



**Homeless Services Consortium Board of Directors Special Meeting  
Monday, April 4, 2016  
1:30 pm  
United Way Dane County Board Room A  
AGENDA**

Call to Order

1. Approval of Dane County Written Standards, 2016  
Torrie Kopp Mueller & Maggie Carden  
Co Chairs, Written Standards Committee
  
2. Approval of ETH Timeline Including the Appointment of Review Team  
Proposed Review Team:
  - Sue Wallinger and Jim O'Keefe, City Community Development Division
  - Casey Becker and Todd Campbell, Dane County Dept of Human Services
  - Maggie Carden, Institute for Community Alliances

Adjourn

Tentative Schedule of 2016 Board of Directors Meetings:

*All meetings will be held at 11:00 am at the United Way except 6/24*

April 15, 2016 (4/22 Passover)  
May 20, 2016 (5/27 Fri before Memorial Day)  
June 24, 2016  
July 22, 2016  
August 26, 2016  
September 23, 2016  
October 28, 2016  
November 18, 2016 (11/5 Holiday)  
December 16, 2016 (12/23 Fri before Xmas)

Dane County  
Written Standards  
2016

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# Madison/Dane County Homeless Services Consortium Written Standards

## Introduction

These written standards apply to all publically funded housing and service providers. These standards must consistently be applied for the benefit of all program participants. The local Continuum of Care (CoC), a local planning body that coordinates housing and services funding for homeless families and individuals, encompasses Dane County and is called the Homeless Services Consortium (HSC). These standards do not replace policies and procedures created by homeless services providers, but rather they provide an overall context for programs funded with federal, state and local funding. Programs that receive Continuum of Care Program, Emergency Shelter Grant (ESG), or State of Wisconsin ETH Grant funding must abide by the Written Standards. Programs funded through other sources are highly encouraged to follow these standards.

The Written Standards are developed by the CoC Written Standards Committee. The document is approved by the CoC Board and is presented to the Homeless Services Consortium. The Written Standards are reviewed and updated annually. The Written Standards Committee will send the approved document to agencies receiving CoC Program, ESG and ETH grant funding. The CoC Board will use the Written Standards when evaluating program applications for CoC Program, ESG and ETH grant funding. Programs that fail to abide by the Written Standards will not be approved for future CoC, ESG or ETH funding.

In keeping with the goals and objectives of the Dane County “Community Plan to Prevent and End Homelessness,” all activities provided through the agencies of the Homeless Services Consortium should further the mission of preventing or ending homelessness for households in need.

Homeless housing and service providers must coordinate and integrate activities targeted to homeless people in the Dane County Continuum of Care system. Programs designed to serve homeless and at-risk households must provide a strategic and community-wide system to prevent and end homelessness.

In addition to the services provided by each agency, each program will play an active role in connecting participants to mainstream services, which are services not specifically designated for homeless households. All Consortium agencies agree to coordinate their services with other providers for the benefit of their participants. Examples of these programs include: the Department of Housing and Urban Development (HUD) public housing programs, Section 8 tenant assistance, Supportive Housing for Persons with Disabilities, HOME, Temporary Assistance for Needy Families, Medicaid, Badger Care, Head Start, Social Security, Social Security Disability, Social Security Disability Insurance, and Food Share.

## Section I: General Requirements

### Program Standards

1. In providing or arranging for housing, shelter or services, the program considers the needs of the individual or family experiencing homelessness.
2. The program provides assistance in accessing suitable housing.
3. The program is aligned with the community goals for the Zero: 2016 initiative, the Homeless Services Consortium Plan to Prevent and End Homelessness, and current Department of Housing and Urban Development priorities, including priorities for ending homelessness among specified sub-populations.
4. The Vulnerability Index & Service Prioritization Decision Assistance Tool (VI-SPDAT) or Vulnerability Index & Family Service Prioritization Decision Assistance Tool (VI-F-SPDAT) will be used when screening households for Permanent Supportive Housing and Rapid Re-housing programs. The latest version will be posted on the Homeless Services Consortium website.
5. The full Service Prioritization Decision Assistance Tool (SPDAT) is to be used as a common assessment tool for housing case management and housing programs. The full SPDAT should only be administered by staff trained to do so. SPDAT data should be entered into the Homeless Management Information System (HMIS).
6. Each housing and housing case management program must be aware of and inform households of the educational rights of children and unaccompanied youth in their programs. Materials explaining rights should be provided to applicable households. Program staff will collaborate with the Transition Education Program (TEP) or other school officials to coordinate educational services. Program staff will highly encourage school attendance and will work with households to address any barriers to regular attendance. If attendance and truancy concerns are noted, program staff will communicate/coordinate with school staff.
7. Each program in the CoC will provide accurate and up-to-date information on eligibility criteria for the program; ie. – gender specific, individuals/families. Each agency will provide information to Coordinated Intake, the Placement Group for Zero: 2016, and United Way 211.
8. Each housing and housing case management program in the CoC will use the Mainstream Benefits Checklist. This checklist should be kept in the file for each household and updated annually.
9. Each program will make language translation service available for clients when needed by utilizing available services, such as a language line.

### Case Management Services

#### Minimum Standards

1. The frequency of case management services will vary based on program participant need. Initial contacts with the participant will likely be at least weekly and continued contacts will be at least monthly.
2. Case management services include, but are not limited to: developing an individualized housing/service plan, assistance with obtaining and maintaining housing, counseling, employment referrals, education, referral and coordination of services, accessing mainstream benefits, and coordinating with schools.
3. Case management service plans will incorporate the participants' expectations and choices for short and long-term goals.

4. Together, the program and program participants will develop a schedule for reassessing the individualized service plan. The reassessments will occur at least quarterly.

## Personnel

All programs shall be adequately staffed by qualified personnel to ensure quality service delivery, effective program management, and the safety of program participants.

### Minimum Standards

1. The agency selects, for its service staff, only those employees and/or volunteers with appropriate knowledge, or experience, for working with individuals and families experiencing homelessness and/or other issues that put individuals or families at risk of housing instability.
2. The program provides training to all paid and volunteer staff on both the policies and procedures employed by the program and on specific skill areas as determined by the program.
3. All paid and volunteer service staff participates in ongoing and/or external training, and development to further enhance their knowledge and ability to work with individuals and families experiencing homelessness and/or other issues that put individuals or families at risk of housing instability. Examples of training topics include, but are not limited to, harm reduction, trauma informed care, housing first and racial justice.
4. For programs that use HMIS, all HMIS users must abide by the standard operating procedures found in the HMIS Policies and Procedures manual. Additionally, users must adhere to the privacy and confidentiality terms set forth in the User Agreement.
5. Agency staff with responsibilities for supervision of the casework, counseling, and/or case management components have, at a minimum, a bachelor's degree in a human service-related field and/or experience working with individuals and families experiencing homelessness and/or other issues that put individuals or families at risk of housing instability.
6. Staff with supervisory responsibilities for overall program operations shall have, at a minimum, a bachelor's degree in a human service-related field and/or demonstrated ability and experience that qualifies them to assume such responsibility.
7. All staff has a written job description that, at a minimum, addresses the major tasks to be performed and the qualifications required for the position.
8. The program operates under affirmative action and civil rights compliance plans or letters of assurance.
9. Case supervisors review current cases and individual service plans on a regular and consistent basis to ensure quality, coordinated services.

## Housing First

Housing First is a proven method of ending all types of homelessness, and is the most effective approach to ending chronic homelessness. Housing First offers individuals and families experiencing homelessness immediate access to permanent affordable, or supportive housing, without clinical prerequisites like completion of a course of treatment or evidence of sobriety and with a low-threshold for entry. Housing First permanent supportive housing models are typically designed for individuals or families who have complex service needs, who are often turned away from other affordable housing settings, and/or who are the least likely to be able to proactively seek and obtain housing on their own. Housing First approaches for rapid re-housing provide quick access to permanent housing through interim rental assistance and supportive services on a time-limited basis. Rapid re-housing programs are designed to

have low barriers for program admission, and to serve individuals and families without consideration of past rental, credit or financial history. The Housing First approach has also evolved to encompass a community-level orientation to ending homelessness in which barriers to housing entry are removed and efforts are in place to prioritize the most vulnerable and high-need people for housing assistance.

#### System-wide Housing First Orientation for the Homeless Services Consortium

- Emergency shelter, street outreach providers, and other parts of crisis response system are aligned with Housing First and recognize their roles to encompass housing advocacy and rapid connection to permanent housing. Staff in crisis response system services operate under the philosophy that all people experiencing homelessness are housing ready.
- Strong and direct referral linkages and relationships exist between crisis response system (emergency shelters, street outreach, etc.) and rapid re-housing and permanent supportive housing. Crisis response providers are aware and trained in how to assist people experiencing homelessness to apply for and obtain permanent housing.
- The HSC has a unified, streamlined, and user-friendly community-wide process for applying for rapid re-housing, permanent supportive housing and/or other housing interventions.
- The HSC has a coordinated assessment system for matching people experiencing homelessness to the most appropriate housing and services, and where individuals experiencing chronic homelessness and extremely high need families are matched to permanent supportive housing/Housing First.
- The HSC has a data-driven approach to prioritizing highest need cases for housing assistance whether through analysis of lengths of stay in Homeless Management Information Systems, vulnerability indices, or data on utilization of crisis services.
- Policymakers, funders, and providers collaboratively conduct planning and raise and align resources to increase the availability of affordable and supportive housing and to ensure that a range of affordable and supportive housing options and models are available to maximize housing choice among people experiencing homelessness. The HSC will recommend a resolution for the City of Madison and Dane County to adopt the Written Standards.
- Policies and regulations related to permanent supportive housing, social and health services, benefit and entitlement programs, and other essential services, support and do not inhibit the implementation of the Housing First approach. For instance, eligibility and screening policies for benefit and entitlement programs or housing do not require the completion of treatment or achievement of sobriety as a prerequisite.

#### Minimum Standards<sup>1</sup>

1. Program admission/tenant screening and selection practices promote the acceptance of applicants regardless of their sobriety or use of substances, completion of treatment, and participation in services.
2. Applicants are not rejected on the basis of poor credit or financial history, poor or lack of rental history, minor criminal convictions, or behaviors that indicate a lack of “housing readiness.” Although applicants may be rejected due to convictions for violent criminal activity, agencies will make all effort possible to remove barriers to program enrollment. A rejection is only

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<sup>1</sup> Housing First requirements taken from *The Housing First Checklist: A Practical Tool for Assessing Housing First in Practice*, United States Interagency Council Homelessness, [http://usich.gov/resources/uploads/asset\\_library/Housing\\_First\\_Checklist\\_FINAL.pdf](http://usich.gov/resources/uploads/asset_library/Housing_First_Checklist_FINAL.pdf).



appropriate when an applicant presents a direct threat to the health and safety of program staff and residents and that threat cannot be ameliorated.

3. Housing First accepts referrals directly from shelters, street outreach, drop-in centers, and other parts of crisis response system frequented by vulnerable people experiencing homelessness.
4. Supportive services emphasize engagement and problem-solving over therapeutic goals. Services plans are highly tenant-driven without predetermined goals. Participation in services or program compliance is not a condition of permanent supportive housing tenancy. Rapid re-housing programs may require case management as condition of receiving rental assistance as required by state or federal funding.
5. Use of alcohol or drugs in and of itself (without other lease violations) is not considered a reason for eviction.

### Recommended Program Practices

- If a participant tenancy is in jeopardy, every effort is made to offer a transfer to a tenant from one housing situation to another. Whenever possible, eviction back into homelessness is avoided.
- Tenant selection plan for permanent housing includes a prioritization of eligible tenants based on criteria other than “first come/first serve” such as duration/chronicity of homelessness, vulnerability, or high utilization of crisis services.
- Tenants cannot be required to have income for program eligibility, except in cases in which program funding and operation is dependent upon participant income paid for rent.
- Tenants in permanent housing are given reasonable flexibility in paying their tenant share of rent (after subsidy) on time and are offered special payment arrangements (e.g. a payment plan) for rent arrears and/or assistance with financial management (including representative payee arrangements).
- Case managers/service coordinators are trained in and actively employ evidence-based practices for client/tenant engagement such as motivational interviewing and client-centered counseling.
- Services are informed by a harm reduction philosophy that recognizes that drug and alcohol use and addiction are a part of tenants’ lives, where tenants are engaged in non-judgmental communication regarding drug and alcohol use, and where tenants are offered education regarding how to avoid risky behaviors and engage in safer practices.
- Building and apartment units may include special physical features that accommodate disabilities, reduce harm, and promote health among tenants. These may include elevators, stove-tops with automatic shut-offs, wall-mounted emergency pull-cords, ADA wheelchair compliant showers, sound-proofing cushions, etc.
- In the event a provider seeks to terminate services and/or evict a program participant, a notice of termination shall include information of local legal services providers.

### Program Evaluation for Housing First<sup>2</sup>

In an effort to move to a system-wide orientation to ending homelessness through the use of Housing First principles, the HSC has included the following section to review agency and program adoption of Housing First. Agencies and programs should follow the guidelines below. The guidelines have been created to minimize as many barriers to housing as possible, recognizing that this may not be feasible

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<sup>2</sup> Program Evaluation taken from:

<http://www.allchicago.org/sites/allchicago.org/files/2015%20Project%20Component%20-%20FINAL.pdf>

under all circumstances. In some cases, there may be other entities, including, but not limited to, private landlords, the criminal justice system, and funders, that place additional tenant requirements upon program participants.

*The guidelines set forth under this section have been created by the HSC in an effort to promote agency-to-agency review and technical assistance within the HSC for all community programs. All review conducted under this section will be conducted internally by the HSC.*

- Does the project provide and explain the written eligibility criteria, which are in line with the Housing First philosophy, to consumers?
- Does the project have admission/tenant screening and selection practices that promote the acceptance of applicants regardless of their sobriety, use of substances, completion of treatment, or participation in services?
- Does the project accept consumers who are diagnosed with or show symptoms of a mental illness?
- Does the project have and follow a written policy for the following:
  - a. Stating that taking psychiatric medication and/or treatment compliance for mental illness is not a requirement for entry into or continued participation in the project?
  - b. Not rejecting participants based on previous criminal history that is not relevant to participation in the program, and accepting consumers regardless of minor criminal convictions to the project?
  - c. Not rejecting participants based on prior rental history or past evictions to the project?
  - d. Accepting consumers regardless of lack of financial resources to the project, unless program operation is dependent upon participant income?
  - e. Accepting consumers regardless of past non-violent rule infractions within the agency's own program and/or in other previous housing programs to the project?
- Upon entry to the project, the project agrees to allow consumers to remain in the project even if they require an absence of 90 days or less due to the reasons outlined below, unless otherwise prohibited by law or funder policy:
  - a. Substance use treatment intervention
  - b. Mental health treatment intervention
  - c. Hospitalization and short-term rehabilitation
  - d. Incarceration

## Coordinated Entry System

Coordinated Entry is a centralized system for people with a housing crisis to access local housing information and referral to appropriate services. Participants will be assessed for the community wide prioritization lists for Rapid Rehousing and Permanent Supportive Housing.

Assessments kept in HMIS include the client profile, Vulnerability Index & Service Prioritization Decision Assistance Tool (VI-SPDAT) or Vulnerability Index & Family Service Prioritization Decision Assistance Tool (VI-F-SPDAT), length of homelessness, chronic homelessness and veteran's status. Agencies that use HMIS are able to enter the VI-SPDAT and make the participant referral to the appropriate prioritization list. The lists are kept up to date in HMIS. Agencies that do not use HMIS can partner with Coordinated Entry staff to make alternate arrangements for referring participants to the prioritization list.

Participants can access the system through the toll free number (1-855-510-2323), which includes prompts to access financial assistance, information and referral, assessment, youth services, access to shelters for single men, single women, and families, and services for survivors of domestic violence. Participants can use the system through a “no wrong door” approach because all agencies will connect people to the system. The system is well advertised in the community. The toll free housing crisis hotline number is posted on all CoC agency websites. Participants can also access services through the Homeless Service’s Consortium website ([www.danecountyhomeless.org](http://www.danecountyhomeless.org)). Coordinated Entry is the avenue for managing the prioritization lists for Rapid Rehousing and Permanent Supportive Housing. Coordinated Entry staff track requirements for CoC housing and shelter services, including participant eligibility requirements. Agencies are required to provide accurate and up to date information on populations served and other requirements. Coordinated Entry staff will make this information publicly available on the HSC website and disseminate this information to HSC members bi-annually.

### Minimum Standards

1. **Prioritization:** Ensure that the most vulnerable participants are served first by using the VI-SPDAT, length of homelessness and chronic homeless status.
2. **Low Barrier:** Coordinated Entry staff partner with programs that have low barriers. Participants are served through Coordinated Entry regardless of income level, drug or alcohol use and criminal background.
3. **Housing First Orientation:** The purpose of the system is to house participants as quickly as possible
4. **Person-Centered:** Participants can accept or deny services from any agency without losing their spot on the prioritization list.
5. **Shelter Access:** The toll free number is available 24 hours/day to access shelter.
6. **Fair and Equal Access:** All participants in the CoC geographic area can access services through the toll free number and the “no wrong door” approach. Services are offered in English, Spanish and Hmong. A language line is used for other languages.
7. **Standardized Assessment:** All agencies will use the VI-SPDAT.
8. **Inclusive:** All subpopulations can access Coordinated Entry the same way, but will be directed to different access points for effective services.
9. **Referral Protocols:** Coordinated Entry will refer participants to appropriate shelter and housing services including ESG and CoC funded projects. CoC and ESG funded projects are required to fill housing vacancies using the prioritization list in HMIS. All other projects are encouraged to use the community lists. Programs accepting people from Coordinated Entry should remove people from the HMIS prioritization list.
10. **Outreach:** Street outreach efforts will include conducting the VI-SPDAT and ensuring that names are placed on the appropriate prioritization lists.
11. **Full Coverage:** Coordinated Entry will serve any participant experiencing homelessness or at risk of homelessness in Dane County.

## Termination and Grievance Procedures

### Minimum Standards

1. Programs should terminate assistance only in the most severe cases, utilizing the housing first philosophy. (See Housing First – Recommended Practices)

2. All agencies providing services with CoC and ESG funds shall be required to have a termination and grievance policy. Policies must allow an applicant to formally dispute an agency decision on *eligibility to receive assistance*. The policy must include the method an applicant would be made aware of the agency's grievance procedure and the formal process for review and resolution of the grievance.
3. All agencies must have policies that allow a program participant to formally dispute an agency decision to *terminate assistance*. The policy must include the method that a written notice would be provided containing clear statement of reason(s) for termination, which shall include a detailed statement of facts, the source of the information upon which it was based, and the participant's right to advance review of the agency's file and all evidence upon which the decision was based; a review of the decision in which the program participant is given the opportunity to present evidence (written or orally) before a person other than the person who made or approved the termination decision; and a prompt written notice of the final decision to the program participant. The agency has the burden to prove the basis for their decision by a preponderance of the evidence. The decision shall not be based solely on hearsay.
4. If an agency has a website, they must publicly post their termination and grievance procedures.
5. See the Emergency Shelter section for details on how these programs should handle termination and grievances.
6. If a program participant is terminated from a program in which the agency owns the unit, the program will retain the participant's property for a minimum of 30 days before discarding.

## Record Keeping Requirements

Agencies are responsible for knowing the reporting requirements for each funder and program. Documentation for the effective delivery and tracking of service will be kept up to date and the confidentiality of program participants will be maintained.

### Minimum Standards

1. Each participant file should contain, at a minimum, information required by funders, participation agreements, service plans, case notes, information on services provided both directly and through referral and any follow-up and evaluation data that are compiled.
2. When required by funders, client information must be entered into HMIS in accordance with the data quality, timeliness and additional requirements found in the HMIS Policies and Procedures manual. At a minimum, programs must record the date the client enters and exits the program, and update the client's information as changes occur.
3. Financial recordkeeping requirements include documentation of: all costs charged to the grant, funds being spent on allowable costs, the receipt and use of program income, compliance with expenditure limits and deadlines and match contributions.
4. The program will maintain each participant file in a secure place and shall not disclose information from the file without the written permission of the participant as appropriate except to project staff and other agencies as required by law. Participants must give informed consent to release any client identifying data to be utilized for research, teaching and public interpretation.
5. Files must be saved for a minimum of six years.

## Section II: Program Requirements

### Street Outreach

Street outreach workers engage with unsheltered homeless people in order to connect them with emergency shelter, housing, or other critical services. Street Outreach services are provided in non-facility-based settings for unsheltered homeless people who are unwilling or unable to access emergency shelter, housing, or an appropriate health facility.

#### Eligibility Criteria

- Participants must meet category 1 – Literally Homeless as outlined by the HUD definition of homelessness.

#### Minimum Standards

1. Support services provided must be focused on:
  - a. Getting participants housed
  - b. Linking participants to mainstream benefits and resources
  - c. Maintaining benefits for which the participants are eligible
2. Participant engagement – outreach workers will locate, identify, and build relationships with unsheltered homeless people and engage them for the purpose of providing immediate support, intervention, and connections with homeless assistance programs and/or mainstream social services and housing programs.
3. Programs will address urgent physical needs, such as providing meals, blankets, clothes, or toiletries.
4. Programs will provide assistance with navigating the homeless service system, including linking the participant to coordinated entry, conducting the VI-SPDAT assessment and referring the participant to the permanent housing priority list.
5. Programs will assist with obtaining housing.

### Emergency Shelter

The purpose of emergency shelter is to provide a safe, nighttime residence for homeless persons, and help them find safe affordable housing outside the shelter. Emergency shelters do not require occupants to sign leases or occupancy agreements.

#### Eligibility Criteria

- Participants must meet the HUD definition of homelessness.

#### Minimum Standards

1. Shelter programs must create policies and procedures that provide a safe environment for shelter guests and staff; policies and procedures may vary depending on the shelter population being served. These policies and procedures must be explained to applicants prior to moving into the shelter. In addition, they must be posted in the shelter and on the agency's website.

2. Supportive services are available to assist persons in obtaining housing either on-site or through a day-time resource center. All shelter residents are notified of the availability of support services and how to access the services.
3. Shelter is available every day of the year. In the instances where it is necessary to temporarily close a shelter for rehabilitation or major maintenance work, as much notice as possible should be provided guests, and efforts should be made to find a short-term replacement facility.
4. Shelter guests will be treated by staff and volunteers with respect and dignity and will receive a welcoming, safe and non-intimidating environment.
5. The age and/or gender of a child under age 18 must not be used as a basis for denying any family's admission to an emergency shelter.
6. Each shelter will have a policy of respect for each individual's self-identified gender. Guests who request shelter services will be admitted to the shelter operated for the gender to which an individual identifies themselves. Transgender and transsexual guests will be offered the same services and resources as all other guests as long as resident safety can be maintained. While shelter staff will take reasonable steps to accommodate specific needs, it may not be possible to segregate the individual from the rest of the shelter population. Staff will not share or in any way advertise the fact that certain guests may have identified themselves as transgendered/transsexual.
7. All individuals or groups of individuals regardless of age, gender identification, sexual orientation, and marital status identifying as a family at a family shelter must be served as a family. Families at family shelters must not be separated when entering shelter. There can be no inquiry, documentation requirement or "proof" related to family status, gender identification and/ or sexual orientation. The prohibition on inquiries or documentation does not prohibit inquiries related to an individual's sex for the limited purpose of determining placement in temporary, emergency shelters that are limited to one sex because they have shared bedrooms or bathrooms, or for determining the number of bedrooms to which a household may be entitled. The age of a child under 18 must not be used as a basis for denying any family's admission to a program that uses ESG or THP funding or services if those programs serve families with children under age 18.<sup>3</sup>
8. There is no charge to a shelter guest for emergency shelter.
9. Documentation (including Photo ID, birth certificate, etc.) is not a barrier to shelter. Identification may be requested when safety is a factor.
10. Guests may be asked to leave for a period of time in the event of serious infraction and only in the most severe cases such as for behavior that is deemed seriously threatening or harmful to other guests and staff. Banning a shelter guest is allowed only when all other options have been explored and a ban is necessary to protect the health and safety of staff and guests. All shelter guests will be notified of the agency's grievance policy. When it is not possible to serve a guest because of the guest's behavior, efforts will be made by shelter staff to assist the guest in finding alternatives. See Dane County Ordinance 30.04 for details on the procedure for discontinuing shelter services to a guest.

#### Access to Shelter

- All shelters will participate in coordinated entry. All shelters are highly encouraged to assess clients for appropriate permanent housing placement using the VI-SPDAT. If shelters cannot

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<sup>3</sup> From (24 CFR § 576.102 Prohibition against involuntary family separation) (24 CFR § 5.403 Definitions- Family) (24 CFR §570.3 Definitions - Household) (24 CFR 5.105(a) Nondiscrimination and equal opportunity)

assess clients due to lack of shelter resources, shelters must refer clients to the coordinated entry system for assessment, and explain to clients the process of accessing housing programs.

- All shelters are required to notify clients about how to access coordinated entry.

#### Prioritization for Family Shelter

- Emergency Family Shelter (EFS): provides shelter for 18 people on a nightly basis. Priority is given to families with newborns (3 months and younger) and then to families who were denied the night before. As many families as possible are accommodated, based on space available. Other factors that are accounted for are VI-F-SPDAT score and where the family sleeps when not accepted in to EFS.
- Family Shelter: Families are prioritized for Family shelter based on VI-F-SPDAT score, family size and the number of beds available, length of time on the priority list with weekly check in, and also by eligibility/compatibility per shelter.

#### **Shelter for Families with Children**

The Salvation Army is the point of entry for shelter for homeless families. Shelter is provided on-site at The Salvation Army building on East Washington Avenue, at the YWCA on East Mifflin Street, at The Road Home and at local motels. If these options are full, homeless families will be offered a spot at the Emergency Shelter overflow program which is a night-time only shelter located at The Salvation Army shelter building as space allows. All families access the shelter system via coordinated entry to determine eligibility and availability.

#### **Shelter for Single Men**

Porchlight is the point of entry for nighttime shelter for homeless single men. The main facility of the Drop-In-Shelter (DIS) is located at Grace Church on West Washington Avenue. Other downtown churches serve as a year-round overflow and a seasonal over-flow space.

#### **Shelter for Single Women**

The Salvation Army is the point of entry for shelter for homeless single women. The Salvation Army operates a first come, first serve, nighttime-only shelter in the same building as the family shelter on East Washington Avenue.

#### **Shelter for Unaccompanied Youth**

Briarpatch Youth Services is the point of entry for homeless youth, and has an 8-bed shelter for youth ages 13-17.

#### **Shelter for Persons with Immediate Safety Needs**

Individuals and families with children who have an immediate need for shelter to escape domestic violence are provided housing and services through Domestic Abuse Intervention Services (DAIS). When shelter beds are not available, participants may be assisted through temporary placement in local motels or referred to other community resources. Eligible residents may be single men, single women, or adults with children who are experiencing intimate partner violence.

## Medical Shelter Vouchers

Individuals and families are eligible for emergency medical shelter if they are homeless and their present medical condition compromises their ability to safely reside in a traditional shelter setting. Participants must receive a referral by their healthcare provider. Placement in a local motel is subject to availability of funds and program eligibility, including but not limited to, fragility of condition. Medical shelter is intended for a short period of time and is not intended for people with chronic conditions. At this time, medical shelter vouchers are accessed directly through the Salvation Army.

## Transitional Housing

Transitional Housing (TH) facilitates the movement of homeless individuals and families to permanent housing within 24 months of entering TH. Programs will provide safe, affordable housing that meets participants' needs.

### Eligibility Criteria

- Participants must meet categories 1 - Literally Homeless, 2 - At Imminent Risk, or 4 - Fleeing Domestic Violence as outlined by the HUD definition of homelessness.
- By 2017, all TH program participants must fall into at least one of the categories below:
  - a. individuals or head of household struggling with a substance use disorder
  - b. individuals in early recovery from a substance use disorder who may desire more intensive support to achieve their recovery goals
  - c. survivors of domestic violence or other forms of severe trauma who may require and prefer the security and onsite services provided in a congregate setting to other available housing options
  - d. unaccompanied and pregnant or parenting youth (age 16-24) who are unable to live independently (i.e. unemancipated minors) or who prefer a congregate setting with access to a broad array of wraparound services to other available housing options
  - e. individuals listed on a sex offender registry
  - f. people re-entering the community after a stay in jail or prison
  - g. large families (6 or more people)

### Minimum Standards

1. Maximum length of stay cannot exceed 24 months.
2. Assistance in transitioning to permanent housing must be provided. A VI-SPDAT must be completed and household name added to appropriate priority list if not done already.
3. Intensive support services must be provided through the duration of stay in transitional housing.
4. Program participants in transitional housing must enter into a lease agreement for a term of at least one month. The lease must be automatically renewable upon expiration, except on prior notice by either party, up to a maximum term of 24 months.
5. Case management staff must have skills and experience to meet the unique needs of the population served.

### Minimum Performance Benchmarks for TH Projects

- 80% or more of all participants will exit to a permanent housing situation



- 63% or more of all participants will have mainstream (non-cash) benefits at exit from program
- 54% or more of adult participants will increase income from all sources

## Permanent Supportive Housing

Under the HUD CoC Program Interim Rule, Permanent Supportive Housing is one of the eligible program components. Permanent supportive housing (PSH) is safe, affordable housing, the purpose of which is to provide housing without a designated length of stay.

### Eligibility Criteria

- Participants must meet categories 1- Literally Homeless or 4 – Fleeing Domestic Violence as outlined by the HUD definition of homelessness.
- PSH can only provide assistance to individuals with disabilities and families in which at least one adult or child has a disability
- Referrals for PSH will be generated through the CoC Coordinated Entry process and the CoC-wide PSH priority lists for families and individuals.

### Participant Prioritization Requirements<sup>4</sup>

- Participants will be prioritized for eligibility based on their chronic homeless status, length of time homeless, and VI-SPDAT or VI-F-SPDAT score.

**First Priority - Chronically Homeless Individuals and Families with the Longest History of Homelessness and with the Most Severe Service Needs.**

A chronically homeless individual or head of household as defined in 24 CFR 578.3 for whom both of the following are true:

- The chronically homeless individual or head of household of a family has been homeless and living in a place not meant for human habitation, a safe haven, or in an emergency shelter for at least 12 months either continuously or on at least four separate occasions in the last 3 years, where the cumulative total length of the four occasions equals at least 12 months; and
- The CoC or CoC Program recipient has identified the chronically homeless individual or head of household, who meets all of the criteria in paragraph (1) of the definition for chronically homeless, of the family as having severe service needs<sup>5</sup>.

**Second Priority - Chronically Homeless Individuals and Families with the Longest History of Homelessness.**

A chronically homeless individual or head of household, as defined in 24 CFR 578.3, for which both of the following are true:

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<sup>4</sup> The order of priority follows the *Notice on Prioritizing Persons Experiencing Chronic Homelessness and Other Vulnerable Homeless Persons in Permanent Supportive Housing and Recordkeeping Requirements for Documenting Chronic Homeless Status*, U.S. Department of Housing and Urban Development, July 28, 2014.  
<http://portal.hud.gov/hudportal/documents/huddoc?id=14-12cpdn.pdf>.

<sup>5</sup> See Section I.D.3. of the HUD Notice for definition of severe service needs.

- i. The chronically homeless individual or head of household of a family has been homeless and living in a place not meant for human habitation, a safe haven, or in an emergency shelter for at least 12 months either continuously or on at least four separate occasions in the last 3 years, where the cumulative total length of the four occasions equals at least 12 months; and,
- ii. The CoC or CoC program recipient has not identified the chronically homeless individual or the head of household, who meets all of the criteria in paragraph (1) of the definition for chronically homeless, of the family as having severe service needs.

**Third Priority - Chronically Homeless Individuals and Families with the Most Severe Service Needs.**

A chronically homeless individual or head of household as defined in 24 CFR 578.3 for whom both of the following are true:

- i. The chronically homeless individual or head of household of a family has been homeless and living or residing in a place not meant for human habitation, a safe haven, or in an emergency shelter on at least four separate occasions in the last 3 years, where the total length of those separate occasions equals less than one year; and
- ii. The CoC or CoC program recipient has identified the chronically homeless individual or the head of household, who meets all of the criteria in paragraph (1) of the definition for chronically homeless, of the family as having severe service needs.

**Fourth Priority - All Other Chronically Homeless Individuals and Families.**

A chronically homeless individual or head of household as defined in 24 CFR 578.3 for whom both of the following are true:

- i. The chronically homeless individual or head of household of a family has been homeless and living in a place not meant for human habitation, a safe haven, or in an emergency shelter for at least four separate occasions in the last 3 years, where the cumulative total length the four 8 occasions is less than 12 months; and
- ii. The CoC or CoC program recipient has not identified the chronically homeless individual or the head of household, who meets all of the criteria in paragraph (1) of the definition for chronically homeless, of the family as having severe service needs.

Minimum Standards

1. There can be no predetermined length of stay for a PSH project.
2. Supportive services designed to meet the needs of the project participants must be made available to the project participant throughout the duration of stay in the PSH project.
3. Project participants in PSH must enter into a lease agreement that is terminable for cause for an initial term of at least one year. The lease must be automatically renewable upon expiration for a minimum term of one month, except on prior notice by either party.
4. Turnover beds in PSH projects will be prioritized for chronically homeless participants.
5. PSH project will use housing first approaches.

Access to PSH Projects

- All referrals for PSH projects will come through the coordinated entry system and the CoC-wide PSH priority lists for families and individuals.

### Minimum Performance Benchmarks for PSH Projects

- 80% or more of participants remain stable in PSH for at least one year or exit to a different permanent housing situation
- 20% or more of adult participants will have income from sources other than employment
- 54% or more of adult participants will increase income for sources other than employment
- 75% or more of all participants will have mainstream benefits at exit from the project
- 20% or more of adult participants will have employment income

### **Rapid Re-housing**

Rapid rehousing is an intervention designed to help individuals and families exit homelessness as quickly as possible, return to permanent housing, and achieve stability in that housing. Rapid re-housing assistance is offered without preconditions (such as employment, income, absence of criminal record, or sobriety) and the resources and services provided are typically tailored to the unique needs of the household.

The core components of a rapid re-housing program are housing identification and relocation, short-and/or medium term rental assistance and move-in (financial) assistance, and case management and housing stabilization services.

Program staff are expected to remain engaged with the households from first contact to program exit (no more than 24 months of rental assistance, in addition to up to 6 months of continued case management), using a progressive engagement approach and tailoring services to the needs of the household in order to assist the household to maintain permanent housing. (24 CFR 578.37 and *Core Components of Rapid Re-Housing*, National Alliance to End Homelessness)

### Eligibility Criteria

- Participants must meet categories 1- Literally Homeless or 4 – Fleeing Domestic Violence as outlined by the HUD definition of homelessness.
- If the household meets category 4, they must also reside in one of the places set forth in category 1 at the time eligibility is determined. Homeless Verification form must be retained in the household's file.
- The participant's household annual income must be at or below 30% CMI.
- The participant must be assessed using the VI-SPDAT or VI-F-SPDAT. A copy of the assessment shall be retained in the participant's file.
- Participants must lack sufficient resources and support networks necessary to retain housing without rapid rehousing assistance (24 CFR 578.37(E)).
- Participants will be prioritized based on VI-SPDAT or VI-F-SPDAT score and length of time homeless. Youth ages 18-21 will be prioritized.

### Minimum Standards

1. The maximum length of program participation is 24 months.
2. Supportive services designed to meet the needs of the project participants must be made available to the project participant throughout the duration of stay in the RRH project.

3. Project participants in RRH must enter into a lease agreement that is terminable for cause for an initial term of at least one year. The lease must be automatically renewable upon expiration for a minimum term of one month, except on prior notice by either party.
4. RRH programs may provide move-in costs.
5. RRH project will use Housing First approaches.
6. Financial assistance and case management should be based on a household's individual needs using progressive engagement. Assistance should be offered using a light touch; start with a small amount of assistance and increase it if needed.
7. RRH programs will connect households with community resources and mainstream benefits to allow for individual resources to be used for housing costs.

#### Access to Rapid Re-housing

- All referrals for RRH projects will come through the coordinated entry system and the HSC community RRH priority lists for families and individuals.

#### Minimum Performance Benchmarks for RRH Projects

- Average shelter length of stay less than 45 days.
- Average time from program entry to housing placement is 60 days.
- Referral to RRH Priority List within 7 days of emergency shelter entry or assessment for families and individuals living on the streets or in a place not meant for human habitation.
- 80% of participants will remain in permanent housing as of the end of the operating year or exiting to permanent housing during the operative year
- 80% of adult participants will maintain or increase their total income as of the end of the operating year or program exit.

## DEFINITION OF HOMELESSNESS

### §583.5 Homeless Definition

- (1) An individual or family who lacks a fixed, regular and adequate nighttime residence, meaning:
  - (i) An individual or family with a primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings, including a car, park, abandoned building, bus or train station, airport, camping ground;
  - (ii) An individual or family living in a supervised publicly or privately operated shelter designated to provide temporary living arrangement (including congregate shelters, transitional housing, and hotels and motels paid for by charitable organizations or by federal, state, or local government programs for low income individuals); or
  - (iii) An individual who is exiting an institution where he or she resided for 90 days or less and who resided in an emergency shelter or place not meant for human habitation immediately before entering that institution;
- (2) An individual or family who will imminently lose their primary nighttime residence, provided that:
  - (i) The primary nighttime residence will be lost within 14 days of the date of application for homeless assistance;
  - (ii) No subsequent residence has been identified; and
  - (iii) The individual or family lacks the resources or support networks, e.g., family, friends, faith-based or other social networks, needed to obtain other permanent housing;
- (3) Unaccompanied youth under 25 years of age, or families with children and youth, who do not otherwise qualify as homeless under this definition, but who:
  - (i) Are defined as homeless under section 387 of the Runaway and Homeless Youth Act (42 U.S.C. 5732a), section 637 of the Head Start Act (42 U.S.C. 9832), section 41403 of the Violence Against Women Act of 1994 (42 U.S.C. 14043e-2), section 330(h) of the Public Health Service Act (42 U.S.C. 254b(h)), section 3 of the Food and Nutrition Act of 2008 (7 U.S.C.2012), section 17(b) of the Child Nutrition Act of 1966 (42 U.S.C. 1786(b)), or section 725 of the McKinney-Vento Homeless Assistance Act (42 U.S.C. 11434a);
  - (ii) Have not had a lease, ownership interest, or occupancy agreement in permanent housing at any time during the 60 days immediately preceding the date of application for homeless assistance;
  - (iii) Have experienced persistent instability as measured by two moves or more during the 60-day period immediately preceding the date of applying for homeless assistance; and
  - (iv) Can be expected to continue in such status for an extended period of time because of chronic disabilities, chronic physical health or mental health conditions, substance addiction, histories of domestic violence or childhood abuse (including neglect), the presence of a child

or youth with a disability, or two or more barriers to employment, which include the lack of a high school degree or General Education Development (GED), illiteracy, low English proficiency, a history of incarceration or detention for criminal activity, and a history of unstable employment;

Or

(4) Any individual or family who:

- (i) Is fleeing, or is attempting to flee, domestic violence, dating violence, sexual assault, stalking, or other dangerous or life-threatening conditions that relate to violence against the individual or a family member, including a child, that has either taken place within the individual's or family's primary nighttime residence or has made the individual or family afraid to return to their primary nighttime residence;
- (ii) Has no other residence; and
- (iii) Lacks the resources or support networks, e.g., family, friends, and faith-based or other social networks, to obtain other permanent housing.

## List of Acronyms

CE – Coordinated entry

CoC – Continuum of Care

EFS – Emergency Family Shelter

ESG – Emergency Solutions Grant

ETH – Emergency Solutions Grant/Transitional Housing Program/Homeless Prevention Program

HMIS – Homeless Management Information System

HSC – Homeless Services Consortium

HUD – Department of Housing and Urban Development

PSH – Permanent supportive housing

RRH – Rapid Re-housing

SPDAT – Service Prioritization Decision Assistance Tool

TH – Transitional housing

VA – Department of Veterans Affairs

VI-SPDAT – Vulnerability Index-Service Prioritization Decision Assistance Tool

VI-F-SPDAT – Vulnerability Index-Family Service Prioritization Decision Assistance Tool

## ETH 2016-17 Application Process

Calendar as of 3/28/16

DATE	BODY/RESPONSIBILITY	ACTION
Thurs. March 31	ETH Planning Committee	Agenda: <ul style="list-style-type: none"> <li>• Set priorities</li> <li>• Review Written Standards</li> <li>• Go over Instructions</li> <li>• Discuss Continuum Performance Application</li> </ul>
Fri. April 1	CDD Staff (SW, JO)	Complete memo to Common Council (and CDBG Committee) proposed process to solicit an approve proposals that will make up the City's application to DOA/Division of Energy, Housing and Community Resources
Mon. April 4	HSC Board of Directors	Approve HSC Written Standards and Proposal for Review of Proposals and the Make-up of Review Team for ETH Application
Thurs. April 7	CDBG Committee	Agenda item – Discussion of ETH Application Process and Review Team
Fri. April 8, NOON	ETH Agencies Applying for ETH Funds	Submit completed Proposal(s) to Sue Wallinger swallinger@cityofmadison.com
Mon. April 11	CDD Staff (SW)	Send proposals to ETH Application Review Panel; Proposed Panel – Jim O'Keefe, Casey Becker, Todd Campbell, Sue Wallinger, Maggie Carden. CDD determines that all applications meet the minimum criteria for funding.
	CDD Staff (JO, SM, SW, JS, HG)	Resolution due by close of day to Jen; resolution deadline is Wed. April 13
Thurs. April 14	ETH Review Committee	Meets to review scoring of applications and makes recommendation for BoD to approve on Fri. April 15.
Fri. April 15	HSC Board of Directors	HSC BoD Meeting agenda includes certification of specific proposals to forward to DOA/DEHCR. Proposals will be sent to HSC BoD members & HSC Membership electronically following Review Committee meeting.
	CDD Staff (SW)	Agencies notified of Board action and invited to submit the appropriate ETH program application
Tues. April 19	Common Council	Resolution Introduced approving the City's application to the state and directing the Mayor to sign the application. (second resolution will be introduced following receipt of award letter from state, to accept the ETH award and direct the Mayor and City Clerk to sign contracts with specific non-profits)
Mon. April 25	Board of Estimates	Approves ETH application to state resolution
Wed. April 27, 4 PM	ETH Agencies	Formal application and documentation due electronically to CDD
Wed. April 28 – Wed. May 4	CDD Staff (SW)	Completes ETH application as the Lead Applicant
Tues. May 3	Common Council	Approves submission of ETH application to the state
Thurs. May 5	CDD Staff (SW)	Submits ETH application to DOA/DEHCR
Fri. May 6		DOA/DEHCR due date for ETH application
Mon. June 6 <i>estimated</i>	DOA/DEHCR	Notification of ETH Award
Wed. June 15	CDD Staff (SM, JO, JS, HG)	Resolution to accept ETH funds and authorize the Mayor & City Clerk to contract with specific non-profits approved as a part of the ETH application; resolution deadline 6/15
Tues, June 21	Common Council	Introduces resolution
Mon. June 27	Board of Estimates	Approves resolution
Thurs. July 7	CDBG Committee	Approves resolution
	CDD Staff	Begins negotiation with non-profit agencies and prepares contracts for services
Tues. July 19	Common Council	Approves resolution to accept ETH funds and authorizes the Mayor & City Clerk to contract with specific non-profits
Wed. July 20	CDD Staff	Mayor signs contract with DOA/DEHCR
Thurs. July 21	CDD Staff	Send out contracts for services for non-profits agency signatures



