
PROGRAM UPDATES IN RESPONSE TO COVID-19



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In response to the COVID-19 outbreak, temporary changes and requirement suspensions have been made to Coordinated Entry. The intention is to give agencies flexibility to lower barriers in order to respond to this crisis, while ensuring the safety of staff and the households they serve.

Provider and System Adjustments

Provider Adjustments	System Adjustments
Providers should begin to: <ul style="list-style-type: none"> • Leverage available waivers to bypass regulatory requirements to house people quickly (i.e. disability documentation, FMR, etc.). • Waive any internal agency requirements to accessing housing units and document the changes being made. • Identify ways to connect to this system effort (ideas are outlined in Provider Next Steps below). 	The Lowcountry CoC and its partners will begin working on: <ul style="list-style-type: none"> • Changing coordinated entry prioritization and expedited matching. • System-wide landlord engagement • Increasing the usage and flexibility of rapid re-housing. • Supporting efforts to reduce system-wide barriers to housing (i.e. ID and documentation requirements).

The Expedited Housing Policy

This policy will be in effect during the COVID-19 health crisis and reviewed to determine if it is meeting community needs. The Department of Health and Environmental Control (DHEC) will determine the end of the COVID-19 crisis for purposes of this policy.

1. Continuum of Care homeless assistance programs will continue housing participants in permanent housing programs. Providers will work, and demonstrate their efforts, to expedite housing placements.
2. Housing providers will remove any barrier that impedes the rapid placement of participants in housing; housing providers must apply for applicable waivers that expedite the housing process. Barriers may include, but are not limited to, removing or waiving documentation requirements (such as identification and income verification) and background checks. Housing providers are encouraged to implement creative solutions and utilize technology to ensure housing



continues, such as live streaming or video call for intakes, case management and housing inspections and/or utilizing electronic signatures.

In-person Access Points

The Lowcountry CoC will continue to monitor in person access points for safety. Currently, Outreach Specialists will be out in the community providing assistance while following guidelines for social distancing and enhanced sanitation recommendations.

Coordinated Entry Prioritization Process

In response to COVID-19, for adults and families experiencing homelessness, the Lowcountry CoC recommends that we continue to prioritize people experiencing unsheltered homelessness and people fleeing domestic violence, because they cannot safely self-isolate or shelter in place. This means that these factors must be considered as part of the prioritization process. We will continue to monitor the prioritization process in response to COVID-19 and update our response plan as new information is provided to the CoC.

As suggested by HUD and the Office of Special Needs Assistance Programs (SNAPS), now is the time to look at the use of triage and assessment tools in prioritization differently. With the amount of federal funding coming our way, the VISPDAT may unintentionally slow things down and no longer be necessary during this time. The Coordinated Entry Committee met to discuss the continued need for the VISPDAT as a triage tool and voted to discontinue the use of this tool during our COVID response. CoC staff will continue to maintain a Coordinated Entry List of those in need and conduct case conferencing weekly to move people to the Priority List based on vulnerabilities; this includes, length of time homeless and COVID related criteria. Households will continue to be triaged to Rapid Rehousing and bridged to Permanent Supportive Housing if they are eligible and an opening is available.

The CoC staff will continue to provide fair and equitable services and continue to match people with the most appropriate support and housing interventions that are available. We will re-evaluate the need for a triage tool when the pandemic ends or funding slow down.

Documentation

To provide additional flexibility to communities to prevent the spread of COVID-19 HUD has provided regulatory waivers to assist projects. Please continue to follow HUD guidance regarding third party documentation and self-certification. More information can be found by visiting [:Prevent-the-Spread-of-COVID-19-and-Mitigate-Economic-Impacts-Caused-by-COVID-19.pdf](#)



Chronically Homeless Definition (Chronically Homeless)

Households must still meet the other components of the chronic homeless definition of being continuously homeless for at least 12 months or on at least 4 separate occasions in the last 3 years where the combined occasions must total of at least 12 months. However, HUD has provider waivers regarding the required documentation.

Housing Status Eligibility; At Imminent Risk of Homelessness)

At Imminent Risk of Homelessness eligibility is temporarily extended to households who are unstably housed. Households will be considered at imminent risk of homelessness if one or more of the following occur:

- HH will lose primary nighttime residence (including systems of care or institutions) within 30 days of the date of application for assistance and no subsequent residence has been identified and lacks the resources or support networks needed to obtain permanent housing.
- HH who are not able to pay rent due to loss of income and are reasonably expected to be facing eviction when the moratorium on evictions is lifted are eligible to receive assistance prior to receiving a legal notice of eviction. Rental assistance should be prioritized to HH who are not eligible for unemployment income and do not have a way to pay rent for the foreseeable future.
- HH is sharing the housing of other persons (couch surfing, doubled up i.e.) and lacks the resources or support networks needed to obtain permanent housing.
- HH is living in a motel/hotel, or RV and lacks the resources or support networks needed to obtain permanent housing.

Interim Guidance on Rapid ReHousing

This guidance was developed from the Department of Housing and Urban Development (HUD) and in partnership with Community Planning and Development (CPD) office and should be utilized until HUD's Office of Special Needs Assistance Programs (SNAPS) provides further guidance. To assist with the needs of those we will be serving with CARES Act funding, all RRH households will be reassessed after receiving 6 months of rental assistance. By receiving 6 months initially, this will allow case managers to focus on the needs of that household, to stabilize and sustain their housing and increase income, as well as, link to ongoing supportive services. By providing 6 months initially, project will be able to budget their funding more accurately and sustain the number of referrals made each week through coordinated entry.



Documentation of Housing Inspections

The first priority of housing providers is to continue to house participants during an emergency. This order of priority applies to housing inspections and, where applicable, lead-based paint inspections. Inspections that include a lead-based paint concern should also document that no other resources were available to conduct the inspection. See Appendix A.

First Priority: Conduct a physical inspection, per normal protocol and include documentation in the client record.

Second Priority: Conduct remote virtual inspection; document the reason for remote inspection in the file, case notes and on the inspection form. When the crisis ends, conduct the inspection and document in the case notes.

Third Priority: No inspection, remote or physical, takes place on a temporary basis due to COVID-19.

Next Steps for Providers

- ESG and CoC-funded providers should apply for HUD Waivers and implement emergency recordkeeping protocols. More information is available on the [HUD Exchange](#)
 - Interim Guidance on Housing Inspections: The Lowcountry CoC has developed guidance regarding housing inspections in emergency situations. Appendix A.
 - Interim Recordkeeping Standard Operating Guidance This provides guidance for housing providers on documentation and recordkeeping standards during emergency situations. Appendix B.
- Identify any extra capacity for staff to redirect efforts to the CoC's centralized engagement efforts or help get people housed. Notify the Lowcountry CoC by emailing hcarver@lowcountrycoc.org if you can contribute to this effort.
- Convene an internal committee at your organization to outline the flow of how people get into PH (RRH and PSH). Identify ways the process can be expedited or changed.
- Start tracking and documenting the updates your agency makes to internal procedures to align with the expedited housing guidance.

Next Steps for Lowcountry CoC

- Identify if any amendments to coordinated entry prioritization that are necessary to account for vulnerability due to COVID-19. Review and consider all coordinated entry suggestions from HUD.



- Work with CoC partners to coordinate efforts, identify regulatory barriers and request waivers as necessary to meet the needs of our community.



APPENDIX A: Interim Guidance on Housing Inspections in Emergency Situations

The Lowcounty Continuum of Care (CoC) has developed the following guidance regarding housing inspections in emergency situations. The first priority of housing providers is to continue to house participants during an emergency. This guidance was developed from Department of Housing and Urban Development (HUD) and in partnership with Community Planning and Development (CPD) office and should be utilized until HUD's Office of Special Needs Assistance Programs (SNAPS) provides further guidance.

1. When housing participants, follow the process below:
 - For renewal/yearly inspections – Ensure housing is maintained, document why you cannot conduct inspections, and place that documentation in the file, or add it to the case notes if the file is not immediately available. When the crisis ends, go back and conduct the inspection and ensure all documentation is present in case notes and file
 - For initial inspections not including a pregnant woman or child under 6 – House the participant and try to conduct the inspection via video. Note the reason for the remote inspection in the file, case notes, and on the inspection form. If the unit fails the remote inspection, do not house the participant in that unit and find a different one. If a remote inspection is not possible, house the participant and document the reason an in-person or remote inspection is not possible in the file. When the crisis ends, go back and conduct the inspection and ensure all documentation is present in case notes and file
 - For inspections where lead-based paint hazards are a greater concern (i.e. pregnant woman or child under 6) – House the participant and try to conduct the inspection via video, noting the reason for the remote inspection in the file, case notes, and on the inspection form. If a remote inspection is not possible, note the reason in the file and case notes and that no other resources were available to conduct the inspection. Prioritize these inspections to be conducted first when the crisis ends.
2. Establish a protocol for tracking inspections that were not completed or completed remotely, such as a list or a spreadsheet, so that once inspections can be conducted the program will have a record of outstanding tasks.
3. After the crisis ends and the inspection has been conducted, attach all emergency recordkeeping documentation to the completed inspection.



Order of Priority

This order of priority applies to housing inspections and, where applicable, lead-based paint inspections. Inspections that include a lead-based paint concern should also document that no other resources were available to conduct the inspection.

First Priority: Conduct a physical inspection, per normal protocol and include documentation in the client record.

Second Priority: Conduct remote virtual inspection; document the reason for remote inspection in the file, case notes and on the inspection form. When the crisis ends, conduct the inspection and document in the case notes. Under the **ESG program** interim rule, no physical inspection is required. Therefore, a waiver is not needed in order to provide a virtual rather than physical inspection of ESG-funded units.

For ESG habitability inspections, a visual inspection could be accomplished via live video streaming, a walk-through video done by the property owner or program participant, or by taking date-stamped photos of the unit. In a video, smoke detectors should be tested. If photos are used, a statement from the owner verifying that the smoke detectors are operable should be included in the case file.

A live-video inspection is preferred to allow an inspector to ask clarifying questions (e.g., around interior air quality, water supply, thermal environment, and fire safety). However, photographs may also be acceptable if other methods of visual inspections are not possible. If physical inspections cannot be performed, the subrecipient should conduct full in-person ESG habitability inspections once it is safe to resume standard operating procedures. In the meantime, the health and safety of program participants, staff, and the public are the priority.

HUD recommends that, whenever possible, recipients that conduct remote inspections should maintain the visual documentation in their records. If this is not feasible, an inspection report based on the visual inspection would meet the recordkeeping requirements.

Third Priority: No inspection, remote or physical, takes place on a temporary basis due to the coronavirus crisis. Document the reason in the file and in case notes. Additionally, when the crisis ends, conduct the inspection and document it in case notes and the file.



APPENDIX B: Interim Recordkeeping Standard Operating Guidance

The following interim guidance ensures accordance with 24 CFR 578.103(a). Agencies must establish standard operating procedures that ensure that Continuum of Care program funds are used in accordance with the requirements of 24 CFR 578 and that sufficient records are maintained to enable HUD to determine whether the agency, as a Recipient or Subrecipient, is meeting the requirements of this part. During emergency situations, agencies should make every effort to ensure the order of preference for documentation is maintained.

This Interim Recordkeeping Standards and Operating Guidance is intended to provide guidance to recipient and subrecipient agencies in utilizing the waiver provisions described in the HUD memorandum issued on April 1, 2020:

<https://files.hudexchange.info/resources/documents/Availability-of-Waivers-of-CPD-Grant-Program-and-Consolidated-Plan-Requirements-to-Prevent-the-Spread-of-COVID-19-and-Mitigate-Economic-Impacts-Caused-by-COVID-19.pdf>

The Lowcountry CoC recommends that following types of documentation be included during Emergency Situations such as disasters and health crises:

- a. Identification (birth certificate, State ID, etc.)
- b. Income
- c. Disability
- d. Homeless Documentation
- e. Housing Inspections
- f. Annual assessments and/or service plan updates
- g. Leases (copy of)

Recommended Steps

1. Agencies must establish an Emergency Recordkeeping Protocol as part of an Emergency Policies & Procedures that outlines the types of documentation included during an Emergency Situation. This protocol will include an Emergency Recordkeeping Protocol Template (see sample below).
2. Agencies will determine when an Emergency Situation occurs.
3. During the emergency, agencies will be working under their agency's Emergency Policies and Procedures, which includes an Emergency Recordkeeping Protocol.
4. During the emergency, agencies will describe the types of documentation impacted by the emergency situation and how the agency will make best efforts, given the emergency, to maintain records for the impacted types of documentation, including any guidance issued by HUD related to the emergency. These types of



documentation must be outlined on their Emergency Recordkeeping Template (See sample below).

5. Staff will use the Emergency Recordkeeping Template to record attempts made to collect documentation for each participant, in each of the documentation areas listed. Staff may need to document attempts for multiple types of documentation for one participant and therefore it may be necessary to utilize multiple Emergency Recordkeeping Templates to ensure clarity of effort. Each documentation of attempt may include a copy of the Emergency Recordkeeping Template, with the documentation of attempt to obtain documentation attached. Documentation of attempt or effort to obtain documentation should include the following:
 - a. Document why you cannot complete or acquire the types of documentation and your attempts to acquire. This may include written case notes, letter, emails, etc. Case notes should reflect the emergency situation, the emergency protocol is active and relevant dates.
 - b. Place that documentation in the file or add it to the case notes if the file is not immediately available.
 - c. Attempts should be made and documented until the emergency situation ends
6. Agency determines the Emergency Situation has ended. This determination will be documented on the Emergency Recordkeeping Protocol Template.
7. Staff will go back and acquire the documentation needed to meet the non-emergency type of documentation and ensure all documentation is present in case notes and file. Staff will attach the Emergency Recordkeeping Template and all emergency recordkeeping documentation to the document(s) to fulfill the type of documentation. If proper documentation cannot be obtained at this point, staff will explain in the case notes and file why that is the case.



APPENDIX C: Sample Recording Keeping Protocol

In accordance with 24 CFR 578.103(a), we have established standard operating procedures that ensure that Continuum of Care program funds are used in accordance with the requirements of 24 CFR 578 and that sufficient records will be maintained to enable HUD to determine whether we, as a Recipient or Subrecipient, are meeting the requirements of this part.

As part of those policies and procedures, this Emergency Protocol outlines the recordkeeping procedures we will utilize during an Emergency Situation.

1. Determination of Emergency Situation – Implementation of these Emergency Recordkeeping Protocols will begin with the determination by [insert official who will decide – Executive Director; President of the Board] or in the event that said person is unavailable, by [insert secondary official]. This determination will be made on the Emergency Recordkeeping Protocol Template, which will describe the reasons for invoking the Emergency Recordkeeping Protocols and the date they were invoked.
2. Delineation of Emergency Recordkeeping Protocol –The Emergency Recordkeeping Protocol Template will describe the recordkeeping policies impacted by the emergency situation and how this organization will make best efforts, given the emergency, to maintain records for the impacted policies and procedures, including any guidance issued by HUD related to the emergency.
3. Cessation of Emergency Situation – Emergency Recordkeeping Protocols will cease upon determination by [insert official who will decide – Executive Director; President of the Board] or in the event that said person is unavailable, by [insert secondary official]. This determination will be documented on the Emergency Recordkeeping Protocol Template.

