**Coordinated Entry Participation Agreement**

**Effective May 1, 2017**

**PURPOSE**

The purpose of this Participation Agreement is to document and communicate guidelines for the establishment of the Central CoC Coordinated Entry System (CES). CES is a collaborative initiative designed to create a more effective and efficient homeless response system, as well as assure compliance with HUD mandates. By signing this Agreement, participating organizations formally acknowledge the guidelines, roles, and responsibilities outlined in this Agreement and Policy and Procedures Manual. Further, the undersigned organizations agree to adopt and comply with the Agreement in order to participate in CES.

By agreeing to be a CES partner, your agency agrees to:

* Utilize the Central CoC CES process and tools
* Provide your program preferences and eligibility criteria in writing to the CES Committee
* Accept referrals based on the eligibility criteria and program preferences your agency provides to the CES Coordinator(Who is the Priority List Manager) and CoC
* Participate in the evaluation of CES including program denials
* Reduce barriers to housing access
* Maintain timely access to housing and services - contact with client should be within three business days of inquiry
* Attend weekly meetings as necessary to prioritize households
* Honor the additional admission criteria for housing projects on Tribal Nation land or programs operated by Tribal Nations

Your agency maintains the right to:

* Determine eligibility criteria and program preference based on your agency mission, community needs and funding requirements
* Provide input to the development and implementation of CES
* Receive support and training from the CoC and CES Committee
* Access CoC aggregate data collected through CES (except where data would identify a specific agency, person or household, or affect the safety of participants)

By signing this Agreement, participating organizations formally acknowledge the guidelines, roles and responsibilities outlined in this Agreement and the Central CoC Policy and Procedures. Further, the undersigned organization agrees to adopt and comply with the Agreement in order to participate in Central CoC CES.

**BACKGROUND & HISTORY**

Our Continuum has a long history of trying to coordinate services for our regions homeless population including Family Homeless Prevention and Assistance and Long-term Homeless partnerships. CES is an evolution from these efforts intersecting with Federal and state mandates and initiatives to shift from managing homelessness to preventing and ending homelessness.

In May 2009, President Obama signed the Homeless Emergency Assistance and Rapid Transition to Housing (HEARTH) Act into law. The Hearth Act amended and reauthorized the McKinney-Vento Homeless Assistance Act with substantial changes. One of these changes, the Continuum of Care Program interim rule, was published on July 31, 2012. This rule established requirements for the administration and implementation of Continuums of Care’s, including Coordinated Assessment. A coordinated assessment system is defined as a coordinated process designed to coordinate program participant intake, assessment, and provision of referrals, which covers the entire geographic area. It must be easily accessed by individuals and families seeking housing or services, well-advertised, and include a comprehensive and standardized assessment tool. Additionally, Congress mandates CoC’s to “*collect an array of data on homelessness in order to prevent duplicate counting of homeless persons and to analyze their patterns of use of assistance, including how they enter and exit the homeless assistance system and the effectiveness of the systems*.”

In August 2015, the combined Continuum of Care regions and state partners approved a shared Strategic Plan for Coordinated Entry.

**GUIDING PRINCIPLES**

1. **Promote** **client-centered practices** – Every person should be treated with dignity, offered at least minimal assistance, have easy access to the system, have options and choices for housing and services, and participate in their own housing plan. Participants will not be mandated to leave family and other support networks to access housing.
2. **Prioritize most vulnerable** – Limited resources should be direct first to persons and families who are most vulnerable\*. Less vulnerable persons and families will be assisted as resources allow. \*Vulnerability will be defined locally.
3. **Eliminate barriers** **to housing placement** – Identify system practices and individual project eligibility criteria which may contribute to excluding clients from services and work to eliminate those barriers.
4. **Transparency** – Deliberate, make decisions and communicate directives openly and clearly.
5. **Focus on evaluation and adapting to meet the current needs of providers and consumers** – Continually strive for effectiveness and efficiency and agree to make changes when those objectives are not achieved.
6. **Accountability** – Accountable to clients to provide the best service possible and to funders to make the best use of resources.
7. Promote **collaborative and inclusive** planning and decision making practices.
8. **Diversity** - respect cultural, regional, programmatic, philosophical differences.
9. Honor **Tribal Sovereignty.**

**GOVERNANCE**

CES in the Central CoC region is governed by a Continuum of Care Coordinated Entry System Committee and the CoC Board. The role of the Committee is to make recommendations on implementing CES and is responsible for training and evaluating coordinated entry system. The committee will make recommendations based on input from all stakeholders and other CoC Committees. The CoC Board will have final approval on all CES policies, forms and tools.

**Definitions of CES Components**

1. **Access:** An existing agency or point-of-contact where households facing a housing crisis complete a triage screening prior to entry into the homeless response system. Based on screening persons will be referred for: 1) mainstream services, 2) prevention services 3) Homeless Services (DV, ES, or for Housing Screening). The ONLY access to homeless dedicated beds is through a designated access site.
2. **Assessment:** Auniform andprogressive assessment process that documents clients’ immediate housing situation, needs and barriers to identify need and priority for homeless services.
   * ALL persons seeking entry into the homeless response system will receive an initial **Triage (Diversion) Screening** to determine if diversion, prevention or homeless services (emergency shelter or housing first) is most appropriate~~.~~ The purpose is to prevent persons from unnecessarily entering or re-entering the homeless system by helping to identify immediate alternate housing arrangements and, if necessary, connecting to services with financial assistance to help them remain in or return to permanent housing.
   * A **Housing Screening** will be conducted in order to identify linkage to appropriate housing intervention (Prevention, Transitional Housing, Rapid-Rehousing, Permanent Housing or Permanent Supportive Housing). ALL assessments will be conducted by a trained and CoC approved assessor.
   * Acomprehensive **Barriers Assessment** (OPTIONAL)should be conducted prior to entry into any ESG or CoC funded Transitional, Rapid Re-Housing and Permanent Housing Program to help develop a housing stability plan and prioritize appropriate linkages AND as an ongoing case management tool every 3 months.
3. **Assignment/Prioritization:** Linkage to appropriate services will be based on assessment, priority scoring and written programs standards (as developed through system mapping). **Prioritization and linkage** will be determined based on assessments and community prioritization. The CoC will use uniform system tools and written Program Standards to help provide a transparent, planned and fair process for waitlist management, prioritization and housing linkage. To the extent possible, assistance will be provided to persons with high barriers to help them navigate system services.
4. **Evaluation:** CES will include a comprehensive evaluation of consumer outcome and performance (program, agency and system) to; increase effective use of resources (both staff and fiscal), improve quality of service to consumers, and to proactively identify and plan services. CES will annual set, promote, and review system-wide performance standards. Additionally, an annual review of system tools and process will be conducted with feedback from consumers and collaborative partners.

**GEOGRAPHIC SERVICE AREA**

* Central MN Continuum of Care Region – serving the counties of Benton, Cass, Chisago, Crow Wing, Isanti, Kanabec, Mille lacs, Morrison, Pine, Sherburne, Stearns Todd, and Wright.

**PARTNER ROLES**

Partners agree to the following, as well as specific partner roles and responsibilities laid out in the CES Policy and Procedures.

**Access Sites:**

Access Sites will complete the CES Triage Screen to help determine if the household can be diverted from entering the homeless response system by utilizing mainstream resources. Access sites will make referrals to mainstream services and assist in navigating services to the extent possible. If the household is unable to be diverted, the household will be referred to prevention or emergency shelter services (shelter, dv shelter, safe house, or motel voucher). Access sites will make referral or assignment to emergency shelter if necessary and available. Access sites will consider the unique rights and needs of all populations including American Indians.

Access Sites are expected to agree to the following:

1. Assure compliance with data privacy and policies.
2. Assure that no referrals for homeless services are made without first completing the triage screening tool.
3. Provide Triage Screening Tool through on-site or phone interview for all households who request entry into the homeless response system.
   * + - 1. If entry into the homeless response system is necessary, link directly to Emergency Shelter, or to Assessment site.
         2. If entry is diverted, complete Prevention Screening tool or provide information or referrals to prevention & diversion resources.
4. Track and share documentation of screenings as outlined in the policies & procedures manual.
5. Provide feedback for annual CES evaluation.
6. Follow protocols on working with American Indians that acknowledges and honors Tribal Sovereignty.

**Housing Assessment Sites:**

A trained and approved assessor will conduct theHousing Assessment(ex. VI-SPDAT) in order to identify linkage to appropriate housing intervention (Prevention, Transitional Housing, Rapid-Rehousing, Permanent Housing or Permanent Supportive Housing). American Indians seeking assistance will be offered connections with their Tribal Nation.

Housing Assessment Sites are expected to:

1. Assure compliance with data privacy and policies.
2. Follow CES Process to complete Housing Assessment (ex. VI-SPDAT) to determine appropriate service connections, linkages, and referrals.
3. Enter Housing Assessment Score and eligibility criteria into the Central CoC prioritization list.
4. Follow CES Process to track and update each household until the household is linked to an appropriate housing intervention, or until services are no longer needed.
5. Enter data and updates into HMIS per instructions.
6. Attend required trainings.
7. Provide feedback for annual CES evaluation.
8. Agree to make all referrals to homeless services through the CES Process (ex-Central CoC prioritization list).
9. Follow protocols on working with American Indians that acknowledges and honors Tribal Sovereignty.

**Housing Providers:**

Housing Providers will collaborate with designated Access and Assessment sites to streamline access to **ALL homeless dedicated housing programs and beds**. Housing Providers are expected to:

1. Assure compliance with data privacy and policies.
2. Provide program preferences and eligibility criteria in writing to CES.
3. Utilize the CES process to fill all program vacancies based on priority scoring, eligibility criteria, and program preferences.
   1. Follow-up with Assessor to ensure a smooth transition to the program and to coordinate notifying and offering housing to household.
   2. If denied, follow the CES process for denials including follow-up with CES Assessor.
4. Keep household information updated in HMIS according to the CES Process (ex. entry date, program openings, service transactions, and exit date).
5. Keep program information update in HMIS according to CES Process.
6. Provide feedback for annual CES evaluation.
7. Attend required HMIS, CoC and CES trainings.
8. Follow protocols on working with American Indians that acknowledges and honors Tribal Sovereignty.

**DATA QUALITY & SHARING**

By signing this agreement, your agency agrees to:

1. Participate in required HMIS, CoC and CES data sharing trainings as applicable.
2. Agree to HUD, state, HMIS and CES data privacy, data rights, and data quality requirements as applicable.
3. Assure data is accurate and up-to-date, responding to any data quality, completeness or privacy concerns addressed by HMIS Administrator, CES or Continuum of Care.
4. Agencies will have the option of opting out of data sharing in HMIS by following the process and policies described in the CES Policy & Procedures Manual.
5. Follow CES process to ensure Client Privacy Rights are followed.
6. As per HUD mandate, Domestic Violence service providers must enter data into a comparable database, when entry into HMIS is prohibited under federal law.
7. Data collection and reporting of tribal specific information must be done with the permission and under the supervision of Tribal Nations.

**CLIENTS RIGHTS**

The CES process is based on a client centered model and strives to give clients the opportunity to be empowered about the services they choose to receive. By signing this agreement your agency agrees to adhere to the CES Policies and Procedures outlining client’s rights including:

1. Right to be informed of the CES process and how they can use it to meet their needs.
2. Right to privacy and confidentiality.
3. Right to be informed of how their data will be utilized and whom it could be shared with.
4. Right to self-determination and to work with service providers that honor that right.
5. Right to Housing First.
6. Right to access and seek services from their Tribal Nation.
7. Right to be informed of agency grievance policy prior to assessment.

**GENERAL TERMS**

**Terms.** This Partnership Agreement will begin upon execution. This Agreement will be reviewed annually and updated to incorporate changes and clarification of roles and responsibilities. Any party must provide written notice of change ninety (90) days before the annual termination date or it will be automatically renewed. Otherwise, this Agreement may be terminated in accordance with the section on Termination below.

**Termination.** Any party may terminate this Agreement for any reason or no reason by giving the other party ninety (90) days prior written notice. The party wishing to terminate this agreement for cause must provide a written intent to terminate notice to the party in breach or default. The notice will provide thirty (30) days for the party in breach or default to respond to said notice with an acceptable plan to cure cause for termination. Termination for cause decisions will be made jointly between agency and the CoC. Note that termination of this Agreement may result in removal from CES and could affect both state and federal funding opportunities for homeless programs, housing and services.

**Confidentiality.** As a CES Partner and by virtue of entering into this Agreement your agency will have access to certain confidential information. As such, I agree that my agency (including staff, volunteers and board members) will not at any time disclose confidential information and/or material without the consent unless such disclosure is authorized by this Agreement, The CES Policies & Procedures Manual, or required by law. Unauthorized disclosure of confidential information shall be considered a material breach of this agreement. At all times client releases will be secured before confidential client information is exchanged. Confidential client information will be handled with the utmost discretion and judgment.

**Code of Conduct.** CES has adopted the CoC Code of Conduct to guide partners, agencies and their staff when participating in the system. The Code contains broad principles reflecting the types of behavior CES expects partners to exhibit towards constituents, other partners, CES governance, funders, employees, peers and the public. This policy does not stand alone, but embodies other ethical standards set by individual agencies, States, funders, and licensures. Rather, it is one element of a broader effort to create and maintain a quality system that gives ethical conduct the highest priority.

**Non-discrimination.** There shall be no discrimination of any person or group of persons on account of race, color, creed, religion, sex, marital status, sexual orientation, age, handicap, ancestry or national origin in the operation of CES. Tribal Nations shall not be required to deny their sovereignty as a requirement or condition of this agreement.

**Severability.** In the event any provision of this Agreement shall be found to be invalid, illegal, or unenforceable in any respect, such invalidity, illegality or unenforceability shall not affect the validity, legality and enforceability of the remainder of the Agreement.

**Amendments.** This Agreement may be amended only in writing and as authorized by the designated representatives of the respective agencies.

IN WITNESS WHEREOF, the undersigned, duly authorized representatives of the respective Partner Agencies, have signed this Partnership Agreement

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CES Partner Authorized Signature Date

**CES SIGNATURE PAGE**

If you wish your name and agency to be added (or updated) to the CES Partner Partnership Agreement, please print off this page, sign and date it, scan and email it to [ag@cmhp.net](mailto:ag@cmhp.net).

Please print clearly and sign and date in ink. This sheet will be retained in the CES files.

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| Agency or Organization: | |
| Authorized Representative: | Title: |
| Email: | Phone: |
| Mailing Address: | |

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Authorized Representative Signature Date

Primary CES contact:

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| --- | --- | --- | --- |
| Name | Title | Email Address | HMIS user |
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Please enter the names, titles and email addresses of all CE staff at your agency. Also check “x” for all staff who have an HMIS user license.

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| Name | Title | Email Address | HMIS user |
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**Thank you for being a CES Partner!**

**GLOSSARY:**1. Eligibility Criteria: Each agency will be responsible for entering their eligibility criteria based on funding requirements and target population in HMIS. Eligibility criteria will be used to determine linkage to appropriate housing and service interventions.

2. CoC Policies & Priorities: Per HUD guidelines, each CoC is responsible for establishing CoC policies and priorities for the administration of Emergency Solutions Grant and Continuum of Care assistance. A CoC system mapping process is conducted to help identify and determine policies and priorities. System mapping includes setting criteria for participant selection and essential program elements including; target population, service components, preferences, inclusion and exclusion criteria.

3. HUD Mandate: HUD requires that grantees funded by Continuums of Care (CoC) and Emergency Solutions Grant (ESG) grants create and participate in a coordinated assessment process.  HUD defines coordinated assessment as, *“…a centralized or coordinated process designed to coordinate program participant intake, assessment, and provision of referrals.  A centralized or coordinated assessment system covers the geographic area, is easily accessed by individuals and families seeking housing or services, is well advertised, and includes a comprehensive and standardized assessment tool.”*