
MA BALANCE OF STATE CoC, MA-516
AND
EMERGENCY SOLUTIONS GRANT
WRITTEN STANDARDS

COMMONWEALTH OF MASSACHUSETTS
EXECUTIVE OFFICE OF HOUSING AND LIVABLE COMMUNITIES
DIVISION OF HOUSING STABILIZATION

APPROVED MA BOS CoC ADVISORY BOARD **4/22/2026**

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1. EXECUTIVE SUMMARY

The Massachusetts Balance of State Continuum of Care MA-516 (BoS CoC) and Emergency Solutions Grant (ESG) are US Department of Housing and Urban Development (HUD) grant programs developed to promote a community-wide commitment to the goal of making homelessness rare, brief, and non-recurring. Their authority comes from the [McKinney-Vento Homeless Assistance Act, as amended by the HEARTH Act](#) which was signed into law on May 20 2009 and is codified at 24 CFR [576 \(ESG\)](#) and via the interim rule at 24 CFR [578 \(CoC\)](#). The Commonwealth of Massachusetts is the Collaborative Applicant (CA), project applicant, and recipient of BoS CoC and ESG funding, and this programming is implemented by the Division of Housing Stabilization within the Executive Office of Housing and Livable Communities (EOHLC) the lead agency, which is also the HMIS Lead.

As directed by HUD regulations and guidelines, the BoS CoC lead agency is required to set local program operating standards for all BoS CoC-funded projects in conjunction with the Advisory Board. The BoS CoC has developed these Written Standards in partnership with the ESG program. They cover policies and procedures that govern the BoS CoC and ESG programs in compliance with current laws and regulations, and default to the definitions of homelessness under HUD regulations.

This is a living document that is updated to reflect evolving needs among those at risk of or experiencing homelessness within the BoS CoC geography, policy modifications, and updates at the federal level. At least annually, the Collaborative Applicant (CA) and ESG Program Coordinator review the Written Standards. Any updates are presented to the BoS CoC Advisory Board for approval. The Advisory Board is also responsible for approving any updates made throughout the year which may be required to ensure compliance with changes at HUD or needs within the BoS CoC geography.

Written Standards changes will follow this process:

1. Updates to the Written Standards will result from these actions.
 - a. Changes can begin through committee work. This may be a standing committee, a special work group, or administrative committee designated to address a specific question.
 - b. Changes can also be the result of regulatory or policy updates at HUD, or federal policy changes that affect the CoC program specifically, or the households served through CoC projects.
 - c. In the event the CoC becomes aware of areas where it is not in compliance with standing regulation, Written Standards can be updated to bring the CoC into compliance.
2. Modifications proposed through one of the actions above will be presented to the BoS CoC Supervisor who will include the proposal in the next scheduled Advisory Board meeting agenda or hold a special meeting if there is an urgent need to make a decision more quickly.
3. Upon approval, the Written Standards will be updated immediately and the revision will be posted on the webpage promptly to ensure there is no delay in the availability of the update.

4. The updated Written Standards will be distributed to the full CoC membership prior to the next scheduled Planning meeting.

The most current version of the Written Standards can be found on the BoS CoC webpage [MA Balance of State \(BoS\) Continuum of Care \(CoC\) | Mass.gov](#).

2. WRITTEN STANDARDS

[Section 578.7\(a\)\(9\)](#) of the Interim Rule requires CoCs, in consultation with recipients of ESG funds within the geographic area, to establish and consistently follow written standards for providing CoC assistance. At a minimum, these written standards must include:

- (i) Policies and procedures for evaluating individuals' and families' eligibility for assistance;
- (ii) Policies and procedures for determining and prioritizing which eligible individuals and families will receive transitional housing assistance (these policies must include the emergency transfer priority required under [§ 578.99\(i\)\(8\)](#));
- (iii) Policies and procedures for determining and prioritizing which eligible individuals and families will receive rapid rehousing assistance (these policies must include the emergency transfer priority required under [§ 578.99\(i\)\(8\)](#));
- (iv) Standards for determining what percentage or amount of rent each program participant must pay while receiving rapid rehousing assistance;
- (v) Policies and procedures for determining and prioritizing which eligible individuals and families will receive permanent supportive housing assistance (these policies must include the emergency transfer priority required under [§ 578.99\(i\)\(8\)](#)).

These Written Standards are designed to comply with this regulation.

3. USING THIS DOCUMENT

As CoC and ESG are unique but complimentary programs, there are some standards that are applicable to both, and others that are specific to the individual program.

We have included commonalities in the Continuum of Care section, and a separate ESG section in an effort to capture distinct requirements for that program.

4. CONTINUUM OF CARE PROGRAM

4.1 PURPOSE OF CoC

The overarching purpose of the BoS CoC is to make homelessness within its [115-community geography brief](#), rare, and non-recurring. The BoS CoC also seeks to actively participate in efforts to prevent homelessness within its boundaries and recognizes the importance of partnering with all members of the communities being served.

Housing and service projects within the BoS CoC geography are funded by HUD as well as various other sources. The BoS CoC works in partnership with the Emergency Solutions Grant team at the Executive Office of Housing and Livable Communities (EOHLC) and in ESG entitlement communities, community partners, member organizations and persons with lived experience (PLEE) and expertise of homelessness to maximize and leverage all resources in support of those being served.

4.2 CoC PRINCIPLES AND VALUES

The BoS CoC operates with a commitment to fairness. This is achieved through:

- A focus on membership in the CoC, Advisory Board, and committees that reflects the population served along including persons with lived experience and expertise of homelessness ([PLEE](#));
- Strategic project development to serve those identified as most in need of housing and services in the BoS CoC geography through an annual gaps analysis as well as a needs assessment undertaken every three years;
- Use of a [Coordinated Entry system](#) that prioritizes those within the BoS CoC who are most vulnerable; and
- Advisory Board oversight and committee work.

4.3 PARTICIPATION OF INDIVIDUALS WITH LIVED EXPERIENCE

PERSONS WITH LIVED EXPERIENCE AND EXPERTISE OF HOMELESSNESS (PLEE) COMMITTEE

The Persons with Lived Experience and Expertise (PLEE) Committee is comprised of individuals who have personally experienced homelessness. Members of the committee draw upon their lived experience and knowledge of homelessness to inform BoS CoC policy, project, and program development. The PLEE Committee acts as a support network for individuals and families currently experiencing homelessness through mentorship and guidance based on shared experiences. The Committee is also tasked with educating CoC members, service providers, and community members to gain a better understanding of the experiences and needs of homeless individuals and families. Committee members who are participating independently and are not already being compensated for their time may be eligible for an hourly stipend.

4.4 PROJECT PERFORMANCE GOALS AND EXPECTATIONS

The BoS CoC relies on the System Performance Measures and the annual gaps analysis via the Stella Report to identify project performance goals and expectations. These documents are reviewed by an Administrative Committee comprised of BoS CoC staff and stakeholders, who determine goals and expectations annually.

5. ANNUAL CoC COMPETITION AND APPLICATION PROCESS

HUD publishes registration information for the CoC competition and remits a current Grant Inventory Worksheet (GIW) for CoC review. The CA reviews these materials and responds in accordance with the instructions to ensure submission no later than the deadline.

HUD then publishes the Notice of Funding Opportunity (NOFO) for the CoC competition which details HUD priorities, expectations, an overview of application scoring, and timelines for the NOFO response. After the NOFO publication, ancillary materials are provided detailing the process and information required in the CA and project applications, as well as other documentation such as the System Performance Report, and Estimated Renewal Demand.

The CA uses this information to create the BoS CoC NOFO Calendar which details deadlines and expectations for all participants. This is distributed along with an invitation to apply for funding via a Planning meeting, in an email to the full CoC mailing list, and posted on the [BoS CoC webpage](#).

6. PROCESS FOR NEW PROJECTS, RENEWALS, AND REALLOCATIONS

6.1 NEW PROJECTS

To include new projects in a CoC NOFO response, the CoC will utilize two options.

- 1) Prepare a Request for Responses (RFR) on the Commonwealth procurement system CommBUYS. This RFR will describe the types of project components and budget items that are eligible for CoC funding within the BoS geography, include an invitation for organizations that are not currently funded through the CoC, and ascribe a point system for evaluation that is consistent with HUD CoC and BoS CoC priorities.

This process will be completed before the CoC NOFO is released, and new projects to be included in the CoC NOFO response will be chosen from respondents to this procurement using the scoring mechanism defined in the RFR.

- 2) In the event new project types or new HUD priorities are identified in the HUD CoC NOFO, the CoC may develop application(s) that do not have subrecipients, and if awarded, subrecipients will be identified through the procurement process indicated in 1), or in consultation with existing subrecipients after the HUD award announcement.

6.2 RENEWAL PROJECTS

Renewal projects will submit a project application via e-snaps in accordance with the CoC NOFO calendar and instructions provided by HUD and the e-snaps office after the HUD CoC NOFO release. The CoC calendar is remitted via email to all subrecipients and the full CoC member mailing list, included in the minutes of the Planning or NOFO meeting held after the NOFO is released, and on the CoC webpage.

Each project application is reviewed by a CoC Team member. If errors are identified or changes are needed to ensure compliance with the NOFO or CoC priorities or to provide project clarity,

the team member will amend the project in e-snaps and work with the subrecipient to modify the application for resubmission.

6.3 REALLOCATIONS

Per the [BoS CoC Reallocation Policy](#), currently funded CoC projects may be partially or fully reallocated due to performance, NOFO compliance, or a CoC-identified priority requiring reallocation. These will be identified before projects are submitted for ranking and review.

7. PROJECT EVALUATION, RANKING AND REVIEW

The Project Evaluation Committee is a standing committee that is responsible for creating ranking criteria in accordance with HUD guidelines and uses an objective data-driven rating process to review and rank CoC projects to be included in the CoC NOFO response. The Committee develops the scoring tool with the objective rating factors to be used for new and renewal project ranking. This tool ensures that projects are being measured for regulatory compliance and for outcomes that reflect the priorities of HUD and the BoS CoC. This tool uses primarily objective criteria including information from the current project application and APR results for renewal applicants.

PROJECT RANKING

Per the [Project Rating and Ranking Policy](#), this Committee uses the scoring criteria developed in committee to review and rank new and renewal CoC projects to be included in the CoC NOFO response. After developing and testing a scoring tool, the Committee creates smaller teams of CoC members to review and score assigned CoC applications. Every team submits a report to the Committee of the scores reached in consensus for each project application assigned to that team. The Committee then convenes to review all scores, rank the projects, and make recommendations to the Advisory Board for final ranking.

In addition to individual project applications, the CA is required to submit a comprehensive CoC Application which provides information on the CoC as a whole including performance, regulatory compliance, and accomplishments.

The full CoC membership will have an opportunity for public comment on the CoC application prior to submission in e-snaps. The NOFO submission to HUD will consist of three parts:

1. CoC Application –This is the CoC’s overall application and primarily focuses on the CoC’s progress on ending homelessness, strategic initiatives, and adoption of HUD’s funding and policy priorities. It is a combination of narrative questions and data tables.
2. Priority Listing — This is a list of new and renewal projects being submitted for funding ranked in accordance with the BoS CoC Project Ranking Policies. The project ranking reflects HUD funding priorities, local need, and an objective, data-driven process for evaluating individual project performance. HUD requires that the project ranking is divided into two tiers. The percent of Tier 1 is determined in each unique Fiscal Year NOFO and is a percentage CoC’s Annual Renewal Demand (ARD).

3. Project Applications – Each project approved for inclusion in the local project ranking is included in the CoC's submission to HUD. Each project application must meet HUD's threshold review in order to receive funding in addition to undergoing the competitive scoring process.

8. ELIGIBLE PROGRAM COMPONENTS

Listed below are the Program Components eligible in the HUD CoC program as defined in the HEARTH Act and the regulations at 24 CFR 578.

8.1 PERMANENT SUPPORTIVE HOUSING (PSH) - Permanent Supportive Housing (PSH) [578.37\(a\)\(1\)\(2\)](#) is permanent housing in which housing assistance (e.g., long-term leasing or rental assistance) and [supportive services are provided](#) to assist households with at least one member with a disability in achieving housing stability. . To be eligible for PSH, households must meet the [HUD definition of homeless](#).

For both Chronic-Dedicated PSH and DedicatedPLUS PSH projects, an adult head of household (or, if there is no adult in the family, a minor head of household) must be the qualifying individual, meaning they must have the qualifying disability and meet all of the other criteria (i.e., length of time homeless) for a household to be considered eligible. For non-dedicated PSH projects, it would be allowable for either an adult or child household member to be the qualifying individual and qualify the household as eligible.

To be eligible for PSH under the CoC Program, the potential program participant must also meet any additional eligibility criteria set forth in the Fiscal Year NOFA under which the project was funded (e.g., be experiencing chronic homelessness).

PSH can also be funded as a DedicatedPLUS project where the entire project serves individuals and families that meet at least one of the following criteria at project entry:

1. Experiencing chronic homelessness as defined in [24 CFR 578.3](#);
2. Residing in a transitional housing project that will be eliminated and meets the definition of chronically homeless in effect at the time in which the individual or family entered the transitional housing project;
3. Residing in a place not meant for human habitation, emergency shelter, or safe haven; but the individuals or families experiencing chronic homelessness as defined at 24 CFR 578.3 had been admitted and enrolled in a permanent housing project within the last year and were unable to maintain a housing placement;
4. Residing in transitional housing funded by a Joint transitional housing (TH) and rapid re-housing (PH-RRH) component project and who were experiencing chronic homelessness as defined at 24 CFR 578.3 prior to entering the project;
5. Residing and has resided in a place not meant for human habitation, a safe haven, or emergency shelter for at least 12 months in the last three years, but has not done so on four separate occasions; or

6. Receiving assistance through a Department of Veterans Affairs (VA)-funded homeless assistance program and met one of the above criteria at initial intake to the VA's homeless assistance system.

8.2 PERMANENT HOUSING – RAPID REHOUSING (RRH) – RRH [578.37\(a\)\(1\)\(ii\)\(A\)\(B\)](#) is permanent housing that provides short-term (up to three months) and medium-term (4-24 months) tenant-based [rental assistance](#) and supportive services to households experiencing homelessness. HUD does not require that an individual have a disability to qualify for RRH. However, the program participant must meet the eligibility requirements set forth in the NOFA under which the project was funded. For additional information, refer to [BoS CoC RRH Written Standards](#) and [BoS CoC RRH Pilot](#).

8.3 TRANSITIONAL HOUSING (TH) – TH [§ 578.37\(a\)\(2\)](#) provides temporary housing with supportive services to individuals and families experiencing homelessness with the goal of interim stability and support to successfully move to and maintain permanent housing. TH projects can cover housing costs and accompanying supportive services for program participants for up to 24 months.

Participants in a TH project must have a signed lease, sublease, or occupancy agreement with the following requirements:

- An initial term of at least one month
- Automatically renewable upon expiration, except by prior notice by either party
- A maximum of 24 months

Projects can provide services to former residents of TH projects for up to six months after exiting TH to assist in the household's transition to independent living ([§ 578.75\(h\)](#)).

8.4 JOINT COMPONENT TRANSITIONAL HOUSING-RAPID REHOUSING (TH-RRH) - As part of the 2017 CoC Program competition, HUD announced that communities could apply for a new type of project that combines the activities of a transitional housing project with those of a rapid re-housing project to serve individuals and families experiencing homelessness. If funded, HUD will limit eligible costs as follows:

- Leasing of a structure or units, and operating costs to provide transitional housing
- Short- or medium-term tenant-based rental assistance on behalf of program participants in the rapid re-housing portion of the project
- Supportive services for the entire project
- HMIS for the entire project
- Project administrative costs for the entire project

If awarded, recipients or subrecipients must be able to provide both components, including the units supported by the transitional housing component and the tenant-based rental assistance and services provided through the PH-RRH component, to all program participants up to 24 months as needed by the program participants. For example, a program participant may only

need the temporary stay in transitional housing unit, but the recipient or subrecipient must be able to make available the financial assistance and supportive services that traditionally comes with rapid re-housing assistance to that program participant. This does not mean, however, that the applicant is required to request funding from the CoC Program for both portions of the project (e.g., the applicant may leverage other resources to pay for the transitional housing portion of the project).

8.5 SUPPORTIVE SERVICES (SSO) – SSO [§ 578.37\(a\)\(3\)](#) projects allow recipients to provide supportive services—such as conducting outreach to sheltered and unsheltered homeless persons and families and providing referrals to other housing or other necessary services—to families and individuals experiencing homelessness. The recipient may only assist program participants for whom the recipient or subrecipient of the funds is not providing housing or housing assistance.

9. ELIGIBLE COSTS

9.1 LEASING - Leasing costs are eligible under the Permanent Supportive Housing (PSH), Transitional Housing (TH), and Supportive Services Only (SSO) components.

Recipients and subrecipients may choose to use CoC Program funds to lease a structure or a portion of a structure that will be used for PSH, TH, or SSO projects. Leasing funds may also be used to lease individual housing units for TH or PSH.

Leasing funds can pay for the following activities:

- Rent for the unit or structure ([§ 578.49\(b\)\(1\)](#))
- Security deposits for up to 2 months ([§ 578.49\(b\)\(4\)](#))
- First and last month's rent (up to one month each, allowed as an advanced payment) ([§ 578.49\(b\)\(4\)](#))
- Staff or related costs to carry out leasing activities including conducting Housing Quality Standards (HQS), paying landlords, etc.
- Payments on unoccupied units while identifying a new program participant

Since the lease is between the recipient or subrecipient and the landlord, the recipient or subrecipient is liable for paying the rent even if a leased unit is not occupied. Therefore, recipients and subrecipients may continue to pay rent to owners even when a unit is vacant.

In CoC projects that pay for units with CoC leasing funds, the rent must be reasonable in relation to rents charged for comparable units in the area. CoC Program funds may not exceed the lower of Fair Market Rent (FMR) or the rent reasonableness limit for the unit. If unit rent is above the FMR, a recipient may pay the difference (not with HUD or match funds), but the recipient or subrecipient can never pay more than what is considered reasonable to support that unit.

9.2 RENTAL ASSISTANCE - CoC rental assistance funds can be used in Permanent Supportive Housing (PSH), Rapid Re-housing (RRH), or Transitional Housing (TH) to pay a portion of the rent. The length of time rental assistance can be provided varies depending on program component:

- Short-term (up to 3 mos.) or medium-term (4-24 mos.) – RRH, TH
- Long-term (more than 24 mos.) – PSH

There are three different types of rental assistance: [§ 578.51\(c\)-\(e\)](#).

1. Tenant-Based Rental Assistance (TBRA)
2. Project-Based Rental Assistance (PBRA)
3. Sponsor-Based Rental Assistance (SBRA)

TENANT-BASED RENTAL ASSISTANCE (TBRA) [§ 578.51\(C\)](#)

In TBRA, the program participants locate housing in the private rental market and enter into a lease with the property owner. Recipients/subrecipients may require participants to live in a specific structure for the first year, or a specific geographic area for the remainder of their participation in order to facilitate services.

As of July 2016, participants may use TBRA to rent units outside of the CoC's geographic area as long as the recipient meets certain requirements. It is important to review HUD's [Mobility Rule One Pager](#) to determine whether your program allows participants to move outside the CoC geography.

In TBRA, program participants are responsible for locating housing in the private rental market. If a program participant later moves to another unit, he/she can take the rental assistance and use it in the new unit. Although TBRA program participants may move and retain the rental assistance, recipients/subrecipients administering TBRA may limit where participants may reside if it is necessary to facilitate the coordination of supportive services.

SPONSOR-BASED RENTAL ASSISTANCE (SBRA) [§ 578.51\(D\)](#)

In SBRA, sponsor agencies rent units in the private market and then sublet the units to program participants. Sponsors may be private nonprofit organizations or community mental health agencies established as nonprofit organizations. If the participant moves, the sponsor may sublease to a different participant or use the SBRA in a different unit with the current participant. SBRA stays with the sponsor.

Program participants must reside in housing owned or leased by a sponsor organization and arranged through a contract between the recipient/subrecipient and the sponsor organization. A sponsor may be a private, nonprofit organization, or a community mental health agency established as a public nonprofit organization.

PROJECT-BASED RENTAL ASSISTANCE (PBRA) [§ 578.51\(E\)](#)

In PBRA, the recipient or subrecipient contracts for a particular unit or property and the participant then enters a lease with the landlord. If the participant moves, the PBRA stays with the unit for the next eligible participant.

Program participants must reside in housing provided through a contract with the owner of an existing structure whereby the owner agrees to lease subsidized units to program participants. Program participants do not retain the rental assistance if they relocate to a unit outside the project; the subsidy remains with the project.

9.3 SUPPORTIVE SERVICES - The CoC Interim Rule specifies which eligible supportive services can be paid for with CoC Supportive Service funds ([§ 578.53\(a\)\(1\)](#)). All supportive services provided must help program participants obtain and maintain housing. Services not specified in the CoC Interim Rule are not eligible ([§ 578.53\(d\)](#)).

Eligible supportive services are:

- Annual Assessment of Services ([§ 578.53\(e\)\(1\)](#))
- Moving costs ([§ 578.53\(e\)\(2\)](#))
- Case management ([§ 578.53\(e\)\(3\)](#))
- Childcare ([§ 578.53\(e\)\(4\)](#))
- Education services ([§ 578.53\(e\)\(5\)](#))
- Employment assistance and job training ([§ 578.53\(e\)\(6\)](#))
- Food ([§ 578.53\(e\)\(7\)](#))
- Housing search and counseling services ([§ 578.53\(e\)\(8\)](#))
- Legal services ([§ 578.53\(e\)\(9\)](#))
- Life skills training ([§ 578.53\(e\)\(10\)](#))
- Mental health services ([§ 578.53\(e\)\(11\)](#))
- Outpatient health services ([§ 578.53\(e\)\(12\)](#))
- Outreach services ([§ 578.53\(e\)\(13\)](#))
- Substance abuse treatment services ([§ 578.53\(e\)\(14\)](#))
- Transportation ([§ 578.53\(e\)\(15\)](#))
- Utility deposits ([§ 578.53\(e\)\(16\)](#))

The CoC Program Interim Rule requires recipients and subrecipients to conduct an annual assessment of service needs for each program participant ([§ 578.53\(a\)\(2\)](#)) and make annual adjustments if necessary.

Special considerations for supportive service requirements by project component:

- Permanent Housing – Permanent Supportive Housing (PH-PSH). Recipients and subrecipients are required to make available supportive services to program participants for the entire duration of their residence in the project.
- Permanent Housing – Rapid Rehousing (PH-RRH). Participants enrolled in this project component are expected to meet with their case management at least once per month. The location, duration, and content of such meetings will vary according to the program participant's need. Supportive services to RRH participants may be provided for up to six months after program exit. Note that while RRH participants are expected to engage in monthly case management, they should be able to decline participation in supportive services and have it not jeopardize their tenancy or enrollment in the program.
- Transitional Housing (TH). Recipients and subrecipients must make supportive services available for program participants throughout the duration of their residence in TH and may provide supportive services for up to six months after program exit to assist in their adjustment to independent living.

- Supportive Services Only (SSO). Recipients and subrecipients can provide supportive services to individuals and families experiencing homelessness for whom they are not also providing housing assistance and current residents of permanent housing (HUD-funded or non-HUD funded) that were homeless during the prior six months.

If the supportive services are provided in a supportive services facility not contained in a housing structure, the costs of day-to-day operation of the supportive service facility, including maintenance, repair, building security, furniture, utilities, and equipment are eligible as a supportive service cost ([§ 578.53\(a\)](#)).

9.4 OPERATING COSTS - In general, the following costs are considered eligible:

- The costs of maintenance and repair of housing not included in the lease ([§ 578.55\(b\)\(1\)](#))
Maintenance and repair include a property or unit's upkeep, including structural, electrical, and plumbing systems. It can include everything from leaky faucets to major repairs. It includes landscaping (non-beautification) and snow removal and salting.
- Property taxes and insurance ([§ 578.55\(b\)\(2\)](#))
- Scheduled payments to a reserve fund for the future replacement of major buildings systems. Major building systems include structural support, roofing, cladding, weatherproofing, plumbing, electrical, heating, ventilation, and air conditioning ([§ 578.55\(b\)\(3\)](#))
- Security for a housing program if more than 50 percent of the units or building area are CoC-funded ([§ 578.55\(b\)\(4\)](#))
- Utilities including electricity, gas, heating oil or other heating/cooling costs, water, sewer, and trash removal ([§ 578.55\(b\)\(5\)](#))
- Furniture (office/apartment) that remains with the project. Mattresses are also eligible costs, even if they remain with the program participant ([§ 578.55\(b\)\(6\)](#))
- Equipment, including office equipment, appliances such as microwaves, refrigerators, stoves, washers and dryers, etc. that remain with the project ([§ 578.55\(b\)\(7\)](#))
- Staff time spent carrying out the above eligible operating activities that are part of the approved grant.

9.5 HMIS – HMIS can be a stand alone project, or a line item within another project. CoC Program funds may be used to pay staff and overhead costs directly related to contributing and maintaining data in HMIS or a comparable database. These costs are eligible under all CoC program components, including PSH, RRH, TH, SSO, and HMIS.

Eligible HMIS costs for the PSH, RRH, TH, and SSO program components include:

- Purchasing or leasing computer hardware, software, licenses, or equipment ([§ 578.57\(a\)\(i\)-\(iii\)](#))
- Obtaining technical support ([§ 578.57\(a\)\(iv\)](#))
- Leasing office space in which HMIS activities are conducted ([§ 578.57\(a\)\(v\)](#))
- Paying utilities necessary to operate or contribute data ([§ 578.57\(a\)\(vi\)](#))
- Paying salaries for operating HMIS ([§ 578.57\(a\)\(vii\)](#))
- Paying for travel to, and attending, approved trainings ([§ 578.57\(a\)\(viii\)](#))

- Paying staff travel costs to conduct intake ([§ 578.57\(a\)\(ix\)](#))
- Paying HMIS participation fees charged by the HMIS Lead ([§ 578.57\(a\)\(x\)](#))

In addition to eligible HMIS costs listed above, HMIS Leads under the HMIS program component may use funds for other eligible costs related to establishing, operating, customizing, and otherwise administering an HMIS. These additional eligible costs are only available to HMIS Leads. Under the HMIS program component, HMIS Lead entities can apply for funds to support an HMIS project as follows:

- Leasing/operating a structure in which the HMIS operates
- Establishing, operating, and customizing a CoC's HMIS, including:
 - Hosting and maintaining HMIS software data ([§ 578.57\(a\)\(2\)\(i\)](#))
 - Backing up, recovering, or repairing HMIS software or data ([§ 578.57\(a\)\(2\)\(ii\)](#))
 - Upgrading, customizing, and enhancing the HMIS ([§ 578.57\(a\)\(2\)\(iii\)](#))
 - Integrating and warehousing data, including development of a data warehouse for use in aggregating data from subrecipients that use several software systems ([§ 578.57\(a\)\(2\)\(iv\)](#))
 - Administering the HMIS ([§ 578.57\(a\)\(2\)\(v\)](#))
 - Reporting to service providers, the CoC, and HUD ([§ 578.57\(a\)\(2\)\(vi\)](#))
 - Conducting training in use of the HMIS, including travel to the training ([§ 578.57\(a\)\(2\)\(vii\)](#))

9.6 PROJECT ADMINISTRATION - Under the Project Administration program component, CoC recipients and subrecipients may use these funds to support:

1. General management, oversight, and coordination ([§ 578.59\(a\)\(1\)](#))
2. Training on CoC requirements and attending HUD-sponsored CoC trainings ([§ 578.59\(a\)\(2\)](#))
3. Carrying out environmental reviews ([§ 578.59\(a\)\(3\)](#))

9.7 CoC PLANNING FUNDING

Per the regulation at 24 CFR [578.39](#), Planning funds are available to assist the CoC in carrying out a number of its responsibilities. These funds are equal to up to 3 percent of the CoC's Final Pro Rata Need (FPRN) or a maximum amount to be established by the CoC NOFA, (now NOFO) and require a 25% match. The period of performance for a planning grant is one year and there is no guarantee that planning grant funds will be awarded each year. The CoC Planning Grant funds can only be awarded to the CoC's Collaborative Applicant or Unified Funding Agency. Eligible activities that a CoC can expend planning grant funds on include:

- Developing a community-wide process involving the coordination of various providers to develop strategies for ending homelessness and identifying resources that are available to meet that goal
- Determining the geographic area that the CoC will serve including evaluating the merits of merging with other CoCs
- Developing a CoC system

- Evaluating the outcomes of CoC and ESG projects within the CoC
- Participating in the consolidated plan(s) within the CoC's boundaries
- Preparing and submitting an application to HUD on behalf of the CoC, including conducting a Point-in-Time count and other data collection as required by HUD
- Monitoring and improving the quality and performance of recipients and subrecipient projects and enforcing compliance with program requirements

The BoS CoC Planning activities include:

- 1) Coordinating the implementation of a housing and service system within the geographic area that meets the needs of the homeless individuals (including unaccompanied youth) and families. At a minimum, such system encompasses the following:
 - (i) Outreach, engagement, and assessment;
 - (ii) Shelter, housing, and supportive services;
- 2) Planning for and conducting an annual point-in-time count of homeless persons within the geographic area that meets the following requirements:
 - (i) Homeless persons who are living in a place not designed or ordinarily used as a regular sleeping accommodation for humans must be counted as unsheltered homeless persons.
 - (ii) Persons living in emergency shelters and transitional housing projects must be counted as sheltered homeless persons.
 - (iii) Other requirements established by HUD by Notice.
- 3) Conducting an annual gaps analysis of the homeless needs and services available within the geographic area;
- 4) Providing information required to complete the Consolidated Plan(s) within the Continuum's geographic area;
- 5) Consulting with State and local government Emergency Solutions Grants program recipients within the Continuum's geographic area on the plan for allocating Emergency Solutions Grants program funds and reporting on and evaluating the performance of Emergency Solutions Grants program recipients and subrecipients.
- 6) Preparing the response to the competitive funding NOFO published by HUD.

10. COORDINATED ENTRY

It is required that ESG and CoC-funded programs or projects within the Continuum of Care's geographic area use the coordinated entry process and structure. EOHLC and the program providers work with the Continuum of Care to ensure the screening, assessment and referral of program participants are consistent with the written coordinated entry standards established by the EOHLC and the requirements outlined by the U.S. Department of Housing and Urban Development via Notice [CPD-17-01](#). Services and housing options should be made available in a way that ensures equitable access by all eligible participants. Providers should actively market available resources to populations least likely to access services in a way that ensures the information is accessible to all people in the geographic area.

11. VERIFYING HOMELESSNESS AT PROJECT INTAKE

The project should verbally confirm with the household at project intake that the homeless status in their verification of homelessness (VoH) has not changed since documentation was provided. If the intake has been delayed for any reason and the time the VoH is verifying is more than a month old at that point, they should get an updated one.

12. HOMELESS MANAGEMENT INFORMATION SYSTEM (HMIS)

HUD uses information gathered from CoC's, ESG Recipients, and HMIS Lead Agencies to make funding decisions, set performance goals for projects assisting the homeless or those at risk of becoming homeless, and to report to Congress on the progress of ending homelessness.

A Homeless Management Information System (HMIS) is a local information technology system used to collect client-level data and data on the provision of housing and services to homeless individuals and families and persons at risk of homelessness. HUD does not prescribe which system to use, but through guidance documents such as the [HMIS Data and Technical Standards](#), it spells out what a system must be capable of doing to be considered an HMIS or a comparable database. Each CoC is responsible for selecting an HMIS software solution that complies with HUD's data collection, management, and reporting standards.

Recipients and providers of ESG or CoC funding are required to collect and record all HUD required data elements into the CoC designated HMIS. Per HUD regulations, domestic violence and victim service providers (VSP) must use an HMIS comparable database. If using the CoC's HMIS would violate attorney/client privilege, legal services providers (LSP) must also use an HMIS comparable database. Providers using a comparable database are responsible for ensuring that their chosen HMIS is able to produce the required HUD reports (CAPER or APR) and csv data files for submission to HUD. Victim Service Providers are responsible for working with the HMIS Lead to select an HMIS Comparable Database that is compliant with HUD HMIS data collection and reporting standards. VSPs may select an HMIS that has already been reviewed and approved by the HMIS Lead, or can request the review of new, unreviewed software.

Compliance with HMIS standards for both local and state-funded ESG providers will be documented through timely and accurate submission of quarterly and annual reports to EOHLIC.

Compliance with BoS CoC HMIS Policies and Procedures is mandatory for all HMIS-participating organizations. This includes the CoC-approved Privacy Plan, Security Plan, and Data Quality Plan. There is no fee to participate in the BoS CoC HMIS.

[Victim Service Providers](#) (VSP) are prohibited from entering client-level data into an HMIS and must instead enter data into a comparable database. Legal service providers, who can document that entering client-level data would violate client-attorney privilege, may be permitted to use a comparable database. CoC and ESG funds may be used to establish and operate a comparable database that collects client-level data over time and generates unduplicated aggregate reports based on that data.

In the BoS CoC, VSPs must receive approval from the HMIS Lead for the comparable database they are using to determine if it meets all HUD system requirements. More information regarding comparable databases for victim service providers can be found at the [Domestic Violence Housing Technical Assistance Consortium's website](#). VSPs are strongly encouraged to include an HMIS line item in their grant budget to offset the cost of operating an HMIS comparable database.

13. DOCUMENTATION AND RECORDKEEPING

13.1 GRIEVANCE POLICY

All participating provider agencies must have a client grievance policy in place, a copy of which should be made available to clients. This policy should be available to address grievances involving a provider's internal policies, services or activities. In the event a grievance is received regarding a provider's internal policies, services or activities, the grievance will be referred to the appropriate agency for resolution under the provider's internal grievance policy. Each provider must make a good faith effort to resolve client grievances as best they can in the moment. Complaints that should be addressed directly by the provider staff member or supervisor include complaints about agency conditions, how the client was treated by provider staff, and violations of confidentiality agreements. If the client feels the complaint was not adequately addressed, the client should then follow the provider's internal grievance procedure.

14. FINANCIAL

14.1 GRANT AND CONTRACTING

After HUD announces FY awards, the CA will begin to receive grant agreements which are between HUD and EOHLC in its role as a Commonwealth Secretariat. After these have been signed, the CoC Contract Coordinator begins the process of developing a contract with the subrecipient to fulfill the requirements outlined in the grant agreement and project application.

14.2 CONFLICT OF INTEREST

All contracts must include all applicable required federal elements to ensure subrecipients and their contractors utilize funds in accordance with the Federal statutes, regulations and the terms and conditions of the HUD award to the recipient. All parties, recipient, subrecipient and if applicable contractors, involved in the CoC Program project must have conflict of interest policies and procedures to ensure that federal financial assistance is used solely for its intended public purpose, preventing personal gain, fraud, and waste.

The CA will comply with [MGL c. 268A, section 7](#) which prohibits a state employee from having a direct or indirect financial interest in a contract made by a state agency in which the Commonwealth, or a state agency is an interested party, unless an exemption applies.

14.3 MATCH

The subrecipient must have documented match activities, consistent with the program requirements in 24 CFR 578.73, and must match all grant funds, except for leasing funds, with no

less than 25 percent of funds or in-kind contributions from other sources. During the term of the grant, the subrecipient must keep and make available, for inspection, records documenting and tracking the source and expenditures of match funds, and report on these with the monthly invoice requests.

Cash sources - The subrecipient may use funds from any source, including any other federal sources (excluding Continuum of Care program funds), as well as State, local, and private sources, provided that funds from the source are not statutorily prohibited to be used as a match. The recipient must ensure that any funds used to satisfy the matching requirements of this section are eligible under the laws governing those funds.

In-kind contributions - The subrecipient may use the value of any real property, equipment, goods, or services contributed to the project as match, provided that if the recipient or subrecipient had to pay for them with grant funds, the costs would have been eligible under Subpart D.

14.4 INDIRECT COST

Indirect costs (2 CFR §200.56) are costs “incurred for a common or joint purpose benefiting more than one cost objective, and not readily assignable to the cost objectives specifically benefited.” These costs are shared by more than one program and cannot be readily identified with any particular activity. After direct costs have been determined and assigned directly to federal awards, or other work as appropriate, indirect costs are those that remain to be allocated. Typical examples of indirect costs include:

- Office rent, utility, insurance, maintenance, and other expenditures related to shared space
- Administrative and executive team functions that support multiple program areas
- Purchases, transportation, and staff expenses that benefit multiple program areas

An indirect cost rate is a percentage (indirect cost pool/direct cost base) used to distribute indirect costs to all cost centers benefiting from those costs. For more information, please refer to the [HUD Indirect Cost Toolkit for CoC and ESG programs](#).

14.5 PROGRAM INCOME (PI)

Program income (PI) is the income received by the subrecipient directly generated by a grant-supported activity. PI earned during the grant term shall be retained by the subrecipient and added to funds committed to the project by HUD and the recipient and used for eligible CoC activities. Per [2 CFR 200.305\(b\)\(5\)](#), PI should be spent first if being utilized for an active BLI cost. Costs incident to the generation of PI may be deducted from gross income to calculate program income, provided that the costs have not been charged to grant funds.

Rents and occupancy charges collected from project participants (the client's share of rent) are program income. In addition, rents and occupancy charges collected from residents of transitional housing may be reserved, in whole or in part, to assist the residents from whom they are collected to move to permanent housing [24 CFR 578.97](#). During the term of the grant, the

subrecipient must keep and make available, for inspection, records documenting and tracking the collection, recording and use of program income funds.

14.6 FEDERAL CASH DRAW PROCESSING

Control Objective: To ensure that cash draws are for legitimate service-related expenses; for the correct vendor, for proper service activities, and the correct amount. To ensure reasonableness, allocability, and allowability of costs in accordance with the provisions of the applicable federal cost principles and the terms and conditions of the award.

Risk Assessment: There is the risk that payments and related cash draws might not be service/program related and the authorization control violated.

Procedures to mitigate risks: The following procedures are in place to ensure cash draw procedure control.

CASH DRAW PROCESSING COC

There are no Advance Payment options. This funding is remitted via reimbursement only.

1. The Contract Coordinator will carefully review all invoices to ensure they match the line items in the grant agreement and contract, are eligible expenses, are within the amount of funding remaining in the contract and comply with BoS CoC Written Standards.
2. In no more than 10 business days, the Contract Coordinator will:
 - a. Initial and date the Request
 - b. Assign a unique number to the request
 - c. Enter the numbers from the payment request onto the tracking spreadsheet
 - d. Forward the payment voucher packet on to the Director of Finance.
 - i. At least initially, and at other times as needed, the Contract Coordinator will, instead, forward the packets onto the Federal Grants Manager who after reviewing, will forward it onto the Director of Finance
3. The Director of Finance will review the packet, sign and date it and return it to the Contract Coordinator within 10 business days.
4. Within 1 business day of receipt of the returned packet from the Director of Finance, the Contract Coordinator will:
 - a. Pull together the packet for Accounting
 - b. Log and submit the payment voucher packet to accounting.
5. Accounting will:
 - a. Send payment to the subrecipient within 10 business days
 - b. Draw down

15. MONITORING – COC AND ESG

Monitoring for both CoC and ESG programs is not only an annual or periodic exercise, but as an ongoing process involving continuous communication and evaluation. This process involves frequent telephone/email contacts, written communications, analysis of reports and audits, and periodic meetings. It is the responsibility of EOHLC or HUD reviewers to keep fully informed concerning participant compliance with program requirements and the extent to which technical assistance is needed.

The goal of monitoring is to determine compliance, prevent/identify deficiencies, and design corrective actions to improve or reinforce program participant performance and strengthen the capacity of the Community. Monitoring also provides opportunities to identify program participant accomplishments as well as successful management, implementation, and evaluation techniques that might be replicated by other program participants.

For ESG, EOHLC performs three types of formal monitoring (desk review, on-site review, combination) depending on the level of risk identified for the provider each year. For projects that are chronically underspending or have high vacancy rates, a combination monitoring is highly likely as this could indicate a need for more intensive scrutiny of project operations to develop a plan in partnership with the provider for improvement. Projects that are fulfilling their contractual obligations are more likely to have only a desk review. Nonetheless, a project that has not had a combination desk/on-site review for more than two years will have the combined monitoring.

Using a risk analysis tool, EOHLC determines which providers receiving ESG funding need to be monitored and what type of monitoring is necessary. The risk analysis relies on information related to provider past performance, staffing changes, or reported concerns from technical assistance communications. Other data related to expenditures and CAPER outcomes are also utilized to inform the risk analysis process.

In the CoC program, each project is monitored annually at different levels depending upon identified risk. Contract coordinators monitor invoicing requests monthly to identify challenges and meets with subrecipients as needed to address things quickly. In addition, the Monitoring Lead reviews all expenditures and vacancy reports on a quarterly basis to determine if there are challenges that require consultation with the subrecipient. As with ESG, the BoS CoC Monitoring Lead also uses Risk Analysis and related documentation to evaluate risk and level of scrutiny needed annually.

Where the same provider receives both ESG and CoC funding, staff will offer to conduct in-person monitoring at the same time to minimize disruption in the day-to-day operations of the program. ESG and CoC staff also consult when a challenge is identified with a particular provider to determine if there are similar challenges in both projects. In this situation, they will work together with the provider to develop solutions that will benefit both programs.

16. REPORTING

16.1 COC REPORTING

Recipients with HUD funding received through CoC Program homeless assistance grants are required to submit an Annual Performance Report (APR) electronically to HUD every operating year, within 90 days of the project end date. In the BoS CoC, the first draft is due within 30 days of the project end date to allow the HMIS Reporting Coordinator an opportunity to review them for accuracy.

Data collection for the APR is aligned with the most recent version of the Homeless Management Information System (HMIS) Data Standards. APRs are generated from the project data entered by recipients and subrecipients into HMIS, grant information in e-snaps, and

financial information entered into eLOCCS. All APRs are remitted to HUD through HUD's [Sage HMIS Reporting Repository](#)

16.2 ESG REPORTING

The Consolidated Annual Performance and Evaluation Report (CAPER) is filed annually with HUD by EOHLC using data submitted by ESG providers. The CAPER reports program outcomes to HUD for both expenditures and clients served.

Required Quarterly	Required Annually
CAPER report	CAPER report
Actual outcomes for the reporting period (submitted on the projected outcomes table included in your contract.)	CAPER data (actual .CSV files to be uploaded into Sage.)

Please note: The process for running and submitting a CAPER report may change based on HUD reporting requirements and the HMIS vendor utilized by the provider. Questions about the CAPER report should be submitted to EOHLC or to your HMIS lead agency.

16.3 CAPER REPORTING DUE DATES

Quarterly reports are due on the 10th of the month following each quarter. Annual reports are due on the 10th of the month following the contract expiration date. All reports should start on April 1st and end on the last day of the reporting period.

Quarter 1	July 10 th
Quarter 2	October 10 th
Quarter 3	January 10 th
Quarter 4 & final contract period	April 10 th

17. ENVIRONMENTAL REVIEW

Per 24 CFR 576.407(d), HUD-assisted projects are required to comply with the National Environmental Policy Act (NEPA) by conducting an environmental review to determine the potential environmental impacts of a project or, if applicable, by documenting its categorical exclusion or exemption from this requirement.

Environmental Reviews for the CoC are conducted by the Monitoring Lead in collaboration with project subrecipients. The reviews are completed upon new contract, when substantial changes are made to the location of project or sponsor based rental or leasing assistance contract, or updated every 5 years in accordance with NEPA requirements.

ESG Environmental Reviews will be conducted by the ESG Program Coordinator, or other staff designated by the Federal Grants Manager. Environmental Reviews will be completed upon the issuance of new contracts for projects established through an ESG procurement cycle or every five years, whichever comes first. The Environmental Review form can be located at <https://www.hudexchange.info/resource/3141/part-58-environmental-review-exempt-or-censt-format/>.

For more information on ESG Environmental Review, please see below.

- [Levels of Environmental Review of ESG Components](#)
- [CoC and ESG Environmental Review Overview](#)

18. ORGANIZATIONAL POLICIES AND OTHER HUD REQUIREMENTS

Listed below are additional requirements CoC and ESG projects must comply with that are defined in CoC and ESG-specific regulations, federal regulations for all projects receiving federal funding, and standards defined by the CoC or ESG for effective and efficient operations.

18.1 PERIOD OF RECORD RETENTION

Records related to each fiscal year of funds must be retained for a minimum of five years for CoC projects pursuant to [578.103 \(18\)\(3\)c](#). Documentation of each program participant's qualification as a family or individual at risk of homelessness or as a homeless family or individual as well as other program participant records must generally be retained for six years after the expenditure of all funds from the grant under which the program participant was served. Where the ESG funds that are used for the renovation of an emergency shelter exceed 75 percent of the value of the building before renovation, records must be retained until 10 years after the date that ESG funds are first obligated for the renovation.

Where the ESG funds that are used to convert a building into an emergency shelter exceed 75 percent of the value of the building after conversion, records must be retained until 10 years after the date that ESG funds are first obligated for the conversion.

18.2 INCIDENT REPORTS

Serious incidents must be reported using the [online form](#) within two business days. Reportable incidents include:

1. Fire or any event causing facility damage or service disruption.
2. Conditions at the program site that threatens client health or safety.
3. Client injury (including overdose) or death on site.
4. Confirmed communicable diseases, including COVID-19 (a single report can cover multiple cases).
5. Allegations of abuse, neglect, or assault (physical or sexual).
6. Civil or criminal actions against the program or its employees related to service delivery.
7. Client injury onsite.
8. Any time police, fire department or ambulance are onsite

19. PROJECT INTAKE

Project intake for each participant must complete the following steps:

1. Confirm eligibility documents are sufficient & save to household's VESTA record
2. Household expresses interest after subrecipient has explained project
3. Enrollment into your VESTA project completed
4. Discuss project rules, have them sign and provide copy
5. Discuss appeal and grievance policy, have them sign and provide copy
6. Discuss VAWA emergency transfer plan, provide copy
7. Provide household with [Notice of Occupancy Rights Under VAWA document](#)
8. Sign lease or sublease agreement (if unit is already identified)

Projects must maintain and follow written intake policies that meet the following requirements related to documenting homelessness status:

- Projects must ensure participants meet the applicable definitions of homelessness and, as applicable to PSH, chronic homelessness
- In their intake policies, projects must establish the following order of priority for obtaining documentation of homelessness:
 - 1. Third party documentation;
 - 2. Intake worker observation;
 - 3. Self-certification in writing from the person seeking assistance.

Projects must retain documentation of homelessness for participants who receive project entry. Projects must retain documentation of attempts to obtain third party documentation and intake worker observation for each participant whose homelessness is verified via self-certification.

20. HOUSING SEARCH EXPECTATIONS

After a program participant has been referred for housing, it is expected that the receiving agency will do the following:

- Subrecipient is responsible for providing housing search support to participant
- Each project should have clear, written expectations about who will assist participants in their housing search and what that entails.

This should include:

- Who is assisting the participant in identifying and contacting units?
- How often will they meet?
- Who will attend appointments with participants, including making necessary transportation arrangements?

If this is the responsibility of a subcontractor to the subrecipient, it should be clear in an MOU or other agreement between the entities.

20.1 DOCUMENTATION BEFORE MOVE-IN

To house individuals as quickly as possible housing providers should move forward with enrolling households in their project and allowing them to sign a lease and move-in if they've provided a Verification of Homelessness, Verification of Disabling Condition (if required for project), and documentation that household belongs to the project's subpopulation focus (if applicable). Other documentation like forms of ID should not delay a household from moving in and can be prioritized as the first steps of case management with that program participant. If an agency has a reason they must collect documentation beyond Verification of Homelessness, Verification of Disabling Condition, and documentation of subpopulation status for a household to move in (e.g. unit is funded by a project-based voucher and household must be approved by housing authority), the project must notify their Contract Coordinator and the CE Lead to explain the reason.

20.2 REFERRALS FOR HOUSEHOLDS WITH SEX OFFENDER STATUS

The Massachusetts Supreme Judicial Court has prohibited municipalities from locally regulating where sex offenders can live, likewise there is no general state law restricting where sex offenders can live. See *Doe v. City of Lynn*, 472 Mass. 521 (2015). No town may have a restriction on where someone on the sex offender registry may reside because of state or local law. Let EOHLC know if this is happening. The one exception is that Massachusetts law may "bar[s] level three offenders from residing in rest homes or similar long-term care facilities" even then, a hearing must take place before an individual is so restricted to determine the individualized risk the person poses to those living in the relevant facility. G.L. c. 6, § 178K (2)(e).

Given the MA Balance of State CoC doesn't have placements in rest homes or similar long-term care facilities, this should not come up for our projects.

When denials are allowed: There are a few reasons a registered sex offender may not be able to lease up in a particular unit:

- 1) The unit has funding from a program that explicitly doesn't allow funds to be spent on individuals who are registered sex offenders.
- 2) For reasons in line with 24 C.F.R. § 578.93 (b) (4), where the "subrecipient exclusively serve[s] a particular homeless subpopulation in transitional or permanent housing if the housing addresses a need identified by the Continuum of Care for the geographic area and meets one of the following ... (4) If the housing has in residence at least one family with a child under the age of 18, the housing may exclude registered sex offenders and persons with a criminal record that includes a violent crime from the project so long as the child resides in the housing." If a housing provider claims 24 C.F.R. § 578.93 (b) (4) applies, notify EOHLC.
- 3) Landlords are not prohibited from performing criminal background checks on prospective tenants and may refuse to rent to persons with criminal records so long as they are abiding by fair housing law when doing so. In most cases, housing providers should conduct an individualized assessment before determining that a particular criminal record disqualifies an applicant for housing.

Regional Navigator process: If an available unit form says the unit cannot accept registered sex offenders, it's important the Regional Navigator understands why. If the policy is related to 1 or 2 above, the Regional Navigator and case manager may share this information with the referred household if they have disclosed their status as including a registered sex offender in their CE Assessment. This information may help referred households make informed decisions on whether they want to move forward with the referral. The presence of a housing provider's policy to not rent to registered sex offenders does not prohibit referred households from applying. As such, the conversation should not aim to dissuade the household or case manager from moving forward, but rather give them the facts and allow them to decide. If the household still wants to proceed, the referral needs to be sent.

We do not disclose to housing providers how a household answered the question on the CE Assessment re: if they are a registered sex offender. This policy is similar to how we do not share answers about criminal records, even though criminal records could ultimately be the reason a household is denied by a landlord. One thing to consider is that the only information about the household's sex offender status we have is a self-disclosure, the accuracy of which is not confirmed. It will be up to the project and/or landlord to conduct the proper SORI check if necessary for the opening.

We will not add a field on the available unit form to indicate if projects can lease a unit to a registered sex offender, because the instances where the project is actually prohibited from leasing to a sex offender are narrow. Instead, the provider should include that in the Notes section.

20.3 LEAD-BASED PAINT REQUIREMENTS

[24 CFR 35.700-730 (PBRA); 24 CFR 35.1000-1020 (Supportive Services); 24 CFR 35.1200-1225 (TBRA); 24 CFR 576.403(a).

All HUD-funded programs with housing units occupied by participants are required to incorporate lead-based paint remediation and disclosure requirements. Generally, these provisions require the provider to screen for, disclose the existence of, and take reasonable precautions regarding the presence of lead-based paint in leased or assisted units constructed prior to 1978.

CoC-funded units are required to incorporate HUD regulations in 24 CFR part 35, subparts A, B, K, and R. ESG-funded projects are required to incorporate the Lead-Based Paint Poisoning Prevention Act (42 USC 4821-4846), the Residential Lead-Based Paint Hazard Reduction Act of 1992 (42 USC 4851-4846), and 24 CFR part 35, subparts A, B, H, J, K, M, and R in the unit.

21. TERMINATION PROCESS

The BoS CoC always views termination of a program participant's assistance as a last resort. Regulatory guidance (CoC: [§ 578.91](#) and ESG: [§ 576.402](#)) indicates the recipient or subrecipient may terminate assistance to a program participant who violates program requirements. However, the recipient or subrecipient must exercise judgment and examine all extenuating circumstances in determining when violations warrant termination so that a program participant's assistance is terminated only in the most severe cases. Recipients and subrecipients

should provide special consideration and examination of extenuating circumstances when considering [termination of assistance](#) for difficult-to-house populations, such as those individuals residing in permanent supportive housing projects ([§ 578.91\(a\)](#) and [§ 576.402\(a\)](#)).

In CoC projects, the program participant must be provided with a written copy of the program rules and the termination process before the participant begins to receive assistance. This is also a best practice for the ESG Program.

Recipients and subrecipients must establish a formal process for termination that recognizes the rights of individuals receiving assistance ([§ 578.91\(b\)](#) and [§ 576.402\(b\)](#)).

- For ESG Street Outreach and Emergency Shelter, the ESG Interim Rule does not require that any specific criteria cited be included in the policy
- For all CoC projects and for ESG-funded rental assistance and housing relocation and stabilization services, the termination policy must include, at a minimum:
 - Written notice to the program participant containing a clear statement of the reason(s) for termination
 - A review of the decision, in which the program participant is given the opportunity to present written or oral objections before a person other than the person (or subordinate of that person) who made or approved the termination decision
 - Prompt written notice of the final decision to the program participant

If a project is moving toward termination, they should notify the Contract Coordinator to ensure the reason isn't out of compliance with HUD regulations

22. CLIENT DISENGAGEMENT

After a client has been enrolled in a housing project, every effort should be made to engage them in securing and moving into a unit. Following are BoS CoC's expectations of providers.

- Providers are expected to reach out to clients at least weekly
- Providers will have written expectations regarding communication, frequency of checking in with the case manager or other representative, communication method (email, text, or phone for example). Participants must have a voice in how they wish to be contacted.
- This documentation must be provided when the participant is enrolled and will be clear that if a client is unreachable before they move in for more than one month, they will be exited from the project and another household will be referred to the opening. The household will remain in the CE Project so long as they are still eligible for CE (e.g. still homeless and have geographic tie).
- Providers will maintain clear encounter notes for every attempt to reach a participant, as well as when they are able to reach them.
- If a household is exited from a project due to disengagement, the project must notify their Contract Coordinator and CE Lead. The CE Lead will notify the appropriate Regional Navigator so they are aware of the household's current status in CE.

23. RENT REASONABLENESS

Every unit funded through the CoC must comply with rent reasonableness standards. This payment standard is designed to ensure that a unit supported with grant funds is not more expensive than a similar unit that is *not* supported by grant funds.

Rent reasonableness is determined by an annual market study of various sized units within the locations served. HUD has developed a [Rent Reasonableness Checklist](#) to assist in performing a study.

A copy of the annual market study and the Rent Reasonableness Checklist must be included in the client's file for rental assistance projects, as well as a copy of the applicable FMR.

For projects with Rental Assistance funds, the total rent paid for a unit (including the subsidy and the tenant share) must meet rent reasonableness limit. A rental assistance project may pay more than the FMR up to the rent reasonableness amount, *but* the project must still serve the number of households/units in the application.

Projects with leasing funds must also have a copy of the applicable FMR, and CoC Program funds may not exceed the lower of Fair Market Rent (FMR) or the rent reasonableness limit. If unit rent is above the FMR, a subrecipient may pay the difference (not with HUD or match funds), but the subrecipient can never pay more than what is considered reasonable to support that unit.

24. TRANSFERS

The BoS CoC supports DV-related emergency transfer requests as defined in the Emergency Transfer Plan. Other transfer requests must go first to the Contract Coordinator for the project to review for eligibility per regulations and CoC Written Standards. Transfers from one CoC program to another should be an option of last resort. The housing provider should work internally to resolve situation and exhaust all other options outside of requesting a transfer to another agency's housing program prior to submitting the transfer request.

It is mandated that all subrecipients adopt the Domestic Violence Emergency Transfer Plan.

25. BOS CoC REUNIFICATION:

A child who is temporarily away from the home because of placement in foster care can be considered a member of the household in determining unit size if the DCF social worker confirms that DCF's goal for the family is reunification. The case manager working with the household while they are homeless is responsible for connecting with the DCF social worker to get confirmation – specific documentation is not required. The case manager should only include the child as a household member in VESTA if the plan is reunification.

Households in CoC projects that have a child in DCF custody must have an active Release of Information (ROI) between their housing provider and DCF to maintain their household size while working towards reunification. If they do not sign an ROI, the housing provider will not be able to

confirm the goal is for the household to be reunified with child and the child will therefore not be included in the household size. The household must sign the ROI prior to project enrollment so the provider can confirm the household is eligible for the unit size.

The housing provider must confirm that the plan between the household and DCF is reunification before moving the household in. If prior to move-in the housing provider finds that the plan for an enrolled household is not reunification, the household can be exited from the project if the new household composition makes the household ineligible for that size unit. Once a household working toward reunification is enrolled in a project, staff for that project must remain in contact with the DCF Social Worker on a regular basis (minimum every 90 days) to ensure that the goal is still reunification. The case manager from that housing project should record an encounter in VESTA to reflect when they were in touch with DCF.

If DCF's goal for the child is adoption, the child should not be included in determining unit size.

If a household is housed in a project, and DCF's goal changes from reunification to adoption, project staff will determine if a different size unit is necessary to prevent the household from being over-housed. If it is necessary, they will work with household to identify a unit of appropriate size or if that is not feasible for some reason, contact the HLC team about an external transfer.

26. DEFAULT UNIT SIZE

Default unit size in the BoS CoC is based upon the regulations at:

- [578.75\(a\)\(1\)](#) "Housing and facilities constructed or rehabilitated with assistance under this part must meet State or local building codes...", and
- [578.75\(c\)\(1.2\)](#) "*Suitable dwelling size*. The dwelling unit must have at least one bedroom or living/sleeping room for each two persons.
 - Children of opposite sex, other than very young children, may not be required to occupy the same bedroom or living/sleeping room.
 - If household composition changes during the term of assistance, recipients and subrecipients may relocate the household to a more appropriately sized unit. The household must still have access to appropriate supportive services.

This policy determines the default unit size (i.e. number of bedrooms) for which a household is eligible, based on their household composition. This policy aims to ensure the CoC is maximizing resources and not "over-housing" households.

When determining the default unit size a household is eligible for, the Balance of State CoC will default to assigning one bedroom for each two persons within the household, except in the following circumstances:

- Adults will be allocated one bedroom per adult. If two adults consider themselves partners, they will be allocated one bedroom.

- Family members of different genders (other than spouses or partners) will be allocated separate bedrooms, except when both are children under 6 years of age, in which case they will share a bedroom.
- Approved live-in aides will be allocated a separate bedroom.
- A parenting minor will not be required to share a bedroom with a child.

When determining number of bedrooms, also consider:

- For purposes of determining unit size, an adult is 18 years of age or older and a child is under 18 years of age.
- An adult will not be required to share a bedroom with a child.
- When a household member is pregnant, the unborn child will be included in the size of the household.
- Two children of the same gender will share one bedroom regardless of the age differential. This includes children of blended families, who may have different parents.
- Households comprised of one person will be allocated one bedroom.
- Reasonable accommodation requests for a larger unit, based on health-related reasons, must be submitted to the Regional Navigator of the region selected on the CE Assessment. Reasonable accommodations will require verification by a knowledgeable professional source, such as a doctor or other medical professional.

26.1 REFERRING HOUSEHOLDS TO A UNIT SIZE LARGER THAN THE DEFAULT UNIT SIZE

If there are no eligible households with a default unit size matching an available unit, a household can be referred to a unit that doesn't match their default unit size as long as they are not "over-housed."

Per the definition of the Balance of State CoC, a household is over-housed if either:

- 1) two partners/spouses have separate bedrooms, **or**
- 2) the number of bedrooms in the unit is greater than the number of household members

The Navigator will consider households in this order when making a referral to an available unit:

1. Eligible households in region whose default unit size matches size of available unit
2. Eligible households in region whose default unit size does not match size of available unit, but where household would not be over-housed
3. Eligible households out of region whose default unit size matches size of available unit
4. Eligible households out of region whose default unit size does not match size of available unit, but where household would not be over-housed

26.2 OPTING INTO A SMALLER UNIT

A household may opt into a unit smaller than their default unit size, as long as 1) the dwelling unit has at least one bedroom or living/sleeping room for each two persons, and 2) it is in

compliance with Habitability Requirements under Massachusetts regulation ([105 CMR 410.420](#)) and any applicable local codes.

Example -

A household is comprised of 5 individuals - two adult spouses and three children (12-year-old male, 11-year-old male, 10-year-old female).

- Per this default unit size policy, this household's default unit size would be a three-bedroom unit (adult spouses share one bedroom, two male children share one bedroom, and female child has their own bedroom).
- If there is a four-bedroom unit available and there are no eligible and interested households whose default unit size is a four-bedroom unit, this household could be considered given that they would not be over-housed in a four-bedroom unit. The adult spouses would share one bedroom and the three children would each get their own bedroom. They would not be considered over-housed because 1) the adult spouses are sharing a bedroom, and 2) the number of bedrooms does not exceed the number of

27. HABITABILITY STANDARDS

EMERGENCY SHELTER GRANT [24 CFR 576.403\(B\)](#), ESG RAPID RE-HOUSING AND HOMELESS PREVENTION, [24 CFR 576.403\(C\)](#), [24 CFR 576.500\(J\)](#)

27.1 THE EMERGENCY SOLUTIONS GRANTS (ESG) PROGRAM interim rule, at 24 CFR 576.403, establishes minimum standards for safety, sanitation, and privacy in emergency shelters funded with ESG, and minimum habitability standards for permanent housing funded under the Rapid Re-housing and Homelessness Prevention components of ESG.

Note: The same standards apply regardless of the amount of ESG funds involved. Providers should use the [ESG Minimum Habitability Standards for Emergency Shelters and Permanent Housing Checklist](#).

27.2 Continuum of Care [24 CFR 578,75\(B\)](#)

Continuum of Care projects are required to comply with Housing Quality Standards as defined at 24 CFR 578.75(b). All units paid for with CoC leasing or rental assistance funds must meet certain basic Housing Quality Standards (HQS) prior to expending CoC funds on that unit. All units must additionally meet state and local codes.

- The recipient or subrecipient must physically inspect all units prior to expending CoC funds and must continue to do so annually throughout the grant period. The annual review can take place during lease renewal.
- Inspectors do not need to be certified.
- The owner of the unit has 30 days to address and correct any deficiencies in the unit.
- The recipient or subrecipient must maintain documentation of compliance with HQS, including inspection reports.

27.3 EMERGENCY SHELTER [24 CFR 576.403(B)]

Any emergency shelter that receives ESG funds for shelter operations (including maintenance or minor or routine repairs) must meet the minimum safety, sanitation, and privacy standards as indicated in 24 CFR 576.403(b). Documentation of compliance with the minimum standards for emergency shelter activities must be maintained.

27.4 INVOLUNTARY FAMILY SEPARATION 24 CFR 576.102 4(B)

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

27.5 ESG RAPID RE-HOUSING AND HOMELESS PREVENTION 24 CFR 576.403(C); 24 CFR 576.500(J)

Housing for all ESG program participants receiving rental assistance must meet HUD minimum habitability standards for permanent housing. Providers must document compliance with this standard by signing and completing a Habitability Standards Checklist before the participant signs the lease and before the provider provides any ESG rental assistance or services specific to the unit. In addition, subrecipients must inspect all units at least annually to ensure that the units continue to meet habitability standards.

If an eligible household needs homelessness prevention assistance to remain in its existing unit, the assistance can only be provided if that unit meets the minimum standards.

If an eligible household needs homelessness prevention or rapid re-housing assistance to move to a new unit, the assistance can only be provided if the new unit meets the minimum standards. The unit the household is leaving does not need to be inspected.

28. FEDERAL FAIR HOUSING AND EQUAL ACCESS

The [Fair Housing Act](#) prohibits housing discrimination on the basis of any "protected class," including disability. Additionally, [Section 504 of the Rehabilitation Act of 1973](#), and the [Americans with Disabilities Act](#) provide specific guidance on the prevention of discrimination against persons with disabilities. [Section 504 of the Rehabilitation Act of 1973](#) prohibits discrimination based upon disability in all programs or activities operated by recipients of federal financial assistance, regardless of whether the programs involve provision of housing or non-housing services or benefits. It covers all McKinney-Vento Act-funded programs, including the CoC and ESG programs.

All three of these federal civil rights laws define a person with a disability as one who:

1. Has a physical or mental impairment that substantially limits one or more major life activities
2. Has a record of such impairment
3. Is regarded as having such an impairment

This definition applies to the application of federal civil rights laws. Many HUD programs have different definitions of "disability," and those definitions should be used to determine program eligibility. For instance, while a person who is currently engaged in the use of illegal drugs may not be protected under federal civil rights laws, he or she may be an eligible participant in CoC-funded programs that serve people with disabilities.

All notices and communications shall be provided in a manner that is effective for persons with hearing, visual, and other communication-related disabilities consistent with section 504 of the Rehabilitation Act of 1973 and implementing regulations at 24 CFR 8.6.

28.1 REASONABLE ACCOMMODATION

The Fair Housing Act requires owners of housing facilities to provide reasonable accommodations to persons with disabilities. Reasonable accommodations are changes, exceptions, or adjustments to a program, service, or procedure that allow a person with a disability to have equal enjoyment of the housing program. There must be an identifiable relationship between the requested accommodation and the person's disability. Reasonable accommodations need not be provided if they would constitute an undue financial and/or administrative burden, or if they would be a fundamental alteration of the provider's program.

Persons with disabilities may request a reasonable accommodation for any assistance animal, including an emotional support animal, under both the Fair Housing (FH) Act and Section 504. In situations where the Americans with Disabilities Act (ADA) and the FH Act/Section 504 apply simultaneously, housing providers must meet their obligations under both the reasonable accommodation standard of the FH Act/Section 504 and the service animal provisions of the ADA. Please note that while recipients and subrecipients of ESG funds must meet their obligations under Section 504 of the Fair Housing Act and the service animal provisions of the ADA and make reasonable accommodations as required, the handler is responsible for caring for and supervising the service animal, which includes toileting, feeding, and grooming and veterinary care. Covered entities are not obligated to supervise or otherwise care for a service animal. For additional guidance on these requirements and how to evaluate a request for a reasonable accommodation you may find it helpful to review the [FHEO Notice: FHEO-2013-01](#): Persons with disabilities may request a reasonable accommodation for any assistance animal, including an emotional support animal, under both the Fair Housing Act and Section 504.

In addition to changes to the physical structure of a property, a reasonable accommodation request may seek modification of certain program policies, (e.g., past criminal record) if it can be directly tied to the participant's disability.

Subrecipients must also comply with the following federal requirements:

- Uniform Administrative Requirements
- Equal Employment Opportunity Programs
- Minority Business Enterprises
- Nondiscrimination in Federally Assisted Programs
- Age Discrimination
- Women's Business Enterprise
- Drug Free Workplace Act

- Debarred Suspended
- Section 504 of the Rehabilitation Act
- Americans with Debarred, Suspended, Ineligible Contractors
- Section 6002 of the Solid Waste
- Disposal Act, as amended by the Resource Conservation and Recovery Act

28.2 VIOLENCE AGAINST WOMEN ACT (VAWA)

On November 16, 2016, HUD published the Violence Against Women Act (VAWA) final rule regarding housing protections for victims of domestic violence, dating violence, sexual assault, or stalking. This final rule prohibits an applicant for assistance or tenant assisted with ESG or CoC funding from being denied assistance under, denied admission to, terminated from participation in, or evicted from housing on the basis or as a direct result of the fact that the applicant or tenant is or has been a victim of domestic violence, dating violence, sexual assault or stalking, so long as the applicant otherwise qualifies for admission, assistance, participation or occupation ([24 CFR 5.2005 \(b\)\(1\)](#)).

In addition, the VAWA Final Rule requires that each housing provider produce a detailed emergency transfer plan, which ensures that a tenant receiving rental assistance through or residing in a unit subsidized under a CoC or ESG housing program who is a victim of domestic violence, dating violence, sexual assault, or stalking qualifies for an emergency transfer within the criteria stated in [24 CFR 5.2005 \(e\)\(2\)](#).

All EOHLC ESG and BoS CoC housing providers must maintain records on emergency transfers requested under 24 CFR 5.2005(e). Documentation of emergency transfer requests can be completed using the optional [HUD Form 5383](#). MSHDA ESG housing providers are responsible to track data on the outcomes of each request and must be able to provide to MSHDA ESG program staff upon request.

All EOHLC ESG rental assistance activities must provide applicants and participants the ESG [Notice of Occupancy Rights Under the Violence Against Women Act \(VAWA\) Form](#). This MSHDA form satisfies VAWA Final Rule requirements.

Rental assistance programs must provide copies of the HUD Forms to the property owner or manager at the time of lease-up.

29. EMERGENCY SOLUTIONS GRANT PROGRAM

In addition to responsibilities identified above that apply to both CoC and ESG projects, listed below are standards that apply specifically to the ESG Program

29.1 APPLICATION AND AWARD PROCESS

FUNDING PROCESS AND REQUIREMENTS

GRANT AWARDS

The amount of ESG allocation received from the U.S. Department of Housing and Urban Development (HUD) varies each year and is awarded to the State via an annual Award Notice.

GRANT AGREEMENTS GENERAL TIMELINE

Initial notification of pending grant agreements are generated electronically by HUD and are sent to the Federal Grants Manager. In many cases, there are issues and conditions from HUD that must be resolved prior to the grant agreement being sent by HUD to EOHLIC. The initial electronic notification will include those issues and conditions.

RECEIVING AND PROCESSING THE GRANT AGREEMENT

HUD will notify EOHLIC that the grant agreement is ready for signature by EOHLIC. Typically, the notice is issued to the Director of Policy or to the Federal Grants Manager; the person who receives the notice will coordinate with the Undersecretary's office to complete the signature process with HUD.

Once complete, the Director of Policy or Federal Grants Manager will scan and send a copy of the document to the ESG Contract Manager.

The ESG Contract Manager will coordinate with the Budget Analyst on an appropriate timeline for issuing contracts to vendors based on when funds will be loaded into IDIS. This process typically takes 2-3 weeks, during which time contracts may be generated and submitted for internal review.

PREPARING CONTRACTS AND AMENDMENTS

All communication on initial contracts and contract amendments should be discussed with the assigned contracts manager.

29.2 FINANCIAL REQUIREMENTS FOR ESG

FEDERAL CASH DRAW PROCESSING

Control Objective: To ensure that cash draws are for legitimate service related expenses; for the correct vendor, for proper service activities, and the correct amount.

Risk Assessment: There is the risk that payments and related cash draws might not be service/program related and the authorization control violated.

Procedures to mitigate risks

The following procedures are in place to ensure cash draw procedure control.

CASH DRAW PROCESSING ESG

1. Once the payment voucher and corresponding paperwork have been confirmed to be accurate and in line with the contract and funding application, the Federal Program Coordinator will do the following.
2. Enter the numbers from the payment voucher onto the tracking spreadsheet
3. Forward the payment voucher packet on to the Director of Finance.
4. The Director of Finance will review the packet, sign and date it and return it to Feral Program Coordinator.
5. Federal Program Coordinator forward package to the Financial Analyst
6. Financial Analyst reconciles current expenditures in MMARS to grant expenditure spreadsheet aligning to corresponding activity code(s).

- a. Inputs expenditures/activities into HUD IDIS system to obtain HUD voucher # and authorization.
 - b. Attach the HUD voucher form to the vendor invoice packet
 - c. Log and submit the payment voucher packet to accounting.
7. Accounting will:
- a. Send payment to the subrecipient
 - b. Draw down

29.3 ELIGIBLE ESG COMPONENTS

STREET OUTREACH

To receive ESG funded emergency shelter services, participants must meet paragraph 1 of the_of the [HUD definition for homelessness](#).

EMERGENCY SHELTER

To receive ESG funded emergency shelter services, participants must meet paragraph 1 of the_of the [HUD definition for homelessness](#).

RAPID RE-HOUSING

To receive ESG or CoC funded rapid re-housing services, participants must meet paragraph 1 of the [HUD definition for homelessness](#).

HOMELESSNESS PREVENTION

To receive ESG funded homelessness prevention services, participants must meet the criteria under the “at risk of homelessness” definition, or meet the criteria in paragraph (2), (3), or (4) of the “homeless” definition in 24 CFR §576.2 and have an annual income below 30 percent of median family income for the area, as determined by HUD and found [here](#). Costs of homelessness prevention are only eligible to the extent that the assistance is necessary to help the program participant regain stability in the program participant's current permanent housing or move into other permanent housing and achieve stability in that housing.

29.4 EMERGENCY SHELTER PROGRAM TERMINATION AND OPPORTUNITY FOR APPEAL

Each provider must have a termination policy in place. It is important that providers effectively communicate termination and grievance procedures to participants and ensure that the procedures are fully understood. All subrecipients must include termination policies and procedures in their agency regulations and manuals. Documentation of termination of assistance must comply with the requirements in 24 CFR 576.402.

To ensure effective communication for emergency shelter agencies and participants, EOHLIC requires the following actions prior to program termination:

- At least one meeting (can occur virtually or via phone) with the participating household discussing program violations
- A written plan for rectifying program violations including action steps for both agency staff and program participants

30. COMMENTS ON WRITTEN STANDARDS

The BoS CoC and ESG Written Standards will be published online at [Balance of State \(BoS\) Continuum of Care \(CoC\) Program](#) and announced to CoC providers when updates occur. For any concerns, complaints, or grievances with the Written Standards, please email correspondence to the BoS CoC at OCD-DL-BoSCoC@mass.gov, or by postal mail to:

Executive Office of Housing and Livable Communities
Balance of State Continuum of Care Supervisor
100 Cambridge Street, 3rd Floor
Boston, MA 02114

31. GLOSSARY OF DEFINITIONS AND TERMS

Affirmatively Furthering Fair Housing (AFFH) in compliance with [24 CFR 578.93\(c\)](#), programs must be implemented in a manner that affirmatively furthers fair housing, which means that the recipient must:

- (1) Affirmatively market their housing and supportive services to eligible persons regardless of race, color, national origin, religion, sex, age, familial status, or handicap who are least likely to apply in the absence of special outreach, and maintain records of those marketing activities;
- (2) Where a recipient encounters a condition or action that impedes fair housing choice for current or prospective program participants, provide such information to the jurisdiction that provided the certification of consistency with the Consolidated Plan; and
- (3) Provide program participants with information on rights and remedies available under applicable federal, State and local fair housing and civil rights laws.

Beds Dedicated to Chronically Homeless Individuals and Families are permanent supportive housing beds dedicated specifically for use by individuals and families experiencing chronic homelessness as defined at [24 CFR 578.3](#) within a CoC's geographic area, as reported in the CoC's housing inventory count (HIC) and permanent housing (PH) project applications. When a program participant exits the project, the bed must be filled by another participant who is experiencing chronic homelessness unless there are no persons experiencing chronic homelessness within the CoC's geographic area. This concept only applies to PSH projects.

Coordinated Entry is the process designed to coordinate program participant intake assessment and provision of referrals. It covers the geographic area, is easily accessed by individuals and families seeking housing or services, is well advertised, and includes a comprehensive and standardized assessment tool.

Chronically Homeless means:

(1) A "homeless individual with a disability," as defined in section 401(9) of the McKinney-Vento Homeless Assistance Act ([42 U.S.C. 11360\(9\)](#)), who:

(i) Lives in a place not meant for human habitation, a safe haven, or in an emergency shelter; and

(ii) Has been homeless and living as described in paragraph (1)(i) of this definition continuously for at least 12 months or on at least 4 separate occasions in the last 3 years, as long as the combined occasions equal at least 12 months and each break in homelessness separating the occasions included at least 7 consecutive nights of not living as described in paragraph (1)(i). Stays in institutional care facilities for fewer than 90 days will not constitute as a break in homelessness, but rather such stays are included in the 12-month total, as long as the individual was living or residing in a place not meant for human habitation, a safe haven, or an emergency shelter immediately before entering the institutional care facility;

(2) An individual who has been residing in an institutional care facility, including a jail, substance abuse or mental health treatment facility, hospital, or other similar facility, for fewer than 90 days and met all of the criteria in paragraph (1) of this definition, before entering that facility; or

(3) A family with an adult head of household (or if there is no adult in the family, a minor head of household) who meets all of the criteria in paragraph (1) or (2) of this definition, including a family whose composition has fluctuated while the head of household has been homeless.

DedicatedPLUS Project is a PSH project where 100 percent of the beds are dedicated to serve individuals, households with children, and unaccompanied youth (including pregnant

and parenting youth) that at intake meet one of the following categories:

- (a) experiencing chronic homelessness, meaning they qualify as “chronically homeless” as defined in [24 CFR 578.3](#);
- (b) residing in a TH project that will be eliminated and meets the definition of chronically homeless in effect at the time in which the individual or family entered the TH project;
- (c) residing in a place not meant for human habitation, emergency shelter, or Safe Haven and had been admitted and enrolled in a PH project within the last year but were unable to maintain a housing placement and met the definition of chronically homeless as defined by 24 CFR 578.3 prior to entering the project;
- (d) residing in transitional housing funded by a Joint TH/PH-RRH component project and who were experiencing chronic homelessness as defined by 24 CFR 578.3;
- (e) residing and has resided in a place not meant for human habitation, Safe Haven, or emergency shelter for at least 12 months in the last three years, but has not done so on four separate occasions and the individual or head of household meet the definition of 'homeless individual with a disability'; or
- (f) receiving assistance through a Department of Veterans Affairs (VA)-funded homeless assistance program and met one of the above criteria at initial intake to the VA's homeless assistance system.

Fair Market Rent (FMR) are gross rent estimates defined by HUD as an estimate of the 40th percentile of gross rents for standard quality rental units within a specific geographic area. They include the rent plus the cost of all tenant-paid utilities, except telephones, cable or satellite television service, and Internet service. [Fair Market Rents \(40th PERCENTILE RENTS\) | HUD USER](#)

Family (for ESG) is any self-identified family unit regardless of marital status, actual or perceived sexual orientation, or gender identity, any group of persons presenting for assistance together with or without children and irrespective of age, relationship, or whether or not a member of the household has a disability. A child who is temporarily away from the home because of placement in foster care is considered a member of the family. Section 576.102(b) of the ESG interim rule prohibits ESG-funded programs from denying a family admission to an ESG-funded program or ESG-funded services based on the age of a child under the age of 18 if the program provides services to families with children. Similar requirements for CoC programs can be found in Section 578.93(e) of the CoC Program Interim Rule.

Homeless means: (Please note: HUD has four definitions of homelessness, but Category 3 is not applicable within the BoS CoC)

Category 1 - An individual or family who lacks a fixed, regular, and adequate nighttime residence, meaning:

- (i) An individual or family with a primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings, including a car, park, abandoned building, bus or train station, airport, or camping ground;
- (ii) An individual or family living in a supervised publicly or privately operated shelter designated to provide temporary living arrangements (including congregate shelters, transitional housing, and hotels and motels paid for by charitable organizations or by federal, State, or local government programs for low-income individuals); or
- (iii) An individual who is exiting an institution where he or she resided for 90 days or less and who resided in an emergency shelter or place not meant for human habitation immediately before entering that institution;

Category 2 - An individual or family who will imminently lose their primary nighttime residence, provided that:

- (i) The primary nighttime residence will be lost within 14 days of the date of application for homeless assistance;
- (ii) No subsequent residence has been identified; and
- (iii) The individual or family lacks the resources or support networks, e.g., family, friends, faith-based or other social networks, needed to obtain other permanent housing;

Category 4 - Any individual or family who:

- (i) Is fleeing, or is attempting to flee, domestic violence, dating violence, sexual assault, stalking, or other dangerous or life-threatening conditions that relate to violence against the individual or a family member, including a child, that has either taken place within the individual's or family's primary nighttime residence or has made the individual or family afraid to return to their primary nighttime residence;
- (ii) Has no other residence; and
- (iii) Lacks the resources or support networks, e.g., family, friends, and faith-based or other social networks, to obtain other permanent housing.

Homeless Management Information System (HMIS) means the information system designated by the Continuum of Care to comply with the HMIS requirements prescribed by HUD.

Homeless Management Information System (HMIS) Lead means the entity designated by the Continuum of Care in accordance with HUD regulations to operate the Continuum's HMIS on its behalf.

Homelessness Prevention refers to activities in ESG designed to keep households that are at-risk of losing their housing from becoming homeless. Homelessness prevention services include housing relocation and stabilization services and/or short- and/or medium-term rental assistance as necessary to prevent the individual or family from moving to an emergency shelter, a place not meant for human habitation, or another place described in "category one" (literally homeless) of the homeless definition. It is most efficiently implemented when targeted to those at greatest risk of losing housing.

Household is a group of persons who apply together for assistance and live together in one unit.

Housing Inventory Count (HIC) is a point-in-time inventory of provider programs within a CoC that provide beds and units dedicated to serve people experiencing homelessness (and, for permanent housing projects, where homeless at entry, per the [HUD homeless definition](#)), categorized by five Program Types: Emergency Shelter; Transitional Housing; Rapid Re-housing; Safe Haven; and Permanent Supportive Housing.

Human Trafficking HUD considers human trafficking, including sex trafficking, to be "other dangerous or life-threatening conditions that relate to violence against the individual or family member" under paragraphs (1) and (4) of the definition of homeless at 24 CFR 578.3 and "other dangerous, traumatic, or life-threatening conditions related to the violence against the individual or a family member in the individual's or family's current housing situation" under section 103(b) of the McKinney Vento Homeless Assistance Act.

Joint TH/PH-RRH Component Project (TH-RRH) combines two program components – Transitional Housing and Permanent Housing-Rapid Rehousing – into a single project to serve individuals and families experiencing and program participants may only receive up to 24-months of total assistance. A program participant may choose to receive only the assistance provided through

the TH portion of the project or the assistance provided through the PH-RRH component, but the recipient or subrecipient must make both types of assistance available.

Permanent Housing (PH) means community-based housing without a designated length of stay, and includes both permanent supportive housing and rapid rehousing. To be permanent housing, the program participant must be the tenant on a lease for a term of at least one year, which is renewable for terms that are a minimum of one month long, and is terminable only for cause.

Permanent Supportive Housing (PSH) means permanent housing in which supportive services are provided to assist homeless persons with a disability to live independently.

Point-in-Time (PIT) Count means a count of sheltered and unsheltered homeless persons carried out on one night in the last 10 calendar days of January or at such other time as required by HUD.

Progressive Engagement is a service approach to helping households end their homelessness as rapidly as possible, despite barriers, with minimal financial and support resources. More supports are offered to those households who struggle to stabilize and cannot maintain their housing without assistance.

Rapid Rehousing (RRH) is a type of permanent housing that provides short-term (up to three months) and medium-term (4-24 months) tenant-based [rental assistance](#) and supportive services to households experiencing homelessness. HUD does not require an individual have a disability to qualify for RRH.

Rent Reasonableness and Fair Market Rent (FMR) for ESG means rental assistance cannot be provided for a housing unit unless total rent for the unit is at or under the fair market rent (FMR) established by HUD, as provided under 24 CFR 982.503. The total rent for the unit must also comply with HUD's standard of rent reasonableness, as established under 24 CFR 982.507. These rent restrictions are intended to ensure that program participants can remain in their housing after their assistance ends. In many areas, the easiest way to determine rent reasonableness is to use a housing database search engine that will compare units and rents against one another. Other local resources may also be used to obtain information, such as market surveys, classified ads, and information from real estate agents. When comparing rent reasonableness, the proposed unit must be compared to three other units. Rent reasonableness and FMR requirements do not apply when a program participant receives only financial assistance or services under Housing Stabilization and Relocation Services. This includes rental application fees, security deposits, an initial payment of last month's rent, utility payments/deposits, moving costs, housing search and placement, housing stability case management, landlord-tenant mediation, legal services, credit repair.

Subrecipient means a private nonprofit organization, State, local government, or instrumentality of State or local government that receives a subgrant from the recipient to carry out a project.

Transitional Housing (TH) means housing, where all program participants have signed a lease or occupancy agreement, the purpose of which is to facilitate the movement of homeless individuals and families into permanent housing within 24 months or such longer period as HUD determines necessary. The program participant must have a lease or occupancy agreement for a term of at least one month that ends in 24 months and cannot be extended.

Trauma Informed Care is a trauma-informed approach that begins with understanding the physical, social, and emotional impact of trauma on the individual, as well as on the professionals who partner with them. It incorporates three elements: 1. Realizing the prevalence of trauma. 2. Recognizing how trauma affects all individuals involved with the program, organization, or system, including its own workforce. 3. Responding by putting this knowledge into practice.

Victim Service Provider (VSP) means a private nonprofit organization whose primary mission is to provide services to victims of domestic violence, dating violence, sexual assault, or stalking. This term includes rape crisis centers, battered women's shelters, domestic violence transitional housing programs, and other programs.

Violence Against Women ACT (VAWA) is a [federal law](#) that, in part, provides housing protections for people applying for or living in units subsidized by the federal government and who have experienced domestic violence, dating violence, sexual assault, or stalking, to help keep them safe and reduce their likelihood of experiencing homelessness. It was revised in 2022 to add economic abuse and technological abuse.

32. WRITTEN STANDARDS MODIFICATION TRACKING

The BoS CoC Written Standards were completely revised in 2026 and approved by the Advisory Board on April 22, 2026. Previous versions are available upon request.

Date	Amended by	Amendment
5/28/26	Chris	Reunification policy updated to clarify ROI needed before enrollment, child should only be added as household member in VESTA if goal is reunification, it is housing provider's duty to check about reunification goal regularly
5/28/26	Chris	Disengagement section updated to state Contract Coordinator and CE Lead should be updated if a participant is exited due to this policy, clarified household will remain in CE if exited
5/28/26	Chris	Eligibility section of CE policies appendix updated to allow for Category 2 households that are moving toward no fault eviction in a BoS PSH project to be eligible for CE
5/28/26	Chris	Prioritization section of CE policies appendix updated to reflect CoC's decision to prioritize households moving toward no fault eviction in a BoS PSH project, for RRH and TH referrals
5/28/26	Chris	Post-referral timeline section of CE policies appendix updated to reflect recommendation of CE Committee, to encourage housing providers, when possible, to continue to work with households that enter an institution between referral and intake
5/29/26	Chris	Removed full Notice of Occupancy Rights form from Appendix IV and replaced with link to form on HUD Exchange

33. APPENDICES

APPENDIX I: BOS GOVERNANCE CHARTER

Included below is an excerpt of the Articles included in the Governance Charter. For a full copy of the Charter including attachments, please email the BoS CoC Team at OCD-DL-BoSCoC@mass.gov or refer to the [BoS CoC webpage](#).

The BoS CoC Governance Charter is reviewed at least annually per 24 CFR 578.7(a)(5)

ARTICLE 1. GOVERNANCE CHARTER PURPOSE

To fulfill its roles and responsibilities as defined by the US Department of Housing and Urban Development (HUD) in CFR, Part 578, the Massachusetts Balance of State Continuum of Care MA-516 (BoS CoC) will follow the structure outlined in this Governance Charter which includes:

- BoS CoC Purpose
- CoC Membership
- Role of Persons with Lived Experience and Expertise of Homelessness (PLEE)
- Advisory Board
- CoC Standing Committees
- HMIS Lead
- Coordinated Entry Lead

This Charter will be updated annually or by emergency session if needed.

It may be amended or repealed at any MA BoS CoC Advisory Board meeting.

ARTICLE 2. BOS COC PURPOSE

The overarching purpose of the BoS CoC is to make homelessness within its [115-community geography](#) brief, rare, and non-reoccurring. The BoS CoC also seeks to actively participate in efforts to prevent homelessness within its boundaries and recognizes the importance of partnering with all members of the communities being served.

Housing and service projects within the BoS CoC geography are funded by HUD as well as various other sources. The BoS CoC works in partnership with community partners, member organizations and those with lived experience and expertise of homelessness (PLEE) to maximize and leverage all resources in support of those being served.

ARTICLE 3. BALANCE OF STATE COC MEMBERSHIP

Membership is open to all interested parties involved in ending homelessness within the Balance of State's geographic area. Working with the Executive Office of Housing and Livable Communities (EOHLC) staff, the BoS CoC welcomes all participants, particularly engagement with homeless or formerly homeless persons, non-profit homeless assistance providers, victim service providers, faith-based organizations, municipalities, businesses, advocates, public housing authorities and agencies, school districts, social service providers, mental health agencies, health care organizations, institutions of higher education, affordable housing developers, law enforcement, organizations that serve Veterans, and other state agencies.

ARTICLE 4. BOS COC VALUES AND PRINCIPLES

The BoS CoC operates with a commitment to fairness. This is achieved through:

- A focus on membership in the CoC, Advisory Board, and committees that reflects the population served, and includes persons with lived experience and expertise of homelessness ([PLEE](#));
- Strategic project development to serve those identified as most in need of housing and services in the BoS CoC geography through an annual gaps analysis as well as a needs assessment undertaken every three years;
- Use of a [Coordinated Entry system](#) that prioritizes those within the BoS CoC who are most vulnerable; and
- Advisory Board oversight and committee work.

NON-DISCRIMINATION

It is the policy of the BoS CoC Advisory Board that no person shall be discriminated against because of their race, sex, age, marital status, religious creed, color, national origin, disability, or sexual orientation, or because they have minor children, or receive public assistance. The BoS CoC Advisory Board shall be operated in an open and democratic fashion and shall not discriminate against anyone because they are a member of one of the above groups.

FAIR HOUSING AND EQUAL OPPORTUNITY REQUIREMENTS

The BoS CoC complies fully with all applicable fair housing and civil rights requirements in 24 CFR § 5.105(a), including, but not limited to, the Fair Housing Act; Title VI of the Civil Rights Act of 1964; Section 504 of the Rehabilitation Act of 1973; Title II of the Americans with Disabilities Act; and Section 109 of the Housing and Community Development Act of 1974.

Under federal and state law, the Executive Office of Housing and Livable Communities (EOHLC) does not discriminate on the basis of race, color, sex, sexual orientation, gender identity, national origin, religion, creed, age, disability, familial status, children, marital status, military/veteran status, receipt of public assistance/housing subsidy, ancestry, and genetic information. To file a complaint of discrimination, any person may contact the Associate Director, Division of Housing Stabilization, EOHLC, 100 Cambridge St., 3rd Floor, Boston, MA 02114, tel. (617) 573-1137, TTY (617) 573-1140 for the deaf or hard-of-hearing.

The Continuum and its projects will not discriminate on the basis of race, color, sex, sexual orientation, gender identity, religion, age, handicap, disability, or national origin in participating in and accessing housing through the Coordinated Entry System. In accordance with the citations above, and in an effort to achieve that ideal, it will not:

- Deny any applicant the opportunity to apply for housing, nor deny any eligible applicant the opportunity to lease housing suitable to their needs;
- Provide housing which is different from that provided by others;
- Subject a person to segregation or disparate treatment;
- Restrict a person's access to any benefit enjoyed by others in connection with the housing program;
- Treat a person differently in determining eligibility or other requirements for admission;

- Deny a person access to the same level of services;
- Deny a person the opportunity to participate in a planning or advisory group that is an integral part of the Coordinated Entry system; or
- Steer a person toward any particular program for reasons related to race, color, sexual orientation, gender identity, religion, age, handicap, disability, or national origin.

The BoS CoC and its projects shall not automatically deny admission to a particular group or category of otherwise eligible applicants. Each applicant in a particular group or category will be treated on an individual basis.

PLEE PARTNERSHIP

The BoS CoC prioritizes and encourages the participation and partnership of those who identify as Persons with Lived Experience and Expertise of Homelessness (PLEE). Each [committee](#) and the Advisory Board will seek out PLEE partnership as they fulfill their obligations defined below.

Compensation – PLEE members will receive financial compensation for sharing their expertise on BoS CoC committees and other CoC activities.

ARTICLE 5. ADVISORY BOARD

PURPOSE AND RESPONSIBILITIES

The purpose of the BoS CoC Advisory Board is to provide oversight to ensure the fulfillment of all responsibilities specified in HUD's Continuum of Care Program statutory and regulatory requirements. The Advisory Board acts based upon the needs identified by the BoS CoC, and as needed to address challenges that arise. Its responsibilities are listed below.

- Designate a Collaborative Applicant consistent with 24 CFR § 578.9
- Vote on policy changes that significantly impact access to resources
- Review recommendations from the Administrative Committee regarding funding priorities for the CoC
- Approve the Balance of State Strategic Plan developed through CoC-wide engagement
- Establish and oversee committees to support the functioning of the CoC, as well as special subcommittees or working groups as needed
- Solicit regular updates from committees to understand the current operation of the CoC and its greatest needs
- Update committees when CoC priorities change to assist in committee goal development
- Finalize project ranking referred from the Project Evaluation Committee through a majority vote
- Approve applications to join the advisory board by majority vote
- Conduct at least 6 committee meetings each year, more if necessary

- Provide orientation and onboarding for new members of the Advisory Board
- Comply with mandatory participation of all meetings annually (Members can request permission to miss a meeting if necessary; to be approved by the Collaborative Applicant)

A vote is achieved through majority agreement of the membership in attendance when a vote is taken.

Continued membership by voting members of the Advisory Board is contingent upon active participation defined as: Advisory Board Members will attend each bi-monthly Advisory Board meeting. They will attend the monthly Planning Meeting on the months when there is not an Advisory Board meeting. Advisory Board Members are encouraged to participate in a monthly committee meeting. (Members can request permission to miss a meeting if necessary; to be approved by the Collaborative Applicant)

Attendance at Advisory Board meetings is open to all, unless it is a closed session.

MEMBERSHIP AND COMPOSITION

The Advisory Board includes those who engage with and/or serve people experiencing homelessness or have significant knowledge of homelessness. An agency can hold only one seat. The Board is selected from the full membership of the BoS CoC and includes 15 permanent seats and two subject matter expert seats representing the following categories:

- The Collaborative Applicant, EOHLIC
- Two persons with lived experience and expertise of homelessness
- One person from each CE Navigator Agency
- A housing provider
- An ESG provider without CoC funding
- An individual shelter
- An Emergency Assistance (EA) family shelter
- A street outreach provider
- A DV provider
- A Youth and Young Adult (YYA) provider
- A Veterans provider

Subject Matter Expert Seats will be invited as needed. Examples of categories may include:

- A Public Housing Authority (PHA)
- An Advocate or Advocacy Agency
- Affordable Housing Developer
- Higher Education Representative
- Faith-Based person or organization
- Municipality
- Law Enforcement – 2 seats
- Elected Officials – 2 seats

ADVISORY BOARD MEMBERSHIP PROCESS

The Advisory Board will create a standing Outreach Committee to specifically:

- Invite new attendees and members who represent the demographic composition of the population served in the CoC;
- Encourage participation from all historically marginalized populations;
- Develop a list of prospective members as openings occur; and
- Work with the PLEE Committee to recruit members to fill Advisory Board positions.

Every effort will be made to include representatives from all regions of the BoS geography to ensure a balanced perspective.

TERMS

All Board positions are for 3 years*. When a 3-year term expires, the Advisory Board will evaluate letters of interest to fill the seat and vote on which agency will fill the seat moving forward. The existing seat-holder may also submit a letter of interest.

*Regional Navigator Agencies - Current Navigator Agencies each have a permanent seat without a time limit. If a Navigator Agency changes, the seat will go to the new agency immediately upon contract signing.

*The Collaborative Applicant has a permanent seat on the Advisory Board without a time limit.

Announcements for open permanent and subject matter expert seats will be made during the monthly planning meeting, via an email invitation to all CoC members, and through targeted outreach by EOHLIC, the Advisory Board, and the Advisory Board Outreach Committee.

Agencies or individuals applying for a seat must have a minimum of one year of active engagement in the monthly Planning Committee, a CoC Committee, or working with the homeless population within the CoC geography. Interested persons will submit a letter of interest in response to the Advisory Board position description. The Advisory Board will choose from the applicants via majority vote.

Agencies should designate a representative who will attend on behalf of the agency. This person should plan to attend the majority of Advisory Board meetings. In situations where they are unable to attend, the agency should notify the CoC Lead ahead of time and indicate who will be attending that month.

If another CoC merges with the BoS CoC, a seat will be provided for one 3-year term.

A majority vote from the Advisory Board may remove a member of the Advisory Board. An Advisory Board member may also resign their membership on the Board by providing written notice to the Advisory Board co-chairs.

ADVISORY BOARD LEADERSHIP

There will be two co-chairs. One will be from EOHLIC which will retain a permanent position, and the other from the Advisory Board membership. The member chosen must have at least one year of service on the Advisory Board prior to being selected as the co-chair. They will be nominated during an Advisory Board meeting and chosen via majority vote.

ARTICLE 6. CODE OF CONDUCT

BoS CoC Advisory Board members and State employees that support the operation of the BoS CoC shall abide by all sections of the code of conduct below. Failure to act in accordance with the code of conduct may result in removal from the membership of the Advisory Board.

CONFLICT OF INTEREST

The necessity for the fair and impartial administration of state and federal funds and the enforcement of the funders' program requirements makes the avoidance of any conflict of interest of primary importance. A conflict of interest is a situation in which an employee or Advisory Board member's private interest, usually financial, conflicts or raises a reasonable question of conflict with his or her official duties and responsibilities.

When an Advisory Board member's interests compete with the Commonwealth's or the Public's interests, the Commonwealth's or the Public's interests take precedence, even if that means the member might be disadvantaged or inconvenienced. Advisory Board members must not use their office for personal gain in any manner.

Chapter 268A of the Massachusetts General Laws provides criminal and civil penalties for conflict-of-interest violations. The following two general categories of prohibitions are to be used as guidelines. (Chapter 268A of the General Laws contains specific details).

(a) No Advisory Board member may request or receive, in any manner whatsoever, compensation or anything else of value: (i) for performance of his or her duties; or (ii) for influencing or appearing to influence such performance.

Advisory Board members must not accept money or anything of value from anyone, or the promise of money or anything of value, for the performance of their duties within the CoC or for the failure to perform their duties. This is basic public policy, and every CoC Advisory Board member should be on his or her guard to recognize an attempt to influence the performance of his or her duties by the giving of money or gifts.

(b) No Advisory Board member may participate in any matter relating to any entity in which, to his or her knowledge, the Advisory Board member, or a member of his or her immediate family, or his or her business partner or any business organization in which he serves as an officer, director, trustee, or employee, or any person or organization with whom he or she is negotiating or has any arrangement concerning prospective employment, has a financial interest.

Advisory Board members have an obligation to avoid the potential conflicts of interest which exist in their role as a member of the Advisory Board. If their duties require them to participate in a particular matter in which they have a financial interest, they have a duty to disclose and report promptly the existence or possible existence of a conflict of interest to their appointing authority. The appointing authority has the responsibility to determine whether there should be a transfer to another member of a vote which involves them, their immediate family, or any person with whom or entity in which they have some personal or financial involvement, or whether the

appointing authority should assume responsibility for the particular matter, or whether to issue a written determination that the interest is not so substantial as to affect the integrity of the member.

Advisory Board members shall recuse themselves from all discussions or voting that is or could be perceived to be an organizational conflict of interest. Per the US Department of Housing and Urban Development Continuum of Care Regulations (24 CFR § 578.95), an organizational conflict of interest arises when, because of activities or relationships with other persons or organizations, the recipient or sub-recipient is unable or potentially unable to render impartial assistance in the provision of any type or amount of assistance under HUD's Continuum of Care Program, objectively in performing work with respect to any activity assisted under this part.

STANDARDS OF CONDUCT

These Rules with respect to conflicts of interest are in addition to, and supplement, state policies and agency/departmental rules, regulations and operating procedures that may otherwise apply to the official acts of CoC Advisory Board members.

M.G.L. Chapter 268A, Section 23 also prescribes and describes certain "Standards of Conduct." Violations of these standards are subject to termination of membership on the CoC Advisory Board. All Advisory Board members are required to abide by the spirit as well as the letter of these standards, which are summarized in the document Code of Conduct for Public Employees, and can also be located online: <https://www.mass.gov/doc/code-of-conduct-for-public-employees/download>

DUTY TO REPORT VIOLATIONS OF LAW AND CODE OF CONDUCT

(a) Generally. Every Advisory Board Member is expected to maintain and uphold the integrity of the Commonwealth. In satisfying this requirement, it shall be the duty of every member to report to EOHLIC promptly and accurately, any violations of law and/or this Code that affect the BoS CoC and how it reflects on the Commonwealth. To the fullest extent possible, any such reports will be treated confidentially. A member who makes a good-faith report of a violation of law or the Code shall not be subject to retaliation of any kind, threat of retaliation, or pressure, as a result of making a good-faith report of violation and shall be entitled to the protection of any present or future legislation which permits or encourages persons to report violations of laws or regulations.

(b) Attempts to Bribe. Bribery and attempted bribery are claims which strike at the core of state government. Advisory Board members should be constantly alert to solicitations to accept money, consideration, or anything of value in return for acts or commissions involving their official functions within the CoC. Such solicitations may be indirect and subtle. Any attempt to bribe an Advisory Board member shall be reported immediately to EOHLIC.

OTHER STANDARDS OF CONDUCT

(a) False Statement. Proper functioning of the government requires that the agency/department, the courts, other state agencies, and the public be able to rely fully on the truthfulness of government related organizations in matters of official interest. Advisory Board

members will be terminated from their position within the CoC for intentionally making false or misleading verbal or written statements in their capacity as Advisory Board members.

(b) Public Records. All requests for public records should be directed to EOHLIC who shall determine whether the requested documents are public records in accordance with G.L. Chapter 4, Section 7, Clause 26.

Advisory Board members and Commonwealth employees must refer all requests for public records regarding the CoC or its activities to EOHLIC for response. Advisory Board members and Commonwealth employees are not permitted to make decisions on their own as to whether a record is a "public record" as defined by law, unless they are authorized to do so by the appointing authority.

(c) Drugs and Alcohol Use. While on duty, no Advisory Board member shall consume or use alcohol, intoxicants, narcotics, or controlled substances in any form. Similarly, no Advisory Board member shall report for work under the influence of intoxicants, narcotics or controlled substances in any form. The only exception to this Rule is the use of medication when prescribed for the treatment of the member by a registered physician, dentist, or other person legally authorized to prescribe controlled substances.

When performing his or her official functions, it is imperative that his or her judgment not be impaired by any substance. Unless an Advisory Board member has a medical reason to use a prescription medication, the use of any controlled substance, alcohol, or any kind of chemical which affects behavior or judgment is forbidden when working. Such use is also prohibited if the person works under the influence of these substances, even if the substances were taken before reporting for duty. The consumption of alcohol at agency-sponsored or Commonwealth-sponsored social occasions is permitted, as long as the individual is not performing a mandatory duty, as recorded in his or her job description.

(d) Weapons. No Advisory Board member, while in the performance of his or her duties, is permitted to carry, wear, possess, or keep within his or her control any weapon, as defined by law, with the intent of displaying or using said weapon to intimidate or assault another person or for any other unlawful purpose.

Advisory Board members are not permitted to utilize any object for the purpose of attacking, assaulting, intimidating, or in any other way affecting another person to act against the other person's will. Advisory Board members or employees should be aware that the law treats almost any object, depending upon its use or intended use, as a "dangerous" weapon, including a "shod foot". Advisory Board members or employees must keep in mind that even the display of a weapon or any object of any kind in a threatening manner may indicate a willingness or intent to use the object as a weapon; in some cases, the very display of an object, such as a knife, gun, bat, or other inherently dangerous object, may be considered threatening.

(e) Political Activities. Advisory Board members and Commonwealth employees are prohibited from using their offices, titles, or any public resources, or performing their official duties to interfere with, affect, or influence the results of a nomination or election for public office.

(f) Legislative Requests and Inquiries. All requests or inquiries from legislators or their staff regarding the CoC or its activities must be referred to the Massachusetts Executive Office of Housing and Livable Communities, Division of Housing Stabilization.

ARTICLE 7. COMMITTEES

COMMITTEE RESPONSIBILITIES

Each BoS CoC Committee is focused on a particular aspect of the work being undertaken to address homelessness within the BoS CoC geography. The membership of each committee will be comprised of EOHLC staff members, interested parties, and experts. Committees meet monthly and make a report of current activities in the monthly BoS CoC Planning meeting. Committees are responsible for the following tasks.

- Develop policies and procedures
- Provide input related to new projects
- Provide input related to the accessibility and relevance of existing CoC processes
- Periodically report to the Advisory Board on issues of concern

Each committee will be co-chaired by a member of the BoS CoC and a representative from the Collaborative Applicant agency.

COORDINATED ENTRY COMMITTEE

This Committee is responsible for the development and oversight of the Balance of State Continuum of Care's Coordinated Entry system. Committee membership includes representatives from each CE region within the BoS CoC. The Committee develops, reviews, and modifies any necessary policies and procedures related to the Coordinated Entry System.

PLEE (PERSONS WITH LIVED EXPERIENCE AND EXPERTISE) COMMITTEE

The Persons with Lived Experience and Expertise (PLEE) Committee is comprised of individuals who have personally experienced homelessness. Members of the committee draw upon their lived experience and knowledge of homelessness to inform BoS CoC policy, project, and program development. The PLEE Committee also acts as a support network for individuals and families currently experiencing homelessness through mentorship and guidance based on shared experiences. The Committee is also tasked with educating CoC members, service providers, and community members to gain a better understanding of the experiences and needs of homeless individuals and families. Committee members who are participating independently and not being compensated for their time may be eligible for an hourly stipend.

PROJECT EVALUATION COMMITTEE

This Committee is responsible for creating ranking criteria in accordance with HUD guidelines and uses an objective data-driven rating process to review and rank CoC projects to be included in the CoC NOFO response. The Committee approves the scoring tool with the rating factors to be used for new and renewal project ranking and this helps the CoC earn crucial points during the annual CoC competition application.

Performance Outcomes

This Committee develops the Ranking and Review tool used during the HUD NOFO process to ensure that projects are being measured for regulatory compliance and for outcomes that reflect the priorities of HUD and the BoS CoC. This tool uses primarily objective criteria including information from the current project application and APR results for renewal applicants.

Project Ranking

This Committee uses the scoring criteria developed in committee to review and rank new and renewal CoC projects to be included in the CoC NOFO response. After developing and testing a scoring tool, the Committee creates smaller teams of CoC members to review and score assigned CoC applications. Every team submits a report to the Committee of the scores reached in consensus for each project application assigned to that team. The Committee then convenes to review all scores, rank the projects, and make recommendations to the Advisory Board for final ranking.

PATHWAYS TO OPPORTUNITY COUNCIL

The Pathways to Opportunity aims to ensure those from historically marginalized and underrepresented groups receive the housing and services they need in a just and equitable fashion. It is responsible for analyzing data and feedback to produce actionable solutions to advance fairness and opportunity across the CoC. The Council seeks to establish a culture of acceptance by continuous monitoring and evaluation of BoS CoC services.

VETERANS' COMMITTEE

This committee maintains a by-name list of homeless veterans who are active in the BoS CoC's Coordinated Entry system. The Committee meets to review and update each client's housing status during this meeting. Membership is comprised of a variety of stakeholders including the Veterans Administration, Massachusetts Executive Office of Veterans' Services, and EOHLC as well as the BoS CoC Coordinated Entry Regional Housing Navigators and representatives from organizations that provide Supportive Services for Veteran Families (SSVF) services, or street outreach. All members must sign and abide by the client confidentiality agreement.

YYA (YOUTH AND YOUNG ADULT) COMMITTEE

This Committee is responsible for providing a strategic framework for coordinating housing and services for at-risk and homeless youth and young adults (YYA) throughout the BoS geographic area. The committee works in partnership with YHDP (Youth Homelessness Demonstration Program) projects to ensure full access to housing and services for YYA within the BoS CoC.

AD HOC COMMITTEES

The Advisory Board may create Ad Hoc Committees in response to emerging planning needs or requirements within the CoC. The Advisory Board provides direction to these committees to guide their efforts. These committees will typically be organized on a time-limited basis.

COLLABORATIVE APPLICANT ADMINISTRATIVE COMMITTEE

This Committee serves as a problem-solving group to identify and address issues that must be addressed expediently, have complex regulatory or statutory implications, or are too complex to be efficiently resolved in discussion with the Advisory Board. The Administrative (Admin)

Committee works together to clarify and define problems, to determine additional information required to better understand the problem, to propose possible solutions, and to project the impact of each course of action. The Administrative Committee addresses these issues primarily related to ensuring HUD compliance and effective monitoring of both CoC and ESG projects and makes recommendations to the Advisory Board for their review and input. The Collaborative Applicant may invite Advisory Board members, subject matter experts, or others as needed to address the topic being reviewed.

ARTICLE 8. HOMELESS MANAGEMENT INFORMATION SYSTEM (HMIS)

HMIS PURPOSE

A Homeless Management Information System (HMIS) is an information system used to record, analyze, and transmit client and activity data with regards to the provision of shelter, housing, and services to individuals and families who are homeless or at risk of homelessness. HUD funded CoC projects are required to use an HMIS to capture and report upon this data.

HMIS LEAD

The Balance of State Continuum of Care's lead agency, EOHLC, agrees to serve as the HMIS Lead Agency for the Balance of State CoC. The HMIS Lead ensures that the HMIS is established, supported, and managed in a manner that meets HUD's standards for data quality, privacy, and security, as well as other HUD requirements for organizations participating in an HMIS.

EOHLC, as the HMIS Lead, coordinates the CoC's implementation of the HMIS software; provides assistance and guidance to all CoC project applicants; leads the CoC's efforts to assess and improve HMIS implementation, compliance, and data quality; informs CoC members of training opportunities; and develops a Data Quality Plan, a Privacy Plan and a Security Plan.

The full responsibilities of the HMIS Lead can be found in the BoS HMIS Lead Governance Charter.

HMIS SOFTWARE SELECTION

The CoC Lead directs the procurement of HMIS software and designates the software as the official HMIS to be utilized for CoC purposes within the Balance of State geography. If the HMIS Lead is an Agency of the Commonwealth of Massachusetts, state procurement laws must be followed, in which case the CoC Advisory Board will authorize the CoC's HMIS Lead to procure HMIS software which meets all requirements and standards set forth by HUD in law and in notice but will not directly participate (excepting Advisory Board members that are also employees of the HMIS Lead Agency).

The CoC will review an annual report produced by the HMIS Lead assessing the HMIS software's compliance with HMIS requirements put forth by HUD, as well as the HMIS Vendor's compliance with the contract with the HMIS Lead. If deficiencies or noncompliance are found, the CoC will work with the HMIS Lead to identify and implement remedies.

If identified HMIS deficiencies cannot be remedied to the satisfaction of the CoC, the CoC will direct the HMIS Lead to conduct a procurement for new HMIS software.

ARTICLE 9. COORDINATED ENTRY

Coordinated Entry (CE) is a consistent, streamlined process for accessing the resources available in the homeless crisis response system. Through coordinated entry, the BoS CoC ensures that the highest need, most vulnerable households are prioritized for services and that the housing and supportive services in the system are used as efficiently and effectively as possible. The BoS CoC Coordinated Entry system is integrated with the BoS CoC HMIS, and has four focus areas:

Access – A crucial component of CE is to set up an infrastructure for how homeless households can access the system and the programs that are a part of it.

For the BoS CoC, homeless households engaged with HMIS-participating Street Outreach (SO) projects and Emergency Shelters (ES) in the BoS can complete the CE process with that provider. For households not engaged with an SO or ES project, they can enter by going through one of the Regional Navigators.

Assessment – Each household completes the same standardized assessment to gather required HUD data points in addition to other data meant to ascertain a household's relative vulnerability through a fairness lens. It is the information captured in the assessment process that makes it possible to prioritize households and determine who is eligible for certain housing projects.

The Assessment component in the BoS CoC is comprised of the CE Quick Screen, CE project intake, Coordinated Entry Assessment, and Housing Preferences form. These are all completed virtually in our HMIS database.

Prioritization – Given that CoC resources are scarce, it's important to have a method of prioritization in place so households that are "most vulnerable"/most in need at a given time are considered first.

The CE Assessment form is the main tool that BoS uses to prioritize households. The assessment gauges a range of factors from substance use and mental health conditions to discrimination and domestic violence. Answers have different point allocations, and once a household is done with an assessment, they are placed on the Coordinated Entry list in order of their total score.

Referral – Given the large need of housing supports for homeless households, and that the supply is less than the demand, it's vital to have an efficient referral system so that vacancies are referred for quickly and accurately (i.e. with households that are eligible).

Regional Navigators are tasked with referring for vacancies that open in their region. The goal is to use all of the information captured in HMIS to make referrals as quickly and efficiently as possible. Information in HMIS is used to determine which households meet eligibility criteria for programs, as well as factor in preferences and housing needs specific to the household.

BALANCE OF STATE REGIONS

The BoS CoC is defined by four regions – Metro, North Middlesex, North Shore, and West.

Each of those regions has a Regional Navigator who works at a homeless provider agency located in that region. EOHLC contracts with those agencies to employ a Regional Navigator to be the point person for Coordinated Entry within that area.

The Regional Navigator agencies are:

- Metro Region – Somerville Homeless Coalition
- North Middlesex – Community Teamwork, Inc. (CTI)
- North Shore – Emmaus, Inc.
- West – South Middlesex Opportunity Council (SMOC)

DOMESTIC VIOLENCE COORDINATED ENTRY

The Domestic Violence Coordinated Entry (DV CE) system is set up to fill domestic violence housing projects within the Balance of the State CoC while prioritizing the safety of survivors by allowing them to enter limited personal identifiable information (PII) into HMIS.

These DV housing projects serve individuals or families who are experiencing trauma or a lack of safety related to, or fleeing or attempting to flee, domestic violence, dating violence, sexual assault, stalking, or other dangerous, traumatic, or life-threatening conditions related to the violence against the individual or a family member in the individual's or family's current housing situation, including where the health and safety of children are jeopardized.

There is a DV CE project in HMIS that is managed by the DV Specialist. DV Households are added to this project anonymously.

ADVISORY BOARD POSITION DESCRIPTION

Purpose of Advisory Board –

The MA Balance of State Continuum of Care (BoS CoC) is a HUD program designed to promote communitywide commitment to ending homelessness by providing funding to support the efforts of nonprofit providers and State and local governments. The BoS CoC promotes access to, and effective utilization of, mainstream programs by homeless individuals and families.

The purpose of the BoS CoC Advisory Board is to provide oversight of the BoS CoC to ensure the fulfillment of all HUD Continuum of Care Program statutory and regulatory responsibilities. The Advisory Board acts based upon the needs identified by the BoS CoC in gaps analyses, needs assessments, and through committee work, and when necessary, to address challenges that arise outside of these activities.

Advisory Board Role –

The Advisory Board is responsible for the following activities to fulfill this role:

- Designate a Collaborative Applicant
- Vote on policy changes that significantly impact access to resources
- Review the recommendation from the Administrative Committee regarding funding priorities for the CoC
- Approve the Balance of State Strategic Plan developed through CoC-wide engagement

- Establish and oversee committees to support the CoC's functioning, and special subcommittees or working groups, as needed.
- Solicit regular updates from committees to understand the current operation of the CoC and its most significant needs.
- Update committees when CoC priorities change to assist in committee goal development
- Finalize project rankings related to the request for funding that are referred from the Project Evaluation Committee
- Approve applications to join the advisory board
- Conduct at least 6 committee meetings a year, more if necessary
- Provide orientation and onboarding for new members of the Advisory Board
- Advisory Board members must participate in all Advisory Board meetings annually (members can request permission to miss a meeting if necessary to be approved by the Collaborative Applicant)

When decisions are needed, they are made by majority vote.

Advisory Board members will attend the monthly Planning meeting during the months when there is no Advisory Board meeting and are encouraged to participate in a monthly committee meeting.

Board Member Composition -

The Advisory Board is comprised of 15 permanent members and two at-large members who are invited as subject matter experts.

The permanent member seats represent the following categories:

Collaborative Applicant, EOHLC

Two persons with lived experience and expertise in homelessness

One person from each CE Navigator Agency

A housing provider

An ESG provider without CoC funding

An individual shelter

An Emergency Assistance (EA) family shelter

A street outreach provider

A DV provider

A Youth and Young Adult (YYA) provider

A Veterans provider

Subject Matter Expert Seats will be invited as needed. Examples of categories may include:

A Public Housing Authority (PHA)

An Advocate or Advocacy Agency

Affordable Housing Developer

Higher Education Representative

Faith-Based person or organization

Municipality

Each board position is held for three years. When the three-year term expires, the Advisory Board will evaluate letters of interest to fill the seat and vote on which agency will fill it moving forward.

The existing seat holder may also submit a letter of interest.

Process for Membership –

To ensure representation on the Advisory Board that is reflective of the population served, the Advisory Board has a standing Outreach Committee to specifically:

- Invite new attendees and members who represent the demographic composition of the population served in the CoC

APPENDIX II: BoS CoC COORDINATED ENTRY POLICIES AND PROCEDURES

For questions regarding BoS CoC CE policies and procedures, please email the BoS CoC Team at OCD-DL-BoSCoC@mass.gov

Below are the Policies and Procedures for the Massachusetts Balance of State Continuum of Care's Coordinated Entry (CE) System. These policies will be reviewed at least annually, and updated regularly when changes to the system are made and approved.

This document is structured to align with the four core pillars of Coordinated Entry identified by the Department of Housing and Urban Development (HUD):

1. Access
2. Assessment
3. Prioritization
4. Referral

WHAT IS COORDINATED ENTRY?

HUD requires every CoC to establish and operate a CE system. The CE system is a centralized process for assessing, prioritizing, and referring homeless households to housing resources across the CoC geography. The process is standardized and implemented uniformly across the CoC, meaning households that enter the system through one provider will be considered for all housing resources that fill vacancies through CE.

A CE system allows for a regional vision of how to best support homeless households. With just one assessment, households are considered for a number of housing resources across the CoC, instead of needing to find projects one by one without knowing which projects they are eligible for and which are appropriate for their situation. Since this assessment is standardized across all providers, it allows the CoC to prioritize households based on who is most vulnerable in the region at large. This ensures that scarce resources are used as effectively as possible, and the households most in need of services are connected to the projects that can support them. The standardized assessment also incorporates participants' preferences, ensuring they gain access to the options that best address their needs.

The goal of a CE system is to move from a network of projects making individual decisions, to an integrated network of providers working together to serve the households most in need.

DEFINITIONS

- **CoC Supervisor** - EOHLC employee who oversees BoS CoC operations, programs, policies, and funding. They manage the EOHLC team that has direct engagement with CoC programs, subrecipients, and funded projects.
- **Coordinated Entry (CE) Lead** – EOHLC employee responsible for overseeing the overall CE system. They coordinate system-wide policies and procedures related to CE and work with the Regional Navigators to ensure the CE system in each region is being implemented in accordance with those policies and procedures.

- **Contract Coordinator** – Each CoC project is paired with an EOHLC staff person who oversees the contract for their project. This individual is the point person for any questions related to the operation of a project.
- **Default Unit Size** – The number of bedrooms that a household is found eligible for by default, based on their household composition. A household can be housed in a unit of a different size in specific scenarios, outlined in the Default Unit Size section.
- **Domestic Violence Coordinated Entry (DV CE)** – This system runs parallel to the CE system and allows for households that are referred to CE by Victim Service Providers (VSPs) to be entered into the system without PII being included in their record. Once entered into the DV CE project in VESTA, these households are considered for DV-specific and mainstream projects.
- **Domestic Violence (DV) Specialist** – This individual is employed at the subrecipient agency that is contracted to operate the DV CE system. This role acts similarly to a Regional Navigator but works specifically with DV projects. They coordinate referrals to housing vacancies in DV projects, as well as coordinate with VSPs throughout the BoS to ensure VSPs can have households they work with entered into the DV CE project.
- **Household** – Refers to all individuals looking to live together in a housing placement. If someone is looking for housing on their own, they are a household of one.
- **Housing Provider** – The agency managing the operation of a housing program. This agency interfaces with program participants to enroll and support them throughout their participation in the program.
- **Regional Navigator** – Each of the four BoS CoC regions has an agency that is a subrecipient of the CoC's Coordinated Entry grant. As a CE subrecipient, these agencies are in charge of facilitating the CE system in their region. Each of these agencies is required to employ a Regional Navigator who is the point person for CE matters in their region. The Regional Navigator makes referrals to project vacancies, as well as supports providers in their region with general CE matters.
- **VESTA** – The HMIS database used by the Balance of State CoC.
- **VESTAmator** – A VESTA report that generates potential matches for housing project vacancies. Regional Navigators use this report to get the list of households to contact about openings.
- **YHDP** – The Youth Homelessness Demonstration Program (YHDP) is a HUD initiative designed to reduce the number of youth and young adults (YYA), who are age 18-24, experiencing homelessness. The goal of YHDP is to support selected communities in the development and implementation of a coordinated community approach to preventing and ending youth homelessness. YHDP projects are currently only offered in a select 32 communities (YHDP Region) across the BoS. You can view a [map of the YHDP region](#) here.
- **Youth Navigator** – Youth Navigators serve a similar role to Regional Navigators, but do so specifically for the BoS CoC's YHDP projects. They are in charge of referring households to vacancies in YHDP projects. In addition, they also provide Youth Navigation services to YHDP households.

BOS COC REGIONS

Given that the BoS CoC covers a large area comprised of 115 communities in eastern Massachusetts, the CoC was split into four separate regions. Each region has a non-profit

agency that helps manage the Coordinated Entry system within that region. Employed at each of those subrecipient agencies is a Regional Navigator who is the point person for CE matters within that region. The Regional Navigators ensure that the policies and procedures outlined in this document are being followed in their regions. View a [map of the different regions and lists of the communities in each region here](#).

ACCESS

COORDINATED ENTRY ELIGIBILITY

Two things must be considered when determining eligibility to be added to the Coordinated Entry project. In order to be eligible, a household must have both:

1. Eligible Homeless Status, **and**
2. Eligible Geographic Tie

HOMELESS STATUS

Below are the eligible homeless statuses that can make a household eligible to be added to the CE project. Please reference the linked HUD definitions for all details of the homeless definitions.

- [HUD Category 1 homeless](#) (**“Literally homeless” in a shelter or place not meant for human habitation**) – All households that meet the HUD Category 1 homeless definition have an eligible homeless status for the purpose of being added to the CE project
- [HUD Category 2 homeless \(Imminent Risk of Homelessness\)](#) – Category 2 households eligible for Coordinated Entry are currently limited to the following:
 - Youth households eligible for Youth Homelessness Demonstration Program (YHDP) projects. These are households where the Head of Household is aged 18-24 years *and* the household has a tie to one of the YHDP communities ([YHDP map here](#)).
 - Households currently in a MA BoS CoC project that will lose their primary nighttime residence within 14 days due to receiving a Notice to Quit toward a no-fault eviction (This includes scenarios where a household's assistance is being terminated due to project ending or transitioning to a different housing type.)
- [HUD Category 4 homeless \(Fleeing/Attempting to Flee Domestic Violence\)](#) - All households that meet the HUD Category 4 homeless definition have an eligible homeless status for the purpose of being added to the CE project

GEOGRAPHIC TIE

To access Balance of State resources, a household must exhibit that they have a tie to the [BoS CoC geography](#). Every homeless household is able to access resources of the CoC in which they are experiencing homelessness. Therefore, this tie requirement is to confirm that a household is accessing the correct CoC, and to ensure that the limited resources of the BoS CoC are serving the households that are homeless within our geography.

If a homeless household is experiencing homelessness within the BoS geography, they fulfill this geographic tie requirement. If the household is homeless and moving between multiple CoCs, they must be primarily residing within the BoS CoC (more than half of the time).

The BoS has decided that in rare situations, it makes sense for a household that is experiencing homelessness in a different CoC to access BoS resources, as well. If a household is experiencing homelessness in another CoC, they may be eligible for BoS resources if one of the below options is true:

1. Household had a permanent residence within the BoS geography within the past 5 years and desires to return to their community and support system.
 - a. Permanent residency is defined as a consistent location where they resided for at least 12 consecutive months.
 - b. Household will only be eligible to return to the region in which they previously lived, as eligibility is based on their need to return to their previous community.
 - c. Household will have to provide documentation to prove residency. Please see [Verification Requirements section](#) for approved forms of documentation.
1. Household does not qualify under the first category above, but household and household's provider believe there is good reason why they should have access to BoS resources.
 - a. In this event, the household and provider should work together to write a letter explaining the household's connection to the BoS geography and why they believe that connection justifies them accessing BoS resources. The letter should be submitted to the Regional Navigator of the region to which they believe they should have access.
 - b. The CE Committee will review the letter and make a recommendation of whether the household should be given access to BoS resources. The CoC Supervisor and CE Lead will make the final decision.

GEOGRAPHIC TIE REQUIREMENT FOR HOUSEHOLDS IN DV CE PROJECT

The above policy applies to households in the Domestic Violence Coordinated Entry (DV CE) project, with a few differences:

1. Documentation about ties can be redacted to remove PII.
2. Documentation should be sent to the DV Specialist.
3. If the household and case manager are writing a letter making their case for accessing BoS resources (option 2 in Geographic Ties section), instead of being reviewed by the CE Committee, the case will be reviewed by the DV Specialist, DV Specialist's supervisor, CE Lead, and CoC supervisor. This is to protect the privacy of these households and limit the number of people who are reviewing.

VERIFICATION REQUIREMENTS FOR PAST PERMANENT RESIDENCY

1. Those claiming permanent residency in the Balance of State within the past 5 years must provide one of the following:
 - a. Lease agreement
 - b. Notice to Quit or other court documentation

- c. Verification letter from a provider
- d. Verification letter from a landlord

TRANSITIONAL HOUSING PARTICIPANTS

A household that is in Transitional Housing (TH) for homeless individuals meets the HUD Category 1 homeless definition as long as the TH program meets HUD criteria for "Transitional Housing for homeless individuals". As such, they may remain active in the BoS CE project and be considered for housing vacancies in projects that fill through CE. Households in TH must still meet the eligibility criteria for projects they are referred to, and it is important to note that HUD states someone housed in TH does not meet the chronic homeless definition, regardless of their homeless status upon entry into that TH program.

Households enrolled in an approved TH program should not be exited from the CE project in VESTA. If a Transitional Housing project is listed on the BoS CoC's Housing Inventory Count (HIC), it is considered TH per the HUD definition. If it is not on the HIC, please contact the CE Lead. The EOHL team will refer to guidance from HUD to determine if the program is Transitional Housing for homeless individuals, and as such if the household is eligible for CE.

If someone enrolled in an approved TH project is not already in CE, they can be added by the Regional Navigator through the Alternate Portal.

When a household from a non-CoC funded TH project is referred to a vacancy through CE, they will need to provide the Regional Navigator documentation of their homelessness upon entry into that TH project as well as documentation they are currently residing in that TH project.

A household residing in Transitional Housing and active in Coordinated Entry will not be referred to a different Transitional Housing project, in the event they are identified by the VESTAMator as the next household to be screened. The one exception is that households in a Crisis Transitional Housing project can be referred to another Transitional Housing project if they are screened.

INDIVIDUALS RESIDING IN AN INSTITUTIONAL SETTING OUTSIDE OF THE BOS

If an individual is staying in an institutional setting, and immediately upon entry into that institution they were Category 1 homeless, they retain their Category 1 status as long as their institutional stay is 90 days or less. If an individual in this scenario resides in an institution outside of the Balance of State geography, but they were homeless in the Balance of State geography immediately prior to entering that institution, the BoS considers this a qualifying geographic tie to the BoS.

To verify this, a provider within the Balance of State CoC geography must provide documentation of homelessness that shows the household was homeless within the BoS immediately prior to their institutional stay. If that documentation is provided, this meets the geographic tie eligibility requirement. However, if they are not able to secure this documentation from a provider located within the BoS CoC, they must follow the process outlined in the [Geographic Tie section](#) to request access to BoS resources.

When documentation is provided, the household will be entered into CE by the appropriate Regional Navigator through the [Alternate Portal](#).

EMERGENCY ASSISTANCE (EA) FAMILY SHELTER HOUSEHOLDS

Households in the Emergency Assistance (EA) Family Shelter system are eligible to be added to the CE project provided they meet the geographic tie eligibility requirement, but the program types they are eligible for are limited. Because all EA households are eligible for HomeBASE funds to support with rental assistance, the BoS CoC has decided that EA households are not eligible for CoC, ESG, and YHDP-funded Rapid Re-housing (RRH).

EA households are eligible for PSH. The majority of PSH in the BoS CoC requires that the Head of Household (HoH) have a disabling condition. Therefore, EA households must have an adult member with a disabling condition in order to complete the CE enrollment process.

All EA sites located within the BoS CoC have a project in VESTA. In that project, staff can complete the [CE Quick Screen](#) with households at their site. If staff need to be trained to complete that process, they can contact the CE Lead.

Please note there are no restrictions on accessing CE or RRH for households with children that are not in EA shelter, as well as for households with children that are in DV shelters.

VERIFYING HOMELESSNESS FOR CE ELIGIBILITY

To be added to the CE project, a household's homelessness must be verified by a provider. Current enrollment in a VESTA Emergency Shelter or Street Outreach project is sufficient. Self-certifications are not sufficient documentation for entry into CE. Verifications of Homelessness from providers must include the following:

Details about where the individual is currently sleeping (i.e. in a tent in woods behind Walmart, at Davis Square train station, etc) - these details confirm if household meets the HUD homeless definition

- Dates the provider knows the household to have been residing in the stated location
- Town/city where household is residing at night (for BoS geographic tie purposes)
- How/why the signer knows the household to be homeless (See section below)
- Title and agency of staff person verifying
- Signature of staff person verifying
- Date letter was written

HOW/WHY THE SIGNER KNOWS THE HOUSEHOLD TO BE HOMELESS

An important part of the Verification of Homelessness is an explanation of how the verifying staff knows the household to be homeless. For Emergency Shelter (ES) and Street Outreach (SO) staff, please see the following:

- Emergency Shelter staff should list dates when the household resided in their shelter.
- Street Outreach staff should explain when and where they have physically observed a household to be residing in a place not meant for human habitation.

For non-ES or SO staff who know households to be homeless but have not physically observed where the household is residing, verifications must include the following:

- State that to the best of employee's knowledge and based on their professional judgment, the individual has been residing in a place not meant for human habitation at the time of their meetings. The written statement must detail the dates they met the household, the nature of those meetings, and why they believe the person was residing in a place not meant for human habitation. Please note simply stating that someone reports being homeless is not sufficient. The verification must speak to the provider's judgment on why, in their professional opinion, they know this household to be homeless (For example, a provider may reference meetings in their office where the individual brought suitcases with all their possessions with them, etc).

When a non-ES or SO provider writes a verification, they should also try to connect the household to an ES or SO team. In addition to connecting them with shelter or outreach resources, the aim of this is to connect them with a provider that can provide strong homeless verifications in the event the household is screened for a housing opportunity.

RAPID RE-HOUSING BRIDGE

The BoS CoC recognizes that not all households placed into Rapid Re-housing (RRH) programs will achieve housing self-sufficiency by the end of the program timeframe. As such, we have created a "bridge" structure through which households currently in RRH programs filled through the BoS CE system can be considered for openings in Permanent Supportive Housing (PSH) programs which are also filled through the BoS CE system. Staff at participating agencies will complete a training to be able to administer a Bridge Assessment form.

An agency administering RRH can complete a Bridge Assessment with a household if the household meets the following criteria:

- Actively enrolled in their RRH project, and
- The RRH project they are enrolled in fills vacancies through the BoS CoC CE system, and
- The participant has been identified by RRH program staff as a household they believe will not be able to achieve self-sufficiency in RRH and will need PSH, and
- Signed their initial lease in RRH program a minimum of 6 months ago (lease effective date).

The Bridge Assessment should be administered by a staff member who works in the RRH program. Staff must be trained by the EOHLC team on how to administer this Bridge Assessment. They can reach out to the CE Lead to schedule training.

If the household scores high enough per the criteria on the Bridge Assessment, the household can be added back to the CE project to be considered for PSH opportunities. If the household scores high enough to be added back to the CE project, the staff person who administered the assessment should reach out to the CE Lead to notify them. The CE Lead will add the household back to the CE project with the CE Assessment score they had upon entry into RRH.

Given the scarcity of PSH units and the intention to prioritize those resources for the most vulnerable households in the CE project, at this time the BoS is not setting aside any PSH units to be used specifically for RRH-PSH bridge situations. Instead, if a household is added back to CE, they will be referred for PSH openings if their score places them high enough on the list.

While enrolled in a RRH program, clients maintain their chronic homeless status if they were chronically homeless upon entry into the program (time spent in RRH does not count as time homeless toward chronic homeless status). Therefore, households added back to the CE list through the RRH-PSH bridge will retain their chronic homeless status if they were chronically homeless upon entry into the RRH program. The case manager and household should be aware that the majority of PSH in the BoS requires a household meet the HUD chronic homeless definition to be considered eligible.

WHAT PROVIDER SHOULD ENTER A HOUSEHOLD INTO THE CE PROJECT

Eligible households are primarily added to the CE project by Street Outreach teams, Emergency shelter staff, or a Regional Navigator. Their path to entry depends mainly on their homeless status and the providers with whom they are currently engaged.

- Category 1 homeless households:
- Households that are engaged with a VESTA-participating Street Outreach (SO) project or staying at a VESTA-participating Emergency Shelter (ES) must complete the CE process directly with that provider. When a Category 1 homeless household is not engaged with a VESTA-participating SO or ES project, they get added to the CE project by a Regional Navigator through the [Alternate Portal](#).
 - ES teams should complete the CE Quick Screen with all guests to see if they score high enough to be added to the CE project. If they do screen in, staff should complete the [full CE Enrollment process](#) with those households as soon as possible.
- SO teams should complete the [full CE Enrollment process](#) with all households in their project.
- Category 2 homeless households:
- The BoS CoC has limited programs that can support households that are Category 2 HUD homeless. They are all youth programs (individuals ages 18-24) and are part of our YHDP initiative. If a household is between the ages of 18-24, is Category 2 homeless, and has a tie to one of the 32 YHDP communities (see YHDP process document for more details), they should be connected with a Youth Navigator for further screening. If found eligible, these clients will be entered into CE by a Youth Navigator through the [Alternate Portal](#).
- Category 4 homeless households:
- Category 4 households can enter CE through either a Victim Service Provider in the BoS who will complete a CE packet with them, or the Domestic Violence Specialist.

ALTERNATE PORTAL

Recognizing that not all CE eligible households will already be engaged with a VESTA-participating SO or ES project, the BoS created the Alternate Portal. If a household presents at a homeless provider that doesn't have VESTA access, that provider can reach out to their Regional Navigator to have that client added to CE through the Alternate Portal.

Before adding a household to CE through the Alternate Portal, the Regional Navigator will first confirm eligibility and collect eligibility documentation (both homeless status as well as geographic tie). If the Regional Navigator finds that the household is eligible and receives documentation, they will set up a time with the client and their provider to complete the CE enrollment process. This can be done by phone or video call. Regional Navigators will ask that

an existing provider join for the call so that the client has someone they know and are familiar with to navigate the process with them. The CE Enrollment process contain sensitive questions, so having someone present that the client knows is an important piece to consider.

HOMELESSNESS PREVENTION PROGRAMS

Homelessness Prevention funds are administered in the Balance of State CoC at the access points listed below. Households can contact the access points directly to inquire about accessing those funds. Those access points will determine if the household is eligible for prevention funds and will administer accordingly if funds are available. Please note that access points may be restricted to using prevention funds within a certain region.

Homelessness Prevention Access Points:

- Alternative House (Lowell), (888) 291-6228, www.alternative-house.org
- Brookline Center for Community Mental Health (Brookline), www.brooklinecenter.org; email careconnections@brooklinecenter.org, (857) 707-3525
- RESPOND (Somerville), (617) 623-5900, www.respondinc.org
- Somerville Homeless Coalition (Somerville), (617) 623-6111, www.somervillehomelesscoalition.org

ASSESSMENT

STEPS OF THE CE ENROLLMENT PROCESS

A household must complete the following steps to be added to the CE project:

- Quick Screen – This short questionnaire aims to identify and screen in households that most need BoS housing resources. Given that housing resources are scarce, the BoS CoC is committed to preventing false hope for households that won't score high enough to be referred to resources. Those households with low scores on the Quick Screen that are more likely to self-resolve will be screened out and won't be added to the CE project. If a household scores 16 or higher on the Quick Screen, they move on to subsequent steps of the CE Enrollment. Households that are actively sleeping in a place not meant for human habitation will be given the maximum score on the Quick Screen and automatically screened into CE given the inherent vulnerability of sleeping in a place not meant for human habitation. Those households will still answer the Quick Screen questions in case they are sheltered in the future and their score needs to be calculated. Youth households (18-24 years old) and households that are fleeing or attempting to flee domestic violence will automatically screen into CE regardless of their Quick Screen score. The score of the Quick Screen is added to a household's ultimate CE Assessment score.
- CE project intake forms – These capture data elements required by HUD. The information is also helpful in determining for which projects households are eligible (e.g. is household chronically homeless, does household have a disabling condition, etc). The household's ultimate CE Assessment score will give points based on the length of time the household

has been homeless, and those points are based on answers in the CE project intake forms.

- CE Assessment – This form has two main functions:
 - Calculate CE Assessment score – This form is the main part of the process that generates points for the ultimate CE Assessment score (in addition to Quick Screen score and time homeless score calculated from the CE project intake forms). Point generating questions on this form consider different factors contributing to a household's vulnerability. The total CE Assessment score calculated is then used to prioritize households for housing vacancies. A household is prioritized for programs in order of their CE Assessment score.
 - Collect information about housing preferences and needs – These questions capture information about what a household prefers and needs with regards to housing opportunities. This information is then considered when determining what placements a household should be referred to.

COMPLETING THE CE ENROLLMENT PROCESS WITH HOUSEHOLDS

Staff that complete the CE enrollment process with eligible households must follow these guidelines:

- Explain questions to Head of Household and ensure understanding
- Do not attempt to influence answers
- Complete CE enrollment process with the household, recording the answers that the household provides
 - If a household says they have a disabling condition, the assessor should record that and let household know that if they are pulled for a housing opportunity, depending on eligibility criteria for that project they will need to provide documentation of that disabling condition from a clinician at that time in order to move forward. However, please note that no documentation is needed to answer "yes" to disabling condition questions at the time of the CE Enrollment.
 - If a client answers "No" to having a disabling condition, but you have verification from a licensed clinician confirming that the Head of Household does in fact have one, you can answer in line with the clinician's diagnosis. This can potentially increase the CE Assessment score, but the provider should remember that ultimately, the household may still be required to acknowledge and provide documentation of this disabling condition if pulled for a vacancy.
- If you have reason to believe a household is not being truthful in their answers in order to get a higher CE Assessment score, engage the household in conversation and explain the importance of accurate answers.
- Ensure households understand that answers to the Housing Needs and Preferences section of the CE Assessment will be considered with regards to what opportunities they are offered. They will only be considered for the types of housing and features of housing that are selected in those questions. Assessors should make sure households understand to only select the types of housing they are interested in as opposed to blindly opting into everything, as denying a unit will be [counted as a strike](#).

- Upon completing the CE Enrollment, staff should notify the household to inform them if any of the provided answers change, explaining that some answers affect their CE Assessment score.

TIMELINE FOR COMPLETING THE CE ENROLLMENT PROCESS

The BoS CoC expects all Emergency Shelter and Street Outreach teams in the CoC to complete the Coordinated Entry enrollment process with households enrolled in their projects so they can be considered for resources that refer through CE.

The CoC expects that Emergency Shelters complete the CE enrollment process within two weeks of a household's enrollment date into the shelter.

Given that it may take longer to engage with a household that is staying in a place not meant for human habitation, the CoC expects Street Outreach projects to complete the CE enrollment process within thirty days of the household's date of engagement. The CoC understands some households in Street Outreach projects may not be added to CE for various reasons (e.g. not eligible because they are experiencing homelessness within other CoC more than 50% of the time, not yet engaged to a substantial degree, etc).

Next steps after being added to CE project

Once a household is added to the CE project, they will be considered for housing opportunities as they become available. However, households enrolled in CE and the providers supporting them should know that due to these housing projects having scarce resources, not all households added to CE will ultimately be offered housing through the CE system.

BoS CoC wants to emphasize to providers that getting a household enrolled in CE should be just one piece of a larger plan to support them. Providers should also prioritize:

1. Ensuring households are connected with immediate services that can support their immediate needs (Street Outreach case management, shelter access, etc), and
2. Pursuing other routes to housing and housing applications that could be a fit for the household.

PRIORITIZATION

The CE Assessment score is the main mechanism used for prioritizing households. The tool was created to assess different factors that contribute to a homeless household's level of vulnerability. The CE Assessment score is generated based on answers to questions in the CE Assessment, CE Quick Screen, and CE intake. Those answers can be edited if they change over time.

When there is a housing vacancy, VESTA will use the information gathered during the CE Enrollment process to identify all households eligible and interested in the opportunity ([see Referral section](#) for more details on this). Those households will then be considered in the order of

their CE Assessment score, starting with the highest scoring household. This process is the same for Permanent Supportive Housing, Transitional Housing, Rapid Re-Housing, and Joint Transitional Housing/Rapid Re-Housing projects that fill openings through CE.

SCORE TIEBREAKERS

If there is a tie for the highest scoring households identified for a housing vacancy, the Regional Navigator should consider the following:

1. Subpopulation focus - If the project with the vacancy has identified in their project application a specialty in serving a certain subpopulation (e.g. Survivors) and one of the tied households is a member of that subpopulation, that household will be given priority and referred to the unit. If this subpopulation priority does not break a tie, the Regional Navigator will move on to #2.
2. Veteran status – Households with Veteran status will be given priority in the event of a CE Assessment score tie. If the Veteran priority does not break a tie, the Regional Navigator will move on to #3.
3. Length of time homeless - Priority will be given to the household with the greater "length of time homeless" score in the breakdown of their CE Assessment score (found on client summary page of CE VESTA record).

REGIONALIZATION POLICY (REGION PRIORITY)

After a successful pilot phase, the CoC made permanent a policy that prioritizes homeless households within a region for the vacancies in that region.

REGION IN WHICH A HOUSEHOLD IS CONSIDERED FOR HOUSING PLACEMENT

When selecting a region on the CE Assessment, case managers/Regional Navigators will select the region in which the household is currently experiencing homelessness. If a household relocates to a different region, the case manager/Regional Navigator that was working with the client should update the CE Assessment answer and communicate this to the Regional Navigator of the new region.

When a household experiencing homelessness outside of the BoS CoC geography has an eligible geographic tie and is thus eligible for BoS programs, the region on their CE Assessment should be set to the region for which their tie applies.

SWITCHING REGIONS

If a household wants to be considered for housing in a region other than the one in which they are currently experiencing homelessness, they must prove one of the below ties to the desired region:

1. Household has had a permanent residence within a different Balance of State region within the past 5 years and desires to return to their community and support system
 - a. Permanent residency is defined as a consistent location where household resided for at least 12 consecutive months
2. Household is fleeing domestic violence and needs to relocate for safety reasons

For those who do not qualify under an above category, but for which the household and case manager believe there is good reason to allow access to a different region, they can write a letter explaining why and send it to the Regional Navigator of the region the household is currently in. The Regional Navigator will inform the CE Lead and bring this case to be discussed at the next CE Committee meeting. The CE Committee will discuss and make a recommendation to approve or deny the request. The CE Lead and CoC Supervisor will take recommendations into account in making a final decision.

REQUIRED DOCUMENTATION TO SWITCH REGIONS

For households that meet one of the two ties to a different region outlined in the above section, documentation will be collected by the Regional Navigator before reflecting the region switch in their CE Assessment. Below are the verifying documents that will be accepted – households only need to provide one from those listed below:

Those claiming permanent residency in the Balance of State within the past 5 years:

1. Lease agreement, OR
2. Notice to Quit or other court documentation, OR
3. Verification letter from a provider, OR
4. Verification letter from a landlord

Fleeing Domestic Violence

1. Restraining order, OR
2. Police reports, OR
3. Verification letter from a provider, OR
4. Self-certification form (form HUD-5382)

WHEN THERE ARE NO ELIGIBLE HOUSEHOLDS IN THE REGION

When identifying a referral for a housing placement, if the Regional Navigator finds there are no eligible households within the region, the below steps will be followed to identify a household to refer:

1. Expanding search to all regions: The Regional Navigator who has a vacancy but no eligible household in their region, will use VESTA to identify the household with the next highest assessment score in the full CoC that would be an appropriate match for that vacancy. If they identify a household they will reach out to the Regional Navigator in the region the household is currently in before contacting the household. When reaching out to the household and their case manager, the Regional Navigator will cc: the Regional Navigator of that region on the email. The Regional Navigator will notify the CE Lead that they have expanded the search for a specific vacancy to all regions.
 - a. If the Regional Navigator has expanded search to all regions, they will continue to check daily while the vacancy remains open to confirm if an eligible household within their region has been added to Coordinated Entry. If so, that household will be given priority and considered next before continuing on with households from other regions.

2. Contacting the EOHLC team to discuss moving forward with screening per HUD's order of priority: Once all households from other regions are considered, if there is still not a household that is eligible and interested, the Regional Navigator should inform the CE Lead and include the housing provider on that email. The CE Lead will notify the CoC Supervisor and Contract Coordinator for the project. They will set up a meeting with housing provider to discuss considering households that do not meet the eligibility criteria, agreeing on next steps that align with the orders of priority outlined by HUD, in the interest of filling the housing vacancy as soon as possible. The housing provider should be aware that this does not mean the project's eligibility criteria has changed. Filling vacancies with households that do not meet the original eligibility criteria is only allowed with referred households from the Regional Navigator and only with confirmation from EOHLC after the above process has been followed. Projects should know that enrolling households that do not meet original eligibility criteria is something that will be considered at time of project evaluation. If a Regional Navigator gets to this stage of considering households that do not meet the full eligibility criteria, they will first screen households in the region of the vacancy, and then expand to all regions if necessary.
 - a. If the Regional Navigator has moved onto this step, they will check VESTA daily to confirm if an eligible household from any region has been added to Coordinated Entry. If so, that household will be given priority and considered next before continuing on with households that do not meet the project's full eligibility criteria.

PRIORITY FOR RRH AND TH REFERRALS

The following households in CE will be given first priority for referrals to RRH and TH openings. The household will be given priority above all other households, including above start-up cost only households in the case of RRH projects.

- Households currently in a MA Balance of State CoC project that meet the HUD Category 2 definition due to receiving a Notice to Quit toward a no-fault eviction. This includes scenarios where a household's assistance is being terminated due to project ending or transitioning to a different housing type.
- Households currently in a MA Balance of State CoC project that meet the HUD Category 4 homeless definition.
- Households that have exited from a MA Balance of State CoC project due to receiving a NTQ for a no-fault eviction within the previous three months.

To allow for consistency of care, households within this priority status tier will first be considered for openings operated by the same agency that ran the project they are currently in/from which they exited due to receiving a notice to quit toward a no-fault eviction.

To be referred to an opening, the household must be added to the Coordinated Entry project and be eligible for the RRH or TH project.

When a housing provider is working with a household that should be given this priority, they must notify the CE Lead before moving forward to ensure they qualify for this priority. The CE Lead will maintain a list of all households that are eligible for this priority status and coordinate with the Regional Navigators to ensure that they are properly considered for

openings. Depending on the scenario, the housing provider may need to work with the Regional Navigator to coordinate enrolling the household into CE and assessing them.

REFERRAL

All CoC-and ESG-funded projects within the BoS CoC geography must only fill vacancies with referrals from the Coordinated Entry system. The housing provider initiates this process by completing an Available Unit Form in VESTA, which captures details about the vacancy that are needed to make an accurate referral. Once that Available Unit Form is submitted, the Regional Navigators (or Youth Navigators for YHDP vacancies) will begin the process of identifying a household from the CE project for referral.

IDENTIFYING A HOUSEHOLD FOR REFERRAL

The CE system strives to limit the number of unsuccessful referrals due to a household being ineligible or uninterested. The following elements are considered when identifying a household for referral.

ELIGIBILITY

- Program eligibility: Each type of project has baseline eligibility criteria (e.g. RRH projects require Category 1 or 4 homelessness). A project may also have slightly different eligibility criteria than other projects of the same component type based on their application (e.g. a project may exclusively serve youth households). When identifying a referral, information from a household's VESTA record will be considered and only households who are deemed eligible per that information will be considered.
- Unit eligibility: Information specific to the unit is captured on the Available Unit Form that the housing provider completes when reporting a vacancy for referral. Unit eligibility information such as the number of bedrooms in the unit will be considered when identifying an eligible household for referral.

INTEREST

- The CE Assessment collects information about a household's housing preferences and needs, such as if they need a first-floor unit or whether they are interested in housing opportunities with shared living spaces. A household will only be contacted about a housing opportunity if it aligns with the answers provided in the "Housing Preferences and Needs" section at the end of their CE Assessment (e.g. Household states they need a first-floor unit or a unit in a building with an elevator, so they will only be offered units that meet that criteria).

PRIORITIZATION

- As mentioned in the [Prioritization section](#), housing placements will be offered to households in the order of their CE Assessment score. Once the highest scoring households that are both eligible and interested are identified by the VESTAmator, the Regional Navigator will address each eligible household in order until one is a successful referral.

OTHER

- If a household has an open referral for another project, they will not be considered for a second opportunity.
- If a household has two strikes within the current calendar year, they will not be considered (see [Strikes section](#)).

STRIKES

This system is intended to keep the CE system running efficiently and to minimize unsuccessful referrals, thus filling housing vacancies as quickly as possible. The policy is not meant to be punitive.

It is expected that households accept a referral if they are eligible and it aligns with the needs and preferences selected in their CE Assessment. If a household instead rejects a referral, they will receive a "strike." If a household receives two strikes in a calendar year, they will not be offered another unit that year. All strikes will be reset on January 1st. Regional Navigators will record strikes as Encounters in the household's CE VESTA record.

Confirming that the needs and preferences recorded in a household's CE Assessment are accurate is the best way for a client and case manager to prevent a household from being put in the position of rejecting a unit they aren't interested in and consequently receiving a strike.

After a rejection, the Regional Navigator will discuss with the household and case manager what changes need to be made to the household's CE Assessment to prevent a similar unsuccessful referral. The Regional Navigator will notify the household and/or case manager of the strike.

If a household denies a unit for one of the reasons below, they can submit documentation for consideration of not receiving a strike.

1. Unit or area is not safe for reasons related to domestic violence, dating violence, sexual assault, or stalking
 - a. Household must provide one of the forms of documentation related to domestic violence outlined in the [Regionalization section](#)
2. Unit or area is not adequate due to other health and safety related concerns
 - a. Must provide signed documentation from a service provider that states clear explanation of why rejection is necessary for health and safety reasons
3. Unit or area is not adequate due to current location of employment
 - a. Must provide documentation of current employment and location

Documentation must be sent to the Regional Navigator facilitating the referral process. These requests will be reviewed by the team of BoS Regional Navigators on a monthly basis to make final decision of if a strike will be issued. The decision will be recorded by the Regional Navigator in VESTA.

If a household was referred to RRH but their housing search has taken 3 months or more and they haven't found a unit yet, they can request to cancel the referral without a strike penalty.

REGIONAL NAVIGATOR REFERRAL STEPS

Regional Navigators will use the VESTA report to identify the highest scoring households that are [eligible](#) and [interested](#) in a housing vacancy. Regional Navigators will then review the record of the highest scoring household to confirm they appear to be eligible and interested per the information recorded in their VESTA record. If so, they will contact that highest scoring household and their case manager, when case manager contact information is provided, to share details about housing opportunity, including any eligibility requirements specific to that project. Regional Navigators will inform the household and/or case manager of the deadline by which they must 1) confirm interest in the housing opportunity, and 2) provide complete eligibility documentation to the Regional Navigator. The deadline will be five business days from when the Regional Navigator first contacts the household and/or case manager. The Regional Navigator will record a Referral CE Event the same day they contact the household and/or case manager.

Eligibility documentation requested by the Regional Navigator will be limited to Verification of Homelessness (Chronic homelessness if required for the vacancy), Verification of Disability (if required by project), and documentation to prove they are a part of a subpopulation that is required for the vacancy (if applicable).

In the interest of trying to make accurate referrals, the Regional Navigator does a preliminary check of eligibility documentation to show the household is likely eligible. This means they check homeless verification for accuracy in accordance with HUD and BoS standards, confirm chronic homelessness documentation speaks to all twelve months of homelessness, and verify that verification of disabling condition includes the language in HUD's definition of disabling condition and is signed by an appropriate party. It is ultimately the responsibility of the housing provider to verify all documentation and confirm that it meets the minimum standards for their project.

Note: If the housing placement being offered will ultimately require additional documentation (e.g. vacancy requires income documentation because the housing subsidy is paid by a Housing Choice Voucher), the Regional Navigator will inform the household of this requirement and encourage them to start collecting that documentation, but they will not require this documentation in order to refer the household to the opening.

If the household and/or case manager does not confirm interest and provide complete eligibility documentation by the deadline, the Regional Navigator will:

1. Record in the Referral CE Event the unsuccessful outcome of the 5 day screening period;
2. Notify the household and/or case manager that they're moving on to the next household and inform them that since they've been screened once and didn't provide documentation, they will not be contacted about another opportunity until they submit the requested documentation to the Regional Navigator (If household has an active enrollment in SO or ES, that counts as sufficient proof of VoH); and
3. Contact the next highest scoring household and repeat this process.

If the household and/or case manager does confirm interest and provide complete eligibility documentation by deadline, the Regional Navigator will:

1. Upload eligibility documentation to the CE household's VESTA record.

2. Select “successful referral” as outcome of the 5 day screening period in the Referral CE Event. That selection will automatically send a pending intake to the dashboard of the Housing Provider’s VESTA project.
3. Create an email thread to connect the household and/or case manager with the housing provider and instruct the housing provider to 1) sign into VESTA to review eligibility documentation, and 2) coordinate with the household and/or case manager to set up an intake meeting.

Recognizing that the list of who is enrolled in the Coordinated Entry project is always fluctuating, Regional Navigators will be aware of new households added while they are reaching out to households about a vacancy. If they have already started working their way down the list of eligible and interested households, before moving on to the next household, they must confirm if a higher scoring household has been added to the VESTAmator report. If so, they will contact the new higher scoring household next before continuing down from the point in the list they had reached.

POST-REFERRAL TIMELINE

When Regional Navigators make a referral, they will connect the housing provider with the household and/or their case manager via email. In that communication, they will ask the housing provider to verify eligibility documentation and be in touch with the household and/or case manager within five business days to schedule an intake appointment. The Regional Navigator will also state that once the housing provider reaches out, the client and case manager have 10 business days to confirm a day and a time for the intake meeting. The intake meeting is not required to occur within the 10 business days. If the housing provider does not reach out to schedule the intake within five business days, the Regional Navigator will follow up with the housing provider via email and include the project's Contract Coordinator on that message.

The housing provider is expected to make repeated efforts to contact the household and/or case manager with the aim of scheduling an intake meeting. They should record these contact attempts on the Referral Contacts form of the pending intake, found on their project dashboard. If after 10 business days and consistent attempts to schedule an intake the housing provider has not been able to schedule an intake meeting, they can reject the referral in VESTA and ask for a new one. If a case manager communicates that a referred household has entered an institution (medical facility, substance use treatment, etc) before enrollment, the CoC encourages housing providers to continue working with the household irrespective of the 10 business day deadline. The housing provider should work with the case manager to determine the client’s discharge date and plan for an intake and move-in process that discharges the client directly into housing. That said, housing providers may cancel referrals for clients in institutions who have not met the 10 day deadline and cannot be housed for an extended period, as determined by the housing provider.

HOUSING PROVIDER’S ROLE IN REFERRAL PROCESS

Housing providers should complete the Available Unit Form in VESTA as soon as they have a vacancy to fill. Submitting the Available Unit Form will notify the Regional Navigator of the vacancy and kickstart the process of identifying a referral.

Once the Regional Navigator sends a referral to the housing provider, the provider should first check the eligibility documentation the Regional Navigator uploaded to VESTA to confirm it is sufficient. In the interest of trying to make accurate referrals, the Regional Navigator does a preliminary check and collects documentation that shows the household is likely eligible. However, the ultimate responsibility to check and verify eligibility documentation is that of the housing provider.

Once eligibility documentation is approved internally, the housing provider should respond to the referred household and/or the household's case manager within five business days of the referral being made to set up an intake meeting. The housing provider must keep the Regional Navigator included on communications so the Navigator is aware of how the referral is proceeding.

If the housing provider decides the referral should be denied, they must:

1. Inform the household, case manager, and Regional Navigator of this decision and provide a reason for the decision (e.g. household found to be ineligible, household did not reply within ten business day period, household rejected referral); and
2. Complete the Referral Contacts form associated with the referral (found on the dashboard of their VESTA project) to document all efforts that they made to contact the household; and
3. Complete the denial form associated with the referral (found on the dashboard of their VESTA project) explaining the reason.

If the housing provider is planning to reject a referral because the referred household has previously been terminated from a project they manage, the project should first notify the CoC Supervisor to discuss further. Previous termination from a project does not bar the subrecipient from providing further assistance to the same household at a later date. The BoS wants providers to be open to the prospect of working with a household again given that circumstances can change and households can be successful in a subsequent enrollment.

WHEELCHAIR ACCESSIBLE UNITS

Given the scarcity of wheelchair accessible units and the CoC's interest in ensuring those units go to households who need them, the BoS CoC has created the following process when a wheelchair accessible unit becomes available.

The first households screened for these vacancies will be households who have indicated in the Housing Preferences and Needs section of their CE Assessment that they need a wheelchair accessible unit. Households with the region of the vacancy selected will be screened first, in order of CE Assessment score. If necessary, the next households to be screened will be households in need of wheelchair accessible units that have a different region selected.

In order to be referred, the household must still meet the eligibility criteria for the project. Additionally, they will need to provide documentation from a medical professional that they need a wheelchair accessible unit. For this documentation of needing a wheelchair accessible unit, an extension beyond the five-business day screening deadline will be granted if requested. If after screening all households in the CE project who have indicated they need a wheelchair

accessible unit, a household has not been identified for referral, the Regional Navigator will begin screening households who have not indicated they need a wheelchair accessible unit.

OTHER POLICIES AND PROCEDURES

DOMESTIC VIOLENCE COORDINATED ENTRY (DV CE) PROJECT

The DV CE project was created in VESTA so survivors eligible for the CE project could be entered anonymously and considered for housing opportunities through the CE system. When households that present at Victim Service Providers (VSPs) complete a CE enrollment packet with the VSP, personal identifiable information (PII) like name and exact DOB are not collected. Households are then entered into the DV CE project in VESTA with a coded name that is linked to the Victim Service Provider (VSP) with whom they are engaged. This coded entry into CE for survivors can be completed by VSPs directly with a client, or if a client is not connected with a VSP already and does not want to be, they can complete this process with the DV specialist overseeing the DV CE project.

To best protect the privacy of survivors, the DV CE system aims to involve as few parties as possible when entering a client into the system and making a referral. For clients who enter DV CE through a VSP, the VSP acts as the liaison if a household is prioritized for an opportunity and needs to be contacted about being referred. Households are only ever directly connected with a housing provider if they decide they want to move forward with an opportunity. Additionally, the DV Specialist does not collect eligibility documentation, which contains PII, for DV CE households when screening them for an available unit. If the household is interested, the DV Specialist connects the VSP and the case manager to directly exchange required documentation, limiting the exchange to just those two parties.

The DV CE project ensures that survivors presenting at VSPs and entered into CE as anonymous households, as well as survivors that present at mainstream homeless providers, are considered for both DV-specific housing projects as well as mainstream housing projects.

ASSESSING VULNERABILITY LEVEL FOR HOUSEHOLDS FLEEING OR ATTEMPTING TO FLEE

The DV CE System has integrated vulnerability considerations based on the Jacquelyn C. Campbell Danger Assessment, which evaluates lethality risk. Households in the CE and DV CE projects that are fleeing or attempting to flee will complete the Danger Assessment with their VSP or the DV Specialist and have that score added to their Quick Screen (and subsequently their CE Assessment score if they screen into the CE project). This measure is to ensure that lethality risk is a factor of vulnerability considered in our CE system.

REFERRAL STEPS FOR DV HOUSING PROJECT VACANCIES

The referral process for DV housing projects will vary from the mainstream process outlined in the [Regional Navigator referral steps section](#) as follows:

- Upon being contacted by the DV Specialist about a housing opportunity, case managers must confirm initial eligibility and interest of their client with the DV Specialist within 5 business days. Case managers of clients who have been entered as coded clients into DV CE may request an additional 5 business day extension, if needed. The

case manager at the VSP must send this extension request to the DV Specialist before the initial 5 business day deadline. The extension will be automatically granted upon request.

- To protect the privacy of the household, no documentation needs to be shared with the DV Specialist during this period of confirming initial eligibility and interest.
- Once a case manager has confirmed eligibility and interest of their client with the DV Specialist, they will be connected on an email thread with the VSP administering the housing program. VSPs must respond to client and case manager within five business days to initiate next steps of the referral process. For DV-specific projects, the VSP housing provider may set a reasonable deadline for when eligibility documents must be provided and intake completed. It is suggested that VSPs adopt the mainstream CE policy of setting a deadline of 10 business days following their outreach for the client to schedule and attend their intake if this is part of the process for gathering eligibility documentation.

EXPECTATIONS FOR VSPs THAT RUN HOUSING PROJECTS

VSPs operating housing projects that fill vacancies through CE should follow the expectations outlined in the [Housing Provider's role in the referral process section](#). Because VSPs cannot use VESTA, there are two differences to consider:

- Reporting vacancies – When a VSP's housing project has a vacancy, they should complete an Available Unit Form and send it via email to the DV Specialist to begin the referral process.
- Rejecting referrals – If a VSP is rejecting a referral, they should inform the household and case manager and explain the reason. To maintain confidentiality of the household, they should inform the DV Specialist and CE Lead in a separate communication of the reason for rejection.

REMOVING HOUSEHOLDS FROM THE CE PROJECT

Households shall only be exited from the CE project in the following situations:

- No longer eligible per [CE Eligibility policy](#)
- Known to have left the BoS CoC area permanently
- Deceased
- They personally request removal
- They have not been active in any emergency shelter or street outreach project participating in VESTA for 90 days, nor have they had their homeless status confirmed by a Regional Navigator or provider who can record confirmation in the CE project and keep them active in CE (in this scenario, VESTA will automatically exit them from CE)

APPENDIX III: DOMESTIC VIOLENCE EMERGENCY TRANSFER PLAN

**MA-516 BALANCE OF STATE CONTINUUM OF CARE
EMERGENCY TRANSFER PLAN FOR VICTIMS OF DOMESTIC VIOLENCE,
DATING VIOLENCE, SEXUAL ASSAULT, AND STALKING**

The Massachusetts Balance of State Continuum of Care (CoC) requires all housing providers to adopt the plan that follows as the Emergency Transfer Plan for their projects funded with Balance of State CoC funds. In the event a CoC-funded project needs this plan translated into another language, they should reach out to OCD-DL-BoSCoC@mass.gov.

[INSERT NAME OF COVERED HOUSING PROVIDER (CHP) AND ACRONYM] is concerned about the safety of its tenants, and such concern extends to tenants who are victims of domestic violence, dating violence, sexual assault, or stalking. In accordance with the Violence Against Women Act of 1994, as amended (“VAWA”), **[CHP]** allows any tenant who is a victim of domestic violence; dating violence; sexual assault; stalking; or other dangerous, traumatic, or life-threatening conditions related to the violence against the individual or a family member in the individual’s or family’s current housing situation, including where the health and safety of children are jeopardized, to request an emergency transfer from the tenant’s current unit to another unit. VAWA protections are not limited to women. Victims cannot be discriminated against on the basis of any protected characteristic, including race, color, national origin, religion, sex, familial status, disability, or age.

This plan identifies tenants who are eligible for an emergency transfer, the documentation needed to request an emergency transfer, confidentiality protections, how an emergency transfer may occur, and guidance regarding safety and security. The plan is based on Federal regulations at 24 Code of Federal Regulations (CFR) part 5, subpart L, related program regulations, and the model emergency transfer plan published by the U.S. Department of Housing and Urban Development (HUD). HUD is the Federal agency that oversees that Continuum of Care projects, including those that are a part of the MA Balance of State, are in compliance with VAWA.

Definitions

- **External emergency transfer** refers to an emergency relocation of a tenant to another unit where the tenant would be categorized as a new applicant; that is, the tenant must undergo an application process in order to reside in the new unit. For example, a household is enrolled in a CoC-funded project and is transferred to an ESG-funded project. Because they are leaving one project and entering into another, they must go through the application and enrollment process. Even if the new ESG project they are transferring to is operated by the same agency that operates the CoC project they are transferring from, it is considered an external transfer because they are switching projects.

- **Internal emergency transfer** refers to an emergency relocation of a tenant to another unit where the tenant would not be categorized as a new applicant; that is, the tenant may reside in the new unit without having to undergo an application process. For example, a household is enrolled in a CoC-funded project and they are able to transfer to a new unit that is part of the same CoC-funded project. Since they are remaining in the same project, they do not need to complete a new enrollment or application.
- **Safe unit** refers to a unit that the victim of VAWA violence/abuse believes is safe.
- **VAWA violence/abuse** means an incident or incidents of domestic violence, dating violence, sexual assault, or stalking, as those terms are defined in 24 CFR 5.2003 and “Certification of Domestic Violence, Dating Violence, Sexual Assault, or Stalking” ([Form HUD-5382](#)).

Eligibility for Emergency Transfers

A tenant may seek an emergency transfer to another unit if they or their household member is a victim of VAWA violence/abuse, as outlined in the “Notice of Occupancy Rights Under the Violence Against Women Act,” Form HUD-5380. This emergency transfer plan provides further information on emergency transfers, and **[CHP]** must provide a copy if requested. **[CHP]** may ask for submission of a written request for an emergency transfer, such as [Form HUD-5383](#), to certify eligibility for the emergency transfer.

A Tenant is eligible for an emergency transfer if:

1. The tenant (or their household member) is a victim of VAWA-defined violence/abuse;
2. The tenant expressly requests the emergency transfer; **AND**
3. **EITHER**
 - a. The tenant reasonably believes that there is a threat of imminent harm from further violence, including trauma, if they or (their household member) stays in the same dwelling unit; **OR**
 - b. If the tenant (or their household member) is a victim of sexual assault, either the tenant reasonably believes that there is a threat of imminent harm from further violence, including trauma, if the tenant (or their household member) were to stay in the unit, or the sexual assault occurred on the premises and the tenant requested an emergency transfer within 90 days (including holidays and weekend days) of when that assault occurred.

[CHP], in response to an emergency transfer request, will not evaluate whether the tenant is in good standing as part of the assessment or provision of an emergency transfer. Whether or not a tenant is in good standing does not impact their ability to request an emergency transfer under VAWA.

Emergency Transfer Policies

Upon receiving an emergency transfer request, [CHP] will respond as quickly as possible to approve or deny the request. [CHP] will approve or deny an emergency transfer request within two business days of when a full request is received that is absent of any conflicting or missing information.

Please see below for further policy information related to internal and external policies.

Internal transfers

When a household is approved for an emergency transfer, [CHP] will first determine if it is possible to transfer the household to a safe unit that is within the same project. If there is a unit immediately available within the same project (aka an internal transfer), provider will make all efforts to move them the same day.

[CHP] will give priority to a household that has been approved for an emergency transfer above all other households waiting for a unit, including placing them above households that have been approved for non-emergency transfers.

If there is not a unit immediately available within the same project, [CHP] team will notify project staff in charge of project vacancies to make sure they are aware the next opening should be saved for this transfer. Simultaneously, [CHP] will explore external transfers as well (See section below).

In tenant based rental assistance projects, if a family household separates in the process of the emergency transfer, the leasing or rental assistance remains with the household members fleeing. The household members remaining in the original unit, being ineligible for the project, shall not be entitled to retention of the assistance.

External transfers within agency

An external transfer within agency is when an agency can transfer a household to a safe unit that is in a different project that they manage. In this scenario, even though the same agency will continue to serve the household, it is considered an external transfer because the household is transferring to a new project and the agency needs to ensure the household is eligible and collect the necessary documentation to enroll them in the project.

[CHP] will first look internally to determine if there are any openings in other projects they operate, or if there are any transfer opportunities between projects they operate to allow for a safe relocation of the household.

[CHP] will give priority to a household that has been approved for an emergency transfer above all other households waiting for a unit, including placing them above households that have been approved for non-emergency transfers.

If there is not a unit immediately available within a separate project operated by the agency, [CHP] team will notify project staff in charge of all internal projects that the next opening the household is eligible for should be saved for this transfer.

Simultaneously, [CHP] will explore external transfers outside of their agency as well (See section below).

External transfers outside agency

An external transfer outside of the agency is when a household is transferred to a different project operated by a different agency than the one operating the project from which the household is transferring.

If **[CHP]** has no safe and available units available within the same project or within another housing project they operate, **[CHP]** will do two things:

1. Secure a release from the tenant to share information with the Coordinated Entry System, work with household to complete an Emergency Transfer Form (see [Form HUD-5383](#) below), and send the release and form to the BoS team at HLC within 1 business day of form being completed. The HLC team will review the Emergency Transfer Form and approve or deny it within two business days of when a full request is received that is absent of any conflicting or missing information. If approved, the CoC will give priority to the household that has been approved for an emergency transfer above all other households in the Coordinated Entry system waiting for a unit, including placing them above households that have been approved for non-emergency transfers. Households given priority for transfers in the CE system shall have priority over all other applicants for rental assistance, transitional housing, and permanent supportive housing projects funded under this part, provided that: The individual or family meets all eligibility criteria required by Federal law or regulation or HUD NOFA; and the individual or family meets any additional criteria or preferences established in accordance with [§ 578.93\(b\)\(1\), \(4\), \(6\), or \(7\)](#). The individual or family shall not be required to meet any other eligibility criteria or preferences for the project. The individual or family shall retain their original homeless or chronically homeless status for the purposes of the transfer.

2. **[CHP ACRONYM]** will assist the tenant in identifying other covered housing providers who may have safe and available units to which the tenant could move. At the tenant's request, **[CHP ACRONYM]** will also assist the tenant in contacting local organizations offering assistance to victims of VAWA violence/abuse. If a unit the household is eligible for is available, the tenant must agree to abide by the terms and conditions that govern occupancy in the unit to which the tenant is being transferred. The housing provider may be unable to transfer a tenant to a particular unit if the tenant has not or cannot establish eligibility for that unit.

Emergency Transfer Request Documentation

To request an emergency transfer, the tenant shall notify **[INSERT SPECIFIC CHP CONTACT INFORMATION, WEBSITE, E-MAIL ADDRESS; AND/OR INSTRUCTIONS FOR REQUESTING AN EMERGENCY TRANSFER.]** in writing. They shall provide the following:

1. Request for an Emergency Transfer (completing [Form HUD-5383](#) is sufficient)

2. Documentation of domestic violence, dating violence, sexual assault, or stalking in accordance with 24 CFR 5.2007 (completing [HUD Form-5382](#) is sufficient. If [Form HUD-5383](#) has already been completed for emergency transfer request, that suffices for this requirement as well since all fields from HUD Form-5382 are included on that form).

Unless [CHP] receives documentation that contains conflicting information, as described in 24 CFR 5.2007(b)(2), [CHP] cannot require third-party documentation to determine status as a VAWA victim for emergency transfer eligibility. [CHP] will provide reasonable accommodations to this policy for individuals with disabilities.

The tenant's written request for an emergency transfer must include either:

1. A statement expressing that the tenant reasonably believes that there is a threat of imminent harm from further violence, including trauma, if the tenant (or household member) stays in the same dwelling unit; OR
2. In the case of a tenant (or household member) who is a victim of sexual assault, **either** a statement that the tenant reasonably believes there is a threat of imminent harm from further violence or trauma if the tenant (or household member stays in the same dwelling unit), **or** a statement that the sexual assault occurred on the premises and the tenant requested an emergency transfer within 90 days (including holidays and weekend days) of when the assault occurred.

[Form HUD-5383](#) may be used for making a written request for an emergency transfer.

Confidentiality

If a tenant inquires about or requests any VAWA protections or represents that they or a household member are a victim of VAWA violence/abuse entitled to VAWA protections, [CHP] must keep any information they provide concerning the VAWA violence/abuse, their request for an emergency transfer, and their or a household member's status as a victim strictly confidential. This information should be securely and separately kept from tenant files. All the information provided by or on behalf of the tenant to support an emergency transfer request, including information on the Certification Form ([Form HUD-5382](#)) and the Emergency Transfer Request Form ([Form HUD-5383](#)) (collectively referred to as "Confidential Information") may only be accessed by [CHP] employees or contractors if explicitly authorized by [CHP] for reasons that specifically call for those individuals to have access to that information under applicable Federal, State, or local law.

Confidential information must not be entered into any shared database or disclosed to any other entity or individual, except if:

- Written permission granted by the victim in a time-limited release;
- Required for use in an eviction proceeding or hearing regarding termination of assistance; or
- Otherwise required by applicable law.

In addition, HUD's VAWA regulations require emergency transfer plans to provide strict confidentiality measures to ensure that the location of the victim's dwelling unit is never disclosed to a person who committed or threatened to commit the VAWA violence/abuse. Accordingly, all documentation is secured in a place where only necessary access is authorized.

Emergency Transfer Timeline

[CHP] cannot specify how long it will take from the time a transfer request is approved until the tenant can be placed in a new, safe unit. [CHP] will, however, act as quickly as possible to assist a tenant who qualifies for an emergency transfer. If [CHP] identifies an available unit and the tenant believes that unit would not be safe, the tenant may request a transfer to a different unit. [CHP] may be unable to transfer a tenant and their household to a particular unit if the tenant and their household has not established or cannot establish eligibility for that unit.

Making the Emergency Transfer Plan Available

The Massachusetts Balance of State CoC requires that all providers share this notice at the time of intake to all participants entering their CoC-funded housing projects. At that time, the housing provider should explain to the participant how they would submit a request for an emergency transfer, explain the steps of the process, and ensure the participant has a copy of this process. Additionally, the Emergency Transfer Plan will be made available upon request, within one business day of a written request. The Balance of State CoC recommends that agencies make their Emergency Transfer Plan available on their website.

Safety and Security of Tenants

When [CHP] receives any inquiry or request regarding an emergency transfer, [CHP] will encourage the person making the inquiry or request to take all reasonable precautions to be safe, including seeking guidance and assistance from a victim service provider. However, tenants are not required to receive guidance or assistance from a victim service provider.

For additional information on VAWA and to find help in your area, visit <https://www.hud.gov/vawa>.

Other resources include:

- **Safelink** (Massachusetts' statewide 24/7 toll-free domestic violence hotline): 877-785-2020
 - If you are deaf or hard of hearing, please dial 711
- **National Domestic Violence Hotline**: 1-800-799-SAFE (7233)
- **RESPOND (Somerville)**: www.respondinc.org, (617) 623-5900
- **HAWC (Salem)**: www.hawcdv.org, (800) 547-1649
- **HarborCOV (Chelsea)**: www.harborcov.org, (617) 884-9909
- **Alternative House (Lowell)**: www.alternative-house.org, (888) 291-6228

Public reporting burden for this collection of information is estimated to range from four to eight hours per each covered housing provider's response, depending on the covered housing program. This includes the time to develop program and project-specific emergency transfer policies and develop contacts with local service providers. Comments concerning the accuracy of this burden estimate and any suggestions for reducing this burden can be sent to the Reports Management Officer, QDAM, Department of Housing and Urban Development, 451 7th Street, SW, Washington, DC 20410. This is a model plan and covered housing providers in programs covered by VAWA may, at their discretion, use it to develop their own emergency transfer plans, as required under 24 CFR 5.2005(e). While HUD does not intend to collect emergency transfer plans, HUD may access these plans to ensure compliance with the regulations. A Federal agency may not collect this information, and you are not required to complete this form, unless it displays a currently valid Office of Management and Budget control number.

APPENDIX IV: NOTICE OF OCCUPANCY RIGHTS UNDER VAWA

The Notice of Occupancy Rights Under the Violence Against Women Act (HUD-5380: Housing Rights for Victims) can be [found here on the HUD Exchange](#).

APPENDIX V: RAPID REHOUSING WRITTEN STANDARDS

For questions regarding BoS CoC RRH policies and procedures, please email the BoS CoC Team at OCD-DL-BoSCoC@mass.gov

EOHLC, the ESG recipient for the Commonwealth of Massachusetts and collaborative applicant for the Massachusetts Balance of State CoC (MA-516), has developed the following written standards, which are applicable to all Rapid Re-Housing projects that receive Continuum of Care (CoC), Emergency Solutions Grant (ESG), or Youth Homelessness Demonstration Program (YHDP) funds and operate within the MA BoS CoC.

These written standards spell out ways in which RRH functions specifically in the Balance of State CoC and within the MA ESG program. These could be ways in which the BoS CoC has decided to specify, further detail, or make narrower RRH guidance that is provided by HUD.

For RRH policies not specific to the BoS CoC, providers should defer to HUD guidance and regulation. Providers are expected to review the content of these written standards as well as the linked documentation so that they are aware of all expectations related to running a RRH project.

These RRH written standards are intended to set basic, minimum requirements. Providers are permitted to build upon these expectations and establish more specific standards applicable to their own projects as long as they comply with the BoS CoC Written Standards. Projects remain bound by the terms of the programs under which they are funded and nothing in these standards should be construed to relieve projects of this responsibility. In addition, all RRH projects must comply with the applicable Notice of Funding Availability (NOFA) under which the project was originally awarded.

Note that RRH programs are subject to differing requirements, depending upon the funding source of the program, and this document points out details of these programmatic differences.

For additional program differences between ESG, CoC, and YHDP funded RRH projects please use the following resources:

- [ESG and CoC Virtual Binders](#)
- [Rapid Re-Housing: ESG vs CoC tool provided by HUD](#)
- The [ESG](#) and [CoC](#) Interim Rules
- Along with specific ESG and/or BoS CoC RRH Policy and Procedure

PROGRAM ELIGIBILITY

Households who fit the following categories are eligible for RRH. Please refer to the HUD homeless definitions [here](#).

	Initial Evaluation			Re-Evaluation		
	ESG-RRH	CoC-RRH	YHDP-RRH	ESG-RRH	CoC-RRH	YHDP-RRH
Literally homeless (Category 1)	X	X	X			
Imminent risk of homelessness (Category 2)			X			
Homeless under other Federal statutes (Category 3)						
Fleeing/attempting to flee domestic violence (Category 4)	X*	X	X			
Income Evaluation Required				X		
Need (amount and type of assistance)	X			X		
Lacking Resources and Support Networks				X	X	X
* Eligible only if also literally homeless (Category 1)						

It is the responsibility of the provider to confirm and document eligibility for all programs prior to providing services ("Initial Evaluation" in table above). State-funded ESG projects are meant to serve individual adults experiencing homelessness. CoC projects may serve households with children as well as individuals. YHDP projects must serve youth (18-24 years of age) households. Entitlement Community funded ESG may have their own requirements.

Re-Evaluation requirements in the table speak to the annual re-evaluation HUD requires of RRH programs.

Coordinated Entry Eligibility – Because RRH projects fill vacancies with referrals through the Coordinated Entry system, households must be eligible to be added to the Coordinated Entry (CE) project in order to be considered. Please refer to the [BoS Coordinated Entry Policies and Procedures](#) to determine which households are eligible to be added to the BoS CE project.

COORDINATED ENTRY

It is required that all ESG, CoC, and YHDP-funded RRH projects within the Balance of State CoC exclusively fill their vacancies with households that are referred through the BoS Coordinated Entry system. All vacancies must be reported in VESTA by RRH providers – this is done by completing an Available Unit Form. Once reported, the appropriate Regional Navigator will begin the process of identifying an eligible household for referral.

The Regional Navigator will do a preliminary check to confirm the household is interested in moving forward with the program. They will also collect documentation that shows the household is likely eligible. Once a RRH provider receives a referral, it is ultimately the provider's responsibility to 1) make sure the household knows the details of the program and wants to enroll, and 2) confirm eligibility, including approving and retaining eligibility documentation in the household's client file.

Please refer to the [BoS CoC CE Policies and Procedures](#) for further information on:

- CE Eligibility (including Geographic Tie requirements)
- Which households will be referred for RRH assistance
- CE Referral Process

CORE COMPONENTS OF RRH

The BoS requires all RRH providers to offer all three components of RRH listed below, depending on household need. The components are:

HOUSING SEARCH

Housing placement, landlord engagement and mediation are essential parts of a successful Rapid Re-housing program. Regardless of program structure, program staff are expected to be an active partner in housing search, providing the level of support necessary to help participant households obtain housing. The process of locating housing should be supported by staff unless the program participant does not want support. Providers can determine how best to align staffing to meet local needs. Utilizing grant funds for broker fees is one way to expand services to clients without increasing staff numbers.

Program staff should discuss tenants' housing needs, location preferences, and other details upon program entry. Staff should consider tenant screening barriers, which reduce a household's ability to obtain housing because of landlord criteria and screening. Examples include poor credit, history of evictions, household size, and criminal history. Housing retention barriers, which reduce a household's ability to retain housing, must also be considered. Examples of retention barriers include paying rent in full and on time, caring for the unit, following lease terms, and interacting with the landlord. Housing placement staff can assist participants by educating them on landlord tenant law and strategizing how to be a responsible tenant in good standing with their landlord. Identifying needs and addressing potential barriers are the best way to ensure a successful housing placement.

In order to successfully place program participants in housing, programs are encouraged to do assertive landlord engagement. Where possible, a coordinated landlord engagement strategy across the CoC or community is encouraged to reduce duplication and increase the speed at which program participants can be placed in housing. However, landlord engagement does not stop at placement. Services need to be responsive not only to tenants but also to address landlord concerns if they arise. Ensuring open communication and helping to mediate is essential to maintaining landlord relationships. In situations where a program participant is facing a threat of eviction, the agency should intervene to create a landlord mediation plan/stabilization plan to prevent eviction.

Households in CoC-funded RRH that is Tenant-Based Rental Assistance (TBRA) can lease up outside of the CoC geography. For state-funded ESG RRH projects, there are no location requirements on where eligible participants may lease up/move too. Participant choice should be accounted for when determining the geographic location housing search is being conducted. Additionally, projects should always ensure they are able to provide case management to households where they lease up. Projects may limit their program to a certain

service area as long as it is communicated and approved by EOHL. Entitlement Community funded ESG may have their own location requirements that should be taken into account.

FINANCIAL ASSISTANCE

Following a progressive engagement approach, RRH providers must be open to assisting eligible households with financial assistance including upfront move in costs, rental assistance for up to 24 months, security deposits, etc. Please note that all RRH projects must be open to providing the full 24 months of assistance if that is what the household needs. Program participants must pay, at minimum, 30% of the household's monthly adjusted income towards rent. If there are extenuating circumstances that make it difficult for a household to pay 30% of their income (for example household is in a job training program and temporarily not making the income they have recently made), a project can exercise discretion and make an exception for the household to pay less. If a household needs an exception to this requirement, please notify your Contract Coordinator.

The program may utilize a progressive engagement model to gradually increase rent for the purpose of preparing the household to maintain full rent upon exit from the program. Programs may pay the full amount for upfront moving costs and moving assistance. Different costs are eligible under ESG and CoC, so it is important to ensure each program is only paying costs that are allowable.

All RRH cases (with the exceptions of 1- start-up only referrals that are part of the pilot program and 2- those with subsidies like a voucher) must be offered start-up cost assistance along with a minimum of 3 months of rental assistance to begin. Every 3 months the provider and participant should meet to determine what ongoing financial assistance is needed. Progressive Engagement should be used to determine the amount of rent each RRH program participant must pay each month while enrolled. Progressive Engagement should also be used to determine the duration of assistance. Using this approach, programs are expected to provide the least amount of financial assistance possible to achieve stable housing. As a best practice to support this structure, the CoC recommends collecting income documentation every 6 months.

RRH agencies should make participants aware at program entry that any income changes must be reported within ten business days. When an income change is reported, the agency should determine how that change affects the overall picture and if/how the household's rental assistance amount should be adjusted.

There is no limit on the number of times an eligible participant may re-enroll in RRH, however past attempts at RRH should be taken into account when determining the intensity of additional support.

STABILIZATION CASE MANAGEMENT

Supportive Services are an essential element of a successful RRH program. The goal of these services is to help households stabilize, provide tenancy supports, and connect them to services to ensure long-term housing stability. As much as possible, programs should determine how to seek and integrate feedback from program participants and others with lived experience into the program model. Specifically, programs should aim to incorporate the following service elements and best practices:

- Trauma-Informed Care
- Client-Driven and Flexible
- Evolving Focus
- [Progressive Engagement](#)

Providers should be meeting with program participants at minimum once a month for the duration of assistance. These meetings can take place in person (office and/or home visit), out in the community, or virtually through phone calls/text/email. However, a program participant cannot be evicted or terminated from a program for not meeting with their case manager.

RRH ALLOWABLE ACTIVITIES

For specific allowable activities and costs please refer to the following comparison [document](#) created by HUD along with ESG and CoC Virtual Binders. For further information, see interim rule documents linked at beginning of this document.

RRH PROGRAMMATIC GUIDELINES

INCOME

It is recommended that income be reviewed at intake to evaluate a client's resources and determine the level of assistance that will be the most helpful, but this is not required. As a best practice it is recommended that income be collected every 6 months to inform program of future service needs. For ESG projects only, income must be gathered one year from enrollment and household must be under 30% AMI to continue being enrolled.

RE-EVALUATION REQUIREMENTS

COC RAPID RE-HOUSING

Each CoC-funded RRH provider of assistance must conduct an ongoing assessment of the supportive services needed by the participants enrolled in the project, the availability of such services, and the coordination of services needed to ensure long-term housing stability and must adjust, as appropriate. This assessment is recommended to be completed regularly, but at a minimum, must be done annually.

ESG RAPID RE-HOUSING

Each ESG-funded provider must re-evaluate the program participant's eligibility and the types and amounts of assistance the program participant needs not less than once annually for program participants receiving Rapid Re-housing assistance.

At a minimum, each reevaluation of eligibility must establish that the program participant does not have an annual income that exceeds 30% of median family income for the area, as determined by HUD, and that the program participant lacks the resources and support networks necessary to retain housing without ESG assistance.

When determining the annual income of an individual or family, the provider must use the standard for calculating annual income under 24 CFR 5.609. The recommended income calculator can be found [here](#).

RRH RENTAL ASSISTANCE GUIDELINES

	ESG-RRH Rental Assistance (24 CFR part 576.104)	CoC-RRH/ YHDP RRH Rental Assistance (24 CFR part 578.37(a)(1)(ii))
Housing Standards (Inspection)*	Units must pass HUD Habitability Standards	Units must meet HUD Housing Quality Standards
Fair Market Rent (FMR)	Rental assistance may cover up to the FMR for a unit	Rent reasonableness is the applicable rent standard, FMR not applicable
Rent Reasonableness	Units must comply with HUD's rent reasonableness standards	Units in a structure must comply with HUD's rent reasonableness standards

*Inspections for all HUD funded RRH projects will change to the NSPIRE in October 2025

HUD established FMR's may be found at: <https://www.huduser.gov/portal/datasets/fmr.html>

Note: Exceptions to rent reasonableness and FMR for ESG include assistance with last month's rent and/or assistance with rental arrears in absence of first month's rent and short- or medium-term rental assistance.

PARTICIPATION IN HOMELESS MANAGEMENT INFORMATION SYSTEM (HMIS)

Rapid Re-housing Programs must participate in the BoS CoC's HMIS. A Homeless Management Information System (HMIS) is a local information technology system used to collect client-level data and data on the provision of housing and services to homeless individuals and families and persons at risk of homelessness.

Costs for participating in the local HMIS are eligible grant expenditures if included in the project budget. Please refer to the sources below to make sure your project is in compliance with system security, training, data quality and any other required elements for participating in HMIS:

- [HMIS section of the Written Standards and Policies Procedures for ESG and CoC Funded Programs](#)
- [Balance of State CoC's Privacy Plan, Data Quality Management Plan, CoC HMIS Security Plan, and HMIS Governance Charter \(Zendesk link embedded\)](#)

RRH AS A BRIDGE TO PSH

The BoS CoC recognizes not all households placed into Rapid Re-housing will achieve housing self-sufficiency by the end of the program timeframe. As such, the CoC has created a process for when and how households currently in RRH programs filled through the BoS Coordinated Entry system can be considered for openings in Permanent Supportive Housing (PSH) programs filled through the BoS CE system. Please refer to the [Coordinated Entry Policies and Procedures](#) for details.

ENROLLING A PARTICIPANT

RRH projects must enroll households in their HMIS project once the household is able to access services through the project (which includes housing search). Projects must not wait until a household is housed to enroll them. “Per Section 3.10 Project Start Date” of the HUD HMIS Data Standards Manual:

“To be admitted indicates the following factors have been met:

1. Information provided by the client or from the referral indicates they meet the criteria for admission;
2. The client has indicated they want to be housed in this project; and
3. The client is able to access services and housing through the project. The expectation is the project has a housing opening (on-site, site-based, or scattered-site subsidy) or expects to have one in a reasonably short amount of time.”

ADDENDUM 1: START UP COST ONLY CASES

The Balance of State CoC is implementing a pilot initiative where CoC and ESG RRH projects are allowed to provide start-up cost assistance alone, if that is all that the household needs and already has a unit identified. These households are only eligible for upfront move-in costs and one month of light-touch case management. They are not eligible for any ongoing rental assistance. All of these households must be exited from the RRH project one month after move-in date.

Eligible startup costs are first month's rent, last month's rent, security deposit, moving costs, and broker's fee. Case managers should look to RAFT and other larger start-up cost assistance projects first to see if they are an option. Because there are EOHHS funds available for youth start-up costs, youth-specific RRH projects will not be a part of this pilot.

CE Policies and Procedures outline the process for how households are selected and prioritized for start-up cost only assistance.

This pilot initiative will run through August 31, 2025, at which point it will be assessed and decided if it should continue on a permanent basis.

RRH START-UP COST ONLY PILOT

The BoS CoC is currently implementing a pilot initiative in which CoC and ESG RRH projects are allowed to provide start-up cost assistance alone, if that is all that the household needs and they already have a unit identified. Please see the BoS CoC's Rapid Re-housing Written Standards for further information about this pilot. Prioritization for start-up cost only households

When a Regional Navigator is identifying a referral for a RRH vacancy, Regional Navigators will follow these steps:

1. Determine if there are any households in CE who checked the box on the Quick Screen indicating they only need start-up cost assistance and have a unit secured. These households will be given priority.
 - a. The Regional Navigator will screen these households first. They will first clarify with the housing provider if the rent amount for the identified unit, provided in Quick Screen, meets any rent limit restrictions. If rent amount is okay, the Regional Navigator will follow referral steps outlined in the [Referral section](#). Upon contacting households, the Regional Navigator will confirm that the household is still only in need of start-up cost assistance and still has a unit secured.
 - i. If yes, the Regional Navigator will inform the household and/or their case manager about what the household is eligible for given that they are being prioritized as a household only in need of start-up costs. The Regional Navigator should refer to the RRH Written Standards to make sure all pertinent information is communicated.
 - ii. If household does not have a unit secured or needs more than just start-up costs Regional Navigator will inform the household that their Quick Screen is being edited to uncheck that box, and instruct them to contact their case manager or Regional Navigator if they secure another unit in the future and only need start-up costs at that time.
2. When/if there are no households in VESTA that are only in need of start-up costs, the Regional Navigator will fill the vacancy per the referral steps outlined in the [Regional Navigator referral steps section](#). Households screened at this stage are eligible for full participation in the RRH project.

DISABLING CONDITION DOCUMENTATION

The resource below from HUD outlines the definition of disabling condition for the CoC Program. Please consult this document, particularly the Documentation Requirements section, when confirming if documentation meets HUD requirements.

APPENDIX VI: BOS CoC REALLOCATION POLICY

For questions regarding BoS CoC CE policies and procedures, please email the BoS CoC Team at OCD-DL-BoSCoC@mass.gov

BACKGROUND

The Massachusetts Balance of State Continuum of Care, MA-516, (BoS CoC), is committed to maximizing the resources available to serve those who are homeless to ensure it is rare, brief, and non-reoccurring. One of the mechanisms for achieving that is through the reallocation process.

Reallocation is a strategy encouraged by HUD to allow a CoC to shift funds in whole or in part from existing CoC-funded projects that are eligible for renewal, to create one or more new projects. Project reallocation may be voluntary, involuntary, or part of a process to transition the existing grant to a more appropriate model.

This policy outlines the approach the BoS CoC will use in implementing reallocation. It will be updated annually to be reflective of guidance in the most recent HUD Notice of Funding Opportunity (NOFO).

DEFINITION PER FY23 NOFO

Reallocation is a process CoCs use to shift funds in whole or in part from existing eligible renewal projects to create one or more new projects without decreasing the CoC's Annual Renewal Demand (ARD). New projects created through reallocation must meet the requirements in section I.B.3.a, III.B.4.b.(3) and the project eligibility and project quality thresholds established in sections III.C.5.b. and c. of [the FY23] NOFO.

CoCs may only reallocate eligible renewal projects that HUD previously renewed during a CoC Program competition.

To create a Transition Grant through the reallocation process, the CoC must wholly eliminate one or more projects and use those funds to create the single, new transition grant [see section I.B.2.b.(30) of this NOFO]. *A Transition Grant creates a new CoC project to transition an eligible renewal project being eliminated through reallocation from one program component to another eligible new component over a 1-year period.*

PROCESS

VOLUNTARY REALLOCATION-

A subrecipient may notify the CoC at any time that it would like to reallocate all or part of the project in the next NOFA due to capacity issues, need, an inability to fully expend funds, or other reasons.

If the CoC determines there is continued need for the project, it may explore a change of subrecipient before a full reallocation. This is determined on a case-by-case basis.

INVOLUNTARY REALLOCATION-

The BoS CoC carefully reviews projects in partnership with the subrecipients before determining a partial or full involuntary reallocation is necessary to better serve the needs of those within the BoS geography. Decisions to reallocate funds are evidence-based and are preceded by efforts that may include modifying the project through budget line-item changes, implementing corrective action plans, or reviewing creative solutions with the contract coordinator, monitor, and in some cases, the BoS CoC desk officer.

Involuntary reallocation may occur due to:

- Chronic Underperformance
- Chronic Underspending
- Regulatory non-compliance
- A determination that the project no longer meets the needs of the homeless population served within the BoS CoC geographic area

CHRONIC UNDERPERFORMANCE

The CoC Monitoring Lead works with the CE and HMIS Leads to review vacancy ratios in CoC projects on a quarterly basis.

If a leasing project has a vacancy rate of 20% or more, the Monitoring and CE Leads will meet with the project to identify any barriers to 100% utilization, and work to identify solutions.

If a rental assistance project has a vacancy rate of 20% or more, the Monitoring and CE Leads will meet with the project to identify any barriers to 100% utilization, and work to identify solutions.

If the project needs a budget line-item modification, or there are issues with the project design, the Contract Coordinator and BoS CoC Lead will be included in discussions to create strategies.

If vacancy rates haven't improved when the annual monitoring is undertaken, it may result in a concern or finding, and the Monitoring Lead will develop a corrective action plan for the subrecipient and work with them over the next year to ensure implementation.

If a project continues to underperform over a 3-year period, it will be subject to partial or full reallocation.

CHRONIC UNDERSPENDING

EOHLC staff who manage and monitor CoC contracts and projects review funding expenditures on a regular basis to minimize the need to revert funding to HUD. Any funding reverted specifically under a leasing or rental assistance line is returned to the US Treasury and is completely lost as a resource to serve the most vulnerable households in the CoC.

If a project is identified as a slow spender, (one that is not within 10% of the contract spending projection during a quarterly review), the Contract Coordinator and CoC Monitoring Lead will meet with the project to review any challenges the project may be facing. During this

meeting, possible solutions will be reviewed, and the project will have an opportunity to put a strategy in place to increase spending.

If spending hasn't improved when the annual monitoring is undertaken, it may result in a concern or finding, and the Monitoring Lead will develop a corrective action plan for the subrecipient and work with them over the next year to ensure implementation.

If a leasing project continues to underspend at a rate of 20% or more over three years, it will be subject to partial or full reallocation.

If a rental assistance project continues to underspend at a rate equal to 1.5 times the FMR of the smallest unit the project funds or more over three years, it will be subject to partial or full reallocation.

REGULATORY NON-COMPLIANCE

Every CoC project is subject to regular monitoring. Should a project be determined during this review to be using funding in a manner that is not in compliance with HUD regulations governing the Continuum of Care, the CoC Monitoring Lead will work with the project to come into compliance. If it is unable to do so, or if it is determined that there have been actions that were the result of malfeasance or mismanagement, the project may be subject to reallocation.

PROJECT NO LONGER NEEDED

The CoC conducts an annual gaps analysis as well as ongoing needs assessments. If this process identifies areas of need inadequately served in the CoC, and data and project underspending or underutilization demonstrate project funding could more effectively be used to serve the unmet need, a reallocation may occur. All grants are subject to reallocation should the analysis and assessment indicate that they are no longer required.

Should a project be identified in this process, the Project Evaluation Committee, after review of the gaps analysis and other relevant documentation, may determine that a grant should be reallocated, either partially or in full, even when the subrecipient disagrees. After communication with the subrecipient and upon recommendation of reallocation from the Project Evaluation Committee, the Advisory Board will vote whether to reallocate the project. They will base their decisions on the recommendation of the Project Evaluation Committee and any additional materials the project subrecipient wishes to present. The subrecipient, if they choose, will be able to address the Advisory Board, in advance of a vote.

APPENDIX VII: BOS CoC FEDERAL GRANT PROJECT RANKING AND REVIEW POLICY

PURPOSE

All HUD-Funded CoC Projects are reviewed, scored, and ranked to ensure the MA BoS Continuum of Care is strategically allocating the HUD-funded grant across high-performing projects to meet the critical needs and highest priorities of the CoC, in alignment with Federal funding objectives for ending homelessness.

The MA BoS CoC Ranking and Review Policy for the Continuum of Care (CoC) Competition establishes a transparent and unbiased framework for the decision-making process guiding the bi-annual CoC collaborative grant application. This document will be used to assist in the Ranking and Review of projects and is largely based on the Department of Housing and Urban Development's (HUD) Homeless Policy and Program Priorities as outlined in the Notice of Funding Opportunity (NOFO) for the Continuum of Care Program Competition. The goal is to ensure that there are written procedures in place that provide regulations for a comprehensive Ranking and Review of all projects.

KEY TERMS

RANKING

The process of prioritizing projects for funding in rank order. The rating scores are generally an important input into the ranking process (e.g., projects might be ranked according to their score), but the CoC might want to add other factors to inform ranking. For instance, ranking might be prioritized based on project type, population groups served, relative levels of unmet need, or other local funding priorities.

REVIEW

The process of scoring projects based on standardized criteria. Projects are generally scored relative to other projects of the same type.

CONTINUUM OF CARE (CoC)

The CoC Program is designed to assist individuals (including unaccompanied youth) and families experiencing homelessness and provide the services needed to help such individuals move into transitional and permanent housing, with the goal of long-term stability. More broadly, the CoC Program is designed to promote community-wide planning and strategic use of resources to address homelessness; improve coordination and integration with mainstream resources and other programs targeted to people experiencing homelessness; improve data collection and performance measurement; and allow each community to tailor its programs to the strengths and challenges in assisting homeless individuals and families within that community.

CONTINUUM OF CARE PROGRAM COMPETITION

The Continuum of Care (CoC) Program Competition occurs annually. Each Fiscal Year (FY) Competition process begins with Registration of CoCs by CoC designated Collaborative Applicants, followed by the CoC's review of Grant Inventory Worksheets (GIW) and the release of the CoC Program NOFO. Documents related to each process are listed below

and additional Competition related materials are posted once the process opens and as documents become available. The FY Competition ends when the final funding announcement is released by HUD.

NOFO

Each year the U.S. Department of Housing and Urban Development (HUD) issues a Notice of Funding Opportunity (NOFO) for federal funding under the Continuum of Care program. As the CoC Collaborative applicant, EOHLC is responsible for the design, operation, and execution of a local collaborative application process.

COLLABORATIVE APPLICANT

EOHLC is the Collaborative Applicant of the CoC and is responsible for submitting the CoCs application for funding to The Department of Housing and Urban Development (HUD). EOHLC leads the planning and coordination efforts to develop the CoCs application and ensures that it meets HUD's requirements. EOHLC serves as the primary point of contact with HUD and is responsible for managing the CoCs grant funds.

Primary responsibilities of EOHLC include:

- Applying for CoC and/or UFA (Unified Funding Agency) Planning funds,
- Coordinating and submitting the annual application to HUD for CoC program funding, and
- Coordinating and administering the activities and responsibilities of the CoC as specified in the Governance Charter.

THE PROJECT EVALUATION COMMITTEE RESPONSIBILITIES

This Committee oversees the development and maintenance of performance evaluation/Ranking and Review tools to ensure that projects are being measured for regulatory compliance and for outcomes that reflect the priorities of HUD and the Continuum. The committee meets to review and revise the tools annually. The Committee is made up of subrecipients' staff members (at various management and staff levels), staff members from the EOHLC Federal Grants Unit, and HMIS staff. Care is taken to assure no project application is assigned where a member of the small group may have a conflict of interest.

The PE Committee makes recommendations regarding final project ranking for Tier 1 and Tier 2 of the NOFO submission. It will make a minimum of two recommendations – one that is solely reliant on the scores of the projects, and another based upon a review of the projects and the needs of the CoC. It may present more recommendations if it is determined there are other factors to consider.

REVIEWER/EVALUATOR RESPONSIBILITIES

The reviewers who are representatives of EOHLC, current subrecipients, and non-funded CoC members complete the Ranking and Review tool. They will provide the following support:

- Complete the Ranking and Review tool.

- Verify that all required data is entered and accurate.
- Report any issues/problems to team lead.

REVIEWER/EVALUATOR AND TEAM LEAD STRUCTURE

The MA BoS CoC currently manages an average of 45 projects annually. For the Rating and Ranking, the structure of the team evaluators will be determined by the number of volunteers and the number of projects that should be reviewed. Every effort will be made to ensure no team reviews more than 6 applications.

Team	Number of Members + Lead	Number of Projects	Program Components
			Equally Distributed (PSH, RRH, TH)

ADVISORY BOARD RESPONSIBILITIES

The Massachusetts Balance of State (BoS) Advisory Board is the decision-making body of the MA Balance of State Continuum of Care. The Advisory Board votes whether to approve the ranking as submitted by the PE committee. The Advisory Board may make adjustments to the ranking in cases where a project's score was substantially hampered by conditions that have been rectified via the monitoring process, but only in those circumstances where doing so will impact the project's tier within the application.

CRITERIA AND EVALUATION

There are 9 factors used to review and rank projects for the Continuum of Care Application:

1. Threshold Criteria
2. Performance Measures
3. Project Effectiveness
4. PLEE Involvement
5. Serving High Need and Priority Populations
6. CoC Monitoring Score

7. Bonus

8. Penalties

RELEVANT DOCUMENTS

Name	Source
APR	Kelly/Laura
VESTA report	Kelly
Application	e-snaps
CE vulnerability score	Chris
Monitoring score	Kelsey
Late application submission	Reviewer (included in workbook)
Failure to use CE	Chris
Contribution to committee	CoC Team
GIW	SharePoint
Late billing submission (Possible)	Contract Coordinators
Quarterly drawdown	Application
100% Dedicated/Dedicated Plus	Application
Units already secured in new projects or expansions	Application
Community partnerships	Application (attachments) or Survey

TIER DETERMINATION

After completing individual project rating, the PE committee must establish a CoC Priority Listing of projects to include in the annual CoC Application to HUD. It will produce a ranked list that reflects both the ranking and review tool results and funding priorities.

APPEAL

RATING SCORES

Providers may appeal Ranking and Review outcomes/scores. The PE Committee will accept any appeal submitted within 24hr after results are completed/submitted and must be related to the following only:

- Issues due to formulas errors (TOOL)

- Issues due to source documentation errors (APR, Monitoring Results Report, Application, and other relevant reports)

Such errors must be clearly identified and adequately documented.

If a provider wishes to appeal Ranking and Review scores, they must do the following:

1. submit a notification of appeal to the group lead via email.
2. Clearly describe the nature of the appeal.
3. Provide all relevant documentation to support the appeal.

The PE Committee will decline any appeal and will maintain current scores if the appeal is not properly submitted. No delays will be allowed or accommodated in this process.

The PE Committee appeal review will be as followed:

1. Review and assess the appeal.
2. Make a decision within 24hr after receipt of the appeal and notify the provider via email.
3. Make any changes to the provider score accordingly.

TIER CLASSIFICATION

Providers may appeal TIER classification. The PE Committee will accept any appeal submitted within 24 hours after results are completed/submitted and must be related to the following only:

- Dispute committee overall decision to classify project in TIER2

If a provider wishes to appeal TIER classification, they must do the following:

4. submit a notification of appeal to the committee lead via email.
5. Clearly describe the nature of the appeal.
6. Provide all relevant documentation to support the appeal (narrative, reports, etc.)

The PE Committee will decline any appeal and will maintain the current TIER class if the appeal is not properly submitted. No delays will be allowed or accommodated in this process.

The PE Committee appeal review will be as followed:

4. Review and assess the appeal.
5. Make a decision within 24hr after receipt of the appeal and notify the provider via email.
6. Make any changes to the provider classification accordingly

APPENDIX VIII: MONITORING POLICIES AND PROCEDURES

I. Introduction

This policy is a guide to EOHLC staff engaged in the management of Continuum of Care programs and other outside stakeholders. The policy relies heavily on HUD guidance [2 CFR §200 Uniform Administrative Requirements, Cost Principles, And Audit Requirements For Federal Awards - Code of Federal Regulations \(ecfr.io\)](#) and is intended to be a single source for all monitoring needs.

Federal grants are subject to federal, state, and local government administrative requirements, cost principles, and audit requirements. As the MA Balance of State CoC lead, one responsibility of the Executive Office of Housing and Livable Communities (EOHLC) is to ensure that federal grants are managed appropriately using a risk-based compliance assessment model (see title "EOHLC uses the following methods to select Subrecipient for monitoring") and by performing financial and programmatic compliance monitoring reviews. The reviews ensure Subrecipients' s compliance with HUD applicable regulations, laws, and Grant Subaward provisions.

COMPLIANCE REVIEW OBJECTIVES

The Monitor(s) review from each of the Subrecipient grant(s) activity report(s) is conducted from **JULY** to **NOVEMBER** of each year. All funding sources and cost categories included in the reimbursement and supporting documentation pertaining to the reimbursement are reviewed, including but not limited to, a review of the organization's internal controls, procurement and contracting procedures and practices, compliance with specific grant requirements and guidelines, current and past audit reports, site visit reports, and previous monitoring reports and other program data.

Monitoring Objectives: The purpose of fiscal and program monitoring is to:

- A. Verify Grant Subaward funds are being spent to further the grant objectives. Verify the Subrecipient has internal controls in place to mitigate waste, fraud, and abuse of Grant Subawards.
- B. Verify that expenditures submitted for reimbursement are fully supported by appropriate source documentation and ensure that items charged to the grant are allowable, allocable to (or benefit) the grant, reasonable and necessary in accordance with the grant intent, and appropriately documented and charged to the correct cost category.
- C. Conduct compliance test to verify program activities follow particular program regulations, laws and provisions of the Grant Subaward.

II. SCOPE OF THE MONITORING

ITEMS THAT EOHLC EXAMINE INCLUDE:

- 1) Organizational governance and operations/management
- 2) Internal and management controls
- 3) Program and fiscal Policies and procedures
- 4) Program and fiscal reports
- 5) Program and fiscal grant requirements
- 6) Client files to verify eligibility and required documentation
- 7) Program milestone/accomplishments

THERE ARE FOUR KEY COMPONENTS EOHLC MONITORING MODEL ENSURES:

- 1) Subrecipients are monitored during the term of the Grant.
- 2) Monitoring efforts focus on the areas of most significant risk.
- 3) All monitoring findings are addressed through appropriate corrective actions; and
- 4) Ongoing financial and administrative training and technical assistance is provided to Subrecipients to enable them to comply with Grant Subaward requirements and maintain their funding.

EOHLC USES THE FOLLOWING METHODS TO MONITOR SUBRECIPIENT:

- **Site Visits**
Monitor(s) conduct an extensive examination of the relevant program and financial documentation surrounding a grant program. These are site visits to review a Subrecipient's overall implementation of the program, adherence to program guidelines, and achievement of Grant Subaward goals and objectives and to identify issues and provide technical assistance as needed.
- **Desk Reviews**
Monitor(s) conduct a focused and selective examination of the relevant program and financial documentation surrounding a grant program. They are conducted virtually and intended to facilitate and produce an evaluation of the recipient's management of their award to identify issues and provide technical assistance as needed.

EOHLC USES THE FOLLOWING METHODS TO SELECT SUBRECIPIENT FOR MONITORING:

- 1) Emergency monitoring due to a major incident and/or a claim of Fraud, Waste, and Abuse.
- 2) Subrecipient granted new contract.
- 3) Subrecipient not monitored in prior 12 months
- 4) Continuous issues with other EOHLC interactions (i.e. contracts/billing, HMIS, CE, etc.)
- 5) Contract/grant ending and not renewed; and
- 6) Subrecipient failed to remedy prior monitoring and/or audit findings.

To determine the focus and method of review, EOHLC conducts a risk analysis taking into consideration vacancy reports, APRs, project complaints, previous findings, and focus/ level of previous monitoring with the intention of completing a desk review annually and a site visit at least once every three years.

EOHLC USES THE FOLLOWING GRADING TO DETERMINE NONCOMPLIANCE:

- **Finding:**
A Finding is a deficiency in program performance based on a statutory, regulatory, or program requirement for which sanctions or other corrective actions are authorized.
- **Concern:**
A Concern is a deficiency in program performance not based on a statutory, regulatory or other program requirement. Grantee issues a Concern about program design or operations, when upon review, the practice could, if not corrected, result in noncompliance with a statutory, regulatory, or program requirement (Finding)
- **Observation:**

An Observation is not a deficiency in program performance and is not based on a statutory, regulatory or other program requirement but merely a notification in management practices to raise awareness.

STANDARDS:

EOHLC and its authorized representatives must have the right of access to any documents, papers, or other records of the Subrecipient which are pertinent to the Federal award, in order to make audits, examinations, excerpts, and transcripts. The right also includes timely and reasonable access to the Subrecipient's personnel for the purpose of interview and discussion related to such documents.

EOHLC REFERENCES:

- o Code of Federal Regulations (CFR) [2 CFR §200 Uniform Administrative Requirements, Cost Principles, And Audit Requirements for Federal Awards - Code of Federal Regulations \(ecfr.io\)](#)
- o CPD Monitoring Handbook (6509.2) [CPD Monitoring Handbook \(6509.2\) | HUD.gov / U.S. Department of Housing and Urban Development \(HUD\)](#)
- o Generally Accepted Accounting Principles (GAAP)
- o MA BoS CoC Governance Charter
- o MA Written Standards and Policies and Procedures for ESG and CoC Funded Programs
- o EOHLC Contract with Subrecipient

III. MONITORING REVIEW PROCESS

ADMINISTRATIVE PREPARATION

- 1) Monitor(s) in collaboration with Manager assess and conduct pre-selection of contracts and programs to be monitored.
- 2) Monitor(s) to prepare monitoring plan and set monitoring dates
- 3) **Setting up and gathering documents**
 - I. Monitor(s) will send an email to verify Subrecipients point of contact for the upcoming monitoring and subsequent to the contact initiation and confirmation, set up a meeting to discuss visit date and scope.
 - II. Monitor(s) should review the Subrecipient's contract with EOHLC for all applicable responsibilities of the Subrecipient. (i.e.: fiscal budget, program scope of work, programs requirements, etc.).
 - III. Monitor(s) verify with other EOHLC partners (contracts/billing, HMIS, CE, program managers, etc.) for any current issues of noncompliance.
 - IV. Monitor(s) should review most recent monitoring by EOHLC.
 - V. Monitor(s) should review billings.
 - VI. Monitor(s) should review APR/HMIS reports.
 - VII. Monitor(s) should review applicable federal and state program guidelines and federal OMB regulations 2 CFR 200 to become familiar with the allowable program costs.
 - VIII. Monitor(s) should prepare as much of the monitoring tool as possible.
 - IX. Monitor(s) should set up Subrecipient monitoring folders and save all relevant documents (i.e. contract, HMIS reports, Tool, billing, etc.)

PRE-MONITORING REQUIREMENTS

4) Intent to Monitor Letter

The monitoring review begins with the issuance of an Intent to Monitor letter. The purpose of this letter is to notify the head of the organization or Subrecipient in writing that a monitoring review will be conducted. The letter identifies the date of fieldwork, grant(s) selected for review, and scope of the review. The Intent of Monitor Letter is sent to the Subrecipient at least **40 days** prior to the scheduled site visit.

Request for Documentation: A request for documentation will accompany the Intent to Monitor letter. The purpose of the request for documentation is to request the Subrecipient submit the following documents **20 days** prior to the scheduled site visit for review and filing.

- Audited Financial Statements: Audits completed by independent auditing firm for period under review, or most current to include Single Audit Report (if applicable)
- IRS Form 990: Form 990 filed with IRS for the most recent year filed.
- Cost Allocation Plan: Current plan detailing policy regarding allocation of shared cost
- General Ledger - program specific: Detailed report for EOHLC funded program(s) for the period under review
- Chart of Accounts: Detailed chart of accounts to include department, cost center and other identifiable accounts (P&L).
- Bank reconciliation: At minimum, most recent bank statement and reconciliation.
- Equipment: List of equipment (non-expendable property having a useful life of more than one year and an acquisition cost of \$5,000 or more per unit) purchased using the grant funds for the period under review.
- Procurement: List of vendors contracted at an amount over \$10,000 using the grant funds for the period under review (Include amount expended)
- Match: Match income and expenses (detailed report to identify match activities)
- Program Income: Detailed report to identify program income activities.
- Employee Handbook: Documentation of employer compliance requirements
- Organizational chart: Identify executive, management, supervisor, and clerical relationships of organization, including fiscal and program being reviewed.
- List of Current Board of Directors: Identify Board of Directors including disclosure of related party affiliations, if applicable
- Policies and Procedures: Documentation of fiscal/accounting policies & procedures.
- Policies and Procedures: Documentation of program management and required policies & procedures (include but not limited to)
 - Coordinated Entry System
 - Homeless Determination
 - Grievance procedures
 - Intake
 - Referrals
 - Case management
 - Meals (supportive housing for homeless persons with disabilities only)
 - Housing First and/or Low Barriers
 - Conflict of interest
 - HMIS
 - Program Income
- List of employees allocated to program: List of employees paid by the grant funds. (With title, hire date, and salary at time of contract, current salary, and termination date if applicable.)
- List of all subrecipient's funding sources: For all funds received by subrecipient.
- List of all sites: List of all sites in operation for this program/funding - Note: Do not list DV or other restricted sites.

- HMIS or Comparable: listing from the Homeless Management Information System (HMIS) of project program participants (current and former), including their entry dates. Note: Do not include PII, show ID # only
- Annual Performance Report (APR): Annual performance report for the period under review
- Monthly Expenses Reports (MER): Monthly expense report for the period under review

5) Sample Selection

The monthly requisition/billing & Monthly Expenses Reports (MER), program client list, and list of all sites should be made available and submitted to EOHLC **20 days** prior to the scheduled site visit. Once received, the Monitor(s) do the following:

- Review documents to validate dates and program information to be correct.
- Conduct sample selection using the following documents:
 - i. Requisition/Billing & Monthly Expenses Reports Monthly (MER)
 - Selection of samples should be taken from payroll and non-payroll transactions paying close attention to possible unallowable or inappropriate costs.
 - Selection should be made to all budget line items and focus on large \$ amount transactions and non-recurring transactions.
 - Monitor(s) discretion can be used when selecting number transactions.
 - ii. Client List
 - Make a selection to target and prioritize new clients, exited clients, and long-standing clients.
 - Monitor(s) discretion can be used when selecting number transactions.
 - iii. Site list
 - Make selection to target locations close to the Subrecipient's office.

Monitor(s) to submit fiscal, client and site list sample selection to Subrecipient **15 days** from visit date and request the supporting documentation submitted to EOHLC **10 days** prior visit (except for Client files and Sites to be conducted onsite) – [SEE EXHIBIT A](#)

NOTE: Monitor(s) must attach the “EOHLC DOCUMENTATION STANDARDS (DS)” with the sample selection list.

MONITORING TESTING

The objective of a compliance review is to ensure the Subrecipient complies with the Code of Federal Regulations, applicable state laws, and other governing regulations, internal policies, and general best business practices. The Monitor(s) should conduct the test prior to the visit. The fiscal monitoring test consists of:

6) PROVISION

Monitor(s) will use a combination of Subrecipient documents (Employee Handbook) and interviews to complete this test.

7) GENERAL FINANCIAL REVIEW

A general financial review is conducted to assess program performance and Federal/State government standing. The Monitor(s) will access multiple resources for testing the following:

- Population Served Count Review (APR)
- Units Used Count Review (APR).
- Use of Budget Review (APR).
- Prior Monitoring/Audit Results (MRS).
- Most Recent Annual (Single) Audited Financial Statement (SINGLE AUDIT).
- Most Recent Project Ranking Score (RANKING AND REVIEW).
- Federal and State Verification (FED AND STATE SITES).
 - Verification of 501 (c)(3) determination status
 - Check IRS revocation list.
 - Verification of SAM records
 - Verify Active Business Entity with MA Secretary of State

8) FISCAL

- Review of the subrecipient's financial systems and internal controls to ensure compliance with GAAP, the Contract and applicable State and Federal regulations.
- Review of program expenditures to verify that all costs charged or allocated to EOHLC funded programs and activities are reasonable and allowable under the contract and applicable Federal and State regulations.
- Verification that expenditures claimed on invoices/requisition to EOHLC are supported by appropriate source documentation and that classifications are appropriate.

A. PAYROLL

The payroll testing includes a verification of the following:

- Pay supported by timesheet.
- Timesheets were properly signed and approved.
- Hours worked per timesheet are correctly allocated to the program.
- Total allocation of employee time does not exceed 100%.
- Pay supported by payroll register.
- Pay supported by paystub.
- Paystub in agreement with timesheet and payroll register
- Employee payroll allocated to EOHLC program agrees with costs charged to EOHLC.
- Costs are accurately recorded in the general ledger.

B. NON-PAYROLL

The non-payroll testing includes a verification of the following:

- The transaction was properly supported by adequate documentation.
- The amount requested for reimbursement agrees to the amount supported by the vendor invoice.
- The expenditure was incurred during the period covered by the contract.
- The vendor invoice contained proper approvals.
- Cost was allowable in accordance with the Contract, Circulars and program regulations.
- Costs are accurately recorded in the general ledger.
- If allocated to multiple programs and/or funding sources, allocated costs basis appears reasonable.
- Invoice paid. The amount of the invoice and vendor name agree with payment.
- Payment approved and signed by authorized signor.

9) CASH

The cash testing includes a verification of the following:

- Program Income properly received, recorded, and disposed.

10) EQUIPMENT

Equipment refers to tangible, non-expendable property having a useful life of more than one year and an acquisition cost of \$5,000 or more per unit. The equipment testing includes a verification of the following:

- Subrecipient maintain property records.
- Equipment properly recorded in the general ledger.
- Subrecipient properly dispose of equipment (is applicable).

11) PROCUREMENT

The equipment testing includes a verification of the following:

- Subrecipient has its own documented procurement procedures, which reflect Federal and State regulations (as applicable).
- Subrecipient document that it obtained price or rate quotations from an adequate number of qualified sources and the purchase did not exceed the Simplified Acquisition Threshold.
- Subrecipient take all necessary affirmative steps to assure that minority businesses, women's business enterprises, and labor surplus area firms are used when possible.

12) SUBCONTRACTOR

This refers to the testing of contracts to ensure they contain all the required provisions.

- Subrecipient Contracts are prepared and signed; and
- Contain all the required provisions.
 - 1) Designation of the parties to the contract
 - 2) Terms of the contract/agreement
 - Maximum payment amount
 - Type of work or services to be provided.
 - Payment schedule
 - Penalty clause
 - Termination clause and basis for settlement
 - Monitoring requirements

13) MATCH

The match testing includes a verification of the following:

- Subrecipient meets match expenditure requirement.
- Subrecipient meets match revenue requirement.
- Amounts reported on APR reconcile to general ledger monitored.
- Subrecipient have a match letter.

14) PARTICIPANT

The participant testing includes a verification of the following:

- Program eligibility.
- Required forms - [SEE EXHIBIT B](#)

15) HOUSING QUALITY STANDARD (HQS)

The housing quality standard testing includes a verification in accordance with 24 CFR 981.401 checklist ([CoC Leasing and Rental Assistance Requirements - Codes and Standards - HUD Exchange](#))

ON SITE/DESK REVIEW PROCESS

- Entrance Conference (Meeting): An entrance conference is scheduled with the Subrecipient's executive management and key personnel to discuss the purpose, objectives, and scope of the compliance review, as well as expected start and completion dates of the fieldwork. The Monitor(s) will explain the monitoring review process.
- Fieldwork: During the fieldwork, Monitor(s) will prepare fiscal test preliminary reports of evaluated evidence, documents gathered, and analyzed. Furthermore, the Monitor(s) complete the client file review, and the housing/site inspections.
- Exit Conference (Meeting): An exit conference is held on the last day of the fieldwork to discuss the results of the compliance review and any findings/concerns that were identified. The Subrecipient's executive management and key personnel are encouraged to participate in the exit conference on behalf of the Subrecipient. The exit conference provides an opportunity to resolve any questions the Subrecipient may have about the issues raised, address any outstanding issues, and set dates for resolution and follow-ups.

WORKING PAPERS

Working papers provide evidence that an effective, efficient, and accurate review has been carried out. They should be completed in a manner so that a monitor with no previous experience of the review can understand the work completed and how the conclusion was reached.

- Quality Review: The Monitor(s) is required to prepare and complete all working papers to adequately conduct quality review of all monitoring documents to include but not limited to [\(SEE LINKS BELOW\)](#):
 - The Monitoring Schedules-Workflow (MSW)
 - The Monitoring Tool (MT)
 - The Monitoring Results Summary (MRS)
 - The Monitoring Result Letter (MRL)

The Supervisor will review the working papers **5 days** of the last day of fieldwork to include the Tool, Monitoring Summary Report (MSR) and Monitoring Result Letter (MRL) to ensure that they are complete, and the conclusions reached are consistent with the results of the tests. Some of the results may include but not limited to:

- Questioned Costs: A questioned cost can result from a violation, or possible violation, of a statute, regulation, or the terms and conditions of a federal Grant Subaward. In addition, it could be a cost not supported by adequate documents or appears unreasonable and does not reflect the actions a prudent Subrecipient would take in the circumstances.
 - Disallowed Costs: A disallowed cost is a charge that the Monitor(s) determines to be unallowable according to the Code of Federal Regulations.
 - Categories of findings - [SEE EXHIBIT C](#)
- Report Timeliness: The monitor(s) will issue the Monitoring Summary Report (MSR) within **10 days** of the last day of fieldwork. The Monitor(s) is responsible for completing the reports and submit

to the Supervisor for review along with the working papers. The report is reviewed to ensure all findings are substantiated with the appropriate supporting documentation and criteria.

CLOSING THE MONITORING REVIEW

NO FINDINGS:

The monitor(s) will issue the Monitoring Summary Report (MSR) and Monitoring Result Letter (MRL) to Subrecipient within **10 days** of the last day of fieldwork.

WITH FINDINGS:

Once approved by the Supervisor, the reports are released to the Subrecipient. The Subrecipient will have **30 days** to respond to and resolve findings, concerns, and observations (if applicable). The MSR remains open until the Subrecipient submits their Corrective Action Plan (CAP). Extensions to the CAP timeline may be granted in extenuating circumstances if a written request for extension is submitted by the subrecipient and accepted by EOHLIC. Monitor(s) will close the review at the expiration of the due date and issue a final MSR report and MRL to the Subrecipient **10 days** after due date.

NON-COMPLIANT AND HIGH-RISK RECIPIENTS

Subrecipients unable to resolve findings within the agreed timeframe, will be considered non-compliant until the findings are closed and performance issues resolved. Open findings will factor into the monitoring risk analysis, and will lead to more frequent monitorings, higher levels of reviews, and more site visits with technical assistance. Non-compliant subrecipients may face penalties including full or partial reallocation of project funding as described in the reallocation plan.

High-risk subrecipients are those which have a history of numerous findings or concerns or a pattern of similar concerns over several monitoring periods. High-risk subrecipients will receive higher levels of review and more frequent site visits until on-going issues are resolved. A sub-recipient may also be designated high-risk for a pattern under performance in program spending and program outcomes.

MONITORING REVIEW TIMELINE

Note: this timeline is for monitoring one (1) project from start to finish.

DESCRIPTION	MONTH	# DAYS	WHEN	ESTIMATE DATE
ADMINISTRATIVE PREPARATION				
Monitor(s) in collaboration with Manager assess and conduct pre-selection of contracts and programs to be monitored.	May	10	Before July 1	May 1-10
Monitor(s) to prepare monitoring plan and set monitoring dates	May	15	Before July 1	May 10-25

Setting up and gathering documents	June	20	Before July 1	June 1-20
			TOTAL DAYS	45
PRE-MONITORING				
Intent to Monitor Letter	As Sched*	40	Prior to the scheduled site visit	VD**(-40)
Documentation request due to EOHLC	As Sched	20	Prior to the scheduled site visit	VD (-20)
Monitor(s) submit fiscal, client and site list sample selection to Subrecipient	As Sched	15	Prior to the scheduled site visit	VD (-15)
Sample documentation request due to EOHLC	As Sched	10	Prior to the scheduled site visit	VD (-10)
			TOTAL DAYS	40
MONITORING/FIELDWORK				
Monitor(s) review save sample documentation and complete the tool	As Sched	7	Prior to the scheduled site visit	VD (-7)
Onsite	As Sched	1	Day of review/fieldwork	VD
			TOTAL DAYS	8
POST-MONITORING				
Preliminary reports (working papers) complete	As Sched	2	After day of review/fieldwork	VD (+2)
Supervisor reviews the working papers	As Sched	5	After day of review/fieldwork	VD (+5)
(if no issues) Monitor(s) issue the final MSR report and Monitoring Result Letter (MRL) <u>OR</u> (if issues) preliminary Monitoring Summary Report (MSR) to Subrecipient	As Sched	10	After day of review/fieldwork	VD (+10)
Subrecipient to resolve all findings, concerns, and observations (if applicable)	As Sched	30	After day of MSR issuance	MSR*** (+30)
Monitor(s) issue final MSR report and Monitoring Result Letter (MRL) to the Subrecipient	As Sched	10	After day of MSR 30 days	MSR (+40)
			TOTAL DAYS	42
			SUBTOTAL DAYS	135
			# MONTHS (about)	4
<p>*As Sched = As Scheduled **VD = Visit Date ***MSR = Monitoring Summary Report</p>				

REFERENCES

EXHIBIT A: SUPPORTING DOCUMENTATION.

PAYROLL	NON-PAYROLL	Clients	Sites
Payroll Registers	Vendor Invoices, Receipts, Master Leases/Rental Agreement, Subleases and/or Client Occupancy Agreement	Provide to EOHLC on-site (see exhibit A)	EOHLC conducts inspections on-site
Time Records/Timesheets	Cancelled checks, CC charges, ACH		
Paystub	Cost Allocation Plan/Methodology		
Cost Allocation Plan/Methodology			

EXHIBIT B: CLIENT FILE DOCUMENTS REQUESTED.

Participant File:	Below are the documents that will be reviewed when onsite
	Documentation showing chronic homelessness prior to admission in the program. (Homeless Status and Eligibility Determination)
	A Service Plan for each household and/or household member
	The household's signed statement acknowledging they have received, understand, and will comply with program rules
	Inspections, permits & occupancy Standards (habitability standards) - Units must be inspected, at minimum, monthly by program staff.
	Notices of rules violations
	Signed release(s) of information for outside providers.
	A log of all contact with the household. This log shall detail progress toward meeting goals and objectives outlined in Service Plan.
	A copy of the signed Occupancy Agreement
	A copy of the signed Lease Agreement
	A signed copy of a HUD compliant Rent Calculation Form.
	A signed copy of the household's right to appeal and written process of same
	An HMIS privacy and/or release of information notice
	Annual Assessment
	Exit assessments (if applicable)
	Client referrals for the projects from either the BoS Coordinated Entry System of the Coordinated Entry System administered by the continuum in which the project actually exists.

EXHIBIT C: CATEGORIES OF FINDINGS.

Category Title	Category-Internal Control Findings	Regulation Source
Internal controls	Failure to follow internal controls/Inadequate Internal controls	
	Inadequate written policies and procedures	
	Lack of signature/approval on bank reconciliation	

	Lack of signature/approval on time record(s)	
	Lack of signature/approval on invoice(s)	
	Inadequate record retention	
	Lack of Grants/Program Management Policy and procedures	
	Failure to follow or inadequate procurement policy	
Personnel costs	Lack of or insufficient documentation of personnel costs allocated to program	
	Lack of or insufficient documentation of personnel costs allocated to program - No allocation on time records	
	Overbilling of personnel costs allocated to program	
Non personnel costs	Lack of or insufficient documentation of non-personnel costs	
	Unallowable non personnel costs billed	
	Overbilling of non-personnel cost	
	Costs allocated to program incurred outside the contract period	
	Lack of or insufficient procurement bid documentation	
	Estimated not actual costs billed	
Cost Allocation Plan (CAP)	Lack of or insufficient documentation of cost allocation methodology	
Match	Insufficient required match	
	Lack of or inadequate match documentation	
	Inadequate match tracking	
Compliance	Not in compliance with required contractual provisions	
Financial Management	Lack of financial statements and nonperformance of annual independent financial statement audit – Single Audit	
	Under utilization of program funding	
	Lack of or inadequate Subcontractor monitoring	
	Financial system not in compliance	

APPENDIX IX: INFECTIOUS DISEASE OUTBREAK RESPONSE POLICY

PURPOSE:

To protect our service recipients, providers, and staff from harm resulting from an outbreak of an infectious disease. To be prepared for a community-wide infectious disease outbreak such as; pandemic influenza, COVID-19, etc.

DEFINITIONS:

“*Outbreak*”: An increase of disease among a specific population in a geographic area during a specific period of time; this will be determined by the Collaborative Applicant in consultation with public health agencies at the federal, state, or local level within the Balance of State geography.

“*Isolation*”: The process of separating sick, contagious persons from those who are not sick.

PROCEDURE:

In the case of an infectious disease outbreak the CoC is prepared to adapt its policies to accommodate as many contactless transactions as possible including but not limited to: coordinated entry enrollment, project enrollments, housing unit inspections, housing placements, mainstream benefits screening and applications, committee meetings, and project monitoring. The CoC will encourage and support the development of non-congregate shelter and housing options. The CoC will work with providers to develop strategies to keep sick individuals in their programs in isolation and ensure they are receiving the proper medical treatment required.

The CoC will share guidance and communication from the Center for Disease Control with providers as well as facilitating connections between providers and local public health agencies to receive the most up to date guidance for their communities. The CoC will work collaboratively with providers to adapt programming that ensures the safest environment possible for service recipients and staff.

The CoC will work closely with service providers to make sure they have adequate prevention methods in place include screening processes, PPE, testing materials, staffing plans, and anything else they may need to continue operating during an infectious disease outbreak. The CoC will facilitate regular check-ins between local public health agencies and service providers to monitor the spread of the outbreak and continue to adapt guidance as the situation evolves.

APPENDIX X: ENVIRONMENTAL REVIEW FLOW CHART

[HUD 24 CFR 58 Flowchart](#)

This table can be used by a Responsible Entity in collaboration with a COC subrecipient to determine the required level of environmental review under [24 CFR Part 58](#) based on the activities involved in the project.

<p>OPTION 1 - HUD NATIONWIDE CENST – SOFT COSTS EXEMPT If the project is limited to the following: 1. Operating/administrative costs that are not used as reserve for replacement, 2. Supportive services costs, OR 3. HMIS costs not used for leasing office space</p>	<p>Project may proceed without an additional environmental review. HUD completed a Nationwide Programmatic Categorically Excluded Not Subject to 58.5 (CENST) review covering most soft costs.</p>
<p>OPTION 2 - CENST REVIEW 1. If this is a short-term (3 months or less) Project Based or Sponsor-Based Rental Assistance project <i>(Project-Based and Sponsor-Based rental assistance provided for 3 months or less is considered CENST short-term rental assistance under 24 CFR 58.35(b)(2) Categorical Exclusions.)</i> – or – 2. A Tenant-Based Leasing (TBL) or Tenant-Based Rental Assistance (TBRA) project, and ALL program participants selected the location of their units</p>	<p>If the Field Office completed a “State-wide” TBRA/TBL CENST review, then the project may proceed without an additional environmental review. If not, then a CENST review must be completed. HUD CENST Form</p>
<p>OPTION 3 - COC LIMITED SCOPE CEST REVIEW If this is a Project-Based or Sponsor-Based Rental Assistance project (> 3 months) without any associated repairs or rehabilitation beyond routine maintenance Routine maintenance definition for purposes of environmental review</p>	<p>Complete a CoC “Limited Scope” Review. HUD Limited Scope Environmental Review CoC Instructions</p>
<p>OPTION 4 - ENVIRONMENTAL ASSESSMENT If this project includes major rehabilitation, conversion of land use, new construction, or demolition AND if it is a new construction or demolition, it falls outside the definition of an “individual action” in 24 CFR 58.35(a)(4).</p>	<p>An Environmental Assessment (EA) is required. Part 58 Environmental Assessment Form</p>

<p>For purposes of determining level of review, "major rehabilitation" is rehabilitation that does not conform to the limitations listed in 24 CFR 58.35(a)(3) Categorical Exclusions.</p> <p>If the proposed new construction or demolition conforms to the requirements in "individual action" in 24 CFR 58.35(a)(4), select option 5 instead</p>	
<p>OPTION 5 - CEST REVIEW</p> <p>If none of the above options apply, the project is Categorically Excluded Subject to 58.5 (CEST).</p>	<p>A Categorically Excluded Subject to 58.5 (CEST) Review is required.</p> <p>CEST Review Instructions</p>

APPENDIX XI: ESG EMERGENCY SHELTER POLICIES AND PROCEDURES

EMERGENCY SHELTER CASE MANAGEMENT AND SERVICE DELIVERY

Emergency shelter means any appropriate facility that has the primary use of providing temporary shelter for the homeless in general or for specific populations of the homeless and the use of which does not require occupants to sign leases or occupancy agreements. ESG funds may be used for the costs of operating an emergency shelter and providing essential services to sheltered homeless people (24 CFR Part 576.102).

TRAUMA-INFORMED CARE

Case managers should use a trauma-informed and strengths-based approach. Because homelessness and the threat of becoming homeless can be a crisis of major significance, stabilizing a person in housing requires case managers who understand the impact of trauma and stress on participants' emotional, behavioral, and cognitive capacity. Until the housing crisis is resolved and the participant's stress is decreased, case managers should support the household in setting short-term, achievable, and appropriate goals instead of focusing on longer-term goals. While many of these symptoms of stress will subside once the crisis is resolved, the case manager must be skilled at assessing participants' various and changing levels of ability to carry out goals and action steps. The case manager should focus on the essential steps required to end the housing crisis.

HOUSING-FOCUSED

To effectively assist participant households in achieving housing stability, recipients and sub-recipients must provide ongoing housing-focused case management services. The primary objective of housing-focused case management is to extend support to participants, through an individualized case management relationship, that will ultimately translate to increased housing stability. Housing-focused case management delivery should include regular consultations with participants in individualized meetings, dedicated to assessing and reassessing needs, educating participants on program and community resource opportunities, developing housing stability plans, scheduling appointments, and providing necessary follow up to ensure housing stability plans are progressing on schedule and needs are adequately being addressed.

Meetings should occur in a participant's home and/or in a location of the participant's choosing whenever possible. Structurally, housing-focused case management is central to the provider's array of supportive services. Case managers should help to develop a plan to assist the participant retain permanent housing after the assistance ends, taking into account all relevant considerations, such as the participant's current or expected income and expenses, other public or private assistance for which the participant will be eligible and likely to receive, and the relative affordability of available housing in the area.

EVOLVING FOCUS

Initially, case management should be primarily focused on assisting a participant in obtaining and moving into a new housing unit or maintaining stability in their current housing. Case managers should help participants resolve or mitigate tenant barriers like rental and utility arrears or multiple evictions; obtain necessary identification if needed; and prepare participants for

successful tenancy by reviewing lease provisions. Case management may then shift to home-based and help participants stabilize in housing. Based upon their needs and requests, it should help participants identify and access supports, including family and friend networks, mainstream and community services, and employment and income.

ALLOWABLE ACTIVITIES FOR EMERGENCY SHELTER

The chart below outlines the allowable activities for ESG funded programs.

Emergency Shelter	
<p>Essential Services</p> <ul style="list-style-type: none"> • Case management • Child Care • Education Services • Employment Assistance and Job Training • Outpatient Health Services • Legal Services • Life Skills Training • Mental Health Services • Substance Abuse Treatment Services • Transportation • Services for Special Populations 	<p>Shelter Operations</p> <ul style="list-style-type: none"> • Maintenance • Rent • Security • Fuel • Equipment • Insurance • Utilities • Food • Furnishings • Supplies necessary for shelter operation • Hotel/Motel Voucher
<p>Renovation, rehabilitation, or conversion</p> <ul style="list-style-type: none"> • Labor • Materials • Tools • Other costs for renovation (including rehab or conversion) 	<p>Assistance Required Under the Uniform Relocation and Real Property Acquisition Act of 1970 (URA)</p> <ul style="list-style-type: none"> • Relocation Payments <p>Other Assistance to displaced persons</p>

See Regulations at 24 CFR 576.102 for additional details on allowable expenditures.

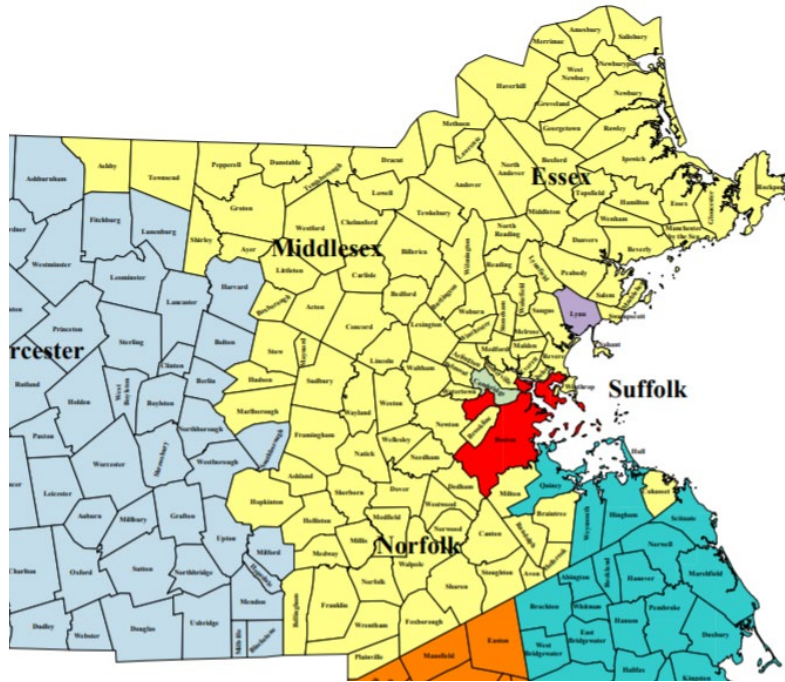
MINIMUM PERIOD OF USE

ESG funds can be used for the renovation, rehabilitation or conversion of buildings to provide emergency shelter. The Minimum Period of Use may be 3 or 10 years, depending on the cost and type of renovation (major rehabilitation, conversion, or other renovation). (See 576.102(c)).

Activity	Use Requirement	Building Valuation
Major Rehabilitation	10 years*	If rehabilitation costs exceed 75% of the value of the building before rehab
Conversion	10 years*	If rehabilitation costs exceed 75% of the value of the building after rehab
Other Renovation	3 years	If rehabilitation costs are 75% or less of the value of the building before rehab

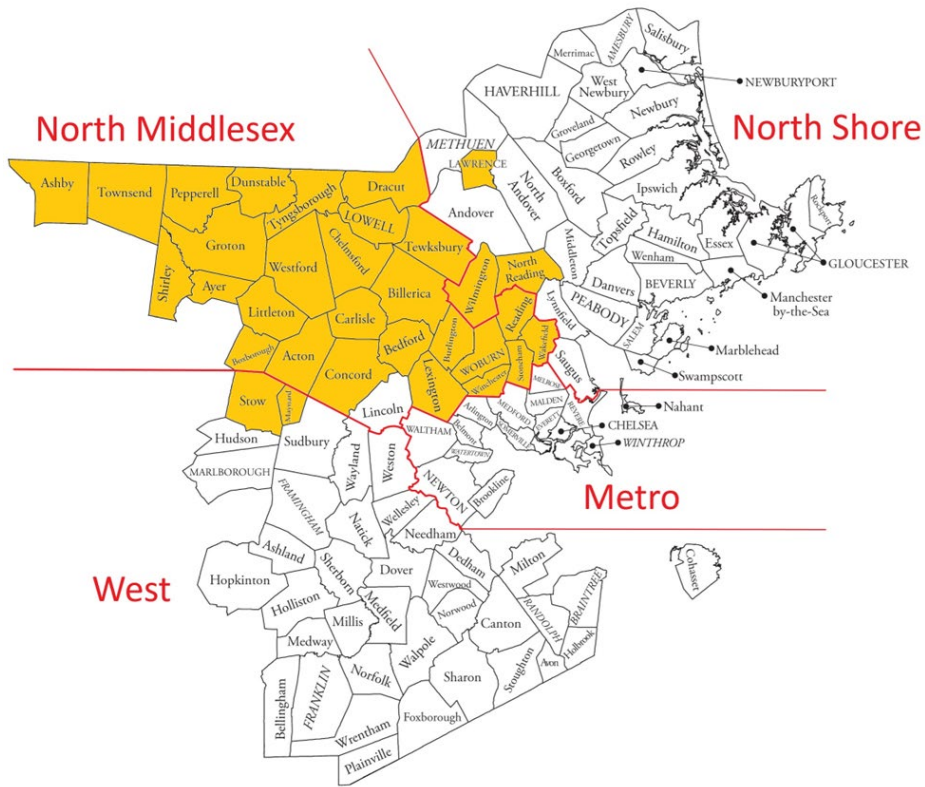
*Recorded deed or use restriction required.

APPENDIX XII: MAPPING
BoS CoC GEOGRAPHY



Massachusetts Balance of State Continuum of Care				
ACTON	DANVERS	LITTLETON	NORTH ANDOVER	TOPSFIELD
AMESBURY	DEDHAM	LOWELL	NORTH READING	TOWNSEND
ANDOVER	DOVER	LYNNFIELD	NORWOOD	TYNGSBOROUGH
ARLINGTON	DRACUT	MALDEN	PEABODY	WAKEFIELD
ASHBY	DUNSTABLE	MANCHESTER	PEPPERELL	WALPOLE
ASHLAND	ESSEX	MARBLEHEAD	PLAINVILLE	WALTHAM
AVON	EVERETT	MARLBOROUGH	RANDOLPH	WATERTOWN
AYER	FOXBOROUGH	MAYNARD	READING	WAYLAND
BEDFORD	FRAMINGHAM	MEDFIELD	REVERE	WELLESLEY
BELLINGHAM	FRANKLIN	MEDFORD	ROCKPORT	WENHAM
BELMONT	GEORGETOWN	MEDWAY	ROWLEY	WEST NEWBURY
BEVERLY	GLOUCESTER	MELROSE	SALEM	WESTFORD
BILLERICA	GROTON	MERRIMAC	SALISBURY	WESTON
BOXBOROUGH	GROVELAND	METHUEN	SAUGUS	WESTWOOD
BOXFORD	HAMILTON	MIDDLETON	SHARON	WILMINGTON
BRAINTREE	HAVERHILL	MILLIS	SHERBORN	WINCHESTER
BROOKLINE	HOLBROOK	MILTON	SHIRLEY	WINTHROP
BURLINGTON	HOLLISTON	NAHANT	SOMERVILLE	WOBURN
CANTON	HOPKINTON	NATICK	STONEHAM	WRENTHAM
CARLISLE	HUDSON	NEEDHAM	STOUGHTON	
CHELMSFORD	IPSWICH	NEWBURY	STOW	
CHELSEA	LAWRENCE	NEWBURYPORT	SUDBURY	
COHASSET	LEXINGTON	NEWTON	SWAMPSCOTT	
CONCORD	LINCOLN	NORFOLK	TEWKSBURY	

CE AND YHDP REGIONS
(YHDP in Yellow)



Metro Region				
Arlington	Chelsea	Medford	Newton	Waltham
Belmont	Everett	Melrose	Revere	Watertown
Brookline	Malden	Nahant	Somerville	Winthrop

North Middlesex Region				
Acton	Burlington	Groton	Reading	Wakefield
Ashby	Carlisle	Lexington	Shirley	Westford
Ayer	Chelmsford	Lincoln	Stoneham	Winchester
Bedford	Concord	Littleton	Tewksbury	Woburn
Billerica	Dracut	Lowell	Townsend	
Boxborough	Dunstable	Pepperell	Tyngsboro	

North Shore Region				
Amesbury	Gloucester	Manchester by the Sea	North Andover	Saugus
Andover	Groveland	Marblehead	North Reading	Swampscott
Beverly	Hamilton	Merrimac	Peabody	Topsfield
Boxford	Haverhill	Methuen	Rockport	Wenham
Danvers	Ipswich	Middleton	Rowley	West Newbury
Essex	Lawrence	Newbury	Salem	Wilmington
Georgetown	Lynnfield	Newburyport	Salisbury	

West Region				
Ashland	Foxborough	Maynard	Norwood	Walpole
Avon	Framingham	Medfield	Plainville	Wayland
Bellingham	Franklin	Medway	Randolph	Wellesley
Braintree	Holbrook	Millis	Sharon	Weston
Canton	Holliston	Milton	Sherborn	Westwood
Cohasset	Hopkinton	Natick	Stoughton	Wrentham
Dedham	Hudson	Needham	Stow	
Dover	Marlborough	Norfolk	Sudbury	

YHDP Region			
Acton	Chelmsford	Lowell	Tewksbury
Ashby	Concord	Maynard	Townsend
Ayer	Dracut	North Reading	Tyngsborough
Bedford	Dunstable	Pepperell	Wakefield
Billerica	Groton	Reading	Westford
Boxborough	Lawrence	Shirley	Wilmington
Burlington	Lexington	Stoneham	Winchester
Carlisle	Littleton	Stow	Woburn

APPENDIX XIII: HMIS POLICIES AND PROCEDURES

Please continue scrolling to view the following policies:

HMIS GOVERNANCE CHARTER

HMIS CONFIDENTIALITY AND PRIVACY PLAN

HMIS SECURITY PLAN

HMIS DATA QUALITY MANAGEMENT PLAN



Massachusetts Balance of State
Continuum of Care

HMIS Governance Charter

Version 3

Updated 2024

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HOMELESS MANAGEMENT INFORMATION SYSTEM (HMIS) GOVERNANCE CHARTER

1 Purpose

The Massachusetts Balance of State (BoS) Continuum of Care (CoC) operates a Homeless Management Information System (HMIS) to record and store client-level information about the number, characteristics, and needs of persons who use homeless housing and supportive services within the CoC, and for persons who receive assistance who are at risk of homelessness. HMIS is used to aggregate data about the extent and nature of homelessness over time; produce an unduplicated count of homeless persons; understand patterns of service use; and measure the effectiveness of homeless assistance projects and programs. Data produced is used to fulfill federal reporting requirements, as well as for strategic planning, advocacy, and outreach.

1.1 Roles

- The Massachusetts Balance of State Continuum of Care CoC Lead and Collaborative Applicant is the Commonwealth of Massachusetts Executive Office of Housing and Livable Communities (EOHLC)
- The HMIS Lead Agency for the Balance of State Continuum of Care is the Commonwealth of Massachusetts Executive Office of Housing and Livable Communities (EOHLC)
- The Massachusetts Balance of State (BoS) Advisory Board is the decision-making body of the MA Balance of State Continuum of Care. The Advisory Board's membership consists of a broad representation of state agencies, service providers, housing developers, and faith-based groups.¹

¹ See the Commonwealth of Massachusetts Balance of State Continuum of Care Governance Charter.



- The BoS CoC HMIS Committee is a committee of the Balance of State CoC which is made up of HMIS Coordinators from the HMIS Lead Agency and volunteers from homeless organizations operating within the BoS CoC geography; it is chaired by an HMIS Coordinator at the HMIS Lead Agency.
- The Commonwealth of Massachusetts Executive Office of Housing and Livable Communities (EOHLC) also serves other roles with which the Balance of State CoC interacts, but are wholly separate from EOHLC's role as HMIS Lead for the Balance of State Continuum of Care:
 - EOHLC operates an HMIS-compliant database that collects statewide Emergency Assistance (EA) Family Shelter System client data.
 - EOHLC operates a statewide HMIS Data Warehouse called the ReHousing Data Collective, in which all Massachusetts CoCs have agreed to participate.

2 CoC Responsibilities

The Continuum of Care is responsible to:

- A. Designate a single information system as the official HMIS software for the CoC's geographic area.
- B. Designate an HMIS Lead Agency
- C. Provide governance of the HMIS Lead, including the requirement that the HMIS Lead enters into written HMIS Participation Agreements with each Covered Homeless Organization (CHO) and the requirement that each CHO comply with federal and state regulations regarding HMIS
- D. Maintain documentation evidencing compliance with the CoC Governance Charter and the HMIS Governance Charter;
- E. Review, revise, and/or approve the policies and plans required by federal regulations, such as those described in the HMIS Proposed Rule;



- F. Prepare and submit the HMIS project grant application as part of the consolidated application process and ensure that funds awarded are drawn down and used appropriately. The CoC will also ensure that sufficient Match is available for this grant fund.

3 Designations

3.1 HMIS System

In 2020 EOHLC, at the direction of the CoC, issued a Request for Quotes (RFQ) for existing software to serve as the designated HMIS for the CoC. EOHLC, as HMIS Lead Agency for the Balance of State Continuum of Care, entered a contract with The Partnership Center, Ltd. in 2021 to license their HMIS software, **VESTA** as the official HMIS for the Balance of State CoC.

3.2 HMIS Lead

The Balance of State CoC designates the **Commonwealth of Massachusetts Executive Office of Housing and Livable Communities (EOHLC)** as the HMIS Lead with specific responsibilities for:

- A. HMIS systems administration, HMIS policies and procedures, CoC data quality monitoring, and HMIS provider training and technical assistance and support;
- B. Vendor contract responsibilities including:
 - a) Covering the cost of organization and user fees;
 - b) Assuring that the vendor complies with HMIS data and technical standards, including security standards;
 - c) Ensuring HMIS is satisfying the requirements of all regulations and notices issued by HUD;
- C. Fulfilling CoC reporting obligations.



4 Responsibilities of the HMIS Lead

4.1 HMIS Procurement and Contract Management

The HMIS Lead is responsible for the procurement of the HMIS. EOHLC must comply with applicable Commonwealth of Massachusetts procurement laws and regulations, including OSD regulation 801 CMR 21.00, and associated guidance and policies. The HMIS Lead will enter into a contract with an HMIS Vendor chosen by the CoC and, as part of the contract, must require that the HMIS vendor and its software comply with HMIS standards issued by HUD.

Annually, the HMIS Lead must review and assure compliance by HMIS vendor and supply the Continuum's Advisory Board with a written report regarding HMIS compliance with HUD HMIS requirements. On an ongoing basis, the HMIS Lead must communicate with CoC Lead with regards to systems and technical administration issues and propose remedies. The HMIS software and HMIS staff employed by the HMIS Lead will be procured using CoC HMIS Grant funds; the HMIS Lead will not charge CHOs participation or end-user fees for homeless service projects. CHOs may enter into an agreement with the HMIS vendor to include other non-homeless projects, if desired.

4.2 HMIS Comparable Databases

The HMIS Lead will certify HMIS Comparable Database software for use by Victim Service Providers (VSPs) within the CoC. The HMIS Lead will maintain policies and procedures for a uniform certification process, which includes initial certification, ongoing re-certifications, and remedies for failure to meet compliance requirements.

4.3 Covered Homeless Organization Participation Management

The HMIS Lead is responsible for ensuring that there are clear expectations and limitations for all entities that utilize the HMIS in any fashion, referred to as Covered Homeless Organizations (CHOs). This will be accomplished by:



- 1) Executing a written HMIS Participation Agreement with each CHO, which includes the obligations and authority of the HMIS Lead and CHO, the requirements of the Security Policy and Privacy Policy with which the CHO must abide, sanctions for violating the HMIS Participation Agreement, and an agreement that the HMIS Lead and the CHO will process Protected Identifying Information consistent with the agreement.
- 2) Executing a written HMIS User Agreement with each HMIS user
- A. Ensuring the operation of and consistent participation by recipients of CoC and Emergency Solutions Grants (ESG) Program funds, including oversight of the HMIS and any necessary corrective action to ensure that HMIS CHOs comply with federal requirements;
 - a) HMIS Lead staff will attend regularly scheduled meetings of the CoC Lead Agency’s Individual Homelessness Unit where HMIS staff and CoC and ESG Contract Managers will share information about subgrantees’ participation in HMIS and compliance with HMIS requirements.
- B. Developing written CoC HMIS policies and procedures in accordance with HUD requirements for all CHOs;
- C. Develop for Board approval and implement a plan for monitoring the HMIS to ensure that:
 - a) CHOs consistently participate in HMIS;
 - b) CHOs adhere to federal and state laws governing the collection and use of Protected Personal Information; and
 - c) CHOs submit accurate and timely CoC and HUD reports as required

4.4 HMIS Comparable Databases

The HMIS Lead will certify HMIS Comparable Database software for use by Victim Service Providers (VSPs) within the CoC. The HMIS Lead will maintain policies and procedures for a uniform certification process, which includes initial certification, ongoing re-certifications, and remedies for failure to meet compliance requirements.



4.5 HMIS Policies and Procedures

The HMIS Lead must develop and adopt written policies and procedures for the operation of the HMIS that apply to the HMIS Lead, its CHOs, and the Continuum of Care. Required written documents include an HMIS Privacy Plan, HMIS Security Plan, and HMIS Data Quality Plan, as well as complimentary HMIS Policies and Procedures. These plans, and policies and procedures must be implemented within 6 months after the publication of the HMIS Final Rule and must comply with all applicable Federal law and regulations, and applicable state or local governmental requirements. The HMIS Lead will conduct a thorough review of all applicable federal regulations and state laws and regulations pertaining to HMIS and the maintenance of PII, as well as HMIS privacy and security guidance released by HUD, and will ensure that the CoCs plans and policies comply.

4.5.1 Privacy Plan and Security Plan

The HMIS Lead must develop a Privacy Plan and a Security Plan.

The HMIS Privacy Policy must include data collection limitations; purpose and use limitations; allowable uses and disclosures; accountability standards; protections for victims of domestic violence, dating violence, sexual assault, and stalking; and such additional information as may be established by HUD in applicable notices. The HMIS Lead may also develop a Data Release Authorization policy to designate when, how, and what type of information can be shared.

The HMIS Security Plan must outline a process for regular monitoring of system security, and for reporting concerns or findings to the CoC Lead. It must require every CHO with access to Protected Identifying Information (PII) to implement procedures to ensure and monitor its compliance with applicable agreements and the requirements of this part, including enforcement of sanctions for noncompliance. In addition, every CHO must comply with the MA Privacy Law: 201 CMR 17.00: Standards For The Protection Of Personal Information Of Residents Of The Commonwealth which includes but is not limited to the development of a written



information security program (“WISP”); the designation of one or more employees to supervise the implementation of the WISP; regular ongoing employee training; and procedures for monitoring employee compliance.

4.5.2 Data Quality Plan

The HMIS Lead must develop and implement an HMIS Data Quality Plan in accordance with HUD SNAPS Data Strategy. The HMIS Lead must also develop and implement complimentary HMIS Data Quality Policies and Procedures which will set data quality benchmarks and goals for CHOs.

4.6 Data Warehouse Participation

The BoS CoC Advisory Board is responsible for granting authorization to participate in an HMIS Data Warehouse. If authorized by the CoC, with an executed Participation Agreement in place, the HMIS Lead is responsible for the CoC’s participation in said HMIS Data Warehouse, provided that the participation does not violate any applicable state or federal laws.

In March 2020 the Massachusetts Balance of State Continuum of Care has entered into an agreement with the Massachusetts Executive Office of Housing and Livable Communities to participate in the statewide HMIS data warehouse called the *ReHousing Data Collective*.

5 Responsibilities of the CoC HMIS Committee

The Committee will work with the HMIS Lead to:

- A. Develop, annually review, and, as necessary, revise for Board review and feedback an HMIS Privacy Plan, HMIS Security Plan, and an HMIS Data Quality Plan, as well as any other HMIS policies and procedures required by HUD.



6 HMIS Definitions

Homeless Management Information System (HMIS) is the information system designated by the Continuum of Care to record, analyze, and transmit client and activity data regarding the provision of shelter, housing, and services to individuals and families who are homeless or at risk of homelessness.

Purpose of HMIS. The purpose of an HMIS is to record and store client-level information about the characteristics and needs of persons who use homeless housing and supportive services, and for persons who receive assistance for persons at risk of homelessness, including:

- (1) Aggregation of HMIS data. Information in HMIS may be aggregated to obtain information about the extent and nature of homelessness over time; produce an unduplicated count of homeless persons; understand patterns of service use; and measure the effectiveness of homeless assistance projects and programs.
- (2) Uses of aggregate HMIS information. Aggregate information generated from the HMIS will be used (i) by recipients and sub-recipients to report to HUD and for such other reasons as may be required by HUD; (ii) by HUD and other Federal agencies to report to Congress, evaluate recipient performance, and for such other reasons as may be specified in law or regulation or by HUD through notice; and (iii) to raise public awareness and enhance local planning processes.

HMIS Lead is the entity designated by the Continuum of Care to operate the Continuum's HMIS on the Continuum's behalf.

The Balance of State Continuum of Care is the group composed of representatives from organizations including nonprofit homeless providers, victim service providers, faith-based organizations, governments, businesses, advocates, public housing agencies, school districts, social service providers, mental health agencies, hospitals, universities, affordable housing developers, law enforcement, organizations that serve veterans, and homeless and formerly homeless persons.

Comparable Database means a database that is not the Continuum's HMIS, but is an alternative system meeting all HMIS requirements that victim service providers may use to



collect client-level data and to generate unduplicated aggregate reports. Information entered into a comparable database must not be entered directly into or provided to an HMIS. VSPs may procure an HMIS Comparable Database from the same vendor as the HMIS Lead, as long as they maintain their own independent enterprise license or contract with the vendor and the data is never intermingled with CoC data.

Contributing HMIS Organization (or CHO) means an organization that operates a project that contributes data to an HMIS.

Data recipient means a person who obtains personally identifying information from an HMIS Lead or a CHO for research or other purposes not directly related to the operation of the HMIS, Continuum of Care, HMIS Lead, or CHO.

HMIS vendor means a contractor who provides materials or services for the operation of an HMIS. An HMIS vendor includes an HMIS software provider; webserver host; data warehouse provider; or a provider of other information technology or support.

Participation Fee means a fee the HMIS Lead charges CHOs for participating in the HMIS to cover the HMIS Lead's actual expenditures, without profit to the HMIS Lead, for software licenses, software annual support, training, data entry, data analysis, reporting, hardware, connectivity, and administering the HMIS. Balance of State does not assess a participation fee.

Protected Identifying Information (PII) means information about a program participant that can be used to distinguish or trace a program participant's identity, either alone or when combined with other personal or identifying information, using methods reasonably likely to be used, which is linkable to the program participant.

User means an individual who uses or enters data in an HMIS or another administrative database from which data is periodically provided to an HMIS.

Victim Service Provider (VSP) means a private nonprofit organization whose primary mission is to provide services to victims of domestic violence, dating violence, sexual assault, or stalking. This term includes rape crisis centers, battered women's shelters, domestic violence transitional housing programs, and other programs.



7 Revision History

Date	Version	Revision
Jan 2021	1	Original Publication
Mar 2023	2	Update to reflect procurement of VESTA as CoC's HMIS
Jul 2024	3	Update to reflect that the Department of Housing and Community Development, formerly part of the Executive Office of Housing and Economic Development, has been elevated to its own Secretariat, now known as the Executive Office of Housing and Livable Communities (EOHLC).





Massachusetts Balance of State Continuum of Care

HMIS Confidentiality and Privacy Plan

The following Confidentiality and Privacy Plan for the Balance of State CoC's Homeless Management Information System (MA-516 HMIS) is designed to fulfill the requirement to develop and implement written procedures to ensure confidentiality (24 CFR § 578.103(b)(i)) with which all HUD recipients and subrecipients must comply. This requirement applies to both Homeless Management Information Systems (HMIS) and HMIS Comparable Databases. This policy is intended to be consistent with the HUD standards for HMIS issued by the United States Department of Housing and Urban Development (HUD) in July of 2004 (69 Federal Register 45888) – [Final HMIS Data and Technical Standards Notice](#).

Any organization or agency, including its employees, volunteers, and contractors, that uses the HMIS in any way, including for data entry, reporting, or administration, is a Covered Homeless Organization (CHO).

All HMIS end users and administrators must adhere to this Privacy Plan. It is the responsibility of the CHO's HMIS Key Contact to monitor compliance with standards of client privacy outlined in this document. The Continuum of Care (CoC) Grant Managers, Emergency Solutions Grant (ESG) Managers, and/or CoC HMIS Administrators may conduct a compliance audit during regular site visits.

In addition to requirements established by HUD, this plan requires that all CHOs covered under it comply with any applicable Federal, State, and/or local laws and industry privacy standards requiring additional confidentiality protections, including, but not limited to:

- The Confidentiality of Alcohol and Drug Abuse Patient Records Rule (42 CFR § 2);
- Violence Against Women and Department of Justice Reauthorization Act of 2022 (34 U.S.C. § 12491);

- Massachusetts General Law Part I Title X Chapter 66A (GL Chapter 66A);
- Massachusetts General Law Part I Title XV Chapter 93H (GL Chapter 93H); and
- 201 CMR 17: Standards for the protection of personal information of residents of the Commonwealth;

as well as any other standard established for substance abuse, legal services, and domestic violence providers. All agencies using the HMIS in any way are considered CHOs.

A limited number of agencies may also be subject to The Health Insurance Portability and Accountability Act (HIPAA) of 1996 (45 CFR § 160 and § 164). Please see [Covered Entities and Business Associates | HHS.gov to determine applicability.](#)

The foundation of this Confidentiality and Privacy Policy is outlined in both the Balance of State Continuum of Care's **HMIS Privacy Notice for Homeless Organizations** and the Balance of State Continuum of Care's **HMIS Participation Agreement** between the Massachusetts Executive Office of Housing and Livable Communities (EOHLC) and CHOs. The latter includes the following requirements of participating CoC agencies:

- The CHO agrees to post a privacy notice in all places where clients are interviewed or provide a copy of said privacy notice to clients upon request. This notice must address the collection and recording of Protected Personally Identifying Information (PII), as defined in Balance of State Continuum of Care's **HMIS Privacy Notice for Homeless Organizations**. The CHO understands that the disclosure of disability-specific information or information about domestic violence requires the written consent of the individual, notwithstanding any presumption, advertised or not, that an individual's request for program services or disclosure of personal information constitutes unwritten consent for such disclosure by the CHO. In the event that the CHO's privacy notice differs from the CoC's privacy notice, the most restrictive privacy notice must be implemented.

- The CHO will not divulge any confidential information received from the HMIS to any organization or individual who is not expressly authorized to receive such information without proper written consent by the client, unless otherwise permitted by applicable regulations or laws.
- The CHO will ensure that all persons who are issued a User Identification and Password to access the HMIS abide by the HMIS Participation Agreement and the HMIS User Agreement, including all associated confidentiality provisions. The CHO will be responsible for oversight of its own related confidentiality requirements.
- The CHO agrees that it will ensure that all persons issued a User ID and Password will complete a formal training on privacy and confidentiality and demonstrate mastery of that information, prior to activation of their User License.
- The CoC’s confidentiality, security, and privacy policies also apply to any information downloaded from the system by the CHO and its users.
- The CoC may change this policy at any time; the CHO understands that they must review and revise their Privacy Notice to comply with the changes.

CoC Privacy Plan Documents

Document Name	Description	CHO Requirements
HMIS Privacy Notice for Homeless Organizations	Describes how and why personal information is recorded, disclosed, and protected. It details the privacy policies and practices of the CoC.	All participating agencies must adopt a privacy notice that meets all minimum standards as outlined in the Final HMIS Data and Technical Standards Notice . <u>The adopted Privacy Notice must be made public.</u>

Document Name	Description	CHO Requirements
Privacy Notice Posting	States the type of information the CoC collects through its HMIS, and the reason why such information is collected.	All participating agencies should adopt the language of this posting and adapt it to fit their name, logo, and other CHO branding. The Privacy Notice Posting should be prominently displayed wherever clients receive services.
HMIS CHO Participation Agreement	An agreement between the Balance of State CoC/EOHLC and prospective HMIS-participating agencies. This document details the roles and responsibilities of the involved parties regarding proper software use, HMIS data, protection of client privacy, and adherence to confidentiality rules outlined by HUD.	All participating agencies must read, review, sign, and submit this agreement before they can participate in the Balance of State’s HMIS.

Document Name	Description	CHO Requirements
HMIS User Participation Agreement	A form to be completed by all users before gaining access to the HMIS database. This document outlines the responsibilities and conduct expected from HMIS users regarding the protection of client privacy.	All users in participating agencies must read, review, sign, and submit this form to the appropriate BoS CoC staff before obtaining access to the database.

Revision History

Date	Version Number	Revision
8/2/2021	1.0	Original document created.
3/27/2026	1.1	Revised

Published: 3/27/2026



Massachusetts Balance of State Continuum of Care

HMIS Security Plan

Security refers to the protection of client Protected Identifying Information (PII) and sensitive program information from unauthorized access, use, or modification.

Security Plan Purpose

Security standards as provided in this plan are directed to ensure the confidentiality, integrity, and availability of all Homeless Management Information System (HMIS) data; protect against any reasonably anticipated threats or hazards to security; and ensure compliance by end users. Written policies and procedures must comply with all applicable Federal law and regulations, and applicable state or local governmental requirements.

Applicability

This plan applies to all Agencies accessing data contained in, generated from, or created for MA-516 HMIS, including but not limited to: the Massachusetts Executive Office of Housing and Livable Communities (EOHLC), the Balance of State CoC's HMIS Lead (currently EOHLC), all other CoCs, organizations providing services to homeless persons or those at risk of homelessness, Covered Homeless Organizations (CHOs), and the HMIS Vendor, hereafter collectively referred to as "Covered Homeless Organization" or "CHO." Each of these CHOs must follow all the security standards established in this notice. A CHO must comply with Federal, state, and local laws that require additional privacy or confidentiality protections. When a privacy or security standard conflicts with other Federal, state, and local laws to which the CHO must adhere, the CHO must adhere to the most stringent law or policy.

Administrative Safeguards

Security Officer

Each CoC HMIS Lead and each Agency/CHO must designate an HMIS Security Officer to be responsible for ensuring compliance with applicable security standards and provide the name and contact information to EOHLC HMIS Staff.

Workforce Security

The CHO will be responsible for keeping a record of all end-user/staff agreements, privacy and ethics training signoffs, Criminal Offender Record Information (“CORI”) checks, and any other applicable records on site. The CHO’s Executive Director or authorized signatory will designate one CHO HMIS Administrator who will assume responsibility for the creation and maintenance of projects and user accounts, as well as for providing and documenting the security training of any staff person prior to issuance of a user account. Said designee will be identified to EOHLC HMIS Staff upon designation and when the designee changes.

A CHO's Human Resources department must put into place processes for promptly notifying the CHO's HMIS Administrator upon termination of employment to facilitate prompt deactivation of End User accounts.

MA-516 HMIS Security Awareness Training and Follow-up

All MA-516 HMIS end users must read the Security Policies and Procedures document governing HMIS and sign off on an acknowledgement form prior to being given access to MA-516 HMIS. Security training will be conducted at least annually.

Reporting a Security Breach

Chain of Communication

HUD will later provide a defined threshold when reporting is mandatory. EOHLC has two documents regarding security incidents: **Enterprise IT Security Incident Response Policy** and **Enterprise Security Incident Handling Procedures**.

Security Plan Noncompliance

Failure to comply with the Security Plan or the Security Policies and Procedures by an End User or a CHO will result in the immediate suspension of access to MA-516 HMIS by EOHLIC until the allegations are resolved to protect the integrity of the system.

Security Breaches

If there is a suspected security breach involving any client PII, EOHLIC is to be contacted immediately. EOHLIC will take immediate action to mitigate the breach and notify EOHLIC's legal department, which will ensure compliance with the Commonwealth's Identity Theft Law, M.G.L., Ch 93H.

Disaster Recovery Plan

HUD has not yet established requirements for this. EOHLIC has a disaster recovery plan titled **Disaster Recovery Plan** (November 2014), **File Backup Strategy** (November 2017), and **HLC Internal Control Plan** (2026). The HMIS Vendor's Disaster Recovery Plan is on file with EOHLIC. Further, EOHLIC must comply with The Commonwealth of Massachusetts Information Technology Division's published **Enterprise Security Incident Handling Procedures** and **Enterprise IT Security Incident Response Policy**.

Annual Security Review

Annually, EOHLIC will complete and document a security review to ensure the implementation of the security requirements for itself. The Security Officer of each CHO will complete and document a security review to ensure the implementation of the security requirements for itself.

Contracts and Other Arrangements

EOHLIC will retain copies of all contracts and agreements executed as part of the administration and management of MA-516 HMIS.

Technical Safeguards

System Security

System security provisions will apply to all systems where PII is stored, including, but not limited to, a CHO's networks, desktops, laptops, mini-computers, tablets, smart phones, mainframes, and servers.

Internal Security Practices

Each CHO must establish and abide by a Written Information Security Policy, including identifying a Security Officer. The CHO's formal policies and procedures for terminating employment must include the notification of the CHO's MA-516 HMIS Administrator, who will then be responsible for immediately disabling the End User's MA-516 HMIS account.

Connectivity and Computer Systems

CHOs will connect to the Balance of State CoC's HMIS independently via the internet and are responsible for providing their own internet connectivity and computer systems sufficient for doing so.

CHOs must only access the HMIS using computers with operating systems, web browsers, and other software that are currently supported by their manufacturer and have not reached end-of-life.

Workstation Security

The purpose of Physical safeguards is to ensure that access to data in HMIS is protected and meets baseline security standards. All HMIS Leads and CHOs must follow the standards below.

- All HMIS workstations must be placed in secure locations or must be manned at all times if they are in publicly accessible locations. (This includes non-HMIS computers if they are networked with HMIS computers).
- All printers used to print hard copies from the HMIS are in secure locations.

- All HMIS workstations must use password protected screensavers after five or more minutes of inactivity.
- All HMIS workstations must have a password protected log on for the workstation itself.
- All HMIS End User's computer screens should be placed in a manner where it is difficult for others to see the contents or must have a screen protector.
- Passwords must be memorized, not written down and should not be shared.
- Confidential data CANNOT be stored on ANY unencrypted mobile device.
- Confidential data CANNOT be transmitted via unencrypted wireless devices or unsecured public lines.
- Internet browser must be compatible with 128-bit encryption.
- Internet browser must be a current/most up-to-date version
- Any e-mail containing confidential data must utilize at least 128-bit encryption.
- All HMIS equipment must have anti-virus software installed and configured to automatically download current signature file.
- Anti-virus software must be set to scan emails file downloads in real time.
- HMIS agencies must have their entire Network behind a firewall and must routinely monitor for intrusion attempts (see detailed firewall requirements below).
- All HMIS workstations must be running a current operating system and internet browser security.
- Systems must be scanned at minimum of weekly for viruses and malware.
- End Users who have not logged onto the system in the previous 90 days will be flagged as inactive.
- Under no circumstances shall a CHO demand that an End User hand over his or her username and password.
- Password-protected log on for the workstation itself;
- Password-protected (aka locked) screensaver after five minutes of inactivity;

- Operating system updated with the manufacturer's latest patches at least weekly. No operating systems that have reached end-of-life are to be used under any circumstances;

Written information specifically pertaining to user access (e.g., username and password) may not be stored or displayed in any publicly accessible location.

Individual users must not be able to log on to more than one workstation at a time, or be able to log on to the network at more than one location at a time.

Firewalls

A CHO must protect its systems from malicious intrusion behind a secure firewall. Each individual workstation does not need its own firewall, as long as there is a firewall between that workstation and any systems, including the Internet and other computer networks located outside of the organization. For example, a workstation that accesses the Internet through a modem would need its own firewall. A workstation that accesses the Internet through a central gateway would not need a firewall as long as the gateway has a firewall. Firewalls are commonly included with all new operating systems. Older operating systems can be equipped with secure firewalls that are available both commercially and for free on the Internet.

Public Access

HMIS that use public forums for data collection or reporting must be secured to allow only connections from previously approved computers and systems through Public Key Infrastructure (PKI) certificates, or extranets that limit access based on the Internet Protocol (IP) address, or similar means. A public forum includes systems with public access to any part of the computer through the Internet, modems, bulletin boards, public kiosks or similar arenas. Further information on these tools can be found in the HMIS Consumer Guide and the HMIS Implementation Guide, both available on HUD's Web site.

Disposal

In order to delete all HMIS data from a data storage medium, a covered homeless organization must reformat the storage medium. The CHO should reformat the storage medium more than once before reusing or disposing the medium.

System Monitoring

CHOs must use appropriate methods to monitor security systems. Systems that have access to any HMIS data must maintain a user access log. Many new operating systems and web servers are equipped with access logs and some allow the computer to email the log information to a designated user, usually a system administrator. Logs must be checked routinely.

HMIS Security

Applicability

A CHO must apply application security provisions to the software during data entry, storage and review or any other processing function.

User Authentication

A CHO must secure all electronic HMIS data with, at a minimum, a user authentication system consisting of a unique username and a password.

Under no circumstances shall a CHO demand that an End User hand over his or her username and password.

Under no circumstances shall an End User share their HMIS login information.

Written information specifically pertaining to user access (e.g., username and password) may not be stored or displayed in any publicly accessible location. Individual users should not be able to log on to more than one workstation at a time, or be able to log on to the network at more than one location at a time.

End users must log off of the HMIS when complete.

Electronic Data Transmission

A CHO must encrypt all HMIS data that are electronically transmitted over the Internet, publicly accessible networks, or phone lines to current industry standards. Unencrypted data may be transmitted over secure direct connections between two systems. A secure direct connection is one that can only be accessed by users who have been authenticated on at least one of the systems involved and does not utilize any tertiary systems to transmit the data. A secure network would have secure direct connections. The Commonwealth maintains a secure server which must be used to electronically transmit any data using PII between a CHO and any employee of the Commonwealth of Massachusetts.

Electronic Data Storage

CHO users are responsible for maintaining the security and confidentiality of any program participant-level data extracted from the database and stored locally, including all data used in internal reporting. No identifiable program participant-level data is to be transmitted unless it is properly protected. Security questions should be addressed to HMIS Project Staff.

Remote System Access

CHOs and their End Users must abide by these Policies and Procedures and ensure the security and confidentiality of program participant data regardless of the computer used to log in to the system. For this reason, End Users are prohibited from extracting and storing Protected Identifying Information (PII) on their personal computers and internet devices. End Users are prohibited from accessing the HMIS using public Wi-Fi.

Physical Safeguards

Physical Access to Systems with Access to HMIS Data:

A CHO must at all times staff computers stationed in public areas that are used to collect and store HMIS data. When workstations are not in use and staff are not present, steps should be

taken to ensure that the computers and data are secure and not usable by unauthorized individuals. After a period of inactivity, users will be automatically logged off of the HIMIS application. After a short amount of time, workstations should automatically turn on a password protected screen saver when the workstation is temporarily not in use. Password protected screen savers are a standard feature with most operating systems and the amount of time can be regulated by a CHO. If staff from a CHO will be gone for an extended period of time, staff should log off the data entry system and shut down the computer.

Hard Copy Security

A CHO must secure any paper or other hard copy containing Protected Identifying Information that is generated by or for HMIS, including, but not limited to, reports, data entry forms, and signed consent forms.

A CHO must supervise at all times any paper or other hard copy generated by or for HMIS that contains PII when the hard copy is in a public area. When CHO staff are not present, the information must be secured in areas that are not publicly accessible.

Remote Work

CHOs with remote work policies must make sure that the policies comply with all conditions in this and any other security and privacy documents issued by the CoC.

Applicable Laws

All applicable laws must be followed. These can include, but are not limited to:

Federal Laws

- Federal Register Vol. 69, No. 146 (HMIS FR 4848-N-02) (Federal statute governing HMIS information);
- 42 CFR Part 2 (Confidentiality Of Substance Use Disorder Patient Records)
- Health Insurance Portability and Accountability Act (HIPAA)

Massachusetts State Laws

- 201 CMR 17.00 (Standards for the Protection of Personal Information of MA Residents)
- Chapter 66 (Fair Information Practices)
- Chapter 93H (Security Breaches)



Massachusetts Balance of State
Continuum of Care

Data Quality Management Plan

Optimizing the
Comprehensiveness and
Reliability of MA-516's Data

HMIS Lead

Updated 3/3/2026

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Introduction

The Balance of State CoC (CoC) and the HMIS Lead have created this Data Quality Management Plan (DQMP) to provide all stakeholders with actionable, measurable steps to maintain data quality within their Homeless Management Information System (HMIS). All organizations participating in the Continuum's HMIS have signed a BoS CoC HMIS Participation Agreement, which includes adherence to this HMIS Data Quality Management Plan as a clause.

This document explains what data quality is, how it is achieved, and how it will be monitored, encouraged, and enforced. It also covers the roles and responsibilities of all stakeholders in maintaining data quality, and it details the tools and support available to help you ensure high data quality in your organization.

Maintaining high quality data not only facilitates accurate reporting to funders, but it also provides a picture of overall homelessness in our CoC and can be analyzed to determine the most effective ways of achieving positive housing outcomes. Additionally, the data about clients that we collect in HMIS speaks to their eligibility for various programs and services. Inaccurate data can impact the help they receive.

Our data tells the story of
the clients we serve and
the ways in which we serve
them.

While focusing on data quality for federally funded projects that enter data into HMIS is necessary to ensure accurate reporting for those grants, any project that enters data into HMIS contributes to the overall picture of homelessness within the CoC and, therefore, is expected to participate in this DQMP.

The reasons why data quality is important are many, including but not limited to:

- Requirements based on funding the CoC receives.
- Data quality, or lack thereof, can directly affect the funding opportunities for providers.
- Accurate reporting for federal, state, and local funding.



- The ability of the CoC, and providers within the CoC, to tell the story of homelessness as realistically and completely as possible; and
- The data entered into HMIS directly affects clients through the coordinated entry process and may determine which services they may or may not be eligible for.

The CoC will work in conjunction with the HMIS Lead to ensure all providers have access to the tools they need to ensure high data quality, including training, data quality reports, encouragements to maintain a high level of data quality, and enforcements for non-responsiveness to data quality concerns. While the HMIS Lead is responsible for a large part of the overall DQMP, the CoC will maintain a high level of involvement to ensure providers respond to data quality concerns and that the data quality within the HMIS is both acknowledged and addressed on an ongoing, iterative, continual basis and in an objective, data-driven manner.

The following addresses how the CoC will both encourage and enforce the DQMP, with transparency about how a provider's data quality can bring about both incentives and consequences. The DQMP is then broken out into the various components of data quality: completeness, timeliness, accuracy, consistency, and bed coverage. The sections will address the baseline minimum requirements to maintain a sufficient level of data quality and, depending on the section, the baseline minimum requirement will be broken out by project type. The Data Quality Monitoring Visit Report and Improvement Plan is a tool that will be used for providers and end users consistently failing to maintain a baseline minimum requirement; specifics of how that will be determined and what the tool includes are described in that section.

The DQMP is a living, evolving tool that will change as the community and its HMIS data needs.



Components of Data Quality



Consistency

Consistency means that data is collected regularly and in the same way each time. It also means that users are logging into and using HMIS regularly to enter that data, and that the HMIS stores it in the same way each time. It impacts the timeliness, accuracy, and completeness of your data.

Timeliness

Timeliness is about collecting data when it is needed, and about the amount of time between when that data is collected and when it is entered into HMIS. Collecting and entering data in a timely manner reduces data entry errors, increasing accuracy and completeness. HUD recommends that projects enter data into HMIS within 48 hours of collecting the information from the client (US Department of Housing and Urban Development, 2005). The timely entering of clients' data also helps to make sure that they quickly get needed services.

Completeness

Completeness means how many data fields have been meaningfully filled in for a client, an enrollment, a HUD assessment, or any other form you complete in HMIS. An evaluation of data completeness looks not only at missing and null values, but also "Data Not Collected" values, and, for



some questions, “Client Prefers Not to Answer,” “Client Doesn’t Know,” and “Other” values. It also means that, as you develop relationships with clients, you revisit information that you were previously unable to collect and update the client’s record in HMIS with the new data.

Completeness also means that all homeless clients are entered into HMIS by all the providers in our CoC, and that bed occupancy is accurately recorded by all providers, because complete data provides a more accurate picture of what is going on with our clients, our programs, and our CoC.

Accuracy

Accuracy in data means that correct information is collected and entered into HMIS. It means that the answers provided by the client reflect their real-world situations. It means that the answers to the questions in HMIS match the answers that the clients gave in their interviews.

Accuracy also means that answers do not conflict with one another and that they make sense when they are considered together.



Overview of Roles and Responsibilities for Data Quality

The responsibility for maintaining high data quality lies with all the stakeholders in our CoC, including our clients, Covered Homeless Organizations’ (CHOs) program staff, CHOs’ program management, the HMIS Lead, and the CoC.

Clients	Program Staff	Program Management	HMIS Lead	CoC
<ul style="list-style-type: none"> • Provide honest, accurate, and complete answers to questions. • Update case manager when information changes. 	<ul style="list-style-type: none"> • Obtain complete answers to intake and assessment questions. • Be able to explain the meaning of any data requests to clients. • Accurately enter all data into HMIS within 48 hours of the client interview. • Resolve any data quality issues quickly and accurately. 	<ul style="list-style-type: none"> • Provide encouragement and guidance to staff to maintain high data quality. • Monitor data quality within the program. • Ensure compliance with the HMIS policies and procedures of the CoC. • Prepare for reporting requirements. 	<ul style="list-style-type: none"> • Correctly set up CHOs and projects in HMIS. • Monitor and assess data quality across the CoC. • Full-time HMIS Training Coordinator will provide training and tools for understanding and achieving high data quality. • Full-time HMIS Reporting Coordinator reviews all APRs for data quality prior to submission. • Work with the HMIS vendor on solutions for improving data quality, such as monitoring reports and validation. 	<ul style="list-style-type: none"> • Set expectations for data quality monitoring and compliance. • Set benchmarks. • Review data quality reports. • Consider data quality in ranking and review.

Encouragements and Enforcements

The CoC and the HMIS Lead work to ensure that providers have access to all the support and tools needed to maintain a high level of data quality within the HMIS. The CoC and HMIS Lead will monitor data quality, and the following encouragements and enforcements are in place to ensure providers understand the importance of data quality within HMIS.



Encouragements

- The CoC will acknowledge the work of CHOs maintaining a high level of data quality each quarter during the CoC General Membership Meeting.
- The CoC will use data quality in HMIS during the annual Ranking and Review process for CoC NOFO. Guidance on specifics of this process will be released each year with the local CoC NOFO competition process.
- The CoC HMIS Lead will work with state and local funders to also use data quality metrics when making funding allocation decisions to providers/projects. The CoC will encourage state and local funders to use the same process the CoC uses during the annual rank and review process for CoC dollars.
- The CoC will work with providers who do not currently use HMIS and talk through the reasons why they do not use HMIS. Depending on the reasons, the CoC will work with the providers to make HMIS participation a realistic option.
- The CoC will provide HMIS access to CHOs at no charge, including unlimited HMIS homeless services projects and unlimited HMIS End User Accounts. By ensuring HMIS is freely available, full participation is supported, and poor data quality practices (such as combining projects together or end users sharing HMIS user accounts as a means to save money) are eliminated.
- The CoC HMIS Lead will provide appropriate and timely HMIS Training sessions to all new users which are specific to their role and project type(s), as well as specialized training for advanced features.

Enforcements

Enforcements will depend on the nature and source of the data quality issue, and may include any or all of the following:

- Removing the ability of a user to access and enter data into HMIS if data quality becomes a consistent issue that is not acknowledged or addressed.
- Locking specific providers or users out of HMIS until they receive remedial or additional training from the HMIS Lead and show that data quality is a focus.



- Restricting additional funding, or withholding funding, from a project until the minimum threshold for participation and completion is met.
- Preventing CHOs from applying for new or additional funding during RFP processes if participation and completion requirements are not met.

Data Quality Benchmarks

This section defines the baseline goals for data quality in our CoC. It also explains the methods and metrics used to determine if the goals have been achieved.

Several of the benchmarks refer to **required fields** or **data elements**. These are HMIS data elements that are defined by HUD. A complete list of data elements, along with the rationale for and guidance on how to collect each, is available in the HMIS Data Standards Manual (US Department of Housing and Urban Development).

Consistency

Users with access to HMIS should enter data on a regular and consistent basis. The data must be collected in a uniform way, with regard to both the pieces of information that are collected and the interpretation of the questions used to collect it.

Benchmark	Description	Monitoring
All HMIS users will be trained	Before being given access to VESTA users must complete a VESTA New User training and complete "homework"	The HMIS Training Coordinator schedules and conducts all training. New users who fail to complete the VESTA New User training are not given a VESTA login and are reported to the CHO's VESTA Key Contact.



Users login regularly	Have users logged in within the last 30 days? If not, do they still require access to HMIS?	HMIS Lead runs report of user activity, follows up with inactive users.
Users understand required fields	Users understand which HMIS data elements/questions are required and what they mean.	The HMIS Lead periodically reviews key HMIS data elements to ensure responses are consistent with the intended meaning and with other interconnected data elements. Providers will be required to make corrections as needed. Participation in an HMIS Refresher Training may be required for all end users in an organization, a project, or for a specific end user, as indicated.

Timeliness

The HMIS should hold the most up-to-date information on clients being served. Newly collected information needs to be entered soon after it is collected. Information subject to change, such as income sources and amounts, must be reviewed and updated at regular intervals.

Program Type	Benchmark: Data Entry Within
Coordinated Entry	24 hours of contact with the client
Emergency Shelter	24 hours of the interaction with the client
Homelessness Prevention	48 hours of the client’s enrollment, anniversary, or exit, or of a client providing an information update
Permanent Supportive Housing	48 hours of the client’s enrollment, anniversary, or exit, or of a client providing an information update



Program Type	Benchmark: Data Entry Within
Rapid Rehousing	48 hours of the client’s enrollment, anniversary, or exit, or of a client providing an information update
Services Only	48 hours of the client’s enrollment, anniversary, or exit, or of a client providing an information update
Street Outreach	24 hours of the interaction with the client
Transitional Housing	48 hours of the client’s enrollment, anniversary, or exit, or of a client providing an information update

Monitoring of timeliness will be done through Data Timeliness reports.

Data Completeness

All required information for all clients should be entered into the HMIS. Completeness is monitored through Data Completeness reports. The HMIS Lead will monitor data completeness at least twice annually. Grant and Contract coordinators are encouraged to monitor data quarterly to monthly. CHOs are encouraged to monitor their own data monthly at a minimum. CHOs are given access to Data Completeness reports, and all project dashboards in HMIS contain real-time information about data completeness.

Benchmark	Description	Monitoring
All clients are entered into HMIS	Each client who is served has a record in HMIS and is enrolled in the project providing services.	Program management review.



Benchmark	Description	Monitoring
Project Start and Project Exit Assessments are created for each client	Each client must have a HUD Assessment at Project Start on their enrollment date, and a HUD Assessment at Project Exit on the date of their dismissal.	Report.
Annual Assessments are created for each client	An annual assessment must be completed for each client who has been in the program for 365 days. It must be dated within 30 days of their Head of Household’s anniversary date.	Report.
Missing Data Elements	Required data elements should be entered into HMIS.	Report; missing data tolerances listed below.
Minimal questions answered with Data Not Collected, Client Prefers not to Answer, and Client Doesn’t Know	These answers are counted as errors, along with missing answers.	Report; missing data tolerances listed below.

Allowable Missing Data Error Rate for Required Data Elements

The missing data tolerance is the allowable error rate for any given data element.

Program Type	Benchmark: Missing Data Tolerance
Coordinated Entry	0% s (only applies after the client reaches a specific point in the coordinated entry process)
Emergency Shelter	5%



Program Type	Benchmark: Missing Data Tolerance
Homelessness Prevention	10%
Permanent Supportive Housing	0%
Rapid Rehousing	0%
Services Only	10%
Street Outreach	10% (only applies after the client has a Date of Engagement)
Transitional Housing	2%

PSH, TH, and RRH Programs

Data Element	Applies to:	% Error Rate Should Not Exceed
Name (3.1)	All clients	1%
SSN (3.2)	All clients	10%
Date of Birth (3.3)	All clients	1%
Race and Ethnicity (3.4)	All clients	5%
Sex (4.21)	All clients	5%
Veteran Status (3.7)	All adults	1%
Disabling Condition (3.8)	All clients	1%
Income Sources (4.2) at entry	Adults & HoH	1%



Data Element	Applies to:	% Error Rate Should Not Exceed
Income and Sources (4.2) at annual assessment	Adults & HoH	1%
Income Sources (4.2) at exit	Adults & HoH leavers	5%
Living Situation (3.917) series of elements	HoH and other adults in HH	1%
Destination (3.12)	All clients	5%

Street Outreach and Emergency Shelter Programs

Data Element	Applies to:	% Error Rate or % Unable to Calculate Should Not Exceed
Name (3.1)	All clients	10%
SSN (3.2)	All clients	N/A
Date of Birth (3.3)	All clients	5%
Race and Ethnicity (3.4)	All clients	10%
Sex (4.21)	All clients	5%
Veteran Status (3.7)	All clients	5%
Disabling Condition (3.8)	All clients	5%
Income Sources (4.2) at entry	Adults & HoH	5%
Income and Sources (4.2) at annual assessment	Adults & HoH	5%



Data Element	Applies to:	% Error Rate or % Unable to Calculate Should Not Exceed
Income Sources (4.2) at exit	Adults & HoH leavers	10%
Living Situation (3.917) series of elements	HoH and other adults in HH	5%
Destination (3.12)	All clients	10%

Coverage

Coverage refers to the degree of participation in HMIS in our CoC.

Benchmark	Description	Monitoring
Participation Rate = 90%+	Are all homeless service providers in the CoC participating in our HMIS?	A list of all homeless service providers in the CoC is in HMIS with an HMIS Participation designation updated at least once annually.
Data Entry Rate = 100%	Are all participating providers entering all clients in HMIS?	Annual Evaluation.

Utilization / Bed Coverage

This looks at the inventory in HMIS and the tracking of clients using that inventory.

Benchmark	Description	Monitoring
Beds in HMIS accurate and up-to-date	Are the number of beds in HMIS accurate and up to date?	Annual Evaluation.



Benchmark	Description	Monitoring
Clients are entered / exited	Are all clients being properly entered and exited?	Reports.

Utilization

Program Type	Acceptable range of bed / unit utilization rates
Emergency Shelter	80% – 105%
Permanent Supportive Housing	85% – 105%
Rapid Rehousing	80% – 105%
Transitional Housing	80% – 105%
Safe Haven	80% – 105%

Accuracy

The information in the HMIS must correctly represent the clients who are receiving services and are free of errors.

Accuracy also means that answers do not conflict with one another and that they make sense when considered together.

Additionally, accuracy means that, if paper forms are used to collect data from clients, those forms must match the most up-to-date HMIS data standards for the program type and that the data on those forms must be accurately entered into HMIS.



Benchmark	Description	Monitoring
<p>Data in HMIS matches paper documentation</p>	<p>Is the data in HMIS the same as on documents and collected on forms?</p>	<p>Program management spot checks forms against HMIS data. Annual Evaluation.</p>
<p>Clients meet program eligibility requirements</p>	<p>If a program serves only clients with a certain characteristic (e.g., youth, veterans, women), do all clients have the relevant questions appropriately answered in HMIS reflecting that they meet project eligibility requirements?</p>	<p>Reports.</p>
<p>Answers in HMIS do not conflict with each other</p>	<ul style="list-style-type: none"> • Is Date of Birth before Project Start date? • Is Client Location a valid CoC? • Is the client under 18 but has Yes for Veteran? • Does the Relationship to Head of Household make sense? • Do the answers for the following conflict? <ul style="list-style-type: none"> ○ Disabling Condition / Health ○ Health Insurance / Sources ○ Income / Sources and Amounts ○ Non-Cash Benefits / Sources and Amounts 	<p>Reports.</p>
<p>Dismissed clients have exit assessments</p>	<p>Each dismissed client should have a HUD Assessment at Project Exit.</p>	<p>Reports.</p>

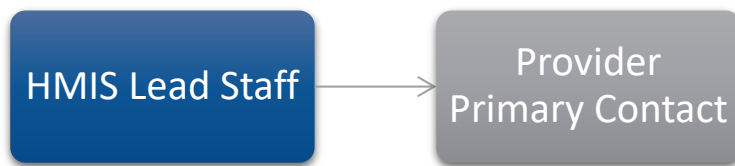


Continuous Monitoring

The HMIS Lead staff will continuously monitor data quality across the CoC’s projects and providers and provide feedback and items that require remediation on a regular basis.

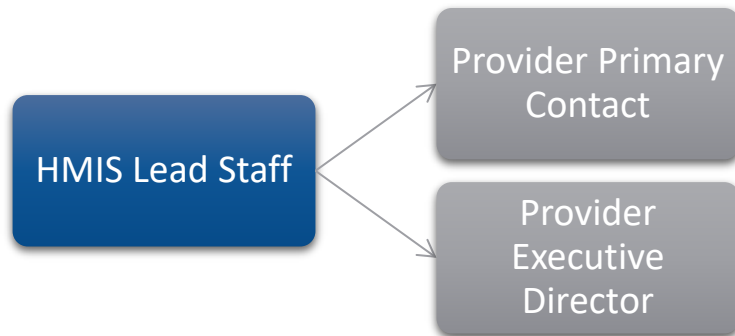
Initial Identification of Data Quality Issues

When data quality issues are identified by HMIS Lead staff, they will notify the primary contact at the project and will follow up to verify that the issues have been addressed.



Unresolved Data Quality Issues

If the data quality issues are not addressed after the initial notification, HMIS Lead staff will notify both the provider’s primary contact and the executive director at the CHO.



Persistent Data Quality Issues

If data quality issues persist, HMIS Lead staff will notify the Contract Manager for the project.



Data Quality Monitoring Annual Evaluation

The CoC or HMIS Lead staff will, when practical, make annual on-site visits to CHOs to make sure that they are compliant with HMIS policies, procedures, agreements, and notices. During the visit, the HMIS Lead staff will complete a **Data Quality Monitoring Evaluation Report** (sample in Appendix) and will provide a copy of it to program management. This report assesses how well a program is meeting the benchmarks for data quality.

When on-site visits are not practical, the HMIS Lead will conduct the evaluation remotely.

If issues with data quality are discovered during the evaluation, or at any other time, a **Data Quality Improvement Plan** (sample in Appendix) will be completed for and presented to the provider. This plan will present concrete, time-bound steps that the provider must implement to improve their data quality.

HMIS Setup and Maintenance Responsibilities

HMIS Software and HMIS Setup



The HMIS Lead is responsible for ensuring that all required data elements for each project type and funding source are available in HMIS to the projects that need them. This is done at project setup and is reviewed any time HUD releases HMIS Data Standards updates.

The HMIS Lead is also responsible for making sure that user access to HMIS balances the privacy of the clients with the users' need to access data to serve those clients.

The current HMIS used in Balance of State is VESTA by The Partnership Center, Ltd.

Organization and Project Setup

The HMIS Lead is responsible for the accurate configuration of projects in HMIS. New projects are created using the information on the **BoS CoC HMIS New Project Request Form**, which is submitted by participating in CHOs' VESTA Key Contacts. It is the responsibility of VESTA Key Contacts to fill out the New Project Request Form completely and accurately.

Naming Conventions

Consistency in naming projects in HMIS makes it easier to navigate the system. The following naming convention is used for new projects:



For example,



Project Descriptor Data Elements

The HMIS Lead ensures the accurate completion of the Project Descriptor Data Elements (PDDEs) based on the information provided in the **BoS CoC HMIS New Project Request Form**. The accuracy of these elements is vital to accurate reporting, as the choices made here determine the logic used in reporting.

Bed and Unit Inventory Information

The provider's VESTA Key Contact or Project Manager is responsible for ensuring the **Bed and Unit Inventory Information** for the project is accurate and up to date. Provider staff can inform the HMIS Lead of any needed corrections or changes via email. The HMIS Lead will maintain this information.



Appendix: Sample Forms

New Project Request Form



VESTA New Project Setup Form

Directions

Please complete the following form for each project.

Part 1: Basic Project Information

Organization: Organization Name

Is this organization a Victim Services Provider (VSP)? Yes or No If yes, do not include street address.

Project: Project Name

Street Address: Street Address

City: City ZIP: ZIP

Project Type: Project Type Target Population: Target Population.

Operating Start Date: Start Date

Is this project a subcontract? Yes or No If yes, who is the grantee? Grantee

Is homelessness a criterion for entry into this project? Yes or No

Does this project participate in coordinated entry: Yes or No

Receives CE referrals: Yes or No

RRH level for CE housing match: Select one

Household type: Select one

Does this project enter data into HMIS? Yes or No If yes, which HMIS? HMIS

Part 2: Funding Information

Source	Grant Number	Start Date	End Date
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Please select all that apply. This information in this section needs to be verified by the finance director.

Part 2a: McKinney-Vento Funding Sources

Emergency Solutions Grants Program (ESG)

- | | | | |
|--|--------------|------------|----------|
| <input type="checkbox"/> ESG – Emergency Shelter – be sure to complete part 4! | Grant Number | Start Date | End Date |
| <input type="checkbox"/> ESG – Homelessness Prevention | Grant Number | Start Date | End Date |
| <input type="checkbox"/> ESG – Rapid Re-Housing | Grant Number | Start Date | End Date |



Data Quality Monitoring Evaluation Report



Massachusetts Balance of State Continuum of Care

Data Quality Monitoring Evaluation Report

Evaluation Information

Date: _____ Click or tap to enter a date.

Provider: _____ Provider

Location: _____ Location

Provider Contact: _____ Provider Contact

Project(s): _____ User's Job Title

Provider Staff Present During Evaluation:
Click or tap here to enter names of staff present during monitoring.

Baselines

Each baseline and expectation met below accounts for (____) points for a total of (____) allowable points.

Include the specific baseline requirements for the specific project type to be monitored:

Data Completeness Baseline: _____ Baseline Met? Yes No

Data Timeliness Baseline: _____ Baseline Met? Yes No

Data Accuracy Baseline: _____ Baseline Met? Yes No

Data Consistency Expectation Met? Yes No

Coverage & Utilization Expectation Met? Yes No N/A

Total Score: _____



Data Quality Monitoring Evaluation Report for **Provider**

Observations

Each item in the **Observed** column accounts for (____) points, for a total of (____) allowable points. The combined total of the total score in the section above and the total score in the section below results in the specific project’s monitoring visit score.

- Projects with scores between (____) – (____) will be determined as **exceeding expectations**.
- Projects with scores between (____) – (____) will be determined as **meeting expectations**.
- Projects with scores between (____) – (____) will be determined as **below expectations**.
- Projects with scores between (____) – (____) will be determined as **severely at-risk**

Rows marked **Action Needed** in the **Outcome** column must include action steps with specific timelines in the **Notes** column.

Data Collection & Quality

Observed	Item	Outcome	Notes
<input type="checkbox"/>	The project has not required the use of a Data Quality Improvement Plan to address data quality issues since the last monitoring visit.	<input type="checkbox"/> Action Needed <input type="checkbox"/> In Compliance	
<input type="checkbox"/>	The organization documents the homeless status of clients served, as well as any other eligibility criteria for the project.	<input type="checkbox"/> Action Needed <input type="checkbox"/> In Compliance	
<input type="checkbox"/>	Intake workers and HMIS users understand the required data elements and how to present them to clients in a way to get accurate information.	<input type="checkbox"/> Action Needed <input type="checkbox"/> In Compliance	



Data Quality Monitoring Evaluation Report for **Provider**

Observed	Item	Outcome	Notes
<input type="checkbox"/>	The organization's paper intake forms, if applicable, include all data elements required to be entered into HMIS.	<input type="checkbox"/> Action Needed <input type="checkbox"/> In Compliance	
<input type="checkbox"/>	Random selection of client files show complete data collection process and match data entry in HMIS.	<input type="checkbox"/> Action Needed <input type="checkbox"/> In Compliance	
<input type="checkbox"/>		<input type="checkbox"/> Action Needed <input type="checkbox"/> In Compliance	

Conclusion

Data Quality Improvement Plan Needed? Yes No

If yes, has plan been created? Yes No

Notes

Person completing monitoring visit signature

Date

Monitored organization staff member signature

Date

Data Quality Improvement Plan



References

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