

## Northwest Michigan Coalition to End Homelessness Prioritization Procedure

Prioritization	Subpopulation	Secondary Prioritization
<b>1</b>	Chronic Youth (18-24 y/o)	<ol style="list-style-type: none"> <li>1. Veteran</li> <li>2. Full SPDAT or if none; TAY-VI Score or VI Score</li> <li>3. Length of Time Homeless</li> <li>4. Unsheltered&gt;Sheltered</li> <li>5. Date of Assessment (older and still active)</li> </ol>
<b>2</b>	Chronic Families	<ol style="list-style-type: none"> <li>1. Veteran</li> <li>2. Full SPDAT or if none; VI-F Score</li> <li>3. Length of Time Homeless</li> <li>4. Unsheltered&gt;Sheltered</li> <li>5. Date of Assessment</li> </ol>
<b>3</b>	Chronic Singles	<ol style="list-style-type: none"> <li>1. Veteran</li> <li>2. Full SPDAT or if none; VI Score</li> <li>3. Length of Time Homeless</li> <li>4. Unsheltered&gt;Sheltered</li> <li>5. Date of Assessment</li> </ol>
<b>4</b>	Non-Chronic Youth (18-24 y/o)	<ol style="list-style-type: none"> <li>1. Veteran</li> <li>2. Full SPDAT or if none; TAY-VI Score or VI score</li> <li>3. Length of Time Homeless</li> <li>4. Unsheltered&gt;Sheltered</li> <li>5. Date of Assessment</li> </ol>
<b>5</b>	Non-Chronic Families	<ol style="list-style-type: none"> <li>1. Veteran</li> <li>2. Full SPDAT or if none; VI-F Score</li> <li>3. Length of Time Homeless</li> <li>4. Unsheltered&gt;Sheltered</li> <li>5. Date of Assessment</li> </ol>
<b>6</b>	Non-Chronic Singles	<ol style="list-style-type: none"> <li>1. Veteran</li> <li>2. Full SPDAT or if none; VI Score</li> <li>3. Length of Time Homeless</li> <li>4. Unsheltered&gt;Sheltered</li> <li>5. Date of Assessment</li> </ol>



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### Assumptions:

- Veterans will be matched to Veteran specific housing whenever available prior to being matched to another COC program
- Veterans with a score higher than the Supportive Services for Veteran Families range can still be matched to this intervention if no other housing intervention is available
- Youth and families experiencing chronic homelessness will be matched to Rapid Rehousing first even when VI or Full SPDAT scores are higher than the designated range. *These households will likely use RRH as a bridge to PSH*
- When there are no households meeting program criteria in the VI range the next offer will go up to the next higher VI score
- Full SPDATs will be conducted by the Street Outreach provider within 30 days of engagement.
- Anyone who is currently enrolled in a CoC funded program and requires supports beyond what their current program provides them, these individuals are first priority into an open slot.
- Matching individuals to housing programs occurs **ONLY** within the prioritization meetings.
- 10 County Region: Antrim, Benzie, Charlevoix, Emmet, Grand Traverse, Kalkaska, Leelanau, Manistee, Missaukee, Wexford
- Greater Grand Traverse Region: Antrim, Benzie, Grand Traverse, Kalkaska, Leelanau
- Balance of State: Charlevoix, Emmet, Manistee, Missaukee, Wexford

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Housing Intervention	Lead Agency	Description	Time Limits
Permanent Supportive Housing {Greater Grand Traverse only}	Northwest Michigan Supportive Housing	Scattered site or project based subsidized housing coupled with voluntary supportive services for vulnerable households who require both affordability and ongoing supports	No time limits <i>*Participants must have at minimum a 1 year lease with opportunity to renew.</i>
HUD Rapid Rehousing {Greater Grand Traverse only}	NMCAA	Scattered site subsidized housing with voluntary supportive services	2 years <i>*Participants must have at minimum a 1 year lease</i>
HUD Rapid Rehousing for Single Youth {Greater Grand Traverse only}	NMCAA	Scattered site subsidized housing for single youth age 18-24 with voluntary supportive services	2 years <i>*Participants must have at minimum a 1 year lease</i>
HUD Rapid Rehousing for Pregnant & Parenting Youth {Greater Grand Traverse only}	NMCAA	Scattered site subsidized housing for pregnant & parenting youth age 18-24 with voluntary supportive services	2 years <i>*Participants must have at minimum a 1 year lease</i>
DHHS Rapid Rehousing {Balance of State only}	NMCAA	Scattered site subsidized housing with voluntary supportive services	18 months <i>*Participants must have a 1 year lease</i>
VA Supportive Services for Veteran Families (VA SSVF) {10 County Region}	NMCAA	Scattered site subsidized housing with voluntary supportive services	6-9 months in a 2 year period depending on income
Emergency Solutions Grant Rapid Rehousing (ESG RRH) {10 Country Region}	NMCAA	Scattered site subsidized housing with voluntary supportive services	6 months

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## Documentation Standards for Chronic Homelessness

**Instructions:** Based on your navigation of the flowchart on the previous page, locate the appropriate numbered situation on this page and follow the documentation standards noted. This tool summarizes the criteria for the new Chronically Homeless Definition. To review the exact language, please refer to 24 CFR Parts 91 & 578 and the HUD Exchange (<https://www.hudexchange.info/homelessness-assistance/resources-for-chronic-homelessness/>)

Situation	Documentation of Homelessness	Documentation of Disability
<p>1. Household is Chronically Homeless (12 Consecutive Months)</p>	<ul style="list-style-type: none"> <li><input type="checkbox"/> HMIS record or record from a comparable database; or</li> <li><input type="checkbox"/> Written observation by an outreach worker of the conditions where the individual was living; or</li> <li><input type="checkbox"/> Written referral by another housing or service provider; or</li> <li><input type="checkbox"/> Where the evidence above is unavailable, there must be a certification by the individual seeking assistance, accompanied by the intake worker's documentation of the living situation and the steps taken to obtain the evidence listed above.</li> </ul> <p>If the head of household is currently staying in an institution where they have been for less than 90 days (and were in a shelter/street/safe haven immediately prior) their Institutional Stay can be documented by:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Discharge paperwork or written/oral referral from a social worker or appropriate official of the institutional facility, with start/end dates of client's residence, or</li> <li><input type="checkbox"/> Where the evidence above is unavailable, there must be a certification by the individual seeking assistance, accompanied by the intake worker's documentation of the living situation and the steps taken to obtain the evidence listed above.</li> </ul>	<p>Documentation of the head of household's disability, including:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Written verification of the disability from a licensed professional;</li> <li><input type="checkbox"/> Written verification from the Social Security Administration;</li> <li><input type="checkbox"/> The receipt of a disability check; or</li> <li><input type="checkbox"/> Intake staff-recorded observation of disability that, no later than 45 days from the application for assistance, accompanied by supporting evidence.</li> </ul>
<p>2. Household is Chronically Homeless (4+ Occasions totaling 12 months over 3 years)*  *May include institution stays of &lt;90 days</p>	<ul style="list-style-type: none"> <li><input type="checkbox"/> HMIS record or record from a comparable database; or</li> <li><input type="checkbox"/> Written observation by an outreach worker of the conditions where the individual was living; or</li> <li><input type="checkbox"/> Written referral by another housing or service provider; or</li> <li><input type="checkbox"/> Discharge paperwork or written/oral referral from a social worker or appropriate official of the institutional facility, with start/end dates of client's residence (for institutional stays of less than 90 days)</li> <li><input type="checkbox"/> Where the evidence above is unavailable, there must be a certification by the individual seeking assistance, accompanied by the intake worker's documentation of the living situation and the steps taken to obtain the evidence listed above.</li> </ul> <p>* Each separate occasion MUST be documented (minimum of 3 breaks). 100% of the breaks can be documented by self- report.</p>	<p>Documentation of the head of household's disability, including:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Written verification of the disability from a licensed professional;</li> <li><input type="checkbox"/> Written verification from the Social Security Administration;</li> <li><input type="checkbox"/> The receipt of a disability check; or</li> <li><input type="checkbox"/> Intake staff-recorded observation of disability that, no later than 45 days from the application for assistance, accompanied by supporting evidence.</li> </ul>

**Important Notes:**

- Each individual occasion needs to be fully documented.
- Breaks can be documented by self-report.
- For each Project:
  - 100% of households served can use self-certification for 3 months of their 12 months,
  - 75% of households served need to use 3<sup>rd</sup> Party documentation for 9 months of their 12 months, and
  - 25% of households served can use self-certification as documentation for any and all months.