The Emergency Shelter Program

Program Manual

Housing and Homeless Services Division
Michigan Department of Health and Human Services

The Salvation Army

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The Emergency Shelter Program: Program Manual

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INTRODUCTION

OVERVIEW OF HOUSING AND HOMELESS SERVICES

Housing and Homeless Services (HHS) is an office within the Bureau of Community Services in the Michigan Department of Health and Human Services (MDHHS). The Salvation Army Eastern Michigan Division (TSA) administers the ESP on behalf of MDHHS and supports the mission, vision, principles, and strategies that are presented below.

MISSION

To ensure that all Michigan citizens experiencing homelessness receive the assistance necessary to make their episode rare, brief, and non-recurring.

VISION

HHS will be seen as a high-performing state government agency by achieving its mission, delivering, and assuring excellent customer service, guiding the direction of quality homeless service delivery, and building confidence with Michigan residents by being a good steward of taxpayer dollars.

GUIDING PRINCIPLES

To ensure continuity and consistency within MDHHS programs, subrecipients should follow the guiding principles outlined below when implementing their programs:

- ❖ Housing is a basic human need; providers must ensure that housing options offered to clients are accessible, safe, and affordable.
- ❖ Programs should first ensure that a client's basic needs are met (food, housing, clothing, etc.) prior to focusing on other needs (recovery, employment, education, etc.) based on the client's situation and their requests for specific types of assistance.
- ❖ Clients have the right to set their own goals and make their own decisions, even if their goals are different than those of the service provider. Service providers should work to reduce as many barriers to services as possible.
- ❖ Clients are the experts in what they need and how they can achieve their goals. A client's strengths and assets should always be leveraged and considered in service delivery.
- ❖ Every person has inherent dignity and worth; service providers should treat all clients with respect, being mindful of individual differences including cultural and ethnic diversity.
- ❖ Clients have a right to privacy, confidentiality, and to be informed of their rights (especially related to their records, program termination, grievances, etc.).
- ❖ Services delivered to clients should promote client well-being and work to integrate the client with mainstream resources and the larger community as much as possible.

STRATEGIES

The MDHHS implements the following approaches as it works to end homelessness in Michigan.

❖ Developing and administering services that target individuals and families experiencing homelessness with the goal of moving them into stable housing as quickly as possible and providing the supports needed to achieve permanent housing stability and overall well-being.

❖ Working to increase coordination of other MDHHS resources that support housing stability, including entitlement benefits such as Medicaid and food assistance, children's services, behavioral health and developmental disabilities services, and employment and training services.

❖ Collaborating with other state and local partners around housing and homelessness issues through coordination of resources across departments and alignment of efforts within local communities.

❖ Utilizing data to measure progress, identify gaps, and inform policy and program decisions.

❖ Providing training and technical assistance to community providers in order to build capacity and improve the quality of services delivered to those experiencing homelessness.

INTERVENTION FRAMEWORK

The MDHHS Housing and Homeless Services provides funding to support the following types of interventions to end homelessness for youth, individuals, and families.

❖ Prevention – Assistance that aids households in preserving their current housing situation to avoid homelessness.

❖ Diversion – Assistance that helps households identify temporary housing outside of shelter while they receive services to stabilize their housing or help them move into permanent housing.

❖ Outreach – Face-to-face interaction with people living on the streets, in shelters, vehicles, camps, or in other non-traditional settings unfit for human habitation to engage and connect them to services.

❖ Shelter – Time-limited temporary housing where individuals experiencing homelessness may stay and receive supportive services that are designed to enable individuals to move into permanent housing.

❖ Rapid Re-Housing – Assistance that prioritizes moving households into housing quickly and providing short-term to medium-term rental assistance and supportive services.

❖ Permanent Supportive Housing – Assistance that prioritizes moving households that are most vulnerable into housing quickly and providing long-term rental assistance and supportive services.

PURPOSE OF THE PROGRAM MANUAL

This manual serves as a tool for the subrecipients of The Emergency Shelter Program (ESP). It provides program requirements and guidance on program implementation.

Throughout this manual, the local shelter and motel providers will be referred to as 'subrecipient'.

HOW TO USE THE PROGRAM MANUAL

This manual serves as a tool to identify program requirements that subrecipients meet or areas for improvement. Throughout the manual you will see the arrows below. Use these quick reference boxes as a checklist for your own reference.
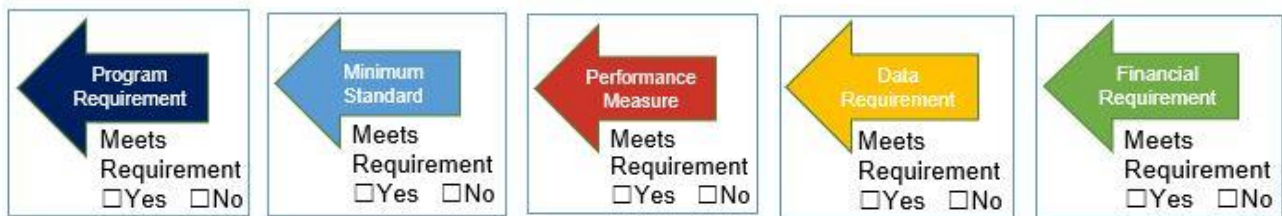
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PROGRAM OVERVIEW

OVERVIEW OF THE EMERGENCY SHELTER PROGRAM (ESP)

The MDHHS oversees the ESP. The ESP is operated statewide and provides emergency overnight lodging to households experiencing homelessness in Michigan. The Salvation Army – Eastern Michigan Division (TSA-EMI) administers the ESP on behalf of MDHHS.

PURPOSE AND GOAL

The purpose and goal of the ESP is to provide overnight emergency shelter or lodging to households experiencing homelessness in Michigan in a place that is safe, clean, and secure, and move these households to stable/permanent housing as quickly as possible.

ALIGNMENT WITH STATE INITIATIVES

The ESP will align with the efforts of the MDHHS Housing and Homeless Services as well as with Michigan's Campaign to End Homelessness.

The ESP policies and procedures will align with the state's efforts toward coordination between housing programs and service systems including the Housing Assessment and Resource Agencies (HARA).

ANNUAL FUNDING

Approximately $17.2 million is allocated from the State of Michigan General Fund and Temporary Assistance to Needy Families (TANF) for Emergency Shelter Program funding.

SERVICE AREA

State of Michigan

OPERATING YEAR

October 1st to September 30th

INTERVENTION TYPE

Time-limited temporary housing where individuals experiencing homelessness may stay and receive supportive services that are designed to enable individuals to move into permanent housing.

TARGET POPULATION

Families and individuals experiencing homelessness.

SERVICE COMPONENTS

- ❖ Emergency Shelter: Emergency shelter lodging is available for the amount of time a household needs as long as progress is being made towards permanent housing. The goal of the ESP is to rapidly exit households into a safe, positive destination.

- ❖ Emergency Motel: In service areas without shelter facilities or service areas with shelter facilities at capacity, emergency motel lodging is available for eligible households. As with shelter, the goal is to rapidly exit households into a safe, positive destination.

LENGTH OF PROGRAM

Participants are eligible for the necessary number of nights of emergency shelter to rapidly exit into permanent housing or up to seven nights of emergency motel accommodations. Extensions for motel stays are allowable with approval.

SUBRECIPIENT GRANT AWARD

OVERVIEW

The ESP subrecipients will be provided with an annual allocation to provide overnight lodging to families and individuals experiencing homelessness. Shelter subrecipients may submit for reimbursement based on an approved budget. Motel subrecipients may request reimbursement for incurred costs as well as allowable administration costs.

GRANT TERM

- ❖ TSA will issue and manage Memoranda of Agreement (MOAs) on an annual basis.
- ❖ A competitive bid process will be held as needed.

GEOGRAPHIC AREA

The ESP shall provide services statewide. Subrecipients must provide services in the service area defined in their Agreement.

CREDENTIALS

The subrecipients shall assure appropriately credentialed or trained staff are performing functions under this Agreement. Subrecipients must have policies and procedures in place regarding background checks on staff.

ADMINISTRATION OF THE EMERGENCY SHELTER PROGRAM

❖ The ESP provides funding to local non-profit agencies for emergency shelter or motel lodging for eligible households in a facility that is safe, clean, and secure. Shelters should meet the Minimum Standards for Emergency Shelter. Shelter subrecipients must maintain hours of operation seven (7) days a week from (at a minimum) 5:00 p.m. until 9:00 a.m. Local subrecipients must also provide referrals to service providers including the Housing Assessment and Resource Agency (HARA) and provide a minimum of two (2) meals per day, including a supper meal in the evening and a breakfast meal before individuals leave in the morning.

  ➢ All subrecipient clients must be referred to a HARA within 48 hours of initial entry.

  ➢ All subrecipient clients over age 55 will be referred to the local Area Agency on Aging for assistance.

  ➢ When shelter is not available, motel lodging may be used. This is for communities that do not have shelters or when shelter space is not available. Motel lodging should be short term. Agencies that administer motel funding provide the nightly cost of lodging up to the established state reimbursement rate (currently $85) as well as referrals to service providers, including the HARA. The goal of the program is to move households experiencing homelessness from temporary shelter/motel lodging to stable/permanent housing as quickly as possible.

  ➢ Many shelters are being called on to provide daytime operations to fill gaps due to COVID-19. The ESP subrecipients should provide assistance to meet this community need as they are able.

ALLOCATION FORMULA AND APPLICATION PROCESS

Beginning in FY 2017 (October 1, 2016), a needs-based formula was used to determine allocations to each region of the state. The allocations per region are based on the poverty rate from the U.S. Census, the population from the U.S. Census, and the literally homeless rate from the Homeless Management Information System (HMIS). This formula was created in consultation with an advisory group made up of providers as well as with the support of statewide partners.

TYPES OF EMERGENCY SHELTERS

EMERGENCY SHELTERS

Emergency shelter lodging is available for the amount of time a household needs as long as progress is being made towards permanent housing. The goal of the ESP is to rapidly exit households into a safe, positive destination.

SINGLE-SEX SHELTERS

These can only be operated using ESP funds under the following limited conditions:

❖ The shelter must serve individuals only. A shelter that accepts families with children cannot be a single-sex facility; and

❖ The shelter must be considered a "dwelling unit" and must be a single shelter that includes shared bedrooms or bathing facilities. See the CoC interim rule (which applies to ESG programs), section 578.93, for more information about this policy.

❖ If an ESP funded facility does not meet the conditions outlined above, then it cannot operate as a single-sex shelter and must serve eligible people of any gender.

FAMILY SHELTERS

Any shelter that accepts families with children or couples presenting as family. Families and couples do NOT have to provide proof of marriage as a condition of shelter eligibility as outlined under HUD's Equal Access Rule. See the Definition of Family in the frequently used terms section for a detailed explanation of family composition.

ROTATING SHELTERS

Rotating shelters utilize existing community spaces, such as houses of worship, to provide overnight emergency shelter to children and families experiencing homelessness. Clients typically rotate to different locations on a weekly, bi-weekly, or monthly basis depending on the community resources available. A Day Center location should be available, along with transportation, to ensure that all clients have 24 /7 access to shelter. Rotating shelter may apply to participate in the ESP and will be approved if the community need is demonstrated for a rotating model.

EMERGENCY MOTELS

In service areas without shelter facilities or service areas with shelter facilities at capacity, emergency motel lodging is available for eligible households. As with shelter, the goal is to rapidly exit households into a safe, positive destination. Emergency motel lodging should be treated as emergency shelter. Emergency motel subrecipients are expected to provide services to clients in motel as they would to clients in shelter.

CLIENT ELIGIBILITY REQUIREMENTS

Subrecipients must ensure Client Eligibility Criteria and Refusal Policy are consistently followed.

Client Eligibility Criteria: Evidence must be obtained by the subrecipient that the household is literally homeless. Acceptable evidence includes:

1. Written observation by an outreach worker; or
2. Written referral by another housing or service provider; or
3. Certification by the household seeking assistance stating that they are literally homeless.

Refusal Policy: The subrecipient shall provide services to all eligible persons seeking assistance and comply with applicable Civil Rights statutes and regulations. Services cannot be refused if persons seeking assistance is/are not a resident of the geographic area or do not have a form of identification.

Only under the following circumstances may the subrecipient refuse services:

1. The facility is at capacity; or
2. Persons seeking assistance have a documented history of being disruptive, abusive, or excessively disorderly, or other characteristics not conducive to staying in emergency shelter.

Denials shall be authorized by someone other than the intake worker and documented in the case file. This documentation must include the reason for the refusal and any refusals will be tracked and reported quarterly.

A referral to another shelter/program must be made.

PROGRAM OVERSIGHT

MONITORING

The Salvation Army (TSA) is responsible for monitoring subrecipients on their implementation of the ESP. In accordance with 24 CFR Part 574, Section 500(a), TSA must monitor its activities under Federal awards to assure compliance with applicable federal requirements and performance expectations are being achieved. To meet this expectation, TSA staff will complete site visits with the subrecipients on an annual basis.

MONITORING PHILOSOPHY

TSA has the responsibility to ensure that subrecipients provide the most effective and efficient services to their clientele, while also maintaining adherence to federal and state funding regulations. We recognize the commitment of subrecipients to their clients and communities, and we work in partnership with them to achieve the highest quality of service provision.

Adherence to federal expectations is measured through off-site and on-site monitoring that considers both programmatic and financial areas. TSA Regional Managers work collaboratively with subrecipients to ensure that excellent work is celebrated and that challenges to success are overcome through the provision of information and technical assistance supports.

Monitoring is conducted throughout the year beginning with the application/renewal process. The tables below outline the process used to monitor subrecipients on a regular basis.

Application/Renewal (due 8/13)	Program Forms	Status Report Forms
• Application o Budget o Shelter Rules	• Program Documents (due 11/1) o Proof of Liability Insurance o Confidentiality Policy o Client Eligibility Policy o Emergency Plan o Background check policy	• Monthly Reimbursement Request Form (RRF) • Quarter 1 Report • Quarter 2 Report • Quarter 3 Report

	o Staff Training Plan
	o Case Management Process
	o Intake Procedures
	o Exit Policies
	o Hours of Operation
	o Health and Safety Policies and Procedures
	o Program Participant Manuals
	o Staff/Operations Manuals
	o Shelter Diversion Policy
		• Program Monitoring Response
		• Amendment Requests
		• Corrective Action Plan
		• TSA Notification
		  o Change in program staff
		  o Significant program change
		  o Client Grievance

October – December	January – March	April – June	July – September
• Program Forms Due • Monthly RRFs	• Quarter 1 Report Due • Monthly RRFs	• Quarter 2 Report Due • Monthly RRFs	• Quarter 3 Report Due • Monthly RRFs • Funding Application
• Virtual and In-Person Monitoring Visits			

MONITORING REQUIREMENTS

Subrecipients will be required to make both case files and financial files available to TSA program staff.

❖ TSA will utilize an annual risk-based monitoring tool to determine the process used for monitoring. The risk-based monitoring tool will use the items in the table below to assess risk.

➢ Definitions for these risk areas can be found in appendix 2.

Total Dollar Amount	Previous Grant Experience?	Financial and Compliance Monitoring	Frequent Turnover of Staff?	Other Issues of Noncompliance?	Financial Management Problems or Issues?	Significant Findings or Questioned Costs?	Recurring or Unresolved Issues?	Programmatic Noncompliance?	TOTAL RISK SCORE
Large Medium Small	None 1-3 years 3+ years	No Single/No MDHHS Review Single Audit, Not Major Program Single Audit & Major/MDHHS Review	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No	0

❖ TSA will complete a formal, written monitoring report within thirty (30) calendar days following the monitoring date for each visit.

❖ TSA will outline any concerns or findings as needed in the monitoring report along with a Corrective Action Plan (CAP) request and CAP timeline/due date.

❖ During monitoring, TSA will assure that all subrecipients funded through this Agreement meet the following requirements:

➢ Subrecipients must maintain hours of operation, seven (7) days a week from (at minimum) 5:00 p.m. until 9:00 a.m. Subrecipients must also provide referrals to service providers including the HARA and provide a minimum of two (2) meals per day, including a supper meal in the evening and a breakfast meal before individuals leave in the morning.

- ➢ Subrecipients shall make every attempt to practice shelter diversion for persons seeking ESP services.

- ➢ Subrecipients shall work closely with the designated HARA located in their area to ensure that persons experiencing homelessness are placed into stable housing as quickly as possible. This includes active participation in the coordinated entry system.

- ➢ Subrecipients must inquire about school attendance with youth and/or head of households where children are present. Subrecipients should maintain contacts and establish relationships with McKinney-Vento liaisons, schools, and other educational resources (e.g., Head Start, Healthy Start) to ensure that children and youth are accessing all available educational opportunities. The ESP must track the percentage of homeless families with school aged children who are served through an age-appropriate education or development program (i.e. Head Start, Early On, Early Head Start, elementary, middle and high school district).

- ➢ Subrecipients must participate in local coordinated entry procedures to ensure that all persons served through the Emergency Shelter Program are assessed using the state mandated prioritization tool.

- ➢ Subrecipients must enter data into the Homeless Management Information System (HMIS) for program reporting and billing.

- ➢ Subrecipients must implement low-barrier standards.

- ➢ Shelter subrecipients shall comply with the *Minimum Standards for Emergency Shelter*.

- ➢ Funds furnished under the ESP Agreement shall not supplant any funds, public or private, that are already being used by subrecipients to provide emergency shelter.

- ➢ All subrecipients shall possess current liability insurance.

- ➢ Subrecipients must be an active MI Bridges Navigation Partner to ensure that program participants can access the MDHHS benefits.

MONITORING VISITS

- ❖ Based on the risk-based monitoring tool, subrecipients may have one or more in-person visits each year. This may include but is not limited to a walk-through of shelter facilities and a review of client files, subrecipient performance, and financial documents verifying expenses align with costs to provide services related to the ESP.
- ❖ Subrecipients will be visited by the Regional Manager at least twice a year; additional visits may be scheduled if necessary (based on the risk-based monitoring tool or other circumstances). Based on the risk-based monitoring tool, if the subrecipient is performing very well and there are no concerns, one visit may be conducted virtually.
- ❖ One visit will be scheduled by the ESP Regional Manager with at least fourteen (14) days' notice. The second visit will be un-announced and could happen anytime

throughout the fiscal year. This visit may happen during irregular hours (late afternoon, early morning, weekends, etc.).

❖ If the scheduled monitoring cannot be conducted on-site, virtual monitoring may be conducted. This will be communicated to the subrecipient in advance.

❖ ESP Regional Managers will complete the ESP Monitoring Guide at the time of the announced visit. Monitoring guides are subject to change and a current version will be presented to the subrecipient at the time of monitoring. This includes a review of the ability of each subrecipient to meet the *Minimum Standards for Emergency Shelter (*Appendix 1). Failure to meet these standards may result in loss of ESP funding.

❖ ESP Regional Managers will follow up after monitoring visits with a letter either stating there are no issues or a letter outlining any finding(s). If there are findings, the subrecipient must respond to the finding(s) within ten (10) calendar days. The ESP Regional Manager will follow-up on the response within thirty (30) days of receipt to ensure compliance with program requirements.

❖ Failure to respond to the finding(s) letter or to meet program requirements may result in further action, including a Corrective Action Plan and/or loss of funding.

CORRECTIVE ACTION PLAN/LOSS OF FUNDING

❖ Subrecipients found to be not meeting the requirements of the Emergency Shelter Program may be put on a Corrective Action Plan (CAP). This plan will be provided in writing, via e-mail or mail, to the subrecipient impacted and will state the current issues (findings) and allow the subrecipient to propose a plan to address them. Failure to meet the requirements of the CAP may result in loss of funding following a fourteen (14) day written notice.

❖ Funding for the ESP can be cancelled with fourteen (14) days written notice, with or without cause. Reasons for loss of ESP funding without a Corrective Action Plan include:

➢ Failure to comply with any requirement of the ESP included in the Memorandum of Agreement (MOA), ESP Program Manual, and/or the *Minimum Standards for Emergency Shelter*.

➢ Documentation fraud/forgery, including sign-in sheets, referral forms, and/or data entry/ART Reports.

➢ Subrecipients will be required to reimburse the ESP for any amount of payments reimbursed using fraudulent/forged documentation.

➢ Failure to return a signed MOA by the deadline shown on page one of the MOA.

IMPLEMENTATION REQUIREMENTS

Listed below are methods, techniques, and regulations proven to provide fair and equal service practices. TSA and MDHHS are committed to utilizing best practices which include HUD regulations, SAMHSA, and service practice methods that support the development and

management of its programs designed to reach historically vulnerable and underserved persons.

The subrecipients will be responsible for adhering to the following implementation requirements.

- ❖ Confidentiality
- ❖ Collaboration with the CoC and Coordinated Entry
- ❖ Housing First
- ❖ Fair Housing
- ❖ Lead Based Housing Rule
- ❖ Service Animals
- ❖ Equal Access to Housing Regardless of Sexual Orientation or Gender Identity
- ❖ Reasonable Accommodations/Modifications
- ❖ Americans with Disabilities Act (ADA)
- ❖ Low-Barrier
- ❖ Faith-Based Activities
- ❖ McKinney-Vento District Homeless Liaison
- ❖ SSI/SSDI Outreach, Access and Recovery (SOAR)
- ❖ MI Bridges Community Partnerships
- ❖ Local Public Health
- ❖ Emergency Planning
- ❖ Extreme Weather Emergencies
- ❖ Termination
- ❖ Grievance Policy & Procedure
- ❖ Homeless Management Information Systems (HMIS) Requirements
- ❖ Homeless Participation
- ❖ Criminal Background Check
- ❖ Diverse, Equitable and Inclusive Service Delivery

Read below for a full description of each of these requirements.

CONFIDENTIALITY

Subrecipients must ensure the confidentiality of personal protected information (PPI) of any individual assisted under this program and any other information regarding individuals receiving assistance. Names should not be shared with TSA for financial reimbursement purposes.

Program Requirement

Meets Requirement
☐Yes ☐No

Subrecipients must have written confidentiality policies and procedures in place that describe how they will protect participant confidentiality and address breaches in confidentiality. Subrecipients are required to provide staff training in organizational confidentiality policies and procedures.

- ❖ All records containing personally identifying information (as defined in HUD's standards for participation, data collection, and reporting in a local HMIS) of any individual or family who applies for and/or receives assistance will be kept secure and confidential. Subrecipients must also ensure that confidentiality and privacy policies meet the specific confidentiality and security requirements for HMIS data which are described in the HMIS Data and Technical Standards.

It is recommended that policies and procedures include the following, at a minimum.

- ❖ Description of how participant files are to be stored and kept secure (e.g., locked files) and who has access to them.

- ❖ Assurance that participant files will not be removed from the program premises (or conditions in which this would be permitted).

- ❖ Process for obtaining written, informed consent to release participant information to an outside person/agency.

- ❖ Description of participant rights to access their records; request updates to their records; request changes to information in their records with which they do not agree; and file a complaint if they feel their confidentiality has been breached.

- ❖ If TSA staff asks for client files related to a performance/ monitoring review, then the agency must redact all Personal Identifiable Information (PII) from any files that are being sent by mail or electronically, unless a secure, encrypted method can be used for electronic transmission.

Subrecipients are required to provide staff training in organizational confidentiality policies and procedures.

- ❖ Provisions for training staff on privacy and confidentiality procedures. Training should include the following points:

  - ➢ Sharing participant information with other program staff should be limited only to staff directly involved with delivering services to the participant, should only include the information necessary for service delivery, and should occur only using secure methods or in private spaces.

  - ➢ Prohibition against sharing any private account information (e.g., usernames, passwords, etc.).

  - ➢ Disciplinary action that will result from failing to follow the established privacy and confidentiality policies.

COLLABORATION WITH COCS AND COORDINATED ENTRY

Michigan is organized into 20 Continuum of Care (CoC) bodies, The largest CoC in Michigan is the Michigan Balance of State CoC which covers 61 counties organized into Local Planning Bodies. CoCs are designated by HUD as the decision-making body to oversee the planning and development of the local community's homeless service delivery system. ESP subrecipients are required to be an active member in accordance with the bylaws of the CoC(s) in their service delivery area. MSHDA provides an updated list of CoC contacts on their website.

Coordinated entry and assessment is a powerful tool designed to ensure that people experiencing homelessness are matched with the right housing intervention, among all housing interventions available in the Continuum of Care (CoC), as quickly as possible. It standardizes the access and assessment process for all participants and coordinates referrals across all

providers in the CoC. Coordinated entry is typically conducted by local Housing Assessment and Resources Agencies (HARAs) who are also part of the local CoCs.

ESP subrecipients are expected to work with their CoC partners to establish a clear process for how grant project activities and services will be integrated into the CoCs coordinated entry and assessment process. ESP subrecipients must maintain an understanding of the status of local shelter operations, functioning of local homeless response systems, new or promising practices being used, and challenges being faced. This information should be shared and discussed regularly among the subrecipient and the ESP Regional Manager.

ESP subrecipients will be required to expand CoC engagement and ensure that they are a strong part of the system of care. The goal is for subrecipients to work with the local CoCs to coordinate ESP funding within the broader continuum of care. ESP subrecipients must be focused on transitioning clients to a positive housing outcome or to other support services.

Program Requirement

Meets Requirement
☐Yes ☐No

The ESP requires local community collaboration that will be developed and maintained with organizations both within and outside of the homeless response system to expand the knowledge of and coordination with ESP subrecipients to address the needs of people experiencing homelessness.

HOUSING FIRST

Housing First is an evidence-based practice that approaches housing as a tool for recovery. It is an approach to ending homelessness that is founded on the belief that everyone is ready for, and deserves, housing regardless of their current situation. Michigan's Campaign to End Homelessness supports the Housing First Model by recognizing that every Michigan resident deserves a place to call home.

Minimum Standard

Meets Requirement
☐Yes ☐No

Subrecipients are expected to support and include a Housing First approach to service delivery.

FAIR HOUSING

Subrecipients must promote and comply (as applicable) with all regulations set forth in the Fair Housing Act. The Fair Housing Act protects people from discrimination when they are renting, buying, or securing financing for any housing. The prohibitions specifically cover discrimination because of race, color, national origin, religion, sex, disability and the presence of children. All marketing, outreach, and informational materials produced for eligible persons of the program must comply with the Fair Housing Act and be void of any discrimination. The full Fair Housing Act can be found here. More information on Fair Housing can be found on MSHDA's website. Fair Housing complaints can be filed with the Michigan Department of Civil Rights.

Additionally, on September 21, 2016, HUD published a final rule that ensures equal access to individuals in accordance with their gender identity in programs and shelter funded under programs administered by HUD's Office of Community Planning and Development (CPD).

LEAD-BASED PAINT REMEDIATION AND DISCLOSURE FOR SHELTERS

It is best practice for all emergency shelters to follow lead-based paint regulations for the ongoing safety of all shelter residents. However, it is required for any emergency shelter or shelter space which serves pregnant women or children under the age of six and was constructed prior to 1978 to follow all lead-based paint regulation as outlined in the Lead-Based Paint Poisoning Prevention Act, the Residential Lead-Based Paint Hazard Reduction Act of 1995, and implementing regulations in 24 CFR part 35, subparts A, B, H, J, K, M and R. Any households meeting these requirements and accessing emergency shelter constructed prior to 1978 must be provided a copy of the lead-based paint notification pamphlet. ESP shelter subrecipients must refer to 24 CFR part 35, subpart K of the implementing regulations for guidance on appropriate steps for lead based paint inspection and remediation. ESP shelter subrecipients MUST contact TSA immediately if they suspect that they are out of compliance with these regulations.

SERVICE ANIMALS

Persons seeking emergency shelter or housing services cannot be denied based on their need for a service animal under the Americans with Disabilities Act. Only dogs and some horses can be service animals (no other pets). There are no requirements that a service dogs must meet. In addition to the American with Disabilities Act, HUD's Fair Housing Act also applies to persons seeking or staying in emergency shelter. Under the Fair Housing Act, shelters receiving HUD funding cannot deny a person access to shelter or services based on their need for a support animal including for emotional support.

To clearly distinguish between a service animal and a support animal or pet, subrecipients may ask only two questions:

1. Does the person seeking to use and live with the animal have a disability?

2. Does the animal work, provide assistance, perform tasks or services for the benefit of a person with a disability, or provide emotional support that alleviates one or more of the identified symptoms or effects of a person's disability?

If the answer to question 1 **OR** 2 is NO, an emergency shelter or housing provider is not required to make an accommodation. If the answer to question 1 **AND** 2 is YES, then both Section 504 of the American with Disabilities Act and HUD's Federal Fair Housing Act require an emergency shelter provider to make accommodations and allow the service animal to remain with its owner for the duration of the person's stay.

Subrecipients cannot require additional documentation regarding the service animal or the nature of the person's disability.

EQUAL ACCESS TO HOUSING REGARDLESS OF SEXUAL ORIENTATION OR GENDER IDENTITY

The ESP follows the regulations in the Equal Access in Accordance with an Individual's Gender Identity in Community Planning and Development Programs final rule, published in the Federal Register on September 21, 2016. This rule ensures equal access to programs and shelters funded by HUD's Office of Community Planning and Development (CPD). Additionally, this rule builds on the Equal Access to Housing in HUD Programs Regardless of Sexual Orientation or Gender Identity final rule, published in the Federal Register on February 3, 2012. This rule requires recipients and subrecipients of CPD funding to grant equal access to their program facilities, accommodations, and services in accordance with the individual's gender identity and in a way that creates equal access to the individual's family.

TSA encourages funded programs to establish policies and procedures for program admissions, occupancy, and participant privacy and security that align with the requirements established in the Equal Access rules, including the following:

❖ Make shelter available without regard to actual or perceived sexual orientation, gender identity, or marital status.

❖ Grant equal access to facilities, buildings, benefits, accommodations, and services to individuals in accordance with the individual's gender identity, and in a manner that affords equal access to the individual's family.

❖ Prohibit any requirements for individuals to prove gender identity (including documentation, ID, etc.). This prohibition also applies to intrusive questioning, including questions about a person's anatomy or medical history.

❖ Prohibit consideration of a client or potential client's entry into a program because their appearance or behavior does not conform to gender stereotypes.

❖ Prohibit any segregation of transgender clients (e.g., transgender-only shelter or space). However, if a transgender client requests an accommodation (like a more private space) and the facility can accommodate the request, this is acceptable.

❖ Base discharges, service restrictions, and warnings following any incidents involving transgender clients only on the individual's behavior, not gender identity.

❖ Have a zero tolerance for harassment of transgender residents. Staff shall recognize that harassment based on gender identity is discriminatory behavior and will be treated as such. All unacceptable behavior against transgender residents will be dealt with based on the program's behavior policies. Due to the high incidence of harassment of transgender people, concerns about the safety of a transgender resident will be taken with utmost seriousness. Unacceptable behavior can include harassment, abuse, assault, discrimination, intimidation, threats, violence, and many other forms.

❖ Permit any clients expressing concern to use bathrooms and dressing areas at a separate time from others in the facility.

❖ Work (to the extent feasible) with the layout of any shelter facilities to provide for privacy in bathrooms and dressing areas.

❖ Ensure that policies do not isolate, or segregate clients based upon gender identity.

❖ Take reasonable steps to address any safety or privacy concerns expressed by clients. This may include:

   ➢ Responding to the requests of the client expressing concern through the addition of a privacy partition or curtain.

   ➢ Providing clients the use of a nearby private restroom or office.

   ➢ Providing clients a separate changing schedule.

❖ Provide all staff (full-time, part-time, and volunteer) and contractors with ongoing training about the program's policies and the needs, concerns, and realities of transgender people seeking services.

❖ Best practices suggest that where the subrecipient is uncertain of the client's sex or gender identity, the subrecipient simply informs the client or potential client that the agency provides shelter based on the gender with which the individual identifies.

The following resources provide more information about implementing the Equal Access Rule.

❖ HUD Exchange LGBT Homelessness Page

❖ Equal Access for Transgender People: Supporting Inclusive Housing and Shelters

REASONABLE ACCOMODATIONS/MODIFICATIONS

A reasonable accommodation is a change in rules, policies, or procedures to help people with disabilities access housing or housing-related services.

❖ For example, an office that generally provides standard, printed form could, as a reasonable accommodation to a person with a visual disability, provide a Braille version of the application or provide assistance in filling it out.

❖ Fair housing laws require housing and shelter providers to consider requests for accommodations by applicants, residents, and, in some limited instances, former residents.

❖ Housing providers cannot charge money for providing a reasonable accommodation.

❖ There is no limit to the number of reasonable accommodations requests a person with a disability may make.

❖ However, if providing the requested accommodation would pose an undue financial or administrative burden on the shelter or housing provider, or if it would fundamentally alter the nature of the program, the request is not "reasonable" and does not need to be granted.

If a prospective client has requested a reasonable accommodation or modification, an ESP subrecipient may ask for verification of the disability and may also request assurances from the person's healthcare worker or case manager.

A request for a reasonable accommodation should be granted if the following conditions are met.

❖ The person requesting the accommodation has a disability as defined by fair housing laws.

❖ The requested accommodation is necessary to afford the person an equal opportunity to use and enjoy the dwelling and related services.

❖ Complying with the request poses neither an undue administrative nor financial burden on the housing provider or program.

❖ Complying with the request will not fundamentally alter the nature of the program.

AMERICANS WITH DISABILITIES ACT (ADA)

Subrecipients must comply with all regulations set forth in the Americans with Disabilities Act (ADA). The ADA ensures the access of disabled persons to services and the sites where services are provided. The ADA addresses both physical and administrative barriers, which can include eligibility policies that might screen out persons based upon a disability, including mental illness, drug addiction, and alcoholism. More information on the ADA can be found here and below:

Minimum Standard
Meets Requirement ☐Yes ☐No

The ADA and Section 504 both stipulate that "no otherwise qualified person with disabilities shall, solely by reason of his or her disability, be excluded from participation in, be denied the benefits of, or be subject to discrimination under any program or activity receiving federal financial assistance." The Fair Housing Amendments Act regulations state "it shall be unlawful for any person to refuse to make reasonable accommodations in rules, policies, practices, or services, when such accommodations may be necessary to afford a person with a disability equal opportunity to use and enjoy a dwelling unit including public and private use areas."

LOW BARRIER

Low barrier is a term used to describe a service or subrecipient that makes help as easily accessible and user friendly as possible. A low barrier approach is one that tries to minimize barriers such as paperwork, waiting lists, eligibility requirements, as well as physical and staff related characteristics that can stand in the way of people getting their needs met. It is an entry point for a variety of services and approaches.

Minimum Standard
Meets Requirement ☐Yes ☐No

What does it look like in action?
❖ Place: The doors and space are open and accessible.
❖ Presentation: The people are open, friendly, engaging, making everyone feel welcome and tuning in to different people's needs and styles.

- ❖ Practice: Start where consumers present; accept challenging behavior; use assessment skills to build on strengths and develop plans. Maintain an inclusive approach to the work.

What it is not:
- ❖ A service model in and of itself.
- ❖ A specific social work approach.
- ❖ An outcome or a program goal.
- ❖ A simple way of measuring a program's success.
- ❖ A "no barrier" or "no rules" or "no expectations" approach to social work.

FAITH BASED ACTIVITIES

PROGRAM PARTICIPANTS

Subrecipients must provide equal treatment of program participants and program beneficiaries. Organizations that are religious or faith-based are eligible, on the same basis as any other organization, to participate in the ESP. MDHHS and TSA shall not discriminate against an organization on the basis of the organization's religious character or affiliation. Subrecipients of program funds shall not, in providing program assistance, discriminate against a program participant or prospective program participant on the basis of religion or religious belief.

Minimum Standard

Meets Requirement ☐Yes ☐No

SEPARATION OF EXPLICITLY RELIGIOUS ACTIVITIES

Subrecipients that engage in explicitly religious activities, including activities that involve overt religious content such as worship, religious instruction, or proselytization, must perform such activities and offer such services outside of programs that are supported with governmental financial assistance separately, in time or location, from the programs or services funded under this part, and participation in any such explicitly religious activities must be voluntary for the program beneficiaries of the ESP funded programs or services.

RELIGIOUS IDENTITY

Subrecipients that are faith-based organizations are eligible to use program funds without impairing its independence, autonomy, expression of religious beliefs, or religious character. Such organization will retain its independence from federal, state, and local government, and may continue to carry out its mission, including the definition, development, practice, and expression of its religious beliefs, provided that it does not use direct program funds to support or engage in any explicitly religious activities, including activities that involve overt religious content, such as worship, religious instruction, or proselytization, or any manner prohibited by law. Among other things, faith-based organizations may use space in their facilities to provide program-funded services, without removing or altering religious symbols. In addition, faith-based subrecipients retain their authority over their internal governance, and it may retain religious terms in its organization's name, select its board members on a religious basis, and include religious references in its organization's mission statements and other governing documents.

ALTERNATIVE PROVIDER

If an ESP participant or prospective participant objects to the religious character of an organization that provides services under the program, that organization shall, within a reasonably prompt time after the objection, undertake reasonable efforts to identify and refer the participant to an alternative provider to which the prospective participant has no objection. Except for services provided by telephone, the Internet, or similar means, the referral must be to an alternate provider in reasonable geographic proximity to the organization making the referral. In making the referral, the organization shall comply with applicable privacy laws and regulations. Subrecipients shall document any objections from ESP participants and prospective participants and any efforts to refer such participants to alternative providers in accordance with the requirements of 24 CFR 578.103(a)(13).

MCKINNEY-VENTO DISTRICT HOMELESS LIAISON

Subrecipients must inquire about school attendance with youth and/or head of households where children are present. Subrecipients should maintain contacts and establish relationships with McKinney-Vento liaisons, schools, and other educational resources (e.g., Head Start, Healthy Start) to ensure that children and youth are accessing all available educational opportunities. Subrecipients are encouraged to engage their McKinney-Vento Liaison in participating in their CoC/LPB, if they are not already engaged. McKinney-Vento liaisons can assist in ensuring that children and youth have the supports and resources necessary to be successful in school while they are experiencing homelessness. These liaisons can be valuable partners to you in serving children and youth in your programs. For contact information for the local McKinney-Vento Liaison in your area, please reach out to the MV Regional Grant Coordinator for the county and they will help connect you. The list of MV Regional Grant Coordinators can be found at www.michigan.gov/homeless, under Program Contacts.

SSI/SSDI OUTREACH, ACCESS, AND RECOVERY (SOAR)

Supplemental Security Income (SSI) and Social Security Disability Insurance (SSDI) are disability income benefits administered by the Social Security Administration (SSA) that also provide Medicaid and/or Medicare health insurance to eligible individuals. The application process for SSI/SSDI is complicated and difficult to navigate. For people who are homeless or who are returning to the community from institutions (jails, prisons, or hospitals), SSI/SSDI is critical for recovery, but access can be extremely challenging. SSI/SSDI Outreach, Access, and Recovery (SOAR) is a program designed to increase access to SSI/SSDI for eligible adults who are experiencing, or are at risk of homelessness, and have a mental illness, medical impairment, and/or a co-occurring substance use disorder.

Subrecipients are encouraged to incorporate SOAR into their service delivery, but it is not required. However, all shelter residents who are eligible for SOAR must be referred to a SOAR practitioner.
For more information on SOAR visit SOAR Works. If interested in becoming SOAR trained, please contact MDHHS at mdhhs-homelesss@michigan.gov.

MI BRIDGES COMMUNITY PARTNERSHIPS

MI Bridges is a public-private partnership that aims to connect greater numbers of individuals and families in Michigan to a range of state and local resources, as well as the MDHHS benefit programs, to promote household stability. In 2018, MI Bridges underwent a number of changes to better serve our shared customers. The MDHHS has partnered with clients and community partners to enhance the features available through MI Bridges including new community partner functionality. Clients can now use MI Bridges not only to apply for benefits and manage their case, but also to locate resources in their community to support a wide range of needs including food, housing and shelter, utilities, health, income and employment, transportation, child care, and education.

With MI Bridges, community partners can choose to engage with the MDHHS and customers in several ways. Organizations can register for one or more of the following levels of engagement.

ACCESS PARTNER

An Access Partner is an organization that agrees to promote MI Bridges by displaying promotional materials and providing a computer(s), tablet(s) or mobile device(s) for individuals to access MI Bridges. The computer(s) does not have to be exclusively for MI Bridges use. As a MI Bridges Access Partner, an agency will offer individuals without access to a computer, tablet, mobile device, or the internet a way to use MI Bridges. Examples of agencies that may consider serving as MI Bridges Access Partners include libraries, community centers, or schools.

REFERRAL PARTNER

A Referral Partner is an organization that agrees to receive referrals sent from clients using MI Bridges. Clients can identify their needs using the 'Help Me Find Resources' feature and local organizations will be listed as recommended resources if they can help meet one or more needs. When a client would like to use a resource offered by a Referral Partner, the partner organization receives an electronic referral on their MI Bridges dashboard and can contact the client to provide services.

NAVIGATION PARTNER

A Navigation Partner is an agency that agrees to promote MI Bridges by displaying promotional materials and providing one-on-one assistance to MI Bridges users. The assistance provided may vary from simply answering user questions to helping them complete a needs survey, finding local resources, or applying online for a MDHHS benefit program. Navigation assistance typically includes supporting users with multiple MI Bridges features and teaching individuals to use the MI Bridges system, so they are empowered to use MI Bridges on their own over time.

Program Requirement

Meets Requirement
☐Yes ☐No

ESP subrecipients are required to be an active MI Bridges Navigation Partner to ensure that program participants have access to the MDHHS benefits they are eligible for.

To be considered a MI Bridges Partner, subrecipients will need to register as a partner on MI Bridges and complete any required training. More information can be

found by visiting the MI Bridges Community Partner page at
www.michigan.gov/mibridgespartners and clicking 'Become a Partner.'

Please note: You can serve as a MI Bridges site for your clients only. To opt out of being a public MI Bridges site, you must uncheck the box that states your organization will be listed on the public page of MI Bridges during the registration process.

PUBLIC HEALTH

Subrecipients should develop positive working relationships with their local public health partners to ensure that in times of public health emergencies, coordination and access procedures are well established. Subrecipients in need of contact information for their local public health agency may contact mdhhs-homeless@michigan.gov for assistance. TSA and the MDHHS may call on subrecipients to assist with addressing public health concerns when needed. This assistance may include participating in local/state coordinating meetings, distribution of public health related information to clients, and working collaboratively with local public health officials to address emerging public health concerns.

EMERGENCY PLANNING

Subrecipients should engage with their local emergency planning bodies, especially in cases when the subrecipient operates a congregate shelter facility, to ensure that any community planning reflects the particular needs of individuals experiencing homelessness, including those in shelters or those who may be living unsheltered.

Additionally, subrecipients are required to develop, maintain, and regularly review their own emergency plans. Resources for disaster preparedness, response, and recovery are available on the HUD Exchange. The ESP team will provide technical assistance to those subrecipients who ask for assistance; ESP Regional Managers will review these plans annually as a part of the monitoring process.

EXTREME WEATHER POLICIES

Subrecipients must have policies and protocols in place to ensure the safety of staff conducting outreach in extreme weather conditions, including excessive heat or cold.

TERMINATION OF ASSISTANCE

It is important that subrecipients effectively communicate termination and grievance procedures to participants and ensure that the procedures are fully understood. Posting the policy on a bulletin board in a common area within the facility is an effective way to ensure that the termination and grievance procedures are available for participants to access at any time. Additionally, all ESP funded agencies must include termination policies and procedures in their agency regulations and manuals that meet the guidelines outlined in this section. The subrecipient must exercise judgment and examine all extenuating circumstances in determining

when violations warrant termination so that a program participant's assistance is terminated only in the most severe cases.

GRIEVANCE POLICY AND PROCEDURES

The subrecipient must have a process for filing and adjudicating grievances from clients and other interested parties. A grievance process may include dispute resolution programs such as mediation, facilitation, assisted negotiation, and neutral evaluation. If the grievance alleges fraud or criminal activity, it must be brought to the attention of TSA immediately. Discrimination complaints may also be raised through the grievance procedures. Subrecipient organizations, clients, and other interested parties involved in ESP, who wish to file a grievance, shall follow the procedures set forth below:

RESOLUTION PROCESS

1. If a client has a grievance with the subrecipient

   ❖ Subrecipient should try to resolve the matter informally whenever possible.

   ❖ If this cannot occur, the complainant may seek resolution through alternative means of informal Alternative Dispute Resolution (ADR), such as mediation or facilitation. At the same time, they must also escalate their complaint to TSA by sending an email to their ESP Regional Manager.

   ❖ If the grievance is still not resolved after these steps, the Emergency Shelter Program Client Grievance Procedure must be followed (Appendix 3).

MICHIGAN STATE HOMELESS MANAGEMENT INFORMATION SYSTEM (MSHMIS)

Note – Due to changes in data collection and analysis, this manual will be updated at a later date with additional tools for reporting and other materials. TSA is working with HMIS System Administrators and MDHHS to develop tools to capture the new data elements. Subrecipients will be notified of the changes prior to their inclusion in the manual. These tools and materials will be made available before October 1, 2021.

The ESP data collection and reporting in the Michigan State Homeless Management Information System (MSHMIS) is required by all ESP subrecipients.

Program data is collected through the HMIS and is required by HUD and MDHHS (by way of the ESP). Data is utilized to measure program effectiveness and subrecipient performance.

The Homeless Management Information System (HMIS) is a live data system which changes over time. Data corrections and cleanup can cause changes in reports. You may run a report for the same date window at two different points in time and get different results. Ensuring data quality is critically important to accurate data.

ESP subrecipients must submit required program data through HMIS. In addition, subrecipients should utilize HMIS data sharing practices to increase the efficiency and effectiveness of the

service delivery system. Guidance will be provided on HMIS reporting throughout the operating year.

As a best practice, all participant data should be entered as close to real-time as possible to ensure accuracy of reported data. MDHHS data standards expect all data be entered within 48 hours of entry or exit. The only exception to the 48-hour rule is that shelter subrecipients with frequent entries and exits (nightly in/out shelters) should not enter and exit clients daily. Instead, those facilities should track clients' attendance over the course of a month (i.e., enter nights the client stayed in shelter on a monthly basis).

All subrecipients are required to report HMIS Universal data elements as well as certain HMIS program-specific data elements for each program participant (including all participants within a family/household). HMIS users should search for participants in HMIS first prior to creating a new client record.

It is expected that data entry into HMIS will be completed within 15 days of the event requiring data entry (entry into the program; end of the operating year; changes in participant status regarding benefits, income, programs provided, household size, location of housing, and so on as described by HMIS guidelines). It is expected that data in HMIS be complete, up-to-date, and without errors or omissions by October 31 of each year.

The ESP HMIS Administrator is Center for Innovation – Health and Human Services. Jayne Youngs is the main contact person. She can be reached at jayne@cihhs.org. For subrecipients having HMIS issues, they should first contact their System Administrator and ESP Regional Manager to help resolve the issue prior to reaching out to Jayne.

HOMELESS PARTICIPATION

Subrecipients are encouraged to provide for the participation of not less than one homeless individual or formerly homeless individual on the board of directors or other equivalent policymaking entity of the subrecipient.

CRIMINAL BACKGROUND CHECK

Safety of vulnerable populations, including those served by ESP subrecipients is paramount. When subrecipients hire staff, contractors, or select volunteers they are expected to balance the safety of participants with the experiences of those who will work with them.

Subrecipients are encouraged to conduct the following background checks on any individual performing work under this grant who works directly with participants or has access to participant information. This includes new employees, subcontractors, subcontractor employees, or volunteers:

❖ Internet Criminal History Access Tool (ICHAT) check. Information about ICHAT can be found at http://apps.michigan.gov/ichat.
❖ Michigan Public Sex Offender Registry. Information about the state registry can be found at http://www.mipsor.state.mi.us.

- ❖ National Sex Offender Registry. Information about the national registry can be found at http://www.nsopw.gov.
- ❖ If the individual will be working with children in their role – Central Registry (CR) check. Information about CR can be found at http://www.mi.gov/dhs/0,1607,7-124-5452_7119_48330-180331--,00.html.

Subrecipients must have clearly defined written policies regarding acceptable screening practices of new staff members and volunteers who have direct access to participants and/or participants' personal information, which serve to protect the organization and its participants. In addition, subrecipient or contractor/vendor policy must describe the criteria on which its hiring, contracting, or volunteer acceptance determinations shall be made and must document the basis for each determination. The ESP subrecipient may consider the recency and type of crime when making a determination.

Written policies must also include:

- ❖ A requirement that each new employee, employee, subcontractor, or volunteer who works directly with clients or who has access to client information must notify the subrecipient or contractor/vendor in writing of criminal convictions (felony or misdemeanor), and/or pending felony charges, or placement on the Central Registry as a perpetrator, at hire or within 10 days of the event after hiring.

- ❖ A requirement that individuals who are new employees, subcontractors, or volunteers who have resided or lived somewhere other than Michigan must sign a waiver attesting to the fact that they have never been convicted of a felony or identified as a perpetrator, or if they have, the nature and recency of the felony.

While subrecipients may hire individuals who have a criminal conviction history, they are expected to utilize the results of the background checks to ascertain appropriateness of the new employee, subcontractor, or volunteer's work assignment based on any criminal conviction. TSA will not accept claims for, and the subrecipient must not assign duties to an individual when the results of a positive ICHAT and/or a CR response or reported criminal felony conviction or perpetrator identification make the individual ineligible to provide the services.

If TSA determines that an individual provided services for the subrecipient for any period prior to completion of the required checks as described above, TSA may require repayment of that individual's salary, fringe benefits, and all related costs of employment for the period that the required checks had not been completed.

DIVERSE, EQUITABLE, AND INCLUSIVE SERVICE DELIVERY

ESP subrecipients must operate with a focus on diversity, inclusion, and equity.

Subrecipients must deliver the proposed services to the target population in a diverse, equitable and inclusive manner without having a negative impact on race, sex, religion, age, national origin, color, height, weight, marital status, gender identification or expression, sexual orientation, partisan considerations, disability or genetic information.

Program Requirement

Meets Requirement
☐Yes ☐No

PROGRAM SERVICES

ELIGIBLE ACTIVITIES AND COSTS

The following activities may be included in the subrecipients ESP budget.

- Operating emergency shelters.
- Providing essential services to homeless families and individuals in emergency shelters.
- Motel expenses for approved motel subrecipients.

SHELTER OPERATIONS

Eligible costs are the costs of maintenance (including minor or routine repairs), rent, security, fuel, equipment, insurance, utilities, food, furnishings, staffing and supplies necessary for the operation of the emergency shelter.

ESSENTIAL SERVICES

Providing essential services to homeless families and individuals in emergency shelters is an allowable expense for the Emergency Shelter Program. **The Emergency Shelter Program prioritizes case management that helps households to obtain permanent housing.**

GOALS OF EMERGENCY SHELTER

- Provide safety and shelter to households with no other place to go.
- Limit shelter stays to the shortest time necessary to help participants regain permanent housing.
- Maintain low-barrier admission criteria and high thresholds for expulsion.
- Ensure the coordination and/or provision of services to all persons seeking or utilizing shelter to ensure their housing crises are both rare and brief.
- Remain closely linked to an array of programs in order to accomplish this goal of stable permanent housing including, but not limited to HCV Rapid Re-Housing, transitional housing, affordable housing placement, and employment.
- Link persons in housing crisis to applicable resources such as VA, SOAR, food stamps, TANF, housing, medical, mental health, employment, education, and financial assistance as appropriate.

SUBRECIPIENT EXPECTATIONS

TSA expects that all ESP subrecipients adhere to a standard of ethics and practices that ensure all persons in housing crisis are treated with dignity and respect. All ESP funded subrecipients will be required to incorporate the following practices into their policies and procedures.

- ❖ All persons in housing crisis should be treated with dignity and respect.
- ❖ All households will be treated fairly and will have all rules implemented consistently.
- ❖ No persons seeking shelter should face discrimination based on race, religion, ethnicity, national origin, sexual orientation, gender identity, age, political beliefs, disability, or family composition.

- ❖ All persons in housing crisis have the right to safe shelter, adequate food, and sanitary conditions.
- ❖ All households utilizing the emergency shelter system have the right to privacy and confidentiality.
- ❖ All households utilizing the emergency shelter system have the right to make their own choices, and those choices should be respected. It is the role of emergency shelter staff to assist households to identify possible consequences of those choices.
- ❖ All households utilizing the emergency shelter system are to be treated with warmth and friendliness to decrease alienation and despair, and to increase their chances of obtaining the services they need.
- ❖ All households in housing crisis have access and assistance in obtaining community supports to end their housing crisis, including case management, medical and mental health, financial, legal, education, and employment services.

SUBRECIPIENT STAFF TRAINING

In order to ensure high quality services for those in Emergency Shelter, ESP subrecipients are required to create a process to train new staff and review with current staff compliance on the following topics:

- ❖ HUD Regulatory Requirements
- ❖ Housing First
- ❖ Fair Housing/Equal Access/Housing Law
- ❖ Safety Protocol
- ❖ CPR/First Aid

During the monitoring process, subrecipients will be asked to provide the details of their annual staff training policy and protocol as well as information on the on-boarding process for new employees.

We strongly encourage subrecipients to utilize all available training provided including training through the local Continuum of Care, the State of Michigan, and other training initiatives.

INVOLUNTARY FAMILY SEPARATION

HUD issued regulations that prohibit all shelters from denying access to families based on the age of a child. This requirement has been issued through the HEARTH Act and through the ESG Interim Rule. All ESP shelter subrecipients will comply with this requirement and have policies and procedures that reflect this. Non-compliance may result in removal of ESP funds. Please see the following HEARTH Act language on family separation.

SEC. 404. PREVENTING INVOLUNTARY FAMILY SEPARATION.

'(a) IN GENERAL.—… any project sponsor receiving funds under this title to provide emergency shelter, transitional housing, or permanent housing to families with children under age 18 shall not deny admission to any family based on the age of any child under age 18.)

ESG INTERIM RULE LANGUAGE ON FAMILY SEPARATION

❖ **(b) Prohibition against involuntary family separation**. The age, of a child under age 18 must not be used as a basis for denying any family's admission to an emergency shelter that uses Emergency Solutions Grant (ESG) funding or services and provides shelter to families with children under age 18.

SERVICE DELIVERY

SHELTER DIVERSION

The Michigan Campaign to End Homelessness (MCTEH) has identified shelter diversion as a key strategy to ending homelessness. Preventing unnecessary emergency shelter stays by stabilizing households at risk of homelessness is essential in addressing statewide homeless system inflow. Evidence-based practices demonstrate that homeless episodes, however brief, can have long-term, damaging effects on persons experiencing homelessness. Homeless Diversion and Prevention programs often incorporate the use of financial and non-financial resources to prevent homelessness by salvaging safe housing options whenever possible. Diversion and Prevention programs can lead to reductions in the number of households experiencing homelessness and drive down shelter waiting lists.

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

Homelessness Prevention is an approach that targets people at imminent risk of experiencing homelessness. Prevention strategies often include pairing eligible households with financial assistance to prevent eviction or relocate households to more affordable housing.

The MCTEH plans to:

❖ Create and distribute a Shelter Diversion toolkit that can inform statewide efforts and provide individualized support to local communities.
❖ Partner with Continuums of Care (CoC) through the local Coordinated Entry Systems (CES), to effectively integrate prevention and diversion activities into local intake and assessment processes.
❖ Develop a reporting mechanism to track the number of individuals and families successfully diverted from shelter.

The ESP will be a lead in supporting and developing the shelter diversion strategies. The ESP subrecipients will be expected to be active participants in piloting shelter diversion efforts.

Program Requirement

Meets Requirement
☐ Yes ☐ No

CASE MANAGEMENT SERVICES

While the immediate goal of emergency shelter is to ensure that those in housing crisis are sheltered and safe, once this has been established shelter/motel subrecipients are expected to help residents leave the facility as quickly as possible to permanent housing. All shelters and motels are expected to have access to housing case management services on site and provide clients with linkages to other assistance such as mental or physical health treatment, legal services, and more. Housing case management services and the documentation of them must include, at a minimum, the following:

❖ Brief case notes to document services provided to clients.

❖ A housing plan that was created within 7 days of shelter entry, either via HMIS or comparable database, to document client housing goals and support needed to achieve the goal.

➢ At minimum, housing plans must be updated every 90 days.

❖ Client case management progress records in HMIS and/or the client case file. Case management progress must be made available for review.

DOCUMENTING HOMELESS STATUS

ELIGIBILITY FOR EMERGENCY SHELTER

❖ The household (individual or family) is literally homeless, meaning the household lacks a fixed, regular, and adequate nighttime residence and has a primary nighttime residence that is a public or private place not meant for human habitation.

❖ There is no income limitation for entry into Emergency Shelter.

❖ While subrecipients may ask for identification for all members of the households, inability to produce this documentation is NOT a barrier for entry or reason for denial.

DOCUMENTING HOMELESS STATUS

❖ Subrecipients operating emergency shelters can document homeless status through a certification by the individual or head of household as the primary method of establishing homeless eligibility. In these instances, one method of meeting this standard would be to require households to complete a sign-in sheet, with a statement at the top informing the individual or head of household that by signing, they certify that they are homeless. Note: Under no circumstances must the lack of third-party documentation prevent an individual or family from being immediately admitted to emergency shelter, receiving street outreach services, or being immediately admitted to receive shelter or services provided by a victim service provider.

❖ Subrecipients cannot require the following documentation as a condition of admission: (list includes but is not limited to.)

- ➢ Proof of citizenship
- ➢ Marriage Certificates
- ➢ Medical and Mental Health diagnosis and medication compliance
- ➢ Vital documents such as ID, birth certificate, or social security cards

EMERGENCY SHELTER: LITERALLY HOMELESS CLIENTS

- ❖ The ESP subrecipient must verify that the household is literally homeless by documenting one of the following in the case file:

  - ➢ Written observation by the outreach worker; or
  - ➢ Written referral by another housing or service provider; or
  - ➢ Certification, either written or via verbal statement, by the individual or head of household seeking assistance stating that they are literally homeless.

INTAKE PROCEDURES

Intake procedures on persons presenting in housing crisis must be administered consistently and equally, regardless of disability or other personal characteristics.

All shelter subrecipients should inform clients about shelter rules in writing. Clients should be requested to sign off that they received these rules.

During the intake process, subrecipients must refrain from asking questions about disabilities and other protected information until it has been made clear to the client(s) that they have been admitted into the program.

After the initial intake process is complete, staff should inform each client that answering the HMIS questions is voluntary, and that any information gathered is for HMIS purposes only. Staff should clarify that answering the HMIS questions and will not affect the client's ability to stay in the shelter or access services provided through the program.

Lack of adequate staffing to complete an intake is not an appropriate condition for refusal to accept a referral of client presenting for shelter. In such cases, subrecipients should collect as much information as practical and complete the full assessment as soon as possible.

After a client has been approved for admittance into a shelter or service, it is permissible to ask the person about disability and other health-related issues ONLY if it pertains to program eligibility or as part of a reasonable accommodation request. It is a good practice to have the post-acceptance questioning regarding disability and other supportive service needs conducted by a supportive services staff member instead of a housing management staff member.

The ESP expects that all subrecipients work to create a welcoming environment for persons entering in housing crisis. Such environments may include (but are not limited to):

- ❖ Welcoming persons as they enter the shelter.
- ❖ Introducing staff when first meeting persons in housing crisis.
- ❖ Making the first move to engage persons in need. (Don't wait for people to come to you for help.)

- Ensure that all discussions that include personal information or business are conducted in as private of a space as possible.
- Maintain a clean and orderly environment.

Reminder: All ESP funded subrecipients are required to adhere to HUD's <u>Equal Access Rule</u>. The Equal Access Rule provides protection for any person or family seeking emergency shelter and removes barriers to access based on gender identity and family composition. No exceptions will be made to the requirements under the law. The ESP stands firmly that all persons requesting shelter and utilizing shelter services are treated with the utmost respect and dignity. Discrimination of any kind will not be tolerated. Refer to the definitions section in the earlier part of this Manual for additional guidance.

EXIT POLICIES FOR SHELTER RESIDENTS

Persons in Housing Crisis Should be Involuntarily Discharged from Shelter Only as a Last Resort

The ESP recognizes that emergency shelter is used by persons who are in housing crisis. Staff must find a balance in providing a safe, communal environment and serving persons who are both entering with high vulnerability and long histories of trauma. All subrecipients will have written policies and procedures that detail termination of services.

DISCHARGE PROCEDURE

The goal of emergency shelter is both to provide a safe environment for persons in housing crisis AND to provide services and coordination that ensure that a person's housing crisis is rare and brief. Subrecipients must develop discharge policies and procedures that detail reasons for discharge, staff efforts, exit location and connection to services. The shelters must ensure that when service is terminated, either voluntarily or involuntarily, employees follow an orderly and respectful process.

Discharge may occur when the client receiving services:

- Achieves their goals and is ready to discontinue service
- No longer wants to stay at the shelter and receive service
- Is a threat to themselves or others (e.g. violent behavior or weapons possession)
- Refuses to participate in the created housing plan
- Has needs that exceed the resources and expertise of the shelter.

Emergency shelters should consider implementing the following.

DISCHARGE CHECKLIST

As a person prepares for discharge, staff should use the following checklist to ensure an orderly and comprehensive discharge and file closing process. For example:

- Wrap up case planning with the client.
- Complete a discharge/aftercare plan with the person exiting.
- Record the reason for discharge.
- Make appropriate referrals where external aftercare is required.

- ❖ Ensure all personal property in the person's file is returned to them.
- ❖ Enter a closing summary in the person's HMIS file within two days of discharge.

APPEAL PROCESS

If a client receiving services expresses a concern or makes a complaint concerning their discharge, they may follow the grievance procedure of the subrecipient.

CLIENT FILES

GENERAL PROGRAM DOCUMENTATION

Every client who has received a direct service from an ESP subrecipient must have a client file that documents the reason(s) for the assistance. Each file must include the documentation in the list below.

REQUIRED FILE DOCUMENTATIOAN

- ❖ A VI-SPDAT assessment by Coordinated Assessment Model staff
- ❖ Signed HMIS Release(s) (for all members of the household)
- ❖ Verifications of eligibility
- ❖ Initial Intake Form
- ❖ Housing focused Case Notes
- ❖ As applicable, determinations of ineligibility (e.g., if client requests services and is deemed ineligible or declines services, written explanation of why the client was ineligible or declined services, along with any rights of appeal they may have)
- ❖ State issued identification, if available
- ❖ Proof of referral from or to the HARA

All information required above must be completed in HMIS or in the case file.

PROGRAM OPERATIONS – POLICIES & PROCEDURES

HOURS OF OPERATION

All ESP shelter subrecipients will operate 7 days a week and clearly state and/or display hours of operation. Shelter intake hours and supportive services hours will be clearly defined and advertised to avoid client confusion and disorientation.

Shelters not operating on a 24-hour basis will create and implement a policy for extension of their operating hours during inclement weather and during designated emergency situations including, but not limited to:

- ❖ Severe weather
- ❖ Natural disasters

❖ Other such situations as designated by governmental authorities

Many shelters are being called on to provide daytime operations to fill gaps due to COVID-19. The ESP should be available to provide technical assistance to these shelters.

HEALTH AND SAFETY PROTOCOL

All ESP funded emergency shelters must have written policies and procedures that address emergency circumstances. Such circumstances include but are not limited to:

❖ Fire
❖ Natural Disasters
❖ First Aid and Emergency Protocols
❖ Infectious Disease Outbreak
❖ Pest Control
❖ Workplace Safety, Hygiene, and Hazardous Materials

Program Requirement
Meets Requirement
☐Yes ☐No

Shelters should refer to standard 1 in appendix 1 for more requirements on providing a safe physical environment.

All ESP subrecipients shall comply with all applicable city, state, and federal fire, environmental, health, and safety standards and regulations.

Subrecipients must immediately report problems, delays, or adverse conditions which affect the ability of the site to provide services. This disclosure shall be accompanied by a statement of the action taken, or contemplated, by the subrecipient and any assistance needed to resolve the situation.

RELIGION

Religion plays an important role in many people's lives. Additionally, many homeless service system agencies were founded through religious organizations and mission driven activities. Regardless of an agency's background, any emergency shelter receiving Emergency Shelter Program funding must allow all persons staying in or receiving services to freely practice any religion or spiritual belief that they adhere to, or none at all if that is the case. In the cases of faith-based shelters that provide religious services, emergency shelter staff must clearly explain that any and all religious activities at the shelter are voluntary and not expected as a condition of stay.

Minimum Standard
Meets Requirement
☐Yes ☐No

SHELTER RESIDENT PERSONAL BELONGINGS

All ESP funded emergency shelters are required to have written policies and procedures on personal belongings and property in possession of those seeking shelter. Emergency shelters have the right to limit the amount or size of belongings either stored or transported in and out of shelter facilities. Shelters that choose to limit the amount of personal belongings should assist in locating alternative storage locations so that persons in housing crisis are not required to dispose of personal belongings as a condition of shelter stay.

SHELTER RESIDENT MONEY AND VALUABLES

Persons residing in communal living spaces often have difficulty locating safe storage options for their valuables and/or money. ESP funded emergency shelters must include in their policies a protocol for persons seeking shelter to store their money and or valuables in a safe location. Under no circumstances are staff of emergency shelter services allowed to hold or store valuables. Emergency shelters that do offer safe storage options for valuables should detail how items will be stored, the storage and retrieval processes, as well as the days and times that assigned staff will be available to safely store items.

SHELTER RESIDENT PRESCRIPTION MEDICATIONS

Emergency shelters funded by the ESP are required to have written policies and procedures on prescription medication storage and distribution for persons staying in shelter. Shelters without on-site medical staff who are qualified to administer medication should include protocol on medication storage, access, and self-administration. Refrigeration should also be made available for all medications requiring it. Medications may not be stored in communal refrigeration or in unlocked areas. Appropriate record-keeping and client/staff login procedures should also be detailed in the shelter policies. Under NO circumstances are non-approved staff allowed to administer or distribute prescription medications.

SUBSTANCE USE

While drugs and alcohol may not be allowed on the premises, ESP's emergency shelters provide service to many clients who are actively using these substances as they need safe environments to stay in. The ESP funded emergency shelters aim to offer a non-judgmental approach that attempts to meet clients "where they are at" with their substance abuse. Instead of denying services to clients who are using, shelter and service providers must try to give opportunities for the clients to minimize the harms associated with substance abuse. Additionally, emergency shelter agencies must have written policy and procedures on overdose detection and response.

In cases where persons in emergency shelter continue to use on site the following protocol should be followed.

- ❖ Staff will not ask clients to be abstinent, only inform clients that they cannot use in the shelter.
- ❖ Staff should help clients recognize that some ways of using substances are clearly safer than others.
- ❖ Staff should recognize that the realities of poverty, class, racism, social isolation, past trauma, sex-based discrimination, and other social factors affect clients' vulnerability to and capacity for effectively dealing with substance use.
- ❖ Staff should assist clients in accessing services appropriate to their needs.

WEAPONS

Many persons requesting emergency shelter are forced to travel with all or most of their personal belongings. In some cases, persons requesting or staying in emergency shelters may

have legal or illegal weapons in their possession. Shelter staff will make the determination as to what constitutes a weapon. Shelter staff must notify all persons entering shelter of their weapons policies. Each shelter must have a written policy and procedure detailing both what constitutes a weapon and how staff should proceed once a weapon has been identified. Policies and practices on identifying and securing weapons must be clearly outlined in public spaces for persons seeking shelter or services to see and presented in a manner that is clear and easy to understand.

VIOLENT BEHAVIOR

The ESP strongly encourages staff to use de-escalation practices in any tense or escalating emergency shelter situation. Emergency shelter policy and procedures will outline shelter protocol for both de-escalation practices and for when a situation escalates to an unsafe environment. Such protocols may include:

❖ A client will be told to leave the shelter when staff has witnessed the person, or s/he has admitted to, being violent or physically intrusive inside the shelter, or s/he has repeatedly targeted another individual. This includes:

➢ Hitting, kicking, slapping, pushing
➢ Throwing objects at someone
➢ Any unwanted physical contact
➢ Being verbally abusive repeatedly to the same person

PERFORMANCE EVALUATION

PERFORMANCE OUTCOMES

The ESP must be focused on transitioning clients to a positive housing outcome or to other support services.

The ESP is required to track, review, and actively engage subrecipients in tactics for minimizing the reoccurrence of homelessness in local communities. The subrecipients should see a positive change in the length of stay, positive housing destinations, and reoccurrence of homelessness. Baselines and target will be established at the beginning of each fiscal year.

Data Requirement

Meets Requirement
☐Yes ☐No

TSA will work with subrecipients on the following performance measures:

1. Length of stay
2. Positive Housing Destination
3. Recidivism Rate

Subrecipients should report the percentage of people with a shelter stay in a 12-month period who did not return to homelessness after 3, 6 and 12 months after exiting to a positive housing destination.

Subrecipients will also report on the following measures:

- ❖ 100% of subrecipients will document their involvement and participation in CoCs or local planning bodies (where appropriate) and their relationship to HARAs as it pertains to client referrals to the local coordinated entry system.

- ❖ 100% of clients served by the subrecipients will be referred to the HARA.

- ❖ A data report from HMIS will be used to show client referrals to HARAs.

- ❖ All subrecipients will participate in at least two trainings per year.

- ❖ Subrecipients will report 100% attendance for major trainings

- ❖ 100% of clients served will meet client eligibility

- ❖ 100% of shelter guests must be assessed for receiving benefits through the State of Michigan or are assisted in enrolling through MI Bridges

- ❖ 100% of clients screened as SOAR eligible are referred to a practitioner.

- ❖ 100% of subrecipients have active relationships with local public health and emergency management.

- ❖ 100% must have an emergency plan for natural disasters, health emergencies, physical emergencies, etc.

EXPENDITURES

Subrecipients must make every attempt to expend all funding at the end of the fiscal year.

MEETING REQUIREMENTS

TSA and other state partners will host various meetings and events throughout the operating year. These meetings and events may be mandatory for subrecipients. Additional guidance will be provided to subrecipients when events are scheduled.

Program Requirement

Meets Requirement
☐Yes ☐No

TRAINING

2021 HOMELESS SUMMIT

October 4-5, 2021. This year's Summit will be done virtually. Sessions will be available to explore best-practices in homeless service delivery with presenters from across the state and country.

ESP SPECIFIC TRAINING OPPORTUNITIES

A training and TA plan for FY 2022 is currently being developed to help subrecipients serve their clients in the best methods possible. Trainings may be facilitated by HMIS experts and other leaders in the field of homeless services.

NAEH SHELTER TRAINING SERIES

The National Alliance to End Homelessness began an Emergency Shelter Learning Series in April of 2017 to discuss best practices in providing shelter. The materials and webinars associated with this series is available at the following link: https://endhomelessness.org/resource/emergency-shelter/

VI-SPDAT TRAINING

Training for the Vulnerability Index – Service Prioritization Decision Assistance Prescreen Tool (VI-SPDAT) is available online at **VI-SPDAT Training with OrgCode – YouTube**.

In March 2021, MSHDA and MDHHS notified partners that both organizations were working to identify a replacement tool and/or process for the VI-SPDAT (version 2). This work includes partnership with the Michigan Interagency Council on Homelessness (ICH) and the Michigan Homeless Policy Council (MHPC) to identify opportunities to gain direct feedback from all stakeholders to help inform future decision. While this work continues, MSHDA and MDHHS still require the use of the VI-SPDAT (version 2) as the uniform tool for providers funded with Emergency Solutions Grant (ESG), Emergency Shelter Program (ESP), HUD Rapid Re-Housing and Permanent Supportive Housing, and Housing Opportunities for People with Aids (HOPWA) funds until the identification and roll-out of a new tool can be completed. To aid with ongoing training for staff administering the VI-SPDAT, MSHDA and MDHHS support the use of this VI-SPDAT recorded training listed above.

FULL SPDAT TRAINING

Subrecipients will be made aware of any SPDAT trainings if/when offered.

ELIGIBLE EXPENSES & FINANCIAL MANAGEMENT

ELIGIBLE EXPENSES

Note – Due to changes in data collection and analysis, this manual will be updated at a later date with additional tools for reporting and other materials. These include the forms that are mentioned throughout this section, including Reimbursement Request Forms. TSA is working with MDHHS to refine and update these forms. Subrecipients will be notified of the changes prior to their inclusion in the manual. These forms will be made available before October 1, 2021.

The following activities may be included in the subrecipients ESP budget.

- ❖ Providing essential services to homeless families and individuals in emergency shelters.
- ❖ Operating emergency shelters.
- ❖ Motel expenses for approved motel subrecipients

SHELTER OPERATIONS

Eligible costs are the costs of maintenance (including minor or routine repairs), rent, utilities, food, furnishings, staffing and supplies necessary for the operation of the emergency shelter.

ESSENTIAL SERVICES

Providing essential services to homeless families and individuals in emergency shelters is an allowable expense for the Emergency Shelter Program. **The Emergency Shelter Program prioritizes case management that helps households to obtain permanent housing.**

MOTEL SERVICES

In service areas without shelter facilities or in some service areas with shelter facilities frequently at capacity, emergency motel lodging is available for eligible households up to seven (7) nights at a maximum rate of $85 per night per operating year.

Motel Subrecipients are allowed 10% of the allocated amount to be used towards administration costs. Eligible costs are the actual expenses related to overall administration of the grant, such as management, coordination, monitoring, and evaluation activities.

FUNDING SOURCES

The Michigan Department of Health and Human Services will bill expenses for the Emergency Shelter Program to State of Michigan General Fund and federal Temporary Assistance for Needy Families (TANF).

FUNDING LIMITATIONS AND RESTRICTIONS

TANF funds are subject to 2 CFR 200. Each subrecipient that expends more than $750,000 in federal funds must complete a single audit.

BILLING PROCEDURE

SHELTER SUBRECIPIENTS

The Shelter Subrecipient shall request reimbursement for eligible costs from The Salvation Army on a monthly basis. The Shelter Subrecipient shall submit a reimbursement request to The Salvation Army by 12:00 PM on the 10th of the month after the last day of the billing period. If the 10th falls on a weekend, the billing is due the Friday before. Once a complete and accurate

billing is submitted, the Shelter Subrecipient shall receive reimbursement from The Salvation Army within thirty (30) calendar days from the reimbursement request due date or the date the reimbursement request is submitted, whichever is later. For the months of August and September, reimbursement requests shall be submitted as directed to meet the State of Michigan fiscal year end closing deadlines. Reimbursement for August and September billings may also be adjusted based on the State of Michigan billing office directives.

The Salvation Army may not reimburse billings submitted 60 days or more after the billing due date.

Subrecipients experiencing MSHMIS issues should work with the System Administrator and the ESP HMIS Administrator and report these issues, along with an email from the ESP HMIS Administrator with an explanation, to their ESP Regional Manager. Billings submitted with MSHMIS issues may not be reimbursed without a written explanation from the ESP HMIS Administrator.

The Shelter Subrecipient must submit reimbursement requests in electronic format and must be sent securely via password-protection or encryption. Passwords must be sent in a separate email than the billing. The following documents must be included, in the order below, with each submission:

- Reimbursement Request Form
- MSHMIS Billing Report (ART)
- Copies of acceptable verifications
- Proofs of payment

SUPPORTING DOCUMENTATION FOR SHELTER SUBRECIPIENTS

1. The Shelter Subrecipient must provide the following verifications in order to receive reimbursement to show that the expense was incurred:
   a. Invoices
   b. Payroll Reports
   c. Receipts
2. Proof of payment (cancelled check, for example) must be included along with the verification.
3. Reimbursement Request Form that aligns with verifications and proofs of payment.

MOTEL SUBRECIPIENTS

The Motel Subrecipient is responsible for making payments for eligible costs to the motel facility at the time of service and shall request reimbursement for eligible costs from The Salvation Army on a monthly basis. The Shelter Subrecipient shall submit a reimbursement request to The Salvation Army by 12:00 PM on the 10th of the month after the last day of the billing period. If the 10th falls on a weekend, the billing is due the Friday before. Once a complete and accurate billing is submitted, the Motel Subrecipient shall receive reimbursement from The Salvation Army within thirty (30) calendar days from the reimbursement request due date or the date the reimbursement request is submitted, whichever is later. For the months of August and September, reimbursement requests shall be submitted as directed to meet the State of Michigan fiscal year end closing deadlines. Reimbursement for August and September billings may also be adjusted based on the State of Michigan billing office directives.

The Salvation Army may not reimburse billings submitted 60 days or more after the billing due date.

Subrecipients experiencing MSHMIS issues should work with the System Administrator and the Emergency Shelter Program HMIS Administrator and report these issues, along with an email from the ESP HMIS Administrator with an explanation, to their ESP Regional Manager. Billings submitted with MSHMIS issues may not be reimbursed without a written explanation from the ESP HMIS Administrator.

The Motel Subrecipient must submit reimbursement requests in electronic format and must be sent securely via password-protection or encryption. Passwords must be sent in a separate email than the billing. The following documents must be included, in the order below, with each submission:

- Administrative Costs Reimbursement Request Form
- Motel Reimbursement Request Form
- MSHMIS Billing Report (ART)
- Motel Invoice
- Motel Referral Form (must include client signature)
- Motel Extension Form, if applicable (must also include a separate Motel Referral Form that aligns with extension dates)
- Check Copy

TEMPORARY ASSISTANCE FOR NEEDY FAMILIES (TANF) FUNDS

TANF funds are subject to 2 CFR 200. Any purchases using TANF funds must abide by the procurement rules in this document including but not limited to:

§200.402   Composition of costs.
Total cost. The total cost of a Federal award is the sum of the allowable direct and allocable indirect costs less any applicable credits.

§200.403   Factors affecting allow ability of costs.
Except where otherwise authorized by statute, costs must meet the following general criteria in order to be allowable under Federal awards:

(a) Be necessary and reasonable for the performance of the Federal award and be allocable thereto under these principles.

(b) Conform to any limitations or exclusions set forth in these principles or in the Federal award as to types or amount of cost items.

(c) Be consistent with policies and procedures that apply uniformly to both federally-financed and other activities of the non-Federal entity.

(d) Be accorded consistent treatment. A cost may not be assigned to a Federal award as a direct cost if any other cost incurred for the same purpose in like circumstances has been allocated to the Federal award as an indirect cost.

(e) Be determined in accordance with generally accepted accounting principles (GAAP), except, for state and local governments and Indian tribes only, as otherwise provided for in this part.

(f) Not be included as a cost or used to meet cost sharing or matching requirements of any other federally-financed program in either the current or a prior period. See also §200.306 Cost sharing or matching paragraph (b).

(g) Be adequately documented. See also §§200.300 Statutory and national policy requirements through 200.309 Period of performance of this part.

AUDITS

The subrecipient will be required to adhere to all audit requirements as outlined in the MOA.

If the subrecipient expends more than $750,000 in federal funds, a single audit must be completed per 2 CFR 200 regulations.

REIMBURSEMENT

TSA shall provide reimbursement in accordance with the terms and conditions of the MOA based upon appropriate reports, records, and documentation.

REPORTING AND RECORDKEEPING

DATA COLLECTION

Program data is collected through the Homeless Management Information System (HMIS). HMIS is required by HUD and the MDHHS (by way of the ESP). Data is utilized to measure program effectiveness and subrecipient performance.

The Homeless Management Information System (HMIS) is a live data system which changes over time. Data corrections and cleanup can cause changes in reports. You may run a report for the same date window at two different points in time and get different results. Ensuring data quality is critically important to accurate data.

Subrecipients must submit required program data through HMIS. In addition, subrecipients should utilize HMIS data sharing practices to increase the efficiency and effectiveness of the service delivery system.

It is expected that data entry into HMIS will be completed within 15 days of the event requiring data entry (entry into the program; end of the operating year; changes in participant status regarding benefits, income, programs provided, household size, location of housing, and so on as described by HMIS guidelines). It is expected that data in HMIS be complete, up-to-date, and without errors or omissions by October 31st of each year.

REPORTING

Subrecipients shall submit to TSA reports that indicate the status and effectiveness of activities performed under this Agreement as indicated. As noted above, due to changes to the ESP Program in data collection and analysis, this manual will be updated at a later date with additional tools for reporting and other materials. This includes the quarterly program report and other reports and forms mentioned below. Subrecipients will be notified of the changes prior to their inclusion in the manual. These reports and forms will be made available before October 1, 2021.

MONTHLY

❖ Reimbursement Request Forms are due by the 10th of every month. If the 10th falls on a weekend, the Reimbursement Request Form is due the Friday before.

QUARTERLY

A quarterly program report is due by 15th day of the month following the reporting quarter. The Program report should consist of:

❖ Current data on performance measures and impact of new practices and policies on client outcomes, as well as a narrative describing shelter experiences and impact on the data.

➢ This includes but is not limited to length of stay, positive housing destination, and recidivism rate.

➢ Percentage of people with a shelter stay in a 12-month period who did not return to homelessness after 3, 6, and 12 months after exiting to a positive housing destination.

❖ If clients are refused for shelter, this must be tracked and a reason for refusal provided.

ANNUALLY

❖ Annual report of clients served by age including outcomes by demographics

❖ Demonstrate that 100% of clients served meet client eligibility.

OTHER

❖ The subrecipient will report any organizational changes to TSA within 30 days.

❖ Other information as requested by TSA.

PROGRAM RECORDS

The subrecipient agrees to maintain program records required by TSA, program statistical records required by TSA, and to produce program narrative and statistical data at times prescribed by, and on forms furnished by, TSA.

FINANCIAL RECORDS

The subrecipient must maintain financial records that, at a minimum, demonstrate:

- ❖ That expenditures in its accounting records are maintained according to eligible categories as identified in the approved MOA.

- ❖ Evidence that funds have been disbursed for eligible costs and activities and are supported by adequate documentation (invoices, contracts, purchase orders, etc.).

- ❖ Evidence that charges for salaries and fringes, whether direct or indirect, are based on documented payrolls supported by timesheets indicating actual times not percentages.

- ❖ Evidence that charges for transportation are supported by documentation indicating person(s) traveling, date(s) of travel, start and end destination, and reason for travel.

HOUSEHOLDS DENIED ESP SERVICES

Subrecipients must maintain records for all households that presented for ESP services that did not meet eligibility criteria or were refused services. TSA will monitor these records as part of their annual monitoring visit.

PERIOD OF RECORD RETENTION

All records pertaining to the program must be retained for 3 years after the expenditure of all funds from the grant. Copies made by microfilming, photocopying, or similar methods may be substituted for original records.

ACCESS TO RECORDS

Any TSA authorized representative(s) must have the right of access to all books, documents, papers, or other records that are pertinent to the program.

FREQUENTLY USED TERMS

Americans with Disabilities Act (ADA) Compliance

The ADA and Section 504 both stipulate that "no otherwise qualified person with disabilities shall, solely by reason of his or her disability, be excluded from participation in, be denied the benefits of, or be subject to discrimination under any program or activity receiving federal financial assistance." The Fair Housing Amendments Act regulations state "it shall be unlawful for any person to refuse to make reasonable accommodations in rules, policies, practices, or services, when such accommodations may be necessary to afford a person with a disability equal opportunity to use and enjoy a dwelling unit including public and private use areas."

Campaign to End Homelessness

An initiative creating a sustainable statewide voice and the infrastructure and systemic change needed to empower communities to end homelessness. The campaign uses data, provides technical assistance and training, and searches for the best evidence-based practices to share across Michigan. Progress is measured and needed changes are made to improve systems of care.

CES – Coordinated Entry System

Coordinated Entry is the required method and policy for service delivery for all the Continuums of Care (COCs) and Local Planning Bodies (LPBs) in the state.

Coordinated Entry is a process developed to ensure that all people experiencing a housing crisis have fair and equal access and are quickly identified, assessed for, referred, and connected to housing and assistance based on their strengths and needs.

Continuum of Care (CoC)

The State of Michigan is divided into Local Planning Bodies by HUD. CoCs are the decision-making body to oversee the planning and development of the local community's homeless service delivery system.

Definitions of Homelessness

❖ **Category 1: Literally Homeless**

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

1. 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, or camping ground.

2. An individual or family living in a supervised publicly or privately-operated shelter designated to provide temporary living arrangements (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).

3. 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.

❖ **Category 2: Imminent Risk of Homelessness**

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

1. The primary nighttime residence will be lost within 14 days of the date of application for homeless assistance.

2. No subsequent residence has been identified.

3. 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

❖ **Category 3: Homeless Under Other Federal Statutes (NOTE: CoC Program-funded projects are not authorized by HUD to serve this category)**

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:

1. Are defined as homeless under section 387 of the Runaway and Homeless of the Head Start Act (42 U.S.C. 9832), section 41403 of the Violence Against Women Act of 1994 (42 U.S.C. 14043e–2), section 330(h) of the Public Health Service Act (42 U.S.C. 254b(h)), section 3 of the Food and Nutrition Act of 2008 (7 U.S.C. 2012), section 17(b) of the Child Nutrition Act of 1966 (42 U.S.C. 1786(b)), or section 725 of the McKinneyVento Homeless Assistance Act (42 U.S.C.11434a).

2. 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.

3. 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.

4. 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.

❖ **Category 4: Fleeing/Attempting to Flee Domestic Violence**

Any individual or family who:

1. 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;

2. Has no other residence; and

3. Lacks the resources or support networks, e.g., family, friends, and faith-based or other social networks, to obtain other permanent housing. 24 CFR 578.3. Chronically Homeless McKinney-Vento Act.

Definition of Chronically Homeless

HEARTH/ McKinney Vento Act (24 CFR 91.5 and 24 CFR 578.3) defines Chronically Homeless as:

1. A homeless individual, who: Is homeless and lives in a place not meant for human habitation, a safe haven, or in an emergency shelter; and 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 12 months or on at least 4 separate occasions in the last 3 years where the combined occasions must total at least 12 months.

   a. "Occasions" must be separated by a break of at least seven nights.

   b. Stays in institution of fewer than 90 days do not constitute a break in homelessness; AND

   c. Can be diagnosed 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; OR

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 paragraphs (1) or (2) of this definition, including a family whose composition has fluctuated while the head of household has been homeless.

Developmental Disability

Developmental disability is defined in section 102 of the Developmental Disabilities Assistance and Bill of Rights Act of 2000 (42 U.S.C.15002) as:

1. A severe, chronic disability of an individual that— (i) Is attributable to a mental or physical impairment or combination of mental and physical impairments; (ii) Is manifested before the individual attains age 22; (iii) Is likely to continue indefinitely; (iv) Results in substantial functional limitations in three or more of the following areas of major life activity: (A) Selfcare; (B) Receptive and expressive language; (C) Learning; (D) Mobility; (E) Self-direction; (F) Capacity for independent living; (G) Economic self-sufficiency; and (v) Reflects the individual's need for a combination and sequence of special, interdisciplinary, or generic services, individualized supports, or other forms of assistance that are of lifelong or extended duration and are individually planned and coordinated.

2. An individual from birth to age 9, inclusive, who has a substantial developmental delay or specific congenital or acquired condition, may be considered to have a developmental disability without meeting three or more of the criteria described in paragraphs (1) (i) through (v) of the definition of "developmental disability" in this section if the individual, without services and supports, has a high probability of meeting those criteria later in life. 24 CFR 583.5

Disabling Condition

1. A condition that: (i) Is expected to be long-continuing or of indefinite duration; (ii) Substantially impedes the individual's ability to live independently; (iii) Could be improved by the provision of more suitable housing conditions; and (iv) Is a physical, mental, or emotional impairment, including an impairment caused by alcohol or drug abuse, post-traumatic stress disorder, or brain injury;

2. A developmental disability, as defined in this section; or

3. The disease of acquired immunodeficiency syndrome (AIDS) or any conditions arising from the etiologic agent for acquired immunodeficiency syndrome, including infection with the human immunodeficiency virus (HIV). 24 CFR 583.5

Emergency Shelter

Any facility where the primary purpose is to provide a temporary shelter for the homeless in general or for specific populations of the homeless. Emergency shelters do not require occupants to sign leases or occupancy agreements. Emergency shelters are expected to have low barriers to project entry and participation, and to have a primary focus on moving clients to permanent housing solutions as quickly as possible.

Emergency Shelter Program (ESP)

ESP is operated statewide and provides emergency overnight lodging to households experiencing homelessness in Michigan. Shelter is time-limited temporary housing where individuals experiencing homelessness may stay and receive supportive services that are designed to enable individuals to move into permanent housing.

Emergency Solution Grant (ESG)

ESG is a formula grant program from HUD. Eligible recipients generally consist of metropolitan cities, urban counties, territories, and states, as defined in 24 CFR 576.2. ESG funds may be used for five program components: street outreach, emergency shelter, homelessness prevention, rapid re-housing assistance, and HMIS; as well as administrative activities (up to 7.5% of a recipient's allocation can be used for administrative activities).

Equal Access

Federal regulations that require that all HUD-funded services and housing shall be made available without regard to actual or perceived sexual orientation, gender identity, or marital status. No recipient or subrecipient of HUD funds may inquire about the sexual orientation or gender identity of an applicant for, or occupant of, HUD-assisted housing for the purpose of determining eligibility for the housing or otherwise making such housing available. This prohibition on inquiries regarding sexual orientation or gender identity does not prohibit any individual from voluntarily self-identifying sexual orientation or gender identity. This prohibition on inquiries does not prohibit lawful inquiries of an applicant or occupant's sex where the housing provided or to be provided to the individual is a temporary emergency shelter that involves the sharing of sleeping areas or bathrooms, nor does it prohibit inquiries made for the purpose of determining the number of bedrooms to which a household may be entitled. For additional information, please visit the HUD Exchange page on Equal Access.

Federal Fair Housing Act

Title VIII of the Civil Rights Act of 1968 (Fair Housing Act), as amended, prohibits discrimination in the sale, rental, and financing of dwellings, as well as in other housing related transactions based on race, color, national origin, religion, sex, familial status (including children under the age of 18 living with parents or legal custodians, pregnant women, and people securing custody of children under the age of 18), and disability. For additional information, please see the HUD page on the Fair Housing Act.

Family/Household

HUD definition of family includes, but is not limited to, the following, regardless of actual or perceived sexual orientation, gender identity, or marital status:

1. A single person, who may be an elderly person, displaced person, disabled person, near-elderly person, or any other single person; or

2. A group of persons residing together, and such group includes, but is not limited to: (i) A family with or without children (a child who is temporarily away from the home because of placement in foster care is considered a member of the family). 24 CFR 5.403

3. Section 576.102(b) of the ESG interim rule prohibits ESG-funded programs from denying a family admission to an ESG-funded program or ESG-funded services based on the age of a child under the age of 18 if the program provides services to families with children.

Clarity on the Definition of Family: According to HUD, a family is simply one or more individuals who live together. Members of the family do not need to be related by blood, marriage, or in any other legal capacity. Family members who are away from the household for a certain period of time may be considered part of the family. Live-in aides are also considered a family member. HUD's definition of family is broad to help make sure decent and affordable housing is available to every type of family.

Housing Opportunities for Persons with AIDS (HOPWA)

The Housing Opportunities for Persons with AIDS (HOPWA) program is funded by the Department of Housing and Urban Development (HUD) and is specifically geared towards individuals and families living with HIV/AIDS. Research shows that safe and stable housing is important to reducing viral loads (an important health indicator) for those living with HIV.

HUD

The Department of Housing and Urban Development is the Federal agency responsible for national policy and programs that address America's housing needs, that improve and develop the Nation's communities, and enforce fair housing laws. CoC Program Grants (PSH and RRH) as well as HOPWA are granted through HUD.

Homeless Management Information System (HMIS)

Michigan State Homeless Management Information System (MSHMIS or HMIS): is an information technology system used to collect data on the provision of housing and services to homeless individuals, families, and persons at risk of homelessness in Michigan. All clients served through HUD funded programs are required to be entered into HMIS.

Housing First

An Evidence Based Practice that approaches housing as a tool for recovery. It is an approach to ending homelessness that is founded on the belief that everyone is ready for, and deserves, housing regardless of their current situation.

Housing First emerged as an alternative to the linear approach in which people experiencing homelessness were required to first participate in and graduate from short-term residential and treatment programs before obtaining permanent housing. In the linear approach, permanent housing was offered only after a person experiencing homelessness could demonstrate that they were "ready" for housing. By contrast, Housing First is premised on the following principles:

❖ Homelessness is first and foremost a housing crisis and can be addressed through the provision of safe and affordable housing.

❖ All people experiencing homelessness, regardless of their housing history and duration of homelessness, can achieve housing stability in permanent housing. Some may need very little support for a brief period of time while others may need more intensive and long-term supports.

❖ Everyone is "housing ready." Sobriety, compliance in treatment, or even criminal histories are not necessary to succeed in housing. Rather, homelessness programs and housing providers must be "consumer ready."

- ❖ Many people experience improvements in quality of life in the areas of health, mental health, substance use, and employment, as a result of achieving housing.

- ❖ People experiencing homelessness have the right to self-determination and should be treated with dignity and respect.

- ❖ The exact configuration of housing and services depends upon the needs and preferences of the population.

- ❖ While the principles of Housing First can be applied to many interventions and as an overall community approach to addressing homelessness, this document focuses on Housing First in the context of permanent supportive housing models for people experiencing chronic homelessness.

Low-Barrier

Low-barrier services and housing place a minimum number of expectations on people requesting assistance. The aim is to have as few barriers as possible to allow more people access to services. This model often means that program participants are not expected to abstain from using alcohol or other drugs, or from carrying on with street activities while engaging in services or living on-site, so long as they do not engage in these activities in common areas and are respectful of other tenants and staff. Low-barrier facilities follow a harm reduction philosophy.

Michigan Coalition Against Homelessness (MCAH)

The Michigan Coalition Against Homelessness (MCAH) is a nonprofit membership organization formed in 1990 as an association of emergency shelters, transitional housing programs, nonprofit housing and service programs, government programs, and concerned citizens from across the state. The coalition provides public awareness activities, advocacy at the state and federal level, and support services that bring in national expertise and best practices.

Michigan Department of Health and Human Services (MDHHS)

The Michigan Department of Health and Human Services is a principal department of State of Michigan, headquartered in Lansing, that provides public assistance, child and family welfare services, and oversees health policy and management.

Michigan State Housing Development Authority (MSHDA)

The Michigan State Housing Development Authority (MSHDA), established in 1966, provides financial and technical assistance through public and private partnerships to create and preserve safe and decent affordable housing, engage in community economic development activities, develop vibrant cities, towns and villages, and address homeless issues.

PATH

The Projects for Assistance in Transition from Homelessness (PATH) Program is a federal grant program awarded to states by the Substance Abuse and Mental Health Services Administration (SAMHSA). In Michigan, the PATH Program is administered by the HHS Section of the

MDHHS. Michigan's PATH Program aims to reduce or eliminate homelessness for persons with serious mental illness (SMI), or co-occurring SMI and substance use disorder (SUD). Funding is prioritized for areas of the state with the highest concentration of people experiencing homelessness and services include outreach services, case management, and housing services. The goal of Michigan's PATH Program is to provide low-barrier/low-demand street outreach and engagement that provides basic needs assistance and linkage to permanent housing.

Permanent Housing (PH)

Permanent housing has no length of stay limitation. Residents of permanent housing maintain legal protections under local, state, and federal laws through a lease agreement for a term of at least one year. After one year, the lease is eligible for renewal or termination as per the terms of the lease. Permanent Housing is community-based housing and may include market rate housing, subsidized housing, permanent supportive housing, and Rapid Re-Housing.

Permanent Supportive Housing (PSH)

Permanent Supportive Housing is long-term housing with no defined limitation of participation. Residents of Permanent Supportive Housing sign lease agreements with the property owner or management and maintain full tenancy rights under local, state, and federal laws. In addition to permanent housing, PSH offers supportive services on a voluntary basis to assist formerly homeless persons in living independently and successfully maintaining the terms of their lease. Clients within PSH are typically high-need and often have a disability.

Prosperity Regions

The State of Michigan is divided by service delivery regions called prosperity regions which aids in unifying the public, private and non-profit sectors, identifying regionally aligned strategies, goals, objectives and/or projects for the State of Michigan to support, streamlines the alignment of state departments and delivery of state department services based on the new regional configurations.

Rapid Re-Housing (RRH)

Rapid Re-Housing is an intervention, informed by a Housing First approach that is a critical part of a community's effective homeless crisis response system. Rapid Re-Housing rapidly connects families and individuals experiencing homelessness to permanent housing through a tailored package of assistance that may include the use of time-limited financial assistance and targeted supportive services. Rapid Re-Housing programs help families and individuals living on the streets or in emergency shelters solve the practical and immediate challenges to obtaining permanent housing while reducing the amount of time they experience homelessness. Rapid Re-Housing also helps families and individuals avoid a near-term return 18 to homelessness and links them to community resources that enable them to achieve housing stability in the long-term. Rapid Re-Housing is an important component of a community's response to homelessness. A fundamental goal of Rapid Re-Housing is to reduce the amount of time a person is homeless.

Details on the provision of supportive services that can be provided are set forth in 24 CFR 578.53. Tenant-based rental assistance provided through RRH can be short-term (up to 3 months) and/or medium-term (for 3 to 24 months), as set forth in 24 CFR 578.51(c).

Substance Abuse and Mental Health Services Authority (SAMHSA)

The Substance Abuse and Mental Health Services Administration is a branch of the U.S. Department of Health and Human Services. It is charged with improving the quality and availability of treatment and rehabilitative services in order to reduce illness, death, disability, and the cost to society resulting from substance abuse and mental illness.

SOAR

SOAR is a nationally recognized expedited process for applying for SSDI and SSI benefits for people who are homeless, in danger of becoming homeless or receiving public assistance with their housing.

SPDAT

The Service Prioritization Decision Assistance Tool (**SPDAT**) was developed as an assessment tool for front- line workers at agencies that work with homeless clients to prioritize which of those clients should receive assistance first.

Subrecipient

Subrecipient refers to a private nonprofit organization, or unit of local government that receives a contract/MOA to carry out a project.

Transitional Housing (TH)

Transitional housing is community and/or program sponsored housing with a defined limitation of participation of up to 24 months. Residents of transitional housing sign a lease or occupancy agreement for a term of at least one month and may be offered supportive services to locate and secure permanent housing and to support a household's ability to successfully maintain the terms of a lease agreement. Transitional Housing is designed to facilitate the movement of homeless individuals and families into permanent housing within 24 months. The program participation cannot be extended past the 24-month expiration. 24 CFR§ 578.3

VI SPDAT

The **VI-SPDAT** (Vulnerability Index - Service Prioritization Decision Assistance Tool) is a survey administered both to individuals and families to determine risk and prioritization when providing assistance to homeless and at-risk of homelessness persons.

APPENDIX

APPENDIX 1: ESP MINIMUM STANDARDS FOR EMERGENCY SHELTER

1. Shelters (including motels) have the capacity to resolve a household's immediate housing crisis by providing overnight lodging in a safe physical environment including:

   a. The shelter building is structurally sound to protect the residents from the elements and does not pose any threat to the health and safety of residents.
   b. The shelter provides each program participant in the shelter with an acceptable place to sleep and adequate space and security for themselves and their belongings.
   c. Each room or space within the shelter has a natural or mechanical means of ventilation. The interior air is free of pollutants at a level that might threaten or harm the health of residents.
   d. The shelter water supply is free of contamination
   e. Each program participant in the shelter has access to sanitary facilities that are in proper operating condition, are private, and are adequate for personal cleanliness and the disposal of human waste.
   f. The shelter has any necessary heating/cooling facilities in proper operating condition.
   g. The shelter has adequate natural or artificial illumination to permit normal indoor activities and support health and safety.
   h. There are sufficient electrical sources to permit the safe use of electrical appliances in the shelter.
   i. The shelter is maintained in a sanitary condition.
   j. The shelter has adequate provisions for garbage removal and pest control.
   k. The shelter has adequate provisions to ensure that sleeping surfaces and linens are sanitized on a regular basis.
   l. There is at least one working smoke detector in each occupied unit of the shelter.
   m. Where possible, smoke detectors are located near sleeping areas.
   n. All public areas of the shelter have at least one working smoke detector.
   o. The fire alarm system is designed for hearing-impaired residents.
   p. There is a second means of exiting the building in the event of fire or other emergency.
   q. The shelter has adequate first aid supplies available at all times in an area readily accessible.
   r. The shelter has adequate telephone and emergency telephone number access in an area readily accessible.

2. Shelters shall maintain the following general operations standards:

   a. The shelter is a non-profit corporation organized under the Internal Revenue Service code section 501(c)(3).
   b. The shelter maintains participant and program records in a secured area.
   c. The shelter has on-site staff coverage during hours of operation.

3. Shelters shall meet the following operating conditions:

   a. The shelter operates year-round.
   b. The shelter is open, at a minimum, from 5:00 PM – 9:00 AM daily.
   c. The shelter provides access to a minimum of two meals per day
   d. The shelter's food preparation areas, if any, contain suitable space and equipment to store, prepare, and serve food in a safe and sanitary manner.

4. Shelters shall be low-barrier and equal access, meaning:

   a. The shelter is accessible for all clients in accordance with: a. Section 504 of the Rehabilitation Act; b. Title II of the American Disabilities Act; and c. The Fair Housing Act (42 U.S.C. 3601 et seq.).
   b. Sobriety is not a condition for entry, stay, or access to services. Rules address behaviors, not the cause of behaviors, to ensure safety and security of guests and the facility.

      i   Does not discriminate on the basis of sexual orientation, gender identity, or family composition. a. Households presenting as a family must be provided shelter together as a unit and not involuntarily separated.

   c. Has capacity to serve consumers that need accessibility accommodations.
   d. Participation in religious-affiliated activities as a condition of entry, stay, or access to emergency shelter is not permitted.

5. Shelters shall participate with statewide prioritization tools:

   a. The shelter utilizes the Vulnerability Index – Service Prioritization Decision Assistance Tool (VI-SPDAT) to prioritize persons that are the most vulnerable for intensive services.

6. Shelters shall work cooperatively with other members of the Continuum of Care to provide needed services to rapidly exit guests to permanent housing using available community resources and utilizing shelter diversion when appropriate. Including:

   a. Participates in the local coordinated entry/access system.
   b. Participates in the Homeless Management Information System (HMIS).
   c. Practices real-time data entry and ensures complete client records are entered.
   d. Collaborates with the local Housing Assessment and Resource Agency (HARA).
   e. Provides or ensures documentation of housing case management.
   f. Provides or ensures linkages to mainstream resources.
   g. Practices shelter diversion when applicable.
   h. Upholds a Housing First approach and utilizes Rapid Re-Housing resources and other community resources in accordance with best practices.
   i. Uses data to measure effectiveness and inform service delivery improvements.

APPENDIX 2: EXAMPLE OF A RISK ASSESSMENT TOOL

Note - A similar tool is in development for use by the ESP and will be provided to subrecipients before October 1, 2021.

Column D: Total Dollar Amount of Grant Award											
Intended to capture the total maximum amount of the grant award. The preparer will establish the thresholds for each option (small,medium, large) based on the amounts of their assigned grant awards.											
Large	10										
Medium	5										
Small	1										
Column E: Does the Agency have previous grant experience?											
Intended to capture a grantee's previous experience with administering programs. Because programs have specific requirements that are unique, a grantee who has not administered these types of programs in the past may be considered to have a higher risk of noncompliance than a grantee who does have experience.											
None	10										
1-3 years	5										
3+ years	1										
Column F: Has there been financial & compliance monitoring over the Agency during the prior two years?											
Grantees subjected to a monitoring or audit by MDHHS or accounting firm (such as a single audit) will typically have a lower risk than those who have not had a review. Based on the type and depth of the review or audit, you will assign the appropriate risk score from oneof the three options provided.											
No Single Audit performed **and No** MDHHS Compliance Review	10										
Single Audit performed, MDHHS Program **NOT** Testedas a Major Program	5										
Single Audit performed, MDHHS Program tested as a Major Program and/or MDHHS performed compliance review	0										
Column G: Are you aware of frequent turnover of key staff or other staff at the Agency?											
Frequent turnover of staff at the Agency can potentially cause a lack of consistency with how they conduct the program(s) for which theyare receiving grantee dollars for. While you may not have a means of knowing this for certain, if you are aware of frequent turnover in staff, you should mark "yes" to this risk factor.											
Yes	3										

No	0										

Column H: Are you aware of any other issues that may indicate increased risk of non-compliance?

Through interactions with the grantees you may become aware of issues that increase risk of the agency failing to comply with the terms and conditions of its grant award with MDHHS. If you are aware of any concerns respond with "yes" and retain documentation to supportyour concerns of potential noncompliance.

Yes	10										
No	0										

Column I: Are you aware of any financial management problems/financial instability for the Agency?

Examples of financial problems or issues may be risk of insolvency, poor financial management practices, late or incorrect expenditurereports for the grant award, etc. You may become aware of these issues through a financial audit performed by an independent accountant or through MDHHS monitoring activities. You will indicate "yes" to the risk factor if you are aware of any known issues or problems.

Yes	10										
No	0										

Column J: Did the Agency have significant findings or questioned costs related to your program from a prior audit?

Audit findings and questioned costs in the grantee's audit report related to MDHHS-funded programs puts the entity at higher risk. You willindicate "yes" if the grantee's audit report has findings and questioned costs related to MDHHS-funded grant awards.

Yes	5										
No	0										

Column K: Does the Agency have recurring/unresolved issues (e.g. Internal control/financial management issues)?

Grantees that have known issues and are unable to rectify those issues in a timely manner, should be considered a higher risk than grantees who are able to correct issues when identified. If you are aware of issues that have been previously identified but have not beencorrected over the course of more than one audit or review cycle, you should answer "Yes" to this risk factor.

Yes	5										
No	0										

Column L: Has the Agency been found to be in programmatic non-compliance?

Grantees who have not complied with MDHHS programmatic requirements in the past should be considered a higher risk. Examples of programmatic issues could be failure to comply with case record requirements, failure to comply with program standards of promptness, determining program eligibility incorrectly, etc.

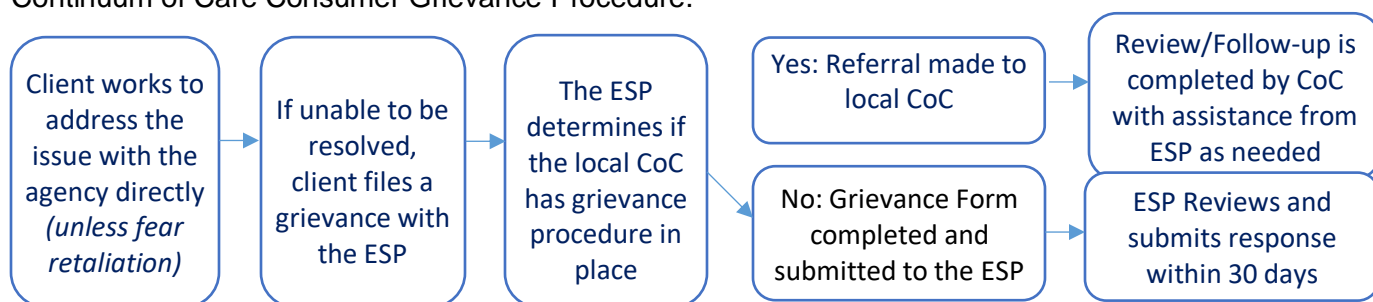|											
Yes	10										
No	0										

Emergency Shelter Program (ESP) Client Grievance Procedure

All households served by the Emergency Shelter Program (ESP) have the right to file a complaint or grievance if they feel they have been treated unjustly by any ESP-funded agency.

Overview

All ESP subrecipients are required to have a grievance policy in place for those receiving, or seeking, services. The ESP has created this Procedure to be used when a client is unable to resolve a grievance through any ESP-funded agency's formal process. Grievances must be received by the ESP Regional Manager covering the region where the agency is located. From there, the grievance is shared with the ESP leadership within The Salvation Army and, if necessary, the Michigan Department of Health and Human Services (MDHHS). Responses are given to the client submitting the grievance within thirty (30) calendar days.

*Grievances filed in the City of Detroit on co-funded subrecipients must be filed using the Detroit Continuum of Care Consumer Grievance Procedure.

Client works to address the issue with the agency directly *(unless fear retaliation)*	If unable to be resolved, client files a grievance with the ESP	The ESP determines if the local CoC has grievance procedure in place	Yes: Referral made to local CoC	Review/Follow-up is completed by CoC with assistance from ESP as needed
			No: Grievance Form completed and submitted to the ESP	ESP Reviews and submits response within 30 days

1. Client works with the current ESP subrecipient to resolve the grievance through the agency's grievance process. This should include a written grievance opportunity. If a client fears retaliation for filing a grievance, they may file the grievance directly with the ESP. Along with the phone number for The Salvation Army Divisional Headquarters, an email address specifically for grievances will be made available to subrecipients. Subrecipients will be required to post this contact information so that clients have access to the ESP TSA team. (This email address is currently being created and will be provided to all subrecipients before October 1, 2021.)
2. Client may reach out to the appropriate ESP Regional Manager regarding a potential grievance. The ESP Regional Manager will first try to resolve the issue(s) between the client and subrecipient through informal means. If this is not successful, the client completes the attached ESP Grievance Form and submits it to the ESP Regional Manager responsible for the area covered by the agency providing the service.
3. *If a grievance form is received for a Salvation Army shelter, this must be forwarded to MDHHS ESP staff to complete the process.
4. The ESP Regional Manager will work with ESP leadership to attempt to substantiate the claims of the grievance and will work with the resolve the grievance with the client and subrecipient. This process includes obtaining a copy of the written grievance filed with the agency, if applicable.
5. The ESP Regional Manager will provide a written response to the grievance within thirty (30) calendar days of receipt from the client.
6. If the client or subrecipient is not satisfied with the response, the relevant parties may

be invited to participate in a meeting with the ESP leadership from The Salvation Army.

7. If the client or subrecipient is not satisfied with the results of this meeting, a grievance can be filed with the Michigan Department of Health and Human Services following their grievance procedure.

Emergency Shelter Program (ESP) Grievance Form

If you have a grievance that you would like to file with an ESP-funded subrecipient, please complete the following form. This form may only be completed after following steps 1 and 2 of the Emergency Shelter Program (ESP) Client Grievance Procedure. The grievance will be investigated and a response will be provided within thirty (30) calendar days of receipt.

1. Name of Person Making Complaint: _____

2. Subrecipient Name: _____ Date(s) of Event(s): _____

3. Provide details of the situation leading to the grievance. Include dates, actions/conversations of those involved, and staff involved. If more space is needed, please use the back of this form or include another page.

_____
_____
_____
_____
_____
_____

4. May we contact you for additional information?   YES   NO

5. If yes, please provide contact information and circle the best method to contact you:

- Phone - _____
- Secondary Phone - _____
- Email - _____
- Mailing Address - _____

6. Signature of Person Submitting Grievance: _____ Date: _____

7. This form can be submitted via email to the appropriate ESP Regional Manager based on the county the subrecipient is located in or mailed to 16130 Northland Dr, Southfield, MI 48075.

County	Alcona, Alger, Alpena, Antrim, Baraga, Benzie, Charlevoix, Cheboygan, Chippewa, Delta, Dickinson, Emmet, Gogebic, Grand Traverse, Houghton, Iron, Keeweenaw, Leelanau, Luce, Mackinac, Manistee, Marquette, Menominee, Missaukee, Montmorency, Ogemaw, Ontonagon, Oscoda, Otsego, Presque Isle, Roscommon, Schoolcraft, Wexford	Allegan, Arenac, Barry, Bay, Clare, Clinton, Eaton, Gladwin, Gratiot, Ingham, Ionia, Isabella, Kent, Lake, Mason, Mecosta, Midland, Montcalm, Muskegon, Newaygo, Oceana, Osceola, Ottawa, Saginaw	Berrien, Branch, Calhoun, Cass, Hillsdale, Jackson, Kalamazoo, Lenawee, Livingston, Monroe, St Joseph, Van Buren, Washtenaw	Genesee, Huron, Lapeer, Macomb, Oakland, Sanilac, Shiawassee, St Clair, Tuscola, Wayne
Contact	**Jason Parks** Jason.Parks@ usc.salvationarmy.org	**Emily O'Brien** Emily.OBrien@ usc.salvationarmy.org	**Takisha Jones** Takisha.Jones@ usc.salvationarmy.org	**Temporarily:** **Jason Parks** Jason.Parks@ usc.salvationarmy.org and **Takisha Jones** Takisha.Jones@ usc.salvationarmy.org