**Long Island (NY-603) Continuum of Care**

**Coordinated Entry System**

**Memorandum of Understanding**

Memorandum of Understanding (MOU) between the NY-603 Continuum of Care and [INSERT NAME OF COC-FUNDED OR ESG-FUNDED PROVIDER AGENCY]

1. BACKGROUND

Provisions of HUD’s Continuum of Care (CoC) Program and Emergency Solutions Grant (ESG) Program interim rules require that all CoCs establish a coordinated entry system (CES). The NY-603 CoC has adopted the CES requirements as outlined in HUD Notice CPD 17-01 for all CoC and ESG grantees. The CES has been piloted (voluntary vacancy reporting and referrals) since February 2017 and officially launched (mandated vacancy reporting and referrals) on August 1, 2017.

The CES represent a CoC-wide process for management of a By-Name List that identifies all homeless households through various system access points and outreach, assesses the living situations, vulnerabilities and needs of persons experiencing homelessness, streamlines the connection of homeless persons to the most appropriate and available housing and services based on client needs and preferences. The CES will ensure that scarce available housing resources in the region are prioritized/offered to households that are homeless the longest with the most severe service needs, using a client-centered approach, as well as target designated resources to those actively fleeing domestic violence and youth.

1. GUIDING PRINCIPLES OF THE NY-603 CES

The NY-603 Continuum of Care will adopt all requirements of the *CoC Interim Rule* *24 CFR 578.7(a)(8),* and additional requirements outlined in *HUD Notice CPD-17-01*. As approved by the CoC Governance Board, The Long Island Coalition for the Homeless (LICH), will act as the CES management entity for NY-603, including the assessment of presenting homeless and at-risk persons and coordination of referrals to CoC-funded, ESG-funded programs, and other housing alternatives and supports based on prioritization, eligibility and client needs and preferences. ESG HP programs will also act as CES access points for persons at risk of becoming homeless. Additionally, as of 7/1/2019, The Safe Center of Long Island (TSCLI) will act as the CES management entity for persons fleeing or attempting to flee domestic violence for NY-603, including the assessment of presenting persons experiencing domestic violence, safety planning, and coordination of referrals to CoC-funded, ESG-funded programs, and other housing alternatives and supports based on prioritization, eligibility and client needs and preferences.

1. PRIORITIZATION OF PERSONS EXPERIENCING CHRONIC HOMELESSNESS

CES will prioritize referrals to permanent housing programs (including rental assistance) following the order outlined in *HUD Notice* *CPD-16-11*. Housing referrals will be made based on program eligibility and client choice for those households who are homeless the longest with the most severe service needs.

Please note that households assessed and referred through DV CES will be prioritized by vulnerability and length of time homeless.

1. HOUSING FIRST

All programs funded through the NY-603 competitive funding round are required to operate using a Housing First approach, outlined in the *Housing First in Permanent Supportive Housing HUD Brief*. Housing First removes barriers for homeless households accessing housing and services and ensures that every effort is made for clients to remain in housing and services.

Please note changes to Housing First as per HUD in the 2019 CoC NOFA:

*Providing Flexibility for Housing First with Service Participation Requirements. The traditional Housing First approach has two basic parts: First, individuals are rapidly placed and stabilized in permanent housing without any preconditions regarding income, work effort, sobriety or any other factor. Second, once in housing, individuals never face requirements to participate in services as a condition of retaining their housing. The first part, placement into permanent housing without preconditions, is an important priority to ensure that federal funds are allocated to providers that serve the most vulnerable homeless individuals. This NOFA maintains the commitment to unconditional acceptance of individuals into housing, especially for people with a high degree of vulnerability. At the same time, allowing service participation requirements once a person has been stably housed may promote important outcomes (e.g., employment, increased income, reduced substance use, and strengthened social connection), so this NOFA also provides communities and programs with flexibility, without penalty, to use service participation requirements after people have been stabilized in housing (consistent with 24 CFR 578.75(h)).*

1. ASSESSMENTS

All homeless households seeking assistance through the CoC will be assessed for housing and services, regardless of where in the region they present using the following process:

1. CES staff will confirm living situation to meet the HUD homeless definition and verify household type.
2. Clients who are determined to be HUD homeless will work with CES staff on housing placement. Clients presenting as actively fleeing will work with CES staff and be provided safety planning support by TSCLI. At risk of homeless clients will be assessed by CES and CES HP access points and referred to other community resources.
3. Clients will complete a Vulnerability Index- Service Prioritization Decision Assistance Tool (VI-SPDAT), or localized homeless prevention assessment.
4. CES staff will verify program eligibility for clients with HUD approved documentation (such as disability documentation, verification of length of time HUD homeless, SPA acceptance for OMH programs, etc.)
5. Clients will be placed on a housing waitlist by the CES Manager for appropriate housing resources in prioritized order based on length of time homeless and level of service needs.
6. PSH transfers approved by the CoC Governance Board (as CES policy entity) and/or allowable under the June 5, 2019 HUD Waiver will be facilitated by CES Manager.

Please note that households presenting as actively fleeing or attempting to flee a domestic violence situation will not have data entered in HMIS by CES. DV CES uses a comparable secure database with vendor: EmpowerDB.

1. CES REFERRALS

A CES, as mandated by HUD (*HUD Notice CPD-17-01*) requires that all CoC-funded programs and all ESG-funded rapid rehousing receive 100% of client referrals to from LICH (CES Management).

1. Clients will be offered available housing and services for which they are eligible. Clients can choose to accept or decline the housing and services based on their preferences. Clients are not penalized for rejecting housing and services offered to them.
2. Permanent housing programs must accept eligible clients who are offered their housing and services; declining client referrals is only permissible in limited circumstances that can be discussed with CES on a case by case basis upon referral to fully assess each situation. Reasons permissible for denial are outlined in the CES Manual.
3. RESPONSIBILITIES OF PARTICIPATING PROVIDERS

[INSERT LOCAL COC OR ESG PROVIDER NAME] will:

1. Establish clearly written policies and procedures with program eligibility requirements;
2. Operate using a Housing First model, as demonstrated by the acceptance of eligible client referrals with low barriers to program entry, confirmed and indicated on all CoC funding applications, with language used in and carried out according to program documentation (leases, subleases, program manuals) and CoC monitoring;
3. Report all vacancies/program availability to the CE Manager;
4. Receive 100% of referrals from the CES, which will be referred following the CoC Prioritization Order;
5. Only make lateral transfers of households from a permanent supportive housing unit to another unit, for household that have been assessed by the CES, with adherence to procedures outlined in the NY-603 PSH Transfer Policy with CoC GB approval and/or DV emergency transfer plan;
6. Resolve any errors regarding referrals or admissions in a timely manner;
7. Provide feedback to CoC on how to better serve homeless households through the CES, including but not limited to CoC focus group participation;
8. Participate in trainings (required annually by HUD) on the CES and staff trainings provided in areas determined by CoC focus groups as regional best practices;
9. Notify the CE Coordinator if there are staffing changes with established CES program points of contact;
10. Enter all data on clients in HMIS in a timely and complete manner and maintain a standard level of data quality, as determined by the HMIS lead (excluding DV providers);
11. Uphold all fair housing regulations, as outline in the *Fair Housing Act*;
12. Ensure client confidentiality, in accordance with all Federal and State regulations;
13. CES Compliance

It is an established CoC funding threshold (renewal and new), for agencies to participate in CES and have no unresolved findings that are non-compliant with the CES participation mandate. LICH and TSCLI, as CES leads of the NY-603 Continuum of Care, will first inform participating agencies of any non-compliance concerns and work directly with that agency to resolve the issue through education, training, mediation, problem solving, etc. Issues that cannot be resolved will be reported, in writing, to the CoC Governance Board. The Governance Board will make a determination as to whether an agency was in fact non-compliant with unresolved issues, and further seek to take corrective steps to resolve the issue. If issues remain unresolved, the Ranking Committee, ahead of the next CoC funding round would determine if that agency will be able to apply for CoC funding in the next funding round.

TERMS OF AGREEMENT

This MOU shall be effective upon adoption by each signatory agency and entity. Annually, this MOU will be reviewed and updated to incorporate changes and clarifications of roles and responsibilities. Agencies and entities that do not agree to the terms mentioned above in this MOU will not be eligible to apply for funding through the CoC and would be out of compliance with HUD policies which mandate CES participation of CoC-funded and ESG-funded programs. Please work with ESG jurisdictions to ensure compliance with CES and other associated HUD mandates.

[INSERT PROVIDER NAME]

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Signature of Program CEO/Executive Director

Print Name:

Title:

Date:

NY-603 Continuum of Care/CES

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Signature of CoC Lead Agency/CES Lead Executive Director

Print Name: Greta Guarton

Title: Executive Director

Date:

The Safe Center Long Island (DV CES)

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Signature of DV CES Lead Executive Director

Print Name: Cynthia Scott

Title: Executive Director

Date: