

## **PA-501 CONTINUUM OF CARE (COC)**

### Coordinated Entry Operating Standards

In accordance with the CoC Program Interim Rule, HUD Coordinated Entry Notice and the Coordinated Entry Policy Brief, the Capital Area Coalition on Homelessness (CACH), which is the Designated Lead Agency for Harrisburg/Dauphin County Continuum of Care (PA-501), has established this policy to enact and establish the PA-501 Continuum of Care (CoC) Coordinated Entry System.

- All CoC and ESG funded programs are required to participate in the Coordinated Entry System.
- The Coordinated Entry System will cover all geographic areas claimed by the PA-501 CoC.
- The Coordinated Entry System will ensure easy access for all individuals and families seeking housing or services.
- The Coordinated Entry System will be well-advertised.
- The Coordinated Entry System will include a comprehensive and standardized assessment tool.
- The CoC will establish a policy to address the very specific needs of individuals and families fleeing or attempting to flee domestic violence, dating violence, sexual assault, or stalking, and who are seeking shelter or services.
- The Coordinated Entry System will affirmatively market housing and supportive services, provide a strategy to ensure the availability of housing and supportive services, and ensure that all eligible households have fair and equal access to the system, especially those least likely to apply in the absence of special outreach.
- The Coordinated Entry System will be held to the Nondiscrimination Policy as set by the Governing Board.

## PA-501 CONTINUUM OF CARE (COC)

### Non-Discrimination and Affirmative Fair Housing Policy

#### **Nondiscrimination:**

HUD requires all participating providers to operate in compliance with federal nondiscrimination and equal opportunity requirements.

#### **Fair Housing:**

The Fair Housing Act prohibits discrimination in housing based on:

- Race
- Color
- National origin
- Religion
- Sex
- Familial status (families with children)
- Disability

Additionally, each program, needs to address their state, local and municipality requirements regarding fair housing rules and regulation.

#### **Reasonable Accommodations and Modification for Persons with Disabilities:**

Persons with disabilities may be entitled to reasonable accommodation and/or modifications. A request for reasonable accommodation must be made by or on behalf of a person with a disability. The request must be necessary i.e. there must be a disability related need for the reasonable accommodation or modification. In addition, the request must be reasonable. i.e. cannot impose an undue financial and administrative burden on the housing provider or fundamentally alter the nature of the provider's operations. The Act makes it unlawful to refuse to make reasonable accommodations to rules, policies, practices, or services when such accommodations may be necessary to afford persons with disabilities an equal opportunity to use and enjoy a dwelling. The Act also makes it unlawful for a housing provider or homeowners' association to refuse to allow a reasonable modification to the premises when such a modification may be necessary to afford persons with disabilities full enjoyment of the premises.

A "reasonable accommodation" is a change, exception, or adjustment to a rule, policy, practice, or service that may be necessary for a person with a disability to have an equal opportunity to use and enjoy a dwelling, including public and common use spaces.

A "reasonable modification" is a structural change made to existing premises, occupied or to be occupied by a person with a disability, in order to afford such person full enjoyment of the premises. Reasonable modifications can include structural changes to interiors and exteriors of dwellings and to common and public use areas.

A “disability” is defined as (1) individuals with a physical or mental impairment that substantially limits one or more major life activities; OR (2) individuals who are regarded as having such an impairment; OR (3) individuals with a record of such an impairment.

- The term “physical or mental impairment” includes, but is not limited to, such diseases and conditions as orthopedic, visual, speech and hearing impairments, cerebral palsy, autism, epilepsy, muscular dystrophy, multiple sclerosis, cancer, heart disease, diabetes, Human Immunodeficiency Virus infection, mental retardation, emotional illness, drug addiction (other than addiction caused by current, illegal use of a controlled substance) and alcoholism.
- The term “substantially limits” suggests that the limitation is “significant” or “to a large degree.”
- The term “major life activity” means those activities that are of central importance to daily life, such as seeing, hearing, walking, breathing, performing manual tasks, caring for one’s self, learning, and speaking. This list of major life activities is not exhaustive.

### **Required Documentation:**

A provider is entitled to obtain information that is necessary to evaluate if a requested reasonable accommodation or modification may be necessary because of a disability. If a person's disability is obvious, or otherwise known to the provider, and if the need for the requested accommodation is also readily apparent or known, then the provider may not request any additional information about the requester's disability or the disability-related need for the accommodation or modification.

If the requester's disability is known or readily apparent to the provider, but the need for the accommodation or modification is not readily apparent or known, the provider may request only information that is necessary to evaluate the disability-related need for the accommodation or modification.

If the requesters disability is not obvious or the need for the request is not obvious, a housing provider may request reliable disability-related information that (1) is necessary to verify that the person meets the Act's definition of disability (i.e., has a physical or mental impairment that substantially limits one or more major life activities), (2) describes the needed accommodation or modification, and (3) shows the relationship between the person's disability and the need for the requested accommodation or modification.

### **Guidance for Creation of Nondiscrimination and Fair Housing Policies:**

All provider agencies, including Access & Assessment Sites are required to uphold and provide to CACH, the Dauphin County PA 501 CoC designated Lead Agency, the following:

- 1) Verification that they have policies which ensures the agency does not allow discrimination and comply with all nondiscrimination, fair housing, and equal opportunity laws.
- 2) Verification of availability of aids and services, upon request, to ensure effective communication, such as the availability of qualified sign language interpreters, documents in Braille, or other ways of making information and communications accessible to people who have speech, hearing, or vision impairments.
- 3) Verification that a program has a reasonable accommodation policy that would allow a person with a disability equal opportunity to occupy and enjoy the full use of a housing unit will be provided.

- 4) If the agency acts as a landlord, verification that the agency has a reasonable modification policy that would allow a person with a disability equal opportunity to occupy and enjoy the full use of a housing unit will be provided.
- 5) Verification that the agency has a complaint procedure to report discrimination to be provided to and/or provided to program participant and contact information should also be included.

**SAMPLE:**

Contact Information from the Provider Agency:

Point of Contact: \_\_\_\_\_

Name of Agency: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Address: \_\_\_\_\_

Email: \_\_\_\_\_

**For assistance filing a housing discrimination complaint, call toll-free, PA FAIR HOUSING  
HOTLINE, 855-866-5718.**

**Affirmatively Furthering Fair Housing:**

CoC-funded Programs must affirmatively market housing and supportive services to eligible persons--regardless of race, color, national origin, religion, sex, age, familial status, or handicap--who are least likely to apply in the absence of special outreach and maintain records of those marketing activities. To ensure the coordinated entry process assists CoC Program and ESG Program recipients in meeting the Affirmatively Furthering Fair Housing requirement, the CoC is committed to providing marketing resources, auxiliary aids and other services necessary to ensure effective communication with persons accessing the homeless response system, which includes ensuring that information is provided in appropriate accessible formats as needed, such as Braille, audio, large type, assistive listening devices, and sign language interpreters, as well as accommodation for persons with limited English proficiency. Resources will be developed and made available by the CACH Coordinated Entry Committee and marketing plans described within the Coordinated Entry Policy and Procedure Manual.

Housing assisted by HUD and made available through the CoC must also be made available to individuals and families without regard to actual or perceived sexual orientation, gender identity, or marital status in accordance with 24 CFR 5.105 (a)(2).

**Resources:**

HUD template for creation of Affirmative Fair Housing Marketing Plan (HUD Form 935.2a):

**Multi-Family Housing:** <http://portal.hud.gov/hudportal/documents/huddoc?id=935-2a.pdf>

**Single Family Housing:** <https://www.hud.gov/sites/documents/935-2B.PDF>

## PA-501 CONTINUUM OF CARE (COC)

### Fair and Equal Access Policy

#### **Policy:**

The CoC will ensure that the Coordinated Entry System (CES) meets the requirements of the Equal Access to Housing in HUD Programs Regardless of Sexual Orientation or Gender Identity Rule. HUD's Equal Access Rule (EAR) requires equal access to HUD programs without regard to a person's actual or perceived sexual orientation, gender identity, or marital status.

#### **Procedure:**

- A. *Equal Access in accordance to gender identity.*** The admissions, occupancy, and operating policies and procedures of recipients of CoC or ESG funding, including policies and procedures to protect privacy, health, safety, and security, shall be established or amended, as necessary, and administered in a nondiscriminatory manner to ensure that:
- 1) Equal access to programs, shelters, other buildings and facilities, benefits, services, and accommodations is provided to an individual in accordance with the individual's gender identity, and in a manner that affords equal access to the individual's family;
  - 2) An individual is placed, served, and accommodated in accordance with the gender identity of the individual;
  - 3) An individual is not subjected to intrusive questioning or asked to provide anatomical information or documentary, physical, or medical evidence of the individual's gender identity; and
  - 4) Eligibility determinations are made and assisted housing is made available in programs as required by HUD in [§ 5.105\(a\)\(2\)](#).
- B. *Equal Access in accordance to family composition*** - Programs cannot discriminate against a group of people presenting as a family based on the composition of the family (e.g., adults and children or just adults), the age of any member's family, the disability status of any members of the family, marital status, actual or perceived sexual orientation, or gender identity." If a shelter serves any families, it must serve all families. In particular: A shelter or housing program may limit assistance to households with children, however, it may not limit assistance to only women with children. Programs serving families may not limit assistance based on the ages/genders of the children. Programs may not limit assistance based on the marital status of the adults or the gender of the adults.
- C. *Placement and accommodation in temporary, emergency shelters and other buildings and facilities with shared sleeping quarters or shared bathing facilities*** –
- 1) ***Placement and accommodation.*** Placement and accommodation of an individual in temporary, emergency shelters and other buildings and facilities with physical limitations or

configurations that require and are permitted to have shared sleeping quarters or shared bathing facilities shall be made in accordance with the individual's gender identity.

- 2) ***Post-admission accommodations.*** A recipient, sub recipient, owner, operator, manager, or provider must take nondiscriminatory steps that may be necessary and appropriate to address privacy concerns raised by residents or occupants and, as needed, update its admissions, occupancy, and operating policies and procedures in accordance with Section (A) of this section.
- 3) ***Documentation and record retention.*** Providers shall document and maintain records of compliance with the requirements in Section (A) of this section for a period of 5 years.

**For more information on ensuring your program operates in alignment with equal access requirements, please see HUD training available online here:**

**<https://www.hudexchange.info/course-content/equal-access-and-genderidentity-rules-training/Implementing-HUDs-Equal-Access-and-Gender-Identity-Rules-Slides2016-11-17.pdf>.**

## PA-501 CONTINUUM OF CARE (COC)

### Access/Barriers Policy

#### **HUD Coordinated Entry Notice: Section 11.B.4 States:**

CoCs must maintain Coordinated Entry written standards that prohibit the coordinated entry process from screening people out of the coordinated entry process due to perceived barriers related to housing or services, including, but not limited to, too little or no income, active or a history of substance use, domestic violence history, resistance to receiving services, the type or extent of 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—with exceptions for state or local restrictions that prevent projects from serving people with certain convictions

#### **Background:**

Housing First is an approach in which housing is offered to people experiencing homelessness without preconditions (such as sobriety, mental health treatment, or a minimum income threshold) or service participation requirements and in which rapid placement and stabilization in permanent housing are primary goals. CoC and ESG funded projects that use a Housing First approach promote the acceptance of applicants regardless of their sobriety or use of substances, completion of treatment, or participation in services. The United States Department of Housing and Urban Development (HUD) encourages all recipients of Continuum of Care (CoC) Programs to follow a Housing First approach. Any recipient that indicated they would follow a Housing First approach in their CoC Project Application must do so throughout the full grant term of any funded application.

#### **Applicability:**

At minimum, all CoC- funded Permanent Supportive Housing (PSH), Rapid Rehousing (RRH), and Transitional Housing (TH) programs will maintain marketing and tenant selection policies and procedures that follow a Housing First approach as noted below.

#### **Policy:**

The PA-501 CoC requires agencies and programs alike to have the following core elements incorporated in all program types:

- 1) Admission/tenant screening and selection practices promote the acceptance of applicants regardless of their sobriety or use of substances, completion of treatment, and participation in services.
- 2) Applicants may not be rejected by agencies based on poor credit or financial history, income, poor or lack of rental housing, minor criminal convictions, or behaviors that indicate lack of “housing readiness.”
- 3) Providers accept referrals directly from shelters, street outreach, drop-in centers, and other parts of crisis response systems that are integrated into Coordinated Entry and are frequented by vulnerable people experiencing homelessness.
- 4) Supportive services emphasize engagement and problem-solving over therapeutic goals. Service plans are highly tenant-driven without predetermined goals. Participation in services or program

compliance is not a condition of permanent supportive housing. Rapid Re-Housing programs may require case management as a condition of receiving rental assistance.

- 5) Use of alcohol or drugs in and of itself (without other lease violations) is not considered reason for eviction by the Agency. Receiving approval from the CoC, agencies may adopt a “no use or consumption” on property rule.



**PA-501 CONTINUUM OF CARE (COC)****Management Policy on Domestic Violence, Dating Violence, Sexual Assault,  
Trafficking, and/or Stalking****Policy:**

- 1) The PA-501 CoC Board of Directors are aware and understand the need for protection policies to address the safety planning needs of all individuals and families who are fleeing, or attempting to flee, domestic violence, dating violence, sexual assault, human trafficking or stalking. It is the intention of the CoC to ensure that the Coordinated Entry System has built into its core the safety factor as a major part of all parts of the Coordinated Entry System.
- 2) All providers, including non-victim service providers, must provide safe and confidential access to the CES for all people, including those who are fleeing/attempting to flee and survivors of domestic violence (including dating violence, sexual assault, trafficking, and/or stalking).
- 3) The Coordinated Entry System will include the following safety precautions:
  - a. All persons who are fleeing, or attempting to flee, domestic violence, dating violence, sexual assault, human trafficking or stalking shall expect and receive safe, confidential access to the Coordinated Entry System including immediate access to the emergency services necessary for their safety including, but not limited to, the domestic violence hotlines, shelter, safety planning and housing when possible.
  - b. These persons shall remain anonymous within the HMIS Coordinated Entry Assessment and during the initial assessment processes.
  - c. Participating providers of the CES will ensure that no participant be denied access to the CES on the basis that the participant is or has been a victim of domestic violence, dating violence, sexual assault, human trafficking or stalking.
  - d. Safety and Confidentiality Training shall be provided at least annually to all Assessment Centers to ensure that safety is in the forefront during assessment and housing determination periods.
  - e. Access and Assessment Centers must obtain written consent from the victims before permitted to share information with PA HMIS/CE participating agencies following their agency' sharing of information protocols.
  - f. Personal Identification information of an identified victim should never be disclosed in an email.

**Procedures:**

- 1) All households accessing the CES are asked if they are fleeing/attempting to flee domestic violence during the screening procedure. If a household is identified as fleeing/attempting to flee domestic violence, the Coordinated Entry Specialist will offer an immediate referral to the

state contracted domestic violence program for Dauphin County, the YWCA Greater Harrisburg's Violence Intervention & Prevention Services, for safety planning and accessing emergency services, such as domestic violence hotlines and shelters.

- 2) The household has the right to decline any and all referrals to, or assistance with access to, these emergency services. Declining these referrals or assistance will not have a negative impact on the person's ability to obtain housing and services accessible via the CES. Safety planning will then be the responsibility of the Coordinated Entry Specialist.
- 3) The CoC Coordinated Entry Committee will have at least one representative from the YWCA Greater Harrisburg's Violence Intervention & Prevention Services at all times to provide policy and practice guidance on behalf of people who are fleeing/attempting to flee and survivors of domestic violence.
- 4) The CoC CES will include the state contracted domestic violence program for Dauphin County, which must maintain a hotline staffed 24 hours a day, seven days a week by trained domestic violence advocates to ensure that all households who are fleeing or attempting to flee domestic violence or sexual assault have immediate access to crisis response services. All persons will have access to this hotline regardless of which access point they initially contact for services and assistance through the CoC's CES.

## **PA-501 CONTINUUM OF CARE (COC)**

### Coordinated Entry System Grievance Policy and Procedure

This policy refers to grievances regarding the PA 501 Coordinated Entry System services only. The CoC Board of Directors prohibits retaliation of any kind against individuals or agencies issuing a grievance.

#### **Definitions:**

Coordinated Entry System services (CES services) refers only to Coordinated Entry System tasks: screening, assessment, and referral. Services other than these specified tasks fall outside the scope of this grievance process. For example, provider housing or services that is unrelated to Coordinated Entry screening, assessment or placement referral, or which occur after admission to a provider through CES referral is not purview to this grievance policy.

Coordinated Entry Agencies (CES Agency) are agencies that have a mandate or Memorandum of Understanding to administer or receive referrals from CES services.

Complaint is an objection expressed by a CES service recipient regarding a CES service administered or CES referral received by a CES agency. The nature of a complaint could be dissatisfaction about a CES service provision or outcome. A complaint can also be a concern that a CES policy or requirement is not being followed.

Grievance is formal submission of a complaint to the Coordinating Entry Committee regarding a CES service administered or CES referral received by a CES agency.

Petitioner is the person or party that issues a grievance.

Respondent Agency refers to the CES agency administering a CES service or receiving a CES referral that is the subject of a complaint or grievance.

### **Complaint and Grievance Process**

The Coordinated Entry System Grievance Policy advocates a process that brings resolution as early and as least escalated a manner as possible. This process therefore advocates two steps: a compliant process and filing a grievance.

#### **Complaint:**

A person wishing to express a complaint is encouraged, but not required, to address the complaint directly with the pertinent respondent agency, utilizing that agency's internal procedure for collecting and resolving complaints or grievances. The respondent agency should maintain internal documentation of all complaints received, although the information should not be sent to the Coordinated Entry Committee unless requested. If a solution is determined and no further action is taken by the complainant, the complaint is considered resolved.

If the complaint cannot be resolved to the satisfaction of the issuing person, or if that person desires not to engage the respondent agency, a grievance may directly be submitted to the Coordinating Committee.

At any time and at any step of a complaint or grievance process, a person has the right to be assisted by an advocate of their choice (e.g., agency staff person, co-worker, friend, family member, etc.)

### **Filing a Grievance:**

A grievance has to be submitted in writing and delivered by mail, fax, or email to the following:

Coordinated Entry Committee Chair, C/O

Capital Area Coalition on Homelessness (CACH)

10 North Second Street, Suite 405

Harrisburg, PA 17101

Fax: 717-238-5342

Email: [dritchey@hra-harrisburgpa.org](mailto:dritchey@hra-harrisburgpa.org)

The completed *Coordinated Entry Grievance and Appeals* form is required to formally submit a grievance. At a minimum, the petitioner must include the following:

1. Petitioner's name and contact information;
2. Respondent Agency about whom the grievance is being filed;
3. Grievance Description.

The description should be as specific as possible and contain

- name of the agency performing or receiving the CES service or referral that is in dispute;
- specific CES service or result in question and stated reasons why it is disputed;
- date and time of any perceived CES wrong incident or violation;
- other actions taken by or on behalf of the petitioner to resolve the issue;
- any other detail that may be helpful to the Coordinated Entry Committee;
- signature and date;
- if an agency or advocate is assisting on the petitioner's behalf, the petitioner's must identify that advocate or agency and indicate their consent in written form.

Grievances that do not contain the contact information of the petitioner, or grievances filed by an unauthorized third party will not be considered, and no further action will be taken.

The Petitioner has the right to withdraw his/her grievance at any time.

Grievances must be filed with the Coordinated Entry Committee within 60 calendar days from the date of the incident. Grievances filed after 60 calendar days from the date of the incident will not be reviewed by the Coordinated Entry Committee.

Reasonable accommodations are available upon request.

## **Grievance Review:**

The Coordinated Entry Committee Chairperson receives the grievance and convenes a conflict-free Grievance Review Team of a minimum of 3 people free of any conflicts of interest. The Grievance Review Team will review all information and conduct interviews with the petitioner stated in the grievance and gather relevant information about the situation within 5 business days of the grievance.

A member of the Grievance Review Team will notify the agency stated in the grievance within 5 business days of completing the interview with the petitioner of the grievance. This notification will be sent to the staff member listed on the Agency Participation Agreement. The notification will contain as much information as possible regarding the complaint and the desired outcome of the petitioner. Agencies will have 5 business days from receiving the grievance notification to provide a response if they would like it to be included in the grievance review by the Grievance Review Team.

The Grievance Review Team will then review all information gathered from the petitioner and the respondent agency. This can include but is not limited to reviewing agency client files, HMIS records, interviewing agency staff, or interviewing witnesses or other involved parties. This review process will be completed within 10 business days from the date the agency was notified of the grievance.

Following the grievance review process, the Coordinated Entry Committee shall make a determination as to whether the grievance has been substantiated as a violation of the Coordinated Entry System Policies and Procedures. The Committee will provide a Determination Letter to the Respondent Agency and the Petitioner of the determination result. If a violation is determined, the determination letter will include a Corrective Action Plan detailing the required action and timeline for resolution and compliance for the respondent agency.

The Respondent Agency that is issued a corrective action plan may request a meeting, in person or via telephone, to discuss the implementation of the corrective action plan. The Coordinated Entry Manager may provide training and reasonable assistance in the agency's effort to comply. All efforts shall be made to resolve grievances in a timely manner. The time frames provided indicate a maximum number of days for each step in the process.

## **Grievance Appeal:**

An appeal may be filed with the CoC Board of Directors if either party believes the Grievance Review Team failed to comply with the Coordinated Entry policies and procedures for investigating a grievance, acted in an unreasonable manner, would like to have new information considered that was not previously available, or do not agree with the findings based on the evidence presented. An appeal must be submitted in writing within 5 business days from the date marked on the determination letter from the Coordinated Entry Committee. Appeals received after 5 calendar days from the date of the letter will not be reviewed. The Appeal must clearly state the reasons for the appeal i.e. what factor(s) the Board should consider as merit for overturning the determination.

The CoC Board of Directors will review the appeal and may designate one or more Board members to review the appeal, supporting documentation, and collect additional information necessary to consider the appeal. The Board President or designated Board member(s) or other assigned committee will inform the appealing party in writing of their determination within 10 business days from the date of the appeal letter. The decision of the CoC Board of Directors is final.

## **Coordinated Entry Grievance Timeline:**

### **Step 1: Incident occurs**

- A grievance can be filed within 60 calendar days from the date of the incident or 60 calendar days after a final action of a complaint process.

### **Step 2: Grievance filed**

- Coordinated Entry Committee will convene a conflict-free Grievance Review Team. The Grievance Review Team will conduct interviews with the petitioner and gather relevant information about the situation within 5 business days of the grievance.

### **Step 3: Agency Notification**

- The Grievance Review Team will notify the agency stated in the grievance within 5 business days of completing the interview with the petitioner of the grievance.

### **Step 3: Agency Response**

- The agency will have 5 business days from receiving the grievance notification to provide a response.

### **Step 4: Review and Decision**

- The Grievance Review Team will then conduct a review of all information gathered from the petitioner and the agency and make a determination. This review process will be completed within 10 business days from the date the agency was notified of the grievance.

### **Step 5: Appeal**

- The respondent agency or petitioner can submit an appeal to the CoC Board of Directors within 5 business days from the date marked on the determination letter.

### **Step 6: Response to Appeal**

- The CoC Board of Directors shall review and make a final decision within 10 business days from the date of the appeal letter.

## **PA-501 CONTINUUM OF CARE (COC)**

### **Housing Prioritization Policy for All CoC and ESG-Funded Projects**

#### **Policy:**

The CoC will use the CES to prioritize households who meet the HUD Category 1 (literally homeless) and 4 (fleeing or attempting to flee domestic violence) definition of homelessness in all CoC and ESG funded projects within the CoC geographical area for access to housing and services. The prioritization process will be based on a specific and definable set of criteria that are made publicly available and which must be applied consistently throughout the CoC for all populations.

#### **Order of Priority:**

All CoC and ESG funded projects are required to prioritize individuals and families with the longest history of homelessness and with the most severe service needs for all available CoC resources. ESG grantees should follow their current approved written standards on prioritization. The CoC will use data collected through the CES process to prioritize households experiencing homelessness within the CoC's geographical area for the following housing interventions:

#### **Prioritizing Eligible Households for Permanent Supportive Housing:**

For permanent supportive housing programs (PSH), households must meet both the HUD definition of homelessness under Category 1 (literally homeless) and have a disability. Programs/Projects may not establish additional eligibility requirements beyond those specified in Category 1 (literally homeless) and those required by funders. Households eligible for PSH will be prioritized for available units based on the following criteria:

All CoC PSH programs are required to follow the CoC's order of prioritization which prioritizes households with the longest history of homelessness and with the most severe service needs. The Coordinated Entry Assessment Tool will provide a score for each assessed household which is directly related to the household's length of time homeless and service needs. Providers will utilize the Housing Prioritization List to offer housing placements to the individual or family with highest acuity first. As a reminder, consumer choice is paramount to this process.

#### **Prioritizing Eligible Households for Rapid Re-Housing Programs:**

All CoC RRH projects are required to follow the CoC's order of prioritization which prioritizes households with the longest history of homelessness and with the most severe service needs. The Coordinated Entry Assessment Tool will provide a score for each assessed household which is directly related to the household's length of time homeless and service needs. Providers will utilize the Housing Prioritization List to offer housing placements to the individual or family with highest acuity first. As a reminder, consumer choice is paramount to this process.

#### **Prioritizing Eligible Households for Transitional Housing:**

It is the goal of the CoC to place households experiencing homelessness into permanent housing as quickly as possible. The CoC recognizes that Transitional Housing is an important option for certain population groups (Youth, DV, etc.) and when no permanent housing is readily accessible.

All Transitional Housing projects are required to follow the CoC's order of prioritization which prioritizes households with the longest history of homelessness and with the most severe service needs. The Coordinated Entry Assessment Tool will provide a score for each assessed household which is directly related to the household's length of time homeless and service needs. Providers will utilize the Housing Prioritization List to offer housing placements to the individual or family with highest acuity first. As a reminder, consumer choice is paramount to this process and providers should notify consumers that placement in TH may affect their future eligibility for other projects such as PSH or RRH.

**Prioritizing the Chronically Homeless:**

By following the foundational ranking principles used for prioritization, the chronically homeless sub-population will automatically be at the top of the Prioritization List for each housing intervention resource available in the CoC.

\*In the event that two or more homeless households within the same geographic area are identically prioritized for the next available unit, and each household is also eligible for that unit, the CoC selects the household that first presented for assistance in the determination of which household receives a referral to the next available unit.



**PA-501 Continuum of Care (CoC)**  
**Evaluating and Updating Coordinated Entry Policies and Procedures**

**Policy:**

The implementation of coordinated entry necessitates significant, community wide change. To help ensure that the system will be effective and manageable for homeless households and for the housing and service providers tasked with meeting their needs, particularly during the stages of implementation, the CoC anticipates adjustments to the processes described in this manual. To inform those adjustments, the Coordinated Entry System will be periodically evaluated and there will be ongoing opportunities for stakeholder feedback.

The PA CoC has designated the Coordinated Entry Committee of CACH as the entity responsible for Coordinated Entry and the following tasks:

- Leading periodic evaluation efforts to ensure that Coordinated Entry is functioning as intended. This will be completed annually at minimum.
- Leading efforts to make periodic adjustments to Coordinated Entry as determined necessary. This will be completed annually at minimum.
- Ensuring that evaluation and adjustment processes are informed by a broad and representative group of stakeholders.
- Ensuring that the Coordinated Entry System is updated as necessary to maintain compliance with all state and federal statutory and regulatory requirements. Changes will occur when a statutory or regulatory requirement is superseded, rescinded or amended.
- Actively evaluate policies and procedures affecting access and interventions for different subpopulations based on vulnerability to public health outbreaks or pandemics. The Coordinated Entry Committee will evaluate and adjust the prioritization policies based on evolving information and circumstances during a pandemic, including new or improved data, changing needs and priorities, and available resources.

## DAUPHIN COUNTY COORDINATED ENTRY SYSTEM SCREENING FORM

**Begin Script:** "To determine what services may be available for you, I will need to collect some basic information about your current situation. This information is confidential and will only be used to assist you in accessing appropriate resources. You may refuse to answer any question but doing so may mean you will not be referred to available resources that might best help you in your current situation. Do I have your permission to collect this information?"  Yes  No

<b>Demographics:</b>	
Date: _____	Caller Name: _____
Do you have an email or phone number by which you can be contacted? _____ _____	
Is there a secondary way that we can reach you? _____	
Caller Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Transgender <input type="checkbox"/> Other	
Number of Persons 18 or older: _____ Number of Persons 17 or younger: _____	

**1. Are you currently fleeing or attempting to flee a situation related to domestic violence, sexual assault, dating violence, stalking, or human trafficking in which someone hurt you, makes you feel unsafe, or has made you do something you did not wish to do?**

<input type="checkbox"/> Yes <input type="checkbox"/> No	<b>ACTION</b> <input type="checkbox"/>	<b>If Yes: Go to Question #5 – Refer to YWCA of Greater Harrisburg for DV services.</b> <b>If No: Proceed to question #2.</b>
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**2. Have you or any adult currently in your household ever served in any branch of the US military?**

<input type="checkbox"/> Yes <input type="checkbox"/> No	<b>ACTION</b> <input type="checkbox"/>	<b>If Yes: Go to #6 – Refer to the YWCA or Volunteers of America SSVF Housing.</b> <b>If No: Proceed to Question #3.</b>
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**3. In which County of PA did your homelessness originate?** \_\_\_\_\_

**4. Where have you been staying for the last 7 days? (Check all that apply.)**

<input type="checkbox"/> Street <input type="checkbox"/> Park <input type="checkbox"/> Abandoned building <input type="checkbox"/> Woods/Outdoors <input type="checkbox"/> Emergency Shelter <input type="checkbox"/> Transitional Housing <input type="checkbox"/> Vehicle <input type="checkbox"/> Motel/hotel paid by agency/church <input type="checkbox"/> Exiting an institution where they temporarily resided for 90 days or less (must be in shelter or a place not meant for human habitation immediately prior to entering that institution)	<b>ACTION</b> <input type="checkbox"/>	<i>*This household is determined to be LITERALLY HOMELESS and eligible for Coordinated Entry.</i>  <b>Proceed to #7 – Refer to Coordinated Entry Access Site closest to the household for CE Assessment and Prioritization.</b>
<input type="checkbox"/> House or apartment of their own (eviction pending) <input type="checkbox"/> Doubled up with family/friends <input type="checkbox"/> Other, Specify: _____	<input type="checkbox"/>	The housing status of this household does not meet the HUD Definition 1 of Homelessness and is NOT eligible for Coordinated Entry at this time. <b>Proceed to #8.</b>

**5. Refer to the YWCA of Greater Harrisburg- Domestic Violence Services: (1-800-654-1211).** Please note that a person fleeing/attempting to flee a domestic violence situation are eligible for CE even if they are not literally homeless and may receive a referral for both the DV Shelter/Services and also be referred to the CE Access Site for Assessment.

**6. Refer Veterans: YWCA SSVF and Veterans Programs: 717-234-7931.**  
*Volunteers of America SSVF Program: 717-236-1440.*

**7. Referral to Coordinated Entry Access Site:** Please fax a copy of this form to the HELP Ministries Office at 717-238-1916 for assessment and prioritization for housing interventions. Tell the client that they are being referred to the HELP Office and should receive a call back within 72 hours of their call.

**8. Referral to Prevention Resources:** Provide the person with direct referrals, including address and phone number, to homeless prevention and self-sufficiency services (e.g. food pantries, community action programs, public benefits access, etc.).

<b>Staff Name:</b>	<b>Agency:</b>	<b>Phone #:</b>
<b>Please list all referrals provided to Caller:</b>		

**\*Before ending the Call:** *Please let the client know that if they have not heard anything from a Coordinated Entry Specialist at the HELP Ministries Office within 72 hours to call back to 211 and talk to a call center staff person.*

**VI-SPDAT ASSESSMENT TOOL**  
Coordinated Entry System Assessment  
Capital Area Coalition on Homelessness (CACH)

**VULNERABILITY ASSESSMENT: Must Complete**

There are three different types of Vulnerability Index Assessments (VI-SPDAT):

**Check the one that applies:**

- VI-SPDAT (This assessment for singles not families)
- VI-FSPDAT (This for families including 18-24 yr old head of families) **Extra questions for families is in red**
- TAY-VI-SPDAT (Use this for unaccompanied minors, or 18-24 yrs. but who are single i.e. not a family with children) - **Extra questions for TAY in blue**

*The question numbers in the combined VI-SPDAT tables below follows the numbering of the separate types of VI-SPDATs and therefore do not progress numerically*

<b>BASIC INFORMATION (VI-FSPDAT – Families)</b>	
1. Is either head of household 60 years of age or older?	Yes No Refused
2. How many parents are included in this family?	0, 1, 2, 3 or more, refused
<b>CHILDREN (VI-FSPDAT – Families)</b>	
1. How many children under the age of 18 are currently with you?	0, 1, 2, 3 or more, refused
2. How many children under the age of 18 are not currently with your family, but you have reason to believe they will be joining you when you get housed?	0, 1, 2, 3 or more, refused
3. IF HOUSEHOLD INCLUDES A FEMALE: Is any member of the family currently pregnant?	Yes No Refused
4. If your family includes children, are any of them...	
4. a) ages 6 or younger?	Yes No Refused
4. b) ages 11 or younger?	Yes No Refused
4. c) You may use this area to provide a list of children's names and ages:	
<b>A. HISTORY OF HOUSING AND HOMELESSNESS</b>	
1. Where do you sleep most frequently? (choose one)	Shelters, TH, Safe Haven, Outdoors, Others (specify below), Refused

If Other, please specify	
2. How long has it been since you (or family) lived in permanent stable housing?	Currently in Stable Housing, < 1 year, 1 year or more, Refused
3. In the last three years, how many times have you (or family) been homeless?	0, 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 10+, Refused
<b>B. RISKS</b>	
4. In the past six months, how many times have you (or family)	
4. a) Received health care at an emergency department/room?	0, 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 10+, Refused
4. b) Taken an ambulance to the hospital?	0, 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 10+, Refused
4. c) Been hospitalized as an inpatient?	0, 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 10+, Refused
4. d) Used a crisis service, including sexual assault crisis, mental health crisis, family/intimate violence, distress centers and suicide prevention hotlines?	0, 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 10+, Refused
4. e) Talked to police because you witnessed a crime, were the victim of a crime, or the alleged perpetrator of a crime, or because the police told you that you must move along?	0, 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 10+, Refused
4. f) Stayed one or more nights in a holding cell, jail, or prison, whether that was a short-term stay like the drunk tank, a longer stay for a more serious offense, or anything in between?	0, 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 10+, Refused
5. Have you (or family) been attacked or beaten up since you became homeless?	Yes No Refused
6. Have you (or family) threatened to or tried to harm yourself or anyone else in the last year?	Yes No Refused
7. Do you (or family) have any legal stuff going on right now that may result in you being locked up, having to pay fines, or that make it more difficult to rent a place to live?	Yes No Refused

8. Does anybody force or trick you (or family) to do things you do not want to do?	Yes No Refused
9. Do you (or family) do things that may be considered to be risky, like exchange sex for money, run drugs for someone, have unprotected sex with someone you don't know, share a needle, or anything like that?	Yes No Refused
<b>C. SOCIALIZATION &amp; DAILY FUNCTIONING</b>	
10. Is there any person, past landlord, business, bookie, dealer, or government group like the IRS that thinks you (or family) owe them money?	Yes No Refused
11. Do you (or family) get any money from the government, a pension, an inheritance, working under the table, a regular job, or anything like that?	Yes No Refused
12. Does you (or family) have planned activities, other than just surviving, that makes you feel happy and fulfilled?	Yes No Refused
13. Are you (or family) currently able to take care of basic needs like bathing, changing clothes, using a restroom, getting food and clean water and other things like that?	Yes No Refused
14. Is your (or family) current homelessness in any way caused by a relationship that broke down, an unhealthy or abusive relationship, or because other family or friends caused you to become evicted?	Yes No Refused
For Transition Age Youth or Minors -15. Is your current lack of stable housing...	Only for Single Youth ages 24 or below
15. a) Because you ran away from your family home, a group home or a foster home?	Yes No Refused
15. b) Because of a difference in religious or cultural beliefs from your parents, guardians or caregivers?	Yes No Refused
15. c) Because your family or friends caused you to become homeless?	Yes No Refused)
15. d) Because of conflicts around gender identity or sexual orientation?	Yes No Refused
15. e) Because of violence at home between family members?	Yes No Refused

15. f) Because of an unhealthy or abusive relationship, either at home or elsewhere?	Yes No Refused
<b>D. WELLNESS</b>	
15. Have you (or family) had to leave an apartment, shelter program, or place you were staying because of physical health?	Yes No Refused
16. Do you (or family) have any chronic health issues with your liver, kidneys, stomach, lungs, or heart?	Yes No Refused
17. If there was space available in a program that specifically assists people that live with HIV or AIDS, would that be of interest to you (or family)?	Yes No Refused
18. Do you (or family) have any physical disabilities that would limit the type of housing you could access, or would make it hard to live independently because you'd need help?	Yes No Refused
19. When you (or family) sick or not feeling well, do you avoid getting medical help?	Yes No Refused
20. FOR FEMALE RESPONDENTS ONLY: Are you pregnant?	Yes No Refused
21. Has drinking or drug use led you (or family) to be kicked out of an apartment or program where you were staying in the past?	Yes No Refused
22. Will drinking or drug use make it difficult for you (or family) to stay housed or afford your housing?	Yes No Refused
23. Have you (or family) ever had trouble maintaining your housing, or been kicked out of an apartment, shelter program or other place you were staying, because of:	
23. a) A mental health issue or concern?	Yes No Refused
23. b) A past head injury?	Yes No Refused
23. c) A learning disability, developmental disability, or other impairment?	Yes No Refused
24. Do you (or family) have any mental health or brain issues that make it hard for you to live independently but need help?	Yes No Refused

25. Are there any medications that a doctor said you (or family) should be taking that, for whatever reason, you are not taking?	Yes No Refused
26. Are there any medications like painkillers that you (or family) don't take the way the doctor prescribed or where you sell the medication?	Yes No Refused
27. YES OR NO: Has your (or family) current period of homelessness been caused by an experience of emotional, physical, psychological, sexual, or other type of abuse, or by any other trauma you have experienced?	Yes No Refused
<b>E. FAMILY UNIT (only for Families)</b>	<b>Only for Families</b>
<p>28. If the family answered</p> <p>Yes to any Physical health questions (15 to 19 above) <u>AND</u></p> <p>Yes to any substance use questions (21 and 22 above) <u>AND</u></p> <p>Yes to any mental health questions (23 and 24 above)</p> <p>28A. Does any single member of your household have a medical condition, mental health concern, and experience with problematic substance use?</p>	
32. Are there any children that have been removed from the family by a child protection service within the last 180 days?	Yes No Refused
33. Do you have any family legal issues that are being resolved in court or need to be resolved in court that would impact your housing or who may live within your housing?	Yes No Refused
34. In the last 180 days have any children lived with family or friends because of your homelessness or housing situation?	Yes No Refused
35. Has any child in the family experienced abuse or trauma in the last 180 days?	Yes No Refused
36. IF THERE ARE SCHOOL-AGED CHILDREN: Do your children attend school more often than not each week?	Yes No N/A Refused
37. Have the members of your family changed in the last 180 days, due to things like divorce, your kids coming back to live with you,	Yes No Refused



someone leaving for military service or incarceration, a relative moving in, or anything like that?	
38. Do you anticipate any other adults or children coming to live with you within the first 180 days of being housed?	Yes No Refused
39. Do you have two or more planned activities each week as a family, such as outings to the park, going to the library, visiting other family, watching a family movie, or anything like that?	Yes No Refused
<i>40. After school, or on weekends or days when there isn't school, is the total time children spend each day where there is no interaction with you or another responsible adult...</i>	
40. a) 3 or more hours per day for children aged 13 or older?	Yes No Refused
40. b) 2 or more hours per day for children aged 12 or younger?	Yes No Refused
<b>41. IF THERE ARE CHILDREN BOTH 12 AND UNDER &amp; 13 AND OVER:</b>	
41. a) Do your older kids spend 2 or more hours on a typical day helping their younger siblings(s) with things like getting ready for school, helping with homework, making them dinner, bathing them, or anything like that?	Yes No N/A Refused

## LOAD (Length of Assistance Determination) Assessment Tool

The Length of Assistance Determination Assessment uses the following questions to discern whether a household will require long term or short-term subsidized housing assistance. The assessment will be used to determine whether a household will be referred to short term or long term RRH and for short term TH.

### Length of Assistance Determination:

1. Income level compared to household Area Median Income (AMI)
  - a. (Extremely Low Income) Monthly Income is at or below 30 percent of AMI= 3 points
  - b. 30 – 50 percent of AMI = 2 points
  - c. 50 – 80 percent of AMI = 1 point
2. Any STEADY income sources? If “No” = 3 points
3. How many months employed in the last 12 months? Less than 6 months = 3 points
4. Recently applied for disability income (if applicable). If “No” = 3 points
5. Disability Income application status (if applicable). Anything but “Pending” = 3 points
6. Only need short (3 months or so) or one time rent/utility assistance? If “No” = 5 points
7. If longer assistance is needed, is participant willing and able to work? If “No” = 5 points
8. Owe any rental or utility arrears? Choose an option.
  - a. If “Yes”, but less than \$500 = 1 point
  - b. If “Yes”, but greater or equal to \$500 = 2 points
9. Experienced a sudden or significant drop in income = 3 points
10. Has Poor Credit = 3 points
11. Has a Significant Health Issue = 1 point
12. Has a Substance Use Issue = 1 point
13. Has a Mental Health Issue = 1 point

### Scoring Rubric:

**Short Term RRH (up to 6 months or one-time payment of security deposit or arrears) < 10 points**

**Long Term RRH (up to 24 months) > 10 points**

**Example of RRH Referral using LOAD for CES List**

Name	VI-SPDAT Housing	VI-SPDAT Total	LOAD Score	Population Focus for Eligible Programs	RRH Housing intervention
Jane Doe	2	7	10		Short Term RRH
Jack Frost	2	4	23		First PSH. If not available, then long term RRH is a secondary intervention.
Annie Example	2	3	13	Large Family	Short Term RRH
Mel Ware	1	10	11	VAWA	Short Term RRH
Noah Flood	1	8	27		Long Term RRH

In the above table, households are prioritized by their SPDAT housing score and then VISPDAT total. The likely length of RRH intervention as determined by the LOASD score assigns them to short or long term RRH intervention. For example, coordinated RRH placement will use short term RRH to serve Jane Doe first and Annie Example next, after assigning Jack Frost to long term RRH allocation. Next, programs have population eligibility requirement or focus which is the next factor for appropriate referral.

**Grievance & Appeal Process for Participants in the CES  
PA-501 PA Continuum of Care (CoC)  
Coordinated Entry Grievance and Appeals Form**

*If there is a problem or concern, we want to know about it. The information on this form will be used to address your concerns and otherwise kept confidential. If you need assistance completing this form, please contact \_\_\_\_\_. You can expect a response within **30 working days**. Completing this form will not negatively affect your status within the Coordinated Entry system.*

Name of person completing this form: \_\_\_\_\_

Who should we follow up with regarding this form: \_\_\_\_\_

Cell # \_\_\_\_\_ Email: \_\_\_\_\_

Secondary Phone # \_\_\_\_\_ Fax # \_\_\_\_\_

Preferred Method of Contact:       Call               Email

Can we leave confidential info?       Voicemail               Email               Live call

Alternative contact information: \_\_\_\_\_

Can we leave confidential info?       Yes               No

Program staff, agency/site involved in incident: \_\_\_\_\_

What is this in regard to?

- Housing Assessor
- The assessment
- Coordinated entry system score, homeless status, or recommended housing intervention
- Provider (housing, shelter, or other agency involved in Coordinated Entry)
- Denial from housing program
- Other \_\_\_\_\_

**Narrative Description of Incident** – (Use back of form if necessary.)

- Explain the complaint or grievance (names of those involved and dates);
- How has your concern been addressed? (by you or others);
- What would you like to see happen?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*Please email this completed form or the answers to these questions to:*



## Capital Area Coalition on Homelessness

### CACH Client Information Management System (CCIMS) & Coordinated Entry Consent for Data Collection and Release of Information

The CACH Client Information Management System (CCIMS) is a data system that stores information about homelessness services in Dauphin County. The Capital Area Coalition on Homelessness (CACH) manages the CCIMS for the County. The purpose of the CCIMS is to improve services that support people who are homeless to get housing and have better access to those services while meeting requirements of funders such as the U.S. Department of Housing and Urban Development (HUD). This form gives permission to share information collected with Partner Agencies in the County that provide housing and services. A list of Partner agencies can be found at <http://cachpa.org/index.php/get-help/>.

This form also gives permission to use CCIMS as the data system by which to record and/or share this information. Any personal information we collect is important to operate and coordinate our ability to serve and offer you with housing and service opportunities in the best way possible, and we only collect information that we consider appropriate.

I may refuse to sign this release. If I refuse, I will not lose any benefits or services. However, we may still be required to collect some personal information by law, or by organizations that give us money to operate this program.

**By signing this form, I authorize** to share my information with Partner Agencies. This may be done through the CCIMS database or within the CACH Homeless Priority Populations Committee (aka Coordinated Entry Assessment & Referral CEAR).

The information that may be collected and shared include:

- Name
- Gender
- Race
- Ethnicity
- Date of Birth
- Veteran Status
- Proof of Homelessness
- Income
- Insurance
- Disabilities

I understand that CACH and Partnering Agencies will keep my information private using strict privacy policies. If I have questions about my privacy rights, my information, or am concerned that my information has been misused, I can contact the CCIMS Administrator at 717-255-6587. This consent will end one year from the date it is signed. I may revoke my consent at any time by contacting the Administering Agency on this form.

My information may be viewed by auditors or funders who review the work of partnering agencies, including HUD, Dauphin County Human Services, the Department of Veterans Affairs, and The Department of Health and Human Services.

\_\_\_\_\_  
Signature of Consumer/Participant or Representative

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Contact Information (Phone or Email)

Administering Agency: \_\_\_\_\_

Witness Staff: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

CACH 10 North Second Street, Suite 405, Harrisburg, PA 17101 (717) 255-6587  
[www.cachpa.org](http://www.cachpa.org)

**CACH Coordinated Entry Decline Service Notice**

You have the right to refuse any and all services offered by the CES to provide housing interventions.

On \_\_\_\_\_, I, \_\_\_\_\_ have voluntarily chosen to decline all available  
Date Individual's Name

services offered through the Coordinated Entry System and network of providers.

**Services offered and declined:**

\_\_\_\_\_

\_\_\_\_\_

Cross System Team Meeting

Family Group Conference

I have been informed that I assume all responsibility for any results caused by declining these services, and I understand that I may reapply after 30 days from declined date.

**My Reasons for Declining Services:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

If I choose to reapply, I will need to begin the process at step one with a screening and assessment and be placed on the prioritization list based on my needs at the time of that assessment.

DATE/TIME: \_\_\_\_\_

INDIVIDUAL's SIGNATURE: \_\_\_\_\_

WITNESS SIGNATURE: \_\_\_\_\_

\*COPY NEEDS TO BE GIVEN TO INDIVIDUAL & SENT TO:  
Capitol Area Coalition on Homelessness  
10 North Second Street, Suite 405, Harrisburg, PA 17101  
Phone: (717) 255-6587 Fax #: 717-238-5342  
Email: dritchey@hra-harrisburgpa.org

**CACH Coordinated Entry Provider Declination Notice**

Provider/Agency Name: \_\_\_\_\_ Date: \_\_\_\_\_

Person Completing the Form: \_\_\_\_\_

**Provider/Agency Reasons for Declining Family/Individual:**

- The household does not meet the project’s eligibility criteria.
- The household would be a danger to self or others if allowed to stay at this particular program.
- The services and supports available through the project are not sufficient to address the intensity and scope of participant need. Please list concerns (be specific):

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- Offered a Family Group Conference – circle one: Accepted Declined Date: \_\_\_\_\_
- Offered an interagency team meeting – circle one: Accepted Declined Date: \_\_\_\_\_

- The housing program is at capacity and is not available to accept referrals at this time.

**\*COPY NEEDS TO BE SENT TO COORDINATED ENTRY MANAGER**  
 Capitol Area Coalition on Homelessness  
 10 North Second Street, Suite 405,  
 Harrisburg, PA 17101 (717) 255-6587  
 Fax#: 717-238-5342  
 Email: dritchey@hra-harrisburgpa.org



## CoC WRITTEN STANDARDS

The following are PA501 Continuum of Care's **Written Standards** that guide general eligibility, detailed prioritization, and specific outcomes for homeless housing and programs.

### A. Prioritization Standards:

These **Prioritization Standards** embody the continuum specific rationale for effective triage and referral to "Emergency Shelter" (**ES**); "Transitional Housing" (**TH**); "Rapid Rehousing" (**RRH**); "Homeless Prevention" (**HP**); and "Permanent Supportive Housing" (**PSH**) programs. There are different priorities single females, singles or couples with children (families), single males, those who are categorized as "Chronically Homeless" (**CH**); and/or "Unsheltered" e.g. "living on the streets" (**UN**), or "Near Homeless" (**NH**), i.e. those who are about to become unsheltered or are unstably housed with friends or family and not on the lease. These housing and homeless categories do not include specialized housing and provisions for homeless veterans and those homeless due to domestic violence and victimization as defined by the VAWA Act.

According to CACH 2015- and Five-Year Point In Time (PIT) data and analysis:

- 28% of all homeless persons are CH and ¼ of all homeless persons are CH single males.
- There are more who are CH than who are UN (not all UN are CH i.e. not all unsheltered have a disability or were unsheltered for 12 months or in ES 4 times in 3 years.)
- The highest frequency of disability (67%) for CH is mental health, but there is a significant percentage of other disabilities (37%)
- Many who were unsheltered were considered sheltered in PIT counts but only because they were in seasonal and night only shelters or programs.
- PSH is not an option for unsheltered persons who do not have a disability except for the YW- SRO Section 8 Moderate Rehabilitation Program for women.
- 1/3 of homeless population are children in families.
- Although only 10% report originally becoming homeless in Dauphin County outside of the City of Harrisburg, there is an undercount and lack of geographic based services for persons experiencing homelessness in rural and parts of Dauphin County outside of Harrisburg.

Based on CoC experience, practice and HUD policies:

- In previous CoC experience as well as nationally, Rapid Rehousing and Homeless Prevention was effective in serving large rural geographical areas that do not have shelter.
- Rapid Rehousing and Homeless Prevention is limited, intended primarily to be short term assistance (3 months), with the purpose quickly move persons out of shelter (RRH) or to prevent at risk persons from entering shelters or become unsheltered (HP).
- HUD regulations for homeless programs in general is that participants can pay up to 30% of their gross income on rent or utilities up to fair market rate.

Therefore, the following are Prioritization Standards for homelessness housing and categories:

Priority Standard 1: CH individuals and families are priority for PSH Programs; unsheltered CH first and then CH residing in ES with these recommendations for specific programs:

- A. *CH single males be the first priority for Shelter + Care (S+C) and YW-PHD which are the only PSH where singles who are male are eligible.*
- B. *CH with MH disability should first and foremost be referred to MH dedicated PSH i.e. S+C, as well as all other PSH.*

- C. *All things being equal, if a CH applicant to PSH who has a MH disability willingly and rapidly can be housed at a MH dedicated PSH, then other PSH programs should accommodate those with non-MH disabilities.*

Priority Standard 2: UN individuals and families are priority for TH and ES with these recommendations for specific programs:

- A. *YW-SRO for women prioritize UN who are not CH, because it is the only PSH that can house those who sleep “on the streets” but do not have a disability or meet a length/duration of homelessness requirement.*
- B. *Any TH that can serve males should prioritize CH and UN males.*

Priority Standard 3: Families with children should be prioritized, after first applying priority standards 1 and 2 with this recommendation for specific programs:

*Units that are not fixed or have dedicated single and family designations but can be configured to serve either families or singles should prioritize for families.*

Priority Standard 4: NH, UN, and ES who can rapidly be re-housed into sustainable housing in 3 months through short term rental assistance are first priority for RRH.

Priority Standard 5: NH who are about to be evicted but who can rapidly and sustainably be stabilized in 3 months through short term rental assistance are first priority for HP.

Priority Standard 6: At least 20% of RRH funds from ESG awarded to the County of Dauphin should be prioritized for persons or households who are unsheltered in remote and rural areas in Dauphin County outside of the City of Harrisburg. \* Assistance may require and be allowed to be medium term (6 months).

Priority Standard 7: At least 20% of HP funds from ESG awarded to the County of Dauphin should be prioritized for persons or households whose housing at risk is in remote and rural areas in Dauphin County outside of the City of Harrisburg.\* Assistance may require and be allowed to be medium term (6 months).

Priority Standard 8: Priority for RRH should be given to NH, ES, or UN who are extremely low income i.e. at or under 30% of the local medium income (LMI), ONLY if they can sustain that housing in 3 months at current or projected income. Income level for those receiving RRH or HP should not exceed 50% of LMI.

Priority Standard 9: Persons or households receiving ESG rental assistance may be required to contribute up to 30% of their gross income toward rent and utilities.

Priority Standard 10: All homeless veterans and those who are homeless as victims defined by VAWA should first and as quickly as possible be referred to the specialized housing and services in our continuum that is dedicated for them.

\*In the event that in the last 8 months before an HP and RP grant term expires, and the drawdown rate for the 20% rural Dauphin County priority is not at an adequate level to ensure timely spend down and closeout, then these priorities may be adjusted or suspended.

Prioritization and Coordinated Assessment: The Prioritization Standards will be integrated into a Continuum Wide Coordinated “Standardized Intake.” An SPVDAT Vulnerability Assessment will also be administered and a vulnerability index will also be added to the final Intake score to further prioritize applicants based on vulnerability. Applicants can then be referred to eligible and preferred triaged housing and service agencies paths with a prioritization score based on their homeless situation and vulnerability index.

Prioritization and Process Review: The rationale for prioritization is based on analysis of PIT, HMIS, and other CoC relevant data and will be reviewed annually by the service and data collection committee or sub-committee. Any changes recommended by the sub-committee will have to be ratified by the CACH Steering Committee or Board.

**B. Eligibility Standards:**

Policies and procedures for evaluating individuals' and families' eligibility for assistance:

1. Must be homeless by federal definition.
2. Dauphin County origin priority i.e. homeless or at-risk status must have originated in Dauphin County which includes the City of Harrisburg or were born or had residency at some time in Dauphin County. Persons who are homeless but from outside of Dauphin County are not disqualified but priority is first given to those of Dauphin County origin.
3. Emergency Shelter requires Proof of Homelessness for the following:
  - ESG is only for those who would otherwise without it be unsheltered or forced to live in unsafe and near homeless housing conditions.
  - Emergency Shelter stay may be limited to 7 days for those who left previous adequate housing for reasons other than fleeing victim violence and are now homeless because they cannot easily go back. For example, an applicant may have left adequate housing due to family disagreement, but not eviction, and left without a housing plan, or someone who was not homeless or near homeless but simply decided to relocate without means.

**C. Outcome Standards:**

Emergency Shelter (ES):

% of admitted clients that exit to permanent housing	70%/ 35%*
% of admitted clients who are employed at exit from shelter	20%
<i>% of clients placed into permanent housing that return to homelessness within 1 year</i>	<i>&lt;10%*</i>

Transitional Housing (TH):

% of transitional housing clients who move to permanent housing	65%/ 85%*
% of clients with increased cash income from any source between intake & exit	65%
% of admitted clients who are employed at exit from shelter	20%
% of clients with increased earned income between intake & exit	45%
<i>% of clients placed into Permanent Housing that return to homelessness</i>	<i>&lt;8%*</i>

Permanent Supportive Housing (PSH):

% of homeless placed into PSH for remain housed > 6 months	77%/ 93%*
<i>% of homeless placed into PSH for remain housed &gt; one year</i>	<i>90%*</i>
<i>% of new tenants entering directly from ES without passing through TH</i>	<i>50%*</i>
<i>% of new tenants taken directly from the streets without going through ES or TH</i>	<i>35%*</i>
<i>% of new tenants that meet the definition of chronic/vulnerable at time of admission</i>	<i>95%*</i>
<i>% of clients no longer in need of supportive housing (just housing subsidy) moved on to more independent housing each year</i>	<i>5%*</i>

Employment Supportive Service Only (SSO):

% of homeless clients will find employment 47%\*\*  
 Benchmarks are derived from the latest minimum standards by HUD found in CoC NOFA application (the last benchmarks listed was in the 2012 CoC application).

\* *Benchmarks in italics are derived from 100K Homes – Center for Urban Community Services' Standardized Performance Measures for HUD program goals using both HUD and Housing4Good data for high performing CoCs.*

\*\* SSO Benchmark is based on the current SSO program's benchmark submitted to HUD.

## Written Standards for Provision of ESG in the County of Dauphin

### 1. Policy for Evaluating Eligibility

- a. Per 24 CFR 576.401: ESG sub-recipients must conduct an initial evaluation to determine each individual or family's eligibility for ESG assistance and the amount and types of assistance the individual or family needs to regain stability in permanent housing. All ESG sub-recipients will follow federal documentation guidelines to establish the client's status as homeless or at-risk of homeless and their income eligibility. These evaluations must be conducted in accordance with the centralized or coordinated assessment requirements set forth under §576.400(d).
  - i. The County of Dauphin adopts the Capital Area Coalition on Homelessness (CACH), PA 501 Continuum of Care requirements for participation in Coordinated Entry and requires sub recipients to participate in coordinated entry and assessment tools and protocols developed by CACH and included with this application. The coordinated entry process is to be used by all agencies that receive ESG, CoC and other homeless program funding within the Continuum. The tools and protocols create consistency in client entry and assessment and provides the basis for agency referral and prioritization protocols for a singular waitlist of CoC housing programs.
  - ii. ESG sub-recipients must re-evaluate program participant's eligibility and the types and amounts of assistance the participant needs;
    1. Not less than once every 3 months for participants who are receiving homelessness prevention assistance, and
    2. Not less than once annually for participants who are receiving rapid re-housing assistance.
  - iii. Re-evaluation of Rapid Rehousing program participants eligibility and types/amounts of assistance must be re-evaluated not less than once annually and, each re-evaluation must establish and document: that the program participant does not have an annual income that exceeds 30% of median family income for the area and that the program participant lacks sufficient resources and support networks necessary to retain housing. To determine if an individual or family is income eligible, the sub-recipient must examine an individual or family's annual income to ensure that it does not exceed the most current HUD income limits applicable to the County of Dauphin.

### 2. Standards for Targeting

The County of Dauphin standards for targeting are consistent with CoC. The only service for which we are applying with this ESG application is Rapid Rehousing and individuals and families meeting HUD Homeless category 1 and 4 are the eligible population. Within that eligibility group our target populations for this program are unsheltered homeless individuals unwilling to use traditional emergency shelters, including chronically homeless individuals, as well as families with children.

### 3. Policy for Shelter Admission:

Our Continuum of Care has adopted the following written standards

- a. **Emergency Shelter Definition**  
The term Emergency Shelter was revised by 24 CFR Part 576.2 to mean "any facility, the primary purpose of which is to provide a temporary shelter for the homeless in general or for specific populations of the homeless and which does not require occupants to sign leases or occupancy agreements. This definition excludes transitional housing. However, projects that were funded

as an emergency shelter (shelter operations) under the FY 2010 Emergency Shelter Grants program may continue to be funded under the emergency shelter component under the Emergency Solutions Grants program, regardless of whether the project meets the revised definition.

- b. Admission, Diversion, Referral and Discharge  
Shelter stays should be avoided, if possible, and when not possible, limited to the shortest time necessary to help participants regain permanent housing. Consistent with Section (a) of this document, ESG sub-recipients must conduct an initial evaluation of all individuals or families to determine if they should be admitted to an emergency shelter, diverted to a provider of other ESG-funded components, such as rapid re-housing or homeless prevention assistance, or referred for other mainstream resources.
- c. ESG sub-recipients must determine that individuals and families meet category (1), (2), (3), or (4) of the Homeless Definitions listed below and rate the individual's or family's vulnerability to ensure that only those individuals or families that have the greatest need for emergency shelter assistance receive ESG funded assistance.
  - i. Category 1 – Homeless
  - ii. Category 2 – Imminent Risk of Homeless
  - iii. Category 3 – Homeless Under Other Federal Statutes
  - iv. Category 4 – Fleeing/Attempting to Flee DV
- d. ESG sub-recipients must also reassess emergency shelter participants, on an ongoing basis, to determine the earliest possible time that they can be discharged to permanent housing. All persons discharged from emergency shelters will have their exit status entered into either HMIS and will be provided discharge paperwork as applicable or upon request.
- e. Safety and Shelter Needs of Special Populations
  - i. ESG funding may be used to provide services for homeless youth, victim services, and services for people living with HIV/AIDS, so long as the costs of providing these services are eligible under the regulations for the emergency shelter component found at 24 CFR Part 576.102.
  - ii. Consistent with ESG recordkeeping and reporting requirements found at 24 CFR Part 576.500, ESG sub-recipients must develop and apply written policies to ensure the safety of program participants through the following actions:
    - 1. All grantees and sub-grantees will take appropriate measures to provide for client confidentiality. Grantees and sub-grantees will develop and implement procedures to guarantee the confidentiality of records concerning program participants. All records containing personally identifying information (as defined in HUD's standards for participation, data collection, and reporting in a local HMIS) of any individual or family who applies for and receives ESG assistance will be kept secure and confidential.
    - 2. The address or location of any domestic violence, dating violence, sexual assault, or stalking shelter project assisted under the ESG will not be made public, except with written authorization of the person responsible for the operation of the shelter, and
    - 3. The address or location of any housing of a program participant, including youth, individuals living with HIV/AIDS, victims of domestic violence, dating violence, sexual assault, and stalking; and individuals and families who have the highest barriers to housing will not be made public, except as provided under a preexisting privacy policy of the sub-recipient and consistent with state and local laws regarding privacy and obligations of confidentiality
  - iii. In addition, ESG sub-recipients must adhere to the following ESG shelter and housing

standards found at 24 CFR Part 576.403 to ensure that shelter and housing facilities are safe, sanitary, and adequately maintained:

1. Lead-Based Paint Requirements. The Lead-Based Paint Poisoning Prevention Act applies to all shelters assisted under ESG program and all housing occupied by program participants. All ESG sub-recipients are required to conduct a Lead-Based Paint inspection on all units receiving assistance under the rapid re-housing and homelessness prevention components if the unit was built before 1978 and a child under age of six or a pregnant woman resides in the unit.
2. Structure and Materials. The shelter building should be structurally sound to protect residents from the elements and not pose any threat to health and safety of the residents.
3. Access. The shelter must be accessible, and there should be a second means of exiting the facility in the case of emergency or fire.
4. Space and Security. Each resident should have adequate space and security for themselves and their belongings. Each resident must have an acceptable place to sleep.
5. Interior Air Quality. Each room or space within the shelter/facility must have a natural or mechanical means of ventilation. The interior air should be free of pollutants at a level that might threaten or harm the health of residents.
6. Water Supply. The shelter's water supply should be free of contamination.
7. Sanitary Facilities. Each resident should have access to sanitary facilities that are in proper operating condition. These facilities should be able to be used in privacy and be adequate for personal cleanliness and the disposal of human waste.
8. Thermal Environment. The shelter/facility must have any necessary heating/cooling facilities in proper operating condition.
9. Illumination and Electricity. The shelter/facility should have adequate natural or artificial illumination to permit normal indoor activities and support health and safety. There should be sufficient electrical sources to permit the safe use of electrical appliances in the shelter.
10. Food Preparation. Food preparation areas, if any, should contain suitable space and equipment to store, prepare and serve food in a safe and sanitary manner.
11. Sanitary Conditions. The shelter should be maintained in a sanitary condition.
12. Fire Safety-Sleeping Areas. There should be at least one working smoke detector in each occupied unit of the shelter facility. In addition, smoke detectors should be located near sleeping areas where possible. The fire alarm system should be designed for a hearing-impaired resident.
13. Fire Safety-Common Areas. All public areas of the shelter must have at least one working smoke detector.

#### **4. Emergency Shelter Essential Services Prioritization Policy:**

Our Continuum of Care has adopted the following written standards:

- a. ESG providers and the County of Dauphin staff are currently working with the CACH CoC to develop common intake and assessment tools and protocols to be used by all agencies that receive ESG, CoC and other homeless program funding within the Continuum. The tools and protocols will create consistency in client intake and assessment and provide basis for appropriate agency referral and to develop targeting and prioritization protocols.
- b. Upon completion of the common intake and assessment tools and protocols, all ESG sub-recipients will use that system to help determine the individual or family need for emergency shelter or other ESG-funded assistance.
- c. ESG funding may be used to provide essential services to individuals and families who are in an

emergency shelter. Essential services for participants of emergency shelter assistance can include case management, childcare, education services, employment assistance and job training, outpatient health services, legal services, life skills training, mental health services, substance abuse treatment services, transportation, and services for special populations.

- d. ESG sub-recipients are responsible to assess an individual or family's initial need for emergency shelter and must re-assess their need on an ongoing basis to ensure that only those individuals or families with the greatest need receive ESG-funded emergency shelter assistance. Shelters that serve families must serve all eligible families and may not refuse services based on the age of children or the size of the family.
- e. Client re-assessment will take place at the participant level and at the service provider level. Clients meet with case managers throughout their participation in the program and have regular progress evaluations. Clients have opportunity to provide feedback and assessment about programs and services as well.
- f. The County of Dauphin is working with the CACH CoC to develop criteria and protocols for system-wide program and service evaluation and improvement to be implemented through CACH. Case managers and administrative staff from all of the homeless housing and service organizations, along with City and County staff participate in CACH Committee meetings as this is the forum for discussion and implementation of system related protocols, activities, best practices, evaluation and changes that occur.

## **5. Coordination Policy:**

- a. Coordination with Other Targeted Homeless Services:

Sub-recipients must coordinate and integrate, to the maximum extent practicable, ESG-funded activities with other programs targeted to homeless people in the CACH PA 501 CoC to provide a strategic, community-wide system to prevent and end homelessness in our community. RRH coordination with the homeless system continuum wide occurs through the Coordinated Entry and Single Housing Waitlist, which prioritizes the target populations of unsheltered, chronically homeless, and category 1 transitional age youth.

- b. Coordination with Mainstream Resources:

Sub-recipients must coordinate and integrate, to the maximum extent practicable, ESG-funded activities with mainstream housing, health, social services, employment, education, and youth programs for which families and individuals at risk of homelessness and homeless individuals and families may be eligible.

## **6. Rapid Rehousing/Homelessness Prevention Prioritization Policy.**

A performance standard our Continuum of Care must improve is the length of stay in Emergency Shelter for families. Therefore, targeting this population will promote progress towards that goal. Since 2016 there was an increase in unsheltered homelessness in the PIT counts which mirrors national trends (2017 AHAR), and therefore this is a population which needs to be targeted. The CCU Rapid Rehousing program for which we are applying for funding is the only non-congregate housing intervention for unsheltered men in our community. Thus, the priority population under homeless category 1 targeted in this grant is consistent with our CoC priority population.

## **7. Standards for Participant Rent Responsibility:**

- a. Standards for rapid re-housing for determining the share of rent and utilities costs that each program participant must pay, if any, are based on the following:
  - i. Clients receiving rental assistance are expected to contribute 30% of their income toward the unit's rent. The County of Dauphin ESG Program does not require a minimum client

- contribution.
  - ii. Rental assistance cannot be provided for a unit unless the rent for that unit is at or below the current Fair Market Rent limit, established by HUD.
  - iii. The rent charged for a unit must be reasonable in relation to rents currently being charged for comparable units in the private unassisted market and must not be in excess of rents currently being charged by the owner for comparable unassisted units. See 24 CFR 574.320.
  - iv. The rental unit must meet minimum habitability standards found at 24 CFR 576.403.
  - v. There must be a rental assistance agreement and lease between the property manager and tenant as well as the owner of property and ESG sub-recipient.
  - vi. No rental assistance may be made to an individual or family that is receiving rental assistance from another public source for the same time period.
  - vii. Rental assistance may not be provided to a participant who is currently receiving replacement housing payments under Uniform Relocation Assistance
- b. Per 24 CFR 576.106 (e), ESG sub-recipients may make rental assistance payments only to an owner with whom the sub-recipient has entered into a rental assistance agreement. The rental assistance agreement must set forth the terms under which rental assistance will be provided, including the requirements that apply under this section. The rental assistance agreement must provide that, during the term of the agreement, the owner must give the sub-recipient a copy of any notice to the program participant to vacate the housing unit, or any complaint used under state or local law to commence an eviction action against the program participant.

## **8. Standards for length of time for Rental Assistance:**

Subject to the requirements under 24 CFR 576.103 and 24 CFR Part 576.104, ESG sub-recipients may provide a program participant with up to 24 months of rental assistance during any 3-year period. This assistance may be short-term rental assistance, medium-term rental assistance, payment of rental arrears, or any combination of this assistance.

For this grant application Dauphin County supports CCU's approach to maximize grant funds for short term rental assistance or medium term up to six months; and per DCED requirements, rental assistance shall be limited to eighteen months. Our goal is to provide the appropriate length assistance for each household's need to achieve long term stability. CCU proposes to provide financial assistance for security deposit and full rental assistance for the first month, and then further assistance based upon the client's income. Upon a participant's obtaining income, they are expected to contribute 30% of their income either towards their rent payment or towards a personal savings/rainy day fund to help maintain long-term stability depending on their financial situation. In order to serve as many households as possible, we aim to conclude financial assistance within six months, however as long as a family is in case management and remains income eligible upon any re-evaluations, assistance can be provided to keep them stable in their housing through twenty four months. Once a participant is discharged from the program, they are not eligible for program re-entry and additional assistance until 24 months from their first entry into the program.

## **9. Standards for housing stabilization and/or relocation:**

- a. Subject to the requirements at 24 CFR 576.103 and 24 CFR Part 576.104, sub-recipients may use ESG funding to pay housing owners, utility companies, and other third parties for some or all of the following costs, as allowed under 24 CFR 576.105:
- i. Rental application fees
  - ii. Security deposits
  - iii. Last month's rent
  - iv. Utility deposits



- v. Utility payments
  - vi. Moving costs, and
  - vii. Some limited services costs
- b. Consistent with 24 CFR 576.105 (c), ESG sub-recipients determine the type, maximum amount and duration of housing stabilization and relocation services for individuals and families who are in need of homeless prevention or rapid re-housing assistance through the initial evaluation, re-evaluation and ongoing case management processes.
  - c. While providing homelessness prevention or rapid re-housing assistance to a program participant, sub recipient must: (i) Require the program participant to meet with a case manager not less than once per month to assist the program participant in ensuring long-term housing stability; and (ii) Develop a plan to assist the program participant to retain permanent housing after the ESG assistance ends, taking into account all relevant considerations, such as the program participant's current or expected income and expenses; other public or private assistance for which the program participant will be eligible and likely to receive; and the relative affordability of available housing in the area.
  - d. Sub-recipients must assist each program participant, as needed, to obtain appropriate supportive services, including assistance in obtaining permanent housing, medical health treatment, mental health treatment, counseling, supervision, and other services essential for achieving independent living; housing stability case management; and other Federal, State, local, or private assistance available to assist the program participant in obtaining housing stability including:
    1. Medicaid
    2. Supplemental Nutrition Assistance Program
    3. Women, Infants and Children (WIC)
    4. Federal-State Unemployment Insurance Program
    5. Social Security Disability Insurance (SSDI)
    6. Supplemental Security Income (SSI)
    7. Child and Adult Care Food Program,
    8. General Assistance Program (GA), and
    9. Other mainstream resources such as housing, health, social services, employment, education services and youth programs that an individual or family may be eligible to receive
  - e. Consistent with 24 CFR 576.105(d), financial assistance for housing stabilization and relocation services cannot be provided to a program participant who is receiving the same type of assistance through other public sources or to a program participant who has been provided with replacement housing payments under the Uniform Relocation Act (URA) during the period of time covered by the URA payments.
  - f. Consistent with 24 CFR part 578.51 (c) ESG-RRH rental assistance may be either tenant-based or project-based and ESG recipients and sub recipients may require program participants to live within a particular geographic area or in a specific structure for the first year and in a specific area for the remainder of their period of participation

## **10. Utilization of Limited English Proficiency**

Dauphin County recognizes the importance of ensuring that persons with limited English proficiency (LEP) have meaningful access and an equal opportunity to participate in Emergency Solutions Grant (ESG) services. In accordance with federal guidelines Dauphin County will ensure that this LEP Standard is met throughout the process of ESG service delivery.

Sub recipients will provide language assistance through the use of competent bilingual staff, staff interpreters, contracts or formal arrangements with local organizations providing interpretation or translation services, or technology and telephonic interpretations services.

Dauphin County and its sub recipients will translate ESG documents for LEP when the identified population group constitutes 5 percent of an eligible client group (for example, 5 percent of ESG Applicants) or 1,000 persons, whichever is less.