

Austin / Travis County Continuum of Care Outreach Request Policy & Procedure



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Introduction

Purpose:

Outreach services act as a bridge to supportive services and emergency services, establishing contact in the field and facilitating referrals. Outreach providers facilitate the engagement process and serve as system navigators by helping persons experiencing homelessness overcome complex system barriers and access appropriate services in the community.

The *Outreach Request* process allows the local homeless response system to document and request support for incomplete client referrals and/or client disengagement in program services. Outreach service coordination is offered to all homeless system providers in the Austin / Travis County Continuum of Care (CoC) to ensure that the local system does not inadvertently create barriers in accessing basic needs and services including access to permanent housing. Outreach teams are deployed at a variety of points in the path towards housing in order to provide households every opportunity to end their homelessness. The Outreach Request process is used by service providers to initiate the process of due diligence when households are missing, disengage from services, or decline program services.

Background:

The ECHO Outreach and Navigation Team facilitates Outreach Requests by liaising with community outreach and navigation teams, engaging with participants in support of projects, and providing technical assistance to program staff on service delivery and engagement when necessary. As a unit of the ECHO Coordinated Entry Department, the Outreach and Navigation Team works to ensure that participants are enrolled in services in a timely manner and remain informed of their housing options by problem solving system gaps and needs.

Dedicated Street Outreach staff from agencies across the Austin / Travis County CoC help ensure that all persons experiencing homelessness are engaged with the homeless response system, have knowledge of their resources, and are consistently offered resources that may help end their homelessness. In instances where a program needs assistance locating a participant or engaging a client toward active participation, and has appropriately documented the steps they have taken in an effort to do so, an *Outreach Request* may be submitted according to the following policy and procedures.

Outreach Request Policy

Homeless Service Providers in the Austin / Travis County Continuum of Care are expected to follow the local standards outlined in the [Outreach and Engagement Best Practices](#) and exhaust all options to locate and engage each participant referred via the Coordinated Entry system. Engagement is the first step towards ensuring equal access to housing opportunities and services; therefore, all potential program participants should be afforded the highest level of programmatic due-diligence in contacting or engaging, and determining eligibility for services, in order to successfully enroll and house each eligible participant.

In keeping an aligned system response to ending homelessness in Austin / Travis County, service providers must follow the local procedures to request community-wide outreach support when any participating or referred household requires contact or engagement. The following requirements are outlined in this document:

- Steps needed prior to and when making an *Outreach Request*.
- Utilizing the *Outreach Request* process before declining or returning a new Coordinated Entry referral for lack of contact, engagement, or participation.
- Utilizing the *Outreach Request* process prior to exiting or terminating a household enrolled in a program.
- Response and timeline per type of *Outreach Request*
- What programs should expect after the *Outreach Request* process for a client is complete.

Contact Standards & Expectations

Per the [Coordinated Entry Written Standards](#), permanent housing and transitional housing programs are expected to contact participants and set an intake date within ten business days of receiving the household's information.

Locating a newly referred household should include a plan for making contact that is informed by documentation in HMIS, including current and historical information, such as shelter stays, regular day location, phone number, email, and associated service providers. If a client has a signed release of information (ROI) on file, program staff can utilize case conferencing staffings or assigned case managers as a pathway to contact the client.

When a participant is referred to a program through Coordinated Entry, programs must ensure due diligence in each method used to contact the household, including number of attempts per contact method. Due diligence should focus on ensuring adequate opportunities for participants, regardless of barriers, to achieve and maintain project enrollment. Efforts are measured by how the program attempted to notify the household of program availability and how many attempts were made.

The following methods of contacts and associated number of attempts are required to establish due diligence:

Method of Contact	Number of Attempts
Participant Phone Number <ul style="list-style-type: none"> • Call w/voicemail • Text 	<i>3 documented attempts required.</i>
Participant Email	<i>1 documented attempt required.</i>
Letter sent by mailing (e.g., physical address or P.O. Box)	<i>1 documented attempt required.</i>
Alternative Contact: Phone Number	<i>3 documented attempts required.</i>
Alternative Contact: Email	<i>1 documented attempt required.</i>
Alternative Contact: Mailing Address (letter)	<i>1 documented attempt required.</i>
Physical Outreach*	<i>1 documented attempt required.</i> *(Programs will attempt at least 1 physical outreach attempt to contact and engage a new referral. Outreach can be completed by the assigned case manager or an outreach staff member if the agency has a Street Outreach program.)

Additional Methods of Searching
<p>Community Institutions:</p> <ul style="list-style-type: none"> • Includes: Online inmate search, contacting hospitals.
<p>Secondary/Back up Contact:</p> <ul style="list-style-type: none"> • Includes Contacting Navigation Centers, Shelters, Outreach Teams.
<p><i>If initial program outreach is unsuccessful, program staff must follow the local procedure to submit an Outreach Request before closing or declining client cases.</i></p>

Outreach Request Form: Initiating Outreach & Request Types

As households are referred to projects for housing and/or supportive services, difficulties in locating or consistently engaging participants may arise. When this occurs, projects are expected to request the appropriate community outreach support in a timely manner. This community outreach support is not intended to replace the project’s engagement and outreach responsibilities, rather, to supplement those efforts so that participants are afforded every opportunity to participate and exit homelessness expediently.

Program staff that have not been able to successfully contact or engage clients must follow the Outreach Request procedures outlined below before declining a referral, exiting a participant, or terminating a household from a program.

In order to initiate community-wide outreach efforts, program staff must submit a request using the **Outreach Request** submission form (*Figure 1*). Providers must include detailed information about the circumstances under which the request is being made. Information provided in the outreach submission will be used to identify and confirm the type of outreach response used.

The Outreach Request Form is used to initiate the following outreach responses:

1. The BOLO Process (“Be On The Lookout”)
2. The Engagement Process (2 sub-types)

BOLO Process

The “*Be On The Lookout*” (BOLO) process is used to leverage community engagement via Street Outreach Teams, Drop-In Centers, Emergency Shelters, and other crisis response teams to locate individuals who have been out of contact with programs. For these efforts to be efficient and effective, BOLO should only be requested when all other project outreach has been exhausted and attempts have been documented. The ECHO Outreach and Navigation Team coordinates weekly emails with key outreach and navigation partners to facilitate the search and location of persons on the BOLO list. For persons whose location is known or is not out of contact, but remain difficult to engage in services, please see the [Engagement Process](#) section.

Initiating the BOLO Process

- In order to request BOLO support, client and program details including contact attempts, should be submitted through the online [Outreach Request Submission Form](#).
- The ECHO Outreach & Navigation Team will review the submitted information and verify due diligence (outlined above in [Contact Standards and Expectations](#)) has been met. If the request meets the threshold review, the ECHO Outreach & Navigation Team will immediately place an outreach alert on the client’s HMIS profile and notify community-wide outreach partners via email on a weekly basis.
- If the participant is located within 30 days of being placed on the BOLO list, the program staff will continue to engage the household in program services.
- If the participant is not located within the initial 30 days of BOLO, they will remain in the BOLO Process until they are located or until they exceed the total 90 day BOLO timeline at which time they are inactivated (see [Inactivation vs. LTR section](#) below).
- If the participant is not located within 30 days of being placed on the BOLO list, the initiating program may decline the Coordinated Entry referral following the “Rejection, Exiting, or Inactivating Referrals” procedure outlined in the Coordinated Entry Written Standards.
- New referrals may be requested at any time during the outreach process as long as additional capacity exists to absorb participants returning within the 30-day timeline.

Note: *If a previously referred household is located between days 31-90 days of the BOLO process, the program may voluntarily choose to resume services with that household.*

Engagement Process

If a provider encounters challenges building rapport or consistently engaging with a participant, the Outreach Request form (Figure 1) may be submitted to request Engagement support. The Engagement process covers two types of scenarios:

1. Client Disengagement
2. Client Refusal

Street Outreach and Navigation providers provide a third-party platform to offer disengaged or refusing households one last opportunity to pursue permanent housing with programmatic support.

Provider Responsibilities for Engagement Requests:

When requesting outreach services through the Engagement Process due to client disengagement or refusal, providers must have completed the following activities beforehand:

1. Provide flexibility in meeting places and times to accommodate client work schedules, childcare, transportation barriers, etc.
2. Explore switching assigned case managers within the program, when applicable
3. Partner with navigation centers and outreach staff to build rapport
4. Inform participants clearly that they will miss a housing opportunity and may be closed from your services if you are unable to meet with them.
5. Ask the client if they still want housing services from an alternative housing program in Austin / Travis County. Alert ECHO's Coordinated Entry Department if so.
6. Set Last Chance Appointment & notify the client.

Engagement Requests: (1) Disengagement

Disengagement applies to participants that are unable to consistently meet with providers, resulting in an inability to progress towards permanent housing solutions. Disengaged clients benefit from outreach support to identify potential barriers to regular program engagement and help to remedy those barriers, communicate them to providers, and avoid program exit / termination when appropriate.

Examples of Disengagement:

- The client misses a pattern of appointments and does not notify staff in advance of missed appointment(s).
- The client avoids interacting with program staff or has been offered several opportunities for flexible appointments (times and settings) and is repeatedly unable to make an in-person appointment.
- The client is in pre-contemplation which is demonstrated by sustain talk and limited change talk- resulting in behaviors that prevent successful permanent housing placement.
 - Example: repeatedly expresses disinterest towards housing services, or an inability to accept housing services
- The client expresses resistance towards required program activities and goals that are directly related to housing
 - Example: Provides conflicting information (expresses desire for employment but refuses all employment related assistance).

Engagement Requests: (2) Refusal

Supporting a Housing First approach, decisions which result in participants' continued homelessness need to be backed by a process of quality assurance. Ensuring opportunity and access to all clients through outreach efforts, engagement and rapport building, and service flexibility are the core goals in responding to client refusals.

While we recognize the ethical rights for all participants to have self-determination, we must also ensure that client choice is being impacted by a positive and therapeutic program approach, which is founded in best practices and informed consent.

Examples of Refusal:

- The client directly states that they do not wish to participate in the program or believe they cannot be successful in program being offered.
- The client states they are not interested in pursuing housing at this time.
- The client expresses inability to participate in services for reasons impossible to be resolved by, or unrelated to, the housing program being offered.

Engagement Requests: Last Chance Appointments

Applies to all Outreach requests for Engagement, including (1) client disengagement and (2) client refusal.

When submitting an Outreach Request for Engagement, program staff are required to provide an appointment date and time, approximately 30 days in the future, to be used as a deadline for engagement- this is called the “Last Chance Appointment”. Program staff should communicate the appointment date and time to the client prior to, or immediately upon submission of an Outreach Request for Engagement. The “Last Chance Appointment” will be communicated to community outreach staff as the final appointment opportunity in which the client must engage with the program staff to avoid project exit or denial.

Providers must follow the following process and timeframe for “Last Chance Appointments,” in order to ensure that clients and outreach providers have been informed of the deadline in which the client will be terminated, and the housing opportunity lost.

- The “Last Chance Appointment” is a day and time of the provider’s choosing, approximately 30 days from outreach request submission, when the client can access and engage with their program Case Manager.
- Last chance appointment details (date, time and address) and warning of upcoming case closure should be clearly communicated to client prior to, or immediately upon completion of an Outreach Request submission.
- Clients may request the “Last Chance Appointment” be rescheduled on an alternative day or time, provided it is within the 30-day timeframe.

Engagement Requests: Re-engagement and Case Closure

- If a program referral or participant successfully re-engages within the 30-day Engagement Request time frame, the housing or intake process should continue from where it left off.
- “*Successful re-engagement*” is defined as the attendance of an in-person appointment with assigned program CM (including video conference if readily accessible by both parties).

- If a program referral or participant cannot be successfully re-engaged within 30 days of Engagement request submission, the accepted housing program referral will be marked “*Declined*,” for the appropriate reason: (1) Refusal “*Client Actively Refused Service*” OR (2) Disengagement “*No Client Follow-up*.”
 - Upon official housing program referral decline, the client’s profile will then be marked inactive -OR- flagged for “Long Term Refusal,” depending on client subpopulation and availability of ongoing resources.

Inactivation vs. Long-Term Refusal

Inactivation

- Inactivation of a client profile occurs when the BOLO or Engagement Outreach process is unsuccessful and a client remains disengaged or out of contact beyond the outreach request timeline.
 - Inactivation of a client in the BOLO process occurs after 90 days of unsuccessful outreach.
 - Inactivation of a client in the Engagement process occurs after 30 days of unsuccessful engagement attempts, *unless* a community service provider alerts ECHO that they will continue engagement efforts to that client ongoing.

If a provider commits to continue engagement attempts to a client beyond the 30-day engagement timeline, that client profile is not inactivated but instead is flagged for Long Term Refusal (LTR).

Long Term Refusal (LTR)

- Long Term Refusal applies to a small group of clients that have disengaged or refused services beyond the engagement outreach timeline but have a service provider attempting engagement with them ongoing.
- LTR clients remain active on prioritization lists but are clearly flagged as LTR and will not be referred to housing programs without case-conferencing with the connected service provider.
- Clients on LTR can be re-referred to housing programs when regular engagement with a community service provider for 2+ weeks is documented and communicated to ECHO Coordinated Entry Department.
- Clients on LTR may be inactivated once the regularly engaged service provider ceases contact or engagement attempts.

Note: *LTR applies only to the Engagement Process, not the BOLO Process.*

Figure 1.

BOLO Request	Engagement Request
<ul style="list-style-type: none">• Purpose: Help find/reach clients who are MIA or out of contact & reconnect them to services.• “Be On The Lookout.”• Names sent to community via weekly list.• 30 days no contact = Closure of housing program referral.• 90 days no contact = Inactivation including closure of all active referrals.	<ul style="list-style-type: none">• Purpose: A third-party, mobile attempt to engage clients for housing services, and/or assist them in making last chance appointment.• Names sent to outreach & navigation providers via weekly list.• Last Chance Appointment: last physical appointment opportunity for client to continue in services.• 30 days no engagement = Closure of current housing program referral AND all active referrals (unless LTR applies).