



**ARIZONA BALANCE OF STATE CONTINUUM OF CARE  
COORDINATED ENTRY – PRIORITIZATION POLICY  
Governance Advisory Board Approved April 30, 2019**

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## **BACKGROUND**

The primary goal of these prioritization policies is to ensure housing opportunities are matched to individuals and families experiencing homelessness with the greatest need. Need may incorporate a number of factors including chronic homelessness, acuity (as measured by VI-SPDAT score), length of time homeless, presence of disabilities or other barriers, medical vulnerability, high risk of victimization, shelter status and/or high crisis system costs. The purpose of this policy is twofold: 1) provide Local Coalition to End Homelessness (LCEH) clear and transparent guidance on HUD and AZBoSCoC required and standard prioritization goals and practices that are a part of Case Conferencing and use of the By Name List; and 2) provide LCEHs direction on how and where through case conferencing, they can complement these standard policies with local prioritizations based upon existing resources, housing eligibility requirements, special populations or issues, or other local practicalities.

## **POLICY**

All AZBoSCoC LCEH Case Conferencing and Coordinated Entry processes must use the AZBoSCoC By Name List (BnL) generated and distributed weekly from the AZBoSCoC HMIS. This list includes all persons in contact with HMIS using entities in BoS including shelters, outreach teams, RBHA clinics and other identified AZBoSCoC and LCEH defined Coordinated Entry access points.

### **Prioritization Process**

- 1) The BnL is sorted by the LCEH to identify the identified households for their county.
- 2) The BnL is then sorted by the Chronic Homeless (CH) field
- 3) Once Chronic individuals/households are identified, the list is sorted by Length of Time Homeless field and organized from longest length of time to shortest
- 4) Finally, the list is sorted by VI-SPDAT score (if present) or if not available by the severity of service needs.

### **Permanent Supportive Housing (PSH) Prioritization**

Prioritization for PSH is consistent with HUD's Prioritization/PSH Notice. Persons eligible for PSH are prioritized for available units based on the following criteria (applying the definition of chronically homeless set by HUD in its December 2015 Final Rule):

- 1st Priority—Chronically homeless individuals and families with the longest history of homelessness and with the most severe service needs.
- 2nd Priority—Chronically homeless individuals and families with the longest history of homelessness but without severe service needs.
- 3rd Priority—Chronically homeless individuals and families with the most severe service needs.
- 4th Priority—All other chronically homeless individuals and families not already included in priorities 1 - 3.
- 5th Priority—Homeless individuals and families who are not chronically homeless but do have a disability and severe service needs.



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- 6th Priority—Homeless individuals and families who are not chronically homeless but do have a disability and a long period of continuous or episodic homelessness.
- 7th Priority—Homeless individuals and families who are not chronically homeless but do have a disability and are coming from places not meant for human habitation, Safe Havens, or emergency shelters.
- 8th Priority—Homeless individuals and families who are not chronically homeless but have a disability and are coming from transitional housing.

For the purposes of AZBoSCoC Prioritization in PSH, “most severe service needs” or “high acuity” is defined as a VI-SPDAT score of 9 or above.

**Rapid Re-Housing (RRH) Prioritization**

RRH Prioritization follows the prioritization categories defined under PSH with the exception that “most severe service needs” or “high acuity” for RRH is a VI-SPDAT score between 4 and 8.

**General Prioritization Considerations**

**1) Local LCEH Priorities (Tiebreakers)**

In the event of individuals/households with equal priority under these standards, LCEH will use their established (meaning a written policy that has been approved by the LCEH members) local policy that is based on valid local priorities or initiatives.

For example, an LCEH may have adopted a policy to reduce long term emergency shelter stays to increase capacity, may be targeting a reduction in street homelessness, or may have an initiative with local crisis services to target high cost/high risk homeless persons. In these cases, the LCEH Case Conferencing work group uses these factors in tie breaker situations (i.e. prioritizing an unsheltered person over a sheltered person, or vice versa, or taking the identified high cost/high risk individual identified by the crisis system from the BnL). Any additional local criteria used for these purposes is written and part of the local LCEH policies. Local standards will not conflict with the overall goals or general prioritization scheme identified in this policy.

**1a) Project Eligibility**

All CoC and ADOH HTF funded programs (ESG, RRH, Permanent Housing) are low barrier and are able to serve any individual prioritized on the BnL using this prioritization policy. In the event a project does have legitimate eligibility requirements (ex: only families, only single adults, veterans, SMI status), the Case Conferencing process refers the highest priority person or household who meets the eligibility requirement. Projects may require additional documentation related to their eligibility requirements including verification of information contained in HMIS (e.g. Chronic Homeless documentation, disability determination).

**2) Other Mainstream Housing Projects (VASH, RBHA)**

When making referrals from the BnL to other mainstream housing programs for targeted populations, the CoC prioritized list can be shared (subject to confidentiality and other disclosure policies included herein), but the other mainstream entity may elect to utilize other proprietary information or priorities (ex: RBHA risk roster,



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VA HOMES clinical assessment and data) for the prioritization of their resources. If the person is to be housed in a CoC or general Coordinated Entry participation housing project, the CoC prioritization structure applies.

**3) Non HMIS Acuity Information and Data**

In certain circumstances, a provider or Case Conferencing participant may have additional information on prioritization factors that results in reconsideration of housing prioritization. Examples of additional information include :

- medical information,
- proof of chronicity
- documentation of additional length of time homelessness
- change in circumstances that increase likelihood of harm or risk if not housed.

Additional information may also inform prioritization for persons unable or unwilling to complete the standard VI-SPDAT assessment, especially those with limited capacity, mental health issues or other high needs/high risk populations.

To address these situations, each LCEH has a written policy for the review and incorporation of additional non-HMIS data into the Case Conferencing prioritization process. At minimum the LCEH policy should:

- 1) identify the types of information that can be presented for consideration;
- 2) the standard of documentation (i.e. written documentation required?);
- 3) the process for approving re-prioritization based on new information (e.g.: Case Conferencing group must unanimously approve re-prioritization); and
- 4) a process for documenting re-prioritization (e.g. update notes on BnL, update HMIS statuses based on additional information).

**4) Document Readiness/Client Readiness**

LCEH may use client availability or document readiness as a tie breaker between multiple persons with similar prioritization in order to utilize resources most effectively. Documentation or availability is not be used to prioritize someone with lower prioritization unless LCEH has documented policies as to when a person can be skipped on the list. (Ex: higher priority client has refused housing opportunity; higher priority client cannot be located and efforts at location are documented).

**5) Impact of Refusal of Housing or Prior Failed Housing Search on Prioritization**

In the event a prioritized individual or household affirmatively turns down a housing opportunity referred through case conferencing or a household was unable to utilize a previous housing opportunity due to a failed housing search, the individual/household will maintain their housing priority on the BnL and will be offered future housing opportunities consistent with their prioritization.

Case conferencing policies have a process for recording any denied offers of housing in HMIS and/or the BnL especially if declining the housing results in a person with lower prioritization subsequently being offered the housing opportunity.