

Coordinated Entry for Veteran Households Policies and Procedures Manual

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Vision Statement

Veterans experiencing homelessness in Chicago will quickly move into permanent housing through a coordinated process that links them with customized housing interventions based on individual needs.

This system will:

- Provide low-barrier, low-threshold points of entry that take into consideration transit issues, regional preferences, and other barriers to access experienced by the Veteran population.
- Be person-centered, as evidenced by a consistent respect for consumer choice, safety, and cultural preferences.
- Be flexible enough to respond to changing needs and evolve as the system standardizes best practices
- Utilize a consistent assessment tool across all points of access. The assessment will be made available via multiple methods, such as over-the-phone and in-person.
- Rely on the Homeless Management Information System (HMIS) as a centralized and accurate database that has real-time availability of resources.
- Reduce barriers by increasing program accessibility, limiting restrictive program criteria and program denials, and focusing on matching the person in need to the right resources.
- Coordinate with other systems of care, locally and regionally, including but not limited to the health care system, the criminal justice system, and suburban Cook County.

Goals and Guiding Principles

The goal of the Coordinated Entry System (CES) for Veterans is to rapidly connect households with previous active military service to appropriate housing interventions based on need. The following guiding principles are utilized to achieve this goal:

Collaboration: Moving away from a program-centric to a system-centric solution to ending Veteran homelessness requires a strong commitment to a team approach. All key partners must work together on behalf of Veterans, ensuring our system-wide response meets the needs of people with varying needs and strengths. This requires clear protocols, transparent decision making processes, and inclusive meetings to work through challenges, review progress, and establish best practices.

Communication: Open communication amongst all key partners that aids in building and maintaining a shared vision and action plan to end Veteran homelessness. Additionally, effective communication with the larger system, through activities like sharing ongoing results and updates, will support transparency and provide opportunities to evaluate and improve upon the Chicago CES.

Evidence Based Practice: System implementation decisions will be evidence based, necessitating the need for ongoing, timely, accurate, and complete HMIS data entry. This will allow the community to measure outcomes and make decisions to improve quality and effectively target resources.

Housing First: The Chicago system will utilize low-barrier housing options that prioritize connecting people to housing first, before focusing on other stability-related goals. The system will also ensure that these households have access to the supports and services they may need to maintain their housing. This strategy ensures that Veterans are housed regardless of presenting barriers such as zero income, and without needing to complete any particular program or achieve specific outcomes prior to accessing housing.

Prioritizing the Most Vulnerable: The process of matching Veterans to resources will center on serving the most vulnerable with the most service intensive interventions by making resources available to those who need them most. The Vulnerability Index (VI) assessment, chronic homeless status, provider clinical

judgment, and progressive engagement strategies will guide prioritization. Veterans who are not immediately connected to an intervention that meets their needs for capacity or other reasons will be able to transition from one intervention to the next when deemed necessary by having the opportunity to be re-matched to a more appropriate housing intervention through the System Integration Team process.

Urgency: The system will respond to the needs of Veterans experiencing homelessness with the sense of urgency, with consideration for the instability faced by Veterans experiencing homelessness. This will involve a timely process for assessing, matching, and housing Veterans.

Coordinated Entry Overview

Structure

TEAMS

Leadership Team

A Leadership Team consisting of representatives from the City of Chicago Department of Family and Supportive Services, Housing and Urban Development Regional Office, Jesse Brown VA Medical Center, All Chicago, CSH, Chicago Housing Authority, the chair of the Community Team, and representatives from the Grant and Per Diem programs and Supportive Services for Veteran Families programs meet regularly and oversees the Chicago Ending Veteran Homelessness Initiative (EVHI). This group sets the course for coordinated assessment implementation; serves as a group of “barrier busters” receiving information about systems barriers that need resolution by collaborating with the Community Team; implements appropriate policies and protocols as needed; and is tasked with communicating key decisions, and collaborates with the Community Team for the purpose of seamlessly implementing appropriate protocol and changing the course when data supports the need to do so. By tracking what needs to be accomplished and how, the Leadership Team positively impacts system level changes.

The Leadership Team shall communicate their actions and decisions to the Community Team on an ongoing basis, and shall share system changes with the larger system at least once per quarter, either in writing or at an in-person forum.

Community Team

The Community Team (CT), led by two co-chairs, is responsible for helping to shape the implementation of Chicago’s Coordinated Entry System (CES) as well as to address systemic barriers that are being identified by providers and Veterans that prevent Veterans from getting housed quickly and efficiently in our community. Systemic barriers experienced by staff participating in the SIT meetings are brought to the CT for discussion and possible resolution. If the CT cannot find an appropriate resolution, the co-chairs bring the concern to the EVHI Leadership Team for attention.

The CT is comprised of program management/leadership staff from the VA, emergency shelters, transitional housing, outreach, and all housing providers. The CT meets regularly, no less than once per month, to review the Veterans Data Dashboard, to assess progress on goals and initiatives, to discuss needed changes in the EVHI, and to address issues raised by providers in the Initiative.

Community Team members will be asked to volunteer to serve with consideration for agencies that have not yet had a representative serving as a chair. The chair will serve on the Leadership Team to act as a bridge between these two bodies. They will bring forward concerns, challenges, barriers that have been discussed at the Community Team meetings which require a higher level of attention. Additionally, they will ensure that the Community Team is apprised of activities of the Leadership Team.

The chair is expected to lead Community Team meetings, and must be able to be present to do so for a minimum of 75% of the meetings. They are also expected to channel policy recommendations to the Leadership Team when appropriate, and to share feedback about implementation of policies with the Leadership Team.

System Integration Team

The System Integration Team is led by the System Facilitator at CSH, and includes representatives of shelters, transitional housing providers, RRH providers, and PSH providers including the VA. Ideal attendees are those who have in-depth knowledge about the status, needs and preferences of each Veteran being reviewed and who are also able to make decisions regarding provision of shelter, services, or housing assistance. This may be a program director, program manager, coordinator, housing specialist, case manager and/or outreach workers. Agencies with multiple programs can have representatives from each project, or identify one or two staff members to share updates and insights on clients across their programming.

This team's purpose is to ensure that each Veteran household is appropriately served through CES matching; monitors each Veteran's progress toward housing for efficiency and effectiveness; and assists the providers to provide support and accountability in their work to rapidly house the Veterans experiencing homelessness in Chicago.

The work of the SIT is done through weekly meetings which begin with a review of the current data related to Veterans becoming homeless and getting housed followed by a weekly review of a specific sub population of Veterans experiencing homelessness to assess their progress and work as a team to resolve any barriers to success. Sub population discussions will include: Veterans experiencing chronic and long-term homelessness; Veterans who have been on the One List for 100+ days; Veterans who are enrolled in RRH and not yet housed; Veterans who are matched to PSH and are not yet housed; Veterans in GPD; Veterans who are matched but need another match; etc. This will be done through case conferencing that works to ensure holistic, coordinated, and integrated assistance across providers for all Veterans experiencing homelessness in the community; provides a forum for reviewing progress and barriers related to each Veteran's housing goal; identifies and tracks systemic barriers and strategizes solutions across providers and to clarify roles and responsibilities to reduce duplication of services.

The type of information discussed at this meeting includes the following:

- **Current status:** For example: active in shelter, active unsheltered, missing and whether that status has changed since the last case conference review
- **Veteran Preferences:** Housing plans and next steps should be guided by the Veteran's preferences.
- **Critical Housing Placement Barriers:** Review and problem-solve any barriers to housing placement.
- **Critical Service Barriers:** Review and problem-solve any challenges with connecting Veterans to critical services.
- **Current Safety:** Make sure any unsheltered Veteran has a safe place to stay tonight and in near term.
- **Next Steps:** Identify any immediate or critical action items related to the Veteran, including roles and timelines.

The SIT will bring critical system-barriers that have been identified as affecting Veterans' progress toward housing to the Community Team (CT) meeting for discussion and potential resolution. If resolution is not able to be developed, the CT Chair will bring the issue to the EVHI Leadership Team for their attention.

The System Facilitator will provide SIT members with data in advance of each weekly SIT meeting, and will send a follow up email with attendance afterwards. In the event that a program or project is not able to attend, the program is encouraged to provide any updates or requests for assistance to the System Facilitator in advance of the meeting.

COORDINATING ENTITIES

Outreach Coordination

The Center for Housing & Health (CHH) is the lead agency for outreach coordination within the Chicago Coordinated Entry System, and all Skilled Assessors have received training on assessing Veterans. In addition to community-wide outreach efforts, specific efforts to identify, assess, and connect Veterans exist within the EVHI. The Outreach Coordination Group consists of CCH, the Community Resource and Referral Center (CRRC), and Housing System Navigation. Coordinated efforts focus on Veterans who are unsheltered and Veterans experiencing chronic homelessness to effectively engage them and make appropriate resources available. This includes completing assessments, dispatching an Outreach Worker from the CRRC to evaluate eligibility for VA services and benefits, assisting Veterans who have been assessed and matched with accessing services from the identified housing provider, and providing other short term supports as necessary to move Veterans into shelter and housing. The Outreach Coordination Group will meet regularly, no less than quarterly, to ensure ongoing coordination of outreach efforts.

System Facilitation

CSH was selected by the Chicago Department of Family and Support Services (DFSS) to staff the Ending Veteran Homelessness Initiative as the System Facilitator. The main functions include managing and coordinating the One List, Coordinating the SIT meetings, and implementation and operation of the CES for Veterans who are experiencing homelessness.

HMIS

All Chicago is the lead agency for HMIS for the Chicago Continuum of Care, and is responsible for managing HMIS and all data points for the EHVI. All Chicago is also responsible for the implementation and use of our Chicago's Dashboard to End Homelessness. Additionally, All Chicago leads trainings related to the Chicago CES.

Matching

Catholic Charities is the agency responsible for matching within the Chicago CES. In addition to matching assessed Individuals, Youth, and Families, Catholic Charities assumed responsibility for matching Veterans to housing providers on October 9, 2017.

Tools

Assessment Tool

The Chicago Continuum of Care determined that the Vulnerability Index (VI) will be used as part of the coordinated entry system. This assessment provides separate assessment tools for households of varying ages and sizes. There are three VIs:

1. For single adults over the age of twenty-five;
2. For families with minor children; and
3. For youth between the ages of eighteen and twenty-five, with or without minor children.

Links to the VIs are available on the 'Resources' page at the end of this document.

Homeless Management Information System (HMIS)

Per HUD, “A Homeless Management Information System (HMIS) is a local information technology system used to collect client-level data and data on the provision of housing and services to homeless individuals and families and persons at risk of homelessness. Each Continuum of Care is responsible for selecting an HMIS software solution that complies with HUD’s data collection, management, and reporting standards.” Chicago uses ServicePoint, a software offered by Mediware. All Chicago serves as the CoC’s designated HMIS Lead Agency.

One List

All Chicago has created a By Name List (“One List”) to identify all individuals and households experiencing homelessness in Chicago. This list includes data for all Veterans experiencing homelessness and is used to track their progress as they move through the system from homelessness to housed. The One List allows us to accurately and specifically understand the number of Veterans in need of housing, the programs in which they are currently enrolled (e.g., emergency shelters, transitional housing, outreach affiliations), the permanent housing programs to which they have been matched, and their progress towards permanent housing.

Veterans are removed from the active list when they are housed, or after providers have searched for 90 days without finding the household. Their information remains in HMIS, and they will return to the One List if/when they return to the system.

Inactive Policy

A Veteran is considered to be Inactive Unknown/Missing when s/he is no longer in contact with our system and providers and indicated in HMIS through project enrollments or engagement/referral data. The *Inactive* designation indicates that there has been no contact over 90 consecutive days after continual attempts by the provider(s) to contact the Veteran. If a Veteran has been matched to a provider (housing provider, TH provider, etc.) or has been enrolled in any homeless service provider program, that provider will attempt to make contact with the Veteran using the following procedures:

1 week out of contact: at least one call is made to the Veteran

2 weeks out of contact: at least 2 calls **and** the staff responsible for the Veteran reaches out to the System Facilitator to determine whether the Veteran is connected somewhere else in the system. If the Veteran is connected to the VA, the staff will contact the CRRC for assistance with outreach and engagement. If the Veteran is matched to a System Navigator, the staff will notify the System Navigator that the Veteran has not been in contact and request support to search for the Veteran.

3 weeks out of contact: in addition to calling the Veteran, a call or letter to the Veteran’s emergency contact shall be made, outreach efforts are continued, and the staff person will bring up the for review at the SIT meeting to inform the community of the need to locate the Veteran.

4 weeks out of contact: same as above (3rd week)

After 4 weeks: there should be 3 distinct attempts to contact made every thirty days.

8 weeks out of contact: Staff person will reach out to the CRRC if they can be found anywhere in the VA system and reengage outreach efforts.

8-12 weeks out of contact: 3 distinct attempts to contact made including outreach to emergency contact again.

The Veteran will return to active status on the One List once any HMIS provider enters information into HMIS that indicates they have reengaged at a shelter, TH provider, or with an outreach provider.

The System Facilitator will run a monthly list of all Veterans who have not had a change in the Needs Status associated with the match to a housing provider in the preceding 30 days. This list will be reviewed during the SIT meeting and housing providers will be reminded of protocols around engagement.

Once a Veteran household who was inactive is found or re-engaged and they are still experiencing homelessness, the household will immediately be placed back on the One List to receive supports in pursuing permanent housing. If the Veteran had been matched to a housing provider prior to becoming inactive, the housing provider will be notified of the recent activity, and will proceed with engaging the Veteran so long as that provider has capacity to do so; otherwise, the Veteran will be matched to another housing provider based on eligibility and availability. If the Veteran had not yet been matched to a housing provider, a match will be made based on eligibility and availability.

Identifying, Assessing, and Engaging Veterans

Access Points

Current Access Point locations and hours can be found here: <http://www.csh.org/access>

Additionally, any person who has served in the active military who is experiencing homelessness can drop in to complete an assessment so that they can be connected to a permanent housing provider at:

Community Resource and Referral Center
1141 S. California, Chicago, 606012

Jesse Brown VA Walk-In Clinic
820 S. Damen, HUD VASH Wing of the Damen 8th Floor, Chicago, 606012

Volunteers of America of Illinois, 47 West Polk Street, Suite 250-2, Chicago, IL 60605

Featherfist, 2255 East 75th Street, Chicago, 60649

1. **POLICY: All Veterans experiencing literal homelessness in Chicago will be immediately identified.**

a. **Procedure: Outreach and engagement to Veterans who are unsheltered**

- i. Outreach, coordinated by CHH, will be conducted by DFSS funded outreach partners, PATH, CRRC, SSVF grantees, and other community outreach teams, on a weekly basis or as appropriate, for the purposes of identifying unsheltered Veterans experiencing homelessness.
- ii. CHH will assign participating agencies/teams to specific geographic areas to ensure comprehensive coverage and efficient provision of resources. These assignments will be determined collaboratively with the Coordinated Outreach Team.
- iii. All street outreach teams will engage Veterans who are unsheltered and who are not yet enrolled in a housing program to ensure that they are identified and assessed. The day after a Veteran who is experiencing homelessness is assessed on HMIS, he or she will be included in the One List to be matched to a housing provider.

b. **Procedure: Outreach and engagement to Veterans in shelter and transitional housing**

- i. Outreach providers will be assigned by CHH to shelters and TH projects that do not have Skilled Assessors on staff. Outreach efforts will focus on identifying and assessing Veterans who have not yet been assessed.
- c. **Procedure: Requesting outreach support to assess a Veteran**
 - i. In the case where a person who is not a Skilled Assessor is in communication with a Veteran who is experiencing homelessness, the CRRC can be contacted to engage the Veteran and complete an assessment. The CRRC will dispatch an Outreach Worker to come to the Veteran. The phone number for the CRRC is 312-569-5750 and the CRRC is staffed Monday through Friday from 9 am – 4 pm. Outreach staff may be available on the day requested if the call is placed prior to 2pm. In the event that the CRRC is unavailable to engage the Veteran, the System Facilitator can be contacted for additional support. The System Facilitator will assign a Housing System Navigator to assess the Veteran.

Identifying and Resolving Immediate Housing Needs for Unsheltered Veterans

2. **POLICY: All Unsheltered Veterans will be provided immediate access to shelter if they want it.**

- a. **Procedure: When first encountered, an unsheltered Veteran experiencing homelessness will be asked if they would like to have a bed in a shelter today.**
 - i. Anyone encountering an unsheltered Veteran will offer to assist that Veteran to move into a local emergency shelter. If the Veteran accepts this offer, the person will call 3-1-1 to learn which shelters have available beds. Additionally, the CRRC should be contacted for additional support.
 - ii. If local shelters are full, SSVF providers may pay for a temporary stay in a local hotel/motel for the unsheltered Veteran, where the Veteran is eligible and following SSVF requirements.
 - iii. If unsheltered Veterans decline the shelter offer because of barriers to entry, program staff working with the Veteran will contact the System Facilitator to provide this information. The System Facilitator will advocate on behalf of the unsheltered homeless Veteran, and coordinate with CHH.
 - iv. If the issues with local shelter barriers to entry cannot be immediately resolved, SSVF grantees may pay for a temporary stay in a local hotel/motel for the unsheltered homeless Veteran, where the Veteran is eligible and following SSVF requirements.
 - v. If an unsheltered Veteran declines a shelter offer for reasons other than barriers to entry, outreach providers, coordinated through CHH, will continue to make offers of shelter on no less than a biweekly basis. In extreme weather situations, shelter offers must be made no less than every three days.

3. **POLICY: Homeless services providers assisting unsheltered Veterans will document offers of shelter.**

- a. **Procedure: All street outreach teams or other providers assisting unsheltered Veterans will document the offers of shelter they make to Veterans.**
 - i. Documentation is recorded on the Standardized Housing Assessment by answering the question about whether the household is in need of a place to sleep tonight. It is expected that when Skilled Assessors engage Veterans who are unsheltered, they offer to connect them to shelter, and record it by completing an Interim Assessment.

4. POLICY: All Veterans experiencing literal homelessness will be assessed by specifically trained, Skilled Assessors, in order for that Veteran to be put on the One List. A range of providers will assess Veterans on HMIS using the Standardized Housing Assessment and Vulnerability Index (VI) for the purpose of connecting Veteran households to housing. All Skilled Assessors have been trained on the Veteran-specific questions within the assessment. These providers include staff from emergency shelters, interim housing programs, access points, outreach teams, SSVF, HUD VASH, GPD, the CRRC, and the Jesse Brown VA Walk-In Clinic.

- a. Procedure: HMIS Assessment:** Providers must complete the Skilled Assessor Training and submit a Skilled Assessor User Agreement to All Chicago prior to completing Standardized Housing Assessments in HMIS. The User Agreement outlines expectations of the Skilled Assessors including upholding the HMIS User Agreement as it pertains to confidentiality, completing at least two assessments per month, and accuracy with completing assessments.
- i. Assessments begin with the Consent Form, addressing any emergency needs, including immediate shelter, of the Veteran and getting them to sign the Consent Form so that the assessment can be shared with other community providers to coordinate services for them to get off the streets and into housing.
 - ii. First, search for the Veteran in HMIS: Staff will use the “Enter Data as” mode of the Chicago CES Skilled Assessor Project to first search for the Veteran to see if the person has already been matched to a housing provider. If not, the staff member will ask the Veteran to sign a consent form, open a new assessment, select assessment type “HUD”, and complete the assessment which includes the Vulnerability Index, with the Veteran.
 - iii. After the consent has been obtained, the next question to be asked in the assessment is whether the Veteran wants to be connected to an agency that can assist them with obtaining permanent housing. See, Offers of Permanent Housing for a script on how to offer permanent housing.
 - iv. Type of Assessment: Households with children require the [Family VI](#). Households 25 and older without children should be assessed with the [Individual VI](#). Households 18-24 years of age without children should complete the [Youth VI](#). Click [here](#) to view the CES Skilled Assessor Workflow.
 - v. Skilled Assessors working in the field without access to HMIS may complete the assessment on paper and then enter it into HMIS within one business day. The three components of the assessment include the [consent](#), [assessment](#), and appropriate vulnerability index.
 - vi. Agencies without access to HMIS can request an outreach worker come to their location by contacting the CRRC or CHH.

b. Procedure: Refusal to Participate in Assessment

- i. If a Veteran declines the opportunity to complete an assessment and would like to be connected to a housing provider, the staff member who made the request should notify the System Facilitator so that alternate plans can be made. Veterans can be connected to a housing provider outside of HMIS when necessary and the System Facilitator will inform All Chicago of any instances in which this occurs for Veterans who do or do not wish to be identified by name.

For example, if a Veteran meets with an outreach worker and identifies that he or she is willing to speak with a housing provider to learn more about their program but is not willing to complete the assessment, the outreach worker should contact the System Facilitator. The outreach worker will be connected to a housing provider to offer a warm hand-off, and All Chicago will be notified of a person meeting with a housing provider about an available a housing slot. If the Veteran is eligible

for the housing project, the provider will engage the Veteran to be able to add the Veteran's identifying information to HMIS and to demonstrate the person qualifies for their program.

- 5. POLICY: All Veterans experiencing literal homelessness identified in Chicago will be tracked on the One List.**
- a. Procedure: Skilled Assessors will complete Standardized Housing Assessments for all Veterans experiencing literal homelessness.**
 - i. Completing an assessment for a Veteran household will enter the household into the Chicago CES Skilled Assessor Project and trigger the matching process through the One List within two business days.
 - b. Procedure: Providers will enter timely and accurate updates in HMIS that reflect the current status of Veterans residing in, enrolled in, matched to, their projects.**
 - i. Shelters, TH providers, and housing providers will enter and exit Veterans in their projects in HMIS within two business days, which will ensure that they are on the One List for the duration of their homeless experience.
 - ii. Housing Providers will update the Needs Status for all matches in the CES Skilled Assessor Project, and record notes related to the Needs Status as appropriate.

Housing System and Providers

- 6. POLICY: The Chicago CoC is committed to providing permanent housing (PH) to all Veterans experiencing homelessness who desire it, regardless of perceived needs or issues.**
- a. Procedure: Emergency shelter providers and other temporary housing providers will immediately, meaning within two days, ensure that a Veteran has had an assessment.**
 - i. In the event that there is no Skilled Assessor for a project, the System Facilitator and CHH staff will coordinate a prompt connection to a Skilled Assessor to complete the assessment.
 - ii. Once the assessment has been completed and entered into HMIS, the Veteran's name will appear on the One List the following day.
 - iii. In the event that a Veteran indicates he or she is already on a path to housing and doesn't need the assessment, the Skilled Assessor will follow the steps to create an entry into CES in HMIS, and complete two sections of the assessment. First, in the Attempt to Complete Assessment, it will be indicated that the assessment was not completed because the Veteran already has housing plans in place. Second, it will be indicated that the Veteran is declining the Offer of Permanent Housing because housing plans are already in place.

Providing Service Intensive Transitional Housing to Veterans Experiencing Homelessness Only in Limited Instances

- 7. POLICY: The Chicago CoC prioritizes the use of Transitional Housing (TH) including VA Grant and Per Diem (GPD) as a short term bridge to PH.**
- a. Procedure: Veterans experiencing literal homelessness, including those residing in emergency shelters, are immediately offered assistance to move into permanent housing (PH).**

i. In accordance with Policy 6 above, all Veterans experiencing homelessness are immediately, within two business days, assessed. The assessment process includes a review of available housing options, and possible Rapid Re-housing (RRH) assistance.

b. Procedure: Veterans experiencing homelessness are only assisted with TH in the following situations:

- i. The Veteran has explicitly declined an offer of permanent housing assistance because of a self-identified need for intensive services that the Veteran believes can be provided by a particular TH project.
- ii. If a Veteran experiencing homelessness requests to move into a TH bed provided by a GPD provider, and has declined RRH assistance or other permanent housing assistance, the System Facilitator will contact GPD providers directly for possible referral.
- iii. The Veteran accepted an offer of PH, either Permanent Supportive Housing or RRH, but the PH unit is not immediately available.
- iv. In this situation, a Veteran may be moved into a TH unit while waiting for the PH unit to become available, rather than remaining in the emergency shelter or in an unsheltered location.
- v. Once an offer of permanent housing has been made, accepted, and documented in HMIS by the appropriate provider, additional offers of PH do not need to be made or documented.

c. Procedure: When a Veteran experiencing homelessness has chosen to move into a TH project because of the desire for intensive services, the TH provider must make new offers of PH to the Veteran on a bi-weekly basis.

- i. CHH will provide a weekly report to GPD providers with the HMIS IDs of those Veterans in need of an updated offer of permanent housing. The GPD providers are responsible for offering and recording offers of permanent housing on the assessment.
- ii. The Veteran can change his/her mind at any time, and the GPD provider does not need to wait until the bi-weekly check in to record this offer of permanent housing in HMIS.
- iii. When a Veteran who has previously declined the offer of permanent housing accepts the offer, the GPD provider will email the System Facilitator of this change so that a match can be made to a PH project based on availability and eligibility.

8. POLICY: Chicago providers provide support, information, and targeted assistance to previously assisted Veterans to help minimize returns to homelessness.

a. Procedure: housing providers, including SSVF and other RRH grantees, have policies and procedures that allow for Veterans who were previously assisted with housing services to access additional information and resources designed to ensure long-term housing stability. This includes providing contact information and resources to Veterans as it relates to diversion and homelessness prevention.

- b. Procedure:** Housing providers have policies and procedures that require program staff to conduct follow-up with all clients at least once after the Veteran's exit from the program into housing.
- i. Follow-up contact occurs between one and six months after the termination of financial assistance
 - ii. If initial attempts at contact are unsuccessful, housing providers make multiple attempts at contact, using multiple methods (e.g., phone, email, letter, in-person visits).

c. Procedure: Housing providers will prioritize for assistance those Veterans experiencing homelessness who have been assisted in the past and are eligible for assistance again. This assistance may include progressive engagement into more appropriate housing based on the Veterans' eligibility, program

availability, and previous experiences in programs. Providers will bring cases to the weekly SIT meetings to conference and discuss opportunities for progressive engagement.

Assessments

Training – Skilled Assessor training will be provided at least monthly and is facilitated by All Chicago and CSH. Each month, one training will be focused on new HMIS Users, and one training will be focused on current HMIS Users. Both trainings include an overview of Chicago’s Coordinated Entry System and the role and expectations of Skilled Assessors, the HMIS Consent Form and confidentiality, and a step-by-step training on how to complete the Assessment including the VI. Attendees are provided with reference materials for future use. Ongoing trainings are provided in conjunction with system updates and changes and are recorded for future use. To learn more and to register for the Skilled Assessor Training, click [here](#).

Outreach and Engagement

Outreach to Find Veterans

Coordinated outreach, led by the Center for Housing & Health, including DFSS funded outreach partners, PATH, CRRC, Supportive Services for Veteran Families grantees, and other community outreach teams, shall take place on a weekly basis to ensure that eligible households who do not enroll in programs are identified and assessed. The day after a Veteran who is experiencing homelessness is assessed on HMIS, he or she will be included in the One List to be matched to a housing provider.

Housing System Navigation

Veterans who have been assessed and matched to a housing provider may face multiple barriers to navigating this path to housing. To ensure that Veterans with the greatest barriers to housing remain connected within the system, providers can request that a Housing System Navigator be assigned to a Veteran experiencing chronic homelessness who needs support with attending appointments with their housing provider and/or collecting their needed documents. CSH matches Veterans who are experiencing chronic homelessness who are not enrolled in an outreach project and do not have a case manager who can serve in this capacity. Requests for a match to Housing System Navigation can be emailed to the System Facilitator and matches will be made based on eligibility and availability. The System Facilitator. An email will be sent notifying all involved parties of the match to Housing System Navigation.

Housing System Navigators partner with housing providers to engage Veterans until housing placement occurs. Engagement can take many forms, and most often focuses on obtaining documentation necessary for housing placement, transporting or providing transportation assistance to the Veteran to attend all housing-related appointments, providing emotional support, and serving as a point of contact for both the Veteran and the housing provider to whom the Veteran is matched. Housing System Navigators cannot provide housing location services

Offers of Permanent Housing Intervention

The practices described here comply with the guidance provided by USICH Federal Benchmarks and Criteria. <https://www.usich.gov/tools-for-action/criteria-for-ending-veteran-homelessness>.

The offer of permanent housing intervention must be made to all Veterans experiencing homelessness at the time of, or soon after the date of identification. Please see below for a script that should be used when making the offer. The offer of a permanent housing intervention is built into the Comprehensive Housing Assessment, and can be found near the top of the Assessment in HMIS and in paper form. Even if a Skilled Assessor is not doing a new assessment, the Veteran must be asked if they would like to be connected to a program that can assist them with finding permanent housing and their answer must be noted along with

the date that the offer was made and whether they accepted it or rejected it. When a Skilled Assessor completes an assessment, Veterans who have accepted the offer of permanent housing intervention will be matched based on program eligibility and availability. If a Veteran declines the offer, he or she will not be matched.

In HMIS, offers of permanent housing intervention can be found near the top of the Comprehensive Housing Assessment:

Veteran Permanent Housing (PH) Offers for those entering Transitional Housing (TH and GPD projects)			
Date of Standardized Housing Assessment:	* Date PH Intervention Offered	* Type of PH Intervention Offered:	* Did the Veteran Accept or Decline PH Offer: *
Add			

To add an offer of permanent housing intervention, select the Add button. This will create a fillable table that includes the date the intervention was offered, which is the date a housing intervention was offered, per the script below. The type of intervention selected should be Other (Needs Assessment), which indicates to the system that the Veteran has been offered housing, and a determination of program eligibility and availability needs to be made if the Veteran accepted the offer. Then select Accept or Decline based on the Veteran’s response to the offer. When this offer is recorded, select Save and Exit. This will update the Veteran’s assessment each time an offer is made.

All transitional housing programs (including GPD) must ensure Veterans have had an offer of permanent housing intervention **before enrolling** the Veteran into transitional housing. The offer of permanent housing intervention must be recorded on the Chicago CES Housing Assessment.

The following procedures must be followed to ensure that all Veterans are afforded maximum choice in the process of moving to permanent housing. All offers must be consistently recorded in the Chicago CES Housing Assessment including date of offer and the Veteran’s response:

- **Veteran accepts the offer of permanent housing intervention:** If the Veteran accepts the permanent housing intervention offer they will be immediately matched to a housing provider based on eligibility and program availability. The Veteran does not need to be offered permanent housing again. If at any time a Veteran decides to decline the offer, a Skilled Assessor can record this in the assessment. No matches will be made until the Veteran decides to accept the offer again.
- **Veterans who declines the offer of permanent housing intervention:** If the Veteran declines the offer of permanent housing must continue to be offered permanent housing intervention **at least once every two weeks** wherever they are in the homeless system including if they unsheltered, sheltered or are in service intensive transitional housing of any model.

- GPD Providers are responsible for offering and recording offers of permanent housing in HMIS. A weekly report will be provided by CHH containing the HMIS IDs for those Veterans in need of an updated offer.
- The CRRC Outreach Team is responsible for offering and recording offers of permanent housing in HMIS for all Veterans who are not in GPD. A weekly report will be provided by CHH containing the HMIS IDs for those Veterans in need of an updated offer.

Questions about offers of permanent housing intervention can be directed to the System Facilitator.

OFFER OF PERMANENT HOUSING INTERVENTION SCRIPT

I'm wondering how you are feeling about getting an opportunity to move into permanent housing? In Chicago we have a number of different kinds of permanent housing options that are available to Veterans who are in your situation. All of the programs have people who would help you with the process of finding housing, negotiating with the landlords and some even have limited or longer term rental assistance. Even if you don't currently have any income, we can connect you to an appropriate program. If you would like to begin the process of getting into housing, we can make that connection for you within a couple of days depending on what you may be eligible for and what is available. If you want to explore this, you can still access shelter, transitional housing, and/or other services while you are working on getting into housing with the assistance of one of the housing programs. Would you like me to make that connection for you?

Matching Veterans to Housing Providers

Matching Protocols

Program Availability

All Chicago maintains a list of real-time availability for PSH programs. This list includes criteria for each program to aid in the matching process. Permanent Supportive Housing Providers must complete an online survey **each time a new unit or set of units become available** to share program and eligibility criteria. [Click here to access the survey.](#)

SSVF Providers can indicate that their project needs to pause matches. The provider can complete this form to pause matches, and again when he provider is able to begin receiving matches.

https://docs.google.com/forms/d/e/1FAIpQLSd-ue8n8YjQjYku_ZlgoQgOqy2pvg35laL_ou0YoMfoAHJyQ/viewform

Matching

Veterans who are assessed through HMIS will appear on the One List the following business day. As capacity allows, Catholic Charities will match households within two business days to a housing program the household appears to be eligible for based on assessment answers and program criteria. Catholic Charities will generate an email to all involved parties notifying them of the match, including the Skilled Assessor who completed the assessment, the housing provider to whom the Veteran has been matched, and any other programs the Veteran is enrolled in per HMIS.

Prioritization

Veterans who have been assessed and have accepted the offer of permanent housing are matched to housing providers following the Chicago CES Prioritization Chart. Click [here](#) to view the Chicago CES

Prioritization Chart. All Veterans are screened for eligibility for HUD VASH, and matches are made to HUD VASH following the selection plan outlined below.

HUD VASH Voucher Selection Plan/Prioritization Plan

The HUD-VASH Program is reserved for Veterans experiencing chronic homelessness who have few resources and require long-term case management to either obtain or maintain permanent housing. The goal of this protocol is to create transparency and coordination in the process of assisting eligible Veterans to access available HUD-VASH vouchers through the CES and to ensure that all Veterans served by the HUD-VASH program are appropriately represented and tracked on the One List. These policies and procedures should assist homelessness service providers, the VA, the EVHI leadership team, and others by providing a clear explanation of the process by which Veterans are matched to the HUD VASH Program.

The Jesse Brown VA Medical Center is committed to taking 90% of their referrals for HUD-VASH vouchers through the CES process as long as the CES is able to keep referrals coming at the rate needed to fill vouchers. The Jesse Brown HUD VASH team is committed to communicating with the System Facilitator as the availability of vouchers and capacity for accepting matches fluctuates. While the Jesse Brown HUD-VASH team has agreed to follow the CES prioritization standards, the HUD-VASH team will reserve the right to make final determinations on the appropriateness of any referrals that come from CES based on their clinical judgement and Veteran eligibility as it relates to discharge status.

1. All Veterans identified as experiencing literal homelessness must first be referred for a CES assessment to determine their housing need and best “match” with a provider. Skilled Assessors will complete the Housing Assessment and VI and enter the information into Chicago CES Skilled Assessors Project in HMIS.
2. At the time of the assessment, the Skilled Assessor will contact the VA POC to determine the Veteran’s discharge status and thus eligibility for various homeless Veterans programs (GPD, VASH, SSVF, VA Medical Care, etc.) Monday through Friday 8:00am-4:30 pm. The Veteran status will be entered along with the assessment into HMIS.
3. Once the assessment is completed, the Veteran will be added to the One List the next business day. An appropriate match to a housing provider based on program eligibility and availability.
4. If a Veteran scores a 2 or above on the VI, he or she will be considered for a HUD-VASH voucher. Priority referral for HUD-VASH vouchers will follow the CES targeting prioritization process in this order:
 - Chronic Homelessness
 - VI Score
 - Number of days homeless
 - Date of application

The VA reserves the right to prioritize other sub populations (through the CES process) when all CES targeted & prioritized Veterans have been matched and there is voucher availability. Other priority subpopulations include: chronically homeless households with children; chronically homeless households who have been either formally or informally separated from their children; and OEF/OIF/OND Veterans who are chronically homeless.

5. Catholic Charities will notify the HUD VASH team by email the same day of a match being made. This email is generated by HMIS and the additional email serves to ensure the connection and to connect current location of Veteran is aware of the housing program match (GPD, Shelter, etc.) This email will

include the Veteran's Case Manager and Skilled Assessor as appropriate to help facilitate engagement between the Veteran and the HUD VASH program.

6. The HUD-VASH team will attempt to contact the Veteran to arrange a first meeting with the HUD-VASH staff within 2 business days of receiving the match. All due diligence will be used to continuously reach out to the Veteran until that contact has been made. The HUD VASH team will notify the system by email if their attempts to contact the Veteran have been unsuccessful after 1 week.
7. The HUD VASH team will notify the system if a Veteran matched to the program is not eligible for any reason. If the information in HMIS and HOMES are not aligned, the HUD VASH team, with the assistance of the CRRC, will work to update HOMES before a final determination of eligibility is made. If the Veteran needs to register for services at JBVA, he or she can walk in to the CRRC during normal business hours. If additional assistance is required, contact the CRRC to make outreach arrangements. If the Veteran is not eligible for VASH, the HUD VASH team will email the system with information about why the Veteran is ineligible. Catholic Charities will then update HMIS, and rematch as appropriate based on project availability and eligibility.
8. If the HUD VASH team is unsuccessful in engaging the Veteran, they will coordinate outreach efforts with the CRRC or the Jesse Brown VAMC Peer Support Team.

B. PROJECT BASED VASH PROGRAMS

1. Project Based HUD-VASH housing will be handled through the above-stated CES process of matching. The HUD-VASH program agrees to work with the EVHI Leadership Team and the providers to assist in determining the best way Catholic Charities (St. Leo's Residences) and the Hispanic Housing Development Corporation (65th Infantry) will incorporate these project based units into the CES process.
2. If a Veteran is referred to one of the Project Based HUD-VASH projects from CES and the Veteran meets all of the stated entry requirements of that housing provider, they are expected to serve the Veteran. If the PSH provider believes that the referred Veteran does not meet their stated eligibility requirements, the process will follow the steps laid out above.

C. VETERANS PORTING A VASH VOUCHER INTO THE CHICAGO AREA

The HUD-VASH tenant-based vouchers are portable. Portability allows Veterans to live in the community of their choice (with some limitations) by taking a previously issued Voucher with them. HUD-VASH participants may only port their voucher into those jurisdictional areas that have available HUD VASH Case Management services. The Jesse Brown VA is responsible for determining the appropriateness of accepting a porting request by a Veteran.

1. When the Jesse Brown HUD-VASH Program considers a port request from another catchment area, the treatment team will use its clinical judgment based on VA Readiness Assessment to approve or disapprove the Port request. If a Veteran is approved to Port their voucher to Chicago, that Chicago-based voucher will come out of the 10% of area vouchers set aside from CES referral and matching. In the event that the 10% has been utilized, the HUD-VASH program will notify the CES System Facilitator by email of the movement of the voucher to a porting Veteran and the utilization of a voucher that they are tracking.

2. If a Veteran who is porting a voucher to Chicago needs a temporary place to stay while looking for housing with which to use their ported voucher, the porting VA (Jesse Brown) is responsible for assisting the Veteran in locating Transitional Housing, if they did not have a housing plan in place (which is a main criteria in the Port Readiness Assessment completed by the VA. Placement in a TH bed, will be done in coordination with CES to ensure no overlapping bed assignments or other duplication of effort While that Veteran is occupying a transitional housing bed, the Veteran will be added to the One List for the purposes of tracking their movement to permanent housing move-in and the Transitional Housing provider and HUD-VASH team will be responsible for updating their HMIS entries as appropriate and needed. Please note that if it is an approved port, they would have already been accepted into HUD/VASH, therefore they should not be added to the one list for this will duplicate numbers. When a Veteran in this circumstance is entered into a Transitional Housing Bed while looking for a place to use their ported voucher, it is the responsibility of the HUD-VASH Team to notify the System Facilitator by email of this activity within 1 business day.

SSVF Real-Time Self Matching Protocols

Outreach Protocol

As part of community-wide outreach efforts, and in line with SSVF program outcomes, Chicago SSVF grantees will work together to coordinate targeted outreach plans to locate and assess Veterans who are experiencing homelessness. At a minimum, all grantees will conduct targeted outreach once a week.

Matching Protocol

SSVF grantees with a Skilled Assessor on their team will each identify a primary and secondary person to conduct matching for eligible Veterans to their program.

The identified staff members will match Veterans to their program by using the following conditions:

- The Veteran meets the agency SSVF eligibility criteria (via the Eligibility Module set up in HMIS):
 - For all SSVF grantees, Veteran households must have a discharge other than dishonorable, and must be below 50% of the AMI
 - Thresholds requires the presence of a mental health diagnosis
- The single Veteran is not experiencing chronic homelessness and has a VI score of 0 or 1, and the family is not experiencing chronic homelessness and has a score of 0 to 5 and appears to be an appropriate fit for a rapid rehousing intervention

If the Skilled Assessor requires any clarification about when to match the Veteran to their agency, they will contact the System Facilitator with questions.

When the Skilled Assessor finds that the Veteran is not an appropriate fit or is not eligible for SSVF, they will submit the assessment through HMIS to be matched within two business days, following standard protocol.

HMIS Protocol

SSVF staff members will enter all assessments into HMIS **the same day** they are completed. In cases when the SSVF staff member will self-match, they will complete the self-referral in HMIS and update the need status the same day the assessment is completed.

Provider Follow up Protocol

If the Veteran is not matched to the SSVF program that completed the assessment, the Skilled Assessor will be included in the email with matching information sent by Catholic Charities.

If the Veteran does not have a case manager or a phone, the Skilled Assessor will ask the Veteran to follow up with him or her to learn of the housing match and next steps. Catholic Charities will link the Skilled

Assessor and the housing provider as the Veteran is matched. This way, the Veteran will be able to follow up with the person who they completed an assessment with to learn of their housing match in the case when a housing provider cannot reach the Veteran directly. The SSVF provider will maintain contact as best as possible until the connection to the housing provider match is made.

Quality Assurance

The staff members identified as being able to self-match must complete the webinar, SSVF Self-Matching Workflow. This webinar includes information on how to score the Individual, Family, and Youth Vulnerability Index, how to make the match in HMIS, and communication expectations. The webinar can be accessed [here](#).

Re-Matching and Transfer Protocols

Veteran households who cannot be housed by a program they were matched to through the One List may require, and may be eligible for, a different housing opportunity. In order to make an appropriate re-referral to alternate permanent housing options, providers must indicate the reason the initial program was not possible by selecting the most appropriate status update (see protocol below) and including a note in HMIS. Requests for rematches and transfers will be discussed as part of the weekly System Integration Team meeting. The System Facilitator will notify Catholic Charities when rematches/transfers need to be made.

Please click here for the protocols for rematching and transfers http://www.csh.org/wp-content/uploads/2017/12/CES-Policy-and-Procedure-Guide_December.pdf. Links to the form, as well as to a instructional video can be found in the Resources Section of this document.

Housing Veterans

The Chicago Coordinated Entry system screens people in with moderate to high barriers to housing stability. It is a low barrier, person centered, easily accessible, and standardized system. Program eligibility will embrace these principles. Housing providers should offer housing first and assist in navigation of long term supports.

Veteran Status Confirmations

Unless otherwise specified, for City funded programs, Veterans may have any discharge status and any length of active military service. When conducting assessments, Skilled Assessors will contact the VA Outreach Triage Staff at 312-569-5750 during regular business hours (Monday through Friday 8:00am-4:30pm) to determine the following information about the Veteran's status:

- Discharge status
- Date of active military duty
- Eligibility for various Veterans' programs including GPD, VASH, SSVF, VA Medical Care
- HOMES (VA database) Chronic Status and date of that status

If a Veteran does not agree to go through the full assessment but has agreed (by signing the HMIS Consent) to have his/her information entered into HMIS, the Skilled Assessor will still complete the process of verifying the Veteran's status through the above stated procedure and indicate the information in the Veteran Status section of the Assessment.

The Jesse Brown VA has agreed to make two people available from CRRC to respond to these requests for information. If the Skilled Assessor is conducting the assessment during times that the POC's are not

available, they will notify the System Facilitator by email within 24 hours of the assessment. The System Facilitator will then be responsible for contacting the POC during regular business hours to obtain this information and enter it into HMIS.

VA-funded programs must verify that the Veteran meets eligibility criteria by reviewing the Veteran's DD214 paperwork. This can be obtained in person at the VA Regional office or through the mail.

For Chicago veterans:

VA Regional office address: 2122 W Taylor Street, Chicago, IL

Phone number: (800) 827-1000

Veterans must go in person to request this assistance.

If the Veteran enlisted in the state of IL and is experiencing homelessness, s/he is eligible to receive his/her DD-214 on the same day as the request.

Requesting a DD-214 through the mail:

Please complete the following steps:

1. Obtain Release of Information
2. Fill out Standard Form 180 <http://www.archives.gov/research/order/standard-form-180.pdf>
3. Write "**HOMELESS VETERAN**" on the form.
 - a. If we want the DD-214 to be returned directly to us, write our fax# on the form or our address
 - b. If the veteran wants to receive the form, write PP's address (we usually provide our office address to ensure we can make a copy and give them the original)
4. Fax the completed form to **314-801-9201**.

Housing Inspections

Providers funded by the City of Chicago and/or VA conduct inspections as part of the process of locating safe and sanitary apartments for Veteran households.

HMIS Updates

All providers must update HMIS when a Veteran is housed. This will successfully remove the Veteran from the One List and help Chicago track housing outcomes.

Coordination Plan between GPD and Housing Providers

The goal of this protocol is to create transparency and coordination in the process of assisting Veterans to transition into permanent housing (PH) from temporary and/or bridge housing as quickly as possible while honoring the Veterans choices. These policies and procedures should assist transitional housing (TH) (including Bridge housing) and permanent housing programs to work together as a team to prevent any delays in assisting Veterans with securing permanent housing as quickly as possible. When a Veteran is staying at a TH program while also engaged in the housing search with a PH provider, the TH staff will do everything possible to ensure that no program requirements interfere with their movement toward securing permanent housing. At the same time, the PH provider will ensure that their work with the Veteran does not negatively affect the Veteran's ability to stay in the TH program.

Intake

1. At the start of an intake conversation with a Veteran seeking access to a bed in TH, the TH provider will first look at ***HMIS in the Referrals Tab accessed via Service Transactions*** to determine if there are any current matches to a PH provider.
 - a. ***If the Veteran has already been matched, the TH staff member should contact the Matching Entity to assess whether the referral remains active.*** If it is still active, the TH provider will contact the PH provider ***the same day*** to schedule a meeting between the TH CM, the Veteran and the PH provider to discuss next steps that will occur ***within 2 days*** (see Coordination Meeting, below for more detail on this meeting).
2. Offer of Permanent Housing: If the Veteran has not already been matched to a PH provider, ***before the intake conversation occurs, the Veteran will be asked whether they would like to be connected to a permanent housing provider with the resources to get them housed as quickly as possible.*** The employee will explain that choosing this option will not affect the Veteran's ability to stay at the TH. It will only start the ball rolling on connecting that Veteran to a permanent housing provider while they are also staying at the TH (a script to follow is attached to this document).
 - a. The offer of permanent housing will be entered into the HMIS system via the Chicago Coordinated Entry System (CES) – Skilled Assessors Project on the Standardized Housing Assessment. The Veteran's response of "Accepted Offer" or "Declined Offer" will be recorded along with the date and the type of permanent housing offered.
 - b. The TH provider will ensure that the Veteran has had a completed assessment entered into the CES system (Standardized Housing Assessment).
 - Any change in contact information or household composition can be made by completing an Interim Assessment (Update option selected).
 - This assessment should be completed in the client's Entry into the TH project as an Interim Assessment (Update option selected).
 - Select the New Contact Information assessment (from the Entry Assessment available by default) and enter updated information.
 - c. If the Veteran does not initially accept the permanent housing offer the TH staff will ensure that ***the Veteran is asked whether they are ready to begin working to find permanent housing every two weeks and each discussion will be noted in HMIS in the Standardized Housing Assessment created as part of the Entry into the Chicago Entry System (CES) – Skilled Assessors Project.***
 - d. At the point that any Veteran states they want to begin working with a permanent housing program to begin to look for housing, the TH staff member records the acceptance of the permanent housing offer on the Chicago Standardized Housing Assessment. The Veteran will be matched to an appropriate permanent housing project the day following HMIS data entry (see Section 3 below).
3. When the intake is completed, and the Veteran has said, ***YES***, they want to work with a permanent housing provider, the TH staff will enter the Veteran into the HMIS system via the Chicago Coordinated Entry System (CES) – Skilled Assessors Project on the Standardized Housing Assessment with the Veteran's response of "Accepted Offer".

- a. The TH staff member will receive a match via email the following day. The referral will also be sent to the permanent housing provider at the same time. The referral will be created in HMIS with the client ID number referenced in the email message.
- b. Once the match has been made and reported to the providers, the TH provider will contact the PH provider **to schedule a meeting within 2 days of the match being made.**

The Coordination Meeting

1. The TH provider will gather all available documents to prepare for the meeting. These documents will include: picture ID, DD214, Proof of Income, Social Security card, and homelessness verification letter.
2. The meeting will be scheduled to occur at the TH program within two business days of the match being made. The Veteran, assigned TH worker, and PH provider will meet initially to discuss the coordination between TH and the housing project including communication between staff, the assistance that will be provided to the Veteran in finding housing, getting leased up and any financial assistance that might be available, and define roles with the Veteran.
 - a. Roles and timeframes will be clearly stated in the Veteran's ISP with a copy provided to the Veteran and the PH provider and a copy placed in both files (TH and PH provider).
 - b. If the Veteran is concurrently enrolled (or accepted) in both programs for longer than one month, then a **face to face meeting will be scheduled once a month** between the PH provider staff, the TH Case Manager (CM) and the Veteran. This meeting will focus on the progress toward housing, resolve any barriers, and set goals for achieving the housing quickly.

Ongoing Coordination between TH and PH provider

1. Each week on Monday before noon, the assigned PH provider will send an email with updates regarding the overall status of their Veteran(s) to the assigned TH CM and program manager.
 - a. The update will include activities that occurred with the Veteran, status of the housing search, any barriers to communication that occurred (including missed meetings, not returned phone calls, etc.).
 - b. The TH CM will respond by the end of the day with any relevant updates of their own (including upcoming appointments the Veteran may have, whether s/he has left the program, has been hospitalized, or the TH program has lost contact with the Veteran).
2. If the Veteran has not moved into permanent housing within a month, **a monthly face-to-face meeting will be scheduled** on the first week of each month between the PH provider, TH CM and the Veteran to discuss the progress to date, address any barriers, and make a plan with timeframes to move forward toward housing.
3. The TH CM and PH provider will notify each other within one business day if any of the following events occur prior to the weekly update:
 - Change in income or benefits
 - Hospitalization or incarceration
 - Updates regarding housing search (submission of application, scheduled inspections, lease signing, etc.)

- Changes in status at the TH program (TH CM only)
 - Missed appointments with the PH provider.
4. In the case of missed appointments, the TH CM will contact the Veteran and facilitate a new meeting between the Veteran and the PH provider.
 5. The TH CM is responsible for updating HMIS details within one day of their occurrence including:
 - Referral Need Status
 - Exits from TH
 - Updating assessment with income information

<end of protocol>

Progressive Engagement

If a Veteran moves into housing that is currently being paid for by a rapid rehousing program, the Veteran continues to be considered as experiencing homelessness solely for the purpose of maintaining eligibility for supportive housing programs. While the person is no longer part of the One List, if a housing provider finds that this person should be considered for supportive housing as part of the process of attempting to prevent future homelessness, the housing provider must complete the Transfer Request in HMIS; this will prompt case conferencing at the weekly System Integration meetings.

In cases when the System Integration Team approves moving a person from a rapid rehousing intervention to a supportive housing program, the household will be matched to a PSH program for which they are eligible. The RRH program in which they are currently residing is responsible for coordinating with the new PSH provider to create a plan for the change in service provision (including a timeline) and to ensure that a warm, successful handoff is made at the appropriate time.

Efforts to Engage Landlords

All Stakeholders in EVHI can direct potential partner landlords to our online portal at <https://www.surveymonkey.com/r/NoMoreHomeless>. Survey results are disseminated to EVHI housing locators as often as an inquiry is received as part of the Initiative's commitment to identifying safe, affordable housing for Veterans.

Evaluation

Feedback from Veterans

The EVHI values the feedback and input of the Veterans being served by the CES system and all of the providers. Therefore, focus groups must be conducted with Veterans who have and/or are currently experiencing homelessness. This feedback will be used to strengthen the system response and inform planning efforts to deliver better services and align appropriate housing resources based on Veterans' needs.

Veterans will receive an annual satisfaction survey, coordinated by the System Facilitator in partnership with housing providers. The survey will allow for anonymous feedback.

Grievance Policy and Nondiscrimination Policy

[Placeholder for link to the CES P&P – currently under review by CASC]

System Evaluation

The Leadership and Community teams shall meet together quarterly, or more frequently as necessary to review data, evaluate progress, and brainstorm solutions on the topics of operationalizing coordinated entry and achieving the Federal Criteria and Benchmarks.

Data

Program level data shall be shared at least monthly with the Leadership and Community Teams by way of a Data Dashboard maintained by All Chicago. This will assist with transparency of data at the program and agency level without sharing identifying information of Veterans. This will also assist both teams in reviewing patterns and will help with the facilitation of discussions about how resources should be used based on current needs. The Leadership Team will also use the Data Dashboard to track progress towards achieving the [Federal Benchmarks and Criteria](#). Additionally, the Data Dashboard is accessible to all current members of the CoC.

Resources

Please note that documents, forms, workflows, videos, and other helpful information can be found at <http://www.csh.org/chicagoces>

Tools:

[English Privacy Policy and HMIS Consent Forms](#)

[Standardized Housing Assessment](#)

[Individual Vulnerability Index](#)

[Family Vulnerability Index](#)

[Youth Vulnerability Index](#)

SSVF Self-Matching:

[SSVF Self-Matching Workflow](#)

[Individual VI Scoring Rubric](#)

HUD VASH Voucher Selection and Prioritization Plan:

<http://www.csh.org/wp-content/uploads/2017/09/CES-and-HUD-VASH-Voucher-Selection-Prioritization-Plan.pdf>

Rematching Request Form

[Rematching Request Form](#)

Match and Rematch Video

[Match and Rematch Video](#)

Transfer Request Video

[Transfer Request Video](#)