MARICOPA ASSOCIATION of GOVERNMENTS

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September 14, 2019

TO: Members of the Maricopa Regional Continuum of Care Committee

FROM: Brandi Whisler, Circle the City, Co-Chair

SUBJECT: MEETING NOTIFICATION AND TRANSMITTAL OF TENTATIVE AGENDA

Meeting—9:30 a.m.

Wednesday, September 18, 2019
MAG Office, Second Floor, **Ironwood Room**
302 North 1st Avenue
Phoenix, AZ 85003

The next Maricopa Regional Continuum of Care (CoC) Committee meeting will be held at the time and place noted above. Members of the CoC Committee may attend either in person or by phone. Supporting information is enclosed for your review.

The meeting agenda and resource materials are also available on the MAG website at www.azmag.gov. This location is publicly accessible and does not require a password.

Please park in the garage underneath the building. Bring your ticket to the meeting, parking will be validated. For those using transit, the Regional Public Transportation Authority will provide transit tickets for your trip. For those using bicycles, please lock your bicycle in the bike rack in the garage.

In 1996, the Regional Council approved a simple majority quorum for all MAG advisory committees. If the Continuum of Care Committee does not meet the quorum requirement, members who have arrived at the meeting will be instructed a legal meeting cannot occur and subsequently be dismissed. Your attendance at the meeting is strongly encouraged.

Pursuant to Title II of the Americans with Disabilities Act (ADA), MAG does not discriminate on the basis of disability in admissions to or participation in its public meetings. Persons with a disability may request a reasonable accommodation, such as a sign language interpreter, by contacting the MAG office. Requests should be made as early as possible to allow time to arrange the accommodation.

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City of Apache Junction ▲ Arizona Department of Transportation ▲ City of Avondale ▲ City of Buckeye ▲ Town of Carefree ▲ Town of Cave Creek ▲ City of Chandler ▲ City of El Mirage ▲ Town of Florence
Fort McDowell Yavapai Nation ▲ Town of Fountain Hills ▲ Town of Gila Bend ▲ Gila River Indian Community ▲ Town of Gilbert ▲ City of Glendale ▲ City of Goodyear ▲ Town of Guadalupe
City of Litchfield Park ▲ City of Maricopa ▲ Maricopa County ▲ City of Mesa ▲ Town of Paradise Valley ▲ City of Peoria ▲ City of Phoenix ▲ Pinal County ▲ Town of Queen Creek
Salt River Pima-Maricopa Indian Community ▲ City of Scottsdale ▲ City of Surprise ▲ City of Tempe ▲ City of Tolleson ▲ Town of Wickenburg ▲ Town of Youngtown

Maricopa Regional Continuum of Care Committee

TENTATIVE AGENDA

September 18, 2019

1. Call to Order

2. Call to the Audience

An opportunity will be provided to members of the public to address the Continuum of Care (CoC) Committee on items that are not on the agenda that are within the jurisdiction of MAG, or on items on the agenda for discussion but not for action. Citizens will be requested not to exceed a three minute time period for their comments. A total of 15 minutes will be provided for the Call to the Audience agenda item, unless the Committee requests an exception to this limit. Please note that those wishing to comment on agenda items posted for action will be provided the opportunity at the time the item is heard.

Action Requested:
Information.

3. Approval of the July CoC Committee Meeting Minutes

The draft minutes from the July 17, 2019 CoC Committee meeting were distributed with the meeting materials.

Action Requested:
Approval of the July 17, 2019 CoC Committee Meeting Minutes.

4. Mission Moment

A representative from a homeless services provider will present a "Mission Moment" to highlight the success of a client served by a homeless services project.

Action Requested:
Information and discussion.

5. Updated Rapid Re-Housing (RRH) Standards & Best Practices

The RRH Workgroup met to update the RRH Standards and Best Practices. The group has completed the task and is presenting the updates to the Committee for a recommendation to the Board. Draft language was distributed with the meeting materials.

Action Requested:
Recommend Board Approval of the RRH Standards and Best Practices.

6. VAWA Emergency Transfer Plan

The U.S. Department of Housing and Urban Development (HUD) requires that Continuums of Care adopt protections for victims of domestic violence who are housed in HUD-funded housing. The Committee will consider adopting a recommendation that the Board adopt a community-wide Violence Against Women Act Emergency Transfer Plan. A draft copy of the Emergency Transfer Plan was distributed with the meeting materials.
Information and discussion.

Action Requested:
Recommend Board Approval of the VAWA Emergency Transfer Plan.

7. HMIS Access for Funders

The Data Subcommittee has finalized a policy for HMIS access for funders of homeless services programs. A draft policy was distributed with the meeting materials.

Action Requested:
Feedback on the HMIS Access policy.

8.   **HMIS New Release of Information**

HMIS has updated the community Release of Information form. The new form has been reviewed by the Data Subcommittee. The new ROI was distributed with the meeting materials.

Action Requested:
Feedback on the new HMIS ROI.

9.   **Family Housing Hub Operations Manual**

The Family Housing Hub has updated the Operations Manual and is presenting it to the Subcommittee for the feedback. A draft policy was distributed with the meeting materials.

Action Requested:
Feedback on the Family Housing Hub Operations Manual.

10.   **Request for Future Agenda Items**

Topics or issues of interest that the Maricopa Regional Continuum of Care Committee would like to have considered for discussion at a future meeting will be requested.

Action Requested:
For information.

11.   **Comments from the Committee**

An opportunity will be provided for the Maricopa Regional Continuum of Care Committee members to present a brief summary of current events. CoC

Committee members are not allowed to propose, discuss, deliberate or take action at the meeting on any matter in the summary, unless the specific matter is properly noticed for legal action.

Action Requested:

Information.

Adjournment

Action Requested:
Motion to adjourn the meeting.

MINUTES OF THE
MARICOPA REGIONAL
CONTINUUM OF CARE COMMITTEE
July 17, 2019
MAG Office Building, Ironwood Room

MEMBERS ATTENDING

#Elizabeth da Costa, CBI
Kathy Di Nolfi, A New Leaf
*Alfred Edwards, DES
*Blythe Fitzharris, MMIC
Shane Groen, Arizona Housing Coalition
Irma Hollamby, Housing Authority of
    Maricopa County
Michelle Jameson, U.S. VETS-Phoenix
Sarah Kent, one•n•ten
#Laura Magruder, Maggie's Place
Aaron Raine, City of Mesa Police

#Nikki Ramirez, Chicanos Por La Causa
#Tama Reilly, Arizona State University
*Tyler Rosensteel, CRN
Chela Schuster, UMOM, Co-Chair
*Sara Sims, Phoenix Elementary School
    District
Stefanie Smith, NAC
#Charles Sullivan, ABC
Jacki Taylor, Save the Family
*Keith Thompson, Phoenix Shanti Group
John Wall, AHI
Andy Wambach, Human Services Campus
Brandi Whisler, Circle the City, Co-Chair

*Neither present nor represented by
    proxy.
#Attended by telephone conference call.
^Represented by proxy.

MAG STAFF
Julie Montoya
Maria Piña
Anne Scott

OTHERS PRESENT
Richard DiCarlo, St. Patrick Catholic
    Community
Lisa Glow, CASS
Mike Lopach, City of Scottsdale
Leslie MarNa, House of Refuge
Kayla McGhee, Banner University
Ryan Phillips, City of Mesa
Shane Reed, Maricopa Central Census
    Office
Jana Scott, U.S. Census Bureau
Nicky Stevens, City of Tempe

1. Call to Order and Introductions
   Chela Schuster, UMOM, Co-Chair of the Continuum of Care (CoC) Committee, called the meeting to order. Introductions followed.

2. Call to the Audience
   There were no comments from the audience.

3. Approval of the May 15, 2019 CoC Committee Meeting Minutes
   Kathy Di Nolfi, A New Leaf, moved to accept the May 15, 2019 CoC Committee meeting minutes. Michelle Jameson, U.S. VETS-Phoenix, seconded the motion. The motion passed unanimously.

4. Mission Moment
   Ms. Jameson shared a video produced by Zillow about Ed Welch, U.S. Vets Outreach Worker. The video may be accessed at:
   https://www.youtube.com/watch?v=T87agbVL8SM

   Stefanie Smith, Native American Connections, volunteered to present the mission moment at the next Committee meeting.

5. Community Chronic Homeless Verification Letter
   Andy Wambach, Human Services Campus, presented the Community Chronic Homeless Verification Letter for adoption. The project originated in the Ending Chronic Homelessness Workgroup. Shantae Smith, MAG staff, facilitated meetings around the project.

   As folks are getting prioritized through the Coordinated Entry system, documentation can be a barrier to housing. The community adopted a unified disability form a few months ago to help. This is the second part of that effort to try to speed the amount of time it takes to get people housed. HUD TA reviewed the document and told us it was good to go.

   This should help us speed up the process. We pull HMIS data when we can, but we often have to seek self-certification or third-party certification to document chronic homelessness. Some of our navigators have gone to St. Mary's foodbank to get foodbank worker's statements for some of our clients. A lot of work has gone into this and it should really help our process.

   Sarah Kent, one n ten, noted the gender neutral pronouns and appreciates the use of gender neutral language.

Tama Reilly, ASU, noted some minor grammatical errors. Mr. Wambach asked Ms. Reilly to put those changes in an email and he will make the changes.

Irma Hollamby, Housing Authority of Maricopa County, asked whether the document would follow the person to the housing provider. Mr. Wambach responded that it would.

Mike Lopach, City of Scottsdale, asked if this was something that could help the various public housing agencies for Section 8 preference points documentation. Mr. Wambach responded that he didn't know if it would apply since this is designed for chronic homeless individuals. But to the extent it documents homelessness, it could be helpful to document homelessness even if the person is not experiencing chronic homeless status.

Co-Chair Schuster pointed out that this is a collaboration effort. It will not fall on Coordinated Entry to hand a housing provider a complete package of paperwork necessary for housing. Coordinated Entry will do their best to gather some information, but housing providers will have to partner with Coordinated Entry in compiling documents as well.

Ms. Smith pointed out that someone might have more than one copy in their file. If one case manager is working with a client and hands them off to another agency, the other agency should document their interactions as well. Documents will be uploaded into HMIS so subsequent agencies can see the documentation.

Co-Chair Schuster pointed out that there can be more than one document, but their does not have to be more than one since more than one agency could refer to the document.

Jacki Taylor, Save the Family, moved to approve the Community Chronic Homeless Verification Letter. John Wall, AHI, seconded the motion. The motion passed unanimously.

6. 2020 Census
   Janna Scott, U.S. Census Bureau, introduced Shane Reed, Area Census Office Manager for the Maricopa County Census office. Ms. Scott is a Partnership Specialist with the U.S. Census Bureau working across the state to engage partners for the 2020 Census County.

Why group quarters and transitory locations? People who live in houses and apartments receive an invitation to participate in the Census in a variety of ways. Those that are living in unsheltered situations or group quarters may not receive an invitation. Examples of group quarters are: college dorms, residential treatment programs, shelters, group homes and other situations. The goal of the Census is to count everyone and group quarters and unsheltered homeless are some of the hardest people to count.

Service-based enumeration will be part of the count to try to find people who go to mobile food vans, foodbanks, service providers and others.

Transitory location is where people live in temporary situation. There is a specific enumeration for people living in RV parks, circuses, parks and encampments. Specific teams will be sent out to count these folks. It is important to have a complete count since many sources of federal funding are dependent on the census numbers.

The timeline was presented. Planning efforts are underway now. The enumeration effort will begin in January and will continue through April. This is not a Point in Time count; it is really an effort to count everyone in the area.

Group quarter residents will have the same confidentiality and privacy protections as everyone else.

Questions the community can help us answer. Do you know areas where people experiencing homelessness congregate at night? Are there parking lots that allow people to sleep in their vehicles at night? Are there area employers that house employees in local hotels? Are there churches that will shelter people at night?

Help us by allowing the Census Bureau to set up tables at any gathering or information fairs. Recruit people who are transitioning into stable housing for Census Bureau jobs. The Bureau will be hiring thousands of people for temporary and full-time jobs. Allow us to distribute materials to advertise the Census. Help us by strategizing on where to count people. Assure those that you serve that it is safe to participate.

If you have suggestions on how to answer those people that see a flyer and say "this isn't about me", please give feedback on how we should respond. Everyone deserves to be seen and counted and our future depends on an accurate census both for federal appropriations and apportionment.

More information is available at 2020census.gov. Sign up with a partnership with specialists and you will get automatic updates from the Bureau.

Ms. Jameson commented that they have come to the right spot and that the providers in the room can help.

Mr. Wambach said that the Human Services Campus sees about 800 people experiencing homelessness per day, with 40 providers offering services. Mr. Wambach offered the opportunity to set out a table and also they would be happy to distribute material in the mailroom.

Ms. Scott responded that she would love to meet with Mr. Wambach after the meeting.

Ms. Lisa Glow, CASS, noted that she had the flyers at the shelter and would like to request electronic copies as well.

Richard DiCarlo, St. Patrick Catholic Community, asked if the slides were available.
Mr. Reed responded that the slides are not available, but they would be happy to do a presentation for the St. Patrick Community.

7. <u>The Violence Against Women Act Changes to the Coordinated Entry Policies and Procedures</u>
Anne Scott, MAG, presented on the proposed changes to the Coordinated Entry Policies and Procedures to comply with Violence Against Women Act to provide protections for victims of domestic violence. VAWA requires that communities have in place a plan for addressing people who become victims of domestic violence when in federally-funded housing. Quickly re-housing the victim is included in the policy (per client choice), plans to ensure that the victim continues to have access to safe housing and stipulations for what to do in cases when the victim is not the qualifying party for the housing subsidy have been spelled out.

This is phase one of a three part process. In addition to these changes, the community will need to adopt an emergency transfer plan which will be the next task for the Coordinated Entry Subcommittee. Phase three is training for the community on the policy and how to implement these changes.

For CoC-funded housing providers, there can be an additional responsibility for the qualified party which may be the perpetrator. Provisions are to allow the bifurcation

of leases so that housing providers may continue to offer assistance to the qualifying party as well.

Required documents are hyperlinked in the policies and procedures to assist housing providers in locating the most recent HUD forms and notice of rights for victims.

The most important thing that housing providers need to do is make sure that their clients understand that they do have rights should they experience domestic violence while housed in a federally-assisted unit. Housing providers must document that they have informed the client of their rights by providing the client with HUD Form 5380.

Detective Aaron Raine, City of Mesa Police, asked whether there has been an effort to fold in the state rights that victims have. Co-Chair Schuster responded that it would be a good idea to train victim advocates on the VAWA protections.

Ms. Jameson moved for adoption of the policy. Ms. Taylor seconded. The motion passed unanimously (Ms. da Costa had left the meeting at this time).

8. 2019 PIT Report
   Ms. Scott noted that there had been a change on the agenda, and expressed that the System Performance Measure presentation would be skipped until the arrival of Tyler Rosensteel, CRN.

   Ms. Scott (MAG staff) presented the draft 2019 Point in Time Report. The 2019 Point in Time Report is very different from our previous reports. MAG staff felt that previous reports were too wordy. Most of the verbiage in previous reports repeated the information that was included in the graphics. MAG staff worked with the MAG Regional Analytics Division to create a streamlined report with less verbiage. The report was vetted by the Data Subcommittee and three levels of the Regional Analytics Division. The Point in Time Report is requested by local communities, providers, and others as a measure of homelessness in our community. Numbers are used in grant applications and reports to funders. We all know that the Point in Time is limited and that the data is just one data point. Unfortunately, it is still a major data point and sent to Congress as part of the Annual Homeless Assessment Report.

   Ms. Jameson asked whether those communities that reported zero, does that mean that they did not participate or that really did not find anyone. Ms. Scott responded that the numbers are what is reported by the municipal coordinator.

Co-Chair Schuster appreciated the language about the difficulty of finding families and youth.

Ms. Janna Scott expressed her gratitude for all the effort that goes into the count every year.

Ms. Taylor commended the layout and the work done on the presentation of the data in the report.

Mr. Wambach asked about the number that the sheltered count decreases and whether the loss of shelter beds contributed to that. Ms. Scott responded that in 2018 there were a couple of large shelters that did not report their numbers. Phoenix Dream Center, Gift of Mary did not report their data last year and then came back into the count this year. Then we lost the St. Vincent de Paul beds this year. That makes it difficult to have consistency from year to year and to say definitively that the increase in unsheltered numbers are due to the closure of shelter beds. Going forward we think we will have more consistency with the numbers since we now have HUD guidance that even if the shelters do not report their numbers, if we know that they are still operating, we will estimate the number of beds open.

9. System Performance Measures
   Mr. Rosensteel, Crisis Response Network, did an overview of the System Performance Measures and how the numbers tie it to the NOFA process. The System Performance Measures look at a number of different benchmarks that fall into particular bins. The number of people that are homeless, the number of new people that are homeless, the length of time people experience homelessness, each of those measures, fall into a bin that mirrors the U.S. Interagency Council on Homelessness idea that homelessness should be "rare, brief, and non-recurring." When you look at the NOFA process, there is an additional measure around income and increasing income for household served by the CoC-funded programs.

   The NOFA is the competitive process by which the Continuum of Care receives funding for homeless services. The NOFA that was released ten days ago has a 200 point scale. Of those 200 points, 100 are around System Performance and something called Performance and Strategic Planning which is reflected in HMIS data. Almost half of the scoring is around system performance. Both the actual number and then what are your strategies around that.

   Ms. Scott clarified that the System Performance Measures are the Federal Fiscal Year 2018 System Performance Measures.

Mr. Rosensteel then walked the group through the System Performance Measures in the NOFA. By looking at each measure and comparing it to the point value in the NOFA, you can get an idea of how we are going to score. We can also look at the Community Solutions dashboards and compare active numbers. So, if we as community leaders want to know how many veterans there are, you can see that there are 475 which is very similar to the active number on the Community Solutions dashboard.

In the "Rare" box on the handout, there are six System Performance Measures. Three of them we are going to meet, but all three are lower point values. We are not going to meet the measures for reducing all homelessness, chronic homelessness, and veteran homelessness. We are going to get the points on family homelessness, first time homeless and veteran unsheltered homelessness. Some of these do not seem like much of a change, but HUD will count them as meeting the standards. It is hard to feel like we are making much change on family homelessness, but this is what HUD will be looking at.

Co-Chair Schuster expressed her gratitude for noting that numbers on family homelessness in the Point in Time count is not the best way to measure family homelessness and her support for tracking family homelessness in the Community Solutions dashboard.

In the "Brief" category, the numbers look at length of time in shelter and exits to permanent housing from shelter. We are not really seeing a lot of change in length of time homeless. In exits to permanent housing, rapid re-housing providers are doing a good job of getting people out of shelter and shelters are doing a better job of tracking the data. The numbers are more positive for the community.

In the "Non-Recurring", HUD will be looking at the total of all returns in one year. For this group, we may want to look at the data by program type, but from HUD's perspective, they will be looking at the total number of returns in one year. This is not promising, we are seeing increases over the years. One thing that may be playing into the number is that we are increasing the coverage rates for emergency shelter so we see people returning to programs that may not have been reporting to HMIS before.

The last one is "Job & Income" growth, this is new measurement for the NOFA this year. We are doing well on this. Part of this may be data quality.

The slide deck will be available after the meeting. Feedback, is this a useful discussion? Do we need a small workgroup? Do we want to look at the data quarterly?

Co-Chair Schuster said that she thought we should review real numbers from the dashboard. These are useful, but the NOFA is only a once a year endeavor and while important, it is useful to look at more real time data.

Ms. Jameson expressed her thanks for the presentation. Ms. Kent suggested including youth in the data reviewed.

Mr. Rosensteel noted that the youth data is in the Community Solutions dashboard and could be presented.

Co-Chair Whisler expressed her interest in reviewing the data quarterly.

Mr. Rosensteel asked about presenting the NOFA scoring information. Co-Chair Schuster said that she thought it was important to present both.

Mr. Rosensteel asked about the elements of the presentation. Ms. Taylor recommended no changes. Co-Chair Whisler echoed Ms. Taylor's recommendations. Suggestions on how to present the information to others.

Next time, maybe think about how to disseminate this to others.

10. Updates

    Julie Montoya, MAG, announced that MAG staff is working with the Arizona Housing Coalition to bring "train the trainer" SPDAT training in September. Coordinating with AZ Housing Coalition, OrgCode will provide the training tentatively September 23. Once the date is confirmed, we will be able to sign contract and the Arizona Housing Coalition will let people know the process for signing up.

    Ms. Montoya next gave an overview of the NOFA application, the timeline and scoring process. The kickoff meeting will be held Wednesday, July 31, 9:30 a.m.-11:00 a.m. in the Ironwood Room at MAG. Applications are due in esnaps and a PDF copy to MAG and HomeBase on August 16th by 9:00 p.m.

    Co-Chair Schuster asked whether Board members who are providers are able to go to the Strategic Planning Session and how the community will have input into the 2019 NOFA priorities.

    Ms. Scott replied that the Board is meeting July 29 to discuss priorities for the new funding in the 2019 NOFA process. There will be over $1 million for bonus projects and over $2,000,000 for DV bonus projects. People with feedback should email staff

with input on the priorities for the 2019 NOFA and that feedback will be passed on to the Board.

Esnaps is available for new and renewal projects. People are free to create applications now. If you are familiar with esnaps go ahead and create your applications for renewals and new projects. The kick-off meeting will be focusing on new agencies that may not be familiar with the process.

For new bonus projects, agencies can apply for new Permanent Supportive Housing, new Rapid Re-Housing, new Joint Transitional Housing-Rapid Re-Housing projects, new HMIS and new Supportive Service Only projects for Coordinated Entry. For the domestic violence bonus projects, the same project types are allowed with the exception of Permanent Supportive Housing. Expansion is allowed against this year. Consolidation is allowed. Please consider consolidating your applications for ease of administration. We have seen a difference in the scoring for consolidated applications, so please consider consolidating.

11. Request for Future Agenda Items
Mr. Rosensteel asked that the Committee review the HMIS policies and a new Release of Information.

Co-Chair Schuster suggested a discussion on meeting frequency.

Co-Chair Whisler summarized that we may discuss the dissemination of the System Performance Measure information, HMIS policies and procedures, Stefanie Smith will present the mission moment, and we may have additional NOFA related tasks.

12. Comments from Committee Members
Mr. Rosensteel announced final notification this week from one of the largest funders of 211 of a significant funding reduction. This will result in 211 no longer using live operators to answer the phones. Crisis Response Network remains committed to the vision of 211. The agency sees this as an opportunity to adopt a model of connecting those with the most urgent needs to resources first—similar to coordinated entry. CRN is looking at some small pilot projects to connect people directly with services.

Shane Groen, Arizona Housing Coalition, announced that they were able to sign a contract with the Tohono O'Odham Tribe so that the Coalition is now able to have seven StandDown events around the state funded by the Arizona Department of Veteran Services. Three of the events are scheduled to be here in Maricopa County and the others are around the state.

Mr. Wambach announced that the Human Services Campus was awarded a grant for diversion and rapid exit. There will be a training for entry points next week.

Adjourn

Ms. Jameson moved to adjourn the meeting. Mr. Groen seconded. The motion passed unanimously.

Community Adopted Best Practices

Background

The community approved best practices were developed to serve as a guiding document for all homelessness programs to achieve the highest service standards for people being served in our community. This document includes a framework that applies to our full continuum of services; including, Outreach, Coordinated Entry and Assessment, Emergency Shelter, Transitional Housing, Rapid Re-housing, and Permanent Supportive Housing. The shared best practices may be applied to any program, including non-HUD funded projects.

The shared best practices apply to all interventions. Practices specific to a particular service (e.g. Emergency Shelter or Permanent Supportive Housing) are outlined in the intervention specific documents that follow. These practices have been developed, and vetted, by a range of stakeholders; including the Regional Continuum of Care (CoC) Board, Regional Continuum of Care Committee, local service providers, faith community, ESG grantees, and ad hoc working group participants.

This document was developed in collaboration with both service providers and funders as a statement of what the community strives for in program design, operation and outcomes. This document is not designed as a tool for measuring program compliance in general, yet some of the best practices outlined in this document are required for Continuum of Care funded programs and are denoted as such with an *. This document is a companion to other documents, such as the HUD standards, and is intended to be used alongside them; projects should not rely on this document as an inclusive list of requirements and should consult with the requirements of HUD and other funders when implementing programs. This document replaces the Standards of Excellence, previously adopted by the CoC Board of Directors.

Shared Best Practices

Philosophical Approaches

Housing First (adapted from USICH Housing First Check List) (CoC programs should also reference the Scorecard):

- Access to programs is not contingent on sobriety, minimum income requirements, lack of a criminal record, completion of treatment, participation in services, or other unnecessary conditions.
- Programs do everything possible not to reject an individual or family on the basis of poor credit or financial history, poor or lack of rental history, minor criminal

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convictions, or behaviors that are interpreted as indicating a lack of "housing readiness." Should such a case arise, provide a warm hand-off to coordinated entry or another resource.

- People with disabilities are offered clear opportunities to request reasonable accommodations within applications and screening processes and during tenancy, and building and apartment units include special physical features that accommodate disabilities.
- Programs that cannot serve someone work through the coordinated entry process to ensure that those individuals or families have access to shelter, housing, and services elsewhere.
- Housing and service goals and plans are highly participant-driven.
- Supportive services emphasize engagement and problem-solving.
- Participation in supportive services or compliance with service plans are not conditions of program entry or tenancy, but are reviewed with participants, and regularly offered as a resource.
- Services are informed by a harm-reduction philosophy that recognizes that drug and alcohol use and addiction are a part of some participants' lives. Participants are engaged in non-judgmental communication regarding drug and alcohol use, and are offered education regarding how to avoid risky behaviors and engage in safer practices.
- Substance use in and of itself; without other program, or lease violations, is not considered a reason for eviction, or program exit.
- Every effort is made to provide a tenant the opportunity to transfer from one housing situation, program, or project to another if a tenancy is in jeopardy. Whenever possible, eviction or returns to homelessness is avoided.
- Ensure that leases are standard and program requirements are transparent and focused on the hardest to serve, screening in rather than screening out.

Alumni Involvement:

- Agencies will create opportunities for current and prior program participants in the operation and development of program delivery.

Continuity of Care:

- When possible, establish contact, and ensure continuity of care with new programs, or case managers; both interagency and intra-agency.
- When providing services or exiting households to Permanent Housing, provide orientation to the neighborhood and ensure connections with local resources, when possible.

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Governance:

- Persons with lived experience will have opportunities to provide feedback to program managers, and the Board of Directors on the delivery of services. Programs should solicit Board membership to include those with lived experience.
- To assess the effectiveness of programs, evaluation of services and outcomes for program participants should be incorporated into program design and shared with the agency's governance structure.

Length of Stay:

- Individualized housing-based service plans (IHSP) are designed to meet the unique needs of each household, and are designed to facilitate the shortest possible stay, resulting in an exit to Permanent Housing.

Supportive Services:

- Participants have easy access to a comprehensive array of services designed to assist them in sustaining housing stability, and maintaining self-sufficiency.
- At minimum, service coordination and/or case management, based on the IHSP, are offered to every household.*
- Using a progressive engagement model, services are flexible, and individualized; services may include, but are not limited to, mental health, substance abuse treatment, life skills development, money management, benefits enrollment, primary health care, legal assistance, job training/placement, transportation, and education. All services may not be provided by a single project, and providers should make referrals and connections, as appropriate.
- The intensity of services is based on the needs of the household.
  • Utilize a client-centered, strengths-based approach to case management (e.g., motivational interviewing, trauma-informed care).

Operating Standards

Client Confidentiality:

- Program takes precautions to protect confidential client information.
- Client level data will only be shared in compliance with local data sharing agreements, and any associated signed client release of information.

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Client Rights:

- Every household is clearly informed of client rights including protocols for expressing grievances during program stay, and potential reasons for involuntary exits from the program.

Compliance:

- Program is compliant with federal and state Fair Housing, Arizona Landlord Tenant Act, the HUD Equal Access to Housing Notice, the Americans with Disabilities Act, and the Violence Against Women Act, as applicable. This may not be an all-inclusive list.

Food Safety:

- Staff who will prepare & serve meals have a valid food handler card/certificate issued by any county in the State of Arizona, or by an American National Standards Institute accredited food handler training program.
- Plan meals that adhere to or exceed USDA's Dietary Guidelines where applicable.

Homeless Management Information System (HMIS) participation:

- Programs are fully implemented within the local HMIS system and data quality standards are upheld.
- Programs maintain documentation of every participant's stay in order to provide homeless certification, when needed, through the HMIS.
- Programs comply with the HMIS data standards, include timeliness standards.

Hot boxes:

- All site based programs employ hot box technology as prevention measure for bed bugs infestations. Service providers should use hot boxes for scattered-site housing when possible.

Identification:

- All households are assisted with obtaining all documentation needed to access employment, eligible benefits, and permanent housing (e.g., Social Security cards, divorce decrees, DD214s, income or disability verification, photo identification, etc.). It is important that documents are legible.

Income and Employment:

- All households are assisted in receiving, or maintaining, all eligible public benefits (cash & non- cash) and/or achieving earned income.* Providers engage in the SOAR process for rapid enrollment for eligible tenants in SSI/SSDI.

Mandatory Reporting:

- All staff are mandatory reporters of suspected abuse or neglect and complies with mandatory reporting statutes.

Participant Surveys, Assessments, and Focus Groups:

- Programs/providers will assess participant s, through surveys, assessments, and/or focus groups.
- The CoC Board approved survey is made available to all providers to assess the satisfaction of services, and may use other community adopted assessments (e.g. SPDAT, F-SPDAT) to measure wellness.

Safety:

- The safety of clients, volunteers, and staff will be prioritized.
- Test staff for TB annually and on occasions of exposure (recommended by the CDC).
- Encourage updates of all booster shots.
- Programs will ensure that staff are available to maintain safety and operate necessary services.
- VAWA statement of rights will be distributed to all clients at program/project entry.
- Providers will engage in crisis and safety planning with clients.

Staffing:

- Employ multilingual staff. Ensure access to multilingual interpretation services.
- Ensure that all staff is culturally-competent & sensitive to all subpopulations.
- Employ multi-disciplinary team, or establish a partnership, with specialist in housing who locates housing and may assist in navigating application processes.

Tenant Notice:

- All households receive a copy of Arizona Tenants' Rights and Responsibilities, as applicable.

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Professional Development

Professional development for staff and managers is critical to ensure quality services for participants and to promote the safety and well-being of participants and staff. Providers engaging people experiencing homelessness should focus on training for staff, to include the following, as applicable:

- Boundaries
- Communicable diseases
- Conflict resolution
- CPR/First Aid
- Crisis Intervention
- Cultural, gender, gender nonconformity, and sexual orientation competency
- De-escalation
- Emergency health response
- Harm reduction
- Mental health first aid
- Motivational interviewing
- Secondary trauma
- Substance abuse and signs
- Symptoms of overdose
- Trauma informed care, including domestic violence sensitivity
- What to do in emergency situations

Intervention Specific Best Practices

Emergency Shelter

Case Management:

- Agency maintains appropriate ratio of case manager/housing specialist to clients.
  -Families: 1 case manager to no more than 20 families
  -Singles: 1 case manager to no more than 30 clients

Coordination:

- Programs will participate in Coordinated Entry as outlined in the Maricopa County Continuum of Care policies and procedures.

Family Separation:

- Resources or referrals are in place that will shelter families without separation.

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Services:

- A housing –based service plan will be developed within 72 hours of entering shelter. This plan will be based on t the unique needs of the individual/household.

- Clients will be connected to a navigator as soon as possible to assist them in attain all documents necessary to move into permanent housing.

Transitional Housing

Case Management:

- Agency maintains a ratio of no more than 1 case manager/housing specialist to 20 households.

Leasing / Occupancy standards:

- Transparent leasing standards should focus on the hardest to serve, screening in rather than screening out.
- All residents must have a signed lease or occupancy agreement.
- Lease/occupancy agreements must be no less than one month and no more than 12 months in duration.

Program Duration:

- Length of stay in program not to exceed 24 months.
- Continuous assessment of client to determine appropriate subsidy and level of services.
- Re-evaluation is required, and continuation of the leasing subsidy / financial assistance is based upon household needs.
- Program exit strategy – need wording to include community connectedness in their permanent housing following program exit.

Rent:

- Tenant pays no more than 30% of their income of income toward rent.

Permanent Housing

These best practices apply to all permanent housing interventions. Permanent Supportive Housing (PSH), Other Permanent Housing (OPH) and Rapid Rehousing (RRH) specific Best Practices follow this section.

Housing Retention:

- Every resident in both scattered and single-site housing should have a housing retention plan to both maintain and prevent returns to homelessness.
- Residents at risk of eviction will be assisted in maintaining their housing or in finding other suitable permanent housing. Progressive engagement should be utilized when appropriate and available.

Mutual Rescission:

- Direct services parties will work to educate and advocate with both tenant and landlord on benefits of a mutual rescission, as opposed to eviction.

Scattered-Site Housing Selection:

- Service providers ensure households have choices among available housing units which meet the rent reasonableness guidelines and pass basic habitability and lead-based paint screenings.
- Staff will assist tenants in advocating for flexibility in paying their share of rent on time and offered special payment arrangements for rent arrears and/or assistance with financial management, including representative payee arrangements.

Income:

- Tenants who have been in supportive housing for one year increase their income, if they moved in with no income and those who moved in with income, maintain that income.
- Providers should work with tenants who move into permanent housing to increase their income.
- Tenants, who enter supportive housing with income and/or employment, have maintained it.
- Avenues for employment are supported and encouraged for tenants.

Landlord Engagement:

- Upon program entry, programs are expected to engage with the landlord and develop an ongoing collaborative relationship.

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- Programs are expected to intervene and mediate any landlord issues or leasing concerns.
- Programs are expected to educate landlords regarding program services and expectations.
- Programs should have a point of contact with landlords for any issues that arise.

Housing Requirements:

- Prior to execution of lease, units must pass basic Habitability and/or Housing Quality Standards Inspections, Lead-based Paint Screening and comply with rent reasonableness guidelines.
- Tenants are required to have a lease or occupancy agreement in their name for the appropriate length of tenancy as determined by funding source.
- Participation in services cannot be a condition of tenancy.
- Programs should educate clients on all aspects of the lease.
- With landlords, agencies must execute a Housing Assistance Payment contract (HAP) or rental assistance agreement based on the intervention.

Program Duration:

- Continuous assessment of client to determine appropriate subsidy and level of services.
- Re-evaluation is required for continuation of the leasing subsidy / financial assistance is based upon household needs .
- Households must also meet the requirements of the funder requirements.
- Case management may be extended beyond the end of financial assistance if needed by the household.

Services:

- Individualized Housing Stabilization Plan (IHSP) will:
  -Be developed within two weeks of the lease start date based on the unique needs of the household.
  _IHSP should be client-centered and created with the active participation of the household.
- Identify activities that will:
  -Connect resident to resources that integrate residents into the community, and increase independent living skills and social interaction.
- Written program agreements clarify the services available and roles and responsibilities of both the service provider and tenant.

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- The intensity of services is based on the needs of the household with a minimum standard of weekly contact initiated by the service provider and at least one monthly home visit.

Rapid Re-housing

These best practices are in addition to those in listed the Permanent Housing section above.

Referrals:

- All referrals come through the Coordinated Entry System and agencies will accept referrals in accordance with the Coordinated Entry Policies and Procedures.
- Agency has a plan for locating and engaging with the referred household tfrom coordinated entry that includes connections with homeless, human service and mainstream resources.
- Multiple and varied attempts to contact the referred household must be made and documented before cancelling referral. A referral cannot be cancelled due to "not contact" prior to two weeks of attempted contact.
- HMIS and/or shared data systems should be utilized to identify last known location of the referred household.

Intake and Assessment:

- Agency utilizes an assessment process that is progressive, in that assessment and information gathering occurs when appropriate and relevant to service delivery and referral decisions and does not gather unnecessary information.
- Assessment of relevant housing barriers is focused on "tenant screening" barriers and "housing retention" barriers.. Tenant screening barriers include employment, rental and criminal history, and other factors that would cause landlord to reject a tenant's application for housing.

Case Management:

- Agency maintains a ratio of no more than 1 case manager/housing specialist to 20 households.
- The intensity of services are based on the acuity of the household with a minimum standard of one monthly home visit, or more as needed.
- Service providers should be actively involved in identifying and selecting a unit: the units should be affordable and sustainable over the long term and based upon the potential earned income of the client.

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Financial Assistance Standards:

- Programs will use financial standards to determine appropriate portion of rent for which the client is responsible.
- CoC approved RRH Financial Assistance Standards are made available to all providers.

Training:

- Provide ongoing RRH specific training to service providers at least twice annually.

Permanent Supportive Housing

These best practices are in addition to those listed in the Permanent Housing section above.

Assessment:

- Move-on strategy should be developed when appropriate.

Case Management:

- Agency maintains a ratio of no more than 1 case manager/housing specialist to 15 households.

Leasing standards:

- Transparent leasing standards should focus on the hardest to serve, screening in rather than screening out.

Rent:

- Tenant pays no more than 30% of their income of income toward rent.

Services:

- Project-Based programs:
  -Property Management (PM) and Social Services (SS) are coordinated and have same approach/philosophy.
  -PM and SS develop and maintain a clear delineation of roles and ongoing communication.

- Scattered-Site Projects:
  -Social Services should be coordinated with private landlords, when possible.

Training:

- Provide ongoing PSH specific training to service providers at least twice annually.

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Appendix B: Glossary

From Community Adopted Best Practices:

ADA: The Americans with Disability Act of 1990 prohibits discrimination based on disability and requires programs to take reasonable steps to make programs accessible to people with disabilities.

Affordable housing: A general term applied to public- and private-sector efforts to help low and moderate- income people purchase or lease housing. As defined by the United States Department of Housing and Urban Development, any housing accommodation for which a tenant household pays 30% or less of its adjusted gross income.

Boundaries: In homeless programs, "boundaries" refers to limits to physical, mental, and emotional client-staff interactions to ensure that the rights and interests of clients are respected and that staff work reflects the agency's ethical values.

Case management: The overall coordination of an individual's treatment plan and use of services, which may include medical and mental health services, substance use services, and vocational training and employment. Although the definition of case management varies with local requirements and staff roles, a case manager often assumes responsibilities for outreach, advocacy, treatment planning and referral on behalf of individual clients.

Chronically Homeless: HUD defines chronically homeless as a person or family (head of household) who has been homeless and living or residing in a place not meant for human habitation, a safe haven, or emergency shelter for at least a year or at least four separate occasions in the last 3 years and who can be diagnosed with a disabling condition.

Contacts: A contact is defined as an interaction between an outreach worker and a client designed to engage the client. Contacts may include activities such as a conversation between the street outreach worker and the client about the client's well-being or needs, an office visit to discuss their housing plan, or a referral to another community service.

Continuum of Care: As a condition of funding, HUD requires local communities establish "Continua of Care" to oversee community planning around homelessness. Continuum of Care and Continuum are defined to mean the group that is organized to oversee community planning and carry out the responsibilities required to address homelessness within a specified geographic area. The Continuum is composed of representatives from various stakeholders from throughout the community.

Diversion: Helping people seeking shelter by identifying immediate alternate housing and

connecting them with services and financial assistance to help them to return immediately to permanent housing. An emerging best practice, diversion programs can reduce the number of individuals and families becoming homeless, and thus the demand for shelter beds.

Emergency / Crisis / Bridge Housing: A facility providing temporary or transitional shelter for the homeless, sometimes for sub-populations of the homeless.

Engagements: Per the HMIS Data Standards, by agreement across all federal partners, an engagement date is the date on which an interactive client relationship results in a deliberate client assessment or beginning of a case plan. HMIS Universal Data Elements will be collected at this time.

Enrollment: An enrollment date is the date when a client has formally consented to participate in services provided by the Outreach project.

Exits: The date at which a client exits the program. Client may be exited prior to engagement and/or enrollment.

Harm reduction: Harm reduction is a set of practical strategies that reduce the negative consequences associated with drug use, including safer use, managed use, and non- punitive abstinence. Congressionally mandated for all programs funded through the Department of Housing and Urban Development (HUD) homeless assistance grants. It is a software application designed to record and store client-level information on the characteristics and service needs of homeless persons. An HMIS is typically a web-based software application that homeless assistance providers use to coordinate care, manage their operations, and better serve their clients.

Hot Box: A heated box used to eradicate bed bugs in exposed furniture.

Housing First: The goal of "housing first" is to immediately house people who are homeless. Permanent housing is provided as quickly as possible no matter what is going on in one's life, and the housing is flexible and independent so that people are provided permanent housing easily and have access to sufficient supportive services to stay housed. Housing first can be contrasted with a continuum of housing "readiness," which typically subordinates access to permanent housing to other requirements.

HUD: Department of Housing and Urban Development.

Individualized Housing & Service Plan (IHSP): A service plan created by case managers for homeless clients to assist them in addressing barriers and maintaining stability.

Intake: Recordation of basic client data into a database upon entry into a program (e.g., capturing

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and loading required data to HMIS upon entry to emergency shelter).

Interim Housing: Sometimes referred to as "bridge housing"; temporary housing including emergency shelters, safe havens, transitional housing, and short-term hotel or motel vouchers. Provides temporary shelter during transition to permanent housing.

Motivational Interviewing: An approach that emphasizes a collaborative relationship in which the case manager /staff "draws out" the client's own motivations and skills for change, thereby empowering the client.

Permanent Housing: Housing that is governed by a lease with no limits on length of stay. In terms of housing placement goals, the permanent housing category includes permanent supportive housing, rental by client (no ongoing subsidy), owned by client (no ongoing subsidy), rental by client (with ongoing housing subsidy), owned by client (with ongoing housing subsidy), and staying or living with family or friends (permanent tenure).

Permanent Supportive Housing (PSH): Affordable housing where the tenant pays no more than 30 to 40 percent of their income for housing costs. The tenants have a lease and there is an indefinite length of stay as long as the tenant complies with lease and/or funding requirements. Tenants should have easy access to a comprehensive array of individualized and flexible services, either on-site or in proximity to the housing site, that are designed to assist tenants in sustaining stability and productive lives in the community.

Rapid Re-Housing: Promptly housing individuals or families who become homeless, often through temporary assistance to obtain and retain content in housing.

Return to Homelessness / Recidivism: In homeless programs, "recidivism" refers to a return to homelessness after moving into permanent housing, as documented by HMIS.

Tenant: A person who resides in rented premises under the terms of a lease. Tenants of supportive housing should have the same rights and responsibilities as tenants of other lease-based, permanent housing.

Transitional Housing: Time-limited housing meant to help homeless people access permanent housing, usually within two years, through the provision of intensive supportive services.

Voluntary Services: The term "supportive" in supportive housing refers to voluntary, flexible services designed primarily to help tenants maintain housing. Voluntary services are those that are available to but not demanded of tenants, such as service coordination, case management, physical and mental health, substance use management and recovery support, job training, literacy and education, youth and children's programs, and money management. Services are voluntary for the tenant, but required engagement is expected from the service provider.

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Warm Hand-Off: The transfer of a client from one provider to another, typically with a face-to-face introduction, in order to facilitate the transfer of the trust and rapport the client has developed, to the new provider. In homeless services, such transfers often occur between outreach workers and interim housing providers and between emergency shelter case managers and permanent supportive housing service coordinators.

MRCoC EMERGENCY TRANSFER PLAN FOR VICTIMS OF DOMESTIC VIOLENCE, DATING VIOLECE, SEXUAL ASSAULT, OR STALKING

CoC Committee 9_18_2019 Agd #6 MRCoC Emergency Transfer Plan
U.S. Department of Housing and Urban Development
OMB Approval No. 2577-0286
Expires 06/30/2017

Maricopa Regional Continuum of Care

Emergency Transfer Plan for Victims of Domestic Violence, Dating Violence, Sexual Assault, or Stalking

Emergency Transfers

The Maricopa Regional Continuum of Care (CoC) is concerned about the safety of its tenants, and such concern extends to tenants who are victims of domestic violence, dating violence, sexual assault, or stalking. In accordance with the Violence Against Women Act (VAWA),[1] the CoC allows tenants who are victims of domestic violence, dating violence, sexual assault, or stalking to request an emergency transfer from the tenant's current unit to another unit. The ability to request a transfer is available regardless of sex, gender identity, or sexual orientation.[2] The ability of CoC to honor such request for tenants currently receiving assistance, however, may depend upon a preliminary determination that the tenant is or has been a victim of domestic violence, dating violence, sexual assault, or stalking, and on whether the CoC has another dwelling unit that is available and is safe to offer the tenant for temporary or more permanent occupancy.

This plan identifies tenants who are eligible for an emergency transfer, the documentation needed to request an emergency transfer, confidentiality protections, how an emergency transfer may occur, and guidance to tenants on safety and security. This plan is based on a model

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[1] Despite the name of this law, VAWA protection is available to all victims of domestic violence, dating violence, sexual assault, and stalking, regardless of sex, gender identity, or sexual orientation.

[2] Housing providers cannot discriminate on the basis of any protected characteristic, including race, color, national origin, religion, sex, familial status, disability, or age. HUD-assisted and HUD-insured housing must be made available to all otherwise eligible individuals regardless of actual or perceived sexual orientation, gender identity, or marital status.

emergency transfer plan published by the U.S. Department of Housing and Urban Development (HUD), the Federal agency that oversees that **the Maricopa Regional Continuum of Care** is in compliance with VAWA.

Eligibility for Emergency Transfers

A tenant who is a victim of domestic violence, dating violence, sexual assault, or stalking, as provided in HUD's regulations at 24 CFR part 5, subpart L is eligible for an emergency transfer, if: the tenant reasonably believes that there is a threat of imminent harm from further violence if the tenant remains within the same unit. If the tenant is a victim of sexual assault, the tenant may also be eligible to transfer if the sexual assault occurred on the premises within the 90-calendar-day period preceding a request for an emergency transfer.

A tenant requesting an emergency transfer must expressly request the transfer in accordance with the procedures described in this plan.

Tenants who are not in good standing may still request an emergency transfer if they meet the eligibility requirements in this section.

Emergency Transfer Request Documentation

To request an emergency transfer, the tenant shall notify their CoC-funded Housing Provider's (HP) management office and submit a written request for a transfer. HP will provide reasonable accommodations to this policy for individuals with disabilities. The tenant's written request for an emergency transfer should include either:

1. A statement expressing that the tenant reasonably believes that there is a threat of imminent harm from further violence if the tenant were to remain in the same dwelling unit assisted under HP's program; OR

2. A statement that the tenant was a sexual assault victim and that the sexual assault occurred on the premises during the 90-calendar-day period preceding the tenant's request for an emergency transfer.

Confidentiality

HP will keep confidential any information that the tenant submits in requesting an emergency transfer, and information about the emergency transfer, unless the tenant gives HP written permission to release the information on a time limited basis, or disclosure of the information is required by law or required for use in an eviction proceeding or hearing regarding termination of assistance from the covered program. This includes keeping confidential the new location of the dwelling unit of the tenant, if one is provided, from the person(s) that committed an act(s) of domestic violence, dating violence, sexual assault, or stalking against the tenant. See the Notice of Occupancy Rights under the Violence Against Women Act For All Tenants for more information about HP's responsibility to maintain the confidentiality of information related to incidents of domestic violence, dating violence, sexual assault, or stalking.

Emergency Transfer Timing and Availability

HP cannot guarantee that a transfer request will be approved or how long it will take to process a transfer request. HP will, however, act as quickly as possible to move a tenant who is a victim of domestic violence, dating violence, sexual assault, or stalking to another unit, subject to availability and safety of a unit. If a tenant reasonably believes a proposed transfer would not be safe, the tenant may request a transfer to a different unit. If a unit is available, the transferred tenant must agree to abide by the terms and conditions that govern occupancy in the unit to which the tenant has been transferred. HP may be unable to transfer a tenant to a particular unit if the tenant has not or cannot establish eligibility for that unit. HP will work in concert with the

Coordinated Entry Provider (CE) to notify the agency if a transfer occurs between the HP funded projects.

If HP has no safe and available units for which a tenant who needs an emergency is eligible, HP will assist the tenant in identifying other housing providers who may have safe and available units to which the tenant could move and notify CE to determine whether there may be CE units available for the tenant. At the tenant's request, HP will also assist tenants in contacting the local organizations offering assistance to victims of domestic violence, dating violence, sexual assault, or stalking that are attached to this plan.

Safety and Security of Tenants

Pending processing of the transfer and the actual transfer, if it is approved and occurs, the tenant is urged to take all reasonable precautions to be safe.

Tenants who are or have been victims of domestic violence are encouraged to contact the National Domestic Violence Hotline at 1-800-799-7233, or a local domestic violence shelter, for assistance in creating a safety plan. For persons with hearing impairments, that hotline can be accessed by calling 1-800-787-3224 (TTY).

Tenants who have been victims of sexual assault may call the Rape, Abuse & Incest National Network's National Sexual Assault Hotline at 800-656-HOPE, or visit the online hotline at https://ohl.rainn.org/online/.

Tenants who are or have been victims of stalking seeking help may visit the National Center for Victims of Crime's Stalking Resource Center at https://www.victimsofcrime.org/our-programs/stalking-resource-center.

Attachment: Local organizations offering assistance to victims of domestic violence, dating violence, sexual assault, or stalking.