



**THE MAHONING COUNTY HOMELESS
CONTINUUM OF CARE
Written Standards**

November 2021

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Introduction

The Mahoning County Homeless Continuum of Care (MCHCoC) have developed the written standards contained in this document for providing housing and services to those persons experiencing homelessness or at-risk of homelessness across Mahoning County. The goals of the written standards are to:

- Establish community-wide expectations on the operations of projects within the community
- Ensure that the system is transparent to users and operators
- Establish a minimum set of standards and expectations in terms of quality expected of projects
- Make local priorities transparent to recipients and subrecipients of funds
- Create consistency and coordination between recipients' and subrecipients' projects within the MCHCoC

This document outlines the MCHCoC written standards, which meet the minimum requirements of the U.S. Department of Housing and Urban Development (HUD) and address community expectations for all projects serving person who are homeless or at risk of homelessness. At a minimum these standards must include:

1. Policies and procedures for evaluating individuals' and families' eligibility for assistance under the CoC Program
2. Policies and procedures for determining and prioritizing which eligible transitional housing assistance
3. Policies and procedures for determining and prioritizing which eligible individuals and families will receive rapid re-housing assistance
4. Standards for determining what percentage or amount of rent each program participant must pay while receiving rapid rehousing assistance
5. Policies and procedures for determining and prioritizing which eligible individuals and families with receive permanent supportive housing assistance

The MCHCoC written standards are not intended to be in lieu of or in place of federal regulations authorized by the HEARTH Act but are intended to clarify CoC-level decisions and requirements regarding program administration. All HUD-funded providers must follow all applicable federal regulations in their entirety. However, all HUD-funded projects are also expected to adhere to the standards found in this document, except where disallowed by specific federal, state, or city regulation affecting a project's coverage area.

Standards for All Project Types

a. Coordinated Entry

MCHCoC's Coordinated Entry System is a process designed to coordinate program participant access, assessment, and referral to homeless dedicated housing and services. The written standards for providing assistance under CoC Program will be integrated into the CoC's Coordinated Entry Policies and Procedures and the intake and the assessment procedures of individual housing projects. All CoC- funded projects are required to

participate in the MCHCoC's Coordinated Entry System. Participation requires following all established policies and procedures outlines in Coordinated Entry Policies and Procedures.

b. Homeless Management Information System (HMIS)

All CoC-funded projects are required to participate in the MCHCoC's Homeless Management information System (HMIS), as specified in the HMIS Governance Charter and HMIS Policies and Procedures Manual. The MCHCoC strongly encourages non-CoC/ESG funded organization to participate in HMIS. Victim service providers are prohibited from entering participant information into HMIS under federal guidelines, and therefore will use a comparable database in order to report data as necessary.

c. Housing First

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

d. Equal Access and Non-Discrimination

The MCHCoC non-discriminatory policy, regarding the U.S. Department of Housing and Urban Development (HUD) final rule regarding equal access to Community Planning and Development (CPD) funded programs regardless of sexual orientation, gender identity, and marital status, will ensure that individuals are aware of their rights to equal access to CPD funded programs.

Thus, all CPD funded programs, including Continuum of Care funded programs, must comply with the following requirements:

- Determine program participant eligibility for housing regardless of sexual orientation, gender identity, or marital status, and must not discriminate against clients who do not conform to gender or sex stereotypes (i.e., because of gender identity);
- Grant equal access to CPD funded programs or facilities consistent with program participant gender identity, and provide program participant's family with equal access;
- MUST NOT ask program participants to provide anatomical information or documentation (i.e. ID), physical, or medical evidence of gender identity; and
- Take non-discriminatory steps when necessary and appropriate to address privacy concerns raised by any residents or occupants.

These requirements are identical to those provided by HUD in a notice for continuums of care to adopt.

e. Access to Mainstream Resources

The MCHCoC expects that every agency funded through the CoC programs will coordinate with and access mainstream and other targeted homeless resources. Providers should assess and assist program participants with obtaining any mainstream resource for which they may be eligible for including, but not limited to: TANF, Veterans Health Care, Food Stamps, Medicaid, CHIP, SSI/SSDI, TWC, etc. Where possible, providers should streamline

processes applying for mainstream benefits such as the use of a singular form to apply for benefits or collecting necessary information in one step.

f. Educational Liaison

For projects that serve households with children, a staff person must be designated as the educational liaison that will ensure children are:

- Enrolled in school
- Connected to appropriate services in the community, including early childhood projects such as Head Start, Part C of the Individuals with Disabilities Education Act, and McKinney Vento education services

g. Universal Assessment

All individuals will be assessed using a comprehensive, universal assessment tool called the Vulnerability Index Service Prioritization Decision Assistance Tool (VI-SPDAT) which is useful for initial triage and entry assessment. This tool guarantees that individuals' levels of need and eligibility determinations are made in an informed and objective manner.

Prioritization Standards

First Priority—Homeless Individuals and Families with a Disability with Long Periods of Episodic Homelessness and Severe Service Needs

An individual or family that is eligible for CoC Program-funded PSH who has experienced fewer than four occasions where they have been living or residing in a place not meant for human habitation, a safe haven, or in an emergency shelter but where the cumulative time homeless is at least 12 months **and** has been identified as having severe service needs.

Second Priority—Homeless Individuals and Families with a Disability with Severe Service Needs.

An individual or family that is eligible for CoC Program-funded PSH who is residing in a place not meant for human habitation, a safe haven, or in an emergency shelter and has been identified as having severe service needs. The length of time in which households have been homeless should also be considered when prioritizing households that meet this order of priority, but there is not a minimum length of time required.

Third Priority—Homeless Individuals and Families with a Disability Coming from Places Not Meant for Human Habitation, Safe Haven, or Emergency Shelter Without Severe Service Needs.

An individual or family that is eligible for CoC Program-funded PSH who is residing in a place not meant for human habitation, a safe haven, or an emergency shelter where the individual or family has not been identified as having severe service needs. The length of time in which households have been homeless should be considered when prioritizing households that meet this order of priority, but there is not a minimum length of time required.

Fourth Priority—Homeless Individuals and Families with a Disability Coming from Transitional Housing.

An individual or family that is eligible for CoC Program-funded PSH who is currently residing in a transitional housing project, where prior to residing in the transitional housing had lived in a place not meant for human habitation, in an emergency shelter, or safe haven. This priority also includes individuals and families residing in transitional housing who were fleeing or attempting

to flee domestic violence, dating violence, sexual assault, or stalking and prior to residing in that transitional housing project even if they did not live in a place not meant for human habitation, an emergency shelter, or a safe haven prior to entry in the transitional housing.

The order of client prioritization entering into Coordinated Entry will not exclusively be based on disability or diagnosis. The MCHCoC has established priority for each project based on severity of needs, length of homelessness and/or subpopulation characteristics.

1. Households will be referred to **RRH** based on the availability of resources and the client's VI-SPDAT score.
2. Households will be referred to **TH** based on the availability of TH units, the client's VI-SPDAT score, and at least one of the following criteria:
 - **Youth** – All individuals between the ages of 15-24 who present as a household. This can include unaccompanied youth (household size of one) or multiple youth who are related, such as siblings, cousins, or other family members who are seeking assistance together.
 - **Youth Parent(s)** – Women and men between the ages of 15-24 who are the parent(s) of at least one (1) child and are seeking assistance with that child(ren).
 - **Domestic Violence Survivors** – Households with at least one person who identifies a domestic violence experience as the primary reason causing their housing crisis.
 - **Persons Being Released From Correctional Facilities** – and are homeless before entering prison/jail and/or homeless (as per HUD definition) when released.
 - **Pregnant Women** – Women who are pregnant regardless of their age or whether they have additional children.
 - **Persons in the Early Stages of Alcohol or Drug (AOD) Addiction Recovery**- Households with at least one (1) person who recently began receiving services to assist in their recovery from alcohol or other drug addiction. This can include (but not limited to) people who were recently released from a treatment center or other institution.
 - **Veterans** – (choosing Grant and Per Diem – GPD).
3. Households will be referred to **PSH** based on the VI-SPDAT score and the following specific criteria:
 - Chronic Homelessness as defined by HUD
 - Long-Term Homelessness as defined by Federal and State mandates
 - Longest history of homelessness
 - Most severe Service Needs as determined by the VI-SPDAT

Housing Matching Prioritization Process for Transitional Housing (TH) and Rapid Re-Housing (RRH)

For individuals scoring 4-7 on the VI-SPDAT or 5-11 on the F VI-SPDAT, the following process will be used to prioritize for Transitional Housing or Rapid Re-Housing Placement:

Scores of 4-7 on the VI-SPDAT for individuals or 8-11 on the F VI-SPDAT for families will be referred to Transitional Housing (TH).

Scores of 4-7 on the VI-SPDAT for individuals or 5-7 on the F VI-SPDAT for families will be referred to Rapid Re-Housing (RRH).

Individuals that score 4-7 on the VI-SPDAT, or families that score 5-11 on the F VI-SPDAT will be prioritized based on the following criteria:

1. **Date of Assessment**: The date of the individual's assessment (giving priority to the most recent date of assessment).
2. **Unsheltered Sleeping Location**: Unsheltered individuals will be given priority over sheltered individuals.
3. **Length of Time Homeless**: The length of time an individual has experienced homelessness, giving priority to the person that has experienced a longer period of homelessness.
4. **Overall Wellness**: Homeless individuals with medical needs will be prioritized when they have behavioral health conditions or histories of substance use, which may either mask or exacerbate their medical conditions.
5. **Medical Vulnerability**: Homeless individuals with severe medical needs who are at greater risk of death will receive expedited placement into housing.

Transfer Process

Permanent supportive housing (PSH) project participants may request a transfer to another PSH unit when the participants no longer meets the eligibility criteria for the project that currently houses them or when their current housing unit no long satisfies their needs. Appropriate reasons for granting a transfer include the following:

1. Circumstance in which the participants qualify for emergency transfers as victims of domestic violence under 24 CFR Part 5, Subpart L, or circumstances that justify the participants' belief on their housing project's belief that the participants' continued residence in their current unit poses an imminent danger to themselves or other;
2. The existence of verified disabilities that cannot be reasonably accommodated in the participant' current unit; and
3. Changes in the size or composition of a participants' household.

To request a unit transfer, the project or person may call Coordinated Entry and explain the reason for the request. If the request meets the above listed criteria, information will be updated in Coordinated Entry as needed and the person will move to the top of the prioritization list for housing.

Permanent Supportive Housing Project Standards

Permanent Supportive Housing eligibility

All MCHCoC PSH projects must serve persons who meet category 1 of HUD's homeless definition AND are diagnosed with a disability. More detailed information can be found in the following sections regarding who should be prioritized for PSH.

PSH Eligibility When Fleeing DV (category 4 of the homeless definition)

MCHCoC PSH projects can serve disabled individuals/ households fleeing DV (category 4 of the homeless definition), but the people fleeing DV must reside in a shelter or a TH immediately prior to entering the PSH project. Persons fleeing DV cannot enter PSH directly from a housed situation.

PSH projects are NOT permitted to serve individuals or families who are imminently at risk of losing their housing (category 2 of the homeless definition).

PSH Eligibility for Chronically Homeless

For PSH projects dedicated to or prioritizing chronically homeless, category 1 of the homeless definition ONLY includes individuals and families who are sleeping in a place not meant for human habitation, or living in an emergency shelter/ safe haven (and meet all other elements of the chronically homeless definition). Although non-chronic dedicated PSH projects are technically permitted to serve persons/households currently in TH, communities and providers should keep in mind that requiring persons to move into TH prior to entering PSH contradicts system and project-level Housing First practices. This is discussed in more detail in the following Housing First in Permanent Supportive Housing section.

The definition of chronically homeless is as follows:

- a) An individual who:
 1. Is currently homeless and lives in a place not meant for human habitation, a safe haven, or in an emergency shelter; AND
 2. Has been homeless and living or residing in a place not meant for human habitation, a safe haven, or in an emergency shelter continuously for at least one year or on at least four separate occasions in the last 3 years where the combined occasions totals a length of at least 12 months. Each period separating the occasions must include at least 2 nights of living in a situation other than a place not meant for human habitation, in an emergency shelter, or in a safe haven; AND
 3. Can be diagnosed with one or more of the following conditions: substance use disorder, serious mental illness, developmental disability, post-traumatic stress disorder, cognitive impairments resulting from brain injury, or chronic physical illness or disability;

- b) 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 a of this definition before entering that facility; or

c) 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 a of this definition, including a family whose composition has fluctuated while the head of household has been homeless.

More detailed information about HUD's final rule on the definition of chronically homeless can be found at <https://www.hudexchange.info/resource/4847/hearth-defining-chronically-homeless-final-rule/>

Serving Specific Disability Types in PSH

In general, limiting assistance to persons with a specific disability type, such as serious mental illness or chronic substance abuse only, is not permitted by HUD, as this is a violation of the Fair Housing Act. Section 578.93 of the CoC Program interim rule contains the Fair Housing Requirements for the CoC Program.

Lastly, although CoC-funded projects may target specific subpopulations and develop specialized services for those subpopulations, as described above, they are NOT permitted to limit enrollment into the PSH project only to people with specific disabilities or attributes. These projects must also accept clients without a specific diagnosis (e.g. SMI) who would benefit from the project/services, as identified by the local PSH Prioritization workgroup and prioritization process.

Documentation and Record-keeping Requirements

All MCHCoC projects must ensure they abide by all the documentation (of homeless status, project eligibility, chronic homeless status (where applicable), and disability) and record-keeping requirements.

Permanent Supportive Housing Prioritization

All MCHCoC PSH Projects must prioritize chronically homeless individuals/ families first, in all cases, and must follow the order of priority described in detail below. Furthermore, when multiple chronically homeless are identified, those individuals/families with the longest histories of homelessness and with the most severe service needs should be prioritized before other chronically homeless with less severe needs and/or shorter histories of homelessness. PSH projects must work with Housing Entry Coordinator as outlined in the MCHCoC Coordinated Entry Policies and Procedures at <https://www.mahoningcountyoh.gov/1040/Coordinated-Entry> .

Additionally, in cases where an eligible chronically homeless veteran has been identified, and that veteran is not eligible for VA programs, PSH Providers should prioritize the homeless veteran for assistance.

Prioritizing PSH Projects/ units for chronically homeless means implementing an admissions preference for those persons meeting the definition. All MCHCoC PSH projects – both those that are dedicated to serving chronically homeless persons and those that prioritize serving chronically homeless persons – must use the following order of priority for identifying who should be served. In order to adhere to the order of priority, PSH projects would first seeks to identify a homeless person on the prioritization list who meets the First Priority under the Chronically Homeless Order or Priority for PSH Projects section below. If no one who meets that priority can be found within a reasonable amount of time, then the PSH project may move to the second priority, and on down from there. The order priority is as follows:

Chronically Homeless Order of Priority for PSH Projects

- 1) First Priority – Chronically Homeless Individuals and Families with the Longest History of Homelessness AND the Most Severe Service Needs
 - a. Have been homeless for at least 12 months either continuously or on at least four separate occasions in the last three years, *where the cumulative total length of the four occasions equals at least 12 months*; AND
 - b. Have been identified as having the most severe needs as evidence by a history of high utilization of crises services, including but not limited to, emergency rooms, jails, and psychiatric facilities, or significant health or behavioral health challenges or fictional impairments which require a significant level of supports in order to maintain permanent housing
- 2) Second Priority – Chronically Homeless Individuals and Families with the Longest History of Homelessness
 - a. Have been homeless for at least 12 months either continuously or on at least four separate occasions in the last three years, where the accumulation total length of the four occasions equal at least 12 month
 - i. And meet all other elements of the chronically homeless definition
- 3) Third Priority – Chronically Homeless Individuals and Families with the Most Severe Services Needs
 - a. Have been identified as having the most severe service needs as described in paragraph (1b) above
 - i. And meet all other elements of the chronically homeless definition
- 4) Fourth Priority – All Other Chronically Homeless Individuals and Families
 - a. Have been homeless for at least 12 months either continuously or on at least four separate occasions in the last three years, where the cumulative total length of the four occasions equals at least 12 months
 - i. And meet all other elements of the chronically homeless definition

MCHCoC Projects should follow the order of priority above while also considering the goals and any identified target populations served by the project. For example, a PSH project designed to serve families would not be required to serve a single chronically homeless individual. Instead, that project would prioritize any chronically homeless families (including families of two or more adults who present as a family, as described in the section about the Equal Access Rule) for their project, following the order of priority outlined above.

Please note, if no chronically homeless individuals or families are immediately identified, the PSH project may keep the rental assistance or PSH unit available for a short period of time while waiting for a chronically homeless household to be found – waiting up to 30 days is common practice, for example. After that time, the PSH project should move forward with serving the next prioritized individual or family, following the order of priority outlined below. PSH units should not sit empty for lengthy periods of time in order to wait for chronically homeless to be identified – this applies to both PSH projects that prioritize chronically homeless and those that are dedicated to chronically homeless.

If no chronically homeless persons are identified within a PSH project's self-defined services area (as identified in grant application and agreements), then those projects should use the following order of priority to determine who should be prioritized for the PSH:

Non-Chronically Homeless Order of Priority

- 1) First Priority – Homeless Individuals and Families with the Most Severe Services Needs
 - a. Have been identified as having the most severe service needs as described in paragraph 1b above.
 - i. And meet all other PSH eligibility criteria
- 2) Second Priority – Homeless Individuals and Families with a Long Period of Continued or Episodic Homelessness
 - a. Have been living in a place not meant for human habitation, a safe haven, or in an emergency shelter continuously for at least 6 months or on at least three separate occasions in the last three years *where the cumulative total was at least 6 months*.
 - i. And meet all other PSH eligibility criteria
- 3) Third Priority – Homeless Individuals and Families Coming from Places Not Meant for Human Habitation, Safe Havens, or Emergency Shelters
 - a. Have been living in a place not meant for human habitation, a safe haven, or an emergency shelter.
 - i. And meet all other PSH eligibility criteria
- 4) Fourth Priority – Homeless Individuals and Families Coming from Transitional Housing
 - a. Coming from transitional (TH), where prior to residing in the TH they lived on the streets, an emergency shelter, or a safe haven. The priority also includes homeless individuals and families with a qualifying disability who were fleeing domestic violence or sexual assault and are living in TH, even if they did not live on the streets or in a shelter prior to entry into the TH project.
 - i. And meet all other PSH eligibility criteria

Assessing Severity of Need

MCHCoC PSH projects should utilize VI-SPADT score to help determine the severity of services needs of homeless person's eligible for local PSH assistance, if possible. If information about homeless persons' use of local crisis services is available as well, this information may supplement the assessment information in order to better understand severity of need.

Housing First in Permanent Supportive Housing

All MCHCoC homeless assistance projects must follow a Housing First approach. For PSH projects, the following practices and policies must be adopted and implemented at minimum:

Housing First at Program Entry

- Reducing barrier to entry
 - PSH projects must minimize any barriers to homeless persons/ households entry into their project. This means that projects cannot require things of potential clients to enter

their project over and beyond demonstrating meeting basic edibility (and any prioritization) requirements. At minimum, PSH projects CANNOT require the following as a condition of entry in to the project:

- Minimum income level and/or employment or ability to obtain income/employment
- Completion of drug test
- Participation in TH program prior to entering PSH
- PSH projects must assess people applying for the project to identify people with greater vulnerabilities to prioritize applicants for assistance, based on the order of priority outlined in the preceding section

Housing First in Program Design

- *Voluntary Supportive Services*
 - PSH projects must offer supportive services to program participants on a voluntary basis. However, PSH projects may require program participants to meet with case managers on a regular basis for purposes of ensuring the household is stable in housing and has ongoing need for services.
 - PSH projects should work with program participants on a regular basis to identify a plan for assessing for reduced supportive services needs and possible movement onto a non-PSH affordable housing option when/if the program participant desires
 - Standard Leases Agreement
 - PSH projects must ensure that there is a standard lease agreement in place between the landlord/property manager and the program participant. The lease agreement cannot include reference to participation in supportive services or compliance with a treatment plan as a condition of ongoing tenancy
- *Housed Focused Assistance*
 - PSH projects' primary goal is to place program participants into permanent housing as quickly as possible, regardless of other personal issues or concerns. To that end, not only are supportive services voluntary, they are tailored to the client's needs as they pertain to obtaining and retaining permanent housing