordinated Entry System Policies and Procedures, the River Valleys Coordinated Entry System has adopted the following guiding principles:

1. Promote client centeredness, treating every person with dignity and offering quality assistance, have easy access to the CES, and participate in their own housing plan.
2. Prioritize most vulnerable for available housing and services.
3. Provide timely access and appropriate referrals to housing programs and support services. Strive to shorten the number of days between onset or threat of homelessness and access to prevention or re-housing services.
4. Eliminate barriers to housing placement. Identify system practices and individual project eligibility criteria which may contribute to excluding participants from services and work to eliminate those barriers.
5. Adopt statewide standards, but allow flexibility for local customization beyond baseline standard.
6. Create transparency and accountability within the CES for participants, service providers, and funders.
7. Promote collaborative and inclusive planning and decision making practices.
8. State and local communities will use coordinated entry data to analyze local and statewide housing needs and create a diversity of housing options.
9. Exercise continuous improvements efforts. Focus on evaluation and adapting to meet the current needs of providers and consumers. Continually strive for effectiveness and efficiency and agree to make changes when those objectives are not achieved.
10. Acknowledge and honor tribal sovereignty; respect cultural, regional, programmatic, and philosophical differences.

Geographic Service Area

The River Valleys Continuum of Care CES serves the Minnesota counties of Blue Earth, Brown, Dodge, Faribault, Fillmore, Freeborn, Goodhue, Houston, Le Sueur, Martin, Mower, Nicollet, Olmsted, Rice, Sibley, Steele, Wabasha, Waseca, Watonwan, and Winona, and the entitlement areas of Mankato, North Mankato, and Rochester.

Governance

CES in the River Valleys CoC region is governed by a Continuum of Care Coordinated Entry System Committee and the River Valleys Continuum of Care. The role of the Committee is to make recommendations on implementing CES and is responsible for training and evaluating the coordinated entry system. The committee will make recommendations based on input from all stakeholders and other CoC Committees. The River Valleys Continuum of Care will have final approval on all CES policies, forms, and tools.
River Valleys CES Procedures for Partner Agencies

Household Contacts or Presents at Access Site

Complete Step 1: Diversion/Triage Screen

Household has a safe place to stay for the next 3-10 days.

Provide referral(s) to mainstream services. Refer to prevention services, if applicable. **Step 2 and VI-SPDAT can be offered.**

Household **DOES NOT** have a safe place to stay tonight.

Provide referral to emergency shelter (includes DV shelter and motel vouchers)

No space available in shelter, complete Step 2 and VI-SPDAT.

After 10-14 days, assessor completes Step 2 and VI-SPDAT. **Enter data into HMIS or non-HMIS Priority List.**

Household prioritized into housing based on vulnerability and eligibility.

<table>
<thead>
<tr>
<th>Prevention</th>
<th>Transitional &amp; Rapid Re-Housing</th>
<th>Permanent Supportive Housing</th>
</tr>
</thead>
<tbody>
<tr>
<td>0-3 Single VI-SPDAT</td>
<td>4-7 Single VI-SPDAT</td>
<td>8+ Single VI-SPDAT</td>
</tr>
<tr>
<td>0-3 Family VI-SPDAT</td>
<td>4-8 Family VI-SPDAT</td>
<td>9+ Family VI-SPDAT</td>
</tr>
<tr>
<td>0-3 Youth VI-SPDAT</td>
<td>4-7 Youth VI-SPDAT</td>
<td>8+ Youth VI-SPDAT</td>
</tr>
</tbody>
</table>
River Valleys CoC Coordinated Entry Procedures

The following procedures for the River Valleys CES are required for all agencies that have signed the River Valleys CES Partner Agreement including all HUD-COC-funded and ESG funded agencies. All HUD-COC-funded and ESG funded agencies are required to participate in CES including only filling their programs by way of CES referrals.

1. **Access:** An existing agency or point-of-contact where households facing a housing crisis complete a **Step 1: Diversion/Triage Screen** prior to entry into the homeless response system. Based on screening, persons will be referred for: 1) mainstream services, 2) prevention services, or 3) Homeless Services (Domestic Violence, Emergency Shelters, or to assessment site). The ONLY access to homeless dedicated beds is through a designated access site. See attachment A for Access Sites throughout the River Valleys CoC.

The purpose of the Step 1: Diversion/Triage Screen is to prevent persons from unnecessarily entering or re-entering the homeless system by helping to identify immediate alternate housing arrangements and, if necessary, connecting to services with financial assistance to help them remain in or return to permanent housing.

All access sites must have a “no wrong door” approach in which a homeless family or individual can present at any homeless housing and service provider in the geographic area. In addition, households who are included in more than one of the populations for which an access point is dedicated (for example, a parenting unaccompanied youth who is fleeing domestic violence) can be served at all of the access points for which they qualify as a target population.

Access sites cannot deny participants to the coordinated entry process on the basis that the participant is or has been a victim of domestic violence, dating violence, sexual assault or stalking.

**Accessibility**

Access site(s) must be easily accessed by individual and families seeking homeless or homelessness prevention services.

Access sites, if physical locations, are sited in proximity to public transportation and other services to facilitate participant access. Access sites are required to offer some variation to the process, e.g., a different access point, as a reasonable accommodation for a person with disabilities. For example, a person with a mobility impairment may request a reasonable accommodation in order to complete the coordinated entry process at a different location or over the phone.

Access sites must provide connections to mainstream and community-based emergency assistance services such as supplemental food assistance programs and applications for income assistance.
2. **Assessment:** A uniform and progressive assessment process that documents participants’ immediate housing situation, needs, and barriers to identify need and priority for homeless services. All assessment sites, including providers conducting street outreach must use the same assessment tool and process. Physical assessment sites should be made safe and confidential to allow for participants to identify sensitive information or safety issues in a private and secure setting.

   a. Within 10-14 days of someone identifying as homeless, the **Step 2: Vulnerability Index-Service Prioritization Decision Assistance Tool (VI-SPDAT) and Supplemental Questions** will be conducted in order to identify linkage to appropriate housing intervention (Prevention, Transitional Housing, Rapid-Rehousing, Permanent Housing or Permanent Supportive Housing). ALL assessments will be conducted by a trained and CoC approved assessor.

   b. If the assessor is a user of the **Homeless Management Information System (HMIS)**, then the participant must sign the Minnesota’s HMIS Release of Information to be added to the Priority List in HMIS.

   c. Assessors must add participants to the non-HMIS priority list if participants choose not to consent to sharing their data in HMIS, the assessor’s program does not use HMIS, or it is a domestic violence provider. The **River Valleys Coordinated Entry System Participant Notice and Consent for Release of Information (ROI)** (Attachment B) must be signed by the individual before they are added to the non-HMIS Priority List.

   i. It is preferred that HMIS is utilized for CES implementation, however, non-HMIS participating agencies can make arrangements with participating HMIS users to enter data into HMIS.

   d. All households that receive a VI-SPDAT will be added to the Priority List and be given information about mainstream resources.

   e. If a participant discloses domestic violence (DV) or sexual assault (SA) at any point during the assessment, it should be asked if they want to be directly connected with their local DV/SA provider for shelter and/or services. If the participant declines, assessor should give contact information to local DV/SA provider and discuss safety planning tips with participant.

   f. **Household Changes:**

   i. If a participant is on the priority list, but has a significant life event, the participant should be reassessed at that time. The original assessment date is maintained in this case and not updated to the new assessment date.

   ii. If one household splits into multiple households, and separated members need to be assessed as individuals for the first time, the original date should be used for the new assessment.

   iii. If a household requests to be on a priority list in a non-River Valleys CoC region, the Coordinated Entry Specialist should be contacted and they will make every attempt to work with that region to ensure a successful referral to that region’s priority list.

3. **Prioritization:** Linkage to appropriate services will be based on assessment, priority scoring, and written programs standards (as developed through system mapping). **Prioritization and referral**
will be determined based on assessments and community prioritization. The CoC will use uniform system tools and written Program Standards to help provide a transparent, planned and fair process for Priority List management, prioritization and housing linkage. To the extent possible, assistance will be provided to persons with high barriers to help them navigate system services.

a. Permanent Supportive Housing Prioritization:
   i. Order of Priority (see attachment C)
   ii. HUD months homeless
   iii. VI-SPDAT score
   iv. MN extent of homelessness

b. Rapid Rehousing Prioritization:
   i. VI-SPDAT score
   ii. Category 1 or 4 homeless
   iii. HUD months homeless

c. Transitional Housing Prioritization:
   i. VI-SPDAT score
   ii. HUD months homeless

d. In the event that two or more homeless households within the same geographic area are identically prioritized for the next available program opening, and each household is also eligible for that opening, the CES Specialist will select the household that first presented for assistance (date of CE assessment) in the determination of which household receives a referral to the next available program opening.

4. Referral
   All supportive housing providers that are required by their funder to use coordinated entry, must use the River Valleys Coordinated Entry System to fill open units/slots/vouchers, etc. It is prohibited to fill an open housing opening with a referral from another agency or walk-in.

There is only one exception to this policy as it pertains to Rapid Re-Housing/Transitional Housing (scattered site) programs. The following parameters apply if an individual/household has identified and secured their own housing:
- The participant must have been assessed (Step 1/Step 2 Assessments) and placed on the coordinated entry priority list, and
- the agency requesting the referral has within the last 6 months, pulled 90% of their referrals from CE, and
- the participant has shown confirmation of the rental, e.g., letter of intent from the landlord or lease, and
- the participant has disclosed that they are fleeing violence and it is the cause of their current homeless situation, or
- the participant has scored a 4 or above using the VI-SPDAT, and mainstream resources have been exhausted, e.g., emergency assistance through the county.
If those criteria have been met then contact the Coordinated Entry Specialist for further approval.

Should a referral from another agency occur, e.g., social services, have them direct their client to the most appropriate access site in their area for the participant to be assessed.

a. Once an opening has been identified, the housing provider will contact the Coordinated Entry Specialist to receive an eligible household off of the HMIS or non-HMIS Priority List. The Coordinated Entry Specialist will provide a name of an eligible household within 2 business days of the request. The housing provider will then make every attempt and use due diligence to contact the referred household. Provider will document all attempts including contacting secondary/emergency contact and/or assessing agency at least 3 times in 5 business days. If the housing provider is not able to contact participant, then documentation of attempts to contact should be sent to the Coordinated Entry Specialist. If the same participant is referred to a second program at a later date, and the housing provider cannot contact them, then documentation of attempts to contact should be sent to the Coordinated Entry Specialist and the participant will be marked as inactive on the list.

b. Agencies should ensure that participants receive clear information about the project they are referred to, what participants can expect from the project, and expectations of the project.

c. Provider will collect all required documentation to ensure eligibility at the time of their intake.

d. The goal is to meet with the participant to enroll or deny them as quickly as possible and within an average of 15 days of initial participant contact.

e. If an opening in an equal program type becomes available within the River Valleys CoC region, and a participant is eligible and is requesting a transfer, then the housing provider must contact the Coordinated Entry Specialist.

5. Inactive Clients

A participant that is placed on the River Valleys Coordinated Entry priority list may become inactive under the following circumstances:

a. If a participant has been selected from the list and the housing provider cannot reach them within 5 days and then the same participant is referred to a second program at a later date, and the housing provider cannot contact them, then the participant will be marked as inactive on the list. The participant can re-enter the CES if they present at any access site and are in still need of housing.

b. If it has been found that a participant will have a stay in an institution, e.g., jail, prison, treatment, etc. for more than 30 days then they should be made inactive on the list. The participant can re-enter the CES if they present at any access site and are in still in need of housing at the time of exit from the institution.
Low Barrier Policy/Housing First

Access/Assessment sites and Housing providers are prohibited from screening people out of the coordinated entry process due to perceived barriers to housing or services, including, but not limited to, too little or no income, active or a history of substance abuse, domestic violence history, resistance to receiving services, the type or extent of a disability-related services or supports that are needed, history of evictions or poor credit, lease violations or history of not being a leaseholder, or criminal record.

Provider Denial

Because the expectation is that all participant referrals will be accepted by the provider. If a provider wishes to deny a referral, the reason must meet one of the following criteria:

a. Participant does not meet the program’s eligibility criteria.
b. Participant cannot be reached within 5 business days of the referral being made to the program.
c. Participant has not been in contact with the housing provider or cannot be contacted after initial contact.
d. Participant cannot locate scattered site housing within time frame required by the program. Programs with timing requirements must report those time limits and they must be noted within their eligibility criteria in order for a participant to be denied on this basis.
e. Agency does not have the capacity or expertise to meet a participant’s disability needs and service partnership is not currently available.
f. Conflict of interest.
g. CoC prohibits denying services to participants if the participant refuses to allow their data to be shared unless Federal statute requires collection, use, storage, and reporting of a participant’s personally identifiable information (PII) as a condition of program participation.
h. If the agency denies the referral, they will be placed back on the priority list.

Participant choice, referral denial, and grievance procedure

1. If the participant chooses not to accept the referral, they will be placed back on the priority list.
2. There is no limit to the number of times a participant may refuse a program or referral.
3. If a participant is referred to a program, is accepted to that program, but then cannot find an apartment that will accept them within the appropriate time frame allowed by the program’s requirements, they will be placed back on the priority list.
4. Participants have the right to request a less intensive program.
5. If a participant has concerns with any part of the CES process or they have a discrimination complaint, they have the right to file a grievance statement in writing. Participants can file a grievance or discrimination complaint at any Access Site. The grievance can then be submitted
to the Coordinated Entry Specialist for review. The Coordinated Entry Specialist will review the grievance within 7 business days and will decide on any resulting action. The Coordinated Entry Specialist will then notify the Access Point of their decision and action steps. The Coordinated Entry Specialist will then communicate with the participant of the decision.

Emergency Services

The River Valleys CE process allows emergency services, including all domestic violence and emergency services hotlines, drop-in service programs, and emergency shelters, including domestic violence shelters and other short-term crisis residential programs, to operate with as few barriers to entry as possible. People are able to access emergency services, such as emergency shelter, independent of the operating hours of the coordinated entry system’s intake and assessment processes. Emergency interventions, e.g., county and mental health crisis services and after hours hotel/motel vouchers through the police department, will not be prioritized based on severity of service need or vulnerability, such as entry to emergency shelter, allowing for an immediate crisis response. Services like permanent supportive housing, rapid rehousing, and transitional housing will be prioritized.

Affirmative Marketing

The River Valleys CES shall affirmatively market housing and supportive services to eligible persons regardless of race, color, national origin, religion, sex, age, familial status, disability, actual or perceived sexual orientation, gender identity, marital status, immigration status, limited English proficiency, or who are least likely to apply in the absence of specialized outreach in order to promote every individual’s full and complete participation in CES.

All CoC outreach activities, projects, initiatives must be integrated with the CoC’s CES design, serving as an engagement resource or designated access points for CoC resources, services, and housing.

Affirmative Marketing Procedures

1. All promotional materials (both printed materials and digital media) describing CES services, processes, and rules shall include clear and concise language directly describing how CES processes are available to all eligible persons regardless of race, color, national origin, religion, sex, age, familial status, disability, actual or perceived sexual orientation, gender identity, marital status, immigration status, limited English proficiency, or who are least likely to apply in the absence of special outreach or accommodation.

2. CES participating agencies are required to market their housing and supportive services to eligible persons regardless of race, color, national origin, religion, sex, age, familial status, disability, actual or perceived sexual orientation, gender identity, marital status, immigration status, limited English proficiency, or who are least likely to apply in the
absence of special outreach.
3. All CES participating agencies shall retain copies of marketing materials with evidence of affirmatively furthering fair and equal access to all CES process. Copies of marketing materials shall be provided upon request by funders, partners, and participants in CES services.

### Equal Access

All access/assessment sites and housing providers must ensure fair and equal access to the River Valleys CES system for all clients regardless of actual or perceived race, color, religion, national origin, spoken language, age, gender identity, pregnancy, citizenship, familial status, household composition, disability, Veteran status, sexual orientation, or domestic violence status.

To ensure fair access by individuals with disabilities, physical and communication accessibility barriers must be addressed by appropriate accommodation within the River Valleys CES.

If an individual’s self-identified gender 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 and responsive to the individual’s needs.

All subpopulations including chronically homeless individuals and families, Veterans, youth, persons and households fleeing domestic violence, transgender persons, and refugees and new immigrants must be provided equal access to crisis response services regardless of the characteristics and attributes of their specific subpopulations.

### Nondiscrimination

All CES participating agencies shall market to and serve all eligible persons regardless of race, color, national origin, religion, sex, age, familial status, disability, actual or perceived sexual orientation, gender identity, marital status, immigration status, limited English proficiency, or who are least likely to apply in the absence of special outreach or accommodation to promote every individual’s full and complete participation in CES.

All CES participating agencies shall also comply with all State of Minnesota and Federal statutes relating to nondiscrimination. These include but are not limited to:

a. Fair Housing Act prohibits discriminatory housing practices based on race, color, religion, sex, national origin, disability, or familial status.
b. Section 504 of the Rehabilitation Act prohibits discrimination on the basis of disability under any program or activity receiving Federal financial assistance.

c. Title VI of the Civil Rights Act prohibits discrimination on the basis of race, color, or national origin under any program or activity receiving Federal financial assistance.

d. Title II of the Americans with Disabilities Act prohibits public entities, which includes State and local governments, and special purpose districts, from discriminating against individuals with disabilities in all their services, programs, and activities, which include housing, and housing-related services such as housing search and referral assistance.

e. Title III of the Americans with Disabilities Act prohibits private entities that own, lease, and operate places of public accommodation, which include shelters, social service establishments, and other public accommodations providing housing, from discriminating on the basis of disability.

The River Valleys CES will not use data collected from the assessment process to discriminate or prioritize households for housing and services on a protected basis, such as race, color, religion, national origin, sex age, familial status, disability, actual or perceived sexual orientation, gender identify or marital status.

Privacy Protections

CES operations and staff must abide by all State of Minnesota-defined privacy protections as defined by the HMIS Advisory Committee. Client consent protocols, data use agreements, data disclosure policies, and any other privacy protections offered to program participants as a result of each client’s participation in HMIS will be the same as CES.

Participants completing the CES assessment process cannot be required to disclose of specific disabilities or diagnosis. Specific diagnosis or disability information may only be obtained for purposes of determining program eligibility to make appropriate referrals. Additionally, the CES will operate using a client-centered approach, and must allow participants to refuse to answer assessment questions and/or refuse referrals.

River Valleys CoC CES prohibits denying services to participants if the participant refuses to allow their data to be shared unless Federal statute requires collection, use, storage, and reporting of a participant’s personally identifiable information (PII) as a condition of program participation.
Evaluation

The CES will include a comprehensive evaluation of participant outcome and performance (program, agency, and system) to: increase effective use of resources (both staff and fiscal), improve quality of service to homeless individuals and families, and to identify and plan services. CES will annually set, promote, and review system-wide performance standards. Additionally, a review of system tools and process will be conducted with feedback from participants, service providers, and collaborative partners.

Trainings

Coordinated Entry System Training
All Access, Assessment, and Housing Programs must complete the River Valleys CES training annually. The CoC will host an annual CES in person training. Quarterly online trainings will also be available. Staff needing training in between quarterly trainings can make arrangements with the Coordinated Entry Specialist. CES training will include but is not limited to; CES policies and procedures, trauma informed practices, cultural competency, etc. Access/assessment sites are strongly encouraged to attend any additional cultural and linguistic competency trainings.

VI-SPDAT
A link to the VI-SPDAT training and the training form are accessible on the River Valleys Continuum of Care website. All assessors using the VI-SPDAT must complete the training and sign the VI-SPDAT Training Form and return to the Coordinated Entry Specialist.

Meetings

The CES Committee meets quarterly in March, June, September, and December. Meetings are held the third Thursday of the meeting month from 1:00pm- 3:00pm after the full CoC Plenary Meeting. Location is typically dependent upon the location of the CoC Meetings. More information can be found on the River Valleys Continuum of Care website.
<table>
<thead>
<tr>
<th>County</th>
<th>CES Point of Access for Homeless Prevention and Assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Blue Earth</td>
<td><strong>Families with Children and Adult Females - Homeless</strong>&lt;br&gt;• Partners for Affordable Housing: 507-387-8189  &lt;br&gt;&lt;br&gt;<strong>Families with Children and Adult Males and Females - Housed</strong>&lt;br&gt;• Minnesota Valley Action Council: 800-767-7139 or 507-345-6822  &lt;br&gt;&lt;br&gt;<strong>Adult Males - Homeless</strong>&lt;br&gt;• Salvation Army: 507-345-7840  &lt;br&gt;&lt;br&gt;<strong>Victims of Domestic and Sexual Violence</strong>&lt;br&gt;• Committee Against Domestic Abuse: 800-477-0466 or 507-625-8688  &lt;br&gt;&lt;br&gt;<strong>Unaccompanied Youth (24 years old or younger)</strong>&lt;br&gt;• Lutheran Social Service: 507-381-6670/The Reach, 125 E Liberty St, Mankato  &lt;br&gt;&lt;br&gt;<strong>Veterans</strong>&lt;br&gt;• Minnesota Assistance Council for Veterans: 507-345-8258</td>
</tr>
<tr>
<td>Brown</td>
<td><strong>Families with Children and Adult Females - Homeless</strong>&lt;br&gt;• Partners for Affordable Housing: 507-387-8189  &lt;br&gt;&lt;br&gt;<strong>Families with Children and Adult Females - Housed</strong>&lt;br&gt;• Minnesota Valley Action Council: 800-767-7139 or 507-354-3138  &lt;br&gt;&lt;br&gt;<strong>Adult Males</strong>&lt;br&gt;• Minnesota Valley Action Council: 800-767-7139 or 507-354-3138  &lt;br&gt;&lt;br&gt;<strong>Victims of Domestic and Sexual Violence</strong>&lt;br&gt;• Committee Against Domestic Abuse: 800-477-0466 or 507-233-6663  &lt;br&gt;&lt;br&gt;<strong>Unaccompanied Youth (24 years old or younger)</strong>&lt;br&gt;• Lutheran Social Service: 507-381-6670  &lt;br&gt;&lt;br&gt;<strong>Veterans</strong>&lt;br&gt;• Minnesota Assistance Council for Veterans: 507-345-8258</td>
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<tr>
<td>Dodge</td>
<td><strong>Individuals and Families with Children</strong>&lt;br&gt;• Semcac: 507-634-4350  &lt;br&gt;&lt;br&gt;<strong>Victims of Domestic and Sexual Violence</strong>&lt;br&gt;• Women’s Shelter Inc.: 507-634-6070, ext. 160  &lt;br&gt;&lt;br&gt;<strong>Unaccompanied Youth (24 years old or younger)</strong>&lt;br&gt;• Lutheran Social Service: 507-316-8273  &lt;br&gt;&lt;br&gt;<strong>Veterans</strong>&lt;br&gt;• Minnesota Assistance Council for Veterans: 507-345-8258</td>
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<td>Faribault</td>
<td><strong>Families with Children and Adult Females - Homeless</strong>&lt;br&gt;• Partners for Affordable Housing: 507-387-8189  &lt;br&gt;&lt;br&gt;<strong>Families with Children and Adult Females - Housed</strong>&lt;br&gt;• Minnesota Valley Action Council: 800-767-7139 or 507-526-5291  &lt;br&gt;&lt;br&gt;<strong>Adult Males</strong>&lt;br&gt;• Minnesota Valley Action Council: 800-767-7139 or 507-526-5291  &lt;br&gt;&lt;br&gt;<strong>Victims of Domestic and Sexual Violence</strong>&lt;br&gt;• Committee Against Domestic Abuse: 800-477-0466 or 507-526-5275  &lt;br&gt;&lt;br&gt;<strong>Unaccompanied Youth (24 years old or younger)</strong>&lt;br&gt;• Lutheran Social Service: 507-381-6670  &lt;br&gt;&lt;br&gt;<strong>Veterans</strong>&lt;br&gt;• Minnesota Assistance Council for Veterans: 507-345-8258</td>
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<td>County</td>
<td>Individuals and Families with Children</td>
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<td><strong>Victims of Domestic and Sexual Violence</strong></td>
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<td>Freeborn County Crime Victims Crisis Center: 507-377-5460 or 507-373-2223 (not an assessment site)</td>
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<td><strong>Unaccompanied Youth (24 years old or younger)</strong></td>
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<td><strong>Families with Children and Adult Females - Housed</strong></td>
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### Martin

**Families with Children and Adult Females - Homeless**
- Partners for Affordable Housing: 507-387-8189

**Families with Children and Adult Females - Housed**
- Minnesota Valley Action Council: 800-767-7139 or 507-238-1663

**Adult Males**
- Minnesota Valley Action Council: 800-767-7139 or 507-238-1663

**Victims of Domestic and Sexual Violence**
- Martin County Victims Services: 507-238-3209 (not an assessment site)

**Unaccompanied Youth (24 years old or younger)**
- Lutheran Social Service: 507-381-6670
- Minnesota Assistance Council for Veterans: 507-345-8258

### Mower

**Individuals and Families with Children**
- Semcac: 507-433-5889

**Victims of Domestic and Sexual Violence**
- Crime Victims Resource Center: 800-349-6680 or 507-437-6680 (not an assessment site)

**Unaccompanied Youth (24 years old or younger)**
- Lutheran Social Service: 507-316-8273
- Minnesota Assistance Council for Veterans: 507-345-8258

### Nicollet

**Families with Children and Adult Females - Homeless**
- Partners for Affordable Housing: 507-387-8189

**Families with Children and Adult Females - Housed**
- Minnesota Valley Action Council: 800-767-7139 or 507-934-5224

**Adult Males**
- Minnesota Valley Action Council: 800-767-7139 or 507-934-5224

**Victims of Domestic and Sexual Violence**
- Committee Against Domestic Abuse: 800-477-0466 or 507-625-8688

**Unaccompanied Youth (24 years old or younger)**
- Lutheran Social Service: 507-381-6670
- Minnesota Assistance Council for Veterans: 507-345-8258

### Olmsted

**Individuals and Families with Children**
- Three Rivers Community Action Inc: 507-732-7391 or 1-800-277-8418
- Salvation Army: 507-288-3663
- Olmsted County Community Services: 507-328-6325

**Families with Children**
- Family Promise Rochester: 281-3122

**Single Adults**
- Zumbro Valley Health Center: 507-535-5642

**Victims of Domestic and Sexual Violence**
- Women’s Shelter, Inc.: 507-285-1010 or 507-285-1938

**Unaccompanied Youth (24 years old or younger)**
- Lutheran Social Service: 507-316-8273/LSS LINK, 816 S Broadway, Rochester
- Minnesota Assistance Council for Veterans: 507-345-8258
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<tr>
<th>County</th>
<th>Individuals and Families with Children</th>
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<tr>
<td>Rice</td>
<td>Three Rivers Community Action, Inc.: 507-732-7391 or 1-800-277-8418 (Faribault and the rest of Rice County)</td>
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<td>Community Action Center of Northfield: 507-664-3550 (Northfield)</td>
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<td>Women and Families with Children</td>
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<td>Ruth’s House of Hope: 507-332-2236</td>
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<td>Hope Center: Business line: 800-607-2330 or 507-332-0882 (not an assessment site)</td>
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<td>Unaccompanied Youth (24 years old or younger)</td>
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<td>Committee Against Domestic Abuse: 800-477-0466 or 507-237-5977</td>
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<td>Steele</td>
<td>Individuals and Families with Children</td>
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<td>Semcac: 507-451-7134</td>
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<td>Victims of Domestic and Sexual Violence</td>
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<td>Crisis Resource Center of Steele Co: 800-451-1202 or 507-451-1202 (not an assessment site)</td>
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<td>Unaccompanied Youth (24 years old or younger)</td>
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<td>Wabasha</td>
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<td>Three Rivers Community Action Inc: 507-732-7391 or 1-800-277-8418</td>
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<td>Victims of Domestic and Sexual Violence</td>
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<td>HOPE Coalition: 651-565-4112</td>
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<td>Unaccompanied Youth (24 years old or younger)</td>
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<td>Red Wing Youth Outreach: 651-388-3371 (not an assessment site)</td>
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<td>Minnesota Valley Action Council: 800-767-7139 or 507-835-8240</td>
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<td>- Minnesota Valley Action Council: 800-767-7139 or 507-375-5748</td>
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<td><strong>Victims of Domestic and Sexual Violence</strong></td>
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<td>- Women’s Resource Center of Winona: 507-452-4453 or 507-452-4440 (not an assessment site)</td>
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River Valleys Coordinated Entry System Participant Notice and Consent for Release of Information

I, __________________________ (insert participant’s name), understand that the River Valleys Coordinated Entry System (CES) is a partnership of agencies sharing information to provide a more coordinated homeless response system. I authorize that my information can be shared by River Valleys CES partners to improve services for me. I also authorize that my information can be viewed by the River Valleys CES- and River Valleys Continuum of Care (CoC)- designated System Administrators for the purpose of system evaluation, which will help improve services offered to me and others in the River Valleys CES region.

By initialing “yes” below and affixing my signature, or, when meeting via phone and agency policy allows, by permitting staff to sign on my behalf, I agree that my information may be shared with other River Valleys CES partners and System Administrators. I understand that agencies participating in CES may change from time to time and that a copy of the current list of agencies is available upon request.

Yes: ___ No: ___ Date: ______ Participant Signature: ____________________________

☐ Verbal Consent obtained by phone
Agency Staff Signature: ____________________________ Date: __________

DESCRIPTION OF INFORMATION THAT CAN BE SHARED
This form authorizes identifying assessment information, including but not limited to the items listed below, to be routinely shared in the River Valleys CES to better help me and/or my family.

- Family/Household Information (Names, Date of Birth, Race, Gender)
- Income and Benefits Information
- Education and Employment History
- Housing History and Barriers
- Homeless Status and History
- Veteran Status
- Program and Service Involvement and Contacts
- Health Information, including Physical Health and Behavioral Health (but not Case Records)
- Photo

INFORMATION FROM River Valleys CES SCREENING AND ASSESSMENT MAY BE SHARED WITH:

Not an inclusive listing

- Social Service Agencies
- Housing Providers
- Veterans Services Offices
- Service Providers
- Shelter Programs
- Housing and Redevelopment Authorities
- Domestic Abuse Agencies
PURPOSE OF SHARING
Information from the River Valleys CES screening and assessments will be shared for the purpose of:
- Assessing my program eligibility
- Prioritizing my need for services
- Linking me to the most appropriate services
- Evaluating River Valleys CES program and system performance
- Evaluating for service gaps, needs and duplication in the River Valleys CES

This authorization is voluntary and strictly for sharing information needed for entering and moving through the Coordinated Entry System and may NOT be used for any other purpose. The information collected, maintained and stored by the River Valleys Continuum of Care, and shared with service providers, may include records relating to your behavioral and/or mental health, alcohol and drug abuse treatment, HIV/AIDS, and genetics.

This information is necessary for determining your eligibility for housing and services. You will not be denied help if you do not want to sign this form or if you do not want to allow CES to share your personal information. You have the right to revoke this authorization at any time by giving verbal or written notice of revocation to the River Valleys CES. Revoking this authorization will not affect any action taken or information shared prior to notice of revocation. You may have a copy of this authorization.

A copy of this Release of Information and Tennessen Warning or other agency-required Notice of Privacy Practices was provided to me by ________________________________ (insert staff name) of ________________________________ (insert agency name)

Participant or Guardian/Legal Representative Signature____________________________
Date_____

Staff Signature__________________________________________________________ Date_____

Page 2
River Valleys Coordinated Entry System Participant Notice and Consent For Release of Information
Order of Priority in CoC Program-Funded Permanent Supportive Housing
(In compliance with HUD Notice: CPD-14-12 & CPD-16-11)

Recipients of CoC Program-funded PSH are required to follow the order of priority when selecting participants for housing in accordance with the River Valleys Continuum of Care’s (RV CoC’s) written standards while also considering the goals and any identified target populations served by the project, and in a manner consistent with their current grant agreement.

Due diligence should be exercised when conducting outreach and assessment to ensure that persons are served in the order of priority as adopted by the RV CoC. HUD and the RV CoC recognize that some persons—particularly those living on the streets or in places not meant for human habitation—might require significant engagement and contacts prior to their entering housing and recipients are not required to keep units vacant where there are persons who meet a higher priority within the CoC and who have not yet accepted the PSH opportunities offered to them. Street outreach providers should continue to make attempts with those persons using a Housing First approach to place as few conditions on a person’s housing as much as possible.

A. Order of Priority in CoC Program-funded PSH Beds Dedicated or Prioritized for Occupancy to Persons Experiencing Chronic Homelessness

CoC Program-funded PSH that is dedicated or prioritized for persons experiencing chronic homelessness must follow this Order of Priority based on the length of time in which an individual or family has resided in a place not meant for human habitation, a safe haven, or an emergency shelter and the severity of the individual’s or family’s service needs.

1st Priority: Chronically Homeless Individuals and Families with the Longest History of Homelessness and with the Most Severe Service Needs.
A chronically homeless individual or head of household as defined in 24 CFR 578.3 for whom both of the following are true:

1. The chronically homeless individual or head of household of a family has been homeless and living in a place not meant for human habitation, a safe haven, or in an emergency shelter for at least 12 months either continuously or on at least four separate occasions in the last 3 years, where the cumulative total length of the four occasions equals at least 12 months; and
2. The CoC Program has identified the chronically homeless individual or head of households having severe service needs.

2nd Priority: Chronically Homeless Individuals and Families with the Longest History of Homelessness.
A chronically homeless individual or head of household, as defined in 24 CFR 578.3, for whom both of the following are true:

1. The chronically homeless individual or head of household of a family has been homeless and living in a place not meant for human habitation, a safe haven, or in an emergency shelter for at least 12 months either continuously or on at least four separate occasions in the last 3 years, where the cumulative total length of the four occasions equals at least 12 months; and
2. The CoC or CoC program recipient has not identified the chronically homeless individual (or the head of household of the family) who meets all of the criteria in paragraph (1) of the definition for chronically homeless, as having severe service needs.

**3rd Priority: Chronically Homeless Individuals and Families with the Most Severe Service Needs.**

A chronically homeless individual or head of household as defined in 24CFR578.3f or whom both of the following are true:

1. The chronically homeless individual or head of household of a family has been homeless and living or residing in a place not meant for human habitation, a safe haven, or in an emergency shelter on at least four separate occasions in the last 3 years, where the total length of those separate occasions equals less than one year; **and**
2. The CoC or CoC program recipient has identified the chronically homeless individual (or the head of household of the family) who meets all of the criteria in paragraph (1) of the definition for chronically homeless, as having severe service needs.

**4th Priority: All Other Chronically Homeless Individuals & Families.**

A chronically homeless individual or head of household as defined in 24CFR578.3 for whom both of the following are true:

1. The chronically homeless individual or head of household of a family has been homeless and living in a place not meant for human habitation, a safe haven, or in an emergency shelter for at least 12 months either continuously or on at least four separate occasions in the last 3 years, where the cumulative total length the four occasions is less than 12 months; **and**
2. The CoC or CoC program recipient has not identified the chronically homeless individual (or the head of household of the family), who meets all of the criteria in paragraph (1) of the definition for chronically homeless, as having severe service needs.

Where there are no chronically homeless individuals and families within the CoC’s geographic area defined in the final rule on “Defining Chronically Homeless” (published December 4, 2015), the order of priority in the next section will be followed.

Recipients of CoC Program-funded PSH must follow the order of priority above while also considering the goals and any identified target populations served by the project. For example, a CoC Program-funded PSH project that is permitted to target homeless persons with a serious mental illness should follow the order of priority to the extent in which persons with serious mental illness meet the criteria. In this example, if there were no persons with a serious mental illness that also met the criteria of chronically homeless within the CoC’s geographic area, the recipient should follow the order of priority below for persons with a serious mental illness.

Recipients must exercise due diligence when conducting outreach and assessment to ensure that persons are prioritized for assistance based on their length of time homeless and the severity of their needs following this Order of Priority as adopted by the CoC.
B. Order of Priority in CoC Program-funded PSH Beds Not Dedicated or Prioritized for Persons Experiencing Chronic Homelessness

CoC Program-funded non-dedicated and non-prioritized PSH should offer housing to chronically homeless individuals and families first, but minimally are required to place otherwise eligible households in an order that prioritizes, in a non-discriminatory manner, those who would benefit the most from this type of housing, beginning with those most at risk of becoming chronically homeless.

1st Priority: Homeless Individuals and Families with a Disability with Long Periods of Episodic Homelessness and Severe Service Needs
An individual or family that is eligible for CoC Program-funded PSH who has experienced fewer than four occasions where they have been living or residing in a place not meant for human habitation, a safe haven, or in an emergency shelter but where the cumulative time homeless is at least 12 months and has been identified as having severe service needs.

2nd Priority: Homeless Individuals and Families with a Disability with Severe Service Needs.
An individual or family that is eligible for CoC Program-funded PSH who is residing in a place not meant for human habitation, a safe haven, or an emergency shelter and has been identified as having severe service needs. The length of time in which households have been homeless should also be considered when prioritizing households that meet this order of priority, but there is not a minimum length of time required.

3rd Priority: Homeless Individuals and Families with a Disability Coming from Places Not Meant for Human Habitation, Safe Haven, or Emergency Shelter Without Severe Service Needs.
An individual or family that is eligible for CoC Program-funded PSH who is residing in a place not meant for human habitation, a safe haven, or an emergency shelter where the individual or family has not been identified as having severe service needs. The length of time in which households have been homeless should be considered when prioritizing households that meet this order of priority, but there is not a minimum length of time required.

4th Priority: Homeless Individuals and Families with a Disability Coming from Transitional Housing.
An individual or family that is eligible for CoC Program-funded PSH who is currently residing in a transitional housing project, where prior to residing in the transitional housing had lived in a place not meant for human habitation, in an emergency shelter, or safe haven. This priority also includes individuals and families residing in transitional housing who were fleeing or attempting to flee domestic violence, dating violence, sexual assault, or stalking and prior to residing in that transitional housing project even if they did not live in a place not meant for human habitation, an emergency shelter, or a safe haven prior to entry in the transitional housing.