



COORDINATED ENTRY PROCESS

Policies and Procedures

Adopted: 01/19/2018

Table of Contents

Purpose and Background	2
Definitions and Key Terms	5
Process Overview	10
Accessibility	11
Emergency Services	11
Prevention Services	11
Communication	11
Safety Planning	12
Street Outreach	12
Assessment	12
Victim Services	12
Assessor Training	14
Privacy Protections	14
Prioritization	15
Emergency Services	15
Nondiscrimination/Grievance Procedure	15
Data Protection	15
Prevention Services	16
Referrals	16
Emergency Shelter	16
Permanent Supportive Housing, Rapid Re-Housing, and Transitional Housing	16
Nondiscrimination	17
Data Management	16
Evaluation	18
Appendix A – Coordinated Entry Assessment Tool	19
Appendix B – Vulnerability Assessment Scoring Tool	21
Appendix C – HMIS Release of Information	24
Appendix D – Title VI Nondiscrimination Complaint Procedure	25
Appendix E – Grievance Policy	33
Appendix F – Flowchart(s)	36
Appendix G – Nondiscrimination Laws	38
Appendix H – Sample Follow-Up Survey	39
Appendix I – Marketing Materials	40
Appendix J – National Victim Services Resources	43

Purpose and Background

The Homeless Resource Council of the Sierras (HRCS), CA-515 Continuum of Care (CoC), has developed the following Coordinated Entry Process (CEP) for the entire geographic area of Placer and Nevada Counties to meet the Department of Housing and Urban Development (HUD) and State of California Department of Housing and Community Development (HCD) guidelines. The primary goals of this CEP are that assistance be allocated as effectively as possible and that it be easily accessible to persons experiencing homelessness. This Coordinated Entry Process is mandated for all recipients of CoC and Emergency Solutions Grant (ESG) funding and was developed in accordance with the Homeless Emergency Assistance and Rapid Transition to Housing (HEARTH) Act of 2009 and its implementing regulations.

Coordinated Entry Processes help communities prioritize assistance based on vulnerability and severity of service needs to ensure that people who need assistance the most can receive it in a timely manner. In addition, a Coordinated Entry Process provides information about service needs and gaps to help communities plan their assistance and identify necessary resources. Accordingly, the Coordinated Entry Process described in this Manual covers the entire geographic area of Placer and Nevada Counties and was designed with the following guiding principles:

Prioritization: The CEP ensures that people with the greatest needs receive priority for any type of housing and homeless assistance available in the geographic area, information and referral, Rapid Rehousing (RRH), and other interventions.

Low Barrier: The CEP does not screen people out for assistance because of perceived barriers to housing or services, including, but not limited to, lack of employment or income, drug or alcohol use, or having a criminal record. In addition, housing and homelessness programs lower their screening barriers in partnership with the Coordinated Entry process.

Housing First Orientation: The CEP is Housing First oriented, such that people are housed quickly without preconditions or service participation requirements.

Person-Centered: The CEP incorporates participant choice which is facilitated by questions in the assessment tool and through other methods. Choice can include location and type of housing, level of services, and other options about the types of eligible services a household may receive.

Fair and Equal Access: All individuals in the Placer and Nevada geographic area have fair and equal access to CEP. Fair and equal access means that people can easily access the Coordinated Entry Process and that the process for accessing help is known.

Emergency Services: The CEP does not delay access to emergency services such as emergency shelter or food services. However, ESG-funded programs must receive referrals through Coordinated Entry.

Standardized Access and Assessment: All Coordinated Entry methods offer the same assessment approach and referrals using uniform decision-making processes. A person is not steered towards any particular program or provider based on how they present to services.

Inclusive: The CEP includes all subpopulations, including Chronic Homeless, Veterans, families, unaccompanied youth, and survivors of domestic violence, sexual assault, dating violence, stalking, or

human trafficking. HRCS has adopted a parallel access point for victims of domestic violence, sexual assault, dating violence, stalking, and human trafficking. The CEP is available to all eligible persons regardless of race, color, national origin, religion, sex, age, familial status, disability, actual or perceived sexual orientation, gender identity, or marital status. HRCS will continuously evaluate and improve the process ensuring that all subpopulations are served.

Referral to Projects: The CEP makes referrals receiving Emergency Solutions Grants (ESG) and CoC Program funds, including Emergency Shelter, Rapid Rehousing (RRH), and Permanent Supportive Housing (PSH), as well as other housing and homelessness projects. Projects in the community that are dedicated to serving people experiencing homelessness fill all vacancies through referrals. Non ESG- or CoC-funded programs determine the extent to which they rely on referrals from the Coordinated Entry Process.

Referral Protocols: Programs that participate in the CEP accept all eligible referrals until the Homeless Resource Council of the Sierras (HRCS) has a documented protocol for rejecting referrals, ensuring that such rejections are justified and rare and that participants are able to identify and access another suitable project. Each agency must have an appeal protocol made available to the individual. If the client is unable to appeal with the referring agency, they are able to submit an appeal form directly to HRCS (see Appendix E)

Outreach: The Coordinated Entry Process is linked to street outreach efforts so that people sleeping on the streets or encampments are prioritized for assistance in the same manner as any other person assessed through the CEP.

Ongoing Planning and Stakeholder Consultation: The Homeless Resource Council of the Sierras will engage in ongoing planning with all stakeholders participating in the Coordinated Entry Process. This planning will include evaluation and updating the CEP at least annually. Feedback from individuals and families experiencing homelessness or recently connected to housing through the CEP will be regularly gathered through surveys, focus groups, and other means and will be used to improve the process.

Informing Local Planning: Information gathered through the Coordinated Entry Process is used to guide homeless assistance planning and system change efforts in the community.

Leverage Local Attributes and Capacity: The physical and political geography, including the capacity of partners in a community and the opportunities unique to the community's context, inform local Coordinated Entry implementation.

Safety Planning: The CEP has protocols in place to ensure the safety of the individuals seeking assistance. These protocols ensure that people fleeing or attempting to flee domestic violence, sexual assault, dating violence, stalking, or human trafficking are provided safe and confidential access to CEP and victim services, and that any data collection adheres to the Violence Against Women Act (VAWA).

Accurate Data: Using HMIS and other systems for Coordinated Entry, the Homeless Resource Council of the Sierra collects and manages data associated with assessments and referrals.

Written Standards: The CoC, in consultation with recipients of ESG program funds within the geographic area, has established written standards for providing Continuum of Care assistance which

will guide the development of formalized policies and procedures for the Coordinated Entry Process. The CoC and ESG-funded programs will work together to ensure the CEP allows for coordinated screening, assessment, and referrals for ESG projects consistent with the written standards for administering ESG assistance.

The policies and procedures in this manual have been established to ensure that persons experiencing homelessness who enter into programs throughout the Placer Nevada CoC geographic region will be given similar information and support to access and maintain permanent housing. All programs that receive ESG or CoC funding are required to abide by these policies and procedures. Agency program procedures should reflect the policy and procedures described in this document. The Homeless Resource Council of the Sierras strongly encourages programs that do not receive either of these sources of funds to adopt and utilize these policies and procedures.

The Homeless Resource Council of the Sierras Governing Board shall review and update these policies and procedures annually or as needed.

Definitions and Key Terms

Terms used throughout this manual are defined below:

By Name Only List (BNL):

The BNL is the CoC-wide prioritization list for housing programs. Because housing resources within our CoC are scarce and because most programs will not have immediate openings, it is assumed that each assessed household will spend some amount of time on the BNL before being referred to a program. The BNL is maintained by the HMIS lead agency (HMIS Administrator) and is organized according to vulnerability assessment score and length of time homeless.

Chronically Homeless (24 CFR 578.3):

- (1) A “homeless individual with a disability,” as defined in section 401(9) of the McKinney-Vento Homeless Assistance Act (42 U.S.C. 11360(9)), who:
 - a. Lives in a place not meant for human habitation, a safe haven, or in an emergency shelter; and
 - b. Has been homeless and living as described in paragraph (1)(a) of this definition continuously for at least 12 months or on at least 4 separate occasions in the last 3 years, as long as the combined occasions equal at least 12 months and each break in homelessness separation the occasions included at least 7 consecutive nights of not living as described in paragraph (1)(a).
 - c. Stays in institutional care facilities for fewer than 90 days will not constitute as a break in homelessness, but rather such stays are included in the 12-month total, as long as the individual was living or residing in a place not meant for human habitation, a safe have, or an emergency shelter immediately before entering the institutional care facility;
- (2) An individual who has been residing in an institutional care facility, including a jail, substance abuse or mental health treatment facility, hospital, or other similar facility for fewer than 90 days and met all of the criteria in paragraph (1) of this definition, before entering the facility; or
- (3) A family with an adult head of household (or if there is not adult in the family, a minor head of household) who meets all of the criteria in paragraphs (1) or (2) of this definition, including a family whose composition has fluctuated while the head of household has been homeless.

Disability (24 CFR §583.5):

- (1) A condition that:
 - a. Is expected to be long-continuing or of indefinite duration;
 - b. Substantially impedes the individual’s ability to live independently;
 - c. Could be improved by the provision of more suitable housing conditions; and
 - d. Is a physical, mental, or emotional impairment, including an impairment caused by alcohol or drug abuse, post-traumatic stress disorder, or brain injury;
- (2) A developmental disability, as defined in this section; or
- (3) The disease of acquired immunodeficiency syndrome (AIDS) or any conditions arising from the etiologic agent for acquired immunodeficiency syndrome, including infection with the human immunodeficiency virus (HIV).

Developmental Disability (24 CFR §578.3.):

Developmental disability means, as defined in section 102 of the Developmental Disabilities Assistance and Bill of Rights Act of 2000 (42 U.S.C. 15002):

- (1) A severe, chronic disability of an individual that –
 - a. Is attributable to a mental or physical impairment or combination of mental and physical impairments;
 - b. Is manifested before the individual attains age 22;
 - c. Is likely to continue indefinitely;
 - d. Results in substantial limitations in 3 or more of the following areas of major life activity:
 - i. Self-care;
 - ii. Receptive and expressive language;
 - iii. Learning;
 - iv. Mobility;
 - v. Self-direction;
 - vi. Capacity for independent living;
 - vii. Economic self-sufficiency
 - e. Reflects the individual's need for a combination and sequence of special, interdisciplinary, or generic services, individualized supports, or other forms of assistance that are of lifelong or extended duration and are individually planned and coordinated.
- (2) An individual from birth to age 9, inclusive, who has a substantial developmental delay or specific congenital or acquired condition, may be considered to have a developmental disability without meeting 3 or more of the criteria described in paragraphs (1)(a) through (1)(e) of the definition of "developmental disability: in this section if the individual, without services and supports, has a high probability of meeting these criteria later in life.

Homeless (24 CFR 578.3)

Literally Homeless (Category 1):

Individual or family who lacks a fixed, regular, and adequate nighttime residence, meaning:

- (1) Has a primary nighttime residence that is a public or private place not meant for human habitation;
- (2) Is living in a publicly or privately operated shelter designated to provide temporary living arrangements (including congregate shelters, transitional housing, and hotels and motels paid for by charitable organizations or by federal, state, and local government programs); or
- (3) Is exiting an institution where (s)he has resided for 90 days or less and who resided in an emergency shelter or place not meant for human habitation immediately before entering that institution; or

At imminent risk of homelessness (Category 2)

Individual or family who will imminently lose their primary nighttime residence, provided that:

- (1) Residence will be lost within 14 days of the date of application for homeless assistance;

- (2) No subsequent residence has been identified; and
- (3) The individual or family lacks the resources or support networks needed to obtain other permanent housing; or

Homeless under other Federal statutes (Category 3)

Unaccompanied youth under 25 years of age, or families with children and youth, who do not otherwise qualify as homeless under this definition, but who:

- (1) Are defined as homeless under section 387 of the Runaway and Homeless Youth Act (42 U.S.C. 5732a), section 637 of the Head Start Act (42 U.S.C. 9832), section 41403 of the Violence Against Women Act of 1994 (42 U.S.C. 14043e-2), section 330(h) of the Public Health Service Act (42 U.S.C. 254b(h)), section 3 of the Food and Nutrition Act of 2008 (7 U.S.C. 2012), section 17(b) of the Child Nutrition Act of 1966 (42 U.S.C. 1786(b)), or section 725 of the McKinney-Vento Homeless Assistance Act (42 U.S.C. 11434a);
- (2) Have not had a lease, ownership interest, or occupancy agreement in permanent housing at any time during the 60 days immediately preceding the date of application for homeless assistance;
- (3) Have experienced persistent instability as measured by 2 moves or more during the 60-day period immediately preceding the date of applying for homeless assistance; and
- (4) Can be expected to continue in such status for an extended period of time because of chronic disabilities; chronic physical health or mental health conditions; substance addiction, histories of domestic violence or childhood abuse (including neglect); the presence of a child or youth with a disability; or 2 or more barriers to employment, which include the lack of a high school degree or General Education Development (GED), illiteracy, low English proficiency, a history of incarceration or detention for criminal activity, and a history of unstable employment; or

Fleeing domestic abuse or violence (Category 4)

Any individual or family who:

- (1) Is fleeing, or is attempting to flee, domestic violence, dating violence, sexual assault, stalking, or other dangerous or life-threatening conditions that relate to violence against the individual or a family member, including a child, that has either taken place within the individual's or family's primary nighttime residence or has made the individual or family afraid to return to their primary nighttime residence;
- (2) Has no other residence; and
- (3) Lacks the resources or support networks, e.g. family, friends, and faith-based or other social networks, to obtain other permanent housing.

Assessment

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

Assessor

An intake worker, whose responsibility is to provide coordinated intake and assessment for individuals or families seeking housing services.

Diversion

A strategy that prevents homelessness for people seeking shelter by helping them identify immediate alternate housing arrangements and, if necessary, connecting them with services and financial assistance to help them return to permanent housing. The main difference between diversion and other permanent housing-focused intervention center on the point at which intervention occurs. Prevention targets people at imminent risk of homelessness, diversion targets people as they are applying for entry into shelter, and rapid re-housing targets people who are already homeless.

HEARTH Act

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

Coordinated Assessment

Relates to the utilization of the same assessment tool to connect clients to services as a means for a coordinated entry system. For the purpose of this document, that tool is the vulnerability assessment tool created by the Outcomes and Measurements Committee. This tool helps identify who should be recommended for each housing and support intervention, moving the discussion from simply who is eligible for a service intervention to who is eligible and in greatest need of that intervention.

Homeless Management Information System

A Homeless Management Information System (HMIS) is a local information technology system used to collect client-level data and data on the provision of housing and services to homeless individuals and families and persons at risk of homelessness. The U.S. Department of Housing and Urban Development (HUD) and other planners and policymakers at the federal, state, and local levels use aggregate HMIS data to obtain better information about the extent and nature of homelessness over time. Specifically, HMIS can be used to produce an unduplicated count of homeless persons, understand patterns of service use, and measure the effectiveness of homeless programs.

Placer & Nevada Counties' HMIS is staffed by the County of Placer. The software provider is Mediware. HMIS staff is responsible for the administration of the HMIS software and providing technical assistance to participating agencies and end-users. Agencies that participate in HMIS are referred to as "participating agencies." Each participating agency needs to follow certain guidelines to help maintain data privacy and accuracy.

Authorized User Agencies

Housing providers who wish to, or are required to, participate in HMIS are Authorized User Agencies. Authorized User Agencies must sign and agree to the HMIS Privacy and Security Policies for HMIS database use.

Receiving Program

All Transitional Housing, Rapid Rehousing, and Permanent Supportive Housing programs are Receiving Programs, and are responsible for reporting and pulling referrals from the BNL in compliance with the

protocols described in this manual. All programs that receive a referral from the Coordinated Entry Process are responsible for responding to that referral.

Process Overview

To illustrate how the Coordinated Entry Process functions, the following overview provides a brief description of the path a household would follow from an initial request for housing through permanent housing placement. The overview also describes roles and expectations of the key partner organizations that play a critical role in the system. Additional details can be found in the subsequent sections of this manual.

Step One: Accessing the Coordinated Entry Process

To ensure accessibility to households in need, the Coordinate Entry Process provides access to services via 211 and a homeless hotline number. The CEP also includes parallel access for victims of domestic violence, assault, dating violence, stalking, or human trafficking. Households in need may initiate a request for services via the phone system or in person at the appropriate victim service provider(s).

Step Two: Coordinated Entry Assessment:

Assessors will complete a Coordinated Entry Assessment with the household requesting assistance. The assessment includes the collection of HMIS universal data elements as well as administering the standardized vulnerability assessment tool. Assessors have the option of completing the assessment directly into HMIS (which is strongly encouraged) or administering a paper version to be entered into HMIS at a later time. Data collected on paper should be entered into HMIS within 72 hours of collection.

Step Three: Prioritization

Information gathered from the assessment will be used to prioritize households with the largest needs and vulnerabilities. This prioritization list is called the By Name List (BNL). The BNL will sort all participants based on their assessment score, with the highest score ranking first. This list will be able to show which program(s) the individual or household is eligible for.

Step Four: Referral

Once an individual's name has been placed on the BNL, all authorized partner agencies will have access to the list. These agencies will pull names from the list, beginning from the most vulnerable, when a bed becomes available in their program. Housing referrals will include Rapid Rehousing, Transitional Housing, and Permanent Supportive Housing. The CEP does not delay access to emergency shelter, but any CoC- or ESG-funded shelter program must receive a referral directly from CEP.

Accessibility

The Coordinated Entry Process covers the entire geographic region of CoC CA-515. Placer and Nevada Counties' CEP will be implemented using a dual-county phone system, operated by Connecting Point, located in Nevada County. Individuals and households experiencing homelessness in Nevada County are able to access the CEP by dialing 2-1-1. Those individuals or households in Placer County need to call 1-833-3PLACER to access the CEP. The Coordinated Entry Process serves all subpopulations, including chronically homeless, veterans, youth (including parenting youth), and survivors of domestic violence, sexual assault, dating violence, stalking, or human trafficking. The Coordinated Entry Process is available to all eligible persons regardless of race, color, national origin, religion, sex, age, familial status, disability, actual or perceived sexual orientation, gender identity, or marital status. Individuals fleeing, or attempting to flee domestic violence, dating violence, sexual assault, stalking, or human trafficking are able to access the CEP through domestic violence service providers as well as the traditional access point. Further detail can be found under "Safety Planning."

Emergency Services

The Placer/Nevada CEP does not delay access to emergency services. However, emergency shelter programs funded through ESG or CoC funds must receive referrals directly from the Coordinated Entry Process. Individuals entering the CEP will complete a vulnerability assessment to have their name be placed on the By-Name List (BNL). Call agents will inform the individual of emergency shelters in the area, along with their admission cut-off times. ESG- and CoC-funded emergency shelter programs will be contacted with information on the individuals who have been referred to their specific program. Individuals fleeing, or attempting to flee domestic violence, dating violence, sexual assault, stalking, or human trafficking can enter the CEP directly at the domestic violence service provider(s) or through the 24-hour CEP phone system.

Prevention Services

As Homeless Prevention funds are available, the Coordinated Entry Process will make appropriate referrals. Call agents will identify whether the caller is literally homeless. If the individual is at risk of becoming homeless, he or she will be referred based on the county where they are residing. Residents of Nevada County will be referred to agencies with homeless prevention funds, and Placer County residents will be referred to the "Getting Started Group" held and the Placer County Welcome Center located at 11512 B Avenue, Auburn, CA 95603. This group meets every Tuesday from 10:00-11:00AM.

Communication

Connecting Point, the lead agency in the Coordinated Entry Process, has the ability to accommodate individuals with specific communication needs. The agency has two (2) Spanish-speaking call agents as well as access to the Universal Language Line (ULL). Agents are trained to take and relay calls, and 2-1-1 is accessible by text for individuals with hearing impairments. In addition, homeless individuals are able to access the Coordinated Entry Process online through the "chat" function on Connecting Point's website. The physical location of Connecting Point is wheelchair accessible and has assistive listening devices onsite.

Safety Planning

It is the primary goal of the CEP to transfer victims of domestic violence, sexual assault, dating violence, stalking, or human trafficking in need of safety planning to the appropriate victim service provider (VSP) in the region. The VSP will provide skilled safety planning and comprehensive services that support client safety. However, the CoC recognizes that safety planning is not limited to domestic violence, and safety planning should be available for all vulnerable persons. The victim service providers will offer safety planning training for all CoC member agencies and CE staff on an annual basis. Additional safety and security resources for victims of domestic violence, sexual assault, dating violence, stalking or domestic violence can be found in Appendix J.

Street Outreach

Outreach workers will be provided with Coordinated Entry business cards. As they encounter homeless individuals, the workers will hand out the business cards. If the individual chooses, the worker may assist him/her in calling the hotline number(s).

Assessment

The Homeless Resource Council of the Sierras (HRCS) utilizes a standardized vulnerability assessment tool for the Coordinated Entry Process, ensuring fair, equitable, and equal access to services within the community. A copy of the tool can be found in Appendices A and B. The Homeless Resource Council of the Sierras prohibits the CEP 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.

Below is the step-by-step process of the Coordinated Entry Process:

Step One: An individual or household seeking homeless services enter into the CEP via phone. Individuals or households residing in Nevada County can dial 2-1-1, and Placer County households can call 1-833-3PLACER.

Step Two: Connecting Point call agents will ask the caller for consent to share and store participant information for purposes of assessing and referring participants through the CEP. Individuals who refuse to have their data shared are still able to enter into CEP, but they should be informed that their referral options may be limited. Verbal consent can be given because Connecting Point records all calls. Sample Releases of Information (ROIs) can be found in Appendix C.

Step Three: Call agents will inform the caller of his/her ability to file a nondiscrimination complaint (see Appendix D).

Step Four: Call agents guide the individual through a flow chart to determine their immediate needs and if the individual may be diverted to other housing options (Appendix F). If an individual reports that they are fleeing or attempting to flee domestic violence, sexual assault, dating violence, stalking, or human trafficking, they will immediately be referred to a domestic violence service provider who is able to help the individual enter the CEP with de-identified information. If the individual rejects the referral, they must be informed that any personally-identifiable information provided may be shared with other agencies.

Step Five: Call agents conduct the Coordinated Entry Intake Form (Appendix A) and collect basic identifiable data to be entered into the Homeless Management Information System (HMIS). CEP participants are freely allowed to decide what information they provide during the assessment process and refuse to answer assessment questions without retribution. The CEP cannot require individuals to disclose specific disabilities or diagnoses, but they may be only be obtained for purposes of determining program eligibility to make appropriate referrals. The completed assessment tool must be attached in the client's file in HMIS.

Step Six: The individual's vulnerability assessment score is calculated and their name is placed on the BNL according to their prioritization score. The Vulnerability Assessment Scoring Tool can be found in Appendix B.

Victim Services

Victims of domestic violence entering the Coordinated Entry Process through victim service providers will follow a parallel process:

Step One: Accessing the Coordinated Entry Process

Households in need may initiate a request for services via the 2-1-1/Homeless Hotline phone system, by calling a victim service provider's hotline, or in person at the appropriate victim service provider(s). Households experiencing DV receive confidential assistance from victim services providers, but may opt to go through the general CEP. They should be made aware that they waive certain confidentiality rights prior to engaging in the general CEP if they choose that option.

Step Two: Coordinated Entry Assessment:

Advocates will complete a Coordinated Entry Assessment with the household requesting assistance. The assessment includes the collection of HMIS universal data elements as well as administering the standardized Vulnerability Assessment tool. Victims are encouraged but not required to disclose personal information in order to receive assessment under victim service provider mandates. Advocates will enter the data into the agency's HMIS comparable database daily.

Step Three: Prioritization

Information gathered from the assessment will be used to prioritize households with the largest needs and vulnerabilities as it is in the general CEP. This prioritization list is called the By Name List (BNL). The BNL will sort DV survivors based on their assessment score, with the highest score ranking first. Each victim service provider will maintain their own BNL. In addition, households wishing to be placed on the Continuum of Care BNL may still maintain their confidentiality by entering from a victim service provider. In these cases, the victim service providers will use a limited amount of de-identified HMIS data elements and the vulnerability assessment tool score to enter clients on the Continuum's BNL. Such entries will be listed with the initials of the victim services agency followed by their internal client number.

Step Four: Referral

Once a household experiencing DV has been placed on the BNL either with a victim service provider or via anonymized information on the CoC, all authorized partner agencies will have access to the list. These agencies will pull names from the list, beginning from the most vulnerable, when a bed

becomes available in their program. Housing referrals will include Rapid Rehousing, Transitional Housing, and Permanent Supportive Housing. Victim services providers will reference the general BNL when openings in their housing programs occur, but the only eligible households are those experiencing DV. They will pull the highest ranking households from their internal lists and eligible households on the CoC BNL. If the CoC BNL has an opening for an eligible DV household, the partner will contact the victim services provider to advise them CoC and ESG funded emergency shelters that are victim service providers will accept households experiencing DV according to the parallel process.

Assessor Training

The Homeless Resource Council of the Sierras will provide training opportunities annually to organizations and/or staff persons that administer assessments. Training will be provided by Connecting Point, Placer County, Nevada County, and/or the CoC Coordinator. Training will include:

1. Review of CoC's written CE policies and procedures, including any adopted variations for specific subpopulations;
2. Requirements for the use of assessment information to determine prioritization;
3. Criteria for uniform decision making and referrals; and
4. HMIS data quality and management training.

Additionally, victim service providers will provide annual training on safety planning for CoC and Coordinated Entry staff.

Privacy Protections

As the lead agency, Connecting Point will protect all data collected through the Coordinated Entry assessment process. Data collected on paper will be securely stored in locked cabinets. Client information will be stored in a HUD-compliant Homeless Management Information System. Clients must be informed of HMIS and consent to have information stored in the system. Sample ROIs can be found in Appendix C. Victim service providers will store information in compliance with Federal and State standards.

CEP participants must be informed that they are not required to disclose specific disabilities or diagnoses. This information may only be obtained for purposes of determining program eligibility to make appropriate referrals.

Prioritization

The Homeless Resource Council of the Sierras, CoC CA-515, uses the CEP to prioritize homeless persons within Placer and Nevada Counties. The CEP will prioritize chronically homeless and victims of domestic violence/sexual assault/stalking/human trafficking for housing services. The prioritization score that determines one's place on the BNL is calculated from the standardized vulnerability assessment tool used during the assessment process. If an individual refuses to answer assessment questions, his/her overall score will still be included on the BNL. The completed assessment tool is uploaded into HMIS as a pdf file. Program case managers are able to view the completed assessment tool and update based on observation. The policies and procedures of prioritization are consistent with CoC and ESG written standards under 24 CFR 578(a)(9) and 24 CFR 576.4.

Emergency Services

The Coordinated Entry Process does not prioritize individuals for access to emergency shelter. ESG- and CoC- projects must accept referrals from the CEP, but it is not based on the individual's prioritization score. Participants within the CEP will only be prioritized for access to permanent supportive housing (PSH) and rapid rehousing (RRH).

Nondiscrimination

The Coordinated Entry Process does 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 identity or marital status. The CEP may require individuals to disclose certain information in order to determine eligibility. This is different than prioritization because a number of projects serve specific populations (i.e. chronically homeless, mental illness, youth, etc.) and individuals must meet the project's eligibility criteria.

Nondiscrimination/Grievance Procedure

If an individual believes they have been discriminated against during the coordinated assessment process, they are able to file a non-discrimination complaint directly with Connecting Point (Appendix D). A Connecting Point representative will investigate the claim.

If a referring agency has rejected a client referral, the client must be able to appeal the decision with the referring agency. If the issue cannot be resolved, the participant may appeal the decision through the CoC's Outcomes and Measurements Committee. The appeal form may be found in Appendix E.

Data Protection

The BNL is managed using the CoC's Homeless Management Information System, Mediware. The information collected is protected using the same HMIS data privacy and security protections prescribed by HUD for HMIS practices in the HMIS Data and Technical Standards at (CoC Program interim rule) 24 CFR 578.7(a)(8).

Prevention Services

As Homeless Prevention funds are available, the Coordinated Entry Process will make appropriate referrals. Call agents will identify whether the caller is literally homeless. If the individual is at risk of becoming homeless, he or she will be referred based on the county where they are residing. Residents of Nevada County will be referred to agencies with homeless prevention funds, and Placer County residents will be referred to the "Getting Started Group" held and the Placer County Welcome Center located at 11512 B Avenue, Auburn, CA 95603. This group meets every Tuesday from 10:00-11:00AM.

Referrals

All CoC- and ESG-program recipients and subrecipients are required to use the CEP as the only referral source from which to consider filling vacancies in housing and/or services funded by CoC and ESG programs. Programs not funded through the CoC or ESG are not required to accept referrals, but are encouraged to do so. The Coordinated Entry Process and participating agencies are prohibited from

screening potential project participants out for assistance based on perceived barriers related to housing or services.

Process for Referrals to Emergency Shelter:

The CEP does not delay access to emergency services, such as shelter. However, if an individual enters the CEP and is needing emergency shelter, a referral is made. Questions from the Coordinated Entry Assessment determine which shelter the individual is eligible for. The individual is provided with all the information necessary in order to arrive at the shelter's intake time. Each emergency shelter has their own policies/procedures and intake times. If an individual is eligible for more than one shelter, the individual has the choice of which referral to accept.

Coordinated Entry staff will enter into HMIS which referrals were made. The lead agency will send each emergency shelter a list of names collected within the last 24 hours, informing them who is currently in the CEP. The emergency shelter is responsible for updating the referral status in HMIS.

If an individual presents at an emergency shelter without first going through CEP, they cannot be denied entry. The individual will be encouraged to call into CEP during the shelter's intake.

Process for Referral to Permanent Supportive Housing and Rapid Re-Housing:

As a homeless individual enters into CEP, his/her information and vulnerability score will be automatically populated into the By-Name List. All HMIS authorized Rapid Re-Housing (RRH), Permanent Supportive Housing (PSH), and Transitional Housing (TH) programs have access to the BNL. Agencies are able to filter the BNL according to program eligibility. If an agency has an open bed/unit, they are able to pull a maximum of five (5) eligible individuals from the top of the BNL and begin their internal intake process. All coordinated entry participants will remain on the BNL until they have been permanently housed. Coordinated Entry participants are able to reject referrals and remain on the BNL. Individuals entering into TH programs will remain on the BNL, but his/her "chronically homeless" status will be removed. RRH case managers will determine if the individual's housing placement has been successful.

Nondiscrimination

The coordinated entry referral process is informed by Federal, State, and local Fair Housing laws and regulations. It is prohibited that participants be "steered" toward any particular housing facility or neighborhood because of race, color, national origin, religion, sex, disability, or the presence of children. The CoC and all agencies participating in the Coordinated Entry Process must comply with the equal access and nondiscrimination provisions of Federal civil rights laws, including the following:

- Fair Housing Act, which prohibits discriminatory housing practices.
- Section 504 of the Rehabilitation Act, which prohibits discrimination based on disability under any program or activity receiving Federal financial assistance.
- Title VI of the Civil Rights Act, which prohibits discrimination based on race, color or national origin under any program or activity receiving Federal financial assistance.
- Title II of the Americans with Disabilities Act, which prohibits public entities, which includes State and local governments and special purpose districts from discriminating against individuals with disabilities in all their services program and activities, which include housing and housing related services such as housing search and referral assistance.

- Title III of the American with Disabilities Act, which prohibits private entities that own, lease and operate places of public accommodations providing housing, from discriminating based on disability.

Please see Appendix G for links to all above stated nondiscrimination policies.

Data Management

Data collected through the CEP is securely stored in HMIS. All participant information is securely protected per the HMIS Data and Technical Standards at (CoC Program interim rule) 24 CFR 578.7(a)(8).

Privacy Protections

Upon entering the CEP, prior to the vulnerability assessment, the participant must provide consent to share and store participant information in HMIS for purposes of assessing and referring participants through the CEP. Individuals who refuse to have their data be shared are still able to enter into the CEP, but they should be informed that their referral options may be limited. Verbal consent can be given because Connecting Point records all calls. Sample Releases of Information (ROIs) can be found in Appendix C. The 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.

Agencies participating in the CEP must be authorized users within HMIS. All users must be informed and understand the privacy rules associated with collection, management, and reporting of client data. HMIS trainings are offered on an annual basis, or as needed. The HMIS manual can be found at <https://www.hudexchange.info/resources/documents/HMIS-Data-Standards-Manual-2017.pdf>.

Evaluation

The Outcomes and Measurements Committee will evaluate the CEP on a quarterly basis, reviewing prioritization scores, the number of referrals made versus the number of referrals rejects, and HMIS data quality.

A full system evaluation will be conducted on an annual basis, reviewing the data stated above as well as client follow-up surveys. The surveys will be administered all CE callers to provide an ongoing system improvement. The survey will be anonymous to protect participant information. A sample survey can be found in Appendix H.

Using the data provided, the Coordinated Entry Policies and Procedures will be reviewed and updated at least annually or as needed.

APPENDIX A

Coordinated Entry Intake Form		
Enter Date (mm/dd/yyyy)		
Enter Time (hh:mm 24hr format)		
Select CSR		
LOCATION	Answer	Referral and/or Next
County of Residence	Select from List	
SAFETY ASSESSMENT	Answer	Referral and/or Next
Are you younger than 18 years old and without an adult?	Select From List	
Do you have a safe place to stay for tonight?	Select From List	
Are you currently safe talking to me?	Select From List	
Are you afraid of your partner or ex-partner? OR Do you feel controlled or isolated right now?	Select From List	
PERSONAL INFORMATION	Answer	Referral and/or Next
What is your First name ?		
What is your Middle name?		
What is your Last name?		
What is your Date of Birth? (MM/DD/YYYY)		
Is Date of Birth complete?	Select from List	
STOP: Click to check HMIS to see if caller is already enrolled		
What is the best phone number to reach you?		
What is the best phone number to reach you in the future? (Is this the same number you already gave me?)		
What is your current location (be specific)?		
In case we are not able to reach you, can you give me the name and phone number of someone who can?		
What is your social security number?		
Is the social security number complete?	Select from List	
What is your Email Address (if applicable)?		
Placer only, are you a resident of Roseville?	Select From List	
Would you like a referral to a shelter tonight?	Select From List	
STOP: Click to read HMIS Consent for Release of Information		
Consent given?	Select From List	
NEVADA EMERGENCY SHELTER	Answer	Referral and/or Next
How long have you lived in Nevada County? (30 day requirement)	Select from List	
Length of time in the County?	Select from List	
Have you been told by Hospitality House that you can't stay there?	Select From List	
Guests may not be under the influence of a substance. Does this present an issue for you?	Select From List	
Do you have pets with you?	Select From List	
Are you a registered sex offender?	Select From List	
Do you have a source of income?	Select From List	
In order for you to stay at Hospitality House you cannot have: a current arrest warrant, or a violent crime conviction. Will any of these be an issue for you?	Select From List	
Based on the information you've provided, I can make the following referrals:		
If you would like to continue by answering a few more questions, we can put you on a list to receive a more permanent housing solution. Having your name on the list does not guarantee housing, but you cannot receive permanent and transitional HUD services without having your name on the list. Would you like to continue? If YES, continue to VI Consent. If NO, STOP- Intake completed.		
STOP: Click to read Vulnerability Index Consent		
Consent given?	Select From List	
PLACER EMERGENCY SHELTER	Answer	Referral and/or Next
Have you been a resident of Placer County for 15 days or more?	Select From List	
Length of time in the County?	Select from List	
Do you live in Roseville?	Select From List	
Do you have a source of income?	Select From List	
Guests may not be under the influence of a substance. Does this present an issue for you?	Select From List	
Are you a registered sex offender?	Select From List	
Are you under 18 years of age and unaccompanied?	Select From List	
Accompanied by other/family?	Select From List	
Do you or anyone with you have Tuberculosis?	Select From List	
Do you have pets with you?		
If, YES, pets must be temporarily housed or we cannot provide resources. Otherwise, warm/cold shelter as applicable.	Select From List	
Based on the information you've provided, I can make the following referrals:		
We can put you on a list to receive a more permanent housing solution if you would like to continue by answering a few more questions. By having your name on the list does not guarantee housing but you cannot receive permanent and transitional HUD services without having your name on the list. Would you like to continue? If Yes, continue to VI CONSENT. If No, STOP.		
STOP: Click to read Vulnerability Index Consent		
Consent given?	Select From List	
SERVICE ELIGIBILITY (Vulnerability Index)	Answer	Referral and/or Next
Are you an unaccompanied youth under 18 years of age?	Select From List	
May I ask how many people are in your household?		
How many of these are children under age 18?		
[If children under	Select From List	
How many adults are in your household?	0	
May I ask your current gender identity? [how you describe yourself]	Select from list	
Is anyone in your household transgender?	Select From List	
Are you or is anyone in your household pregnant?	Select From List	
May I ask, have you or a member of your household served in the US military, national guard, or reserve?	Select From List	
[If yes] Was it you or a household member who served?	Select from List	

May I ask, where did you sleep most frequently in the last 30 days?	Select From List	
How long have you been in unstable housing?	Select From List	
May I ask, have you been hospitalized or visited an emergency room 3 or more times in last 6 months? OR Has a household member been hospitalized or visited an emergency room 3 or more times in the last 6 months?	Select From List	
Have you or a household member had an interaction with police 6 or more times in last 6 months?	Select From List	
Now I have several questions related to your health. I'm going to ask if you have any of the following health conditions and you can just say Yes or No as I read them to you. Okay?		
Mental Health Disability	Select From List	
If YES, are you an Full Service Partnership	Select From List	
Physical or Sensory Disability	Select From List	
Do you receive income for a disability (mental, physical, sensory)?	Select From List	
Developmental Disability	Select From List	
Substance abuse?	Select From List	
Alcohol abuse?	Select From List	
HIV/AIDS	Select From List	
Finally, any Chronic Health Conditions (i.e. Diabetes or complications with heart, liver, kidney, stomach, or brain)?	Select From List	
Do any of your household members have one or more of the health conditions I mentioned?	Select From List	
May I ask, have you or a member of your household been attacked, hurt, or threatened since becoming homeless?	Select From List	
Have you or a household member contemplated, threatened, or attempted suicide?	Select From List	
Have you or a member of your household experienced domestic violence, sexual assault, or human trafficking?	Select From List	
Are you currently fleeing or attempting to flee a domestic violence, sexual assault, human trafficking or stalking situation?	Select From List	
Are you a registered sex offender?		
Do you have a source of income?		
What is your household income?		
Is this your monthly or annual income?	Select From List	

Thank you for answering these questions. We can now put you on a list to receive a more permanent housing solution. Remember, by having your name on the list does not guarantee housing but you cannot receive permanent and transitional HUD services without having your name on the list.

APPENDIX B

Nevada-Placer County Vulnerability Assessment Tool

Date:		Staff Name & Agency:		DOB:	
Client Name:				Last 4 of SS#:	

Indicator	Points Available	Points Assigned
Individual is less than 25 years of age - OR - over 59 years of age	1	
Individual is unaccompanied youth under 18 years of age	2	
Self is Female - or - Self or HH Member is Transgender or Gender Non-Conforming	1	
Self or HH Member is Pregnant	1	
Household has children under 18	2	
Slept most frequently in last 30 days = literally homeless - OR - institutional setting Emergency Shelter Foster care or group home Hospital or other medical facility Jail, prison or juvenile detention facility Long term care facility or nursing home Place not meant for human habitation Substance abuse treatment facility/detox Transitional housing for homeless persons	1	
Current length of time in unstable housing:	3	
1 - 3 years = 1 point		
3 - 5 years = 2 points		
5 + years = 3 points		
Self or HH Member has been hospitalized or visited an emergency room 3 or more times in last 6 months	2	
Self or HH Member had an interaction with police 6 or more times in last 6 months	1	
Self has health conditions related to:		
Mental Health	1	
Substance and/or Alcohol Abuse	1	
Physical / Sensory Disability	1	
Developmental Disability	1	
HIV/Aids	1	
Chronic Health Conditions (ie. diabetes or complications with heart, liver, kidney, stomach, or brain)	1	
If yes to 3 or more of above categories, add 1 pont	1	
HH Member has one or more of the above listed health conditions	1	
Self or HH Member has been attacked, hurt, or threatened since becoming homeless	1	
Self or HH Member has threatened to or tried to end their own life	1	
Self or HH Member has experienced domestic violence, sexual assault, or human trafficking	1	
Self or HH Member is currently fleeing, or attempting to flee, a DV/SA/HT/Stalking situation	1	
Household Income is at - OR - below federal guidelines for household size* <i>*(2017 Federal Poverty Guidelines)</i>	1	

# in HH	Monthly	Annual
1	\$1,005	\$12,060
2	\$1,353	\$16,240
3	\$1,702	\$20,420
4	\$2,050	\$24,600
5	\$2,398	\$28,780
6	\$2,747	\$32,960
7	\$3,095	\$37,140
8	\$3,443	\$41,320

Nevada-Placer County Vulnerability Assessment Tool

Date:		Staff Name & Agency:		DOB:	
Client Name:				Last 4 of SS#:	

Indicator	Points Available	Points Assigned
Subtotal (continue on next page)	27	0

Nevada-Placer County Vulnerability Assessment Tool

Date:		Staff Name & Agency:		DOB:	
Client Name:				Last 4 of SS#:	

Indicator	Points Available	Points Assigned
<i>Case Management Entry</i>	1	
<i>Case Management Entry</i>	1	
<i>Case Management Entry</i>	1	
Vulnerability Score (Total Points)	30 Max	0 Total

APPENDIX C



HMIS Consent for Release of Information

Before I give you a referral, I will need you to agree to a release of information. I will read you the release and you can tell me "Yes" or "No." May I begin?

I will be asking you information about you and your household and entering it into a secure electronic database called the Homeless Management Information System, or HMIS. This information will be used to try to identify resources that may be of assistance to you. It will also help us track your outcome or progress. This information **does not** guarantee a housing solution; it only documents your current situation.

This information will only be shared with participating agencies in HMIS, who abide by the same privacy rules as our agency. A copy of this consent is available upon request.

This information may not be disclosed to any other outside party unless:

1. You provide written consent; or
2. We are mandated to disclose it by court order; or
3. Because of a medical emergency

If you want to keep your anonymity for safety reasons, I can refer you to one of our Domestic Violence partners who will ask the same questions, but not share your answers with the HMIS partners. Would you like me to refer you to a Domestic Violence partner now? [If NO, continue].

May I have your full name?

I am asking for your consent to enter the information you provide, including Protected Personal Information (which may include, but is not limited to, your Social Security number, your date of birth, and demographic information) into the Homeless Management Information System. Your consent authorizes us to share this information and information about your household with our partner agencies through HMIS.

Do I have your consent?

Do you have any questions about this HMIS consent?

APPENDIX D

Title VI Complaint Procedure (English)

Any person who believes she or he has been discriminated against on the basis of race, color, or national origin by the Nevada-Sierra Connecting Point Public Authority (hereinafter referred to as Connecting Point) may file a Title VI complaint by completing and submitting the agency's Title VI Complaint Form. Connecting Point investigates complaints received no more than 180 days after the alleged incident. Connecting Point will process complaints that are complete.

Once the complaint is received, Connecting Point will review it to determine if our office has jurisdiction. The complainant will receive an acknowledgement letter informing her/him whether the complaint will be investigated by our office.

Connecting Point has 30 days to investigate the complaint. If more information is needed to resolve the case, Connecting Point may contact the complainant. The complainant has 15 business days from the date of the letter to send requested information to the investigator assigned to the case. If the investigator is not contacted by the complainant or does not receive the additional information within 15 business days, Connecting Point can administratively close the case. A case can be administratively closed also if the complainant no longer wishes to pursue their case.

After the investigator reviews the complaint, she/he will issue one of two letters to the complainant: a closure letter or a letter of finding (LOF). A closure letter summarizes the allegations and states that there was not a Title VI violation and that the case will be closed. An LOF summarizes the allegations and the interviews regarding the alleged incident, and explains whether any disciplinary action, additional training of the staff member, or other action will occur. If the complainant wishes to appeal the decision, she/he has 30 days after the date of the letter or the LOF to do so. If the complainant is unable to write a complaint, Connecting Point staff will assist the complainant. If requested by complainant, Connecting Point will provide a language or sign language interpreter.

A person may also file a complaint directly with the Federal Transit Administration, at FTA Office of Civil Rights, 1200 New Jersey Avenue SE, Washington, DC 20590.

Title VI Complaint Procedure (Spanish)

Cualquier persona que crea que ha sido discriminada por motivos de raza, color o nacionalidad por los Nevada-Sierra Connecting Point Public Authority (denominada en lo sucesivo “Connecting Point”) puede presentar una queja conforme al Título VI con sólo llenar y enviar la presente forma de denuncias sobre el Título VI de la agencia. Connecting Point investiga denuncias recibidas dentro de un plazo de 180 días después del presunto incidente. Connecting Point procesará las denuncias que se encuentren completas.

Una vez recibida una queja será revisada por Connecting Point para determinar si nuestra oficina tiene jurisdicción en el caso. La parte demandante recibirá una carta de confirmación informándole si nuestra oficina investigará la denuncia.

Connecting Point cuenta con un término de 30 días para investigar la denuncia. Si se necesita de mayor información para resolver dicho caso, Connecting Point puede comunicarse con la parte demandante. La parte demandante tiene 15 días hábiles a partir de la fecha de la carta para enviar la información solicitada por el investigador asignado al caso. Si la parte demandante no se comunica con el investigador o éste no recibe la información requerida dentro un plazo de 15 días hábiles, Connecting Point puede cerrar administrativamente el caso. Un caso también puede cerrarse administrativamente si la parte demandante ya no desea continuar con su caso.

Después de que el investigador o investigadora revisa la queja enviará una de las siguientes cartas a la parte demandante: Ya sea una carta de cierre o una carta de conclusión (LOF por sus siglas en inglés). Una carta de cierre del caso resume las acusaciones y afirma que no hubo una violación del Título VI y que el caso se considerará cerrado. Una carta de conclusión (LOF) resume las denuncias y las entrevistas en relación con el incidente y explica cualquier acción disciplinaria, la capacitación complementaria a la que debe someterse el miembro del personal o cualquier otra acción que se lleve a cabo. Si la parte demandante desea apelar la decisión, tiene 30 días para hacerlo a partir de la fecha en la carta de cierre o carta de conclusión (LOF). Si la parte demandante es incapaz de hacer por escrito una queja, el personal de Connecting Point ayudará a la parte demandante a hacerlo. Si la parte demandante lo solicita, Connecting Point proporcionará un intérprete en el idioma que lo requiera o un intérprete de lenguaje de señas.

Una persona también puede presentar una queja directamente ante la Administración Federal de Tránsito “Federal Transit Administration”, en la Oficina “FTA” de Derechos Civiles, localizada en el 1200 New Jersey Avenue SE, Washington, DC 20590.

Title VI Complaint Form (English)

Section 601 under Title VI of the Civil Rights Act of 1964 states that "No person in the United States shall, on the ground of race, color, or national origin, be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any program or activity receiving Federal financial assistance." **If you feel you have been discriminated against, please provide the following information in order to assist in processing your complaint.**

SECTION I

Name:			
Address:			
Phone Number(s):	Home:	Work:	Cell:
Email Address:			
Accessible format requirements? (Please list):			

SECTION II

Are you filing this complaint on your behalf?	<input type="checkbox"/> Yes*	<input type="checkbox"/> No
*If you answered yes to this question, please go to Section III.		
If not, please supply the name and the relationship of the person for whom you are complaining: Name: Relationship:		
Please explain why you have filed for a third party:		
Please confirm that you have obtained the permission of the aggrieved party if you are filing on behalf of the third party:	<input type="checkbox"/> Yes	<input type="checkbox"/> No

SECTION III

I believe the discrimination I experienced was based on (check all that apply):	
<input type="checkbox"/> Race	<input type="checkbox"/> Color <input type="checkbox"/> National Origin
Date of Alleged Discrimination (month, day, year):	
Name(s) and title(s) of the person(s) you believe discriminated against you (if known):	
Please explain why you have filed for a third party:	
<p>Explain as clearly as possible what happened and why you believe you were discriminated against. Describe all persons who were involved. Include the names and contact information of any witnesses. If more space is needed, please attach pages to this form:</p>	

SECTION IV

Have you previously filed a Title VI complaint with this agency?	<input type="checkbox"/> Yes <input type="checkbox"/> No
--	--

SECTION V

Have you filed this complaint with any other Federal, State, or local agency, or with any Federal or State court?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, please check all that apply:	
<input type="checkbox"/> Federal Agency <input type="checkbox"/> Federal Court <input type="checkbox"/> State Court <input type="checkbox"/> State Agency <input type="checkbox"/> Local Agency	
Please provide information about a contact person at the agency/court where the complaint was filed:	
Name:	
Title:	
Agency:	
Address:	
Telephone Number:	

You may attach any written materials or other information that you think is relevant to your complaint.

I believe the above information is true and correct to the best of my knowledge. Signature and date required below:

 Signature

Printed Name

 Date

Please submit this form in person or by mail to:

Nevada-Sierra Connecting Point Public Authority
 Attention: Charisse Jones
 208 Sutton Way
 Grass Valley, CA 95945

Title VI Complaint Form (Spanish)

La Sección 601 del Título VI de la Ley de Derechos Civiles de 1964 establece que “ninguna persona en los Estados Unidos puede ser excluida para ser partícipe ya sea por razones de raza, color u origen nacional, no se le puede negar los beneficios o ser sujetos a discriminación en cualquier programa o actividad que reciba fondos del Gobierno Federal”. **Si usted siente que ha sido discriminado o discriminada, por favor proporcione la siguiente información para ayudarlo en la tramitación de su queja.**

SECCIÓN I

Nombre:			
Dirección:			
Números telefónicos:	Casa:	Trabajo:	Celular:
Dirección electrónica:			
¿Necesita formatos accesibles? (Favor de hacer una lista):			

SECCIÓN II

¿Está usted presentando esta queja a su nombre?	<input type="checkbox"/> Sí* <input type="checkbox"/> No
*Sí su respuesta a la pregunta es afirmativa, siga a la Sección III.	
Si no es así, favor de escribir el nombre y el parentesco de la persona para la cual usted está presentando la queja: Nombre: Parentesco:	
Favor de explicar el por qué usted presenta la queja a nombre de una tercera persona:	
Favor de confirmar que usted ha obtenido permiso de la persona agraviada si usted se encuentra presentando la queja a nombre de una tercera persona:	<input type="checkbox"/> Sí <input type="checkbox"/> No

SECCIÓN III

Creo que la discriminación que sufrí se debe a cuestiones de (marque todos los que apliquen): <input type="checkbox"/> Raza <input type="checkbox"/> Color <input type="checkbox"/> Procedencia nacional
Fecha de la supuesta discriminación (día, mes, año):
Nombre(s) y puesto(s) de la persona(s) que usted cree que le ha(n) discriminado (si lo sabe):
Favor de explicar el por qué usted ha entregado una queja a nombre de una tercera persona:
Explique tan claramente como pueda lo sucedido y el por qué usted cree que se le ha discriminado. Detalle a todas las personas que han sido parte del incidente. Incluya los nombres y la información para que podamos comunicarnos con un testigo o los testigos. Si usted necesita más espacio, favor de adjuntar más hojas a la presente forma:

SECCIÓN IV

¿Alguna vez ha presentado usted una queja sobre el Título VI en esta agencia?	<input type="checkbox"/> Sí <input type="checkbox"/> No
---	---

SECCIÓN V

¿Alguna vez ha presentado usted una queja ante cualquier otra agencia federal, estatal o local o con cualquier corte federal o estatal?	<input type="checkbox"/> Sí	<input type="checkbox"/> No
Sí es así, favor de marcar las que apliquen:		
<input type="checkbox"/> Agencia federal	<input type="checkbox"/> Corte federal	<input type="checkbox"/> Corte estatal
<input type="checkbox"/> Agencia estatal	<input type="checkbox"/> Agencia local	
Favor de proveer información acerca del empleado en la agencia /tribunal donde se presentó la queja:		
Nombre:		
Título:		
Agencia:		
Dirección:		
Número telefónico:		

Usted puede adjuntar cualquier material escrito o cualquier otra información que usted crea que es importante o pertinente a su queja.

Creo que la información proveída es verdadera y correcta según mi saber y mi entender. Firme y escriba la fecha a continuación:

Firma

Nombre impreso

Fecha

Favor de entregar la presente forma en persona o enviarla por correo a:

Nevada-Sierra Connecting Point Public Authority
 Atención: Charisse Jones
 208 Sutton Way
 Grass Valley, CA 95945



APPENDIX E

GRIEVANCE POLICY & PROCEDURE

Any person who believes he or she has been wrongly denied from a program, they may submit a grievance form to the Homeless Resource Council of the Sierras. The individual must first attempt to resolve the issue with the Receiving Program. HRCS investigates complaints received no more than 180 days after the alleged denial. HRCS will only process grievance forms that are complete (2 pages).

Once the grievance is received, a representative from the HRCS Outcomes and Measurements Committee will respond within fifteen (15) business days. The Outcomes and Measurements Committee will review the grievance at the following committee meeting, and the matter shall be settled by Board Vote.

If the matter is still not resolved to your satisfaction, you may request an appeal of the decision to another agency or board that provides funding for the program involved in the grievance (address and contact person will be made available by request).

The Homeless Resource Council of the Sierra's *Grievance Procedure*, does not in any way, abridge the right of the complainant to bring the matter before the appropriate local, state, or federal agencies.

Please submit the completed form by mail to:

Homeless Resource Council of the Sierras
Attn: Outcomes and Measurements Committee
P.O. Box 5216
Auburn, CA 95604



COORDINATED ENTRY GRIEVANCE FORM

Section I

Name:
Phone Number(s):
Email Address:

Section II

Agency who denied you into the program:
Date of the denial (mm/dd/yy):
Name(s) and title(s) of the person(s) who communicated the denial to you:
Explain as clearly as possible what happened and why you believe you were wrongly denied. If more space is needed, please attach pages to this form:

Section III

Have you previously filed a grievance about this agency?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Dates (mm/dd/yy):		

You may attach any written materials or other information that you think is relevant to your grievance.

I believe the above information is true and correct to the best of my knowledge. Signature and date required below:

Signature

Printed Name

Date

Please submit this form by mail to:
Homeless Resource Council of the Sierras
P.O. Box 5216
Auburn, CA 95604

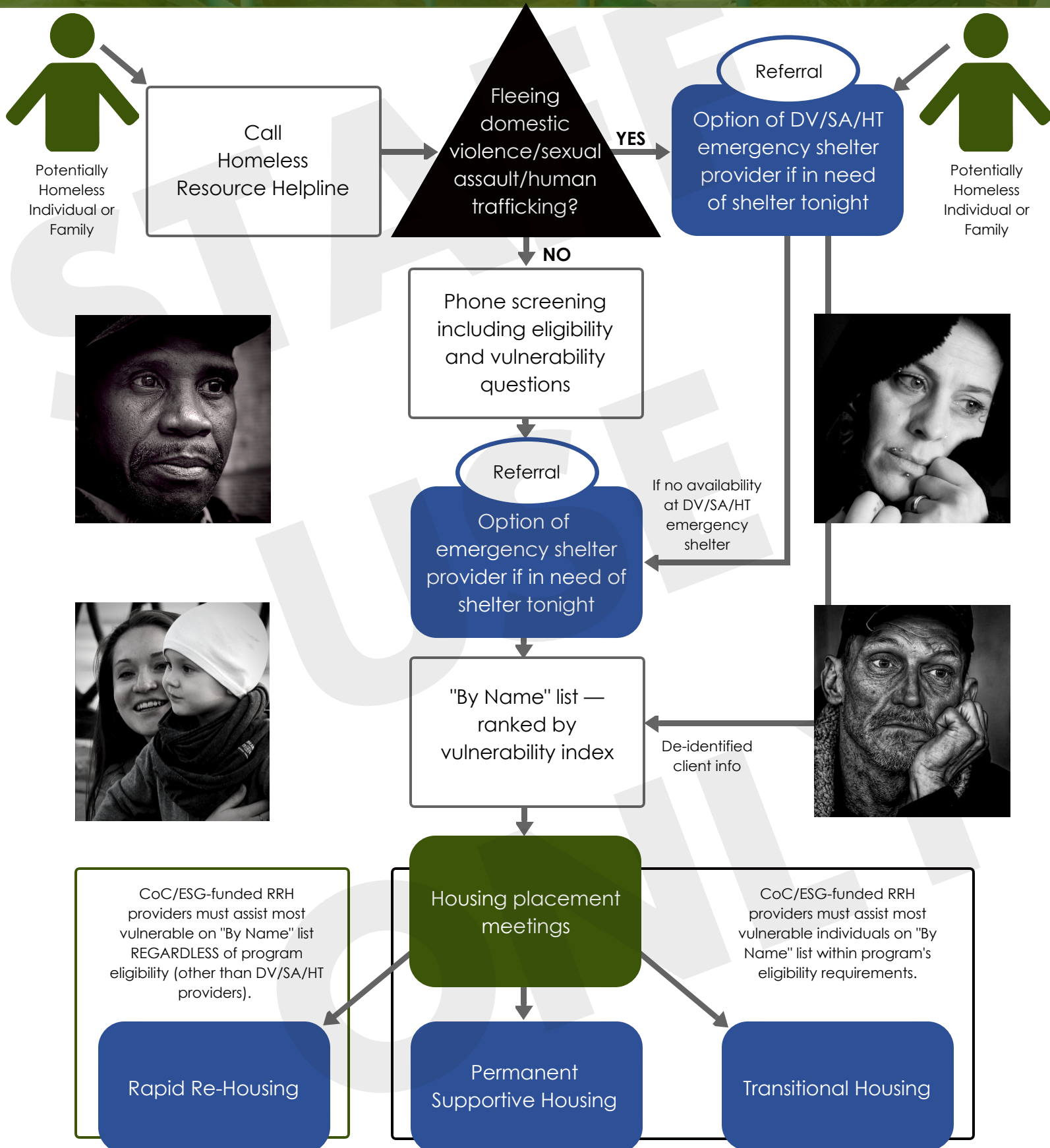


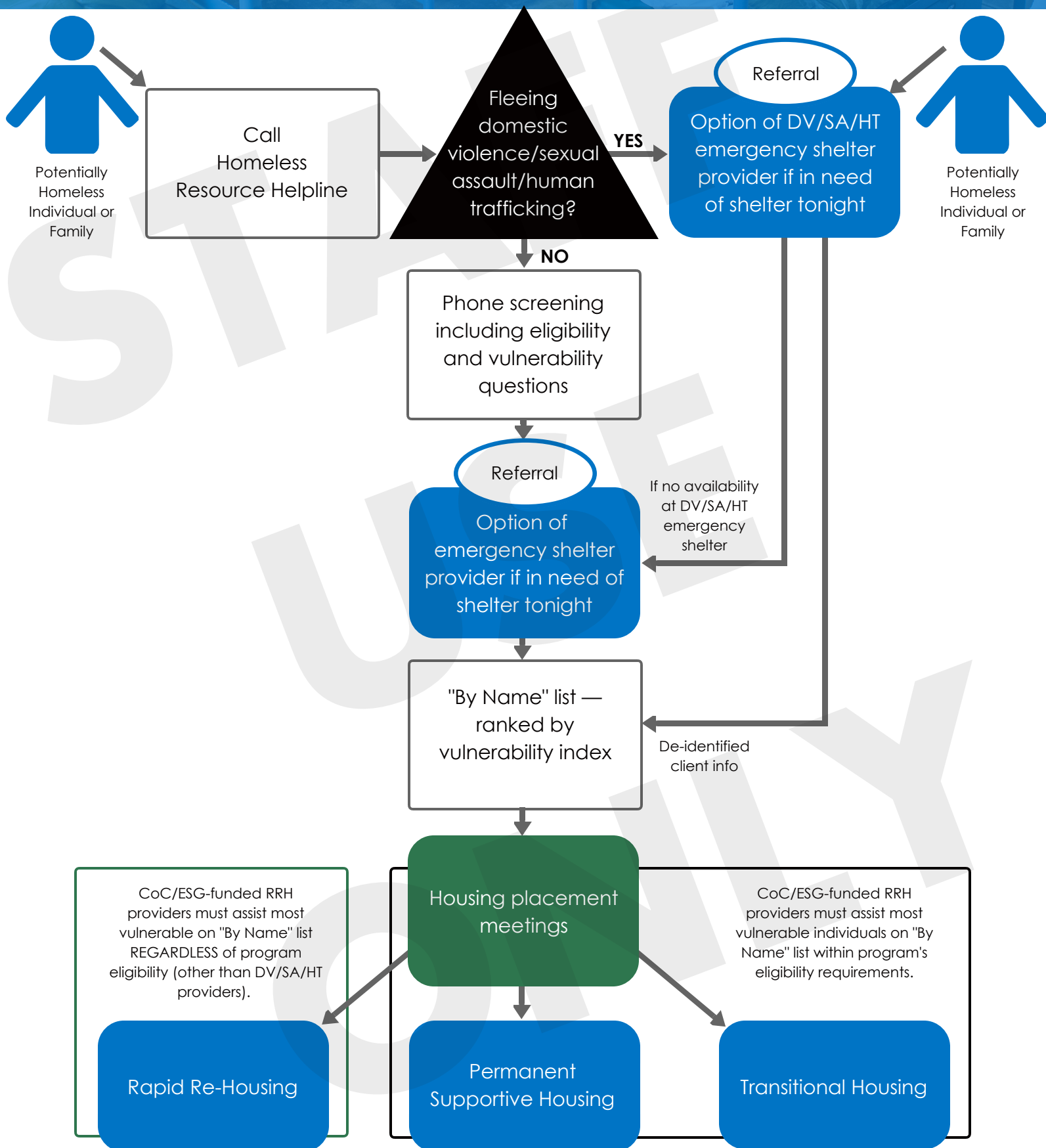
Nevada County's Homeless Resource Helpline

CALL 2-1-1

or 877-847-0499 from outside Nevada County

Providing a coordinated entry system for Nevada County's homeless





Nondiscrimination Laws

HUD Equal Access Rule: 24 CFR 5.105(a)(2) and 5.106(b)

<https://www.hudexchange.info/resource/1991/equal-access-to-housing-final-rule/>

Fair Housing Act

https://portal.hud.gov/hudportal/HUD?src=/program_offices/fair_housing_equal_opp/FHLaws/yourrights

Section 504 of the Rehabilitation Act

<https://www.section508.gov/sites/default/files/Section504.pdf>

Title VI of the Civil Rights Act

<https://www.justice.gov/crt/fcs/TitleVI-Overview>

Title II of the Americans with Disabilities Act

<https://www.ada.gov/t2hlt95.htm>

Title III of the Americans with Disabilities Act

<https://www.ada.gov/t3hilght.htm>

APPENDIX H

Nevada County Follow-up

Printed 1/16/2018 at 11:36 AM by CA 2-1-1 Nevada County
Page 1

Details

Call Report Num: 49674163 (530) 888-8888
Phone Worker: Tim Giuliani
Caller: (unknown) Auburn, Nevada County, CA
Call Date: Tuesday, January 16, 2018
Call Time: 11:29 AM to 12:00 AM (-35,306,609 minutes)

Call Information

Call From - Relation - Self Call Type - Referral Language of Call - English

Demographics

Email Address - email @ email.com Gender - Female Age - 26-29
Ethnicity - African American/Black Source of Income - Job Language Assisted - English
Type of Household - Couple

Call Text

Call Notes

The caller was satisfied with level of service and the overall call. In addition to Coordinated Entry the caller received a referral to the Booth Family Center.

Follow-up Activities

Time spent on case so far: 0 minutes

Subject

Draft

Assigned to: (unknown)

Time spent: 0 minutes.

Attempt to contact: (select one). Number of contact attempts so far: none yet.

Subject

Draft

Assigned to: (unknown)

Time spent: 0 minutes.

Contact info: 530-888-8888

Attempt to contact: (select one). Number of contact attempts so far: none yet.

Subject

Draft

Assigned to: Tim

Time spent: 0 minutes.

Contact info: 530-888-8888

Attempt to contact: (select one). Number of contact attempts so far: none yet.

Are you homeless?

Need a roof over your head?

CALL 2-1-1

(or 877-847-0499 from outside Nevada County)

This helpline is a streamlined gateway, available in English and Spanish.



Callers will be asked questions to determine their eligibility for various housing programs, and their needs will be shared with participating Nevada County homeless service providers offering:

- **Emergency Shelter**
- **Rapid Re-Housing**
- **Permanent Supportive Housing**



A COLLABORATION OF

HOMELESS RESOURCE
COUNCIL OF THE SIERRAS





HomelessResource **HELPLINE**

Are you homeless? Need a roof over your head?

1-833-3PLACER

(1-833-375-2237)

The Homeless Resource Helpline is a streamlined gateway, available in English and Spanish.



Callers will be asked questions to determine their eligibility for various housing programs, and their needs will be shared with participating Placer County homeless service providers offering:

- ***Emergency Shelter***
- ***Rapid Re-Housing***
- ***Permanent Supportive Housing***

A COLLABORATION OF



APPENDIX J

National Resources for Victim Services

National Domestic Violence Hotline

1-800-799-7233

For the Hearing Impaired: 1-800-787-3224 (TTY)

Rape, Abuse, & Incest National Network's National Sexual Assault Hotline

800-656-HOPE

<https://ohl.rainn.org/online/>

National Center for Victims of Crime's Stalking Resource Center

<https://www.victimsofcrime.org/our-programs/stalking-resource-center>

National Human Trafficking Hotline

1-888-373-7888