



# Temporary Changes and Suspensions for Coordinated Entry, Performance and Consolidated Homeless Grant funds due to COVID-19 Response

*In response to the COVID-19 outbreak, temporary changes and requirement suspensions have been made to Coordinated Entry, Performance and the Consolidated Homeless Grant. Commerce intends to give agencies the flexibility to lower barriers to respond to this crisis while ensuring staff safety and the households they serve. The changes and suspensions outlined below are optional. If it makes sense for your community to keep any of the requirements in place, particularly prioritizing equitable assistance, please continue doing so.*

## In-person Coordinated Entry Access Points

Work with your local Public Health Department to determine whether or not closing your doors to the public is necessary. If the in-person access point continues to operate, be sure to follow the Department of Health's physical distancing and enhanced sanitation recommendations.

## COVID-19 Triage at Coordinated Entry (CE)

Work with your local Public Health Department to determine the role CE will play in screening people experiencing homelessness for COVID-19 or in referring people to isolation or quarantine units. Work with your local Public Health Department to develop the proper response to symptomatic and asymptomatic people who reach out to CE for services. For example, The Atlanta Continuum of Care (CoC) developed a triage-screening tool to address emerging COVID-19 concerns:

<https://www.hudexchange.info/resource/5989/covid19-client-triage-tool-atlanta-ga-coc-example/>

## Coordinated Entry Prioritization Process

In response to COVID-19, you may make emergency changes to your CE prioritization policy and process.

For adults and families experiencing homelessness, Commerce recommends that communities continue to prioritize people experiencing unsheltered homelessness and people fleeing violence because they cannot safely self-isolate or shelter in place. This means that these factors must *be considered* as part of the prioritization process.

Commerce is waiving the requirement for CE to prioritize chronic homelessness and the length of time homeless.

Communities should continue to include local prioritization factors as part of their process. For example, the COVID-19 response plan developed with your local Public Health Department may identify other prioritization factors, such as people with underlying health conditions.

## Phone and Virtual Coordinated Entry Assessments

We highly encourage making phone or virtual assessments available as part of your CE process.

Asking tough questions over the phone can seem impersonal, so make sure to build rapport and a connection with the person on the other end of the line. Ask how they are doing before asking assessment questions. Take a conversational approach as opposed to reading a script. Building rapport and connection will support you in collecting more accurate information about the person's needs.

If phone or virtual assessments are a new practice for you, advertise this change on the agency website, a sign on the office door, an updated voicemail message, and flyers out in the community: grocery stores, pharmacies, gas stations, etc.

If phone calls are overwhelming your agency, here is an *example* of a simple process to prioritize messages and calls: "Initial screening through the Coordinated Entry System Intake Line is available normal business hours on Monday- Friday from 8:00 a.m.- 4:00 p.m., excluding holidays and weekends. Program participants can leave a message, and the Coordinated Entry Intake Line staff will first triage calls and are required to return all calls within three business days. High priority calls (e.g., program participants contacting the intake line who are unsheltered) must be returned within one business day."

## Phased Assessment Approach for Coordinated Entry

We encourage you to practice a phased assessment approach, which is considered a best practice. Phased assessment will help you assist people with their immediate needs while also limiting long periods of contact. It can also help you manage a higher volume of calls and inquiries. Phased assessment can be flexible: the components of phased assessment can be done over a couple of days, a week, or on the same day, if necessary.

Basic Phased Assessment Components:

**Crisis Needs Assessment:** Screening to defining the nature of the current crisis and ensuring the person's immediate safety. The outcome of a crisis needs assessment could include a referral to an emergency service such as a victim service provider, another community resource, or continuing to the next phase of the assessment process.

- Do you have a safe place tonight?
- Are you in danger, or do you need protection from violence?

If the Public Health Department has determined that CE will provide COVID-19 Triage, that should happen at the crisis needs assessment phase.

**Diversion and Problem Solving:** Identify options and help access natural supports. The outcome of a diversion and problem-solving could include a creative short-term plan other than entering the homeless crisis response system.

- Do you have safe friends and family to stay with?

- Do you need help with mediation to stay where you are?
- Can flexible funding assist with this?

**Housing Needs Assessment:** When it becomes clear that diversion and self-resolution will not occur, move to ask questions that gather the basic information needed to make eligibility, prioritization and referral decisions.

For more information on phased assessments, please see:

<https://www.hudexchange.info/resource/5340/coordinated-entry-core-elements/>

## General Coordinated Entry Compliance

Coordinated Entry processes will not be monitored soon. Commerce and stakeholders are actively engaged in a process that will produce new CE guidance and tools. Do not hesitate to implement solutions to meet community needs and respond to the current crisis. If you have questions or would like support with modifying CE processes during this time, please reach out to Andrea Avila, Coordinated Entry Specialist, [andrea.avila@commerce.wa.gov](mailto:andrea.avila@commerce.wa.gov) 206-600-0638, or your grant manager.

## CHG Performance: System Prioritization Requirements

Commerce recommends that communities continue prioritizing people experiencing unsheltered homelessness and people fleeing violence because they cannot safely self-isolate or shelter in place. This means that these factors must be considered as part of the prioritization process.

Communities should continue to include local prioritization factors as part of their process. If the COVID-19 response plan developed with your local Public Health Department identifies other prioritization factors, such as people with underlying health conditions, this will be accounted for during the performance monitoring process.

The prioritization requirement does not constitute a spending cap or limit. The prioritization requirement does not prohibit you from serving people who are at-risk of homelessness. Remember that Commerce evaluates compliance with the prioritization requirement and other performance requirements based on state and local administrative data and qualitative data gathered from key stakeholders. Community context and extenuating circumstances are always considered during the performance monitoring process.

## CHG Allowable Expenses

With the new COVID-19 Housing Grant, we suggest you consider using those funds for quarantine and isolation, sanitation and hygiene, expanding shelter capacity, and COVID related costs. Using that fund source for COVID-19 expenses can help leave more CHG funding available for rent assistance.

## Documentation of Housing Status (4.4, 9.6 Appendix F, Verification of Household Eligibility and Income Recertification Form)

**CHG Self-Declaration Form:** A self-declaration form to collect a verbal statement is allowable for all housing status situations, and a client's signature is not required. Make a note of this circumstance on

the Verification of Household Eligibility and Income Recertification Form as well. Example language for a note: "*self-declaration utilized due to COVID-19 response.*"

**CHG Third Party Verbal Verification Form:** Using the Third Party Verbal Verification Form is now temporarily allowable for all housing status situations. Make a note of this circumstance on the Verification of Household Eligibility and Income Recertification Form. Example language for a note: "*verbal verification received due to COVID-19 response.*"

**Source documentation:** If your agency has moved to phone or virtual appointments with clients and is collecting source documentation, it is allowable to do so through email or text. (Reminder that self-declaration is allowable for all housing status situations, and collecting source documentation is not required). Your agency should have a protocol around storing and/or deleting information that may contain personally-identifying information. This information should not be uploaded in HMIS or forwarded without client consent or Release of Information from the client.

## Documentation of Income (4.6, Verification of Household Eligibility and Income Recertification Form)

Collecting income source documentation is not required. To determine initial HEN eligibility, checking BVS is still required.

**CHG Self-Declaration Form:** A self-declaration form to collect a verbal statement is also allowable for income documentation, and a client's signature is not required. Make a note of this circumstance on the Verification of Household Eligibility and Income Recertification Form as well. Example language for a note is: "*self-declaration utilized due to COVID-19 response.*"

**Source documentation:** If your agency has moved to phone or virtual appointments with clients and is collecting source documentation, it is allowable to do so through email or text. (Reminder: collecting income source documentation is not required). Your agency should have a protocol around storing and/or deleting information that may contain personally-identifying information. This information should not be uploaded in HMIS or forwarded without client consent or Release of Information from the client.

## Chronically Homeless Definition (4.2, PSH CHF and 4.3.2, Chronically Homeless)

For PSH CHF funding, households with a current housing status of fleeing violence are now eligible for PSH CHF. This is in addition to households who live in a place not meant for human habitation or in an emergency shelter. Households must still meet the other components of the chronic homeless definition of being continuously for at least 12 months or on at least four separate occasions in the last three years where the combined occasions must total at least 12 months.

## Eligibility Recertification (4.7 Verification of Household Eligibility and Income Recertification Form)

This is not required at this time. Make a note of this circumstance on the Verification of Household Eligibility and Income Recertification Form. Checking BVS to determine HEN eligibility for recertification is not required.

**NEW**

## Housing Status Eligibility (4.3); Sheltered Homeless (4.3.1.2)

### **CHG Temporary Sheltered Homeless Definition:**

- We are extending the days for a person exiting a system of care or institution where they resided from 90 or less to 120 days or less.

## Housing Status Eligibility (4.3); At Imminent Risk of Homelessness (4.3.3)

At Imminent Risk of Homelessness eligibility is temporarily extended to households unstably housed (as defined below). Households will be considered at imminent risk of homelessness if one or more of the following occur:

### **CHG At Imminent Risk Definition:**

- HH will lose primary nighttime residence (including systems of care or institutions) within 30 (*previously 14*) days of the date of application for assistance, and no subsequent residence has been identified and lacks the resources or support networks needed to obtain permanent housing.

### **CHG Temporary Unstably Housed Definition (in addition to above):**

- HH who cannot pay rent due to loss of income and are reasonably expected to be facing eviction when the [moratorium on evictions](#) is lifted are eligible to receive assistance before receiving a legal notice of eviction. In addition to prioritization standards described under "CHG Performance: System Prioritization Requirements," rent assistance should be prioritized to HH who are not eligible for unemployment income and do not have a way to pay rent for the foreseeable future.
- HH is sharing other persons' housing (couch surfing, doubled up, i.e.) and lacks the resources or support networks needed to obtain permanent housing.
- HH is living in a motel/hotel or RV and lacks the resources or support networks needed to obtain permanent housing.

## Income Eligibility 4.5.1

Households entering a Continuous-stay Shelter are exempt from income eligibility requirements.

## Rent Payments (5.1.1)

Rental arrears and associated late fees can now be paid for up to six months instead of three.

## Targeted Prevention (7.3)

The CHG Targeted Prevention Eligibility Screening Form is temporarily not required.

## Flexible Funding (5.3.3)

The \$1,500 cap on flexible funding for households is temporarily waived.

## HMIS Data Timeliness (6.2.1)

Commerce will not monitor data timeliness during this time period.

## CHG Reports with Invoices (2.3.1.1)

HMIS/Looker Reports are not required with monthly invoices.

## HMIS Telephonic Consent

Telephonic consent for HMIS entry is allowable. Telephonic consent from the individual may temporarily substitute written consent provided that written consent is obtained at the first time the individual is physically present at the agency. If someone provides telephonic consent and is never seen in person, it is fine to keep that record as consenting in HMIS. There are no documentation requirements, although telephonic consent can be noted in the client file, and you can utilize the public alerts under the client notes section in HMIS.

To obtain informed consent, use the Client Release of Information and Informed Consent form as a conversation guide: <https://www.commerce.wa.gov/wp-content/uploads/2018/06/hau-hmis-informed-consent-form-2018.pdf>

Telephonic consent is not required of people who will have anonymous records: clients who are: 1) in DV agencies or; 2) currently fleeing or in danger from domestic violence, dating violence, sexual assault or stalking situation; 3) are being served in a program that requires disclosure of HIV/AIDS status (i.e., HOPWA); or 4) under 13 with no parent or guardian available to consent to enter the minor's information in HMIS.

## Consent to Review Information in the Benefits Verification System (6.5.7)

Verbal consent will be allowed at this time as long as staff follows the protocols below. However, staff should make every attempt to collect a signed BVS Client Consent form for the client file. Protocols for collecting BVS client consent verbally:

- Staff should use the below script when requesting verbal consent from clients (agency names, etc., can be changed).
- Consent must be memorialized in writing by the person proving the phone appointment

- Staff must note that verbal consent was collected due to extenuating circumstances until the COVID-19 outbreak is resolved.
- Remember, staff must attempt to collect a signed BVS Client Consent form from the client. If there is no way to collect a physical signature, this should be noted.

**Partner read to Client:**

(Agency Name Here) is a contracted assisting agency with the Department of Social and Health Services. We can assist you submit an application or maintain eligibility for public assistance benefits.

We would like your permission to access some of the information DSHS keeps electronically about you.

We are committed to protecting your privacy. If you give permission, we will be able to see the following limited information about you:

1. Basic demographic information including name, age and how many recipients are in your household;
2. Verification of the type of assistance your household will receive such as Cash, Basic Food and Medical;
3. The amount of money your household will receive for each benefit type;
4. A list of the benefits your household received in the past 3 months;
5. Your household's earned and unearned income;
6. Child Care copay amount, child's name and provider information; and
7. Certification periods.

If you authorize us to view the listed information, you are not:

- Designating us as an authorized representative, or
- Allowing us to share or re-disclose your information.

If you do not authorize us to view the listed information, we will still help you; however, we will not access your confidential information.

Do you give us authorization to access the information I listed?

- Yes, I authorize access  
 No, I do not authorize access

Did the client authorize release:

Did you verify the identity of the person by:

▼  
In-person  
Verbally on Phone

<< Back

Next >>