

I. INTRODUCTION AND OVERVIEW

A. BACKGROUND AND PURPOSE

The Orange County Partnership to End Homelessness (OCPEH) is funded by Orange County and the Towns of Chapel Hill, Carrboro, and Hillsborough. OCPEH collaborates with public and private agencies in Orange County to help people find a safe place to stay using Coordinated Entry (CE) – a single point of entry, homelessness diversion, and program referral system. Coordinated Entry helps service providers determine quickly, consistently, and effectively which resources will best help people in housing crisis.

Coordinated Entry helps both people experiencing housing crisis and the agencies that serve them.

- ***For people in housing crisis:*** Coordinated Entry links to resources to resolve housing crises – either by diverting the household from experiencing homelessness, making a shelter referral to address immediate needs, or making a program referral to address transition back to permanent housing.
- ***For homeless service providers:*** Coordinated Entry streamlines the processes for diversion, shelter referral, and housing program referrals. By creating one centralized process and location, Coordinated Entry reduces work duplication at each agency. Coordinated Entry formalizes prioritization, prioritizing households with higher service needs over households with lower service needs.

Coordinated Entry is guided, maintained, and updated by two Committees, the HOME Committee and CE Planning Committee, and one workgroup, the Data & Grants Workgroup, comprised of Coordinated Entry stakeholders, and coordinated by the Orange County Partnership to End Homelessness (OCPEH). Information about the partners who use, guide and maintain the Coordinated Entry system can be found in (*See Appendix A, Partners and Roles*).

B. CONTINUUM OF CARE (CoC) COORDINATED ENTRY (CE) AND EMERGENCY SOLUTION GRANT (ESG) COORDINATION

This document will provide guidance and direction for the day-to-day operation, management, oversight, and evaluation of Coordinated Entry. The CoC is committed to aligning and coordinating CE policies and procedures governing the assessment, eligibility determinations, and prioritization with its written standards for administering CoC and ESG Program funds. *See Appendix B, CoC and ESG Written Standards.*

The written standards have been developed and agreed upon by the OCPEH in consultation with the Data and Grants Workgroup. The Data and Grants Workgroup contains both CoC and ESG grant fund recipients, and updates are completed as needed throughout the year, but at least once annually. The OCPEH Leadership team reviews recommended updates and revisions on an on-going basis as the actual application and practical experience of implementing a coordinated entry system and its design principles are refined and improved.

C. GUIDING PRINCIPLES

Partnering agencies have agreed that the following principals constitute core values that shape and inform Coordinated Entry.

Coordinated Entry Policies & Procedures

1. Coordinated Entry supports **client choice**: participants are freely allowed to decide what information they provide during the assessment process, to refuse to answer assessment questions, or to refuse housing and service options without retribution or limiting their access to other forms of assistance. Clients can revoke digital consent at any point and for any reason. This element of privacy and choice is at the heart of the Coordinated Entry system's core standards.
 - Participants will remain on the HOME Committee list (the coordinated entry prioritization list) when they reject referral options.
 - Programs may require participants to provide certain pieces of information to determine program eligibility only when the applicable program regulation requires the information to establish or document eligibility.
2. Coordinated Entry uses **Housing First**, a principal that supports the fundamental importance of transitioning people experiencing homelessness back to permanent housing as quickly as possible and help people maintain housing.
3. Coordinated Entry uses **prioritization**: allocating limited housing resources, including Rapid Re-Housing and Permanent Supportive Housing, to households with the highest service need in our community.
4. Coordinated Entry **applies a consistent process throughout the community** to achieve fair, equitable, and equal access to homeless programs and services within Orange County.
5. Coordinated Entry **will not screen people out of the coordinated entry process due to perceived barriers** to housing or services, including, but not limited to too little or no income, active substance use or a history of substance use, domestic violence history, 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 or history of not being a leaseholder, or criminal record.
6. Coordinated Entry **does not require disclosure of specific disabilities or diagnosis** – this information may only be obtained for purposes of determining program eligibility to make appropriate referrals.

D. GEOGRAPHIC COVERAGE

Coordinated Entry covers the entire geographic area of Orange County, North Carolina, which includes the Towns of Carrboro, Chapel Hill and Hillsborough.

E. AFFIRMATIVE MARKETING AND OUTREACH

All persons participating in any aspect of Coordinated Entry such as access, assessment, prioritization, or referral will be afforded equal access to CE Services and resources without regard to the person's actual or perceived membership in a federally or locally protected class such as race, color, national origin, religion, sex, age, familial status, marital status, veterans status or disability. Additionally, all people in different populations and subpopulations in the Coordinated Entry geographic area, including people experiencing chronic homelessness, veterans, families with children, youth, and survivors of domestic violence, shall have fair and equal access to CE services.

Each project participating in Coordinated Entry is required to post or otherwise make publicly available a notice (provided by OC Connect) that describes coordinated entry. This notice shall be posted in the agency

waiting areas, as well as any areas where participants may congregate or receive services. All staff at each agency should have knowledge of how to discuss and explain CE to a participant who seeks more information. OCPEH will affirmatively outreach groups that are underrepresented in CE utilization data to ensure that people in housing crisis, service providers, and community members are informed of how to access CE.

F. SAFETY PLANNING AND RISK ASSESSMENT

All persons who are fleeing or attempting to flee domestic violence, dating violence, sexual assault, or stalking shall have immediate and confidential access to available crisis services within the defined CE geographic area.

It is critically important to note that there are no less than three different points at which agencies ask about and consider whether the person who has come to them is safe from domestic violence, sexual assault or threat of sexual assault. If at any of those points in the intake conversation the client replies that they are at imminent risk of violence and desires out of county shelter referral, they will be offered a warm handoff to an appropriate facility specifically designed to help and protect victims of domestic violence or sexual assault. Currently, these are the Compass Center and the Orange County Rape Crisis Center. Information about these facilities can be found in "Standardization Prioritization", Section IV.A of this document. Domestic violence and sexual assault providers may continue to provide safety services based upon the provider's eligibility criteria and advocate for out-of-county shelter access if desired, while CE provider will continue to provide housing focused assessment and referral.

G. NONDISCRIMINATION

Coordinated Entry must adhere to all jurisdictionally relevant civil rights and fair housing laws and regulations. OCPEH is responsible for monitoring agencies' compliance with all CE requirements including adherence to civil rights and fair housing laws and regulations. OCPEH staff review nondiscrimination policies and procedures during the annual CoC and ESG funding competitions and request information on the number of and outcomes in nondiscrimination complaints. OCPEH staff will evaluate compliance with the below laws and regulations, as well as CoC-wide nondiscrimination policies, during this time and will address noncompliance with corrective action, up to issuing a finding which may affect its position in the local CoC rating and ranking process. Recipients and sub-recipients of CoC Program -funded projects must comply with the nondiscrimination and equal opportunity provisions of Federal civil rights laws and Orange County Civil Rights Ordinance, including the following:

1. **Fair Housing Act** prohibits discriminatory housing practices based on race, color, religion, sex, national origin, disability, age, veterans' status or familial status.
2. Section 504 of the **Rehabilitation Act** prohibits discrimination on the basis of disability under any program or activity receiving Federal financial assistance.
3. Title VI of the **Civil Rights Act** prohibits discrimination on the basis of race, color, or national origin under any program or activity receiving Federal financial assistance.
4. Title II of the **Americans with Disabilities Act** prohibits public entities, including, State and local governments, and special purpose districts, from discriminating against individuals with disabilities in all their services, programs, and activities, which include housing, and housing related services such as housing search and referral assistance.

5. Title III of the **Americans with Disabilities Act** prohibits private entities that own, lease, and operate places of public accommodation, which include shelters, social service establishments, and other public accommodations providing housing, from discriminating on the basis of disability.
6. In addition, agencies in Orange County shall not discriminate based on actual or perceived sexual orientation or gender identity.
7. HUD'S **Equal Access Rule** Protections For Sexual Orientation, Gender Identity, and Marital Status requires equal access to HUD housing programs without regard to a person's actual or perceived sexual orientation, gender identity, or marital status.
8. **Gender Identity Final Rule** ensures that all individuals have equal access in accordance with their gender identity and in a manner that affords equal access to the individual's family.

In addition, Orange County ensures equal participation opportunity in homeless programs, without discrimination or harassment on the basis of race, color, religion, sex, sexual orientation, gender identity or expression, age, disability, marital status, citizenship, genetic information, or any other characteristic protected. Flyers or posters do not constitute a policy.

It is illegal to discriminate in the sale or rental of housing, including against individuals seeking a mortgage or housing assistance, or in other housing-related activities. The Fair Housing Act prohibits this discrimination because of race, color, national origin, religion, sex, familial status, and disability. ADD – Component to affirmatively further Fair Housing by providing information on types of discrimination and what to do on the front end, and providing support while supporting client autonomy on the back end.

II. ACCESS

Coordinated Entry in Orange County uses the following accessibility benchmarks:

- Coordinated Entry is designed to be available to all eligible persons regardless of race, color, national origin, religion, sex, age, familial status, disability, actual or perceived sexual orientation, gender identify, or marital status.
- All people have fair and equal access to Coordinated Entry, including people experiencing chronic homelessness, veterans, and families with children, youth, and survivors of domestic violence.

A. ACCESS

Coordinated Entry (CE) covers the entire geographic area claimed by OCEPH, Orange County, NC, is easily accessed by individuals and families seeking housing services, and is well advertised within the geographic area. Coordinated Entry provides a standardized assessment process to all CE participants, ensuring uniform decision-making and coordinated care of persons experiencing housing crisis.

To access Coordinated Entry, people can contact the Housing Helpline:

- By phone at 919-245-2655
 - The phone is answered live, Monday-Friday, 10am – 4pm
 - People can leave voicemails at any time and someone will be back in touch within 1 business day
- By email at housinghelp@orangecountync.gov, staff will reply to emails within 1 business day

- Walk-in and by appointment
 - IFC Commons (110 W. Main St, Carrboro) on Mondays 9am – 1pm
- Southern Human Services Center (2501 Homestead Rd, Chapel Hill) on Tuesdays and Thursdays
8:30am – 4pm

B. SPECIALIZED ACCESS POINTS FOR SUBPOPULATIONS

For people experiencing domestic violence, family violence, intimate partner violence – the same services are offered and housing resources available regardless if people present via the Housing Helpline coordinated entry or via a victim service provider, like Compass Center. Orange County does not have other specialized access points for subpopulations at this time, but can establish these if this community need presents.

OCPEH is committed to ensuring access for persons while are experiencing homelessness who are least likely to request assistance, For people experiencing unsheltered homelessness, Coordinated Entry assessments can be provided through the Street Outreach team, in addition to the Housing Helpline phone, email, and walk-in methods.

C. ACCESS COVERAGE

Orange County’s entire geographical area is accessible to CE processes through defined location-specific access points or through a Housing Helpline that is accessible throughout the Coordinated Entry geographical area. Overnight coverage is provided through the Housing Helpline and can be contacted from any location within Orange County.

D. ACCESSIBILITY OF ACCESS SITES

Orange County will ensure that all CE services are physically accessible to persons with mobility barriers. All CE communications and documentation will be accessible to persons with limited ability to read and understand English.

Coordinated Entry physical locations will be accessible to individuals with disabilities, including accessible physical locations for individuals who use wheelchairs, as well as people in the CoC who are least likely to access homeless assistance.

Orange County wants to ensure effective communication with people with disabilities. Recipients of Federal funds and CoCs must provide appropriate auxiliary aids and services necessary to ensure effective communication (e.g. Braille, audio, large type, assistive listening devices, and sign language interpreters.)

Orange County will ensure that all CE materials are available in English and Spanish. In addition, Coordinated Entry participating agencies will, to the greatest extent practicable, provide communication accommodation through translation services to effectively and clearly communicate with persons who have disabilities, as well as any person with limited English proficiency. The Planning Committee will provide visual and audibly accessible CE materials when requested by agencies or participants in CE.

E. EMERGENCY SERVICES

1. Coordinated Entry initial screening and assessment will operate within the hours listed below. Persons are ensured access to emergency services during hours when Coordinated Entry

Coordinated Entry Policies & Procedures

intake and assessment processes are not operating by leaving a message on the centralized phone number. When participants leave a voicemail, staff will call them back to complete intake and assessment within 1 business day

2. To access Coordinated Entry, people can contact the Housing Helpline:
 - By phone at 919, 245-2655
 - The phone is answered live, Monday-Friday, 10am – 4pm
 - People can leave voicemails at any time and someone will be back in touch within 1 business day
 - By email at housinghelp@orangecountync.gov, staff will reply to emails within 1 business day
3. The Street Outreach Harm Reduction and Deflection team is available for emergency service referral and Coordinated Entry during SOHRAD hours of operation – currently Monday – Friday 8am – 9pm and Saturday 12noon – 9pm. The CoC affirmatively markets this access point to people experiencing unsheltered homelessness, service providers, stakeholders, and the public across the CoC to ensure access outside of routine business hours.

F. STABILIZATION SERVICES

Coordinated Entry will ensure that all potentially eligible Community Stabilization participants will be screened for stabilization assistance. Community Stabilization access points and general homeless assistance access points will coordinate information and referrals back and forth to ensure persons at imminent risk of literal homelessness are provided with coordinated access to homelessness prevention services regardless of where the participants first contacts the CoC.

- For people who have stable housing for 2 weeks or less OR who have been experiencing homelessness for 2 weeks or less, Housing Helpline staff will connect them with **Homelessness Diversion** resources
 - Staff will have a strengths-based structured conversation with participants to determine if there are any other safe places a person can go, instead of homeless shelter
 - Flexible funding is available from the Carolina Homeless Prevention Initiative (CHPI) to assist with any costs needed to divert a household from homelessness
 - Staff will also use the OC Connect resource database and other tools to connect people with programs and services they need to enter or maintain housing

The CoC works with OC Housing Department, Central Piedmont Community Action agency, DSS and faith-based partners and other community organizations that offering prevention funding and services. When people call the Housing Helpline and have housing secured for 2+ weeks, staff guide these people at risk of homelessness to prevention resources. Each prevention program currently determines program eligibility and prioritization. People are prioritized for other prevention services based on funding availability.

- Homelessness prevention services that will participate in Coordinated Entry will be prioritized based on the same methodology above following completion of standardized assessment

No separate access point(s) for homelessness prevention services exist in Orange County. The CoC will work with all agencies providing prevention services, regardless of funding source, to coordinate how persons will be prioritized for referrals

G. STREET OUTREACH

The Orange County Street Outreach, Harm Reduction and Deflection program functions as access points to Coordinated Entry and will seek to engage person who may be served through CE but who are not seeking assistance or are unable to seek assistance via projects that offer crisis housing or emergency shelter.

Street Outreach teams are trained on CE and the assessment process, and have the ability to offer Coordinated Entry services to participants they contact through their street outreach efforts. Street Outreach teams will be considered an access point for Coordinated Entry.

III. ASSESSMENT

A. STANDARDIZED ASSESSMENT APPROACH

Housing Helpline staff will guide callers and emailers to the appropriate resources based on their situation:

- For people with housing secured for 2+ weeks, staff will connect them with Community Stability
 - As of October 2022, these include the Orange County Emergency Housing Assistance (EHA) program; Central Piedmont Community Action (CPCA) Community Services Block Grant (CSBG) program; other community resources for emergency financial assistance
 - Staff will also use the OC Connect resource database and other tools to connect people with programs and services they need to maintain housing
- For people who have stable housing for 2 weeks or less OR who have been experiencing homelessness for 2 weeks or less, staff will connect them with **Homelessness Diversion** resources
 - Staff will have a strengths-based structured conversation with participants to determine if there are any other safe places a person can go, instead of homeless shelter
 - Flexible funding is available from the Carolina Homeless Prevention Initiative (CHPI) to assist with any costs needed to divert a household from homelessness
 - Staff will also use the OC Connect resource database and other tools to connect people with programs and services they need to enter or maintain housing
- For people who have stable housing for 2 weeks or less and were not able to be diverted
 - Staff use a comprehensive and standardized assessment tool, the Vulnerability Index – Service Prioritization Decision Assistance Tool (VI-SPDAT) for everyone in this part of Coordinated Entry
 - Staff will ask if households are interested to join the HOME Committee list
 - List of people (listed by anonymous numbers or names) of people prioritized for permanent housing referrals
 - A group of service providers meet at the HOME Committee once per month to case conference each household on the list and make determinations for permanent housing referrals using the Coordinated Entry Prioritization
 - Housing Helpline staff will also use the OC Connect resource database and other tools to connect people with programs and services they need to enter or maintain housing
- For people who have been experiencing homelessness for 2+ weeks or were unable to be diverted, staff will connect them with a mix, determined by the household, of **Emergency Housing, Services, and Permanent Housing referrals**
 - Staff use a comprehensive and standardized assessment tool, the Vulnerability Index – Service Prioritization Decision Assistance Tool (VI-SPDAT) for everyone in this part of Coordinated Entry
 - Staff will ask if households are interested to join the HOME Committee list
 - List of people (listed by anonymous numbers or names) of people prioritized for permanent housing referrals

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- A group of service providers meet at the HOME Committee once per month to case conference each household on the list and make determinations for permanent housing referrals using the Coordinated Entry Prioritization
- Staff will connect households with shelter referrals if desired
- Staff will connect households to other programs as needed/if desired, including:
 - Street Outreach for people living unsheltered
 - UNC HomeLink for people with mental illness
 - Local Reentry Council for people with history of incarceration
- Staff will also use the OC Connect resource database and other tools to connect people with programs and services they need to enter housing

HOME Committee meetings take place the second and fourth Wednesday of each month. All service providers working on housing and/or homeless issues are welcome to attend. Please email Robert Dietz for meeting information (rdietz@orangecountync.gov). The purpose of the HOME Committee is threefold:

1. To prioritize permanent housing referrals, like Permanent Supportive Housing, Housing Choice Vouchers, and Rapid Re-Housing, when these are available
2. Ensure community collaboration and continued attention for people experiencing homelessness
3. Share resources and information with service providers with the goal of transitioning people from homelessness to housing as quickly and effectively as possible

General HOME Committee meeting info

- By-Name-list is stored in a password protected, cloud based database OC Connect system. Authorized users complete a New User Registration and HOME Committee Confidentiality Agreement before they gain access to the By-Name-List.
- In addition to the By-Name-List, OC Connect contains referral lists for permanent housing resources in Orange County.
- In advance of the meeting, service providers are asked to preview the Not Yet Service Connected and Active lists and enter updates so these can be given quickly during the meeting
- If an agency is unable to attend, please enter participant updates and send any programmatic updates in advance of the meeting to Robert Dietz (rdietz@orangecountync.gov)
- The meeting starts at 9:00 a.m. with general announcements, agency updates, and occasionally short presentations from community groups/agencies about their services
- Service providers review the list from about 9:15 a.m. to 11:30am. During list review, service providers are asked to be prepared to:
 - Share updates on anyone on the list the agency has had contact with since the previous meeting; including:
 - Anything that affects housing
 - Changes to housing or housing plan
 - If household needs something from other HOME Committee members (help with deposits, etc)
 - If household needs something from other community members (furniture, etc)
 - Make permanent housing referrals based on CE Prioritization and eligibility criteria
 - Brainstorm potential solutions for housing entry barriers for everyone on the list
 - Creatively problem-solve on individual-level and system-level issues preventing people from being able to move quickly from homelessness to housing
- The HOME Committee generally meets about once a year outside of regular meeting time/agenda to troubleshoot system-level or other issues, and to celebrate successes during the CE Retreat

B. ASSESSMENT SCREENING

Coordinated Entry may collect and document participants' membership in civil rights protected classes but will not consider membership in a protected class as a justification for restricting, limiting, or steering participants to particular referral options.

C. PARTICIPANT AGENCIES

Agencies participating in Coordinated Entry and considered the Coordinating Group in the Homeless Management Information System (HMIS) as of October 2022 are:

- Alliance Behavioral Health
- Caramore
- Carolina Outreach
- CASA
- Community Empowerment Fund (CEF)
- Chapel Hill Carrboro City Schools
- Chapel Hill Police Department Crisis Unit
- Community Link
- Compass Center
- Durham CoC staff
- Durham Crisis Response Center
- Durham Housing Authority
- Durham Veterans Administration (VA) Medical Center
- Families Moving Forward
- Freedom House
- Housing for New Hope
- Inter-Faith Council for Social Service (IFC), inclusive of IFC Community House and IFC HomeStart shelters and IFC Permanent Supportive Housing (PSH) program
- Life Skills Foundation
- Local Reentry Council
- Lutheran Family Services ACTT
- Open Table Ministries
- Orange County Criminal Justice Resource Department
- Orange County Department on Aging
- Orange County Department of Social Services
- Orange County Emergency Services - Community Paramedics
- Orange County Health Department
- Orange County Housing Department, inclusive of Housing Helpline, Eviction Diversion Program, Emergency Housing Assistance, and Orange County Housing Authority
- Orange County Partnership to End Homelessness (OCEPH), inclusive of the Homelessness Prevention, Rapid Re-housing program, and Housing Access Coordinator
- Orange County Schools
- Orange County Rape Crisis Center
- Oxford Houses of NC
- Street Outreach, Harm Reduction and Deflection program, a joint program of OCEPH and CJRD
- Peter-Elst LLC (peer support agency)
- Piedmont Health Services
- Project Access of Durham

- Standard Based Solutions LLC (peer support agency)
- TROSA
- UNC-CH School of Medicine, inclusive of the HomeLink program
- UNC Healthcare
- USA Veterans Help
- Volunteers of America of the Carolinas
- Wake CoC staff

D. PARTICIPANT AUTONOMY

It is crucial that person served by Coordinated Entry have the autonomy to identify whether they are uncomfortable or unable to answer any questions during the assessment process, or to refuse a referral that has been made to them. In both instances, the refusal of the participant to respond to assessment questions or to accept a referral shall not adversely affect their position on the HOME Committee list.

Note: Some funders require collection and documentation of a participant's disability or other characteristics or attributes as a condition for determining eligibility. Participants who choose not to self-identify in these instances may be limiting potential referral options.

Clients who come to Orange County partner agencies for help with homelessness are freely allowed to decide what information they provide during the assessment process, to refuse to answer assessment questions and to refuse housing and service options without retribution or limiting their access to other forms of assistance. Clients can also revoke digital consent at any point and for any reason. This element of privacy and choice is at the heart of the Coordinated Entry system's core standards. (See Coordinated Entry Guiding Principles, Section I.C.)

E. NONDISCRIMINATION COMPLAINT AND APPEAL PROCESS

The CoC is committed to ensuring that no information is used to discriminate or prioritize households for housing and services on a protected basis such as race, color, religion, national origin, sex, age, familial status, veterans' status, disability, actual or perceived sexual orientation, gender identity or marital status. Nondiscrimination Complaint and Appeal Process will be posted publicly in common areas where CE is conducted, including IFC Commons, IFC Community House and HomeStart, Southern Human Services Center, and carried by Street Outreach staff.

a. Process to File Nondiscrimination Complaint:

1. Nondiscrimination Complaints should be submitted in writing within 10 days of the issue arising. The Nondiscrimination Complaint should contain a detailed account of incident and, if any, proposed solutions.
2. Client or agency nondiscrimination complaints can be sent to the Orange County Partnership to End Homelessness (OCPEH)
 - via email to rwaltz@orangecountync.gov or

- via mail at PO Box 8181, Hillsborough, NC 27278 (please note: if an agency is submitting the grievance, it must be received on that agency's letterhead)

- b. OCEPH staff or another designee will reply to any nondiscrimination complaint within 3 days, stating:
 - Confirmation of receipt of complaint
 - Details of the next steps
 - Provide a timeline with deadlines and/or meeting dates with the goal of resolving the matter effectively and quickly.
- c. Complaints will be reviewed at the next scheduled CE Planning committee and next steps will be communicated in writing and verbally with the complaint.
- d. Complaints, including resolution will be retained for a period not less than one year and will be provided upon request to HUD funders and OCEPH Leadership Team.
- e. Complaints may be considered by the Project Review Committee when performing routine program monitoring as well as ranking recommendations

OCEPH or other Orange County homeless service agencies will offer assistance to anyone who needs accommodations to complete any of the above steps.

F. PRIVACY PROTECTIONS

All participant information collected, stored, or shared in operation of Coordinated Entry functions, regardless of where those data are stored, shall be considered personal and sensitive information worthy of full force of protection and security associated with data collection, stored, or shared.

Coordinated Entry uses a digital consent process to obtain participant consent to share and store participant information for purposes of assessing and referring participants through the coordinated entry process. This process includes the use of a consent form and that form will be updated as partner agencies shift over time.

Orange County Partnership to End Homelessness protects all data collected through the coordinated entry process by:

- All computers running Coordinated Entry are required to have password protection
- Maintaining all written Coordinated Entry materials in locked cabinets
- Not collecting any information not necessary for service or program referral
- All people attending the HOME Committee meeting are required to sign the confidentiality policy. *See Appendix F, Confidentiality Agreement.*
- Requiring all staff administering Coordinated Entry to be trained, inclusive of privacy trainings

G. DISCLOSURE OF DISABILITY OR DIAGNOSTIC INFORMATION

Throughout the assessment process, participants must not be pressured or forced to provide CE staff with information that they do not wish to disclose, including specific disability or medical diagnostic information.

IV. PRIORITIZATION

A. STANDARDIZED PRIORITIZATION

- i. Once Housing Helpline staff assess VI-SPDAT scores, households experiencing homelessness are eligible to be placed on the HOME Committee list if the head of household is interested and gives their consent. The HOME Committee reviews monthly this by-name list to case conference client needs, and to prioritize referrals for permanent housing referrals like PSH and RRH. OC Connect

has been programmed to reprioritize this list at HMIS import twice per month using the overall list prioritization:

1. VI-SPDAT score – higher scores prioritized over lower scores
2. DV status – people fleeing domestic violence, sexual assault, or stalking prioritized over people who are not
3. Length of time homeless – longer lengths of time homeless prioritized over shorter
4. Living situation – people living unsheltered prioritized over people in shelter
5. People at high risk for contracting COVID-19 prioritized over people who are not at high risk

II. For permanent housing programs, the prioritization of the HOME list goes as follows:

- **Permanent Supportive Housing (PSH) prioritization**
 - Eligibility: For people experiencing chronic homelessness (have a disability + 12 months of homelessness documented)
 - Referral Procedure:
 - 1) Top of HOME Active list
 - 2) People who have participated for at least 18 months in RRH and continue to experience homelessness and have unmet supportive service needs (pause)
- **Rapid Re-housing (RRH) prioritization**
 - Serving people from different parts of the HOME list: 3 “buckets”
 - 1) Serving people with high service needs not being served in other programs
 - Top of the list according to VI-SPDAT (3 people out of 15 total on caseload)
 - 2) Mid-level, needs services, going to take some case management; OR higher VI-SPDAT and already connected to another service provider (HomeLink, ACTT) (5 people out of 15 total on caseload)
 - Determined during HOME meeting for any open slots on RRH caseload
 - 3) Long-term shelter stayers (7 people out of 15 total on caseload)
 - People with longest cumulative lengths of stay at IFC HomeStart and IFC Community House

Rapid Re-Housing case managers will use best practice program models, including case management paired with financial assistance and progressive engagement, to work with each household individually to determine the amount of rent, if any, the household must pay while receiving Rapid Re-Housing assistance using these factors:

- Amount of household income (if any)
- Amount of household expenditures
- Any other factors affecting household’s ability to enter and maintain permanent housing including arrears to past landlords, utilities, and others
- Given that the community need for Rapid Re-Housing services outstrips community resources and national data show RRH can be successful in most cases with less than 6 months assistance, RRH case managers will attempt to transition each household as quickly as possible to self-sufficiency while not jeopardizing the household’s long-term stability

Rapid Re-Housing programs work with shelters to transition people into permanent housing as quickly as possible.

- **Housing Choice Voucher (HCV) prioritization**

- The Orange County Housing & Community Development Department Administrative Plan states, “An applicant experiencing homelessness who is referred through an agency participating in the OCPEH HOME Committee. The referring agency must be an active participant in the HOME Committee and be recommended for a HCV by HOME Committee members prior to HCV applications being accepted from agency referrals in this preference category.”
- Prioritization for HCV vouchers will be made for the following groups:
 - People on fixed incomes - disability, retirement
 - Low case management needs
 - Case management needs exist but are met
 - PSH Move On
 - RRH who have ongoing natural and/or formal supportive services and need ongoing financial assistance to maintain market rents beyond 18 months of program participation via RRH Move On
 - “All But” chronic homeless status
 - Missing months, episodes of chronicity OR formal disability status but exhibiting signs of a disability
 - Veterans who are either
 - Not eligible for VA healthcare
 - who have ongoing natural and/or formal supportive services and need ongoing financial assistance to maintain market rents beyond 12 months of program participation Fleeing domestic violence, sexual assault, or stalking

- **Veterans programs** use internal program guidelines for program referral

- HUD-VASH – program referral to Durham VA
- Supportive Services for Veterans and their Families (SSVF) – program referral to Volunteers of America of the Carolinas

- **Emergency Housing Voucher (EHV) prioritization**

- Orange County Housing Authority has been issued 19 EHV vouchers through the American Rescue Plan Act.
- The above prioritization for HCV plus at least one of the following:
 - Unsheltered individuals and families with children
 - Long-term shelter stayers
 - People already assessed as needing permanent supportive housing
 - Currently homeless families with children under age 6 and people who are pregnant
 - People who are disabled
 - People over the age of 55

Households who have been unable to lease up with an EHV within one year of issuance may be allocated a HCV and the EHV will be reallocated to the next household on the HOME Committee who meets the EHV prioritization noted above.

CoC will use data collected through the CE process to prioritize homeless persons within the CoC’s geographic area.

III. For emergency shelter, the Continuum of Care follows the following procedure:

1. Emergency Shelter : Households will be referred by Coordinated Entry to IFC HomeStart and IFC Community House and out-of-county shelters to be placed in these programs as beds are available. CE staff prioritize filling shelter beds, alternating between highest VI-SPDAT score, and longest time experiencing homelessness.

Shelter staff are to notify CE Team Lead, Robert Dietz, via email at rdietz@orangecountync.gov when there is a current emergency shelter vacancy or a vacancy is expected in the next seven days. CE Team Lead will notify the next person on the Shelter Referral List, that has been sorted by alternated longest time experiencing homelessness and highest VI-SPDAT score. Prior to entry on the Shelter Referral List, CE staff provide education on shelter eligibility guidelines, and conduct screening for the need to perform Activities of Daily Living independently, the inability to serve people who are actively on the Sexual Offender Registry, and people who have current bans at IFC shelter.

IFC shelter staff will inform CE staff of people who have current IFC shelter bans. CE staff will ensure referral to Street Outreach or out of county shelter placement in accordance with participant choice.

- **Women & Families:** IFC HomeStart has beds available for single women and for families as they present and/or identify, including families headed by single fathers and two parent-headed families in addition to families headed by single mothers and all others, regardless of family composition, call the Housing Helpline for shelter referral at 919-245-2496
- **Men:** IFC Community House continues to have beds available for men, call the Housing Helpline for shelter referral at 919-245-2496.
- **Seasonal:** IFC Community House & HomeStart have seasonal beds and are available for single men and single women Between November 1 and April 30 or when approved by the Town of Chapel Hill elected officials during times of severe inclement weather
 - For women, 3 beds available: call HomeStart at 919-932-6025 If staff person says space is still available, they will instruct you on when to arrive that evening; Eat dinner before coming.
 - For men, 15 beds available: Call Community House at 919-967-1086 (option 0) to reserve a spot; Eat dinner before coming.

Coordinated Entry will work with households to secure out-of-county shelter beds at

- Urban Ministries of Durham,
- Allied Churches of Alamance County,
- Wilmington Street shelter in Raleigh; and other shelters as dictated by client need and client choice.

2. Households Fleeing Domestic Violence & Sexual Assault: Households fleeing, or attempting to flee domestic violence, dating violence, sexual assault, or stalking will be connected immediately to the domestic violence service provider Compass Center and the victim service organization Orange County Rape Crisis Center for safety planning, even when households are

seeking shelter or services from non-victim service providers. With client consent, Coordinated Entry screens for safety concerns in three different places in the VI-SPDAT intake survey. People fleeing or attempting to flee domestic violence and victims of trafficking have safe and confidential access to Coordinated Entry and victim services – including access to the comparable process – used by victim service providers, and immediate access to emergency services such as crisis hotlines and shelter.

3. **Homelessness Prevention:** CE staff will refer households in need of mainstream Community Stability services to all services available and informed by client choice. Each Community Stability program currently determines program eligibility and prioritization. The CoC funds Homelessness Prevention with ESG-CV funds. CE staff are educated on program eligibility although Homelessness Prevention staff confirm eligibility in accordance with ESG Desk Guide and the Orange County ESG Program Manual.
 - All households meeting the criteria for HUD Category two “at imminent risk of homelessness” will be referred for program eligibility and intake. Homelessness Prevention staff will conduct individualized housing barriers assessment and develop a Housing Stabilization plan that includes referral to ESG and mainstream services and supports.
4. **Street Outreach:** The CoC currently has a Street Outreach program supported by local funds. People experiencing homelessness will be referred to Street Outreach per Priority 1 of the HUD Homeless definition: Persons residing on the streets, in vehicles or other places not meant for human habitation that have refused or are unlikely to engage with other homeless service providers in the community; or people residing on the streets, in vehicles or other places not meant for human habitation and are matched to transitional housing, rapid re-housing or permanent supportive housing but are not yet housed.

All street outreach offers clients:

- The same standardized process as persons who access coordinated entry through site-based access points, using OC Connect, the coordinated entry process
- A relationship-based model, which uses harm reduction methods
- Close coordination with PSH, RRH, IFC Community Kitchen and shelter staff, Outreach Court, Emergency Service, law enforcement

B. EMERGENCY SERVICES

Emergency Services are a critical crisis response resource, and access to such services will not be prioritized.

V. DATA SYSTEMS

PARTICIPANT CONSENT PROCESS

Data must not be collected without the consent of participants, according to the defined privacy policies adopted by the OCEPH. Orange County uses HMIS for data collection on coordinated entry.

As part of the assessment process, participants will be provided with a written copy of the HMIS Release of Information (ROI) which identifies what data will be collected, what data will be shared, which agencies data will be shared with, and what the purpose of the data sharing is. Participants will have the option to decline sharing data; doing so does not make them ineligible for CE. *See Appendix C, Client Release of Information and Sharing Plan*

OCPEH provides mandatory reporting that any person or institution to report reasonable belief that a juvenile, a disabled adult or an elderly person is being abused, neglected or in need for any other reason of protective service. *See Appendix D, Mandatory Reporting*

VI. EVALUATION

EVALUATION OF CE SYSTEM

Regular and ongoing evaluation of the CE system will be conducted to ensure that improvement opportunities are identified, that results are shared and understood, and that the CE system is held accountable.

The CE will be evaluated using HMIS data, program participant and service provider feedback no less frequently than once per year. Results will be reviewed by the CE Planning Committee, shared during the Annual CE Retreat and posted publicly on the OCPEH website. The CE Planning Committee has selected the following as key outcomes for CE.

- Reduction in the length of time homeless (system and project level)
- Reduction in the number of persons experiencing first-time homelessness (system and project).
- Increase in the number of placements into permanent housing (system and project level).
- Identification of and reduction in system level racial disparities

APPENDIX A – DEFINITIONS

For the purposes of this document, for those definitions identified in this section as a HUD Definition, the actual definition provided by HUD shall supersede those enumerated in this document.

Chronically Homeless (*HUD Definition*)

A person who:

1. Is homeless and lives in a place not meant for human habitation, a safe haven, or in an emergency shelter; and
 - a. Has been homeless and living or residing in a place not meant for human habitation, a safe haven, or in an emergency shelter continuously for at least one year or on at least four separate occasions in the last three years, where the cumulative total of the four occasions is at least one year. Stays in institutions of 90 days or less will not constitute a break in homelessness, but rather such stays are included in the cumulative total; and
 - b. Can be diagnosed with one or more of the following conditions: substance use disorder, serious 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;
2. Has been residing in an institutional care facility, including a jail, substance abuse or mental health treatment facility, hospital, or other similar facility, for fewer than 90 days and met all the criteria in paragraph (1) of this definition, before entering that facility; or
3. Meets all of the criteria in paragraph (1) of this definition.

Chronically Homeless Summary: A person who's lived in a safe haven, an emergency shelter or some other location not fit for human habitation for at least a year. This person might have a substance abuse or mental health issue (or more than one issue), and he or she might have even lived for 90 days or less – on several occasions – in a rehabilitation facility a jail or another institutional setting.

Literally Homeless (*HUD Homeless Definition Category 1*)

A person who lacks a fixed, regular, and adequate nighttime residence

1. An individual 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, camping ground; or
2. An individual 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 program for low-income individual); or

3. 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.

Literally Homeless Summary: A person who's lived in a public or private place that's not typically used as a place for people to sleep, such as a car, a park or a bus station. This term might also describe a person who's living in a public or private shelter. A person who lived in such a place and then entered an institution (jail, substance abuse or mental health facility) for 90 days or less would also be considered "literally homeless" when he or she exited that institution.

At imminent risk of homelessness (*HUD Homeless Definition Category 2*)

A person who will imminently lose their housing (within 14 days) and become literally homeless

Homeless under other Federal statutes (*HUD Homeless Definition Category 3*)

A person defined as "homeless" by other federal statute (e.g., Dept. of HHS, Dept. of Ed.)

Homeless because fleeing domestic abuse or violence (*HUD Homeless Definition Category 4*)

A person fleeing or attempting to flee domestic violence, stalking, dating violence, or sexual assault

At Risk of Homelessness

Category 1: A person who:

- a. Has an annual income below 30% of median income for the area; AND
- b. Does not have sufficient resources or support networks immediately available to prevent them from moving to an emergency shelter or another place defined in Category 1 of the "homeless" definition; AND Meets one of the following conditions:
 - i. Has moved because of economic reasons 2 or more times during the 60 days immediately preceding the application for assistance; OR
 - ii. Is living in the home of another because of economic hardship; OR
 - iii. Has been notified that their right to occupy their current housing or living situation will be terminated within 21 days after the date of application for assistance; OR
 - iv. Lives in a hotel or motel and the cost is not paid for by charitable organizations or by Federal, State, or local government programs for people with low-income; OR
 - v. Lives in an SRO or efficiency apartment unit in which there reside more than 2 persons or lives in a larger housing unit in which there reside more than one and a half persons per room; OR
 - vi. Is exiting a publicly funded institution or system of care; OR
 - vii. Otherwise lives in housing that has characteristics associated with instability and an increased risk of homelessness, as identified in the recipient's approved consolidated plan.

Category 2: A child or youth who does not qualify as homeless under the homeless definition, but qualifies as homeless under another Federal statute

Category 3: An unaccompanied youth who does not qualify as homeless under the homeless definition but qualifies as homeless under section 725(2) of the McKinney-Vento Homeless Assistance Act, and the parent(s) or guardian(s) or that child or youth if living with him or her.

At Risk of Homelessness Summary: According to HUD, there are three different ways to define whether a person is considered “at risk of homelessness.” In Category 1, a person is at risk of homelessness if his or her income is 30% below the community’s median income and if that person doesn’t have in the community a network of support – such as family, close friends or faith community – who might help house them to prevent them from going to a shelter. Coupled with these two circumstances must be at least one more factor from among the seven described in the HUD definition of Category 1, these factors include whether the person has moved 2 or more times in the last 60 days, whether they are currently living with friends and whether they are 21 days or less from losing the right to stay where they live. Categories 2 and 3 help define under what circumstances children or youth can be defined as “at risk of homelessness”, offering them additional access to services if they don’t qualify through protection from other laws.

1. Disability (HUD Definition) - HUD defines a person with disabilities as a person who:
 1. Has a disability as defined in Section 223 of the Social Security Act (42 U.S.C.423), or
 2. Is determined by HUD regulations to have a physical, mental, or emotional impairment that:
 - a. is expected to be of long, continued, and indefinite duration;
 - b. substantially impedes his or her ability to live independently; and
 - c. is of such a nature that more suitable housing conditions could improve such ability, or
 3. Has a developmental disability as defined in the Developmental Disabilities Assistance and Bill of Rights Act (42 U.S.C. 15002(8)), or
 4. Has the disease acquired immunodeficiency syndrome (AIDS) or any conditions arising from the etiologic agent for acquired immunodeficiency syndrome (HIV).

To qualify for low income housing under HUD public housing and Section 8 programs, the definition does not include a person whose disability is based solely on any drug or alcohol dependence.

2. Homeless Management Information System (HMIS) - A Homeless Management Information System is an electronic web-based data collection and reporting tool designed to record and store person-level information on the characteristics and service needs of people experiencing homelessness throughout a Continuum of Care (CoC) jurisdiction. Usage of the HMIS is mandated by the U.S. Department of Housing and Urban Development (HUD) for any program receiving CoC or ESG funds.

3. Homelessness Prevention - Recipients and subrecipients located in HUD-designated High Performing Communities (HPCs) may use CoC Program funds for homelessness prevention assistance for individuals and families at risk of homelessness. The services under this component may include housing relocation and stabilization services as well as short- and medium-term rental assistance to prevent an individual or family

from becoming homeless. Through this component, recipients and subrecipients may help individuals and families at-risk of homelessness to maintain their existing housing or transition to new permanent housing. Homelessness prevention must be administered in accordance with 24 CFR part 576.

4. **Housing First** – Housing First is not a “program” but a system-wide orientation that follows a basic principle that supports the fundamental importance of transitioning people experiencing homelessness back to permanent housing as quickly as possible and helping people maintain housing. Orange County’s responses to homelessness reflect this “Housing First” principle.

5. **Permanent Supportive Housing (PSH)** – Long-term rental assistance and services designed for people who are chronically homeless, or for people with serious mental illnesses or other disabilities who need support to live stably in their communities. These services can include case management, substance abuse or mental health counseling, advocacy, and assistance in locating and maintaining employment. PSH uses the Housing First model to move people into permanent housing as quickly as possible and aims to help people retain housing. Best practice PSH incorporates client choice and a varying level of services that can ramp up or down depending on client needs.

6. **Rapid Re-Housing (RRH)** – Short-term rental assistance and services that helps people obtain housing quickly, increase self-sufficiency, and remain housed. The core components of RRH are housing identification, rent and move-in assistance, and case management and services. RRH programs are generally designed to serve people with low to moderate services needs and generally provide 3-6 months assistance for households.

7. **Shelter / Emergency Shelter** - Facility that provides temporary sleeping places for people experiencing homelessness. Best practice shelters are accessible, i.e. have low barriers to entry, appealing, and housing-focused.

8. **SSI/SSDI Outreach, Access, and Recovery (SOAR)** – a program funded by the Substance Abuse and Mental Health Services Administration (SAMHSA) to connect people who are experiencing homelessness or at risk of homelessness with SSI/SSDI disability benefits.

9. **Street Outreach** – Street Outreach programs connect people experiencing homelessness with housing and services using a relationship-based model. Street outreach programs provide services directly or by collaborating with other agencies.

10. **Transitional Housing (TH)** – Long term temporary housing and supportive services, usually lasting 6- 24 months, that uses the Housing Ready model of skill building prior to permanent housing placement.

11. **Vulnerability Index** – Service Prioritization Decision Assistance Tool (VI-SPDAT) - Tool used by trained staff to determine vulnerability (also called acuity or service need) for people experiencing homelessness. The tool asks very personal questions about housing, health, social needs, family situation and safety and produces a score that indicates the level of service need for a household. Staff is trained to administer the VI-SPDAT and understand its context through OC Connect.

12. **Warm Handoff** – A connection to additional supportive services. In person, this is accomplished by introducing a participant to an additional provider and offering the participant the opportunity to clarify or correct information exchanged. When provided virtually, the initiating provider explains the handoff to the

Coordinated Entry Policies & Procedures

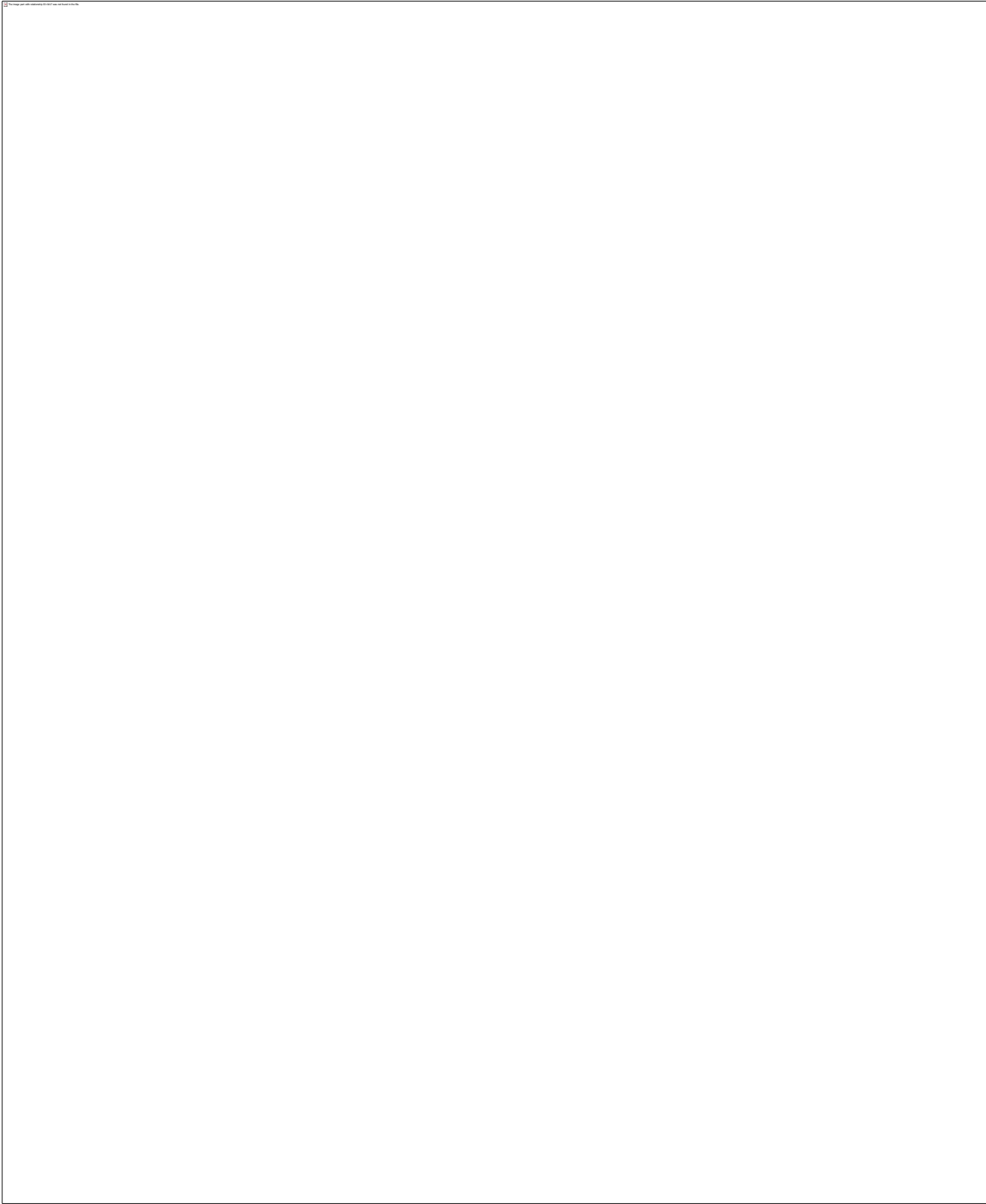


participant, makes contact with the additional provider and introduces the participant to the additional provider, allowing time for the participant to clarify or correct the information exchanged.

DRAFT



APPENDIX B HOME COMMITTEE CONFIDENTIALTY AGREEMENT



APPENDIX C, CLIENT RELEASE OF INFORMATION AND SHARING PLAN

3.4 NC ESG HMIS / DV Database

CLIENT RELEASE OF INFORMATION & SHARING PLAN

Identifying Information

SECTION 1

This form is about the North Carolina Statewide Homeless Management Information System. We call this NC HMIS or the “System”. Many shelters and other helping programs use the NC HMIS system. The NC HMIS System keeps information about clients that get help here.

We collect personal information directly from you as a way of providing the best services to meet your needs. We only collect information that we consider to be appropriate. The collection and use of all personal information is guided by strict standards of confidentiality.

The information will be used by us and other helping agencies according to the sharing plan attached:

- Allow us to work with other agencies to help you
- Help case managers work together to provide you complete service
- Reduce the number of times you have to tell your story
- Allow us to continue receiving funds to provide services
- Allow us to apply for additional funds for services
- Allow us to see what are the most common needs and whether or not we are meeting those needs

Finding Your Record:

- I know that the only information other agencies can see without my permission are my name, year of birth, gender, veteran status, and partial SS#. This information is used to find my record in the System and make sure that I have one and only one record. My name does let other participating agencies know that I have been helped by an agency somewhere in North Carolina. It does not identify the agency, what services I received, or where I received services.

- There may be a reason why sharing my name, year of birth, gender, veteran status, and partial SS# on the open part of the system may put a family member or me at risk. If that is true, I have initialed below that this information should **NOT** be left visible.

Name, Year of Birth, Gender, Partial SS#, Veteran Status: _____,

- I know that if I have already received services from an organization using the System and I have left my name visible, I will have to ask that organization to also close my “Profile/Name”. The name is usually left visible in our System to allow service providers to better coordinate services.

- I know that there is a list of all the agencies in the NC HMIS System that I can find on the Internet at www.NCHMIS.org. These agencies must follow strict privacy laws. The agencies in the system may change from time to time.

- I know that no additional information about me can be shared unless I sign the attached Sharing Plan agreeing to share additional information.



Client Release of Information & Sharing Plan

SECTION 2 – Sharing Plan

Put your initials next to the statements that you understand and agree to:

- I have received a copy of this Agency’s Privacy Notice/script that explains NC HMIS and my rights and responsibilities associated with how information is kept and shared through this system.
- I understand that my written consent allows the information listed in the Sharing Plan to be shared among the agencies listed in the Sharing Plan. All sharing agencies where I am receiving services may update that information as I provide additional or new information. The purpose of sharing my information is to better coordinate care for me and my family.
- I understand that the confidentiality of my records is protected by law. I understand that this agency will never give information about me to anyone outside the agency without my specific written consent through a Sharing Plan or as required by law (The regulations are the Federal Law of Confidentiality for Alcohol and Drug Abuse Patients, (42 CFR, Part 2) and the Health Insurance Portability and Accountability Act of 1996 (HIPPA), 45 CRF, Parts 160 & 164) and certain North Carolina laws.
- I understand that Agencies included in my Sharing Plan must follow strict privacy guidelines.
- I can withdraw my consent to share at any time; however any information already shared with another agency cannot be taken back. I also understand that the request to discontinue sharing will have to be coordinated between sharing partners. I should tell any agencies that I am seeing included on the Plan when I withdraw my consent.
- I understand that I have the right to see my information, request to change it, and to have a copy of that information from the servicing agency by written request.
- I understand that the refusal to share information in this system will not be used to deny me services such as emergency assistance, outreach, shelter, or housing assistance.
- I understand that some of my information may be disclosed for academic research purposes without identifying information included. My name and other identifying information may be used to match records but will not be released to be used directly in the research unless I sign a separate consent when identifying information is a requirement for the Study (example: so a researcher can contact me).

The following Sharing Plan describes what information will be shared with other agencies and the specific agencies included in the Sharing Plan.



Sharing Plan

What information is shared about you?

Shared Information:

-
-
-
-
-
-
-

Shared Information Continued:

-
-
-
-
-
-
-

This agency routinely shares information with the helping organizations or programs listed below. Please note that any organization or program listed below can share your information with the other organizations listed on this Release.

What helping agencies can see additional information about me?

Name of Agencies Participating in Sharing

-
-
-
-
-

Name of Agencies Participating in Sharing

-
-
-
-
-

Yes, I agree to share according to the Sharing Plan.

No, I do not agree to the Sharing Plan.

Client signature: _____, Date: _____,

Signature of guardian or authorized-representative (when required): _____

Relationship to client: _____ Date signed by guardian/authorized representative: _____

APPENDIX D, MANDATED REPORTING

MANDATED REPORTING (this definition provided by NCCASA)

North Carolina law requires any person or institution to report reasonable belief that a juvenile, a disabled adult or an elderly person is being abused, neglected or in need for any other reason of protective service. Reports should be made to the Director of the County Department of Social Services in the county in which the child, disabled adult or elderly person resides or is found. Reports may be made orally or in writing and should include:

- the name and address of the juvenile, disabled adult, or elderly person;
- the name and address of the juvenile, disabled adult, or elderly person's care-taker;
- the age of the juvenile/disabled adult/elderly person;
- the names and ages of other juveniles, disabled adults, or elderly people in the home;
- the present whereabouts of the juvenile, disabled adult, or elderly person;
- the nature and extent of any injury or condition resulting from abuse, neglect, or dependency and;
- any other information which the person making the report believes might be helpful.

If the report is made orally or by telephone, the reporter must include his or her name, address, and telephone number. By remaining anonymous, a reporter obstructs the department's ability to seek additional information and therefore forfeits his or her right to receive notification about the outcome of the investigation.

Because of these reporting requirements, agencies offering homeless services ensure all front-line staff members have full training and understand North Carolina law on mandated reporting.

Coordinated Entry does not contain specific mandated reporting information. If agencies have specific mandated reporting procedures, these should be followed.