Coordinated Assessment System

Changes to the process of prioritizing clients for CoC housing resources

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tchc
Tarrant County Homeless Coalition

Learning Objectives

- How to use the Housing Assessment Form
- How to request a Documentation of Priority Status
- How to interpret the Prioritization classification
- How to access the Priority Client Waiting Lists

* This training will be sent out to agencies and archived on the TCHC website.

*VI-SPDAT/HAF training will become part of basic HMIS new user training

Prioritization Objectives

- Use common tools to assess homeless status and level of service needs
- Using the most expensive supportive housing resources for those with the highest level of service needs
- Provide the less expensive supportive housing to those with lower levels of service needs and
- Assist housing agencies with quickly identifying and referring clients matching housing needs with housing available
- Create and maintain accurate, dynamic housing priority/waitlists

The “HAF”

Housing Assessment Form – is a uniform assessment tool developed by TCHC and the Planning Council as a comprehensive questionnaire based assessment of needs and barriers of a client to establish a baseline of the types and severity of services needed by the client.

A completed HAF will produce 1) a menu of possible services to assist the client and 2) a VI-SPDAT severity of service needs score (0-18)

VI-SPDAT/Housing Assessment Form a.k.a. “The HAF”

Housing Assessment Form – is a uniform assessment tool developed by TCHC and the Planning Council as a comprehensive questionnaire based assessment of needs and barriers of a client to establish a baseline of the types and severity of services needed by the client. The tool should be used by case management staff as an initial interview with the client.

A completed HAF will produce 1) a menu of possible services to assist the client and 2) a VI-SPDAT severity of service needs score (0-18)

VI-SPDAT Survey Concept

- The VI-SPDAT is designed to help identify the best type of support and housing intervention for an individual by relying on three categories of recommendation:
- Permanent Supportive Housing: Individuals or families who need permanent housing with ongoing access to services and case management to remain stably housed.
- Rapid Re-Housing: Individuals or families with moderate health, mental health and/or behavioral health issues, but who are likely to be able to achieve housing stability over a short time period through a medium or short-term rent subsidy and access to support services.
- Affordable Housing: Individuals or families who do not require intensive supports but may still benefit from access to affordable housing. In these cases, the tool recommends affordable or subsidized housing but no specific intervention drawn uniquely from the homeless services world. (In most cases, this amounts to saying simply, "no case management.")
- The VI-SPDAT 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.

SOURCE: http://www.orgcode.com/product/vi-spdat/
http://www.orgcode.com/wordpress/wp-content/uploads/2014/08/VI-SPDAT-Manual-2014-v1.pdf

The “HAF”

PDF of the complete VI-SPDAT HAF is at:

http://www.ahomewithhope.org/tchc-services/coordinated-assessment-system-cas/

Step 1:
Client Record is entered into HMIS

Emergency Shelter or Street Outreach are the most common entry points

- PSH, TH and RRH Housed clients do not need a HAF unless they have had a negative exit from a housing program and have returned to a homeless status.
- Some transitional housing clients (project based such as GPD, SIMON may need a HAF to determine further housing opportunities)
- ALWAYS look to see if the client is already in the HMIS before creating a new client to avoid duplications. If client exists, see if there is a HAF touchpoint already created. If the have is greater than 90 days, a new HAF may be created.
- IF NEW CLIENT: a HUD ASSESSMENT TOUCHPOINT should be completed as an ENTRY assessment into your program. This will create the essential demographic components of the HAF to be prepopulated.

Step 2:
Conduct the VI-SPDAT/HAF Survey

VI-SPDAT / Housing Assessment Form TouchPoint

VI SPDAT/HAF Workflow tabs

1. VI-SPDAT: to develop a severity of service need score of 0-10. 5+ is high, 0-4 is low
2. Housing Assessment Form (HAF)
3. Unaccompanied Youth (only if applicable)
4. Report

Before recording a VI-SPDAT/HAF Form, please make sure there is a recorded HUD Assessment (Entry/Update/Annual/Exit) with completed client demographics, since these populate some data elements in the VI-SPDAT/HAF Form.

VI-SPDAT/HAF Touchpoint in ETO

VI-SPDAT / Housing Assessment Form for adult 31 fake on 12/12/2014

Identifier: Client Intake Program fak

This is being completed by: "Alexandra Espinosa" on behalf of -- Select --

VI-SPDAT | Housing Assessment Form | UNACCOMPANIED YOUTH | Report

If 60 years or older, then the score will be 1

1. Age 93 years

Prescreen Score 1

A. History of Housing & Homelessness

If the person has experienced two or more cumulative year of Homelessness, and/or 4+ episodes of homelessness, then the score will be 1

1. What is the total length of time you have lived on the streets or in the shelters? -- Select --

2. In the past three years, how many times have you been housed and then homeless again?

PRE-SCREEN HOUSING AND HOMELESSNESS SUBTOTAL 0

VI-SPDAT/HAF Survey Topics

A. Age: This will populate from the demographics
B. History of Housing & Homelessness.
C. Socialization & Daily Functions
D. Wellness
   - Medical Condition
   - Substance Abuse
   - Mental Health
E. **PRE-SCREEN TOTAL: This score goes from 0-18. A score of 10 or greater indicates the client has a high severity of service needs. 5-9 is a lower severity of service needs. 0-4 score indicates that other non CoC housing subsidy resources should be sought such as homeless prevention, case management, affordable housing search assistance**

VI-SPDAT / Housing Assessment Form for adult 31 fake on 12/12/2014

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VI-SPDAT | Housing Assessment Form | UNACCOMPANIED YOUTH | Report

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2. In the past three years, how many times have you been housed and then homeless again?

PRE-SCREEN HOUSING AND HOMELESSNESS SUBTOTAL 0

B. RISKS

If the total number of interactions across questions 3, 4, 5, 6 and 7 is equal to or greater than 4, then score will be 1

3. In the past six months, how many times have you been to the emergency department/room?

4. In the past six months, how many times have you had an interaction with the police?

5. In the past six months, how many times have you been taken to the hospital in an ambulance?

6. In the past six months, how many times have you used a crisis service, including distress centers or suicide prevention hotlines?

7. In the past six months, how many times have you been hospitalized as an in-patient, including hospitalizations in a mental health hospital?

Total 3-7		**Risk 3-7 Prescreen Score**	

C. Socialization & Daily Functions

If YES to question 14 or NO to questions 15 or 16, the score will be 1.

14. Is there anybody that thinks you own them money? -- Select --

15. Do you have any money coming in on a regular basis, like a job or government benefit or even working under the table, binning or bottle collecting, sex work, odd jobs, day labor, or anything like that? -- Select --

16. Do you have enough money to meet all of your expenses on a monthly basis? -- Select --

Socialization & Daily Functions Prescreen Score 14 - 16 0

If NO to question 17, score will be 1

17. Do you have planned activities each day other than just surviving that bring you happiness and fulfillment? -- Select --

Socialization & Daily Functions Prescreen Score 17

If YES to questions 18 or 19, score will be 1.

18. Do you have any friends, family or other people in your life out of convenience or necessity, but you do not like their company? -- Select --

19. Do any friends, family or other people in your life ever take your money, borrow cigarettes, use your drugs, drink your alcohol, or get you to do thing you really don't want to do? -- Select --

Socialization & Daily Functions Score 18-19 0

OBSERVE ONLY. DO NOT ASK! if YES , score will be 1.

20. Surveyor, do you detect signs of poor hygiene or daily living skills? -- Select --

Socialization & Daily Functions Score 20

PRE-SCREEN SOCIALIZATION & DAILY FUNCTIONS SUBTOTAL 0

D. WELLNESS

If Does Not Go for Care, Score will be 1.

21. Where do you usually go for healthcare or when you're not feeling well? -- Select --

Wellness Prescreen Score 21 0

For EACH YES response in questions 22 through 25 (Medical Conditions), score will be 1.

Do you have now, have you ever had, or has a healthcare provider ever told you that you have any od the following medical conditions

22. Kidney disease/End Stage Renal Disease or Dialysis -- Select --

23. History of frostbite, Hypothermia, or Immersion Foot -- Select --

24. Liver disease, Cirrhosis, or End-Stage Liver Disease -- Select --

25. HIV+/AIDS -- Select --

Wellness MEDICAL CONDITION Prescreen Score 22-25 0

If YES to any of the conditions in questions 26 to 34 (Other Medical Conditions), score will be 1.

26. History of Heat Stroke/Heat Exhaustion -- Select --

27. Heart disease, Arrhythmia, or Irregular Heartbeat -- Select --

28. Emphysema -- Select --

29. Diabetes -- Select --

30. Asthma -- Select --

31. Cancer -- Select --

32. Hepatitis C -- Select --

33. Tuberculosis -- Select --

OBSERVATION ONLY – DO NOT ASK:

34. Surveyor, do you observe signs or symptoms of a serious health condition?

- Yes
- No

Clear Selection

OBSERVATION ONLY – DO NOT ASK:
48. Surveyor, do you detect signs or symptoms of severe, persistent mental illness or severely compromised cognitive functioning?

- (●) Yes
- ( ) No

Clear Selection

Mental Health Prescreen Score 42-48 1

If the Substance Use score is 1 AND the Mental Health score is 1 AND the Medical Condition score is 1, then score will have an additional point for tri-morbidity.

Tri-Morbidity Score

1

If YES to question 49, score will be 1.

49. Have you had any medicines prescribed to you by a doctor that you do not take, sell, had stolen, misplaced, or where the prescriptions were never filled? -- Select --

Prescreen Score Question 49 0

If YES to question 50, score will be 1.

50. Have you experienced any emotional, physical, psychological, sexual or other type of abuse or trauma in your life which you have not sought help for, and/or which has caused your homelessness? -- Select --

Prescreen Score 50 0

PRE-SCREEN WELLNESS SUBTOTAL 8

GENERAL INFORMATION:

PRE-SCREEN TOTAL: 17

Client has a score of 8 or greater; which indicates a high services need.

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Prescreen Score 50 0

PRE-SCREEN WELLNESS SUBTOTAL 8

GENERAL INFORMATION:

PRE-SCREEN TOTAL: 17

Client has a score of 8 or greater; which indicates a high services need.

Next Page

Cancel Save as Draft Save

Pre-Screen Score: This is not the ONLY variable to the case management and housing process. Other variables that involve program eligibility, and priority status such as length of stay and documentation of disability. The score is ONE tool in the prioritization process

Second Tab of Workflow: Housing Assessment Form

A. First questions populate from the HUD Assessment Touchpoint (Entry/Update/Annual/Exit)
   - If the client is a veteran, a DV victim, working; you will be prompted to answer extra questions

B. Basic information on Household
   - Single adult Individual
   - Unaccompanied Youth
   - Adult couple with not children (additional fields will open)
   - Family with children under 18 (additional fields will open, if you need to add more than one more person just select "YES" to question "Add more family members") See screenshot
   - Single woman with children under 2 (additional fields will open, if you need to add more than one more person just select "YES" to question "Add more family members")

C. Contact Information for case manager, lawyer, probation officer ETC, someone who can get in touch with client in case you can't

VI-SPDAT | Housing Assessment Form | UNACCOMPANIED YOUTH | Report

The Housing Assessment Form (HAF) is designed to collect information from clients regarding their pass and current living situation in order to identify and address barriers to housing stability.

client's relationship to the head of household

Self (head of household)

Length of Stay in Previous Place

Two days to one week

Zip Code

76132

Is the client currently receiving income from any source

No

Is the client currently receiving non-cash benefits from any source

No

Is the client currently covered by health insurance

No

Veteran Status (HUD) Yes

What is the client's military discharge status? -- Select --

Does the client currently have a disabling condition

No

Is the client a victim/survivor of domestic violence

Yes

When did the domestic violence occur? -- Select --

is the client pregnant at this moment?

- Yes
- No

Clear Selection

Is the client currently covered by health insurance

No

Veteran Status (HUD) Yes

What is the client's military discharge status? Honorable

Does the client currently have a disabling condition

No

Is the client a victim/survivor of domestic violence

Yes

When did the domestic violence occur? Three to six months.

is the client pregnant at this moment?

- (●) Yes
- ( ) No

Clear Selection

Is the client currently employed? Yes

Tenure of employment Temporary

Is the client currently employed? -- Select --

Are you able to work? -- Select --

Does the client have any of these documents (select all that applied)

- ☐ Texas ID
- ☐ Social Security Card
- ☐ Birth Certificate
- ☐ Other

Basic Information on Household

Household Type

- -- Select --
- Single adult Individual
- Unaccompanied Youth
- Adult couple with no children
- Family with children under 18
- Single woman with children under 2

D that you are able and willing to stay with?

- ○ Yes
- ○ No

Clear Selection

If you had means of transportation Do you have family or friends that you are able and willing to stay with in other cities or states?

- ○ Yes
- ○ No

Clear Selection

Which of the following types of housing are you willing to consider?

-- Select --

If you were able to get into a housing program would you be willing to participate in case management services?

- ○ Yes
- ○ No

Clear Selection

What barriers have made it difficult for you to obtain housing?

- ☐ Past Felonies (older than 7 years)
- ☐ Recent Felonies (newer than 7 years)
- ☐ Criminal background (no felonies)
- ☐ Bad Credit
- ☐ Poor Rental History

Basic Information on Household

Household Type

Family with children under 18

Name (2)

Age Range (2)
- 0 to 3 months
- 3 months to 2 years old
- 3 years to 17 years old
- 18 and older

Clear Selection

Relationship (2)

Legal Custody (2)
- Yes
- No
- N/A

Clear Selection

Does this person have (2)
- Texas ID
- Social Security Card
- Birth Certificate
- Other ID

Is this person a veteran? (2)
- Yes
- No

Clear Selection

Does this person have any disabling condition? (2)
- Physical disability
- Chronical Health Condition
- HIV / Aids
- Mental Health Condition
- Substance or Alcohol Abuse

Clear Selection

Add more family members? (2)
- Yes
- No

Clear Selection

Name (3)

Age Range (3)
- 0 to 3 months
- 3 months to 2 years old
- 3 years to 17 years old
- 18 and older

Clear Selection

Relationship* (3)

Legal Custody (3)

-- Select --

Does this person have (3)
- Texas ID
- Social Security Card
- Birth Certificate
- Other Id

Is this person a veteran? (3)
- Yes
- No

Does this person have any disabling condition? (3)
- Physical disability
- Chronic Health Condition
- HIV / Aids
- Mental Health Condition
- Substance or Alcohol Abuse
- No

Add more family members? (2)
- Yes
- No

Clear Selection

- [ ] Poor Rental History
- [ ] Physical Health
- [ ] Mental Health
- [ ] Substance Abuse
- [ ] Unstable employment history
- [ ] Limited or no income
- [ ] Not interested in housing case management
- [ ] Money owed to past landlords
- [ ] Other

Please provide the contact information of any case manager, representative payee, or probation / parole officer you are currently working with

Name:

Role:

Phone Number (__) __-__

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Cancel | Save as Draft | Save

Fourth Workflow Tab: HAF Report

Here are some of the report messages that might appear form the HAF report.

Based on the information provided, this client may be appropriate for:

VASH: 817 255 7150 / 1518 E Lancaster Av.
or
GPD Programs at PNS: 817-632-7407

Based on the information provided, this client may be appropriate for:* Salvation Army Mabee Center to program SAVE 817 344 1801

Based on the information provided, this client may be appropriate for PSH Program:*Arlington Housing Authority, Catholic Charities, City of Fort Worth, Cornerstone Assistance Network, Fort Worth Housing Authority, MHMR of Tarrant County, Presbyterian Night Shelter, Recovery Resource Council, Samaritan Housing of Tarrant County Tarrant County

This client is an unaccompanied youth*Please Contact ACH at 817 335 4673

Based on the information provided, this client might qualify for the MHMR Healthy Community Collaborative Program, please add and ETO referral (under Add Referral feature) or contact Sabrina D. Conner at Sabrina.Conner@mhmrtc.org

Based on the information provided, this client might qualify for Samaritan House Programs: Genesis TBLA 15, Genesis HOPWA, Shelter Plus Care, Samaritan House Please contact Mario Puga at TCHC for Prioritization 817 996 7666 or Mario@ahomewithhope.org

Special Conditions:

This client is a **Youth in Transition (aged 18-24)**
This is a special population and client may be prioritized higher even if his / her SPDAT score is low

Special Conditions:

This client is a **Pregnant and/or with a child 2 years old or younger**
This Client may be prioritized higher even if his/her SPDAT score is low.

Special Conditions:

This Family **has a child or children with disabilities or chronic illness.**
This is a special population and family may be prioritized higher even if their SPDAT score is low

Client is willing to stay with family or friends locally, this client might qualify for a Housing Placement Program or TCHC for Direct Client Service Funds

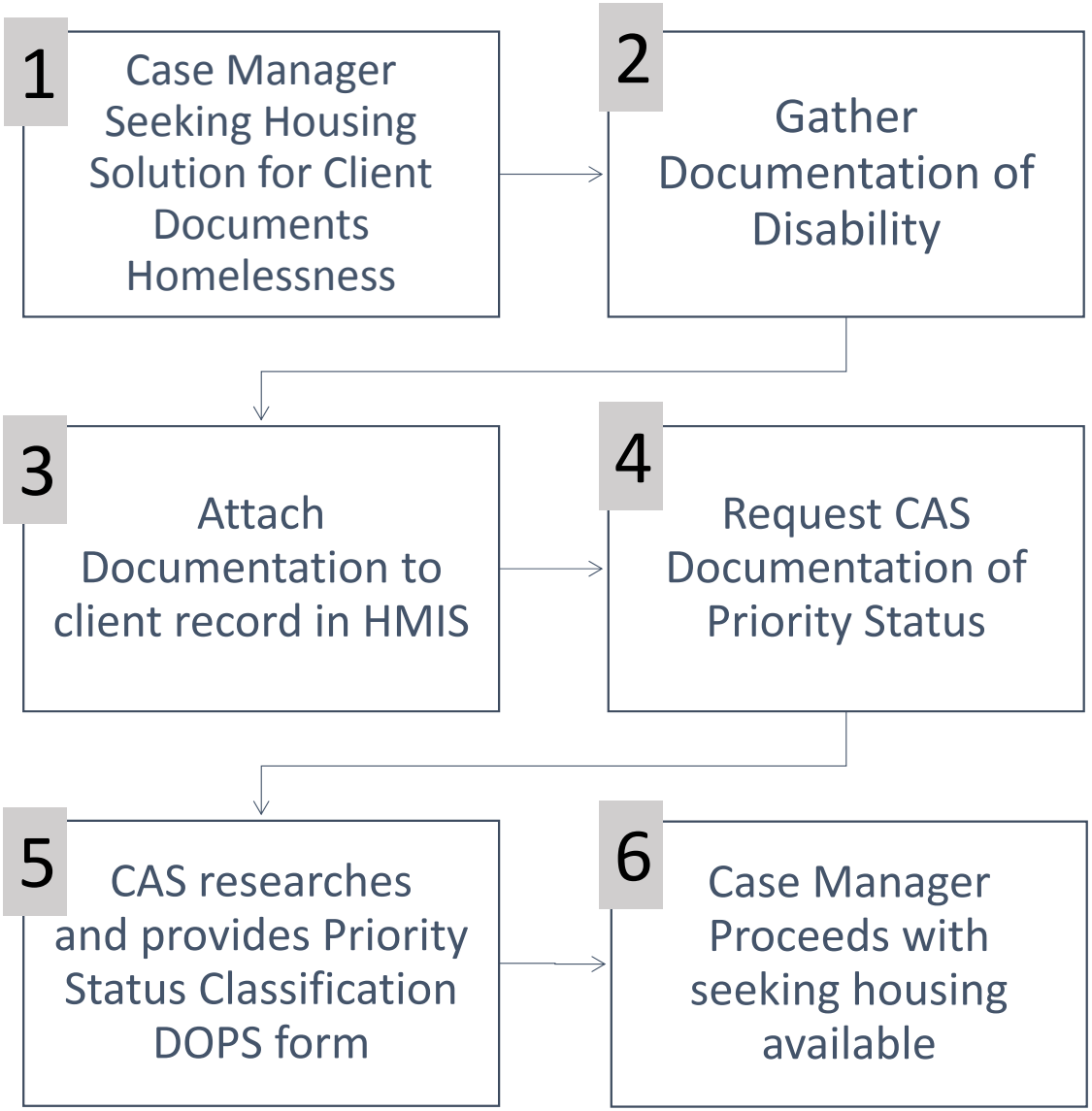
HAF Reporting Messages

Designated CAS Contacts for each agency will serve to communicate to TCHC any changes in inventory, eligibility, intake contacts, referral contacts to assure the HAF reports are accurate.

Most agencies have responded to TCHC request to name one or two primary Coordinated Assessment System contacts. Reminder emails will go out and the list shared on Basecamp

Step 3:
Documentation of Priority Status a.k.a. “DOPS”

- No changes to the PROCESS
- Change is in the Priority Levels
- From 3 to P 1-12 and two Non Priority Levels


1
Case Manager Seeking Housing Solution for Client Documents Homelessness
2
Gather Documentation of Disability
3
Attach Documentation to client record in HMIS
4
Request CAS Documentation of Priority Status
5
CAS researches and provides Priority Status Classification DOPS form
6
Case Manager Proceeds with seeking housing available

U.S. Department of Housing and Urban Development
Office of Community Planning and Development

Notice: CPD-14-012
Issued: July 28, 2014
Expires: This Notice is effective until it is amended, superseded, or rescinded

Special Attention of:
All Secretary's Representatives
All Regional Directors for CPD
All CPD Division Directors
Continuums of Care (CoC)
Recipients of the Continuum of Care (CoC) Program

Cross Reference: 24 CFR Parts 578 and 42 U.S.C. 11381, *et seq.*

Subject: Notice on Prioritizing Persons Experiencing Chronic Homelessness and Other Vulnerable Homeless Persons in Permanent Supportive Housing and Recordkeeping Requirements for Documenting Chronic Homeless Status

Step 4:
Client assigned a Priority Status Level

HUD CPD NOTICE ON PRIORITIZATION

P12 system *(formerly P3)*

P1-4 – Chronic Homeless Dedicated PSH Beds

P5-8 – Non Dedicated to Chronic PSH Beds (85% policy)

P9 – TH Beds for families with high level of service needs

P10 – TH Beds for individuals with high level of service needs

P11 – RRH Beds for families with low level of service needs

P12 – RRH Beds for individuals with low level of service needs

NP1 – Category 4 – Homeless Prevention OR Homeless Individual less than 14 days

NP2 – At-Risk of Homelessness

P12 Coordinated Assessment Prioritization Guidelines for CoC Housing Resources

tchc

	Priority	Homeless Category	Length of Stay in Homelessness	Where Experience Homelessness	Severity of Service Needs	Documented Disability
Dedicated CH PSH Beds	**P1**	Chronic - Individual or HHLD with Children	> 12 Months Continuous ***OR*** Total of at least 4 Episodes Total > 12 months in 3 years	UN, ES, SH	High = VI-SPDAT Score of 10 or greater	Yes
	P2	Chronic - Individual or HHLD with Children	> 12 Months Continuous ***OR*** Total of at least 4 Episodes Total > 12 months in 3 years	UN, ES, SH	Low=VI-SPDAT Score of 5 or greater	Yes
	P3	Chronic - Individual or HHLD with Children	Total of at least 4 Episodes Total < 12 months in 3 years	UN, ES, SH	High = VI-SPDAT Score of 10 or greater	Yes
	P4	Chronic - Individual or HHLD with Children	Total of at least 4 Episodes Total < 12 months in 3 years	UN, ES, SH	Low=VI-SPDAT Score of 5 or greater	Yes
Committed CH Beds Created by Turnover (85% program goal)	**P5**	Category 1 - Individual or HHLD with Children	Any Length of Stay OR = < 90 Days Institution	UN, ES, SH ***OR*** Institution if UN ES SH Prior to entry	High = VI-SPDAT Score of 10 or greater	Yes
	P6	Category 1 - Individual or HHLD with Children	> or = 6 Months Continuous ***OR*** at least 3 episodes in 3 years > = 6 Months ***OR*** = < 90 Days in Institution	UN, ES, SH ***OR*** Institution if UN ES SH Prior to entry	Low=VI-SPDAT Score of 5 or greater	Yes
	P7	Category 1 - Individual or HHLD with Children	Any time > 30 days ***OR*** = < 90 Days Institution	UN, ES, SH ***OR*** Institution if UN ES SH Prior to entry	Low=VI-SPDAT Score of 5 or greater	Yes
	P8	Category 1 - Individual or HHLD with Children	*Any Length of Stay > 14 days*	TH IF previous UN, ES, or SH (*dependant on funding source CoC or ESG*)	Low=VI-SPDAT Score of 5 or greater	Yes
Transitional Housing	**P9**	Category 1 or 4 HHLD with Children	*Any Length of Stay*	UN, ES, SH	Low=VI-SPDAT Score of 5 or greater	Not required. Collect documenation if available
	P10	Category 1 or 4 Individual	*Length of Stay > 14 days*	UN ES SH	Low=VI-SPDAT Score of 5 or greater	Not required. Collect documenation if available
Rapid Rehousing	**P11**	Category 1 or 4 HHLD with Children	*Any Length of Stay*	UN ES SH	Very Low=VI-SPDAT Score of 1 or greater	Not required. Collect documenation if available
	P12	Category 1 or 4 Individual	*Length of Stay > 14 days*	UN ES SH	Very Low=VI-SPDAT Score of 1 or greater	Not required. Collect documenation if available
Homeless Prevention	NP 1	Homeless Category 2 Individual or HHLD with Children OR Category 1 Homeless	Primary nighttime residence lost within 14 days OR Category 1 Homeless with Length of Stay < 14 days	No Subsequent residence identified and no social networks to obtain permanent housing OR ES	VI-SPDAT Score of 0 or greater	Not required. Collect documenation if available
	NP 2	At-Risk of Homelessness Category 1, 2 or 3 Individual or HHLD with Children	Primary nighttime residence will be lost wihtin 21 days	Meet any At Risk of Homelessness Criteria	VI-SPDAT Score of 0 or greater	Not required. Collect documenation if available

ETO™ software

Presbyterian Night Shelter: PNS-Moving Home

Welcome Mario Puga |

Home | New | Quick Search | To Do List | Messages | My Favorites | My Dashboard | Reporting Dashboard

Enter Search Term(s) within Participant in PNS-Moving Home Search

[redacted]s Dashboard

Edit Dashboard

Family Information

[redacted] Family

Roger Taylor is not a member of any Family.

Participant Information

[redacted]

[redacted]

DOB: 5/1/1959

Age: 55 years

Status: Widowed

Priority Status

Priority Status

Take Action	Date Last Updated	Priority Status
	10/13/2014	P1

Recent Assessments [4]

[redacted] Recent Assessments *Housing Assessment Form (HAF)*

Take Action	Assessment	Program	Date Completed	Identifier
	Housing Assessment Form (HAF)	PNS-Veteran Transitional Living	7/21/2014	PNS-Veteran Transitional Living

Recent TouchPoints

Roger Taylor's Recent TouchPoints

Take Action	TouchPoint	Program	Date Completed	Date Last Updated	Recorded By	Identifier
	Priority Status	PNS-Veteran Transitional Living	10/13/2014	10/13/2014	Mario Puga	PNS-Veteran Transitional Living
	Critical Documents	PNS-Veteran Transitional Living	10/8/2014	10/8/2014	Mario Puga	PNS-Veteran Transitional Living
	Case Management/ Case Management Notes	PNS-Veteran Transitional Living	10/6/2014	10/6/2014	Joseph Karasick	PNS-Veteran Transitional Living
	Case Management/ Case Management Notes	PNS-Veteran Transitional Living	10/2/2014	10/6/2014	Joseph Karasick	PNS-Veteran Transitional Living
	Case Management/ Case Management Notes	PNS-Veteran Transitional Living	9/16/2014	9/18/2014	Joseph Karasick	PNS-Veteran Transitional Living

ecent Efforts [2]

Roger Taylor's Recent Efforts

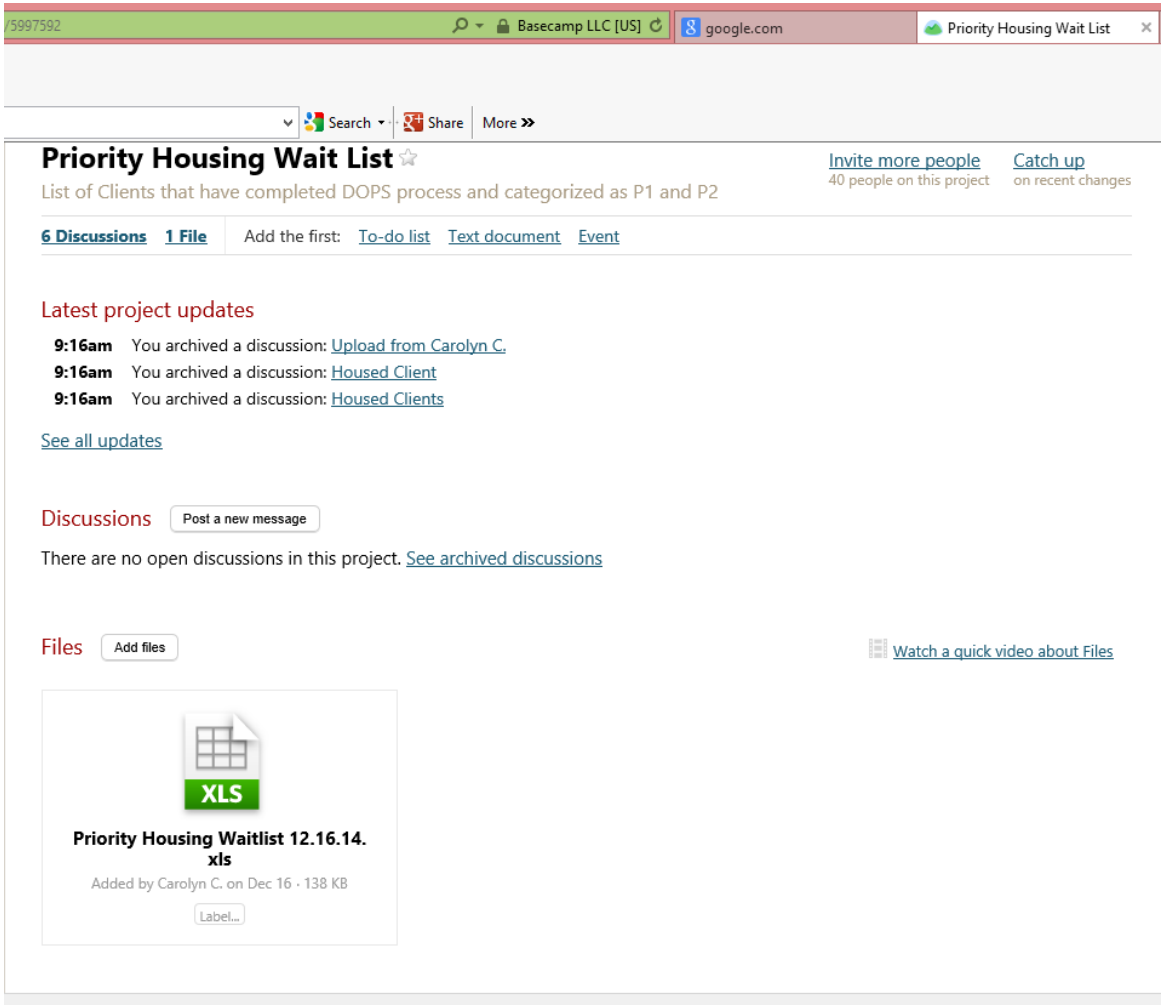
Take Action	Point of Service	Program	Date of Contact

Step 5: House ‘em!

Base Camp Housing Priority List

Weekly Generated Priority List Uploaded every Friday

To subsribe send email to carolyn@ahomewithhope.org



PRELIMINARY Prioritization and Housing Recommendation Chart

Proj. Type	Organization Name	Project Name	SubPop	P1 CH	P2 CH	P3 CH	P4 CH	P5 Non CH	P6 Non CH	P7 Non CH	P8 Non CH	P9 TH	P10 TH	P11 RRH	P12 RRH
PSH	Arlington Housing Authority	AHA S+C		X	X	X	X								
PSH	Arlington Housing Authority	AHA S+C Chronic		X	X	X	X								
PSH	Arlington Housing Authority	SPC Project Based		X	X	X	X	X	X	X	X				
PSH	Catholic Charities	Master Lease		X		X	X								
PSH	City of Fort Worth	Directions Home		X		X	X	X							
PSH	City of Fort Worth	HHSP PSH		X		X	X	X							
PSH	Cornerstone Assistance Network	New Lives PSH						X	X	X	X				
PSH	Fort Worth Housing Authority	FWHA S+C 6		X	X	X	X	X	X	X	X				
PSH	Fort Worth Housing Authority	VASH	VET -E	X	X	X	X								
PSH	MHMR of Tarrant County	Gateway to Housing		X	X	X	X	X	X	X	X				
PSH	Presbyterian Night Shelter	Housing Solutions Combined		X	X	X	X								
PSH	Recovery Resource Council	Project New Start		X	X	X	X								
PSH	Samaritan Housing of Tarrant County	Genesis	HIV	X	X	X	X	X	X	X	X				
PSH	Samaritan Housing of Tarrant County	Grace Villages		X	X	X	X								
PSH	Samaritan Housing of Tarrant County	SRO 307	HIV	X	X	X	X	X	X	X	X				
PSH	Samaritan Housing of Tarrant County	SRO 309	HIV	X	X	X	X	X	X	X	X				
PSH	Samaritan Housing of Tarrant County	SRO TDHCA	HIV	X	X	X	X	X	X	X	X				
PSH	Tarrant County	MHMR - TBLA 13		X	X	X	X	X	X	X	X				
PSH	Tarrant County	SafeHaven SafeTomorrows	DV	X	X	X	X								
PSH	Tarrant County	Salvation Army S.A.V.E.	VET IE	X	X	X	X								
PSH	Tarrant County	Samaritan House - TBLA 15	HIV	X	X	X	X	X	X	X	X				
PSH	Tarrant County	Tarrant County Housing Office SPC		X	X	X	X								
PSH	Tarrant County	TBLA 17 - MHMR Addiction Services		X	X	X	X	X	X	X	X				
SH	Presbyterian Night Shelter	Safehaven		X	X	X	X	X	X	X	X		X		X
RRH	Catholic Charities	SSVF Rapid Rehousing	VET	X	X	X	X	X	X	X	X			X	X
RRH	Community Enrichment Center	Rapid Rehousing	FAM	X	X	X	X	X	X	X	X			X	
RRH	SafeHaven of Tarrant County	Rapid Rehousing	FAM DV	X	X	X	X	X	X	X	X			X	
RRh	Tarrant County	3CP Cornerstone RRH		X	X	X	X	X	X	X	X	X	X	X	X
RRH	Tarrant County	TBLA 114 - CEC	FAM	X	X	X	X	X	X	X	X	X		X	
RRH	Tarrant County	TBLA 114 - Cornerstone		X	X	X	X	X	X	X	X	X		X	X
RRH	Tarrant County	TBLA 114 - GRACE		X	X	X	X	X	X	X	X	X	X	X	X
RRH	Tarrant County	TBLA 114 - MHMR		X	X	X	X	X	X	X	X	X	X	X	X
RRH	Tarrant County	TBLA 114 - SafeHaven	DV	X	X	X	X	X	X	X	X	X	X	X	
RRH	Tarrant County	TBLA 114 - TCCD		X	X	X	X	X	X	X	X	X	X	X	X
RRH	YWCA	Rapid Rehousing	FAM	X	X	X	X	X	X	X	X			X	
TH	ACH Child and Family Services	Families Together	FAM	X	X	X	X	X	X	X	X	X			
TH	Arlington Housing Authority	SHP Program		X	X	X	X	X	X	X	X	X	X		
TH	Community Enrichment Center	Adopt A Family	FAM	X	X	X	X	X	X	X	X	X			
TH	Community Enrichment Center	CEC Open Arms	FAM	X	X	X	X	X	X	X	X	X			
TH	MHMR of Tarrant County	GPD - Liberty House	VET	X	X	X	X	X	X	X	X		X		
TH	Presbyterian Night Shelter	GPD - Patriot House	VET	X	X	X	X	X	X	X	X		X		
TH	Presbyterian Night Shelter	GPD - Veteran's Program #04-124	VET	X	X	X	X	X	X	X	X		X		
TH	Presbyterian Night Shelter	GPD - Veteran's Program #98-041	VET	X	X	X	X	X	X	X	X		X		

PRELIMINARY Prioritization and Housing Recommendation Chart

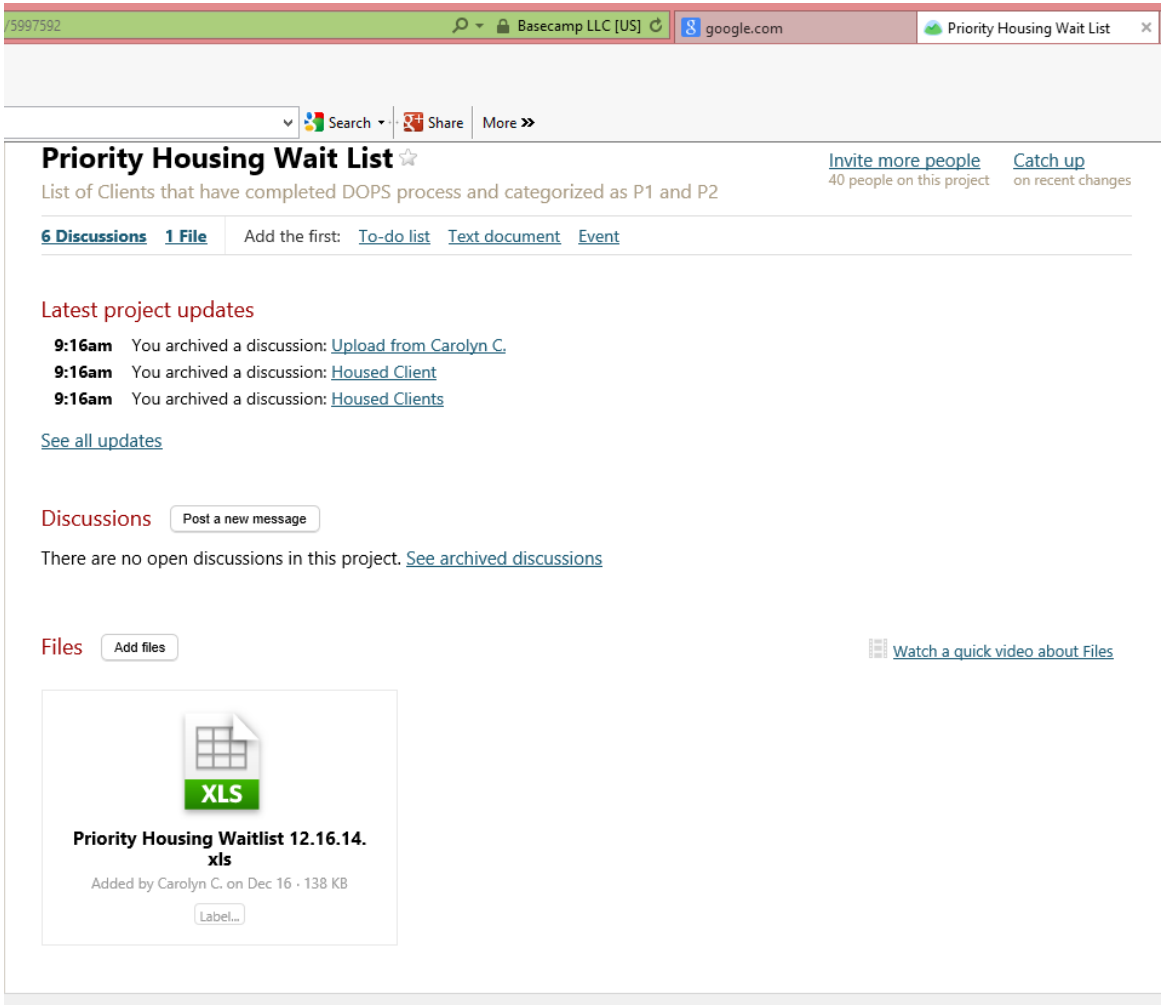
Proj. Type	Organization Name	Project Name	SubPop	P1 CH	P2 CH	P3 CH	P4 CH	P5 Non CH	P6 Non CH	P7 Non CH	P8 Non CH	P9 TH	P10 TH	P11 RRH	P12 RRH
TH	SafeHaven of Tarrant County	Parkdale	DV	X	X	X	X	X	X	X	X	X	X		
TH	SafeHaven of Tarrant County	TH Tax Credit	DV	X	X	X	X	X	X	X	X	X	X		
TH	Tarrant County	GRACE Nash		X	X	X	X	X	X	X	X	X	X		X
TH	The Salvation Army	SIMON		X	X	X	X	X	X	X	X		X		
TH	The Salvation Army Arlington	Family Center	FAM									X		X	

Step 5: House ‘em!

Base Camp Housing Priority List

Weekly Generated Priority List Uploaded every Friday

To subsribe send email to carolyn@ahomewithhope.org



Step 6:
Managing the Supply

- Coordinated Assessment Office should be FIRST TO KNOW of housing openings
- CoC, ESG, Directions Home or HCC Funded Housing need to secure a DOPS before allocation of a housing voucher/resource to a client
- Push OR Pull to fill the housing.
- Confirmation that the CAS – DOPS process is being followed will be managed through desktop monitoring by TCHC CoC Planning staff.
- Beginning TODAY, new enrollees into housing programs should have a Prioritization Score on the client dashboard

Questions:

Q: What about previously prioritized clients (P3 system)?

A: UNHOUSED clients that have been prioritized and appear on the Priority Housing List should be re-prioritized (apply for a NEW DOPS) after 90 days. This will allow through attrition that prioritizations will be updated systematically.

Q: What about my existing internal agency housing waitlist?

A: Any client on a housing waitlist should be DOPSed and moving forward, clients should be pulled from the Priority Housing Waitlist on Basecamp.

Questions:

Q: What about clients that are in the process of seeking housing?

A: Any clients ENROLLED in your programs are grandfathered in. The HMIS enrollment date prior to 12/17/2014 will be honored as grandfathered in.

Q: What about SafeHaven/DV housing resources?

A: SafeHaven of Tarrant County RRH, TH and PSH programs must meet the same thresholds as all other CoC programs and should also consider DV victims that may appear on the Basecamp list and referred by other agencies through the SafeHaven CAS contact. They will maintain PAPER BASED copies of documentation of homelessness, disability and a VI-SPDAT score and be subject to monitoring. Referral processes currently used should continue.

Questions:

Q: What about RRH clients, should they be surveyed using the HAF and DOPS process?

A: YES. All CoC and ESG resources should follow the same process

Questions Asked During the Webinar:

Q: Are the VI-SPDAT and HAF one tool?

A: YES. It is ONE TouchPoint with a four-part workflow: VI-SPDAT, HAF, Unaccompanied Youth and Result

Q: What does VI-SPDAT stand for?

A: Vulnerability Index – Service Prioritization Decision Assistance Tool

Questions Asked During the Webinar:

Q: Should SOS or other street outreach use the HAF/DOPS process?

A: If funded by ESG, YES. Also, know that the HAF/DOPS process is how to get your client on the Priority Housing List

Q: Should the new Other Permanent Housing HCV Homeless Preference Beds use the HAF/DOPS process?

A: This can be determined by the Public Housing Authority agency. The tool would be helpful to document homelessness as well as assess that the client has a very low severity of service needs indicating housing stability and independence to be an ideal candidate for the preference beds.

Questions Asked During the Webinar:

Q: What if my client is chronic or homeless a long time but scores below a 4?

A: First, other non-subsidized housing programs should be considered for the client because their service need level is purportedly manageable without continual case management. Note: the HUD Notice does allow for special circumstances to strict scoring and prioritization systems. Our system ALSO allows for SPECIAL CONDITIONS that may raise a Prioritization level outside of the VI-SPDAT score. The agency would have to complete the process and indicate through documentation the special condition to be considered.

IF after full implementation of the P12 category definition process it is determined that very few homeless in our CoC fall in the 10-17 score, but meet the federal definition of chronically homeless, TCHC, in consultation with the Planning Council and CoC agencies, will make a recommendation to the CoC Board to modify the Severity of Service Needs from the VI-SPDAT scale of 5-9 and 10+ to one that matches our CoC experience. (e.g. a high level may be a score of 8 and above and low 2-7, etc.).

CAS Comprehensive Review

SAVE THE DATE: TCHC will have a full day training and review of the entire Coordinated Assessment Process on Tuesday, January 27 8:30 – 3:30 pm at Goodwill Industries

We will use the CAARES model – Client Access, Assessment and Referral Experience System design institute program model to evaluate our CAS system from the perspective of the client.