Arizona Balance of State Continuum of Care

Pinal County Coalition to End Homelessness

Coordinated Entry, By-Name-List, and Case Conferencing Procedures

This document provides guidance to the Pinal County Coalition to End Homelessness (PCCEH) members, partners, agencies, and clients within Pinal County to ensure:

- Equitable access to the Coordinated Entry System,
- Confidentiality of the information maintained on the By-Name-List,
- The effective operation of Case Conferencing.

PCCEH adopts by reference the Arizona Balance of State Continuum of Care (AZBOSCOC) Coordinated Entry Policy approved by the Governance Advisory Board on June 14, 2024, as revised.

Definitions

Coordinated Entry (CE) is the process in which persons experiencing homelessness may gain access to information, be evaluated for services, and be added the the Homeless Management Information System (HMIS) in order to receive housing services. CE is a process that ensures people with the greatest needs, receive priority for any type of housing and homeless assistance available in Pinal County.

The By-Name-List (BNL) is the confidential list of persons who have been evaluated at Coordinated Entry and who now await housing services.

Case Conferencing (CC) is the process where housing service providers prioritize and review the By-Name-List to identify the next person(s) who may be served by a housing provider.

Goals

It is the goal of the PCCEH and the AZBOSCOC to meet the following:
- Coordinated Entry is accessible no matter where or how people present.
- By-Name-List - Households wait no longer than 60 days for a referral to housing or services. This may include diversion. (This goal ensures that contact/communication takes place with households interested in engaging. It is focused on contact and communication including referrals and does not assume that a household will have a housing placement within 60 days.
- Case Conferencing - Assistance is allocated as effectively and equitably as possible.

Guiding Principles and Policies

PCCEH adopts the AZBOSCOC guiding principles and policies for the CE system including:

1. Non-discrimination – The PCCEH CE system ensures the individuals who participate in the CE process receive support in compliance with applicable civil rights and fair housing laws and requirements. PCCEH member organizations must comply with the nondiscrimination and equal opportunity provisions of Federal civil rights laws, including the following:

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

2. Individuals Fleeing Domestic Violence - All of the requirements of the Violence Against Women Act (VAWA-reauthorized in 2022) must be considered as part of the CE process.

3. Youth - If unaccompanied youth are encountered, efforts should focus on finding

a housing option and contacting the appropriate agencies to ensure that youth do not remain on the street.

4. Households with Children – The CE process takes risk and vulnerability into consideration in prioritizing households that include children.

5. LGBTQIA+ - That identification is respected throughout coordinated entry, the service planning process, and accesses to resources.

Justice, Equity, Diversity, and Inclusion (JEDI)

PCCEH adopts the AZBOSCOC JEDI statements dated September 2023 to ensure equitable access to Coordinated Entry and further commits to making the process is responsive to all people and their needs. This includes but is not limited to:

1. Practicing cultural humility,
2. Including awareness and resources needed to ensure the CE process is equitable for underserved communities (i.e. ethnic minorities, individuals with disabilities, LGBTQ+, etc.),
3. Ensuring processes do not inadvertently screen out individuals from underserved communities.

Process

1. Collaboration –
The foundation of the coordinated entry process is collaboration among organizations that provide services and resources that can contribute to ending homelessness for households in Pinal County.

2. Outreach –
Organizations within Pinal County who provide outreach are encouraged to participate in the PCCEH Outreach Committee and the Point-In-Time Count. Through outreach, clients are engaged where they are at and are often more amenable to completing the CE assessment.

3. Access Points -
Entry into the CE system may be initiated in person at a CE access point or other outreach location determined by the PCCEH. All access point providers will enter into Agency Agreements with Arizona Department of Housing and complete all HMIS requirements including but not limited to submission of signed Code of Ethics affirming the principles of ethical data use and client confidentiality.

Local organizations are encouraged to be a public access point and attend the CC meetings. PCCEH collaborates with agencies the provide services to survivors of domestic violence to ensure that CE throughout the geographic area

is accessible for survivors of domestic violence with the caveat of heightened awareness related to safety, confidentiality and privacy.

PCCEH CE Access Point	Location	Assessment Hours	Phone #
COMMUNITY ACTION HUMAN RESOURCES AGENCY (CAHRA)	109 N. Sunshine Blvd. Eloy, Arizona	Monday - Friday 8:00 a.m. – 5:00 p.m.	(520) 466-1112
CAHRA-outreach locations	Genesis Project 1050 W. Superstition Blvd, Apache Junction	3rd Wednesday of the month from 11 a.m. – 2 p.m.	(520) 466-1112
CAHRA-outreach location	CG Helps 350 E. 6TH Street, Casa Grande	Monday – Thursday 8:00 a.m. – 4:00 p.m.	(520) 486-0010
National Community Health Partners-Pinal Veterans	501 N. Florence Street, Casa Grande	Monday – Friday 9:00 a.m. – 5:00 p.m.	(520) 876-0699
Pinal County Housing Authority	970 N. Eleven Mile Corner Rd. Casa Grande	Monday – Thursday 8:00 a.m. – 5:00 p.m.	(520) 866-7221
Genesis Project	1050 W. Superstition Blvd, Apache Junction	Tuesday – Thursday 10:30 a.m. – 2:30 p.m.	(480) 974-2085
Casa Grande Alliance	280 W. McMurray Blvd. Casa Grande	Monday - Friday 8:00 a.m. – 5:00 p.m.	(520) 836-5022
Horizon Health and Wellness		By appointment only	(833) 431-4449

All CE access points offer the same assessment approach and all access points are usable by all people who may be experiencing homelessness.

The following populations may, but are not required to, have separate access points and variations in assessment processes:

- Adults without children
- Adults accompanied by children
- Unaccompanied youth
- Households fleeing domestic violence, dating violence, sexual violence, stalking, or other dangerous or life-threatening conditions (including human trafficking)

When a household contacts a PCCEH CE access point, staff will conduct an initial screening over the phone or in person. A few easy questions will be asked

to help identify the most pertinent needs of the household. A pre- screening tool is provided as an attachment to this document.

If the client is amenable, they may be immediately referred to an agency that provides specialized services.

Unaccompanied Youth	Ages 12-17	Safe Place 24/7 at (520) 320-5122
Fleeing from domestic violence	Central/Southern Pinal County	Against Abuse Crisis Hotline (520) 836-0858
Fleeing from domestic violence	Northern Pinal County	Community Alliance Against Family Abuse Crisis Hotline (480) 890-3039
Emergency Shelter	Veterans	National Community Health Partners (520) 876-0699
Emergency Shelter	Veterans	Honoring, Hiring, Helping our Heroes (520) 338-2568
Emergency Shelter	Veterans	US Veterans Affairs 5-9 (480) 498-8700
Emergency Shelter	Families	A New Leaf (602) 595-8700
Emergency Shelter		Community Action Human Resources Agency (520) 466-1112
Non-housing related services		Refer to a local non-profit who provides the needed services
Various statewide resources and referrals		https://211arizona.org/ OR Dial 211 OR

4. Diversion –
When applicable, diversion may be provided to reduce a clients time without housing and to examine current resources that might be used to avoid the client entering the homeless system of care. Arizona211 is a resource to find non-housing related services.

5. Survivors of Domestic Violence CE Policy -
Households fleeing from or have a history of having experienced domestic violence, dating violence, sexual violence, stalking, or other dangerous or life-threatening conditions (including human trafficking), that is currently impacting their homelessness, may use a CE access point or a victim service provider as an access point for CE.

The attached Pre-Screening Tool is recommended to be used with all clients.

If the household fleeing domestic violence seeks services at a non-victim service provider, the non-victim service provider shall educate the household on their options for accessing domestic violence and emergency services.

The following should be shared to ensure the client is aware of the safety risks of being served by a non-victim service provider:

- It is recommended a Survivor Advocate be present during the assessment to discuss the safety risks and ensure accurate services are provided.
- HMIS is open to all agencies within the Balance of State.
- Signing the ROI shares personal information with other agencies within HMIS and the Balance of State.
- Although an individual (the abuser/offender) does not have access to HMIS, they may currently or in the future have associates who have access through their agency.
- The non-victim service provider should share what information will be collected and entered into HMIS.
- The survivor's case will not be isolated to the DV BNL but will be shared during the regular case conferencing. There could be the potential for someone without access to HMIS to be present during the meeting. A confidentiality agreement must be signed with Solari before an agency may join the case conferencing meeting.

If the client chooses to be connected with a victim service provider, and are in need of housing, the following process is followed:

- Staff at the victim service provider will complete the VI-SPDAT on paper with the client and email the completed assessment to a designated agency identified by the LCEH Lead.
- The designated agency will email the LCEH Lead, who maintains a DV By Name List with client initials, which is separate from the CE By Name List.
- Clients on the DV BNL are case conferenced and referred to DV housing program openings during a separate case conferencing meeting, which includes only DV service providers and the CE Lead.

6. Safety Planning and Risk Assessment –
For individuals who are fleeing domestic violence, dating violence, sexual assault--CE ensures individuals have access to crisis services, including access to the domestic violence hotline. Safety is paramount for all individuals served.

Individuals and families who are fleeing, attempting to flee, or have experienced domestic violence, dating violence, sexual violence, or stalking who are seeking shelter or services from non-victim service providers shall be provided immediate access to emergency services as follows:

Non-victim service providers shall provide individuals or families with the following crisis hotline phone numbers:

- Against Abuse Crisis Hotline (520) 836-0858
- Community Alliance Against Family Abuse Crisis Hotline (480) 890-3039

Safety risk assessment is a part of the overall assessment process. PCCEH CE processes and procedures ensure individuals and families experiencing DV, SV, or trafficking or stalking:

- Will have safe access to CE.
- Confidentiality will be protected.
- Data will not be entered into HMIS, unless the individual chooses to have their information entered into HMIS, as indicated by a signed ROI.
- Interventions will comply with VAWA.
- Staff are trained, and safety plans will be discussed prior to exit from CE.
- Staff who participate in CE will work to link individuals and families to DV resources.

7. Coordinated Entry –
No household shall be screened 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.

Disclosure of specific disabilities or diagnosis is not required during the assessment process. Specific disability or diagnosis information may only be obtained for purposes of determining program eligibility to make appropriate referrals.

After the initial set of questions and housing is determined to be the need, housing services are accessed through a single assessment or a VI-SPDAT which is completed at any local CE access point or victim services provider. PCCEH adopts the open door policy and a VI-SPDAT may be completed at any access point regardless of their client status at the organization.

If the individual is homeless and seeking housing assistance, and they are not victims of DV, enroll the individual in the CE system as follows:

- Have the client read and sign the HMIS Release of Information.
- Complete the HMIS Intake Form with the client and enroll client in the Coordinated Entry project in HMIS within one business day of intake, or the intake can be completed directly in HMIS with the client.
- Access Event is "Referral to Scheduled Coordinated Entry Housing Needs Assessment".
- Complete the Coordinated Entry Sub Assessment.
- Complete the appropriate VI-SPDAT for the household type. The VI-SPDAT is included in the Coordinated Entry Sub Assessment.

Upon completing the assessment, homeless individuals and families in need of assistance are placed on the community wide list for housing assistance, from which local housing programs accept referrals. To protect confidentiality, victims of Domestic Violence (DV) are placed on a separate list.

8. Reentry Process
Clients who are currently incarcerated, may be added to HMIS if they have no alternative housing options upon release and meet the HUD definition. HMIS input should be completed at a minimum, within 14 days of release.

For incarcerated individuals, HUD generally considers someone homeless if they are being discharged from an institution (like a jail or prison) after more than 90 days, and they lack a stable housing plan upon release. This means they don't have a place to live lined up and lack the resources or support networks (family, friends) to secure housing. Specifically, they must be exiting an institution where they resided for 90 days or less, and were residing in a place not meant for human habitation (like a shelter or the streets) immediately before entering the institution.

If the individual was experiencing homelessness (living on the streets, in shelters, etc.) immediately before entering the institution, they are more likely to be considered homeless upon release. HUD often requires documentation to verify homelessness, such as discharge papers, proof of prior living situation, and information about support networks.

The following process must be completed to ensure they are added to the by-name-list.

- Use EDA 1822
- A client has an "Institutional Situations" option selected
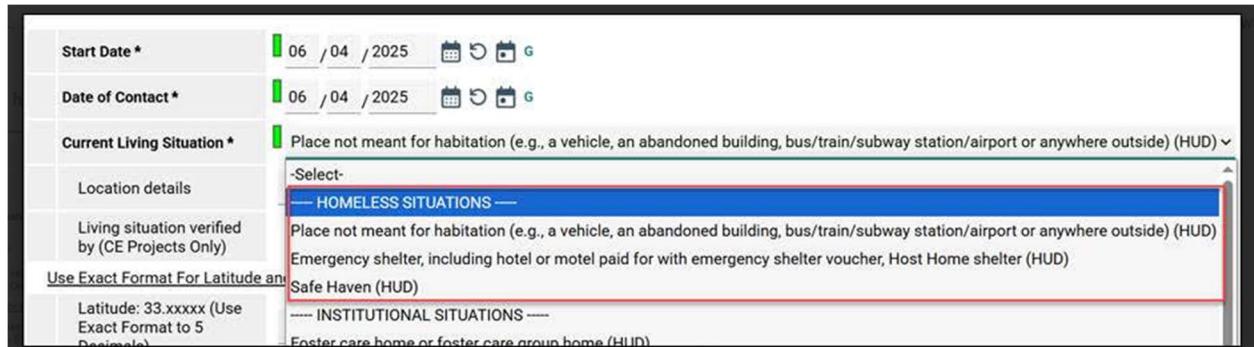
And

- 'Is client going to have to leave their current living situation within 14 days' is "Yes (HUD)"

And

- "Has a subsequent residence been identified?" is "No (HUD)".

9. Emergency Transfer Plan –
   Emergency transfer plan is a part of all service planning for survivors of domestic violence. The purpose of this plan is that there are strategies in place that can be implemented immediately if a household needs to move from a unit because they are at risk. The safety of individuals/households that are experiencing homelessness and request housing and support through the PCCEH is a paramount consideration related to housing placement and services provided.

   Safety/Emergency Transfer Planning is a consideration for placement regardless of the type of sheltering/housing including emergency shelter, transitional housing, rapid rehousing, supportive housing and other permanent housing.

   Safety/Emergency Transfer planning is incorporated into the PCCEH coordinated entry and case conferencing process. Key considerations include:

- Safety/Emergency Transfer planning is completed routinely and as needed.
- A copy of the written plans is provided to the participant.
- Plans are noted in the alternative database required of DV service providers.
- Plans evolve as needed and include the following components:
  - Access to other services through referrals including a list of resources.
  - Providing participants information about orders of protection.
  - Reviewing safety precautions with participants – such as changing schedules; change routes to regular appointments, work, school; avoid going places alone, ensuring cell phone is equipped for emergency contact.
  - Limiting access to keys for housing unit, car and other locations.
  - Having contacts for case manager/housing navigator.
  - Having contact information for emergency shelters in the community.
  - Having a relocation plan from a current housing situation if needed.
  - Having local law enforcement contact information.
- Planning is communicated using languages and methods that are most comfortable for the participant.
- All housing provided through the PCCEH is compliant with VAWA, fair housing regulations, civil rights regulations, American with Disabilities regulations, and other applicable laws and regulations.

10. By-Name-List and Prioritization –
Once entered into the CE system, a household is placed on a community wide list of persons who are seeking housing or housing services to resolve their housing crisis. The community wide list is called the By Name List (BNL). To protect confidentiality, a separate list is maintained for victims of DV.

PCCEH will use the AZBOSCOC BNL generated and distributed weekly. The prioritization and management of the BNL will take place during the CC meeting.

In preparation for the CC meeting, the Committee Lead shall sort the most current BNL in the following order:
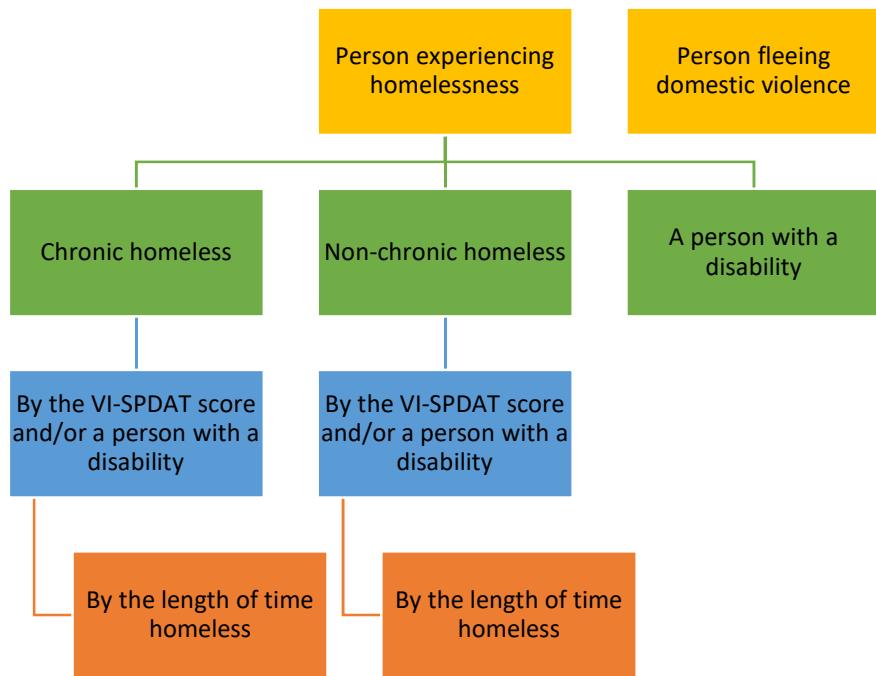
Households on the BNL will be case conferenced in the above order during the Committee meeting. Case conferencing involves the review and discussion of households on the BNL to determine the most appropriate service and housing resources for the household.

Households on the BNL may be referred to rapid rehousing, transitional housing, permanent supportive housing, Veteran's housing, and other housing and homelessness programs.

VI-SPDAT score categories will not be used to determine referrals to specific housing types, i.e. RRH vs Permanent Supportive Housing.

The prioritization factors and process described in this section is used to prioritize referrals to all PCCEH participating supportive housing projects serving individuals and families. Supportive housing projects include transitional housing, rapid rehousing, and permanent supportive housing using the following prioritization factors:

- Domestic Violence
- Chronic homeless status
- Severity of service needs as indicated by a VI-SPDAT score
- Length of time homeless
- Significant challenges or functional impairments, including physical, mental, developmental, or behavioral health challenges, which require a significant level of support in order to maintain permanent housing
- Vulnerability to illness or death

- Additional information provided by case workers and others working with the household

Households who are chronically homeless, have the longest length of stay homeless, and/or have the highest VI-SPDAT scores will be considered first for referrals to housing openings. Other factors such as vulnerability to illness or death, or significant challenges or functional impairments will also be considered when prioritizing households for housing openings. Additional information provided by case workers and others working with the household during case conferencing will also be considered when prioritizing households for referrals to housing openings.

Chronically homeless individuals and families with the longest history of homelessness and with the most severe service needs will be prioritized for housing openings in permanent supportive housing (PSH) projects.

If a household is prioritized for PSH, but no PSH resources are available, the household shall be offered any other supportive housing resource available.

Additional information may also inform prioritization for persons unable or unwilling to complete the standard VI-SPDAT assessment, especially those with limited capacity, mental health issues or other high needs/high risk populations.

The incorporation of additional non-HMIS data for prioritization must be written documentation of the above mentioned conditions and must be approved unanimously by those in attendance during the case conferencing.

The PCCEH CE Committee will manage the process of determining and updating participant prioritization for available housing and supportive services.

Emergency services, such as entry to emergency shelters, will not be prioritized based on severity of service need or vulnerability.

11. Case Conferencing –
CC meetings shall convene at least monthly.

Representatives in case conferencing meetings shall be from agencies who: provide housing resources; have had contact with the household; have resources for the household being discussed; have other resources that can contribute to ending a household's homelessness.

CC is facilitated by the HMIS Lead Agency, or an individual designated by the HMIS Lead Agency, and is used to review cases of households on the By Name List.

It is the expectation that if a provider agency staff member completes an assessment and enrolls a household in CE, or requests the household be placed on the BNL list, that staff member will be present at all case conferencing meetings which are held while the household is on the BNL or DV BNL list.

PCCEH will use:

- The AZBOSCOC BNL generated and distributed weekly from the AZBOSCOC HMIS Contractor. The BNL contains the names of all households seeking housing assistance within Pinal County.
- The DV BNL list that contains a modified list of households seeking housing assistance in Pinal County and are fleeing or have experienced DV.

The following policy is adopted regarding the BNL:

- The BNL generated from the HMIS system will only be shared at an official CC meeting and only with those in attendance at those meetings.
- The BNL will only be shared via screen within the CC meeting, and no paper copies will be distributed.
- The Referral report generated from HMIS will be reviewed at each CC meeting.

During case conferencing, staff and others with client knowledge review the household's current housing situation to determine the most appropriate housing resources. Households are referred to housing openings in accordance with the prioritization and referral procedures in the CE Procedures.

Conferencing provides individual attention and conversation but still maintains a uniform, transparent process. Confidentiality is maintained for all households discussed during case conferencing.

Case conferencing notes will be added to all clients discussed by:
- Use EDA 1247
- Search for client
- Summary tab
- CE Notes – enter information including the date

All HMIS users sign an AZBOSCOC HMIS Code of Ethics Form affirming the principles of ethical data use and client confidentiality.

Non-HMIS agencies (such as victim services providers) participating in case conferencing sign an MOU to ensure that all protocols are followed including ethics, privacy, and confidentiality.

12. Referrals –
All households participating in CE shall be provided referrals to services and resources even if housing resources are not currently available. PCCEH member organizations that participate in HMIS may now track and receive referrals via HMIS, with a goal of improving care coordination.

In general, the following process will take place:
- Clients are discussed during case conferencing and referrals are identified.
- Pinal County enters the referrals in HMIS by the end of the following day.
- The provider determines the referral status within 14 days.
  - Administrators may update the referral and change the need status for the client.
  - Those without administrative privileges must report on the client status at the next case conferencing meeting. Pinal County will update HMIS.
- Referrals are reviewed at the next case conferencing meeting.

Referral status options:
- Accepted: The client is accepted into the program and will have a corresponding HMIS entry within 7 days – e.g. they will meet with a case manager and begin the intake process.
- Accepted on waitlist: The client is accepted by the agency while the agency makes contact. Once contact is made and they agree to be in the program, they can be moved to Accepted.
- Declined: The provider declined the referral for any reason
- Canceled: The referral was inappropriate (client did not qualify, referral sent in error) OR the client denied services from the provider.

The provider agency accepting the referral will look up the household in HMIS by case number, review the assessment, get contact information for the household from HMIS, and make contact with the client. The provider agency accepting the referral can also contact the staff who completed the assessment and see if they have any updates on the household.

If the provider agency accepting the referral is unable to make contact with the household after two weeks, the referral may be returned to the BNL at the next CE meeting and a new referral will be given to the agency.

If the household rejects the referral for housing, or it is determined by the provider agency that the household does not meet the requirements for the housing program, the household will maintain their housing priority on the BNL and will be offered future housing opportunities consistent with their prioritization.

Households shall not be screened out for assistance based on perceived barriers related to housing or services.

Households shall not be directed toward any particular housing because of race, color, national origin, religion, sex, disability, or the presence of children.

See Attachment A for the referral procedure.

13. Entry Into Housing -
When a household is accepted into a housing assistance project, the provider agency will exit the household from the CE system and enroll them in the provider agency's HMIS project. Exit from the CE system will remove the household from the BNL.

14. Grievance procedure –
Clients have the right to file a grievance regarding the PCCEH. A client may file a complaint if they disagree with an action or inaction of the PCCEH. Complaints should be submitted in writing to grants@pinal.gov within (7) business days of the date of occurrence.

ATTACHMENTS
- Pre-screening tool
- Coordinated entry referral process

Domestic Violence, Sexual Violence, Human Trafficking, & General Needs Pre-Screening Tool & Referral Guide

PURPOSE

Violence, abuse, and harm can take multiple forms, and these forms often overlap. Pinal County Coalition to End Homelessness service providers strive to identify and address all forms and intersections of violence, abuse, and harm, including: domestic violence, sexual violence, and human trafficking.

The purpose of this tool is to:
- Provide assessors with a tool that can identify the three most common forms and intersections of violence, abuse, and harm (domestic violence, sexual violence, and human trafficking); and
- Ensure individuals are connected to all of the services for which they are eligible.

The purpose of this tool *is not* to establish that an individual *is* or *has been* a victim of domestic violence, sexual violence, or human trafficking – but rather to identify if they *may be* or *may have been* victims/survivors of these incidents, and then connect them with a confidential advocate who can provide a thorough assessment and comprehensive support.

HOW TO USE THE TOOL

Please read the script and then ask the questions below. There are 18 questions for clients to self-report. Clients may choose to directly answer the question asked, decline to answer the question, or skip the question entirely. The client's answers will determine whether and where the assessor will refer them, as described below.

Assessors should ask these questions of each adult in a household before administering the VI-SPDAT. These questions must be asked one-on-one in a private location. If a client is already in HMIS because they have undergone a Family VI-SPDAT with their alleged abuser, the survivor should be given the option to be re-assessed without that individual. This tool should only be used with adults age 18 and older.

If a client is in immediate crisis or begins exhibiting signs of a trauma response at any point during your interaction, immediately stop the pre-screening and call one of the crisis hotlines listed on page 3.

This tool was modified by the Pinal County Coalition to End Homelessness Domestic Violence Subcommittee from the Santa Clara County Coalition to End Homelessness. This tool was originally developed with the assistance of the Domestic Violence Advocacy Consortium and adapted from the South Bay Coalition to End Human Trafficking's Service Needs Screening Tool: Guide for Service Providers.

The following will help the interviewer understand the context for the questions being asked.

Questions 1-3 are meant to identify any current or past intimate partner abuse.

Question 4 is designed to identify potential instances of labor trafficking or wage theft. This question could also identify forms of abuse from an intimate partner that fall under domestic violence. The purpose of this question is to ascertain if the individual was potentially put into a situation, through the use of force, fraud, or coercion, where she/he was exploited for labor or abused by an intimate partner.

Questions 5 and 6 are designed to identify potential instances of labor trafficking or wage theft. The purpose of these questions is to ascertain if the individual was potentially put into a situation, through the use of force, fraud, or coercion, where she/he was exploited for labor.

Questions 7-9 are meant to identify potential instances of sex trafficking, sexual violence, and/or sexual exploitation. These questions may be especially difficult for individuals to answer. Please ensure individuals understand they do not have to answer any question that they do not feel comfortable answering. The purpose of these questions is to ascertain if the individual was potentially put into a situation, through the use of force, fraud, or coercion, where she/he was exploited for sex or experienced non-consensual sexual contact or acts.

Question 10 is an open-ended question intended to identify general potential safety risks for the individual.

PCCEH AND ITS PARTNERS RECOMMEND THE FOLLOWING SCRIPT BE READ AS WRITTEN WITH EVERY CLIENT.

1) Are you over 18 years old?

   ☐ **Yes**   ☐ **No**   ☐ **Decline to answer**

   IF CLIENT ANSWERS NO, STOP AND REFER THEM TO AN APPROPRIATE PROVIDER FROM THE REFERRAL GUIDE BELOW. IF YES, CONTINUE WITH THE SCRIPT.

Before I learn more about your housing situation, I want to ask you some questions about whether you feel safe or are in danger right now. I will then ask you some questions to get an understanding of your needs to ensure you are offered the appropriate services. These are questions that I ask everyone because these issues are very common. The questions are personal and difficult for some people to answer, and if you don't want to answer them, that's fine – you don't have to. You can stop anytime, or you can choose to answer some questions and not answer others.

The reason I'm going to ask these questions is to determine the services that will best fit your needs. Any information you share with me today will stay within my organization, unless you give me permission to share it with others.

- **(If you are a mandated reporter)** However, if you tell me something that leads me to believe that a child has been abused or neglected, the law requires me to report this.
- **(If you are not a mandated reporter)** I will not call the police or do anything with this information that you don't want me to do.

Based on your answers, I may offer you referrals to specific resources in the community. It is always your choice whether you accept a referral to work with another program or continue talking to me about your housing situation. Also, whatever you tell me will not affect your eligibility for housing assistance. You will have the same ability to access housing as anyone else regardless of how you answer these questions.

Do you have any questions before I start?

1) Do you have any concerns regarding your safety at home or at the place you are staying currently?

   ☐ **Yes**   ☐ **No**   ☐ **Decline to answer**

2) Are you being hurt (physically, emotionally, sexually, etc.) by a romantic partner, dating partner, sexual partner, or spouse?

   ☐ **Yes**   ☐ **No**   ☐ **Decline to answer**

3) In the past, has a romantic partner, dating partner, sexual partner, or spouse hurt you (physically, emotionally, sexually, etc.)?

   ☐ **Yes**   ☐ **No**   ☐ **Decline to answer**

4) Does someone have control over your finances, decision-making abilities, activities, movements, communications, or identification (driver's license/ID, social security card, passport, birth certificate)?

☐ **Yes**   ☐ **No**   ☐ **Decline to answer**

5) Have you ever worked or done other activities] without getting the payment you thought you would get?

☐ **Yes**   ☐ **No**   ☐ **Decline to answer**

6) Have you ever been forced to work against your will?

☐ **Yes**   ☐ **No**   ☐ **Decline to answer**

7) Has anyone forced or pressured you to touch them or someone else sexually in exchange for safety, money, or something of value (for example, food, shelter, drugs, gifts, etc.)?

☐ **Yes**   ☐ **No**   ☐ **Decline to answer**

8) Has anyone taken intimate photos or videos of you without your consent, posted or shared intimate photos or videos of you without your consent, or made you engage in other sexual acts without your consent?

☐ **Yes**   ☐ **No**   ☐ **Decline to answer**

9) Do you feel that you do not have control over your sexual relationships or that you will not be listened to if you say "no" to having sex or sexual contact?

☐ **Yes**   ☐ **No**   ☐ **Decline to answer**

IF THE PERSON RESPONDS YES TO ANY QUESTION ABOVE,
PLEASE REFER THEM TO A VICTIM SERVICE PROVIDER BELOW.

Victim Service Provider	Crisis Line Number	Languages	Service Area	Services
Against Abuse, Inc.	(520) 836-0858	English; Spanish	Pinal County	Emergency shelter; other supportive services
Community Alliance Against Family Abuse	(480) 890-3039	English; Spanish	Northern Pinal County	Emergency shelter; other supportive services

*Question 10 is an open-ended question intended to identify general potential safety risks for the individual. **IF THE PERSON EXPRESSES CONCERN REGARDING CURRENT ISSUES OF DOMESTIC VIOLENCE, SEXUAL VIOLENCE, STALKING, OR HUMAN TREAFFICING, PLEASE REFER THEM TO A VICTIM SERVICE PROVIDER IN THE REFERRAL GUIDE ABOVE.***
PLEASE REMEMBER TO PROVIDE THIS INFORMATION TO THE AGENCY IN WHICH YOU ARE REFERRING THE CLIENT.

10) Is there anything else that you would like to tell me about your safety?

IF THE CLIENT DISCLOSES DOMESTIC VIOLENCE, SEXUAL VIOLENCE, OR HUMAN TRAFFICKING, PROCEED WITH THE SCRIPT. IF NO, CONTINUE TO THE NEXT PARAGRAPH.

I'm glad you told me about this, and I want to help you to stay healthy and safe. I am happy to continue working with you, but I also want to let you know that there are organizations in Pinal County that specialize in working with people who have similar experiences. These organizations can help you access the same housing and services that I can and would store your information in a different confidential database which isn't shared by the County or other organizations. They can also link you to counseling services, legal assistance, emergency shelters, support groups, and other services that you might need.

Here are some of the risks with not working with a victim services provider:

- I recommend a Survivor Advocate be present during this assessment to discuss the safety risks and ensure accurate services are provided to you.
- The database currently used for housing services outside of DV organizations is open to all agencies that service the unsheltered community and are enrolled in this database.
- Signing the Release of information shares personal information with these other agencies.
- Although the individuals who caused you harm (the abuser/offender) do not have access to this database, they may currently or in the future have associates who have access through their agency.
- As a non-victim service provider, there is identifying information that will be entered into the database, such as your full name, date of birth, social security number, and contact information.
- Your information will not be isolated to the DV housing list but will be shared during the regular case conferencing meeting where we discuss your housing needs and potential solutions. There could be the potential for someone without access to the housing database to be present during the meeting. A confidentiality agreement is signed by all agencies who attend the case conferencing meeting.

If you would like, I can help connect you with one of these victim service providers. Would you like to work with one of those organizations?

IF YES, STOP AND MAKE A REFERRAL TO A VICTIM SERVICE PROVIDER FROM THE REFERRAL GUIDE ABOVE TO PROVIDE SERVICES AND CONDUCT THE VI-SPDAT. IF NO, CONTINUE....

Now, I'd like to ask you some additional questions to ensure we address all of your needs and understand your situation. Just like the prior questions, you can stop at any time, or you can choose to answer some questions and not answer others.

11) Is there a child within your household?

   ☐ **Yes**   ☐ **No**   ☐ **Decline to answer**

12) Do you have any urgent medical or mental health needs?

   ☐ **Yes**   ☐ **No**   ☐ **Decline to answer**

13) Are you in imminent danger? (For example, at risk of animal attack, assault, etc.).

   ☐ **Yes**   ☐ **No**   ☐ **Decline to answer**

IF CLIENT ANSWERS YES TO QUESTIONS 12 OR 13, STOP AND REFER THEM TO AN APPROPRIATE PROVIDER FROM THE REFERRAL GUIDE BELOW.
IF NO, CONTINUE WITH THE SCRIPT.

14) Do you have a place to stay tonight?

   ☐ **Yes**   ☐ **No**   ☐ **Decline to answer**

IF CLIENT ANSWERS NO TO QUESTION 14, PROVIDE THEM WITH INFORMATION FOR EMERGENCY SHELTERS LISTED IN THE REFERRAL GUIDE BELOW.

15) Do you have income?

   ☐ **Yes**   ☐ **No**   ☐ **Decline to answer**

16) Are you interested in long-term housing?

   ☐ **Yes**   ☐ **No**   ☐ **Decline to answer**

17) Are you a registered sex offender?

   ☐ **Yes**   ☐ **No**   ☐ **Decline to answer**

Service Provider	Crisis Line Number	Service Provider Type
National Community Health Partners	(520) 876-0699	Veterans Emergency Shelter
Honoring, Hiring, Helping our Heroes	(520) 338-2568	Veterans Emergency Shelter
US Veterans Affairs 5-9	(480) 498-8700	Veterans Emergency Shelter
A New Leaf	(602) 595-8700	Families Emergency Shelter

Community Action Human Resources Agency	(520) 466-1112	Emergency Shelter
https://211arizona.org/	Dial 211	Various statewide resources and referrals

The next step in this process is an assessment that helps us identify the housing and other resources you might be eligible for. I would be happy to do the assessment with you now if you would like.

After you take the assessment, the next step is to enter your information into the housing database, which means that some staff and service providers will have access to information like your name, location, and answers to the assessment questions. Do you wish to proceed?

CONTINUE WITH THE ROI AND THE VI-SPDAT.
AFTER COMPLETING THE VI-SPDAT, ENTER CLIENT'S INFORMATION IN HMIS AS USUAL.
ENSURE THAT YOU COMPLETE HMIS IN ITS ENTIRETY.

BALANCE OF STATE REFERRALS LCEH WORKFLOW

Purpose: This workflow is intended for the LCEH lead in the community. This workflow covers the steps needed to document a Coordinated Entry referral in Community Service. The LCEH will record a referral under the "Service Transactions" tab. All referrals should be sent on the Head of Household's profile only. It is up to the local community whether the LCEH or housing providers will document the referral outcome.

SECTION ONE OF PROCEDURE: REFERRAL TO HOUSING PROVIDER

Select the Correct EDA Provider (**Refer to the HMIS Introductory Training document**)

1. Users will have a Coordinated Entry project named by the County to provide referrals. Refer to the appropriate project below.
   a. Apache/Navajo: TBD
   b. Cochise: "Cochise – CE (1238)"
   c. Coconino: "Coconino – CE (1239)"
   d. Gila: "Gile – CE (1240)"
   e. Graham/Greenlee: "Graham/Greenlee – CE (1241)"
   f. Mohave: "Mohave – CE (1244)"
   g. Pinal: "Pinal – CE (1247)"
   h. Santa Cruz: "Santa Cruz – CE (1249)"
   i. Yavapai: "Yavapai – CE (1250)"
   j. Yuma: "Yuma – CE (1251)"

Record an ROI for Purposes of Data Visibility (**Refer to the ROI Tab Instructions document**)

1. Search for and select the appropriate client. Navigate to the ROI tab.

2. Complete the ROI Tab for **all clients** in the household. The ROI provider should be identical to the EDA provider. This step is purely functional to ensure the referral is visible to other agencies. The LCEH does not need to have the client(s) sign an ROI for this process. Use the following values for the ROI.
   a. <u>Provider</u>: Identical to the EDA provider
   b. <u>Release Granted</u>: This will **always** be "Yes" in this workflow
   c. <u>Start Date</u>: The same as the referral date.
   d. <u>End Date</u>: 1 year (365 days) from the "Start Date"
   e. <u>Documentation</u>: "Routine Use"
   f. <u>Witness</u>: "LCEH Referral"

Release of Information Data

Provider *	Gila - CE (1240)	Search	My Provider	Clear
Release Granted *	Yes ▾ ← ALWAYS "Yes"
Start Date *	05 / 01 / 2024
End Date *	04 / 30 / 2025
Documentation	Routine Use ▾
Witness	LCEH Referral

Save Release of Information   **Cancel**

3. Click "Save Release of Information"

Create the Referral

This process explains how to add a referral ("approval"/ "match") to an agency within HMIS. **Only make the referral for the Head of Household. (Refer to the Case Management Referrals document**)

1. Navigate to the **Head of Household**'s profile. The referral is **only** made for the **Head of Household**.

2. Go to the Service Transactions tab.

3. Select "Add Referrals"
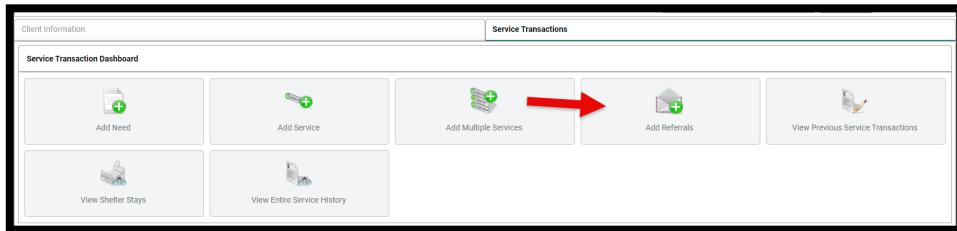
4. Under the "**Add Needs**" section are several subsections to create a client "Need" before creating a "Referral":
   a. At the "Household Members" sub-section, **ONLY** select the Head of Household
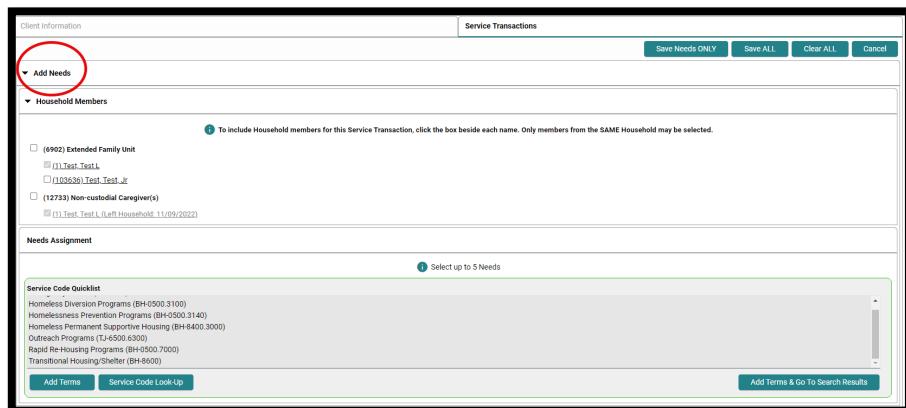
b. At the sub-section, "**Service Code Quicklist**", select the Service Code for the referral. "Rapid Re-Housing (BH-0500.7000)" and "Homeless Permanent Supportive Housing (BH-8400.3000)" are used to check workflow compliance. Your local community may choose to record other referral types, as well.

  i.   Only select 1 Service Code
  ii. Click "Add Terms"

c. The project administrator and HMIS pre-set the Referral Provider Quicklist sub-section. (Contact your administrator to add Providers to the list or remove Providers from the list.)
  i.   Choose at least 1 Provider from the list.
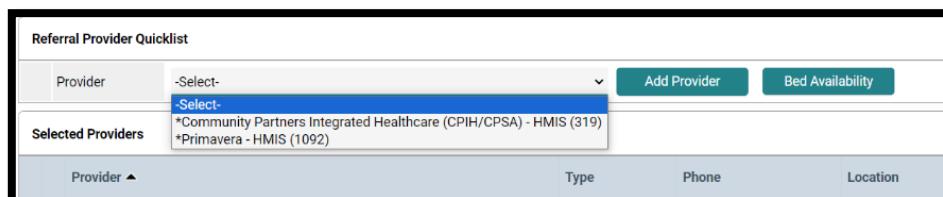
  ii. Click "Add Provider" for each Provider selected. Note that the **Selected Providers** are shown below the Search Results.
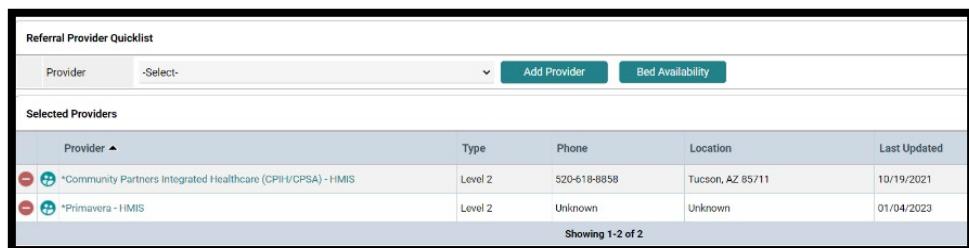
5. Under the "**Referral Data**" section, complete the rest of the referral

a. The date will auto-populate to Current Date
b. (Leave the other items in this section as their default/blank/unselected)

6. In the "**Referrals**" section, check the box next to each "Referred to Provider".

7. Under "**Need Data**" leave the "Date of Need" as default.

8. Under the "Selected Needs" sub-section select the following
   a. **Needs Status**: Identified
   b. **Outcome**: Service Pending

c. **Note**: There is a "**Notes**" button available to create and save Needs-related notes for follow-up users.
d. Click **Save ALL**.

**SECTION TWO OF PROCEDURE: REVIEWING "OUTGOING" REFERRALS WITH THE REFERRALS REPORT**

It is helpful to check on the status of Outgoing referrals ("Approvals"/ "Matches"). You can do this using the Referrals Report. You can either search for "outstanding" referrals (ones that have not been replied to) or "All" (which includes those that have been accepted or declined).

Run the Referrals Report

1. Enter the correct EDA provider.
    a. For an LCEH responding to referrals, refer to "Section One of Procedure" for the appropriate county-level project.
    b. For a housing provider, select the top-level project at the agency if you are not already defaulted there.

2. Select the tab "Reports"
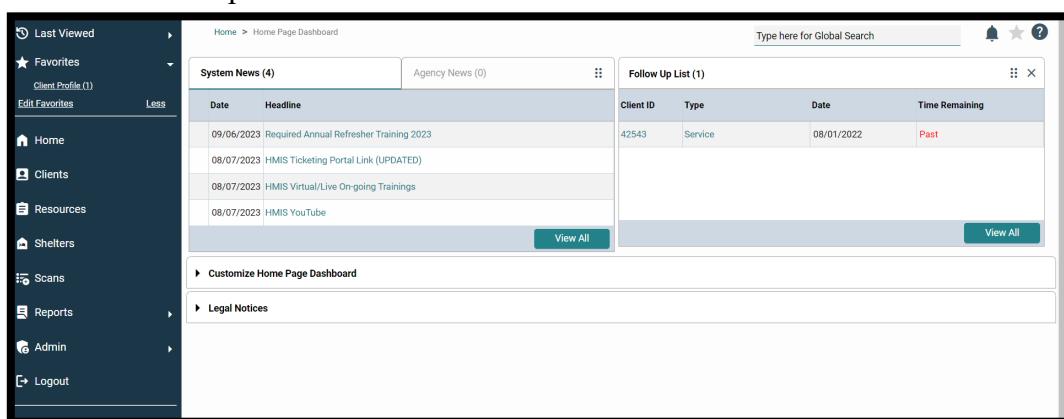
3. Select the Referrals report.
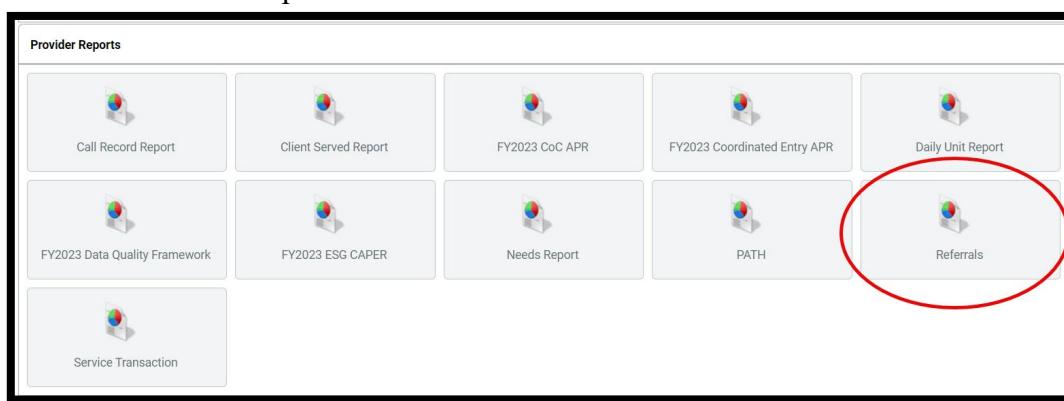
4. Fill out the Referral Report prompts as follows:
    a. <u>Provider</u>: This will default to the EDA provider
        i. For LCEHs, choose "This provider ONLY"
        ii. For housing providers, choose "This provider AND its subordinates"
    b. <u>Referral Type</u>: This will vary based on your agency

i. For LCEHs, choose "Outgoing referrals from the provider"

ii. For housing providers, choose "Incoming referrals to provider"

c. <u>Referral Status"</u>: As "Outstanding" or "ALL", depending on what you want to look for.

d. <u>Referral Date Range</u>: Select the appropriate dates (even one day)

e. Click "Build Report"

5. The Report Results will show all clients referred during the selected date period.

SECTION THREE OF PROCEDURE: ACCEPTING OR DECLINING REFERRALS

In some LCEHs, the housing provider receiving the referral is responsible for this portion of the workflow. In other LCEHs, the LCEH is responsible for recording referral outcomes. In some communities, both the LCEH and housing providers may respond to referrals.

Respond to the Referral

1. First, run the referrals report as outlined in the "Section Two of Procedure" above.

2. Identify the referrals which need a response. If you are not seeing an expected referral, you may need to use a different data range or select a new <u>Referral Status</u> option. Complete the following steps to respond to the referral.

a. **Select "Need Type"**: Click directly on the "Need Type" for the referral you are responding to. This will take you to the "Edit Referral" page.

Report Results

Referral Date ▾	Name	Gro...	Need Type	Referred By	Referred To	Refer... ...es
01/20/2024 9:08:04 AM	(4) test, test K		Rapid Re-Housing Programs	*FHH - Family Housing Hub - CE	Move-On - HOM Inc - OPH (Referral Only)	
01/20/2024 9:06:45 AM	(1) Test, Test		Homeless Permanent Supportive Housing	*FHH - Family Housing Hub - CE	Move-On - HOM Inc - OPH (Referral Only)	

Select ALL   Clear   Showing 1-2 of 2

b. Scroll to the bottom of the page to find the "Referral Outcome", "Needs Status", "Outcome of Need", and "If Need is Not Met, Reason?" fields.

Referral Data   Send Summary

Referred-To Provider	Move-On - HOM Inc - OPH (Referral Only) (48654)
Needs Referral Date *	01 / 20 / 2024 9 : 06 : 45 AM
Referral Ranking	-Select-
VI-SPDAT Score	Please Select a VI-SPDAT Score Search Clear
TAY-VI-SPDAT Score	Please Select a TAY-VI-SPDAT Score Search Clear
VI-FSPDAT Score	Please Select a VI-FSPDAT Score Search Clear
Referral Outcome	-Select-
If Canceled or Declined, Reason	-Select-

Follow Up Information

Need Status and Outcome

Need Status *	Identified
Outcome of Need	Service Pending
If Need is Not Met, Reason	-Select-

Service Information

Provide Service   ⓘ A Service has not yet been provided for this Referral.

Save   Save & Exit   Exit

c. Complete the fields according to the following table.

Referral Outcome:	Need Status:	Outcome of Need:	If Need is Not Met, Reason?
Accepted: *The referral was accepted, and the referral recipient is now actively working with this individual.*	Closed	Fully Met	(Leave blank)
Accepted on Waitlist: *The referral was initially accepted and the referral recipient has not been able to establish contact with referred person, but will within 30 days.*	Closed	Service Pending	(Leave Blank)
Declined: *The referral recipient is unable to work with the referred individual.*	Closed	Not Met	(Pick from dropdown)
Canceled: *The referral was sent in error, the referred person does not qualify for the referred program, or the referred person declined services.*	Closed	Not Met	(Pick from dropdown)

d. After these steps are complete, click "Save & Exit" at the bottom of the referral screen.

4. If a referral outcome is documented in HMIS, an ROI may be required. Use the following steps to ensure the referral outcome can be shared for reporting purposes.

    a. Check to see if an ROI is required.
        i. If you are the LCEH documenting a referral outcome, verify a valid ROI is still in place. If the ROI has expired, record a new ROI.
        ii. If you are a housing provider documenting a referral outcome, you will need to complete an ROI. Complete the ROI Tab for **all clients in the household**. The ROI provider should be identical to the EDA provider. This step is purely functional to ensure the referral outcome is visible to other agencies. The housing provider does not need to have the client(s) sign an ROI for this process.

    b. If required, record the ROI. Use the following values for the ROI.
        i. <u>Provider</u>: Identical to the EDA provider
        ii. <u>Release Granted</u>: This will **always** be "Yes" in this workflow
        iii. <u>Start Date</u>: The same date as the referral outcome was documented.
        iv. <u>End Date</u>: 1 year (365 days) from the "Start Date"
        v. <u>Documentation</u>: "Routine Use"
   vi. <u>Witness</u>: "Referral Outcome"

    c. Click "Save Release of Information"

CORRECTING INCORRECT REFERRALS

In some cases, an error may be made in recording a referral. This could be recording the referral for the wrong client, recording the wrong intervention, or a variety of other issues. Referrals should not be modified – instead the best practice is to delete the referral with the error and re-record the referral.

Delete the Incorrect Referral

1. First locate the referral which should be deleted.

   a. Navigate to the client's profile in HMIS
   b. Click on the "Service Transactions" tab
   c. Click on "View Entire Service History"
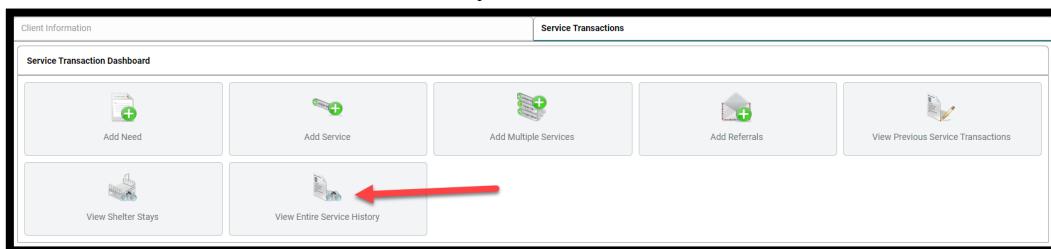
   d. Click on the "Referrals" tab
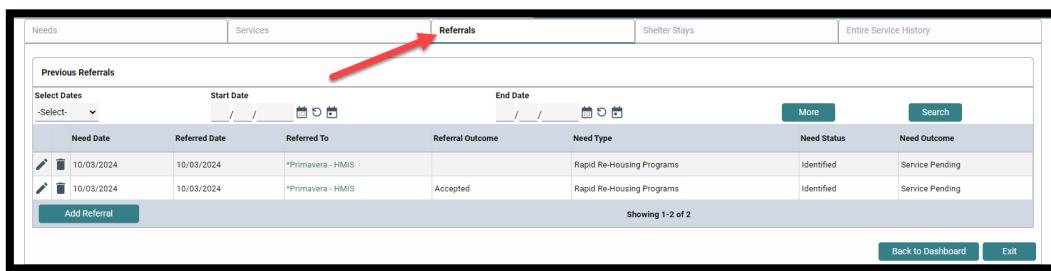
   e. Locate the incorrect referral in the list

2. Delete the referral by clicking the trash can icon to the left of the referral. You will see a pop-up confirming you want to complete this action. Click "Delete". The referral is now gone, and you can re-record it correctly.