

## **APPENDIX F: COORDINATED ENTRY & PRIORITIZATION FOR VERMONT CARES HOUSING VOUCHER PROJECT**

Vermont's two HUD jurisdiction Continuums of Care are responsible for implementing coordinated entry and establishing prioritization for HUD-funded homeless assistance projects. All Local Continuums of Care must follow the established prioritization policy when allocating CARES Housing Vouchers through Coordinated Entry. All applications for a CARES Housing Voucher must include a verification letter.

### **Chittenden Homeless Alliance (Chittenden Continuum of Care)**

Order of Priority (as approved by the CoC):

Tier 1: Families with children

- Then by current Rapid Re-housing prioritization

Tier 2: Households with medium and high housing sustainability assessment scores

- Households currently prioritized for Rapid Re-housing according to the housing sustainability assessment

Tier 3: Hyper-Vulnerable Households (65+ and/or has a disability that is a chronic health condition)

- Then by current Rapid Re-housing prioritization

Tier 4: All other Households

- Then by current Rapid Re-housing prioritization

### **Vermont Coalition to End Homelessness (Balance of State Continuum of Care)**

Order of Priority (as approved by the CoC):

Tier 1: Families with children

- Then by current Rapid Re-housing prioritization

Tier 2: Hyper-Vulnerable Households (65+ and/or has a disability that is a chronic health condition)

- Then by current Rapid Re-housing prioritization

Tier 4: All other Households

- Then by current Rapid Re-housing prioritization

In addition, the Vermont Coalition to End Homelessness maintains a policy that households identified as having a "long-term" need for assistance must have a documented housing sustainability plan prior to enrollment in a rapid re-housing project (see [VCEH Coordinated Entry Policies and Procedures](#)). The VCEH waives this requirement for the Vermont CARES Voucher Project on a case by case basis:

- *IF, the household is engaged in a service plan for the household that addresses long-term support need*
- *IF, the household has also been referred for other long-term appropriate vouchers that they might be eligible for (FUP, 811, Shelter + Care)*

The waiver justification must be recorded in the client file (once found eligible and enrolled).

## AGENCY LETTERHEAD

<DATE>

RE: Coordinated Entry Referral for <HH of HH NAME> Household to the Vermont CARES Housing Voucher Project

Dear CVOEO,

<Name of Organization> is the Lead Agency for the <AREA NAME> Coordinated Entry Partnership.

This letter serves to verify that the referral of the <HEAD OF HH NAME> Household to the Vermont CARES Housing Voucher Project.

This household participated in the coordinated entry process, completed an assessment and was placed on master list for Coordinated Entry according to the VCEH (or CHA) Coordinated Entry Policies and Procedures.

This household was ranked # \_\_\_\_\_ for the program identified above.

If not the highest priority (rank) for this referral, please identify the reason(s) below:

- Households with a higher rank for this program were also referred.
- Households with a higher rank for this program were not eligible for the program.
- Households with a higher rank for this program declined to enroll in this program.

Sincerely,

Lead Agency Point Person for the  
<LOCAL AREA NAME> Coordinated Entry Partnership