

City of Atlanta Continuum of Care Coordinated Entry System for Homeless Services

Policies and Procedures Addendum to address the COVID-19 Public Health Crisis

Updated September 15, 2020

Please note: This is an ongoing and evolving public health crisis; as more information becomes available the Atlanta CoC will recommend updates to policies and procedures as it relates to the Atlanta CoC in response to the public health concern as a result of COVID-19

Overview

As a result of funding made available through Coronavirus Aid, Relief, and Economic Security Act or the “CARES Act”, Partners for HOME seeks qualified applicants to oversee the coordination of housing of approximately 2000 households experiencing homelessness.

First Priority: Bridge Rapid Rehousing for all Chronically Homeless Households independent of age: Rapid Rehousing for chronically homeless households to operate as a bridge model, meaning that program participants are immediately housed in Rapid Rehousing for a flexible period of time (generally between 3 and 12 months, but up to 24 months) until the point that another permanent housing option without a time limitation becomes available. This entire population will be prioritized for housing, and referred and matched to housing solutions.

- Program participants who are chronically homeless at the point of Rapid Rehousing project entry maintain their homeless or chronically homeless status during the time period that they are receiving the rapid re-housing assistance for the purposes of maintaining eligibility for other permanent housing programs. Rapid Rehousing as a bridge espouses the Housing First philosophy and recognizes that while RRH is a permanent housing intervention, program participants are expected to move into other PSH programs that provide appropriate supportive services for chronically homeless and highly vulnerable households. This transition may take place in the same unit, with more robust services delivered to the program participant in the same unit but supported with a different subsidy and with a different case management team.

Second Priority: Near-Chronically Homeless and Other Vulnerable Households.

- This entire population will be prioritized for Rapid Rehousing for near chronically homeless households, and will provide medium-term rental assistance (either project based or tenant-based) and supportive services (including housing stability case management) to individuals and families with long periods of homelessness (generally between 9 and 12 months) and who have high levels of vulnerability or severe service needs (as indicated through the coordinated entry assessment and prioritization process), but who have not qualified for PSH projects that are dedicated and prioritized for chronically homeless households. Supportive services and case management will emphasize obtaining and increasing income (as well as cash and non-cash benefits) and developing a long-term housing stability plan. Case manager to client ratios are expected to be at 1:20, with intensive supportive services available.

Third Priority: Unaccompanied youth and young adults experiencing homelessness.

- Rapid Rehousing for homeless youth and young adult households will provide medium-term rental assistance (either project-based or tenant-based) and supportive services (including housing stability case management) to individuals and parenting youth between the ages of 18-24. Master leasing of units or the utilization of three-party leases to overcome barriers to housing is strongly encouraged. Case manager to client ratios are expected to be at or near 1:20, with developmentally appropriate supportive services available at all times. Positive Youth Development must be incorporated as an approach to the delivery of housing and services. Family reunification should also be explored whenever feasible.

Time Frame

Implementation of prioritization will begin immediately as awards and contracts are issued for the following:

- Rental Assistance Intermediary: Administration of project-based and tenant-based rental assistance order to provide safe, stable housing for 800 homeless households
- Housing Search and Location Intermediary: To secure 800 units
- Provider of Case Management Services: To facilitate housing stability or to overcome immediate barriers to obtaining housing at a 1:15 case manager to client ratio (for chronically homeless) and 1:20 case manager to client ratio (non-chronic households)

RRH Bridge to PSH: For those individuals that are referred to RRH as a bridge to PSH, as PSH units become available, the previous coordinated entry prioritization will resume, with the inclusion of the criteria for high risk for COVID to include the following. Additionally, existing dedicated PSH inventory will follow the prioritization criteria below for those on the housing queue.

PSH	1	Chronic Families	Prioritization score
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Head of Household with people 65 years and older

People of all ages with underlying medical conditions, particularly if not well controlled, including:

- People with chronic lung disease or moderate to severe asthma
- People who have serious heart conditions
- People who are immunocompromised
 - Many conditions can cause a person to be immunocompromised, including cancer treatment, smoking, bone marrow or organ transplantation, immune deficiencies, poorly controlled HIV or AIDS, and prolonged use of corticosteroids and other immune weakening medications
- People with severe obesity (body mass index [BMI] of 40 or higher)
- People with diabetes
- People with chronic kidney disease undergoing dialysis
- People with liver disease

Date of assessment

Length of time homeless

Veteran family

		High Utilizer of other systems (jail, hospital, institution)
2	Chronic Singles	<p>Prioritization Score</p> <p>People 65 years and older</p> <p>People of all ages with underlying medical conditions, particularly if not well controlled, including:</p> <ul style="list-style-type: none"> • People with chronic lung disease or moderate to severe asthma • People who have serious heart conditions • People who are immunocompromised <ul style="list-style-type: none"> ○ Many conditions can cause a person to be immunocompromised, including cancer treatment, smoking, bone marrow or organ transplantation, immune deficiencies, poorly controlled HIV or AIDS, and prolonged use of corticosteroids and other immune weakening medications • People with severe obesity (body mass index [BMI] of 40 or higher) • People with diabetes • People with chronic kidney disease undergoing dialysis <p>People with liver disease</p> <p>Date of assessment</p>

		Length of time homeless
		Chronic veteran
		High Utilizer of other systems (jail, hospital, institution)
3	Chronic Youth	<p>Prioritizations Score</p> <p>People with underlying medical conditions, particularly if not well controlled, including:</p> <ul style="list-style-type: none"> • People with chronic lung disease or moderate to severe asthma • People who have serious heart conditions • People who are immunocompromised <ul style="list-style-type: none"> ○ Many conditions can cause a person to be immunocompromised, including cancer treatment, smoking, bone marrow or organ transplantation, immune deficiencies, poorly controlled HIV or AIDS, and prolonged use of corticosteroids and other immune weakening medications • People with severe obesity (body mass index [BMI] of 40 or higher) • People with diabetes • People with chronic kidney disease undergoing dialysis • People with liver disease

			Date of Assessment
			Length of time homeless
			Chronic veterans
			High Utilizer of other systems (jail, hospital, institution)