Chester County Partnership To End Homelessness

Operational Plan 2021 - 2022

Approved by the Chester County Partnership To End Homelessness Continuum of Care Governance Board: July 22, 2021
Table of Contents

Acknowledgements
Chester County Partnership To End Homelessness Governance Board  4
Chester County Partnership To End Homelessness Service Providers  4
Chester County Partnership To End Homelessness Funders  5
Chester County Department of Community Development Staff  5
Consultants  5

Executive Summary
About the Partnership and the Continuum of Care for Homeless Services  6
Mission Statement  6
Vision Statement  6
Guiding Principles  6
Operational Goals for 2021 - 2022  7

Introduction  8

Homelessness In Chester County
Annual Homeless Point In Time Count  10
Chester County 2021 PIT Analysis (227 Households Total)  10
Homelessness In Chester County Between January 1, 2021 - June 30, 2021  10
Disparities in Homelessness Based on Race and Ethnicity  11
Major Elements of the Continuum of Care’s Homeless Crisis Response System  12
How The System Works  12
Housing Resources in Chester County  13
Prioritization Standards for Housing Resources  14
Non-Prioritized Housing Resources  15
Prioritization Tools  15
Chester County Continuum of Care for Homeless Services: Key Metrics  16

Planning Process Methodology  19

Decade to Doorways: A Legacy of Achievement 2013 - 2020  20

Lessons Learned During the Pandemic  21

Goal 1. Advance Racial Equity  22

Goal 2. Advocate for Affordable Housing  23
Goal 3. End Chronic Homelessness 24
Goal 4. Create Non-Congregate Temporary Housing 25
Goal 5. Build Capacity for Data-Driven Decisions 26
Goal 6. Develop a More Diverse and Inclusive Partnership 27
Appendix A: Glossary of Terms 28
Appendix B: Coordinated Entry Intake Workflows 34
   Figure 1: Workflow for Literally Homeless Households 34
   Figure 2: Workflow for Households at Imminent Risk of Homelessness 34
Appendix C: Current Chester County Partnership To End Homelessness Service Providers 35
Appendix D: Chester County Partnership To End Homelessness Equity Policy 36
Appendix E: Chester County Partnership To End Homelessness Continuum of Care Governance Board Charter 37
Appendix F: Chester County Partnership To End Homelessness HMIS Charter 41
I. Acknowledgements

The Chester County Partnership To End Homelessness Operational Plan 2021 - 2022 would not have been possible without the contributions of countless stakeholders who have dedicated their time, resources, expertise, and passion to make homelessness rare, brief, and non-recurring for all Chester County residents, especially our frontline service providers who work ceaselessly and tirelessly with families and individuals experiencing a housing crisis or the trauma of homelessness. The Governance Board and Department of Community Development were ultimately responsible for converting community input into a formal written plan.

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Chester County Partnership To End Homelessness Service Providers
Act in Faith
Chester County Department of Community Development
Community, Youth and Women’s Alliance
Chester County Partnership To End Homelessness
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Domestic Violence Center of Chester County
Friends Association for the Care and Protection of Children
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Handi-Crafters, Inc.
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Kennett Area Community Services
North Star of Chester County
Oxford Area Neighborhood Services Center
Open Hearth, Inc.
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Safe Harbor of Chester County
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II. Executive Summary

About the Partnership and the Continuum of Care for Homeless Services
The Chester County Partnership to End Homelessness is committed to ending and preventing homelessness in Chester County, Pennsylvania. The Partnership is open to and inclusive of community-based, nonprofit, private, and public organizations, as well as people with lived experience of homelessness and concerned citizens. An elected Continuum of Care (CoC) Governance Board ensures the Partnership is aligned with the U.S. Department of Housing and Urban Development’s policy and funding requirements. The Partnership provides guidance, advocacy, and community resources to support Chester County’s homeless crisis response system, which is led by the Chester County Department of Community Development and powered by a network of nonprofit service providers that provide a continuum of care to help all families and individuals exit from homelessness to permanent housing with stability.

Mission Statement
The mission of the Chester County Partnership To End Homelessness is to ensure that homelessness is a rare, brief, and one-time only experience for all residents of Chester County, Pennsylvania.

Vision Statement
The Chester County Partnership To End Homelessness envisions a community in which all residents have fair, equal, and equitable access to permanent housing opportunities and services to improve their health, quality of life, and financial stability.

Guiding Principles
- Housing is a human right.
- Where you live directly affects your health and wellbeing.
- People experiencing homelessness must first have a decent, safe, and affordable place to live, even temporarily, in order to successfully address their health, family, financial, or legal barriers to permanent housing stability.
- Inclusion, diversity, equity, and accessibility are essential to achieving housing justice.
- Services should be provided through a trauma-informed approach to care that is rooted in an understanding of the impact of trauma and the specific needs of trauma survivors.
Chester County Partnership To End Homelessness
Operational Plan 2021 - 2022

- Families and individuals should have equal access to safe and affordable rental housing regardless of their source of income.
- Collaboration, cooperation, and communication between service providers, funders, landlords, community partners, policymakers, and people with lived experience of homelessness is the best way to reduce homelessness.
- Data should drive decision making related to policy change, program planning, and resource allocation.

Operational Goals for 2021 - 2022
1. Advance Racial Equity
2. Advocate for Affordable Housing
3. End Chronic Homelessness
4. Create Non-Congregate Temporary Housing
5. Build Capacity for Data-Driven Decisions
6. Develop a More Diverse and Inclusive Partnership
III. Introduction

The Chester County Partnership to End Homelessness Operational Plan 2021 - 2022 (the Plan) is a roadmap to advance the organization’s mission, vision, and short-term goals for the time period of July 1, 2021 through December 31, 2022.

The Plan incorporates system, policy, and practice changes as well as lessons learned in response to the COVID-19 pandemic and its impact on the provision and funding of homeless services. Like communities throughout the United States, the pandemic challenged the traditional structure and functions of Chester County’s Continuum of Care for ending and preventing homelessness. For example, the health and safety of emergency shelter guests necessitated non-congregate temporary housing (i.e., individual/private rooms), especially for seniors, medically frail individuals, and others at high-risk of or diagnosed with COVID-19. Traditional shelters that could not provide safe non-congregate options required the Continuum of Care to house countless individuals in local hotels and motels. While necessary, this solution was neither financially sustainable nor ideal for case management.

In addition, the pandemic resulted in working families and individuals who had never experienced housing instability before unexpectedly at risk of homelessness due to a sudden job loss or medical crisis. While federal eviction moratoriums alleviated the possibility of a major wave of evictions due to non-payment of rent, the Chester County Continuum of Care also became responsible for the distribution of a significant amount of rental assistance funds, requiring new partnerships with community-based organizations throughout the county to roll out quickly.

Despite the economic uncertainty and disruption triggered by the pandemic, Chester County’s housing market continued to thrive, resulting in higher rents and, simultaneously, a scarcity of available units for renters. Renters exiting from homelessness, often provided with a housing subsidy, continued to face pre-pandemic problems securing a lease due to stigma, bias, or discrimination. As a direct result, landlord engagement and housing affordability emerged as even more critical issues to be addressed by the Partnership and the Continuum of Care.

Finally, the pandemic magnified other systemic issues related to the root causes and ongoing challenges facing people experiencing homelessness and the funders, service
providers, community partners, and advocates committed to helping them regain permanent housing with stability and dignity. These issues include, but are not limited to:

- Poverty, trauma, violence, discrimination, mental illness, and substance use as root causes of homelessness.
- Fair and equal access to services and equitable housing opportunities for all residents, regardless of race, ethnicity, gender, sexual orientation, religion, immigration status, criminal background, and ability, among others.
- Including people with the lived experience of homelessness in all levels of leadership and decision making.
- Coordination with other systems of care, including child welfare, criminal justice, employment and job training, food security, health (physical, mental, and behavioral), and transportation, among others.
- Housing affordability and availability.
- Mobilizing and engaging policymakers, philanthropic institutions, and the public to support the Partnership and Continuum of Care’s work to end and prevent homelessness for all residents of Chester County, Pennsylvania.

The Plan that follows will set the Partnership on an ambitious path to ensure that homelessness is a rare, brief, and one-time only experience for all Chester County residents.

In late 2022, the Partnership will create and implement a new strategic plan for 2023 - 2028 that will build on the priorities in this 18-month operational plan while establishing long-term goals for the future.

For a glossary of important terms, please refer to Appendix A.
IV. Homelessness In Chester County

Annual Homeless Point In Time Count

On the single night of January 21, 2021, there were 227 households in Chester County experiencing homelessness and temporarily residing in some form of emergency shelter. One hundred and four (104) of these households were residing in a Veterans Affairs shelter program - of whom some but not all are Chester County residents. This data was collected by the Chester County Department of Community Development (DCD) and CoC partners as part of HUD's national Point-in-Time Count (PIT) to better understand homelessness in Chester County and across the nation. In previous years, a count of unsheltered households living on the street or another place not intended for habitation was also conducted, but this process was suspended in 2021 due to the COVID-19 pandemic for safety reasons.

Chester County 2021 PIT Analysis (227 Households Total)

<table>
<thead>
<tr>
<th>Category</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Single Individuals</td>
<td>192 persons, 185 households</td>
</tr>
<tr>
<td>Total Families with Children Under 18</td>
<td>135 persons, 42 households</td>
</tr>
<tr>
<td>Persons with Serious Mental Illness</td>
<td>36 adults</td>
</tr>
<tr>
<td>Persons with Chronic Substance Use</td>
<td>13 adults</td>
</tr>
<tr>
<td>Persons with HIV/AIDS</td>
<td>0</td>
</tr>
<tr>
<td>Unduplicated persons with disabilities (including those in three rows above plus all others)</td>
<td>116</td>
</tr>
<tr>
<td>Parenting Youth Under 18</td>
<td>0</td>
</tr>
<tr>
<td>Parenting Youth 18 - 24</td>
<td>7 households, 16 persons</td>
</tr>
<tr>
<td>Chronic Families</td>
<td>0</td>
</tr>
<tr>
<td>Chronic Individuals</td>
<td>17</td>
</tr>
<tr>
<td>Victims of Domestic Violence</td>
<td>7 adults</td>
</tr>
</tbody>
</table>

Homelessness In Chester County Between January 1, 2021 - June 30, 2021

The PIT Count only tells part of the story of homelessness in Chester County. According to Chester County Homeless Management Information System (HMIS) data collected by
the Partnership’s Coordinated Entry System (CES), which includes a 24/7 toll-free Call Center operated by 211 and a dedicated Street Outreach team staffed by the Department of Community Development, between January 1, 2021 - June 30, 2021:

- 1,467 residents called 211 for help with rental assistance/homelessness prevention.
- 837 residents experiencing literal homelessness called 211 (532 unique households total)
- 255 households were verified as literally homeless according to the HUD Category 1 definition (see Appendix A) by Street Outreach.
- 241 unique Veteran households (271 unique persons), including non-residents, experienced homelessness and resided in the Veterans Affairs Hospital in Coatesville (some of whom exit into homelessness in Chester County and are then included in annual PIT and HMIS data).

Disparities in Homelessness Based on Race and Ethnicity
In 2019, DCD conducted a Racial Disparities Assessment by analyzing U.S. Census Bureau American Community Survey and Chester County Homeless Management Information System (HMIS) data using HUD’s CoC Racial Analysis Tool. The assessment identified significant disparities in homelessness based on race. Specifically, Black households experienced homelessness at a greater rate than that of any other group. Black households also experienced homelessness at a disproportionate rate compared to the rate they experience poverty.

The assessment found that White individuals are underrepresented among those experiencing homelessness (-31%), while Black individuals are overrepresented (+38%). The key issue here is the extreme rate of disproportionality compared to those experiencing poverty. White individuals make up 86% of the population, but only 75% of those experiencing poverty and 55% of those experiencing homelessness. Conversely, Black individuals only make up 6% of the county’s population but 16% of those experiencing poverty and 44% of those experiencing homelessness.

In Chester County, those of Hispanic or Latino origin only represent 9% of those experiencing homelessness, while making up 7% of the population and 19% of those experiencing poverty. The CoC believes that this is largely due to this population’s reluctance to accept assistance from mainstream homeless providers or a fear of being recorded in a government database, such as HMIS. The CoC is making efforts to collaborate with organizations, particularly in the southern end of the county where there
is a greater concentration of Hispanic and Latino individuals, to better serve persons from this group.

While disparities existed in those experiencing homelessness, this did not seem to have a negative impact on outcomes for households of color who had slightly better rates of positive exit destinations than that of the overall. While significant disparities were not present in the outcomes of homeless services, there were disparities in the placement of households into housing programs. Black households were underrepresented in Permanent Supportive Housing (PSH) placement at a disproportionate rate to sheltered homelessness. The Operations Plan has a significant goal to eliminate disparities based on race.

### Major Elements of the Continuum of Care’s Homeless Crisis Response System

Chester County’s Coordinated Entry System (CES) ensures equitable access to housing and supportive services for people experiencing or at imminent risk of homelessness.

#### How The System Works

The core components of Coordinated Entry include access, assessment, prioritization, and connection to housing and services as follows. See Appendices B and C for detailed flow charts explaining the process in more detail and a list of all current Partnership providers.
## Access

Residents may access the system by calling 211 toll-free 24/7 OR Through our mobile Street Outreach Team

## Assessment

Residents are assessed by Call Center and Street Outreach staff for three purposes:

1. To confirm they are safe or help them make a plan to become safe.
2. To understand their current housing crisis.
3. To identify the possible causes of their housing crisis and their unique strengths and resources to help resolve it.

## Prioritization

Currently, there are not enough housing resources to end homelessness for all Chester County residents.

Coordinated Entry does not provide financial assistance nor housing units.

Coordinated Entry does prioritize households for housing assistance to ensure equitable access to limited resources.

## Connection

Coordinated Entry connects residents experiencing or at imminent risk of homelessness to appropriate housing resources as they become available.

Households are connected to these resources based on a combination of:

1. The results of their assessment.
2. Prioritization standards established by the Partnership.
3. Availability.

### Housing Resources in Chester County

Coordinated Entry can connect residents to any combination of the following housing resources when needed and available:

1. Homeless Prevention services including rental assistance and supportive services like food, employment and job training, legal aid, public benefits access, and mediation services to help residents continue to stay with family or friends.
2. Temporary Housing services for people that are living on the street or other places not intended for human habitation. These services include emergency shelter and transitional/bridge housing.

3. Rehousing services to help people experiencing homelessness to find, move into, and maintain permanent housing with a lease in their name. These services include housing location, time-limited rent subsidies (6 - 12 months on average), and light case management support to help households achieve their goals for health and economic self-sufficiency.

4. Supportive housing services that provide long-term rent subsidies and/or wraparound services (if appropriate and available) for people with disabilities and/or have significant barriers to permanent housing stability. These services include permanent supportive housing and housing choice vouchers.

Given the limited housing resources in our community, Coordinated Entry connects residents to the minimum level of services necessary to end or prevent their experience of homelessness. This approach, called progressive engagement, preserves more intensive and costly services for the people who need them most.

Prioritization Standards for Housing Resources

The Chester County Partnership to End Homelessness has established the following standards to prioritize equitable access to limited housing resources for the most vulnerable members of our community as follows.

Housing Choice Vouchers (Homelessness Preference only):
   1. Households experiencing literal homelessness with zero or limited income and no ability to increase it.
   2. People with a serious medical condition or terminal illness.

Permanent Supportive Housing:
   1. People with disabilities who meet the federal HUD definition of chronically homeless.
   2. People with disabilities experiencing homelessness with a criminal background and/or have been terminated by a housing subsidy program.
   3. Other people with disabilities, a serious medical condition, or terminal illness experiencing homelessness.
   4. People who previously met the definition of chronic homelessness and are enrolled in Rapid Re-Housing but at risk of returning to homelessness.
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Operational Plan 2021 - 2022

Temporary Housing and Rapid Re-Housing:
1. Unsheltered households that meet the HUD definition of chronically homeless.
2. Other unsheltered households by length of time unsheltered.
3. Households fleeing domestic violence or human trafficking.
4. Families with one or more children under the age of 18.
5. Other households by length of time homeless.

Homeless Prevention:
1. History of eviction.
2. Fleeing domestic violence or human trafficking.
3. Criminal record.
4. Chronic medical condition.
6. Termination from a housing subsidy program (e.g., Housing Choice Voucher).
7. All other residents who will lose their housing in 21 days or less.

Non-Prioritized Housing Resources
Coordinated Entry connects eligible households with other community housing resources but does not prioritize these referrals, including: U.S. Treasury Emergency Rental Assistance Program, Mainstream Housing Choice Vouchers, Public Housing, Family Unification Vouchers, Supportive Services for Veteran Families (SSVF), and Veterans Affairs Supportive Housing Vouchers, and others.

Prioritization Tools
Coordinated Entry utilizes the following tools to connect people experiencing or at imminent risk of homelessness to housing resources in Chester County.

1. Equity Lens: To the greatest extent made possible by federal law and funding source requirements, Coordinated Entry strives to eliminate racial and ethnic disparities and over-representation in the homeless crisis response system.
2. VI-SPDAT Screening Tool: The VI-SPDAT stands for Vulnerability Index – Service Prioritization Decision Assistance Tool. The VI-SPDAT is a national best practice screening tool to help make objective decisions about who to prioritize for housing resources based on their need and vulnerability to the negative impacts of homelessness on their health and well-being.
3. Chester County HMIS: HMIS stands for Homeless Information Management System. This secure data system is used by continuum of care service providers to
enroll, manage, and exit people from the homeless crisis response system efficiently and effectively. The system maintains a By Name List (BNL) of everyone who has been prioritized for each major housing resource to ensure they are connected to services as quickly as possible based on their priority and the availability of resources.

4. **Case Conferencing:** Case Conferencing brings together the homeless crisis response system providers with other health and human service providers for weekly meetings to ensure the highest priority households on the By Name List are being enrolled into housing and supportive services as quickly as possible. Case Conferencing also allows for the discussion of the unique needs of each household and creative problem-solving to ensure these needs are met. In order to maintain confidentiality, all associated staff participating in Case Conferencing are required to complete and sign a Data Sharing Agreement. Staff that have not signed a Data Sharing Agreement are not eligible to participate in case conferencing until the form is signed and dated.

**Chester County Continuum of Care for Homeless Services: Key Metrics**

Using Chester County HMIS data, key metrics of Chester County CoC service enrollments and outcomes including the following for the time period of January 1, 2021 - June 30, 2021.

<table>
<thead>
<tr>
<th>Metric</th>
<th>Data</th>
</tr>
</thead>
<tbody>
<tr>
<td>Families with children under 18 enrolled in Coordinated Entry</td>
<td>64</td>
</tr>
<tr>
<td>Families with children under 18 enrolled in Emergency Shelter</td>
<td>43</td>
</tr>
<tr>
<td>Families with children under 18 enrolled in Transitional Housing</td>
<td>0</td>
</tr>
<tr>
<td>Families with children under 18 enrolled in Rapid Re-Housing</td>
<td>64</td>
</tr>
<tr>
<td>Families with children under 18 enrolled in Permanent Supportive Housing</td>
<td>19</td>
</tr>
<tr>
<td>Families with children under 18 who received a Housing Choice Voucher (Homeless Preference)</td>
<td>8</td>
</tr>
<tr>
<td>Households with adults only enrolled in Coordinated Entry</td>
<td>138</td>
</tr>
<tr>
<td>Households with adults only enrolled in Emergency Shelter</td>
<td>103</td>
</tr>
<tr>
<td>Households with adults only enrolled in Transitional Housing</td>
<td>221</td>
</tr>
</tbody>
</table>
Households with adults only enrolled in Rapid Re-Housing 20
Households with adults only enrolled in Permanent Supportive Housing 206
Households with adults only who received a Housing Choice Voucher (Homeless Preference) 31
Percent and number of all households exiting from homelessness to a permanent housing destination (the remainder exited to destinations still considered homeless by HUD definition or lost touch with the system) 42% (61)
Households receiving homeless prevention rental assistance 117

The demographic characteristics of literally homeless Heads of Households enrolled in Coordinated Entry during the time period of January 1, 2021 - June 30, 2021 are as follows.

<table>
<thead>
<tr>
<th>Demographic Characteristic</th>
<th>Data</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Race</strong></td>
<td></td>
</tr>
<tr>
<td>American Indian or Alaska Native</td>
<td>1</td>
</tr>
<tr>
<td>Asian</td>
<td>1</td>
</tr>
<tr>
<td>Black or African American</td>
<td>99</td>
</tr>
<tr>
<td>Multiple races</td>
<td>10</td>
</tr>
<tr>
<td>Native Hawaiian or Other Pacific Islander</td>
<td>1</td>
</tr>
<tr>
<td>White</td>
<td>138</td>
</tr>
<tr>
<td>Client Refused</td>
<td>7</td>
</tr>
<tr>
<td><strong>Ethnicity</strong></td>
<td></td>
</tr>
<tr>
<td>Hispanic/Latino</td>
<td>28</td>
</tr>
<tr>
<td>Non-Hispanic/Latino</td>
<td>228</td>
</tr>
<tr>
<td>Client Refused</td>
<td>1</td>
</tr>
<tr>
<td><strong>Gender</strong></td>
<td></td>
</tr>
<tr>
<td>-----------</td>
<td>------</td>
</tr>
<tr>
<td>Female</td>
<td>131</td>
</tr>
<tr>
<td>Male</td>
<td>126</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>Age</strong></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Aged 18 - 24</td>
<td>24</td>
</tr>
<tr>
<td>Aged 60 or older</td>
<td>69</td>
</tr>
</tbody>
</table>
V. Planning Process Methodology

In early 2020, The Chester County Partnership To End Homelessness (then doing business as Chester County Decade to Doorways), retained Capacity for Change, LLC to facilitate the creation of a long-term strategic plan for the future of the partnership and the County’s Continuum of Care (CoC) for ending and preventing homelessness, a network of nonprofit service providers funded by the Chester County Department of Community Development (DCD), which also serves as the CoC’s Collaborative Applicant for funding from the United States Department of Housing and Urban Development (HUD) as well as being the lead agency managing the HUD-required Chester County Homeless Management Information System (HMIS), which is used to securely manage client and provider data and information.

While the Partnership already included a diverse group of stakeholders representing housing and homeless service providers (including domestic violence and veteran service providers), public and philanthropic funders, other county departments, local law enforcement, faith-based organizations, and other community partners, the Partnership’s Governance Board (which also has responsibility for overseeing the HUD-funded CoC in partnership with DCD and, ultimately, the Chester County Board of Commissioners), its leadership also recognized the need to expand and enhance the Partnership to incorporate more people with lived expertise, as well as more representatives from organizations led by and serving people of color, people who identify as LGBTQIA, leaders from other systems of care, and people representing every major geographic region of Chester County.

Before the planning process had barely begun, the COVID-19 pandemic consumed the time and energy of the Partnership’s Governance Board, CoC service providers, and DCD staff. As the pandemic wore on, the Governance Board realized that this was not the right time to set long-term future goals. Instead, the Board refocused the project on an 18-month roadmap to recovery, culminating in this operational plan.

The planning project methodology included:

- Key informant interviews with Partnership and CoC leaders and members, including people with the lived experience of homelessness.
Chester County Partnership To End Homelessness
Operational Plan 2021 - 2022

- Planning sessions with the Governance Board and its major committees and workgroups.
- An audit of the Chester County Homeless Management Information System (HMIS).
- A review of the CoC’s Coordinated Entry System (CES) for intake, assessment, and referral to housing and homeless services.
- A review of the CoC’s policies and procedures for service providers.
- An external scan of housing and homelessness policy, funding, and practice trends, including new federal and state initiatives to address the impact of the pandemic on efforts to end and prevent homelessness.

The final draft plan was presented to a newly established lived expertise advisory board composed of Chester County residents who have experienced homelessness, and who are contracted by DCD as paid consultants, before being presented to the Governance Board for final approval.

VI. Decade to Doorways: A Legacy of Achievement 2013 - 2020

The D2D Partnership became operational in 2013 to oversee implementation of the goals of the plan and to lead coordination of efforts to prevent and end homelessness in Chester County. The D2D Partnership continues to move forward in its goal to make homelessness rare, brief, and non-recurring, while complying with best practices and federal guidelines. Recent strategic planning efforts have identified the need for written, uniform Coordinated Entry System policies and procedures, including Call Center and Street Outreach services, for the D2D homeless crisis response system.

The Chester County Department of Community Development (DCD) is designated as the Continuum of Care lead agency and serves as administrative staff for the D2D Partnership. The D2D Operational Plan outlines a systems change approach, aligning all sectors of the community in a coordinated response to prevent and end homelessness in Chester County by shifting from a system that manages homelessness to a system that diverts, prevents, and rapidly re-houses, with recognition that housing is a human need and a right. Prior to D2D’s inception in 2010, the annual Point in Time (PIT) count of people experiencing homelessness was 745. In 2019, this number was 517, representing a 30% decrease in people experiencing homelessness in the county.
VII. Lessons Learned During the Pandemic

The Partnership and the CoC quickly learned that “business as usual” would not be sufficient to stem the rising tide of homelessness and housing instability in Chester County amidst an unprecedented health and economic crisis. In response, the following system changes were implemented to respond to these challenges.

- People with the lived expertise of homelessness have unique and valuable insights and ideas about policies and programs designed to end homelessness.
- A centralized Coordinated Entry System for all homeless services that provides a seamless combination of a 24/7 toll-free telephone intake and referral, mobile street outreach, and HMIS client data input is more efficient and effective. [Reference to new DCD SO Team to improve verification and data accuracy]
- Non-congregate temporary housing units (e.g., Hotels, Motels, Single Room Occupancies/SROs, etc.) are often safer for people experiencing literal homelessness than “barracks style” congregate shelter and more effective in exiting many households directly to permanent housing with appropriate subsidies and supportive services, particularly for individuals with significant physical, mental health, and/or substance use issues who have historically been resistant to or banned from staying in emergency shelter housing.
- A combination of both rental assistance and court-based eviction prevention programs are essential to keeping many families and individuals who are “one paycheck away” from losing their housing and becoming homeless.
- Landlords and property managers that lease to households with Housing Choice Vouchers or other HUD subsidies have a wider pool of applicants to choose from who are able to pay their rent consistently and on-time.

These lessons are incorporated into the Operational Plan goals, objectives, and major actions detailed below.
VIII. Goal 1. Advance Racial Equity

The Partnership will advance racial equity in its leadership structure, membership, and policies as well as pursue housing justice by striving to eliminate disparities in system access and outcomes based on racial and ethnic identity. (See Appendix D to read the Partnership’s Equity Policy.)

**Objective 1:** Engage people with lived expertise, including all racial and ethnic subpopulations experiencing homelessness in Chester County, in Partnership governance, planning, and decision-making.

**Objective 2:** Establish a Racial Equity Advisory Team to review and recommend policy changes, new programs, and partnership opportunities that may advance racial equity and housing justice in Chester County.

**Objective 3:** Collect and disaggregate major Partnership data sources, including Chester County HMIS data, to identify and reduce disparities based on race and ethnicity.
IX. Goal 2. Advocate for Affordable Housing

The Partnership will advocate for the creation of more safe and affordable housing opportunities to meet the needs of families and individuals exiting from homelessness to permanent housing using a short or long-term housing subsidy.

**Objective 1:** Increase the number of landlords and property managers in Chester County who are willing to lease to households exiting from homelessness through a housing subsidy.

**Objective 2:** Identify and encourage a variety of strategies to increase the supply of safe and affordable rental housing throughout Chester County (e.g., shared housing programs, municipal zoning reforms, conversion of buildings to Single Room Occupancy units, etc.).

**Objective 3:** Join and support more national, regional, and local affordable housing advocacy coalitions.

**Objective 4:** Implement a new case management approach for homelessness prevention, including rental assistance, eviction prevention, and diversion from emergency shelter and housing.
X. Goal 3. End Chronic Homelessness

The Partnership will achieve a “functional zero” for chronic homelessness, meaning that households who meet the HUD definition of chronic homelessness (see Appendix A) will be housed within 30 days of enrollment into Street Outreach at all times.

**Objective 1:** Continue working with Built For Zero to finalize a set of policies and procedures to achieve and maintain a functional zero for chronic homelessness that may then be replicated with other subpopulations experiencing homelessness in the future.

**Objective 2:** Explore opportunities to increase the supply of Permanent Supportive Housing funded by the CoC and/or provide more supportive services to people with significant barriers to housing stability who have Housing Choice Vouchers, live in public housing, or are enrolled in Rapid Re-Housing.

**Objective 3:** Provide day services in centralized locations throughout Chester County for sheltered and unsheltered residents who need protection from extreme weather and access to clothing, food, Internet access, mailing addresses, and information about employment opportunities and public benefits.
XI. Goal 4. Create Non-Congregate Temporary Housing

The Partnership will create a non-congregate temporary housing program for unsheltered single adults experiencing literal homelessness with appropriate physical and behavioral health supports as well as transportation to and from community services.

**Objective 1:** Assist the service provider selected by DCD to operate the non-congregate housing program in building strong partnerships with other CoC-funded service providers and community partner organizations.

**Objective 2:** Establish a regional philanthropic funders collaborative to co-fund the ongoing operations of the non-congregate housing program in partnership with the Chester County Departments of Community Development and Human Services.

**Objective 3:** Encourage other emergency shelter providers in Chester County to convert their shelter programs from a congregate to a non-congregate model.
XII. Goal 5. Build Capacity for Data-Driven Decisions

The Partnership will build capacity for making data-driven planning, policy, and resource allocation decisions.

**Objective 1:** Migrate Chester County’s HMIS to EccoVia’s ClientTrack software system.

**Objective 2:** Establish new Written Standards for all programs and services to better guide, support, and monitor performance of service providers participating in the Continuum of Care for homeless services.

**Objective 3:** Conduct an evaluation of the Coordinated Entry System to ensure it is meeting the needs of all households experiencing homelessness and CoC service providers.
XIII. Goal 6. Develop a More Diverse and Inclusive Partnership

The Partnership will develop a more diverse and inclusive partnership that engages and amplifies the voices of people with the lived experience of homelessness in addition to expanding its membership to include all public, private, and community-based organizations that are committed to its mission.

**Objective 1:** Establish an Advisory Council composed of multi-sector leaders that meets twice a year to identify and recommend policy changes in other public systems of care that could reduce the number of residents at risk for homelessness and help residents experiencing homelessness exit to permanent housing more quickly and effectively.

**Objective 2:** Implement changes to the roles, responsibilities, composition, and election of the Partnership’s Continuum of Care Governance Board as detailed in its newly revised Charter (see Appendix E).

**Objective 3:** Launch a communications, marketing, and community outreach campaign to raise awareness and recruit new members for the newly renamed Chester County Partnership To End Homelessness.
Appendix A: Glossary of Terms

At Risk of Homelessness | At risk of homelessness means:

(1) An individual or family who:
   (i) Has an annual income below 30 percent of median family income for the area, as determined by HUD;
   (ii) Does not have sufficient resources or support networks, e.g., family, friends, faith-based or other social networks, immediately available to prevent them from moving to an emergency shelter or another place described in paragraph (1) of the “homeless” definition in this section; and
   (iii) Meets one of the following conditions:
      (A) Has moved because of economic reasons two or more times during the 60 days immediately preceding the application for homelessness prevention assistance;
      (B) Is living in the home of another because of economic hardship;
      (C) Has been notified in writing that their right to occupy their current housing or living situation will be terminated within 21 days after the date of application for assistance;
      (D) Lives in a hotel or motel and the cost of the hotel or motel stay is not paid by charitable organizations or by Federal, State, or local government programs for low-income individuals;
      (E) Lives in a single-room occupancy or efficiency apartment unit in which there reside more than two persons or lives in a larger housing unit in which there reside more than 1.5 persons reside per room, as defined by the U.S. Census Bureau;
      (F) Is exiting a publicly funded institution, or system of care (such as a health-care facility, a mental health facility, foster care or other youth facility, or correction program or institution); or
      (G) 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;

(2) A child or youth who does not qualify as “homeless” under this section, but qualifies as “homeless” under section 387(3) of the Runaway and Homeless Youth Act (42 U.S.C. 5732a(3)), section 637(11) of the Head Start Act (42 U.S.C. 9832(11)), section 41403(6) of the Violence Against Women Act of 1994 (42 U.S.C. 14043e-2(6)), section 330(h)(5)(A) of the Public Health Service Act (42 U.S.C. 254b(h)(5)(A)), section 3(m) of the Food and Nutrition Act of 2008 (7 U.S.C. 2012(m)), or section 17(b)(15) of the Child Nutrition Act of 1966 (42 U.S.C. 1786(b)(15)); or
(3) A child or youth who does not qualify as “homeless” under this section, but qualifies as “homeless” under section 725(2) of the McKinney-Vento Homeless Assistance Act (42 U.S.C. 11434a(2)), and the parent(s) or guardian(s) of that child or youth if living with her or him.

**Chronically Homeless** | To qualify as 'chronically homeless' an individual must be currently homeless and living in a place not meant for human habitation, a safe haven or an emergency shelter, must have been homeless and residing in such a place continuously for at least one year or on at least 4 separate occasions in the last 3 years, and can be diagnosed with one or more disabling conditions.

**Continuum of Care (CoC)** | A collaborative funding and planning approach that helps communities plan for and provide, as necessary, a full range of emergency, transitional, and permanent housing and other service resources to address the various needs of people experiencing homelessness. HUD also refers to the group of service providers involved in the decision-making processes as the 'Continuum of Care.'

**Coordinated Entry System (CES)** | Provisions in the CoC Program interim rule at 24 CFR 578.7(a)(8) require that CoCs establish a Centralized or Coordinated Assessment System. HUD uses the terms coordinated entry and coordinated entry process instead of centralized or coordinated assessment system to help avoid the implication that CoCs must centralize the assessment process, and to emphasize that the process is easy for people to access, that it identifies and assesses their needs, and makes prioritization decisions based upon needs. However, HUD considers these terms to mean the same thing.

**Emergency Shelter** | Any facility, the primary purpose of which is to provide a temporary shelter for the homeless in general or for specific populations of the homeless and which does not require occupants to sign leases or occupancy agreements.

**Homeless** | Homeless means:

(i) An individual or family who lacks a fixed, regular, and adequate nighttime residence, meaning:

(ii) 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;
(ii) 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
(iii) 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;

(2) An individual or family who will imminently lose their primary nighttime residence, provided that:
(i) The primary nighttime residence will be lost within 14 days of the date of application for homeless assistance;
(ii) No subsequent residence has been identified; and
(iii) The individual or family lacks the resources or support networks, e.g., family, friends, faith-based or other social networks, needed to obtain other permanent housing;

(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:
(ii) Have not had a lease, ownership interest, or occupancy agreement in permanent housing at any time during the 60 days immediately preceding the date of application for homeless assistance;
(iii) Have experienced persistent instability as measured by two moves or more during the 60-day period immediately preceding the date of applying for homeless assistance; and
(iv) Can be expected to continue in such status for an extended period of time because of chronic disabilities, chronic physical health or mental health conditions, substance addiction, histories of domestic violence or childhood abuse (including neglect), the presence of a child or youth with a disability, or two or more barriers to employment, which include the lack of a high school degree or General Education Development (GED), illiteracy, low English proficiency, a history of incarceration or detention for criminal activity, and a history of unstable employment; or
(4) Any individual or family who:

(i) 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;

(ii) Has no other residence; and

(iii) Lacks the resources or support networks, e.g., family, friends, faith-based or other social networks, to obtain other permanent housing.

Homeless Management Information System (HMIS) | An HMIS is a computerized data collection application designed to capture client-level information over time on the characteristics and service needs of men, women, and children experiencing homelessness, while also protecting client confidentiality. It is designed to aggregate client-level data to generate an unduplicated count of clients served within a community's system of homeless services. An HMIS may also cover a statewide or regional area and include several Continuums of Care. The HMIS can provide data on client characteristics and service utilization.

Homelessness Prevention | Housing relocation and stabilization services and short-and/or medium-term rental assistance as necessary to prevent the individual or family from moving to an emergency shelter, a place not meant for human habitation, or another place described in paragraph (1) of the homeless definition.

Housing Choice Voucher Program | This program is the federal government's major program for assisting very low-income families, the elderly, and people with disabilities to afford decent, safe, and quality housing in the private market. It was previously known as "Section 8."

Housing First | This is an approach that centers on providing homeless people with housing quickly and then providing services as needed. What differentiates a Housing First approach from other strategies is that there is an immediate and primary focus on helping individuals and families quickly access and sustain permanent housing.

HUD | The U.S. Department of Housing and Urban Development (HUD) was established in 1965. HUD's mission is to increase homeownership, support community development, and increase access to affordable housing free from discrimination.
Permanent Supportive Housing | Permanent (i.e., not time-limited or transitional) housing with supportive services. Permanent Supportive Housing (PSH) combines lease-based, affordable housing with tenancy supports, and other voluntary services to help individuals with disabilities achieve stable housing and recovery in the community.

Public Housing Agency (PHA) | Any state, county, municipality, or other governmental entity or public body, or agency or instrumentality of these entities that is authorized to engage or assist in the development or operation of low-income housing under the U.S. Housing Act of 1937.

Rapid Re-Housing | Rapid Re-Housing is the practice of focusing resources on helping families and individuals quickly move out of homelessness and into permanent housing, which is usually housing in the private market. Services to support Rapid Re-Housing include housing search and landlord negotiation, short-term financial and rental assistance, and the delivery of home-based housing stabilization services, as needed.

Street Outreach | Essential Services related to reaching out to unsheltered homeless individuals and families, connecting them with emergency shelter, housing, or critical services, and providing them with urgent, non-facility-based care.

Supportive Housing (SH) | Supportive housing is decent, safe, affordable, community-based housing that provides tenants with the rights of tenancy and links to voluntary and flexible supports and services. There are three main types of supportive housing models:

- Single-site: Apartment buildings exclusively or primarily housing individuals and/or families who need supportive housing.
- Scattered-site: Rent subsidized apartments leased in the open market.
- Integrated/Clustered: Apartment buildings with units set aside for people who need supportive housing.

Transitional Housing | Transitional housing (TH) is designed to provide homeless individuals and families with the interim stability and support to successfully move to and maintain permanent housing. Transitional housing may be used to cover the costs of up to 24 months of housing with accompanying supportive services. Program participants
must have a lease (or sublease) or occupancy agreement in place when residing in transitional housing.

Source: https://www.hudexchange.info/
Appendix B: Coordinated Entry Intake Workflows

**Figure 1: Workflow for Literally Homeless Households**

1. **Call**
   - Confirm caller is in housing crisis.

2. **Add or update ROI. Check for current case manager or open enrollment (Entry/Exit) in CE SQ, ES, TH, RRH or PSH.**
   - If caller is a Chester County resident or possible DV, proceed to STEP 4.

3. **Enter caller zip code and click “Apply.”**
   - If caller is not a Chester County resident, connect caller with appropriate CE entity. Proceed to STEP 5. Record a CE Event with “Referred... Indigible” and add a CE Note. Exceptions: those fleeing DV are exempted and should proceed to STEP 4.

4. **Determine safety of caller by asking probing questions to determine if caller is in immediate danger.**
   - If “no” or if caller opts out of DV, proceed to STEP 5.

5. **Determine military status.**
   - If “yes”, proceed to Step 6.

6. **Determine caller’s homeless status by asking where caller slept last night and recording Prior Living Situation and HUD Category of Homelessness.**
   - If caller is category 1 or 4 or at imminent risk and coming from an institutional situation, proceed to STEP 7 and begin process of referral to Coordinated Entry Street Outreach.

7. **Record Current Living Situation and provide location details. Proceed to STEP 8.**
   - If caller is category 2 & eligible for homeless prevention, provide referral. Proceed to STEP 8 and record CE Event as “prevention”.

8. **Record Coordination Entry Event and add a Coordinated Entry Note.**
   - Referral to Outreach - complete Client Profile and Householder tabs and add referral after exiting assessment.

---

**Figure 2: Workflow for Households at Imminent Risk of Homelessness**

1. **Call**
   - Confirm caller is in housing crisis.

2. **Add or update ROI. Check for current case manager or open enrollment (Entry/Exit) in CE SQ, ES, TH, RRH or PSH.**
   - If caller is a Chester County resident or possible DV, proceed to STEP 4.

3. **Enter caller zip code and click “Apply.”**
   - If caller is not a Chester County resident, connect caller with appropriate CE entity. Proceed to STEP 5. Record a CE Event with “Referred... Indigible” and add a CE Note. Exceptions: those fleeing DV are exempted and should proceed to STEP 4.

4. **Determine safety of caller by asking probing questions to determine if caller is in immediate danger.**
   - If “no” or if caller opts out of DV, proceed to STEP 5.

5. **Determine military status.**
   - If “no”, proceed to Step 6.

6. **Determine caller’s homeless status by asking where caller slept last night and recording Prior Living Situation and HUD Category of Homelessness.**
   - If caller is category 2 & eligible for homeless prevention, provide referral. Proceed to STEP 8 and record CE Event as “prevention”.

7. **Record Current Living Situation and provide location details. Proceed to STEP 8.**
   - If caller is category 2 & referring back to 2.1 due to a previous referral that was rejected by a homeless prevention provider. Proceed to STEP 7 and begin process of referral to Coordinated Entry Street Outreach.

8. **Record Coordination Entry Event and add a Coordinated Entry Note.**
   - If caller is living referred to Coordinated Entry Street Outreach, complete Client Profile and Householder tabs and add referral after exiting assessment.
## Chester County Partnership To End Homelessness
### Operational Plan 2021 - 2022

## Appendix C: Current Chester County Partnership To End Homelessness Service Providers

<table>
<thead>
<tr>
<th>Service Provider</th>
<th>Contact Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Act in Faith</td>
<td>(484) 324-8482, <a href="http://www.actinfaithgwc.org">www.actinfaithgwc.org</a></td>
</tr>
<tr>
<td>Chester County Department of Community Development</td>
<td>(610) 344-6900, <a href="http://www.chcco.org/204/Community-Development">www.chcco.org/204/Community-Development</a></td>
</tr>
<tr>
<td>Community, Youth and Women's Alliance</td>
<td>(610) 384-9592, <a href="http://www.facebook.com/people/Cyw-Coatesville/100010953090259">www.facebook.com/people/Cyw-Coatesville/100010953090259</a></td>
</tr>
<tr>
<td>Domestic Violence Center of Chester County</td>
<td>(610) 431-1430, <a href="http://www.dvccpa.org">www.dvccpa.org</a></td>
</tr>
<tr>
<td>Friends Association for the Care and Protection of Children</td>
<td>(610) 431-3568, <a href="http://www.friendsasocioc.org">www.friendsasocioc.org</a></td>
</tr>
<tr>
<td>Good Samaritan Services—Emergency Shelter</td>
<td>(610) 913-9100, <a href="http://www.goodsamservices.org">www.goodsamservices.org</a></td>
</tr>
<tr>
<td>Housing Authority of Chester County</td>
<td>(610) 436-9200, <a href="http://www.fcacnet.org">www.fcacnet.org</a></td>
</tr>
<tr>
<td>Human Services, Inc.</td>
<td>(610) 429-3033, <a href="http://www.hci-cmhs.com">www.hci-cmhs.com</a></td>
</tr>
<tr>
<td>Kennett Area Community Service</td>
<td>(610) 925-3556, <a href="http://www.karcmhs.net">www.karcmhs.net</a></td>
</tr>
<tr>
<td>North Star of Chester County</td>
<td>(610) 466-5675, <a href="http://www.northstarofcc.org">www.northstarofcc.org</a></td>
</tr>
<tr>
<td>Oxford Area Neighborhood Services Center</td>
<td>(610) 932-8557, <a href="http://www.oxfordncsc.org">www.oxfordncsc.org</a></td>
</tr>
<tr>
<td>Open Hearth, Inc.</td>
<td>(610) 762-0282, <a href="http://www.openearthinc.org">www.openearthinc.org</a></td>
</tr>
<tr>
<td>PA Home of the Sparrow</td>
<td>(610) 647-4940, <a href="http://www.homeofthesparrow.org">www.homeofthesparrow.org</a></td>
</tr>
<tr>
<td>Safe Harbor of Chester County</td>
<td>(610) 692-6550, <a href="http://www.safeharborofgwc.org">www.safeharborofgwc.org</a></td>
</tr>
<tr>
<td>United Way of Chester County 211</td>
<td>(610) 692-6550, <a href="http://www.unitedwaychestercounty.org">www.unitedwaychestercounty.org</a></td>
</tr>
<tr>
<td>W.C. Atkinson Community Service Center</td>
<td>(610) 380-6193, <a href="http://www.wcabinson.org">www.wcabinson.org</a></td>
</tr>
</tbody>
</table>
Appendix D: Chester County Partnership To End Homelessness Equity Policy

The Chester County Partnership to End Homelessness (the Partnership) envisions a county in which all residents have equitable access to housing opportunities. We are committed to the fair and equitable provision, implementation, and impact of housing and homeless services, programs, and policies. This includes elimination of practices, attitudes, and cultural messages that reinforce disparate treatment by race, color, ethnicity, national origin, religion, ability, sex, gender, familial status, and age.

In Chester County and throughout the United States, a disproportionate number of people experiencing poverty and homelessness are people and families of color. We recognize that systemic racism exists in large part due to historical, perpetuated biases that create disparities and inequities within our community. The Partnership is further committed to identifying and eliminating disparities in access, outcomes, and participation in all levels of our leadership and structure for people of color.

The Partnership is further committed to affirmatively furthering fair housing by taking meaningful actions, in addition to combating discrimination, that overcome patterns of segregation and foster inclusive communities free from barriers that restrict access to opportunity based on protected characteristics, which are:

- Race
- Color
- National origin
- Religion
- Sex (including sexual orientation and gender identity)
- Familial status
- Disability

**Adopted by the Partnership Continuum of Care Governance Board:** March 25, 2021
The Chester County Continuum of Care (CoC), officially known as the Chester County Partnership to End Homelessness (the Partnership), shall be governed by a diverse and inclusive Board of Directors responsible for providing oversight and accountability for all CoC activities.

Article 2. CoC Governance Board Responsibilities

The major responsibilities of the CoC Governance Board include:

- Being a champion and advocate for making the experience of homelessness rare, brief, and one-time only for all Chester County residents.
- Advancing equitable access and outcomes to housing and homeless services for all Chester County residents.
- Providing the Chester County Department of Community Development with guidance and support to fulfill its roles as both the United States Department of Housing and Urban Development (HUD) Continuum of Care Grant Collaborative Applicant and Homeless Management Information System (HMIS) Lead Agency in accordance with the Code of Federal Regulations 24 CFR § 578 (also known as the CoC Program Interim Rule), or as otherwise articulated by HUD.
- Creating, managing, and recruiting a diverse set of volunteers, including people with professional or lived expertise, to serve on short-term Action Teams and...
ongoing Advisory Teams to help develop better policies, partnerships, and information to achieve the Partnership’s mission and strategic goals.

- Conducting authentic outreach and community engagement to raise public awareness of homelessness and to ensure that diverse and inclusive voices and perspectives are represented in the Partnership’s leadership structure and activities.

**Article 3. CoC Governance Board Composition**

The CoC Governance Board has an odd number of members no fewer than 17 and no more than 23. The Board should reflect the demographic and geographic diversity of people experiencing homelessness in Chester County. The Board should include but is not limited to the following members:

- At least one member designated by the Chester County Board of Commissioners to serve as their representative.
- A representative from the Chester County Department of Community Development.
- A representative from the Chester County Department of Human Services.
- A representative from the Chester County Housing Authority.
- At least one member with the lived experience of homelessness.
- At least one service provider that is a HUD CoC Grant recipient.
- At least one service provider that is a HUD Emergency Solutions Grant (ESG) recipient.
- At least one representative from the philanthropic sector.
- At least one representative from the private sector, preferably a property manager or landlord.
- At least one representative from the faith community.
- At least one representative from the criminal justice system.
- At least one victims service provider.
- At least one veterans service provider.
- At least one youth serving organization.
- At least four at-large members representing other perspectives, preferably to include child welfare, health care, education, municipal government, public transportation, and/or workforce development.

**Article 4. CoC Governance Board Member Duties**

Members of the CoC Governance Board are expected to:
Participate in all Governance Board meetings unless excused.
Serve on at least one Action or Advisory Team.
Be actively involved in helping to increase the Partnership’s membership, influence, networks, and resources as best as possible.
Disclose any known Conflicts of Interest.

Article 5. CoC Governance Board Member Term Limits

With the exception of the designated representative from the Chester County Board of Commissioners and the representatives from the Department of Community Development, Department of Human Services, and the Chester County Housing Authority, all Board members will each serve three-year staggered terms of office and cannot serve more than two consecutive terms without a one year break after the second. A director who serves more than half a term shall be considered to have served one term.

The designated representative from the Chester County Board of Commissioners and the representatives from the Department of Community Development, Department of Human Services, and the Chester County Housing Authority serve at the discretion of their respective organizational leadership and may serve a brief, standard, or longer term on the Board.

Article 6. Nomination and Election of New Board Members

Each year, the CoC Governance Board oversees the nomination of new board members to fill open positions. Nominations will be solicited from all CoC individual and organizational members. The Board will create a slate of nominees who best represent a diversity of backgrounds, experiences, and current gaps in the board’s areas of expertise. The slate of nominees' biographical information will be presented to the full CoC for consideration. Approval of the slate will be made by majority vote of the CoC Governance Board and membership through a majority vote at an online or in-person general membership meeting.

Article 7. Resignation or Removal from the CoC Governance Board

A Board member may resign at any time by submitting a written notice to the Board Chair. In addition, members may be removed by a majority vote of the Board for repeated absence, misconduct, or violation of the Board's Conflict of Interest policy.
Article 8. Vacancies on the CoC Governance Board

When a Board member resigns, is removed from office, or cannot serve their full term for any reason, the Board will accept nominations from CoC members and other community members that represent the same group of stakeholders. The Board may select and appoint this nominee through a majority vote.

Article 9. CoC Governance Board Officers

The Governance Board officers include a Chair and Vice Chair. Officers will be elected by a majority vote of the Board to serve a one-year term of office with the option of being reelected for a second year. A Board member may not hold more than one officer position at any given time, but may hold more than one different position during their tenure on the Board.

At any given time, the Chair and Vice Chair must represent two different stakeholder groups, and distinct groups of stakeholders who have not previously or recently been represented as officers should be selected to ensure a diversity of leadership.

The Chair is responsible for:

- Setting Board meeting agendas with staff from the Chester County Department of Community Development.
- Chairing all meetings of the Board.
- Speaking on behalf of the Partnership upon request of the Chester County Board of Commissioners, the Department of Community Development, or the Governing Board itself.
- Accepting the resignation of Board members.

In the absence of the Chair, the Vice Chair assumes the duties of the Chair.

Should either the Chair or Vice Chair resign during their term, the Board may hold a special election to select a new officer to fill the rest of that term by a majority vote. An officer appointed by vacancy who serves more than half of the officer’s term shall be considered to have served one term.
Appendix F: Chester County Partnership To End Homelessness HMIS Charter

The Chester County Continuum of Care (PA-505) exists to make homelessness rare, brief, and a one-time only experience for all residents of Chester County, Pennsylvania.

The public-facing name of the Continuum of Care (CoC) is the Chester County Partnership to End Homelessness. CoC membership is open to and inclusive of community-based, nonprofit, private, and public organizations, including all HUD-funded service providers, as well as people with the lived experience of homelessness and concerned citizens. The Partnership provides guidance, advocacy, and community resources to support Chester County’s homeless crisis response system, which is led by the Chester County Department of Community Development as the HUD CoC Grant collaborative applicant and powered by a network of nonprofit service providers that provide a continuum of care to help all families and individuals exit from homelessness to permanent housing with stability.

1. Purpose

The Chester County Continuum of Care (CoC) employs a Homeless Management Information System (HMIS) to collect and store unduplicated client-level data on persons experiencing or at imminent risk of homelessness and utilizing publicly-funded shelter, housing assistance, and supportive services. This Governance Charter details the Chester County HMIS Lead and User responsibilities, policies, procedures, and other relevant information as required by the U.S. Department of Housing and Urban Development (HUD).

Major objectives of Chester County HMIS include:

A. Maintaining compliance with Federal regulations for data collection as required by the U.S. Department of Housing and Urban Development (HUD), the U.S. Department of Health and Human Services (HHS), and the U.S. Department of Veterans Affairs (VA) within the released documents of the 2014 HMIS Data Dictionary and 2014 HMIS Data Manual on August 1, 2014, updating the 2004 HMIS Data and Technical Notice and the 2010 HMIS Data Standards.
B. Efficiently collecting, analyzing, and generating the data needed for reports as required by various funding entities.

C. Providing the Chester County’s Continuum of Care members and other stakeholders with aggregate information and trends related to those at-risk of, or experiencing homelessness.

D. Providing people experiencing homelessness with better access to housing and services.

E. Enabling Partner Agencies to better coordinate care to address their clients’ needs.

F. Creating aggregate and detailed assessments of the needs of those at-risk, or experiencing homelessness.

G. Providing baseline data and system wide outcomes that can be used for decision-making and future strategies to prevent and end homelessness.

2. Chester County HMIS Lead and Product

The Chester County Department of Community Development (DCD) has been designated by the CoC Governance Board to serve as the HMIS lead for the PA-505 Chester County Continuum of Care. After considering several options for the HMIS Lead agency, the Governance Board determined that DCD has the most staffing capacity and technical expertise to comply with the federal HEARTH Act of 2009’s HMIS requirements as well as annual HUD HMIS Data Standards and reporting requirements.

The CoC Governance Board established a standing HMIS Committee composed of a diverse group of CoC members and HMIS users whose responsibilities includes the ongoing review of the HMIS Lead’s performance. The Committee makes recommendations to the Governance Board for HMIS Lead performance improvement as needed.

The Committee will be responsible for reviewing the relationship with DCD as the HMIS lead agency every three years. If after their review it is determined that a different agency should be selected as the HMIS Lead Agency, the Committee will be responsible for selecting a new HMIS Lead Agency for the CoC. Once the committee has made their selection, the CoC Governance Board will approve the new designated HMIS Lead Agency.

HMIS Lead roles and responsibilities include but are not limited to:
Chester County Partnership To End Homelessness
Operational Plan 2021 - 2022

- Ensuring the operation of and consistent participation by recipients of HUD Continuum of Care (CoC), Emergency Solutions Grants (ESG), Community Services Block Grants (CSBG), Pennsylvania Housing Affordability and Rehabilitation Enhancement (PHARE) program, and other federal/state program funds, including oversight of the HMIS and any necessary corrective action to ensure that the HMIS complies with federal requirements;
- Submitting, at least once annually, or upon request from HUD, to the Chester County CoC an unduplicated count of clients served and an analysis of unduplicated counts. This may be done as part of the annual Point-in-Time Count process;
- Executing a written HMIS Participation Agreement with each Provider Agency, which includes the obligations and authority of the HMIS Lead and the agency;
- Training Partner Agency users;
- Implementing Chester County HMIS software enhancements on behalf of partner agencies.
- Providing quality assurance for the Chester County HMIS program;
- Fulfilling Chester County CoC reporting requirements;
- Providing technical support through the Chester County HMIS System Helpdesk;
- Providing ongoing system maintenance and updates to fit within federal regulations, guidelines and system performance measures;
- Contracting with the HMIS product vendor;
- Implementing and updating HMIS Privacy, Security and Data Quality Plans for all users and providers through signed user agreements and monthly data quality monitoring;
- Ensuring consistent participation of recipients’ and subrecipients through quarterly training, continuous technical assistance, and data monitoring;
- Ensuring that Chester County HMIS policies and procedures advance equity and inclusion by reducing racial and other demographic disparities in terms of access and outcomes; and,
- Ensuring HMIS is administered in compliance as prescribed by HUD by ensuring all HUD regulatory updates are updated into the system and ensuring all users are aware, as well as all users must complete an ‘End-User Certification’ facilitated by the Chester County HMIS System Administrator.

The CoC is currently using ServicePoint by WellSky as its HMIS software product.
3. Vision and Goals for Chester County HMIS

As the HMIS Lead, the Department of Community Development (DCD) has worked in coordination with several county agencies, including the Department of Computer and Information Services (DCIS), the County’s Health Insurance Portability and Accountability Act (HIPAA) Privacy Officer, the County’s Department of Human Services (DHS), and nonprofit housing and homeless service providers to implement Chester County HMIS for use by all HUD-funded and DCD-funded agencies, as well as other community-based organizations willing to contribute their data as appropriate.

Chester County HMIS allows the community to accurately evaluate the utilization of services, identify gaps in the local Continuum of Care, improve the efficiency of homeless related services, and understand the demographics and needs of persons experiencing homelessness in Chester County. Specific goals of Chester County HMIS include:

- Improving the quality of services
- Improving client and service tracking
- Ensuring continuity of care
- Expediting client intake procedures
- Improving referral accuracy
- Improving case management
- Tracking client outcomes
- Providing aggregate information for program supervisors and case managers, Boards of Directors, funding sources, and other stakeholders
- Providing aggregate information for program evaluation, systems design and policy decisions
- Providing aggregate information for addressing community-wide issues

4. HMIS Participating Agencies and Fees

Any agency, DCD-funded or non-funded, may participate in Chester County HMIS as an agency partner if they have signed the Agency Partnership Agreement-Memorandum of Understanding and agree to abide by the HMIS policies and procedures outlined in this charter.

The Agency Partnership Agreement-Memorandum of Understanding is a contract between the agency and the Chester County HMIS Administrator (Chester County Department of Community Development) regarding participation in Chester County
HMIS. The agreement outlines specific requirements on confidentiality, data entry, responsibilities, security, reporting, and other items deemed necessary for proper Chester County HMIS operation.

Each participating agency is responsible for its clients' data. Services should be provided to a client regardless of Chester County HMIS participation provided the client would otherwise be eligible for the agency’s services.

The HMIS Lead does not require participating agencies nor end users to pay a fee for using Chester County HMIS, including initial and ongoing fees for licensing, system usage, and training. However, the HMIS Lead reserves the right to charge license fees for non-HUD funded providers.

5. HMIS Agency Supervisors and End Users

One HMIS End User is authorized by their agency's Executive Director or other persons within the agency having the appropriate authority to serve as the agency’s HMIS Supervisor. The Supervisor cannot use Chester County HMIS until after signing an End User Agreement with their agency and completing the necessary training.

The HMIS Supervisor manages participation in Chester County HMIS by their agency. The Supervisor is responsible for following the policies and procedures outlined in this document, and are ultimately responsible for collecting and entering client data. The Supervisor will also act as the point of contact for client data and reporting done within the system.

The Supervisor is responsible for:

- Maintaining the agency programs and services profiles in the system.
- Acting as the main point of contact for Chester County HMIS System Administrator (DCD).
- Ensuring client privacy, confidentiality, and security.
- Maintaining compliance with technical requirements for participation.
- Storing and Enforcing End User Agreements.
- Posting privacy notices.
- Enforcing data collection, entry, and quality standards.
- Assisting the HMIS Lead with On-Site Technical Assistance/Audits.
Licensed HMIS End Users are responsible for entering client data into Chester County HMIS for their agency in compliance with all HUD and HMIS policies and procedures. Only authorized individuals that have successfully completed the necessary training sessions may be allowed to access Chester County HMIS on behalf of an agency.

A Chester County HMIS End User License Agreement must be signed and kept on file for all agency personnel or volunteers that will collect or use Chester County HMIS data on behalf of the agency. The original signed Chester County HMIS End User License Agreement will be filed at the DCD office in the agency’s Chester County HMIS file. Additionally, each agency is required to keep a copy of all of their End Users’ License Agreements on file at their office location so that DCD staff may review this documentation during monitoring visits. With no exceptions should an individual who has not signed an End User License Agreement be able to have or gain access to use of an End User License at any time.

The HMIS System Administrator works with all End Users to accomplish the goal of achieving 95% Data Quality and Completeness in HMIS.

6. HMIS Client Rights and Protections

Clients are required to have their data entered into Chester County HMIS. All clients are given the option to have their data shared throughout the database by signing Release of Information to allow an agency's users to collect and view their personal information in Chester County HMIS. It is a high priority of DCD to ensure that client confidentiality, privacy, and security are maintained at a very high level. The policies and procedures written in this document fulfill essential HUD HMIS requirements, utilize best practices for the industry, and are further enhanced for our community.
7. HMIS Policies and Procedures

7.1 Technological Requirements for Participation. All computers authorized to access Chester County HMIS must meet the minimum requirements as established by DCD.

7.2 Complete Agency Profiles in Chester County HMIS. Agencies are not allowed to enter client data into Chester County HMIS until their agency and service profiles have been approved by DCD and are completed in Chester County HMIS. Within Chester County HMIS, each agency must set up a group of profiles that define the programs and services the agency offers. End Users will be trained in creating, updating, and maintaining agency information, service information, and other program management requirements in Chester County HMIS.

7.3 Data Conversion. Agencies utilizing systems other than Chester County HMIS are responsible for converting any data that they wish to carry-over into Chester County HMIS.

7.4 Designating Chester County HMIS End User License. Any individual working on behalf of the agency (employee, contractor, and volunteer) who will enter information into Chester County HMIS database must be designated as a Chester County HMIS End User; and therefore is subject to these policies and procedures. Anyone who collects Chester County HMIS data (electronic or paper) or creates reports from the system must receive training. This training is varied depending on the person’s role. If someone will not be entering anything into the system but will be explaining Chester County HMIS to others, the agency’s End User is required to train this person on client privacy, confidentiality, and security procedures. Individuals, who will work with the Chester County HMIS software, will be required to attend the Policies and Procedures training as well as specific training on the Chester County HMIS software.

7.5 Assigning Security Levels. DCD will assign users an appropriate security level such that the users only have access to Chester County HMIS functionality or information required to successfully fulfill their agency’s roles. DCD will also maintain the agency’s
Approved Users List. The Executive Director or empowered officer will then contact DCD to set-up user access levels in the system and to schedule their designated End User(s) for training. User ids and passwords will not be distributed to new users until after they have completed the required Chester County HMIS training with DCD. Within Chester County HMIS, each user is assigned a security level based on the tabs to which they have access. This security allows the user to gain access to certain areas of the Chester County HMIS application. This security feature is utilized to ensure that individuals can only access the type of client information they need to do their job within the agency. An example would be that an agency would be assigned two different security levels. Security level 2 is designated for the entire agency and can view all information for all programs within their agency only and security level 3 is designated for the individual program within the agency, therefore would only have access to view information for the individual program within the agency. At no time should any client be entered into the Security level 2 for this level is only for viewing the agency as a whole for reporting projects only.

Removing Authorized Personnel. The DCD Chester County HMIS System Administrator must be notified within 1 business day when an individual is no longer authorized to access Chester County HMIS on the agency's behalf.

End User Training. Individuals designated as an agency's End User must complete a Chester County HMIS End User Training course before being granted a license to operate within the Chester County HMIS database.

The Chester County HMIS End User Training will cover several topics such as the duties and procedures specifically related to the role, beyond a typical End User training session. Topics will include:

- Chester County HMIS Organization of Services and Sections
- Chester County HMIS Reports
- Overview of Chester County HMIS Policies and Procedures
- Client Privacy & Confidentiality
- The Roles of an End User

Chester County HMIS Governance Charter Training. All individuals who are authorized to collect Chester County HMIS information are required to complete a
training regarding Chester County HMIS Policies & Procedures. This training is intended for everyone that will collect data on behalf of Chester County HMIS, including intake personnel, volunteers, and case managers for example. The training will cover in detail these policies & procedures as they relate to collecting data, expectations, and other materials. Focus will be given to client privacy, confidentiality, and security as it directly relates to Chester County HMIS.

7.10 Chester County HMIS Software Upgrade Training. When new Chester County HMIS software functionality is available, additional training opportunities regarding the upgrade will be offered. Chester County HMIS will evolve over time to include additional capabilities that agencies and the community have requested or new capabilities required by the U.S. Department of Housing and Urban Development. While documentation will be sent out for each upgrade, there may be occasions where supplemental training would be the best way for individuals to learn how to use the new capability.

7.11 Webinars. Special topic-based seminars will be offered by DCD as needed. Although, End Users must complete the Policies, Procedures and Security webinar twice a year which will be set up by DCD’s Chester County HMIS Administrator. As Chester County HMIS evolves, many agencies will find that they are looking for the same type of information or best practices. DCD will provide webinars to share information on updates, technical support, etc.

7.12 Privacy Policy Notice. The Chester County’s Chester County HMIS Privacy Policy Notice must be posted within an agency in a site visible to clients, in a common area, and at the point of intake. The Privacy Policy Notice is a brief document, which describes a consumer’s data rights in relation to Chester County HMIS.

7.13 Informed Consent & Chester County HMIS Participation. The agency must review the Client Consent for Data Collection and Release of Information form fairly, and in good faith, with each adult household member and/or unaccompanied youth for whom they will attempt to collect Chester County HMIS data. The Client Consent for Data Collection and Release of Information is an extremely important form within the Chester County HMIS data collection process. Its purpose is to disclose to clients what the Chester County Chester County HMIS system is for, what their rights are, why data is collected, what information is requested, and how the information will be used.
7.14 Informed Consent. Agencies should strive to communicate informed consent in a language the client understands. Clients must sign the informed consent form regardless of their decision to participate in Chester County HMIS or not. Clients can choose if they would like to participate in Chester County HMIS. Below is a description of what each of the choices means:

- **“Agree to let this Agency enter my information into Chester County Chester County HMIS”**: This means that their information is entered into the system, with personal identifying information shown (but secured through software and application security).
- **“I am concerned that sharing my information will put me or my family at risk. Please do not share my information with Partner Agencies. I understand that my information will only be accessible to this agency and the Chester County HMIS Administrator's.”**

The Client Consent for Data Collection and Release of Information form is good for one year. The original signed document must be stored securely for a minimum of seven (7) years after the client last received services. Agencies will offer to give the clients a copy of the Chester County HMIS release. Clients are presumed to be competent, unless there is a known court order claiming their incompetence. Legal guardians of adult clients may sign for the client.

The agency will need to report to DCD the number of individuals who did not agree to participate in Chester County HMIS by including their data in their quarterly report and documenting these numbers in their files. The agency must still enter the client's information into the system although must use the lock feature within Chester County HMIS, so that only the Agency and the DCD Administrators have access to such documentation. Agencies cannot deny services to an individual solely on the basis of the individual deciding not to participate in Chester County HMIS.

7.15 Electronic Sharing of Client Records. Chester County HMIS will enable agencies to share client records electronically if agencies agree AND the client consents to the sharing of their information. Chester County HMIS will allow groups of agencies to share the same client record, as they try to provide coordinated services for the individual/family. Agencies who wish to have the ability to share records with one another will need to sign an agreement between each other. Clients will also have the added ability to decide if they want their information shared with another agency, as well as what information they would like shared.
7.16 Using Paper-Based Data Collection Forms. Agencies may choose to initially collect client data on paper and enter it into the Chester County HMIS software later, rather than entering it directly in the system. However, the overall goal is to have the data entered into Chester County HMIS within 24 hours. Each agency will incorporate Chester County HMIS into its own operating processes. Some agencies will prefer to interview clients and simultaneously enter their information directly into the system. Other agencies will find it easier to collect information on paper first, and then have someone enter the data later.

7.17 Collecting Client Disability Information. Agencies must collect client disability information after the individual is enrolled in a program, unless it is a requirement for program entry. As a part of the data standards required by HUD, agencies are requested to ask clients questions about disabilities. To comply with other federal laws and regulations, these client questions must be asked at a certain point in time to avoid any legal issues. HUD defines 'disabling condition' as: “(1) a disability as defined in Section 223 of the Social Security Act; (2) a physical, mental, or emotional impairment which is (a) expected to be of long-continued and indefinite duration, (b) substantially impedes an individual’s ability to live independently, and (c) of such a nature that such ability could be improved by more suitable housing conditions; (3) a developmental disability as defined in section 102 of the Developmental Disabilities Assistance and Bill of Rights Act; (4) the disease of acquired immunodeficiency syndrome or any conditions arising from the etiological agent for acquired immunodeficiency syndrome; or (5) a diagnosable substance abuse disorder.

7.18 Chester County HMIS Data Standards. All agencies and Chester County HMIS End Users are required to collect the Universal Data Elements as stated by the U.S. Department of Housing and Urban Development (HUD). Chester County HMIS End Users are required to collect HUD's Program-Specific Data Standards fields, especially if the client is receiving services funded through federal homeless assistance grants, as stated in the Agency Agreement and End User Agreement.

7.19 Client Access to Their Information. Clients have the right to a copy of their applicable client level data contained within Chester County HMIS which can be obtained through an agency’s formal record request process.

7.20 Filing a Grievance. Clients have the right to file a grievance regarding potential violations of their privacy rights regarding Chester County HMIS participation and have
the right to contact the agency's End User regarding data inaccuracy (See Notice of Privacy Practices). No action or punishment will be taken against a client if they choose to file a grievance.

7.21 Revoking Authorization for Chester County HMIS Data Collection. Clients who initially agree to participate in the Chester County Chester County HMIS have the right to rescind their permission for data collection.

7.22 Data Quality. Chester County HMIS End User(s) are required to ensure data quality of the information that is being collected for Chester County HMIS, as stated in the End User Agreement. End Users are required to fix data quality issues in a timely manner. To produce high quality, reliable reports it is imperative to possess high quality data. DCD will help assure stakeholders that the data contained within Chester County HMIS is of high quality.

7.23 Security Monitoring. End Users are required to immediately resolve any issues discovered during a Chester County HMIS security monitoring. In order to maintain the high level of security, client privacy and confidentiality practices set up in the Governance Charter document, DCD will conduct security evaluations on a regular basis. End Users will work with the DCD to schedule a monitoring visit, and to assist DCD in performing the monitoring. The monitoring will cover many topics including: informed consent agreement, privacy notices, technology security, and data entry practices.

7.24 Workstation Security. Agencies are required to place End User computer screens in a manner so as to prevent unintentional confidentiality breaches. Passwords and Log-in information are to be kept secure; this information should never be shared with anyone.

7.25 Technological Requirements for Participation. All computers authorized to access Chester County Chester County HMIS must meet the minimum requirements as established by DCD as follows:

- Unique username and password.
- Secure location for equipment.
- Locking screen savers.
- Virus protection with auto update.
- Individual or network firewalls.
Chester County Partnership To End Homelessness
Operational Plan 2021 - 2022

- Restrictions on access to HMIS via public forums.
- Compliance with HMIS policy and procedures manual.
- Validation of off-site storage of HMIS data.

7.26 Additional Quality Reports. DCD will make additional quality reports available regarding software, technical support, quarterly reports, training, and overall program directions. Additional reports will be created to ensure that the overall Chester County HMIS program is of high quality. Topics that will be reported on will include overall software quality, quality of the technical support, training quality, quarterly reports and overall program quality. As these reports are available, DCD will notify agencies.

7.27 Chester County HMIS Compliance. During the contract period, the Provider will supply all required data in the Chester County HMIS (Chester County HMIS) for all contracted programs. All providers are required to update the Chester County HMIS database within 24 hours of participant Entry/Exit into a program. Emergency Shelter providers must have the ShelterPoint Module up to date by close of business everyday including weekends and holidays. If a situation arises where the agency is unable to log into Chester County HMIS and update the ShelterPoint module their agency, their agency must notify DCD of their current Bed Availability at the close of business day of your organization. Failure to remain compliant with data quality and assurance as well with the submission of required reports could result in an interruption of the submitted invoice for that current time period.

The following Requirements will be reviewed during the invoice process:
- 100% of all HUD funded homeless assistance programs must be actively participating in Chester County HMIS
- 85% of all beds in non-HUD funded residential homeless assistance programs must be actively participating in Chester County HMIS
- Missing information does not exceed 10% for required universal and program specific data elements for all clients served in a month
- “Don’t Know and Refused” responses must be less than 5% of all answered questions.
- Quarterly reports are submitted and are accurate in a timely manner.

7.28 Report Utilization. Data Quality reports will be used to assess individual program data quality. The Chester County HMIS System Administrator will be responsible for creating and producing Data Quality reports. The individual agency will be able to
access the reports relevant to their program(s). This enables the agency to monitor their data and improve data quality. It is important that the agency run data quality reports on a monthly basis to meet the HUD benchmark for clients served in their program(s).

7.29 Ways to Contact the DCD Chester County HMIS System Administrator. The agency’s Site Administrator should be the only person who contacts the DCD Chester County HMIS System Administrator via the Helpdesk. The DCD Chester County HMIS Helpdesk and the DCD Chester County HMIS System Administrator will attempt to resolve issues within the shortest period of time possible, but these responses are subject to the vendor’s response times. While the DCD Chester County HMIS Help Desk can answer most questions and concerns regarding Chester County HMIS, when an issue cannot be immediately resolved, it will be forwarded to the DCD Chester County HMIS System Administrator. If necessary, the DCD Chester County HMIS System Administrator will forward the issue to the vendor. The DCD Chester County HMIS System Administrator is subject to the vendor's response times.

Revised Version Adopted by the Partnership Continuum of Care Governance Board:
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