COORDINATED ACCESS FOR ADULTS AND FAMILIES POLICIES

Homeless Services Department

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Revision History

Version	Revision
V1.1 November 2025	● Added *Policy Review Process* ● Added *Multnomah County CoC Emergency Transfer Plan* to Transfer Policy ● Edited *Provider Guidance for service-based transfer requests from Rapid Rehousing (RRH) to Permanent Supportive Housing (PSH)* to specify households must be placed into housing before requesting a transfer to PSH. ● Added language for Household Composition Transfers ● Added *Transfer Panel* ● Added *Referral Process Outside the Coordinated Access Priority Pool Policy* ● Added *Grievance Policy* ● Added attachment *Common Housing Scenario Guidance*
V1 October 2024	Created with input by the Coordinated Access Redesign Oversight Committee and the Housing Connections Collaborative, a lived experience advisory body.

Policy Review Process

The purpose of this document is to clarify and commit to policies related to Coordinated Access housing resources provided through Coordinated Access for Adults (CAA) and Coordinated Access (CA) for the Homeless Family System of Care (HFSOC), while acknowledging that this is a dynamic system that will undergo change in response to lessons learned and identified needs and gaps. These policies were informed by the staff at Multnomah County's Homeless Services Department (HSD), technical assistance providers at Focus Strategies and C4 Innovations, leadership and direct service providers at homeless service agencies, and people with lived experience of homelessness. Feedback on these policies was gathered through the Coordinated Access Redesign process (2020-2024), in particular from the Oversight Committee and Homeless Connections Collaborative, a lived experience advisory body.

The Coordinated Access for Adults and Families Policies in this document will be reviewed and updated at least once per year. Some policy changes may occur outside of this time frame depending on system need. Feedback for policy changes should be directed to adultca@multco.us and familyca@multco.us. Policy change recommendations will be brought to system providers for review and feedback, which may include system leadership team meetings, case conferencing meetings, and lived experience advisory committees. Final policy decisions will be made by Homeless Services Department (HSD) leadership.

More policies can be found in the Coordinated Access Guidelines at hsd.multco.us/coordinated-access/.

Values Statement

The Coordinated Access (CA) for Adults and Families program is guided by Housing First principles. Housing First is an approach to quickly and successfully connect households experiencing homelessness to housing without preconditions and barriers to entry. Coordinated Access program partners will work together to preserve participant access to the program and prevent the discontinuation of rent assistance and support services. Every effort is made to avoid a loss of support services, rent assistance, and return to homelessness.

These policies align with our guiding values:

- **Collaboration:** We recognize our interdependence as individuals and as an organization, and approach our work with a spirit of partnership and shared power with those experiencing homelessness and other stakeholders.
- **Equity:** We commit to achieving equity for all individuals. We acknowledge the existence of structural racism and develop, implement, and evaluate policies and practices that achieve equitable outcomes with a focus on eliminating the disparities that people of color experience. We believe that focusing on racial equity will allow us to more effectively serve all communities.
- **Inclusion:** We foster within our office and within the community that we serve a culture of safety and belonging that ensures that the voices of people who have been historically excluded, including people of color, women, people with disabilities and LGBTQIA2S+

people, are truly heard and shape the direction of our work.

- **Integrity:** We strive to be humble, honest and fair in our roles, function and actions. We are open and accountable to each other and to the community that we serve. We encourage asking and answering tough questions or having difficult conversations.
- **Creativity:** We are always open to approaching problems and solutions in new ways, taking calculated risks, and testing innovative ideas. We recognize the importance of not letting the possibility of failure dissuade us from experimenting with promising new ways of doing things. We realize that sometimes our current policies and practices pose barriers to change and improvement.
- **Quality:** We commit to doing the highest quality work, and to continuously evaluating and improving our internal operations, contracting and community planning efforts. We recognize that it is our responsibility to be good stewards of the public resources entrusted to us and to ensure that those resources achieve the best possible outcomes for our community.

Access

There are distinct Access Points in place for households fleeing domestic violence, unaccompanied youth, families with minor children, and adults unaccompanied by minor children. Households may be included in more than one of these four subpopulations (for example, a parenting unaccompanied youth who is fleeing domestic violence), and their status may change over time. Households can be served at all of the Access Points for which they qualify as a target population. As necessary, an Access Point immediately connects the household to the appropriate subpopulation Access Point (e.g. unaccompanied youth who present at an Access Point defined for adults unaccompanied by minor children are connected to the youth-specific Access Point).

There is also a distinct Access Point for households at risk of homelessness, although there are no Emergency Solutions Grant-funded homeless prevention services incorporated into Coordinated Access in Multnomah County.

An overview of Access Points that includes a list of participating providers by subsystem is available at hsd.us/coordinated-access.

Families with Minor Children

The Homeless Family System of Care serves adults accompanied by children under the age of 18. 211info is the central point of access for intake and assessment as well as connections to crisis services including family shelter. Families can also access assessment at family shelters and other participating providers conduct assessments with households that they serve.

Adults Unaccompanied by Minor Children

The Homeless Adult System of Care serves unaccompanied adults, adults in couples and households with adult children experiencing homelessness using a decentralized approach—the Coordinated Housing Assessment Team (CHAT) serves as a main point of access for intake and assessment, and other participating providers directly conduct assessments with households that

they serve. Services accessed through this Coordinated Access subsystem primarily include, permanent supportive housing, along with a small amount of federally-funded rapid rehousing and a shelter focused on serving households prioritized for housing through CA.

We have not incorporated all adult-serving shelters or locally funded rapid rehousing into Coordinated Access. Adults unaccompanied by minor children access Emergency Services Grant funded shelters through a coordinated wait list maintained by the ESG- funded shelter operator. Shelter staff are trained to conduct Coordinated Access assessments. Rapid rehousing is best accessed through calling 211info and working directly with homeless service providers.

Households at Risk of Homelessness

All homelessness prevention services are accessible through 211info.

Eligibility

Families and individuals experiencing homelessness in Multnomah County are eligible to be assessed and potentially connected to a resource through Coordinated Access. Individuals or families who meet any of the below eligibility requirements can complete an assessment and potentially access resources through Coordinated Access. This includes Multnomah County residents or people with strong connections to Multnomah County (e.g., was displaced from MultCo, has kids in a MultCo school district, has a job in MultCo, has service providers in MultCo, etc.) who meet one of the following criteria:

- Staying in emergency shelter, transitional housing, or a place not meant for habitation (e.g., car, streets, tent, abandoned building, etc.)
- Staying in an institution (e.g., jail, hospital, substance use or mental health treatment facility, etc.) and at risk of exiting to homelessness
- In housing and will become literally homeless within 14 days or has received an official court order notice of eviction (notice of restitution)
- Fleeing or attempting to flee domestic violence, dating violence, sexual assault, stalking, trafficking, or other dangerous or life-threatening conditions that relate to violence and lacks the resources or support networks to obtain other safe, permanent housing
- In Rapid Rehousing (RRH) programs that do not take referrals from Coordinated Access AND qualify for/need Permanent Supportive Housing. (Note: Households in RRH that take referrals from Coordinated Access and who qualify for/need Permanent Supportive Housing can follow the transfer process. See the RRH to PSH transfer policy below for more information.)
- **Family System only:** Involuntarily doubled up (staying with family/friends and not on the lease) and at risk of becoming literally homeless. The adult system can serve some households in this situation if they also meet other permanent supportive housing requirements

Housing providers are responsible for verifying and documenting participant eligibility in accordance with funding source requirements.

Triage

All individuals and families who seek assistance at a Coordinated Access access point complete an initial triage to ensure participants are eligible, safe, and able to complete the Coordinated Access assessment process.

During triage, households are screened for safety, the eligibility criteria listed in the section above, and need for other immediate assistance. Youth and Survivors of Domestic Violence are presented with the option to be connected to subpopulation-specific subsystems. Ineligible households are connected to other resources. Eligible households able to move forward with the Coordinated Access process complete the Multnomah Services and Screening Tool (MSST) Assessment. All households are offered housing problem solving. Any immediate safety needs should be addressed before completing the assessment.

Assessment & Housing Problem Solving

Assessment

All individuals and families who are determined eligible, safe, and able can complete the Coordinated Access assessment process. The MSST is the locally created and adopted Coordinated Access assessment tool for Families with Minor Children and Adults Unaccompanied by Minor Children. The MSST assesses households for barriers to housing in alignment of community priorities and is used to determine prioritization for available Coordinated Access housing resources.

Many partner agencies have staff trained to conduct multiple assessment tools. Assessors across subpopulations are trained to identify crossovers between populations and make connections to applicable partner agencies for Survivors of Domestic Violence and Youth.

Housing Problem Solving

Housing Problem Solving is an approach that addresses homelessness by supporting households seeking assistance to avoid or quickly exit homelessness using personal and community resources to find an immediate solution to their housing crisis. Through Housing Problem Solving, households have in-depth problem-solving conversations to explore potential housing solutions and are provided assistance to try to resolve their housing crisis. Housing Problem Solving can be used at any point of engagement, even if a household is not in the priority housing pool or eligible for services through Coordinated Access. Through centering the household's agency, autonomy, and resilience, Housing Problem Solving empowers individuals to utilize their existing strengths and social networks to identify a safe and stable housing solution with limited support. Housing Problem Solving increases our community's capacity to provide services and preserves more intensive, higher-cost interventions for those facing the highest barriers.

Housing Problem Solving is part of the Coordinated Access assessment process and is typically completed during the triage and assessment phase. Households engage in conversations with assessors, CHAT team members, and family navigators to identify potential housing crisis resolution opportunities and are offered different types of assistance to help resolve their

homelessness. Assistance may include coaching, conflict resolution, mediation, connections to mainstream services, housing search and planning, and sometimes limited financial assistance for immediate needs. Assessors completing the MSST with adult households that do not have minor children are expected to engage in housing problem-solving discussions with participants. Families with minor children who complete the MSST and are placed in the priority housing pool will have housing problem-solving conversations with an assigned family navigator. While there is limited capacity to contact all households not included in the priority housing pool, those still facing a housing crisis and not referred to this pool can reach out to 211info for further problem-solving conversations.

Updates to Coordinated Access MSST Assessments

General Reassessment Policy

The MSST needs to be updated under the following circumstances:

- More than six months have passed since the household's last MSST assessment

  OR

- The household composition has changed (e.g. a single adult now has additional household members, minor children are no longer a part of the household, etc.)

To complete a General Reassessment, the assessor is expected to revisit the entire MSST with the household and create a new interim assessment in the Homeless Management Information System (HMIS) to reflect any changes or updates since the last assessment.

Assessment Revision Policy

In addition to the General Reassessment Policy, households who are not yet eligible to receive a General Reassessment may be eligible for revisions to their MSST assessment with prior approval from HSD. An Assessor may request revisions to a household's MSST under the following circumstances:

- Information and self-report on the MSST were underreported or misreported by the household
- There have been significant circumstance changes that would impact the household's answers on the assessment (e.g. new diagnosis for disability of long duration or updates to criminal background)

If a household needs a MSST revision, the Assessor will need to complete the MSST Revision Request Form (Attachment 1) and return it to HSD for review.

- For adult households, please email the request to adultca@multco.us
- For family households, please email the request to familyca@multco.us

Documentation

The MSST Revision Request Worksheet must be accompanied by documentation to support the revision. Examples of documentation include:

- HMIS records
- Documentation from an institution such as a behavioral health facility, hospital, jail, or other
- Letter/written explanation from a service provider that has worked directly with the participant and can confirm that information on the assessment is inaccurate and includes a more accurate depiction of the participant's barriers to housing

MSST Revision Requests are reviewed regularly by the HSD Coordinated Access Staff. The results are emailed to the requesting party within two weeks of receipt.

If a revision is necessary, HSD Coordinated Access Staff will create a new interim assessment with the updated MSST information and input notes in HMIS to explain the changes. Please be aware that a score revision does not guarantee placement in the Priority Housing Pool (PHP).

Prioritization

The Coordinated Access prioritization criteria were developed by HSD in consultation with the Coordinated Access Oversight Committee (CAO), a group of providers/Coordinated Access assessors, and the Housing Connections Collaborative (HCC), a group of people with lived experience of homelessness created to provide input on the development of the redesigned Coordinated Access Process.

The general approach to prioritization is to give priority to those with the greatest barriers to housing. One approach to prioritization is used for all households that are assessed using the MSST assessment tool. The table below summarizes the criteria used for Adults Unaccompanied by Minor Children, and Families with Children.

MSST Prioritization Criteria

- Household Characteristics
    - Household size and composition
    - Household income
    - Preference for culturally specific services
- History of Homelessness and Barriers to Housing
    - Health and disabling conditions
    - Eviction history
    - History of domestic violence
    - Legal history

The Priority Housing Pool

(Adults Unaccompanied by Minor Children & Families with Children)

The Priority Housing Pool (PHP) is a list of Adults Unaccompanied by Minor Children and Families with Children that have completed the MSST and have been placed in the Priority Housing Pool (PHP) for available housing resources based on the community's resource-based threshold. Households in the PHP are matched and referred to housing resources available through the Coordinated Access system as capacity becomes available. The size of the PHP is determined based on anticipated resource availability by household type. Households are placed in the PHP based on the MSST assessment score. All households placed in the PHP are expected to be referred into housing within approximately six months of being added to the pool, though occasional unforeseen circumstances may occur that delay the housing process.

Using HMIS data and reporting, a list of PHP households will be generated based on their MSST score on a bi-weekly basis. HSD will notify community Assessors when households have been added to the PHP and direct them to notify households to complete a Housing Preferences and Matching Tool. The Tool will be used to gather eligibility and preferences information to match and refer households within the PHP to available CA housing resources.

Establishing the resource-based threshold

HSD establishes a threshold using a two-step process. First, HSD estimates the number of housing resources that are expected to become available in the Coordinated Access system over the next six months. This number is estimated based on recent trends in housing resource turnover and any anticipated changes in resources, such as the addition of new housing projects. The anticipated resource availability is used to estimate the number of households needed to fill openings in a timely manner. This number is the target size for the Priority Housing Pool. Second, HSD analyzes MSST scores from the prior six months. Based on this analysis, a score threshold is set that will prioritize the appropriate number of households to fill the Priority Housing Pool.

The specific factors for the ratio of anticipated households to openings and the length of time for the openings to occur are adopted and posted as a separate policy to allow for regular updating.

Threshold variation by subpopulation

Since housing resources available to some subpopulations are more plentiful relative to other subpopulations (e.g., adults or families with children), threshold scores may differ to ensure that the use of housing resources is maximized.

Adjusting the threshold

Since the threshold is established based on available and anticipated resources and on the number of referrals that are typically needed to fill an opening, HSD can and should adjust thresholds when:

1. A significant increase in resources occurs (e.g. the anticipated opening of one or more new projects or programs)

2. A significant decrease in inventory occurs that could result in many more households being prioritized than can be anticipated to be served

3. The rate at which households added to the Priority Housing Pool results in successful referrals to housing and enrollments into a housing program (i.e. more or fewer households should be prioritized in order to fill openings in a timely fashion)

Adjustments to the threshold will not impact households already in the Priority Housing Pool. Anyone determined to be eligible and prioritized who is added to a Priority Housing Pool will retain their status on the Priority Housing Pool even if a threshold is adjusted to be higher than the score they originally received.

Frequency of adjusting threshold scores

HSD will review all threshold scores for confirmation or adjustment no less than annually and more often if warranted by one or more of the three conditions described above. However, very frequent changes in thresholds are not desirable as this may cause confusion and could result in households with similar needs getting unequal access to resources.

HSD will retain information regarding the establishment and adjustment of threshold scores, including the factors used to set them and their operative time frames, to ensure that changes over time can be tracked and that measurement and research on changes' impacts are possible.

Responsibility for Priority Housing Pool Management

HSD manages the Priority Housing Pool and is the only entity that can add households to it. HSD will add households to the Priority Housing Pool who have expressed interest in the resources associated with it, completed any corresponding MSST assessment fully, and meet or exceed the threshold required to be placed on the Priority Housing Pool.

HSD will notify Assessors or other staff attached to a household when the household is added to the Priority Housing Pool. Assessors will receive a monthly list from HSD to determine if households have been added to the Housing Priority Pool.

Removal from the Housing Priority Housing Pool

A household will be removed from the Housing Priority Housing Pool if an Assessor or Family Navigator is unable to successfully contact the household after 30 days of outreach. A household in the Housing Priority Housing Pool who has been referred to a housing program will be removed if six months have elapsed with no contact when they have been enrolled in a housing program within the Coordinated Access system.

Once in the Priority Housing Pool, a household remains until removed for one of the reasons mentioned above. A household already in the Priority Housing Pool does not lose its place *if the threshold score is changed.*

A household will be exited from the Coordinated Access program in HMIS and removed from the housing Priority Housing Pool in the following instances:

- They move into any type of permanent housing, including on their own without assistance
- They leave the county without the intention to return within 90 days
- They are in institutional care for longer than 90 days
- They are deceased

- They are no longer interested in being considered for any resource within the Coordinated Access system

Re-referral to the Priority Housing Pool

If a household is removed from the Priority Housing Pool before they are placed in housing through CA and reengages with the system within six months of their last MSST assessment, the household may be reinstated to the Priority Housing Pool. If it has been more than six months since the last MSST was completed, the MSST must be redone to determine if the household will be placed back to the Priority Housing Pool.

By-Name Lists

While there may not be enough resources to serve all households seeking assistance through the Coordinated Access system, all households that complete Coordinated Access assessments are tracked via By-name Lists. By-Name Lists are used to identify people experiencing homelessness by subpopulation. The community uses By-Name Lists for different purposes based on subpopulation and how subpopulation specific resources are managed within the Coordinated Access system.

Adults Unaccompanied by Minor Children

All adults who complete the MSST assessment are added to the Adult By-Name List. Those that score at or above the current resource threshold are added to the Priority Housing Pool to be prioritized for available adult Coordinated Access resources. The Adult Priority Housing Pool is a subset of the larger By-Name List of all adults that have presented seeking assistance.

Families with Minor Children

All families who complete the MSST assessment are added to the Family By-Name List. The Family By-Name List is used to track all families seeking services. Families that score at or above the current resource threshold are added to the Priority Housing Pool to be prioritized for available family Coordinated Access resources. The Family Priority Housing Pool is a subset of the larger By-Name List of all families that have presented seeking assistance.

Priority Housing Pool Assignment, Outreach, & Engagement

(Adults Unaccompanied by Minor Children & Families with Minor Children)

HSD generates a Priority Housing Pool list every week, which consists of all the Adults Unaccompanied by Minor Children & Families with Minor Children households that have been prioritized based on their MSST assessments and the current community resource-based thresholds. HSD then notifies Assessors, Family Navigators and case conferencing teams via secure email every two weeks. The Priority Housing Pool list is also regularly reviewed at case conferencing meetings in the Adult and Family systems.

Households placed in the Priority Housing Pool are assigned to Original Assessors/CHAT Team staff (for the Adult CA system) and Family Navigators (for the Family CA system). HSD, in coordination with CHAT and Family Navigator Lead Agencies, will assign staff for outreach and

follow up for next steps in the referral and matching process.

Assessor/CHAT Team/Family Navigator Initial Outreach Expectations

Original Assessors, CHAT Team staff, or Family Navigators assigned Priority Housing Pool households are expected to contact assigned households to complete the Housing Preferences and Matching Tool and provide preliminary navigation services.

- CHAT and Family Navigation leads are expected to assign Priority Housing Pool households to CHAT members and Navigators within 3 business days.
- Original Assessors, CHAT Team staff, or Family Navigators are expected to initiate outreach to prioritized households within 3 business days of being assigned and are expected to make at least 3 contact attempts within the first 5 business days of being assigned to the prioritized household.
- After the first 5 days of outreach, the Original Assessors, CHAT Team staff, or Family Navigators are expected to continue outreaching to assigned households on a weekly basis.

Original Assessors, CHAT Team staff, and Family Navigators must attempt outreach utilizing all available contact methods. Each outreach attempt must include:

- Calling the household and any additional contact numbers provided
- Texting the household and any additional contact numbers provided
- Emailing the household
- Reviewing HMIS records and reaching out to any Service Provider that has had contact with the household in the last six months, including the Original Assessors.
- If applicable, conducting physical outreach to places where the household spends time in the community.
- Following up with HSD and sharing household names in system case conferencing meetings in case other providers are in contact.

Assessors, CHAT Team staff, and Family Navigators are expected to establish contact with prioritized households within 30 days of assignment. If an Assessor or Family Navigator is unable to successfully contact the household after 30 days of outreach, the Assessor or Family Navigator is expected to communicate to HSD that the household cannot be located, and the household will be removed from the Priority Housing Pool.

Assessor/CHAT Team staff/Family Navigator Engagement Expectations

When an Assessor, CHAT Team staff, or Family Navigator successfully engages with a prioritized household, they are expected to work with the household to complete the Housing Preferences & Matching Tool. This Tool is necessary for all households referred to the Priority Housing Pool. The Housing Preferences and Matching tool helps to identify the needs and preferences of households

based on their eligibility for referral to available Coordinated Access resources. Households in the Priority Housing Pool are required to have a completed Tool prior to receiving a Coordinated Access housing referral.

Upon completing the Housing Preferences & Matching Tool, households in the Adult CA system will continue working with their Assessor/CHAT worker on housing navigation. Adult households who do not have a provider to help with housing navigation will be assigned to the CHAT by HSD, in coordination with CHAT, to assist with housing navigation. Households in the Family CA system will continue working with their designated Family Navigator to receive help with housing navigation.

CHAT Team/Family Navigator Navigation Ongoing Engagement Expectations

After Assessors, CHAT Team, and Family Navigators have successfully engaged and completed the Housing Preferences and Matching Tool with Priority Housing Pool households, they are expected to maintain ongoing contact and work on gathering documentation and reducing barriers with prioritized households who are waiting for a program referral. Assessors, CHAT, and Family Navigators are expected to maintain contact and engage with those assigned to the Priority Housing Pool every other week at a minimum.

If during navigation, after a household has been successfully engaged, a household misses an appointment or does not respond to communication, the Assessor, CHAT or Family Navigators must attempt to contact the household at least 4 times within 30 days of the initial missed contact using all available contact methods. Assessors, CHAT and Family Navigators are expected to contact households immediately following the first missed appointment.

- If a previously engaged household does not respond to contact within 30 days, households should be notified that they will be removed from the Priority Housing Pool.
- To continue working with the Assessor, CHAT or Family Navigators, households must respond to the outreach attempts to contact by a given date. Households must be given 15 days to respond.
- Households in the Priority Housing Pool that do not contact the Assessor, CHAT or Family Navigator by the given date will be removed from the Pool and will not be referred to available housing resources.

If the household continues to be unresponsive after the Assessor, CHAT or Family Navigator has attempted to contact them in accordance with this policy or if the household does not meaningfully engage in the process to meet deadlines and expectations despite assertive engagement by the provider, Assessors, CHAT Staff and Family Navigators should notify HSD, and the household will be removed from the Priority Housing Pool. The household can be added back to the priority pool if they reengage in the process within six months of their assessment date.

Matching and Referral

A referral is the formal connection by the Coordinated Access system of a participant who has been matched to a housing program. Continuum of Care (CoC) and ESG-funded programs, as well as some local, regional and state-funded programs require that referrals come from CA (e.g. SHS-funded PSH) and these housing programs must only accept referrals made through the Coordinated Access system.

HSD manages the matching and referral process for Adults Unaccompanied by Minor Children, and Families with Minor Children which is informed by the Housing Preferences & Matching Tool completed by all households in the Priority Housing Pool. HSD will make referrals to available Coordinated Access housing resources based on prioritization guidelines, project-specific eligibility requirements, and the specific needs and preferences of the households in the Priority Housing Pool. HSD will balance participant needs and housing barriers with project-specific eligibility and documentation requirements (ex. Referring households with higher barriers to low barrier projects such as RLRA).

When a Coordinated Access Housing Provider has an available spot on their caseload or a vacancy at a property, they will request a referral from HSD via email.

- The Adult system referral request email: adultca@multco.us
- The Family system referral request email: familyca@multco.us

HSD is responsible for maintaining program-specific eligibility details, but if there are stipulations specific to a program vacancy such as unit size, ADA specifications, accessibility limitations, or sober requirements, the Housing Provider must provide the HSD these details at time of request.

HSD is expected to confirm receipt of the referral request within 3 business days and refer a presumed eligible household within 10 business days, unless noted otherwise in a housing project's Memorandum of Understanding. When referring a household to a Coordinated Access housing resource and notifying the Housing Provider, the HSD will also notify the Assessor, CHAT Team or Family Navigator working with the referred household.

Housing Referral Outreach & Engagement

Upon receiving a referral from HSD, Housing Providers[1] are expected to attempt to contact the referred household within 3 business days of receiving a referral and make at least 3 contact attempts within the first 5 business days of receiving a referral. After the first 5 days, the Housing Provider is expected to outreach to the participant at a minimum weekly with the goal of making contact within 15 days. The Housing Provider must attempt to contact the participant using all available contact strategies. Each outreach attempt must include:

- Coordinating with the assigned Family Navigator or CHAT Team staff

[1] For site-based PSH programs, program MOUs may indicate other contracted parties that are responsible for referral outreach & engagement. For those programs, this policy applies to the contracted parties.

- Calling the household and any additional contact numbers provided
- Texting the household and any additional contact numbers provided
- Emailing the household
- Reviewing HMIS records and reaching out to any Service Provider that has had contact with the household in the last six months
- If applicable, conducting physical outreach to places the household spends time in the community
- Bringing household names to system case conferencing meetings in case other providers are in contact

Housing Providers are expected to make contact with a newly referred household within 15 days of referral and enroll the participant within 30 days or communicate to HSD if an extension is needed due to extenuating circumstances.

If a household does not respond to contact by the Housing Provider or responds but does not engage towards enrollment, households should be notified that their program referral will be declined using the following guidance:

- To continue working with a Housing Provider, the household must respond to attempts to contact/engage by a given date. Households must be given 15 days to respond.
- Households who do not contact the Housing Provider will have their housing referral closed and will not receive housing through the referred housing resource.

If contact is not made within 15 days or if the household is contacted but does not engage for enrollment within 30 days, the Housing Services Provider will notify HSD that the referral should be declined and request a new referral. Housing Providers need to document all attempts to contact the participant in HMIS.

Referral Declines

Refusal by Housing Provider

Housing Providers are expected to accept all referrals received from HSD in good faith and follow their existing internal screening processes to determine if the program is able to meet the household's needs. Justification for denials must point to existing housing project policies, tenancy agreements, etc.

Housing providers are required to comply with the Fair Housing Act and agencies should consult their legal counsel on how to ensure compliance.

Potential reasons for denying a referral from Coordinated Access include:

- The participants are not eligible under the funding source or the project's contracted eligibility requirements.
- The participants present with more or fewer household members than the unit or project is designed for (e.g., two people for a Single Room Occupancy unit) and the project cannot accommodate the household size
- Site-based PSH only: the participant is denied through the screening process outlined in the Tenant Selection Plan and is not able to appeal the denial
- There is no vacancy available. *(Agency received more than one referral for the designated vacancy and filled the unit, returning the other referrals to HSD)*
- There are significant concerns about the participant's ability to live safely in the housing unit, such as those requiring a higher level of physical care. In such cases, the Housing Provider would need to justify why assistive devices, reasonable accommodations and/or available services, such as care coordination efforts and/or enlisting assistance from home health care or home care workers, would not sufficiently address the safety concern. As outlined in HSD Contract's Attachment A-PSH Requirements, Section E.sub category g and h: "PSH Service Expectations", Service Providers will not reject or exit participants from PSH due to unnecessary barriers such as sobriety, income, mental health needs, disabilities, criminal history, or due to being generally considered "difficult to work with". Service providers will support tenant transitions, including more frequent and/or intensive support during tenants' transition into and out of PSH, to/from institutional settings.
- There are significant concerns for staff safety, such as participants with a history of violent or threatening behavior toward the referring agency or staff member (within the last year). In such cases, the Housing Provider must have written documentation of previous behaviors and attempts to resolve conflicts and needs to justify why interventions and available services would not sufficiently address the safety concern.
- Participants cannot be located/engaged as stipulated in the Referral Outreach and Engagement Policy.

If the referred participant(s) need to be declined, the Housing Provider will notify HSD within three business days of determining the need for referral decline. HSD will review the denial and confirm with the Housing Provider within three business days. HSD will decline the referral in HMIS and if needed, send a replacement referral within 5 business days.

If the housing provider met with the participant(s) to determine eligibility, the Housing Provider must notify the participant that their referral is being declined.

HSD tracks the number of denials by project and organization with the goal to understand gaps, improve the referral process, and hold housing providers and the system at large accountable to housing first principles and HSD contract adherence.

HSD reviews denial data including the number of and reasons for denials, and the demographics of those denied at least annually to identify and address concerns using a racial equity lens. Each declined household that is still needing Coordinated Access services will be offered other housing

resources as available and as the household is eligible.

Refusal by Participant

Participants may decline a referral for any reason, including because project requirements are inconsistent with their needs or preferences. Housing providers are expected to ensure participants have been counseled before declining a referral. If the participant(s) are determined eligible but decline assistance, they will be added back to the Priority Housing Pool to be referred elsewhere.

The following guidelines apply for participant(s) who decline offers of project assistance:

- If the participant(s) have expressed a preference not to receive services through a particular Housing Provider or project, the Family Navigator or CHAT Team member will follow up with participant(s) before referring to those projects.
- There is no limit to the number of referrals participants can decline. Participants may continue to be contacted when a resource they are likely eligible for is available; if they decline a referral to the resource, the Family Navigator or CHAT Team member will work to understand why they are declining and ensure participant(s) are eligible for other resources they may be more interested in. If participants are not interested in resources available through Coordinated Access, they may ask to be removed from the Priority Housing Pool.
- If after being removed from the Priority Housing Pool, a participant re-expresses interest in services, they will be asked to restart the Coordinated Access process.

Referral Process Outside the Coordinated Access Priority Pool

In the event the Coordinated Access (CA) System is unable to identify an appropriate and timely referral from within the CA Priority Housing Pool for a housing opening, a referral can be made outside of the priority pool by following the process outlined in this policy.

Homeless Services Department (HSD) and CA System commitments related to this policy:

- System providers must have taken the reasonable steps as outlined in the Coordinated Access System Policies to actively outreach to and contact households in the priority pool in accordance with system policies, timelines, and contractual agreements. This includes following timelines to assign households to staff for outreach and to complete the Housing Preferences and Matching Tool.
- HSD staff will follow CA system processes to ensure the priority pool is exhausted before moving to households outside of the priority pool.
- HSD will track and monitor when the CA system goes outside of the priority pool for referrals (including frequency, housing project type, etc.) and make adjustments to CA processes as needed.

- HSD will monitor and report to systems for transparency on equity concerns related to referring households outside the priority pool, such as whether specific culturally specific programs are disproportionately affected due to a lack of candidates in the priority pool.

Process To Refer Outside The Priority Pool At Unit/Program Turnover

1. HSD and CA referring partners will make all attempts to refer an eligible household from the priority pool within the timeframe outlined in project-specific agreements or in the CA System Policies.

    a. The timeframe for site-based PSH projects is typically 10-14 business days, unless otherwise noted in the project-specific Memorandum of Understanding (MOU) between project partners.

    b. The timeframe for all other CA projects is 10 business days.

2. If HSD staff are not able to identify an eligible household from the priority pool within the allotted timeframe to refer to project openings, the Housing Provider may identify households with completed MSST assessments who are not in the priority pool.

    a. Households must meet additional eligibility requirements specific to the program, such as basic eligibility for PSH, income limits, interest in culturally specific services, etc.

3. For site-based PSH: We understand that keeping units empty means rental income is not being collected, which can significantly affect the project's stability. As a result, vacancies in these projects may require us to move to this alternate process faster. HSD staff will maintain regular communication with site-based PSH property managers when there is a housing opening, including frequent updates on progress towards identifying a referral.

    a. If HSD staff and CA referring partners cannot identify an eligible household within the priority pool within five business days, HSD staff will initiate this alternative process and communicate with stakeholders.

Process to Refer Households Outside the Priority Pool During Initial Site-Based Project Leasing

1. Before the initial lease-up begins, PSH project partners including HSD staff, owner, property management and PSH service provider, will agree to a lease-up timeline including the cadence of referrals into PSH units.

2. HSD staff will maintain regular communication with the PSH project partners throughout the initial lease-up process and will provide regular updates on progress towards identifying referrals.

3. On at least a biweekly basis, PSH project partners will check in about the lease-up timeline and progress towards filling PSH units. If HSD and CA partners are not on pace to fill PSH units through the priority housing pool by the agreed upon timeline, partners will discuss if and when the alternative process should be initiated.

a. For example, if HSD and CA partners have not sent application materials for referrals to open PSH units as we near a project's opening (i.e. the date upon which the project is expected to receive a Temporary Certificate of Occupancy or TCO), project partners may agree that the alternate process should be initiated.

4. When PSH project partners have agreed to initiate the process to refer households outside of the Priority Pool, HSD staff will pull a list of the next eligible households outside of the priority pool. These households will be below the threshold for the priority pool but next to be prioritized based on assessment results and equity implementation plans.

5. The number of people on this list will be equal to the number of open units plus an additional 20% to account for people who may decline, not respond to outreach, or be denied. Households outside the priority pool will not be offered other CA housing resources if they decline or are denied.

6. HSD staff will work with PSH project partners to determine who will do outreach to the households on this list and on what timeline. This could include outreach by the CHAT, the original CA assessors, the Family System Housing Navigators and/or the PSH Services Provider.

7. If this list still does not fill available units, the PSH Housing Provider can identify households with completed MSST assessments who are not in the priority pool, regardless of score.

    a. Households must be eligible for PSH and meet additional eligibility requirements specific to the program, such as basic eligibility for PSH, income limits, interest in culturally specific services, etc.

Re-Entry to Priority Housing Pool after Program Exits

Transfers can be explored in rare instances to avoid program exits; however, transfers are not guaranteed. Housing providers exiting households from housing programs should participate in the Coordinated Access Project Transfer process (see policy below) if they believe the household will be better served by another housing provider/project. See "Coordinated Access Transfer Requests" below for more information.

If a household's transfer request is denied or if they do not pursue a transfer and are subsequently exited from their Coordinated Access permanent supportive housing program, the household may be added back to the Priority Housing Pool if their Coordinated Access Housing Assessment has been completed within the last year. If it has been more than a year since their most recent assessment was entered, the household must complete a new assessment to determine Priority Housing Pool status.

Households exited from Coordinated Access Rapid Rehousing services and paying their own rent will not be added back to the Priority Housing Pool and can be re-assessed only if eligible and needing Coordinated Access housing services. Contact adultca@multco.us or familyca@multco.us in these cases.

Coordinated Access Transfer Requests

This policy applies to transfers between housing projects that are required to take referrals from the Coordinated Access for Adults and Families systems. This policy establishes protocols for when and how to request a project transfer for participants from one Coordinated Access housing project to another Coordinated Access housing project, both within the same housing provider or between housing provider agencies. Households exiting housing projects not incorporated into Coordinated Access are not eligible for Coordinated Access project transfers.

Project transfers should be rare and infrequent and utilized when a housing provider and/or participant believes another housing provider/project will better meet the household's needs. Transfers are both an important tool for the Coordinated Access system to meet critical needs of households receiving services, and a significant administrative lift that can strain the system. Housing providers are not expected to submit a transfer request for every household that is exited; however, housing providers *are required* to submit a Coordinated Access Transfer Request Form (Attachment 2) before transitioning participants to a new Coordinated Access housing project, even if the transfer is to another Coordinated Access housing project operated by the same agency.

Coordinated Access housing projects are expected to make all reasonable efforts to support households enrolled in their programs to obtain and retain housing, and to request project transfers after problem solving efforts have been fully exhausted. This includes providing case management supportive services, progressive assistance, and care coordination services.

Housing providers *are not required* to request project transfers when re-housing participants within the same housing project (for example, supporting a household within a tenant-based project to secure a new unit), but best practice would include informing HSD Coordinated Access Staff of transfers within site-based projects. Tenant-based PSH projects should not request a transfer to address issues that the project can address on its own, such as moving a participant in a market rate unit to another market rate unit if the current unit does not meet their needs.

Please keep in mind the following guidelines and considerations:

- Transfers should be infrequent and should only be requested in urgent cases after the housing provider has taken all reasonable steps to address the issue within the housing project and after attempting to transfer households to any vacant projects within their agency's housing portfolio.
- Transfer requests are not guaranteed due to the limited capacity of housing resources.
- Housing providers must explore all other options and resources to offer services and alternative housing choices before seeking a project transfer. The housing provider will need to provide documentation in HMIS demonstrating efforts and resources pursued to stabilize the household in their current project before requesting a transfer.
- Households with tenant based vouchers may have to forfeit their voucher if they are exited from services or request a new provider due to limited system vouchers.

- In cases of potential eviction proceedings, ahead of requesting a transfer Housing Case Managers must review Notices of Violation/Termination and For Cause Notices with their clients and explain the clients right to:

    I. Cure the notice if applicable/ enter a stipulated agreement. Offer to connect the client with legal representation through a direct Metropolitan Public Defender referral for stipulated agreements.

    II. Request a Reasonable Accommodation if the alleged violation was related to a disability; and

    III. Offer to connect the client with legal eviction prevention support through a direct Metropolitan Public Defender referral.

- Safety-related transfers and transfers related to accessibility and reasonable accommodation will be prioritized above all other transfer requests.

- While the transfer policy can be used to support households who are at imminent risk of being evicted from project-based PSH, transfers are typically not immediate and the Coordinated Access system is not designed to prevent evictions.

- If a transfer request is submitted and information changes significantly (e.g. the participant is evicted, service needs change drastically, or if the changing information results in a different transfer request category) the housing provider should submit a new request with corrected information.

Provider Guidance for Project-Based PSH Transfer Requests

Additional guidance for project-based PSH is as follows:

- If the unit associated with the transfer request includes a Project Based Voucher (PBV), the HSD team's first step will be to review the request with Home Forward to ensure that the PBV process has been followed and that we are on the same page before moving forward.

- Project-based PSH projects must first try to resolve the need for a transfer internally through problem solving between the PSH Services Provider and Property Manager, and through any project-specific transfer processes. If the unit associated with the transfer request includes a PBV, contact the Home Forward PBV Rent Assistance Services Coordinator (RASC) to determine next steps.

- The project can request a Coordinated Access transfer after all internal efforts are exhausted. This should include communication between the PSH Services Provider and Property Manager so all parties are aware of the Coordinated Access transfer request.

- Communication between the PSH Services Provider, Owner and/or Property Manager, rent assistance administrator and HSD about transfer requests is key. The goal of the transfer policy is to support participant housing retention and safety, and we need to

be mindful of the impact of unit turnover on the affordable housing development as a whole.

Transfer Request Types and Processes

There are two broad categories for Transfer Requests:

1. Administrative transfer requests related to safety, accessibility, and household composition changes; and
2. Service Needs and Participant Choice transfer requests.

Administrative Transfer Requests

1. Safety – Violence Against Women Act (VAWA). **For these situations, do not fill out the Coordinated Access Transfer Request Form (Attachment 2) and instead contact the appropriate HSD CA team for the correct form.**
    a. The household is fleeing/experiencing domestic violence, dating violence, sexual assault, stalking, and/or human trafficking and, as a result, can no longer be served in their original project. For Emergency Transfers, please follow the guidelines outlined in the Multnomah County CoC Emergency Transfer Plan for Victims of Domestic Violence, Dating Violence, Sexual Assault, or Stalking on HSD's website: hsd.multco.us/coordinated-access/.
2. Safety (non-VAWA)
    a. The household reasonably believes there is a threat of imminent harm if they remain in the same project. The housing provider and household have taken all other safety measures, and there are no other units or rehousing options within the project that resolve the safety issue. *This does not include neighborhood crime that does not specifically target the household or housing unit.*
3. Accessibility
    a. The current unit cannot meet the household's disability-related reasonable accommodation request, and there are no other available units or rehousing options within the project that resolve the issue. This may include needing a larger space to accommodate in-home medical equipment.*This does not include necessary accommodations (or modifications) that can be made to a unit, such as installing grab bars.*
        i. *For project-based PSH, it is critical that service providers support participant households in determining if the unit/building meets their accessibility needs before initial lease-up to avoid unnecessary transfers to the degree possible since transfers strain the housing system and project-based PSH projects in particular.*
4. Household composition
    a. The size and/or composition of the household changes, requiring a smaller or

larger housing unit that cannot be accommodated by the original project due to unit occupancy limits or changes in the services needed that the system cannot provide (ex. a youth ages out of youth system services). This may include having more or fewer household members or needing a larger space to accommodate live-in care. *This does not include the household's desire for a larger unit that is not necessary based on family size or medical needs, or situations where the household can continue to be served - and wants to be served - in the current project with little to no disruption to service provision (ex.* an adult-only household gains custody of their children, or a family's minor children leave the household and the agency can continue to provide services)..

5. Project Closures or Funding Losses

    a. The project is closing or has lost sufficient funding to support current participants. All project closures or funding changes should be made known to HSD well in advance and transfer requests should be submitted for all actively enrolled households still needing services.

6. Internal transfer

    a. Internal transfer to another housing project to avoid eviction, better meet service needs, or otherwise better serve the household and maintain housing stability.

Steps to Request an Administrative Transfer:

1. Discuss the possibility and need for a transfer with the household. Ensure all other resources, services, and remedies have been exhausted.
2. For site-based PSH, discuss the possibility and need for a transfer with the property manager to see if other remedies exist.

    a. Discuss with Rent Assistance Service Coordinator (RASC) for Project Based Voucher (PBV) sites

3. If all other remedies have been exhausted, submit the Coordinated Access Transfer Request Form (Attachment 2) to the appropriate HSD Coordinated Access Staff.
4. Requests related to safety and accessibility will be reviewed within seven business days. Requests related to family composition change will be reviewed monthly. All Administrative Transfer Requests that meet the criteria outlined above will be reviewed by HSD Coordinated Access Staff. Approved requests will be prioritized for connection to a new project referral through Coordinated Access as capacity becomes available.

Service Needs and Participant Choice Transfer Requests

Service Needs and Participant Choice Transfer Requests are submitted to the HSD Transfer Panel for review and approval. The Transfer Panel consists of HSD staff members, Coordinated Access housing providers, Coordinated Access navigation staff, and other Coordinated Access partners.

Service Needs and Participant Choice Transfer Requests that have been verified to meet the

criteria below will be reviewed on a monthly basis via the Transfer Panel. If approved, households will be prioritized for connection to a new project referral through Coordinated Access as capacity becomes available. The Panel may choose to provide suggestions for further mitigation or additional options or resources a Housing Provider must exhaust before moving forward with a transfer request.

1. Service needs

    a. The service provider is unable to meet the service needs of the household in order to help them maintain their housing. For example, this may include a household that has a pending eviction and cannot be rehoused through the current project, or clients who need to be relocated from a site-based project to a different site-based or tenant-based project, and the providing agency has exhausted all internal and external (i.e. inpatient or outpatient treatment programs, aging services, etc.) supports and options.

        i. This would include service need related transfers from Coordinated Access Rapid Rehousing to Coordinated Access Permanent Supportive Housing. *See below for guidance on service-based transfer requests from Rapid Rehousing to Permanent Supportive Housing*

        ii. *This does not include clients who are difficult to engage in services or have conflicts with project staff, or who need connection to services from other systems (e.g., behavioral health, medical, aging, etc.) where a transfer to another PSH project alone is not likely to meet the participants' needs. Before initiating evictions or requesting a transfer, providers are expected to work with participants and make every effort to support housing stabilization efforts.*

    b. *Households who are evicted or at imminent risk of being evicted from a project-based PSH project should not be transferred to another project-based PSH project unless the reasons for eviction have been addressed and/or it is determined that another project-based PSH project is equipped to support the household in avoiding another eviction. Households in this situation could be considered for a transfer to a tenant-based PSH program. The Coordinated Access Transfer Panel will discuss and recommend ways to address reasons for eviction in the next housing placement.*

2. Participant Choice

    a. The household requests a different project to support maintaining housing, such as being closer to school, employment, or support networks, or requests a different housing provider to support maintaining housing. This does not include preferences unrelated to school or employment, and does not include preference for a project with a larger unit. Clients wishing to transfer projects because of conflicts with the provider must attempt resolution before requesting a transfer. *Documentation of resolution attempts must be included with request.*

        i. *Note: this is not applicable for a project-based PSH unit that includes a HUD Project-Based Voucher (PBV) unless the participant has completed 12*

months in the PBV unit and come to the top of a PBV waitlist

Steps to Request a Service Needs or Participant Choice Transfer Requests:

1. Discuss the possibility and need of the transfer with the household. Ensure all other resources, services, and remedies have been exhausted.

2. For site-based PSH, discuss the possibility and need for a transfer with the property manager to see if other remedies exist.

    a. Discuss with Rent Assistance Service Coordinator (RASC) for Project Based Voucher (PBV) sites

    b. Document steps taken in HMIS for visibility

3. If all other remedies have been exhausted, submit the Coordinated Access Transfer Request Form (Attachment 2) to the appropriate HSD Coordinated Access Staff.

4. Attend a transfer request panel monthly meeting to discuss this case.

Provider Guidance for Service-Based Transfer Requests from Rapid Rehousing to Permanent Supportive Housing

Permanent Supportive Housing (PSH) programs are designed for households that require both ongoing intensive case management support and long-term financial assistance. Households only in need of long-term financial assistance should work with the housing provider to explore other community resources for long-term housing subsidy support after the Rapid Rehousing (RRH) program ends.

A household can request a transfer from a RRH program to a more intensive PSH program if the household:

1. Is enrolled in a RRH project that takes referrals from the Coordinated Access system

2. Has been placed into housing and receiving services for a minimum of 6 months in adult RRH or a minimum of 2 months in family RRH (due to varying program durations by system), was eligible for PSH upon entry into RRH, AND

3. Will be unable to maintain long-term housing without permanent ongoing services and a housing subsidy.

Households in RRH that do not take referrals from CA are ineligible for transfers and can only be referred to PSH if they complete the MSST assessment and are placed in the Housing Priority Pool. Families entered into RRH out of shelter are eligible for a transfer if they were previously in the priority pool.

Requesting Provider Service Requirements

For a participant to be eligible for a service-based transfer request from RRH to PSH, the following criteria must be met:

1. The requesting housing provider has met with the household regularly, has demonstrated and documented attempts to meet the household's service needs, and has worked to connect the household with resources to stabilize in the RRH program, including but not limited to:
    a. Benefits and Entitlements Program connections
    b. Employment resource and referral
    c. Healthcare and behavioral health connections and referrals
    d. Tenancy education
    e. Other resources and referrals as needed to support housing stabilization including care coordination, if needed
2. The household has been placed in housing for a minimum of 6 months in adult RRH or a minimum of 2 months in family RRH, and needs have been identified that would impact the household's ability to maintain housing without ongoing case management and subsidy support once the RRH program time limit has been met.
3. The household meets Population A criteria and is presumed eligible for PSH.
    a. The requesting housing provider will need to be able to document PSH eligibility for the household at time of enrollment to the RRH program.
    b. The requesting housing provider has exhausted all other housing options for the household.

Steps to Request a RRH to PSH Transfer Requests:

1. Completed and submit a Coordinated Access Transfer Request Form (Attachment 2) to the appropriate HSD Coordinated Access Staff.
2. Provide a narrative of attempts to stabilize the household in RRH including what resources, benefits and supports were pursued
3. Provide documentation of PSH eligibility
4. Provide documentation of need for PSH (explanation of why household needs ongoing intensive wrap-around services and rental assistance to remain stably housed)

Youth System Transfers

For all scenarios below, process starts 6 months prior to a youth's 25th birthday

Youth is in PSH and does NOT need ongoing support **(DOESN'T NEED TRANSFER)**	• Refer to Move On Program • Exit from Homeless Youth System Programs • Youth retains voucher

Youth is in general services (not in PSH) but needs ongoing support **(NOT ELIGIBLE FOR TRANSFER)**	• Determine which system youth is eligible for • Complete MSST Assessment if eligible for adult or family system

Youth is in PSH and DOES need ongoing support
 	
(ELIGIBLE FOR TRANSFER)
	• See Transfer Requests Policy. These are considered Administrative Transfers.
	• **Contact Adult or Family System: *adultca@multco.us or familyca@multco.us***
	  ○ Complete Coordinated Access Transfer Request Form (Attachment 2)
	  ○ Youth will be offered tenant or site based PSH housing as they become available
	• **NOTE:** RLRA, HCV, Mainstream vouchers are 'for life' vouchers that youth may have to forfeit to secure a voucher in the adult/family system, and youth may need to commit to a site-based program based on availability.

Transfer Panel

The Coordinated Access Transfer Panel is composed of at least seven standing members from various agencies across the community, each serving a term of 12 months. The panel will have at least two HSD staff for administrative support, but these staff will not be voting members. The aim in building the committee is to have representation across various populations served and services provided, including organizations that specialize in serving communities experiencing the largest disparities captured by local data analysis.

Panel membership will include representation from the following categories:

- Coordinated Access for Families (as a housing provider or assessing organization)
- Coordinated Access for Adults (as a housing provider or assessing organization)
- Coordinated Access for Adults and/or Families case conferencing process
- Coordinated Access for Adults and/or Families Leadership Teams, or an appointed representative who works at the leadership level
- Coordinated Housing Assessment Team (CHAT)
- Family Housing Navigators
- Mental health focused organization
- Physical health/health care focused organization
- Substance Use Disorder focused organization

- Culturally-specific organizations.

The transfer panel will meet monthly to discuss pending transfer requests. Transfer requests must fall under the following parameters: service needs or participant choice.

Grievance Policy

Participants have the right to grieve determinations made by the Referring Entity or the Housing Provider. All housing providers must have a written grievance process in place that is provided to the participant, and the participant must first exhaust this process at the agency level. Once this process is exhausted, or for grievances with the Coordinated Access procedures and policies, participants should be directed to the Homeless Services Department at HSD@multco.us.

Definition of Terms

1. **Assessing Agency:** An agency that conducts vulnerability assessments.
2. **Case Management Services:** Case Management services are defined as participant-centered activities that focus on access, utilization, retention and adherence to housing, psychosocial, mental, and health services for persons experiencing homelessness
3. **Care Coordination:** Care coordination synchronizes the delivery of a participant's services from multiple providers and specialists. The goals of coordinated care are to improve housing and health outcomes by ensuring that care from disparate providers is not delivered in silos, and that services are provided efficiently and effectively.
4. **Coordinated Access (CA) referring partners:** Includes original assessors, family navigators, Coordinated Housing Access Team (CHAT) members, and other caseworkers supporting the CA process
5. **Case Conferencing Team:** A team of providers from across CAA partner agencies who meet bi-weekly to review the Prioritized List and support the outreach, matching, and referral process.
6. **Coordinated Housing Access Team (CHAT):** A multi-agency team with team members at Transition Projects, Inc. (TPI), El Programa Hispano Católico (EPHC), the Urban League of Portland (UL), and Native American Rehabilitation Association Northwest (NARA NW). The CHAT conducts vulnerability assessments and provides navigation services to people not already connected to another assessing agency, provides outreach and document preparation services to the top people on the Prioritized List, and helps connect participants to housing projects upon referral. The UL leads a BIPOC collaborative with EPHC and NARA for culturally specific outreach, assessment, and engagement.
7. **Homeless Youth Continuum (HYC):** A collaboration of partner agencies serving youth ages 15 through 24.
8. **Household**: A person or group of people seeking services through CA that plan to be housed together. A household could be on the Priority Housing Pool or Inactive List, in the referral process, or enrolled in a housing project.

9. **Housing Placement:** When a participant who has entered into a housing project moves into a housing unit. The housing unit can be scattered-site or site-based. The housing placement is documented in HMIS by the "housing move-in date," which must be on or after the "project start date".
10. **Housing Provider:** The agency providing rental assistance and support services.
11. **Housing Project:** A housing project or program that takes referrals from CA.
12. **Homeless Services Department (HSD) Coordinated Access Staff:** Primarily includes HSD Coordinated Access referring staff for adults and families, and may also include HSD PSH project staff.
13. **Homeless Services Department (HSD) Staff:** Staff at the Homeless Services Department with Multnomah County.
14. **Inactive List:** A list in HMIS managed by the HSD. The list includes participants who used to be in the Priority Housing Pool either cannot be located, or are in an institution for longer than 90 days and will remain in the institution for longer than a year.
15. **Participant:** A person seeking housing services. A participant could be on the Priority Housing Pool or Inactive List, in the referral process, or enrolled in a housing project.
16. **Partner Agency:** An agency that participates in the CA system. This includes the HSD, the CHAT, family navigators, MHT, assessing agencies, and housing providers that take referrals from CA.
17. **Permanent Supportive Housing (PSH) Contractual Obligations** are listed in each HSD contract's Program Instructions in Attachment A
18. **Permanent Supportive Housing (PSH) Project Partners:** Includes HSD staff, owner, property management and PSH service provider
19. **Priority Housing Pool (PHP):** List of prioritized households that completed a Coordinated Access assessment at or above the inventory-based threshold at the time of their assessment. These households are considered eligible for referral to available Coordinated Access housing resources.
20. **Project Transfer:** When a participant is transferred from one housing project to another after they have signed a lease.
21. **Rapid Rehousing (RRH):** permanent housing that provides short-term (up to three months) and medium-term (4-24 months) tenant-based rental assistance and supportive services to households experiencing homelessness.
22. **Referral:** A referral of someone on the Priority Housing Pool to a housing project. The HSD Coordinated Access Staff manage the referral process. When a housing opportunity becomes available, the housing project requests a referral from the designated HSD staff who then makes the referral.
23. **Violence Against Women Act (VAWA):** a federal law that, in part, provides housing protections for people applying for or living in units subsidized by the federal government and who have experienced domestic violence, dating violence, sexual assault, or stalking, to help keep them safe and reduce their likelihood of experiencing homelessness.

Homeless Services Department

MSST Assessment Revision Request Form

The Multnomah County Services and Screening Tool (MSST) is the locally developed assessment tool utilized to prioritize households for available housing resources in Multnomah County's Coordinated Access System. In limited situations where a household has been assessed within the last six months and the household's current circumstances ***differ significantly from their initial assessment*** *results, assessment staff may request that the results be formally reviewed by the Homeless Services Department (HSD) for potential updates and revisions.*

If a household's composition has changed OR it has been six months or more since a household's last Coordinated Access Assessment, an Assessment Revision Request is* ***NOT Required*. Direct the household to contact an assessor to update their assessment.*

MSST Revision Requests are reviewed regularly by the HSD CA team. The results are emailed to the requesting party within two weeks of receipt. *Completed forms must be submitted to:*

- For the Adult system referral request email: adultca@multco.us
- For the Family system referral request email: familyca@multco.us

Client HMIS ID: _____

Date of Most Recent MSST: _____

Individual Requesting Assessment Review: _____

Agency: _____

Role: ☐ Assessor ☐ Case Manager ☐ Other : _____

Phone: _____

Email: _____

Instructions: *Review the household's latest MSST assessment responses and detail below which questions and answers need revisions, along with justifications for adjustments to support any change(s).*

Assessment Questions	**Household's Original Response(s) Needing Revision** *(indicate the Question # and response)*	**Proposed Updated Response** *(please indicate the Question # and response)*	**Details** *(please indicate new information that would change the response; attach documentation as applicable)*
Domestic Violence (Questions 6-6b) ***Update if household is newly experiencing/fleeing DV*** **6.** Are you or anyone in your household a survivor of domestic violence? **6a.** When was the last time someone engaged in any patterns of domestic violence behaviors toward you or someone in your household? **6b.** Are you or anyone in your household currently fleeing/trying to escape domestic violence?	safhpiusdhfpuiHDFIUSHFCPU; DSHPCIHDPSUIHCPWD; SUHVXCPUDHPUDISHCPUSDHXCPDSHVCPSDHXCZPDSHCPHPUDSHVCPDSUXHCPUDSHCPUDHPSDUHCPSDUHVCPUSDHVCPDSUHVPSDUIVHPSUDHVPSDUVHPDSUHVPSDUHVPISDUHVPUDSVHPSDUVHPSDUVHPDSUHVPDISUHV	afhpiusdhfpuiHDFIUSHFCPU; DSHPCIHDPSUIHCPWD; SUHVXCPUDHPUDISHCPUSDHXCPDSHVCPSDHXCZPDSHCPHPUDSHVCPDSUXHCPUDSHCPUDHPSDUHCPSDUHVCPUSDHVCPDSUHVPSDUHVPSDUIVHPSUDHVPSDUVHPDSUHVPSDUHVPISDUHVPSDUHVPUDSVHPSDUVHPSDUVHPDSUHVPDISUHV	afhpiusdhfpuiHDFIUSHFCPU; DSHPCIHDPSUIHCPWD; SUHVXCPUDHPUDISHCPUSDHXCPDSHVCPSDHXCZPDSHCPHPUDSHVCPDSUXHCPUDSHCPUDHPSDUHCPSDUHVCPUSDHVCPDSUHVPSDUHVPSDUIVHPSUDHVPSDUVHPDSUHVPSDUHVPISDUHVPSDUHVPUDSVHPSDUVHPSDUVHPDSUHVPDISUHV
Prior/Current Living Situation (Questions 7-10) ***Update if newly in homeless situation*** **7.** Where did you sleep last night? **8.** How long have you been sleeping there? **9.** On the night before you started sleeping where you are now, did you stay on the streets or in shelter? **10.** Are you currently at risk of losing your housing and becoming literally homeless within 14 days? **11.** Are you seeking shelter/ a safe place to sleep tonight? **11a.** If shelter is not available (or if not seeking shelter), where do you plan to sleep tonight?			
Household Size & Composition (Questions 12 - 16)	**Households are automatically eligible to re-complete the MSST assessment if there have been changes to the household composition** **STOP form & complete a new assessment with the head of household**		

Assessment Questions	**Household's Original Response(s) Needing Revision** *(indicate the Question # and response)*	**Proposed Updated Response** *(please indicate the Question # and response)*	**Details** *(please indicate new information that would change the response; attach documentation as applicable)*
Housing History/Prior Living Situation (Questions 17 – 21a) ***Update if the current episode of homelessness is longer than previously reported, # of episodes has increased, or length of time homeless has increased*** **17.** Approximate date of most recent homeless episode **18.** # of times homeless in the last 3 years: 1 time, 2 times, 3 times, 4+ times **19.** Total # of months homeless in the past 3 years **20.** In what neighborhood do you usually stay? **21**. *Adult HHs Only* Have you or any ancestors ever lived in North or Northeast Portland? **21a**. Have you applied for housing through the City's North/Northeast Portland Preference Policy?			
Income (Questions 22-23) *** Update if the household has lost or decreased income*** **22**. Do you have steady/regular source of income? **22a.** (if yes to 22) How much do you receive before taxes monthly? **22b.** (if no to 22) Estimate weekly, monthly, or annual income **23.** AMI Level			

Demographic & Veteran Information (Questions 24 –30c)	***Demographic Information does not impact assessment score*** **STOP form & create an interim update to update demographic and veteran information**		
Assessment Questions	**Household's Original Response(s) Needing Revision** *(indicate the Question # and response)*	**Proposed Updated Response** *(please indicate the Question # and response)*	**Details** *(please indicate new information that would change the response; attach documentation as applicable)*
Health (Questions 31-34) ***Update if the household has become disabled, increased the number of disabilities, or has had a health condition cause housing loss* **31**. Do you have disabling conditions or other health conditions that impact your ability to secure housing? **32**. Do any other household members have disabling conditions or other health conditions that impact your ability to secure housing? **33**. *HHs with Minor Children ONLY* In total, how many health or disabling conditions are present in the entire household that might impact your ability to secure housing? **34**. Has the impact of a health condition ever led you or anyone in your household to lose housing**?**			
Eviction History (Question 35) **35.** In the last five years, how many times have you or anyone in your household been formally evicted? ***report the number of evictions received by the adult in the HH with the highest number of evictions*			

Assessment Questions	**Household's Original Response(s) Needing Revision** *(indicate the Question # and response)*	**Proposed Updated Response** *(please indicate the Question # and response)*	**Details** *(please indicate new information that would change the response; attach documentation as applicable)*
Documentation Accessibility (Question 36) ***Update if the HH now has issues with documentation*** **36.** Would you or anyone in your household have difficulty accessing any of the following documents?			
Legal Challenges (Questions 37-38) **37.** Have you or anyone in your household ever been arrested or spent time in jail or prison? **38.** (If yes to #37) Has being arrested or spending time in jail ever led you or anyone in your household to lose housing?			
Social Support (Question 39) **39**. Do you feel that there is anyone you can count on to help you when you need it?			
If any other changes need to be made to the assessment that was not captured above, please detail them here.			

Requestor Signature: _____

Date of Assessment Revision Request: _____

Homeless Services Department

Coordinated Access Transfer Request Form

Submit the following fully completed form to adultca@multco.us for households without minors and familyca@multco.us for households with minors. Please be thorough in your responses. Incomplete forms will not be accepted. See the Coordinated Access for Adults and Families Policies for guidance on system transfers.

Date: _____

Staff member(s) requesting rematch/transfer: _____

Housing project & organization:_____

Participant HMIS #:_____

Household Composition (# adults/# children):_____

1. What type of allowable transfer request type does this situation fall under? See "Coordinated Access Transfer Requests Policy". If the situation does not apply to any of the allowable types, please reach out to HSD. **Please only select one:**

Administrative Requests	Service Needs and Participant Choice Transfer Requests
Safety - Violence Against Women Act (VAWA)	◯ Service needs
◯ Safety (non-VAWA)	◯ Participant Choice
◯ Accessibility	
◯ Household composition	
◯ Project Closures or Funding Losses	
◯ Internal Transfer	

If you selected "Safety - Violence Against Women Act (VAWA)", STOP and email adultca@multco.us or familyca@multco.us for the correct forms to submit.

2. **For Transfers from Site-Based PSH Projects, please check which of the following has occurred (For any check boxes, please upload documentation into HMIS for review):**

- ☐ Discuss the possibility and need for a transfer with the property manager to see if other remedies exist
- ☐ A Notice to Terminate (Eviction Notice) has been issued (if yes, please upload the notice to HMIS)
- ☐ Provider attempted to cure the notice or enter into a stipulated agreement with the landlord
- ☐ Provider has requested a Reasonable Accommodation if the alleged violation was related to disability
- ☐ Provider has offered to connect the client with legal eviction prevention support
- An eviction court date has been set

Court date: _____

3. Why is a transfer needed? Include a description of the specific needs of the household that cannot be met by the housing agency, and how a transfer to another housing project would lead to a better outcome for the participant (for example, the participant could benefit from a site-based unit with a buzz-in system since they often have unwanted guests trying to stay with them).

4. Has the agency discussed this request with the participant? What does the participant think about the possibility of a rematch or transfer?

5. What has the agency tried? Include a description of the specific steps the agency has taken and which services have been offered to address the participant's needs.

6. Are there other resources or supports that—if available to the agency—would help address the participant's needs (for example, on on-site mental health clinic, in-home medical care)?

7. What are the household's strengths? What are the household's challenges?

8. Are there resources or supports you/your agency are currently accessing for the household that you think should continue?

9. Is the participant currently in process for any services or benefits (i.e. social security disability, legal services, etc.)?

10. What other information (if any) would you like to share with the housing agency receiving a referral for this participant to support a successful transfer? Are there any key pieces of information or tips you can share?

11. For primary housing/services provider: How long are you able to support the participant (i.e. until they are housed, for a few weeks, a few months, ongoing/as needed)? **For households in RRH, please include the date their rental subsidy will end.**

12. Are there other service providers and/or individuals that should be included in a case conference to support the transfer process?

PSH Common Scenario Guidance

Homeless Services Department

This document is for adult and family Coordinated Access providers. These examples are not exhaustive and this document will be updated as other common scenarios emerge. For RLRA programs, the RLRA section in each scenario describes the steps to take with Home Forward. The Homeless Services Department is thankful for Washington County, who shared a similar document and from whose work this document draws information and guidance that has been tailored to Multnomah County.

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01 Household Wants to Move	
PSH	Transfers are expected to be infrequent and rare. Households in scattered site/tenant based PSH can move at any time in accordance with the PSH provider's policies, any funding source requirements, and program budget limitations. Try to meet the household's needs in the current housing program first, then in other housing programs within your agency's housing portfolio. Households in tenant based PSH can move apartments, if needed. If the household is in site-based PSH, first work with the landlord to move to another unit, if available. If no other options exist, the household can transfer to another housing provider or move from site-based PSH in accordance with the Transfer Process Policy outlined in the Coordinated Access for Adults and Families Policies. If the reasons for moving align with the policy, complete a Transfer Request Form and follow the steps outlined in the Transfer Process Policy. The Transfer Process is not guaranteed. If approved, the process is not immediate, so prepare the household for a waiting period of up to a few months. Ideally, households should move when they are no longer under a lease. If there are DV (see Scenario 15) or ADA concerns (see Scenario 6), the landlord is expected to work with you to release the household from their lease. At other times a lease break fee may be determined to be an appropriate expense.
RLRA	A tenant-based RLRA Household is able to move with their voucher within the Multnomah County Metro limits. RLRA participants must stay housed for one year in their unit before requesting to move. Moving before one year requires an approved reasonable accommodation. Contact your Rent Assistance Specialist at Home Forward to confirm your request to move. The Rent Assistance Specialist will confirm information (income, household members) is still current and issue a new RLRA Award Certificate. Once participant is approved for a new unit, provide Home Forward and the landlord notice to vacate. Request for Tenancy Approval (RFTA) will not be processed until Home Forward receives notice to vacate. Notice to vacate should specify the date payments will end on the current unit. For example, if they want to move into a new unit on the 1st, the notice to vacate should be the last day of the previous month.

	The new unit must have a returned RFTA and inspection before a lease can be signed. Once the award letter has been issued, the RFTA and inspection process typically moves at the same pace as a new lease up – the sooner Home Forward gets a completed RFTA, the sooner they can complete the inspection.
Funding Considerations	Moving Costs: Client assistance funds can be used to support the cost of the move, including deposit, movers, cleaning supplies, etc. Best practice is to encourage households to pay/contribute what they can realistically budget, particularly for the deposit on the new unit (unless there are DV or ADA needs). A program's ability to cover costs is subject to any funding source restrictions and program budget. Deposit: Any remaining deposit for the prior unit will be returned to the HOH. Case managers may engage in conversations around budgeting decisions and priorities, but may not compel their spending of these funds. Please encourage prior property owner to utilize the deposit first if they ask for funds to help clean or repair the unit. If property damage is extensive and beyond the scope of the deposit, please refer to the Risk Mitigation Program: RLRA Risk Mitigation Program — Housing Development Center (hdc-nw.org)
HMIS	If the household stays in the same program and is rehoused, you will add an interim update to the new enrollment with the housing move-in date (HMID) being the date of enrollment/date they moved into the new unit only if there is a period between where they are unhoused. If there is not a period in which the participant is unhoused between units, no action is needed, they will maintain the original HMID. Households who transfer to another PSH program must be exited from the original provider and the new PSH provider will create a new program entry with a new HMID.

02 Household Separates

PSH	If the non-HOH requests a transfer, you must verify that they qualify for a PSH program. If they were eligible for PSH upon project entry, you can enroll them in any internal vacancies available in your housing program with approval from HSD CA Staff. If there are no internal vacancies, the household member must complete the Transfer Request form and follow the Transfer Process Policy outlined in the Coordinated Access for Adults and Families Policies. Note: Just because the HOH qualified for PSH does not mean that everyone in the household qualifies for PSH. **System Transfer:** If the non-HOH requests a transfer and is no longer eligible for the same housing system (ex. the parent with less than 51% custody wants to separate), you must verify PSH eligibility and complete the Transfer Request form to transfer to the appropriate system, if eligible. In this example, if the household separates before they are housed, the household member with less than 51% custody of the children must complete their own MSST assessment to determine prioritization. The household member with at least 51% custody of the children can continue, if still eligible for PSH. If they do not qualify for a PSH program, you can assist them with collaborative problem solving and linking to community resources. Note: ● Family household composition changes are considered Administrative Transfer requests and will be reviewed once monthly ● If there is a safety issue due to DV/household separation, transfer requests will be prioritized. ○ *Transfers due to domestic violence and safety issues are covered more in depth in Scenario 15 of this document** **Households not yet enrolled in CA programs:** Assess with the MSST. If already assessed and family composition has now changed, follow directions for the "General Reassessment Policy" in the Coordinated Access for Adults and Families Policies. The household member with the children can continue in the family system. The household member who does not have custody should complete their own MSST.
RLRA	Reach out to Home Forward for the most updated Removing a Household Member Form to update or amend lease. The household change may impact the amount of rent/utility assistance the household receives.

HMIS	Ensure that the original household composition at enrollment remains intact. If both participants are staying in the program, but the household is separating: ● Create new household, and appoint one participant as the HoH Exit the "new" HoH from the original ShelterPoint enrollment ● Enroll the "new" HoH into ShelterPoint with the enrollment date being the date the household separated ● Upload all supporting documents accordingly

03 Household Wants to Add a Member (Minor)

PSH	The head of household must have at least 51% custody of the minor in order to add them to the household. **Documentation:** Legal documentation is not necessarily required but some sort of documentation of custody may be required based on program or funding source requirements. Children's birth certificates or other identification may be required based on the housing project. Notify landlord of new household members, and support their being added to the lease. Client assistance funds can be used to purchase new furniture and household needs. Work with HOH to support accessing services for new household members such as: cash aid, SNAP benefits, SSI, education support, OHP, doctor, behavioral health, DHS, and other services that may be needed. Make sure that HOH is aware of available resources. **System Transfer:** If adding a minor for a household served in the adult system, you can continue to serve the household in the same program if you are able to house them following unit occupancy standards. If you are not able to do this, you can transfer the household to the family system by completing a Transfer Request form and following the Transfer Process Policy

	outlined in the Coordinated Access for Adults and Families Policies. **Note: Family household composition changes are considered Administrative Transfer requests and will be reviewed once monthly.** **Households not yet enrolled in CA programs:** Assess with the MSST as a family. If already assessed, follow directions for the "General Reassessment Policy" in the Coordinated Access for Adults and Families Policies.
RLRA	Household members can be added to an RLRA voucher at any time, as long as 1) the household still meets income eligibility and unit capacity requirements and 2) the new household members are added to the lease. Send Home Forward an Adding a Child Form and updated or amended lease. The household change may impact the amount of rent/utility assistance the household receives.
HMIS	If a household member is being added, update the current household to include the new member, including the date they joined the household, on the participant profile.

04 Household Wants to Add a Member (Adult)

PSH	*Note*: "Household" is defined as simply one or more individuals who live together. Members of the household do not need to be related by blood, marriage or in any other legal capacity. Adult household members who are away for a certain period may be considered part of the household if they will be returning and contingent on any program-specific or funding source requirements.* Please check with HOH that they understand that once they add a new participant to the lease, it will be difficult to remove them in the future. Documentation: Identification (ex. Social security card, State ID) may be required for each adult based on the housing project. The income of the new member will be added to the calculation for the participant's monthly portion of the rent. Inform the landlord of the requested new member. Landlord will screen the new member and, if approved, add to the lease. It is generally a violation of the lease to move someone in without notifying the landlord – please encourage HOH to avoid this. Ensure occupancy standards are being followed. Client assistance funds can be used to purchase new furniture and household needs. If needed, provide information about accessing services for new household members such as: cash aid, SNAP benefits, SSI, OHP, doctor, behavioral health, etc.
RLRA	Household members can be added to an RLRA voucher at any time, as long as 1) the household still meets income eligibility and unit capacity requirements and 2) the new household members are added to the lease. Send Home Forward a completed Adding a Household Member Form, income verification, and updated or amended lease. The household change may impact the amount of rent/utility assistance the household receives.
HMIS	If a household member is being added, update the current household to include the new member, including the date they joined the household, on the participant profile.

05 Youth Ages Out of Youth System Services

PSH	**Youth already enrolled in PSH:** Follow the Transfer Process Policy outlined in the Coordinated Access for Adults and Families Policies. This is considered an Administrative Transfer Request for youth to transfer services to the adult or family system. There are implications based on the rental subsidy further explained in the Youth System Transfers policy. Consider a referral to the Move On Program (see Scenario 22) if the household needs the subsidy but not the support services. Youth not already enrolled in PSH should complete the MSST assessment if they need PSH in the adult or family systems.
RLRA	Notify your Home Forward Rent Assistance Specialist if you've submitted a Coordinated Access Transfer Request Form.
HMIS	If transferring to PSH with another provider, exit from existing provider in HMIS.

06 Family Loses Custody of Minors or Minors Reach the Age of 18

PSH	**Families already enrolled in PSH:** Lead with participant choice. If the participant wants to remain in the same program, you can continue to serve them. They may need to move units if the household composition has changed and the household no longer meets occupancy standards. If the family can no longer be served in the program, follow the Transfer Policy outlined in the Coordinated Access for Adults and Families Policies. This is considered an Administrative Transfer Request. For youth to transfer services, there may be implications based on the rental subsidy further explained in the Transfer Policy. Consider a referral to the Move On Program (Scenario 22) if the household needs the subsidy but not the support services. **Families in RRH:** Households can be served in the family system until the subsidy runs out. Call 211 to connect with the adult system for additional services. A transfer from family RRH to adult RRH is not an option. **Families not enrolled in CA programs:** Follow directions for the "General Reassessment Policy" in the Coordinated Access for Adults and Families Policies.

RLRA	If tenant-based RLRA, the voucher size will be decreased when the household moves. The household should complete the Removing A Household member form and submit to Home Forward.
HMIS	If transferring to PSH with another provider, exit from existing provider in HMIS.

07 Two Households with Rental Subsidies Want to Live Together

PSH	Note*: "Household" is defined as simply one or more individuals who live together. Members of the household do not need to be related by blood, marriage or in any other legal capacity. See Scenario 4 for households that want to live together but do not have a voucher. Tenant-based: Two households cannot apply two subsidies in the same unit. One voucher holder must relinquish the voucher. For programs without Home Forward-administered vouchers (e.g. many Continuum of Care funded programs) enroll one member as the head of household. Other members can receive supportive services. Site-based: Ability to enroll multiple members will depend on occupancy limits and screening. Enroll one member as the head of household. Other members can receive supportive services. Case management must take responsibility to help household members work out the details required to live in a shared unit. There are roommate agreements that can be made (e.g. agreements about where food ownership and storage; discussions about privacy; shared bathrooms, who is going to clean what, when, etc.). During the first couple of months, case managers should increase checks in with the household to ensure that sharing is going well and provide support as needed.

RLRA	This scenario is rare. It would be possible for multiple RLRA participants to each use their voucher in a shared congregate living situation like a group home. In this situation, multiple participants with subsidies can reside in the same place. If two RLRA voucher holders who are in a relationship want to live together, one person must relinquish their voucher to live in the same unit. Contact your Home Forward Rent Assistance Specialist to process this request.
HMIS	Enroll the head of household into the appropriate program. If a household member is being added, update the current household to include the new member, including the date they joined the household, on the participant profile.

08 Participant Requests an ADA Accommodation or In-home Caregiver	
PSH	The household must submit a reasonable accommodation request to the landlord. Try to meet the household's needs in the current housing program first, then in other housing programs within your agency's housing portfolio. Households in tenant based PSH can move apartments if accommodation cannot be met in the current unit. If the household is in site-based PSH, first work with the landlord to move to another unit, if available. If no other options exist, complete a Transfer Request form and follow the Transfer Process Policy outlined in the Coordinated Access for Adults and Families Policies. Note: ADA accommodations are considered administrative requests and will be reviewed within 7 business days. Make sure that any live-in aid is approved by the landlord and does not violate the lease or occupancy standards. If there are issues with the lease, submit a reasonable accommodation request. If the aid will not be living full time in the unit, they do not need to be discussed with the landlord.
RLRA	Submit a reasonable accommodation request to add the Live-in Aide to the voucher. If the reasonable accommodation is approved, Home Forward will need the caregiver's information and will provide the Request to Add a Live-in Aide packet to be completed. The caregiver's income won't be counted as part of overall household income. If the household needs to move a larger unit or is in the housing search stage, a new RLRA voucher will be issued.
HMIS	This scenario has no HMIS implications. The caregiver does not need to be recorded as they are not a participant receiving services. Case Managers can notate this relationship via Service Transactions, but it would not impact data quality. Upload all supporting documents accordingly.

09 Household Receives an Eviction Notice

PSH	Offer eviction prevention resources and services as soon as possible to avoid an eviction: ● Cure the notice if applicable/enter a stipulated agreement ● Request a Reasonable Accommodation if the alleged violation was related to a disability; and ● Offer to connect the participant with legal eviction prevention support Note* ● If the participant is experiencing unmet healthcare and care needs, consider exploring Cross Sector Case Conferencing for assistance in accessing resources and wrap around support opportunities to help with housing stability. More information at https://hsd.multco.us/cross-sector-case-conferencing/. For scattered site/tenant based PSH, the housing provider can work with the household to apply to other housing units. For site-based PSH, offer other housing projects within your agency's portfolio, if available. A transfer to another service provider/housing project should be the last resort. If no other housing options exist, complete a CA Transfer Request form and follow the process outlined in the CA for Adults and Families Policies. Transfers are not guaranteed and any program exits may result in the household returning to homelessness. Look into shelter options if the household will be evicted. PSH staff continue to work with the household. Please work with the property manager to see if leaving without an eviction is an option.
RLRA	For scattered site/tenant based RLRA, send the termination notice to your Rent Assistance Specialist at Home Forward and have the participant complete a new RLRA application ONLY. Home Forward will issue a new voucher giving the participant 120 days to search for a new unit. If a participant has been evicted and you have lost contact with them, they have 180 days to reconnect in order for Home Forward to issue a new voucher. Once located, the participant must complete a new RLRA application to update relevant info. If after 180 days the participant is unable to be located, please notify your Rent Assistance Specialist before exiting them from your program.
HMIS	Upload supporting documentation: ● Documentation regarding eviction prevention resources pursued including documentation as to what remedies, resources, or supports were provided ● Upload notices of violation/termination ● For Cause notices ● Participant acknowledgement of their rights

	If transferred to another project, exit the household from the original housing project. Add an interim update to the new enrollment with the housing move-in date (HMID) being the date of enrollment/date they moved into the new unit. If the household will be rehoused in the same program and there is not a period in which the participant is unhoused between units, no action is needed, they will maintain the original HMID.

10 HOH is Incarcerated/Leaves for an Inpatient Program

PSH	**If household is not yet housed:** Generally, pending legal actions or institutionalization should not be seen as a deterrent for accessing housing. If a participant is incarcerated or in an inpatient program and it makes sense to do so, please retain their housing slot for when they return. If you expect the period of institutionalization will exceed 30 days and/or the housing vacancy cannot be held, notify HSD CA staff. **If household is currently housed**: If there is risk that the HOH will be gone for an extended period, consult program/funding rules or contact your contract manager for guidance. If the HOH leaves behind other adult household members who are eligible for the program, another member can be enrolled as the new head of household. If/when household returns after institutionalization, best practice would be to work with the household to identify ongoing resource connections to healthcare and care needs including continuity of care options and wrap around supports. Cross Sector Case Conferencing may be a helpful to bridge resource connections for the service provider
RLRA	If the household is housed: Notify your Home Forward Rent Assistance Specialist (RAS). Rent payments can continue for up to 180 days if arrangements are made and the participant is expected to return. If you know that time away exceeds 180 days contact your RAS to exit the household from the program. If the household is not yet housed: If the voucher is due to expire while the participant is away, notify your Home Forward RAS for a voucher extension. If time away exceeds 180 days and you chose to exit the household from your program, notify your Home Forward RAS to prevent a voucher extension.

HMIS	**If the participant has not yet moved into housing:** The household can also be exited from the priority pool if incarceration will exceed 30 days or the program vacancy cannot be held. Households can be re-added to the priority pool if they exit incarceration within 6 months of their assessment date, as per the inactivity policy. If the household exits incarceration after 6 months from their assessment date, they should be re-screened with a new MSST assessment. **If the participant has moved into housing:** If the unit is continuing to be paid for by PSH provider and they are anticipated to be released within program funding guidelines (ex. 90 days for CoC, 180 for RLRA), the participant should remain enrolled. If their anticipated release is outside of guidelines, they should be exited from the program. Other eligible household members can be enrolled into the program as the new HOH.

11 Household States That They No Longer Want Housing and Want to Exit from the Program

PSH	If a household no longer wants their current housing, it is critical that the PSH program have a serious face to face discussion with them to offer other options and clearly explain the consequences of the decision. Best practice would be for PSH provider to work with the household to resolve their concerns and offer a grievance form. If the household receives all the information they need to make an informed decision to exit services and chooses to do so, the provider should send a sunset letter or an intention to close services notification. Best practice is to leave the client open to services through the end of the lease. It is important to file any sunset letters or notifications in the client's physical file. Households who exit from PSH services and do not wish to be transferred to another PSH program within CA will have to complete a MSST assessment, if eligible, after being exited from the program. Consider a system transfer if the household would be better served by another housing provider. If they would like to transfer to another PSH program, complete a Transfer Request form and follow the Transfer Process Policy outlined in the Coordinated Access for Adults and Families Policies. Consider a referral to the Move On Program if the household needs the subsidy but not the support services.
RLRA	The household would need to put in writing that they would like to leave the RLRA program and what date they are planning to leave. Home Forward will close out their file based on the information in the letter.
HMIS	Exit the household from the project, if applicable. Provide any supporting documentation regarding household exiting including timelines and participant signature.

12 Participant Is Unable to be Contacted/Vacated the Unit	
PSH	If a participant is currently housed or has an active PSH voucher, please note that no contact is not a valid reason to exit a household from services. PSH providers are expected to use assertive engagement (learn more here: https://multco.us/programs/assertive-engagement) to regularly reach out to the participant to offer services using multiple approaches (e.g., phone, home visits or meeting in the community, notes on the door, etc.) and to follow annual update requirements. If the household has vacated the unit, exit them from services and request a new referral. Consider a referral to the Move On Program if the household needs the subsidy but not the support services.
RLRA	If a participant is currently housed or has an active RLRA voucher, please note that no contact is not a valid reason to exit a household from services. If the voucher is set to expire and you haven't been able to make contact, notify your Home Forward Rent Assistance Specialist to determine whether the voucher will expire.
HMIS	Exit the household from the project, if applicable. Upload supporting documentation of attempts at contact and timelines

13 Household is Forced to Leave/Home is Uninhabitable (Fire, Flood, etc.)	
PSH	If the household is responsible for the damage to the unit, please connect the landlord or property manager to the risk mitigation program in regard to financial assistance with damages. Talk to the landlord to see if they are willing to move the participant to another unit. If the household is not responsible for the damage to the unit, talk to the landlord to see if they are willing to move the participant to another unit. Please contact Fair Housing to ensure the rights of households are being supported in this process. If the household has renter's insurance, they may need your support in accessing payments for hotels and other costs.

RLRA	If the landlord is willing to move the participant to another unit, Home Forward will continue to pay up to 180 days rent until the new unit is available. A new Request for Tenancy Approval (RFTA) will be required and the unit must pass inspection. If the landlord isn't able to move the participant to another unit, follow the guidelines in Scenario 01 Household Wants to Move..
HMIS	The HMIS implications are dependent on the duration the participant is displaced. Consult with an HMIS Specialist if this situation arises. Document applicable notes within Service Transactions.

14 Participant/Household Is Exited by Service Provider

PSH	Note: In extreme cases, a PSH program may decide to terminate a participant from services based on their program termination policies. The agency must clearly document the reason for termination and how it aligns with their program policies, and efforts taken to avoid termination. Submit a Transfer Request form to HSD to transfer the household to another PSH project before the household is exited if you believe another PSH project will better meet their needs. Complete a Transfer Request form and follow the Transfer Process Policy outlined in the Coordinated Access for Adults and Families Policies. Transfers are not guaranteed and any program exits may result in the household returning to homelessness. If the household has been exited from services and housing, see "Re-Entry to Priority Housing Pool after Program Exits" for further guidance.
RLRA	Notify your Home Forward Rent Assistance Specialist if a household is at risk of being exited from services or if you've submitted a Coordinated Access Transfer Request Form. Exiting a household from services will not automatically discontinue the tenant-based RLRA voucher. If the household is housed, Home Forward will continue to pay rent throughout the transfer process. If the household is not yet housed, the voucher will stay active until its expiration or until a transfer to another PSH program is made. In the most severe cases, a participant may lose their RLRA voucher. For households that need a higher level of care, RLRA vouchers can be applied at special housing types such as congregate housing, group homes, shared housing, and cooperative housing as long as the rental payments can be separated from other

	housing costs (ex, meals, services, etc). If your participant is pursuing a higher level of care facility, connect with your Home Forward Rent Assistance Specialist for help with determining if the facility is RLRA eligible.
HMIS	Please refer to the following user guide, TG11 – Program Exits, when exiting a participant from PSH. Please do not exit them from your PSH program until you receive confirmation that they have been transferred to and enrolled in a new PSH program. Ensure that all supporting documentation is uploaded into HMIS including notices of violation/termination and For Case Notices as well as documented steps taken to attempt to mitigate behavior and connect participant to resources.

15 Participant Requests a New Service Provider

PSH	If possible, try to find a way to offer the supports that this participant needs within your agency. Use trauma informed care and other best practices to try to find a solution within the current project. This can include motivational interviewing and bringing in other providers based on client needs (culturally specific services, mental health, behavioral health, spiritual, disability, etc). Learn more about assertive engagement practices here: https://multco.us/programs/assertive-engagement. They may simply be better matched with a different case manager or a different housing project within your housing portfolio. System transfers put a significant strain on the system and are not guaranteed. If the participant states that they no longer want services from your agency, they can request a system transfer. It is important that they understand that we can not predict how long it will be before they are connected with a new provider, if at all. A transfer to another service provider/housing project should be the last resort and should only occur if the client's needs cannot be met by the current provider. Complete a Transfer Request form and follow the Transfer Process Policy outlined in the Coordinated Access for Adults and Families Policies.
RLRA	Notify your Home Forward Rent Assistance Specialist if you've submitted a Coordinated Access Transfer Request Form.

HMIS	Do not exit them from your PSH program until you have confirmation that they have been transferred to and enrolled in a new PSH program so we can ensure they are transferred. Upload all supporting documents into HMIS, such as PSH eligibility documents and transfer request forms.

16 Project Closure

PSH	Notify the HSD project lead staff as early as possible if your project is at risk of closure. The HSD team will support problem solving to avoid project closure if appropriate/feasible and work with the project team on a transition plan. If possible, try to find a way to offer a different housing project within your housing portfolio. A transfer to another service provider/housing project should be the last resort. Complete a Transfer Request form and follow the Transfer Process Policy outlined in the Coordinated Access for Adults and Families Policies.
RLRA	Notify your Home Forward Rent Assistance Specialist if you've submitted a Coordinated Access Transfer Request Form.
HMIS	Exit the household from the current provider

17 Transfer Due to Domestic Violence and Safety Issues

PSH	Moving for Domestic Violence (DV) /Intimate Partner Violence (IPV) must be prioritized. Please contact Domestic Violence Resources for guidance and supportive options (https://multco.us/info/domestic-violence-resources). Please refer to DV 101 - Domestic Violence Safety Planning. For VAWA transfers, any affiliated individual or legal occupant can request the transfer. If the HoH is the abuser, the Covered Housing Provider may need to seek a lease bifurcation to remove the HoH. Under Housing First aligned policies, the provider should work with the HoH who is being removed to find alternate housing options, which may then need to find alternate housing/return to the CA. For Emergency Transfers, please follow the guidelines outlined in the Multnomah County CoC

	Emergency Transfer Plan for Victims of Domestic Violence, Dating Violence, Sexual Assault, or Stalking on HSD website: hsd.multco.us/coordinated-access/. If possible, try to find a way to offer a different housing project within your housing portfolio. A transfer to another service provider/housing project should be the last resort. Complete a Transfer Request form and follow the Transfer Process Policy outlined in the Coordinated Access for Adults and Families Policies. Transfer Requests related to Safety/DV are considered Administrative and will be prioritized for review within 7 business days. Note: HSD hosts Domestic and Sexual Violence TA office hours weekly on Tuesdays 1-3pm.
RLRA	Rehouse the participant in a safer unit, if applicable.
HMIS	Please do not exit them from your PSH program until you receive confirmation that they have been transferred to and enrolled in a new PSH program.

18 Household is in RRH or Enters RRH after Placement into Priority Pool and Needs PSH

PSH	**All households in RRH that does not take referrals from CA** must meet the following criteria to be considered for CA PSH: • Eligible to complete the MSST, AND • Eligible for PSH at entry into a RRH program (Pop A, chronically homelessness, with a disabling condition), AND • Land in the priority pool, AND • Qualify for/need both the PSH rental subsidy AND support services See the MSST assessment for more guidance on whether or not to complete the assessment. **Families in RRH that take referrals from CA** must be placed in housing for at least two months before completing a Transfer Request form. Follow the RRH to PSH Transfer Process Policy outlined in the Coordinated Access for Adults and Families Policies. Families in RRH that do not take referrals from CA (ex. Shelter RRH) must meet the above criteria to be considered for PSH.

	Adult households in RRH that take referrals from CA must be placed in housing for at least six months before completing a Transfer Request form. Follow the RRH to PSH Transfer Process Policy outlined in the Coordinated Access for Adults and Families Policies.
HMIS	Upload all supporting documents into HMIS with clear timelines associated

19 Household Violates Lease Agreement and/or Program Rules

PSH	Follow processes for lease agreement and/or program rule violations. This should include opportunities for remedy to keep the household enrolled in the program. Interventions should focus on remedies to keep the household housed or negotiating avoiding an eviction with the property manager. If possible, try to find a way to offer a different housing project within your housing portfolio. A transfer to another service provider/housing project should be the last resort. If you believe the household will be better served by another provider/housing project, complete a Transfer Request form and follow the Transfer Process Policy outlined in the Coordinated Access for Adults and Families Policies. Transfers are not guaranteed and any program exits may result in the household returning to homelessness. If the participant is experiencing unmet healthcare and care needs, consider exploring Cross Sector Case Conferencing for assistance in accessing resources and wrap around support opportunities to help with housing stability. More information at https://hsd.multco.us/cross-sector-case-conferencing/.
RLRA	You only need to notify your Home Forward Rent Assistance Specialist if the participant is at risk of getting evicted or exited from services. Follow the processes for Scenario 09 Household Receives an Eviction Notice or 14 Participant/Household is Exited from Services.
HMIS	Exit the household from the project if they are exited from services.

20 Transferring Voucher/Subsidy to Another Eligible Household Member

PSH	In the event that the Head of Household passes away or leaves the household, another head of household can be determined if that household member met program eligibility at entry into the program. If no other household member met basic eligibility at time of entry into the program, the household must be fully exited from the project. Households at risk of homelessness within 14 days can be assessed with the MSST.
RLRA	If the HOH leaves/passes away, then the RLRA voucher is transferred to another person in the HH indefinitely. Contact your Home Forward Rent Assistance Specialist.
HMIS	Exit the head of household from the project if they are deceased or are exited from services. Enter new head of household into housing project.

21 Transferring Vouchers or Services Across Counties

PSH	If the housing agency can maintain the same level of services across county lines, they can continue to serve the household. If the housing agency cannot maintain the same level of services, the household will need to apply for housing in another county. HSD does not support voucher transfers across counties other than for RLRA (see below).
RLRA	If the household wishes to move to Clackamas or Washington County, please complete the Cross-County Transfer Packet and submit it to RLRA@homeforward.org. Home Forward will use this information to work with the other county to identify a service provider who can continue to support the household. Note: Ability to transfer to another county is contingent on capacity within that county and transfers are not guaranteed.

HMIS	Exit the head of household from the project if they are exited from services.

22 Household Needs Rental Subsidy But No Longer Needs Supportive Services

PSH	If the household needs the subsidy but not the support services, consider a referral to the Move On Program. Move On will support participants in Permanent Supportive Housing (PSH) programs who no longer desire the supportive services and intensive case management, but could still benefit from rent assistance. Move On services must be 100% voluntary and both the participant and Case Manager must agree the program is a good fit. Move On services will consist of: creation and maintenance of referral process in collaboration with the Homeless Services Department (HSD), outreach, enrollment, housing search, placement, light touch retention case management, and facilitation of transfers. To qualify for Move on the participant must be currently enrolled in Permanent Supportive Housing (PSH) that selects placements from Coordinated Access. In order to be considered the referring agency must sign an MOU with Move On and attend a small training on the program to be able to refer. All inquiries about eligibility should go to (Gracie Vazquez) gracie.vazquez@ccconcern.org.
RLRA	See above.
HMIS	Exit the head of household from the project if they are exited from services.