



San Diego CES FY2024 Update

Frequently Asked Questions (FAQ)

This document will be updated as more questions are asked about the FY2020 Coordinated Entry process. This is a living document and you may see some portions of this document under construction.

CE Training Material:

Please be sure to view the [2024 San Diego Coordinated Entry Training Series](#) prior to viewing this FAQ or asking questions.

How to contact us:

For questions, please contact us at support@rtfhdsd.org and keep an eye on <https://www.rtfhdsd.org/what-we-do/coordinated-entry-system-ces/> for updated listings for Coordinated Entry Office Hours sessions (planned for Tuesday afternoon starting September 29th).

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1. How to deny a referral to permanent housing and send it back to the queue

- Denying a referral is accomplished on the referral's detail page. Simply denying a referral follows the same process as prior to the FY2020 CES Data Standards.
- New to the process** is managing a client's referral on the queue and making sure a denied referral makes it back onto the overall queue. When a referral is denied, you must take action to send a client's referral back to the Community Queue (so that it may be referred to a different permanent housing project).

The screenshot shows a web form for denying a referral. It includes the following fields and controls:

- Status:** A dropdown menu currently set to "Denied".
- Send to Community Queue:** A dropdown menu with "-- Select --" as the current selection. A tooltip is visible, showing options: "-- Select --", "Yes" (highlighted in blue), and "No".
- Denied By Type:** A dropdown menu with "-- Select --" as the current selection.
- Denied Reason:** A dropdown menu with "Select" as the current selection.
- Denial Information:** A large, empty text input area.
- Private:** A toggle switch that is currently turned off.
- Buttons:** Two buttons at the bottom right: "SAVE CHANGES" and "CANCEL".

Be sure to select "yes" to "send to Community Queue" when denying a referral. This ensures that they are sent back to the queue even though your program could not accept them for permanent housing


2. How to accept a referral from the Queue

- Accepting a referral made from the Queue is the same as accepting a referral made from CES Admin (our prior referral-sending agency). After a referral to your program has been made, simply enroll your referred client(s) into your program and be sure to toggle the "is this enrollment a result of a referral?" button when first enrolling your client to your permanent housing program.

3. My client already has a previously completed Triage Tool, what do I do?

- Triage Tools done under the CES 2.0 Agency may still contain recent and valid information. We have turned on a feature called Cascading which will bring forward any CES 2.0 Triage Tool information completed previously and it will pre-populate it into the CES Triage Tools upon opening a new Triage Tool within the FY2020 workflow.
- If an assessment is over 365 days old this cascading will not take effect. We advise completing a new CES Triage Tool in these cases to update the information as necessary.

4. **How are current living situations between outreach and coordinated entry different?**
 - a. **For Coordinated Entry:** A Current Living Situation Assessment is to be completed...
 - i. at project entry
 - ii. when a client's Current Living Situation changes
 - iii. when a Coordinated Entry Event or Assessment happens (i.e. you complete a triage tool, your client is referred to housing, your client is referred to a local shelter, your client is housed with family etc.)
 - iv. when a Current Living Situation has not been completed in at least the last 90 days
 - b. **For Outreach Programs:** A Current Living Situation Assessment is to be completed at every client contact. This can be in-person or distanced (i.e. by phone). A contact must occur upon project entry and every subsequent contact, however contact may or may not be made upon exit (if client disappears, etc.)
5. **My client has an existing assessment, but no referral to the Community Queue. My client is interested in housing and has been enrolled in the Coordinated Entry Program. How do I get them on the Community Queue?**
 - a. If your client already has a Coordinated Entry enrollment and you have already completed a CES Triage Tool (within the FY2020 workflow described in the current training video) and your client does NOT currently have a Community Queue referral, you may refer your client by navigating to the "Assessments" tab of your Coordinated Entry enrollment. On the "Assessments" tab within this program enrollment, you may click "Eligibility" on the appropriate CES Triage Tool to see your client's score and refer them to the Queue using that assessment score listed.

Assessment Name	Completed	Details
CES Triage Tool for Single Adults San Diego Coordinated Entry System	09/21/2020	VI-SPDAT-V2: 0
		 ELIGIBILITY

6. **What happens to my client's referral after 90 days without checking in to the community queue?**
 - a. After 90 days of inactivity (i.e. not being checked in to their Queue referral) your client's referral will be removed from the Community Queue. If removed from the queue due to inactivity, a new referral should be made according to the process described in this FAQ and in the training video (utilizing the Eligibility button on the appropriate assessment as seen above in FAQ #5).
7. **Crisis Needs Assessment vs Housing Needs Assessment - what do I put on the Triage Tool?**
 - a. The CES triage tool is intended as a multi-step assessment meant to gather information about a client's needs, to help guide them through a diversion process, and to gather possible eligibility for certain housing programs. For this

reason we are asking that the CES Triage Tool be classified as a **Housing Needs Assessment** on the drop-down selection for that question.

8. What is Assessment Location?

- a. Assessment Location is a federally required, but locally defined field. What this data element is tracking is where the assessment was done with the client. Please choose the most appropriate drop-down item to describe the location in which the client completed the assessment with you.

9. When will I lose access to the old CES 2.0 Agency/workflow?

- a. As soon as you are done with the FY2020 CES training and email support@rtfhhsd.org we will remove your CES 2.0 access and give you access to the FY2020 Agency. **Everyone who has not completed the FY2020 CES training will lose access to the “CES 2.0” agency within Clarity on October 22nd.**
- b. Please remember that you must achieve at least a 90% score to pass the FY2020 CES quiz. Access will not be given until at least a 90% score is achieved on the quiz.

10. What do I do with CES 2.0 before I’m trained in the FY2020 Workflow?

- a. CES 2.0 will still be available for users who have not completed training until October 22nd. As of that date, if you are not trained in the FY2020 CE Data Standards workflow, you will lose access to Coordinated Entry activities.
- b. Please complete the training as soon as you can. As of the posting of this FAQ, the FY2020 CE Data Standards process has launched and is available for all trained users. You may begin enrolling your client(s) the moment you obtain access.

11. What do I do with partial or incomplete assessments?

- a. A client may be prioritized without a completed assessment, however the assessment provides valuable information that contributes to a prioritization decision. **Please be sure to refer all clients interested in housing to the Community Queue regardless of whether or not they have fully completed a CES Triage Tool.** You may update the CES Triage Tool as more information is gathered.

12. How do I refer someone without enrolling them or doing a Triage Tool assessment?

- a. RTFH always wants to support clients where they're at and that extends to the Coordinated Entry (CE) process as well. There are, however, some required elements in order to track that a client is engaging with CE. **An enrollment to the CE program must first be completed in order to refer someone to the Community Queue.** The CES triage tools are what are called "program assessments" and they live within this enrollment. These program assessments

are what we use to list someone on the Community Queue via referral. For these reasons, an enrollment is required.

- b. **One of the 3 CES Triage Tools is required to make a referral to the Queue,** however that does not mean that every single question needs to be filled out. Clients have the option to refuse answers to questions or to not know or remember the answers. A partially completed Triage Tool may be referred to the queue and updated as more information is gathered (see above FAQ #11 for partial/incomplete assessment guidance).

13. Is CES a stand alone program that can track everything about a client in HMIS?

- a. No. CES is a program intended to track a client's interaction specifically with the CE process. You are still responsible for tracking your own program's services for clients in your own program enrollments. The two types of enrollments track different things. Please be sure the client is properly enrolled in both CES and your own project you are serving them in.

14. What are the “referrals” under the “provide services” menu in my client’s CE enrollment? What do they mean?

- a. The "referrals" that live under the services available to you in the CE program enrollment are there to track your work and do not send notifications to anyone within HMIS. If you do connect your client to one of the options present please record one of these CE Event "referral" services. The only "referral" within HMIS that acts in a way that will lead to further action will be the Community Queue referral. Other "referrals" (under "provide services") will be purely for tracking the connections you have already made.

Services

The screenshot shows a dropdown menu titled 'Coordinated Entry Event' with a list of referral services. The menu is open, displaying the following options from top to bottom:

- Problem Solving/Diversion/Rapid Resolution intervention or service
- Referral to Housing Navigation project or services
- Referral to Non-continuum services: Ineligible for continuum services
- Referral to Non-continuum services: No availability in continuum services
- Referral to post-placement/follow-up case management
- Referral to Prevention Assistance project
- Referral to scheduled Coordinated Entry Crisis Needs Assessment
- Referral to scheduled Coordinated Entry Housing Needs Assessment
- Referral to Street Outreach project or services

- b.

15. Is there a limit to the number of Check-Ins I can do for my client? Is there such a thing as too many Community Queue Check-Ins?

- a. There are no practical limits to checking a client in. Functionally a check-in just resets the 90-day activity clock for your client's Community Queue Referral (so that it does not expire from the Queue). As long as the client is still active and you're still working with them, the only guidance we can give on check-ins is to be sure that you check in your client to the Queue at least every 90 days if they are still active and interested in housing.

16. Do we enroll descriptive clients into CES? (A descriptive client on the office hours call was described as a client entered into HMIS using only their description - i.e. a client without identifying UDEs such as name, SSN, Birthday, etc.)

- a. Descriptive Clients, or clients who are only entered and identified based on their descriptions, are likely to occur in any database that allows for missing or incomplete data. This is likely to happen as well when entering someone into the CE program or doing CE assessments since CE is part of HMIS which allows for duplicate cases. **Entering them into CE is perfectly okay - clients do not need to share their name to get services or housing.**
- b. As always, we ask that if descriptive clients are known to be duplicates that the duplicate unique IDs be sent to support@rtfhsd.org for review. If a client gives hints that they may have already completed a CES Triage Tool recently and they are entered as a descriptive client, it may be worthwhile to continue working with the client towards seeing if they are already in HMIS to prevent them answering the same tool twice. We hope these cases are rare, but we understand that they may happen.

17. If two adult clients (for instance an adult father and an adult daughter) present for CE services, do they get entered as a family? and what CES Triage Tool should they complete?

- a. When two or more adult clients present for services and identify themselves as a household please be sure to enter them into the CE program as a family if they are seeking services as a household together.
- b. With regards to the Triage Tool, we will want to do a CES Triage Tool for Single Adults for each adult client. Entering them as a household in the CE program in Clarity will indicate to us that they wish to be housed together.

18. Are HMIS users meant to add every client that completes a Triage Tool to the Community Queue?

- a. The purpose of completing a CES Triage Tool is to understand a client's needs and to help inform their prioritization for a limited housing pool. Without being added to the Queue, the client will not be considered for prioritization. If the client's goal is housing, adding them to the queue after completing the CES Triage Tool is the suggested next step for all clients seeking housing assistance.

19. Who do we enroll into the CE program and what clients should complete a Triage tool?

- a. You would only want to enroll clients you are working with who are interested in and engaged in looking for housing. Once you enroll your client in the CE project you would want to start the appropriate Triage Tool. This will allow you to make the referral to the Community Queue.

20. How often should we complete a Triage Tool with our clients?

- a. If a Triage Tool was created within the last year, the data from that Triage Tool will cascade into the new one that is added, so you will only need to confirm the information is accurate or update any missing information. A Triage Tool assessment does not need to be completed at every encounter with a client.

21. Should you still enter a diversion service if you have a diversion conversation that doesn't result in the client being housed/sheltered? (related to the Coordinated Entry Events)

- a. Yes - the service transactions within HMIS have been configured so that you may record a Problem Solving, Diversion, or Rapid Resolution intervention or service without having the client end up in housing as a direct result of that specific conversation (as seen below in the "provide services" menu screenshot). Diversion is a process and HMIS and HUD recognize this. Please enter all CE-related activities regardless of their outcome - the HMIS is a system of record and we advise all activities be accurately recorded; not just the ones that end up in housing or a positive outcome.

Services

The screenshot shows a web form titled "Coordinated Entry Event". The main heading is "Problem Solving/Diversion/Rapid Resolution intervention or service". Below this, there are fields for "Start Date:" and "End Date:", both set to "10/08/2020". There is a "Result: Client housed/re-housed in a safe alternative:" dropdown menu with a blue arrow pointing down. The dropdown menu is open, showing three options: "-- Select --", "Yes", and "No". Below the dropdown is a "Geolocation:" field with an "ADD LOCATION" button. At the bottom, there is a "Service Note" field. The form has a light blue header and footer.

b.

22. What do you do with the CE project entry once your client is housed?

- a. If a client is housed the CE enrollment should be exited. This can happen in two ways:
- b. In HMIS, the Coordinated Entry project has a feature enabled called "Auto Exit when Housed" which will match the information entered into HMIS that shows a client was housed. For instance, if a client enrolls in a rapid rehousing program and has a move-in date entered, the CE program will notify the user and then automatically exit the client from the CE program utilizing the information entered (it will exit the client as of the housing move-in date and show that the client exited to Rapid Rehousing). The same will happen when a client exits a program and the exit destination is recorded as a permanent destination.
- c. The second method is if a client is housed and it is not recorded elsewhere in the HMIS. If this occurs, please be sure to exit your client from the CE program to the appropriate destination on the appropriate date (the date on which they enter housing).

23. Will the community queue include any referrals to aftercare once a client is housed?

- a. The Coordinated Entry System is primarily focused on connecting homeless individuals to the appropriate housing resource(s) to meet their needs. Most of these resources take the form of a resource including a subsidy or are a homeless-dedicated unit. Most of these will come with services of some sort built into the subsidy and we encourage all clients to access the appropriate aftercare supports. At the moment, Coordinated Entry is not making referrals to post-care service providers for clients who have already been housed, rather our focus is referring to the unit or housing itself.

24. How does the Community Queue differ from the old CES match referral system?

- a. The Community Queue is currently serving to help determine if a client is active in CES and on CES's radar. Our by-name-pool (aka by-name-list or BNL) will, in time, completely be based on a CE project entry and the Community Queue. Major differences between the CES 2.0 system and the current system include the creation and upkeep of the CE enrollment and the Queue referral upkeep/check-in. On the housing provider side referrals are still managed in the same manner and referrals are still accepted by enrolling a client via a referral.

25. If a client I work with at my agency is Active on the Community Queue and I did not put them on the CQ do I need to create another Community Queue referral?

- a. All of the aspects of Coordinated Entry (the program enrollment, the community queue, the assessments) are a shared set of data among the community. Each provider does not need their own set of CE data in order to work with a particular client, rather the Coordinated Entry workflow embraces a client-centered model and the client carries that CE data with them to any provider they receive services from.
- b. Please continue the work that the client has already engaged in if you come across a pre-existing CE enrollment or a pre-existing Community Queue referral. This includes adding current living situations, checking the client in on the queue, updating the assessment, or (hopefully) exiting the client from CE to housing when the day comes.

26. When the auto exit happens, what does Clarity choose as the exit destination?

- a. If a client auto-exits due to inactivity (i.e. no Current Living Situations, Coordinated Entry Events, or Program-based CES Triage Tool Assessments, Status Updates, or Annual Assessments in the past 90 days) then the client will be exited from the CE program as of the last date of activity with a destination of "No Exit Interview Completed"
- b. If a client auto-exits due to being housed, the client will be exited to the destination appropriate to the housed situation (see above in FAQ #22)

27. What is a "Non-continuum" service (as referenced in the Coordinated Entry Events)?

- a. Although it is not likely that the continuum services will be unavailable or a client will be wholly ineligible for one, here is what a non-continuum service refers to according to HUD

- **Continuum project** refers to a distinct unit of an organization, which may or may not be funded by HUD or the Federal Partners, whose primary purpose is to provide services and/or lodging for the homeless and is identified by the Continuum as part of its service system. For example, a project funded by the HUD's CoC Program may be referred to then as a "CoC Program-funded continuum project."

b.

- c. Generally, this means that a Continuum project is one within the bounds of our CoC (San Diego City and County), is primarily homeless-dedicated in nature, and is part of our region's approach to homelessness (i.e. in the service system). Anything not in San Diego or not Homeless-dedicated is technically a non-continuum service.

28. Should these coordinated entry events be dually recorded in our own programs as well (using the equivalent services and notes)?

- a. If your program is tracking the same or similar elements, yes. HMIS is a system of record so all activities should be recorded. Additionally, the CE program is a shared program among many providers and you may have internal tracking necessary to meet your grant/programmatic needs in addition to what HUD is requiring for CE. Please track all activities as necessary for CE and for your agency's HMIS needs as well.