TX BoS CoC General Meeting
CoC General Meeting, May 8, 2019, 2:00 pm

Notes

CoC General Membership Attendees: See attached attendance list from the webinar

TX BoS CoC Staff in Attendance: Kraig Blaze-Fiero, Kyra Henderson, Mollie Lund, Elena Lusk, Mary Stahlke, Jim Ward, Andrew Willard, Kristin Zakoor

Link to a recording of May General Meeting: https://thn.adobeconnect.com/psub2tqb55lk/

I. Welcome and Introductions

Mary Stahlke, CoC Manager, welcomed attendees. Mary introduced THN BoS staff by showing a document with staff photos, emails and phone numbers (see attached document) There is a link to a form which you can use to request to talk with a THN team member about Rapid Re-housing if you had further questions about the April meeting. The form link is here.

Kraig facilitated attendees’ indicating on the Texas map where they were attending from.

II. Summary of Prior Meeting

The main topic from the April general meeting was Rapid Re-housing (RRH) and the April Data snapshot highlighted Racial Disparities, specifically highlighting over-representation in the homeless population among African Americans and Native Americans compared to the general population.

III. Data Snapshot

The Data Coordinator, Kyra, shared the Data Snapshot on Point-In-Time (PIT) Count data. (See infographic) PIT Counts were conducted in 65% of the BoS CoC. THN staff use that data and an extrapolation formula to estimate what the data for 100% of the CoC would be: 8,072 individuals experiencing homelessness. 58% of them were unsheltered while 42% were in sheltered locations. There was a 6% overall increase in those experiencing homelessness. There are a number of possible explanations for why this was the case. Even though there was an increase, look at all the areas where there were decreases: 2% in families, 5% in unaccompanied youth, 28% in veterans, 8% in DV, and 7% in chronic homelessness.

Over the last five years, there has been a fairly steady decline within the sheltered count with an even more significant incline in the number of unsheltered individuals. Staff will be taking a deeper dive in the coming weeks to see the trends within the data. We would be happy to send you this template and help you make your own infographic with similar data points. If you have any questions or would like more information, please reach out the data team at data@thn.org - you can additionally reach out to kyra@thn.org.
IV. How We are Ending Homelessness—With Permanent Supportive Housing (see attached slides)

Pre-test and post-test questions:

1: The following funding options exist for PSH in the Balance of State
   a) The Continuum of Care Program (CoC)
   b) The Department of Veteran Affairs (HUD-VASH)
   c) The HUD Mainstream Voucher Program (811, 202) or Housing Choice Voucher Program (HCV)
   d) The Department of State Health Services (DSHS)
   e) Creative Funding Streams to include Private Supportive Service dollars matched with Rental Assistance
   f) All of the above
   g) Jim, I have never heard of any of these

2: The provision of Rental Assistance without Supportive Services should be considered PSH
   True or False

3: An Agency operating alone can provide all the services necessary to operate a high performing PSH project
   True or False

4: Returns to homelessness from PSH are inevitable, and it is common to exit participants from PSH to Literal Homelessness
   True or False

5: Housing First is a fad, and not relevant to this conversation
   True or False

The idea of Supportive Housing is not new. It has long been accepted that vulnerable populations are more successful and obtaining and maintaining housing when the housing is coupled with Supportive Services, either onsite- or nearby. The service component is critical.

- Supportive Housing first became popular in 1987 with HUD’s Supportive Housing Demonstration Program.
- Transitional housing may be an appropriate setting for those whose present circumstance requires targeted supportive services to regain stability and develop skills, such as victims of domestic violence, recovering substance abusers, and pregnant and parenting teenagers.
- In 1995: The Continuum of Care model was implemented.
- In 2009: HEARTH ACT - With the merging of the Supportive Housing Program, Shelter plus Care, and SRO Moderate Rehab Program in late 2009 into the Continuum of Care Program, HUD made the shift to Permanent Supportive Housing as we start to know it today. At about the same time. Housing First began to emerge as a Promising Practice in PSH and in
homeless Services. Housing First is the idea that housing is the primary solution to homelessness, and that once that need is addressed participants are much more successful addressing other factors that contributed to homelessness. It is important to note that Housing First is NOT housing only.

- CoC Program Interim Rule from 2012
  - Housing First is a critical component of PSH as we know it today with today’s emphasis on Housing First, as fidelity to the model, and how communities and systems can scale the approach to meet the needs of the people being served.
  - In 2012 HUD reworked the definition of Chronic Homelessness, and in 2016 again, to be more inclusive of people who are disconnected from mainstream services.
  - In 2016: All existing PSH in the Balance of State became dedicated to the Chronically Homeless following notice of CPD 16-11.

Click the following link to learn more about PSH: www.csh.org

- PSH should be targeted for those households with high acuity and multiple barriers.
- PSH is affordable: tenants paying 30% of income toward their rent if they have income, client does not need to have income.
- PSH provides a lease which is identical to non-supportive housing with non-limits on length of tenancy.
- PSH engages households with flexible/comprehensive supportive services without requiring participation.
- Effectively coordinates with key partner crises with a focus on housing stability
- Connect tenants with community based resources & activities: build strong support networks: You are going to need multiple agencies in the community to support PSH: recovery services, medical services, mental health services,
- Support tenants in connecting with community based resources/activities: helping clients look for a faith based community or helping that tenant find their friend group and their niches. You must provide housing and other community based resources.

It takes a village: PSH plays to the sense of collaboration that the HUD, VA and private funders have been encouraging.

- Engagement and Participation Stabilization
  - The tenant is the one who knows what they want/need.
  - Assertive Engagement: show up repeatedly, services are approachable, focus on engagement
  - Be Client-Centered – Client-Driven Individual Service Plans
  - Recovery orientation: real belief that people have the power to change, help people find their intrinsic motivation to change.
  - Harm reduction: Shame and judgement are removed from the behavior; allows the participant to make decisions and steps that they can accomplish. Talking about harm reduction can be challenging.
Help a participant by giving them a ride to a meeting, especially if it’s the first time the person has asked for assistance with sobriety. OrgCode article on harm reduction and enabling can be found here.

Case Management is not crisis management. Case managers need to use harm reduction, motivational interviewing, and trauma-informed care, and agencies must take on the responsibility of providing or paying for these initial trainings and refresher trainings. Investing in training is critical.

Move on or move up strategy - Partner with a Public Housing Agency to help people in PSH move on from PSH—when they no longer need the intensive support services but still need the housing subsidy—to PHA subsidized housing (public housing or Housing Choice Voucher). It is important to help participants prepare for and implement the transition from PSH to subsidized housing.

 Communities are finding success matching housing choice vouchers with CoC Supportive Service dollars. Communities are also finding success with leveraging HUD Multi-family tenant selection plans to support participants to access long-term sustainable supportive housing.

Creating outflow from your PSH project:
- Homeless preferences in multifamily housing and in public housing and Housing Choice Voucher programs (Notice PIH 2013-15)

There are 397 PHAs in Texas, and 309, or 78%, are in the BoS CoC. There are very few in the state that have homeless preference. This is something that we want to work on.

LHC: Invite PHA staff to attend local homeless coalition (LHC) meetings.

Denton Housing Authority has a Mainstream Voucher program: 40-50 vouchers that allowed people to move from PSH into those long-term housing vouchers.

The post test was followed up by the community conversation which emphasized Housing First.

The community conversation started off with a poll of 8 questions for participants to answer about the communities which they serve.

The poll answers can be:
- We say we do this
- We do this
- We say we do this and we can provide it
- We don’t currently do this

How do you feel your system achieves these standards?
1. Programs or projects 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 convictions, or behaviors that are interpreted as indicating a lack of “housing readiness.”

*Answers to this first community conversation question included:*  
- One participant mentioned: “We have paid double deposits for individuals with bad credit and found housing (condo) owned by nurse who was sympathetic to our resident who had a criminal record.”
- Another participant answered: “We created a “second chance” landlord List so we can direct clients to properties that will be willing to rent to them.”
- A different participant mentioned: “Providing accommodation letters for clients who because of a disability had a criminal background.”
- More participants also stated things like  
  - “Providing Risk assessment fees, normally about half one month's rent”
  - “We had a meet and greet with landlords and explained all of our rental assistance programs and the benefits for landlords and tenants.”

*The other questions were not addressed in the community conversation but were asked in a poll to participants those questions included:*  

2. 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.

3. Housing and service goals and plans are highly tenant-driven.

4. Supportive services emphasize engagement and problem-solving over therapeutic goals.

5. Participation in services or compliance with service plans are not conditions of tenancy, but are reviewed with tenants and regularly offered as a resource to tenants.

6. Services are informed by a harm-reduction philosophy that recognizes that drug and alcohol use and addiction are a part of some tenants’ lives. Tenants 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. How are communities navigating this idea?
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7. Substance use in and of itself, without other lease violations, is not considered a reason for eviction.

8. 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 back into homelessness is avoided.

V. CoC Priority Projects

a) Homeless Management Information System (HMIS)
   ● Longitudinal System Analysis (LSA)
     ○ HUD has removed the due date; we do not know when the LSA will be due because of work that needs to be done on the federal level. If the CoC’s HMIS team reaches out to you with questions about your data, please respond.
   ● Inventory Updates
     ○ The data team is updating all homeless housing inventory information and putting it into HMIS, even for shelter and housing projects that do not use HMIS
     ● Updating the HMIS Data Quality Plan—will discuss in the next HMIS Call

b) Data
   ● Point In Time (PIT) Count
     ○ Submitted to HUD
     ○ THN is assisting communities to conduct PIT Counts this summer. Anyone interested may contact Data Coordinator, Kyra, at kyra@thn.org.
   ● Housing Inventory Count (HIC)
     ○ Submitted to HUD

c) Systems Change
   ● Built for Zero- Denton has been recognized for their quality By-Name List and Abilene is moving into their second year with a site visit scheduled for May.
   ● Coordinated Entry Steering Committee- Next meeting TBD
   ● CE Unplugged- Join Tiffany Hart and Elena Lusk May 14th from 10-11 for the next CE Unplugged call. Topics will be diversion and new entry points. Link Register here.

d) CoC Program
   ● Grant Inventory Worksheet (GIW) for the CoC Program was submitted.
   ● The final step of the CoC Program Registration is pending. We are waiting for HUD’s final approval of it.
   ● We anticipate the CoC Program NOFA will be released sometime in May or June. CoC Program Updates: sign up for the BoS CoC email list.
   ● Project Design consultations are taking place. If you would like to discuss proposed project designs for CoC Program project applications, contact Sophia Checa (sophia@thn.org) or Jim Ward (jim@thn.org).
The CoC RRH Work Group (for CoC Program-funded Rapid Re-Housing Projects) will meet on Thursday, May 16th at 10:00 a.m.

Quarterly Performance Score Card debriefs will be held next week. Thank you for submitting your Score Cards.

THN will deliver training on Equal Access to shelter, housing, and services for people who identify as LGBTQ. June 3 and June 10
  ○ Sign up for June 3 [here](#).
  ○ Sign up for June 10 [here](#).

e) SSVF Program
  ● Community Planning calls are being conducted with all grantees across the BoS. Community Plans are due June 3rd.

f) ESG Program
  ● TDHCA released a request for proposals (RFP) for ESG Coordinators. THN will apply to be the ESG Coordinator who will run the competition for State ESG funds allocated to the TX BoS CoC.

g) Governance
  ● The CoC Board is becoming more active in policy and committee work. CoC Board elections will be held in August. If you know someone who is interested in learning more, contact Mary Stahlke at [mary@thn.org](mailto:mary@thn.org).

V. Next Meeting –
   Wednesday, June 12th, at 2:00, by webinar. Topic: Affordable Housing
   Poll: What is your familiarity with topic: Affordable Housing? Which Affordable Housing topics would you like to know more about?

The meeting Concluded at: 3:30 pm
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<td><a href="mailto:fic.tbrahousing@gmail.com">fic.tbrahousing@gmail.com</a></td>
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</tr>
<tr>
<td>Rebecca Ramirez</td>
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<td>Attended</td>
</tr>
<tr>
<td>Stephanie Jerez-Rodriguez</td>
<td><a href="mailto:stephaniejr@hopeincdenton.com">stephaniejr@hopeincdenton.com</a></td>
<td>Attended</td>
</tr>
</tbody>
</table>
TX BoS CoC General Meeting

Agenda
May 8, 2019, 2:00 p.m.

Lobby poll:
Did you leave the April CoC General Meeting with any questions about Rapid Re-Housing (RRH)? If so, click here.

I. 2:00-2:05 Welcome, Introductions, Staff Photos & Map of Attendees

II. 2:05-2:10 Summary of prior meeting

III. 2:10-2:15 Data Snapshot: 2019 PIT Data

IV. 2:15-3:00 How We are Ending Homelessness With Permanent Supportive Housing

V. 3:00-3:15 Community Conversation

IV. 3:15-3:25 CoC Priority Projects

   a. Homeless Management Information System (HMIS)
      i. Longitudinal System Analysis (LSA)
      ii. Inventory Updates

   b. Data
      i. Point In Time (PIT) Count
      ii. Housing Inventory Count (HIC)

   c. Systems Change
      i. Built for Zero- Built for Zero is moving right along with Denton
         recognized for their quality By-Name list and Abilene moving into
         Year 2 with a site visit scheduled for May.
      ii. Coordinated Entry Steering Committee- Next meeting TBD
      iii. CE Unplugged- Join Tiffany Hart and Elena Lusk May 14th from 10-11
         for the next CE Unplugged call!

   d. CoC Program
      i. Grant Inventory Worksheet completed
      ii. Final step of the CoC Registration pending, (No action required)
          1. We anticipate the CoC Program NOFA to be released
             sometime in May
TX BoS CoC General Meeting

2. Project Design consultations are moving full steam ahead. If you would like to chat about proposed project design please reach out to Sophia Checa or Jim Ward

iii. CoC RRH Work Group on Thursday May 16, 2019 at 10:00 am

iv. Quarterly Performance Scorecard Debrief, register by CoB today

v. Equal Access Training

e. SSVF Program
  i. Community Plans are being conducted. Community Plans due on June 3, 2019

f. ESG Program
  i. TDHCA RFP Released: THN to apply to be ESG Coordinator for the TDHCA Local ESG Competition

V. 3:25 Next Meeting – Wednesday, June 12, at 2:00, by webinar. Topic: HUD’s Continuum of Care (CoC) Program
  a. Poll: What is your familiarity with topic? Which topic topics would you like to know more about?

Staff will be available on the webinar for 15 minutes after the meeting ends, for an open discussion on topics that attendees want to discuss.

Give your feedback!
Please complete the anonymous survey you will receive after the meeting ends, to let us know what was helpful and what would could be better for the next meeting.

Become a CoC Member!
Anyone who works or lives in the CoC’s geographic area, and all housing and homeless services projects in the CoC’s geographic area, are considered to be members of the CoC. The CoC has an open invitation process, so members may join at any time.

THN invites members to participate in the CoC’s activities. Learn more on the email list, the website, and social media.

CoC General Meetings include presentations by and conversations between CoC members and staff on topics that are important to preventing and ending homelessness. See the schedule for dates, topics, and registration links. Meeting notes and recordings are posted on THN’s website at https://www.thn.org/texas-balance-state-continuum-care/get-involved/.
The Annual Point-in-Time Count was conducted on January 24th, 2019. The information represents a snapshot of homelessness on a single night. 42 counties collected surveys which (based on population size) accounts for 65% of the total TX BoS CoC.

8,072 individuals experiencing homelessness

<table>
<thead>
<tr>
<th>Year</th>
<th>Sheltered</th>
<th>Unsheltered</th>
</tr>
</thead>
<tbody>
<tr>
<td>2015</td>
<td>33%</td>
<td>66%</td>
</tr>
<tr>
<td>2016</td>
<td>33%</td>
<td>67%</td>
</tr>
<tr>
<td>2017</td>
<td>33%</td>
<td>68%</td>
</tr>
<tr>
<td>2018</td>
<td>33%</td>
<td>69%</td>
</tr>
<tr>
<td>2019</td>
<td>33%</td>
<td>68%</td>
</tr>
</tbody>
</table>

6% overall increase in those experiencing homelessness (2018–2019)

- 8% increase in persons residing in Transitional Housing
- 14% increase in unsheltered

2018-2019 Comparison

- 2% decrease in families
- 8% decrease in domestic violence
- 7% increase in single individuals
- 28% decrease in veterans
- 5% decrease in unaccompanied youth (18-24)
- 7% decrease in chronic homelessness

Comparing Counts

For the full data set please email data@thn.org
Permanent Supportive Housing

Strategies For Change

thn.org
A brief overview; History of Permanent Supportive Housing? (PSH)

• 1987: The term became widespread with The Supportive Housing Demonstration Program & the McKinney-Vento Homeless Assistance Act
• 1995: Continuum of Care system implemented
• 2009:
  • The HEARTH* Act consolidated 3 of the Original McKinney-Vento Programs into one, the Continuum of Care Program
  • Housing First emerges as a Promising Practice
• 2012:
  • Implementation of the Continuum of Care Interim Rule 24 CFR 587
  • HUD Changes Chronic Homeless definition
  • For the first time, HUD asks CoC applicants about adherence to Housing First principles
• 2016:
  • All existing PSH in the Balance of State became dedicated to the Chronically Homeless following Notice CPD 16-11
  • HUD updated the Chronic Homeless Definition with the Chronic Homelessness “Final Rule”

* Homeless Emergency Assistance & Rapid Transition to Housing Act
A brief overview; What does PSH look like today?

- Targets households with high acuity and multiple barriers
- Is affordable, with 30% of income toward rent
- Provides a lease identical to non-supportive housing — with no limits on length of tenancy
- Engages households with flexible and comprehensive supportive services, without requiring participation
- Effectively coordinates with key partners crises, with a focus on housing stability
- Supports tenants in connecting with community-based resources and activities, and building strong social support networks
Engagement and Participant Stabilization

- Housing First/ Assertive Engagement
- Client Centered/Client Driven Individual Service Plans
- Motivational Interviewing
- Harm Reduction
- Case Management not Crisis Management
Moving On/Moving Up and partnering with your Public Housing Administration

- Creative Partnerships
  - Communities are finding success matching Housing Choice Vouchers with CoC Supportive Service Dollars
  - Communities are also finding success with leveraging HUD Multi-Family Tenant Selection Plans to support participants to access long term sustainable Supportive Housing

- Creating Outflow from your PSH project
  - Homeless Preferences
    - Notice PIH 2013-15 (HA)
    - The “How-To” maximize Homeless Preferences & create movement when the system is “stuck”
      - Corporation for Supportive Housing Moving On Toolkit
Building Community Support for Participants

- No single agency can provide the complete social and safety network participants need for stability.
- Housing First as a system response
- From Street Outreach, Shelter, and CE to affordable housing
Questions and Concerns

• Feel free to type your questions into the chat box
• If you feel uncomfortable asking a question, you can chat a presenter directly

Resources for Further Reading
• Housing First Self Assessment
• CSH Supportive Housing 101
• USICCH Deploy Housing First Systemwide
Dimensions of

QUALITY
Supportive Housing

CSH
ABOUT CSH

CSH transforms how communities use housing solutions to improve the lives of the most vulnerable people. We offer capital, expertise, information and innovation that allow our partners to use supportive housing to achieve stability, strength and success for the people in most need. CSH blends over 20 years of experience and dedication with a practical and entrepreneurial spirit, making us the source for housing solutions. CSH is an industry leader with national influence and deep connections in a growing number of local communities. We are headquartered in New York City with staff stationed in more than 20 locations around the country. Visit csh.org or email consulting@csh.org to learn how CSH has and can make a difference where you live.

ACKNOWLEDGEMENTS

CSH would like to thank MetLife Foundation for its generous support of the development of the CSH Dimensions of Quality Supportive Housing.

INQUIRIES

For additional resources and materials related to the CSH Dimensions of Quality Supportive Housing please visit csh.org/quality.

PERMISSIONS REQUESTS

We encourage nonprofit organizations and government agencies to freely reproduce and share the information from CSH publications. The organizations must cite CSH as the source and include a statement that the full document is posted on our website, csh.org. Permissions requests from other types of organizations will be considered on a case-by-case basis; please forward these requests to info@csh.org.
BACKGROUND OF THE CSH DIMENSIONS OF QUALITY SUPPORTIVE HOUSING, SECOND EDITION

Over its 20-year history, CSH has worked to promote the development of supportive housing throughout the country at the highest levels of quality. Based on its knowledge, and following more than two years of focused conversations with supportive housing tenants, providers, funders and stakeholders, CSH in 2009 created a comprehensive set of resources describing quality in supportive housing — the Dimensions of Quality Supportive Housing (DOQ).

Since that time, CSH has provided training and technical assistance to numerous organizations using the DOQ as a framework. Many organizations have accessed and used the DOQ to plan or strengthen their projects. Based on these experiences, CSH identified aspects of the DOQ that have been most valuable to communities, as well as opportunities to strengthen them. This second edition of the Dimensions of Quality Supportive Housing reflects our work with communities to identify the aspects of high-quality supportive housing projects, and it includes updates to align with best practices in the field.

In creating and sharing the CSH Dimensions of Quality Supportive Housing, CSH strives to:

- Build the capacity of the supportive and affordable housing industries to create and operate high-quality, effective, and sustainable supportive housing units
- Encourage the investment of adequate resources, especially from public systems, to support that capacity
- Ensure that existing resources for supportive housing are being used efficiently and effectively, and support the allocation of new resources
- Create better outcomes for supportive housing tenants, especially those with multiple barriers to housing stability

DEFINING SUPPORTIVE HOUSING

Supportive housing is a combination of affordable housing and supportive services designed to help vulnerable individuals and families use stable housing as a platform for health, recovery and personal growth. It focuses on balancing three distinct components of the model — housing, supportive services, and property and housing management. These three components can be viewed as a “three-legged stool,” in which each part must bear equal weight to have a balanced project. Supportive housing, however, should not be isolated from the larger community. A project’s relationship to the community adds a vital fourth leg, turning the stool into a community table at which supportive housing providers must have a seat.

Quality supportive housing projects are as diverse as the communities in which they are located. Despite these differences, all supportive housing:

- Targets households whose heads of household are experiencing homelessness, at risk of homelessness, or are inappropriately staying in an institution. They may be facing multiple barriers to employment and housing stability, including mental illness, substance use, and/or other disabling or chronic health conditions
• Is affordable, meaning the tenant household ideally pays no more than 30% of its income toward rent
• Provides tenant households with a lease or sublease identical to non-supportive housing — with no limits on length of tenancy, as long as lease terms and conditions are met
• Proactively engages members of the tenant household in a flexible and comprehensive array of supportive services, without requiring participation in services as a condition of ongoing tenancy
• Effectively coordinates with key partners to address issues resulting from substance use, mental health and other crises, with a focus on fostering housing stability
• Supports tenants in connecting with community-based resources and activities, interacting with diverse individuals including those without disabilities, and building strong social support networks.

CORE OUTCOMES FOR TENANTS IN SUPPORTIVE HOUSING

Supportive housing positively impacts a variety of stakeholders, but at its core, focuses on improving the lives of its tenants. Although it is important to understand and measure the quality of individual aspects of supportive housing, such measures are meaningless if they do not produce positive results for tenants. There are many outcomes that an organization may wish to track, but the five outlined here are the core outcomes that all successful supportive housing should observe. The CSH Dimensions of Quality Supportive Housing help organizations understand how to create and operate supportive housing that will best achieve these outcomes. CSH encourages organizations to know their baseline performance with regard to these outcomes and use them to set aggressive targets for improvement.
**Tenants Stay Housed**
Supportive housing is designed to break a cycle of housing instability for tenants and ensure they remain in permanent housing.

- Tenants stay in permanent housing. This is inclusive of tenants who exit supportive housing to other permanent housing.

**Tenants Improve Their Physical and Mental Health**
Supportive housing and associated services help tenants to access needed physical and mental health care and improve their health status.

- Tenants promptly receive any needed medical care, including preventive care.
- Tenants promptly receive any needed mental health care.
- Tenants with mental health challenges report progress toward recovery since entering supportive housing.
- Tenants strongly agree: “Staff helped me obtain information I needed so that I could take charge of managing my illness.”

**Tenants Increase Their Income and Employment**
Tenants increase their income in supportive housing by obtaining benefits and/or employment. In cases in which tenants are already employed or receiving all benefits for which they are eligible, they maintain their income.

- Tenants who have been in supportive housing for one year or more have increased their income.
- Tenants who enter supportive housing with income and/or employment have maintained it.
- Tenants who express a desire to work are supported and ultimately, successfully employed.

**Tenants Are Satisfied With the Services and Housing**
Tenant satisfaction is an important outcome that ultimately affects the quality of life for tenants and the ability of supportive housing projects to help tenants achieve housing stability.

- Tenants are satisfied with their housing.
- Tenants are satisfied with the services available to them.

**Tenants Have Social and Community Connections**
Supportive housing helps tenants to develop connections to their community and build social support networks.

- Tenants are active community members who choose to participate in organizations such as faith communities and peer associations, and/or in activities such as volunteering, voting, community gardens or block parties.
- Tenants report a strong social support network.
USING THE CSH DIMENSIONS OF QUALITY SUPPORTIVE HOUSING

CSH designed the Dimensions of Quality Supportive Housing for a wide variety of stakeholders including developers, landlords, service providers, funders, tenant leaders, housing managers, property managers, government officials and health care organizations. The DOQ apply to all models of supportive housing projects in locations ranging from rural to suburban to urban. This document organizes information in two primary ways:

- **Component**—The four primary elements of a supportive housing project:
  - **Project Design and Administration**—The process of planning and leading the supportive housing project, including key decisions about physical structure, team members and funding
  - **Property and Housing Management**—The ongoing operation of supportive housing and connection to private market landlords
  - **Supportive Services**—The package of support services available to help tenants use stable housing as a platform for individual health, recovery and personal growth
  - **Community**—The relationship to and role of housing in the larger context in which it operates

- **Dimension of Quality**—All successful supportive housing projects are:
  - **Tenant-Centered**—Every aspect of housing focuses on meeting tenants’ needs
  - **Accessible**—Tenants of all backgrounds and abilities enter housing quickly and easily
  - **Coordinated**—All supportive housing partners work to achieve shared goals
  - **Integrated**—Housing provides tenants with choices and community connections
  - **Sustainable**—Housing operates successfully for the long term

The matrix on the following page summarizes the relationship of the components of a successful supportive housing project to the CSH Dimensions of Quality Supportive Housing. This matrix also serves as a high-level overview of quality supportive housing. The subsequent pages provide a detailed description of each Dimension of Quality as well as core outcomes for tenants that organizations operating high-quality supportive housing have observed. To access resources created to support organizations that are planning and operating quality supportive housing, please visit [csh.org/quality].
# CSH Dimensions of Quality Supportive Housing Summary Matrix

This matrix summarizes each component and dimension of a quality supportive housing project. Please continue to the subsequent pages for additional details. Visit [csh.org/quality](http://csh.org/quality) for available resources on planning for or operating quality supportive housing.

## Project Components

<table>
<thead>
<tr>
<th></th>
<th>Design and Administration</th>
<th>Property and Housing Management</th>
<th>Services</th>
<th>Community</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Tenant-Centered</strong></td>
<td>Tenants play an active role in planning the supportive housing project, and all partners share a common commitment to helping tenants thrive.</td>
<td>Staff educates tenants on their rights and responsibilities as leaseholders, actively soliciting tenant feedback.</td>
<td>Services are voluntary, customized, and comprehensive, reflecting the needs of all household members.</td>
<td>Tenants have meaningful opportunities for leadership through avenues such as tenant associations and board positions.</td>
</tr>
<tr>
<td><strong>Accessible</strong></td>
<td>The housing is affordable, in a location that meets tenants’ needs and accommodates persons with special needs.</td>
<td>Tenants move into housing quickly, and the process accommodates their varying backgrounds and cultural needs.</td>
<td>Staff actively works to ensure that tenants are aware of available services, which are at convenient hours and locations.</td>
<td>The housing application and screening process is part of a larger community strategy to coordinate access to housing.</td>
</tr>
<tr>
<td><strong>Coordinated</strong></td>
<td>Roles, responsibilities and communication strategies are clearly established among the supportive housing partners, codified in written agreements and revisited regularly.</td>
<td>Staff works closely with service providers and landlords to ensure tenants sustain stable housing.</td>
<td>The primary service provider has established connections to mainstream and community-based resources.</td>
<td>Tenants who have high service needs or who are high utilizers of existing systems are given priority for available units.</td>
</tr>
<tr>
<td><strong>Integrated</strong></td>
<td>The supportive housing project meets or exceeds community standards, and the partners actively engage in community dialogue.</td>
<td>All tenants are offered a choice of housing unit and have a lease identical to tenants not in supportive housing.</td>
<td>Staff supports tenants in developing and strengthening connections to their community.</td>
<td>There is an overall strategy promoting the ability of tenants to choose from a variety of housing models and neighborhoods.</td>
</tr>
<tr>
<td><strong>Sustainable</strong></td>
<td>The supportive housing project has funding that is adequate for its ongoing operations and allows it to target its intended tenants.</td>
<td>While respecting tenant rights and privacy, staff regularly checks to ensure that the unit remains in good condition and receives any needed maintenance.</td>
<td>The supportive housing project has funding that is sufficient to provide services to tenants on an ongoing basis and flexible enough to address changing tenant needs.</td>
<td>Goals outlined in community planning efforts, such as 10-year plans to end homelessness and consolidated plans, are furthered as a result of this supportive housing.</td>
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</tbody>
</table>
PROJECT DESIGN AND ADMINISTRATION

*The Project Design and Administration component refers to the process of planning and leading the supportive housing project, including key decisions about physical structure, team members and funding.*

**Tenant-Centered**

Tenants play an active role in planning the supportive housing project, and all partners share a common commitment to helping tenants thrive.

**Tenant-Driven Planning**

Tenants are part of the team creating the supportive housing project, providing meaningful and ongoing input during the project's planning phase.

- At least one individual who represents the target tenant population meets regularly with the supportive housing project team.
- There is at least one focus group comprised of members of the targeted tenancy.
- There are multiple, documented instances of how tenant feedback has been incorporated into the supportive housing.

**Commitment to Supportive Housing Goals**

The lead organization has clearly established and committed to goals for the supportive housing. Additional partners, such as landlords, housing and property managers, and service providers, are selected for their ability to help achieve tenant and overall supportive housing goals.

- Leadership and key staff members at the lead organization articulate the goals of the supportive housing and targeted tenant outcomes.
- These goals and target outcomes have been shared with all supportive housing partner organizations.
- These goals and outcomes are used as criteria when selecting additional partners such as landlords.

**Privacy and Living Space**

Housing unit and building features meet needs that tenants identify, including privacy, household activities and community interaction.

- Sharing of bedrooms by non-related, single, adult tenants is not required.
- The housing unit provides adequate living space for essential daily activities, such as cooking, eating, sleeping and studying.
- Based on the household composition, there are an adequate number of bedrooms.
- Each unit has a private bathroom and kitchen.
- The building includes common space, such as community rooms that can accommodate a variety of activities and where tenants can choose to interact with one another. Alternatively, common space is provided off-site for tenant use.
**Accessible**

The housing is affordable, in a location that meets tenants’ needs and accommodates persons with special needs.

**Affordability**

Housing units are affordable to tenants on an ongoing basis.

- The tenant household ideally pays no more than 30% of its household income toward rent and utilities, and never pays more than 50% of income toward such housing expenses.

**Location**

Housing units are located within neighborhoods that meet the needs of tenants, including safety and security, and are located near opportunities for employment, schools, services, shopping, recreation and socialization.

- Tenants report satisfaction with the location of their housing unit.
- Tenants report that they feel safe in their home.
- Housing units are located near a wide array of amenities. In locations where this is not feasible, a plan exists to assist tenants in accessing needed resources.

**Transportation**

The location of the housing unit provides easy access to public transportation with reasonable frequency, or alternate transportation options are provided to tenants.

- The housing is located near public transportation or transportation services are provided. Transportation options include night and weekend availability

**Physical Accessibility**

The housing unit, building and any associated common areas accommodate persons with special needs.

- There is a system to ensure that any needed accommodations are requested and completed prior to tenant move-in.
- Tenants can fully access any common rooms and public spaces, including lobbies, sitting areas, meeting rooms, mailrooms, laundry rooms and trash collection areas.
- The housing meets or exceeds the minimum number of accessible units as indicated by applicable federal, state and local laws. There are additional units that are adaptable or incorporate universal design standards.*

*Items may be most relevant for supportive housing projects that include the development of new units of housing (whether new construction or rehabilitation), rather than those leasing existing units in the community.
Coordinated

Roles, responsibilities and communication strategies are clearly established among the supportive housing partners, codified in written agreements and revisited regularly.

Roles and Responsibilities

Roles and responsibilities for each of the supportive housing partners are clearly defined in writing and are revisited and revised regularly to support the overall success of the supportive housing.

• There are written descriptions of each supportive housing partner’s role, including, at minimum, the project sponsor, housing and/or property manager and supportive services provider.
• These descriptions detail the responsibilities of each partner.
• These written descriptions are reviewed and revised annually at a minimum.

Communication

Staff regularly communicates regarding their roles and the coordination of their efforts.

• There are regularly scheduled forums for staff within all involved organizations to discuss their roles and the coordination of their efforts, tenant health and safety issues, and gaps in management and operations.
• There are effective methods and opportunities for communication among the project partners between scheduled meetings.

Continuous Quality Improvement

The supportive housing partners involved in ongoing operations schedule regular times to communicate and engage in a continuous quality improvement process to ensure project goals are being met.

• There are regularly scheduled forums for leaders within the supportive housing partner organizations to review performance against goals, identify any needed strategies for improvement and develop clear action steps.
**Integrated**

The supportive housing project meets or exceeds community standards, and the partners actively engage in community dialogue.

### Appearance

The supportive housing is attractive in appearance, and the unit and/or building maintains or exceeds community standards.

- Tenants maintain the exterior of their units in a manner consistent with their lease and local community.
- The scale, appearance, design, maintenance and quality of the building are consistent with the neighborhood and reflect or exceed local community standards.

### Community Dialogue

The supportive housing project partners are active in ongoing community dialogue and activities.

- The supportive housing partners participate in community improvement activities such as neighborhood association meetings and community policing discussions.
- The supportive housing partners are responsive to neighbors’ or community members’ concerns regarding the supportive housing.
- The supportive housing partners seek input from neighbors regarding the design, development and operating plans for the housing.*
- The supportive housing partners incorporate this input into the supportive housing structure and meet community needs (such as incorporating a gym or meeting space), if possible.*
- Regular updates on the supportive housing development process and ongoing operations are provided to neighbors.*

*Items may be most relevant for supportive housing projects that include the development of new units of housing (whether new construction or rehabilitation), rather than those leasing existing units in the community.
The supportive housing project has funding that is adequate for its ongoing operations and allows it to target its intended tenants.

**Capital Funding**

The financing of the supportive housing is structured to preserve its long-term affordability for tenants.

- There is a commitment, either through funding restrictions or through the presence of a mission-focused owner, to keep the property affordable for a significant period of time, typically at least 30 years.*
- If the supportive housing is near the end of its maximum affordability period, an ongoing ownership structure is identified to preserve its affordability.*

**Rent Subsidies/Operating Funding**

Long-term rental subsidies are in place to ensure affordable tenant rents and adequate income to cover operating expenses.

- The rent and/or operating subsidies for the supportive housing have been allocated to the sponsor organization for a multi-year period, ideally at least five years. Following this initial period, it is highly likely, based on history and current funding sources, that subsidies will be renewed.
- The project has sufficient cash flow and/or reserves to meet its ongoing obligations (such as debt service), operational costs and repair/replace major systems while maintaining affordable tenant rents. For a project that is not yet operational, the project budget indicates that these conditions will be met.

**Efficiency**

The design and operation of the housing incorporates features designed to increase efficiency and reduce ongoing expenses.

- Tenants are provided with information to assist them in environmentally friendly practices such as energy and water conservation, recycling and use of non-toxic household products.
- The housing incorporates appropriate and feasible green design practices, such as the use of energy-efficient and water-conserving fixtures and products.*
- The housing utilizes durable materials chosen to reduce future maintenance costs.*

*Items may be most relevant for supportive housing projects that include the development of new units of housing (whether new construction or rehabilitation), rather than those leasing existing units in the community.
PROPERTY AND HOUSING MANAGEMENT

Property management refers to the set of functions involved with receiving and processing tenant rental applications, receiving rent payments, and ensuring the ongoing physical upkeep of the housing. In projects that include ongoing ownership of units or a long-term master lease arrangement, property management staff is typically part of the supportive housing team. Housing management refers to the set of services concerned with connecting tenants to housing in the private rental market, making rental payments for units that the organization may lease directly from a landlord, and in some cases, receiving tenant rent payments. Such staff often serves as an ongoing landlord liaison and has a distinct role from a service provider. Housing management staff is typically found in organizations in which the tenants or the organization directly lease the units associated with the project from the existing rental market.

Tenant-Centered

Staff educates tenants on their rights and responsibilities as leaseholders, actively soliciting tenant feedback.

Tenant Education

Staff provides tenants with information on being good neighbors, their rights and responsibilities as leaseholders, building positive relationships with property management/landlords and other topics of interest to tenants.

- Shortly after move-in, staff provides tenants with an orientation to help maximize their experience with the housing and as tenants. This orientation introduces them to the housing unit, neighborhood, and their rights and responsibilities as leaseholders.
- Staff provides tenants with written materials to support the content covered in the orientation. Written materials use plain language, and staff assists tenants in understanding their content, when necessary.
- Multilingual staff, translated materials, and/or interpretation and translation services are available to tenants, as needed.

Tenant Feedback

Staff actively solicits tenant feedback in order to ensure the living environment helps tenants to achieve their goals.

- Staff actively solicits tenant feedback on their housing units/building.
- Tenants can provide feedback in multiple ways (e.g. written, oral, online).
- There is a tenant council or another tenant-led group that meets regularly with the supportive housing project partners.
- A significant percentage of tenants report being satisfied with their housing.

Tenant Communication

Staff provides tenants with clear information on making property management requests and addressing emergencies.

- Staff clearly communicates to tenants the process to make property management requests and the timeline for receiving a response.
- A plan for 24-hour crisis coverage exists to address urgent issues.
- There is a clearly communicated plan for tenants to reach staff quickly.
**Accessible**

Tenants move into housing quickly, and the process accommodates their varying backgrounds and cultural needs.

**Housing First**

The supportive housing entrance process supports moving persons quickly into housing from settings such as the streets or shelters, without preconditions of treatment acceptance or compliance.

- The application process is short, and tenants are housed quickly in a unit of their choosing.
- The eligibility criteria for the supportive housing meet the minimum that the funder(s) or landlord require (without additional criteria imposed).
- Sobriety is not an entrance requirement.
- Medication compliance is not an entrance requirement.
- Agreement to participate in services is not an entrance requirement.
- There is no minimum income requirement.

**Landlord Relations**

Staff has formed relationships with landlords and assists tenants in advocating for their entry into housing.

- Housing management staff has relationships with landlords who are willing to consider tenants who have poor credit, criminal backgrounds or prior evictions.**
- With tenant permission, housing management staff assists tenants in advocating for themselves with landlords and explaining potential background issues.**

**Items may be most relevant for supportive housing projects that lease existing units in the community rather than those that include the development of new units of housing.**

**Application Process**

The application process for the supportive housing project is streamlined, clearly stated and separate from any assessment for services.

- The housing application and screening processes are fully accessible to persons with disabilities. In addition, appropriate, reasonable accommodations and necessary supports are provided, as needed, during the application and screening processes.
- The housing application is separate from the service needs assessment and does not request detailed clinical information.
- There is a timely and clearly stated process for the approval or denial of housing applications and appeals. There is an established system for staff to communicate with tenants during this process and to track and retain documentation.
- The supportive housing application and intake processes include the minimum number of questions needed to determine tenant eligibility.
Cultural Competency

Every aspect of the application process is designed to ensure that prospective tenants with diverse cultures and backgrounds understand the information being requested.

- All materials for tenants are written in plain language, and staff assists tenants in understanding the content of written materials, when necessary.
- Any intake/application forms can be completed orally, and written materials are available in multiple languages.
- Multilingual staff, translated materials, and/or interpretation and translation services are available to tenants, as needed.
Coordinated

Staff works closely with service providers and landlords to ensure tenants sustain stable housing.

Building and Maintaining Landlord Relationships

Housing management staff quickly makes initial connections with landlords/property managers and promptly addresses any concerns.

- Shortly after move-in, housing management staff reaches out to landlords/property managers regarding tenant service needs and available services (with tenant permission).**
- Housing management staff promptly responds to any concerns raised by landlords/property management staff regarding supportive housing tenants.**
- Housing management staff has established and meets regularly with a landlord advisory group.**

**Items may be most relevant for supportive housing projects that lease existing units in the community rather than those that include the development of new units of housing.

Coordinating Property/Housing Management and Supportive Services

Property/housing management staff and supportive services providers perform distinct roles, but understand one another’s functions and communicate frequently.

- Property/housing management and supportive services have separate and distinct roles. Files and office space are not shared.
- There is a comprehensive, written eviction prevention policy that details how all supportive housing partners work together to promote housing stability. If eviction occurs, there is evidence of communication between service provider and property manager/landlord, including evidence of prevention efforts.
- If a tenant is behind on rent, staff works with tenants to create a rent repayment plan and ensures they have the necessary support to fulfill its terms.
- All property/housing management and services staff have received training in order to understand one another’s roles.
- Supportive services and property/housing management staff hold regularly scheduled forums to discuss their roles, the coordination of their efforts, any current issues, and to address gaps in services and operations.
- Property/housing management staff promptly notifies services staff of any unmet tenant service needs. Supportive services staff promptly notifies property management staff when they observe safety or maintenance concerns.
- When notified of any issues, property/housing management and services staff respond promptly.
**Integrated**

All tenants are offered a choice of housing unit and have a lease identical to tenants not in supportive housing.

**Housing Unit Choice**

Tenants are offered a choice between multiple units of housing. If possible, they are also given a choice between housing models and locations.

- Staff works with tenants to develop an understanding of their needs and wants from a housing unit.
- Staff supports tenants in searching for and selecting a housing unit that meets their needs, including any accessibility needs. This includes communication and advocacy with landlords as needed.
- Tenants are given the opportunity to view and choose among multiple housing units.

**Leases and Tenant Rights**

Tenants have standard leases or subleases and a clear understanding of their rights and responsibilities as tenants.

- All supportive housing tenants are provided with leases or subleases identical to non-supportive housing tenants — without service participation requirements or limits on length of stay (as long as lease terms are met). Ideally, the initial term of a lease or sublease is at least one year.
- Tenants cannot be evicted for not participating in services or for failing to follow through on their services and/or treatment plan.
- Tenants are not evicted for failing to maintain sobriety.
- As part of the lease signing process, property/housing management staff walks tenants through the lease agreement, clearly explaining their rights and responsibilities as leaseholders. Tenants are provided with a signed copy of their lease.
- Tenants are notified of the process for any lease violations and grievance/appeal procedures.
- Tenants are not removed from housing without legal eviction proceedings.
**Sustainable**

While respecting tenant rights and privacy, staff regularly checks to ensure that the unit remains in good condition and receives any needed maintenance.

**Housing Maintenance**

Housing units are inspected regularly, proactively maintained and any identified issues are quickly addressed.

- Staff inspects units prior to move-in and at least annually thereafter. The inspections ensure that units meet or exceed the U.S. Department of Housing and Urban Development’s Housing Quality Standards (HQS).
- Tenants are given proper notice of any scheduled inspections.
- Staff ensures that inspection results that require follow-up or corrective actions are addressed within reasonable timeframes.
- Property management staff has a comprehensive, written plan and schedule for inspections, pest control, routine maintenance and replacement activities designed to sustain the quality of the physical environment.
- There are clear procedures for tenants to report maintenance problems, and for work orders to be created and completed.
- Staff has funds available to address minor instances of tenant-caused damage to the unit, in the interest of maintaining landlord relationships and housing stability.
SUPPORTIVE SERVICES

The supportive services component refers to the comprehensive package of supports that help tenants sustain housing stability and meet life goals. These services may be provided by the project’s designated primary service provider or by collaborating organizations. The primary service provider ensures that tenants can access needed services on an ongoing basis.

Tenant-Centered

Services are voluntary, customized and comprehensive, reflecting the needs of all members of the household.

Service Design

All members of tenant households have easy, facilitated access to a flexible and comprehensive array of supportive services. Tenants are actively involved in choosing the services they would like to receive. The specific services and their intensity can vary over time, based on changing tenant needs.

- There is a comprehensive, written services plan for the supportive housing project. It describes the available services, identifying whether they are provided directly or through referral linkages, by whom, and in what location and during what days and hours.
- All tenants are provided with a menu of services that includes, at minimum, how to access case management services, medical services, mental health services, substance abuse treatment services, peer support, parenting skills, education, vocational and employment services, money management services, life skills training and advocacy.
- Service staff actively involves tenants in the design, development and implementation of their individualized service plans. Staff also works with tenants to develop goals that are realistic, achievable, measurable and tailored to the tenants’ preferences.
- The service design and staffing plan includes the opportunity for tenants to receive services and support from peers.
- Service needs assessments and individualized service plans are updated regularly to reflect tenants’ changing service needs and goals.
Delivering Voluntary Services

Supportive services staff uses a variety of proactive and creative strategies to engage tenants in on-site and/or community-based supportive services, but participation is not a condition of ongoing tenancy. In delivering services to tenants, staff uses the most appropriate techniques or best practices, based on tenants’ unique needs.

- Participation in services is voluntary, meaning that tenants can choose whether to participate and select the services they prefer. A significant percentage of tenant households voluntarily utilize at least one supportive service.
- Service staff is educated about techniques that engage and support tenants in changing their behavior, such as motivational interviewing and the stages of change model.
- Service staff is trained to deliver services effectively, taking into account each tenant’s age, culture, background and/or disability.
- Services are not time-limited and are available to tenants throughout their tenancy. Services staff is available to provide more frequent and intensive services at the beginning of a tenant’s residency, in order to facilitate the tenant’s transition into supportive housing.
- Service staff assists tenants to anticipate, prevent and manage the negative consequences of substance use or relapse. Supportive services staff works to reduce the harm caused by tenants’ substance abuse, including actively working to prevent evictions.
- Service staff is educated about evidence-based best practices that can assist them with tenants, such as trauma-informed care, integrated dual diagnosis therapy, wellness recovery action planning and critical time intervention.
- Service staff encourages all tenants to participate in meaningful activities, and assist all tenants who express a desire to work to obtain appropriate vocational services, employment services and employment.
- Service staff supports tenants in moving on from supportive housing if they choose to do so and ensures that interested tenants have access to appropriate supportive services after moving out.
**Accessible**

Staff actively works to ensure that tenants are aware of available services, which are at convenient hours and locations.

**Housing Outreach**

The service provider ensures that there are assertive outreach and in-reach efforts to facilitate the ability of persons living on the streets, in shelter or in institutions to access the supportive housing.

- The service provider uses, or partners with an organization that uses, assertive outreach and in-reach methods to engage people living on the streets, in emergency shelters, in jails or prisons, or in institutions such as nursing homes.

**Availability of Services**

Services staff ensures that tenants are aware of available services and that service hours and locations are convenient.

- Service staff meets with new tenants prior to move-in to review available supportive services options.
- Service staff meets with tenants regularly to review available supportive services.
- Tenants can choose to receive services in their home or can access services in a convenient community location.
- Service staff and programs are available during hours that ensure maximum access and utilization by tenants, including tenants who may be working or are engaged in other activities during regular business hours.
- Crisis services are available to tenants.
- All programs and spaces used for the delivery of services are fully accessible to persons with disabilities, and appropriate reasonable accommodations are provided to tenants with disabilities to facilitate their participation.
**Coordinated**

The primary service provider has established connections to mainstream and community-based resources.

### Connections With Mainstream and Community-Based Service Providers

The primary service provider facilitates tenants’ connections to resources and supportive services in the community, particularly behavioral healthcare, primary healthcare, substance use treatment and support, and employment.

- Soon after housing entry, staff assists all tenants in applying for relevant public benefits.
- The primary service provider establishes linkages, codified by MOUs or other written agreements, with providers of core services to tenants, including, at minimum, behavioral healthcare, primary healthcare, substance abuse treatment and support, and employment.
- Tenants can see a behavioral health care provider, including a psychiatrist if needed, within a short period of time after making the request.
- Tenants can see a primary health care practitioner shortly after making the request.
- Tenants have a primary health care provider.
- Tenants can access substance use treatment and support shortly after making the request.
- Tenants are connected with relevant workforce development and employment resources shortly after expressing interest.

**Integrated**

Staff supports tenants in developing and strengthening connections to their community.

### Community Connections

Staff works with tenants to identify community opportunities and relationships of interest and ensure that they have the support needed to pursue them.

- Staff provides tenants with information about community resources and activities in conjunction with the move-in process. This also includes an orientation to the neighborhood.
- Staff supports tenants in identifying and accessing community activities of interest, such as public gardens, faith communities and peer associations. This may include support with obtaining transportation.
- Staff provides tenants with opportunities to connect with peers, including other supportive housing tenants, if desired.
- Staff ensures tenants have opportunities to interact with diverse individuals, including persons without disabilities.
- Staff supports tenants in establishing or strengthening positive relationships with friends and/or family members.
**Sustainable**

The supportive housing has funding that is sufficient to provide services to tenants on an ongoing basis and flexible enough to address changing tenant needs.

### Funding Commitments

Funding or a funding strategy is in place to ensure that tenants have access to supportive services for the life of the project.

- Service funding for the supportive housing is committed/contracted for a multi-year period. Following this initial period, it is highly likely, based on history and current funding sources, that funding will be renewed.
- The service funding source(s) is flexible enough to allow for the specific services to change with client needs, both daily and throughout the life of the supportive housing.

### Provider Partnerships

The primary service provider has established linkages with other service providing organizations to ensure tenants have access to comprehensive services on an ongoing basis.

- The primary service provider has written agreements with external providers that services will be made available to tenants.
COMMUNITY

The most successful supportive housing does not operate in isolation, but serves an integral role in the larger community. This component represents the opportunities that an individual supportive housing project has to contribute to the achievement of larger community goals.

Tenant-Centered

Tenants have meaningful opportunities for leadership through such avenues as tenant associations and board positions.

Tenant Leadership

Leadership development opportunities for tenants are created and/or supported by all partners.

• The supportive housing partners support or promote the development of a community-wide (at the local, regional or state level) association of supportive housing tenants that meets regularly and is tenant-led.

• Each of the supportive housing partners has at least one tenant representative on their organization’s board. The organization(s) provides support to tenants who serve on boards by providing board mentors, transportation and/or a stipend.

• All external partner organizations have current or former recipients of their housing or services on their boards or in key leadership roles.

• Written agreements between the lead supportive housing partners and external partner organizations specify that current or former recipients of services or housing serve on their boards or in key leadership roles.

Accessible

The housing application and screening process is part of a larger community strategy to coordinate access to housing.

Coordinated Access

The supportive housing partners participate in or lead community efforts to coordinate access to housing.

• The supportive housing partners participate in a designated community process to coordinate access to housing, including the use of coordinated referrals and triage, common applications, common entrance criteria and centralized waitlists. If the community does not have coordinated access to housing, the supportive housing project partners clearly communicate the referral and application process to the entire community.

• The supportive housing partners participate in or lead efforts to ensure that community application processes, documentation of eligibility and intake processes are streamlined and efficient, so that applicants are not asked for the same information on multiple occasions.
Coordinated

Tenants who have high service needs or who are high utilizers of existing systems are given priority for available units.

Targeting Units

The supportive housing partners prioritize persons who are vulnerable or who are high utilizers of existing systems (e.g. hospital, jail, shelter) for all or a portion of available units.

- To the extent allowed by funding, the supportive housing prioritizes persons that community data identify as having a high need for services (such as a high vulnerability index score) or frequently utilizing crisis systems (frequent users) for all available units.

Discharge Planning

The supportive housing partners connect with and support the efforts of community stakeholders working to ensure positive institutional discharges.

- The supportive housing partners participate in community discharge planning efforts designed to ensure that persons exiting institutions such as hospitals, nursing homes or prison/jail do not experience homelessness after their release and make units available to support these efforts.

Integrated

There is an overall strategy promoting the ability of tenants to choose from a variety of housing models and neighborhoods.

Tenant Choice

The supportive housing partners help develop and implement a community plan designed to ensure that new supportive housing increases tenant choice with regard to housing models and locations.

- The community has a plan to ensure that supportive housing exists in a variety of models and locations, or the supportive housing partners promote the development of such a plan.

- For new projects, the model and location of the supportive housing contributes to the achievement of this plan by increasing tenant choice.
**Sustainable**

Goals outlined in community planning efforts, such as 10-year plans to end homelessness and consolidated plans, are furthered as a result of this supportive housing.

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**Community Planning**

The supportive housing project partners coordinate with larger community efforts, aligning with and furthering the achievement of related community plans.

- The development and/or ongoing operation of the supportive housing helps achieve goals outlined in relevant community plans, such as 10-year plans to end homelessness, consolidated plans and/or Olmstead implementation plans.
- The supportive housing project partners participate in the development and ongoing implementation of relevant community planning processes.

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**Data Tracking and Sharing**

While preserving client confidentiality, the supportive housing partners track and share demographic, performance and other relevant data to improve outcomes for tenants.

- The supportive housing uses appropriate information management systems to track relevant data, in order to determine its performance against project goals and community standards.
- The supportive housing partners participate in community data-sharing agreements to track data and performance community-wide.
Housing First Checklist: Assessing Projects and Systems for a Housing First Orientation

Housing First is a proven approach, applicable across all elements of systems for ending homelessness, in which people experiencing homelessness are connected to permanent housing swiftly and with few to no treatment preconditions, behavioral contingencies, or other barriers. It is based on overwhelming evidence that people experiencing homelessness can achieve stability in permanent housing if provided with the appropriate level of services. Study after study has shown that Housing First yields higher housing retention rates, drives significant reductions in the use of costly crisis services and institutions, and helps people achieve better health and social outcomes.

This checklist was designed to help you make a quick assessment of whether and to what degree housing programs — and entire systems — are employing a Housing First approach. Robust tools and instruments are available elsewhere to quantitatively measure program quality and fidelity to Housing First. This tool is not meant to take the place of those more rigorous assessments, but is intended to help Continuums of Care, individual housing and services providers, funders, and other stakeholders to communicate about, and quickly assess, alignment with key Housing First approaches.

Core Elements of Housing First at the Program/Project Level

For your homelessness service system to work the most efficiently and effectively, individual programs must embrace a Housing First approach. This portion of the checklist can help you assess the extent to which your local programs are implementing Housing First. You can use this tool for trainings or planning sessions, during a site visit or program audit, as a guide when reviewing funding applications, or for many other uses.

- 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 or projects 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 convictions, or behaviors that are interpreted as indicating a lack of “housing readiness.”

- 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.

Quick Screen: Does Your Project Use Housing First Principles?

1) Are applicants allowed to enter the program without income?

2) Are applicants allowed to enter the program even if they aren’t “clean and sober” or “treatment compliant”?

3) Are applicants allowed to enter the program even if they have criminal justice system involvement?

4) Are service and treatment plans voluntary, such that tenants cannot be evicted for not following through?
Programs or projects that cannot serve someone work through the coordinated entry process to ensure that those individuals or families have access to housing and services elsewhere.

Housing and service goals and plans are highly tenant-driven.

Supportive services emphasize engagement and problem-solving over therapeutic goals.

Participation in services or compliance with service plans are not conditions of tenancy, but are reviewed with tenants and regularly offered as a resource to tenants.

Services are informed by a harm-reduction philosophy that recognizes that drug and alcohol use and addiction are a part of some tenants’ lives. Tenants 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 lease violations, is not considered a reason for eviction.

Tenants in supportive housing are given reasonable 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.

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 back into homelessness is avoided.

**Core Elements of Housing First at the Community Level**

Housing First should be adopted across your community’s entire homelessness response system, including outreach and emergency shelter, short-term interventions like rapid re-housing, and longer-term interventions like supportive housing. You can use this part of the checklist to assess the extent to which your community has adopted a system-wide Housing First orientation, as well as guide further dialogue and progress.

Your community has a coordinated system that offers a unified, streamlined, and user-friendly community-wide coordinated entry process to quickly assess and match people experiencing homelessness to the most appropriate housing and services, including rapid re-housing, supportive housing, and/or other housing interventions.

Emergency shelter, street outreach, and other parts of your crisis response system implement and promote low barriers to entry or service and quickly identify people experiencing homelessness, provide access to safety, make service connections, and partner directly with housing providers to rapidly connect individuals and families to permanent housing.

Outreach and other crisis response teams are coordinated, trained, and have the ability to engage and quickly connect people experiencing homelessness to the local coordinated entry process in order to apply for and obtain permanent housing.

Your community has a data-driven approach to prioritizing housing assistance, whether through analysis of the shared community assessment and vulnerability indices, system performance measures from the Homeless Management Information System, data on utilization of crisis services, and/or data from other
systems that work with people experiencing homelessness or housing instability, such as hospitals and the criminal justice system.

- Housing providers and owners accept referrals directly from the coordinated entry processes and work to house people as quickly as possible, using standardized application and screening processes and removing restrictive criteria as much as possible.

- Policymakers, funders, and providers conduct joint planning to develop and align resources to increase the availability of affordable and supportive housing and to ensure that a range of options and mainstream services are available to maximize housing choice among people experiencing homelessness.

- Mainstream systems, including social, health, and behavioral health services, benefit and entitlement programs, and other essential services have policies in place that do not inhibit implementation of a Housing First approach. For instance, eligibility and screening policies for benefit and entitlement programs or housing do not require treatment completion or sobriety.

- Staff in positions across the entire housing and services system are trained in and actively employ evidence-based practices for client/tenant engagement, such as motivational interviewing, client-centered counseling, critical time interventions, and trauma-informed care.

**Additional Resources**

- [Implementing Housing First in Supportive Housing](USICH, 2014) – discusses supportive housing and Housing First as tools for ending chronic homelessness and helping people with disabilities live independently in the community.

- [Webinar: Core Principles of Housing First and Rapid Re-Housing](USICH, 2014) – describes the core components of the Housing First approach and the rapid re-housing model and how both work together to help end homelessness.

- [Four Clarifications about Housing First](USICH, 2014) – clarifies some common misperceptions about Housing First.

- [It’s Time We Talked the Walk on Housing First](USICH, 2015) – advances our thinking on Housing First.

- [Housing First in Permanent Supportive Housing](HUD, 2014) – provides an overview of the principles and core components of the Housing First model.

- [Permanent Supportive Housing Evidence-Based Practices KIT](SAMHSA, 2010) – outlines the essential components of supportive housing, along with fidelity scales and scoresheets.

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Overview: This tool aims to assess and document how closely a housing and service provider adheres to the recommended best practice standards of the Housing First model, in the context of the broader work to implement a Housing First orientation at the system-level. This tool specifically evaluates project-level fidelity to Housing First, which directly impacts a system’s fidelity to Housing First. In addition to the universal best practice standards identified in this tool, Continuums should also take into account their local community context and local written standards pertaining to Housing First when assessing projects. A Continuum of Care can use this tool to prompt discussion and to

Provider Info tab: The Provider Information tab should be completed prior to beginning the assessment. Specifically, the Project Name, Project Type, Target Sub-Population served, and Date of Assessment fields need to be completed in order to populate the assessment standards and report summary with questions that are specific to the project type and population. Please complete this section prior to printing any standards for assessment.

Standards: The standards have been arranged into the following categories: Access, Evaluation, Services, Housing, Leases, and Project-Specific. The “Tab” chart at the bottom of this page describes each of the categories in more detail. Some of the categories are not applicable for all project types, and those standards do not need to be completed,

<table>
<thead>
<tr>
<th>Project Type</th>
<th>Applicable Standards</th>
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<tbody>
<tr>
<td>Coordinated Entry</td>
<td>Access &amp; Evaluation; Project-specific</td>
</tr>
<tr>
<td>Street Outreach</td>
<td>Access &amp; Evaluation; Project-specific</td>
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<tr>
<td>Emergency Shelter</td>
<td>Access &amp; Evaluation; Service &amp; Housing; Project-specific</td>
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<tr>
<td>Transitional Housing</td>
<td>Access &amp; Evaluation; Service &amp; Housing; Leases; Project-specific</td>
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<tr>
<td>Rapid Rehousing</td>
<td>Access &amp; Evaluation; Service &amp; Housing; Leases; Project-specific</td>
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<tr>
<td>Permanent Supportive Housing</td>
<td>Access &amp; Evaluation; Service &amp; Housing; Leases; Project-specific</td>
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Safeguarding: Please keep in mind safeguarding concerns when assessing projects. In particular, we advise Continuums of Care to work with projects with victims of domestic violence to make sure that adequate safety and confidentiality policies and practices are in place before beginning assessments.

Scoring: For each standard, there are three scoring criteria: “Say It”, “Document It”, and “Do It” (as explained further below). To show that a project is in full compliance with each standard, the assessor should mark “Always” for each scoring criteria. Use the drop down in the three columns to the right to select “Always” or “Somewhat” or “Not at

- “Say It” means that project and agency staff can describe verbally what they do concerning each standard. The assessor should be able to identify that the organizational culture supports the standard by how staff talks about what is done.
- “Document It” means that there is written documentation that supports the project’s compliance with each standard. Written documentation could include Policies and Procedures, Personnel Handbooks, Professional Development Plans, Project Rules, etc.
- “Do It” means that the assessor was able to find evidence that supports the project’s compliance with each standard. Evidence could include information contained in client or other administrative files, client acknowledgement that something is being done, staff can point to documentation that supports implementation of the standard, etc.

Assessor Notes: A cell below each individual standard allows the assessor to add optional notes about the information collected for that particular standard. The notes can include where information was found, what questions were asked, who answered the questions, what additional information is needed to be able to mark that standard as
<table>
<thead>
<tr>
<th>Instructions</th>
<th>Tool overview and aim</th>
<th>Offers instruction to users on the assessment tool</th>
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<tbody>
<tr>
<td>Provider Info</td>
<td>Input provider, project and general assessment information</td>
<td>Determines project-specific standards for consideration</td>
</tr>
<tr>
<td>Standards - Access &amp; Evaluation</td>
<td>Input compliance with standards concerning participant access to the project and input, project evaluation and performance management</td>
<td>Assesses whether access and evaluation are compliant with Housing First principles</td>
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<tr>
<td>Standards - Leases</td>
<td>Input compliance with standards concerning the lease and occupancy agreements, where applicable</td>
<td>Assesses whether leases and occupancy agreements are compliant with Housing First principles</td>
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<tr>
<td>Standards - Services &amp; Housing</td>
<td>Input compliance with standards concerning the service and housing models and structure, where applicable</td>
<td>Assesses whether services and housing are compliant with Housing First principles</td>
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<tr>
<td>Standards – Project-Specific</td>
<td>Prompts assessment standards based on project type and targeted sub-populations served by the project, where applicable</td>
<td>Assesses whether specific project standards are compliant with Housing First principles</td>
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<tr>
<td>Report Summary</td>
<td>Displays assessment scores and conclusions, and highlights non-compliant standards</td>
<td>Printable summary of the assessment</td>
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**Provider Information**

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<td>Acronym (If Applicable)</td>
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**Project Information**

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<td>Project Director Phone Number</td>
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**Which best describes the project?**

Joint Transitional Housing & Rapid Rehousing

*Please note that when you select a project type, particular standards may not be relevant.*

**Management Information**

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<tr>
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<td>CEO Phone Number</td>
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<td>Name of Staff Member Guiding Assessment</td>
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<td>Staff Phone Number</td>
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**Assessment Information**

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<td>Assessor Email Address</td>
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<td>Assessor Phone Number</td>
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<td>Date of Assessment</td>
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### Housing First Standards

For each standard, please use the drop down boxes in the three columns to the right to select "Not at all" or "Sometimes" or "Always". Marking "Always" signifies full compliance for the standard.

<table>
<thead>
<tr>
<th>No.</th>
<th>Standard</th>
<th>Access Definition / Evidence</th>
<th>Say It</th>
<th>Document it</th>
<th>Do it</th>
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<td>Admission to projects is not contingent on pre-requisites such as abstinence of substances, minimum income requirements, health or mental health history, medication adherence, age, criminal justice history, financial history, completion of treatment, participation in services, “housing readiness,” history or occurrence of victimization, survivor of sexual assault or an affiliated person of such a survivor or other unnecessary conditions unless required by law or funding source.</td>
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<td>Procedures and oversight demonstrate that staff do everything possible to avoid denying assistance or rejecting an individual or family for the reasons listed in Access Standard #1.</td>
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<td>Equal access is provided in accordance with the 2012 and 2016 Equal Access Rules, meaning that any project funded by HUD must ensure equal access for persons regardless of one’s sexual orientation or marital status, and in accordance with one’s gender identity. Adult only households, regardless of marital status, should have equal access to projects (if these project types are not available within a CoC, the CoC should conduct an assessment to determine if these project types are needed and work with providers to accommodate the need). Please see Equal Access Rules here: <a href="https://www.hudexchange.info/resource/1991/equal-access-to-housing-final-rule/">https://www.hudexchange.info/resource/1991/equal-access-to-housing-final-rule/</a></td>
<td>Please select answer</td>
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<td>Projects have expedited admission processes, to the greatest extent possible, including helping participants obtain documentation required by funding sources, as well as processes to admit participants regardless of the status of their eligibility documentation whenever applicable.</td>
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<tr>
<td>Access 5</td>
<td>Intake processes are person-centered and flexible</td>
<td>Intake and assessment procedures are focused on the individual’s or family’s strengths, needs, and preferences. Projects do not require specific appointment times, but have flexible intake schedules that ensure access to all households. Assessments are focused on identifying household strengths, resources, as well as identifying barriers to housing that can inform the basis of a housing plan as soon as a person is enrolled in the project.</td>
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<table>
<thead>
<tr>
<th>Access 6</th>
<th>The provider/project accepts and makes referrals directly through Coordinated Entry</th>
<th>Projects actively participate in the CoC-designated Coordinated Entry processes as part of streamlined community-wide system access and triage. If these processes are not yet implemented, projects follow communities’ existing referral processes. Referrals from Coordinated Entry are rarely rejected, and only if there is a history of violence, the participant does not want to be in the project, there are legally valid grounds (such as restrictions regarding sex offenders) or some other exceptional circumstance that is well documented.</th>
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<td>Optional notes here</td>
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<table>
<thead>
<tr>
<th>Access 7</th>
<th>Exits to homelessness are avoided</th>
<th>Projects that can no longer serve particular households utilize the coordinated entry process, or the communities’ existing referral processes if coordinated entry processes are not yet implemented, to ensure that those individuals and families have access to other housing and services as desired, and do not become disconnected from services and housing. Households encounter these exits under certain circumstances, such as if they demonstrate violent or harassing behaviors, which are described within agencies’ regulation-adherent policies.</th>
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<tr>
<td>Optional notes here</td>
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<table>
<thead>
<tr>
<th>Name</th>
<th>Participant Input Definition / Evidence</th>
<th>Say It</th>
<th>Document it</th>
<th>Do it</th>
</tr>
</thead>
<tbody>
<tr>
<td>Participant Input 1</td>
<td>Participant education is ongoing</td>
<td>Project participants receive ongoing education on Housing First principles as well as other service models employed in the project. In the beginning of and throughout tenancy, participants are informed about their full rights and responsibilities as lease holders, including the potential causes for eviction.</td>
<td>Please select answer</td>
<td>Please select answer</td>
</tr>
<tr>
<td>Participant Input 2</td>
<td>Projects create regular, formal opportunities for participants to offer input</td>
<td>Input is welcomed regarding the project’s policies, processes, procedures, and practices. Opportunities include involvement in: quality assurance and evaluation processes, a participant leadership/advisory board, processes to formally communicate with landlords, the design of and participation in surveys and focus groups, planning social gatherings, integrating peer specialists and peer-facilitated support groups to compliment professional services.</td>
<td>Please select answer</td>
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<td>Optional notes here</td>
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</table>
# Housing First Standards

For each standard, please use the drop down boxes in the three columns to the right to select “Not at all” or “Sometimes” or “Always”. Marking “Always” signifies full compliance for the standard.

<table>
<thead>
<tr>
<th>Standard</th>
<th>Lease and Occupancy Definition / Evidence</th>
<th>Say It</th>
<th>Document It</th>
<th>Do It</th>
</tr>
</thead>
<tbody>
<tr>
<td>Leases 1</td>
<td>Housing is considered permanent (not applicable for Transitional Housing) Housing is not time-limited (though rent assistance may be) and leases are automatically renewable upon expiration, except with prior notice by either party.</td>
<td>Please select answer</td>
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</tr>
<tr>
<td>Leases 2</td>
<td>Participant choice is fundamental A 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. In project-based settings, participants should be offered choice of units within a particular building, or within the portfolio of single site properties. In projects that use shared housing, i.e. housing with unrelated roommates, participants should be offered choice of roommates, as available and as practical. Additionally, as applicable, participants are able to choose their roommates when sharing a room or unit.</td>
<td>Please select answer</td>
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<tr>
<td>Leases 3</td>
<td>Leases are the same for participants as for other tenants 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.</td>
<td>Please select answer</td>
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<tr>
<td>Leases 4</td>
<td>Participants receive education about their lease or occupancy agreement terms Participants are also 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.</td>
<td>Please select answer</td>
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<tr>
<td>Leases 5</td>
<td>Measures are used to prevent eviction</td>
<td>Property or building management, with services support, incorporates a culture of eviction avoidance, reinforced through practices and policies that prevent lease violations and evictions among participants, and evict participants only when they are a threat to self or others. Clear eviction appeal processes and due process is provided for all participants. Lease bifurcation is allowed so that a tenant or lawful occupant who is a 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.</td>
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<td>Optional notes here</td>
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<tr>
<td>Leases 6</td>
<td>Providing stable housing is a priority</td>
<td>Providers engage in a 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.</td>
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<td>Optional notes here</td>
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<tr>
<td>Leases 7</td>
<td>Rent payment policies respond to tenants’ needs (as applicable)</td>
<td>While tenants are accountable to the rental agreement, adjustments may be needed 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.</td>
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<td>Optional notes here</td>
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</table>
## Housing First Standards

For each standard, please use the drop down boxes in the three columns to the right to select “Not at all” or “Sometimes” or “Always”. Marking “Always” signifies full compliance for the standard.

<table>
<thead>
<tr>
<th>Standard</th>
<th>Services Definition / Evidence</th>
<th>Say it</th>
<th>Document it</th>
<th>Do it</th>
</tr>
</thead>
<tbody>
<tr>
<td>Services 1</td>
<td>Participants are able to choose from an array of services. Services offered are housing focused and include the following areas of support: employment and income, childhood and education, community connection, and stabilization to maintain housing. These should be provided by linking to community-based services.</td>
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<td><em>Optional notes here</em></td>
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<tr>
<td>Services 2</td>
<td>Person-centered Planning is a guiding principle of the service planning process</td>
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<tr>
<td>Services 3</td>
<td>Service connections are permanently available and accessible for participants in Permanent Supportive Housing. Rapid Re-Housing projects should, at a minimum, be prepared to offer services for up to 6 months after the rental assistance ends. In emergency shelter and transitional housing, services are available as long as the participant resides in the unit or bed – and up to 6 months following exit from transitional housing.</td>
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<tr>
<td>Services 4</td>
<td>Wherever possible, participants continue to be offered services even if they lose their housing unit or bed (for congregate projects), or if they are placed in a short-term inpatient treatment. Ideally, the service relationship should continue, despite a service hiatus during some institutional stays.</td>
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<tr>
<td>Services 5</td>
<td>Participant engagement is a core component of service delivery</td>
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<tr>
<td></td>
<td>Staff provide effective services by developing relationships with participants that provide immediate needs and safety, develop trust and common ground, making warm hand-offs to other mainstream service providers, and clearly explain staff roles. Engagement is regular and relationships are developed over time.</td>
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*Optional notes here*

<table>
<thead>
<tr>
<th>Services 6</th>
<th>Services are culturally appropriate with translation services available, as needed</th>
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<tbody>
<tr>
<td></td>
<td>Project staff are sensitive to and support the cultural aspects of diverse households. Wherever possible, staff demographics reflect the participant population they serve in order to provide appropriate, culturally-specific services. Translation services are provided when needed to ensure full comprehension of the project. Projects that serve families with children should have family-friendly rules that allow for different schedules based on work and school hours and have services that allow parents to participate in activities without having to constantly supervise their children themselves (i.e. can use the bathroom or take a shower without their children being in the bathroom with them).</td>
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*Optional notes here*

<table>
<thead>
<tr>
<th>Services 7</th>
<th>Staff are trained in clinical and non-clinical strategies (including harm reduction, motivational interviewing, trauma-informed approaches, strength-based)</th>
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<tbody>
<tr>
<td></td>
<td>Services support a participant’s ability to obtain and retain housing regardless of changes in behavior. Services are informed by a harm-reduction philosophy, such as recognizing that substance use and addiction are a part of some participants’ lives. Participants are engaged in non-judgmental communication regarding their behavior and are offered education regarding how to avoid risky behaviors and engage in safer practices.</td>
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</table>

*Optional notes here*

<table>
<thead>
<tr>
<th>Standard</th>
<th>Housing Definition / Evidence</th>
<th>Say It</th>
<th>Document It</th>
<th>Do It</th>
</tr>
</thead>
<tbody>
<tr>
<td>Housing 1</td>
<td>Housing is not dependent on participation in services</td>
<td>Participation in permanent and temporary housing settings, as well as crisis settings such as emergency shelter, is not contingent on participating in supportive services or demonstration of progress made on a service plan. Services must be offered by staff, but are voluntary for participants.</td>
<td>Please select answer</td>
<td>Please select answer</td>
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</table>

*Optional notes here*

| Housing 2 | Substance use is not a reason for termination | Participants are only terminated from the project for violations in the lease or occupancy agreements, as applicable. Occupancy agreements or an addendum to the lease do not include conditions around substance use or participation in services. If the project is a recovery housing model focused on people who are in early recovery from drugs or alcohol (as outlined in HUD’s Recovery Housing Brief), different standards related to use and subsequent offer of treatment may apply. See HUD’s Recovery Housing brief here: https://www.hudexchange.info/resource/4852/recovery-housing-policy-brief/ | Please select answer | Please select answer | Please select answer |
| Housing 3 | The rules and regulations of the project are centered on participants’ rights | Project staff have realistic expectations and policies. Rules and regulations are designed to support safe and stable communities and should never interfere with a life in the community. Participants have access to the project at all hours (except for nightly in and out shelter) and accommodation is made for pets. |
| Housing 4 | Participants have the option to transfer to another project | Transfers should be accommodated for tenants who reasonably believe that they are threatened with imminent harm from further violence if the tenant remains in the same unit. Whenever possible, transfers occur before a participant experiences homelessness. |
### Housing First Standards

For each standard, please use the drop down boxes in the three columns to the right to select "Not at all" or “Sometimes” or "Always". Marking "Always" signifies full compliance for the standard.

<table>
<thead>
<tr>
<th>Standard</th>
<th>Project -Specific Standards</th>
<th>Say It</th>
<th>Document it</th>
<th>Do it</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Project 1</strong></td>
<td><strong>Quick access to RRH assistance</strong></td>
<td>A Rapid Re-housing project ensures quick linkage to rapid re-housing assistance, based on participant choice.</td>
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<tr>
<td><strong>Project 2</strong></td>
<td><strong>RRH services support people in maintaining their housing</strong></td>
<td>Participants and staff understand that a primary goal of rapid re-housing is to end homelessness and move participants to permanent housing as quickly as possible, regardless of perceived barriers.</td>
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<tr>
<td><strong>Project 3</strong></td>
<td><strong>Providers continuously assess a participant’s need for assistance</strong></td>
<td>On an ongoing basis, providers assess a participant’s needs for continued assistance and provide tailored assistance based on those assessments.</td>
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<tr>
<td><strong>Project 4</strong></td>
<td><strong>Transitional housing is focused on safe and quick transitions to permanent housing</strong></td>
<td>Participants and staff understand that the primary goals of transitional housing are to provide temporary accommodations that are safe, respectful, and responsive to individual needs, address the services needs of participants, and re-house participants in permanent housing as quickly as possible, regardless of other personal issues or concerns, and as desired by the participant. Participation in transitional housing services does not inhibit participants from moving to permanent housing when they choose to. Assessment and planning for permanent housing placement begins as soon as the individual or family expresses a desire to transition to permanent housing.</td>
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</table>
TH projects provide appropriate services to meet the participants health and safety needs (e.g., persons in early recovery; domestic violence survivors; those who need special accommodations) when there are no permanent housing solutions available (with or without supportive services) or when the participant chooses transitional housing. Services are not required in order to participate in housing.

Optional notes here

<table>
<thead>
<tr>
<th>Standard</th>
<th>Population Specific Standards</th>
<th>Say It</th>
<th>Document It</th>
<th>Do It</th>
</tr>
</thead>
<tbody>
<tr>
<td>Population 1</td>
<td>Recovery housing is offered as one choice among other housing opportunities</td>
<td>Connection to recovery housing reflects individual choice for this path toward recovery. Abstinence-only spaces are incorporated into a Housing First model wherever possible, thus providing this type of recovery option to those who choose it. Recovery supports are offered, particularly connections to community-based treatment options.</td>
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</tr>
<tr>
<td>Population</td>
<td>Services</td>
<td>Description</td>
<td>Notes</td>
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<tr>
<td>2</td>
<td>relapse support</td>
<td>Housing and services include relapse support that does not automatically evict or discharge a participant from the project for temporary relapse. Relapse support might include referrals to outpatient treatment or direct provision of outpatient services or the ability to hold a unit for a certain period of time (30-90 days) while the participant undergoes residential treatment.</td>
<td>Please select answer</td>
<td>Please select answer</td>
</tr>
<tr>
<td>3</td>
<td>sustained recovery</td>
<td>Recovery housing projects provide services that align with participants' choice and prioritization of recovery, including but not limited to abstinence from substances (if that is a personal goal), long-term permanent housing stability, and stable income through employment or benefits. Support is offered through connections to community-based treatment options.</td>
<td>Please select answer</td>
<td>Please select answer</td>
</tr>
<tr>
<td>4</td>
<td>Population</td>
<td>No additional standards</td>
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</tbody>
</table>
Some standards have not been evaluated. Please return and complete all standards before finalizing report.

Score is calculated by awarding 1 point for standards answered 'sometimes' and 2 points for standards answered 'always'. Categories that are not applicable for your project are not included in the maximum potential score.
<table>
<thead>
<tr>
<th>Category</th>
<th>No.</th>
<th>Name</th>
<th>Standard</th>
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</table>

Non-Compliant Standards ("Not at all" to Whether Standard is Said)
<table>
<thead>
<tr>
<th>Category</th>
<th>No.</th>
<th>Name</th>
<th>Standard</th>
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</table>

Non-Documented Standards ("Not at All" to Whether Standard is Documented)
<table>
<thead>
<tr>
<th>Category</th>
<th>No. Name</th>
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Implementing Housing First in Permanent Supportive Housing

A Fact Sheet from USICH with assistance from the Substance Abuse and Mental Health Services Administration

Permanent Supportive Housing is an intervention for people who need housing assistance and supportive services to live with stability and independence in their communities. Many supportive housing programs use a Housing First approach (rapid access to housing with minimal preconditions) to serve people experiencing homelessness.

- **Permanent Supportive Housing** is a combination of housing and services designed for people with serious mental illnesses or other disabilities who need support to live stably in their communities. These services can include case management, substance abuse or mental health counseling, advocacy, and assistance in locating and maintaining employment. Permanent Supportive Housing is a proven solution for people who have experienced chronic homelessness as well as other people with disabilities, including people leaving institutional and restrictive settings.

- **Housing First** is an approach and framework for ending homelessness that is centered on the belief that everyone can achieve stability in permanent housing directly from homelessness and that stable housing is the foundation for pursuing other health and social services goals. Implementing Housing First involves both project-level and community-level dimensions. Implementing Housing First at project level, including in permanent supportive housing models, means having screening practices that promote the acceptance of applicants regardless of their sobriety or use of substances, completion of treatment, and participation in services. At the community-level, Housing First means that the homelessness crisis response system is oriented to help people obtain permanent housing as quickly and with as few intermediate steps as possible.

Permanent supportive housing and Housing First should be thought of as two complementary tools for ending chronic homelessness and helping people with disabilities live independently in the community. Permanent supportive housing is a successful and proven programmatic and housing intervention, while Housing First is a framework that can and should be used within permanent supportive housing, as well as in other program models, and as a community-wide framework for ending homelessness.

**Implementing Housing First in Permanent Supportive Housing**

Two useful tools for implementing Housing First in supportive housing models are SAMHSA's Permanent Supportive Housing KIT and USICH's Housing First Checklist. An analysis by SAMHSA has determined that these tools can be used together by providers to offer a highly effective response to chronic homelessness:

SAMHSA's [KIT on Permanent Supportive Housing](#) suggests that this Evidence-Based Practice works best when the supports provided honor the individual's preferences and choices. Fidelity to SAMHSA's KIT also means that permanent supportive housing does not impose special obligations to retain tenancy rights outside of the typical landlord-tenant relationship.

In permanent supportive housing, housing is viewed as a basic human need, distinct from the need for mental health and/or substance abuse treatment. A permanent supportive housing program may be run either by the behavioral health system or by providers of homelessness services. Whether people live in apartments, other shared housing or instead receive services in their own homes, the intention of all permanent supportive housing is to offer them flexible, voluntary supports without regard to their willingness to engage in clinical treatment services. However, the approach also calls for assertive, nonjudgmental efforts to engage people in needed services. Programs typically
employ service models such as Assertive Community Treatment (ACT) and clinical models such as Motivational Interviewing. SAMHSA’s PSH KIT identifies seven key elements that are essential to tenants’ success. These include:

**Choice of Housing:** To the extent possible, people should also be able to choose the type of housing they prefer. Some research (Tabol et al., 2010) shows that people have better outcomes when living in housing that meets their expressed preferences.

**Separation of Housing and Services:** Property management and case management functions are separate and distinct. Ideally, housing units and services are provided by separate entities.

**Decent, Safe, and Affordable Housing:** Housing is considered affordable when tenants pay no more than 30 percent of their income toward rent plus basic utilities. Housing is considered safe and decent if the unit meets U.S. Department of Housing and Urban Development (HUD) Housing Quality Standards.

**Integration:** Federal law and the Olmstead Supreme Court decision support the need for PSH to be provided in integrated settings. Such settings may be scattered-site housing or housing in which units are available to people who do not have disabilities or histories of homelessness.

**Rights of Tenancy:** Tenants must have a lease that is in compliance with local landlord/tenant law.

**Access to Housing:** Access to housing should not be denied based on requirements that prospective tenants be “ready” for housing. PSH programs that use a Housing First approach score higher on this dimension of the PSH Fidelity Scale.

**Flexible, Voluntary Services:** High-fidelity PSH requires that consumers/tenants are the primary authors of their treatment plans, and that the services that they chose under these plans are consumer-driven and chosen from a flexible “menu.” The PSH KIT’s Fidelity Scale allows programs to conduct a self-assessment of fidelity based on these elements. USICH developed the Housing First Checklist: Assessing Projects and Systems for a Housing First Orientation. The checklist contains the core elements of a community-wide set of practices that support Housing First.

USICH recommends that, at the program or project level:

- Admission/screening criteria should be structured to promote the acceptance of applicants regardless of sobriety or use of substances, completion of treatment, or participation in services.
- Applicants are seldom rejected on the basis of poor credit/financial history, rental history, minor criminal convictions, or behaviors indicating a lack of “housing readiness.”
- Programs accept referrals from shelters, outreach, drop-in centers, and other parts of the crisis response system.
- Plans are tenant-driven and focused on problem solving, and services are voluntary.

The Checklist further identifies specific program practices “found in advanced models” such as the use of evidence-based practices and a tenant selection plan that prioritizes eligible tenants on criteria such as duration/chronicity of homelessness, vulnerability, or high use of crisis services. Other useful components of the Checklist are operational guidance for effective system-level planning and system operations.
The Annual Point-in-Time Count was conducted on January 24th, 2019. The information represents a snap-shot of homelessness on a single night. 42 counties collected surveys which (based on population size) accounts for 65% of the total TX BoS CoC.

8,072 individuals experiencing homelessness

### 2018-2019 Comparison

- **6% overall increase** in those experiencing homelessness (2018-2019)
  - 8% increase in persons residing in Transitional Housing
  - 14% increase in unsheltered

#### For the full data set please email data@thn.org
Using a Housing First Philosophy When Serving Youth

What is Housing First?
The Housing First approach focuses on quickly connecting people experiencing a housing crisis to permanent housing without preconditions and barriers to entry (e.g., sobriety, treatment, or service participation requirements) while also providing necessary supports to help maintain housing and prevent a return to homelessness. Supportive services are offered based on assessed need but are not required.

Adopting a Housing First approach can be challenging for any provider organization, including those that serve youth. It is important for providers to understand the core principles of Housing First as they relate to youth, and ways in which the provider may need to change or reorient their existing approach to successfully implement Housing First.

Core Principles of Housing First for Youth

- **Immediate access to permanent housing with no preconditions**: Youth should be provided with access to safe and secure permanent housing that meets their needs as quickly as possible.

- **Youth choice and self-determination**: Housing First is a person-centered approach that promotes choice regarding housing and service options, while maintaining high expectations for youth.

- **Individualized and youth-driven supports**: All youth are different. Once housed, the level of service offered will depend on the unique needs and choices of the youth. Non-time limited supports provide a practical, person-centered approach that assist in helping youth maintain their housing independently.

- **Persistent Engagement**: Staff should utilize an assertive style of case management, and continuously attempt to engage youth, even if youth are resistant to services.

When making the transition to a Housing First orientation, it is important to involve all levels of your organization, including youth. When Safe Space NYC, an organization serving youth with HIV/AIDS, decided to embrace Housing First, they held a training session with their board and all staff. Next, they reviewed all of their policies to remove any aspect that was consequence-driven. Finally, they engaged with their youth participants to discuss other structural changes to the program and garner buy-in.
Techniques for Engagement
When organizations adopt a Housing First approach, they may need to adopt new techniques to better serve the youth, such as:

- **Positive youth development**: Focuses on the strengths that youth already have and builds protective factors and resiliency. Positive youth development strategies include giving youth access to experiences that build leadership and boost self-awareness.

- **Trauma Informed Care**: Most homeless youth have experienced trauma in their lives that is affecting the ways in which they currently behave. This technique recognizes the signs and symptoms of trauma in clients, families, staff, and others involved with the system, and then responds by fully integrating knowledge about trauma into policies, procedures, and practices.

- **Harm Reduction**: For youth and young adults who are actively engaged in substance use, a harm reduction approach is important for youth to be able to honestly address substance use issues and make responsible decisions regarding their substance use. Abstinence-focused models may be available for youth and young adults; however, the choice should lie with the project participant, and communities should ensure that housing options are available for youth at all stages of recovery, including youth who continue to use drugs or alcohol. Sexual health is an important part of physical well-being, and should be incorporated in harm reduction conversations with youth.

- **Motivational Interviewing**: Motivational interviewing is an approach that works to engage and facilitate a youth’s intrinsic motivation to change their behavior. This approach is traditionally used to engage youth in changing health behaviors, but is also successful with changing behavior around attending school or work. Motivational interviewing is collaborative and person-centered, and honors a youth’s autonomy and decision making. With this model, youth are engaged to think differently about their behavior and ultimately to consider what might be gained through change.

Some youth may not be ready for the independence of permanent housing. A key innovation of Housing First for youth is the inclusion of transitional housing as an option. Transitional housing, with the availability of more extensive supports and possibly congregate living, may be appropriate for some youth, and may be what youth prefer. A caveat of including transitional housing in a Housing First framework is that youth must be eventually supported to move to permanent housing (with supports, if needed).

Organizational Changes
- **Staff Buy-in**: From the organization’s Board of Directors to residential staff to case managers, all members of the organization will need to be trained (and re-trained) on Housing First. During the initial stages of implementation, the organization should provide a safe atmosphere for
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staff to discuss barriers to and difficulties with adhering to Housing First. The organization may experience turnover from staff who are unwilling to commit to the new direction. Turnover is a part of the process, and when hiring new staff, the interview process should include screening for understanding of and belief in the principles of Housing First.

- **Staff Roles:** Various roles within the organization may need to change. For instance, to provide the intensive supports that Housing First requires, an organization may need to hire additional staff with the intention of reducing case manager caseloads, allow staff to accompany each other on supportive services appointments, or hire staff who have clinical expertise. An organization may need to re-define job positions so that project management staff are separate and distinct from staff providing supportive services.

- **Transparency:** Utilizing a Housing First approach requires a greater level of transparency at all levels of the organization. Rather than engaging youth in a consequences-driven environment, providers should explain expectations of the project. Additionally, organizations should be clear with youth about other aspects of the organization, such as the length of the application and intake process, the conditions of being terminated from the project.

- **Relevant Services:** Organizations should be structuring their service packages to be responsive to needs identified by the youth in their projects and appealing in a way that so that youth want to engage. While services are not required, staff should continue to attempt to engage youth in services, even if offers for services are continually or periodically rejected.

- **Termination Policy:** As with other populations, projects should provide youth with leases or occupancy agreements similar to those used in market rate apartments. This means that participating in supportive services should not be reason a project can evict a youth from the housing. It should also not be a reason for terminating a youth from the project as this should happen in only the most severe circumstances with staff doing their best to keep the youth housed. Projects should keep in mind that eviction and termination from the project are two different things and it is possible for a youth to be evicted from one unit while still participating in the project, meaning the provider can re-house the youth in a new unit.

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