



ALLEGHENY COUNTY COORDINATED ENTRY POLICIES AND PROCEDURES

Updated: January 12, 2018

Accessing the Coordinated Entry System

Overview

The Allegheny County Coordinated Entry System (CES) covers Allegheny County in its entirety. Arbitrary barriers to housing have been removed from all programs participating in Allegheny County's CES, inclusive of those funded through the Continuum of Care (CoC) Grant and Emergency Solutions Grant (ESG). The CoC has adopted HUD CPD 16-11, HUD's *Notice on Prioritizing Persons Experiencing Chronic Homelessness and Other Vulnerable Homeless Persons in Permanent Supportive Housing*. The Allegheny Link functions as the single access point for the CES in Allegheny County. All households seeking service are provided fair and equal access regardless of their location or method by which they access the system.

Review and Updating

At least annually feedback will be solicited from providers and households utilizing homeless services through Coordinated Entry (CE). Feedback will be solicited using focus groups and surveys. Quantitative data will also be utilized. This information will be used to improve the processes of CE. Those changes will be incorporated into the policies and procedures. Additionally, the Homeless Advisory Board (HAB), the governance body for the CoC, will review and approve the policies and procedures annually.

Coverage

The Allegheny County CoC employs a centralized approach to CE. Allegheny Link is the one-stop access point for Coordinated Entry and serves the entire geographic region of Allegheny County and PA-600. The Allegheny Link Services Coordinators are available weekdays from 8:00 am to 7:00 pm. The Allegheny Link can be accessed in multiple ways:

By Phone: 1-866-730-2368

Walking In: Allegheny Link, One Smithfield Street, 2nd Floor, Pittsburgh, PA 15222

By Email: alleghenylink@alleghenycounty.us

Through partnership and collaboration, other call centers and community service providers e.g. 211, SeniorLine, food pantries, etc, assist households in connecting to Allegheny Link. This occurs through warm transfers of the households to the phone line, emails directly to Allegheny Link or connection to the Field Unit.

Outreach

Allegheny Link additionally has a Field Unit to act as a bridge between those who are street homeless and unable to contact Allegheny Link through any of the three-forementioned means. The Field Unit consists of Field Service Coordinators who partner with Street Outreach Teams to bring coordinated entry to those who are unsheltered. Additionally, the Field Unit has regular "office hours" at many of the day drop in centers, medical clinics and libraries where people experiencing homelessness may visit. The locations and hours are communicated to the public via the Homeless E-Share, Allegheny County Department of Human Service (DHS) website and emails to distribution lists. Street Outreach providers

can connect with the Field Unit to ensure that those who are encountered on the street are prioritized in the same manner as others who are accessing the CES.

Emergency Services (Shelter)

Individuals who do not have a safe place to stay that evening can access the shelters by presenting or calling to the program (See Attachment A). Single individuals do not have to contact the Allegheny Link to obtain referrals for emergency shelters. Individuals who do contact the Allegheny Link will be given information about the emergency shelter locations and intake times and will be directed to the shelter program of their choosing.

Access to family shelters is managed by the Allegheny Link. Families are instructed to call the Allegheny Link if they do not have a safe place to stay that evening. Families are then placed in a unit that matches the household makeup, as space is available.

During times that the Allegheny Link is not operational, there is a triage system that directs callers to a variety of options based on their situation. All the programs listed can assist people during off-hours as space is available, independently from the operational hours of Allegheny Link. As households present to shelter during times outside of the normal hours of operation of the Allegheny Link, shelters are asked to serve the households, as capacity allows, and connect the households to the Allegheny Link the next business day.

Emergency Services (Prevention)

For Prevention (Homeless Assistance Program (HAP) and ESG) funding a household is prioritized when they receive an Order of Possession from the Magistrate. Additionally, a referral does not guarantee assistance.

Marketing and Non-Discriminatory Access

The Allegheny County CoC, the CES and providers do not discriminate against any individual or household, regardless of race, color, national origin, religion, sex, age, familial status, disability, actual or perceived sexual orientation, gender identity or marital status. All people, regardless of their inclusion in different populations and subpopulations, including people experiencing chronic homelessness, veterans, families with children, youth and survivors of domestic violence (DV), have fair and equal access to the coordinated entry process. These policies are monitored through the referral and denial process, as noted below.

The implementation of coordinated entry through a central phone number and drop in center has greatly improved equal access to the homeless system. The phone number is toll-free and is operated and staffed 8am-7pm. During off-hours and weekends, a messaging services prompts callers to designated emergency housing services that have specialized protocols for those times. The drop-in center is in downtown Pittsburgh and is accessible by numerous bus routes. The path of access to the building and the building itself is fully accessible for people with disabilities. For those individuals and families who are unable or unwilling to access coordinated entry through walking in or by phone, the Allegheny Link employs field service coordinators who go into the streets, shelters and drop in centers to assist. Additionally, the Allegheny Link utilizes language translation services (including sign language)

that are “on demand” for people attempting to access coordinated entry for whom English is not the primary or preferred language.

The Allegheny Link staff attend meetings and community events to explain and market access to the homeless system. These engagements include the Immigrants and Internationals Task Force, Disability Task Force, Affirmatively Furthering Fair Housing Task Force and other meeting that serve people with disabilities, racial and sexual minorities and other protected classes. Additionally, materials are posted at the local libraries and County Assistance Offices (SNAP, Medicaid and TANF enrollment sites) advertising the Allegheny Link. The Allegheny Link also has a prominent presence on the websites of both the Allegheny County Department of Human Services and the Homeless Advisory Board. Lastly, information about the Allegheny Link and Coordinated Entry are integrated in BigBurgh.com, a web-based portal designed to help law enforcement find appropriate resources for those who are experiencing homelessness.

Safety Planning

Collaborating with the CoC’s VAWA-funded agencies, DV trainings are provided to coordinated entry staff on a rolling basis, including training on identification, intervention, referrals and safety issues. Additionally, the coordinated entry staff receive trauma informed care and mental health first aid trainings. Coordinated entry staff assisting survivors of domestic violence confirm that a safety plan is in place; if not, immediate safety issues are discussed and the client is connected to a domestic violence provider for ongoing safety planning. Allegheny Link staff ensure that the client can share information safely during the contact and are transparent about information collection and storage.

Privacy

The Allegheny Link obtains consent to share information for purposes of assessing and referring participants through the CE process. Participants decide what information they provide during the assessment process without retribution or limited access to assistance. Services will not be denied if the participant refuses to provide certain pieces of information, unless the information is necessary to establish or document program eligibility per the applicable program regulation, or Federal statute requires collection, use, storage and reporting of personally identifying information as a condition of program participation. Households are not asked or required to disclose specific disabilities or diagnosis except when it is needed to determine program eligibility to make appropriate referrals. Participants are informed of the ability to file a complaint through the grievance process, which includes contacting the Director’s Action Line.

Assessment

Standardized Access and Assessment Tool

When any household contacts that Allegheny Link (phone call, walk in or in the field) and indicates they are experiencing a housing crisis, staff first complete an initial screening for services. In an effort to prevent and divert people from entering the homeless system, Allegheny Link will do a thorough evaluation of all public benefit programs for which an individual may qualify. These programs include, but are not limited to:

- Housing Resources (Affordable, Subsidized, Accessible, etc)

- Food Assistance (Food Pantries, SNAP Benefits)
- Utility Assistance (Universal Services, Dollar Energy, LIHEAP)
- Health Insurance (Medical Assistance, Medicare Savings Programs, Rx Programs)
- Transportation Programs (Medical Assistance Transportation Program, ACCESS)
- Employment/Income Assistance (CareerLink, Office of Vocational Rehabilitation, SOAR, TANF)
- Mental Health and Drug and Alcohol Services
- Documentation Replacement Services (Birth Certificates, SS Card, Photo ID)
- Tangible Goods (Furniture, Clothing, Baby Supplies, Appliances, etc)
- Home and Community Based Waiver Programs and Other In Home Services
- Home Visiting Programs for Parents with Young Children

For households who do not have a safe place to stay that evening and/or are fleeing domestic violence, the following process is followed:

- Households must meet the CoC definition of homelessness (Literally homeless or fleeing domestic violence)
- Households must complete all questions on the pre-screening screen (Eligibility + VI-SPDAT questions) that are incorporated into one comprehensive assessment
 - Allegheny Link utilizes Single, Family, and Youth VI-SPDAT based on the household composition
- A Head of Household can receive only 1 VI-SPDAT score and 1 Referral episode at any given time
 - This means that if they call back to the Allegheny Link and their situation has changed (for example: hospitalized, incarcerated or had criminal involvement, relapsed or had additional clean time in relation to their drug and alcohol issues, lost or reunified with children, household composition changed) staff will complete a new pre-screening assessment to better capture vulnerability at that point in time.

For households who are not being evicted, homeless or fleeing domestic violence, but are unstably housed the following process is followed:

- Basic demographic information is collected
 - Questions relating to focusing/targeting of housing resources are included
- Are provided subsidized housing options (Housing Authorities) and affordable housing search resources.
 - Basic review of differences between subsidized and affordable housing
 - Explain housing search options (PA Housing Search, HUD.gov, Newspapers, Craig's List)
 - If the household does not have access to the internet public libraries are suggested and client is informed that PA Housing Search has a toll free # 1-877-428-8844. They can also pick up any listings at the Allegheny Link office.

- If interested an Allegheny Link Affordable Housing Resource Packet can be mailed, emailed or picked up at office.
 - This packet is a “starter kit” for households beginning a housing search. Includes detailed housing authority information, how to search for affordable housing, rental tracking sheet, potential documentation required, potential landlord questions, legal assistance for housing issues, where to find furniture or household items, general financial assistance agencies, and utility company information.

For households who are being evicted for rental arrears, the following process is followed:

- Household completes a more limited eligibility assessment
- Household must have a written notice from landlord or magistrate to qualify for Urban League referrals while also being targeted for community resources
 - Households that are at the crisis points of magistrate judgment or Order for Possession are prioritized to prevent imminent homelessness
- Household must have a notice from the magistrate to qualify for ESG referrals while also being targeted for community resources
 - Households that are at the crisis point of an Order for Possession are prioritized to prevent imminent homelessness
- Household is targeted to one prevention program path specific to their situation to more efficiently alleviate their issue

Additionally:

- All households are encouraged to be as open and honest as possible to get the most accurate assessment of their crisis
- All households are read a disclaimer relating to the sharing of their information as a program that receives their referral will have access to their complete assessment to better coordinate services
- All households assessed for homeless services are provided the opportunity to receive a connection request to a Street Outreach team within the CoC

Prioritization

The Allegheny County CoC prioritizes households experiencing homelessness within the CoC’s geographic area for referral to housing and services. Priorities are consistent with CoC and ESG written standards approved by the HAB. All referrals to ESG and CoC funded programs flow through the Allegheny Link.

The Allegheny County CoC has adopted CPD-16-11, HUD’s *Notice on Prioritizing Persons Experiencing Chronic Homelessness and Other Vulnerable Homeless Persons in Permanent Supportive Housing* (See Attachment B). Additionally, the CoC has expanded the prioritization practices to the Rapid Rehousing, Bridge and Transitional Housing programs. Therefore, households designated as Chronically Homeless are prioritized throughout the entire system. Additionally, the CoC has adopted the local priorities of

Veterans, Youth (age 18-24) and those fleeing domestic violence. These have been implemented at “tie-breakers,” where chronicity, length of time homeless and vulnerability are equal across two households.

Referrals

Referrals to programs with vacancies are managed through the following process.

- When a provider has a vacancy in a program, they will contact the Homeless Resource Coordinator (HRC) via HMIS to request a referral.
- Once the HRC receives the request for a referral, the HRC will begin working down the prioritized list of potential households. Households will be attempted to be contacted a minimum of 3 times by each contact method. The HRC will attempt to contact a minimum of 3 times in 72 hours.
- Once contacted the HRC will re-prescreen the household for eligibility and explain the program offering the vacancy.
- If agreeable, the household’s information will be forwarded via a referral in HMIS to the requesting provider.
- When the referral is given to the provider, the client must be contacted within 1 business day.
- Family shelters must attempt to contact a minimum of 3 times in 24 hours. All other programs must attempt to contact a minimum of 3 times in 72 hours.
- Programs must try all contact phone numbers listed in the referral and email the household if an email address is listed in the referral. Every contact attempt must be documented with the date, time and outcome.
 - Thus, if there are 3 phone numbers listed for the household, each number must be contacted 3 times (a total of 9 phone calls).
 - As soon as the household verbally expresses interest in the program, the referral status should be changed from Assigned to Accepted-Pending.

Participants’ rights to reject a referral

Participants have the right to reject a referral and decline programs based upon client preference. Providers should refer the participant back to CE if an updated assessment is needed. At the time of assessment, the Allegheny Link informs clients that they cannot guarantee a timeline as to when a vacancy may become available. As part of a Crisis Response system, clients are encouraged to work with first availability to quickly resolve their housing crisis unless there are imminent safety concerns.

Provider expectations for document collection for eligibility

- During the regular intake and enrollment process, a provider should verify proof of homelessness documentation.
- Once a participant is enrolled, the program has up to 45 days to collect all remaining documentation. The only exception is documentation of Chronic status. Participants can

have up to 180 days for verification of their homeless timeline only. See:

<https://www.hudexchange.info/faqs/2872/for-many-persons-experiencing-chronic-homelessness-obtaining-the-required/>

- If documentation cannot be produced within 45 days of enrollment, then the client may be removed from the program.

Documents Needed to Verify Priority Populations: DHS requires that clients identified as part of certain priority populations have the required documentation to receive this priority. These priority populations and priority circumstances include:

- *Chronic homeless status:* Clients will need disability verification as well as documentation of homeless status continuously for 12 months (1 year) or 4 episodes of homelessness in three years. Programs must document according to the Recordkeeping Requirements established in HUD's Notice CPD-16-11, with third party verification preferred.
- *Length of homelessness:* Clients will need documentation of homeless status continuously for 12 months (1 year) or 4 episodes within the last three years adding up to 12 months or longer. Third party verification is preferred.
- *Unaccompanied youth status:* Single clients who are ages 18 to 24 with no minor children or other household members.
- *Domestic violence status:* Clients who are actively fleeing domestic violence can self-certify upon entrance into the program.
- *Veteran status:* Clients will need to provide proof of military service and documentation of their military discharge status.

Program Denials

If a program has completed the necessary steps to determine client eligibility (for example, contacting client, scheduling appointment, conducting interview, verifying required documentation) and the client is ineligible for any reason, their status on the bulletin board should be changed to "denied-pending" with a reason from the dropdown. This will be sent to the Bureau of Homeless Services (BHS) administrators who have 48 business hours to review the denial and provide a decision to the program. BHS reserves the right to approve or reject denials based on due-diligence and fact-gathering of the circumstances.

In all program types, except Emergency Shelters, Rental Assistance and Prevention programs, the vacant unit will electronically be held for the client until the denial is accepted by BHS or the client has been enrolled. If this is the only vacancy in the program, the program will not be able to request any subsequent referrals until a decision is made by BHS regarding the denial. If there are multiple vacancies, the program will be able to continue to work with the next assigned client(s) while the denied client's status is reviewed.

Reasons in HMIS for a program to deny a client

- Could not document homelessness
- Could not document Chronic Homelessness

- Could not document veteran status
- Missing documentation
- Income is over the income threshold
- No contact after 3 attempts
- No show
- No longer interested in program
- No longer homeless
- Does not meet selection criteria (e.g. over income threshold for program eligibility; change in household circumstance; is an imminent risk to the other clients or program staff; etc.)

If BHS approves a denial: BHS will review current program enrollment and recent contact with the Allegheny Link to determine if further follow up with the household is needed. Depending on the household's situation, BHS will reach out to households to determine if they are still in need of homeless services. BHS then either removes or maintains the household's other referrals. BHS may coordinate with the Allegheny Link for the household to update assessment as needed.

If BHS rejects a denial: The referral status will change back to "assigned" on the program's bulletin board and the program should continue to work with the household to reduce barriers to program enrollment.

Reasons for BHS to Reject a Denial

- The program could not adequately document the reason for the denial.
- The program cannot demonstrate client is an imminent risk to the other households or program staff.
- There were less than the 3 minimum required attempts to contact the referred household within 24 hours for emergency shelter programs, and 72 hours for all other programs.
- Provider's program requirements are unreasonable and have no predictive value to possible success in the program.
- Denial may violate DHS policies or existing local, state or federal law.

If the program disagrees with BHS' final decision, the program has the right to appeal the decision. The following steps outline the procedure for appealing BHS denial rejections:

1. Programs that disagree with BHS' decision to reject a denial must submit a request for appeal. Initially, it can be submitted electronically via email and then followed up with a letter on formal provider letterhead in the mail. The appeal request must include the following:
 - a. name and Referral ID of the applicant;
 - b. short summary of the denial process to date including date of original denial and BHS decision; and
 - c. short explanation of the reasons the program believes the BHS decision to reject the denial should be over turned.

All appeals should be submitted to the DHS Homeless Program Appeal Panel (hereafter referred to as the "panel") by emailing Sheila Bell, Assistant Executive Deputy Director,

Integrated Program Services (IPS) at Sheila.Bell@AlleghenyCounty.us within 1 business day from the time of BHS rejection of denial, and then followed by a letter to:

Allegheny County Department of Human Services
DHS Homeless Program Appeal Panel
Attn: Sheila Bell, Assist. Deputy Director, IPS
One Smithfield Street, 4th Floor
Pittsburgh, PA 15222

2. The DHS Homeless Appeal Panel consists of the following staff: Executive Deputy Director, Integrated Program Services (IPS); Deputy Director Office of Community Relations; Deputy Director, Office of Data Analysis, Research and Evaluation; and Assistant Executive Deputy Director, IPS. After an appeal is requested, the panel will convene a meeting with the program staff who made the appeal (and others they choose to invite) and the BHS staff who were involved in the initial denial decision. The meeting must be scheduled within 7 business days from the appeal.
3. At the appeal meeting, the program and the BHS staff will each have an opportunity to present their reasons for denial/rejection of denial. The panel will also have the opportunity to ask questions. If consensus on a decision can be reached at this meeting, the process may end at this step and the decision of the group will be documented in writing by the panel and sent to all parties involved.
4. If consensus cannot be reached during the appeal review meeting, the panel will have 72 hours to make a final decision. This decision will be documented in writing and submitted to all parties involved.
5. If the program does not agree with the final decision made by the panel, the program may file an administrative appeal through the Court of Common Pleas.

Attachment A



THE PROCESS FOR EMERGENCY SHELTERS SERVING FAMILIES AND REFERRALS TO LONGER-TERM HOMELESS PROGRAMS (Rapid Rehousing and Permanent Supportive Housing) IS TO REACH OUT TO THE LINK.

Call or visit Allegheny Link to discuss these services at 1-866-730-2368
or
1 Smithfield Street
Downtown
Mon-Fri 8am-7pm

| Domestic Violence Shelters | |
|----------------------------|----------------|
| Alle-Kiski Hope Center | 1-888-299-4673 |
| Center for Victims | 1-866-644-2882 |
| Women's Center and Shelter | 412-687-8005 |

| Men's Emergency Shelters | Process To Request a Bed | Contact Information | Curfew Once Enrolled | Wheelchair Accessible? |
|---|--|--|--------------------------------------|------------------------|
| LIGHT OF LIFE 10 East North Avenue Pittsburgh, PA 15212 | Roll call at 6:30P in the Light of Life Chapel (Walk-ins offered after roll call if openings) Evening/Weekend Intakes: Weekends during day | 412-803-4120 eburns@lightoflife.org (No email during evenings or weekends) | 7:30P (no exceptions) | No |
| PLEASANT VALLEY 1601 Brighton Road Pittsburgh, PA 15212 | Call from 10-11A to request a bed. Arrive from 3-4P to complete intake. 412-323-1163 Evening/Weekend Intakes: Only in emergencies | 412-321-4272 scott.wood@ncmin.org (Same during evenings and weekends) | 7:30P (exceptions for employment) | Yes |
| EAST END COOPERATIVE MINISTRY 6140 Station Street Pittsburgh, PA 15206 | Contact the shelter for vacancies by phone (preferred) or walk-in M-Th 7A – 6P & Fri 7A – 2P Evening/Weekend Intakes: No | 412-345-7150, Roena Taylor or main # 412-361-5549 (Option 1 IMPACTS Program) | 7P (exceptions for employment) | Yes |
| MCKEESPORT DOWNTOWN HOUSING 523 Sinclair Street McKeesport, PA 15132 | Contact or visit the shelter for vacancies Mon – Fri 9A – 1P. Intakes scheduled Mon – Thurs 9A – 1P. Evening/Weekend Intakes: <i>Only if SWES open</i> | 412-664-9168 (Same during evenings and weekends) | None | Yes |

| Men's Emergency Shelters for Specific Populations | Process To Request a Bed | Contact Information | Curfew Once Enrolled | Wheelchair Accessible? |
|--|--|---|--|------------------------|
| FAMILY LINKS (Youth Only, ages 18 – 24) 1601 Fifth Avenue Pittsburgh, PA 15219 | Contact shelter to schedule an intake appointment. Evening/Weekend Intakes: Yes | 412-471-6160 412-924-0500 (Same on evenings/weekends) | 10P (Sun – Thurs) 11P (Fri – Sat) | Yes |

Veterans may also contact the National Call Center for Homeless Veterans at 1-877-424-3838 and the VA Pittsburgh Healthcare System at 412-328-0697.

| Women's Emergency Shelters | Process To Request a Bed | Contact Information | Curfew Once Enrolled | Wheelchair Accessible? |
|---|--|--|---|------------------------|
| BETHLEHEM HAVEN 905 Watson Street Pittsburgh, PA 15219 | Contact shelter for vacancies & to schedule intake. Evening/Weekend Intakes: 5P – 10P (weekdays) & when possible on weekends | Intake Coordinator, Felicia Chapman, 412-391-1348 ext. 250 or Front Desk, ext. 219 | 10P (exceptions for extenuating circumstances) | Yes |
| EAST END COOPERATIVE MINISTRY 6140 Station Street Pittsburgh, PA 15206 | Contact shelter for vacancies by phone (preferred) or walk-in M-Th 7A – 6P & Fri 7A – 2P Evening/Weekend Intakes: No | 412-345-7150, Roeeena Taylor or main # 412-361-5549 (Option 1 IMPACTS Program) | 7P (exceptions for employment) | Yes |
| MCKEESPORT DOWNTOWN HOUSING 523 Sinclair Street McKeesport, PA 15132 | Contact or visit shelter for vacancies Mon – Fri 9A – 1P. Intakes scheduled Mon – Thurs from 9A – 1P Evening/Weekend Intakes: <i>Only if SWES open</i> | 412-664-9168 (Same during evenings and weekends) | None | Yes |



THE PROCESS FOR EMERGENCY SHELTERS SERVING FAMILIES AND REFERRALS TO LONGER-TERM HOMELESS PROGRAMS (Rapid Rehousing and Permanent Supportive Housing) IS TO REACH OUT TO THE LINK.

Call or visit Allegheny Link to discuss these services at 1-866-730-2368 or 1 Smithfield Street Downtown Mon-Fri 8am-7pm

| Women's Emergency Shelters for Specific Populations | Process To Request a Bed | Contact Information | Curfew Once Enrolled | Wheelchair Accessible? |
|---|--|---|--------------------------------------|------------------------|
| GENESIS OF PITTSBURGH (Pregnant Women Only) 185 Dakota Avenue Pittsburgh, PA 15202 | Contact shelter by phone for vacancies & to schedule intake. Evening/Weekend Intakes: Only in emergencies | 412-766-2693 | Weekdays 8P Weekends 10P | No |
| PROJECT JOURNEY (Veterans Only) Scattered Site | Contact program via phone or walk-in for vacancies & intake. Evening/Weekend Intakes: As needed | 412-481-8200 x 216 Program Supervisor: Trudy Friend | None | No |
| FAMILY LINKS (Youth Only, ages 18 – 24) 1601 Fifth Avenue Pittsburgh, PA 15219 | Contact shelter to schedule an intake appointment. Evening/Weekend Intakes: Yes | 412-471-6160 412-924-0500 (Same on evenings/weekends) | 10P (Sun – Thurs) 11P (Fri – Sat) | Yes |

| Domestic Violence Shelters | Domestic Violence Shelters |
|----------------------------|----------------------------|
| Alle-Kiski Hope Center | 1-888-299-4673 |
| Center for Victims | 1-866-644-2882 |
| Women's Center and Shelter | 412-687-8005 |

Veterans may also contact the National Call Center for Homeless Veterans at 1-877-424-3838 and the VA Pittsburgh Healthcare System at 412-328-0697.

Attachment B



Special Attention of:

All Secretary's
Representatives

Notice: CPD-16-11

Issued: July 25, 2016

Expires: This Notice is effective until it is amended, superseded, or rescinded

Issued:

All Regional Directors for
CPD

Cross Reference: 24 CFR Parts 578 and
42 U.S.C. 11381, *et seq.*

Expires:

All CPD Division Directors
Continuums of Care (CoC)
Recipients of the Continuum of Care (CoC)
Program

Subject: Notice on Prioritizing Persons Experiencing Chronic Homelessness and Other Vulnerable Homeless Persons in Permanent Supportive Housing

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I. Purpose

This Notice supersedes Notice CPD-14-012 and provides guidance to Continuums of Care (CoC) and recipients of Continuum of Care (CoC) Program (24 CFR part 578) funding for permanent supportive housing (PSH) regarding the order in which eligible households should be served in **all** CoC Program-funded PSH. This Notice reflects the new definition of chronically homeless as defined in CoC Program interim rule as amended by the Final Rule on Defining “Chronically Homeless” (herein referred to as the Definition of Chronically Homeless final rule) and updates the orders of priority that were established under the prior Notice. CoCs that previously adopted the orders of priority established in Notice CPD-14-012, which this Notice supersedes, and who received points for having done so in the FY2015 CoC Program Competition are encouraged to update their written standards to reflect the updates to the orders of priority as established in this Notice. CoCs that have not previously adopted the orders of priority established in Notice CPD-14-012 are also encouraged to incorporate the orders of priority included in this Notice into their written standards

A. Background

In June 2010, the Obama Administration released *Opening Doors: Federal Strategic Plan to Prevent and End Homelessness (Opening Doors)*, in which HUD and its federal partners set goals to end Veteran and chronic homelessness by 2015, and end family and youth homelessness by 2020. Although progress has been made there is still a long way to go. In 2015, the United States Interagency Council on Homelessness extended the goal timeline for achieving the goal of ending chronic homelessness nationally from 2015 to 2017. In 2015, there were still 83,170 individuals and 13,105 persons in families with children that were identified as chronically homeless in the United States. To end chronic homelessness, it is critical that CoCs ensure that limited resources awarded through the CoC Program Competition are being used in the most effective manner and that households that are most in need of assistance are being prioritized.

Since 2005, HUD has encouraged CoCs to create new PSH dedicated for use by persons experiencing chronic homelessness (herein referred to as dedicated PSH). As a result, the number of dedicated PSH beds funded through the CoC Program for persons experiencing chronic homelessness has increased from 24,760 in 2007 to 59,329 in 2015. This increase has contributed to a 30.6 percent decrease in the number of chronically homeless persons reported in the Point-in-Time Count between 2007 and 2015. Despite the overall increase in the number of dedicated PSH beds, this only represents 31.6 percent of all CoC Program-funded PSH beds.

To ensure that all PSH beds funded through the CoC Program are used as strategically and effectively as possible, PSH needs to be targeted to serve persons with the highest needs and greatest barriers towards obtaining and maintaining housing on their own—persons experiencing chronic homelessness. HUD’s experience has shown that many communities and recipients of CoC Program-funded PSH continue to serve persons on a “first-come, first-serve” basis or based on tenant selection processes that screen-in those who are most likely to succeed while screening out those with the highest level of need. These approaches to tenant

selection have not been effective in reducing chronic homelessness, despite the increase in the number of PSH beds nationally.

B. Goals of this Notice

The overarching goal of this Notice is to ensure that those individuals and families who have spent the longest time in places not meant for human habitation, in emergency shelters, or in safe havens and who have the most severe service needs within a community are prioritized for PSH. By ensuring that persons with the longest histories of homelessness and most severe service needs are prioritized for PSH, progress towards the Obama Administration's goal of ending chronic homelessness will increase. In order to guide CoCs in ensuring that all CoC Program-funded PSH beds are used most effectively, this Notice revises the orders of priority related to how persons should be selected for PSH as previously established in Notice CPD-14-012 to reflect the changes to the definition of chronically homeless as defined in the Definition of Chronically Homeless final rule. CoCs are strongly encouraged to adopt and incorporate them into the CoC's written standards and coordinated entry process.

HUD seeks to achieve two goals through this Notice:

1. Establish a recommended order of priority for dedicated and prioritized PSH which CoCs are encouraged to adopt in order to ensure that those persons with the longest histories residing in places not meant for human habitation, in emergency shelters, and in safe havens and with the most severe service needs are given first priority.
2. Establish a recommended order of priority for PSH that is not dedicated or prioritized for chronic homelessness in order to ensure that those persons who do not yet meet the definition of chronic homelessness but have the longest histories of homelessness and the most severe service needs, and are therefore the most at risk of becoming chronically homeless, are prioritized.

C. Applicability

The guidance in this Notice is provided to all CoCs and all recipients and subrecipients of CoC Program funds—the latter two groups referred to collectively as recipients of CoC Program-funded PSH. CoCs are strongly encouraged to incorporate the order of priority described in this Notice into their written standards, which CoCs are required to develop per 24 CFR 578.7(a)(9), for their CoC Program-funded PSH. Recipients of CoC Program funds are required to follow the written standards for prioritizing assistance established by the CoC (see 24 CFR 578.23(c)(10)); therefore, if the CoC adopts these recommended orders of priority for their PSH, all recipients of CoC Program-funded PSH will be required to follow them as required by their grant agreement. CoCs that adopted the orders of priority established in Notice CPD-14-012, which this Notice supersedes, and who received points for having done so in the most recent CoC Program Competition are strongly encouraged to update their written standards to reflect the updates to the orders of priority as established in this Notice. Lastly, where a CoC has chosen to not adopt HUD's recommended orders of priority into their written standards, recipients of CoC Program-funded PSH are encouraged to follow these standards for selecting participants into their programs as long as it is not inconsistent with the CoC's written standards.

D. Key Terms

1. **Housing First.** A model of housing assistance that prioritizes rapid placement and stabilization in permanent housing that does not have service participation requirements or preconditions for entry (such as sobriety or a minimum income threshold). HUD encourages all recipients of CoC Program-funded PSH to follow a Housing First approach to the maximum extent practicable.
2. **Chronically Homeless.** The definition of “chronically homeless”, as stated in Definition of Chronically Homeless final rule is:
 - (a) A “homeless individual with a disability,” as defined in section 401(9) of the McKinney-Vento Homeless Assistance Act (42 U.S.C. 11360(9)), who:
 - i. lives in a place not meant for human habitation, a safe haven, or in an emergency shelter; and
 - ii. Has been homeless and living as described in paragraph (a)(i) continuously for at least 12 months or on at least four separate occasions in the last 3 years, as long as the combined occasions equal at least 12 months and each break in homelessness separating the occasions included at least 7 consecutive nights of not living as described in paragraph (a)(i). Stays in institutional care facilities for fewer than 90 days will not constitute as a break in homelessness, but rather such stays are included in the 12-month total, as long as the individual was living or residing in a place not meant for human habitation, a safe haven, or an emergency shelter immediately before entering an institutional care facility;
 - (b) An individual who has been residing in an institutional care facility, including a jail, substance abuse or mental health treatment facility, hospital, or other similar facility, for fewer than 90 days and met all of the criteria in paragraph (a) of this definition, before entering the facility;
 - (c) A family with an adult head of household (or if there is no adult in the family, a minor head of household) who meets all of the criteria in paragraph (a) or (b) of this definition (as described in Section I.D.2.(a) of this Notice), including a family whose composition has fluctuated while the head of household has been homeless.
3. **Severity of Service Needs.** This Notice refers to persons who have been identified as having the most severe service needs.
 - (a) For the purposes of this Notice, this means an individual for whom at least one of the following is true:
 - i. History of high utilization of crisis services, which include but are not limited to, emergency rooms, jails, and psychiatric facilities; and/or

- ii. Significant health or behavioral health challenges, substance use disorders, or functional impairments which require a significant level of support in order to maintain permanent housing.
- iii. For youth and victims of domestic violence, high risk of continued trauma or high risk of harm or exposure to very dangerous living situations.
- iv. When applicable CoCs and recipients of CoC Program-funded PSH may use an alternate criteria used by Medicaid departments to identify high-need, high cost beneficiaries.

(b) Severe service needs as defined in paragraphs i.-iv. above should be identified and verified through data-driven methods such as an administrative data match or through the use of a standardized assessment tool and process and should be documented in a program participant's case file. The determination must not be based on a specific diagnosis or disability type, but only on the severity of needs of the individual. The determination cannot be made based on any factors that would result in a violation of any nondiscrimination and equal opportunity requirements, see 24 C.F.R. § 5.105(a).

II. Dedication and Prioritization of Permanent Supportive Housing Strategies to Increase Number of PSH Beds Available for Chronically Homeless Persons

A. Increase the number of CoC Program-funded PSH beds that are dedicated to persons experiencing chronic homelessness.

Dedicated PSH beds are those which are required through the project's grant agreement to only be used to house persons experiencing chronic homelessness unless there are no persons within the CoC that meet that criteria. If there are no persons within the CoC's geographic area that meet the definition of chronically homeless at a point in which a dedicated PSH bed is vacant, the recipient may then follow the order of priority for non-dedicated PSH established in this Notice, if it has been adopted into the CoC's written standards. The bed will continue to be a dedicated bed, however, so when that bed becomes vacant again it must be used to house a chronically homeless person unless there are still no persons who meet that criterion within the CoC's geographic area at that time. These PSH beds are also reported as "CH Beds" on a CoC's Housing Inventory Count (HIC).

B. Prioritize non-dedicated PSH beds for use by persons experiencing chronic homelessness.

Prioritization means implementing an admissions preference for chronically homeless persons for CoC Program-funded PSH beds. During the CoC Program competition project applicants for CoC Program-funded PSH indicate the number of non-dedicated beds that will be prioritized for use by persons experiencing chronic homelessness during the operating year of that grant, when awarded. These projects are then required to prioritize chronically homeless persons in their non-dedicated CoC Program-funded PSH beds for the applicable operating year as the project application is incorporated into the

grant agreement. All recipients of non-dedicated CoC Program-funded PSH are encouraged to change the designation of their PSH to dedicated, however, at a minimum are encouraged to prioritize the chronically homeless as beds become vacant to the maximum extent practicable, until there are no persons within the CoC's geographic area who meet that criteria. Projects located in CoCs where a sub-CoC approach to housing and service delivery has been implemented, which may also be reflected in a sub-CoC coordinated entry process, need only to prioritize assistance within their specified area. For example, if a Balance of State CoC has chosen to divide the CoC into six distinct regions for purposes of planning and housing and service delivery, each region would only be expected to prioritize assistance within its specified geographic area.¹

The number of non-dedicated beds designated as being prioritized for the chronically homeless may be increased at any time during the operating year and may occur without an amendment to the grant agreement.

III. Order of Priority in CoC Program-funded Permanent Supportive Housing

The definition of chronically homeless included in the final rule on “Defining Chronically Homeless”, which was published on December 4, 2015 and went into effect on January 15, 2016, requires an individual or head of household to have a disability and to have been living in a place not meant for human habitation, in an emergency shelter, or in a safe haven for at least 12 months either continuously or cumulatively over a period of at least 4 occasions in the last 3 years. HUD encourages all CoCs adopt into their written standards the following orders of priority for all CoC Program-funded PSH. CoCs that adopted the orders of priority established in Notice CPD-14-012, which this Notice supersedes, and who received points for having done so in the most recent CoC Program Competition are strongly encouraged to update their written standards to reflect the updates to the orders of priority as established in this Notice. Where a CoC has chosen to not incorporate HUD's recommended orders of priority into their written standards, recipients of CoC Program-funded PSH are encouraged to follow these standards for selecting participants into their programs as long as it is not inconsistent with the CoC's written standards.

As a reminder, recipients of CoC Program-funded PSH are required to prioritize otherwise eligible households in a nondiscriminatory manner. Program implementation, including any prioritization policies, must be implemented consistent with the nondiscrimination provisions of the Federal civil rights laws, including, but not limited to the Fair Housing Act, Section 504 of the Rehabilitation Act, Title VI of the Civil Rights Act, and Title II or III of the Americans with Disabilities Act, as applicable. For example, while it is acceptable to prioritize based on level of need for the type of assistance being offered, prioritizing based on specific disabilities would not be consistent with fair housing requirements or program regulations.

¹ For the State of Louisiana grant originally awarded pursuant to “Department of Housing and Urban Development—Permanent Supportive Housing” in chapter 6 of title III of the Supplemental Appropriations Act, 2008 (Public Law 110–252; 122 Stat. 2351), projects located within the geographic area of a CoC that is not the CoC through which the State is awarded the grant may prioritize assistance within that geographic area instead of within the geographic area of the CoC through which the State is awarded the grant.

A. Prioritizing Chronically Homeless Persons in CoC Program-funded Permanent Supportive Housing Beds Dedicated or Prioritized for Occupancy by Persons Experiencing Chronic Homelessness

1. CoCs are strongly encouraged to revise their written standards to include an order of priority, determined by the CoC, for CoC Program-funded PSH that is dedicated or prioritized for persons experiencing chronic homelessness that is based on the length of time in which an individual or family has resided in a place not meant for human habitation, a safe haven, or an emergency shelter and the severity of the individual's or family's service needs. Recipients of CoC Program-funded PSH that is dedicated or prioritized for persons experiencing chronic homelessness would be required to follow that order of priority when selecting participants for housing, in a manner consistent with their current grant agreement.
2. Where there are no chronically homeless individuals and families within the CoC's geographic area, CoCs and recipients of CoC Program-funded PSH are encouraged to follow the order of priority in Section III.B. of this Notice. For projects located in CoC's where a sub-CoC approach to housing and service delivery has been implemented, which may also be reflected in a sub-CoC coordinated entry process, need only to prioritize assistance within their specified sub-CoC area.²
3. Recipients of CoC Program-funded PSH should follow the order of priority above while also considering the goals and any identified target populations served by the project. For example, a CoC Program-funded PSH project that is permitted to target homeless persons with a serious mental illness should follow the order of priority under Section III.A.1. of this Notice to the extent in which persons with serious mental illness meet the criteria. In this example, if there were no persons with a serious mental illness that also met the criteria of chronically homeless within the CoC's geographic area, the recipient should follow the order of priority under Section III.B for persons with a serious mental illness.
4. Recipients must exercise due diligence when conducting outreach and assessment to ensure that chronically homeless individuals and families are prioritized for assistance based on their total length of time homeless and/or the severity of their needs. HUD recognizes that some persons—particularly those living on the streets or in places not meant for human habitation—might require significant engagement and contacts prior to their entering housing and recipients of CoC Program-funded PSH are not required to allow units to remain vacant indefinitely while waiting for an identified chronically homeless person to accept an offer of PSH. CoC Program-funded PSH providers are encouraged to follow a Housing First approach to the maximum extent practicable. Therefore, a person experiencing chronic homelessness should not be forced to refuse an offer of PSH if they do not want to participate in the project's services, nor should a PSH

² For the State of Louisiana grant originally awarded pursuant to “Department of Housing and Urban Development—Permanent Supportive Housing” in chapter 6 of title III of the Supplemental Appropriations Act, 2008 (Public Law 110–252; 122 Stat. 2351), projects located within the geographic area of a CoC that is not the CoC through which the State is awarded the grant may prioritize assistance within that geographic area instead of within the geographic area of the CoC through which the State is awarded the grant.

project have eligibility criteria or preconditions to entry that systematically exclude those with severe service needs. Street outreach providers should continue to make attempts to engage those persons that have been resistant to accepting an offer of PSH and where the CoC has adopted these orders of priority into their written standards, these chronically homeless persons must continue to be prioritized for PSH until they are housed.

B. Prioritizing Chronically Homeless Persons in CoC Program-funded Permanent Supportive Housing Beds Not Dedicated or Not Prioritized for Occupancy by Persons Experiencing Chronic Homelessness

1. CoCs are strongly encouraged to revise their written standards to include the following order of priority for non-dedicated and non-prioritized PSH beds. If adopted into the CoCs written standards, recipients of CoC Program-funded PSH that is not dedicated or prioritized for the chronically homeless would be required to follow this order of priority when selecting participants for housing, in a manner consistent with their current grant agreement.

(a) First Priority—Homeless Individuals and Families with a Disability with Long Periods of Episodic Homelessness and Severe Service Needs

An individual or family that is eligible for CoC Program-funded PSH who has experienced fewer than four occasions where they have been living or residing in a place not meant for human habitation, a safe haven, or in an emergency shelter but where the cumulative time homeless is at least 12 months **and** has been identified as having severe service needs.

(b) Second Priority—Homeless Individuals and Families with a Disability with Severe Service Needs.

An individual or family that is eligible for CoC Program-funded PSH who is residing in a place not meant for human habitation, a safe haven, or in an emergency shelter and has been identified as having severe service needs. The length of time in which households have been homeless should also be considered when prioritizing households that meet this order of priority, but there is not a minimum length of time required.

(c) Third Priority—Homeless Individuals and Families with a Disability Coming from Places Not Meant for Human Habitation, Safe Haven, or Emergency Shelter Without Severe Service Needs.

An individual or family that is eligible for CoC Program-funded PSH who is residing in a place not meant for human habitation, a safe haven, or an emergency shelter where the individual or family has not been identified as having severe service needs. The length of time in which households have been homeless should be considered when prioritizing households that meet this order of priority, but there is not a minimum length of time required.

(d) Fourth Priority—Homeless Individuals and Families with a Disability Coming from Transitional Housing.

An individual or family that is eligible for CoC Program-funded PSH who is currently residing in a transitional housing project, where prior to residing in the transitional housing had lived in a place not meant for human habitation, in an emergency shelter, or safe haven. This priority also includes individuals and families residing in transitional housing who were fleeing or attempting to flee domestic violence, dating violence, sexual assault, or stalking and prior to residing in that transitional housing project even if they did not live in a place not meant for human habitation, an emergency shelter, or a safe haven prior to entry in the transitional housing.

2. Recipients of CoC Program-funded PSH should follow the order of priority above, as adopted by the CoC, while also considering the goals and any identified target populations served by the project. For example, non-dedicated or non-prioritized CoC Program-funded PSH that is permitted to target youth experiencing homelessness should follow the order of priority under Section III.B.1. of this Notice, as adopted by the CoC, to the extent in which youth meet the stated criteria.
3. Recipients must exercise due diligence when conducting outreach and assessment to ensure that persons are prioritized for assistance based on their length of time homeless and the severity of their needs following the order of priority described in this Notice, and as adopted by the CoC. HUD recognizes that some persons—particularly those living on the streets or in places not meant for human habitation—might require significant engagement and contacts prior to their entering housing and recipients are not required to keep units vacant indefinitely while waiting for an identified eligible individual or family to accept an offer of PSH (see [FAQ 1895](#)). Recipients of CoC Program-funded PSH are encouraged to follow a Housing First approach to the maximum extent practicable. Street outreach providers should continue to make attempts to engage those persons that have been resistant to accepting an offer of PSH and where the CoC has adopted these orders of priority into their written standards, these individuals and families must continue to be prioritized until they are housed.

IV. Using Coordinated Entry and a Standardized Assessment Process to Determine Eligibility and Establish a Prioritized Waiting List

A. Coordinated Entry Requirement

Provisions at 24 CFR 578.7(a)(8) requires that each CoC, in consultation with recipients of Emergency Solutions Grants (ESG) program funds within the CoC's geographic area, establish and operate either a centralized or coordinated assessment system (referred to in this Notice as coordinated entry or coordinated entry process) that provides an initial, comprehensive assessment of the needs of individuals and families for housing and services. CoCs that adopt the order of priority in Section III of this Notice into the CoC's written standards are strongly encouraged to use a coordinated entry process to ensure that there is a single prioritized list for all CoC Program-funded PSH within the CoC. The [Coordinated Entry Policy Brief](#), provides recommended criteria for a quality coordinated entry process and standardized assessment tool and process. Under no circumstances shall the order of priority be based upon diagnosis or disability type,

but instead on the length of time an individual or family has been experiencing homelessness and the severity of needs of an individual or family.

B. Written Standards for Creation of a Single Prioritized List for PSH

CoCs are also encouraged to include in their policies and procedures governing their coordinated entry system a requirement that all CoC Program-funded PSH accept referrals only through a single prioritized list that is created through the CoCs coordinated entry process, which should also be informed by the CoCs street outreach. Adopting this into the CoC's policies and procedures for coordinated entry would further ensure that CoC Program-funded PSH is being used most effectively, which is one of the goals in this Notice. The single prioritized list should be updated frequently to reflect the most up-to-date and real-time data as possible.

C. Standardized Assessment Tool Requirement

CoCs must utilize a standardized assessment tool, in accordance with 24 CFR 578.3, or process. The [Coordinated Entry Policy Brief](#), provides recommended criteria for a quality coordinated entry process and standardized assessment tool.

D. Nondiscrimination Requirements

CoCs and recipients of CoC Program-funded PSH must continue to comply with the nondiscrimination provisions of Federal civil rights laws, including, but not limited to, the Fair Housing Act, Section 504 of the Rehabilitation Act, Title VI of the Civil Rights Act, and Titles II or III of the Americans with Disabilities Act, as applicable. See 24 C.F.R. § 5.105(a).

V. Recordkeeping Recommendations for CoCs that have Adopted the Orders of Priority in this Notice

24 CFR 578.103(a)(4) outlines documentation requirements for all recipients of dedicated and non-dedicated CoC Program-funded PSH associated with determining whether or not an individual or family is chronically homeless for the purposes of eligibility. In addition to those requirements, HUD expects that where CoCs have adopted the orders of priority in Section III. of this Notice into their written standards. The CoC, as well as recipients of CoC Program-funded PSH, will maintain evidence of implementing these priorities. Evidence of following these orders of priority may be demonstrated by:

- A. Evidence of Severe Service Needs.** Evidence of severe service needs is that by which the recipient is able to determine the severity of needs as defined in Section I.D.3. of this Notice using data-driven methods such as an administrative data match or through the use of a standardized assessment. The documentation should include any information pertinent to how the determination was made, such as notes associated with case-conferencing decisions.
- B. Evidence that the Recipient is Following the CoC's Written Standards for Prioritizing Assistance.** Recipients must follow the CoC's written standards for prioritizing assistance, as adopted by the CoC. In accordance with the CoC's adoption of

written standards for prioritizing assistance, recipients must in turn document that the CoC's revised written standards have been incorporated into the recipient's intake procedures and that the recipient is following its intake procedures when accepting new program participants into the project.

C. Evidence that there are no Households Meeting Higher Order of Priority within CoC's Geographic Area.

- (a) When dedicated and prioritized PSH is used to serve non-chronically homeless households, the recipient of CoC Program-funded PSH should document how it was determined that there were no chronically homeless households identified for assistance within the CoC's geographic area – or for those CoCs that implement a sub-CoC³ planning and housing and service delivery approach, the smaller defined geographic area within the CoC's geographic area – at the point in which a vacancy became available. This documentation should include evidence of the outreach efforts that had been undertaken to locate eligible chronically homeless households within the defined geographic area and, where chronically homeless households have been identified but have not yet accepted assistance, the documentation should specify the number of persons that are chronically homeless that meet this condition and the attempts that have been made to engage the individual or family. Where a CoC is using a single prioritized list, the recipient of PSH may refer to that list as evidence.
- (b) When non-dedicated and non-prioritized PSH is used to serve an eligible individual or family that meets a lower order of priority, the recipient of CoC Program-funded PSH should document how the determination was made that there were no eligible individuals or families within the CoC's geographic area - or for those CoCs that implement a sub-CoC planning and housing and service delivery approach, the smaller defined geographic area within the CoC's geographic area - that met a higher priority. Where a CoC is using a single prioritized list, the recipient of PSH may refer to that list as evidence that there were no households identified within the CoC's geographic area that meet a higher order of priority.

VI. Questions Regarding this Notice

Questions regarding this notice should be submitted to HUD Exchange Ask A Question (AAQ) Portal at: <https://www.hudexchange.info/get-assistance/my-question/>.

³ For the State of Louisiana grant originally awarded pursuant to “Department of Housing and Urban Development—Permanent Supportive Housing” in chapter 6 of title III of the Supplemental Appropriations Act, 2008 (Public Law 110–252; 122 Stat. 2351), projects located within the geographic area of a CoC that is not the CoC through which the State is awarded the grant may prioritize assistance within that geographic area instead of within the geographic area of the CoC through which the State is awarded the grant.