Homelink Policy Manual

Prepared by SARAH as the Lead Agency within the TX-500 Continuum of Care
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Purpose and Background

In 2016, under the requirements of the Homeless Emergency Assistance and Rapid Transition to Housing (HEARTH) Act as well as requirements identified by 24 CFR 578.7(a)(8) and HUD Notice CPD-17-01, the South Alamo Regional Alliance for the Homeless, known by HUD as the San Antonio/Bexar County Continuum of Care or TX-500, established a Coordinated Entry (CE) process that aims to increase the efficiency of the local crisis response system and improve fairness and ease of access to resources, including mainstream resources. Known locally as “Homelink”, additional goals of the San Antonio/Bexar County CoC’s Coordinated Entry process include:

- Reduce the burden on households experiencing a housing crisis
- Identify the most appropriate housing resource to facilitate a rapid and permanent exit from homelessness
- Prioritize the most vulnerable households for housing resources
- Collect system-wide data to inform necessary shifts in resources, identify gaps, and enable data-driven decision making at the CoC, organizational and project levels.

This manual is organized by the four core elements of CE: Access, Assessment, Prioritization, Referral. As stated in the Coordinated Entry Core Elements Guidebook published by HUD in 2017, “Established (1) access points use a standardized (2) assessment process to gather information on people’s needs, preferences, and the barriers they face to regaining housing. Once the assessment has identified the most vulnerable people with the highest needs, the CoC follows established policies and procedures to (3) prioritize households for (4) referral to appropriate and available housing and supportive services resources.”

Definitions

**Access Points** – mobile or physical community locations that provide fair and equal access to the Coordinated Entry system to persons currently experiencing literal, or at risk of, homelessness. Multiple, convenient locations throughout the community ensure easy access to Homelink within the San Antonio/Bexar County area. Persons needing housing-related services may initiate a Homelink enrollment by walking into or calling any Coordinated Entry Hub during designated times. Access points include Homelink physical locations, hotlines, network partners, and outreach workers.

**Assessment** – process that reveals the past and current details of a client’s strengths, and needs, to match the client to appropriate services and housing. Homelink assessments refer to a process (whether at enrollment and intake or at entry to a housing program) that reveals a client’s eligibility, needs, barriers, and strengths.

**By-Name List (BNL)** – A list of individuals and families who are homeless and actively looking for housing. After a household completes a Homelink assessment, their information is populated
onto the BNL. In accordance with the Inactivity Policy, the BNL is kept up to date by removing those who no longer need housing assistance every 30 days. Locally, the BNL is referred to as the Homelink Master Waitlist.

**Case Conferencing** – Case conferencing is the process that connects households on the BNL to a housing solution. Case conferencing meetings provide an opportunity to identify potential barriers to housing and document progress towards permanent housing. These meetings are attended by homeless service providers involved in housing navigation services with the goal of helping households become housing ready before they are offered a referral to a program.

**Case Management** – Case management is defined by the Case Management Society of America as “a collaborative process of assessment, planning, facilitation, care coordination, evaluation, and advocacy for options and services” to meet individual needs. Case Management in the context of CE should be voluntary and client centered, with the goal of identifying strengths and client directed goals, while promoting “health, recognition, and well-being” (USICH, 2016). Case Managers in CE should ultimately focus on linking the client to a permanent housing resource and providing the necessary services needed to promote housing stability.

**Chronic Homelessness** – The CoC Program Interim Rule (24 CFR 578.3) defines a chronically homeless person as meeting one of the following categories:

A. An individual who:
   a. Is homeless and lives in a place not meant for human habitation, a safe haven, or in an emergency shelter; and
   b. Has been homeless and living or residing in a place not meant for human habitation, a safe haven, or in an emergency shelter totaling 12 months with at least four separate occasions in the last three years; and
   c. Can be diagnosed with one or more of the following conditions: substance use disorder, severe mental illness, developmental disability (as defined in section 102 of the Developmental Disabilities Assistance Bill of Rights Act of 2000 (42 U.S.C. 15002)), post-traumatic stress disorder, cognitive impairments resulting from brain injury, or chronic physical illness or disability; or

B. An individual who has been residing in an institutional care facility, including a jail, substance abuse or mental health treatment facility, hospital, or other similar facilities, for fewer than 90 days and met all of the criteria listed above in "A" before entering that facility; or

C. A family with an adult head of household (or if there is no adult in the family, a minor head of household) who meets all of the criteria listed above in "A" including a family whose composition has fluctuated while the head of household has been homeless.

**Continuum of Care (CoC)** – A community planning body required by the U.S. Department of Housing and Urban Development (HUD) to organize and deliver housing and services for a specific geographic region; to develop a long-term strategic plan for preventing and ending homelessness; and to apply for federal resources.
Coordinated Assessment – A centralized or coordinated process designed to coordinate program participant intake assessment and provision of referrals. A centralized or coordinated assessment system covers the geographic area, is easily accessed by individuals and families seeking housing or services, is well advertised, and includes a comprehensive and standardized assessment tool. (Definition from HUD Notice: CPD-17-01) Also referred to as “coordinated entry.”

Coordinated Entry (CE) System – The CE System is a uniform, community-wide approach to connect persons who are literally homeless or at risk with housing resources to end their homelessness permanently and effectively. Through CE, clients participate in an assessment process that identifies the best intervention type for that household. Client referrals through the CE system are prioritized based on vulnerability and intensity of service needs to ensure that people who most require assistance can receive it promptly, including survivors fleeing Domestic Violence/Sexual Assault. Housing providers accept referrals from the CE system as client-specific housing options become available.

The goal of a CE System is to streamline processes through which communities assess, house, and retain individuals who are homeless; to ensure all of our homeless neighbors are known and supported; to target and maximize limited housing resources; and comply with the federal mandate to adopt a standardized intake and coordinated assessment process for housing. The essential components of a CE System are: 1) low-barrier and easy to access; 2) standardized assessment and identification of needs; and 3) a prioritization process that matches housing resources based on needs. In the San Antonio/Bexar County area, CE is called Homelink.

Diversion – Also known locally as “rapid exit” and “housing problem solving”, diversion is an approach to divert a household from the homeless response system by rapidly identifying safe housing options outside of the homeless system, ensuring the limited housing stock available is utilized for the most vulnerable populations. Diversion may include a solutions-focused strength-based conversation and/or one-time financial assistance to resolve a household’s housing crisis. According to HUD, communities who implement diversion practices into their CE Systems see a reduction in lengths of time homeless, in the number of households experiencing first-time homelessness, and in recidivism.

Emergency Solutions Grant (ESG) – A HUD program that provides emergency shelter to homeless individuals and families living on the street; rapidly re-houses homeless individuals and families; provides street outreach services; and prevents individuals and families from becoming homeless.

Front Door – This term is used synonymously with “access point”.

Homeless – According to HUD, homeless is defined as an individual who belongs to one of the following categories (see also Appendix A):

Category 1: An individual or family who lacks a fixed, regular, and adequate nighttime residence, meaning:
A. An individual or family with a primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings, including a car, park, abandoned building, bus or train station, airport, or camping ground; or
B. An individual or family living in a supervised publicly or privately operated shelter designated to provide temporary living arrangements (including congregate shelters, transitional housing, and hotels and motels paid for by charitable organizations or by federal, state, or local government programs for low-income individuals); or
C. An individual who is exiting an institution where he or she resided for 90 days or less and who resided in an emergency shelter or place not meant for human habitation immediately before entering that institution.

**Category 2:** Individuals and families who will imminently lose their primary nighttime residence

**Category 3:** Unaccompanied youth and families with children and youth who are defined as homeless under other federal statutes who do not otherwise qualify as homeless under this definition (i.e. couch-surfing or “doubled up”); or

**Category 4:** Any individual or family who:

A. Is fleeing, or is attempting to flee, domestic violence, dating violence, sexual assault, stalking, or other dangerous or life-threatening conditions that relate to violence against the individual or a family member, including a child, that has either taken place within the individual’s or family’s primary nighttime residence or has made the individual or family afraid to return to their primary nighttime residence; and
B. Has no other residence; and
C. Lacks the resources or support networks, e.g., family, friends, and faith-based or other social networks, to obtain other permanent housing.

**Homeless Management Information System (HMIS)** – A local information technology system used to collect client-level data and data on the provision of housing and services to homeless individuals and families and persons at risk of homelessness. Haven for Hope is the local HMIS Lead for San Antonio/Bexar County.

**Homeless Response System** – According to HUD, a homeless response system should focus on rapid connection to permanent housing at every stage, especially within outreach and emergency shelter responses. Other elements of an effective crisis response system include: accurate identification of all people experiencing or at risk of homelessness; an effort to prevent homelessness whenever possible; immediate access through coordinated entry to shelter and crisis services without barriers as stable housing and supports are being secured; strategic resource allocation; development of collaborative partnerships with mainstream systems; and connection to housing assistance and services that are tailored to the unique strengths and needs of households which enable them to achieve and maintain permanent housing.

**Homelink** – Homelink is the name for San Antonio/Bexar County CoC’s (TX-500) CE System.
**Homelink Master Waitlist** – A list of individuals and families who are homeless and actively looking for housing. After a household completes a Homelink assessment, their information is populated onto the Master Waitlist if they meet the local vulnerability index score. In accordance with the Inactivity Policy, the Master Waitlist is kept up to date by removing those who no longer need housing assistance every 30 days.

**Housing Choice Voucher (HCV)** – A Housing Choice Voucher, also known as a Section 8 Voucher, is the federal government's major program for assisting very low-income families, the elderly, and the disabled to afford decent, safe, and sanitary housing in the private market. HCVs are administered locally by public housing agencies (PHAs) that receive HUD funding.

**Housing First** – Housing First is an approach that offers permanent housing as quickly as possible for people experiencing homelessness while providing the supportive services needed to retain housing and avoid returning to homelessness. Supportive services include what program participants need or want to achieve and maintain permanent housing, such as links to mainstream programs or partner agencies (i.e. mental health services, substance use treatment, medical services, employment assistance, or child care). Under Housing First, there are no required conditions a person has to meet for housing, such as income, sobriety, or participation in treatment or other services.

**Housing Navigation** – Housing Navigation is the process by which those on the Homelink By-Name List are provided ongoing "light" case management services to facilitate a match to an appropriate housing resource. Outreach workers, case managers, and other homeless service providers may act as "Navigators". Navigators can perform various functions to reduce the time it takes persons in crisis to obtain housing. Examples of Navigator functions may include:

- Work with referring agencies to determine a person's eligibility into a program.
- Address barriers to project entry and problem-solve solutions
- Collect documentation for housing eligibility determinations
- Coordinate resources such as federal, state, and local benefits
- Assist the program participant with credit/budget counseling
- Provide renter education

**Lived Experience/Expertise** – Personal knowledge about the world gained through direct, first-hand involvement in everyday events rather than through representations constructed by other people.

**Network Partners** – Similar to Homelink Access Points, network partners are agencies that operate an intake process and have agreed to follow Homelink Policies to perform assessments on individuals or families experiencing homelessness. Network Partners are not required to advertise that they perform assessments as they provide the assessments to clients engaging in other agency services.

**Permanent Housing (PH)** – Community-based housing without a designated length of stay, which includes both Permanent Supportive Housing (PSH) and Rapid Rehousing (RRH).
Examples of permanent housing include, but are not limited to, a house or apartment with a month-to-month or annual lease term or homeownership.

**Permanent Supportive Housing (PSH)** – Permanent Supportive Housing is a permanent housing project that consists of indefinite leasing or rental assistance paired with supportive services. To be eligible for PSH, your household must: include a person who has a disability and is currently receiving Medicaid services or Ryan White Services; need housing supports offered by PSH; and be very low-income.

**Prevention** – An intervention strategy that focuses on preventing homelessness to households at imminent risk of homelessness. Prevention may include a solutions-focused strength-based conversation and/or one-time financial assistance to resolve a household’s housing crisis.

**Prioritization** – As there is a greater need for resources than housing resources available, community prioritization factors are implemented to ensure that the most vulnerable are being serviced first.

**Priority Pool** – designed to minimize the amount of time a household needs to wait for a referral to a program while also ensuring that the highest need households are prioritized for available housing assistance. The priority pool ensures that people in emergency shelter and living unsheltered have access to permanent housing. SARAH generates the Priority Pool list weekly and shares with shelters, outreach workers, and housing providers so they may proactively engage with people prioritized for upcoming permanent housing openings.

**Rapid Re-housing (RRH)** – Rapid re-housing is a housing project that rapidly connects families and individuals experiencing homelessness to permanent housing through a tailored package of assistance that may include the use of time-limited financial assistance and targeted supportive services.

**Supportive Services for Veteran Families (SSVF)** – SSVF is a housing project that aims to improve housing stability for very low-income Veteran families. SSVF provides outreach and case management services and will assist participants to obtain VA benefits and other public benefits, which may include, health care services, daily living services, personal financial planning services, transportation services, fiduciary and payee services, legal services, child care services, housing counseling services, and temporary financial assistance.

**Standardized Access** – The goal of the coordinated entry system is for the system to be easily accessible and welcoming to the wide range of people who may experience a housing crisis in service areas.

**Transitional Housing (TH)** – Transitional Housing is a time-limited housing project, the purpose of which is to facilitate the movement of individuals and families experiencing homelessness to permanent housing within 24 months.

**Transition Age Youth (TAY)** – An individual between the ages of 16 and 24 years.
Transition Age Youth Vulnerability Index-Service Prioritization Decision Assistance Tool (TAY-SPDAT) – An evidence-based assessment tool utilized for single young adults between 18-24, to recommend the level of housing supports necessary to resolve the presenting crisis of homelessness. Within those recommended housing interventions, the TAY-VI-SPDAT allows for prioritization based on presence of vulnerability.

U.S. Department of Housing and Urban Development (HUD) – A U.S. government agency created in 1965 to support community development and homeownership. HUD funds programs such as the Continuum of Care (CoC), Emergency Solutions Grant (ESG), and Community Block Development Grant (CBDG).

Department of Veterans Affairs (VA) – The second-largest cabinet department, the VA coordinates the distribution of benefits for veterans of the American armed forces and their dependents. The benefits include compensation for disabilities, the management of veterans’ hospitals, and various insurance programs.

HUD-Veteran Affairs Supportive Housing Voucher (VASH) – A combination program that involves a rental assistance subsidy provided by a local public housing authority combined with case management provided by the VA.

Vulnerability Index-Service Prioritization Decision Assistance Tool (VI-SPDAT) – An assessment tool utilized for single individuals (or H.O.H. with FVI-SPDAT), including veterans, to recommend the level of housing supports necessary to resolve the presenting crisis of homelessness. Within those recommended housing interventions, the VI-SPDAT allows for prioritization based on the presence of vulnerability.

Youth/Young Adult (YYA) – Individuals between 18-24 years of age.

Youth Homelessness Demonstration Program – is a HUD program that was designed by HUD, other federal partners, and youth with lived experience of homelessness to drastically reduce the number of youths experiencing homelessness, including unaccompanied, pregnant, and parenting youth.

System Overview

The lead entity of the CE System in TX-500 CoC is the South Alamo Regional Alliance for the Homeless (SARAH). The CE System is locally referred to as Homelink. As the lead entity, SARAH is responsible for ensuring compliance with HUD requirements, provision of operational infrastructure and oversight, ownership of the By-Name List (BNL) including ongoing maintenance, and convener of Access Point entities, the CE Advisory Committee and case conferencing.

The target population of Homelink are people who are experiencing homelessness per HUD’s Homeless Definition (Appendix A). Homelessness prevention resources are targeted to people
within Category 2 of the definition, and homeless housing and services (emergency shelter, transitional housing, rapid re-housing, permanent supportive housing) are targeted to people within Category 1 (literally homeless) and Category 4 (fleeing or attempting to flee domestic violence) of the definition. Households must have resided in Bexar County the previous night to be eligible for Homelink with one exception: households within Category 4 who have been referred to a Domestic Violence (DV) shelter outside of Bexar County but resided in Bexar County immediately preceding their shelter stay are eligible for Homelink.

The San Antonio/Bexar County CoC’s geographic area is defined as Bexar County, as well as a few miles north on Interstate 35. The CoC’s Homelink geographic coverage mirrors that of the full CoC, and the map in Appendix B details the boundary lines of the geography beyond Bexar County.

All data collected in Homelink is stored in the HMIS system, which is managed by Haven for Hope.

**Planning, Development, and Participation**

The Homelink process undergoes continuous planning and development and includes participation from CoC and ESG recipients, the Coordinated Entry Advisory Committee, the CoC Board of Directors, and consumer input.

CoC and ESG recipients operating within San Antonio/Bexar County CoC work collaboratively to ensure the Homelink process allows for coordinated screening, assessment and referrals for CoC and ESG projects consistent with the written standards for administering ESG assistance established under 24 CFR 576.400(e) through the following process:

- ESG funding is allocated through state, city and county entities.
- For certifying Homelink participation for ESG and CoC-funded projects (including those partially funded by these sources), 100% of project enrollments must have been referred through Homelink.
- The Coordinated Entry & Outreach Advisory Committee is composed of CoC and ESG recipients who draft and recommend to the CoC Board for approval, provide Homelink oversight, and make data-driven decisions regarding amendments to the Homelink policies.

The Coordinated Entry Advisory Committee operates as a governing board of the CoC Board of Directors, recommending policy change based on quantitative and qualitative data. The purpose of the committee is to offer a forum for program stakeholders to share expertise and collaboratively manage the strategic direction, implementation, and administration of the Homelink system. The committee meets monthly and is composed of the following seats:

- Permanent Supportive Housing (PSH)
- Transitional Housing (TH)
- Rapid Rehousing (RRH)
● Homeless Prevention (HP)
● Emergency Shelter (ES)
● Street Outreach (SO) or Day Center
● Youth Homelessness Demonstration Program (YHDP) Steering Committee Liaison
● Consumer Seat
● Haven for Hope
● Homeless Access Hub
● Case Conferencing Chair
● Case Conferencing Co-Chair
● Community Partner (2) – VA, Public Housing Authority (PHA), Healthcare, Criminal Justice, etc.

Non-voting seats:

● Coordinated Entry Lead Agency (SARAH)
● HMIS Lead Agency

The CoC Board of Directors acts as the final decision-maker for policy changes recommended by the Coordinated Entry Advisory Committee. The CoC Board of Directors leads the strategic direction of Homelink.

Consumer input is gathered through the Coordinated Entry Advisory Committee, which holds a consumer seat and also directs the CoC Lead to obtain qualitative and quantitative data from consumers utilizing the Homelink system. This input helps to drive the planning and development of the Homelink process.

**Homelink Workflow**

To illustrate how the Homelink process functions, the following overview provides a brief description of the path a household may follow from an initial request for housing assistance through permanent housing placement. Additional details can be found in subsequent sections of this manual.

- **Access** – To ensure fair and equal access to households in need of homeless housing assistance, the Homelink process provides access to housing assistance through multiple, convenient locations, the Homeless Connections Hotline, as well as through mobile outreach.

- **Assessment** – Based on initial client responses, the workflow directs the assessor to one of the following assessment tools below. Assessments are completed for each household which collects information pertaining to community identified data points for prioritization and/or data points to assist with appropriate project referrals. In conjunction with other screening tools and strategies, a standardized assessment is completed on the household to determine overall risk and need.
○ **Homelessness Prevention Screening** - for households at imminent risk of losing their regular residence, a client driven, conversation-style strategy to assist clients in identifying any potential short-term interventions that could successfully lead to reducing the risk of homelessness.

○ **Diversion** – for households without an identified safe sleeping arrangement for the current night, a client driven, conversation-style strategy to assist clients in identifying any potential short-term interventions that could successfully lead to permanent housing.

○ **Custom Needs Assessment** - community created tool that assists with capturing some project specific eligibility factors not elsewhere captured in the workflow and other community identified prioritization determinants.

- **Prioritization** – Those who are most vulnerable are prioritized for housing. Vulnerability factors are determined annually by the Coordinated Entry Advisory Committee with final approval by the CoC Board. The Homelink Workflow contains two separate prioritization tools:
  1. Referral Solution Score – utilizes research based criteria which identifies which client characteristics have historically been connected with Homelink resources. These factors are collected throughout the assessment process. Households scoring a four or higher are added to the Homelink Master Waitlist. Scoring four or higher would be inclusive of all of the following characteristics:
      ○ Anyone under 25 or over 54 who is literally homeless,
      ○ All literally homeless families (minor children in the household),
      ○ Anyone fleeing DV,
      ○ Veterans,
      ○ Anyone who is homeless and has income under $900 will qualify, and
      ○ Anyone with 2 or more episodes of homelessness, who is literally homeless, will qualify regardless of income.
  2. Composite Score – the summing of the Community Prioritization factors and the VI-SPDAT score produce a project type recommendation and vulnerability level.

- **Referral** – Clients are referred to housing programs based on their composite score and the programs eligibility and availability.

- **Permanent Housing Program** – Households meet with a housing provider and complete steps to move into their permanent housing program.

![Resolution of Housing Crisis Diagram](image-url)
Homelink Process

Access

Homelink Access Points, Network Partners, and Mobile Outreach

Homelink Access Points are connections for any household experiencing homelessness to the local homeless response system (Homelink). Access Points include the Homeless Connections Hotline, physical locations, and mobile outreach team. Access Points ensure fair and equal access to households regardless of where or how they are entering the San Antonio/Bexar County homeless system.

Homelink Access Point responsibilities include provision of advertised times the agency is open to provide access to the Homelink assessment, maintaining accessibility for people with disabilities, where applicable, and alignment with Homelink policies and procedures. Homelink Access Points sign a Memorandum of Understanding with SARAH, acknowledging roles and responsibilities.

Network Partners are made up of homeless service projects that conduct Homelink assessments as a stock feature of the services they offer to participants. While network partners are not open to the public, Homelink assessments will be conducted within 7 business days for people in emergency shelters. Determination will be made by the assigned case manager. Enrollment in any of these programs within the San Antonio/Bexar County CoC will result in automatic enrollment in the Coordinated Entry system. Network partners are required to sign a Memorandum of Understanding with SARAH, attend annual training, are subject to data quality standards, and must comply with Homelink policies.

Mobile Outreach Teams provide access to the Homelink system for those living in homeless encampments or other places not meant for human habitation. Outreach teams conduct Homelink assessments in the field when necessary and continue to build relationships with households for when housing becomes available.

Domestic and Sexual Violence Access

CoC-funded victim services providers (VSPs) may use the Homelink system or an alternative that meets the minimum HUD and Homelink requirements. Those fleeing or attempting to flee domestic violence (DV), dating violence, sexual assault, stalking, or human trafficking have safe and confidential access to the Homelink process, services, domestic violence hotlines, and shelters. Clients fleeing DV are able to connect to Homelink through an access point that has Skilled Assessors who have been specifically trained to address DV-related housing needs.
The Homelink assessment includes a DV safety screening to determine if a household should be provided information to a VSP or service provider. Households have the option of seeking emergency DV services or continuing with the Homelink assessments.

There is a specific Access Point that has been provided additional DV related training where clients residing in DV shelters are directed for a Homelink enrollment.

**Non-discrimination and Fair and Equal Access**

Households who are eligible for the Homelink process include households who fit within Category 1 (literally homeless) and Category 4 (fleeing domestic violence) of the [HUD Homeless Definition](https://www.hud.gov/hud), and reside within Bexar County (must have stayed in Bexar County last night except people fleeing domestic violence and staying elsewhere due to safety).

SARAH ensures Homelink is available to all eligible households regardless of perceived, actual, explicit and/or implicit barriers, through the following:

- The Homelink process is accessible to all eligible households regardless of race, color, national origin, religion, sex, age, familial status, disability, actual or perceived sexual orientation, gender identity or marital status.
- Those in different populations and subpopulations (experiencing chronic homelessness, veterans, families with children, youth, and survivors of domestic violence) in Bexar County have fair and equal access to the Homelink process regardless of the location or method by which they access the system.
- Households are not screened out of the Homelink process due to perceived barriers related to housing or services (e.g. little or no income, active or a history of substance use, history of DV, resistance to receiving services, the type or extent of disability-related services or supports that are needed, history of evictions or poor credit, lease violations, criminal history).
- The Homelink process is accessible to persons with Limited English Proficiency, in alignment with HUD’s published Final Guidance to Federal Financial Assistance Recipients: Title VI Prohibition Against National Origin Discrimination Affecting Limited English Proficient Persons (LEP Guidance) (72 FR 2732). Each hub is responsible for ensuring Spanish interpretation is available as needed. Due to the high population of Spanish-speaking households in Bexar County, Homelink hubs have bilingual staff who can typically cover Spanish interpretation needs onsite without the need for external interpretation services. Spanish services are listed in Homelink Access Point marketing materials. In the exceptional situation when bilingual staff are unavailable or the client speaks a language needing special accommodation, the Homelink Hub will contact SARAH to coordinate services.
- The Homelink process is accessible to all eligible households regardless of disabilities, including accessible physical locations for individuals who use wheelchairs. These locations are described in Homelink Access Point marketing materials. If a household requests a reasonable accommodation due to a disability, SARAH is responsible for granting an accommodation within three business days. Examples include a request to
complete an assessment at a different location, provision of sign language services, and information provided in accessible formats such as Braille. A mobile outreach team may be utilized if an accommodation cannot be met.

- Access to the Homelink system is accessible to people who are least likely to access homeless assistance, including those actively using illegal substances and living with serious mental illness through the mobile outreach teams.

Marketing

Intentional and targeted marketing strategies are critical to ensuring the Homelink process is available to all eligible persons on a fair and equal basis. Homelink Hub locations are advertised on the SARAH website and the San Antonio Community Resource Directory (SACRD) and updated at least quarterly. Homelink signage, provided by SARAH, is required by all hubs to ensure recognizability by people experiencing homelessness. SARAH also creates Homelink Hub flyers to be distributed at homeless service agencies and which are also available for download on the SARAH website.

Termination of Homelink Partnership

Any Homelink Access Point may terminate their participation in Homelink by giving written notice to the SARAH Executive Director at least 30 days in advance. Housing programs that are required to participate due to HUD guidelines will need HUD approval to terminate participation.

Assessment

Assessment Workflow

Homelink assessments are administered in a culturally competent, trauma-informed client driven manner. This approach enables the collection of necessary information to provide the housing options that best meets the household’s needs. Additionally, data points are collected throughout the assessments which are evaluated according to the community prioritization factors and ESG and CoC-funded housing and service resources eligibility, in addition to non-publicly funded housing resources that are participating in Homelink.

1. Triage – Initial standardized questions asked by all Access Points that determine appropriateness for Homelink process:

| Question | Answers that Result in Homelink Screening | Answers that Result in Homelink Prevention Screening | Answers that Result in Mainstream Resource Provision with No Homelink Assessment |
Where did you stay last night?

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<thead>
<tr>
<th>HUD Homeless Definition:</th>
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<td>● Category 1: Literally homeless</td>
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<td>● Category 4: Fleeing domestic violence or sexual assault</td>
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<td>● Category 2: Imminent risk of homelessness</td>
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<td>● Category 4: Fleeing</td>
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<td>● Category 3: Homeless under other federal definitions (referral to mainstream resources)</td>
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2. Client Consent – Ensures privacy protections are in place and households dictate which personal information can be shared within the Homelink process. A client consent form is required to be collected by access points for new clients entered into the Homeless Management Information System (HMIS). Clients are assured of their right to refuse any question during the assessment process and that a refusal of one or more questions does not alter their chance at receiving housing.

3. Diversion – For any household presenting as Category 1 or Category 4, Diversion is attempted. Diversion is appropriate for households that can be “diverted” from homelessness within a short (14 days) period. It includes a solutions-focused strength-based conversation and/or one-time financial assistance to resolve a household’s housing crisis.

4. Standardized Assessment – The Homelink Assessment process includes collecting standard data elements and conducting the Vulnerability Index - Service Prioritization and Decision Assistance Tool (VI-SPDAT), which helps determine vulnerability of homeless households. There are separate VI-SPDATs for single adults, families, and transition age youth. The VI-SPDAT helps identify who should be recommended for each housing and support intervention, focusing on who is eligible and in greatest need of that intervention.

5. Client Expectations Handout – A document given to households that gives them information on what to expect during the Homelink process.

6. Clients are provided a pamphlet that provides them with Homelink Access Points that can be contacted to maintain client’s active status on the BNL. To access the handout in English, click here. To access the handout in Spanish, click here.

Homelink users participate in Homelink Orientation before beginning Homelink duties. Successful completion of the orientation results in users becoming certified as Skilled Assessors. Skilled Assessors are required to participate in annual training events as well as trainings regarding new Homelink policies and/or procedures and other opportunities.

Privacy Protections

SARAH requires obtaining consent to share and store participant information for purposes of assessing and referring participants through the Homelink process. Participants are able to decide which information they provide during the assessment process without retribution or limited access to assistance. Services will not be denied if the participant refuses to provide certain pieces of information, unless the information is necessary to establish or document program eligibility per the applicable program regulation, or Federal statute requires collection, use, storage and reporting of personally identifying information as a condition of program participation.
Records containing personally identifying information (PII) are kept secure and confidential and the address of any family violence project is not made public. Collection and sharing of PII of households fleeing or attempting to flee DV is not required. Housing providers that receive a referral using HMIS number in place of the actual name and must contact the VSP or SARAH DV Coordinator directly to obtain contact information of the program participant.

Households are not asked or required to disclose specific disabilities or diagnoses except when it is needed to determine program eligibility to make appropriate referrals. Participants are informed of the ability to file a nondiscrimination complaint through the grievance process, which can be found here.

**Prioritization**

To ensure limited housing resources are used strategically and effectively, Homelink determines a data-driven prioritization order for each project type within the CoC’s geographic area. Priorities are consistent with CoC and ESG written standards established under 24 CFR 576.400(e) and 24 CFR 578(a)(9).

The San Antonio/Bexar County CoC approves a local prioritization policy based on project type for Transitional Housing (TH), Rapid Re-housing (RRH), and Permanent Supportive Housing (PSH) as needed. Homelink follows HUD’s Notice on Prioritizing Persons Experiencing Chronic Homelessness and Other Vulnerable Homeless Persons in Permanent Supportive Housing for its PSH prioritization.

**Priority Pool Policy**

The priority pool is designed to minimize the amount of time a household needs to wait for a referral to a program while also ensuring that the highest need households are prioritized for available housing assistance. The priority pool will ensure that people in emergency shelter and living unsheltered have access to permanent housing. SARAH will generate the Priority Pool list weekly and share with shelters, outreach workers, and housing providers so they may proactively engage with people prioritized for upcoming permanent housing openings.

**Priority Pool Procedure**

**Occurrence:** The Priority Pool (PP) is generated and shared weekly with front door partners (Emergency Shelter, Street Outreach, and Safe Haven Projects). The Priority Pool may be updated on an as-need basis.

**Composition:**

1. The Priority Pool is composed of households identified as the most vulnerable per the community prioritization policy. The number of placements on the Priority Pool dedicated to each project type will be added to the Priority Pool at the indicated rate below.
Depending on the number of available clients on the Master Housing Waitlist when a Priority Pool is generated, these ratios may be adjusted.

<table>
<thead>
<tr>
<th>Recommended Project</th>
<th>Type</th>
<th>Households</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Perm. Supportive</td>
<td>Housing</td>
<td>10</td>
<td>4%</td>
</tr>
<tr>
<td></td>
<td>Rapid Re-Housing</td>
<td>190</td>
<td>86%</td>
</tr>
<tr>
<td>Transitional Housing</td>
<td></td>
<td>6</td>
<td>3%</td>
</tr>
<tr>
<td></td>
<td>YHDP Rapid Re-Housing</td>
<td>10</td>
<td>5%</td>
</tr>
<tr>
<td></td>
<td>YHDP Joint TH-RRH</td>
<td>4</td>
<td>2%</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td></td>
<td><strong>220</strong></td>
<td><strong>100%</strong></td>
</tr>
</tbody>
</table>

2. Of the identified households on the Priority Pool, 55% (66) is attached to an Emergency Shelter or Safe Haven, and 45% (54) will be involved in street outreach. The Priority Pool is a representative sample of the Master Housing Waitlist and thus the configuration and ratios can change.

<table>
<thead>
<tr>
<th>Last Serviced Project</th>
<th>Households</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Emergency Shelter or Safe Haven</td>
<td>120</td>
<td>55%</td>
</tr>
<tr>
<td>Street Outreach or Homeless Hotline</td>
<td>100</td>
<td>45%</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>220</strong></td>
<td><strong>100%</strong></td>
</tr>
</tbody>
</table>

3. Household breakdowns – The Priority Pool consists of the following rate below. Depending on the number of available clients on the Master Waitlist when a Priority Pool is generated, these ratios can be adjusted.

<table>
<thead>
<tr>
<th>Household Composition</th>
<th>Households</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Families</td>
<td>88</td>
<td>40%</td>
</tr>
<tr>
<td>Individuals</td>
<td>132</td>
<td>60%</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>220</strong></td>
<td><strong>100%</strong></td>
</tr>
</tbody>
</table>

**Updating and Maintaining the Priority Pool:**

Every week the Priority Pool should be refreshed to remove clients that have been referred or whose enrollments have been closed from the Priority Pool.

1. Weekly, after the Priority Pool is developed using the process outlined above, the Priority Pool is shared with all current outreach, shelter case managers, and referring partners.
2. Referring partners will complete the Notification of Availability google form (See request/referral process) when they are ready to receive referrals to fill available housing units for their housing projects.

3. When possible, SARAH will refer clients from the Priority Pool that
   a. Match the project type requested, and
   b. Is receiving services currently with the referring agency, if applicable (i.e., SAMM is requesting two clients for a RRH opening, there is 1 RRH client in the Priority Pool receiving SAMM outreach services, then that client would be matched to SAMM RRH opening).

4. After the referral has been made and the client has been added to the requesting agency’s claims summary, the client will be removed from the Priority Pool. Clients referred from the Priority Pool should appear on a Temporary Disposition Table with their respective referral information. The Temporary Disposition table is an internal table that acts as a ledger and records all referrals as they occur. Clients who populate on the Temporary Disposition Table should be removed from the Priority Pool.
   a. Note: Clients may reappear on the Priority Pool if their referral outcome includes “the client refused the project” OR if the “client does not qualify for the program.” If a client has a disposition such as “Cannot locate client using 2 different means” or “Client is no longer Homeless” – then their Homelink enrollment should be closed. Thus they will not appear on the Homelink Housing Waitlist or Priority Pool.

5. The following procedure will be followed when generating a new Priority Pool and adding new Households to the pool.
   a. If a Household’s Homelink Enrollment remains active, they will remain on the Priority Pool until they are referred or their Homelink enrollment is closed for another reason.
   b. If possible, SARAH will fill project-type placements on the priority pool at indicated project type composition rate. SARAH may also fill project type spots at a rate less or more than the number of referrals that occurred for that project type. The Priority Pool will always hold 220 spots no matter the composition of project type spots. (i.e., If four PSH-recommended households are referred from the 10 PSH-recommended households on the Priority Pool, four households that have PSH recommendations will replace the households referred from the PP – thus returning the total number of PSH-recommended HH on the Priority Pool to 10. But if one week there are 11 PSH spots on the Priority Pool and 4 PSH referrals occur – SARAH may only replace 3 PSH spots to return the total number of PSH spots on the Priority Pool to 10. On the contrary, if one week there are 10 PSH spots on the Priority Pool and 4 PSH referrals occur - SARAH may replace & add 5 PSH spots to return the total number of PSH spots on the Priority Pool to 11.)
c. To refresh the priority pool, SARAH will use the Project Type’s Priority Score to determine which households will be added next to the priority pool. (i.e., If there is availability for 10 RRH HHs on the Priority Pool, The Master Housing Waitlist is sorted by RRH recommended project type and the RRH Priority Score. The ten clients with the highest RRH Priority Score will be added to the Priority Pool.) If the 10th & 11th clients have the same priority score, the length of time homeless will be the tiebreaker. Because the Master Waitlist changes on a daily basis, the household in this example who had the 11th highest RRH Priority Score is not guaranteed a spot on the Priority Pool the next time it is generated as it is possible that the following may occur.
   i. Clients with higher RRH Priority Scores had new Homelink enrollments completed, or previous RRH Priority scores were impacted by updated assessments.
   ii. When PP is refreshed there is no availability to add the HH.

d. Households who had a rejected referral will take priority in returning to the priority pool and will not lose their spot. (i.e., If the Priority Pool has 5 spots that need to be replaced, but there were 2 rejected referrals – the 2 rejected referrals will automatically fill 2 of the 5 spots and the remaining 3 will be added from the Master Waitlist). If SARAH receives notification of a rejected referral during the middle of a week, that household who had a rejected referral will be placed back on the Priority Pool. This is the only exception for the Priority Pool to potentially exceed 220 spots and the next time a Priority Pool is generated SARAH will ensure it is lowered back to 220 spots.

Referrals that are not from Priority Pool may occur if the current composition of households in the Priority Pool do not meet a Project’s Specific requirements. This primarily occurs in Transitional Housing referrals as housing spots may have specific household composition that the Priority Pool does not consider (i.e., Number of Children or Gender). SARAH will ensure that every client on the Priority Pool is evaluated to see if they may fit a specific housing referral and if they do not – SARAH will search for a client in the Master Waitlist to refer. It is SARAH’s goal to have 90% of all referrals occur from the Priority Pool.

Referral

After a household has been prioritized for a housing resource, they will be matched to a project type based on eligibility. When a housing resource becomes available, the CoC will refer the household to the program. CoC and ESG funded projects are required to receive 100% of their housing referrals from the Homelink process.

Once a referral is sent, the agency has 31 days to accept or deny the referral. A referral may be declined if:
- **The participant could not be located or contacted using 2 different means.** There is no minimum time threshold between attempts, but agencies are required to case note the means they employed to locate the participant. Agencies must complete the Homelink Referral Unable to Locate Form and send via email to the RSC. Agencies cannot close the referral until they have received approval from the RSC to do so. All requests to close a referral based on the inability to locate will be processed through Street Outreach Case Conferencing.

- **The participant refused the program.** The client will remain in Homelink, but will not be referred to the same program again. Client refusal must be documented via the Homelink Referral Declination Form and sent via email to the RSC.

- **The participant does not meet program eligibility.** If the client misreported information needed to fulfill the grant specifications, the referral can be closed. An example would be if somebody reported during their housing assessment that they were a veteran but could not provide proof of their veteran status.

- **The participant is no longer experiencing homelessness in Category 1 or 4.**

The CoC will provide written notice to agency staff if they fall below the 100% acceptance rate. The CoC may request a housing provider to submit an action plan or documentation if their referral acceptance rate falls below 75%.

Households are free to refuse housing referrals without retribution or limitation of access to housing services. Upon refusal, the household will be returned to the By-Name List and will continue to be prioritized.

**Referral Procedure**

1. Agency will submit [Homelink Notification Referral Community Procedure 11.16.20](#) via Google Forms to request a referral.

2. Once submitted, the Referral System Coordinator (RSC) is sent an automated email notification that the Program Availability Notification (Responses) workbook that a new Homelink Availability Notification form has been received. (Program Availability Notification tab)

3. RSC will fulfill the referral request within 48 business hours of Homelink Project Availability Notification Form receipt via the Homelink Prioritized Program Referral Google Forms.
   - The RSC will check the requesting program’s claimed summary before the prioritization process begins to make sure the claimed summary does not have 10 or more open claims. Per policy, there can only be 10 open claims at a time. If the agency requests more clients than available spots on the claimed summary, the RSC will only send over an amount that matches the amount of open spaces (i.e. if the program requests 6 referrals and the program claim summary has 6 open claims, the RSC will send over 4 referrals). The RSC will not send more referrals until another referral request is sent to SARAH.

4. Once a referral is sent, the agency has 31 days to accept (enroll client in project) or decline the referral.
Upon referral receipt, it is recommended that a discussion (case conference) is arranged between the previous and receiving case managers to discuss.

Once enrolled in the program, Homelink enrollment must be closed.

5. Within 30 days of the referral's acceptance or rejection, RSC will submit Stakeholder Surveys, via survey monkey to the client and the provider input regarding the Homelink Referral process. Survey Monkey will automatically send reminders to recipients of unanswered surveys after seven days.

Project Claimed Summary Management

A “claim” is generated in HMIS for a receiving provider when a referral is requested. The claim is located on the “Project Claimed Summary” for the specific projects which receive referrals through Coordinated Entry. It is the responsibility of the receiving provider to manage the Project Claimed Summary for the project to which they are assigned. Claims closed with the outcome of “Client Enrolled in Program” should be closed on the same date as the client is enrolled in the program.

Claims Memo

All programs have eligibility requirements (PSH programs requiring chronically homeless clients, SAMM TLLC requiring a minor child, etc.). Whenever a search for clients that do not meet eligibility is performed and no clients are found, the CoC will refer a client that would not normally be eligible. Whenever this referral is made, it must be accompanied by a memo stating that a search was done for the typical “type of client” with no success. The memo includes the client ID and is signed by the RSC.

All staff attending case conferencing are required to protect the information shared during the meeting in accordance with their agency’s HMIS agreement.

Veterans Referral Process

The Veterans Working Group is a collaboration of CoC and non-CoC agencies providing housing and resource support to veterans throughout San Antonio and Bexar County. These agencies along with the South Texas Veterans Administration (STXVA), advocate for homeless and transitioning veterans to sustain and maintain PSH for veterans and their families.

GOALS:

The goals of the Veteran Working Group were set forth on 3 October 2019 and are listed below:

1. Determining Eligibility through the VA/VBA
2. Full time or part time VA/VBA Support at Haven for Hope
3. Inter-agency Collaboration
4. Inter-Agency Funds availability
5. Utilization of the Homeless Management Information System (HMIS)
6. Permanent Alternative Housing Solutions (PSH)
7. Contingency Operations Plan
**ROLES:**

The Chair of the Veteran Working Group is designated by the City of San Antonio. The Co-Chair of the Veteran Working Group is elected into said position by members of the community at the SARAH Membership Council. All reports originate from the HMIS system and data is compiled and presented by the Chair of the Veteran Working Group. In the absence of the Chair, the Co-Chair is designated and responsible for data gathering and presentation to the working group.

All other participants are completely voluntary and participate in the bi-weekly meetings of their own volition. There are no agencies mandated to attend the meeting, though it is highly recommended and meeting invites are distributed to agencies receiving Veteran funds from various entities such as the Federal Government, State, County, or Local, Texas Veteran Commission (TVC), or private funding. The agency distribution list consists of Haven for Hope Veteran Navigator Team, SAMMinistries, American GI Forum, Endeavors, The South Texas Veterans Administration, The Salvation Army, and The United Way. The veteran working group is open to any agency or entity that assists with housing the veteran population.

The agency representative MUST be enrolled in the HMIS in order to participate in the case management portion of the meeting. Any individual can participate in the informational session which can consist of but not limited to the United States Interagency Council on Homeless (USICH) briefing which occurs the first veteran meeting of the month. This meeting is designed to present the community’s status regarding the state of homeless veterans.

The role of each agency is to place program eligible veterans into agency programs to provide housing stability and resources to meet the needs to veteran households.

**ROLE OF PARTICIPATING AGENCY**

Housing Provider’s Role:

1. Provide program/agency updates to determine client eligibility.
2. Act as the initial point of contact between agency and potential client.
3. Responsible for communicating with veteran working group major developments with the clients that result in eviction, a broken lease, damage to property or other barriers that may prohibit housing.
4. Enrolling and accepting veterans into the program in which they are deemed eligible.

**SARAH’S ROLE**

1. SARAH’s will serve the System Coordination Department’s point of contact during the meeting.
2. SARAH placing veterans referred to a participating agency into the HMIS Homelink claim summary.
3. SARAH will also prepare the referral document for signature of the Coordinated Entry Referral Specialist and forward documentation to the appropriate agency upon receipt of signature to ensure adequate recordkeeping.
4. SARAH will submit the numbers of veterans referred for quarterly for inclusion on the City of San Antonio (COSA) quarterly Report.
**Veteran’s Procedure**

The current Veterans Working Group process is as follows:

1. The Veteran Working Group meets bi-weekly and is composed of veteran serving agencies; Haven for Hope Vet Navigator Team, SAMM, Endeavors, AGIF, and the VA (The Salvation Army also provides veteran services but does not attend). We also host other agencies to present on services provided to the veteran community.
2. The bi-weekly meeting is centered on the veterans by-name list prepared by Case conferencing chair and focuses on those currently in the Haven Courtyard and residing on the member services campus (includes DRP and ITP) and provides an in depth review of each veteran on the list (i.e., time in homelessness, agencies that has attended to stabilize veteran and/or family, disability, etc.).

The eligibility criteria for veterans can be found in Appendix D.

**Case Conferencing**

Case conferencing is the tool that is used by navigators, assessors, outreach workers, advocates, and case managers who convene together to staff households who are prioritized for housing. Case Conferencing has been established within the Homelink process with these primary goals:

- Coordinate services and assign housing navigators
- Override intervention selection or prioritization based on collateral provided by staff.
- Discuss and solve challenges that arise, including obstacles during the placement process and eviction prevention

All staff attending case conferencing are required to protect the information shared during the meeting in accordance with their agency’s HMIS agreement.

**Assessment Score Override Policy**

When a case manager, navigator, or advocate has objective reason to believe that a household has underreported responses during the assessment and that underreporting is limiting their access to housing resources, the professional will advocate for this household at Case Conferencing. The group must agree to move forward with a score override based on objective, professional information, and this may only occur to ensure the most vulnerable households are being prioritized for housing openings. A decrease in score is not allowed. The CoC Lead Agency will approve and track all override requests.

**Inactivity Policy**

Every 30 days, CoC staff will generate a Homelink Inactivity Report that filters the Homelink Master Waitlist to include clients who meet the following criteria for Tier 1:

- No recorded Homeless Services in HMIS for the past 30 days.
- No recorded Supportive Services Only (SSO) in HMIS for the past 30 days; and
- No recorded Current Living Situation (CLS) in HMIS for the past 30 days

All clients who meet the criteria for Tier 1 will be presented to partner agency staff involved in the Homelink process to determine if the clients meet the criteria for Tier 2:

- No known contact with homeless service providers, including outreach workers

If a client meets the criteria for Tier 1 and Tier 2, the client will be deemed inactive. CoC staff will exit inactive clients from their Homelink project. If at any time in the process a client is determined to be active, steps will be taken to enter the appropriate service (homeless service, SSO, and/or CLS) to ensure the client retains their status on the waitlist.

A CLS may also be entered for clients who have not had activity within the past 30 days, but whom the designated case manager has a reasonable certainty that the client will have eligible activity within the next 30 days. This type of CLS may be used more than once, but not consecutively (e.g., all clients must have eligible activity within 60 days before the exception CLS can be used).

There will be a 30-day grace period in which a client may be returned to the waitlist without having to undergo a new Homelink Assessment if they are deemed to continue to need housing assistance.

**Grievance Policy**

Client concerns and grievances should be resolved promptly and fairly. Agencies should inform clients of the following process for filing a grievance. Clients will be free from agency interference, coercion or reprisal should they choose to file a complaint.

A. **Housing Program Grievance** – Grievances about experience(s) with homeless housing programs will be redirected back to the program to follow grievance policies and procedures of that organization. Agencies should maintain internal documentation of all complaints received. This information should not be sent to the CoC Lead unless requested, either by the client or by the CoC Lead. The foregoing procedures are in addition to, and not in lieu of, the anti-discrimination policies established by HUD and the CoC Lead. If you are not satisfied with the housing program’s response to your grievance, contact the CoC Lead by following the directions listed in section C below. You may make your request by telephone or in writing.

B. **Fair Housing Grievance** – If there is a grievance about a landlord or property owner’s screening practices which appear to have a discriminatory impact, contact the City of San Antonio's Fair Housing Program, located at 106 S. St. Mary’s, 7th Floor, San Antonio, TX, 78205 or by calling (210) 207-8189.

C. **Homelink Grievance** – Grievances to express dissatisfaction about any aspect of the Homelink service experience can be initiated orally or in writing. Upon receipt of a complaint, reasonable assistance will be provided by CoC Lead staff involved and may
include supervisory or administrative staff to help obtain a satisfactory resolution to the concern. Please send your grievance letter to the South Alamo Regional Alliance for the Homeless (SARAH) at 4100 E. Piedras Suite 105, San Antonio, TX 78228, or by email to contact SARAH@SARAHomeless.org, or by phone at 210-876-0720. All grievances must include name, date, contact information, and an explanation of the grievance. The CoC will respond to all grievances within 14 days.

Individuals that wish to submit a grievance to Homelink should include the following information:

1. Name
2. The date
3. Contact information
4. The best times and ways the individual can be reached
5. An explanation of the concern/grievance
6. What action the individual believes would solve the problem

### Voucher Projects and Other Initiatives

**Diversion Pilot** – short-term intervention focused on identifying immediate, safe housing arrangements, often utilizing client-centered problem solving that helps clients generate solutions to their housing needs. Diversion offers flexible services that may be coupled with minimal financial assistance when needed. SARAH has received a grant from USAA to provide up to $1500 in diversion related expenses to up to 250 families.

**Family Referral Program (FRP)** – collaboration between the San Antonio Housing Authority (SAHA) and SARAH to transition literally homeless families into Project-Based Vouchers (PBV). FRP assists clients currently experiencing homelessness (HUD Categories 1 and 4) and displaying a level of self-sufficiency that would not require case management to maintain housing. Clients also need a minimum financial income of 10% Area Median Income (AMI) to 30% AMI.

**Move-On Preference Program** – created to provide 40 Housing Choice Vouchers for individuals and families in a Permanent Supportive Housing (PSH) program to move from the current program provider into a voucher managed by SAHA. The Move-On Preference Program. This program is specifically designed for PSH program participants who have stabilized with their needs for support and no longer need the intensity of supportive services offered through PSH and are still in need of financial assistance for their residence.

**Provider Liability Assurance for Community Empowerment (PLACE)** – Rental Incentive Fund/Risk Mitigation Fund enables service providers an opportunity to commit funds on behalf of a client experiencing homelessness (with barriers to housing) should any damages beyond the security deposit be made to a rental unit or in the case of an eviction.
Continuous Quality Improvement (CQI) & Evaluation

To address the quality and effectiveness of the Homelink process for consumers and providers, the CoC conducts an annual Continuous Quality Improvement assessment for the Homelink system. This assessment is based on feedback from the following entities:

- Consumer Input
- Participating Provider Input
- Coordinated Entry Advisory Committee
- CoC Membership Council
- CoC Workgroups

Evaluation efforts shall be informed by key performance metrics established annually by the CoC in conjunction with the Coordinated Entry Advisory Committee and CoC Board.
## Appendix A

HEARTH Homeless Final Definition can be found [here](#).

The Criteria and Recordkeeping Requirements for the different homeless definitions can be found [here](#) and are included below.

<table>
<thead>
<tr>
<th>Category</th>
<th>Literally Homeless</th>
<th>(1) Individual or family who lacks a fixed, regular, and adequate nighttime residence, meaning:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>(i) Has a primary nighttime residence that is a public or private place not meant for human habitation;</td>
</tr>
<tr>
<td></td>
<td></td>
<td>(ii) Is living in a publicly or privately operated shelter designated to provide temporary living arrangements (including congregate shelters, transitional housing, and hotels and motels paid for by charitable organizations or by federal, state and local government programs); or</td>
</tr>
<tr>
<td></td>
<td></td>
<td>(iii) Is exiting an institution where (s)he has resided for 90 days or less and who resided in an emergency shelter or place not meant for human habitation immediately before entering that institution</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Category</th>
<th>Imminent Risk of Homelessness</th>
<th>(2) Individual or family who will imminently lose their primary nighttime residence, provided that:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>(i) Residence will be lost within 14 days of the date of application for homeless assistance;</td>
</tr>
<tr>
<td></td>
<td></td>
<td>(ii) No subsequent residence has been identified; and</td>
</tr>
<tr>
<td></td>
<td></td>
<td>(iii) The individual or family lacks the resources or support networks needed to obtain other permanent housing</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Category</th>
<th>Homeless under other Federal statutes</th>
<th>(3) Unaccompanied youth under 25 years of age, or families with children and youth, who do not otherwise qualify as homeless under this definition, but who:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>(i) Are defined as homeless under the other listed federal statutes;</td>
</tr>
<tr>
<td></td>
<td></td>
<td>(ii) Have not had a lease, ownership interest, or occupancy agreement in permanent housing during the 60 days prior to the homeless assistance application;</td>
</tr>
<tr>
<td></td>
<td></td>
<td>(iii) Have experienced persistent instability as measured by two moves or more during in the preceding 60 days; and</td>
</tr>
<tr>
<td></td>
<td></td>
<td>(iv) Can be expected to continue in such status for an extended period of time due to special needs or barriers</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Category</th>
<th>Fleeing/Attempting to Flee DV</th>
<th>(4) Any individual or family who:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>(i) Is fleeing, or is attempting to flee, domestic violence;</td>
</tr>
<tr>
<td></td>
<td></td>
<td>(ii) Has no other residence; and</td>
</tr>
<tr>
<td></td>
<td></td>
<td>(iii) Lacks the resources or support networks to obtain other permanent housing</td>
</tr>
</tbody>
</table>

South Alamo Regional Alliance for the Homeless  
4100 E. Piedras, Suite 105 | San Antonio, TX 78228 | 210.876.0720 | www.sarahomeless.org
Appendix B

SARAH Geographic Coverage Map
## Appendix C

Priority Pool Procedure Information

### Table A. FY 2020 Homelink Referrals per Month

<table>
<thead>
<tr>
<th>Total</th>
<th>RRH</th>
<th>PSH</th>
<th>SSO - CE</th>
<th>TH-RRH</th>
<th>TH</th>
<th>OPH</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>October</td>
<td>12</td>
<td>21</td>
<td>0</td>
<td>0</td>
<td>8</td>
<td>2</td>
<td>43</td>
</tr>
<tr>
<td>November</td>
<td>19</td>
<td>14</td>
<td>0</td>
<td>0</td>
<td>6</td>
<td>0</td>
<td>39</td>
</tr>
<tr>
<td>December</td>
<td>5</td>
<td>3</td>
<td>0</td>
<td>0</td>
<td>3</td>
<td>1</td>
<td>12</td>
</tr>
<tr>
<td>January</td>
<td>38</td>
<td>4</td>
<td>0</td>
<td>0</td>
<td>6</td>
<td>1</td>
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<td>0</td>
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<td>June</td>
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<td>July</td>
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<td>0</td>
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<td>August</td>
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<td>0</td>
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<td>N/A</td>
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### Table B. FY 2020 Referral Percentages by Project Type

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<th>%</th>
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<th>TH-RRH</th>
<th>TH</th>
<th>OPH</th>
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<tr>
<td>October</td>
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<td>0%</td>
<td>19%</td>
<td>5%</td>
<td>43</td>
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<tr>
<td>November</td>
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<td>0%</td>
<td>15%</td>
<td>0%</td>
<td>39</td>
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<tr>
<td>December</td>
<td>42%</td>
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<td>0%</td>
<td>0%</td>
<td>25%</td>
<td>8%</td>
<td>12</td>
</tr>
<tr>
<td>January</td>
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<td>8%</td>
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<td>0%</td>
<td>12%</td>
<td>2%</td>
<td>49</td>
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<tr>
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<td>42</td>
</tr>
<tr>
<td>March</td>
<td>61%</td>
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<td>0%</td>
<td>12%</td>
<td>12%</td>
<td>33</td>
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<tr>
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<td>0%</td>
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<tr>
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<td>27%</td>
<td>0%</td>
<td>0%</td>
<td>14%</td>
<td>10%</td>
<td>49</td>
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<tr>
<td>July</td>
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<td>0%</td>
<td>0%</td>
<td>0%</td>
<td>0%</td>
<td>0%</td>
<td>0</td>
</tr>
<tr>
<td>August</td>
<td>0%</td>
<td>0%</td>
<td>0%</td>
<td>0%</td>
<td>0%</td>
<td>0%</td>
<td>0</td>
</tr>
<tr>
<td>September</td>
<td>0%</td>
<td>0%</td>
<td>0%</td>
<td>0%</td>
<td>0%</td>
<td>0%</td>
<td>0</td>
</tr>
<tr>
<td>Average/Month</td>
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<td>0%</td>
<td>14%</td>
<td>6%</td>
<td>34.6</td>
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</table>

### Table C: Living Arrangements by Type

<table>
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<tr>
<th>Type</th>
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<th>Percentages</th>
<th>Type</th>
<th>Active</th>
<th>Percentages</th>
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<tr>
<td>O</td>
<td>330</td>
<td>26%</td>
<td>O</td>
<td>139</td>
<td>27%</td>
</tr>
<tr>
<td>S</td>
<td>884</td>
<td>71%</td>
<td>S</td>
<td>349</td>
<td>67%</td>
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</table>
Table D: FTYD Referrals (Individual/Family)

<table>
<thead>
<tr>
<th>Month</th>
<th>Individuals</th>
<th>Families</th>
</tr>
</thead>
<tbody>
<tr>
<td>October</td>
<td>24</td>
<td>14</td>
</tr>
<tr>
<td>November</td>
<td>26</td>
<td>13</td>
</tr>
<tr>
<td>December</td>
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<td>7</td>
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<tr>
<td>January</td>
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<td>25</td>
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<td>February</td>
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<td>March</td>
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<td>April</td>
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<td>May</td>
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<tr>
<td>August</td>
<td></td>
<td></td>
</tr>
<tr>
<td>September</td>
<td></td>
<td></td>
</tr>
<tr>
<td>YTD Total</td>
<td>156</td>
<td>149</td>
</tr>
<tr>
<td>Average/Month</td>
<td>17.33</td>
<td>16.56</td>
</tr>
<tr>
<td>Percentage of Monthly Referrals</td>
<td>51%</td>
<td>49%</td>
</tr>
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</table>
Chart A: FYTD Average Monthly Referrals (Family/Individual)¹

Table E: Census by Agency

<table>
<thead>
<tr>
<th>Agency</th>
<th>Census²</th>
<th>Active</th>
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</thead>
<tbody>
<tr>
<td>H4H</td>
<td>1017</td>
<td>364</td>
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<tr>
<td>BBB Street Outreach</td>
<td>37</td>
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<tr>
<td>CHCS PATH Street Outreach</td>
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<td>19</td>
</tr>
<tr>
<td>SAMM</td>
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<td>13</td>
</tr>
<tr>
<td>Strong Foundation</td>
<td>9</td>
<td>1</td>
</tr>
<tr>
<td>Thrive</td>
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<td>0</td>
</tr>
<tr>
<td>TSA</td>
<td>97</td>
<td>78</td>
</tr>
</tbody>
</table>

¹ Does not include Youth referrals.
² Census includes clients who have been active within the past 200 days and whose service was recorded by the indicated agency.
Appendix D

Determining Veteran Eligibility: The veteran is overall responsible for securing and maintaining his/her verification documents (DD 214 or Statement of Service), but in the event the veterans does not have these items the Haven for Hope veteran navigator teams will ensure these documents are acquired through the STXVA eligibility system or via National Archives. Veterans should also be advised to have the documents secured at the Bexar County Clerk’s Office.

Although it is not required, filing your DD 214 with the Bexar County Clerk’s Office provides permanent retention of the record. Doing so allows the County Clerk’s Office to provide a certified copy of your DD 214 should you need a replacement copy for your records in the future. An original, complete DD 214 must be provided for the filing and will be returned once the filing is completed.

Veterans can also order their eligibility documents (DD214 or Statement of Service) by visiting their local Veterans Services Organization or the Eligibility section of their local Veterans Administration.

WHERE TO FILE

Recording Department
Physical Address
101 W. Nueva, Suite 103
San Antonio, TX 78205
Phone: 210-335-2581

WHERE TO REQUEST A COPY

Vital Statistics
Physical Address
101 W. Nueva, Suite B110
San Antonio, TX 78205
Phone: 210-335-2581

FILING A DD 214 MILITARY DISCHARGE

A DD 214 can be filed on the first floor of the Paul Elizondo Tower in Suite 103. In order to file a DD 214, the County Clerk’s Office requires proof of age and identity and the original, complete DD 214. Once recorded, the original DD 214 is returned along with three (3) certified copies free of charge. There is no fee for filing a DD 214.
Common forms of identification used to file include:

- Driver’s License
- An original or certified copy of Birth Certificate
- Passport
- Visa or Military identification card

If you do not have an original DD 214, a certified copy can be requested online at www.archives.gov/veterans/military-service-records or submitted by mail or fax using the SF-180 Form which is provided on the same website. For customer service, please contact the National Personnel Records Center in St. Louis, Missouri by calling 314-801-0800.

REQUESTING A COPY OF A DD 214 MILITARY DISCHARGE

Once a DD 214 has been recorded with the Bexar County Clerk’s Office, a copy can be obtained from the Bexar County Clerk’s Vital Statistics Department located in the basement of the Paul Elizondo Tower. Aside from the Veteran, only immediate family (spouse, father, mother, son, daughter, sister, or brother) may request a copy. There is no fee required for requesting a copy of a DD 214.

In order to request a copy of a DD 214, the County Clerk’s Office requires proof of age and identity in the form of a valid government issued or state issued photo identification. Information about the veteran is also required. The minimum information that is needed is the veteran’s full name. While the year of discharge is not required, it is extremely helpful in processing the request.