

## Written Standards for Services for HUD CoC and ESG Funded Programs and Sub Recipients

Updated and approved 01/31/2018

### *General*

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As a non-profit and HUD registered Continuum of Care (CoC), the Midlands Area Consortium for the Homeless (MACH) provides a collaborative and wide reaching solution to homelessness in its 14 county geographic footprint of Aiken, Allendale, Bamberg, Barnwell, Calhoun, Chester, Fairfield, Kershaw, Lancaster, Lexington, Newberry, Orangeburg, Richland and York counties. MACH implements national best practices on a regional scale and emphasizes methodologies that support permanency in housing, client centered service provision, an overall reduction in barriers to receiving services and housing opportunities, equality in service and client treatment, reductions in occurrences and overall time that people spend in a homeless situation, member agency accountability, and reductions in recidivism.

MACH is organized as a membership coalition with a board of directors serving as the primary decision making body with a designated Collaborative Applicant and Homeless Management Information System Lead to provide staff support. Throughout this document, when referring to 'the CoC' for reporting or compliance monitoring we are referring to the Collaborative Applicant staff.

To adequately serve the varying levels of need across our CoC, MACH must prioritize its approach to ensure that service provision mirrors national best practices, Federal initiatives and priorities, as well as those of our unique geographic area. To serve the immense and diverse levels of need in our geographic footprint, MACH must ensure that people in need have access to the housing and services that will best serve their needs.

We empower our clients to make a positive change and to connect themselves to a collaborative network of helping Programs. To ensure that MACH can both address local priorities while simultaneously placing the continuum as a whole in the best position to secure limited federal resources, MACH Programs, individual members, Board of Directors, Staff, and its lead agency hereby agree to adopt the following Written Standards.

The guidelines below are for Programs funded by HUD Continuum of Care (CoC) and Emergency Solutions Grants (ESG) and their sub recipients; however MACH encourages participation from all members. **Throughout this document, the reference to "Programs" means those programs funded by HUD CoC and ESG and their subrecipients.** MACH requests all members support the standards and prevailing themes below in a thoughtful and conscientious manner. The CoC directs its members to develop implementation plans specific to their Programs as quickly as possible. It is essential to establish a unified approach to addressing homelessness across our continuum in an effort to maintain a 'no wrong door' approach to care. MACH Programs use a common methodology rooted in national best practices to confront homelessness. MACH must be willing to embrace a universal, consistent, and strategic plan, based both on Federal Guidance and justifiable local priorities.

The following Written Standards for CoC and ESG funded programs were established January 9, 2014, Revised January 23, 2015, Revised August 26, 2016, Revised June 16, 2017, Revised August 17, 2017, 12/8/17, and most recently Revised 1/31/17. These Written Standards will be reviewed at least annually to ensure compliance with [HUD Notice CPD-17-01](#).

#### *I. Standards for CoC and ESG Funded Programs*

- a) Programs will refrain from discriminating against clients or potential clients on the basis of age, race, color, religion, national origin, sex, disabling conditions, sexual orientation, gender identity, marital, or familial status.

- b) Programs must have written policies and procedures detailing their services and target population in our continuum. Each program must consistently apply the policies and procedures to all participants.
- c) Programs will have written eligibility guidelines that are compliant with HUD regulations with the Program applying these guidelines universally to all potential Program participants.
- d) Programs will have policies & procedures to streamline eligibility requirements and reduce barriers when providing services and/or housing for individuals and families.
- e) Programs will provide copies of their written eligibility guidelines to the CoC annually.
- f) Programs will inform the CoC immediately of any changes in their non-profit or other legal entity status that would affect eligibility to receive federal or grant funds.
- g) Programs will participate in the established CoC HMIS platform. Programs providing domestic violence or legal services may opt out of HMIS participation but must still collect HUD required data elements.
- h) Programs will implement a [Housing First approach](#) to guide their efforts towards achieving client choice and autonomy, permanency efforts, self-determination, and overall programmatic achievement. MACH supports this national best practice and encourages housing providers to implement this approach into their program structure.
- i) Programs will eliminate unnecessary barriers to housing whenever possible to ensure compliance with a Housing First approach.
- j) Programs will participate in annual monitoring as approved by the MACH Board.
- k) Programs will use the following standards for determining a client’s disabling condition:

When documenting a disability (especially if not documenting via SSDI), in the CoC Program disabled means:

An individual who is homeless, and has a disability that is a physical, mental, or emotional impairment, including an impairment caused by alcohol or drug abuse, post-traumatic stress disorder, or brain injury and must include the below three conditions:

1. Is expected to be long-continuing or of indefinite duration; and
2. Substantially impedes the individual(s) ability to live independently; and
3. Could be improved by the provision of more suitable housing conditions.

Under the CoC program, substance abuse is considered a disability as long as:

1. The documentation states the condition is expected to be long-continuing or of indefinite duration AND
2. Substantially impedes the person’s ability to live independently, AND
3. Could be improved by the provisions of more suitable housing conditions.

The documentation must indicate ALL of the above criteria is met.

Licensed professionals that can treat and diagnose a disability in the State of South Carolina:

- Doctor of Medicine
- Doctor of Osteopathic Medicine
- Physician
- Surgeon
- Psychologist
- Psychiatrist
- Licensed Independent Social Worker – Clinical Practitioner (LISW-CP)
- Licensed Professional Counselor (LPC)
- Licensed Marriage and Family Therapist (LMFT)

South Carolina Professionals licensed to diagnose and treat a disability with supervision of another licensed professional are listed below: (HUD will accept disability documentation from the below professionals. The Supervising Professional's name and license number must be provided on the disability documentation and if requested, the supervising professional must be readily available to verify and sign disability documentation.):

- Licensed Master Social Worker (LMSW) - Under clinical supervision within a social, medical, and/or governmental agency
- Clinical Nurse Specialist (CNS) - Under general supervision of a physician, if within approved written protocols
- Nurse Practitioner (NP) - Under general supervision of a physician, if within approved written protocols.
- Physician's Assistant (PA) - Under supervision of a physician, if included in PA's approved written scope of practice guidelines.

### Overview of Coordinated Entry

The Midlands Area Consortium for the Homeless (MACH) provides collaborative and wide reaching solutions to homelessness in its 14 county area of Aiken, Allendale, Bamberg, Barnwell, Calhoun, Chester, Fairfield, Kershaw, Lancaster, Lexington, Newberry, Orangeburg, Richland and York counties in South Carolina. MACH is one of South Carolina's four designated Continuums of Care (CoC) by the U.S. Department of Housing and Urban Development (HUD). United Way of the Midlands (UWM) serves as the CoC Collaborative Applicant and administrator for the CoC's Homeless Management Information System (HMIS). The CoC is supported by staff at UWM, a Board of Directors, and six Committees. The Policy Committee is the CoC Committee that oversees and ensures compliance with HUD regulations, policy notices, and Coordinated Entry.

The CoC operates a Coordinated Entry System (CES) across the CoC's 14 counties to help people with a housing crisis find help quickly no matter how or where they seek assistance. CES is designed to ensure that all people experiencing homelessness have fair and equal access to housing, regardless of race, color, national origin, religion, sex, age, familial status, disability, actual or perceived sexual orientation, gender identify, or marital status. The system aims to work with households to understand their strengths and needs, provide a common assessment, and connect them with housing and homeless assistance. Through the use of a standardized assessment and vulnerability screening tools, CES strives to provide assistance to anyone in need and prioritize those with the highest service needs for federally funded housing. The target population of CES are people experiencing homelessness or imminent risk as defined by HUD. All CoC agencies funded by HUD Continuum of Care, Emergency Solutions Grant (ESG), Projects for Assistance in Transition from Homelessness (*PATH*), Runaway and Homeless *Youth* Program (RHY), Supportive Services for Veterans and their Families (SSVF), Veterans Affairs Supportive Housing (VASH), Veterans Affairs Grant Per Diem (GPD), Cooperative Agreement to Benefit Homeless Individuals (CABHI), and United Way of the Midlands funding are required to participate in CES, and all CoC homeless serving agencies and mainstream providers are invited and are critical components in the system.

The CES operates with the following guiding principles:

- ✓ Promote client-centered practices by ensuring every person experiencing homelessness is treated with dignity, offered at least minimal assistance, and participate in their own housing plan. Provide ongoing opportunities for client participation in the development, oversight, and evaluation of coordinated entry. People should be offered choice whenever possible.

- ✓ Prioritize the most vulnerable as the primary factor among many considerations. Limited resources should be directed first to persons and families experiencing homelessness who are most vulnerable with the longest time experiencing homelessness.
- ✓ Eliminate barriers to housing access by identifying system practices and individual project eligibility criteria which may contribute to excluding clients from services and work to eliminate those barriers.
- ✓ Promote transparency by making thoughtful decisions and communicate policies and procedures openly and clearly.
- ✓ Promote collaborative and inclusive planning and decision making practices.
- ✓ Use culturally and linguistically competent practices that reduce cultural and linguistic barriers to housing and services for special populations.

MACH's CES provides a structured process for entry, assessment, scoring, prioritization, determining eligibility, and referral for homeless housing and services. The goal is to efficiently and fairly allocate resources by prioritizing severity of service needs and vulnerability in combination with the MACH Coordinated Entry System Policy and Procedures.

#### Coordinated Entry and Prioritization Basic Procedures

MACH utilizes a Multisite Centralized Access approach for the Coordinated Entry System (CES) that allows access to referrals and services at any point in the Continuum across all of MACH's 14 counties.

CES utilizes a phased system that includes:

- a. Screening for diversion or prevention
- b. Assessing shelter and other emergency needs
- c. Identifying housing resources and barriers
- d. Evaluating vulnerability to prioritize for assistance

CES conducts a brief screening (CES Phase I form – See Appendix L) to assess needs with a more in-depth vulnerability screening (The Vulnerability Index – Service Prioritization Decision Assistance Tool (VI-SPDAT) see Appendix M) conducted, when appropriate based on level of engagement. Three versions of the VI-SPDAT (individual, family, and youth) are available. While initial HMIS screening may be conducted over the phone or in person it is **not** recommended to conduct VI-SPDAT vulnerability screening over the phone. Agency providers should be trained at least annually on CES and must be trained in-person or online for use of the VI-SPDAT. The CoC utilizes a single client prioritization listing for long-term housing placements and case conferencing meetings to fully discuss client needs related to housing and services.

MACH's CES is available to all eligible persons regardless of race, color, national origin, religion, sex, age, familial status, disability, actual or perceived sexual orientation, gender identity, or marital status.

MACH's CES prohibits screening people out of programs due to perceived barriers related to housing or services, including, but not limited to, too little or no income, active or a history of substance use, domestic violence history, resistance to receiving services, the type or extent of disability-related services or supports that are needed, history of evictions or poor credit, lease violations or history of not being a leaseholder, or criminal record—with exceptions for state or local restrictions that prevent projects from serving people with certain convictions.

MACH's CES uses the following privacy protections:

1. Agencies must receive written participant consent (preferred) or verbal implied consent to share and store participant information for purposes of assessing and referring participants through the coordinated entry process. See Appendix K for consent and information release details.
2. Participants must also be free to decide what information they provide during the assessment process.
3. CoCs are prohibited from denying assessment or services to a participant if the participant refuses to provide certain pieces of information, unless the information necessary to establish or document program eligibility per the applicable program regulation.
4. Agencies are also prohibited from denying services to participants if the participant refuses to allow their data to be shared unless Federal statute requires collection, use, storage, and reporting of a participant's personally identifiable information (PII) as a condition of program participation.
5. Participants may not be denied access to the coordinated entry process on the basis that the participant is or has been a victim of domestic violence, dating violence, sexual assault or stalking. Further, 578.103(b) requires that records containing PII are kept secure and confidential and the address of any family violence project not be made public.
6. The assessment and prioritization process cannot require disclosure of specific disabilities or diagnoses. Specific diagnosis or disability information may only be obtained for purposes of determining program eligibility to make appropriate referrals.
7. Participants must be informed of the ability to file a nondiscrimination complaint.

MACH's CES programs secure appropriate auxiliary aids and services necessary to ensure effective communication, which includes ensuring that information is provided in appropriate accessible formats as needed, e.g., Braille, audio, large type, assistive listening devices, and sign language interpreters. Access points must be accessible to individuals with disabilities, including accessible physical locations for individuals who use wheelchairs, as well as people in the CoC who are least likely to access homeless assistance.

Additional details about MACH's Coordinated Entry System can be found in MACH's CES Policies and Procedures.

#### *Strategies for Preventing Homelessness – For CoC and ESG Funded Programs*

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MACH proactively works to help low-income individuals and families avoid entering the homeless system of care when other feasible and safe housing alternatives are present. Diversion is defined as attempts to intervene before a person becomes homeless. Successfully administering diversion techniques and emphasizing a preventative approach during initial service interactions with people experiencing a housing crisis will ensure that those who receive assistance are most likely to become homeless without CoC intervention. MACH and its members seek to promote an inclusive, client focused, standard of service provision for all. Additionally, by incorporating a standardized assessment and prioritization tool to codify potential clients with the most appropriate service need, MACH will effectively be able to prioritize those in need by severity of need rather than the traditional first come first serve methodology.

The Coordinated Entry System (CES), which provides both a virtual and physical, "front door" into the homeless services system, will rely on prevention and diversion techniques to ensure that CoC resources are appropriately allocated to those in the most need first. Although the intent is to serve those most in need first, MACH prevention strategies will not ignore those who have not exhausted all resources, yet it will empower clients to pursue those options in an effort to gain self-sufficiency without using limited CoC resources that could be used to assist someone with more complex needs or at a higher risk of homelessness.

*I. Diversion*

Programs will attempt diversion before administering prevention assistance. MACH considers this to be good stewardship and the proper allocation of resources according to the intentions of the program. This strategy does not imply that individuals or families in lesser need will not be assisted, instead; it merely states that before administering CoC assistance for homeless prevention, the provider will diligently explore all other options in an attempt to direct the potential client towards other resources that could accomplish the same end. Prevention funding should be allocated only after these diversion attempts have been completed.

*II. Service Prioritization*

Programs will prioritize service provision for those who are most at risk of becoming homeless before serving those who have alternative housing options. As mentioned in the first strategy, Programs will attempt to divert those who may utilize other resources to maintain housing. In so doing, these actions will serve as a method of prioritizing those who are most at risk of becoming homeless.

*III. HMIS Use*

All Programs are required to use the standard Homeless Management Information System (HMIS) for recordkeeping and to facilitate participation in CES. Not only will HMIS allow the provider to evaluate and improve data accuracy, but as HMIS is the cornerstone to MACH's CES. Participation will ensure that potential prevention assistance recipients will be connected with a coordinated, geographically expansive, and well-targeted platform for people in need to efficiently access services that will most likely pair with their individual needs.

*IV. Monitoring*

Programs will be required to participate in the Emergency Solutions Grant (ESG) Monitoring Process. Data on ESG funded Prevention Services will be shared with the State Office of Administration. Additionally, MACH will consider HMIS data quality, program performance, CES and HMIS use, and MACH participation in granting certification for ESG applications for funding.

*V. Participation in Coordinated Entry*

Programs must participate in MACH's CES. Upon initial contact with a person experiencing a housing crisis, the provider will attempt to divert the person to other available resources outside of CoC assistance. Examples of diversion techniques and basic diversion services may include but are not limited to: seeking assistance from family or friends, asking church members or mission programs for help, landlord mediation, budgeting skills, and referrals to Programs that help with finding affordable housing. Individuals and families will be assessed through CES, which utilizes a universal assessment tool and scripting process that emphasizes diversion in the first interaction, MACH will ensure that prevention funding is prioritized to those individuals and families who are most at risk of becoming homeless without CoC assistance.

*VI. Permanency Plan*

Programs will be required to implement and follow a Permanency Plan including budgeting and budget reviews for at least six months after housing placement. This plan will be left to the discretion of the individual agency, but its purpose is to assist providers and their clients maintain focus on a benchmark that will determine the success of prevention providers. In addition to promoting permanency, Programs, through continued contact with their clients, will be able to connect their clients with much needed mainstream resources, employment sustainability assessments, and a periodic revisiting of the housing barriers previously identified before assistance was provided. As a last resort to maintain permanency, the Program could offer assistance again to keep their clients in housing or in a worst

case scenario when a case manager determines that losing housing is imminent and all resources are exhausted to keep the client in their home, refer the client to a programmatic housing solution through CES reentry.

*VII. Outreach*

MACH's street outreach workers (also a method of CES entry) must be trained to know prevention resources and will focus on offering assistance to sub populations that are commonly considered difficult to engage. MACH's array of talented outreach professionals, although primarily focused on the unsheltered homeless, will often interact with individuals or families in need of prevention assistance. To ensure that the outreach worker can connect the persons in need with the most appropriate resource, MACH outreach workers will be trained on the CES and the best practices of an initial interaction during the process of assessment and referral using CES.

*VIII. Discharge from Institutions*

Programs will actively target people exiting institutions. MACH strives to provide a comprehensive approach to reducing homelessness. A well-advertised and geographically expansive statewide CES, coupled with experienced outreach workers and case managers with established community relationships, will provide opportunities for people exiting prisons, hospitals, foster care, or treatment facilities to use prevention resources and ultimately avoid an entry into the homeless system upon their release and/or discharge.

*II. Standards and Expectations by Housing Type – All CoC and ESG Funded Programs*

*1. Emergency Shelter Programs – ESG funded*

Programs serve an important role, especially in "front door" interactions with individuals and families experiencing homelessness. Programs can be immensely effective for engaging potential clients as these facilities may often facilitate the assessment and referral process for the CES. MACH will continue to support the use of these facilities throughout our area because the need for affordable housing, PSH, and TH far outweigh the current inventory. MACH also recognizes and will support the unique service that Emergency Shelter Programs provide, especially during periods of severe weather, by offering an alternative for unsheltered homeless people. These clients are often difficult to find, engage, and are often unlikely to seek services. They may also, however, have the longest history of homelessness combined the most severe level of need. MACH will work to build its capacity and develop an infrastructure that will focus on best practices in permanent housing. While Programs are free to establish their own eligibility criteria, the CoC strongly encourages a reduction in barriers to entry. Emergency Shelter Providers will be amenable to piloting alternative solutions rooted in established national best practices and previous local success.

- a) Programs will accept referrals from CES in addition to traditional enrollment methods such as walk-ups.
- b) Participants will meet the HUD definition of homelessness.
- c) Programs will participate in the CoC HMIS system (unless a domestic violence facility).
- d) Programs Providers will provide current eligibility guidelines with the CoC

*2. Transitional Housing Providers (TH)*

Exits from TH programs in which a return to homelessness or an exit to a Program must be considered an undesirable and last result. Programs should utilize a harm reduction model to minimize these occurrences.

- a) If ESG or CoC funded, TH participants will meet the HUD definition of homelessness
- b) Programs will fill programmatic vacancies from CES referrals

- c) A Client's maximum length of stay cannot exceed 24 months
- d) Assistance in transitioning to permanent housing is provided
- e) Support services or case management are offered throughout the duration of stay in transitional housing
- f) Program participants in transitional housing will enter into a lease or program agreement for a term of at least one month. The lease is automatically renewable upon expiration, except on prior notice by either party, up to a maximum term of 24 months
- g) Programs will alert the CoC to changes in program eligibility or requirements. Additionally, vacancies and available units should also be communicated as they become available to aid in keeping the CES updated and accurate. Programs will facilitate the movement of homeless individuals and families to permanent housing within 24 months of entering TH.

### 3. Rapid Re-Housing Providers – CoC and ESG Funded

Rapid Re-Housing (RRH) Programs provide housing relocation and stabilization services including short or medium term rental assistance to help a homeless individual or family move from homelessness to permanent housing as quickly as possible.

- a) Program participants or the head of household must meet the HUD definition of homelessness.
- b) MACH supports RRH as a best practice to end episodes of homelessness for families with dependent children and in addition to those who have the most severe service needs, MACH will prioritize this subpopulation when generating referrals derived from the CES using the Prioritization Policy.
- c) Program participants will pay a percentage of their income to account for the portion of the rent if the program participant has regular and sustainable income. Programs must implement strong methods of follow-up and aftercare case management to periodically assess client need until permanency is achieved. Follow-up should include but is not limited to accessing employment success and sustainability, linkage to appropriate mainstream services, money management techniques, and other life skills identified by the provider will ensure that housing is maintained.
- d) If a RRH client does not have regular and sustainable income, the client may not be responsible for any portion of the rent. The RRH provider will work with the client intensively to ensure that a plan for permanency is established and implemented. Case management will be more intensive in this situation and assistance may be allocated until permanency occurs in accordance to the regulations established by the Office of Economic Opportunity.
- e) Programs should partner with their clients to develop a written and mutually agreed upon case plan including a needs assessment that identifies barriers that their clients would have to overcome to obtain and maintain housing. A written plan to overcome the identified barriers should dictate the interactions with the client and case manager throughout the permanency plan.

### 4. Permanent Supportive Housing

MACH acknowledges that the most proven and effective manner of solving chronic homelessness is through facilitating the development of more affordable housing units and increasing the supply of Permanent Supportive Housing (PSH) units in the continuum.

- a) Programs will prioritize existing PSH beds, upon turnover, to people experiencing [chronic homelessness](#).
- b) MACH, as a CoC, is committed to increasing the amount of beds dedicated to people experiencing chronic homelessness over time.
- c) Programs will prioritize program vacancies to serve those experiencing the highest severity of needs and length of homelessness according to the board approved Housing Prioritization policy.



#### IV. Housing Prioritization Policy – All CoC funded and Only ESG funded RRH programs

##### 1. Purpose and Philosophy

MACH is a strong continuum of care with excellent and effective homeless service providers. Unfortunately, resources are limited, and there is not enough housing and shelter to meet demand. As a result, the most vulnerable people often remain unserved or do not succeed at traditional services, causing them to continue to experience homelessness. Thus, in accordance with the HUD CoC Program regulations, MACH has developed and agreed to the **following Written Standards for prioritization of permanent supportive housing, rapid rehousing, and transitional housing funded under the HUD CoC or ESG programs and their sub recipients**. These standards support MACH's existing Coordinated Entry infrastructure, ensuring that people experiencing homelessness are referred to the most appropriate and effective services.

2. Special considerations and exceptions for all housing types. While it is the responsibility of MACH to serve all people experiencing homelessness, the following exceptions are allowed for CoC (all) and ESG (RRH only) funded programs as 'special exceptions'.

- a) Geography: Clients cannot be denied a housing placement if located in an area of the CoC. In order to ensure that clients in rural counties have access to housing, priority for housing placement will be given to people experiencing chronic homelessness living in the same county as the service provider's location, provided that they:
  - i. are experiencing chronic homelessness
  - ii. are highest priority based on assessment score and length of homelessness
- b) Funded population: If a project is funded by HUD to serve a particular population such as Veterans or survivors of domestic violence, they must follow this protocol and choose the highest scoring person with the longest length of homelessness who satisfies their project criteria.
- c) Housing placement will be based on eligibility for a unit.

##### 3. Transfer Policy

For permanent supportive housing and rapid rehousing Programs out of CoC transfers will not be considered. For inter-CoC transfers, client transfers between programs will be considered on a case-by-case basis and supporting documentation should be maintained indicating a client/voucher transfer outside the Coordinated Entry System.

##### 4. Permanent Supportive Housing Programs

Permanent Supportive Housing (PSH) Programs provide housing and supportive services to assist people who have a disability and are experiencing homelessness to live independently. The goal of this policy is to ensure that people experiencing chronic homelessness are prioritized for placement into PSH Programs.

- a) PSH Eligibility Criteria
  - i. For dedicated PSH beds, participants must be homeless according to HUD's definition of chronically homeless.
  - ii. Case management must be made available to clients, but is not required for participation in housing.
  - iii. Clinical services may be made available, but acceptance is not required for participation.
- b) The [VI-SPDAT](#) will be used to assess participant's vulnerability and degree of service usage. If a participant chooses not to complete a VI-SPDAT survey, providers may complete a survey on their behalf by estimating the appropriate responses in order to ensure that they are included in MACH's prioritization list.

- c) For people with perceived social isolation or lack of high service usage levels, providers may use the full SPDAT, which is a longer version of the VI-SPDAT. The VI-SPDAT and the full SPDAT have the same comparable scoring bands. Additional training is needed for the full SPDAT.
- d) Participants must have a VI-SPDAT score of 8 or higher to be considered for PSH.<sup>1</sup>

5. PSH Prioritization Order

CoC Program-funded PSH Programs agree to prioritize housing assistance according to VI-SPDAT scores: VI-SPDAT scores will be used to measure severity of service needs, thus satisfying HUD’s priority requirement of [Notice CPD-016-11](#). Length of time homeless will be used as a tiebreaker for people with the same severity of needs, and the person who has been homeless longest will receive the bed offer. The person with the highest VI-SPDAT score will be matched to the provider with bed availability with the following factors.

**a) For Programs with housing dedicated or prioritized to people experiencing chronic homelessness:**

Clients will be prioritized on a CoC listing for housing based on persons experiencing chronic homelessness that is based on the family’s severity needs based on VI-SPDAT assessment score and the length of time in which an individual or family has resided in a place not meant for human habitation, a safe haven, or an emergency shelter and the severity of the individual’s or. Recipients of CoC Program-funded PSH that is dedicated or prioritized for persons experiencing chronic homelessness would be required to follow that order of priority when selecting participants for housing, in a manner consistent with their current grant agreement.

**b) For Programs not dedicated or prioritized for chronically homeless people:**

- i. First Priority—Homeless Individuals and Families with a Disability with Long Periods of Episodic Homelessness and Severe Service Needs. An individual or family that is eligible for CoC Program-funded PSH who has experienced fewer than four occasions where they have been living or residing in a place not meant for human habitation, a safe haven, or in a Programs but where the cumulative time homeless is at least 12 months and has been identified as having severe service needs.
- ii. Second Priority—Homeless Individuals and Families with a Disability with Severe Service Needs. An individual or family that is eligible for CoC Program-funded PSH who is residing in a place not meant for human habitation, a safe haven, or in an Programs and has been identified as having severe service needs. The length of time in which households have been homeless should also be considered when prioritizing households that meet this order of priority, but there is not a minimum length of time required.
- iii. Third Priority—Homeless Individuals and Families with a Disability Coming from Places Not Meant for Human Habitation, Safe Haven, or Programs Without Severe Service Needs. An individual or family that is eligible for CoC Program-funded PSH who is residing in a place not meant for human habitation, a safe haven, or an Programs where the individual or family has not been identified as having severe service needs. The length of time in which households have been homeless should be considered when prioritizing households that meet this order of priority, but there is not a minimum length of time required.
- iv. Fourth Priority—Homeless Individuals and Families with a Disability Coming from Transitional

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<sup>1</sup> Orgcode, the VI-SPDAT creator, recommends that people with scores of 8 or higher be referred to permanent supportive housing. Those scoring 4-7 are recommended for rapid rehousing, and scores of 3 or lower are recommended for diversion.

Housing. An individual or family that is eligible for CoC Program-funded PSH who is currently residing in a transitional housing project, where prior to residing in the transitional housing had lived in a place not meant for human habitation, in an emergency shelter, or safe haven. This priority also includes individuals and families residing in transitional housing who were fleeing or attempting to flee domestic violence, dating violence, sexual assault, or stalking and prior to residing in that transitional housing project even if they did not live in a place not meant for human habitation, an emergency shelter, or a safe haven prior to entry in the transitional housing.

#### 6. Transitional Housing Programs

Transitional Housing Programs provide housing for an extended period of time. The goal of this policy is to ensure that people with the longest histories of homelessness are placed into transitional housing before others with lower housing barriers.

##### a) TH Eligibility Criteria

- i. Participants must be homeless according to HUD's definition including those fleeing domestic violence and at eminent risk.
- ii. The VI-SPDAT will be used to assess participant's vulnerability and degree of service usage. If a participant chooses not to complete a VI-SPDAT survey, providers may complete a survey on their behalf by estimating the appropriate responses in order to ensure that they are included in MACH's prioritization list.
- iii. Participants should have a VI-SPDAT score of 4 to 7 or higher.

#### 7. TH Prioritization Order

Programs will prioritize admissions according to VI-SPDAT scores; when a TH bed becomes available, MACH will refer the person with a score of 4 to 7 on the VI-SPDAT list to the provider with bed availability. While people scoring 8 and higher are traditionally recommended for permanent supportive housing, Programs retain the option to take someone scoring higher than 7 if they believe that person will succeed in their Program with the understanding they lose their chronically homeless status (if applicable) and limiting exit strategies such as PSH in the future.

#### 8. Rapid Rehousing Programs

Rapid rehousing programs will use the Prioritization listing. Rapid rehousing is ideally utilized for those individuals scoring 4 to 7; however it can be used for clients scoring in bands 8-16, if an appropriate housing intervention. Once all clients scoring 4-16 have been served lower scoring clients may be served.

If a client is housed using Rapid Rehousing, but the case manager recommends remaining on the prioritization list for a Permanent Supportive Housing placement contact the Homeless Services Coordinator to remain on the listing.

#### 9. Diversion

Diversion is defined as attempts to intervene before a person becomes homeless. All clients should be asked diversion questions prior to initiating a housing placement intake. Diversion techniques should be utilized to assist those with lower barriers remain safely housed rather than enter the homeless services system. Diversion includes strategies such as asking if the person can safely stay where they are currently living (even if doubled up or precarious). Additional strategies may include landlord mediation, prevention, or case management to help address housing barriers such as under or unemployment, etc. All clients should be asked diversion questions prior to initiating a housing placement intake. Any project accepting clients with a VI-SPDAT score of 3 and below should supply documentation to the files detailing the rationale of the placement. Clients with a

score of 3 and below should not be added to the MACH Prioritization listing, but the agency should assist with referrals to needed services.

10. Referral and Recordkeeping Requirements for Use of Prioritization

- a) Programs will contact the Collaborative Applicant's Homeless Services Coordinator to report a housing vacancy which will be advertised across the CoC.
- b) Programs will review MACH's prioritization list to identify the next person on the list based on Section IV's Prioritization Policy and contact the Homeless Service Coordinator for assistance, when needed.
- c) Once identifying a person(s), the agency must contact him or her to determine interest in housing. If the highest ranking person cannot be found within **3 business days**, the Program may move onto the next person on the list and follow this process until someone is contacted and the bed is filled. Programs must document their efforts at contacting people in HMIS and client records.
- d) If the identified person is interested, the Program will begin project specific eligibility screening and documentation.
  - i. If the person is ineligible, the HMIS record should be updated to reflect this and prevent additional ineligible referrals to that Program. This can be done by provider staff or by CoC HMIS staff.
- e) If the person is eligible, he or she should be admitted to the Program and have an entry recorded in HMIS then contact the Homeless Services Coordinator to remove the client from the prioritization listing.
- f) For client files, Programs must document the VI-SPDAT score and selection reasons including the client's placement on the CoC Prioritization listing.
- g) If the person is denied, he or she will be added to a roster of clients to be reviewed by Case Conferencing to review people's housing barriers and identify other resources. The MACH Policy will review agency adherence to Prioritization Policy.

11. Policy Review and stakeholder feedback

MACH will review this policy periodically (at least annually) in order to accommodate new or changed mandates from HUD and evaluate needs of the current population of people experiencing homelessness. Training on Coordinated Entry will be conducted at least annually including client centered practices such as cultural and linguistic competency. At least annually, feedback will be solicited on the effectiveness of CES from CES active stakeholders including, but not limited to: surveys, one-on-one or group input session, and focus groups. Consumer feedback will also be included in this process. MACH's Policy Committee and CoC staff will review stakeholder feedback for updates to policies and procedures.

*I. Guidance for Placement for Transgender Persons in Single-Sex Emergency Shelters and Other Facilities*

Recipients operating ESG-single-sex emergency shelters (or other ESG- and/or CoC facilities) must follow HUD's guidance regarding placement for transgender persons, [HUD Notice CPD- 15-02](#), and the Equal Access Rule. A recipient that makes decisions about eligibility for or placement into single-sex emergency shelters (or other facilities) must place an applicant or participant in a shelter (or facility) that corresponds to the gender with which the person identifies, taking health and safety concerns into consideration. This placement should not be based on complaints of another person when the sole stated basis of the complaint is an applicant's or participant's nonconformance with gender stereotypes. The recipient must take reasonable steps to address safety and privacy concerns; the recipient should provide for privacy in bathrooms and dressing areas. For instance, recipients may install privacy curtains or partitions.

*II. Preventing Involuntary Family Separation*

In an effort to maintain family unity, for housing serving families with children, the age and gender of a child under age 18 shall not be used as a basis for denying any family's admission. [24 CFR § 578.93\(e\)](#). Additionally, recipients may not deny admission to any member of the family (e.g., 15-year old son). In follow-up, all reports on non-compliance should be reported to the CoC Collaborative Applicant, who is determined by MACH.

*III. Discrimination Based on Household Composition*

A recipient receiving ESG or CoC funds cannot discriminate against a group of persons presenting as a family based on the composition of the family, the age of any family member, the disability status of any member, marital status, actual or perceived sexual orientation, or gender. However, housing may be limited to families with children who are under 18 years of age.

*IV. MACH McKinney-Vento Education Policy*

The McKinney-Vento Act covers all children and youth who meet its definition of homelessness. This means those children who "lack a fixed, regular, and adequate nighttime residence." 42 U.S.C. 11434a(2). The Midlands Area Consortium for the Homeless (MACH) requires that all housing facilities within its 14-county area comply with federal McKinney-Vento requirements. Children experiencing homelessness must be able to enroll in school immediately, even if they are unable to produce records normally required for enrollment, such as previous academic records, medical records, proof of residency, or other documentation. Homeless children must have services available that are comparable to those offered to non-homeless children. Homeless children with disabilities must have equal access to FAPE under Part B as would be provided to other children with disabilities. Their ability to participate in special education programs cannot be hindered by homelessness or such related factors as frequent school transfers.

**Agencies serving people in the MACH area with housing for families experiencing homelessness must ensure:**

- Contact is made with the McKinney-Vento homeless liaison coordinator (school-age) and local Head Start program (pre-school) within 24 hours of a child residing on its property.
- May not restrict the geographic choice of schools. They should work with the McKinney-Vento Homeless Liaison/Coordinator to ensure this area is addressed by the schools and provide advocacy, if necessary, at the district and/or school level.
- Should provide written educational information to parents/custodians on student rights.
- Facilities must include questions related to the family's children during intake:
  - Identifying current school enrollment
  - Disabilities of the family's children
  - Involvement in special programs such as special education, afterschool, athletic participation, English as a Second Language and gifted & talented programs.

- Must have release forms that allow for communication of information and school activity participation to McKinney-Vento school coordinators.
- May not deny residence to a family based on a child’s afterschool activity conflicting with shelter ‘curfew’ hours.
- Are strongly encouraged to designate an agency contact for school district communications. Contact information will be shared with the S.C. Department of Education state-wide.

#### V. *Victim Service Provider Rights*

This information is provided to support the rights of victims of domestic violence and incorporate appropriate policies and procedures into the Midlands Area Consortium for the Homeless Standards. In December of 2016, HUD implemented the [Violence Against Women Reauthorization Act of 2013](#): Implementation in HUD Housing Programs. Compliance with the VAWA regulatory requirements at 24 CFR, part 5, subpart L, is required for grants awarded under NOFAs published on or after December 16, 2016.

#### **Terms**

**Victim service provider** – Is a private nonprofit organization whose primary mission is to provide services to victims of domestic violence, dating violence, sexual assault, or stalking. This term includes rape crisis centers, battered women’s shelters, domestic violence transitional housing programs, and other programs.

**Violence Against Women Reauthorization Act (VAWA) of 2013** – A law that protects anyone who is a victim of actual or threatened domestic violence, dating violence, sexual assault, and stalking, or an affiliated individual of the victim, AND living in, or seeking admission to, a federally assisted housing unit covered by VAWA. The protections apply to all victims regardless of sex, gender identity, sexual orientation, disability or age.

#### **Client Eligibility (24 CFR 578.3)**

**Fleeing or Attempting to Flee Domestic Violence** - An individual or family fleeing, or 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.

#### **HMIS Use**

##### **Victim Service Providers and HMIS (24 CFR 580.25)**

Victim service providers will use a comparable database to support reporting requirements for CoC and ESG programs. Comparable database means a database that is not the Continuum’s official HMIS, but an alternative system that victim service providers and legal services providers may use to collect client-level data over time and to generate unduplicated aggregate reports based on the data, and that complies with the requirements. Information entered into a comparable database must not be entered directly into or provided to an HMIS. A victim of domestic violence accessing a non-victim service provider has the right to decide what information is entered and shared in an HMIS.

#### **Participation in the Coordinated Entry**

##### **Coordinated Entry System (CES) (24 CFR 578.7(a) (8) and CPD-17-01)**

- **Centralized or Coordinated Assessment System:** The CoC policy that guides the operation of the CES supports the needs of individuals and families who are fleeing or attempting to flee, domestic violence, dating violence, sexual assault, or stalking, but who are seeking shelter or services from non-victim service providers. The policy includes adherence to the areas below and any other references in the Standards supporting victims of domestic violence.

- **Safety Planning:** The CES process will not jeopardize the safety of the individuals and families seeking assistance. Therefore, people fleeing or attempting to flee domestic violence and victims of trafficking will have safe and confidential access to the coordinated entry process and victim’s services, and immediate access to emergency services such as domestic violence hotlines and shelters. People accessing these services will not be prioritized based on the severity of service need or vulnerability.
- Participants may not be denied access to the CES process on the basis that the participant is or has been a victim of domestic violence, dating violence, sexual assault or stalking.
- Participants should not be screened out of the CES process due to a domestic violence history.

### **Exceptions by Program Type**

#### **Permanent Housing Programs** 24 CFR 578.51(c) (3) 24 CFR 578.103(a) (5)

Victims of domestic violence who are housing recipients and qualify under “imminent threat” can retain assistance and move to another CoC.

**Notice of Occupancy Rights under the Violence Against Women Act (24 CFR 5 (L))** – Consistent with HUD requirements, housing providers will provide to each applicant and tenant the notice of occupancy rights and the certification form approved by HUD to document incidents of domestic violence, dating violence, sexual assault or stalking. The notice is to be provided: at the time the applicant is denied assistance or admission under a housing program; at the time the individual is provided assistance or admission under the housing program; with any notification of eviction or notification of termination of assistance.

### **Emergency Shelters/Safe Havens**

VAWA protections prohibit denial of admission or eviction or termination to an individual solely on the basis that the individual is a victim of domestic violence, dating violence, sexual assault and stalking. (See §§ 574.604(a)(2), 576.409(f), and 578.99(j)(9)).

### **Other Program Requirements**

**Emergency Transfer Plan** (24 CFR 578.99)(j) and (576.409) – Consistent with HUD requirements, the CoC will develop and adopt an emergency transfer plan to provide protections for those who make a request and believe there is a threat of imminent harm from further violence if they remain in the same dwelling unit they are currently occupying; or the sexual assault occurred on the premises during the 90-calendar-day period preceding the date of the request for transfer.

- The plan will include the use of a model transfer policy allowing survivors of domestic violence, dating violence, sexual assault, and stalking to find safe alternative housing through one of the covered housing programs (permanent housing and transitional housing) for which Continuum of Care program funds are used for acquisition, rehabilitation, new construction, leasing, rental assistance, or operating costs.

The requirements also apply where funds are used for homelessness prevention, but only where the funds are used to provide short- and/or medium-term rental assistance.

### *VI. Limited English Proficiency*

Agencies will take reasonable steps to ensure the coordinated entry process can be accessed by persons with Limited English Proficiency (LEP). HUD’s published Final Guidance to Federal Financial Assistance Recipients: Title VI Prohibition Against Page 12 National Origin Discrimination Affecting Limited English Proficient Persons (LEP Guidance) (72 FR 2732, published January 22, 2007).

## *VII. Program Exit Procedures*

Programs must have written termination, denial, and grievance policies and/or procedures and procedures that allow participants autonomy to freely refuse to answer assessment questions and to refuse housing and services without retribution or limiting their access to assistance. The policies and/or procedures should be readily available to applicants and participants of assistance. With the exception of high volume shelters where it is acceptable to have policies posted in a public place, applicants and participants must receive written information about program policies. It is important to effectively communicate these policies and/or procedures to ensure that they are fully understood.

### **a. Denial and Grievance**

Causes of denial of assistance include, but are not limited to, the person's ineligibility or failure to provide verifiable evidence of eligibility, etc. Established procedures should describe:

- i. Circumstances in which persons may not qualify or would be denied;
- ii. Notification of denial; and
- iii. A person's right to review a recipient's decision.

State and local-mandated exceptions that would permit Program's to exclude certain individuals are location-specific (example: If the state law and/or local ordinance/law restricts registered sex offenders from living within a certain distance of a school, the Program's housing would have to be located within that proximity of a school in order to use that exclusion, and if a Program wishes to use the Housing First Approach and still exclude certain individuals based on local or state law, the Program and CoC must document specifically which state or local ordinance applies, and how it applies (i.e. how it is appropriate in that particular location).

An addendum to the Written Standards provides a current listing of the local, state, or federal laws reported by CoC Programs that may limit client access. The CoC maintains this addendum listing real-time as reported by agencies and verified by staff.

### **b. Termination of Housing Assistance – Permanent supportive, transitional, and rapid rehousing**

- i. Non-payment of rent may be considered after a minimum period of 30 days after attempts to work with the client. Longer periods of time can be considered at the discretion of the agency.
- ii. Lease violations or violations of occupancy agreements can also be the basis for termination of housing assistance. Note – CoC/ESG funded vouchers must use standard leases that follow South Carolina state laws without additional stipulations because the client is homeless.
- iii. Confirmed abandonment of the unit may be considered for immediate termination of housing assistance at the discretion of the agency.
- iv. The agency may still provide services to the clients if housing assistance is terminated.

### **c. Grievance Procedures**

Involuntary termination from any project funded under the HEARTH Act places the participant at great risk because (s)he will likely exit to a place that is less safe than the project in which (s)he is currently participating. Termination is a last option. Recipients are encouraged to limit rules of participation to only that which constitutes immediate danger and lease violations.



There may be instances where termination cannot be avoided. The written grievance procedure must include:

- i. Written notice to the participant containing a clear statement of the reason(s) for termination;
- ii. A review of the decision, in which the participant is given the opportunity to present written or oral objections; and
- iii. Prompt written notice of the final decision.
- iv. For sheltering settings, immediate termination of housing may be necessary for situations of imminent danger.

For Programs where participants are required to request a review of the termination decision, participants must be given an adequate amount of time to submit their request. The review must be held at a mutually agreeable time.

#### *VIII. Reallocation Policy and Procedures – For CoC funded programs*

##### 1. Background

Collaborative Applicants have the ability to reallocate CoC funded Programs to create new Programs (as eligible under current HUD regulations). Through reallocation, CoCs can create new, evidence-informed Programs by eliminating Programs that are underperforming or are more appropriately funded from other sources. Reallocation is particularly important when new resources are scarce. Therefore, MACH has created the following policy to align with HUD and HEARTH Act policy guidance; to be performance-based as specified with the annual HUD NOFA; and finally, based upon performance metrics of existing Programs. Just as HUD's guidelines determine the program focus targeted in each CoC competition, MACH's reallocation decisions will similarly be driven by this focus, with additional emphasis on local needs, data and use of a common assessment tool.

##### 2. Reallocation Process and Procedure

The MACH Ranking Committee understands and acknowledges that through the reallocation process very valuable Programs may be defunded. Also, the MACH Ranking Committee desires to have a reallocation process that will ensure that Programs submitted in the CoC Consolidated Application best align with the HUD CoC funding mechanism's priorities and contribute to a competitive application that collaboratively secures these dollars to improve our community. The MACH Ranking Committee seeks to make data-driven decisions based on information gathered from the common assessment tool and other HUD-recommended data tools. This does not mean that the MACH Ranking Committee does not value reallocated Programs or the diversity of programs in our community. Rather, the MACH Ranking Committee anticipates that most reallocated Programs will seek funders with priorities better suited to cultivate the unique contributions these Programs make to our community that HUD's CoC funding mechanism is not designed to recognize. There will be two ways that currently-funded NOFA Programs will be reallocated: Voluntary Reallocation or Involuntary Reallocation.

###### *a) Voluntary Reallocation*

- i. Currently-funded NOFA project applicants interested in voluntarily reallocating should notify the MACH Ranking Committee in writing of their intent by the due date of HUD's Grant Inventory Worksheet (GIW). The GIW will serve as MACH Ranking Committee's tool to identify Project Applicants' intent to reapply for CoC funding.

- ii. For purpose of voluntary reallocated project funding, strong preference will be given to those organizations that voluntarily apply to reallocate Programs, and especially for those within a compliance period.

b) *Involuntary Reallocation*

- i. The MACH Ranking Committee will consider involuntary reallocation as appropriate and as necessary per results of the MACH Board approved Grantee Evaluation Process. The MACH Ranking Committee will establish a threshold percentage of project scoring reflected in the MACH Grant Evaluation Instrument. Project Applicants who do not meet threshold for the year will be notified that they will be responsible for completing a Corrective Action Plan. In addition, those who do not meet threshold will be reviewed by the MACH Ranking Committee for determination on reallocation. The MACH Ranking Committee will seek feedback from Collaborative Applicant, explore previous years' performance, interview project staff, and seek guidance from HUD when making the decision to involuntarily reallocate a project.

3. Summary

The reallocation process will occur in a transparent, universal, and performance-based manner. This Reallocation Policy and Procedure ensures the CoC's responsibility in submitting to HUD an application that is consistent with HUD guidelines and the HEARTH ACT and ensures the amount to be reallocated is sufficient to fund effective new program(s).

*IX. Emergency Solutions Grant Certifications – For ESG funded programs*

The CoC is responsible for providing certification to annual applicants to the State's Emergency Solutions Grant program. Collaborative Applicant staff will certify ESG applicants according the following criteria:

- a) Acceptable participation levels and data quality in HMIS (unless prohibited as a domestic violence provider)
- b) Active participant in the Coordinated Entry System
- c) Membership and participation in MACH
- d) Program performance

*VI. Record Keeping Requirements - For CoC and ESG Funded Programs*

1. HUD Required (minimum recordkeeping are as follows):
  - a) Records containing personally identifying information must be kept secure and confidential
  - b) Programs will have written confidentiality/privacy notice signed by the client with a copy of which should be made available to participants if requested
  - c) Documentation of homelessness and disability condition, if applicable (following HUDs guidelines)
  - d) A record of services and assistance provided to each participant
  - e) Documentation of any applicable requirements for providing services/assistance
  - f) Documentation of use of Coordinated Entry System
  - g) Documentation of use of HMIS
  - h) Records will be retained for the appropriate amount of time as prescribed by HUD
  - i) Documentation for all costs charged to the grant
  - j) Documentation that funds were spent on allowable costs
  - k) Documentation of the receipt and use of program income
  - l) Documentation of compliance with expenditure limits and deadlines
  - m) Retain copies of all procurement contracts as applicable
  - n) Documentation of amount, source and use of resources for each match contribution
  - o) Code of Conduct/Ethics for the Organization

X. Occupancy Standards for Housing Units - For All CoC Funded Programs and ESG Rapid Rehousing Programs

1. HUD Required:

All housing units, including scattered site programs owned and/or managed by private landlords, must meet applicable state or local government health and safety codes and have current certificate of occupancy for the current use and meet or exceed the following minimum standards: (For more detail refer to ESG regulations 576.403 (b) Minimum Standards).

- a) Buildings must be structurally sound to protect from the elements and not pose any threat to health and safety of the residents
- b) Units must be inspected according to HUD current standards prior to lease execution and client move-in and must be re-inspected annually.
- c) Must be accessible in accordance with Section 504 of the Rehabilitation Act, the Fair Housing Act and the Americans with Disabilities Act where applicable
- d) Must provide an acceptable place to sleep and adequate space and security for themselves and their belongings
- e) Each room must have a natural or mechanical means of ventilation
- f) Must provide access to sanitary facilities that are in operating condition, private and clean
- g) Water supply must be free of contamination
- h) Heating/cooling equipment must be in working condition
- i) Must have adequate natural or artificial illumination and adequate electrical resources to permit safe use of electrical appliances
- j) Food preparation areas must have suitable space and equipment to store, prepare and serve food in safe and sanitary manner
- k) Building must be maintained in a sanitary condition and meet HUD requirements for size.
- l) Must be at least one smoke detector in each occupied unit of the program; and where possible near sleeping areas. The fire alarm system must be designed for hearing-impaired participants. There must be a second means of exiting the building in case of fire or other emergency.

## **Appendix A: Glossary of Terms**

**Chronically Homeless Individual:** A homeless individual with a disability who lives either in a place not meant for human habitation, a safe haven, or in an emergency shelter, or in an institutional care facility if the individual has been living in the facility for fewer than 90 days and had been living in a place not meant for human habitation, a safe haven, or in an Programs immediately before entering the institutional care facility. In order to meet the “chronically homeless” definition, the individual also must have been living as described above continuously for at least 12 months, or on at least four separate occasions in the last 3 years, where the combined occasions total a length of time of at least 12 months. Each period separating the occasions must include at least 7 nights of living in a situation other than a place not meant for human habitation, in an emergency shelter, or in a safe haven

**Collaborative Applicant:** The Collaborative Applicant is the entity designated by the Continuum of Care (CoC) to submit the CoC Registration and CoC Application on behalf of the CoC.

**Continuum of Care (CoC):** A collaborative funding and planning approach that helps communities plan for and provide, as necessary, a full range of emergency, transitional, and permanent housing and other service resources to address the various needs of homeless persons. HUD also refers to the group of service providers involved in the decision making processes as the "Continuum of Care.

**Diversion:** Diversion is a strategy that prevents homelessness for people seeking shelter by helping them identify immediate alternate housing arrangements and, if necessary, connecting them with services and financial assistance to help them return to permanent housing.

**Emergency Solutions Grants (ESG):** The Emergency Solutions Grants program provides homeless persons with basic shelter and essential supportive services. Eligible activities include funding operational costs of the shelter facility, grant administration, and short-term homeless prevention assistance to persons at imminent risk of losing their own housing due to eviction, foreclosure, or utility shutoffs.

**Family:** A Family per HUD regulations includes, but is not limited to, a group of persons residing together, regardless of actual or perceived sexual orientation, gender identity, or marital status. A child who is temporarily away from the home because of placement in foster care is considered a member of the family. Any group of people that present together for assistance and identify themselves as a family, regardless of age or relationship or other factors, are considered to be a family and must be served together as such.

**Family With Children:** A household that includes at least one parent or guardian and one child under the age of 18, a pregnant woman, an individual in the process of securing legal custody of any person who has not attained the age of 18 years, an individual with a dependent child over the age of 18 who is mentally or physically disabled, or an individual who has actual custody of, and is responsible for, the care of a child.

**HEARTH Act:** The Homeless Emergency Assistance and Rapid Transition to Housing Act of 2009, which amended and reauthorized the McKinney-Vento Homeless Assistance Act of 1987.

**Homeless Management Information System (HMIS):** HMIS is the information system designated by the Continuum of Care to comply with HUD’s data collection, management, and reporting standards. It is used to collect client-level data and data on the provision of housing and services to homeless individuals and families and persons at-risk of homelessness.

**Homeless Prevention:** Activities or programs designed to prevent the incidence of homelessness, including, but not limited to: (1) short-term subsidies to defray rent and utility arrearages for families that have received

eviction or utility termination notices; (2) security deposits or first month's rent to permit a homeless family to move into its own apartment; (3) mediation programs for landlord-tenant disputes; (4) legal services programs that enable representation of indigent tenants in eviction proceedings; (5) payments to prevent foreclosure on a home; and (6) other innovative programs and activities designed to prevent the incidence of homelessness.

**Household:** All the people who occupy a housing unit. A household includes the related family members and all the unrelated people, if any, such as lodgers, foster children, wards, or employees who share the housing unit. A person living alone in a housing unit, or a group of unrelated people sharing a housing unit such as partners or roomers, is also counted as a household.

**Housing First:** Housing First is an approach to quickly and successfully connect individuals and families experiencing homelessness to permanent housing without preconditions and barriers to entry, such as sobriety, treatment or service participation requirements. Supportive services are offered to maximize housing stability and prevent returns to homelessness as opposed to addressing predetermined treatment goals prior to permanent housing entry.

The core features of Housing First in the context of permanent supportive housing models are as follows:

- Few to no programmatic prerequisites to permanent housing entry
- Low barrier admission policies
- Rapid and streamlined entry into housing
- Supportive services are voluntary
- Tenants have full rights, responsibilities, and legal protections
- Practices and policies to prevent lease violations and evictions
- Applicable in a variety of housing models

**Transitional Housing:** A project that has as its purpose facilitating the movement of homeless individuals and families to permanent housing within a reasonable amount of time (usually 24 months). Transitional housing includes housing primarily designed to serve deinstitutionalized homeless individuals and other homeless individuals with mental or physical disabilities and homeless families with children

**U.S. Department of Housing and Urban Development (HUD):** Established in 1965, HUD's mission is to increase homeownership, support community development, and increase access to affordable housing free from discrimination. To fulfill this mission, HUD will embrace high standards of ethics, management and accountability and forge new partnerships — particularly with faith-based and community organizations — that leverage resources and improve HUD's ability to be effective on the community level.

1.1 **Appendix B: Homeless Eligibility Criteria**

In order to receive assistance, persons must meet the HUD definition of homeless.

Table 6.2		Homeless Eligibility Criteria	
Cat.	Description	Component	Criteria
1	Literally Homeless	<p><i>Emergency Shelter</i></p> <p><i>Transitional Housing</i></p> <p><i>Rapid Rehousing</i></p> <p><i>Permanent Supportive Housing</i></p>	<p><b>A household is literally homeless if they lack fixed, regular &amp; adequate nighttime residence, meaning:</b></p> <ul style="list-style-type: none"> <li>• Sleeping in a place not designed for, or not ordinarily used as, a regular sleeping accommodation, including a car, a park, an abandoned building, a bus or train station, an airport, or a campground.</li> <li>• Living in a shelter designated to provide temporary living arrangements, including congregate shelters, transitional housing, hotels/motels paid for by charitable organizations, or federal/state/local government programs.</li> <li>• Exiting an institution such as a jail or hospital where they resided for 90 days or less AND was residing in an Programs or place not meant for human habitation immediately before entering the institution.</li> </ul>
2	Imminent Risk of Homelessness	<p><i>Emergency Shelter</i></p> <p><i>Transitional Housing</i></p> <p><i>Prevention</i></p>	<p><b>A household that will imminently lose their primary nighttime residence provided that:</b></p> <ul style="list-style-type: none"> <li>• The residence will be lost within 14 days of the application for assistance.</li> <li>• No subsequent residence has been identified; AND</li> <li>• The individual or family lacks the resources or support networks needed to obtain other permanent housing.</li> </ul>
3	Homeless Under Other Federal Statutes	<i>Not Applicable</i>	<i>MACH has not been approved by HUD for this category</i>
4	Fleeing or to Flee Violence	<p><i>Emergency Shelter</i></p> <p><i>Transitional Housing</i></p> <p><i>Prevention</i></p>	<p><b>Households fleeing or attempting to flee domestic violence, dating violence, sexual assault, stalking or other dangerous or life threatening conditions related to violence, who:</b></p> <ul style="list-style-type: none"> <li>• Have no identified subsequent residence; AND</li> <li>• Lack the resources and support networks needed to obtain other permanent housing.</li> </ul>

**Appendix C: Chronic Homeless Definition (24 CFR § 578.3)**

A homeless individual with a disability who lives in a place not meant for human habitation, a safe haven, or in an Programs and who has been homeless and living or residing in a place not meant for human habitation, a safe haven, or in an Programs continuously for at least twelve (12) months or on at least four (4) separate occasions in the last three (3) years, as long as the combined occasions equal at least twelve (12) months and each break in homelessness separating the occasions included at least seven (7) consecutive nights of not living in a place not meant for human habitation, a safe haven, or in an emergency shelter. A person who meets the chronic homeless definition as described above, but who has been residing in an institutional care facility, including a jail, substance abuse or mental health treatment facility, hospital, or other similar facility, for fewer than 90 days, and who was on the streets or in Programs immediately before entering the institution, also qualifies as chronically homeless. Chronically homeless persons also includes a family with an adult head of household (or if there is no adult in the family, a minor head of household) who meets all the criteria of chronic homelessness, including a family whose composition has fluctuated while the head of household has been homeless.

Duration	Definition	
<b>Continuous, for at least twelve (12) months</b> On the streets or in Programs continuously, without a break, for at least twelve (12) months		
<b>Continuous</b>	A stay on the streets or in Programs without a break.	
<b>Break</b>	At least seven (7) or more consecutive nights not residing on the streets or in emergency shelter.  Stays in institutional care facilities for fewer than 90 days do not constitute a break in homelessness, but rather such stays are included in the 12-month total, as long as the individual was living or residing in a place not meant for human habitation, a safe haven, or an Programs immediately before entering the institutional care facility.	
<b>Twelve (12) Continuous Months</b>	Twelve (12) consecutive calendar months.  NOTE: If the person has a documented encounter with a homeless service provider on a single day within a given month, this is sufficient to consider the person homeless for the entire calendar month, unless there is evidence of a break in homelessness. This applies ONLY if the encounter is documented by third-party documentation – a self-declaration is insufficient.	
<b>At least four (4) separate occasions in the last three (3) years where the combined occasions equal at least twelve (12) months</b> On the streets or Programs on four (4) separate, distinct, and sustained occasions in the last three (3) years, as long as the combined occasions equal at least twelve (12) months and each break in homelessness separating the occasions included at least seven (7) consecutive nights of not living in a place not meant for human habitation, a safe haven, or in an emergency shelter		
<b>Occasion</b>	<b>Separate and Distinct</b>	Stay on the streets or in Programs is interrupted by a Break (period of seven (7) or more consecutive nights residing in a place other than on the streets or in emergency shelter).
	<b>Sustained</b>	Stay on the streets or in Programs is more at least one (1) night.
<b>Three (3) years</b>	Thirty-six (36) consecutive calendar months	
<b>Twelve (12) Total Months</b>	Four (4) separate occasions on the streets or Programs that equal a cumulative total of twelve (12) months, meaning twelve (12) calendar months.	

**Appendix D: Homeless Verification**

Cat.	Description	Documentation
1	Literally Homeless	<p><i>Emergency Shelter</i> 1. Written observation by outreach worker of the conditions where the individual or family is living; OR</p> <p><i>Rapid Rehousing</i> 2. Written referral by another housing or service provider;</p> <p>OR</p> <p><i>Transitional Housing</i> 3. Certification by the household seeking assistance/self-declaration*.</p> <p><i>Permanent Supportive Housing</i> 4. For households exiting an institution – one of the above AND discharge paperwork or written/oral referral, OR written record of intake worker’s due diligence to obtain evidence AND self-declaration* by</p>
2	Imminent Risk of Homelessness	<p><i>Programs Prevention</i> 1. Court order resulting from an eviction action notifying the household they must leave; OR</p> <p><i>Transitional Housing</i> 2. For household leaving hotel/motel that they were paying for, evidence that they lack the financial resources to stay; OR</p> <p>3. Documented and verified oral statement; AND</p> <p>a. Certification that no subsequent residence is identified; AND</p> <p>b. Self-declaration* or other written documentation that the individual lacks the financial resources and support necessary to</p>
4	Fleeing/Attempting to Flee Domestic Violence	<p><i>Programs Prevention</i> <b>For victim service providers:</b> Self-declaration/oral statement by the household seeking assistance which states: they are fleeing, they have no subsequent residence, and they lack resources. The statement must be certified by intake worker.</p> <p><i>Transitional Housing</i> <b>For non-victim service providers:</b></p> <p>1. Self-declaration/oral statement by household seeking assistance which states: they are fleeing, they have no subsequent residence, and they lack resources.</p> <p>2. If the household is not jeopardized, the oral statement that the household is fleeing must be</p>
<p>*Self-Declarations must generally be accompanied by intake worker documentation of due diligence to obtain third-party verification.</p>		



**Appendix E: Disability Verification**

1. Written verification of the disability from a professional licensed* by the state to diagnose and treat the disability and his or her certification that the disability is expected to be long-continuing or of indefinite duration and substantially impedes the individual’s ability to live independently; OR
2. Written verification from the Social Security Administration; OR
3. The receipt of a disability check; OR
4. Intake staff-recorded observation of a disability that, no later than 45 days of the application for assistance, is confirmed and accompanied by evidence (as outlined in this table number 1, 2, 3 or 5)**; OR
5. Other documentation approved by HUD.
*Licensed in South Carolina to diagnose the specific disabling condition. **Recipients are discouraged from admitting participants into their project without confirmation of a qualifying disability and documented evidence of that disability. Recipients that choose to admit participants under Category 4 of the table above, do so at their own risk. If confirmation of disability and evidence are not attained within 45 days, the recipient will not be reimbursed for costs incurred for that participant.

## ***Appendix F Rent Reasonableness Policies and Procedures***

**Determining and Documenting Rent Reasonableness:** Determining and documenting rent reasonableness is required under CoC and ESG for leasing and rental assistance Programs . Rent reasonableness must be documented prior to executing the lease for an assisted unit and at least annually thereafter. Recipients must document the assisted unit’s rent reasonableness using a rent reasonableness certification form; this completed form must be maintained in each client file to demonstrate that the assisted unit met the rent reasonableness standard.

Below describes the methodology, staffing, data sources, documentation requirements, and special circumstances that recipients must use to determine and document rent reasonableness.

**Methodology:** In order to demonstrate that the assisted unit is rent reasonable, recipients must compare the assisted unit’s rent to the rent of at least **three (3)** comparable unassisted units in the area *and* must also compare the assisted unit’s rent to rents currently being charged by the same owner for comparable unassisted units.

**Potential Data Sources:** Acceptable data sources used in determining rent reasonableness include the following:

- Online rental listing sources such as [www.schousing.com](http://www.schousing.com)
- Newspaper ads (including internet versions of newspaper ads);
- Classified Ads;
- Weekly or monthly neighborhood or shopper newspapers that have rental listings;
- “For Rent” signs in windows or on lawns;
- Real estate agents; and
- Property management companies that handle rental property.

**Data in Rural Areas:** While there may be fewer rental units in rural areas than in urban and suburban areas, it is possible to find comparable rents or establish rent payment standards for different unit types located in these areas.

- One source of rental housing data for rural areas may be the U.S. Department of Agriculture’s Rural Development Agency. USDA provides direct and guaranteed loans for single and multi-family housing development in rural areas as well as for farm laborers. Contact information is available at [http://www.rurdev.usda.gov/recd\\_map.html](http://www.rurdev.usda.gov/recd_map.html).
- Another potential source of comparable rent data are real estate agents. To find real estate agents active in particular communities, Programs can consult the National Association of Realtors on the web at <http://www.realtor.org/>.
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**Documentation Requirements:** The following documentation is required to determine rent reasonableness and must be kept in the participant file:

- Rent Reasonableness Certification Form
- Rent Reasonableness – Supplemental and backup documentation (i.e., copies of advertisements of units for rent, etc.) used to compare rents

## **Appendix G Lead Based Paint Inspection Requirements**

Childhood lead poisoning is a major environmental health problem in the United States, especially for low-income families in poor living conditions. If not detected early, children with high levels of lead in their bodies can suffer from damage to the brain and nervous system, behavioral and learning problems (such as hyperactivity), slowed growth, hearing problems, and headaches. To prevent lead-poisoning in young children, Lead/Sub Grantees must comply with the Lead-Based Paint Poisoning Prevention Act of 1973 and its applicable regulations found at 24 CFR § 35, Parts A, B, M, and R.

### **Disclosure Requirements**

Disclosure requirements are triggered for ALL properties constructed prior to 1978. These requirements require that lessors (property owners or managers) provide tenants with:

- Form for rental properties disclosing the presence of known and unknown lead-based paint;
- A copy of the “Protect Your Family from Lead in the Home” pamphlet.

Both the disclosure form and pamphlet are available at:

<http://www.hud.gov/offices/lead/enforcement/disclosure.cfm>

Sharing this information with your participants (or ensuring they have received it from property owners/managers) is an easy thing to do. This is an important opportunity to educate participants about the potential hazards related to lead and their rights as tenants. Informed tenants are more likely to watch for potential problems in their home and proactively work with landlords to address any issues.

### **Visual Assessment**

Visual assessments are triggered under certain circumstances:

- The leased property was constructed before 1978 *AND* a child under the age of six (6) will be living in the unit occupied by the household receiving assistance.

### **Determining the Age of the Unit**

Programs should use formal public records, such as tax assessment records, to establish the age of a unit. These records include the year built or age of the property and are available online your local county website. Remember to print out a copy of the screenshot for the case file.

### **Conducting a Visual Assessment**

A visual assessment must be conducted prior to providing rent assistance to the unit and on an annual basis thereafter (as long as assistance is provided). Visual assessments must be conducted by a HUD-Certified Visual Assessor. It is important to note that a HUD-Certified Visual Assessor is not equivalent to a Certified Clearance

Examiner. Anyone may become a HUD-Certified Visual Assessor by successfully completing a 20-minute online training on HUD’s website at:

<http://www.hud.gov/offices/lead/training/visualassessment/h00101.htm>

The training teaches individuals how to identify deteriorated paint and how deteriorated paint must be treated. Programs may choose to have their program staff complete the visual assessments, or they may procure services from a contractor.

### **Making Assistance Determinations**

If a visual assessment reveals problems with paint surfaces, Project cannot approve the unit for assistance until the deteriorating paint has been repaired. At this point, Programs must make a decision: work with the property owner/manager to complete needed paint stabilization activities and clearance, work with the household to locate a different (lead-safe) unit, or refer the participant to a different program if assistance cannot be provided.

#### **Locating a Certified Lead Professional and Further Training**

To locate a certified lead professional in your area:

- Call your state government (health department, lead poison prevention program, or housing authority).
- Call the National Lead Information Center at 1-800-424-LEAD (5323).
- Go to the US Environmental Protection Agency website at <http://cfpub.epa.gov/flpp/> and click on "certified abatement/inspection firms."

**Appendix H Comparison of Rapid Rehousing Under ESG and CoC**

	<b>Rapid Rehousing – Eligible Costs</b>	
	<b>ESG - RRH</b>	<b>CoC - RRH</b>
Rental Assistance	<ul style="list-style-type: none"> <li>• Short-term (up to 3 months)</li> <li>• Medium-term (4 to 24 months)</li> <li>• Rent Arrears (one-time for up to 6 months, including late fees)</li> </ul>	<ul style="list-style-type: none"> <li>• Short-term (up to 3 months)</li> <li>• Medium-term (4 to 24 months)</li> </ul>
Type of Rental Assistance	<ul style="list-style-type: none"> <li>• Tenant based</li> <li>• Project based</li> </ul>	<ul style="list-style-type: none"> <li>• Tenant based only</li> </ul>
Housing Relocation and Stabilization Services	<p><b>Financial Costs</b></p> <ul style="list-style-type: none"> <li>• Rental application Fees</li> <li>• Security Deposits (up to 2 months)</li> <li>• Last month’s rent</li> <li>• Utility Deposits and payments (up to 24 months, including 6 months of arrears)</li> <li>• Moving costs</li> </ul> <p><b>Service Costs</b></p> <ul style="list-style-type: none"> <li>• Housing Search and Placement</li> <li>• Housing stability case management</li> <li>• Mediation</li> <li>• Legal services</li> <li>• Credit repair</li> <li>• Budgeting</li> <li>• Money Management</li> </ul>	<p><b>Financial Assistance</b></p> <ul style="list-style-type: none"> <li>• Security deposits (up to 2 months)</li> <li>• First and last month’s rent</li> </ul> <p><b>Supportive Services</b></p> <ul style="list-style-type: none"> <li>• Case management</li> <li>• Child Care</li> <li>• Education services</li> <li>• Employment assistance and job training</li> <li>• Food</li> <li>• Housing search and counseling services, including mediation, credit repair, and payment of rental application fee</li> <li>• Legal services</li> <li>• Life skills training</li> <li>• Mental health services</li> <li>• Moving costs</li> <li>• Outpatient health services</li> <li>• Outreach services</li> <li>• Substance abuse treatment services</li> <li>• Transportation</li> <li>• Utility deposits</li> </ul>

	<b>Rental Assistance Overview</b>	
	<b>ESG – RRH Rental Assistance (24 CFR § 576.104)</b>	<b>CoC – RRH Rental Assistance (24 CFR § 578.37(a)(1)(ii))</b>
Housing Standards	Units must pass HUD Habitability Standards	Units must pass HUD Housing Quality Standards (HQS)

Fair Market Rent (FMR)	Rental unit may cover up to FMR for rental unit	Rent Reasonableness is the rent standard
Rent Reasonableness	Units must comply with HUD's rent reasonableness standards	Units in a structure must comply with HUD's rent reasonableness standards
Lease Requirements	<ul style="list-style-type: none"> <li>• A written lease between the owner and the participant is required for TBRA and PBRA.</li> <li>• For participants living in housing with PBRA, the lease must have an initial term of one year. There is no minimum lease period for TBRA.</li> <li>• The only exception to the written lease requirement is in the case of rental assistance provided solely for rental arrears.</li> </ul>	Participants receiving TBRA must sign a lease of at least one year that is renewable (for a minimum term of one month) and terminable only for cause.
Written Standards	<p>Recipients and Subrecipients must implement written policies and procedures for:</p> <ul style="list-style-type: none"> <li>• Determining and prioritizing which eligible families and individuals will receive RRH assistance</li> <li>• Determining the amount or percentage of rent and utilities each participant must pay</li> <li>• Determining how long a particular participant will be provided with rental assistance and whether and how the amount of that assistance will be adjusted over time</li> </ul>	<p>Recipients and Subrecipients must consistently follow policies and procedures established for:</p> <ul style="list-style-type: none"> <li>• Determining and prioritizing which eligible families and individuals will receive RRH assistance</li> <li>• Determining the amount or percentage of rent each participant must pay</li> <li>• Determining the maximum amount or percentage of rental assistance that a participant may receive</li> <li>• Determining the maximum number of months that a participant may receive rental assistance</li> <li>• Determining the maximum number of times that a participant may receive rental assistance</li> <li>• Determining the extent to which a participant must share the cost of rent</li> </ul>

## **Appendix I Diversion** (Excerpts from the National Alliance to End Homelessness)

Diversion is a strategy that prevents homelessness for people seeking shelter by helping them identify immediate alternate housing arrangements and, if necessary, connecting them with services and financial assistance to help them return to permanent housing.

### **Distinguishing Diversion from Other Interventions**

The services people are provided with when being diverted are services that caseworkers in assistance organizations are already trained and funded to deliver. They include:

- provision of financial, utility, and/or rental assistance;
- short-term case management;
- conflict mediation;
- connection to mainstream services (services that come from Programs outside of the homeless assistance system, such as welfare Programs) and/or benefits; and
- housing search.

The main difference between diversion and other permanent housing-focused interventions centers on the point at which intervention occurs. **Prevention targets people at imminent risk of homelessness, diversion targets people as they are applying for entry into shelter, and rapid re-housing targets people who are already homeless.**

### **Assessing for Diversion Eligibility**

Once a client comes to a Coordinated Entry System point, they should be assessed to determine what housing needs they have. To determine which people are appropriate for diversion, intake center staff will need to ask families a few specific questions, such as:

- Where did you sleep last night? *If they slept somewhere where they could potentially safely stay again, this might mean they are good candidates for diversion.*
- What other housing options do you have for the next few days or weeks? *Even if there is an option outside of shelter that is only available for a very short time, it's worth exploring if this housing resource can be used.*
- (If staying in someone else's housing) What issues exist with you remaining in your current housing situation? Can those issues be resolved with financial assistance, case management, etc.? *If the issues can be solved with case management, mediation, or financial assistance (or all of the above), diversion is a good option.*
- (If coming from their own unit) Is it possible/safe to stay in your current housing unit? What resources would you need to do that (financial assistance, case management, mediation, transportation, etc.)? *If the family could stay in their current housing with some assistance, systems should focus on a quick prevention-oriented solution that will keep the family in their unit.*

The client should meet with a case manager to start housing stabilization planning immediately after being assessed and deemed appropriate for diversion. Housing planning involves both finding immediate housing and planning for longer term housing stability. If an immediate alternate housing arrangement cannot be made, a shelter stay is likely the most appropriate option.

Some families may not be good candidates for diversion programs due to a lack of safe and appropriate housing alternatives and require immediate admittance to shelter, e.g. families fleeing domestic violence. The client's safety should always be the top consideration when thinking through what intervention fits best.