**CT BOS CoC Sample Written Intake Procedures**

*Updated November 23, 2020*

**Background**

HUD requires that projects receiving Continuum of Care (CoC) funds maintain and follow written intake procedures establishing how the project will determine and document participant eligibility and establishing the order of priority for obtaining evidence of homelessness as third-party documentation first, intake worker observation second, and certification from the person seeking assistance third.

The attached sample policy (see page 3) is intended to help providers comply with requirements established under federal law, by HUD, and by the Connecticut Balance of State CoC (CT BOS). Recipients and sub-recipients of CoC funds are responsible for the items outlined in this sample policy. All agencies receiving CoC funds are required to have similar policies. Projects may opt to adopt this sample policy (see page 3) or a different policy that fulfills the local and federal requirements. Insufficient documentation of eligibility is among the most frequent CTBOS and DMHAS monitoring findings, and following the steps outlined in the sample policy will help to reduce risk of recapture of program funds by HUD.

In addition to items outlined in this policy, all projects are responsible for complying with any special eligibility requirements established through their project application or the NOFA under which the project was originally funded. For example, projects may be required to serve specific subpopulations, such as people living with serious mental illness, youth under age 25 or survivors of domestic violence.

**HUD Guidance**

Additional Information regarding HUD requirements related to project intake is available at:

* [CoC Program Toolkit – Determining and Documenting Homelessness](https://www.hudexchange.info/programs/coc/toolkit/determining-and-documenting-homelessness/)
* [HEARTH Homeless Definition Final Rule](https://www.hudexchange.info/resource/1928/hearth-defining-homeless-final-rule/)
* [DedicatedPLUS projects](https://www.hudexchange.info/resource/5854/applying-for-dedicatedplus-projects-during-the-coc-program-competition)
* [HUD Final Rule on Chronic Homelessness](https://www.federalregister.gov/articles/2015/12/04/2015-30473/homeless-emergency-assistance-and-rapid-transition-to-housing-defining-chronically-homeless)
* [HUD Notice: Prioritizing Persons Experiencing Chronic Homelessness in PSH & Recordkeeping Requirements for Documenting Chronic Homeless Status](https://www.hudexchange.info/resource/5108/notice-cpd-16-11-prioritizing-persons-experiencing-chronic-homelessness-and-other-vulnerable-homeless-persons-in-psh)
* [HUD Equal Access to Housing Final Rule & Equal Access in Accordance with Gender Identity Final Rule-](https://www.hudexchange.info/resource/1991/equal-access-to-housing-final-rule/)
* [HUD Guidance on Application of Fair Housing to Use of Criminal Records by Housing Providers](http://portal.hud.gov/hudportal/documents/huddoc?id=HUD_OGCGuidAppFHAStandCR.pdf)
* [COC Program Frequently Asked Questions](https://www.hudexchange.info/coc/faqs/)

**CT BOS Resources:**

Additional details regarding participant eligibility and eligibility documentation requirements are available in these resources provided by CT BOS:

* + [Participant Disability Verification Form](http://www.ctbos.org/wp-content/uploads/2019/12/Disabling-condition-CT-BOS-CoC-Form-re.-10.10.19.pdf)
  + [Participant Homelessness Verification Form](https://www.ctbos.org/wp-content/uploads/2020/11/CT-BOS-CoC-Homelessness-Verification-Form-Ded-Plus-Edits-v10.docx)
  + [CT YHDP Homelessness Verification Form](http://www.ctbos.org/wp-content/uploads/2019/12/CT-YHDP-Homelessness-Verification-Form-v3.docx)
  + [Sample Third Party Letters](https://www.ctbos.org/wp-content/uploads/2020/11/Sample-Letters-Ded-v3.docx)
  + [Adaptable electronic version of this sample policy](https://www.ctbos.org/wp-content/uploads/2020/11/Sample-Project-Intake-Policy-v9.docx)

**Please continue to page 3 for the sample policy.**

**SAMPLE WRITTEN INTAKE PROCEDURES**

**Instructions for Agencies Adopting the Required Intake Policy:**

* All agencies receiving CoC funds – both recipients and subrecipients- are required to maintain and follow written intake procedures establishing how a CoC project will determine and document participant eligibility and establishing the order of priority for obtaining evidence of homelessness.
* Agencies may opt to adopt the sample policy below or a different policy that fulfills the requirements as described in this sample policy.
* If your agency opts to adopt the sample policy below, insert information specific to your CoC projects in the sections highlighted in yellow.
* Prior to adopting the sample policy agencies should omit:
  + the Background, HUD Guidance, CTBOS Resources, and Instructions sections of this document; and
  + details that do not apply to the projects operated by the agency. For example omit content related to Rapid Rehousing (RRH), if your agency does not have any CoC RRH projects.
* Prior to adoption, please add/adjust any relevant details that are specific to your agency’s procedures. For example, if responsibilities for documenting eligibility are divided among staff, please specify who is responsible for what or if your project is restricted only to serving youth under age 25 or people who meet HUD Category 4 (DV) criteria, please specific accordingly.

**Purpose:**

The purpose of this policy is to establish intake procedures to ensure:

* Only eligible participants are admitted to (INSERT NAME(S) OF YOUR AGENCY’S COC PROJECT(S) in accordance with federal requirements and CT BOS policies; and
* Adequate documentation of eligibility is maintained in all participant files.

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| **Quick Reference Guide**  **Eligibility for CT BOS CoC Programs**  *This guide is intended for quick reference only. Important details regarding homelessness and disability requirements and adequate documentation is available at:* [*https://www.ctbos.org/resources/*](https://www.ctbos.org/resources/) | |
| **Component Type** | **Eligible Participants** |
| **YHDP All Component Types** | See separate table below. The Youth Homeless Verification Form and other youth-specific materials can be located here:[*http://www.ctbos.org/youth/*](http://www.ctbos.org/youth/) |
| **Permanent Supportive Housing –For Chronically Homeless People** | **Currently homeless** and living in a place not meant for human habitation, safe haven, or in an emergency shelter (*Note: People living in Transitional Housing are not defined as chronically homeless by HUD)*;  AND  Have been homeless and residing in a qualified location **continuously for at least 12** months or on at least **4 separate occasions in the last 3 years** that combined total at least 12 months;  AND  An adult head of household (or, if there is no adult in the family, a minor head of household), has a qualifying **disability**. |
| **Component Type** | **Eligible Participants** |
| **Permanent Supportive Housing - DedicatedPLUS** | An adult head of household (or, if there is no adult in the family, a minor head of household), has a qualifying **disability;**  AND  Currentlyexperiencing **chronic** homelessness (see row above);  OR  Is residing in a **transitional housing project that will be eliminated** and met HUD’s definition of chronically homeless that was in effect at the time during which the individual or family entered the transitional housing project;  OR  Is residing in a place not meant for human habitation, safe haven or emergency shelter and was admitted and enrolled in a permanent housing project (PSH or RRH) within the last year but was **unable to maintain a housing placement**, and met the definition of chronic homeless as defined by prior to entering the project;  OR  Is residing in **TH component of a Joint TH/RRH** project and who were experiencing chronic homelessness prior to entering the project;  OR  Is residing and has resided in a place not meant for human habitation, safe haven or emergency shelter for at **least 12 months in the last three years, but has not done so on four separate occasions**, and the individual or head of household meets the definition of 'homeless individual with a disability’;  OR  Is receiving assistance through a Department of **Veterans Affairs (VA)-funded homeless assistance program** and met one of the above criteria at initial intake to the VA's homeless assistance system. |
| **Rapid Re-housing**  (see separate table below for YHDP) | **Currently** living in a place not meant for human habitation, safe haven or in an emergency shelter;  OR  Qualifies as homeless under HUD Category 4 (i.e. fleeing or attempting to flee domestic violence).  **DV BONUS RRH** programs may only serve individuals or families qualifying as homeless under HUD Category 4. |
| **Transitional Housing**  (See separate table below for YHDP) | **Currently** homeless and living in a place not meant for human habitation, safe haven or in an emergency shelter  OR  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 was residing in an emergency shelter or unsheltered location immediately before entering that facility;  OR  Is fleeing or attempting to flee domestic violence, human trafficking, dating violence, sexual assault or stalking; and has no other residence; and lacks the resources or support networks to obtain other permanent housing.  **In addition, all transitional housing applicants must:**  Be screened for diversion and no other housing options are available;  AND  Have a household income below 30% of AMI. |

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| **QUICK REFERENCE GUIDE**  **CT YHDP PARTICIPANT ELIGIBILITY BY PROGRAM TYPE**  *This guide is intended for quick reference only. Important details regarding YHDP eligibility requirements and adequate documentation is available at*:[*http://www.ctbos.org/youth/*](http://www.ctbos.org/youth/) | |
| **HUD CATEGORY** | **CT YHDP PROGRAM ELIGIBILITY** |
| ***CATEGORY 1***  *Literally homeless* | Eligible for all types of CT YHDP Assistance:   * Shelter Diversion/Rapid Exit Fund * Youth Navigator Services * Crisis Housing * Rapid Rehousing |
| ***CATEGORY 2***  *Imminent risk of homelessness* | Eligible for **only** the following types of CT YHDP Assistance:   * Shelter Diversion/Rapid Exit Fund * Youth Navigator Services |
| ***CATEGORY 3***  *Homeless under other federal statutes* | NOT ELIGIBLE FOR ANY TYPE OF CT YHDP ASSISTANCE |
| ***CATEGORY 4***  *Fleeing domestic violence* | Eligible for all types of CT YHDP Assistance including:   * Shelter Diversion/Rapid Exit Fund * Youth Navigator Services * Crisis Housing * Rapid Rehousing |

**General Intake Procedures:**

As required by HUD and CT BOS, CoC projects operated by (INSERT AGENCY NAME) participate in the local Coordinated Access Network (CAN) and only admit applicants referred by the CAN. The projects use the common assessment tool as directed by the CAN and prioritize participants for admission in the order established by the CAN’s centralized priority list.

Though initial eligibility screening typically occurs at the CAN, it is the responsibility of CoC project staff to verify applicant eligibility and ensure that documentation of eligibility is on file prior to admitting all participants. Applicants are not responsible for obtaining their own eligibility documentation. Rather, project staff, as assigned below, are responsible for documenting eligibility status by using information available in HMIS or contact information or documents provided by the CAN, the applicant, or other partners.

**Responsibilities of Staff:**

The following staff are responsible for documenting eligibility for all applicants referred by the CAN prior to admission into a CoC project: (INSERT TITLE(S) OF RESPONSIBLE STAFF).

The staff specified above are responsible for the following:

* Completing or updating the CT BOS required verification forms submitted by the CAN (i.e., [Homelessness Verification Form](https://www.ctbos.org/wp-content/uploads/2020/11/CT-BOS-CoC-Homelessness-Verification-Form-Ded-Plus-Edits-v10.docx) or [CT YHDP Homelessness Verification Form](http://www.ctbos.org/wp-content/uploads/2019/12/CT-YHDP-Homelessness-Verification-Form-v3.docx) and [Disability Verification Form](http://www.ctbos.org/wp-content/uploads/2019/12/Disabling-condition-CT-BOS-CoC-Form-re.-10.10.19.pdf));
* Ensuring that an updated Homelessness Verification Form demonstrating qualified homelessness at the time of project entry is maintained in each participant’s file;
* Following the order of priority for obtaining evidence of homelessness as described beginning on page 7.
* Ensuring that all supporting documentation, as specified in the [Homelessness Verification Form](https://www.ctbos.org/wp-content/uploads/2020/11/CT-BOS-CoC-Homelessness-Verification-Form-Ded-Plus-Edits-v10.docx) or [CT YHDP Homelessness Verification Form](http://www.ctbos.org/wp-content/uploads/2019/12/CT-YHDP-Homelessness-Verification-Form-v3.docx), including third-party documentation, intake worker observation, and client self-certification is maintained in each participant’s file;
* Ensuring completion and documentation of due diligence in attempting to obtain third-party documentation of homelessness, if applicable – minimum of 3 attempts required;
* Working with the CAN and other partners to obtain all required documentation of eligibility;
* Ensuring that participants do not enter the project without all required documentation of eligibility, except as noted on page 9 related to the 180 day option.

(INSERT TITLE(S) OF RESPONSIBLE SUPERVISORY STAFF) are responsible for:

* Conducting a quality assurance (QA) review of eligibility documentation for all participants within 30 days of project entry;
* Documenting completion of the QA review for each participant, including, at a minimum, date review was completed, name of supervisor completing the review, findings from the review;
* Ensuring that any missing documentation identified during the QA review is promptly obtained and filed in the relevant participant’s chart;
* If the QA review reveals that an ineligible participant was erroneously admitted to a project, promptly notifying (INSERT TITLE OF A SENIOR MANAGER), and the grant recipient agency, if applicable, of the potential recapture risk;
* Working with (INSERT TITLE OF A SENIOR MANAGER), the grant recipient agency, if applicable, and the CAN, to determine next steps to transfer the erroneously admitted participant to a project for which they are eligible;
* Compiling key findings of the QA review at a minimum semi-annually;
* Working with (INSERT TITLE OF A SENIOR MANAGER) and the grant recipient agency, if applicable, to determine any process improvements to remediate issues identified. For example, if the QA review indicates recurring and/or significant issues with eligibility documentation, then follow up steps might include staff re-training, or re-assignment of tasks to different staff. If 2 or more semi-annual QA reviews reveal no or only very minor issues, then follow up steps might include, for example, reducing reviews to a sample rather than 100% of participants entering the project.
* In consultation with (INSERT TITLE OF A SENIOR MANAGER) adjusting this policy, as needed, to reflect changes in the intake procedure identified through the QA review process.
* In consultation with (INSERT TITLE OF A SENIOR MANAGER) reviewing this intake policy, at a minimum, every two years and making updates, as necessary.

**Order of Priority for Obtaining Evidence of Homelessness**

Project staff shall use the following order of priority for obtaining evidence of homelessness:

**First Priority:** Third-party documentation, which can include any of the following:

* A printed **HMIS record** or record from a comparable database;
* A letter from a **housing/service provider** (e.g., shelter, outreach, RRH worker, CAN, or soup kitchen worker, doctor, therapist, counselor or other service provider). Housing/Service providers must specify each month of encounter, the location of each encounter, the living conditions, and nature of the conversations that indicated the person was homeless. Providers may not provide documentation for months in which they did not encounter the person. Where providers did not observe the location where the person resides, they must state why they believe to the best of their knowledge based on professional judgment that the person is homeless. Housing/service providers may document homelessness even if their encounter with the client occurred in a setting other than the living location. For example a housing/service provider may document homelessness for a month in which their only encounter with the client was at a soup kitchen, drop-in center, library, office, etc.
* A letter from a **community member** (e.g., clergy person, educator, law enforcement officer, elected official, neighbor, relative, or shopkeeper) attesting to having physically observed the living location, describing that location, and specifying the months in which observation of the living location was observed. Community members may only document homelessness for months in which they observed the actual living location (e.g., saw someone bedded down in a park or on a bus, or visited their campsite).
* Documentation by the **intake worker** of the information provided orally by a community member who is unwilling to provide a written letter. Such documentation must include all details specified above as required for a letter from a community member.

**Second Priority**: Intake worker observation

* A written observation by an outreach worker of the conditions where the individual was living. Such letters must specify each month of encounter, the location of each encounter, the living conditions, and nature of the conversations that indicated the person was homeless. Intake workers may not provide documentation for months in which they did not encounter the person. Where intake workers did not observe the location where the person resides, they must state why they believe to the best of their knowledge, based on professional judgment that the person is homeless. Intake workers may document homelessness even if their encounter with the client occurred in a setting other than the living location. For example, an intake worker may document homelessness for a month in which their only encounter with the client was at a soup kitchen, drop-in center, library, office, etc.

**Third Priority:** Certification from the person seeking assistance – allowable only when qualifying for a YHDP project, or as Category 4 (DV), Chronically Homeless, or DedicatedPLUS.

* Where a person is being qualified for a YHDP project or as Category 4 (DV), Chronically Homeless, or DedicatedPLUS and first or second priority evidence as described above cannot be obtained, a certification by the individual seeking assistance is allowable. **SEE DETAILS AND LIMITATIONS ON USE OF SELF-CERTIFICATION EVIDENCE BELOW.** Such self-certification evidence must:
  + - Include a dated letter signed by the applicant attesting to the qualified locations where the applicant lived and the approximate dates living in each location; AND
    - Be accompanied by documentation by the intake worker of the living situation and circumstances that necessitate reliance on self-certified evidence (such as, client was camping in a remote area and did not have contact with any service providers or emergency shelter where client resided was unresponsive to multiple attempts to obtain third party documentation); AND
    - Be accompanied by documentation of steps taken to obtain third-party documentation, including documenting attempts to locate HMIS records and attempts to obtain letters from an emergency shelter or other service provider knowledgeable of the applicant’s homelessness. Such documentation must, at a minimum, include three attempts.
* If the project is able to obtain additional documentation of eligibility at any point during the participant’s enrollment, then the information should be added to the case file to back up intake documentation.

If at any point an applicant does not want someone to be contacted because he or she fears for their safety – the worker SHOULD NOT contact the person and should document the applicant’s statements in the case file.

**Details and limitations on use of self-certification evidence:**

* **DISABILITY –** Disability cannot be self-certified.
* **HUD CATEGORY 4 (DV) -** HUD stresses that where the safety of the individual or family may be jeopardized by an intake worker’s attempt to obtain third-party verification, that the intake worker must not attempt to obtain, under any circumstances, third-party verification and may accept written self-certification by the individual or head of household.
* **YHDP –** All project types may rely on self-certification evidence. If the intake worker cannot obtain a higher level of documentation (e.g., a letter from a third-party or intake worker observation) the youth can self-certify and the intake worker must document their effort to obtain a higher level of documentation, including notes about why they were not able to.
* **NON-YHDP TH AND RRH –** Third-party documentation or intake worker observation are required. Self-Certification is not allowed.
* **FOR DEDICATEDPLUS AND CHRONICALLY HOMELESS DEDICATED PSH -** Up to 3 months of homelessness can be documented through self-certification. In limited circumstances, up to the full 12 months of homelessness can be documented through self-certification. Self-certification of the full 12 months should be limited to rare and extreme cases and may not be used for more than 25 percent of households served by a project during an operating year. This limitation does not apply to documentation of breaks in homelessness between separate occasions, which may be documented entirely based on self-report. HUD allows self-certification while third-party documentation is gathered for up to 180 days (participants enrolled for fewer than 180 days can be excluded from the determination of whether at least 75% of participants have at least 9 months of third-party documentation).

**Cross-Cutting Requirements**

The following requirements apply to all third-party, intake worker documentation of oral evidence provided by a community member, and intake worker observation letters:

* All letters must be signed and dated.
* Where applicable, letters must be on agency letterhead.
* The name and title of the person signing must be indicated.
* If the signatory does not have a relevant title, then the letter must state his/her relationship to the client.
* All content must be legible.

**Fair Housing and Equal Access**

All CoC projects must comply with Connecticut law and HUD Fair Housing and Equal Access requirements, which prohibit discrimination on the basis of race, color, ancestry, national origin, age (except minors), religion, sex (gender), disability, children or familial status, sexual orientation, gender identity, gender expression, legal source of income (refusing to accept Section 8, for example), or Veteran status. Violations of the Fair Housing Act occur when policy or practice has an unjustified discriminatory effect, even when the provider had no intent to discriminate. Where a policy or practice that restricts access to housing on the basis of criminal history has a disparate impact on individuals of a particular race, national origin, or other protected class, such policy or practice is unlawful. In accordance with Fair Housing requirements, this project:

* Retains all application records, including outcome and reason for any denial;
* Does not use any type of blanket policy against renting to persons with criminal records;
* May, only as necessary to ensure the security of residents and property, use individualized and detailed assessments of criminal records considering only convictions;
* Ensures that use of such information in admission decisions actually assists in ensuring the security of residents and property; and
* Ensures that any use of a criminal record in admission decisions is absolutely necessary, and that no less discriminatory alternative is available.

In accordance with Connecticut law and HUD Equal Access requirements, this project:

* Is open to all eligible individuals and families regardless of sexual orientation, gender identity/expression, or marital status;
* Considers any group of people that present together for assistance and identify themselves as a family to be a family and serves them together as such;
* Does not separate families because of age or gender of household members;
* Prohibits inquiring about sexual orientation or gender identity/expression to determine eligibility;
* Provides services for transgendered individuals in a manner that corresponds to the person’s identified gender; and
* Takes reasonable steps to address participants’ safety and privacy concerns.