Ithaca/Tompkins County Continuum of Care

Written Standards
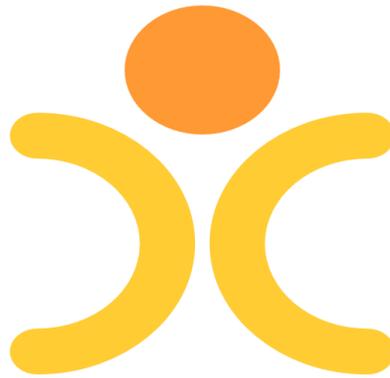
Ending Homelessness. Together.

Reviewed 12/03/2020

Introduction

The NY-510 Continuum of Care (CoC) is responsible for coordinating and implementing a system to meet the needs of the populations and subpopulations experiencing homelessness within the geographic area of Ithaca and Tompkins County. Both the [Emergency Solutions Grants (ESG) Rules and Regulations](#) and the Homeless Emergency Assistance and Transition to Housing (HEARTH) Continuum of Care Program Interim Rules state that the CoC, in consultation with the recipients of ESG program funds within the geographic area, are responsible for (1) establishing and consistently following written standards for providing Continuum of Care assistance, (2) establishing performance targets appropriate for population and program type, and (3) monitoring recipient and sub recipient performance.

The written standards have been established to ensure that persons experiencing homelessness who enter programs throughout the CoC will be given similar information and support to access and maintain permanent housing. All programs that receive ESG or COC funding are required to abide by these written standards. Agency program procedures should reflect the policy and procedures described in this document. The CoC strongly encourages programs that do not receive either ESG or CoC funds, but participate in the CoC, and who may apply for funding in the future, to accept and utilize these written standards.

The majority of these standards are based on the ESG and/or HEARTH Interim Rules, however, in keeping with the goals and objectives of the Ithaca/Tompkins CoC 10 Year Plan to End Homelessness, all activities provided through the agencies of the COC should further the mission of preventing or ending homelessness for households in need.

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

These standards are in place in order to:

❖ Establish community-wide expectations in the operations of projects within the community;
❖ Ensure that the system is transparent to households and agencies;
❖ Establish a minimum set of standards and expectation for the quality of each project; and
❖ Create consistency and coordination between recipients' projects

These written standards were adapted from the Dane County Written Standards and the Western NY CoC, and have been adjusted to reflect the Ithaca/Tompkins Continuum of Care. These written standards were approved by the CoC Governance Committee on 12/03/2020 and the CoC General Body on 1/05/2021The written standards will be reviewed and revised as needed, at a minimum once per year. Agreement to abide by the written standards will be required to participate in the process of acquiring ESG or CoC funds.

Program Requirements

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 CoC's 10 Year Plan to End Homelessness, and current Department of Housing and Urban Development's priorities, including priorities for ending homelessness among specific subpopulations.

4. The Vulnerability Index tool for adults (25 and older), youth (18-24), and families will be used for screening households for permanent supportive housing, rapid re-housing programs, transitional housing, and transitional housing for youth.

5. The program will participate in the Coordinated Entry process and utilize the community wait list to fill openings in their program. The program will abide by the Coordinated Entry Policy and Procedure Manual attached to this document.

6. Each housing and case management program must be aware and inform households of the educational rights of children and unaccompanied youth in their programs. Materials explaining their rights should be provided to applicable households. Program staff will collaborate with McKinney -Vento liaisons 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 eligibility information for the program (i.e. gender specific, individuals, families, etc…) Each agency will provide information to the Coordinated Entry Team.

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

9. Each program funded with ESG or CoC funds is required to participate in the Homeless Management Information System (HMIS) and meet minimum data quality standards.

10. The program must demonstrate how it will assist clients in increasing earned and unearned income and accessing mainstream benefits.

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.

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 or long term goals.

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

PERSONNEL

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

Minimum Standards

1. The agency selects, for its program 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 participate in ongoing 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. Case supervisors review current cases and individual service plans on a regular and consistent basis to ensure quality, coordinated services.

6. The program must designate a staff person to be trained on the Coordinated Entry process and provide specific times a trained staff person will be available to assess referred clients.

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 program 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 Continuum of Care

- Projects, emergency shelters, safe havens and street outreach are aligned with the Housing First model and recognize their roles to encompass housing advocacy and rapid connection to permanent housing. Staff in crisis response and outreach operate under the philosophy that all people experiencing homelessness are housing ready.

- Strong and direct referral linkages and relationships exist between street outreach and emergency shelters and rapid re-housing, transitional housing and permanent supportive housing. Outreach teams and frontline staff are aware and trained in how to assist people experiencing homelessness to apply for and obtain permanent housing.

- The CoC has a Coordinated Entry system for matching people experiencing homelessness to the most appropriate housing and services, where individuals experiencing homelessness and extremely high need families are matched to permanent housing.

- The CoC has a data-driven approach to prioritizing the highest needs cases for housing assistance whether through analysis of lengths of stay in HMIS, vulnerability indices, or data on utilization of emergency services.

- Policymaker, funders and providers collaboratively conduct planning and raise and align resources to increase availability of affordable and supportive housing and to ensure the 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 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.

LOW BARRIERS TO PROGRAM ADMISSION

1. Program admission and tenant screening and selection practices promote the acceptance 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 violence criminal activity, agencies make all efforts 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. Housing First/ Low Barrier accepts referrals directly from shelters, street outreach, drop-in centers and other emergency responses frequented by vulnerable people experiencing homelessness.
4. Supportive services emphasize engagement and problem-solving over therapeutic goals. Service 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 and transitional housing may require case management as a condition of receiving rental assistance as required by state or federal funding.

5. Use of alcohol use or drugs in and of itself, without other lease violations, is not considered a reason for eviction.

Equal Access and Gender Identity Anti-discrimination Policy

In February 2012, the Department of Housing and Urban Development (HUD) introduced its final rule entitled "Equal Access to Housing in HUD Programs Regardless of Sexual Orientation or Gender Identity" (2012 Equal Access Rule). This rule would ensure the equal access of HUD-funded housing programs to families and individuals regardless of their marital status, sexual orientation or gender identity.

In 2016, HUD amended this rule, as it did not explicitly state how individuals who identify as transgender would be accommodated in temporary, emergency shelters, and other buildings and facilities used for shelter, that have physical limitations or configurations that require and that are permitted to have shared sleeping quarters or shared bathing facilities. This new rule, entitled "Equal Access in Accordance with an Individual's Gender Identity in Community Planning and Development Programs" ensures that all HUD-funded programs provide equal access to facilities and services provided to individuals in accordance with the individual's gender identity, and in a manner that affords equal access to the individual's family.

The rule also prohibits inquiries about the sexual orientation or gender identity of an applicant or occupant for the purpose of determining program eligibility. HUD-funded programs can inquire about the sex of an applicant or occupant where the housing provided, or to be provided is a temporary, emergency shelter that involves the sharing of sleeping areas or bathrooms. HUD programs can make an inquiry about the sex of an applicant or occupant for the purposes of determining the number of bedrooms to which the household is entitled.

CONTINUUM OF CARE POLICY
In accordance with the rule outlined above, all CoC-funded programs are required to adhere to this anti-discrimination policy which states that all CoC-funded programs are open to all eligible individuals regardless of actual or perceived sexual orientation or gender identity. Additionally, individuals will not be required to submit proof of their gender identity in order to access housing or services provided by CoC-funded programs. In order to ensure that individuals are aware of their rights, the CoC requires all CoC-funded programs to post on bulletin boards and in other public spaces where information is typically made available a notice that outlines the program's commitment to ensuring equal access regardless of gender identity.

NON COC-FUNDED PROGRAMS
All CoC member agencies and potential applicants agree to adhere to the anti-discrimination as outlined above.

Record Keeping Requirements for All Projects

- All records containing personally identifying information must be kept secure and confidential
- Programs must have written confidentiality/privacy notice a copy of which should be made available to participant if requested
- Documentation of homelessness (following HUD's guidelines)
- A record of services and assistance provided to each participant
- Documentation of any applicable requirements for providing services/assistance
- Documentation of Coordinated Entry system
- Documentation of use of HMIS
- Records must be retained for the appropriate amount of time as prescribed by HUD (if applicable)

FINANCIAL RECORDKEEPING REQUIREMENTS INCLUDE:

- Documentation for all costs charged to the grant
- Documentation that funds were spent on allowable costs
- Documentation of the receipt and use of program income
- Documentation of compliance with expenditure limits and deadlines
- Retain copies of all procurement contracts as applicable
- Documentation of amount, source and use of resources for each match contribution

Occupancy Standards For All Programs

All housing units, including scattered site programs owned and managed by private landlords, must meet applicable state and local government health and safety codes and have current certificate of occupancy for the current use and meet or exceed the following minimum standards adopted by the Ithaca/Tompkins CoC:

- Clean dwelling that is free of mold and mildew, garbage;
- Extermination of vermin (e.g., roaches, bed bugs, and rodents), including in common areas;
- Adequate hot, cold, and potable drinking water;
- Adequate heat in all living areas;
- Doors with adequate working locks;
- Functioning smoke & CO detectors;
- Exterior walls, doors, and windows that are intact and reasonably insulated;
- Exterior windows and doors that can be opened and closed;
- Access to a clean and functional refrigerator, stove, and toilet; and
- For households with children aged 6 or under, no chipping or peeling paint in the unit or common areas; and if there is any lead paint, full disclosure is necessary.

All CoC-funded projects are expected to be familiar with and adhere to all HUD requirements for the CoC Program as described in the CoC Program Interim Rule, applicable notices, and CoC Program NOFA(s) under which the program is funded. This includes, but is not limited to:

- participant eligibility
- prioritization
- allowable activities and costs
- site control
- match requirements
- Fair market rent changes
- terms of commitment, repayment of grants, and drawdowns
- limitation on use of grant funds to house persons identified as homeless under federal law
- termination of assistance to program participants
- Fair Housing and Equal Opportunity
- recordkeeping requirements
- grant and project changes
- Other applicable federal requirements as explained in the CoC program interim rule

SERVING FAMILIES IN HOMELESS PROJECTS

CoC funded projects serving families must ensure they comply with HUD's Equal Access Rule which outlines the federal definition of 'family' for purposes of receiving assistance from certain programs. For the CoC program, 'family' is defined as:

Family includes, but is not limited to, regardless of marital status, actual or perceived sexual orientation or gender identity, any group or persons presenting for assistance together with or without children and irrespective of age, relationship or whether or not a member of the household has a disability. A child who is temporarily away from the home because of placement in foster care is considered part of the family.

SYSTEM PERFORMANCE MEASURES

A critical aspect of the [Mckinney-Vento Homelessness Assistance Act](#) (the "Act") as amended, is a focus on viewing the local homeless response as a coordinated system of homeless assistance options as opposed to homeless assistance programs and funding sources that operate independently in a community. To facilitate this perspective, the ACT now requires communities to measure their performance as a coordinated system in addition to analyzing performance by specific projects or project types.

To this end, the Act established a set of criteria for HUD to use that requires all CoCs to report their system-level performance to HUD. The intent of this criteria, or system performance measures, is to encourage CoCs and ESG program recipients, as well as all other homeless assistance stakeholders in the CoC, to regularly measure their progress in meeting the needs of the people experiencing homelessness in their community and to report this progress to HUD.

With the 2015 CoC funding round, HUD therefore introduced a series of system performance measures each COC to provide reporting that aggregates data from each individual program in response to a series of performance based elements describing the efficacy of the CoC. The following provides the resulting system performance measures that each program -- emergency, rapid rehousing, transitional and permanent housing-- will similarly be measured, as applicable to program type. These measures are subject to change per HUD and/or guidance from the CoC. Programs are responsible for reporting their progress to the CoC annually or upon request. CoC-funded programs are aware that failure to meet these standards may result in a loss of funding through the CoC program competition.

				System Performance Measures and CoC Goals	
	ES	**RRH**	**TH**	**PH**	**Target**
1	X	X	X	X	**Length of Time Persons Remain Homeless** ○ Average length of time homeless previous to entering ES in days ○ Average length of time homeless previous to entering TH in days ○ Average length of time homeless between entering RRH project to residential move-in	**Goal: <240** **Goal: <240** **Goal: 15 days**
2	X	X	X	X	**Returns to Homelessness** Measurement of clients exiting from any project type to a permanent housing destination in the date range two years prior to the production of the system report as follows: ○ Percent of those exiting from ES returning to homelessness ○ Percent of those exiting from RRH returning to homelessness ○ Percent of those exiting from TH returning to homelessness ○ Percent of those exiting from PH returning to homelessness	 **Goal: 25%** **Goal: 15%** **Goal: 15%** **Goal: 15%**
3	X		X		**Number of Homeless Persons** Measurement of the change in the CoC's total annual count of the sheltered ES and TH homeless persons in HMIS. This metric only has relevance in the aggregate, as such, individual projects are not expected to use this measure	
4		X	X	X	**Employment and Income Growth for Persons in CoC-funded programs during the reporting period** ○ Percent of adult stayers who increased their income ○ Percent of adult stayers who increased their non-employment cash income ○ Percent of adult stayers who increased their total income ○ Percent of the adult leavers who increased their earned income ○ Percent of the adult leavers who increased their non employment cash income ○ Percent of the adults leavers who increased their total income	**Goal: 10%** **Goal: 10%** **Goal: 10%** **Goal: 10%** **Goal: 10%** **Goal: 10%**
5	X	X	X	X	**Number of Persons Who Become Homeless for the First Time** ○ Percent of the active participants in ES and TH projects who were not previously enrolled in HMIS ○ Percent of persons entering the ES, TH and PH with no prior enrollment in HMIS	**Goal: 15%** **Goal: 20%**
6	X	X	X	X	**Successful Placement in or Retention of Permanent Housing** ○ RRH: Minimum percent move to PH ○ PSH: Minimum percent remain in or move to PH ○ TH: Minimum percent move to PH	**Goal: 75%** **Goal: 75%** **Goal: 75%**

Project Performance Measures

Whereas system performance measures are intended to provide a snapshot into the homeless response system as an entire coordinated initiative, project performance measures take a closer look at each project or potential project type within the CoC. The standards provided in this section highlight eligibility criteria, minimum standards, operational standards and the goals and performance standards set forth by this CoC in assessing and evaluating each project's performance individually.

EMERGENCY SHELTERS

Evaluating eligibility for Assistance-

- Participants must meet the HUD definition of homelessness
- Currently, individuals shelter/programs have their own eligibility criteria. At entry, this may be based on the sub-population served, i.e., age, gender, family composition, severity of behavioral health issues, etc.
- Standard outcomes: (Goals identified here are subject to change per HUD and/or CoC guidance)

Description	Performance Measures	Goal
Housing Stability: Households exit shelter timely.	The % of persons whose length of stay is no longer than 40 days	85%
Increase Total Income: Persons will maintain or increase earned and unearned income.	The % of persons age 18 or older who increased their total income formal sources as of the end of the operating year or program exit.	45%
Exit to Permanent Housing	The % of persons age 18 or older who exit to permanent housing as of the end of the operating year or program exit.	20%
Utilization Rate: Program operates at full capacity, with low vacancy rate, and fills vacancies quickly.	Average daily utilization rate during the operating year.	90%
HMIS: Program maintains adequate data quality in HMIS	See Data Quality Report	

RAPID RE-HOUSING

Rapid re-housing is an intervention designed to help individuals and families exit homelessness quickly by returning to permanent housing without preconditions. Additionally, the resources and services provided are tailored to the unique needs of the household being assisted.

There are three core components that together constitute a rapid rehousing program, all of which must be available in some way in order to have a rapid re-housing program. Although RRH programs must have each of the three components available, it is not required that a single entity provide all three services. Similarly, it is not requiring that any one household utilize all three in order to consider using RRH.

RRH core components include the following: Housing identification, rent/move-in assistance (financial) and RRH case management services. Actions constituting these components are presented as follows:

Housing Identification	Rent/Move-In Assistance	RRH Case Management
● Recruit landlords to provide housing opportunities for individuals and families experiencing homelessness. ● Address potential barriers to landlord participation such as concern about short term nature of rental assistance and tenant qualifications. ● Assist households to find and secure appropriate rental housing	● Provide assistance to cover move-in costs, deposits, and the rental and/or utility assistance (typically 6 months or less) necessary to allow individuals and families to move immediately out of homelessness to stable, permanent housing.	● Help individuals and families experiencing homelessness identify and elect among various permanent housing options based on their unique needs, preferences and financial resources. ● Help individuals and families experiencing homelessness address issues that may impede access to housing (such as credit history arrears and legal issues). ● Help individuals and families negotiate manageable and appropriate lease agreements with landlords. ● Make appropriate and time-limited services and supports available to families and individuals to allow them to stabilize quickly in permanent housing. ● Monitor participant's' housing stability and be available to resolve crises, at a minimum during the time RRH assistance is provided. ● Provide or assist the household with connections to resources that help them improve their safety and wellbeing, and achieve their long-term goals. This includes providing or ensuring the household has access to resources related to benefits, employment and community-based services, so that they can sustain rent payments independently when rental assistance ends. ● Ensure that services provided are client-directed, respectful of individuals' right to self-determination, and voluntary. Unless basic,

		program-related case management is required by statute or regulation, participation in services should not be required to receive RRH assistance.

EVALUATING ELIGIBILITY FOR ASSISTANCE-- ELIGIBILITY CRITERIA:

- Participants must meet the HUD definition of homelessness
- Participants must be residing in an emergency shelter or residing in a place not meant for human habitation
- Participants will generally have a minimum of 4-7 identifiable barriers to accessing/ retaining permanent housing
- Household income must be at or below <50% of AMI
- Participants must be able to produce required documents at intake or within 30 days
- All participants must be screened into programs using the most recent version of Coordinated Entry Tool

TRANSITIONAL HOUSING

Transitional Housing (TH) facilitates the movement of homeless individuals and families to permanent housing within 24 months of entering TH. At this time, there are no TH programs funded under the CoC or ESG programs in Tompkins County, however these standards remain a guide for any future TH programs within the CoC.

EVALUATING ELIGIBILITY FOR ASSISTANCE-- ELIGIBILITY CRITERIA:

- Participants must meet the HUD definition of homelessness
- Participants will generally have a minimum of 6-9 identified barriers to accessing/maintaining permanent housing
- All referrals for TH will go through the Coordinated Entry System

Metric	Performance Standard	Goal
Housing stability- Households exiting transitional housing will move directly to permanent housing	% of persons who exited to permanent housing (subsidized or unsubsidized) during the operating year	50%
Increase Total Income - Persons will maintain or increase earned and unearned income	The % of persons age 18 or older who increase earned or unearned income as of the end of the operating year or program exit	20%
Increased Earned Income- Persons who increased employment income	The % of persons age 18-61 who increased their employment income as of the end of the operating year or program exit	20%
Utilization Rates- Program operates at full capacity, with low vacancy rate, and quickly fills vacancies	Average daily utilization rate during the operating year	90%
Data Quality- Program maintains adequate data quality in HMIS	See Data Quality Report	See Data Quality Report

Permanent Supportive Housing

Under the HEARTH Interim Rule Permanent Housing (PH) is one of the eligible program components. Permanent housing is community based housing, the purpose of which is to provide housing without a designated length of stay. Permanent Supportive Housing (PSH) is one of the two types of PH eligible for CoC Program Competition.

EVALUATING ELIGIBILITY CRITERIA

- Participants must meet the HUD definition of homelessness
- PSH units are prioritized for chronically homeless individuals and families
- Participants will generally have 10-12 identified barriers to accessing/retaining permanent housing
- All referrals to PSH shall come through the Coordinated Entry process
- There can be no predetermined length of stay
- Supportive services designed to meet the needs of program participants must be made available to the program participant throughout the duration of the stay in PSH
- PSH programs will utilize housing first approach
- Each PSH program in the CoC will provide up-to-date information on eligibility criteria for the program

Goals	Performance Standard	Goal
Housing stability- Persons residing in permanent housing will remain in this housing for a minimum of one year or exit to other permanent housing	% of persons who remain in the PSH program as of the end of the operating year or exited to PH during the operating year	85%
Increase Total Income - Persons will maintain or increase earned and unearned income	The % of persons age 18 or older who increase earned or unearned income as of the end of the operating year or program exit	10%
Increased Earned Income- Persons who increased employment income	The % of persons age 18-61 who increased their employment income as of the end of the operating year or program exit	10%
Utilization Rates- Program operates at full capacity, with low vacancy rate, and quickly fills vacancies	Average daily utilization rate during the operating year	90%
Data Quality- Program maintains adequate data quality in HMIS	See Data Quality Report	See Data Quality Report

Prioritization

In accordance with HUD notice CDP-14-012, issued 7/28/14, the Ithaca/Tompkins County Continuum of Care (CoC) hereby establishes the following order of priority for utilization of the inventory of CoC Program-funded Permanent Supportive Housing.

DESIGNATED OR PRIORITIZED FOR CHRONICALLY HOMELESS:

1. Chronically homeless individual or families with the longest history of homelessness and with the most severe service needs/vulnerabilities.
2. Chronically homeless individuals or families with the longest history of homelessness
3. Chronically homeless individuals or families with the most severe service needs
4. All other chronically homeless individuals or families

NOT DEDICATED OR PRIORITIZED FOR CHRONICALLY HOMELESS:

1. Homeless individuals or families where a household member has a disability with the most severe service needs

2. Homeless individuals or families where a household member has a disability with a long period of continuous or episodic homelessness
3. Homeless individuals or families where a household member has a disability coming from places not meant for human habitation, safe havens or emergency shelter
4. Homeless individuals or families where a household member has a disability coming from transitional housing

SERVICE NEEDS/VULNERABILITIES (NOT IN ORDER OF IMPORTANCE)

❖ low or no income
❖ veteran
❖ current/past substance abuse
❖ criminal record
❖ bad or no rental history
❖ victim of domestic violence
❖ LGBTQ status
❖ resistance to receiving services
❖ significant health or behavioral challenges or functional impairments which require a significant level of support in order to maintain permanent housing
❖ high utilization of crisis or emergency services, including emergency rooms, jails and psychiatric facilities to meet basic needs
❖ coming from the street or other unsheltered situation, particularly youth and children
❖ vulnerability to illness or death
❖ vulnerability to victimization, including physical assault, trafficking, or sex work