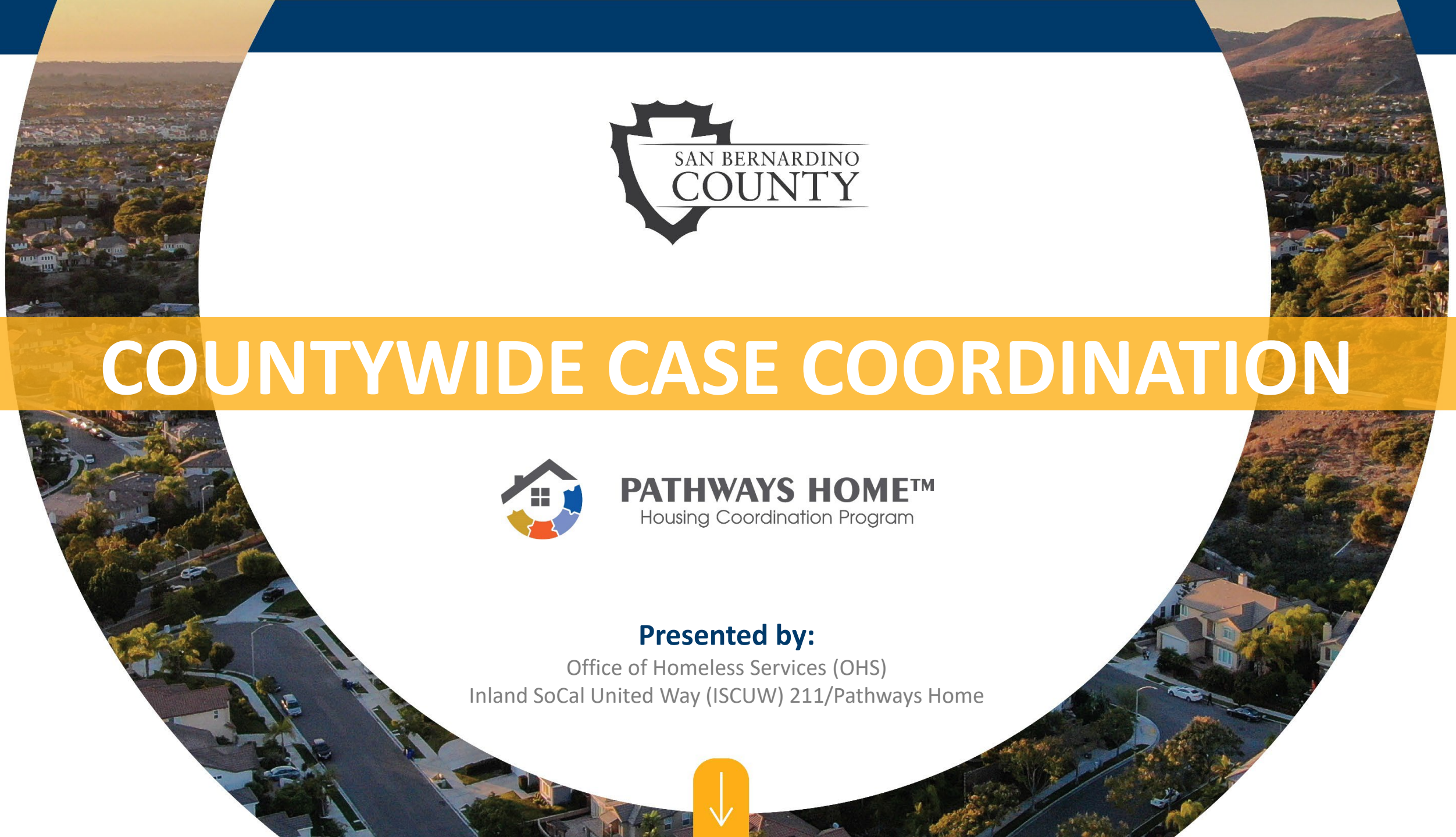

SAN BERNARDINO COUNTY

COUNTYWIDE CASE COORDINATION

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Presented by:

Office of Homeless Services (OHS)
Inland SoCal United Way (ISCUW) 211/Pathways Home

"Service to others is the rent you pay, for your room here on earth."

- Muhammad Ali

WELCOME / INTRODUCTIONS

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SAN BERNARDINO COUNTY

COUNTYWIDE CASE COORDINATION

Policy

- Has been updated
  - Prior version was approved in 2022/2023
- Pending review/approval from CES Oversight Standing Committee
  - Committee needs to meet to discuss
- Will share once finalized and approved
- Topics included:
  - CES Purpose and Background
  - CoC CES Foundation and Vision
  - HUD CES Requirements
  - CES Processes
  - Coordinated Entry Workflow
  - Housing Identification and Placement Team
  - Appendix A: Pre-screening Questions
  - Appendix B: Recordkeeping Recommendations
  - Appendix C: Housing Identification and Placement Form

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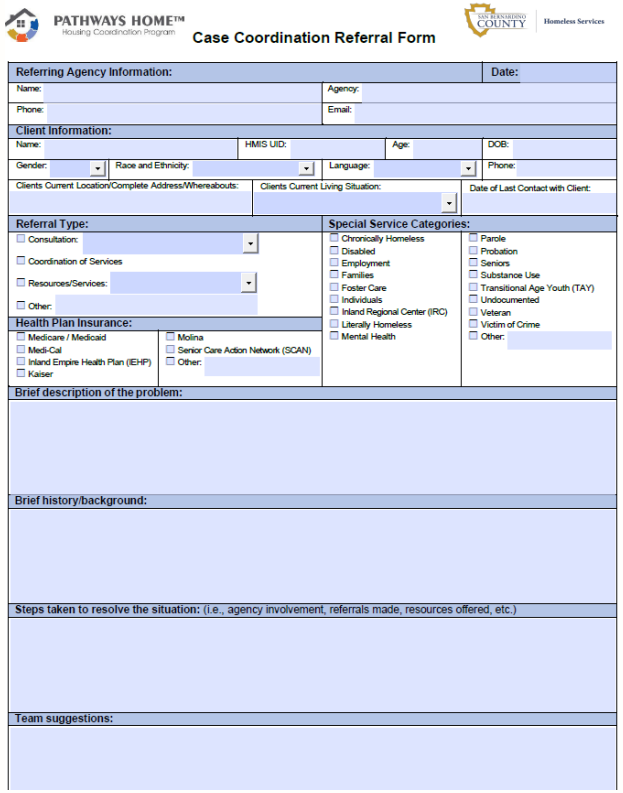
COUNTYWIDE CASE COORDINATION

Referral Form

- PDF fillable and has drop-down lists
- Send form to Coordinated Entry System (CES) inbox: 211CES@iscuw.org
- Monitored/reviewed by ISCUW 211/Pathways Home
- Be document ready to share with group if needed/requested
  - Enrollment in Clarity
  - Vulnerability Index – Service Prioritization Decision Assistance Tool (VI-SPDAT)
  - Release of Information Consent
  - Homeless Verification Form



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Case Coordination Referral Form

SAN BERNARDINO COUNTY Homeless Services

Referring Agency Information: Date:

Name: Agency:

Phone: Email:

Client Information:

Name: HMIS UID: Age: DOB:

Gender: Race and Ethnicity: Language: Phone:

Clients Current Location/Complete Address/Whereabouts: Clients Current Living Situation: Date of Last Contact with Client:

Referral Type:

- Consultation:
- Coordination of Services
- Resources/Services:
- Other:

Special Service Categories:

- Chronically Homeless
- Disabled
- Employment
- Families
- Foster Care
- Individuals
- Inland Regional Center (IRC)
- Literally Homeless
- Mental Health
- Parole
- Probation
- Seniors
- Substance Use
- Transitional Age Youth (TAY)
- Undocumented
- Veteran
- Victim of Crime
- Other:

Health Plan Insurance:

- Medicare / Medicaid
- Medi-Cal
- Inland Empire Health Plan (IEHP)
- Kaiser
- Molina
- Senior Care Action Network (SCAN)
- Other:

Brief description of the problem:

Brief history/background:

Steps taken to resolve the situation: (i.e., agency involvement, referrals made, resources offered, etc.)

Team suggestions:

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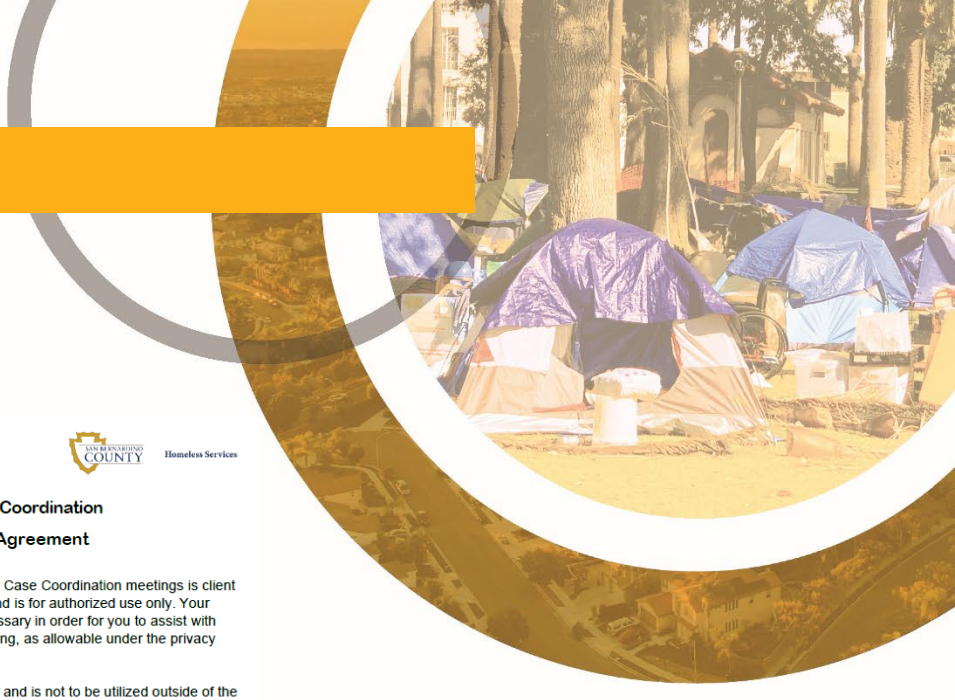
COUNTYWIDE CASE COORDINATION

Confidentiality Agreement Form

- New updated version
  - States privacy and security laws/regulations
  - Created by/mirrors ISCUW 211/Pathways Home
- Maintain uniformity across all projects by using one version
- Must be signed only by participating members
  - Primary and secondary contacts who will be incorporating data into By Name List and attending regular Countywide Case Coordination meetings
- Sign this version even if previously signed the version from the meeting in Feb. 2024
  - Sign prior to the next meeting



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SAN BERNARDINO COUNTY Homeless Services

Countywide Case Coordination

Confidentiality Agreement

Some of the information discussed in Countywide Case Coordination meetings is client protected Personal Identifying Information (PII) and is for authorized use only. Your attendance and access to this information is necessary in order for you to assist with housing services and placement during this meeting, as allowable under the privacy notices released to clients.

Any information viewed and shared is confidential and is not to be utilized outside of the scope of housing and placement services, and shall not be disclosed to any unauthorized individual.

The By Name List includes information that is personal and other sensitive information provided for official and authorized use only. You are responsible for ensuring that your access to and use of all information obtained comports with all applicable laws and policies.

Unauthorized use of, or access to, client protected personal identifying information is prohibited. Any use of this information that is inconsistent with policy, violates law, or is obtained or used for personal gain is prohibited. See California Welfare and Institutions Code (WIC) Section 5328 and Health Insurance Portability and Accountability Act (HIPAA).

By signing this acknowledgment and attending Countywide Case Coordination meetings, I confirm that I understand and consent to this confidentiality agreement.

Signature: _____ Date: _____

Name: _____

Agency: _____

Email Address: _____

Phone: _____

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COUNTYWIDE CASE COORDINATION

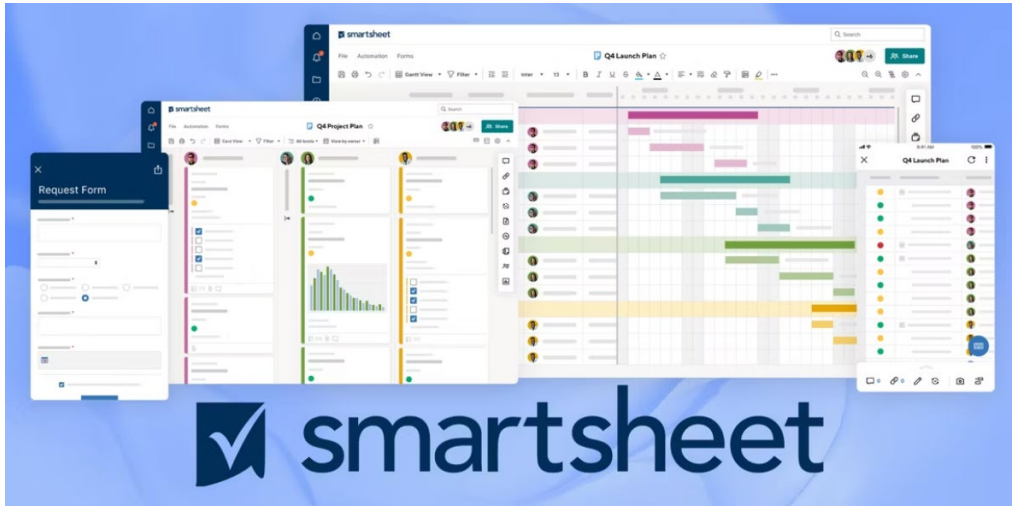
HUD Trainings

- Trainings available by United States (U.S.) Department of Housing and Urban Development (HUD) for:
  - Coordinated Entry Services (CES) standards
  - Outreach guidance
- Upcoming trainings, https://www.hudexchange.info/trainings/upcoming/
- Learning Pathways trainings, https://www.hudexchange.info/trainings/learning-pathways/
- On-Demand trainings, https://www.hudexchange.info/trainings/online/

COUNTYWIDE CASE COORDINATION

Smartsheet Preview

- Demo presented by the Smartsheet Team
- Demonstrate how Smartsheet will work and help with the By Name List (BNL) for the Countywide Case Coordination



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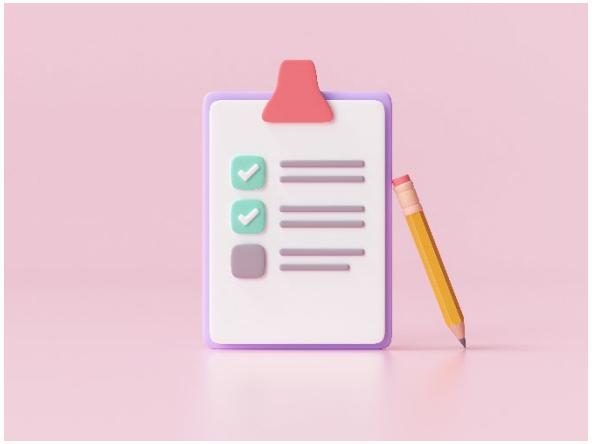
COUNTYWIDE CASE COORDINATION

Universal Assessment Form Preview

- Presented by the OHS Homeless Management Information System (HMIS) Team
- Preview the universal assessment form that will be added into HMIS to use when adding clients to new programs



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QUESTIONS/COMMENTS

THANK YOU!

For questions, please contact:

- Melanie Gonzalez Ganceda
  OHS - Program Specialist II
  melanie.gonzalezganceda@hss.sbcounty.gov
  909-504-6801
- Aziza Manuel
  211– CES Program Manager
  AzizaM@ISCUW.org
  909-980-2857 ext.4025

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