

**PRIORITIZATION FOR PERMANENT SUPPORTIVE HOUSING  
MI-514**

Policy 09

Approved: 8/28/2018

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- I. With the adoption of this policy, the MI-514 Battle Creek/Calhoun County Continuum of Care (CoC) seeks to increase the number of permanent supportive housing (PSH) beds available for chronically homeless persons and to achieve three goals summarized in Notice CPD-14-012 regarding the federal Department of Housing and Urban Development (HUD) program funded permanent supportive housing (PSH) beds, including:
  - A. Establish an order of priority for PSH beds that **are dedicated and prioritized for the chronically homeless (CH)** in order to ensure that those persons with the most severe service needs are given first priority.
  - B. Inform the selection process for assistance and placement in PSH beds, including upon turn-over, that **are not dedicated or prioritized for the chronically homeless (CH)** in order to prioritize persons who do not yet meet the definition of chronic homelessness but are most at risk of becoming chronically homeless.
  - C. Provide uniform recordkeeping requirements for all recipients of CoC program-funded PSH for documenting chronically homeless status of program participants (when required) and to provide guidance on recommended documentation standards.
  
- II. PSH beds shall be filled, *to the maximum extent possible*, based on Housing First principals and the guidance provided by the Department of Housing and Urban Development (HUD) notice listed below and cross referenced in 24 CFR (Code of Federal Regulations) Parts 578 and 43 U.S.C. 11381, et seq.
  - A. Agency Reference: Notice CPD-14-012, Prioritizing Persons Experiencing Chronic Homelessness and Other Vulnerable Homeless Persons in Permanent Supportive Housing and Recordkeeping Requirements for Documenting Chronic Homeless Status.
  - B. CoC agencies with PSH funded beds are responsible for compliance with this policy and the guidance provided in Notice CPD-14-012. A copy of the full notice can be found on the HUD Exchange web-site; the address is as follows:  
<https://www.hudexchange.info/resources/documents/Notice-CPD-14-012-Prioritizing-Persons-Experiences-Chronic-Homelessness-in-PSH-and-Recordkeeping-Requirements.pdf>
  
- III. Selecting chronically homeless households to fill CoC Program-funded PSH beds.
  - A. For the definition for chronically homeless, see Section I.D. of the Notice and Attachment 1 to this Policy.
  - B. For PSH beds that **are dedicated and prioritized to serve the chronically homeless**, the following Order of Priority should be utilized:
    1. Chronically Homeless Individuals and Families with the longest history of homelessness and with the most severe service needs.
    2. Chronically Homeless Individuals and Families with the longest history of homelessness.
    3. Chronically Homeless Individuals and Families with the most severe service needs.
    4. All other chronically homeless individuals and families.
    5. For details see Section III. A. of the Notice.

- C. For placement in PSH beds (including upon bed turn-over) that **are not dedicated or prioritized for the chronically homeless**, the following Order of Priority should be utilized:
1. Homeless Individuals and Families with a disability with the most severe service needs.
  2. Homeless Individuals and Families with a disability with a long period of continuous or episodic homelessness.
  3. Homeless Individuals and Families with disability coming from places not meant for human habitation, safe havens, or emergency shelters.
  4. Homeless Individuals and Families with a disability coming from transitional housing.
  5. Agencies should strive to help the chronically homeless address program requirement barriers that might otherwise exclude them from qualifying for CoC housing. For details, see Section III. B. of the Notice.
- IV. Recordkeeping Requirements. HUD requires CoCs to maintain evidence of implementing these priorities. Details for the following categories can be found in Section V of the notice.
- A. CoC Records
  - B. Recordkeeping Requirement
  - C. Recordkeeping Recommendations for CoCs that have adopted the order of priority in this notice.
- V. Agency Requirements. Each agency that is funded by the CoC must be able to provide evidence that they are following the Policy for Prioritizing PSH beds. Agencies must:
- A. Document that this CoC's policy has incorporated into the Recipient's intake procedures AND that the Recipient is following them in their practice.
  - B. Prioritization is based on the score generated by the Coordinated Assessment Tool utilized by the CoC including all versions of the Service Prioritization Decision Assistance Tool or as it is commonly referred to, the SPDAT.

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## **Definitions**

*Housing First:* A model of housing assistance that prioritizes rapid placement and stabilization in permanent housing that does not have service participation requirements or preconditions for entry (such as sobriety or a minimum income threshold). HUD encourages all recipients of CoC program-funded PSH to follow a Housing First approach to the maximum extent practicable.

*Chronically Homeless:* the definition of "chronically homeless", as stated in Definition of Chronically Homeless final rule is:

- (a) A "homeless individual with a disability," as defined in section 401 (9) of the McKinney-Vent 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 (a)(i) continuously for at least 12 months or on at least four 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 (a)(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 individuals was living or residing in a place not meant for human habitation, a safe haven, or an emergency shelter immediately before entering an institutional care facility;

- (b) An individual who has been rising 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 (a) of this definition, before entering the facility;
- (c) 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 (a) or (b) of this definition (as described in Section I.D.2.(a) of this Notice), including a family whose composition has fluctuated while the head of household has been homeless.

*Severity of Service Needs:* this Notice refers to persons who have been identified as having the most severe service needs.

- (a) For the purpose of this Notice, this means an individual for whom at least once of the following is true:
  - i. History of high utilization of crisis services, which include but are not limited to, emergency rooms, jails, and psychiatric facilities; and/or
  - ii. Significant health or behavioral health challenges, substance use disorders, or functional impairments which require a significant level of support in order to maintain permanent housing.
  - iii. For youth and victims of domestic violence, high risk of continued trauma or high risk of harm or exposure to very dangerous living situations.
  - iv. When applicable CoCs and recipients of CoC program-funded PSH may use an alternate criteria used by Medicaid departments to identify high-need, high cost beneficiaries.

Severe service needs as defined in paragraphs i.-iv. Above should be identified and verified through data-driven methods such as an administrative data match or through the use of a standardized assessment tool and process and should be documented in a program participant's case file. The determination must not be based on a specific diagnosis or disability type, but only on the severity of needs of the individual. The determination cannot be made based on any factors that would result in a violation of any nondiscrimination and equal opportunity requirements, see 24 C.F.R § 5.105(a).