**How is the policy implemented at your agency (what specific steps are taken? What really happens as opposed to what is intended to happen)?**

The intake process is put into practice to keep record of the services or referrals each individual receives rather from The Beacon or another homeless housing hub. To register for services, clients are asked to wait in the designated line at the building’s entrance gate. Once the Day Center is open, the staffed security guards escort two to three clients into the building at a time to complete the intake process. At that time, clients are asked to provide their name, date of birth and the last four digits of their social security number. After, the client’s identifying information is put into the homeless management information system, the client indicates what services are needed, (housing, lunch, shower and/or laundry) so that it can be noted into the system as well. The client then receives a wristband that details the services he or she is eligible to receive. Afterwards, the client is assigned a table number where he or she must remain while waiting for their name to be called for the specified services. Clients who registered for laundry and shower services will hear their name called over the intercom when their pass can be utilized. Clients who registered for housing services are escorted by a volunteer, staff or intern to the new hope department, which is located on the opposite end of the building, to complete a coordinated access assessment or housing status check. The agency’s intake process policy is enforced to ensure the enrolled clients are receiving the offered services. Despite its implementation, some clients still do not receive the intended services which can be due to a few reasons. Also, being that the programs use the same service ticket number once the client is checked-in, it can sometimes create unnecessary chaos. For example if a client is being assisted in the housing department, which is located on the opposite end of the building from the Day Center, but is called over the intercom by the laundry department, the client stands a chance of losing his or her service access because there is only a 5 minute grace period to claim a service pass. If this is the case, clients are given another pass but are forced to wait even longer to receive services. Many clients also forfeit their access to services because they mistakenly miss the window to claim their pass, leave their table or venture off too far from the day center and cannot be located or are asked to leave the premises due to violation of rule(s). When this occurs, clients are forced to seek services from other providers within the community. This is a prime example of how the intake policy can affect the different systems at my agency regarding service providers, clients, administration and the community.

**How are each of the different systems at your agency affected by this policy – provide details (with support)? (Respond in terms of service providers, clients, administration, and community)**

The intake policy allows the forementioned systems to collaboratively operate in hopes to achieve the same goal which is to end homelessness. If implemented correctly, all global similar service providers can access a client’s service record and referrals received as well as all client contact or case information through the homeless management information system. For example if a client moves out of state or seeks assistance within the same area but from a different agency, the same HMIS record that was created at the time the client initially signed-up to receive homeless services, can be accessed by all homeless service providers versus each provider having a separate client record that only details what assistance the client received from their particular program. This policy helps to prevent miscommunication between the systems and allows administration to effectively operate and ultimately combat homelessness worldwide.

**Who are the actual beneficiaries of this policy? (are they the same group(s) as those intended by the legislation? Why or why not? Are there any additional groups who benefit? Who might be harmed by this policy?)**

As noted, the diversion program is new and targets individuals and families who are at risk of becoming homeless. Although the program is temporary, there has been no indication to when the program will cease. Therefore, the identifying beneficiaries include at-risk, homeless and chronically homeless individuals and families. Other groups that may benefit from this policy include veterans. Unfortunately, unaccompanied homeless minors do not benefit from this policy. For a minor to be eligible to complete the intake process, he or she must be accompanied by and under the guardianship of a homeless adult. In some cases, this can be harmful for the minor especially if he or she is a runaway or seeking assistance due to some type of abuse at home.

**What evidence exists that supports your belief about who benefits and about who may be harmed?**

According to The Beacon’s 2018 gratitude report, Coordinated Access/Housing Case Management completed over twenty-five hundred housing assessments, with thirty-three percent being a community-wide effort. They were also successful in enrolling 55 individuals into the rapid re-housing home program. In addition to acting as a hub for housing assessments, The Beacon provides essential and next-step services through the Day Center, Brigid’s Hope and Beacon Law programs. The Day Center had over 79,000 client visits, prepared and served over 68,000 hot meals, provided over 21,000 shower passes and washed, dried and folded over 22,000 loads of laundry. The Brigid’s Hope program served of 25 women, all of whom was employed after graduation with less than a 10 percent recidivism rate. And lastly, Beacon Law resolved over 4,500 legal cases, assisted over 2,200 individuals and rendered over 1.9 million in direct benefits to clients. Any other evidence stems from direct observation and engagement within the agency.

**Be specific, by factor, what are the bio-psycho-social factors influencing who receives services under this policy, by whom the services are delivered, or how (i.e., agency hours? Accessibility? Location of services? Requirements placed on clients? Service criteria? How workers perceive the policy? How workers perceive the clients? Etc.)**

The intake policy is a non-discriminatory policy which requires all staff and volunteers to refer to individuals seeking services as clients and treat each with dignity and respect. Again, the policy also requires the individual or family to either be at-risk of homelessness, chronically homeless or experiencing at least one night of literal homelessness. Due to the recent pandemic, the number of clients that can be served daily has decreased from 300 to 90. Clients can sign-up to receive a lunch pass daily; however, shower and laundry passes can only be accessed every other day. In addition, clients are given only 10 minutes to utilize their shower pass. Also, services are provided on a first-come, first-serve basis, therefore clients are strongly advised to arrive prior to the 7 am opening time especially due to the agency’s busy downtown location.

All individuals 18 years or older are eligible to receive hot meals, showers, laundry services and legal assistance from The Day Center and Bacon Law. However, only women aged 35 and older are eligible for direct services from the Brigid’s Hope program. Clients who register for housing services, if eligible, can qualify for the diversion, rapid re-housing or permanent supportive housing programs.

After a coordinated access assessment is completed, the HMIS system generates a score which indicates which program the client is eligible to receive housing assistance from; however, clients are not immediately assisted. The diversion program is managed by the Baker Ripley organization and it takes 24 hours before the client is contacted by a program representative. This program was implemented to divert homelessness and only provides one-time or temporary assistance; to be eligible the client must score below a 10 on their housing assessment. The rapid re-housing program wait time is typically between 1 and 8 months but can exceed up to a year or more. The client must score between a 10 and 20 on their housing assessment to qualify for a year of program assistance. The permanent supportive housing program’s wait time ranges from 1 to 4 month but can also exceed a year or more. A client must have a disabling condition, a homeless history of 12 consecutive months or 4 separate instances over a three-year span as well as score of 25 or more to qualify for permanent housing support.

Once a client is placed on the program waitlist, he or she will be directly contacted by the referred service provider. Clients are expected to return to The Beacon to check on the status of their housing referral once a week or at least once a month. This is enforced because clients only have a 7-day grace period to accept the referral or the case will be closed. Many clients do not have access to a personal phone, therefore, if a client receives a referral, staff can provide the client with the service providers information at the time of the housing status check. If the client does not return as specified, he or she takes the risk of being removed from the waitlist and is forced to re-start the process which occurs more often than intended. This is a prime example of a service gap as a result of the intake policy. Other bio-psycho-social factors that influences how the services are delivered and who receives the intended services include the following: mental and physical impairments, genetic disorders, communicable diseases, comorbidity, culture, family structure/support and interpersonal relationships to name a few.

**1. Identify at least one gap that exists in service delivery as a result of this policy at your agency?**

Majority of the clients do not have a communicating device such as a cell phone or a reliable representative to speak with on their behalf. Typically, even if a client has an established email address, he or she lacks access to computer and internet services. Also, my observation shows that most referrals are missing the case managers/navigators contact information which creates additional barriers for the housing assessor and the client. The lack of communication access also makes it extremely hard for housing navigators and case managers to effectively assist the client with their housing needs once an assessment is complete. As stated, if the client is unable to contact on two different occasions, he or she has 7 days from the last attempt to contact his or her assigned case manager or their case is closed. This creates a revolving door for many clients, who lack form of communication.

**2. How do said gaps or service delivery policies either impede or enhance personal functioning for clients receiving services?**

**3. How do they impede or enhance personal/professional functioning for service providers? Be specific.**

**4. How would you better structure the policy or bio-psycho-social elements that hinder service delivery in order to address gaps or limitations to receipt of services?**

**5. How would you go about advocating for and applying these changes at your field agency? (Think in terms of board approval, organizational structure, forms of communication, etc.)**

**6. Who would benefit by these changes? How? Who might be harmed? How? How do you minimize harm?**

**7. Conclusion**