

# Kansas Balance of State Continuum of Care Written Standards

*These Written Standards do not reflect  
the full scope of required Federal  
Regulations at 24 CFR Part 576 and 578.  
It is the responsibility of HUD funded  
agencies to follow all applicable  
regulations.*

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## Introduction

In accordance with Title 24 of the Code of Federal Regulations (24 CFR) 91.220 (1)(4)(i), 576 and 578, the Kansas Balance of State Continuum of Care (KS BoS CoC) has developed the following Written Standards in partnership with the CoC Applicant, Kansas Statewide Homeless Coalition, and with input from the KS BoS CoC Written Standards workgroup. All programs receiving Emergency Solutions Grant (ESG) or Continuum of Care (CoC) funds are required to comply with these standards. Each project may have its own program rules or focus, but they must all align with these standards and cannot be in conflict with those established by the KS BoS CoC, HUD CoC Program Interim Rule, the most recent HUD CoC Notice of Funding Opportunity (NOFO), or limit access to those that would otherwise benefit from assistance. In addition, all CoC programs must comply with the applicable NOFO under which the program was originally awarded, and any additional eligibility requirements imposed by future NOFOs. All ESG sub-recipients will comply with applicable with Federal regulations (24 CFR Part 576 and 2 CFR Part 200), and Kansas ESG Policies and Procedures as outlined in the published ESG Handbook. The purpose of these standards is to outline key elements of the HUD regulations and priorities set by the KS BoS CoC, and to ensure that programs are administered fairly and methodically.

## HUD Administrative Regulations

### Fair Housing & Equal Access

In accordance with 24 CFR 578.93, all federally funded providers will not prohibit access to programs to anyone that would otherwise be eligible for assistance based on race, color, religion, national origin, sex, age, familial status, disability type, actual or perceived sexual orientation, gender identity or marital status. Providers will post publicly a HUD issued Fair Housing notice, in a place that is visible to all program participants and persons who present for assistance or services and provide participants with written notice of their rights under Fair Housing at program entry.

Providers may exclusively serve a particular homeless subpopulation in transitional or permanent housing if the housing addresses a need identified by the Continuum of Care for the geographic area and meets one of the following:

- (1) The housing may be limited to one sex where such housing consists of a single structure with shared bedrooms or bathing facilities such that the considerations of personal privacy and the physical limitations of the configuration of the housing make it appropriate for the housing to be limited to one sex;
- (2) The housing may be limited to a specific subpopulation, so long as admission does not discriminate against any protected class under federal nondiscrimination laws in 24 CFR 5.105 (e.g., the housing may be limited to homeless veterans, victims of domestic violence and their children, or chronically homeless persons and families).
- (3) The housing may be limited to families with children.

(4) If the housing has in residence at least one family with a child under the age of 18, the housing may exclude registered sex offenders and persons with a criminal record that includes a violent crime from the project so long as the child resides in the housing.

(5) Sober housing may exclude persons who refuse to sign an occupancy agreement or lease that prohibits program participants from possessing, using, or being under the influence of illegal substances and/or alcohol on the premises.

(6) If the housing is assisted with funds under a federal program that is limited by federal statute or Executive Order to a specific subpopulation, the housing may be limited to that subpopulation (e.g., housing also assisted with funding from the Housing Opportunities for Persons with AIDS program under 24 CFR part 574 may be limited to persons with acquired immunodeficiency syndrome or related diseases).

(7) Recipients may limit admission to or provide a preference for the housing to subpopulations of homeless persons and families who need the specialized supportive services that are provided in the housing (e.g., substance abuse addiction treatment, domestic violence services, or a high intensity package designed to meet the needs of hard-to-reach homeless persons). While the housing may offer services for a particular type of disability, no otherwise eligible individuals with disabilities or families including an individual with a disability, who may benefit from the services provided may be excluded on the grounds that they do not have a particular disability.

Units of general local government and nonprofit organizations shall make it known that facilities and services supported by federal funds are available to any person (who otherwise meets the eligible criteria for the program) in accordance with the Equal Access Rule (24 CFR 5.105(a)(2)) which prohibits discriminatory eligibility determinations in HUD-assisted or HUD-insured housing programs based on actual or perceived sexual orientation, gender identity, or marital status, including any programs funded by the CoC, ESG and HOPWA Programs.

### Prohibition Against Involuntary Family Separation

In accordance with HUD FAQ ID 1529 and 24 CFR 578.93(e), any group of people that present together for assistance and identify themselves as a family, regardless of age or relationship or other factors, are considered to be a family and must be served together as such. Providers cannot discriminate against a group of people presenting as a family based on the composition of the family, the age of any members of the family, the disability status of any members of the family, marital status, actual or perceived sexual orientation, or gender identity. Further, the age and gender of a child under age 18 must not be used as a basis for denying any family's admission.

### Affirmative Outreach & Marketing

In accordance with 24 CFR 578.93(c) and 576.407(b), all federal funded providers must make known that use of the facilities, assistance, and services are available to all on a nondiscriminatory basis. If it is unlikely that the procedures that the provider intends to use to make known the availability of the facilities, assistance, and services will reach persons of any particular race, color, religion, sex, age, national origin, familial status, or disability who may

qualify for those facilities and services, the provider must establish additional procedures that ensure that those persons are made aware of the facilities, assistance, and services. The provider must take appropriate steps to ensure effective communication with persons with disabilities including, but not limited to, adopting procedures that will make available to interested person's information concerning the location of assistance, services, and facilities that are accessible to persons with disabilities. Consistent with Title VI and Executive Order 13166, providers are also required to take reasonable steps to ensure meaningful access to programs and activities for limited English proficiency (LEP) persons.

Providers will market their program in an ongoing effort to assure that potential participants who are least likely to access the program, (without regard to race, color, national origin, sex, religion, familial status, sexual orientation, and disability) have access to the program. Providers will develop, and document efforts, to follow a written strategy to provide public notice and conduct outreach to educate those least likely to access resources. At a minimum, affirmative marketing strategies will include efforts to communicate information regarding services and resources available through the program, eligibility requirements, and information about the CES and how the program participates in the CES.

### Environmental Review

In accordance with 24 CFR 578.31(a), an environmental review will be completed every 5 years to demonstrate there are no hazardous materials present that could affect the health and safety of the occupants. All CoC activities are subject to environmental review under HUD's environmental regulations in 24 CFR part 58. The provider, or any contractor of the provider of CoC funds, may not acquire, rehabilitate, convert, lease, repair, dispose of, demolish, or construct property for a CoC program, or commit or expend HUD or local funds for CoC eligible activities, until an environmental review under 24 CFR part 58 has been performed. In accordance with 24 CFR 576.407(d), ESG participants must follow environmental responsibilities.

### Housing Quality Standards

In accordance with 24 CFR 578.75(b), housing leased with Continuum of Care program funds, or for which rental assistance payments are made with Continuum of Care program funds, must meet the applicable housing quality standards (HQS) under 24 CFR 982.401 of this title, except that 24 CFR 982.401(j) applies only to housing occupied by program participants receiving tenant-based rental assistance. Providers must document compliance with this standard by signing and completing a current Housing Quality Standards Inspection Form before the participant or program signs a lease and before the provider administers any CoC rental assistance or services specific to the unit.

Before any assistance will be provided on behalf of a program participant, the recipient, or subrecipient, must physically inspect each unit to assure that the unit meets HQS. Assistance will not be provided for units that fail to meet HQS, unless the owner corrects any deficiencies within 30 days from the date of the initial inspection and the recipient or subrecipient verifies that all deficiencies have been corrected.

In addition, all units must be reinspected at least annually during the grant period to ensure that the units continue to meet HQS.

As of December 31, 2023, all applicable CoC housing programs that utilize CoC leasing or rental assistance funds will have a trained staff member who has been trained by a HQS certified instructor. ESG housing programs must follow Habitability Standards as outlined in ESG Policies and Procedures in accordance with 576.403.

### Lead-Based Paint Requirements

All HUD-funded housing programs occupied by program participants are required to incorporate lead-based paint remediation and disclosure requirements. Generally, these provisions require the provider to screen for, disclose the existence of, and take reasonable precautions regarding the presence of lead-based paint in leased or assisted units constructed prior to 1978. CoC-funded programs are required to incorporate the Lead-Based Paint Poisoning Prevention Act (42 U.S.C. 4821-4846), the Residential Lead-Based Paint Hazard Reduction Act of 1992 (42 U.S.C. 4851-4846), and 24 CFR part 35, subparts A, B, H, J, K, M, and R in the unit.

### Child School Enrollment

In accordance with 24 CFR 578.23(c)(4)(iv), all providers will designate a staff person to be responsible for ensuring that children being served in a HUD funded program are enrolled in school and connected to appropriate services in the community, including Title 1, early childhood programs such as Head Start, and parts B and C of the Individuals with Disabilities Education Act. Providers that serve households with children will post publicly, and provide for households with children at intake, notice of education services available within the community, and document efforts to verify that children are enrolled in school and connected to appropriate services at least once annually.

Providers will also take the educational needs of children into account when families are placed in housing and will, to the maximum extent practicable, place families with children as close as possible to their school of origin so as not to disrupt such children's education.

### Reporting of Abuse, Neglect and Exploitation

Every person has the right to be protected from abuse, neglect, or exploitation. Whenever abuse, neglect or exploitation is suspected, a report will be made to the appropriate agency, including but not limited to Adult Protective Services, the Department of Children and Families and/or Law Enforcement. Agencies will establish policies regarding reporting expectations.

### Confidentiality

Participation in the HUD funded programs will be kept confidential by each agency. Personnel will keep each program participant's information confidential, and all records will be securely stored. Unless required by law, the agency will not share any information regarding any program participant without their clear permission and an accompanied signed release detailing the information they would like us to share, the reason for sharing it, and with whom they are granting permission to share it with. Additional consent must be secured before releasing information which will be utilized for purposes other than those previously specified by the

program participant. Program participants have the right to revoke their consent for information sharing at any time.

Agencies are required to have policies stating that program participant records may be available to the following persons or in the following situations without consent, if applicable:

1. Program funders auditing the program for compliance
2. Judicial orders or court subpoenas
3. Licensing and accrediting of the agency by City, State and Federal officials.

If participant files are kept electronically, the agency must establish and maintain a protection of electronic data policy which includes but isn't limited to data stored, minimizing risk of unauthorized or inappropriate use/disclosure, usernames/passwords, and the compliance with all federal, state, and other applicable laws.

### Participation in Homeless Management Information System (HMIS)

Bitfocus Human Clarity Services is the Homeless Management Information System (HMIS) used by the KS BoS CoC to capture client-level information over time on the characteristics and service needs of men, women, and children experiencing homelessness or at risk of homelessness. It is designed to aggregate client-level data to generate an unduplicated count of clients served within the continuum. Uniform, longitudinal data is necessary to understand the extent and scope of homelessness in the KS BoS CoC and across the country. BitFocus provides the KS BoS CoC with a tool to collect and analyze client level data on people participating in homeless service programs. By allowing the KS BoS CoC to accurately calculate the size and needs of the homeless population, as well as the outcomes of specific interventions, BitFocus provides a means for tracking service and demand for homeless programs and understanding where improvements need to be made.

Information gathered from BitFocus is used to target limited resources and inform continuum planning and policy decisions. Within each region and across the KS BoS CoC, BitFocus provides the following important benefits at the client, program, and systems level:

- Front-line service staff can provide faster, more effective services to clients through streamlined referrals, benefits eligibility, and coordinated case management,
- Agency administrators can better manage operational information through access to a variety of agency, program, and client-level reports,
- Policymakers and advocates can make informed decisions by having access to system-wide data describing the extent and nature of homelessness and a greater understanding of service usage, effectiveness, and gaps.

All federal partner funded providers are required to participant and utilize HMIS in accordance to 24 CFR 578.7(b). Victim Service Providers (VSPs) receiving ESG or CoC funds are required by 24 CFR 576.400(f) and 580.32(d) to use a comparable database that meets all HUD standards for HMIS and provides for security, data quality, and privacy. For further operating standards, refer to the HMIS Policies & Procedures, HMIS Data Quality Standards, and HMIS Governance Charter located at <https://www.kshomeless.com/hmis1>.

## Participation in the Coordinated Entry System (CES)

Coordinated Entry System (CES) is a statewide process for facilitating access to Continuum of Care and Emergency Solutions Grants (ESG) resources, designated for individuals and families experiencing homelessness. The CES process is described in the KS BoS CoC CES Policies and Procedures located at [www.kshomeless.com](http://www.kshomeless.com).

The Kansas Statewide Homeless Coalition (KSHC) serves as the Lead Agency for the Coordinated Entry System (CES), has staff dedicated to the operation of the system, and provides oversight for the KS BoS CoC's use of the CES, ensuring system coordination among emergency shelters, essential service providers, homelessness prevention providers, transitional housing providers, permanent housing providers, other homeless assistance providers, and mainstream services and housing.

All HUD funded programs are required to participate in the CES (24 CFR 578.7(a)(8) and 24 CFR 578.23(c)(9) and 24 CFR 576.400(d)) and abide by the KS BoS CoC Coordinated Entry System Policies and Procedures.

## Reports

In accordance with 24 CFR 578.103(e), CoC providers must collect and report data on its use of Continuum of Care funds in an Annual Performance Report (APR), as well as in any additional reports as and when required by HUD and the KS BoS CoC. Projects receiving grant funds only for acquisition, rehabilitation, or new construction must submit APRs for 15 years from the date of initial occupancy or the date of initial service provision, unless HUD provides an exception under § 578.81(e).

Sub-recipients with HUD funding received through the ESG Program are required to submit a Consolidated Annual Performance and Evaluation Report (CAPER) to KHRC annually. Data collection for the ESG portion of the CAPER is aligned with the most recent version of the HMIS Data Standards. Beginning in October 2017, ESG sub-recipients may submit their accomplishment data in the Sage HMIS Reporting Repository (Sage). Project reports (Comma Separated Value (CSV) downloads) generated by HMIS or comparable databases can be uploaded directly into Sage.

## Housing Inventory Count (HIC)

The Housing Inventory Count collects information about all of the beds and units in each Continuum of Care homeless system, categorized by five program types. HUD-funded agencies are required to participate in the HIC and the CoC strongly encourages non-HUD funded entities to participate.

- Emergency Shelter: Total number of emergency shelter beds and units that are designated to serve people who are homeless and are recognized as part of the formal homeless system.
- Transitional Housing: Total number of transitional housing beds and units designated to serve people who are homeless and are recognized as part of the formal homeless system.

- Safe Haven: Total number of Safe Haven beds and units that satisfy HUD’s standards, as identified in the 2009 NOFA.
- Rapid-Rehousing: Total number of rapid re-housing beds and units.
- Permanent Supportive Housing: Total number of permanent supportive housing beds and units.

The Housing Inventory Count also includes information about unmet need.

### Point-In-Time (PIT) Count

The Point-in-Time Count provides a count of sheltered and unsheltered homeless persons from either the last biennial count or a more recent annual count. HUD-funded agencies are required to participate in the PIT and the CoC strongly encourages non-HUD funded entities to participate. Counts are based on:

- Number of persons in households without children;
- Number of persons in households with at least one adult and one child; and
- Number of persons in households with only children. This includes only persons age 17 or under, including unaccompanied children, adolescent parents and their children, adolescent siblings, or other household configurations composed only of children.

Counts are further broken down into subpopulation categories including counts of persons who are chronically homeless, persons with severe mental illness, chronic substance abusers, veterans, persons with HIV/AIDS, and victims of domestic violence.

### Termination of Assistance

Providers may terminate assistance to participants who violate program requirements as outlined below, in accordance with 24 CFR 576.402 (a)(b)(c) and 24 CFR 578.91.

If a program participant violates written program requirements, the provider may terminate assistance in accordance with a formal process established by the provider that recognizes the rights of individuals affected. The provider 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.

When terminating rental assistance or housing relocation and stabilization services, the required formal process shall minimally consist of:

- A written notice to the program participant containing a clear statement of the reasons for termination; and
- A review of the decision, in which the program participant is given the opportunity to present written or oral objections before a person other than the person (or a subordinate of that person) who made or approved the termination decision; and
- Prompt written notice of the final decision to the program participant.

Termination does not bar the provider from administering further assistance at a later date to the same household.

## Standardized Grievance & Appeal Process

CoC providers must create a formal standardized grievance and appeal process, which they must incorporate in their internal policy and procedures and at a minimum include:

- An established escalation process if no resolution is found through initial efforts; and
- A designated grievance liaison within the agency; and
- A standard grievance form that can be filled out and returned to a grievance liaison; and
- Participants are informed of their right to file a grievance at initial intake; and
- Participants are provided with notice of their right to contact the agency's Director, the CoC Lead, ESG program manager and/or HUD to include contact information; and
- Notice that services will not be denied based on complaints or grievances.

ESG providers must follow the established ESG Appeal Process as determined by the ESG Handbook [here](#).

For HMIS Complaints: <https://www.kshomeless.com/hmis-grievance.html>

For CES Complaints: Coordinated Entry Committee via [seggert@kshomeless.com](mailto:seggert@kshomeless.com)

For CoC Agency Complaints: The CoC lead will receive any grievance against a CoC member agency and bring that for review and resolution at the CoC Steering Committee meeting.

If the grievance is against the CoC Lead, the grievance will go directly to the CoC Steering Chair.

## Homeless Representation

In accordance with 24 CFR 578.103 (13) and 578.75(g), providers must ensure that not less than one homeless individual or formerly homeless individual participates on the board of directors or other equivalent policymaking entity of the agency, to the extent that the entity considers and makes policies and decisions regarding any facilities, services, or other assistance that receive funding under the Continuum of Care grant.

If the provider is unable to meet requirements outlined in the above paragraph, it must instead develop and implement a plan, to consult with homeless or formerly homeless individuals in considering and making policies and decisions regarding any facilities, services, or other assistance that receive funding under Continuum of Care grant.

To the maximum extent practicable, the provider must involve homeless individuals and families in constructing, renovating, maintaining, and operating facilities assisted under CoC, in providing services assisted under CoC, and in providing services for occupants of facilities assisted under CoC. This involvement may include employment or volunteer services.

(For funding streams other than Continuum of Care Grant, please check with your funder for details regarding homeless representation requirements)

## Program Intake Procedures

CoC, ESG, SSVF, RHY and PATH Programs in the KS BoS CoC must collect and enter all of the HMIS data elements as required by HUD HMIS data standards. HMIS program specific intake forms are available at [www.kshomeless.com](http://www.kshomeless.com). Non-HUD funded programs integrated into HMIS may be required to utilize the approved intake forms located at [www.kshomeless.com](http://www.kshomeless.com).

HUD funded Victim Service Providers (VSP's) must collect and enter all of the HMIS data elements as required by HUD HMIS data standards into an HMIS comparable database. HMIS program specific intake forms are available at [www.kshomeless.com](http://www.kshomeless.com).

Programs may delay intake procedures if the participant is unable to provide informed consent. The participant must be able to understand what she/he consents to and demonstrate the ability to choose to participate or not in the program (reasonable steps must be taken to understand their attempt at communication). The agency should assist the participant in receiving immediate emergency (i.e., medical, treatment, etc.) assistance or referrals as applicable and schedule another time/date to complete the intake.

Agencies must present the participant with information at intake regarding their rights, the program policies, the agency grievance procedures, the length of time they have to find housing and potential reasons for termination.

## Case Management

The CoC and ESG program regulations specify what is required in terms of provision of supportive services for each program component as well as what services program participants are required to engage in. All ESG and CoC Program-funded supportive services must be necessary to assist program participants to obtain and maintain housing. (§ 578.53(a)(1), § 576.103, and § 576.104).

## CoC Supportive Services

**Permanent Supportive Housing (PSH):** In PSH, supportive services that are designed to meet the needs of program participants must be made available for the entire duration that a program participant is residing in the housing. (§ 578.53(a)(2)).

**Rapid Re-housing (RRH):** Program participants receiving RRH assistance must agree to meet with a case manager at least once a month (§ 578.37(a)(1)(ii)(F)). RRH rental assistance cannot exceed 24 months, but supportive services to RRH participants can be provided for up to six months after the rental assistance ends.

The maximum length of time a program participant may receive RRH rental assistance through ESG and/or CoC is 24 months during any 3-year period. Agencies should review the move in date information in the program enrollment to determine the appropriate length of previously provided rental assistance or service history as available.

**Transitional Housing (TH):** Services must be made available to residents throughout the duration of their residence in the project (§ 578.53(a)(1)). The housing assistance in transitional

housing cannot exceed 24 months, but supportive services to TH participants can be provided for up to six months after the participant has moved into permanent housing.

**Supportive Services Only (SSO):** Through the SSO program component, projects provide services to homeless individuals and families for whom the recipient or subrecipient is not providing housing or housing assistance. Typically, the recipient or subrecipient conducts outreach to people living on the street, provides services at a drop-in center or emergency shelter, or provides services to residents of homeless assistance projects that are operated by other providers (§ 578.53).

## ESG Supportive Services

The ESG Program regulations specify which costs are eligible for each program component. Provision of ESG services is intended to be provided as part of a system wide approach. Service requirements vary depending upon the type of assistance being provided.

**Street Outreach and Emergency Shelter § 576.101(a) and § 576.102(a):** The intention of street outreach and emergency shelter services are to provide essential services necessary to reach out to unsheltered people, shelter and help program participants obtain and maintain housing. Street outreach and emergency shelter programs provide essential services thus program participants are not obligated to participate in case management in order to receive services.

**Rapid Re-housing and Homelessness Prevention (§ 576.103 and § 576.104):** The intention of RRH and Homelessness prevention services are to help the program participant either regain stability in their current housing or move as quickly as possible into permanent housing and achieve stability in that housing. Thus, program participants must meet with a case manager not less than once a month while they are receiving ESG assistance. (§ 576.01(e)(1)(i)).

- *ESG Requirements for Case Management to Help Ensure Housing Stability: Rapid Re-Housing and Homelessness Prevention Assistance*
- *Applicable Requirements for Rental Assistance and Housing Relocation and Stabilization Services Matrix*

The maximum length of time a program participant may receive RRH rental assistance through ESG and/or CoC is 24 months during any 3-year period. Agencies should review the move in date information in the program enrollment to determine the appropriate length of previously provided rental assistance or service history as available.

## Required Participation

ESG and CoC recipients are allowed flexibility in designing their programs, which means they have the discretion to establish their own policies regarding requiring participation in services. While there is no statutory or regulatory prohibition against providers setting reasonable standards regarding such policies, recipients should carefully consider whether requiring participation in a particular service is aligned with the recipient's priorities (e.g., Housing First) or could result in an unjustified disparate impact or discriminatory effect, which is a violation of the Fair Housing Act even when the provider had no intent to discriminate (e.g., under a drug testing/sobriety policy or practice). CoC and ESG recipients and subrecipients may not require

any program participant to participate in supportive services (or be compliant with medications they are prescribed) that are related to the participant's disability.

However, if the purpose of the project is to provide substance abuse treatment services, ESG and CoC Program recipients and subrecipients may require program participants to take part in substance abuse treatment services as a condition of continued participation in the program. Under the CoC Program, if the purpose of the project is not targeted to people with substance abuse histories, then the project may not require participation in substance abuse treatment services.

ESG-funded Rapid Re-housing (RRH) and Homelessness Prevention (HP) projects and CoC-funded RRH projects must require the program participant to meet with a case manager not less than once per month to assist the program participant in ensuring long-term housing stability (§ 578.37(a)(1)(ii)(F) and § 576.01(e)(1)(i)). ESG and CoC Program requirements do not provide additional requirements as to where or how these meetings take place. Therefore, the monthly case management meetings could take place in the program participant's home or the meetings could take place elsewhere, such as an office location, over the phone or virtually.

If following a Housing First approach, it is acceptable to require all program participants to meet with a case manager, but it is not acceptable to require participation in supportive services. It is important to note that the purpose of any case management should be to engage the program participant. Additionally, a program participant must not be evicted from, or terminated from, the program for failure to meet with the case manager. (*See Housing First section for more information*)

## Housing Placement

Agencies are required to provide housing placement assistance to the maximum extent possible including but not limited to securing safe, decent, affordable housing, helping clients understand their rights/responsibilities in relation to eviction and advocating for participants with landlords for fair treatment. Documentation of these efforts must be recorded within case notes.

Agencies may terminate clients if there has been 60 days of no contact and documented efforts on behalf of the agency has been made to reestablish contact.

## Housing Stability Plan

Each agency has the flexibility to design or utilize any type of plan, assessment, or tool to determine and assist in a program participant's housing stability during the program and plans for exiting clients successfully. These plans must include **at a minimum** the assessment of income, education, financial overview/budget, employment, basic needs, healthcare (physical/mental), mainstream benefits, childcare/education, support systems, and safety. Agencies will conduct a reassessment at a minimum of once every 6 months.

At reassessment, if the participant's portion of rent is equal or above their rent total, they no longer need rental assistance. Supportive services may continue for the allowable timeframe, but rental assistance must end with a 30 day notice.

## Record Keeping Requirements

In accordance with 24 CFR 578.103, providers must establish and maintain sufficient records to enable HUD to determine whether the recipient and its subrecipients are meeting the requirements of this part, including:

- Continuum of Care Records maintained by the collaborative applicant (24 CFR 578.103(a)(1))
- Homeless and chronically homeless status as set forth in 24 CFR 576.500(b) and 578.3 as further described in the section, “Documenting Homelessness for Program Eligibility” of this document.
- At risk of homelessness status as set forth in 24 CFR 576.500(c).
- Moves for victims of domestic violence, dating violence, sexual assault and stalking (24 CFR 578.103(a)(6))
- Annual Income (24 CFR 578.103(a)(7))
- Program Participant Records such as annual assessment, documentation of case management services and if applicable compliance with the termination of assistance. (24 CFR 578.103(a)(8))
- Housing Standards (24 CFR 578.103(a)(9))
- Services Provided (24 CFR 578.103(a)(10))
- Match Documentation (24 CFR 578.103(a)(11))
- Conflicts of Interest (24 CFR 578.103(a)(12))

## Record Retention

In accordance with 24 CFR 578.103(c), all records pertaining to Continuum of Care funds must be retained for the greater of 5 years or the period specified below. Copies made by microfilming, photocopying, or similar methods may be substituted for the original records.

(1) Documentation of each program participant's qualification as a family or individual at risk of homelessness or as a homeless family or individual and other program participant records must be retained for 5 years after the expenditure of all funds from the grant under which the program participant was served; and

(2) Where Continuum of Care funds are used for the acquisition, new construction, or rehabilitation of a project site, records must be retained until 15 years after the date that the project site is first occupied, or used, by program participants.

## Categories of Homelessness

Criteria for Defining Homelessness		
<b>Category 1</b>	Literally Homeless	(1) Individual or family who lacks a fixed, regular, and adequate nighttime residence, meaning: <ul style="list-style-type: none"> <li>(i) Has a primary nighttime residence that is a public or private place not meant for human habitation.</li> <li>(ii) Is living in a publicly or privately operated shelter designated to provide temporary living arrangements (including congregate shelters, transitional housing, and</li> </ul>

		hotels and motels paid for by charitable organizations or by federal, state and local government programs); or (iii) Is exiting an institution where (s)he has 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
<b>Category 2</b>	Imminent Risk of Homelessness	(2) Individual or family who will imminently lose their primary nighttime residence, provided that: (i) Residence will be lost within 14 days of the date of application for homeless assistance; (ii) No subsequent residence has been identified; and (iii) The individual or family lacks the resources or support networks needed to obtain other permanent housing
<b>Category 3</b>	Homeless under other Federal statutes	(3) Unaccompanied youth under 25 years of age, or families with Category 3 children and youth, who do not otherwise qualify as homeless under this definition, but who: (i) Are defined as homeless under the other listed federal statutes; (ii) Have not had a lease, ownership interest, or occupancy agreement in permanent housing during the 60 days prior to the homeless assistance application; (iii) Have experienced persistent instability as measured by two moves or more during in the preceding 60 days; and (iv) Can be expected to continue in such status for an extended period of time due to special needs or barriers
<b>Category 4</b>	Fleeing or Attempting to Flee Domestic Violence	(4) Any individual or family who: (i) Is fleeing, or is attempting to flee, domestic violence; (ii) Has no other residence; and (iii) Lacks the resources or support networks to obtain other permanent housing

**Documenting Homelessness for Program Eligibility**

For literal homelessness status at time of intake, documentation must show that the applicant was literally homeless. HUD has established additional specific record-keeping requirements and standards for documenting homelessness status for current literal homelessness, and chronic homelessness that are outlined below.

<b>Recordkeeping Requirements for Each Category</b>		
<b>Category 1</b>	Literally Homeless	<ul style="list-style-type: none"> <li>• Written observation by the outreach worker; <u>or</u></li> <li>• Written referral by another housing or service provider; <u>or</u></li> <li>• Certification by the individual or head of household seeking assistance state that (s)he was living on the streets or in shelter:</li> </ul>

		<ul style="list-style-type: none"> <li>• For individuals exiting an institution – one of the forms of evidence above <u>and</u>: <ul style="list-style-type: none"> <li>○ Discharge paperwork or written/oral referral, <u>or</u></li> <li>○ Written record of intake worker’s due diligence to obtain above evidence and certification by individual that they exited an institution.</li> </ul> </li> </ul>
<b>Category 2</b>	Imminent Risk of Homelessness	<ul style="list-style-type: none"> <li>• A court order resulting from an eviction action notifying the individual or family that they must leave; <u>or</u></li> <li>• For individual and families leaving a hotel or motel – evidence that they lack the financial resources to stay; <u>or</u></li> <li>• A documented and verified oral statement; and</li> <li>• Certification that no subsequent residence has been identified; <u>and</u></li> <li>• Self-certification or other written documentation that the individual lack the financial resources and support necessary to obtain permanent housing.</li> </ul>
<b>Category 3</b>	Homeless under other Federal statutes	<ul style="list-style-type: none"> <li>• Certification by the nonprofit or state or local government that the individual or head of household seeking assistance met the criteria of homelessness under another federal statute; <u>and</u></li> <li>• Certification of no PH in the last 60 days; <u>and</u></li> <li>• Certification by the individual or head of household, and any available supporting documentation, that (s)he has moved two or more times in the past 60 days; <u>and</u></li> <li>• Documentation of special needs or 2 or more barriers.</li> </ul>
<b>Category 4</b>	Fleeing or Attempting to Flee Domestic Violence	<ul style="list-style-type: none"> <li>• For victim service providers: <ul style="list-style-type: none"> <li>○ An oral statement by the individual or head of household seeking assistance which states: they are fleeing; they have no subsequent residence; and they lack resources. Statement must be documented by a self-certification or a certification by the intake worker.</li> </ul> </li> <li>• For non-victim service providers: <ul style="list-style-type: none"> <li>○ Oral statement by the individual or head of household seeking assistance that they are fleeing. This statement is documented by a self-certification or by the caseworker. Where the safety of the individual or family is not jeopardized, the oral statement must be verified; and</li> <li>○ Certification by the individual or head of household that no subsequent residence has been identified; and</li> <li>○ Self-certification, or other written documentation, that the individual or family lacks the financial resources and support networks to obtain other permanent housing.</li> </ul> </li> </ul>

### Disability Definition and Documentation

The term 'homeless individual with a disability' means an individual who is homeless, as defined in § 103 of the McKinney-Vento Homeless Assistance Act, and has a disability that:

- Is expected to be long-continuing or of indefinite duration;
- Substantially impedes the individual's ability to live independently;
- Could be improved by the provision of more suitable housing conditions; and
- Is a physical, mental, or emotional impairment, including an impairment caused by alcohol or drug abuse, post-traumatic stress disorder, or brain injury?
- Is a developmental disability, as defined in section 102 of the Developmental Disabilities Assistance and Bill of Rights Act of 2000 (42 U.S.C. 15002); or
- Is the disease of acquired immunodeficiency syndrome or any condition arising from the etiologic agency for acquired immunodeficiency syndrome.

Programs must document that a participant has a qualifying disability at program intake using one of the following:

- Written verification by a professional licensed to diagnose and treat the qualifying disability; or
- Written verification from the Social Security Administration, which may include an award/benefit verification letter that specifies that benefits were awarded for a disability; or
- The receipt of a current disability check, where an SSDI or Veteran Disability check establishes a disability with no further clarification needed, but an SSI check must clarify that it is for a disability; or
- If one of the above is not available at intake, a documented observation made by the person determining eligibility, known as an "intake worker observation," where additional documentation in the form of written verification by a licensed professional, written verification from the social security administration, or the receipt of a current disability check is also obtained within 45 days of program intake.

Note: Medical records or treatment plans do not qualify as appropriate documentation of a disability and should therefore not be used in determining the eligibility of an applicant.

### Chronic Homelessness Definition and Documentation

The definition of chronically homeless is:

- A homeless individual with a disability as defined in section 401(9) of the McKinney-Vento Assistance Act (42 U.S.C. 11360(9)), who:
- Lives in a place not meant for human habitation, a safe haven, or in an emergency shelter, and
- Has been homeless and living as described for at least 12 months or on at least 4 separate occasions in the last 3 years, as long as the combined occasions equal at least 12 months and each break in homelessness separating the occasions included at least 7 consecutive nights of not living as described.

- An individual who has been residing in an institutional care facility for less, including jail, substance abuse or mental health treatment facility, hospital, or other similar facility, for fewer than 90 days and met all of the criteria of this definition before entering that facility; or
- 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 of this definition, including a family whose composition has fluctuated while the head of household has been homeless.

HUD does not require documentation showing that an applicant is literally homeless for every day of the 12 months used to determine eligibility for chronic homelessness. One documented day within a calendar month is enough to establish homelessness for that entire calendar month, unless there is documentation showing that the applicant had a break in literal homelessness during that month.

#### *Documenting Breaks in Homelessness*

When documenting episodic chronic homelessness, any breaks in literal homelessness need to be documented and all breaks can be documented using self-certification by the applicant. A minimum of three separate breaks must be documented in the file, in order to establish episodic chronic homelessness.

#### *Order of Priority for Collecting Eligibility Documentation*

HUD has established an “Order of Priority” for documenting literal homelessness. This order of priority establishes guidelines for how program staff should prioritize different forms of documentation, with attempts to collect higher-priority documentation before moving on to lower-priority documentation. Reasonable efforts should be made to follow the order of priority established by HUD. The order of priority is as follows:

1. Third Party Verification – Intake staff should make a reasonable effort to obtain third party documentation for current literal homelessness and for all 12 months showing chronic homelessness. For months that cannot be covered by third party documentation, the effort to do so should be recorded as due diligence.
  - a. Homeless Management Information Record to establish Shelter Stays
  - b. Third Party Verification provided by a housing or service provider or institutional documentation
  - c. Third Party Verification provided by a community member that does not have a personal relationship with the applicant.
  - d. Third Party Verification provided by a community member that has a personal relationship with the applicant.
2. Intake Worker Observation – Where applicable, intake worker observation should take priority over self-certification of literal homelessness.
3. Self-Certification – For any month that the applicant must document literal homelessness because third-party verification or intake-worker observation is not available, the applicant must provide self-certification of their living situation during that month.

4. All 12 months used to establish chronic homelessness, must be covered by one of the following: third party verification, intake worker observation, or self-certification by applicant.

#### *Institutional Records*

Institutions, such as hospitals or prisons, can provide official records that confirm institutional stays or literal homelessness at time of intake. If an individual qualifies as chronically homeless because he or she has been residing in an institutional care facility for less than 90 days and was living in a shelter or place not meant for human habitation immediately prior to entering the institutional care facility, evidence must include one of the following:

- Discharge paperwork or a written or oral referral from a social worker, case manager, or other appropriate official of the institutional care facility stating the beginning and end dates of the time residing in the institutional care facility. All oral statements must be recorded by the intake worker; or
- Where the evidence listed above is not obtainable, a written record of the intake worker's due diligence in attempting to obtain that evidence and certification by the individual seeking assistance that states that he or she resided for fewer than 90 days; and third-party verification or self-certification that the individual was living in a shelter or place not meant for human habitation immediately prior to entering the institutional care facility.

#### *Verification by a Housing or Service Provider or a Community Member*

Third party contacts have different authorization to provide verification, based on their relationship with the applicant.

- Housing and service providers who know the applicant in their professional capacity, such as shelter staff, housing staff from other programs, doctors, teachers, case managers, therapists, or police officers can verify living situations that they see or that they hear about. If they hear about a living situation, they need to clarify that it is their professional opinion that the information is accurate.
- Outreach Workers must physically observe an applicant's living situation to verify current literal homelessness but may provide verification for previous months of homelessness that they either observed or were told about at the time of the encounter.
- Community Members such as shop keepers, volunteers, neighbors, family members or friends may only provide third-party verification for living situations that they physically observed.

Written third party verification must include a printed name, signature, and contact information of the person providing verification. Details of the verification must provide either the specific date or the month for which verification is being provided, exactly where the applicant was residing, the third party's relationship to the applicant, and why the third party is able to provide verification. If the written verification is provided by a housing or service provider, the document should be on letterhead. If verification is being provided because the applicant reported their homelessness status to the housing or service provider, then the verification must include

certification that the provider believes the information to be accurate. Written verification is always preferred over oral verification. There are two circumstances where oral verification is appropriate.

- When it is not possible to obtain written verification.
- When written verification that has already been provided is not complete, and requesting updated written verification is burdensome, program staff can document oral conversations where they obtained clarification about the details of the third-party's encounter with the applicant.

## **Participant Program Files**

Agencies will ensure that the following documentation are kept within each program participant file:

- Documentation providing proof that participant is entered into HMIS or a comparable database in accordance with 24 CFR 578.103(a)(3).
- Documentation providing proof that participant was screened and referred via the coordinated entry system in accordance with 24 CFR 578.23(c)(9).
- Documentation of homelessness at intake in accordance with 24 CFR 578.103(a)(3).
- Documentation of ongoing assessment of services in accordance with 24 CFR 578.75(e).
- Documentation of examination of income (initial and recertification) in accordance with 24 CFR 578.103(a)(7)(i).
- Documentation of initial and follow-up Housing Quality Standards inspections (or Habitability standards for ESG) in accordance with 24 CFR 578.75(b)(2).
- For Leasing Assistance - Rents charged (including utilities) do not exceed HUD-Fair Market Rents in accordance with 24 CFR 578.49(b)(2).
- Documentation supporting the correct/current utility allowance schedule is used in accordance with 24 CFR 578.103(a)(17) and 24 CFR 578.49(a)(3).
- For Rental Assistance - Documentation that the participant has an executed lease agreement with the landlord in accordance with 24 CFR 578.77 and 24 CFR 578.51(d)(e).
- For Rental Assistance - Documentation of rent reasonableness for the period of approval for an assisted unit in accordance with 24 CFR 578.51(g).

For programs with leasing assistance, ensure that the following is documented:

- Documentation that the unit/structure is not owned by recipient or subrecipient in accordance with 24 CFR 578.49(a).
- Documentation lease is between agency and landlord in accordance with 24 CFR 578.49(b)(5).
- Documentation of an occupancy agreement, lease or sublease in the file (for individual units) in accordance with 24 CFR 578.103(a)(17).
- Documentation of rent reasonableness for the period of approval for an assisted unit in accordance with 24 CFR 578.49(b)(1).

- Documentation of occupancy charges with annual income calculations in accordance with 24 CFR 578.77 and 24 CFR 578.99(b)(6).

## **Annual Training Requirements**

All agencies a part of the Continuum of Care including CoC-funded, ESG-funded, SSVF, RHY and PATH must have a representative within their agency participant in CoC required trainings when they are offered. Each training will provide information on the required frequency of the training. These trainings include but are not limited to:

### ***Required Trainings:***

- CoC NOFO Training (required for all CoC-funded renewal and potential new CoC-funded agencies)
- HMIS Training (required for HMIS participating agencies)
- CES Training (required for CES participating agencies)
- HIC/PIT Training (all housing service providers in the CoC required)
- Housing First Training: Only agencies determined as Housing First agencies are required to attend this training. Agencies must provide documentation of housing first training if completed through another federal partner.

### ***Optional Trainings:***

- Domestic Violence and Survivor Training
- Housing First Training
- Motivational Interviewing Training
- Trauma Informed Care
- Equity Training
- Fair Housing Training
- Equal Access Training
- Homeless Diversion Training

Agencies will be monitored for participation in provided CoC trainings. The CoC lead will be responsible for maintaining documentation of participation.

## **Housing First Policies**

For current and prospective HUD-funded programs that adopt a Housing First approach, the following policies are applicable. Refer to the HUD Housing First Assessment Tool for additional details.

The Housing First approach has three parts.

1. Low Barrier Access:
  - a. Admission to programs is not contingent on pre-requisites such as abstinence of substances, minimum income, health/mental health history, medication adherence, age, criminal justice history, financial history, completion of treatment, participation in services, history or occurrence of victimization,

survivor of sexual assault or an affiliated person of such a survivor, being deemed “housing ready” or other unnecessary conditions unless required by law or funding source.

- b. Equal Access to programs as described in the [Equal Access Rules](#).
  - c. Programs have expedited admission processes, to the greatest extent possible, including helping participants obtain documentation required by funding sources.
  - d. Intake processes are person-centered and flexible.
  - e. Programs actively participate in the CoC-designated CES processes as part of the streamlined community-wide system access and triage. Referral from Coordinated Entry are rarely rejected, and only if there is a history of violence against staff, the participant does not want to be in the program, there are legally valid grounds (such as restrictions regarding sex offenders) or some other exceptional circumstance that is well documented.
  - f. This approach is guided by the belief that people need basic necessities like food and a place to live before attending to anything less critical. This approach does not prohibit programs from targeting populations deemed by HUD and KS BoS CoC to warrant prioritization.
2. Leases:
- a. Housing is considered permanent and is not time-limited (though rent assistance may be) and leases are automatically renewable upon expiration, except with prior notice by either party.
  - b. A program participant has, at minimum, choices in deciding the location and type of housing based on preferences from a range of housing types and among multiple units, as available and as practical.
  - c. Leases do not have any provisions that would not be found in leases held by any other tenant in the property or building and is renewable per the participants’ and owner’s choice. People experiencing homelessness who receive help moving into permanent housing should have leases that confer the full rights, responsibilities, and legal protections under federal, state, and local housing laws. For transitional housing, there may be limitations on length of stay, but a lease/occupancy agreement should look like a lease that a person would have in the normal rental market.
  - d. Participants are given access to legal assistance and encouraged to exercise their full legal rights and responsibilities. Landlords and providers abide by their legally defined roles and responsibilities.
  - e. The program incorporates a culture of eviction avoidance, reinforced through practices and policies that prevent lease violations and evictions and only evict participants only when they are a threat to self or others. Clear eviction appeal processes and due process is provided for all participants.
  - f. Lease bifurcation is allowed so that a tenant or lawful occupant who is the victim of a criminal act of physical violence committed against them by another tenant or lawful occupant is not evicted, removed or penalized if the other is evicted.

- g. Programs engage in continued effort to hold housing for participants, even if they leave their housing for short periods due to treatment, illness, or any other temporary stay outside of the unit.
  - h. While tenants are accountable to the rental agreements, programs can provide adjustments on a case-by-case basis. As necessary, participants are given special payment arrangements for rent arrears and/or assistance with financial management, including representative payee arrangements.
3. Low Barrier Participation Requirements:
- a. Programs promote participant choice in services.
  - b. Person-centered planning is a guiding principle of the service planning process.
  - c. Service support is as permanent as the housing.
  - d. Services are continued despite change in housing status or placement.
  - e. Participant engagement is a core component of service delivery.
  - f. Services are culturally appropriate with translation services available, as needed.
  - g. Staff are trained in clinical and non-clinical strategies (including harm reduction, motivational interviewing, trauma-informed approaches, and strength-based.)
  - h. Housing is not dependent on participation in services. Outside of Rapid Re-housing programs which require monthly case management, programs should not universally mandate participation and are encouraged to carefully evaluate on a case-by-case basis the necessity, benefits and drawbacks that mandated participation may have on important outcomes. Programs must review and adhere to the annual HUD NOFO's instruction on participation mandate permissibility.
  - i. Substance use is not a reason for termination.
  - j. The rules and regulations of the program are centered on participants' rights.
  - k. Participants have the option to transfer to another program.
  - l. Program exit to homelessness are avoided. Programs that exit participants to a homeless situation must utilize the CES process to reconnect the participant to other housing and services.