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The Continuum of Care (CoC) plans and coordinates a system of homeless housing and services in order to meet the needs of the population and subpopulations experiencing homelessness within the
geographic area of the Continuum. The local CoC encompasses Madison and Dane County and is called the Homeless Services Consortium (HSC).

The Continuum of Care (CoC) and Emergency Solutions Grant (ESG) Program Interim Rules require recipients of ESG funds and CoCs to develop, in coordination with each other, written standards for administering assistance. All programs that receive CoC, ESG, and State of Wisconsin Emergency Solutions Grant/Housing Program/Homeless Prevention Program (EHH) must abide by the applicable sections of the standards in full. Programs funded through other sources are highly encouraged to follow these standards and may be required by the funders to comply with the standards. These standards do not replace policies and procedures created by homeless services providers, but rather they provide an overall context for programs funded with federal, state and local funding.

The written standards will:

- Establish community-wide expectations on the operations of projects within the community;
- Ensure the system that is transparent to users and operators; and
- Establish a minimum set of standards and expectations in terms of the quality expected of projects.

The first version of the written standards were developed by the HSC Written Standards Committee and approved by the HSC Board of Directors (Board) in consultation with ESG recipients in 2016. The standards are reviewed annually by the HSC Core Committee and recommended changes are approved by the Board.

In reviewing and updating the standards, the Core Committee uses the HSC listserv to invite HSC members to join the process. Recommendations for changes to the standards go out to the HSC for feedback and are presented to the HSC Board. The Board reviews and approves the standards. The Board meeting is open to the public and the agenda is publicly noticed, allowing opportunities for the public to provide input.

Changes made in the standards go into effect within 90 days of the Board approval of the changes, unless specified otherwise by the Board. The Board or the CoC Coordinator as designated by the Board is responsible for notifying the agencies receiving CoC, ESG, EHH, or other public funds that require compliance with the standards in writing.

The Board uses the written standards when evaluating program applications for the CoC, ESG and EHH funds. Programs that fail to abide by the standards may not be approved for future CoC, ESG, or EHH funding.

- CoC and ESG funded programs will complete the written standards checklist (Appendix TBD) as a self-monitoring tool and submit to CoC Coordinator annually. CoC Coordinator will pass them onto the Board and appropriate funders.
The Board designee for ESG, EHH, and CoC funds will use the written standards checklist to review compliance with the standards during monitoring. Programs found not in compliance with the standards must work with the funder or funding administrator to address the compliance issue within timeframe designated by the funder. Results of the written standards compliance monitoring and approved plans of correction will be shared with the Board upon funder’s approval of plan of correction. In limited circumstances, a waiver may be requested to the Board if an agency cannot reasonably comply with the standards. The Board may grant or deny a waiver or choose to revise the standards.

If an agency disagrees with non-compliance finding with the standards, the agency may submit a written notice of appeal to the entity issuing the non-compliance finding within 30 days. The Board will make the final determination if the agency is in compliance with the standards.

The Board will use the agency self-monitoring and funder monitoring results regarding written standards compliance to inform strategy development (e.g. training, peer support, shared tool, etc.) to move the CoC towards increased compliance with the standards. The Board will facilitate training for any major changes in the standards.

Outside of the standard monitoring process, if the CoC Coordinator or the Board receives concerns regarding written standards compliance, the Board will investigate the concern, provide technical assistance, and require corrective action as necessary.

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

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

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

SECTION I: GENERAL REQUIREMENTS
1. PROGRAM STANDARDS

1. In providing or arranging for housing, shelter or services, the program considers the needs of the individual or family experiencing homelessness.

2. The program provides assistance in accessing suitable housing.

3. The program is aligned with the community goals for the Built for Zero initiative, the Homeless Services Consortium Plan to Prevent and End Homelessness, and current Department of Housing and Urban Development priorities, including priorities for ending homelessness among specified sub-populations.

4. The Vulnerability Index & Service Prioritization Decision Assistance Tool (VI-SPDAT), Vulnerability Index & Family Service Prioritization Decision Assistance Tool (VI-F-SPDAT), or Transition Age Youth-Vulnerability Index & Service Prioritization Decision Assistance Tool (TAY-VI-SPDAT) will be used when screening households for Permanent Supportive Housing and Rapid Re-housing programs. The latest version will be posted on the Homeless Services Consortium website.

5. The full Service Prioritization Decision Assistance Tool (SPDAT) is to be recommended as an assessment tool for housing case management and housing programs. The full SPDAT should only be administered by staff trained to do so. SPDAT data should be entered into the Homeless Management Information System (HMIS).

6. Each housing and housing case management program must be aware of and inform households of the educational rights of children and unaccompanied youth in their programs. Materials explaining rights should be provided to applicable households. Program staff will collaborate with the Transition Education Program (TEP) or other school officials to coordinate educational services. Program staff will highly encourage school attendance and will work with households to address any barriers to regular attendance. If attendance and truancy concerns are noted, program staff will communicate/coordinate with school staff.

7. Each program in the CoC will provide accurate and up-to-date information on eligibility criteria for the program; e.g. – gender specific, individuals/families. Each agency will provide information to Coordinated Entry.

8. Each housing and housing case management program in the CoC will use the Mainstream Benefits Checklist. This checklist should be kept in the file for each household and updated annually.

9. Each program will make language translation service available for clients when needed by utilizing available services, such as a language line.

10. All ES, TH, PSH, RRH, and other PH providers must provide information for Housing Inventory Chart (HIC) and Point in Time (PIT) as requested by the CoC or its designee.

2. CASE MANAGEMENT SERVICES

MINIMUM STANDARDS
1. The frequency of case management services will vary based on program participant need. Initial contacts with the participant will typically be at least weekly and continued contacts will be at least monthly. In-person contact is preferred whenever possible.

2. Case management services include, but are not limited to: developing an individualized housing/service plan, assistance with obtaining and maintaining housing, counseling, employment referrals, education, referral and coordination of services, accessing mainstream benefits, and coordinating with schools.

3. Case management service plans will incorporate the participants’ expectations and choices for short and long-term goals.

4. Together, the program and program participants will develop a schedule for reassessing the individualized service plan. The reassessments will occur at least annually, and as often as required by the funder.

3. PERSONNEL

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

MINIMUM STANDARDS

1. The agency selects, for its service staff, only those employees and/or volunteers with appropriate knowledge, or experience, for working with individuals and families experiencing homelessness and/or other issues that put individuals or families at risk of housing instability.

2. The program provides training to all paid and volunteer staff on both the policies and procedures employed by the program and on specific skill areas as determined by the program.

3. All paid and volunteer service staff participates in ongoing and/or external training and development to further enhance their knowledge and ability to work with individuals and families experiencing homelessness and/or other issues that put individuals or families at risk of housing instability. Examples of training topics include, but are not limited to, harm reduction, trauma informed care, housing first and racial justice.

4. For programs that use HMIS, all HMIS users must abide by the standard operating procedures found in the HMIS Policies and Procedures manual. Additionally, users must adhere to the privacy and confidentiality terms set forth in the User Agreement.

5. Agency staff with responsibilities for supervision of the casework, counseling, and/or case management components have, at a minimum, a bachelor’s degree in a human service-related field and/or experience working with individuals and families experiencing homelessness and/or other issues that put individuals or families at risk of housing instability.

6. Staff with supervisory responsibilities for overall program operations shall have, at a minimum, a bachelor’s degree in a human service-related field and/or demonstrated ability and experience that qualifies them to assume such responsibility.

7. All staff has a written job description that, at a minimum, addresses the major tasks to be performed and the qualifications required for the position.

8. The program operates under affirmative action and civil rights compliance plans or letters of assurance.
9. Case supervisors review current cases and individual service plans on a regular and consistent basis to ensure quality, coordinated services.

4. HOUSING FIRST

Housing First is a proven method of ending all types of homelessness, and is the most effective approach to ending chronic homelessness. Housing First offers individuals and families experiencing homelessness immediate access to permanent affordable or supportive housing, without clinical prerequisites like completion of a course of treatment or evidence of sobriety and with a low-threshold for entry. Housing First permanent supportive housing models are typically designed for individuals or families who have complex service needs, who are often turned away from other affordable housing settings, and/or who are the least likely to be able to proactively seek and obtain housing on their own. Housing First approaches for rapid re-housing provide quick access to permanent housing through interim rental assistance and supportive services on a time-limited basis. Rapid re-housing programs are designed to have low barriers for program admission, and to serve individuals and families without consideration of past rental, credit or financial history. The Housing First approach has also evolved to encompass a community-level orientation to ending homelessness in which barriers to housing entry are removed and efforts are in place to prioritize the most vulnerable and high-need people for housing assistance.

SYSTEM-WIDE HOUSING FIRST ORIENTATION FOR THE HOMELESS SERVICES CONSORTIUM

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

MINIMUM STANDARDS

1. Program admission/tenant screening and selection practices promote the acceptance of applicants regardless of their sobriety or use of substances, completion of treatment, and participation in services.

2. Applicants are not rejected on the basis of poor credit or financial history, poor or lack of rental history, minor criminal convictions, or behaviors that indicate a lack of “housing readiness.” Although applicants may be rejected due to convictions for violent criminal activity, agencies will make all effort possible to remove barriers to program enrollment. A rejection is only appropriate when an applicant presents a direct threat to the health and safety of program staff and residents and that threat cannot be ameliorated.

3. Supportive services emphasize engagement and problem-solving over therapeutic goals. Services plans are highly tenant-driven without predetermined goals. Participation in services or program compliance is not a condition of permanent supportive housing tenancy. Rapid re-housing programs may require case management as condition of receiving rental assistance as required by state or federal funding.

4. Use of alcohol or drugs in and of itself (without other lease violations) is not considered a reason for eviction. Services are informed by a harm reduction philosophy that recognizes that drug and alcohol use and addiction are a part of tenants’ lives, where tenants are engaged in non-judgmental communication regarding drug and alcohol use, and where tenants are offered education regarding how to avoid risky behaviors and engage in safer practices.

5. If a participant’s tenancy is in jeopardy, every effort is made to offer a transfer to a tenant from one housing situation to another. Whenever possible, eviction back into homelessness is avoided. If unavoidable, every effort is made to connect the participant with outreach or other housing support services.

6. Tenant selection plan for permanent housing includes a prioritization of eligible tenants based on criteria other than “first come/first serve” such as duration/chronicity of homelessness, vulnerability, or high utilization of crisis services.

7. Tenants in permanent housing are given reasonable flexibility in paying their tenant share of rent (after subsidy) on time and are offered special payment arrangements (e.g. a payment plan) for rent arrears and/or assistance with financial management including representative payee arrangements.

RECOMMENDED PROGRAM PRACTICES

- Tenants are not required to have income for program eligibility.

- Case managers/service coordinators are trained in and actively employ evidence-based and best practices for client/tenant engagement such as Motivational Interviewing (MI), Critical Time Intervention (CTI), client-centered care, and trauma-informed care. Agencies are recommended to participate in any trainings provided by the HSC.

- Building and apartment units may include special physical features that accommodate disabilities, reduce harm, and promote health among tenants. These may include elevators,
stovetops with automatic shut-offs, wall-mounted emergency pull-cords, ADA wheelchair compliant showers, soundproofing cushions, etc.

- In the event a provider seeks to terminate services and/or evict a program participant, a notice of termination shall include information of local legal services providers.

PROGRAM EVALUATION FOR HOUSING FIRST

In an effort to move to a system-wide orientation to ending homelessness through the use of Housing First principles, the HSC has included the following section to review agency and program adoption of Housing First. Agencies and programs should follow the guidelines below. The guidelines have been created to minimize as many barriers to housing as possible, recognizing that this may not be feasible under all circumstances. In some cases, there may be other entities, including, but not limited to, private landlords, the criminal justice system, and funders, that place additional tenant requirements upon program participants. The HSC Board will conduct an annual Housing First evaluation to inform funding decisions.

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

- Does the project provide and explain the written eligibility criteria, which are in line with the Housing First philosophy, to participants?
- Does the project have admission/tenant screening and selection practices that promote the acceptance of applicants regardless of their sobriety, use of substances, completion of treatment, or participation in services?
- Does the project accept participants who are diagnosed with or show symptoms of a mental illness?
- Does the project have and follow a written policy for the following:
  a. Stating that taking psychiatric medication and/or treatment compliance for mental illness is not a requirement for entry into or continued participation in the project?
  b. Not rejecting participants based on previous criminal history that is not relevant to participation in the program, and accepting participants regardless of minor criminal convictions to the project?
  c. Not rejecting participants based on prior rental history or past evictions to the project?
  d. Accepting participants regardless of lack of financial resources to the project, unless program operation is dependent upon participant income?
  e. Accepting participants regardless of past non-violent rule infractions within the agency’s own program and/or in other previous housing programs to the project?

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Upon entry to the project, the project agrees to allow participants to remain in the project even if they require an absence of 90 days or less due to the reasons outlined below, unless otherwise prohibited by law or funder policy:

a. Substance use treatment intervention
b. Mental health treatment intervention
c. Hospitalization and short-term rehabilitation
d. Incarceration
e. Or other reason approved by the program supervisor

5. TERMINATION AND GRIEVANCE PROCEDURES

MINIMUM STANDARDS

1. Programs should terminate assistance only in the most severe cases, utilizing the housing first philosophy. (See Housing First section.)
   - Prior to initiating program termination, PSH program staff will complete a Transfer Request Form (Appendix TBD) and submit to the Coordinated Entry Manager for discussion at the next meeting. At the placement meeting, PSH program staff will discuss the situation and housing options, including keeping the participant in their current program and possibly transferring the participant to another program.
   - Discussion of housing options will be participant-centered.
   - Transfers may be made from PSH to PSH program if the participant has chronic homeless documentation in place prior to program entry.
   - Transfers may be made from RRH to PSH if the participant needs more intensive support services. There must be documentation of chronic homeless status prior to RRH program entry. Transfers from RRH to PSH should not be made only for affordability reasons.
   - Transfers will be granted based on consensus of those present at the Housing Placement Meeting.

2. All agencies providing services with CoC and ESG funds shall be required to have a termination and grievance policy. Policies must allow an applicant to formally dispute an agency decision on eligibility to receive assistance. The policy must include the method an applicant would be made aware of the agency’s grievance procedure and the formal process for review and resolution of the grievance.

3. All agencies must have policies that allow a program participant to formally dispute an agency decision to terminate assistance. The policy must include the method that a written notice would be provided containing clear statement of reason(s) for termination, which shall include a detailed statement of facts, the source of the information upon which it was based, and the participant’s right to advance review of the agency’s file and all evidence upon which the decision was based; a review of the decision in which the program participant is given the opportunity to present evidence (written or orally) before a person other than the person who made or approved the termination decision; and a prompt written notice of the final decision to the program participant. The agency has the burden to prove the basis for their decision by a preponderance of the evidence. The decision shall not be based solely on hearsay.
4. If an agency has a website, they must publicly post their termination and grievance procedures.

5. See the Emergency Shelter section for details on how these programs should handle termination and grievances.

6. If a program participant is terminated from a program in which the agency owns the unit, the program will retain the participant’s property for a minimum of 30 days before discarding.

7. Nothing in this section shall prevent an agency from reinstating services pursuant to applicable law.

6. RECOR D KEEPING REQUIREMENTS

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

MINIMUM STANDARDS

1. Each participant file should contain, at a minimum, information required by funders, participation agreements and/or signed lease agreements, service plans, case notes, information on services provided both directly and through referral and any follow-up and evaluation data that are compiled.

2. When required by funders, client information must be entered into HMIS in accordance with the data quality, timeliness and additional requirements found in the HMIS Policies and Procedures manual. At a minimum, programs must record the date the client enters and exits the program, and update the client’s information as changes occur.

3. Financial recordkeeping requirements include documentation of: all costs charged to the grant, funds being spent on allowable costs, the receipt and use of program income, compliance with expenditure limits and deadlines and match contributions.

4. The program will maintain each participant file in a secure place and shall not disclose information from the file without the written permission of the participant as appropriate except to project staff and other agencies as required by law. Participants must give informed consent to release any client identifying data to be utilized for research, teaching and public interpretation.

5. Files must be saved for a minimum of six years after program discharge. It should be noted that different funders may have different record keeping requirements.
SECTION II: PROGRAM REQUIREMENTS

1. PREVENTION

Homelessness prevention assistance includes rental assistance and housing relocation and stabilization services necessary to prevent an individual or family from moving into an emergency shelter, the streets, or a place not meant for human habitation.

ELIGIBILITY CRITERIA

- Participants must meet one of the following categories of HUD’s Homeless Definition under CFR §576.2, AND have an annual income at or below 30% of the county median income:
  - Category 2* (Imminent Risk of Homelessness)
  - Category 3 (Homeless Under Other Federal Statutes)
  - Category 4* (Fleeing/Attempting to Flee Violence, and not living in a place described in Category 1)

*Category 2 and category 4 participants must have no other residence AND lack the resources and support networks to obtain other permanent housing.

OR

Individuals and families who do not meet the definition of "homeless" under any of the categories established in the HUD Homeless Definition final rule, and are "at risk of homelessness" under the McKinney-Vento Act, may receive homeless prevention assistance.

- Participants must meet one of the three categories of HUD’s At Risk of Homelessness Definition under CFR §576.2, AND have an annual income at or below 30% of county median income:
  - Category 1: An individual or family who:
    - Has an annual income below 30% of median family income for the area; AND
    - Does not have sufficient resources or support networks immediately available to prevent them from moving to an emergency shelter or another place defined in Category 1 of the “homeless” definition; AND
    - Meets one of the following conditions:
      - Has moved because of economic reasons 2 or more times during the 60 days immediately preceding the application for assistance; OR
      - Is living in the home of another because of economic hardship; OR
      - Has been notified that their right to occupy their current housing or living situation will be terminated within 21 days after the date of application for assistance; OR
- Lives in a hotel or motel and the cost is not paid for by charitable organizations or by Federal, State, or local government programs for low-income individuals; OR
- Lives in an SRO or efficiency apartment unit in which there reside more than 2 persons or lives in a larger housing unit in which there reside more than one and a half persons per room; OR
- Is exiting a publicly funded institution or system of care; OR
- Otherwise lives in housing that has characteristics associated with instability and an increased risk of homelessness, as identified in the recipient’s approved Con Plan
  - Category 2 (Children/youth who do not qualify as homeless under the homeless definition in §576.2 but qualify as homeless under another Federal statute)
  - Category 3 (Children/youth and their families who do not qualify as homeless under the homeless definition in §576.2, but who do qualify as homeless under Section 725(2) of the McKinney-Vento Homeless Assistance Act)

**PARTICIPANT PRIORITIZATION REQUIREMENTS FOR FINANCIAL ASSISTANCE**

- All individuals and families must meet the minimum HUD requirements for eligibility for homeless prevention. Further, all participants must have experienced homelessness in an emergency shelter, safe haven or place not meant for human habitation at some point in their lives.

The HSC will use a shared prioritization scoring tool (see appendix K) that will target participants with the most barriers to housing. This tool will be used for individuals and households that meet the initial eligibility requirements listed above. Participants with the highest score at the end of an agency’s intake period will be prioritized to receive financial assistance.

**MINIMUM STANDARDS FOR FINANCIAL ASSISTANCE**

1. Financial assistance includes the following: one-time payment for up to 6 months of rent in arrears including any late fees, short-term rental assistance up to 3 months, medium-term rental assistance up to 6 months, rental application fees, security deposits equal to no more than 2 months rent, last month’s rent, utility deposits, utility payments up to 6 months, and moving costs (or otherwise directed by the funder).
2. Households can only receive assistance once in a three-year period or otherwise directed by the funder.
3. Households in CoC–funded Permanent Supportive Housing (PSH) can receive financial assistance if the program receives rental assistance funding. If the PSH program is leasing or operation, the household is not eligible for financial prevention assistance.
4. The costs of homelessness prevention are only eligible to the extent that the assistance is necessary to help the program participant regain stability in the program participant’s current permanent housing or move into other permanent housing and achieve stability in that housing for at least 30 days. Prevention funds may be provided for 6 months of rental arrears not to exceed two months of Fair Market Rent for the unit type.
a. All clients are assessed to determine initial need and create a budget to outline planned need for assistance, including establishing a plan for housing stability for the next 30 days.

b. Agencies cannot set organizational maximums or minimums.

c. The HSC expects that agencies will use progressive engagement and households receive the minimum amount of assistance necessary to stabilize in housing.

5. If providing short-term rental assistance (more than a one time payment of rental arrears), eligibility and types/amounts of assistance must be re-evaluated not less than once every 3 months. At a minimum, each re-evaluation must establish and document:

   a. The program participant does not have an annual income that exceeds 30% of county median income.

   b. The program participant lacks sufficient resources and support networks necessary to retain housing without prevention assistance.

   c. Programs may require program participants receiving assistance or services to provide notification regarding changes to household income, household composition, or other circumstances that may impact need for assistance.

6. Financial assistance will be distributed in a way to ensure that programs have funds available throughout the grant period.

7. Participants will work with their case manager to develop their individual housing plan based on participant goals and shared goals for achieving housing stability. Case managers will use the housing plan to determine the participant contribution based on monthly income. Financial assistance is available for households with zero income.

**MINIMUM STANDARDS FOR HOUSING RELOCATION AND STABILIZATION SERVICES**

1. Housing Relocation and Stabilization Services include the following: housing search and placement, housing stability case management, mediation, legal services, and credit repair.

2. The costs of homelessness prevention are only eligible to the extent that the assistance is necessary to help the program participant regain stability in the program participant’s current permanent housing or move into other permanent housing and achieve stability in that housing.

3. Eligibility and types/amounts of assistance must be re-evaluated not less than once every 3 months. At a minimum, each re-evaluation must establish and document:

   a. The program participant does not have an annual income that exceeds 30% of county median income.

   b. The program participant lacks sufficient resources and support networks necessary to retain housing without prevention assistance.

4. Programs may require program participants receiving assistance or services to provide notification regarding changes to household income, household composition, or other circumstances that may impact need for assistance.

5. Homeless prevention participants receiving housing stability case management will be offered a meeting with a case manager not less than once per month to assist in ensuring long-term housing stability. Case managers and program managers are encouraged to provide more than the minimum required services through case management.
2. STREET OUTREACH

Street outreach workers engage with people experiencing unsheltered homelessness in order to connect them with emergency shelter, housing, or other critical services. Street outreach services are provided in non-facility-based settings for people experiencing unsheltered homelessness who are not accessing emergency shelter, housing, or an appropriate health facility.

ELIGIBILITY CRITERIA

- Participants must meet category 1 – Literally Homeless as outlined by the HUD definition of homelessness.
- Priority will be given those who are not already engaged with the system

MINIMUM STANDARDS

1. Support services provided must be focused on:
   a. Getting participants housed (permanent housing, shelter, transitional housing, doubled up, etc.)
   b. Linking participants to mainstream benefits and resources
   c. Maintaining benefits for which the participants are eligible
2. Participant engagement – outreach workers will locate, identify, and build relationships with unsheltered homeless people and engage them for the purpose of providing immediate support, intervention, and connections with homeless assistance programs and/or mainstream social services and housing programs.
3. Services are not facility based. Outreach workers will go where services are needed.
4. Programs will address urgent physical needs, such as providing meals, blankets, clothes, or toiletries.
5. Programs will provide assistance with navigating the homeless service system, including linking the participant to coordinated entry, conducting the VI-SPDAT assessment and referring the participant to the permanent housing priority list.
6. Outreach staff will remain connected to participants until they are linked to other supportive services. These may include shelter case management, CCS services or services offered through a housing program.
7. Programs will work with coordinated entry system and make appropriate referrals to permanent housing placement. Participate in outreach and placement meetings.
8. If a worker does not have contact with a participant for 90 days, the participant must be exited from the program in HMIS.

MINIMUM PERFORMANCE BENCHMARKS

1. Less than 5% of participants who have a successful exit (no longer sleeping outside) will return to shelter within 2 years OR the number of participants returning to shelter within 2 years decreases by 20% from the previous year.
2. 80% of participants will have a successful exit from the outreach program.
3. At least 46% of participant situations will meet HUD’s definition of chronic homelessness.
3. DIVERSION

Diversion\(^2\) 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. Diversion connects to people as they are requesting shelter. Diversion is not about keeping people out of the shelter system. It is about creative conversations to help people remain in their current housing situation. It should always be safe and appropriate for the participant. Diversion services may include: short term case management; limited financial assistance; conflict mediation; connection to mainstream services/benefits; and housing search.

**ELIGIBILITY CRITERIA**

1. A standard assessment tool should be used to screen for diversion. See Appendix G for Diversion Assessment Tool.

**MINIMUM STANDARDS**

1. Immediate Connection to Case Management: When a household is deemed eligible for diversion services, they must be connected to a case manager immediately to start housing planning, both for immediate and long-term housing.
2. Resourceful Staff Members: Staff should be familiar with the intake and assessment processes, have experience with landlord mediation and conflict resolution, and be knowledgeable about rental subsidies and financial literacy programs.
3. Screening Tool and Process: All households requesting shelter should be screened for diversion eligibility using an assessment tool.
4. System Entry Points: Assessment for eligibility should take place at the initial access point to the homeless assistance system.
5. Cooperation from Other Providers: Instead of automatically admitting people into shelter, providers should assess or refer them to be assessed for diversion. This ensures that all families have a chance at being diverted.
6. Cooperation from Service Providers: Mainstream service providers may help stabilize families once they have been diverted or have found a new unit. In addition, they can refer families who may be eligible for diversion services.
7. Flexible Funding: Funds should ensure households get into or maintain housing, allow them to stay longer in a doubled up situation, unify them with family members or get them into new housing.
8. Participant safety must be considered first. Participants decide what is safe and appropriate for themselves.
9. If a participant requests funds to get to another community, service providers must confirm they have housing in that community.
10. All participants who enter into a diversion program must be entered into HMIS.

**MINIMUM PERFORMANCE BENCHMARKS**

\(^2\) Diversion section taken from: National Alliance to End Homelessness, “Closing the Front Door: Creating a Successful Diversion Program for Homeless Families”
1. In 2018, divert 10% of households that contact any organization that helps people experiencing homelessness into safe and legal living conditions. (2019-15%, 2020-25%, 2021-35%)
2. In 2019, no more than 15% of households served with diversion resources will experience homelessness again over the course of two years. (2020-no more than 7%)

4. EMERGENCY SHELTER

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

ELIGIBILITY CRITERIA

- Participants must meet the HUD definition of homelessness.

MINIMUM STANDARDS

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

2. Supportive services are available to assist persons in obtaining housing either on-site or through a day-time resource center. All shelter residents are notified of the availability of support services and how to access the services.

3. Shelter is available every day of the year. In the instances where it is necessary to temporarily close a shelter for rehabilitation or major maintenance work, as much notice as possible should be provided to guests, and efforts should be made to find a short-term replacement facility.

4. Shelter guests will be treated by staff and volunteers with respect and dignity and will receive a welcoming, safe and non-intimidating environment.

5. Each shelter will have a policy of respect for each individual’s self-identified gender. Guests who request shelter services will be admitted to the shelter operated for the gender to which an individual identifies themselves. Transgender and transsexual guests will be offered the same services and resources as all other guests as long as resident safety can be maintained. While shelter staff will take reasonable steps to accommodate specific needs, it may not be possible to segregate the individual from the rest of the shelter population. Staff will not share or in any way advertise the fact that certain guests may have identified themselves as transgendered/transsexual.

6. All individuals or groups of individuals regardless of age, gender identification, sexual orientation, and marital status identifying as a family at a family shelter must be served as a family. Families at family shelters must not be separated when entering shelter. There can be no inquiry, documentation requirement or “proof” related to family status, gender identification and/ or sexual orientation. The prohibition on inquiries or documentation does not prohibit inquiries related to an individual’s sex for the limited purpose of determining placement in temporary, emergency shelters that are limited to one sex because they have shared bedrooms.

Approved by the Madison/Dane County Continuum of Care Board of Directors – September 21, 2018
or bathrooms, or for determining the number of bedrooms to which a household may be entitled. The age and/or gender of a child under 18 must not be used as a basis for denying any family’s admission to a program that uses ESG or THP funding or services if those programs serve families with children under age 18.\(^3\)

7. There is no charge to a shelter guest for emergency shelter.

8. Documentation (including Photo ID, birth certificate, etc.) is not a barrier to shelter. Identification may be requested when safety is a factor.

9. Guests may be asked to leave for a period of time in the event of serious infraction and only in the most severe cases such as for behavior that is deemed seriously threatening or harmful to other guests and staff. Banning a shelter guest is allowed only when all other options have been explored and a ban is necessary to protect the health and safety of staff and guests. All shelter guests will be notified of the agency’s grievance policy. When it is not possible to serve a guest because of the guest’s behavior, efforts will be made by shelter staff to assist the guest in finding alternatives. See Dane County Ordinance 30.04 for details on the procedure for discontinuing shelter services to a guest.

**ACCESS TO SHELTER**

- All shelters will participate in coordinated entry. All shelters are highly encouraged to assess clients for appropriate permanent housing placement using the VI-SPDAT. If shelters cannot assess clients due to lack of shelter resources, shelters must refer clients to the coordinated entry system for assessment, and explain to clients the process of accessing housing programs.

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

**PRIORITIZATION FOR FAMILY SHELTER**

- Emergency Family Shelter (EFS): provides shelter for 18 people on a nightly basis, with additional overflow shelter between April - October. Priority is given to families with newborns (3 months and younger) and then to families who were denied the night before. As many families as possible are accommodated, based on space available. Other factors that are accounted for are VI-F-SPDAT score and where the family sleeps when not accepted in to EFS.

- Family Shelter: Families are prioritized for Family shelter based on VI-F-SPDAT score, family size and the number of beds available, length of time on the priority list with weekly check in, and also by eligibility/compatibility per shelter.

**SHELTER FOR FAMILIES WITH CHILDREN**

The Salvation Army is the point of entry for shelter for homeless families. Shelter is provided on-site at The Salvation Army building on East Washington Avenue, at the YWCA on East Mifflin Street, at The Road Home, which uses rotating sites, and at local motels. If these options are full, homeless families

\(^3\) From (24 CFR § 576.102 Prohibition against involuntary family separation) (24 CFR § 5.403 Definitions- Family) (24 CFR §570.3 Definitions - Household) (24 CFR 5.105(a) Nondiscrimination and equal opportunity)
will be offered a spot at the Emergency Shelter overflow program which is a night-time only shelter located at The Salvation Army shelter building as space allows. All families access the shelter system via coordinated entry to determine eligibility and availability.

SHELTER FOR SINGLE MEN

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

SHELTER FOR SINGLE WOMEN

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

SHELTER FOR UNACCOMPANIED YOUTH

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

SHELTER FOR PERSONS WITH IMMEDIATE SAFETY NEEDS

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

MEDICAL SHELTER VOUCHERS

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

5. TRANSITIONAL HOUSING

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

ELIGIBILITY CRITERIA
• Participants must meet categories 1 - Literally Homeless, 2 - At Imminent Risk, or 4 - Fleeing Domestic Violence as outlined by the HUD definition of homelessness.

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

MINIMUM STANDARDS

1. Maximum length of stay cannot exceed 24 months.
2. Assistance in transitioning to permanent housing must be provided. A VI-SPDAT must be completed within 30 days of program entry, and the household name referred to the appropriate housing priority list, if not done already. A participant has the right to refuse completing the VI-SPDAT assessment.
3. Intensive support services must be provided through the duration of stay in transitional housing.
4. Program participants in transitional housing must enter into a lease agreement for a term of at least one month. The lease must be automatically renewable upon expiration, except on prior notice by either party, up to a maximum term of 24 months.
5. Case management staff must have skills and experience to meet the unique needs of the population served.

MINIMUM PERFORMANCE BENCHMARKS FOR TH PROJECTS

• 80% or more of all participants will exit to a permanent housing situation
• 63% or more of all participants will have mainstream (non-cash) benefits at exit from program
• 54% or more of adult participants will increase income from all sources

6. PERMANENT SUPPORTIVE HOUSING
Permanent supportive housing (PSH) is safe, affordable housing, the purpose of which is to provide housing without a designated length of stay.

ELIGIBILITY CRITERIA

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

PARTICIPANT PRIORITIZATION REQUIREMENTS

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

FIRST PRIORITY - Chronically Homeless Individuals and Families with the Longest History of Homelessness and with the Most Severe Service Needs.

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

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

SECOND PRIORITY - Chronically Homeless Individuals and Families with the Longest History of Homelessness.

5 See Section I.D.3. of the HUD Notice for definition of severe service needs.
A chronically homeless individual or head of household, as defined in 24 CFR 578.3, for which both of the following are true:

i. The chronically homeless individual or head of household of a family has been homeless and living in a place not meant for human habitation, a safe haven, or in an emergency shelter for at least 12 months either continuously or on at least four separate occasions in the last 3 years, where the cumulative total length of the four occasions equals at least 12 months; and,

ii. The CoC or CoC program recipient has not identified the chronically homeless individual or the head of household, who meets all of the criteria in paragraph (1) of the definition for chronically homeless, of the family as having severe service needs.

THIRD PRIORITY - Chronically Homeless Individuals and Families with the Most Severe Service Needs.

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

i. The chronically homeless individual or head of household of a family has been homeless and living or residing in a place not meant for human habitation, a safe haven, or in an emergency shelter on at least four separate occasions in the last 3 years, where the total length of those separate occasions equals less than one year; and

ii. The CoC or CoC program recipient has identified the chronically homeless individual or the head of household, who meets all of the criteria in paragraph (1) of the definition for chronically homeless, of the family as having severe service needs.

FOURTH PRIORITY - All Other Chronically Homeless Individuals and Families.

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

i. The chronically homeless individual or head of household of a family has been homeless and living in a place not meant for human habitation, a safe haven, or in an emergency shelter for at least four separate occasions in the last 3 years, where the cumulative total length the four 8 occasions is less than 12 months; and

ii. The CoC or CoC program recipient has not identified the chronically homeless individual or the head of household, who meets all of the criteria in paragraph (1) of the definition for chronically homeless, of the family as having severe service needs.

COMMUNITY-WIDE PRIORITIZATION REPORT

Following the above prioritization requirements, the community-wide prioritization report will rank potential participants by chronic homeless status and total points. The number of points are determined
by using the following calculation: \((\text{Number of months of homelessness}/12) + \text{VI-SPDAT score} = \text{total points}\).

**RECORD KEEPING REQUIREMENTS FOR DOCUMENTING CHRONIC HOMELESS STATUS**

1. Programs must have written intake procedures that establish the order of priority for obtaining evidence. The acceptable order of obtaining evidence as defined by HUD is:
   i. third party documentation,
   ii. intake worker observations, and
   iii. certification from the person seeking assistance.

Records found in HMIS are acceptable evidence of third-party documentation and intake worker observations if there is a history of all entries including who entered the data, date of entry, and the change made AND if HMIS prevents overrides or changes of dates of entries made.

2. CoC-funded PSH programs whose grant agreement includes beds that are dedicated or prioritized for the chronic homeless must maintain records showing that those receiving assistance meet the definition of chronically homeless. Records must include evidence of homeless status, duration of homelessness and documentation of disability.

**A. EVIDENCE OF HOMELESS STATUS**

Evidence of a household’s current living situation may be documented by written observation of an outreach worker, written referral by housing or service provider or self-certification from the person seeking service that they are homeless and living in a place not meant for human habitation, an emergency shelter or a safe haven. For paragraph 2 of the definition for persons residing in an institution, acceptable evidence includes:

i. Discharge paperwork or a written or oral referral from a social worker, case manager, or other appropriate official of the institution, stating the beginning and end dates of the time residing in the institution that demonstrate the person resided there for less than 90 days. All oral statements must be recorded by the intake worker; or

ii. Where the evidence above is not obtainable, a written record of the intake worker’s due diligence in attempting to obtain the evidence described in the paragraph i. above and a certification by the individual seeking assistance that states that they are exiting or have just exited an institution where they resided for less than 90 days; and

iii. Evidence that the individual was homeless and living in a place not meant for human habitation, a safe haven, or in an emergency shelter, and met the criteria in paragraph (1) of the definition for chronically homeless in 24 CFR 578.3, immediately prior to entry into the institutional care facility.

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B. EVIDENCE OF THE DURATION OF THE HOMELESSNESS

Recipients documenting chronically homeless status must also maintain the evidence described in paragraph i. or in paragraph ii. below, and the evidence described in paragraph iii. below:

i. Evidence that the homeless occasion was continuous, for at least one year.

Recipients must provide evidence that the homeless occasion was continuous, for a year period, without a break in living or residing in a place not meant for human habitation, a safe haven, or in an emergency shelter. A break is considered at least seven or more consecutive nights not residing in a place not meant for human habitation, in shelter, or in a safe haven.

At least 9 months of the 1-year period must be documented by one of the following: (1) HMIS data, (2) a written referral, or (3) a written observation by an outreach worker. In only rare and the most extreme cases, HUD would allow a certification from the individual or head of household seeking assistance in place of third-party documentation for up to the entire period of homelessness. Where third-party evidence could not be obtained, the intake worker must obtain a certification from the individual or head of household seeking assistance, and evidence of the efforts made to obtain third-party evidence as well as documentation of the severity of the situation in which the individual or head of household has been living. An example of where this might occur is where an individual has been homeless and living in a place not meant for human habitation in a secluded area for more than 1 year and has not had any contact with anyone during that entire period.

Note: A single encounter with a homeless service provider on a single day within 1 month that is documented through third-party documentation is sufficient to consider an individual or family as homeless for the entire month unless there is any evidence that the household has had a break in homeless status during that month (e.g., evidence in HMIS of a stay in transitional housing).

ii. Evidence that the household experienced at least four separate homeless occasions over 3 years that combined total at least 12 months.

The recipient must provide evidence that the head of household experienced at least four, separate, occasions of homelessness in the past 3 years that combined total at least 12 months.

Generally, at least three occasions must be documented by either: (1) HMIS data, (2) a written referral, or (3) a written observation. Any other occasion may be documented by a self-certification with no other supporting documentation.

In only rare and the most extreme cases, HUD will permit a certification from the individual or head of household seeking assistance in place of third-party documentation for the three
occasions that must be documented by either: (1) HMIS data, (2) a written referral, or (3) a
written observation. Where third-party evidence could not be obtained, the intake worker
must obtain a certification from the individual or head of household seeking assistance, and
must document efforts made to obtain third-party evidence, and document of the severity
of the situation in which the individual has been living. An example of where this might
occur is where an individual has been homeless and living in a place not meant for human
habitation in a secluded area for more than one occasion of homelessness and has not had
any contact with anyone during that period.

iii. Evidence of diagnosis with one or more of the following conditions: substance use disorder,
serious mental illness, developmental disability (as defined in Section 102 of the
Developmental Disabilities Assistance Bill of Rights Act of 2000 (42 U.S.C. 15002), post-
traumatic stress disorder, cognitive impairments resulting from brain injury, or chronic
physical illness or disability. Evidence of this criterion must include one of the following: (1)
Written verification of the condition from a professional licensed by the state to diagnose
and treat the condition; (2) Written verification from the Social Security Administration; (3)
Copies of a disability check (e.g., Social Security Disability Insurance check or Veterans
Disability Compensation); (4) Intake staff (or referral staff) observation that is confirmed by
written verification of the condition from a professional licensed by the state to diagnose
and treat the condition that is confirmed no later than 45 days of the application for
assistance and accompanied with one of the types of evidence above; or (5) Other
documentation approved by HUD

MINIMUM STANDARDS

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

ACCESS TO PSH PROJECTS

- All referrals for PSH projects will come through the coordinated entry system and the CoC-wide
  PSH priority lists for families and individuals.
- Exceptions to the priority list will be made in rare circumstances for persons who are extremely
  vulnerable. This includes participants who are unable to complete the VI-SDPAT due to a mental
  health barrier, a severe cognitive disabilities, or traumatic brain injury. A majority of those
  present at the housing placement meeting must agree to the exception. The following will be
  taken into consideration:
The number of ambulance calls within the last month
- The participant’s score for the medical questions on the VI-SDPAT/VI-F-SPDAT
- Written documentation from a medical health professional

Or

Consensus among outreach workers

- Following the Housing First model, HSC programs will collaborate to ensure that program participants facing possible eviction from their unit, and termination from a program, remain in permanent housing. Exceptions to the priority list may be made to transfer current program participants, who were chronically homeless at the time of program entry, from RRH to PSH programs, or from PSH to PSH programs. Program staff will bring the participant case to the placement meeting prior to initiating the eviction process for trouble-shooting and discussion of housing options, including keeping the participant in their current program and possibly transferring the participant to another program. Discussion of housing options will be participant-centered. If a program transfers a participant out of their program, the program will be required to take a new participant off the community-wide priority list.

MINIMUM PERFORMANCE BENCHMARKS FOR PSH PROJECTS

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

7. RAPID RE-HOUSING

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

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

Program staff are expected to remain engaged with the households from first contact to program exit (no more than 24 months of rental assistance, in addition to up to 6 months of continued case management), using a progressive engagement approach and tailoring services to the needs of the household in order to assist the household to maintain permanent housing. (24 CFR 578.37 and Core Components of Rapid Re-Housing, National Alliance to End Homelessness) According to the National Alliance to End Homelessness, progressive engagement is “a strategy of providing a small amount of
assistance to everyone entering the homelessness system. For most households, a small amount of assistance is enough to stabilize, but for those who need more, more assistance is provided. This flexible, individualized approach maximizes resources by only providing the most assistance to the households who truly need it. This approach is supported by research that household characteristics such as income, employment, substance use, etc., cannot predict what level of assistance a household will need.”

**ELIGIBILITY CRITERIA**

- Participants must meet categories 1- Literally Homeless or 4 – Fleeing Domestic Violence as outlined by the HUD definition of homelessness.
- If the household meets category 4, they must also reside in one of the places set forth in category 1 at the time eligibility is determined. Homeless Verification form must be retained in the household’s file.
- The participant’s household annual income must be at or below 30% CMI.
- The participant must be assessed using the VI-SPDAT or VI-F-SPDAT. To qualify for RRH, a participant must have a VI-SPDAT score in the range 4-7 or a family must have a score within the range 4-8. A copy of the assessment shall be retained in the participant’s file.
- Participants must lack sufficient resources and support networks necessary to retain housing without rapid rehousing assistance (24 CFR 578.37(E)).
- Participants will be prioritized based on VI-SPDAT or VI-F-SPDAT score and length of time homeless. Youth ages 18-21 will be prioritized.

**COMMUNITY-WIDE PRIORITIZATION REPORT**

The community-wide prioritization report will rank potential participants by homeless status and total points. The number of points are determined by using the following calculation: (Number of months of homelessness/12) + VI-SPDAT score = total points.

**MINIMUM STANDARDS**

1. The maximum length of program participation is 24 months.
2. Supportive services designed to meet the needs of the project participants must be made available to the project participant throughout the duration of stay in the RRH project.
3. Project participants in RRH must enter into a written lease agreement that is terminable for cause. The lease must be automatically renewable upon expiration for a minimum term of one month, except on prior notice by either party. Programs may have additional requirements determined by program funding requirements. For example, programs may require a written lease agreement for an initial term of one year.
4. RRH programs may provide move-in costs.
5. RRH project will use Housing First approaches, following the Minimum Standards listed in the Housing First section of the Written Standards.
6. Financial assistance and case management should be based on a household’s individual needs using progressive engagement. Assistance should be offered using a light touch; start with a small amount of assistance and increase it if needed.
7. RRH programs will connect households with community resources and mainstream benefits to allow for individual resources to be used for housing costs.

ACCESS TO RAPID RE-HOUSING

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

MINIMUM PERFORMANCE BENCHMARKS FOR RRH PROJECTS

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

8. EMERGENCY TRANSFER PLAN

The Continuum of Care is required to have an Emergency Transfer Plan in place in cases of domestic violence, dating violence, sexual assault, or stalking where a household deems their current unit an unsafe living situation. A victim may request an emergency transfer from their current unit to another unit. The ability to request a transfer is available regardless of sex, gender identity, or sexual orientation. Providers shall publicly post the Emergency Transfer Plan on its website and in a conspicuous location on its premises.

ELIGIBILITY CRITERIA

- A victim of domestic violence, dating violence, sexual assault, or stalking qualifies for an emergency transfer if:
  - The tenant requests the transfer; and
  - The tenant believes there is a threat of imminent harm from further violence if the tenant remains within the same dwelling unit that the tenant is currently occupying; or
  - In cases of sexual assault
    - the tenant reasonably believes there is a threat of imminent harm from further violence if the tenant remains in their current unit, or
    - the sexual assault occurred on the premises during the 90-calendar-day period preceding the date of the request for transfer.
- Requests for an emergency transfer can be either written or verbal. If a verbal request is made, staff shall document the request in writing.
In cases of two adult households where the participant asked to leave was the eligible participant for the housing program, the remaining participant(s) that were not already eligible will have a period of 90 calendar days from the date of the eligible participant leaving to:

- Establish eligibility for the housing program
- Establish eligibility for another housing program
- If not eligible for a housing program, assist with finding alternative housing.

Agencies may extend this period up to an additional 60 calendar days if needed. Case management staff will help to obtain documentation. The provider shall give written notice to the remaining participant of the remaining participant’s rights under this section, including the right to an extension. Denials of extensions shall be subject to the provider’s grievance process.

- Although every effort will be made to keep the person requesting the emergency transfer in the program, there is no guarantee that continued assistance will be available in the current program or in other program housing.

MINIMUM STANDARDS

1. Upon request for an emergency transfer, the housing provider must establish an individualized plan within 24 hours to the tenant and provide a copy of the plan to the tenant in writing.

2. Program staff must complete an immediate initial emergency transfer if a safe unit can be identified. The participant will move to the new unit without having to undergo an application process.

3. If a participant must move outside of the current project to locate a safe unit, the program staff must communicate with other projects within the CoC’s Coordinated Entry System to complete an external emergency transfer. The participant will move to another unit as soon as a unit is identified as available, and on its face, it appears that the tenant is eligible. The applicant will subsequently undergo an application process in order to establish permanent residency in the new unit.

4. Program participants requesting an emergency transfer will be prioritized above any other households for open units.

5. The program participant will make a decision on whether or not a unit qualifies as a safe unit.

6. Program participants may request an external emergency transfer. Participants may also request both an internal and external transfer at the same time in order to speed up the process of identifying a new unit.

7. Agencies participating in Coordinated Entry must accept emergency transfers as they have available units that are deemed safe.

8. Program staff will work together to ensure an immediate transfer to a new safe unit. If needed, the participant may seek shelter while a permanent safe unit is being secured.

9. For families receiving tenant-based rental assistance, if the family separates in order to affect an emergency transfer, the housing provider must work with the family members exiting from the program on housing stability. This may include working with the landlord so the family can
stay in the unit or work towards a mutual lease termination. The housing provider will conduct a housing search with the family members for 90 days and if not housed, connect to another provider for ongoing assistance.

10. The housing provider, at its discretion, may make a written request for documentation from the tenant of the occurrence of domestic violence, dating violence, sexual assault, or stalking for which the emergency transfer is requested. **Housing providers are NOT required to request documentation.** Housing provider’s policies must include their policy for requesting documentation, if they choose to request documentation. The policy must be consistent with these standards and equally applied to all participants. Should the housing provider exercise its discretion to request documentation, it shall do so in writing. The written request shall inform the tenant of the types of additional documentation that may be provided, any one of which would be acceptable, and the period of time by which the documentation is to be provided. The period of time shall be no less than 14 days and may be extended by the provider. This documentation may include:

- Certification Form (see Appendix)
- A document:
  - Signed by an employee, agent, or volunteer of a victim service provider, an attorney, or medical professional, or a mental health professional from whom the victim has sought assistance relating to domestic violence, dating violence, sexual assault, or stalking or the effects of abuse;
  - Signed by the applicant or tenant; and
  - That specifies, under penalty of perjury, that the professional believes in the occurrence of the incident of domestic violence, dating violence, sexual assault, or stalking that is the ground for protection and that the incident meets the applicable definition of domestic violence, dating violence, sexual assault, or stalking (see glossary); or
- A record of a Federal, State, tribal or territorial or local law enforcement agency, court or administrative agency; or
- A statement or other evidence provided by the applicant or tenant.

If the housing provider receives documentation that contains conflicting information, the housing provider may require third-party documentation be obtained within thirty days of the request for third-party documentation. Conflicting information cannot be the result of the housing provider’s own personal biases or stereotypes about survivors. **Housing providers are NOT required to obtain the above documentation.** The housing provider may deny the emergency transfer request if documentation has not been provided. Participants are entitled to written notice of denials of emergency transfer requests that include specific grounds for denial, information on their right to grieve the denial and, a copy of the grievance process.

11. Housing providers must keep a record of all emergency transfers requested under this plan and the outcomes of such requests, and retain these records for a period of three years, or for a period of time specified in program regulations. Requests and outcomes of such requests must be reported to HUD and the CoC Board of Directors annually.
24 CFR §583.5 HUD HOMELESS DEFINITION

(1) An individual or family who lacks a fixed, regular and adequate nighttime residence, meaning:

(i) An individual or family with a primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings, including a car, park, abandoned building, bus or train station, airport, camping ground;

(ii) An individual or family living in a supervised publicly or privately operated shelter designated to provide temporary living arrangement (including congregate shelters, transitional housing, and hotels and motels paid for by charitable organizations or by federal, state, or local government programs for low income individuals); or

(iii) An individual who is exiting an institution where he or she resided for 90 days or less and who resided in an emergency shelter or place not meant for human habitation immediately before entering that institution;

(2) An individual or family who will imminently lose their primary nighttime residence, provided that:

(i) The primary nighttime residence will be lost within 14 days of the date of application for homeless assistance;

(ii) No subsequent residence has been identified; and

(iii) The individual or family lacks the resources or support networks, e.g., family, friends, faith-based or other social networks, needed to obtain other permanent housing;

(3) Unaccompanied youth under 25 years of age, or families with children and youth, who do not otherwise qualify as homeless under this definition, but who:

(i) Are defined as homeless under section 387 of the Runaway and Homeless Youth Act (42 U.S.C. 5732a), section 637 of the Head Start Act (42 U.S.C. 9832), section 41403 of the

(ii) Have not had a lease, ownership interest, or occupancy agreement in permanent housing at any time during the 60 days immediately preceding the date of application for homeless assistance;

(iii) Have experienced persistent instability as measured by two moves or more during the 60-day period immediately preceding the date of applying for homeless assistance; and

(iv) Can be expected to continue in such status for an extended period of time because of chronic disabilities, chronic physical health or mental health conditions, substance addiction, histories of domestic violence or childhood abuse (including neglect), the presence of a child or youth with a disability, or two or more barriers to employment, which include the lack of a high school degree or General Education Development (GED), illiteracy, low English proficiency, a history of incarceration or detention for criminal activity, and a history of unstable employment;

Or

(4) Any individual or family who:

(i) Is fleeing, or is attempting to flee, domestic violence, dating violence, sexual assault, stalking, or other dangerous or life-threatening conditions that relate to violence against the individual or a family member, including a child, that has either taken place within the individual’s or family’s primary nighttime residence or has made the individual or family afraid to return to their primary nighttime residence;

(ii) Has no other residence; and

(iii) Lacks the resources or support networks, e.g., family, friends, and faith-based or other social networks, to obtain other permanent housing.
APPENDIX B: DEFINITION OF CHRONICALLY HOMELESS

24 CFR §578.3 HUD CHRONICALLY HOMELESS DEFINITION

(1) A “homeless individual with a disability,” as defined in section 401(9) of the McKinney-Vento Homeless Assistance Act (42 U.S.C. 11360(9)), who:

   (i) Lives in a place not meant for human habitation, a safe haven, or in an emergency shelter; and

   (ii) Has been homeless and living as described in paragraph (1)(i) of this definition continuously for at least 12 months or on at least 4 separate occasions in the last 3 years, as long as the combined occasions equal at least 12 months and each break in homelessness separating the occasions included at least 7 consecutive nights of not living as described in paragraph (1)(i). Stays in institutional care facilities for fewer than 90 days will not constitute as 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 emergency shelter immediately before entering the institutional care facility;

(2) An individual 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 met all of the criteria in paragraph (1) of this definition, before entering that facility; or

(3) 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 of the criteria in paragraph (1) or (2) of this definition, including a family whose composition has fluctuated while the head of household has been homeless.
APPENDIX C: DEFINITION OF AT RISK OF HOMELESSNESS

24 CFR §576.2 HUD AT RISK OF HOMELESSNESS DEFINITION

At risk of homelessness means:

(1) An individual or family who:
   (i) Has an annual income below 30 percent of median family income for the area, as determined by HUD;
   (ii) Does not have sufficient resources or support networks, e.g., family, friends, faith-based or other social networks, immediately available to prevent them from moving to an emergency shelter or another place described in paragraph (1) of the “homeless” definition in this section; and
   (iii) Meets one of the following conditions:
      (A) Has moved because of economic reasons two or more times during the 60 days immediately preceding the application for homelessness prevention assistance;
      (B) Is living in the home of another because of economic hardship;
      (C) Has been notified in writing that their right to occupy their current housing or living situation will be terminated within 21 days after the date of application for assistance;
      (D) Lives in a hotel or motel and the cost of the hotel or motel stay is not paid by charitable organizations or by Federal, State, or local government programs for low-income individuals;
      (E) Lives in a single-room occupancy or efficiency apartment unit in which there reside more than two persons or lives in a larger housing unit in which there reside more than 1.5 persons reside per room, as defined by the U.S. Census Bureau;
      (F) Is exiting a publicly funded institution, or system of care (such as a health-care facility, a mental health facility, foster care or other youth facility, or correction program or institution); or
      (G) Otherwise lives in housing that has characteristics associated with instability and an increased risk of homelessness, as identified in the recipient’s approved consolidated plan;

(2) A child or youth who does not qualify as “homeless” under this section, but qualifies as “homeless” under section 387(3) of the Runaway and Homeless Youth Act (42 U.S.C. 5732a(3)), section 637(11) of the Head Start Act (42 U.S.C. 9832(11)), section 41403(6) of the Violence Against Women Act of 1994 (42 U.S.C. 14043e–2(6)), section 330(h)(5)(A) of the Public Health Service Act (42 U.S.C. 254b(h)(5)(A)), section 3(m) of the Food and Nutrition Act of 2008 (7 U.S.C. 2012(m)), or section 17(b)(15) of the Child Nutrition Act of 1966 (42 U.S.C. 1786(b)(15)); or

(3) A child or youth who does not qualify as “homeless” under this section, but qualifies as “homeless” under section 725(2) of the McKinney-Vento Homeless Assistance Act (42 U.S.C. 11434a(2)), and the parent(s) or guardian(s) of that child or youth if living with her or him.
“Coordinated Entry is an important process through which people experiencing or at risk of experiencing homelessness can access the crisis response system in a streamlined way, have their strengths and needs quickly assessed, and quickly connect to appropriate, tailored housing and mainstream services within the community or designated region. Standardized assessment tools and practices used within local coordinated assessment processes take into account the unique needs of children and their families as well as youth. When possible, the assessment provides the ability for households to gain access to the best options to address their needs, incorporating participants’ choice, rather than being evaluated for a single program within the system. The most intensive interventions are prioritized for those with the highest needs.” (Opening Doors: Federal Strategic Plan to Prevent and End Homelessness, p. 57)

The Coordinated Entry (CE) policies and procedures are put in place by the Dane County Homeless Services Consortium to provide an effective coordinated entry system. The system is intended to match people in a housing crisis (either homeless or at-risk of homelessness) with the level of service needed to end the crisis and assist them in housing stability. All programs that receive Continuum of Care Program, Emergency Solutions Grant (ESG) or State of Wisconsin ETH Grant funding must abide by these policies and procedures. Programs funded through other sources are highly encouraged to participate in CE and follow these policies and procedures.

Coordinated Entry responsibilities are completed at assessment hubs which are both permanent and mobile locations. Coordinated Entry staff refers to staff paid through the CoC grant for Coordinated Entry and are located at hubs. Other staff may be certified to complete coordinated entry duties, but are not located at a hub.

Access

Full Coverage

The Coordinated Entry system is accessible throughout Dane County. The Homeless Services Consortium website has up to date information regarding access to Coordinated Entry. There are phone numbers that people can use to connect to the system. Phone numbers can be accessed through the website (www.danecountyhomeless.org). Callers will be assessed for immediate needs over the phone and will not be required to present in the provider’s office. Assessment Hubs are located at The Salvation Army, Porchlight Men’s Shelter and The Beacon Day Resource Center. Street outreach workers serve as Mobile Hubs and will seek out people sleeping in places not meant for human habitation or other locations that serve vulnerable populations that are not assessment hubs (Briarpatch, DAIS, Catholic Multicultural Center, etc). Additionally, there are monthly Mobile Assessment Hubs provided in areas surrounding the City of Madison. There will be 4 Assessment Hubs located in the north, south, east and west quadrants of Dane County that will be visited as necessary to do VI-SPDATs and provide services.
Emergency Services

Households are able to access low barrier emergency shelter outside of the CE intake and assessment hours at The Beacon. Households who present at an emergency shelter are offered a bed in the emergency shelter where they arrive (if population appropriate and bed available). If they present at a shelter that is not for their population, then they are referred to the appropriate shelter. Shelters serve as access hubs. Households who enter shelter outside of coordinated entry intake hours will be offered an assessment by coordinated entry staff at the shelter or referred to other CE staff at the next available time.

Nondiscrimination

The CE system and CoC, ETH, ESG funded and another other participating housing and supportive services must comply with the nondiscrimination and equal opportunity provisions of Federal civil rights laws including the following:

- Fair Housing Act prohibits discriminatory housing practices based on race, color, national origin/ancestry, religion, sex, age, family/familial status, disability/handicap, actual or perceives sexual orientation, lawful source of income, gender identity, marital status, domestic abuse/sexual assault/stalking victims, military discharge status, physical appearance, political beliefs, student status, domestic partnership, tenant union association, genetic identity, citizenship status, Section 8 housing voucher participant, nonreligion and homelessness.
- Section 504 of the Rehabilitation Act prohibits discrimination on the basis of disability under any program or activity receiving Federal financial assistance.
- Title VI of the Civil Rights Act prohibits discrimination on the basis of race, color, or national origin under any program receiving Federal financial assistance.
- Title II of the Americans with Disabilities Act prohibits public entities, which includes State and local governments, and special purpose districts, from discriminating against individuals with disabilities in all their services, programs and activities, which include housing, and housing-related services such as housing search and referral assistance.
- Title III of the Americans with Disabilities Act prohibits private entities that own, lease and operate places of public accommodations, which include shelters, social service establishments, and other public accommodations providing housing, from discriminating on the basis of disability.

If you feel you have been treated unfairly due to any of the above reasons, you may file a discrimination complaint. Information on how to file a complaint can be found on the City of Madison’s website at http://www.cityofmadison.com/dcr/civilRights.cfm. Information and complaint forms are available at assessment hubs. Assessment hubs will post information on how/where to file a complaint.
Accessibility

Assessment Hubs may be accessed by all people who are experiencing homelessness or at risk of homelessness and who are currently in Dane County. People experiencing chronic homelessness, veterans, families with children, youth and survivors of domestic violence may present at any of the Assessment Hubs for which they qualify as a target population and be assessed for housing. Referrals will be made to agencies who specialize in serving specific populations.

Coordinated Entry staff will provide regular office hours throughout the County to accommodate those in outlying areas. If a household needs to get to Madison for shelter services, staff will explore transportation options. Transportation needs will be researched and a plan will be in place by October 1, 2018.

A participant who is or has been a victim of domestic violence, dating violence, sexual assault or stalking will not be denied access to the coordinated entry process. CE staff will work with survivors to create safe and confidential access to the CE process based on individual needs.

Auxiliary aids and appropriate services must be provided to ensure effective communication with individuals with disabilities. This will include providing information in accessible formats such as, Braille, audio, large type, assistive listening devices and using Wisconsin Relay. Whenever these services are provided, Coordinated Entry staff must document the accessible format provided.

Assessment Hubs must be accessible to individuals who use wheelchairs.

Services are accessible to individuals with Limited English Proficiency (LEP). When an individual needs services in a language other than English, every effort will be made to find a qualified person who speaks the needed language. If a qualified person is not available, then a language line will be used to communicate with the individual. Individuals needing language assistance, will be served as they present. They will not be asked to wait for services.

Marketing

Marketing materials will be targeted to those who may be least likely to access services. Data will be used to identify potentially underserved groups and will target the marketing plan to them. Outreach workers act as Mobile Assessment Hubs and engage with those who traditionally don’t access services. Marketing materials will indicate that physical Assessment Hubs are accessible to those with disabilities, that accommodations will be made if requested, and language services are provided. Marketing materials will be provided in English and Spanish. Posters will contain the words “Lus Hmoob” to indicate that Hmong speakers are available. In addition, marketing materials indicate that services are available to all people regardless of race, color, national origin/ancestry, religion, sex, age, family/familial status, disability/handicap, actual or perceives sexual orientation, lawful source of income, gender identity, marital status, domestic abuse/sexual assault/stalking victims, military discharge status, physical appearance, political beliefs, student status, domestic partnership, tenant
The lead CE agency will develop and update marketing materials. Posters will be provided to area agencies and businesses that may serve people experiencing homelessness to display in prominent areas. In addition, business cards will be provided to agencies and businesses to distribute to customers. Marketing materials will be reviewed at least annually and updated if necessary. Updated materials will be distributed to agencies and businesses.

All information regarding CE will be available on the Dane County Homeless Services Consortium (HSC) website. Up to date materials and information will be available via the website.

Additionally, CE staff will present to agencies who want information on how the CE System operates. Initial presentations will be provided to agencies identified by the Core Committee. Future presentations will be provided as requested or if major changes are implemented in the operation of CE.

Assessment

Assessment Tool

In order to achieve fair, equitable and equal access to services in the community, staff at Assessment Hubs (including Mobile Hubs), will use the same assessment tool. The Dane County CoC uses the Vulnerability Index-Service Prioritization Decision Assistance Tool (VI-SPDAT). The appropriate version of the tool will be used based on the population of the presenting household (single, family or youth). The VI-SPDAT helps to identify who is recommended for each housing and support intervention based on who is eligible and in the greatest need of that intervention. The VI-SPDAT assesses households based on history of housing and homelessness, risks, socialization and daily functioning and wellness.

Households seeking assistance for homeless prevention must meet the minimum HUD requirements for eligibility and must meet one of the following:

- Experienced homelessness in an emergency shelter, safe haven or place not meant for habitation within the past five years; or
- Have a household of six or more; or
- Live in and need an accessible housing unit. (Written Standards, Prevention Section)

Assessment Process

When households present to CE, they will receive referral to basic housing resources such as diversion services, housing location assistance, and/or case management. If the household has not self-resolved their housing situation in 7-10 days and fall into one of our community’s priorities (see Written
Standards, Permanent Supportive Housing, Participant Prioritization Requirements), they will be assessed using the appropriate VI-SPDAT tool and placed on the Community Wide Housing Priority List. Staff will ensure that the person does not already have an assessment in the system. Households should only be placed on the priority list if they are currently staying in shelter, a place not meant for human habitation, Safe Haven or Transitional Housing. Staff will double check ServicePoint to ensure that people are properly on or off the list as required, or are added back to the list. If CE staff are aware of a household who is staying in a place not meant for human habitation, staff must inform them of services at The Beacon, emergency shelters, and offer connection to an outreach worker. If the household would like connection to an outreach worker CE staff must alert outreach staff of the person’s location immediately. Outreach staff will make contact within 48 hours.

When a household is referred to the Priority List, the staff making the referral is responsible to follow-up with the household every 30-45 days (starting for all households added to the list after January 22, 2018). Follow-ups must be recorded in HMIS.

If a household presents as two adults with no minor children, a Singles VI-SPDAT should be completed for each individual. Each individual should be referred to the singles list and note in HMIS who they would like to live with (under housing placement group notes). When one person comes up on the priority list, the outreach worker will check in with the person and their significant other individually to be sure they want to live together.

If working with an unaccompanied minor, complete the TAY-VI-SPDAT and refer to the priority list six months prior to their eighteenth birthday. In addition, a referral to Briarpatch should be provided.

A household may be re-assessed with the VI-SPDAT if there is a major life change. Anything that would cause the VI-SPDAT score to change is considered a major life change. A major life change includes, but is not limited to the following: change in household members, change in health status, additional interactions with emergency services (enough to change score).

If a household re-enters homelessness after being permanently housed, they should be reassessed.

A household may refuse to complete the assessment. If a household refuses to complete the assessment, outreach staff must continue to work to engage with them. It is important to continue to learn their needs and document them for appropriate housing/service provision. While working with the household to get further information, outreach staff will make a referral to the priority list.

The coordinated entry assessment process does not screen out people due to perceived barriers 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 a disability-related services or supports that are needed, history of evictions or poor credit, lease violations or history of not being a leaseholder, mental health issues, medical need, perceived ability to live independently or criminal record.
Safety Planning

During the assessment, if a household indicates that they are fleeing or attempting to flee domestic violence, dating violence, sexual assault, stalking or community violence, CE staff will work with them to create a safe and confidential space to access coordinated entry. Community violence is defined as exposure to intentional acts of interpersonal violence committed in public or private areas by individuals who are not intimately related to the victim. CE staff will make a referral and provide immediate access to connect to a victim services provider. Participants are able to access the domestic violence hotline. If a household ends up in shelter with a non-victim services provider, staff at the shelter will work on safety planning with the household including ensuring confidentiality and flexibility with regular procedures to ensure safety.

Participant Choice

Members of the Dane County CoC understand that households know best their needs and wants. It is important as people are nearing the top of the priority list that providers have a sense of what the household wants. When a household is in the top 30 names of the priority list they will receive information on the participating coordinated entry housing programs that may be available to them. Households will be offered an Application of Participant Interest to complete. The application must be uploaded in HMIS to be used at Housing Placement meetings.

Assessor Training

The Coordinated Entry Manager is responsible for developing trainings about the Coordinated Entry System. Trainings may be offered live, but can be recorded and posted on the Homeless Services Consortium website.

Required Training for new Assessment Staff includes:

- HMIS Licensure
- Coordinated Entry Policies & Procedures and Written Standards
- How to Conduct the Coordinated Entry Assessment in HMIS
- How to initiate the referral process in HMIS
- How to conduct/enter the VI-SPDAT
- Best practices for engagements with families
- Fair Housing Laws in Dane County
- HUD’s Equal Access Rule
- Cultural and Linguistic Competency
- Trauma Informed Care
- Harm Reduction
- Client Confidentiality
- Housing First
- Domestic Violence 101 & Safety Planning
Required Training for participating agencies of the coordinated entry system includes:

- HMIS Licensure
- Coordinated Entry Policies and Procedures and Written Standards
- How to accept a referral in HMIS

Ongoing trainings will be developed based on the needs of the CoC. The CE Manager will seek input from the Core Committee and the CoC Board on needed trainings.

Training protocols will be updated and distributed annually. The Coordinated Entry manager will review the protocols and receive feedback from the Core Committee.

**Prioritization**

Data collected during the assessment process is not used to discriminate or prioritize households for housing and services on a protected basis (see nondiscrimination section).

The Dane County CoC prioritizes Permanent Supportive Housing and Rapid Rehousing for the most vulnerable populations in our community. Households who are experiencing Category 1 or Category 4 homelessness may be placed on the Community Wide Housing Priority List. Households placed on the list will be prioritized based on chronic homeless status, length of time homeless and VI-SPDAT score (HUD Notice CPD-14-012). There is one priority list for single adults and one for families with minor children.

People who refuse or are unable to complete the VI-SPDAT and meet one of the community’s priorities will be placed on the Community Wide Housing Priority List.

Exceptions may be made to the above prioritization policy in rare circumstances for households who are extremely vulnerable. This includes households in the following circumstances:

- Unable to complete the VI-SPDAT due to a mental health barrier, a severe cognitive disability or traumatic brain injury.
- Emergency medical priority where there is vulnerability to illness and death; including high utilization of crisis or emergency services.
- Significant challenges or functional impairments, including physical, mental, developmental or behavioral health challenges, which requires a significant level of support in order to maintain permanent housing and for which granting permission to conduct a VI-SPDAT may not be appropriate.
- Vulnerability to victimization based on race, gender, status, sexual orientation, physical assault, trafficking and sex work.

The following will be taken into consideration for exceptions:

- The number of ambulance calls within the last month
- The participant’s score for the medical questions on the VI-SPDAT/VI-F-SPDAT
• Written documentation from a medical health professional

OR

• Consensus among outreach workers

The procedure for granting an exception begins with discussing the person’s situation at the regularly scheduled meetings of outreach staff. Anyone can bring an exception to the meeting for discussion. The case is presented and those present who regularly attend outreach meetings will take a vote on whether or not to grant the exception (majority rules).

Households may receive a lesser intervention than their score. For example, a household may have a score in the PSH range, but if there are not PSH units available, the household may be offered a Rapid Rehousing intervention if applicable. The purpose is to move households from homelessness to housing as quickly as possible.

When a household is eligible for Homeless Prevention Funds, they will be prioritized using the Prevention Scoring Tool (see Prevention Section of the Written Standards). The tool considers the following factors in prioritization:

• Eviction Process
• Eviction history
• Lives in subsidized housing
• History of homelessness
• Disability/ Needs accessible unit
• Large Family
• Criminal History
• Domestic Violence

Entrance to emergency shelter will not be prioritized in order to allow for an immediate crisis response.

Prioritization policies will be made publicly available via the CoC’s website and notices placed at assessment hubs.

Please note that eligibility (see assessment section) and prioritization are different. A household may be prioritized for an intervention, but they still must meet eligibility for that intervention.
Referral

Housing Placement Meetings

There is a Housing Placement meeting for Single Adults and one for Families with Children. These meetings occur twice each month. The Coordinated Entry manager leads the meetings. The CE manager will provide a list of households (non-identifiable client ID numbers) to discuss 5 days prior to the scheduled meeting. If someone is working with a household on this list, they must attend the meeting or make advance arrangements with the CE manager. Housing providers will provide a list of vacancies and potential transfers to the CE manager 7 days prior to the scheduled meeting. A representative for each housing provider must be present at each meeting. If a representative is not available, advance arrangements must be made with the CE manager.

When a household is at the top of the priority list and a match is being made, their preferences must be considered by accessing their Application of Participant Interest. A housing option can be rejected by a household. The household does not lose their spot on the list for rejecting an option. There is no limit to the number of times a household rejects a placement.

Households must not be steered toward any particular housing facility or neighborhood based on a protected class (see nondiscrimination section).

Housing providers may not reject a household for assistance based on perceived barriers to housing or services. CoC, ETH and ESG funded programs must use the Coordinated Entry process as the only referral source from which they fill vacancies in housing or services.

Contacting People on the Priority list

If staff is completing data clean-up of the priority list to see if people are still in need of housing, there will be times when staff is unable to make contact with the person. Staff must attempt contact at least 3 times over the course of a two-month period. Contacts must be recorded in HMIS under the CE follow-up section. Contacts can be made via telephone, text, or e-mail. Staff must also reach out to the following applicable entities: outreach providers, placement meeting providers and school district or Head Start staff. If no one is able to contact the household, cancel the referral to the priority list.

Best practices for contacts:

- Attempt contact during different times of the month (beginning, middle, end)
- Contacts should be made over the course of two months, not all in one week
- If staff is able to text, please try this as someone’s phone may be out of minutes, but they can still send and receive text messages.
- Bring the name to the outreach meeting and placement meeting to see if anyone has information
- Check the VINE system to see if the person is incarcerated
- If your agency allows, you may use an agency Facebook page to attempt contact

Approved by the Madison/Dane County Continuum of Care Board of Directors – 4/4/2016; 8/26/2016; 11/18/2016; 1/27/2017; 5/19/2017; 11/17/17; 1/19/2018
Be On the Lookout (BOLO) List
If a name comes up at the housing placement meeting and the person is not currently available to accept housing (incarcerated, institution, etc.), but there is reason to believe that within 90 days they will return to the community, please move the referral to the BOLO list. The BOLO list will be reviewed at outreach meetings. Every 90 days the outreach group will re-evaluate if someone should remain on the BOLO list. In most cases, people will not remain on the BOLO list for more than 90 days. The referral will be canceled if the person will not be back in the community within a reasonable time frame.

Holding a Unit
When an agency receives a name from the priority list, staff must initiate contact with the person within seven business days. (see best practices above) There may be circumstances where two agencies work together to connect with someone. It is the receiving agency’s responsibility to ensure contact. If staff attempts contact on three occasions during the seven business days and do not get a response, they may move to the next household on the priority list.

Grievance
Households have the right to file a grievance if there is a violation of the Coordinated Entry Policies and Procedures received through the Dane County Coordinated Entry System. Households are informed about the grievance policy during their initial meeting with Coordinated Entry staff. The policy is accessible on the Homeless Services Consortium website (www.danecountyhomeless.org).

Households have the right to be assisted by an advocate of their choice (agency staff person, co-worker, friend, family member etc.) at each step of the grievance process. Households have the right to withdraw their grievance at any time.

If a household has a grievance regarding a specific agency or representative of that agency, they should be directed to that agency’s grievance policy. Agency’s grievance policies should be posted on their website.

There are two levels of review available for each grievance.

Level 1: The first person to review the grievance is the CoC Coordinator. Households should contact the CoC Coordinator for Dane County to start the process. Contacts can be made through the HSC website (www.danecountyhomeless.org) via the contact us function, hsc@cityofmadison.com or (608)266-6254. Grievances can be made in writing or verbally and should state the alleged violation of the Coordinated Entry policies and procedures. Within two business days, the CoC Coordinator will contact the agency/staff in question to request a response to the grievance, including any actions that were taken to attempt to resolve the issue. The response must be provided to the CoC Coordinator within 5 business days of request. Once the CoC Coordinator has gathered relevant information about the incident, they
will decide what, if any, action needs to be taken. The CoC Coordinator will provide a written decision within 15 days of the initial complaint.

If both the household and the provider agree, the process ends and the resolution is implemented.

If the household or provider disagrees, the grievance moves to the next level.

Level 2: The Dane County CoC Board of Directors President reviews the grievance within 5 business days of being informed of dissatisfaction with the Coordinator’s resolution. The Board President may designate one or more Board members to review the situation. The grievant has the right to present any additional information and may present it in person. The Board will have 10 business days to gather and review relevant information. Within 30 days of the grievance being moved to Level 2, the Board President will provide a written decision. The decision of the Board of Directors is final.

**Data Management**

The Coordinated Entry System uses a Homeless Management Information System (HMIS) to track data and store the Housing Priority List. The HMIS Lead Agency has policies and procedures in place to ensure the adequate privacy protections of all household information. All HMIS users are required to abide by the HMIS Policies and Procedures.

All HMIS users are required to complete an annual Security Training provided by Institute for Community Alliances (ICA). The training covers the privacy rules associated with collection, management and reporting of client data.

Coordinated Entry staff will receive household consent through a signed release of information before sharing household information in HMIS. All shared information is for the purpose of assessing and referring households to housing and services provided through the coordinated entry process. The only information to be shared is that which the household has provided written consent. Households will not be denied services for refusal to have their information shared in HMIS.

**Evaluation**

The Coordinated Entry System (including policies and procedures) is evaluated annually by both households accessing the system and housing and service providers. The evaluation will look at the intake, assessment and referral process of coordinated entry. All participating agencies will be asked to evaluate the system. Surveys are distributed to households at participating agencies included, but not necessarily limited to The Beacon, The Salvation Army, Porchlight Men’s Shelter and Tenant Resource Center and participating housing programs. Any household information collected during the evaluation period must be kept private. Surveys will be kept confidential and identifying information will not be collected.
The annual survey for both groups will be developed by the Core Committee and distributed according to a timeline set by the Core Committee. The CE Manager will present the survey results and an implementation plan for changes to the Core Committee.

The Core Committee will receive monthly updates from the CE Manager. The CE Manager will seek feedback monthly, from the Core Committee, in order to have ongoing evaluation of the system.

The Core Committee and HSC Board of Directors will review the CoC’s System Performance Measures every 6 months, consider how the system is affecting Performance Measures and what changes can be implemented to improve performance.
APPENDIX E: LIST OF ACRONYMS

CE – Coordinated entry
CoC – Continuum of Care
CoC Program – Continuum of Care Program – funded by HUD
EFS – Emergency Family Shelter
ESG – Emergency Solutions Grant – funded by HUD
ETH – Emergency Solutions Grant/Transitional Housing Program/Homeless Prevention Program – a combination of funding from HUD and the State of Wisconsin
HMIS – Homeless Management Information System
HSC – Homeless Services Consortium
HUD – Department of Housing and Urban Development
PSH – Permanent supportive housing
RRH – Rapid Re-housing
SPDAT – Service Prioritization Decision Assistance Tool
TH – Transitional housing
VA – Department of Veterans Affairs
VI-SPDAT – Vulnerability Index-Service Prioritization Decision Assistance Tool
VI-F-SPDAT – Vulnerability Index-Family Service Prioritization Decision Assistance Tool
APPENDIX F: WEBSITES FOR ADDITIONAL INFORMATION

Dane County Homeless Services Consortium  
http://www.danecountyhomeless.org/

National Alliance to End Homelessness  
http://www.endhomelessness.org/

U.S. Department of Housing and Urban Development, HUD Exchange  
https://www.hudexchange.info/

U.S. Interagency Council on Homelessness  
https://www.usich.gov/
APPENDIX G: LIST OF DOCUMENT REVISIONS

4/4/2016
Original version approved by the Madison/Dane County CoC Board of Directors.

8/26/2016
Revised the participant eligibility scoring criteria for permanent supportive housing and rapid re-housing programs to place a greater emphasis on a participant’s VI-SPDAT score.

11/1/2016
Revised the participant eligibility criteria for rapid re-housing programs. Limited the eligible VI-SPDAT score range to the rapid re-housing score range suggested by the creators of the VI-SPDAT, OrgCode Consulting.

1/27/2017
Added prevention program standards.

5/19/2017
Board approved update to Street Outreach standards and approved Diversion standards and Diversion tool.

11/16/2017
Board approved addition of Emergency Transfer section.

01/19/2018
Board approved addition of Coordinated Entry Policies and Procedures appendix.
APPENDIX H: DIVERSION ASSESSMENT TOOL

1. Where did you sleep last night?

2. If staying in someone else’s housing: (things to consider: rental/owned unit, landlord, total length of stay thus far, landlord’s knowledge of situation)
   
a. What issues exist with you remaining in your current housing situation?

   b. Can those issues be resolved with financial assistance, case management etc.?

   b. Are you currently experiencing domestic violence?

3. If coming from their own unit:
   
a. Is it possible and safe to stay in your current housing unit?
b. What resources would you need to do that? (give the examples below)

☐ financial assistance
☐ case management
☐ mediation
☐ transportation
☐ other: __________________________________________

5. What other safe housing options do you have for the next few days or weeks?

6. Is there anywhere safe you could stay for at least the next three (3) to seven (7) days if you were able to receive case management services/transportation assistance/limited financial support?

☐ Yes  ☐ No

Help individual think through potential places – with family, friends, co-workers. Have them identify what barriers they think exist to staying in a certain location and how they might be overcome.
APPENDIX I: CERTIFICATION FOR EMERGENCY TRANSFER

CERTIFICATION OF U.S. Department of Housing and Urban Development – OMB Approval No. 2577-0286 Exp. 06/30/2017

DOMESTIC VIOLENCE, DATING VIOLENCE, SEXUAL ASSAULT, OR STALKING, AND ALTERNATE DOCUMENTATION

Purpose of Form: The Violence Against Women Act (“VAWA”) protects applicants, tenants, and program participants in certain HUD programs from being evicted, denied housing assistance, or terminated from housing assistance based on acts of domestic violence, dating violence, sexual assault, or stalking against them. Despite the name of this law, VAWA protection is available to victims of domestic violence, dating violence, sexual assault, and stalking, regardless of sex, gender identity, or sexual orientation.

Use of This Optional Form: If you are seeking VAWA protections from your housing provider, your housing provider may give you a written request that asks you to submit documentation about the incident or incidents of domestic violence, dating violence, sexual assault, or stalking.

In response to this request, you or someone on your behalf may complete this optional form and submit it to your housing provider, or you may submit one of the following types of third-party documentation:

(1) A document signed by you and an employee, agent, or volunteer of a victim service provider, an attorney, or medical professional, or a mental health professional (collectively, “professional”) from whom you have sought assistance relating to domestic violence, dating violence, sexual assault, or stalking, or the effects of abuse. The document must specify, under penalty of perjury, that the professional believes the incident or incidents of domestic violence, dating violence, sexual assault, or stalking occurred and meet the definition of “domestic violence,” “dating violence,” “sexual assault,” or “stalking” in HUD’s regulations at 24 CFR 5.2003.

(2) A record of a Federal, State, tribal, territorial or local law enforcement agency, court, or administrative agency; or

(3) At the discretion of the housing provider, a statement or other evidence provided by the applicant or tenant.

Submission of Documentation: The time period to submit documentation is 14 business days from the date that you receive a written request from your housing provider asking that you provide documentation of the occurrence of domestic violence, dating violence, sexual assault, or stalking. Your housing provider may, but is not required to, extend the time period to submit the documentation, if you request an extension of the time period. If the requested information is not received within 14 business days of when you received the request for the documentation, or any extension of the date provided by your housing provider, your housing provider does not need to grant you any of the VAWA protections. Distribution or issuance of this form does not serve as a written request for certification.

Confidentiality: All information provided to your housing provider concerning the incident(s) of domestic violence, dating violence, sexual assault, or stalking shall be kept confidential and such details shall not be entered into any shared database. Employees of your housing provider are not to have access to these details unless to grant or deny VAWA protections to you, and such employees may not disclose this information to any other entity or individual, except to the extent that disclosure is: (i) consented to by you in writing in a time-limited release; (ii) required for use in an eviction proceeding or hearing regarding termination of assistance; or (iii) otherwise required by applicable law.
TO BE COMPLETED BY OR ON BEHALF OF THE VICTIM OF DOMESTIC VIOLENCE, DATING VIOLENCE, SEXUAL ASSAULT, OR STALKING

1. Date the written request is received by victim: _________________________________________

2. Name of victim: ___________________________________________________________________

3. Your name (if different from victim’s): ________________________________________________

4. Name(s) of other family member(s) listed on the lease: ____________________________________

5. Residence of victim: __________________________________________________________________

6. Name of the accused perpetrator (if known and can be safely disclosed): ____________________

7. Relationship of the accused perpetrator to the victim: ____________________________________

8. Date(s) and times(s) of incident(s) (if known): __________________________________________

10. Location of incident(s): __________________________________________________________________

In your own words, briefly describe the incident(s):

______________________________________________________________________________________

______________________________________________________________________________________

______________________________________________________________________________________

______________________________________________________________________________________

______________________________________________________________________________________

______________________________________________________________________________________

______________________________________________________________________________________

______________________________________________________________________________________

This is to certify that the information provided on this form is true and correct to the best of my knowledge and recollection, and that the individual named above in Item 2 is or has been a victim of domestic violence, dating violence, sexual assault, or stalking. I acknowledge that submission of false information could jeopardize program eligibility and could be the basis for denial of admission, termination of assistance, or eviction.

Signature ___________________________ Signed on (Date) ____________________

Public Reporting Burden: The public reporting burden for this collection of information is estimated to average 1 hour per response. This includes the time for collecting, reviewing, and reporting the data. The information provided is to be used by the housing provider to request certification that the applicant or tenant is a victim of domestic violence, dating violence, sexual assault, or stalking. The information is subject to the confidentiality requirements of VAWA. This agency may not collect this information, and you are not required to complete this form, unless it displays a currently valid Office of Management and Budget control number.
APPENDIX J: GLOSSARY

Domestic Violence
Domestic violence includes felony or misdemeanor crimes of violence committed by a current or former spouse or intimate partner of the victim, by a person with whom the victim shares a child in common, by a person who is cohabitating with or has cohabitated with the victim as a spouse or intimate partner, by a person similarly situated to a spouse of the victim under the domestic or family violence laws of the jurisdiction receiving grant monies, or by any other person against an adult or youth victim who is protected from that person's acts under the domestic or family violence laws of the jurisdiction. The term spouse or intimate partner of the victim includes a person who is or has been in a social relationship of a romantic or intimate nature with the victim, as determined by the length of the relationship, the type of the relationship, and the frequency of interaction between the persons involved in the relationship.

Dating violence
Dating violence means violence committed by a person:
(1) Who is or has been in a social relationship of a romantic or intimate nature with the victim; and
(2) Where the existence of such a relationship shall be determined based on a consideration of the following factors:
   (i) The length of the relationship;
   (ii) The type of relationship; and
   (iii) The frequency of interaction between the persons involved in the relationship.

Sexual Assault
Sexual assault means any nonconsensual sexual act proscribed by Federal, tribal, or State law, including when the victim lacks capacity to consent.

Stalking
Stalking means engaging in a course of conduct directed at a specific person that would cause a reasonable person to:
(1) Fear for the person's individual safety or the safety of others; or
(2) Suffer substantial emotional distress.
## APPENDIX K: PREVENTION PRIORITIZATION TOOL

### Prevention Prioritization Tool

This information provided for the prioritization is based on self-report.

<table>
<thead>
<tr>
<th>Factor</th>
<th>Score</th>
<th>Participant Score</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Eviction Process (choose only one)</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Has a stipulated dismissal (court order) which requires payment of money</td>
<td>10</td>
<td></td>
</tr>
<tr>
<td>Has an eviction court date scheduled</td>
<td>5</td>
<td></td>
</tr>
<tr>
<td>Has a 5, 14, or 30 day notice but no court date scheduled</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td><strong>Lives in Subsidized Housing (choose only one)</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Has Section 8 voucher or lives in CDA/DCHA public housing</td>
<td>5</td>
<td></td>
</tr>
<tr>
<td>Lives in other subsidized housing (i.e. Northport, Meridian, etc.)</td>
<td>4</td>
<td></td>
</tr>
<tr>
<td>Lives in Section 42 or comparable housing</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td><strong>Eviction History (choose only one)</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Has 1 or more eviction judgement in CCAP in the past 2 years</td>
<td>5</td>
<td></td>
</tr>
<tr>
<td>Has 1 or more eviction judgement in CCAP in the past 5 years</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>Has ever had an eviction filed in CCAP</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>Other eviction record or evictions that are not in CCAP</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td><strong>Criminal History (choose one)</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>On sex offender registry</td>
<td>5</td>
<td></td>
</tr>
<tr>
<td>Past Felony(ies)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>Past misdemeanors</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td><strong>Other Factors (may choose more than one)</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Needs and lives in wheelchair accessible unit</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>Household of 5 or more members</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>