CONTINUUM OF CARE (CoC) BOARD

MARCH 15, 2023 | 3:00-5:00PM

VIRTUAL MEETING

TIME	AGENDA ITEM
3:00pm	1. Call to Order
3:03pm	2. Welcome/Introductions
3:05pm	3. Public Comment
3:10pm	4. Approval of Agenda (ACTION)
3:12pm	5. Approval of Minutes (ACTION)
3:15pm	6. New Winter Shelter Planning Taskforce (ACTION)
3:40pm	7. MSHDA Shelter Diversion Pilot: Letter of Support (ACTION)
3:50pm	8. MSHDA NOFA: Housing Navigation Program (ACTION)
4:00pm	9. Coordinated Entry System Updates: a. HAWC Call Center January and February Data – Andrew Kraemer, OCED HAWC Organizational Chart – *Kristin Kunes, OCED* HAWC Call Center Workflow – *Veronica Brandon, OCED* b. HAWC Individual Assessment Workflow and Agency Updates– *Dan Kelly, SAWC* c. HAWC Family Assessment Workflow and Agency Updates– *Rhonda Weathers, SOS*
4:40pm	10. HUD HOME ARP: Washtenaw County's Allocation Plan – *Andrew Kraemer, OCED*
4:45pm	11. 2023-2027 Five-Year Consolidated Plan & 2023 Annual Action Plan– *Andrew Kraemer, OCED*
4:50pm	12. Public Comment
5:00pm	13. Adjournment

Key Terms:

- Michigan State Housing Development Authority (MSHDA)
- Notice of Funding Availability (NOFA)
- United States Department of Housing and Urban Development (HUD)
- America Rescue Plan (ARP)

Board Position	Board Member
WHA Director	Amanda Carlisle, Director, Washtenaw Housing Alliance (WHA)
CoC At-Large	Aubrey Patiño, Avalon Housing
Homeless or Housing Program	Dan Kelly, Shelter Association of Washtenaw County (SAWC)
Homeless or Housing Program	Jan Little, Michigan Ability Partners (MAP)
Faith Community	Jim Mogensen, Religious Action for Affordable Housing (RAAH)
Domestic Violence Provider Representative	Kim Montgomery, SafeHouse Center Services Director
WHA Board Member	Rhonda Weathers, SOS Community Services
Police/Sherriff	Sheriff Jerry Clayton, Washtenaw County Sheriff OR Kathy Wyatt
OCED Director	Director OR Morghan Williams Boydston, Human Services Manager
Housing Commissions	Jennifer Hall, Director of Ann Arbor Housing Commission (AAHC)
Workforce Development	Johnny Epps, Michigan Works Southeast
CMH Director	Katie Hoener, Community Mental Health OR Melisa Tasker, Community Mental Health (CMH)
Housing Access for Washtenaw County	Veronica Brandon, HAWC Supervisor
Substance Abuse Coordinating Agency Director	Nicole Adelman, Community Mental Health Partnership of Southeast Michigan (CMHPSM)
Another Township or City Highest Elected Official	Renee Smith, City of Ypsilanti
Public Health Director	Ruth Kraut, Deputy Health Officer
CoC At-Large	Tish Lee, Legal Services of South Central Michigan (LSSCM)
Housing Commissions	Zachary Fosler, Director of Ypsilanti Housing Commission (YHC)
City of Ann Arbor Mayor	John Hieftje, Former Mayor
McKinney Vento Liaison	Kellie Rutledge, Ozone House Director OR Pam Cornell-Allen, Ozone House Associate Director
Currently/Formerly Homeless	Jennifer Monahan, Washtenaw Intermediate School District (WISD)
Michigan Department of Health and Human Services Director	Renee Adorjan, MDHHS Director OR Alice Seipelt, Community Coordinator
Veterans Administration	Gabriel Parra, Health Care for Homeless Veterans Coordinator
Washtenaw County Board Chair	Greg Dill, County Administrator OR Andrew LaBarre, County Commissioner
Private Funder	Jillian Rosen, VP for Community Investment for Ann Arbor Area Community Foundation
Police/Sherriff	Vacant
Police/Sherriff	Deputy Chief Jason Forsberg, Ann Arbor Police Department
WHA Board Member	Vacant
CoC Non-Funded Agency	Vacant
Institute of Higher Education	Vacant

CONTINUUM OF CARE (CoC) BOARD

JANUARY 18, 2023 | 3:00-5:00PM

Virtual Meeting

Board members present: A. Carlisle, A. Patiño, J. Hieftje, T. Lee, K. Wyatt (for WCSO), R. Kraut, J. Hall, J. Mogensen, J. Epps, N. Adelman, P. Cornell-Allen (for Ozone House), R. Smith, D. Kelly, S. Moffat (for MAP), L. Alexander (for SOS Community Services), T. Gillotti, K. Montgomery, Z. Fosler, M. Tasker (for CMH), B. Goodwill

Board members not present themselves or by proxy: R. Adorjan (DHHS), J. Monahan (WISD), S. Dowling (VA), J. Rosen (AACF), G. Dill, T. DeGiusti (YPD), J. Forsberg (AAPD) Community members present: M. Behnke, R. Mahdi, C. Price, K. Rutledge, V. Daffin

OCED staff present: M. Boydston, K. Kunes, A. Kraemer, E. Tenniswood

TIME	AGENDA ITEM
3:00pm	• Call to Order J. Hieftje called the meeting to order.
3:03pm	• Welcome/Introductions
3:05pm	• Public Comment None.
3:10pm	• Approval of Agenda (ACTION) J. Little moved to approve the agenda. R. Smith seconded. There was no further discussion and the motion carried without opposition.
3:12pm 3:15pm	• Approval of Minutes (ACTION) T. Lee moved to approve the minutes. R. Weathers seconded. There were no calls for corrections or changes. • LIHTC Support Letters and Upcoming Housing Developments – *Wendy Carty-Saxon, Avalon Housing & Jennifer Hall, Ann Arbor Housing Commission* (ACTION) W. Carty-Saxon offered quick clarification on the Action Item: AAHC is only involved on the Catherine site. There are renderings in the package. It is a city owned lot. The city and AAHC put out a RFP, and Avalon responded and was selected. They are proposing 66 units (6 stories with mainly one bedroom apartments). Half units are for affordable housing. Development wants to recognize and honor the history, so they reached out for community engagement and formed a community leadership to inform the design and strategy of the development. If awarded, construction would start early 2024 and end late 2025/early 2026. J. Hieftje asked for questions and/or comments. A. Carlisle asked about the two-bedroom units. W. Carty-Saxon responded that the two-bedroom units were due to the architecture of the unit and that they

	offer options for those that have a caregiver. D. Kelly inquired about the ratio of PSH. W. Carty-Saxon clarified that half the units would be PSH. D. Kelly and J. Hieftje expressed gratitude and excitement for this development. W. Carty-Saxon passed it over to M. Appel. There is a rendering in the packet. The purchase agreement is with the city. The building had a fire under a prior owner, resulting in the city's ownership of the building due to back taxes. Avalon responded to an RFP and was chosen. Renovation isn't practical or appropriate, so the building will be demolished for a 22-apartment unit construction. The shed and chicken cook will be kept because they are historic. They will all be one bedroom with 8 units for supportive housing and the remainder of the units targeted towards 60% plus AMI folks. This is the first ownership opportunity in the city of Ypsi. J. Hieftje asked for questions and/or comments. A. Carlisle expressed excited about this development. J. Little moved and A. Carlisle seconded. D. Goldbaum asked for clarification on what the action item is. A. Patino, W. Carty-Saxon, and J. Hall abstained from voting.
3:25pm	• Homeless Veterans' Reintegration Program (HVRP) Support Letter – *Miranda Moffat, Michigan Ability Partners (MAP)* (ACTION) The next action item was moved by A. Patino and seconded by R. Smith. M. Moffat reviewed the request for the reapplication of the HVRP application. The grant is through the Department of Labor. It was last awarded in 2020. They work with veterans who are actively homeless on aspects like resume development, job skills, assisting with applications, and financial resources. They are seeking a letter of support for the grant that is not live yet. There were no questions or concerns. All in favor. There was no further discussion, and the motion was carried with no opposition. J. Little abstained from voting.
3:32pm	• Staples Hope House Support Letter – *Auston Schneider, Salvation Army of Washtenaw County* (ACTION) The next action item was moved by R. Smith and seconded by J. Mogensen. A. Schneider is the Program Coordinator for the program. They have 11 GPD beds and are reapplying for the 2024 NOFO. They are seeking a support letter for the upcoming grant year. The update on the relocation: all at 3660 Packard,

	which used to be the family shelter but is now the Veterans shelter. There were no questions or concerns. All in favor. There was no further discussion, and the motion was carried with no opposition. B. Goodwill abstained from voting.
3:40pm	• Bridge Housing Model Support Letter – *Jan Little, Michigan Ability Partners (MAP)* (ACTION) The next action item was moved by A. Carlisle and seconded by A. Patino. J. Little presented that they have had this grant since 1999, it was transitional housing, but it is now bridge housing. MAP is asking for support in a reduction of beds. Since 2007, they have had 12 beds. Based on referrals and community need, there is not a need for 23 beds. MAP is reducing from 12 to 6 beds (in Ann Arbor) and will no longer be operating the Home Zone program. The request is to continue the program but with a reduction. They have a 93% exit to PH rate. R. Kraut asked how do you know there isn't a demand? J. Little said we have had a continual decrease since last year and several community meetings with the VA to look at the numbers, and the decrease is a national tread. This NOFO is due in February with a term start date of 10/1/2023-9/2024 for the 3-year grant. If there is a higher need at a later date, it can be reviewed. A. Carlisle will be presenting on the system modeling which will reflect our numbers. A. Carlisle said as part of our Built for Zero initiative and system modeling, we are pretty confident that taking 6 beds offline will not disrupt the needs of veterans. This is a great example of investing in housing first programs and shows that we don't need the same level of temporary beds anymore. J. Little said I am talking with community partners on what needs are not being met. The housing we own with the 6 beds is one large, very old home in Whitemore lake (Washtenaw County). The 6 beds won't take effect until 10/1/2023. T. Lee said J. Little answered my question. D. Goldbaum said to J. Little if you are looking for children and families who need a place to stay, a woman was dumped at Delonis with a baby. We need a letter of support.
3:45pm	• Housing Access for Washtenaw County (HAWC) Call Center Data: November and December– *Andrew Kraemer, OCED* A. Kraemer said that total calls are down from last month. The biggest spike was in the middle of the month. The wait time was still high, and we did see an

increase in Diversion calls.

B. Goodwill asked if we are seeing the end of CERA impacting HAWC? A. Kraemer said we are seeing a large increase in the number of families (the number of people in those families is also higher). The end of the COVID programs is hitting families harder.

A. Carlisle asked if we can add the time to assessment and time to prevention appointment in future additions of the HAWC data? Also, what is a successfully completed call? A. Kraemer said it means that the task they called for was successfully completed.

K. Kunes said we can add the number of voice messages monthly and other metrics to capture the full picture.

J. Mogensen said we need a consistent Community Narrative so the information doesn't get misinterpreted.

R. Kraut said in an ideal world, an assessment would be completed in the same week. K. Kunes clarified who does assessments (SAWC and SOS) and said HAWC does intake.

R. Weathers discussed understanding the change in call volume and whether that is related to need or people giving up on the system. Friends in Deed requests has gone up dramatically.

A. Carlisle said I think the labeling on the HAWC report is misleading, we should refine it to be successfully completed calls to the community standard from Intake to Assessment.

D. Goldbaum said I appreciate the clarification. Is there a multiple tiered intake process? Eliminating that could be an idea to expedite people that are urgent.

J. Laye said having the number of voicemails and turnaround time for a return call would be helpful.

A. Patino said I'm surprised by how many calls are "non housing related." If those are coded, it would be helpful to understand what those calls are for, and if or how the community could better clarify the purpose of HAWC to reduce those calls from clogging up the call center. A. Patino said it would be helpful if the report stated the community standards each time. Then we can measure where we're at against the community standards on the report, so that everyone can see the discrepancy or if we're in compliance with our standards.

3:50pm	A. Carlisle said as the community understands it - and how HAWC has operated in the past - HAWC IS inclusive of SOS and SAWC since they're handling shelter assessments, referrals, and prevention assessments. This is part of Coordinated Entry / HARA responsibilities. • Emergency Hoteling Updates – *Morghan Boydston, OCED* M. Boydston said to date, we have 101 days from the first call to HAWC to housing placement. We are prepared to shelter folks in hotel and provide a stipend through the end of March effective this Friday, January 20. S. Patrick asked is this only for families? M. Boydston said individuals already have a winter sheltering program so this is to support families. S. Patrick asked what if the older adult has cancer or other circumstances, could they be prioritized? M. Boydston said let me take that back because I don't want to say yes if we don't have a policy to support that. A. Patino said I do want to say from a process standpoint, D. Goldbaum, you noted that we left the last Board meeting voting to approve a letter. I did email asking about that and we were provided an update. Do we have a sense of total amount needed? What does first come first serve mean? Are these families are being added to the HCV Waitlist? M. Boydston said $50,000 doesn't reflect the need but simply what the county admin could approve. When last calculated, it was $995,000 to shelter the amount of families that have been assessed and are on the waitlist. We are hoping not to shelter folks for the 101 days it takes them to get to the housing resource. First come first serve, we will be starting with the 25 families who have been assessed and deemed literally homeless. We will then work on the list of families waiting for an appointment. We hope to refer same day. I do worry about available hotel units. We don't have the resources for every family that needs to be hoteled. Unnamed community member said thank you for your tireless effort, M. Boydston. Right now there is a gap in getting families fully assessed. Is this available at the Intake level? M. Boydston answered that is the goal. We don't yet know how long it will take before we can offer this at Intake. This is the first time we are doing a program like this. Once we have that information we will share it. K. Wyatt said to be hoteled, you have to go through HAWC and have had an Family Shelter Assessment. Judges are very concerned right now. D. Goldbaum asked the programs we are talking about will take us through the

	winter, is that correct? M. Boydston answered what I am prepared to say is that this is a program we will run through March. I can't speak to beyond that. J. Hall said I want to make sure we stress to folks to call HAWC. M. Boydston said we need to set a precedent that this is a need. Up until this point, Individuals have been supported through the winter. We've been under the impression that Families didn't need this support. It is hard to advocate for resources if there isn't the evidence that it is needed. I want this program to overflow to the point where we don't have to write a letter because the need is so obvious. J. Hieftje said we will keep talking about these issues moving forward.
4:00pm	• New Subcommittee (OCED, Shelter Association of Washtenaw County, SOS Community Services, Avalon Housing, and HAWC)– *Kristin Kunes, OCED* K.Kunes said there was a new Subcommittee created for the Subrecipients of the MSHDA ESG grant to ensure close coordination and collaboration as we continue to improve and enhance our Coordinated Entry System. This subcommittee meets on a Bi-Weekly basis and is intended to just be between the key partners (OCED, Avalon, SAWC, SOS, and HAWC). This Subcommittee will regularly report back to the Coordinated Entry Oversight & Evaluation Committee who will continue to be tasked to assess and evaluate the effectiveness of the county's centralized intake process. At the January Coordinated Entry Meeting, Committee roles and responsibilities were discussed as SOS (a new MSHDA ESG Subrecipient) is the Chair. It was requested that this role be filled by a non MSHDA ESG Subrecipient. In the absence of any other interest, A.Carlisle (WHA) volunteered to fill the role on an Interim basis. If anyone is interested in stepping into this role, please email K.Kunes and A. Carlisle. K.Kunes offers logistical support around the Agenda and Minutes.

4:00pm	• Coordinated Entry System Updates:
	  • HCV, Call Center Staffing and Updates – *Morghan Boydston, OCED*
	  M. Boydston said we are serving as the HARA, call center lead. Washtenaw County now staffs the call center, we have seven staff, we manage the Ring Central software, we make referrals to assessment agencies, and we have a temporary Supervisor in the interim period while we hire and train for the HCV case manager. Veronica Brandon (temporary HAWC supervisor) will help with recertifying families.
	  • Shelter Assessment Appointments, HCV, and Staffing Updates – *Dan Kelly, SAWC*
	  D. Kelly said we are doing final interviews for the two open positions to bolster up the efforts. We want to get to real time assessments to

	minimize the delay, so folks have access to basic needs. We are 1-2 weeks behind on Individual Assessments. We offer walk-ins for anyone with more urgent needs as long as they have the referral (M-F 8:30-5pm). HCVs are being done at the time of assessment. We are working with PATH for folks that have increased vulnerability to be on the list. Reach out to Christina Johnson so no one falls off the list. People at risk of homelessness are not eligible. • Shelter Assessment Appointments, Prevention Appointments, and Staffing Updates – *Rhonda Weathers, SOS* R. Weathers said SOS has hired three people who are cross-trained to do both FSA and Prevention. Their training is just coming to completion, the MSHDA training was really helpful, and staff will be taking on more FSA and Preventions, and working on the backlog. They are finding that families are no longer in need of the assessment. The backlog will be addressed in the next two weeks. The goal is to make the standards of an Intake to an Assessment within 72 hours. A question was asked about who was handling HCV's. M. Boydston said we are sharing this role internally and need to confirm the workflow to make sure there isn't a disruption for the families (i.e. Intake with HAWC, FSA with SOS, back to HAWC for HCV). K. Wyatt asked is the funding structural or temporary? M. Boydston said no one has the long-term funds needed to fund this work. K. Wyatt asked can this group advocate for full funding to have full staffing (which has been a chronic issue)?
4:15pm	• CoC System Modeling – *Amanda Carlisle, WHA* A. Carlisle said the slide deck will be emailed after. The purpose is to provide information about the project and to share the long-term needs. We are sharing the draft findings to incorporate feedback into the final report. It is essentially a needs assessment and gaps analysis. It is categorized by intervention type, and by population and subpopulation. With COVID and staffing capacity, this report has had delays in coming to fruition (3 years in the making). The report was prepared by CSH. We reviewed definitions, data sources, and community need. It is estimated that 95% of families will need PSH. The need for PSH dips for families experiencing homelessness but not chronically. We need to lean more heavily on development than leasing because of the issues in Ann Arbor available units.

4:35pm	• Future Board Meetings: Platform/Format Poll – *Kristin Kunes, OCED*
4:40pm	• Shelter (Individuals) and Warming Center Updates • *Dan Kelly, SAWC*
4:45pm	• Youth Permanent Supportive Housing Update – *Kellie Rutledge, Ozone House* K. Rutledge We were asked to provide an update. We have had this project, a 4-unit scattered site for families. There were conversations last year to switch this project from Ozone House to Avalon. There were questions from the Executive Committee. P. Allen said this is a project that has been active since 2012. We have had folks transition out of the project. We were able to work with them to secure other housing opportunities. We recognized that prior to the pandemic, operating a scattered site isn't the best fit for Ozone House. We communicated we wanted to give the project back to the CoC in the summer. We are trying to figure out the best way forward given the staffing capacity and transition that would come at the end of November. We would like to talk to other providers to finalize the transition. These are young families with HH ages 18-24 with disabilities.
4:50pm	• Board Member Updates/Issues J. Mogensen said I wanted to give an update about getting the SSW in the system bus tokens. Small parishes are offering funds to support bus tokens. Those interested in this resource can put their email in the chat and I will share more details. A. Patino said I encourage people to offer support at the Ypsilanti planning commission meeting tonight where they're doing the first reading of an amendment to their zoning ordinance on supportive housing. It is to treat supportive housing the same as other residential dwellings, and as dictated by the Fair Housing Amendments Act laws that apply to zoning and planning. I have to hop off, but here's the agenda.
4:55pm	• Public Comment None.
5:00pm	• Adjournment

ACTION ITEM SUMMARY

CONTINUUM OF CARE (CoC) BOARD | March 15, 2023

New Winter Shelter Planning Taskforce

During the 2022-2023 winter, the homeless system of care has seen an increase in utilization of winter programs for single adults and a rise in family homelessness. A new, temporary emergency hoteling program was created to address this critical need and is ending April 1, 2023. The CoC had a taskforce which aided in planning for winter shelter during the 2014-2015 and 2015-2016 years. Given the 2022-2023 winter the homeless system of care faced, a new Winter Shelter Planning Taskforce will help analyze existing data and programs for winter shelter, research best practices for providing winter shelter in Michigan climate, develop strategies and recommendations, and identify funding necessary to provide winter shelter for all populations. The goal of this Winter Shelter Planning Taskforce is to identify a resolution by August 31, 2023 in preparation for the next winter season.

Current Action Needed:

Creation of a new Winter Shelter Planning Taskforce

Motion:

The CoC Board approves the formation of the Winter Shelter Planning Taskforce.

Letter of Support for MSHDA's Shelter Diversion Pilot

On February 17, 2023, the Michigan State Housing Development Authority (MSHDA) launched a $3 Million Shelter Diversion Pilot. MSHDA is seeking proposals from eligible agencies to implement or expand effective shelter diversion models. This pilot will demonstrate the impact of effective shelter diversion on homeless crisis response systems and, more importantly, the impact on households at risk of or currently experiencing homelessness. On March 3rd, a community meeting was held to discuss this Funding Opportunity and review past Washtenaw County diversion efforts and data. Those that attended the community meeting expressed support of submitting a proposal on behalf of Washtenaw County given the demonstrated performance in diversion, opportunity to expand existing efforts, and the potential to reduce existing system strain around Shelter Assessments through an upstream approach.

Current Action Needed:

Approval of signed letter of support for Washtenaw County's Shelter Diversion Pilot Application

Motion:

The CoC Board supports the signing of a support letter for Washtenaw County's Shelter Diversion Pilot Application.

MSHDA NOFA: Housing Navigation Program (HNP)

On March 1, 2023, MSHDA published a Notice of Funding Availability (NOFA) for their Housing Navigation Program (HNP). The HNP is part of MSHDA's HOME-ARP Allocation Plan. HNP is a two-year grant (May 1, 2023-April 30,2025) that provides staffing support for the delivery of services to households who qualify per HOME-ARP eligibility criteria. Funds awarded can be used to support households that are linked to the Homeless Preference Housing Choice Voucher (HCV) program or other HUD CoC or Emergency Solutions

Grant (ESG) housing programs. Services include, but are not limited to robust housing search assistance, completion of any required eligibility paperwork to access rental assistance, completion of any required annual recertification paperwork to maintain eligibility and rental assistance, landlord mediation, and other services identified in partnership with the household to support housing retention and stabilization. Washtenaw County is allocated $150,000 (Minimum of 1 Full-Time Employee) under this program. While an application is required, this allocation is guaranteed and the CoC is responsible for designating a Subrecipient(s). The CoC was notified via email on March 3rd of this funding availability. Interested parties were advised to email Kristin Kunes, kunesk@washtenaw.org, and attend MSHDA's Informational Webinar on March 8th, 2023. To date, Shelter Association of Washtenaw County (SAWC) and SOS Community Services have expressed interest. Washtenaw County's HNP Application is due April 7th. Due to this deadline, there is not time to go through Washtenaw County's traditional funding process which involves both the Funding Review Team (FRT) and CoC Board.

Current Action Needed:

Approval of allocating sole decision-making power for this NOFA to the Funding Review Team (FRT).

Motion:

The CoC Board supports the sole decision-making power of the FRT for this funding opportunity.

Washtenaw County
2014-15 Winter Shelter Response
Work Group Report

Executive Summary

Given the limited supply of affordable housing and the increasing pressure on emergency shelter, it is no surprise that we have huge demands on the existing capacity of the emergency shelter system in Washtenaw County during severe weather. A work group was formed to evaluate the issue and come up with recommended improvements. Thanks to willing community partners from multiple sectors rising to the occasion, recommended improvements for the community's response to those experiencing homelessness during severe weather are at hand.

The recommendations include: (1) an expanded overnight warming center to be housed in three churches on a rotating basis from January to March 2015 and staffed by the Shelter Association of Washtenaw County (SAWC); (2) an expanded daytime warming center to be housed in the Delonis Center and staffed by the Shelter Association of Washtenaw County; (3) expanded presence of Washtenaw County Community Support and Treatment Services (CSTS) staff at the downtown branch of the Ann Arbor District Library during cold weather emergencies; and (4) increased availability of emergency hotel/motel funding for CSTS.

It is important to note these recommendations are an intermediary solution to keep people safe in our community while we continue to work on more permanent solutions for those experiencing homelessness.

In addition to significant in-kind contribution from local churches, SAWC and CSTS, recommended improvements will require $179,000 to operate for this coming winter season, and the work group is requesting that the Ann Arbor City Council and the Washtenaw County Commissioners contribute to this need.

2014-15 Winter Shelter Response Work Group Report

October 13, 2014

Background

The 2013-14 winter season was particularly brutal for Washtenaw County residents – and no more so for those most vulnerable residents struggling with homelessness. The local sheltering system was stretched beyond capacity to accommodate the overwhelming demand for safe, warm space during the near-constant emergency weather conditions. Despite best efforts on the part of local elected officials, service providers and community stakeholders, the local response could have been more deliberate and better planned.

To that end, the Office of Community & Economic Development – on behalf of the City of Ann Arbor, Washtenaw County, and the local Continuum of Care Board – and the Washtenaw Housing Alliance convened a Winter Emergency Shelter/Warming Center Response work group. The work group was charged with developing a more coordinated and effective response to the demands on our housing and homelessness system of care for the 2014-15 winter.

The workgroup included members from both City and County governments, mental health and substance abuse agencies, the local shelter, and community leaders:

- Mary Jo Callan, Washtenaw County Office of Community & Economic Development
- Amanda Carlisle, Washtenaw Housing Alliance
- Trish Cortes, Washtenaw County Community Support & Treatment Services
- Brett Lenart, Washtenaw County Office of Community & Economic Development
- John Loring, Washtenaw County Community Support & Treatment Services
- Doug Martelle, Ann Arbor Police Department
- Verna McDaniel, Washtenaw County & the Washtenaw Housing Alliance
- Josie Parker, Ann Arbor District Library
- Andrea Plevek, Washtenaw County Office of Community & Economic Development
- Caleb Poirier, MISSION
- Susan Pollay, Ann Arbor Downtown Development Authority
- Steve Powers, City of Ann Arbor & the Washtenaw Housing Alliance
- Marci Scalera, Washtenaw Community Health Organization
- Ellen Schulmeister, Shelter Association of Washtenaw County (SAWC)
- John Seto, Ann Arbor Police Department

The workgroup met for the first time on August 1, 2014. Over the next several months, the workgroup proceeded to review the scope of the problem, surface and evaluate a set of possible solutions, and explore a variety of community partnerships and funding sources. At this time, the workgroup is

prepared to submit recommendations to the Ann Arbor City Council and the Washtenaw County Commissioners, as well as any other funders or entities which have yet to be identified, for consideration and possible financial support.

This document sets forth those recommendations. The work group wishes to emphasize that the options presented here represent interim improvements, intended only to respond to the immediate needs presented by the winter season of 2014-15. The community's long-term emergency shelter and warming center needs must be considered as a part of a more comprehensive and systemic process wherein the community's Blueprint to End Homelessness will be updated. The Blueprint update is underway, and will be concluded in 2015.

Discussion

The current community resources available to provide emergency shelter or warming center space for persons experiencing homelessness are limited. The following table identifies current resources, their seasonal availability, and the capacity they can reasonably serve.

Current Overnight Shelter/Warming Center Spaces – Individual Adults Only			
Service Provider	**Physical Location**	**Availability**	**# Beds**
SAWC[1]	Delonis Center	Year Round	75[2]
SAWC	Churches (Rotating)	Winter-only	25
SAWC	Delonis Center	Winter-only	50
Salvation Army	Staples Center	Year Round	32[3]
SafeHouse	SafeHouse	Year Round	46[4]

During the 2013-14 'polar vortex,' the Delonis Center provided the only emergency-access overnight warming center space in the community. Providing this function, while crucial, significantly exceeded the Center's physical and staffing capacity. At numerous points during the winter season, the Delonis Center's nightly capacity soared to nearly double the 50 persons that space can appropriately accommodate. This demand for space during the winter season is consistent with findings from the community's local homelessness data. During the January 2013 Point in Time (PIT) Count, 166 persons were identified as living on the streets in Washtenaw County – a number that would exceed our existing overnight emergency warming center capacity by nearly 100 people.

In addition to the demand for safe, decent overnight space for residents experiencing homelessness, the temperatures of last winter also made daytime space challenging as well. The Delonis Center historically operated a daytime warming center on its main floor only during 'weather-amnesty' (when

[1] Shelter Association of Washtenaw County
[2] Emergency Shelter beds are filled on through the centralized intake process (Housing Access of Washtenaw County) and are almost always full.
[3] Beds are used for both individuals and families; the configuration is dependent on demand at any given time.
[4] Beds are available for survivors of domestic violence only.

temperatures dropped to 10°F or below); last winter's near-constant frigid weather required the use of daytime warming space much more often than anticipated. The downtown branch of the Ann Arbor District Library also became an ad-hoc warming center for those who could not or would not use the Delonis Center during extremely cold days. In addition to these formal and informal spaces for daytime warming center use, numerous churches and nonprofit entities in the community offered up their spaces for people with nowhere else to go during below-freezing temperature days as well.

Though we may not experience another 'polar vortex' winter, the workgroup determined that the ad hoc nature of our emergency overnight and daytime warming center space in the 2013-14 year could be improved with increased coordination and some additional, consistent capacity.

Warming Center Recommendations

Based upon their review of the previous winter response and capacity, as well as the local data and experiences as shared by both providers and community members, the workgroup concluded that both additional overnight and daytime warming center space would be needed for an improved response to emergency shelter/warming center needs in the 2014-15 winter season.

In order to ensure that there is sufficient capacity during the highest-use months (January, February and March) in which the Delonis Center was pushed beyond capacity in the 2013-14 winter, the workgroup recommends the creation of a rotating overnight (7pm to 7am) warming center to be housed at a series of three churches (with each church providing 7 days/week space for 50 individual adults for one month). This expanded overnight capacity will allow the Delonis Center to maintain safe and appropriate numbers in its facility with the rotating church model in place to provide capacity for overflow. The budget below accounts for 4.5FTE in staffing for three months as well as laundry costs, supplies, and transportation for individuals to get from the Delonis Center to the overnight warming center.

Recommended New Overnight Warming Center Spaces					
Priority	**Service Provider**	**Physical Location**	**Availability**	**# People**	**Cost**
1	SAWC	Churches* (Rotating)	*Nighttime*; Jan - March	50	$71,611
**Work Group members are working closely with SAWC to solidify commitments from three local churches, each of which will provide one month of overnight warming-center space for the period of January 1, 2015 to March 31, 2015. The three churches offering preliminary commitments include: Bethlehem United Church of Christ, Crossroads Community Baptist, and St. Andrew's Episcopal.*					

While the 2013-14 winter season included some weather-dependent daytime warming center response – both at the Delonis Center and at local churches – the work group determined that the community would benefit from a consistent daytime warming center space for the winter months (November to March) so individuals always have a place to go. The work group also agreed that the priority for this warming center space would be the Delonis Center, if sufficient funding were identified to appropriately staff the warming center.

Option #1 below identifies this daytime option for the full 5 month winter season. Should a lesser amount of funding be identified, a truncated version of Option #1 could be considered, with service running only from January through March 2015 ($56,763). Options #2 and #3 are dependent upon commitments of space and services from community partners. While the workgroup certainly supports leveraging these potential partnerships, commitments for these options were not able to be confirmed prior to the completion of this report. Further, due to a need for SAWC to begin hiring for any option beginning in November 2014, the workgroup agreed the priority should be to fund the Delonis Center to provide this daytime warming center service to ensure they could execute a consistently available daytime option prior to the start of winter 2014-15.

Recommended New Daytime Warming Center Spaces (in order of priority)					
Priority	**Service Provider**	**Physical Location**	**Availability**	**# People**	**Cost**
1	SAWC	Delonis Center	*Daytime*; Nov - March	100	$95,775
2	SAWC & MISSION	Hybrid: M-Th @ Churches* & F-Su @ Delonis	*Daytime;* Jan-March	50+	$29,363
3	SAWC & MISSION	Churches* (Rotating)	*Daytime;* Jan - March	50	$17,820
**Workgroup members are working closely with SAWC to identify three local churches that will each provide one month of daytime warming-center space for the period of January 1, 2015 to March 31, 2015. To date, no commitments have been made for this option.*					

Additional Recommendations

In addition to the recommendations for expanded warming center capacity, the work group identified certain additional priorities for improved emergency response amongst community partners. Given the roll of the public library as a free and open environment for community members, the downtown branch of the Ann Arbor District Library (AADL) experienced a significant increase in use as a warming center on particularly cold days last winter. With this use of the downtown branch in mind, the workgroup recommended that staff from Washtenaw County's Community Supports & Treatment Services (CSTS) outreach and adult mental illness teams work with AADL staff to identify ways in which the County can better respond patrons experiencing homelessness who seek shelter in the library during cold weather days.

As a result of this effort, CSTS will now deploy staff to the downtown AADL branch on days where local public schools are closed due to extreme cold (when the temperature with wind chill reaches 20 degrees below zero) to offer resources and/or services to interested library patrons. Additionally, CSTS will be working with the library to have an expanded presence year-round to ensure that patrons and AADL staff alike know how to access mental health and substance use resources and services in the community.

Beyond this service coordination recommendation, the work group also recommends consideration for additional funding to support the increased demand for emergency overnight lodging needs in local motels/hotels. CSTS relies on this funding to assist homeless individuals throughout the year while engaging them into necessary treatment and other supports. During the 2013-14 winter season, this funding was exhausted by the second quarter of the fiscal year because of increased demand due to the winter weather. This left CSTS without any funds for emergency housing for the remaining 6 months of the fiscal year. The work group recommends identifying an additional $11,250, or a 10% increase over FY2013-14, of flexible funding specifically to offset the anticipated overage in emergency hotel/motel costs necessitated by severe weather.

Next Steps

Based on the warming center expansion and voucher funding recommendations above, the work group recommends the following funding for the 2014-15 winter emergency response:

Total Funding Recommendation: Winter 2014-15 Response	
Expanded Overnight Warming Center	$71,611
Expanded Daytime Warming Center	$95,775*
Expanded Service Coordination at AADL	(in-kind)
Expanded Hotel/Motel Voucher Funding	$11,250
TOTAL	**$178,636**
**Maximum amount, depending on faith-based participation*	

This report will be shared with the Washtenaw County Board of Commissioners, the Ann Arbor City Council and other community partners for consideration and potential funding. Additionally, the Continuum of Care and the Washtenaw Housing Alliance will continue to engage with the community at large and interested stakeholders around the longer-term planning to address emergency shelter and warming center needs in Washtenaw County.

2015-2016 Winter Shelter Response Workgroup Recommendations

September 29, 2015

The Washtenaw Housing Alliance (WHA) and Office of Community & Economic Development (OCED) convened the Winter Shelter Workgroup on August 20, 2015 to consider winter shelter needs for the upcoming 2015-2016 winter season. In addition to WHA and OCED staff, representatives from the Shelter Association of Washtenaw County, Community Support & Treatment Services, Ann Arbor Police Department, and Community Mental Health Partnership of Southeast Michigan were in attendance at the meeting.

The Workgroup reviewed what occurred during the 2014-2015 winter (see Report from the Shelter Association of Washtenaw County) and discussed that the response last winter worked quite well, although there were some challenges primarily with logistics and transportation. In 2014-2015, 502 unduplicated individuals utilized Warming Center 1, Warming Center 2 or Rotating Shelter. The Workgroup discussed the anticipated need for the upcoming winter to the best of their ability, particularly because of the community's recent success prioritizing individuals experiencing chronic homelessness for housing resources. The Workgroup decided it was best to plan for an extreme cold-weather winter, and to develop a plan that can be as flexible as possible. The Workgroup recommended building upon the model of success that was created last winter, and simply making tweaks where there were challenges.

Following are the Workgroup's recommendations for the 2015-2016 Winter:

- **Fund Warming Center 1** (WC1) to be operated by the Shelter Association of Washtenaw County at the Robert J. Delonis Center (Delonis Center). Warming Center 1 will open on November XX, 2015 and can accommodate up to 50 individuals with a mat on the floor in the Delonis Center's dining room and common areas. Hours of operation are recommended to be from Xpm to Xam.

- **Fund one staff person and cleaning for Warming Center 2** (WC2), to be operated by the Shelter Association of Washtenaw County at volunteer churches. The churches will rotate on a monthly basis. The Workgroup recommends being flexible about when Warming Center 2 opens, based upon anticipated weather and demand for shelter. Tentative dates of operation would be January, February and March. Warming Center 2 can accommodate up to 50 individuals with a mat on the church floor. Hours of operation are recommended to be from Xpm to Xam.

- **Fund two part-time staff persons for a Daytime Shelter**, to be operated by the Shelter Association of Washtenaw County, in conjunction with MISSION, at volunteer churches on Monday through Friday. The Delonis Center will provide daytime shelter from 8am to 7pm Saturday and Sunday. Congregation partners will also provide volunteers for the daytime

shelter. Daytime shelter at the churches worked well last year and it provides a space for people to go during cold days. It also alleviates some of the burden that the Ann Arbor District Library's Downtown location has held in previous years.

Last winter, the daytime shelter served between 35-80 persons per day. For 2015-2016, the churches will rotate on a to-be-determined basis. The Workgroup recommends being flexible about when Daytime Shelter begins, based upon anticipated weather and demand, and when congregations can offer up their space. Tentative dates of operation would be January, February and March. Hours of operation are recommended to be from Xam to Xpm.

- **Fund up to $11,000 in hotel/motel vouchers** for Community Support & Treatment Services' Project Outreach Team (PORT) staff to utilize or HAWC, on an as-needed basis, when people are unable to go into shelter or warming center, or when family shelter is unavailable.

- **Fund transportation** to transport people and supplies (blankets to be washed daily) between the Delonis Center and Warming Center 2 each evening and each morning. It is anticipated that TheRide will be able to transport people to/from XXX during their off-peak hours, as they did during the 2014-2015 winter.

The total request is to fund up to $XXX,XXX, which will enable the homeless system to provide a safe daytime and nighttime shelter space to people experiencing homelessness during the 2015-2016 winter.

Mitigating Last Winter's Challenges:

- **Logistics/Timing:** During the 2014-2015 winter, there was about a one half hour gap on both ends of the spectrum for when breakfast at The Saint Andrew's Breakfast Program ended at 8:30am and when Daytime Shelter began at churches at 9am. People arrived early and are cold causing pressure at the day site church. The Saint Andrew's Breakfast Program deserves kudos for opening early when people arrived. In the afternoon some of the church facilities could not stay open until 4pm. Even If they did, there was still a gap, as the dinner room at the Delonis Center didn't open until 5pm. People arrived early and there was the same problem. The Delonis Center began opening at 3pm when the churches needed to close. STATE SOMETHING ELSE HERE?

- **Transportation** to breakfast from the Delonis Center (Warming Center 1) on bad days was a problem in extreme weather. Normally people walk but with the extreme cold it was difficult and many people wanted to skip breakfast and stay inside. On the day of last year's snow storm, the Deloris Center was able to provide coffee and some food but they were not equipped to do it every time the weather was extreme. STATE SOMETHING ELSE HERE?

- **Balancing WC1 and WC2:** Some people using warming center were resistant to going to the WC2 site. This caused difficulty in balancing numbers between the two sites, sometimes causing overcrowding at the Delonis Center when there was room at the church. Since the bus

picked up at 8:30pm, people learned if they came in later they would not have to go to the church. It is unclear why this was problematic for people except that they would have to arrive before they wanted to arrive. The WC 2 at the church usually had 20-30 people while WC 1 had 40-60 at the Delonis Center. STATE SOMETHING ELSE HERE?

MSHDA
MICHIGAN STATE HOUSING DEVELOPMENT AUTHORITY

Office of Rental Assistance and Homeless Solutions

Shelter Diversion Pilot
Request for Proposals (RFP)

Proposals Due: Friday, April 21, 2023

Made possible through the
Housing and Community Development Fund (HCDF)

735 E Michigan Ave
P.O. Box 30044
Lansing, MI 48909

EQUAL HOUSING OPPORTUNITY

CONTENTS

1. Timeline

Housing and Community Development Fund (HCDF) Shelter Diversion Pilot	
Request for Proposals (RFP) Released	Friday, February 17, 2023
RFP Overview Webinar	Monday, February 27, 2023 Register Here
Proposals Due	Friday, April 21, 2023
Proposal Review/Scoring	April 24 – May 12, 2023
Awards Announced	Friday, May 19, 2023
Project Start Date	Thursday, June 1, 2023

2. General Overview

In 2022, MSHDA received a state budget allocation of $50 million for the Housing and Community Development Fund (HCDF). These funds are intended to expand housing supports for the State of Michigan through a variety of projects and services based on identified needs. Through stakeholder engagement and listening sessions, MSHDA identified shelter diversion as a priority demonstration project to test, expand, and implement shelter diversion practices and models in select homeless crisis response systems. Under this allocation, MSHDA is investing $3 million for a 2-year Shelter Diversion Pilot through a competitive Request for Proposals (RFP) process.

Shelter diversion is a strategy that helps people experiencing a housing crisis to quickly identify and access safe alternatives to shelter where possible. Shelter diversion is most effective when implemented collaboratively at the community-level, with shared knowledge and understanding of diversion practices and goals. Through the Shelter Diversion Pilot RFP, MSHDA is seeking proposals from eligible agencies to implement or expand effective shelter diversion models. This pilot will demonstrate the impact of effective shelter diversion on homeless crisis response systems and, more importantly, the impact on households at risk of or experiencing homelessness. All selected agencies will be part of a learning cohort for this project and will engage regularly with their peers, MSHDA project staff, and selected training and technical assistance throughout the course of the project.

3. Pilot Description

The goal of shelter diversion is to end an individual or family's experience of homelessness as quickly as possible while empowering them to regain control over their situation. The emphasis is on securing safe, appropriate options in community – even temporary options – rather than an emergency shelter stay, whenever possible. This limits the trauma of homelessness while supporting the availability of limited shelter beds for those most in need.

Shelter diversion is an intensive, short-term intervention narrowly focused on families and individuals at the point they have lost access to their housing option but prior to or shortly following entry in emergency shelter. A shelter diversion intervention should generally take no more than fourteen days. Clients may stay in shelter or in other housing during this time. Shelter diversion elevates creative problem solving and conflict resolution to empower people experiencing a housing crisis to find an immediate alternative to shelter and return to more stable housing. Through a strengths-based conversation, facilitated by a Diversion Specialist, individuals and families seeking shelter are supported in identifying immediate alternate housing arrangements and, if necessary, connections with services and financial assistance. **Most importantly, shelter diversion does not act as a barrier to shelter.**

Projects awarded under this competitive RFP will demonstrate how these funds will implement or expand an evidenced model of shelter diversion for a defined population and geographic area of

service. Effective shelter diversion includes staff with trained expertise in the following skills and practices:

- A trauma-informed approach to engagement focused on creating safety, transparency, and an overview of the Specialist/household partnership.
- Incorporation of motivational interviewing skills throughout the partnership, in particular active listening, open-ended questions, empathy, and a focus on goals.
- Exploration of strengths, opportunities, and resources to move from crisis to empowerment to regain confidence and identify options in addressing the housing issue.
- Collaborative identification of safe, appropriate options and next steps that can be reality-tested and validated as SMART (Specific, Measurable, Actionable, Realistic & Timed).
- Connections to other community resources will be essential. Mediation is valued as a worthwhile endeavor to improve relationships between households, landlords, and/or potential host households.
- Effective and timely communication that summarizes the action steps and follow-up with specifics including activities, persons responsible, timelines, and communication expectations.

Flexible financial assistance also plays a critical role by allowing Diversion Specialists the ability to provide unique supports for each household based on individually identified needs. Areas of unique support include transportation, food, education, employment, childcare, and household bill contribution, among others. Traditional financial and rental assistance, like housing application fees, mediation, and monthly rental payments, are also available through this pilot. However, households served through shelter diversion should still be considered for other housing resources as eligible, necessary, and available through the Coordinated Entry System (ex. HUD CoC Programs, Emergency Solutions Grant).

The Shelter Diversion Pilot will require HMIS data entry to track household demographics, services provided, and housing outcomes. Awarded agencies will be responsible to complete regular reporting throughout the course of the project.

4. Grant Term and Award Parameters

The grant term will be two (2) years, starting June 1, 2023 through May 31, 2025.

The maximum grant award is $500,000 (up to $250,000 per year of the grant term). MSHDA anticipates awarding up to 10 proposals, depending on project size, and will review proposals to ensure effective geographic dispersion.

MSHDA will award funds through the established Fiduciaries under the Emergency Solutions Grant (ESG) in each Continuum of Care (CoC) or Local Planning Body (LPB) of the Balance of State CoC. A portion of awarded administrative funds must be allocated to the Fiduciary for associated responsibilities.

5. Eligible Costs and Cost Parameters

The following cost categories are eligible for the Shelter Diversion Pilot:

Staffing	**At least 40%** of total proposed project costs must be allocated for **new** staffing (Diversion Specialists). Staff costs related to HMIS data entry may also be billed to this budget line.

Flexible Financial Assistance	**At least 20%** of total project costs must be allocated for flexible financial assistance.
Rental Assistance	**At least 10%** of total project costs must be allocated for rental assistance.
Administrative Costs	Administrative costs are **limited to 10%** of total project costs.

Cost Parameters

Staffing: Funds budgeted for staffing cannot be used to supplant other program funds for existing staff. Applicants must ensure new positions are posted and hire additional staff as Diversion Specialists for this pilot.

Flexible Financial Assistance: Households can receive up to $2,500 in assistance. This is capped for the grant term (i.e. households can be assisted with shelter diversion more than once but cannot receive more than $2,500 in flexible financial assistance). This cap is implemented separately from Rental Assistance.

- General categories for Flexible Financial Assistance
  - Food
  - Contribution to shared housing costs (ex. Utility bills)
  - Transportation
  - Employment
  - Education
  - Childcare

NOTE: Awarded projects will not be permitted to provide monetary payments (cash) directly to households. Flexible Financial Assistance can be provided directly to households via gift cards in alignment with the general categories noted in this RFP.

Rental Assistance: Households can receive up to three (3) months of rental assistance. This is capped for the grant term (i.e. households can be assisted with rent payments more than once but cannot receive more than 3 months of rental assistance). This cap is implemented separately from the Flexible Financial Assistance.

Administrative Costs: Cost allocation plans are permitted in lieu of detailed administrative costs but must be provided at the point of proposal submission.

Additional policy guidance will be provided to awarded projects prior to project start.

6. Performance Measures

To track progress toward achieving the outcome goals of this program and assess success, MSHDA and awarded projects will monitor a set of performance indicators that may include, but are not limited to:

- Percentage of households who have a diversion interaction and identify an alternative to emergency shelter.
- Percentage of households who identify an alternative to emergency shelter and do not return to the Coordinated Entry System for emergency shelter within 30, 60, and 90 days.
- Racial equity analysis of diversion outcomes.
- Analysis of diversion outcomes based on household type (i.e. adult-only households, families).

To monitor and recognize intermediate progress toward the above performance indicators, MSHDA also intends to track output metrics that may include, but are not limited to:

- Average length of emergency shelter stay following diversion interaction.
- Average amount of flexible funding assistance per household served and nature of assistance provided.
- Average number of days a household is engaged in diversion services (measured from first point of contact to household graduation from or discontinuation of services).

Other performance measures and outputs will be established in partnership with MSHDA, awarded applicants, and their associated Continuums of Care (CoCs) as part of the Shelter Diversion Pilot implementation process. MSHDA expects performance measures to be refined as part of an iterative approach to the diversion practice. Within this framework, MSHDA is focused on continuous improvement toward the goals of shelter diversion as previously stated.

In addition to the performance indicators and output metrics listed above, MSHDA encourages applicants to propose additional indicators and metrics, including those that demonstrate early success and are indicative of household progress. All metrics should include evaluation based on race, ethnicity, gender, age, and other characteristics as appropriate to track equity in outcomes and outputs. MSHDA anticipates that performance by these metrics will vary by subpopulation served. Data generated from this pilot will inform future resource allocation and support replication of effective strategies and models.

7. Proposal Outline

The Shelter Diversion Pilot funds will be awarded through a competitive Request for Proposals (RFP) process. Continuums of Care (CoCs) may only support one (1) proposal for submission.* Multiple proposals from the same CoC will be rejected. Proposals must be submitted by eligible applicants and must contain the following:

Proposed Shelter Diversion Model	Detailed outline of shelter diversion model, including number of Diversion Specialists, referral process, and how the model will be implemented in the local Coordinated Entry System. Include any anticipated methods for data capture and outcomes tracking.
Evidence of Need	Description of inflow/outflow data for the local emergency shelters and Coordinated Entry System. Reports provided via HMIS and/or comparable database.
Proof of Experience	Overview of experience with shelter diversion or, if implementing a new process, experience with serving households experiencing homelessness or at risk of homelessness. Include any experience with performance management and outcomes tracking.
Target Population	Description of population served by this project (general population, youth, families, adults, domestic violence survivors, human trafficking, etc).
Diversity, Equity, and Inclusion (DEI) Self-Assessment	*Clarifying the Purpose and Target Population:* The HCDF funds are being used to assist marginalized groups in accessing affordable housing and services while combating housing inequities and lack of access to opportunities. Please identify the marginalized groups that will be served with these resources and inequities that will be addressed with the activities in the proposal. *Engaging Stakeholders:* It is imperative that stakeholders from diverse backgrounds (i.e., race, gender, ethnicity, disability status, geography, etc.), be informed and authentically represented in the development of this proposal. Please explain specific engagement steps taken to inform the

	proposal and that will be undertaken to ensure marginalized groups have access to this program. *Community-Based Transparency:* What provisions will be in place to ensure ongoing data collection, stakeholder participation, and public feedback? *Identifying Success Indicators:* What measures will be used to determine program success (data indicators and benchmarks, anecdotal)? What type of ongoing evaluation will be used to determine if course correction is needed? How will the level of diversity, inclusivity, and quality of ongoing stakeholder engagement be assessed?
Letter(s) of Support	Must provide a letter of support for the proposal from the geographically associated Continuum of Care (CoC). (Additional letters necessary if serving more than one CoC geographic area.)

**Balance of State Continuum of Care (BoS CoC) is limited to one proposal for the purposes of this pilot. Local Planning Bodies (LPBs) cannot provide a letter of support or submit a proposal separate from the BoS CoC.*

Please see Submission Instructions (page X) for additional guidance and requirements.

8. Role Definitions and Applicant Criteria

Responses to this RFP will confirm the support of the local Fiduciary as established under MSHDA ESG funding and, if separate, which agency or agencies will act as the Service Provider(s). Definitions for each role are outlined below.

Fiduciary

The Fiduciary is an agency selected and affirmed by the CoC to receive and distribute Shelter Diversions Pilot funding. The Fiduciary agrees to the following responsibilities:

- Execute grant documents, including:
  - Completion of the Shelter Diversion Pilot Memorandum of Understanding (MOU), with signatures from all named entities.
- Assure use of funds in accordance with the grant agreement, communicating knowledge of any fraudulent activity to MSHDA and the CoC.
- Submit quarterly Financial Status Reports (FSRs) through MSHDA's grant management system.
- Submit all required data reports on behalf of the project.
- Advise the CoC of any grant expenditures concerns, including delayed or inadequate expenditure, to avoid loss of funds to the community and possible recapture by MSHDA.
- Evaluate the quality of services and provide oversight to the Service Provider(s) based upon documented outcomes and in partnership with the CoC.
- Monitor ten percent (10%) of all Shelter Diversion Pilot participant files, as well as the financial records.

Service Provider

The Service Provider(s) is an agency selected and affirmed by the CoC to implement and staff the shelter diversion model. The Service Provider(s) agrees to the following responsibilities:

- Collaborate with the CoC to ensure the shelter diversion model is integrated within the Coordinated Entry System and broader homeless crisis response system.
- Provide eligible services as defined within this pilot, MOU, and associated grant documents.
- Hire and train staff as Diversion Specialists, following outlined best practices and required skills.

- Enter client information on HMIS (Domestic Violence Agencies must use a comparable database).
- Coordinate with the HARA to ensure the required assessment tool and/or process is completed for literally homeless households.
- Routinely review and correct HMIS data quality issues and monitor outcome performance.
- Provide routine reports to the CoC on the pilot, including the number of households served and outcomes.
- Maintain financial and client level records to support billings, retaining records for five years.
- Request payment and provide necessary supportive documentation to the Fiduciary on at least a quarterly basis.
- Ensure compliance with grant terms and provide the Fiduciary and MSHDA access to financial and programmatic records when requested.

Submitted proposals must ensure that the Fiduciary and, if separate, the Service Provider(s) meet the following criteria for eligibility:

Fiduciary Eligibility

- A 501(c)3 nonprofit agency or local unit of government that operates its principal place of business in the State of Michigan (CoC/LPB, if incorporated as a 501(c)3 Entity, is eligible).
- Actively involved in the CoC/LPB planning process.
- Exhibits the financial capacity to administer funds as demonstrated through an audited federal financial statement.
- Has financial management systems in place such as cash receipts and disbursement logs, invoices, and cancelled check registers, etc.
- Employs staff who possess bachelor's degree in accounting or possess experience in accounting along with college accounting credits or a bookkeeper whose work is overseen by an accounting firm.

Service Provider Eligibility

- A 501(c)3 nonprofit agency or local unit of government that operates its principal place of business in the State of Michigan (CoC/LPB, if incorporated as a 501(c)3 Entity, is eligible).
- Actively involved in the CoC/LPB planning process.
- Experienced in serving homeless populations.
- Experienced in providing case management services specifically targeted to people who are experiencing homelessness.
- Experienced with successful HMIS data collection.
- Participation in a QSOBAA to allow sharing within HMIS.
- Exhibits the financial capacity to administer funds as demonstrated through an audited federal financial statement.
- Has financial management systems in place such as cash receipts and disbursement logs, invoices, and cancelled check registers, etc.
- Employs staff who possess bachelor's degree in accounting or possess experience in accounting along with college accounting credits or a bookkeeper whose work is overseen by an accounting firm.

All funded agencies must be able to provide to MSHDA evidence of eligibility, when requested.

9. Proposal Scoring

Proposals containing all required items and submitted by the deadline will be reviewed and scored based on the following criteria and scoring categories:

Strength of Proposed Model	• The proposal clearly defines the model and services to be provided. Services are appropriate to addressing the needs of and achieving desired outcomes for the target population. • The proposed model is supported by prior experience, demonstrated expertise, and/or aligns with the best practices and skills relevant to shelter diversion. • The proposal demonstrates a clear understanding of the target population and their needs/challenges. • The proposal provides estimates of deliverables that are in alignment with the proposed model's scope. • The Service Provider(s) has experience and/or expertise in delivering services in an expedient manner.	40 points
Performance Management and Outcomes	• The Service Provider(s) demonstrates strong past performance against the desired goals, outcomes, and/or other notable accomplishments in providing services to the target population. • The Service Provider(s) has the required systems and processes to track and report outcomes. • The Service Provider(s) has experience in using data to inform/improve its services and practices.	20 points
Organizational Capacity	• The Fiduciary and/or Service Provider(s) has qualified staff responsible for program oversight and management. • The Fiduciary has adequate systems and processes to support monitoring pilot expenditures and fiscal controls. • The Fiduciary and/or Service Provider(s) has adequate Human Resources capacity to hire and manage staff. • The Fiduciary and/or Service Provider(s)'s organization reflects and engages the diverse people of the communities it serves.	15 points
DEI Self-Assessment	• The proposal sufficiently addresses each aspect of the DEI Self-Assessment: o Clarifying the Purpose and Target Audience o Engaging Stakeholders o Community Based Transparency o Identifying Success Indicators	15 points
Reasonable Costs, Budget Justification,	• The Fiduciary and/or Service Provider(s) has the fiscal capacity to implement the proposed model	10 points

and Leverage of Funds	as demonstrated by an audit and/or other financial documents. • The Fiduciary and/or Service Provider(s) indicates that they have the capacity to implement this pilot on a reimbursement basis, as necessary. • The Fiduciary and/or Service Provider(s) demonstrates reasonable implementation costs and funding requests relative to its financial and human resources. The proposed budget supports the proposed scope of work.	
	TOTAL	**100 points**

Basis of Award

MSHDA will rate applications using the criteria listed above and through a multi-disciplinary review team. Additionally, MSHDA will consider how each project aligns with best practices and service standards set forth by national experts and federal funding partners. MSHDA will also ensure adequate balance across specialized populations and geography.

10. Submission Instructions

All proposals must be submitted by the Fiduciary via email to Jennifer McNeely, MSHDA Program Specialist, at mcneelyj2@michigan.gov. Proposals are due Friday, April 21, 2023, by 5:00pm EST. Proposals submitted after the deadline will not be considered.

Proposals must include the following:

- Letter of support from the CoC (only one application per CoC will be accepted)
- Proposal Narrative
    - **Proposed Model** 2-4 pages (40 points)
        - Detailed outline of shelter diversion model, including number of Diversion Specialists, referral process, and how the model will be implemented in the local Coordinated Entry System.
        - Description of inflow/outflow data for the local emergency shelters and Coordinated Entry System. Reports provided via HMIS and/or comparable database.
        - Description of population served by this project (general population, youth, families, adults, domestic violence survivors, human trafficking, etc).
        - How will the organization measure the outcomes outlined in the RFP
    - **Performance Management Outcomes** 1-2 pages (20 Points)
        - Demonstrated past performance and or other notable accomplishments in serving the target population
        - Detail the systems that will be used to track and report outcomes
        - Detail how the agency has used data to inform/improve services and practices.
    - **Organizational Capacity** 1-2 pages (15 points)
        - Overview of agency experience with shelter diversion or, if implementing a new process, experience with serving households experiencing homelessness or at risk of homelessness
    - **DEI Self-Assessment** 1-2 pages (can be enhanced or addressed throughout the proposal) (15 points)
        - Clarify the purpose and target audience

        - How the proposal engages stake holders
        - How will the proposal address Community Based Transparency
        - Identify Success Indicators
    - **Reasonable Costs, Budget Justification, and Leveraged Funds** 1-2 pages (10 points)
        - Proof of fiscal capacity per audit or other financial documents
        - Agency affirms they can run the pilot on a cost reimbursement basis
        - Demonstrated reasonable implementation costs, appropriate funding requests relative to human and financial resources, budget supports proposed scope of work

NOTE: Please review the RFP in full to ensure the narrative contains all of the information for each scored parameter.

The narrative should be formatted in at least 11-point, standard font. The top of the proposal narrative must have the CoC name and Fiduciary point of contact, including address, email, and phone number.

Each scored parameter should be identified with the appropriate heading. For example:

Proposed Model
Narrative description

Please submit documents as a PDF. Documents created in Microsoft Word can be converted to a PDF by selecting, “Save as Adobe PDF”, from the File menu.

File name MUST include CoC name and document name. For example:

CoC NAME CoC Letter of support
CoC NAME Proposal Narrative

Any other documents deemed necessary to support the proposals are permitted and MUST contain the CoC name AND document name.

Michigan State Housing Development Authority is committed to providing meaningful access. For accommodations, modifications, translation, interpretation, or other services, please contact:

- MSHDA-HS@michigan.gov
- (517) 335-9885
- 735 E. Michigan Ave
  P.O. Box 30044
  Lansing, MI 48909

Washtenaw County Continuum of Care (CoC) Community Meeting

Michigan State Housing Development Authority (MSHDA)
Shelter Diversion Funding Opportunity

MSHDA
MICHIGAN STATE HOUSING DEVELOPMENT AUTHORITY

"Shelter diversion is a strategy that helps people experiencing a housing crisis to quickly identify and access safe alternatives to shelter where possible. Shelter diversion is most effective when implemented collaboratively at the community-level, with shared knowledge and understanding of diversion practices and goals. Through the Shelter Diversion Pilot RFP, MSHDA is seeking proposals from eligible agencies to implement or expand effective shelter diversion models. This pilot will demonstrate the impact of effective shelter diversion on homeless crisis response systems and, more importantly, the impact on households at risk of or experiencing homelessness. All selected agencies will be part of a learning cohort for this project and will engage regularly with their peers, MSHDA project staff, and selected training and technical assistance throughout the course of the project."

Grant Terms

- **Maximum Grant Award**: $500,000 (up to $250,000 per year of the grant term)
- **Proposals Due:** Friday, April 21st, 2023
- **MSHDA Reviews and Scores Proposals**: Monday, April 24th through Friday, May 12th
- **Awards Announced**: Friday, May 19th, 2023
- **Project Start Date**: Thursday, June 1st, 2023
- **Grant Term**: June 1, 2023-May 31, 2025
- Awarded Agencies will be responsible to complete regular reporting throughout the course of the project
  - MSHDA has not yet determined the scope of that reporting including the frequency of expenditures (i..e Monthly or Quarterly) as well as any Spenddown Goals/Markers prior to May 2025

Pilot Description

- To end an individual or family's experience of homelessness as quickly as possible while empowering them to regain control over their situation.
- Intensive, Short-term intervention focused on families and individuals at the point they have lost access to their housing option but **prior to** or **shortly following** entry in emergency shelter.
- Shelter Diversion Intervention should generally take no more than 14 days (**Note:** MSHDA will not penalize or prohibit communities from supporting a household beyond the 14 days)
- Shelter Diversion does not act as a barrier to shelter
- Diversion Specialists must use a strengths-based conversation to support the immediate identification of alternate housing arrangements and, if necessary, connections with services and financial assistance. Diversion Specialists should be trained in and/or skilled at:

Trauma-informed engagement — Community Resources

Effective and Timely Communication — Motivational Interviewing

Mediation between households, landlords, and/or potential host households

Collaborative identification of SMART (Specific, Measurable, Actionable, Realistic & Timed) Goals

Eligible Expenses

Budget Category	Parameters
Staffing	At least 40% of total propose project costs must be allocated for NEW Staff (Diversion Specialists) **Important:** Funds budgeted for staffing cannot be used to supplant other program funds for existing staff. Applicants must ensure new positions are posted and hire additional staff for this pilot
Flexible Financial Assistance	At least 20% of total project costs must be allocated **Notes:** Households can receive up to $2,500 in assistance. This is capped for the grant term (i.e. households can be assisted more than once but cannot receive more than $2,500)
Rental Assistance	At least 10% of total project costs must be allocated **Notes:** Households can receive up to 3 months of Rental Assistance. This is capped for the grant term (i.e. households can be assisted more than once but cannot receive more than 3 months)
Administrative Costs	Limited to 10%

Eligible Expenses

- Examples of Flexible Financial Assistance:
  - Food
  - Contribution to Shared Housing Costs (i.e. Utility Bills)
  - Transportation
  - Employment
  - Education
  - Childcare
  - Whatever is preventing the Household from returning to stable housing
- **Important:** Direct Cash Payments are not permitted under this Grant, however; Flexible Financial Assistance can be provided directly to the household in the form of gift cards
- Households can receive Flexible Financial Assistance **AND** Rental Assistance up to their respective caps (i.e. Households can receive up to $2,5000 in Direct FA and up to 3 months of Rental Assistance)

Performance Measures

- The Shelter Diversion Pilot will require HMIS data entry to track household demographics, services provided, and housing outcomes including but not limited to:
  - % of Households who have a Diversion Interaction
  - % of Households who identify an alternative to emergency shelter and do not return to the Coordinated Entry System for Emergency Shelter within 30, 60, and 90 days
  - Racial Equity Analysis of Diversion Outcomes
  - Analysis of Diversion Outcomes based on Household Type (i.e. adult-only households, families)
  - Average length of Emergency Shelter following Diversion Interaction
  - Average amount of Flexible Funding Assistance per Household and Nature of Assistance
  - Average number of days a Household is engaged in Diversion Services (measured from first point of contact to Household discontinuing services)
- MSHDA encourages applicants to propose additional indicators and metrics, including those that demonstrate early success and are indicative of household progress

Proposal

- **Proposal Outline**
  - Proposed Diversion Model
  - Evidence of Need
  - Proof of Experience
  - Target Population
  - Diversity, Equity, and Inclusion (DEI) Self-Assessment
  - Letter(s) of Support
- **Proposal Scoring**
  - Strength of Proposal: **40pts**
  - Performance Management and Outcomes: **20pts**
  - Organizational Capacity: **15pts**
  - DEI Self-Assessment: **15pts**
  - Reasonable Costs, Budget Justification and Leverage of Funds: **10pts**

More Information

https://www.michigan.gov/mshda/homeless/homeless-and-special-housing-needs-programs/shelter-diversion-pilot

Register for **MDHHS's Introduction to Shelter Diversion Tool Kit for Michigan Providers** Webinar **Friday, March 10th, 2023** from **9am-11am**

Open Dialogue

- What are your initial thoughts?
- How can this address a critical need/challenge Washtenaw Households face?
- What would you like to see included in this proposal?
- What is our Target Population and Why?
- How would the proposal/model integrate with our CoC's Coordinated Entry System?
- How many Diversion Specialists should be hired?
- Does our System have the capacity to responsibly staff, monitor, and oversee this Pilot?
- Does our System have the demonstrated experience MSHDA is looking for?

Diversion in Washtenaw County: 2021-2022

In 2021, Washtenaw County CoC was able to fund full-time diversion staff at both the Shelter Association of Washtenaw County and Housing Access for Washtenaw County focused on diverting individuals and families who are entering the system.

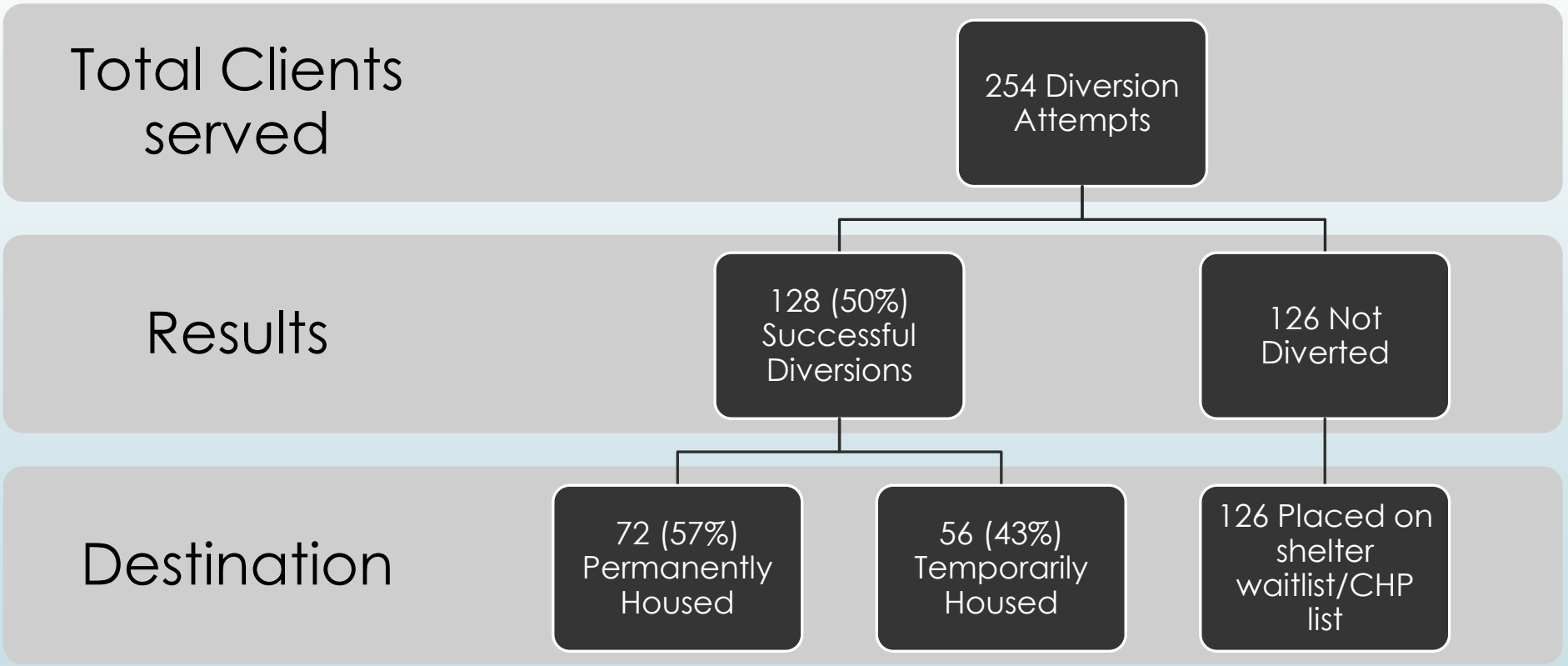
Program Description

- 1 full time staff at Delonis diverting individuals
- 1 full time staff at HAWC diverting families
- A problem solving approach where staff worked alongside clients to consider safe alternatives to needing shelter.
- Clients were offered the opportunity for a diversion conversation at the time of shelter assessment or shortly after.
- Success measured by whether a client identifies a temporary or permanent alternative to homelessness or a shelter.

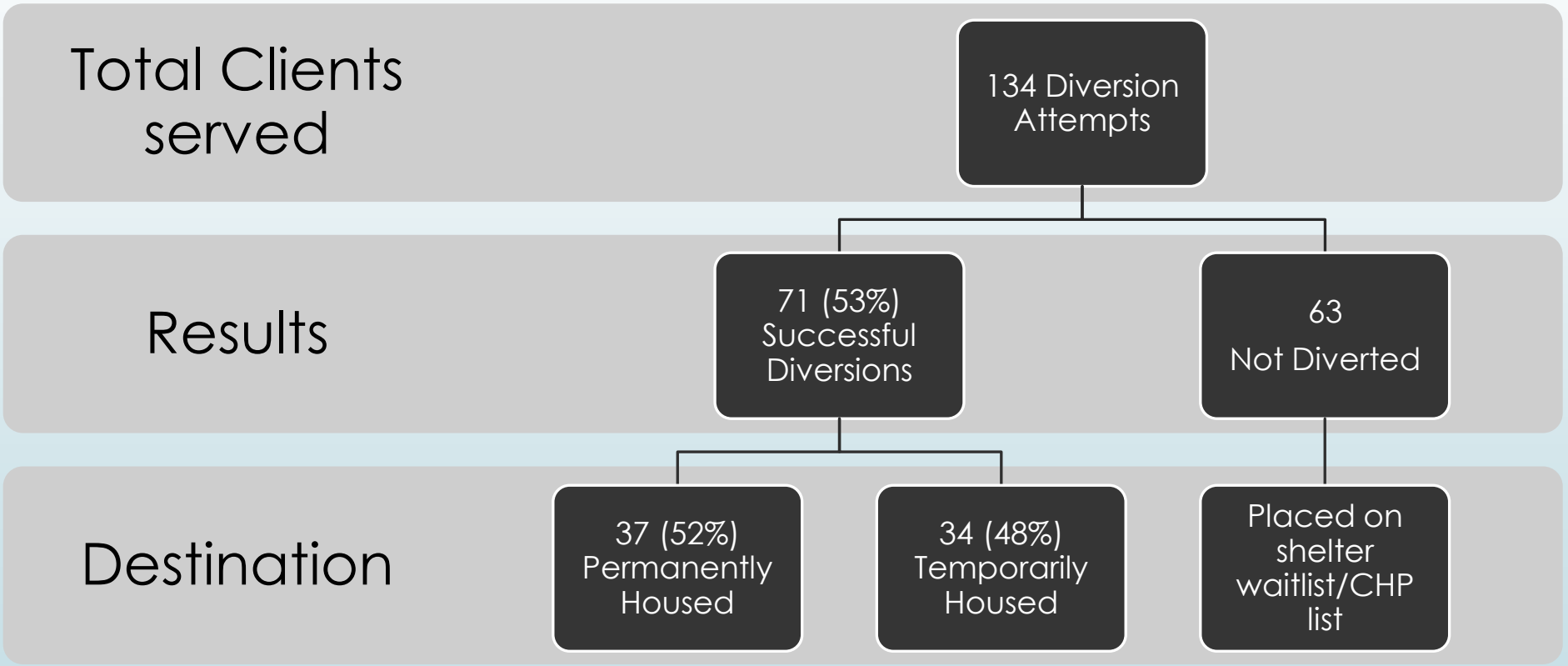
Resources

- Leveraged funding from existing programs in the system, such as ESG, ESG-CV, and CERA, as well as community part
- Also utilized community partners such as Friends-in-Deed and Ann Arbor Thrift.
- A limited amount of flexible funding was provided by CMH—$5,000 for each population.

Outcomes: Individuals



Outcomes: Families



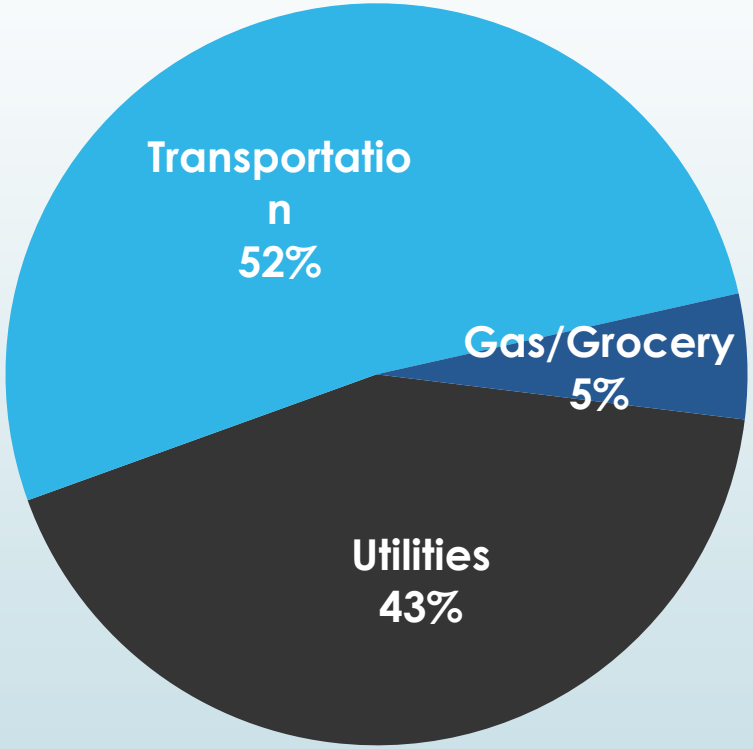
Costs

CMH Flexible Diversion Funding

Flexible use dollars were provided through the CMH millage to use in removing barriers to housing:

SAWC spent a total of $2,045 on 11 clients. Most funds went towards transportation to a safe, permanent alternative, and the rest for gas/grocery cards and application fees.

HAWC leveraged an additional $4,500 in community funding to assist a client with overdue utilities with $1,514



Conclusions

- Diversion is a highly successful intervention for some clients—more than half of diversion attempts result in temporary or permanent housing.
- These outcomes are similar to overall shelter exits, but happen much, much faster—the average shelter stay before housing is 77 days!
- Diversion is also cost effective—the average outlay per household funded was only $296, and many clients were housed without needing any additional funding!
- The approach also maximized client choice for clients served by presenting realistic and safe alternatives to shelters or waitlists.

March 15th, 2023

MSHDA
Office of Rental Assistance and Homeless Solutions
Shelter Diversion Pilot
Request for Proposals (RFP)
735 E. Michigan Ave
P.O. Box 30044
Lansing, MI. 48090

Washtenaw County Continuum of Care (CoC) is writing in support of the proposal to be submitted by the Office of Community and Economic Development (OCED), CoC Lead, on behalf of Washtenaw County for the Shelter Diversion Pilot. In 2021, Washtenaw County was able to fund two full-time diversion staff. One was stationed at Housing Access for Washtenaw County (HAWC) specializing in Families and the other was stationed at Shelter Association of Washtenaw County (SAWC) specializing in Individuals. Diversion staff used a problem-solving approach; working alongside clients to consider safe alternatives to shelter. Households were offered a diversion conversation at the time of shelter assessment or shortly after. Success was measured by whether a temporary or permanent alternative to homelessness or shelter was secured.

254 diversion conversations occurred with Individuals. Of those 254 conversations, 128 (50%) were successful and led to permanent housing (72 clients or 57%) or temporary housing (56 clients or 43%). 134 diversion conversations occurred with Families. Of those 134 conversations, 71 (53%) were successful and let to permanent housing (37 households or 52%) or temporary housing (34 or 48%). Households that were not able to be diverted were placed on the shelter waitlist and local by-name list to be referred to our Community Housing Prioritization Committee which selects clients for resources through a community prioritization process.

Those that were able to secure an alternative to homelessness or shelter were housed, on average, within 4 days compared to the average stay in emergency shelter of 77 days. This was achieved by leveraging existing community resources and limited funding from other sources to remove barriers to housing such as transportation, utility assistance, and groceries.

Washtenaw County knows that diversion is a highly cost effective and successful intervention. Our CoC is eager to build on our 2021 successes and strengthen efforts to improve our homeless crisis response system.

Sincerely,

Co-Chair, Washtenaw County Continuum of Care Board

MSHDA
MICHIGAN STATE HOUSING DEVELOPMENT AUTHORITY

Office of Rental Assistance and Homeless Solutions

HOME-ARP Notice of Funding Availability (NOFA)

HOME American Rescue Plan (HOME-ARP): Housing Navigation Program (HNP)

735 E Michigan Ave
P.O. Box 30044
Lansing, MI 48909

EQUAL HOUSING OPPORTUNITY

CONTENTS

I. Timeline

HOME ARP Supportive Services Funding	
Housing Navigation Timeline	
December 5, 2022	Housing Navigation Program (HNP) NOFA draft released
December 19, 2022	HNP Draft NOFA Introduction webinar
March 1, 2023	HNP NOFA and application published
March 8, 2023	HNP NOFA Webinar REGISTER HERE
April 7, 2023	HNP application submissions Due
May 1, 2023	HNP Project Start

II. General Overview

In March 2021, President Biden signed the American Rescue Plan Act (ARP) of 2021 into law, which provides over $1.9 trillion in relief to address the continued impact of the COVID-19 pandemic on the economy, public health, state and local governments, individuals, and businesses. Congress appropriated $5 billion in ARP funds to be administered through HUD's HOME Investment Partnerships Program to specifically address the need for homelessness assistance and supportive services and perform four activities that must primarily benefit qualifying individuals and families who are homeless, at risk of homelessness, or in other vulnerable populations; including (1) the development of affordable rental housing, (2) tenant-based rental assistance (TBRA), (3) the provision of supportive services; (4) the acquisition and development of non-congregate shelter units and (5) non-profit building and capacity building assistance. The complete program is described in Notice CPD-21-10 and is formally known as the HOME-American Rescue Plan (HOME-ARP).

HOME-ARP funds were allocated to 19 different cities and counties across the state for a total of $89,849,402. MSHDA received Michigan's non-entitlement portion of $63,793,681. To achieve an equitable distribution of funds statewide, MSHDA considered these local funding amounts when determining regional allocations for MSHDA HOME-ARP. MSHDA used a formula-based calculation that included the percentage of the population at 30% Area Median Income to establish the regional need. MSHDA allocated 85% of its HOME-ARP, less MSHDA Administrative costs, to regions across the state and maintains 15% of the total award as a statewide pool for additional regional allocation as needed.

MSHDA published its HOME-ARP Allocation Plan for public comment and hosted multiple virtual public comment sessions to solicit feedback and questions regarding the plan. All feedback was reviewed, and any necessary changes were incorporated into the submitted HUD Action Plan. Please see MSHDA's HOME-ARP Allocation Plan for more information.

MSHDA has allocated $3 million in HOME-ARP funds to support housing navigation services for qualifying individuals and families searching for housing or newly housed with vouchers and other housing programs. Please review Addendum A for this grant's Continuum of Care (CoC) allocation methodology.

III. Program Description

HOME-ARP Housing Navigation Program (HNP) is a two-year (2) grant that will provide staffing support for the delivery of services to households who qualify per HOME-ARP eligibility criteria. Each CoC has a pre-determined allocation of funds (Addendum A). The CoC will respond to this NOFA with its selected subgrantee to provide services. This NOFA will provide details regarding Qualifying Populations, Eligible Activities, and Costs, along with the subgrantee requirements.

NOTE: The Balance of State CoC (BOSCOC) has one allocation for these funds and must determine a process by which a geographic area is prioritized to administer Housing Navigation services.

The funds from this program will be awarded by MSHDA to perform services to eligible households that are linked to the Homeless Preference Housing Choice Voucher (HCV) program or other HUD CoC or Emergency Solutions Grant (ESG) housing programs. Services will include but are not limited to the following:

- Robust housing search assistance
- Completion of any required eligibility paperwork to access rental assistance
- Completion of any required annual recertification paperwork to maintain eligibility and rental assistance
- Landlord mediation
- Other services identified in partnership with the household to support housing retention and stabilization

IV. Grant Term

Housing Navigation is a two-year (2) grant. Grants will begin **May 1, 2023** to **April 30, 2025**.

V. Qualifying Populations as Defined by HOME-ARP

The following populations are qualified to receive assistance under the HNP. Please review the HOME-ARP Notice for more detailed information.

Homeless, as defined in 24 CFR 91.5:

- An individual or family who lacks a fixed, regular, and adequate nighttime residence.
- An individual or family who will imminently lose their primary nighttime residence.
- Unaccompanied youth under 25 years of age, or families with children and youth, who do not otherwise qualify as homeless under this definition, but who:
    - Are defined as homeless under section 387 of the Runaway and Homeless Youth Act (42 U.S.C. 5732a), section 637 of the Head Start Act (42 U.S.C. 9832), section 41403 of the Violence Against Women Act of 1994 (42 U.S.C. 14043e-2), section 330(h) of the Public Health Service Act (42 U.S.C. 254b(h)), section 3 of the Food and Nutrition Act of 2008 (7 U.S.C. 2012), section 17(b) of the Child Nutrition Act of 1966 (42 U.S.C. 1786(b)), or section 725 of the McKinney-Vento Homeless Assistance Act (42 U.S.C. 11434a);
    - Have not had a lease, ownership interest, or occupancy agreement in permanent housing at any time during the 60 days immediately preceding the date of application for homeless assistance;

- Have experienced persistent instability as measured by two moves or more during the 60 days immediately preceding the date of applying for homeless assistance: **and**
- Can be expected to continue in such status for an extended period because of chronic disabilities, chronic physical health or mental health conditions, substance addiction, histories of domestic violence or childhood abuse (including neglect), the presence of a child or youth with a disability, or two or more barriers to employment, which include the lack of a high school degree or General Education Development (GED), illiteracy, low English proficiency, a history of incarceration or detention for criminal activity, and a history of unstable employment.

At the risk of Homelessness, as defined in 24 CFR 91.5:

- An individual or family who:
  - Has an annual income below 30 percent of the median family income for the area, as determined by HUD;
  - Does not have sufficient resources or support networks, *e.g.,* family, friends, faith-based or other social networks, immediately available to prevent them from moving to an emergency shelter or another place described in paragraph (1) of the "Homeless" definition; **and**
  - Meets one of the following conditions:
    - Has moved because of economic reasons two or more times during the 60 days immediately preceding the application for homelessness prevention assistance;
    - Is living in the home of another because of economic hardship;
    - Has been notified in writing that their right to occupy their current housing or living situation will be terminated within 21 days after the date of application for assistance;
    - Lives in a hotel or motel and the cost of the hotel or motel stay is not paid by charitable organizations or by federal, State, or local government programs for low-income individuals;
    - Lives in a single-room occupancy or efficiency apartment unit in which there reside more than two persons or lives in a larger housing unit in which there reside more than 1.5 people per room, as defined by the U.S. Census Bureau;
    - Is exiting a publicly funded institution, or system of care (such as a health-care facility, a mental health facility, foster care or other youth facilities, or a correction program or institution); *or*
    - Otherwise lives in housing that has characteristics associated with instability and an increased risk of homelessness, as identified in the recipient's approved consolidated plan.
  - A child or youth who does not qualify as "homeless" under this section, but qualifies as "homeless" under section 387(3) of the Runaway and Homeless Youth Act (42 U.S.C. 5732a(3)), section 637(11) of the Head Start Act (42 U.S.C. 9832(11)), section 41403(6) of the Violence Against Women Act of 1994 (42 U.S.C. 14043e-2(6)), section 330(h)(5)(A) of the Public Health Service Act (42 U.S.C. 254b(h)(5)(A)), section 3(l) of the Food and Nutrition Act of 2008 (7 U.S.C. 2012(l)), or section 17(b)(15) of the Child Nutrition Act of 1966 (42 U.S.C. 1786(b)(15)); *or*
  - A child or youth who does not qualify as "homeless" under this section but qualifies as "homeless" under section 725(2) of the McKinney-Vento HomelessAssistance Act (42 U.S.C. 11434a (2)), and the parent(s) or guardian(s) of that child or youth if living with her or him.

Fleeing, or Attempting to Flee, Domestic Violence, Dating Violence, Sexual Assault, or Human Trafficking

- **Domestic violence,** which is defined in 24 CFR 5.2003 includes felony or misdemeanor crimes of violence committed by:
  - A current or former spouse or intimate partner of the victim (the term "spouse or intimate partner of the victim" includes a person who is or has been in a social relationship of a romantic or intimate nature with the victim, as determined by the length of the relationship, the type of the relationship, and the frequency of interaction between the persons involved in the relationship);
  - A person with whom the victim shares a child in common;
  - A person who is cohabitating with or has cohabitated with the victim as a spouse or intimate partner;
  - A person similarly situated to a spouse of the victim under the domestic or family violence laws of the jurisdiction receiving HOME-ARP funds; *or*
  - Any other person against an adult or youth victim who is protected from that person's acts under the domestic or family violence laws of the jurisdiction.
- **Dating violence,** which is defined in 24 CFR 5.2003 means violence committed by a person:
  - Who is or has been in a social relationship of a romantic or intimate nature with the victim; and
  - Where the existence of such a relationship shall be determined based on a consideration of the following factors:
  - The length of the relationship.
  - The type of relationship
  - The frequency of interaction between the persons involved in the relationship.
- **Sexual assault,** which is defined in 24 CFR 5.2003 means any nonconsensual sexual act proscribed by Federal, Tribal, or State law, including when the victim lacks the capacity to consent.
- **Stalking,** which is defined in 24 CFR 5.2003 means engaging in a course of conduct directed at a specific person that would cause a reasonable person to:
  - Fear for the person's safety or the safety of others; or
  - Suffer substantial emotional distress.
- **Human Trafficking,** includes both sex and labor trafficking, as outlined in the Trafficking Victims Protection Act of 2000 (TVPA), as amended (22 U.S.C. 7102). These are defined as:
  - *Sex trafficking* means the recruitment, harboring, transportation, provision, obtaining, patronizing, or soliciting of a person for the purpose of a commercial sex act, in which the commercial sex act is induced by force, fraud, or coercion, or in which the person induced to perform such act has not attained 18 years of age; or
  - *Labor trafficking means* the recruitment, harboring, transportation, provision, or obtaining of a person for labor or services, through the use of force, fraud, or coercion for the purpose of subjection to involuntary servitude, peonage, debt bondage, or slavery.

Other Populations, where providing supportive services or assistance under section 212(a) of NAHA (42 U.S.C. 12742(a)) would prevent the family's homelessness or would serve those with the greatest risk of housing instability. HUD defines these populations as individuals and households who do not qualify under any of the populations above but meet one of the following criteria:

- **Other Families Requiring Services or Housing Assistance to Prevent Homelessness** is defined as households (i.e., individuals and families) who have previously been qualified as "homeless" as defined in 24 CFR 91.5, are currently housed due to temporary or emergency assistance, including financial assistance, services, temporary rental assistance or some type of other assistance to allow the household to be housed, and who need additional housing assistance or supportive services to avoid a return to homelessness.
- **At Greatest Risk of Housing Instability** is defined as household who meets either option below:
    - Has annual income that is less than or equal to 30% of the area median income, as determined by HUD and is experiencing severe cost burden (i.e., is paying more than 50% of monthly household income toward housing costs), *or*
    - Has annual income that is less than or equal to 50% of the area median income, as determined by HUD, **AND** meets one of the following conditions from paragraph (iii) of the "At risk of homelessness" definition noted above.

Veterans and Families that include a Veteran Family Member that meet the criteria for one of the qualifying populations described above are eligible to receive HOME-ARP assistance.

VI. Selection Criteria for Eligible Subgrantees

CoCs will select the chosen subgrantee(s) agency to administer the HNP in accordance with the requirements noted below.

All Housing Navigation Subgrantees must meet the following requirements:

- Recommended by the CoC;
- A 501(c)3 nonprofit agency or a local unit of government that operates its principal place of business in the State of Michigan.
- A local unit of government can subgrant the funds to a PHA; (Public Housing Authority)
- Actively involved in the CoC planning process;
- Willing to re-align existing program structures and use of funds to fill gaps and end homelessness;
- Willing to use HMIS (Homeless Management Information System) to collect relevant data (Domestic violence service agencies use a comparable database);
- Capacity to use a standardized assessment tool or process;
- Participation in a QSOBAA (Qualified Services Organization Business Associates Agreement) to allow sharing within HMIS;
- Exhibits the financial capacity to administer funds as demonstrated through an audited financial statement;
- Has financial management systems in place such as cash receipts and disbursement logs, invoices and cancelled check registers, etc.
- Employs staff person who possess bachelor's degree in accounting, *or* possess experience in accounting along with college accounting credits, *or* a bookkeeper whose work is overseen by an accounting firm;

- Does not require program participants to complete any prerequisites to receive services (i.e., religious activities, sobriety treatment, etc.); and
- Displays the ability to collaborate, coordinate, and partner with other local organizations.

MSHDA reserves the right to evaluate the past performance of all recommended agencies and to approve or deny their participation.

VII. Eligible Costs

HNP funds may be used to pay eligible costs associated with the HOME-ARP supportive services by the requirements in this NOFA.

Case Management: Funding to support local homeless service agencies in providing housing navigation services for qualifying individuals and families that are searching for housing/newly housed with MSHDA's Homeless Preference HCV program or other CoC or ESG-funded housing programs. Services will include but not be limited to robust housing search assistance; assistance with eligibility paperwork; assistance with the annual recertification paperwork; landlord meditation; and housing retention and stabilization services. Case management costs can account for no less than 90% of the total grant allocation.

Administrative Costs: Expenses associated with fiduciary and/or subgrantee administrative support during the grant period. Administrative costs can account for up to 10% of the total grant allocation.

VIII. Ineligible Costs

HNP funds cannot be used for any form of financial assistance to the household or other activities/programs beyond the scope noted above.

IX. Collaboration

By collaborating, local partners will work to leverage and coordinate community resources. Although the selected subgrantee may provide many services, it is beneficial to partner with other local organizations to assure a cadre of available support.

For the use of HNP funds, a Memorandum of Understanding (MOU) must be completed between each CoC and MSHDA to ensure all HOME-ARP Qualifying Populations can be served by the local Coordinated Entry System (CES). The MOU must be completed before the release of funds and can be found on MSHDA's HOME-ARP webpage. MSHDA will have one grant with the designated Fiduciary and that Fiduciary will be responsible for grant distribution of funds, compliance, and monitoring with community subgrantees.

X. Defining Roles

Following is an explanation of the minimum duties performed by the CoC, Fiduciary, and sub-grantee (s). The CoC-recommended Fiduciary will be awarded the funds; therefore, the Fiduciary is the only agency billing MSHDA for reimbursement.

***MSHDA reserves the right to alter any/all recommendations based on issues of prior applicant performance, applicant capacity, eligibility of project activities, and consistency with the criteria and standards discussed in this NOFA*.**

Continuum of Care (CoC)

Each CoC operates a CES by mapping out the resources and delivery process used to prevent homelessness and rapidly re-house people living in homelessness. As a result, duplication of services is reduced and gaps within the community's system are identified. In addition, the CoCs CES overcomes barriers that individual programs cannot address, allowing communication, coordination, and collaboration to be brought to scale on a community-wide level.

Under HOME-ARP, CoCs are required to expand the scope of their CES to include all Qualifying Populations defined in the HOME-ARP notice. This expansion relates only to the assessment of eligibility for and referral to HOME-ARP resources. Coordinated Entry Systems are responsible to perform the following functions:

- Implement and maintain a homeless crisis response system that is routinely monitored and evaluated based on HUD's System Performance Measures.
- Develop a culture that teaches and makes decisions based on outcomes.
- Analyze the local portfolio of grants to determine if the right mix of housing and services is available to meet the needs of the homeless households that present for assistance. Determine whether funding for some projects, in whole or in part, should be reallocated to make resources available for new efforts.
- Prioritize the use of MSHDA grant funds for proven strategies.
- Solidify and enhance partnerships within the following areas:
    - Behavioral Health
    - Domestic violence and human trafficking
    - Education and employment
    - Healthcare
    - Law enforcement
    - Veteran and youth services
- Further the application and implementation of best practices and HOME-ARP guiding principles.
- Confirm and support the identified agency(s) that will function as HPP Fiduciary and Subgrantee(s).
- Monitor services provided by the Fiduciary and Subgrantee(s) to ensure they meet the needs of the local community and that any critical issues are addressed.
- Provide meeting minutes, notices, and agendas to the designated MSHDA Homeless Assistance Specialist.
- Ensure that all MSHDA HOME-ARP-funded agencies participate in CoC or local planning body (LPB) meetings.
- Ensure completion of HMIS sharing agreement between all relevant CoC/LPB agencies.

Note: LPBs are subsets of the BOSCOC. While each LPB operates its CES, they are all responsible to follow the overarching guidance and instruction of the BOSCOC.

Fiduciary

The Fiduciary is an agency selected and affirmed by the CoC to receive and distribute MSHDA HOME-ARP funding as allocated by the approved budget. The Fiduciary agrees to the following responsibilities:

- Execute grant documents for the CoCs allocation, including:
    - Memorandum of Understanding (MOU) with the CoC and with all key partners.
    - Sign the contract and applicable documents required by MSHDA;

    - Initiate and execute subgrantee grants as needed.
- Assure use of funds by the grant agreement, communicating knowledge of any fraudulent activity to MSHDA and the CoC;
- Submit quarterly Financial Status Reports (FSRs) in the IGX system;
- Advise the CoC of agencies not using dollars promptly to avoid loss of funds to the community and possible recapture by MSHDA;
- Evaluate the quality of services and provide oversight to funding subgrantees based upon documented outcomes and in partnership with the CoC;
- Monitor ten percent (10%) of all participant files, as well as the financial records, of all subgrantees except for emergency shelters.

Subgrantee(s)

The Subgrantee(s) is an agency selected and affirmed by the CoC to facilitate services outlined in this NOFA. The Subgrantee(s) agrees to the following responsibilities:

- Employ staff to provide Housing Navigation services;
- Actively participate in the Coordinated Entry System, including acceptance of referred, eligible households and regular communication on available Housing Navigation resources;
- Provide routine reports to the CoC on Housing Navigation performance, including the number of households identified and served and the status of funding expenditure;
- Maintain knowledge of Housing Navigation and HOME-ARP requirements, regulations, and service standards.

Addendum A

MSHDA HOME-ARP - Housing Navigation Program
Notice of Funding Availability (NOFA) - Allocation & Methodology

MSHDA has allocated $3,000,000 in HOME-ARP funding to support Housing Navigation under the Supportive Services component of HOME-ARP. Each Continuum of Care (CoC) will receive an allocation to support the activities outlined in the NOFA.

In determining the Housing Navigation allocation for each CoC, MSHDA considered the following:

- Housing Choice Voucher (HCV) allocation by CoC
- HUD CoC Program allocation by CoC
- MSHDA Emergency Solutions Grant (ESG) allocation by CoC

All allocations are subject to the following eligible budget lines:

- At least 90% of the total grant must be used for staffing costs to support Housing Navigation services
- Up to 10% of the total grant can be used for administrative costs

The table below represents each CoC Housing Navigation funding allocation.

CoC Name/Number	HOME-ARP Housing Navigation 2-Year Allocation	Minimum Full-Time Equivalency (FTE)
MI-500 (Balance of State CoC)	$150,000	1 FTE
MI-501 (Detroit CoC)	$300,000	2 FTE
MI-502 (Out-Wayne County CoC)	$225,000	1.5 FTE
MI-503 (Macomb County CoC)	$210,000	1.25 FTE
MI-504 (Oakland County CoC)	$210,000	1.25 FTE
MI-505 (Genesee County CoC)	$150,000	1 FTE
MI-506 (Kent County CoC)	$225,000	1.5 FTE
MI-507 (Kalamazoo County CoC)	$150,000	1 FTE
MI-508 (Ingham County CoC)	$150,000	1 FTE
MI-509 (Washtenaw County CoC)	$150,000	1 FTE
MI-510 (Saginaw County CoC)	$150,000	1 FTE
MI-511 (Lenawee County CoC)	$90,000	.5 FTE
MI-512 (Grand Traverse Area CoC)	$150,000	1 FTE
MI-514 (Calhoun County CoC)	$150,000	1 FTE
MI-515 (Monroe County CoC)	$90,000	.5 FTE
MI-516 (Muskegon County CoC)	$90,000	.5 FTE
MI-517 (Jackson County CoC)	$90,000	.5 FTE
MI-518 (Livingston County CoC)	$90,000	.5 FTE
MI-519 (Ottawa County CoC)	$90,000	.5 FTE
MI-523 (Eaton County CoC)	$90,000	.5 FTE
TOTAL	**$3,000,000**	

Can each CoC choose what populations to prioritize, based on local needs?
CoCs can propose prioritization factors for HNP case management services, which must receive prior approval from MSHDA before implementation. CoCs cannot change or add to eligibility criteria for HOME-ARP services, including HNP. The CoC must comply with all applicable fair housing, civil rights, and nondiscrimination requirements, including but not limited to the requirements listed in 24 CFR 5.105(a) when applying preferences through its referral methods.

What are the HMIS requirements for this program? Can HMIS costs be billed to the case management line? Or would that be an admin line?
Subgrantee's will be required to enter household data and services into HMIS. This is still in development and more information will be provided at project start. Staff time for completing HMIS data entry can be billed to the case management budget line.

Allocations

Will MSHDA be allocating funds per CoC and then having them submit a proposal?
The HNP does not require CoCs to submit a proposal for funds. However, an application will be required to provide further details on how HNP funds will be utilized and prioritized. The HNP NOFA provides an Addendum, detailing the methodology and allocation for each CoC.

Will the Balance of State Continuum of Care (BOSCOC) only have one FTE (Full Time Employee) for the BOSCOC?
Yes. The HNP NOFA Addendum provides a table detailing each CoC's program allocation and the potential amount for a part-time or full-time employee, dedicated to housing navigation programming.

Is there a time limit on how long a household can use HNP funds? Will the type of services change throughout the program?
The grant term (provision of services) for the HNP is two (2) years. Households will receive case management services throughout the grant based on need. To best serve the community, strengths-based case management and progressive engagement will help determine best practices when utilizing funds.

Can a participant receive funding/services from the HNP and the HPP?
No. Households receiving financial assistance through HPP will receive case management assistance through Housing Stability Service (HSS) funds (previously known as CERA). The HNP will only be utilized for case management services for any other housing resources.

Will there be any part of the HOME-ARP that will cover rental assistance?
Yes, the Homeless Prevention Program (HPP) will provide financial assistance for rental arrears and utilities.

MSHDA
MICHIGAN STATE HOUSING DEVELOPMENT AUTHORITY

Office of Rental Assistance and Homeless Solutions

HOME-ARP Grant Application

HOME American Rescue Plan (HOME-ARP): Housing Navigation Program (HNP)

735 E Michigan Ave
P.O. Box 30044
Lansing, MI 48909

EQUAL HOUSING OPPORTUNITY

Purpose and General Instructions

Purpose

Per the HOME-ARP Notice, MSHDA is required to obtain an application for funds, including supporting documents in accordance with 2CFR 200.302. This application ensures that MSHDA HOME-ARP supports this requirement for each Continuum of Care (CoC) enhancing the strategic use of funding for identified needs and priorities. Each CoC will detail its approach to service and funding coordination, partner collaboration, and effective referral processes as a strategic response to identified needs within each homeless crisis response system.

Instructions

Each CoC must work collaboratively to complete this document in its entirety. **Please submit the HNP Application to Morgan Quinney-Naval, Supportive Services Analyst, subject line: HNP Application [Name of COC]**. Submissions will be accepted via email only. The Supportive Services Analyst will provide email confirmation of receipt by the stated deadline. Email confirmation only confirms receipt of the sent documents; it does not indicate a thorough review has been completed. Following review of the submitted HNP Application, the Supportive Services Analyst will provide individualized feedback and/or technical assistance as needed.

Due Date

The HNP Application is due to Morgan Quinney-Naval, quinneynavalm1@michgan.gov by 5:00 PM EST, **Friday, April 7, 2023**.

Contact Information

Please direct any questions to the MSHDA HOME-ARP team, as indicated below:

Morgan Quinney-Naval – quinneynavalm1@michgan.gov – Supportive Services Analyst

MSHDA HOME-ARP General Email - MSHDA-HOMEARP@michigan.gov.

Official program documents and FAQ can be found on our MSHDA HOME-ARP web-page.

1. Agency Selection

a. How was the selected subgrantee chosen? What organizational qualities does this subgrantee exemplify in order to provide services through the Housing Navigation Program (HNP)?

b. Will the agency hire new staff or re-purpose existing staff for this program?

2. Agency Prioritization

a. What are the local prioritization factors for households receiving case management services through HNP?

b. How will households receiving services from other programs be referred to the Housing Navigator?

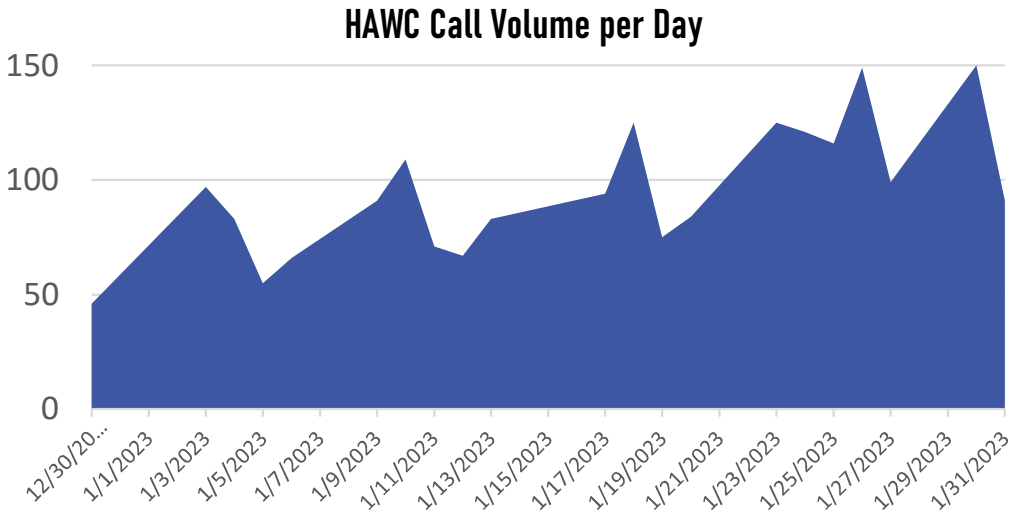
HAWC CALL CENTER DATA
JANUARY 2023

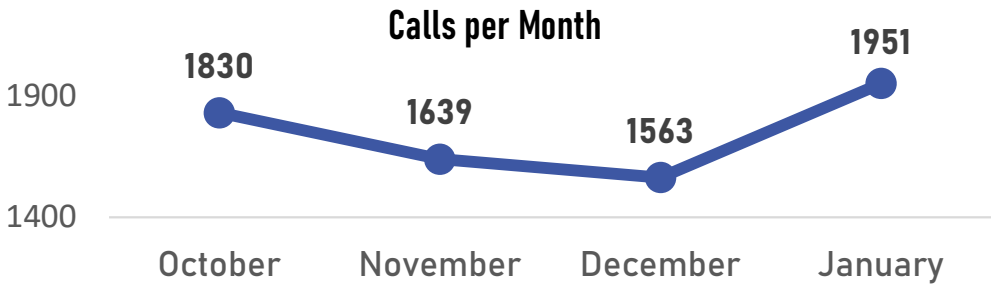
HAWC
HOUSING ACCESS FOR WASHTENAW COUNTY

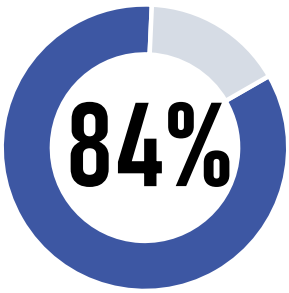
WASHTENAW COUNTY MICHIGAN 1826
OFFICE OF COMMUNITY & ECONOMIC DEVELOPMENT
Collaborative solutions for a promising future

1,951
Total Calls

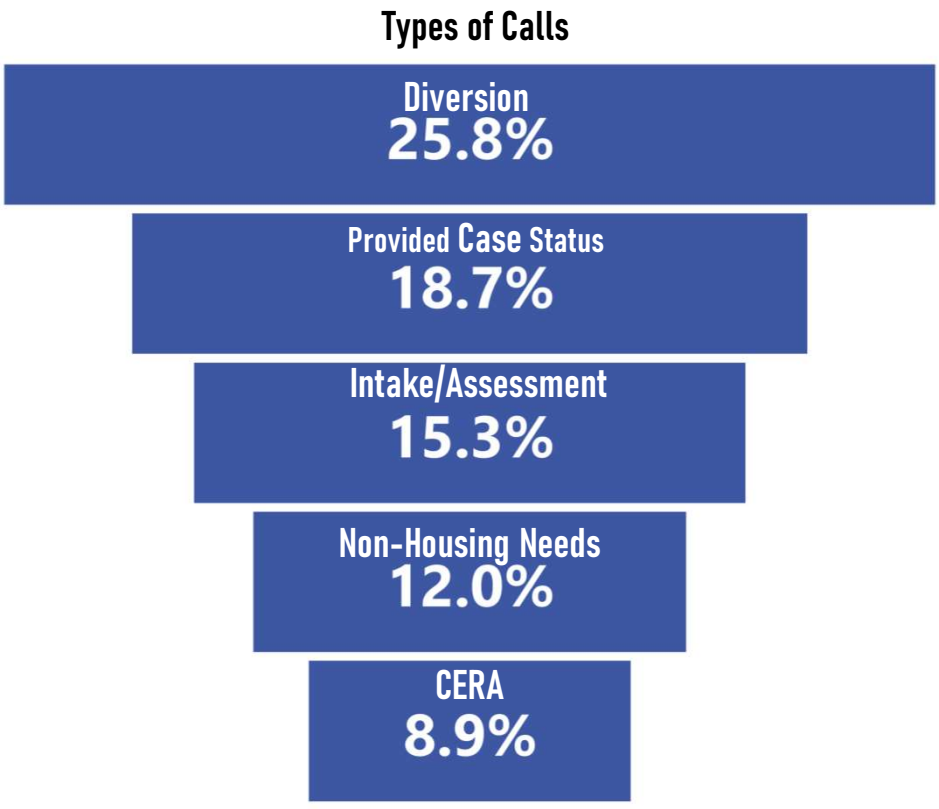
98
Calls per day







Of Calls Answered in less than 5 minutes



1:37 Minutes
Average Wait Time

ASSESSSMENTS & REFERRALS
JANUARY 2023

OFFICE OF COMMUNITY & ECONOMIC DEVELOPMENT
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INTAKE & SCHEDULING

47
Prevention Appointments Scheduled
Currently Scheduling into June

17
Family Assessments Scheduled
Currently Scheduling into May

119
Individual Assessments Scheduled
Currently Scheduling in February

FAMILIES

16
Prevention Assessments Conducted

5
Family Assessments Conducted

INDIVIDUALS

52
Individual Assessments Conducted

During January, Both Assessment Agencies, SOS Community Services for families and SAWC for individuals, have been focused on hiring and training staff. Assessment rates are expected to catch up over the coming months.

Currently, Prevention appointments are being moved up and prioritized, and we are hoping to catch up on prevention appointments by Mid-March.

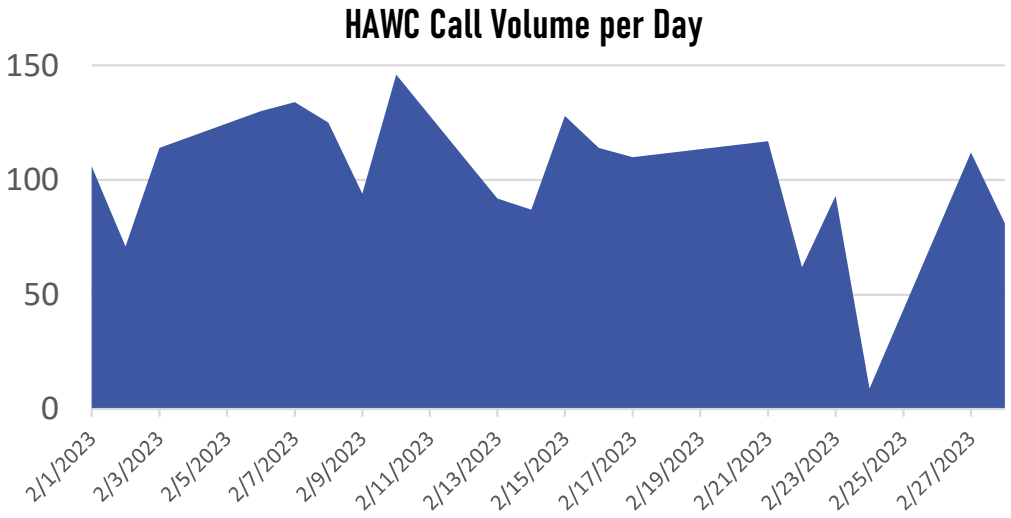
HAWC CALL CENTER DATA
FEBRUARY 2023

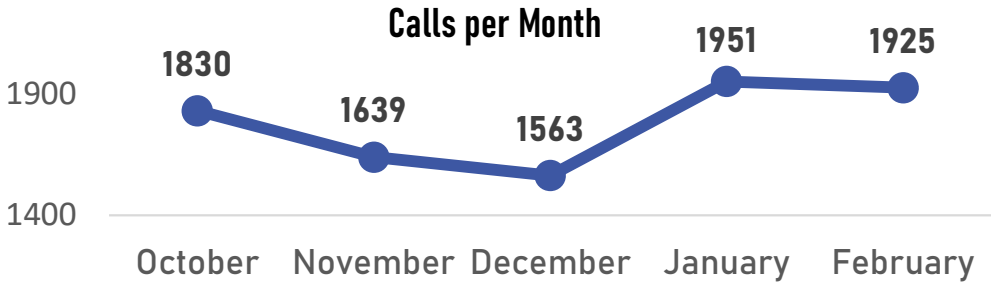
HAWC
HOUSING ACCESS FOR WASHTENAW COUNTY

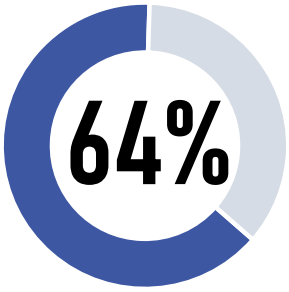
WASHTENAW COUNTY MICHIGAN 1826
OFFICE OF COMMUNITY & ECONOMIC DEVELOPMENT
Collaborative solutions for a promising future

1,925
Total Calls

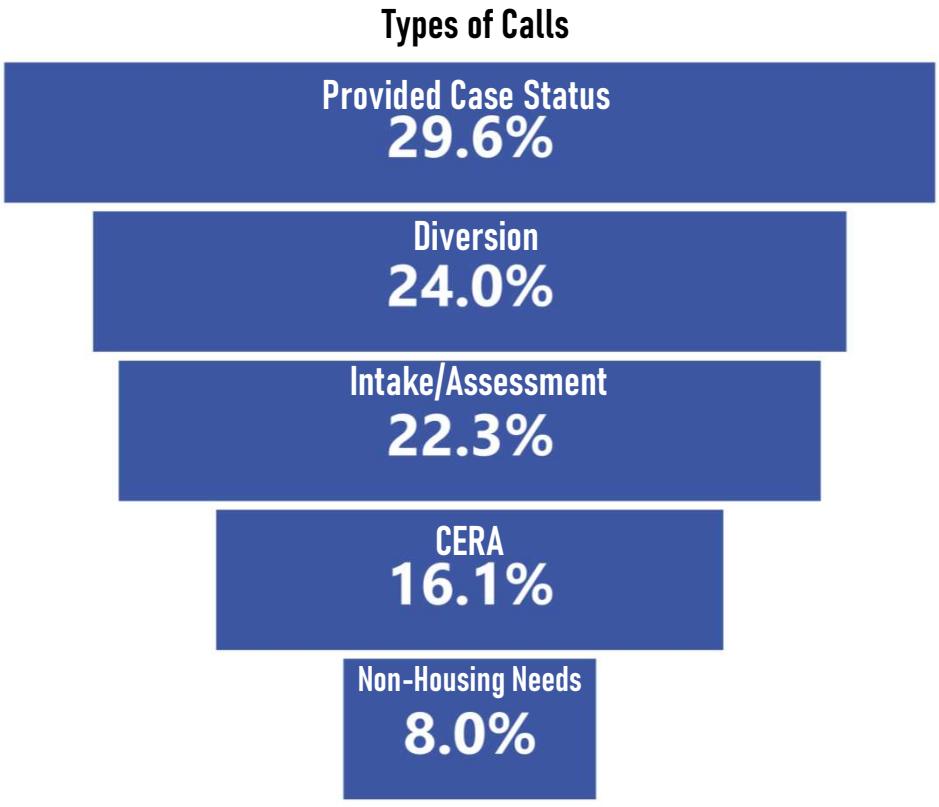
101
Calls per day







Of Calls Answered in less than 5 minutes



2:36 Minutes
Average Wait Time

ASSESSSMENTS & REFERRALS
FEBRUARY 2023

OFFICE OF COMMUNITY & ECONOMIC DEVELOPMENT
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INTAKE & SCHEDULING

62
Prevention Appointments Scheduled
Currently Scheduling into April

86
Family Assessments Scheduled
Currently Scheduling into July

36
Individual Assessments Scheduled
Currently Scheduling in March

FAMILIES

81
Prevention Assessments Conducted

9
Family Assessments Conducted

INDIVIDUALS

34
Individual Assessments Conducted

Efforts to catch up with prevention appointments continued in February. At the close of the month, there were 65 households waiting for appointments, with appointment times available each week for urgent cases.

Family shelter assessments continue to be delayed. Currently, 20 appointments are scheduled in March.

WASHTENAW COUNTY CONTINUUM OF CARE (CoC)
COORDINATED ENTRY ORGANIZATIONAL CHART

OVERSIGHT

Office of Community & Economic Development (OCED)

Assures a Comprehensive Communitywide Service and Housing Delivery System: Coordinates partner agencies, Tracks and shares HAWC Data and Performance Measures, Executes contracts, Monitors data entry, Provides policy and procedure trainings, Monitors subgrantees and system processes.

Contact: Morghan Boydston, williamsm@washtenaw.org

ACCESS

Housing Access for Washtenaw County (HAWC) Call Center

Provides access to Washtenaw County's Homelessness Response System: Receives inbound calls, Places outbound calls (voice messages and rescheduling), Provides resources, Completes Intakes, Schedules Assessments, Updates HMIS with households' Homelessness status, Completes Family Housing Choice Vouchers (HCV) and their Recertifications, Continues referrals between CHP meetings as openings become available via the same CHP process

Contact: HAWC@washtenaw.org

ASSESSMENT

HAWC Family Assessment Agency (SOS)

Assesses Families and Refers for housing resources: Completes Family Shelter Assessments, Completes Prevention Assessments, Makes referrals to the Community Housing Prioritization (CHP) Committee, Receives Referrals for Rapid Re-Housing

Contact: Rhonda Weathers, rhondaw@soscs.org

HAWC Individual Assessment Agency (SAWC)

Assesses Individuals and Refers for housing resources: Completes Individual Shelter Assessments, Completes Individual Housing Choice Vouchers (HCV) and their Recertifications, Makes referrals to the Community Housing Prioritization (CHP) Committee, Receives Referrals for Residential Programs

Contact: Dan Kelly, kellyd@washtenaw.org

REFERRAL

Community Housing Prioritization Committee (CHP)

Oversees the centralized referral process for Rapid Re-Housing (RRH) and Permanent Supportive Housing (PSH) programs: Prioritizes households for housing resources, Refers households into housing programs, Makes procedural decisions, Conducts case consultations

Contact: Andrew Kraemer (OCED), kraemera@washtenaw.org

Office of Community & Economic Development (OCED)	OCED is the CoC Lead, HMIS Lead, and Housing Assessment and Resource Agency (HARA). In these various roles, OCED submits collaborative applications to the U.S. Department of Housing and Urban Development (HUD) and Michigan State Housing Development Authority (MSHDA) for CoC funds, staffs CoC committees, produces planning materials, coordinates needs/gaps assessments, collects and reports performance data, monitors subrecipient performance, coordinates resources, integrates activities and facilitates collaboration, updates and implements the HMIS Governance Charter, reviews, revises, and approves the CoC HMIS data privacy plan, data security plan, and data quality plan, ensures that the HMIS is administered in compliance with HUD requirements, provides support to CoC and ESG recipients and subrecipients. OCED's Housing and Homelessness Team is staffed by 5 Full-Time Employees (1 Manager, 1 Policy Specialist, 1 HMIS System Administrator, 1 HMIS Specialist, 1 CoC Data & Evaluation Specialist) and 1 Part-Time Intern.
HAWC Call Center	HAWC is funded by the Michigan State Housing Development Authority (MSHDA) Emergency Solutions Grant (ESG) program and Washtenaw County Administrative Funds for FY22-23. While HAWC is an entity of Washtenaw County and operated by the Office of Community & Economic Development (OCED), it follows a community process that involves partner agencies while maintaining compliance with MSHDA ESG standards. HAWC is staffed by 8 Full-Time Employees (1 Supervisor, 6 Intake Specialists, 1 Court Liaison/HCV Specialist, and 1 HMIS Agency Administrator) . While these employees are officially Washtenaw County employees, these are still temp positions.
HAWC Family Assessment Agency	Washtenaw County's HAWC Family Assessment Agency is SOS Community Services. SOS is a private non-profit operating in Ypsilanti, MI and serving all of Washtenaw County. Their mission is to promote housing stability and family self-sufficiency through collaboration, care and respect. The SOS HAWC Family Assessment program is staffed by 5 Full-Time Employees (1 Supervisor and 4 Full-Time Coordinated Entry Specialists who conduct Prevention Assessments and Family Shelter Assessments).
HAWC Individual Assessment Agency	Washtenaw County's HAWC Individual Assessment Agency is Shelter Association of Washtenaw County (SAWC). SAWC is staffed by an Assessment and Intake Team to complete over 700 detailed assessments each year, including Housing Choice Voucher pre-applications for individuals experiencing homelessness. SAWC also provides emergency shelter for the winter months and year round residential shelter for up to 50 persons at a time. Serving over 1300 individuals annually, SAWC provides housing case management and supportive services to overcome barriers to housing. SAWC locates permanent housing for 250 persons and safely diverts more than 60 persons from shelter each year.
Community Housing Prioritization (CHP)	This committee meets bi-monthly and is responsible for overseeing the centralized referrals process for RRH and PSH resources. Committee members include agencies that provide housing services to those experiencing homelessness as well as agencies that have housing stock. To account for the distinct needs of each population, the CHP Committee is divided into three meetings by population all meeting on the same day. This allows for more focused and productive meetings that recognizes each population's unique barriers and resources.
Coordinated Entry Oversight & Evaluation	This committee meets monthly and is responsible for monitoring the implementation and effectiveness of the county's centralized intake process, Housing Access of Washtenaw County (HAWC). The committee reviews customer service evaluation results, agency provider survey results, HAWC policies and procedures, and marketing materials in order to make program improvement recommendations.

OFFICE OF COMMUNITY & ECONOMIC DEVELOPMENT
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HAWC Call Center Workflow

HAWC
HOUSING ACCESS FOR WASHTENAW COUNTY

Household experiencing a housing crisis contacts HAWC
All individuals and families experiencing homelessness or at-risk of becoming homeless can call HAWC at (734) 961-1999. The call center operates Monday-Friday from 8:30am to 5:00pm. Callers have the option to leave a message rather than hold for the next available intake specialist. Their call will be returned within 24 hours. Households can also email HAWC@washtenaw.org

Yes

Same Day Intake is completed
Intake Specialists follow a script to determine need and eligibility, as well as discern primary and urgency of need.

Yes

Household's Category of Homelessness is confirmed**

ACCESS

Housed, but seeking additional housing and general resources

Yes

Intake Specialist provide information on affordable housing resources and other relevant information as applicable and remind household to call back should their circumstances escalate.

At Imminent Risk of Homelessness (Category 2)**
Will lose primary night-time residence within 14 days

Yes

Household Income is at or below 30% Annual Median Income**

No

Yes

Prevention Assessment (HAWC Family Assessment Agency) is scheduled which is used to determine eligibility for Direct Assistance (i.e. eviction prevention, move-in assistance)

Literally Homeless (Category 1)**
Currently living in a shelter, transitional housing, or a place not meant for human habitation

Yes

Household is Fleeing Domestic Violence (Category 4), Youth (ages 10-20 years), or Veteran**

No

Assessment is scheduled
Shared calendar between HAWC Call Center and the HAWC Assessment Agencies is used to schedule an appointment based on next availability

Yes

Household is referred:
SafeHouse (Fleeing Domestic Violence);
Ozone House (Youth);
Veteran Affairs (Veteran)

ACCESS

**Denotes a Policy according to either the U.S. Department of Housing and Urban Development (HUD) or Michigan State Housing Development Authority (MSHDA) which fund services.

What is the definition of homelessness?

Has a primary nighttime residence that is a public or private place not meant for human habitation ; or
Is living in a 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 and local government programs); or Is exiting an institution where (s)he has resided for 90 days or less and who resided in an emergency shelter or place not meant for human habitation immediately before entering that institution. This is commonly known as Category 1 according to the United States Department of Housing and Urban Development (HUD).

How do I apply for security deposit assistance/rental eviction assistance?

Step 1: Apply for Michigan Department of Health and Human Services (MDHHS) State Emergency Relief (SER)
Step2: Call HAWC Call Center at (734) 961-1999
Step 3: Accept earliest prevention appointment offered
Step 4: Attend your scheduled appointment

How do I get on the list for Housing Choice Voucher (HCV)?

If you are an individual when you attend your Shelter Assessment appointment at the Delonis center, you be assisted with the Pre-Application to get on Michigan State Housing Development Authority (MSHDA) Homeless Preference Waitlist for HCVs.
If you are a family, after receiving your Family Shelter Assessment, you be scheduled for the HCV Pre-Application and a Specialist will assist you with supplying the required documentation.

How do I sign up for Avalon Housing?

There are many providers in our system that provide housing supports. There are no guarantees that you will be offered a unit with Avalon Housing. The below are the steps that you will need to take to get access to housing supports.
Step1: Call HAWC Call Center (734) 961-1999
Step 2: Accept earliest assessment appointment offered
Step 3: Attend your scheduled appointment
Step 4: If you are eligible for resources, you will be added to the Community Housing Prioritization (CHP) list
Step 5: Wait to be contacted for a placement

When will I be called for family shelter?

You will be called for family shelter when beds (according to the size of your family) are open.

How do I get to the HAWC Housing List?

You can find a list of affordable housing on our HAWC website (www.housingaccess.net). You will need to work directly with landlords on this list if you are interested in renting. If you are experiencing homelessness, please call HAWC (734) 961-1999. You might be eligible for housing resources.

How do I get ahold of Delonis?

To contact Delonis:
Step 1: Call the HAWC Call Center at (734) 961-1999
Step 2: Complete the Intake/Screening. A Referral to Delonis and/or Individual Shelter Assessment Appointment will be scheduled. Next steps will be provided during your Intake.

How do I file a complaint against my landlord?

If you are having issues with your landlord, Call Legal Services of South Central Michigan (LSSCM) at (734) 665-6181 or visit LSSCM's Website (www.lsscm.org). You can also contact Fair Housing. For more information about Fair Housing, go to OCED's Website (www.washtenaw.org/595/Fair-Housing).

What is the number for Wayne County's Housing Assessment and Resource Agency (HARA)?

Wayne – Detroit, Highland Park, Hamtramck (313) 305-0311
Out-Wayne (734) 284-6999

What cities are in Washtenaw County?

See below. You can also find a map on our HAWC website (www.housingaccess.net).

City of Dexter, Sylan Township, Ann Arbor Township, Augusta Township, Bridgewater Township, City of Ann Arbor, City of Saline, City of Ypsilanti, Dexter Township, Lima Township, Lima Township, Manchester Township, Northfield Township, Pittsfield Township, Salem Township, Saline Township, Scio Township, Superior Township, Webster Township, York Township, Ypsilanti Township

HAWC Individual Shelter Assessment Workflow

ASSESSMENT

Literally Homeless Individual Seeking Shelter (Category 1)

Shelter services at Delonis are for single adults 18 years or older. Households can seek this service in one of two ways:

1. Call the HAWC Call Center (734) 961-1999. Same day Intake is completed and a Referral is sent to SAWC.

2. Walk-in to Delonis (for URGENT needs only due to limited availability)

Important: Winter Shelter (November through March) is available to Individuals with or without a Referral

Yes ↓

Diversion options are explored with Individual

Direct Assistance Financial Support is provided as available/eligible

Yes ↓

Household is Diverted

Yes → **No further support required/provided**

No ↓

Individual Shelter Assessment is completed

Individual Shelter Assessments are completed on the same day an Intake was completed OR on demand if the Individual appeared at the Delonis Center first.

Housing Choice Voucher (HCV)

Pre-application for the MSHDA HCV Homeless Preference Waitlist and a Letter verifying Homelessness Status are completed →

Referral to Residential Program

There is a 1-4 Month waitlist. This fluctuates depending on the season →

Access to Services**

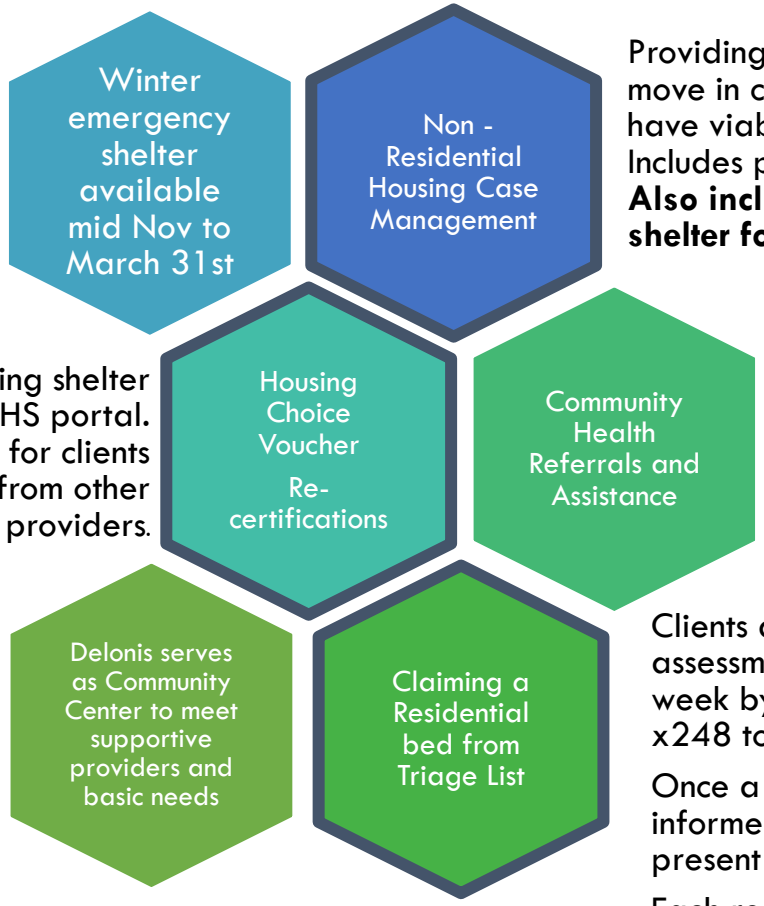
Showers, Laundry, Phone, Storage, Mail, Document-Ready Case Management Support, Clothing Vouchers, Referral for AATA Transport Half Fare Deal Card

**All Individuals have the same access to basic services at SAWC. Ongoing case management is provided as staffing and capacity allow and cannot be guaranteed

ASSESSMENT

HAWC Individual Assessment Agency

SERVICE ACCESS DETAILS



Providing housing search and move in costs to persons who have viable monthly income. Includes persons with vouchers. **Also includes those in winter shelter for 2 weeks or longer.**

Re-certify persons accessing shelter services in the MDHHS portal. Reach out to providers for clients reporting services from other homeless services providers.

Clients are informed at assessment to check in once a week by calling 734-662-2829 x248 to remain on Triage list.

Once a bed is available, client is informed and has 48 hours to present for bed.

Each residential client is assigned a housing case manager.

SERVICE ACCESS DETAILS

Frequently Asked Questions

Can a client access basic need services including emergency winter shelter if they have not called HAWC for a referral?
Yes, clients access basic needs services including seasonal, winter shelter access. Clients are given 48 hours to contact HAWC if they haven't already.

What community supports can a client be referred to when receiving the SAWC assessment/winter intake?
Washtenaw County Community Mental Health (WCCMH) Access Line for connections to Mental Health and Substance Abuse services, Packard Health clinic for Primary Care, SafeHouse hotline, Ozone for persons ages 18-24 years, Veteran supports and housing search, SOAR certified specialists to apply for SSI/SSDI

How does SAWC support single adults with the Housing Choice Voucher process?
At assessment, offer to help client complete the HCV pre-application to add their names to the lottery list AND Provides a homeless verification letter at time of assessment;

Adds client's HCV pre-application to the MSHDA portal;
Offer waivers and direct financial assistance to acquire vital identification documents;
Re-certifies clients who are accessing shelter services every 90 to 120 days in the MDDHS portal;
- May request Homeless verification letters from other client reported homeless service providers when not accessing SAWC services (PATH, SafeHouse, WCCMH, Ozone, etc.)

Notify and offer housing case management to clients who are pulled for an HCV and accessing shelter services

What are some of the supportive providers that make Delonis a Community Center?
Veteran Outreach Case Management, Michigan Works, WCCMH Outreach intakes, onsite Packard Health clinic, Employment recruiters

What services does SAWC offer?
SAWC provides access to Shower, Laundry, Phone, Storage, Mail, Document-Ready Case Management Support, Clothing Vouchers, and Referral for AATA Transport Half Fare Deal Card. All Individuals have the same access to basic services at SAWC. Ongoing case management is provided as staffing and capacity allow and cannot be guaranteed.

HAWC Family Shelter Assessment Workflow

Literally Homeless Family Seeking Housing (Category 1 and 4)
Following completion of the Same Day Intake with the Call Center, the household is scheduled for a Family Shelter Assessment with SOS

Yes ↓

Diversion options are explored with Family

Yes ↓

Household is Diverted Yes → **No further support required/provided**

No ↓

Family Shelter Assessment is completed
Family Shelter Assessments are completed over the phone at the scheduled time.
During the Assessment, required documentation is secured (VI-FSPDAT and Homeless Verification Letter)

Yes ↓

Case Management Support
Family is informed of next steps (CHP process) and alerted to contact HAWC Call Center on a weekly basis to confirm/change their housing situation.

Yes ↓

Household information is placed on the Community Housing Prioritization (CHP) list

ASSESSMENT

ASSESSMENT

Frequently Asked Questions

What are the income requirements for assistance?
The funding SOS uses requires that a client's household income be 30 percent of the Area Median Income for Washtenaw County. This chart can be found on MSHDA's ESG Policy and Procedures Webpage under Income Limit Charts.

How long does the process of assistance take?
The timeline for the process of assistance varies from person to person depending on the complexity of one's case and other factors. A typical timeline of assistance is between 2-3 weeks from start to finish.

Why is an inspection completed and what qualifications do staff have to complete inspections?
The standards for housing unit inspection under the ESG program are the habitability standards. These standards apply when a program participant is receiving financial assistance and moving into a new (different) unit or remaining in a current unit. Habitability inspections do not require a certified inspector but all persons conducting inspections have received training on how to complete them.

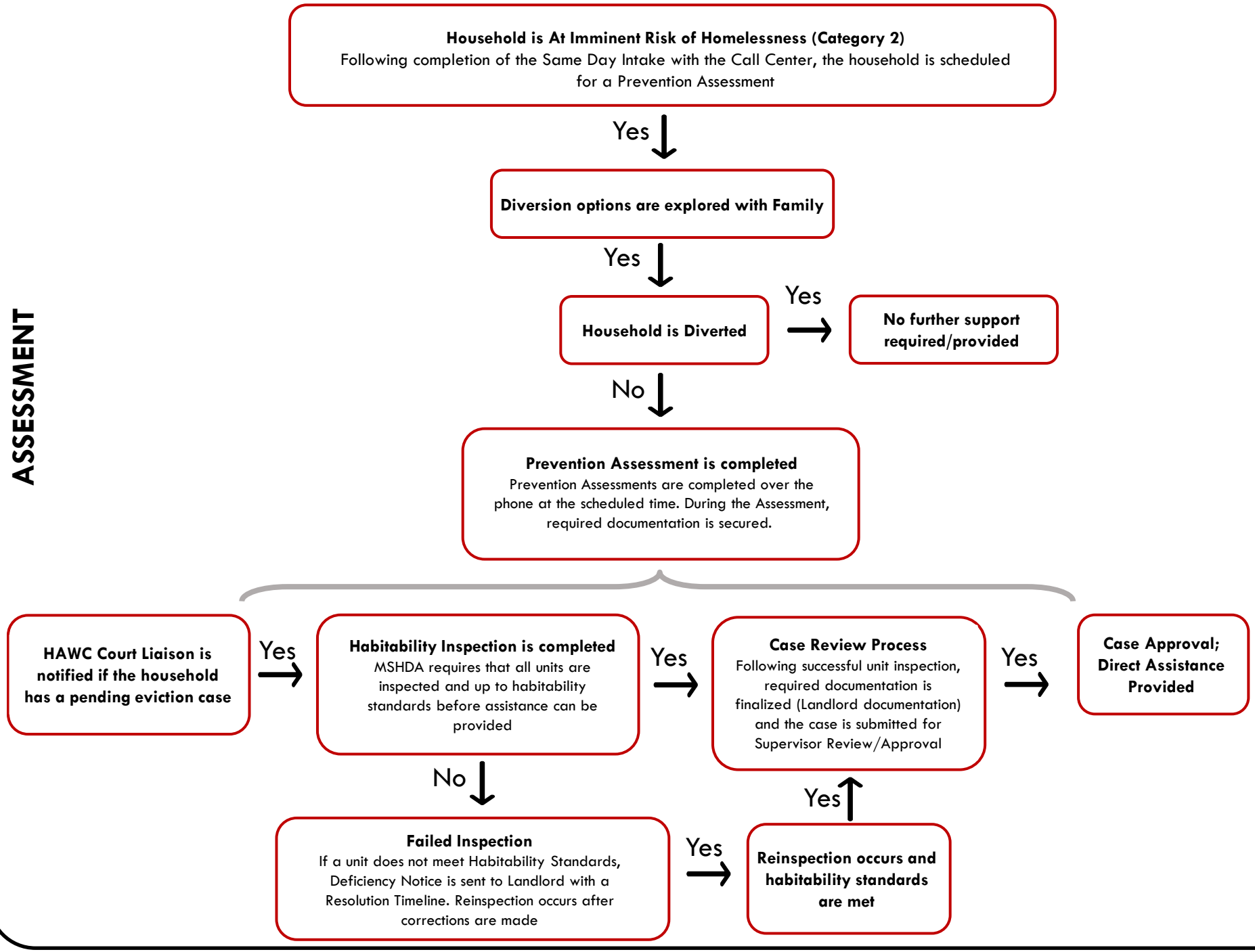
Once I am approved for assistance, how long will it take for my landlord to receive a check?
Once a case has been approved, a check is mailed directly to the landlord and is typically received within 1-2 weeks of approval.

What documents are required for assistance?
Documentation varies based on the funding source used. Typical documents that are required for assistance are proof of income for 30 days within a 60 day window, applicable eviction documents, a lease and a current ledger or an approval and move-in summary if seeking assistance with a security deposit. Additional documentation may be requested if the funding requires it.

Can I receive assistance if I am behind on rent but I haven't received an eviction notice yet?
No. A court-ordered eviction (Summons and Complaint, Judgement, Conditional Dismissal or Writ of Eviction) is required for homeless prevention assistance.

Can I receive assistance with a security deposit?
Yes. Funding requires that someone has been approved for a unit in Washtenaw County. A person who has signed a lease and/or has moved into the unit they seeking assistance with is not eligible for funding.

HAWC Prevention Assessment Workflow



Frequently Asked Questions

When will I get into shelter?

The wait time for shelter in Washtenaw County varies depending on availability. Typically, shelter space is full in Washtenaw County.

Why do I need to call weekly after my assessment?

HAWC and SOS ask that after a shelter assessment is completed, that you check in with the HAWC call center one time per week to update your living situation to stay active on the community's prioritization list.

Are you my case manager?

No. My role is to complete a shelter assessment with you and provide the information from the assessment to the prioritization committee so that you can be prioritized for shelter and other housing resources within the community.

What happens to my information after my appointment?

Once an assessment is completed, the information collected during the assessment is entered into our computer record-keeping system, the Homeless Management Information System (HMIS). The information entered into HMIS is collected by a representative from the Office of Community and Economic Development and your information is then added to a by-name, community prioritization list.

How long will it take for me to receive a housing resource?

The timeline for receiving a housing resource varies. A bi-weekly committee called CHP (Community Housing Prioritization) meets bi-weekly to case conference and select clients for resources through a community prioritization process that is based on many factors.

HOME-American Rescue Plan (HOME-ARP) Allocation Plan: An Overview

Presentation to the CoC Board

March 15, 2023

OFFICE OF COMMUNITY & ECONOMIC DEVELOPMENT

Collaborative solutions for a promising future

What is HOME-American Rescue Plan Funding?

- Part of President Biden's American Rescue Plan (ARP) signed into law on March 11, 2021 to address ongoing impact of COVID-19 pandemic
  - Over $1.9 trillion in relief funds

- $5 billion in ARP funds appropriated by Congress to be administered through U.S. Department of Housing & Urban Development's (HUD) HOME Program to perform 4 types of activities:
  (1) development of affordable rental housing;
  (2) tenant-based rental assistance (TBRA);
  (3) provision of supportive services; and
  (4) acquisition and development of non-congregate shelter units.

- Funds must be spent down by September 30, 2030.

- More details available in HUD Notice CPD-21-10

Washtenaw Urban County's HOME-ARP Allocation

- $4,462,230 allocated in HOME-ARP funds to Washtenaw Urban County
- Five percent ($228,111.50) has already been released to OCED for administration and planning purposes
- To access to the rest of the grant dollars, Washtenaw Urban County is required to submit a document to HUD called a HOME-ARP Allocation Plan, to explain how we propose to use the funds
- HUD submission deadline for HOME-ARP Plan: March 31, 2023
- After HUD approves the Plan, OCED will make funding awards through a competitive process.
  - HUD can reject the Plan and require corrections or changes before resubmitting to HUD.
  - HUD also allows for Substantial Amendments to the Plan before and/or after a Request for Proposal process.
    - Amendment process would involve additional public participation, local approvals, and HUD approval.

HOME-ARP Allocation for Washtenaw County

- Based on the County's housing inventory compared to the Level of Need, we see the following gaps:

Homeless Population

- Shelter -- Families: Need additional 44 units (178 beds)
- Permanent Housing -- Families: Need additional 70 units (266 beds)
- Shelter -- Individuals: Need additional 43 units (43 beds)
- Permanent Housing – Individuals: Need additional 150 units (150 beds)

Non-Homeless Population

- Need at least 4,805 additional affordable rental units for renters at or below 50% Area Median Income

Data Used for the Draft HOME-ARP Allocation Plan

- OCED utilized the following data within the Plan:
  - Point-In—Time Counts from 2019-2022
  - Housing Inventory Charts from 2019-2022
  - Washtenaw County Homeless Management Information System (HMIS)
  - Washtenaw County By-Name-List Data, 2018-2022
  - 2022 Washtenaw County Gaps Analysis (CSH System Modeling Report)
  - Washtenaw County McKinney Vento Data
  - Stella P Data (System modeling provided by HUD)

Proposed Uses of HOME-ARP Funds

Activity	Funding Amount	% of Grant	Statutory Limit
Development of Affordable Rental Housing	$3,500,000	78%	no limit
Supportive Services	$426,762	10%	no limit
Non-Profit Operating	$223,112	5%	5%
Administration & Planning	$312,356	7%	15%
TOTAL	**$4,462,230**	**100%**	

- Given shortage of affordable housing stock in the County, the majority (78%) of funds are to be used for developing new affordable rental housing.
- Smaller portions of funds will be available for Supportive Services, Non-Profit Operating, and Administration & Planning.
- Activities that are eligible but are not being funded by this Plan include: Acquisition and Development of Non-Congregate Shelters, Tenant-Based Rental Assistance (TBRA), Non-Profit Capacity Building
- One-time funding source will have long-lasting impact by investing in additional rental housing units to decrease existing gaps.

Opportunities for Feedback on Proposed Use of Funds

- Draft HOME-ARP Allocation Plan available on OCED website here:
  - https://www.washtenaw.org/urbancounty, select HOME-ARP Funding Allocation Plan from menu on left-hand side of page

- Tonight's Public Hearing – rescheduled from February 22nd at Community Action Board due to weather/meeting cancelation.

- 15-Day Public Comment Period: March 7 – March 21, 2023
  - Submit comments or questions to Tara Cohen by phone or email
    - Phone: 734-544-3039
    - Email: cohent@washtenaw.org

Thank you!

To learn more about the Washtenaw County Office of Community & Economic Development, visit us at washtenaw.org/oced

Follow on social media:

@washtenawoced

Washtenaw Urban County
HOME-ARP Allocation Plan Template with Guidance
DRAFT 3/6/2023

Consultation

In accordance with Section V.A of the Notice (page 13), before developing its HOME-ARP allocation plan, at a minimum, a PJ must consult with:

- CoC(s) serving the jurisdiction's geographic area,
- homeless service providers,
- domestic violence service providers,
- veterans' groups,
- public housing agencies (PHAs),
- public agencies that address the needs of the qualifying populations, and
- public or private organizations that address fair housing, civil rights, and the needs of persons with disabilities.

State PJs are not required to consult with every PHA or CoC within the state's boundaries; however, local PJs must consult with all PHAs (including statewide or regional PHAs) and CoCs serving the jurisdiction.

Template:

Describe the consultation process including methods used and dates of consultation:

Washtenaw County Office of Economic and Community Development (referred to as OCED) consulted with community partners to determine the needs of the community.

These consulted entities provide housing and services to the eligible populations of the HOME-ARP program on an on-going basis and have relevant knowledge on the needs, service gaps, and potential activities that would best benefit qualified populations. Entities consulted include those who work with families or individuals experiencing homelessness, are at-risk of homelessness, and other vulnerable qualifying populations such as veterans.

Throughout this consultation process, the entities articulated their gap in services and housing needs by providing written and verbal comments. The following table summarizes the feedback received.

OCED will continue to meet with entities throughout the implementation of the HOME-ARP activities to assess the ongoing needs of our community and will continue to work together to develop strategies that will help address chronic homelessness.

Summarize feedback received and results of upfront consultation with these entities:

List the organizations consulted:

[Still being updated]

Consultation Chart:

Agency/Org Consulted	Type of Agency/Org	Method of Consultation	Feedback
Avalon Housing	Supportive Services Shelter	Email (2/21/23)	• Strongest need is affordable /supportive housing development. • Given the limited nature of the HOME ARP funds, using the funds to build supportive housing that will remain operating as supportive housing well into the foreseeable future seems a good use of otherwise time-limited dollars. • Avalon has a number of supportive housing developments in the pipeline which have funding gaps that could be up to the $4 million of total funding. • Another gap is in supportive services funding for supportive housing developments—particularly those outside of the City of Ann Arbor. • Suggest that projects receiving HOME-ARP funds for developing supportive housing that is located outside of the City of Ann Arbor also received HOME-ARP funds for supportive services for these developments. • If TBRA is an interest, suggest looking to expand the existing Rapid Rehousing

			program rather than creating a new program. • Suggest at least 75% of available funds go toward development of supportive housing. • MSHDA HOME ARP requires a housing development to have at least 35% units qualify as eligible HOME-ARP populations; Avalon suggests the County HOME ARP echoes that by targeting the supportive housing resident population for these units--under 30% AMI, experiencing homelessness, etc.
Ann Arbor Housing Commission	Public Housing Authority	Email (2/20/23)	• Data show a significant gap in the amount of housing that is available in the community that is affordable to households under 30% AMI and between 31% - 50% AMI. • Best way to solve this problem is to add more housing. • Re: possible TBRA program - cautioned us about approach and administrative burden of creating a new program. To be effective, should specifically provide rental assistance to people who are in the eviction process to prevent homelessness, and should be administered by an agency that already administers vouchers, otherwise not as effective a use of these funds as new construction. • A TBRA program will be short-term not permanent due to the timing constraints of the ARPA funds.

Michigan Ability Partners	Supportive Services Shelter for Veterans and Individuals with Disabilities	Emailed 2/27/2023	• *Pending*
WHA	Homelessness Advocacy Coalition	Email (3/1/2023)	• The plan makes sense, with the majority of the funding going to support new affordable housing development with some for supportive services. • Would recommend using the funds to create supportive housing targeted to homeless households with deep targeting for some portion of overall developments to households earning 30% AMI or less. • Can the supportive services line item be in support of providing services to tenant-based vouchers (i.e. not tied to affordable housing development)? If so, we may want to consider an increase in that line item to support households pulled through the MSHDA HCV (or other) list to make those vouchers more of a voucher + services model. • I would estimate a provider would be able to have 25-30 cases like that per case manager position (you wouldn't likely have deep targeting of acuity so a mix of households that need light- and more frequent touches). Since we don't anticipate any new PSH developments opening up in the next 1.5 to 2-years, an HCV + services model could bridge the gap for a 2-year period or so.
Disability Network Washtenaw Monroe Livingston		Emailed 3/6/23	*Pending*

Fair Housing Center of Southeast and Mid Michigan		Emailed 3/6/23	*Pending*

Public Participation

Describe the public participation process, including information about and the dates of the public comment period and public hearing(s) held during the development of the plan:

- ***Date(s) of public notice:*** February 5, 2023 and February 26, 2023
- ***Public comment period:*** March 7, 2023 – March 21, 2023
- ***Date of public hearing:*** March 9, 2023 (rescheduled from February 22, 2023)

Describe the public participation process:

OCED published a public notice in the Ann Arbor News (print edition) and Mlive.com on Sunday, February 5, 2023, announcing the February 22nd public hearing to provide input for the development of the HOME-ARP Allocation Plan. This same Feb. 5th notice also announced the 15-day public comment period of March 7 - March 21, 2023, for providing written or verbal comments on the Draft HOME-ARP Allocation Plan to be made available on the OCED website beginning March 7, 2023. As required, the notice provided the amount of HOME-ARP funds expected to be received and the range of eligible activities that OCED can undertake. In addition, OCED posted a notice for the public hearing and comment period on its social media channels (i.e., Facebook, Twitter) and on the OCED public-facing website. Due to a weather-induced County closure, the February 22nd hearing was canceled and rescheduled for March 9, 2023. An updated public notice was posted on the OCED website, Facebook page, and through listservs on Feb. 22nd, and it was published in the Ann Arbor News and Mlive.com on Sunday, February 26, 2023.

Describe efforts to broaden public participation:

OCED used several strategies to share information about the development of the plan. Primarily, OCED used email to provide important updates to providers in a timely fashion. OCED communicates updates on its website and through a larger CoC listserv, Urban County Executive Committee listserv, Urban County Interested Parties listserv, Community Action Board listserv, and the Barrier Busters network of providers. To further ensure that information was communicated clearly and that there was an opportunity for providers to ask questions, OCED will present information at existing meetings for provider/stakeholder feedback.

Summarize the comments and recommendations received through the public participation process either in writing, or orally at a public hearing:

[To be completed by OCED when public comment period closes 3/21/23]

Public Comments and Recommendations

OCED received [X] comments during the public hearing on March 9, 2023, and throughout the 15-day public comment period. The comments and response from OCED are as follows:

Comment 1:
Community member:
OCED response:

Comment 2:
Community member:
OCED response:

Summarize any comments or recommendations not accepted and state the reasons why:
All participants that had a comment were given time to state their comment or suggestion, however, due to the HOME-ARP regulations, [to be completed after comment period]

Needs Assessment and Gaps Analysis

Template:

OPTIONAL Homeless Needs Inventory and Gap Analysis Table

Homeless													
	Current Inventory					Homeless Population				Gap Analysis			
	Family		Adults Only		Vets	Family HH (at least 1 child)	Adult HH (w/o child)	Vets	Victims of DV	Family		Adults Only	
	# of Beds	# of Units	# of Beds	# of Units	# of Beds					# of Beds	# of Units	# of Beds	# of Units
Emergency Shelter	95	22	95	95	5								
Transitional Housing	5	1	10	10	21								
Permanent Supportive Housing	130	40	301	301	157								
Other Permanent Housing	160	52	79	79	0								
Sheltered Homeless						260	134	21	87				
Unsheltered Homeless						18	14	1	0				
Current Gap -- Shelter										178	44	43	43
Current Gap – Permanent Housing										266	70	150	150

Suggested Data Sources: 1. Point in Time Count (PIT); 2. Continuum of Care Housing Inventory Count (HIC); 3. Consultation

OPTIONAL Housing Needs Inventory and Gap Analysis Table

Non-Homeless			
	Current Inventory	**Level of Need**	**Gap Analysis**
	# of Units	# of Households	# of Households
Total Rental Units	61,600		
Rental Units Affordable to HH at 30% AMI (At-Risk of Homelessness)	2,607		
Rental Units Affordable to HH at 50% AMI (Other Populations)	16,680		
0%-30% AMI Renter HH w/ 1 or more severe housing problems (At-Risk of Homelessness)		14,695	
30%-50% AMI Renter HH w/ 1 or more severe housing problems (Other Populations)		6,790	
Current Gaps			4,805

Suggested Data Sources: 1. American Community Survey (ACS); 2. Comprehensive Housing Affordability Strategy (CHAS)

Describe the size and demographic composition of qualifying populations within the PJ's boundaries:

Homeless as defined in 24 CFR 91.5

There are two main ways of measuring the number of people experiencing literal homelessness in Washtenaw County: The annual Point-in-Time Count and the By-Name-List of everyone experiencing homelessness in Washtenaw County.

The Point-in-Time, or PIT Count is held each year at the end of January. People currently in shelter and transitional housing are counted through the Homeless Management Information System used by all providers, while unsheltered persons are counted by teams of volunteers that canvas the county one night in January from 10pm to 2am. This method provides a clear snapshot of the number of people homeless in one night. The data is limited for unsheltered persons, however, as not everyone may be found and surveyed on the night of the count, and some people meeting the definition, such as those staying inside abandoned buildings, may not be able to be counted. Therefore, the PIT Count is best understood as a measure of the minimum amount of homelessness. The last 3 PIT Counts showed an average of **245 persons** experiencing homelessness in Washtenaw County on a night in January.

The By-Name-List, or BNL, is maintained by the Washtenaw Office of Community and Economic Development and is a comprehensive list of everyone experiencing homelessness who has engaged with our system within the past 60 days. Every client receiving services from a Washtenaw County homelessness agency will be placed on the BNL, which is then used to prioritize and refer clients to our limited permanent housing resources. At the same time, the BNL provides a monthly count of the number of people experiencing literal homelessness. This count is limited to people who seek services, so people experiencing homelessness that are unknown to our system are not counted, which may make the number too low. Clients also remain on the list for 60 days, so some clients may still be on the list after resolving their homelessness, leading to an overcount. Despite these limitations, the BNL is the most accurate source of data for the number of people homeless in a given month. The average number of people experiencing homelessness across all months in 2022 was **373 persons, with a high of 448 in December of 2022.**

Based on these two sources, the literal homeless population is estimated to be around **375 persons, with a minimum of 250 and a maximum of 450.**

At Risk of Homelessness as defined in 24 CFR 91.5

The number of people meeting the At Risk of Homelessness grew expansively during the COVID-19 pandemic, as evidenced by the more than $25.5 million dollars of rental assistance distributed through the Covid Emergency Rental Assistance program in Washtenaw County since March of 2021. This program served around 3,100 Washtenaw County households over 15 months. In comparison, 749 households were served in 2019, the last full year before the pandemic.

It is not fully clear what the need for prevention funding for At-Risk households will look like as we continue to move out of the pandemic. Early data suggests that between 750 and 1250 households will meet the At-Risk definition and qualify for prevention assistance.

Fleeing, or Attempting to Flee, Domestic Violence, Dating Violence, Sexual Assault, Stalking, or Human Trafficking, as defined by HUD in the Notice
In 2022, 10% of all households served identified as actively fleeing domestic violence. Based on that number, there are between 35-40 survivors experiencing homelessness due to actively fleeing at any given time in Washtenaw County. This only reflects those actively fleeing—if the number includes all people with a history of DV, the estimate increases to 75-100 persons at any given time.

Other populations requiring services or housing assistance to prevent homelessness and other populations at greatest risk of housing instability, as defined by HUD in the Notice
Data provided from McKinney Vento programs in Washtenaw County show that 930 students were served in the 2021 to 2022 school year, compared to 730 in the last year before the COVID-19 pandemic. While the data does not show household size for these students, or how many total families were served, it is reasonable to assume at an average family size of 3, this represents over 2,700 people meeting the Department of Education definition of homelessness. As not all households meeting this definition will identify themselves to the school district, the actual number is certainly much higher, although difficult to estimate.

Identify and consider the current resources available to assist qualifying populations, including congregate and non-congregate shelter units, supportive services, TBRA, and affordable and permanent supportive rental housing (Optional):
Resources available to serve the above qualifying populations include:

Affordable Housing: The Washtenaw County Office of Community and Economic Development maintains data on affordable housing developments withing Washtenaw County. Currently, there are only 2,607 units considered affordable to households below 30% AMI (at risk of homelessness), while the at-risk population in the county is over 14,000. The lack of affordability exists as well for those making up to 50% AMI, where there is a 4,805-unit shortfall. Altogether, the county has limited affordable housing, which is typically already occupied.

Homelessness Prevention: Financial assistance available to households imminently at-risk of homelessness. Funds can be used to cover rental and utility arrears or to assist with moving into a new unit. Due to the availability of additional COVID relief funds for prevention, Washtenaw County has distributed over 28 million dollars in prevention funding since the start of 2021.

Permanent Supportive Housing (PSH) combines non-time-limited rental assistance w/ wraparound supportive services. Services are voluntary, individually tailored, and flexible, and are not a condition of ongoing tenancy. Most PSH providers also provide mental health (MH) services or have a MOU in place w/a mental health provider, such as Community MH. PSH

providers work to assist clients w/accessing benefits, while connecting them w/other necessary services (e.g. health care) w/the end goal of maintaining stable housing. PSH programs also partner w/agencies to provide such services onsite. A total of 589 HUD-funded beds are available in the community, with additional beds provided through additional funding streams. Currently, there are more than 135 units currently under development.

Rapid Re-Housing (RRH) assists w/choosing and obtaining affordable housing, using client strengths to help create plans for short-term/crisis resolution. Providers link clients to any needed and desired ongoing service e.g. legal services, child care, w/focus on housing retention. Staff also monitor housing stability, which may include communication w/landlords, linking to ongoing supports and more. Approximately 180 beds are available at any one time.

Transitional Housing (TH) provides outreach/case management/assistance in obtaining mainstream benefits. Case management may include connections to health care/daily living/financial planning/legal services. The County's Grant Per Diem (GPD) providers use a Bridge Housing model, which emphasizes short stays (usu. up to 90 days) and rapid connections to permanent housing. GPD providers work closely w/the VA Ann Arbor Healthcare System & coordinated entry partners to ensure veterans are connected to permanent housing and to services that can remove any barriers to staying housed. Washtenaw County has 41 year-round transitional beds.

Emergency Shelter provides safe, temporary housing & supportive services to those experiencing homelessness. Shelter staff work w/households to identify affordable permanent housing, identify +/or increase sources of income, and connect w/other necessary services. Some shelters, such as the Delonis Center, offer nonresidential case management and have other service providers onsite, such as Michigan Works! & Packard Health Clinic. 195 year-round beds are available.

Describe the unmet housing and service needs of qualifying populations:

Homeless as defined in 24 CFR 91.5

People experiencing homelessness in Washtenaw County have unmet needs in virtually every arena. Insufficient shelter space and permanent housing resources mean that long wait times exist for every resource, up to more than a year for Permanent Supportive Housing, the highest level of care offered. Because of these waits, people experiencing homelessness face longer periods of homelessness with increased vulnerability. Overall, the average length of time to housing for CoC resources was 165 days in 2022—nearly half a year. Increasing CoC resources would help to reduce this length of time, as would additional affordable housing, as many CoC project participants are housed in the private market.

Homeless providers also regularly report a need for more supportive services than are available in the community. Frequently cited needs include employment assistance, mental health, disability support, substance use, and physical health needs. Just over 50% of people

served by Washtenaw County CoC report a disability that will impact their ability to stay housed.

At Risk of Homelessness as defined in 24 CFR 91.5

A lack of sufficient and timely prevention resources mean that many At-Risk households are not assisted within the critical two-week timeframe before they lose their housing. When a preventable housing crisis isn't averted, the households most often end up doubled-up or literally homeless, placing further strain on the system's limited resources, and untold trauma on households experiencing preventable homelessness. As of early 2023 this is being acutely seen among families, with a backlog of more than 50 families waiting for prevention appointments and full caseloads at the courts. This in turn is leading to an increase in families experiencing literal homelessness. In addition to more prevention services, there is a lack of available affordable housing in the county, forcing many low-income households to spend unsustainable amounts on rent. Less than 10% of the 55,102 rental units in Washtenaw County are designated affordable.

Fleeing, or Attempting to Flee, Domestic Violence, Dating Violence, Sexual Assault, Stalking, or Human Trafficking, as defined by HUD in the Notice

Because SAFEHouse, Washtenaw County's Domestic Violence provider, has limited staffing and bedspace and focuses on intimate partner violence, not everyone fleeing domestic violence is able to access shelter, as the limited space is prioritized for people in immediate danger. Additional shelter space and permanent housing resources would allow for faster rehousing of people fleeing from domestic violence, helping to reduce the trauma they are experiencing. While care is approached with a trauma-informed lens throughout the system, the current scope of DV specific services is insufficient to meet the needs of the 20% of people experiencing homelessness who are also survivors of domestic violence, dating violence, sexual assault or human trafficking. In addition, a lack of available and affordable housing means there are fewer safe alternatives to house survivors.

Other populations requiring services or housing assistance to prevent homelessness and other populations at greatest risk of housing instability as defined by HUD in the Notice

While it is difficult to estimate the true size of this population, it is clear that there is a great need for affordable housing in Washtenaw County, which would be the most direct means of impacting other populations at the greatest risk of housing instability. There are fewer than 5,000 rental units in Washtenaw County designated as affordable. Additional affordable housing would also benefit all of the other populations considered under the HOME-ARP plan.

Identify any gaps within the current shelter and housing inventory as well as the service delivery system:

Washtenaw County Continuum of Care conducts regular reviews of system data to understand how our resources are meeting or failing to meet the needs of people experiencing homelessness in Washtenaw County. Every analysis consistently shows that the system does

not have enough resources to adequately serve the number of people experiencing homelessness in Washtenaw County.

Homeless as defined in 24 CFR 91.5
A 2022 System Model Report prepared by the Corporation for Supportive Housing indicated that the Continuum of Care needed an additional 58 year-round shelter beds for individuals and 123 year-round beds for families with children. In addition, the model showed that a further need for 644 Rapid Re-Housing services for individuals and 242 for families each year, as well as an additional 717 Permanent Supportive Housing units for individuals and 154 units for families.

At Risk of Homelessness as defined in 24 CFR 91.5
While the population of households at risk of homelessness is lower than during the pandemic, it still appears higher than before the pandemic based on current waitlists for prevention appointment, full eviction court case loads, and increasing levels of literal homelessness. In addition, the average level of funds needed to prevent a household from eviction in January and February 2023 was $963, compared to $558 for the same period in 2019.

Fleeing, or Attempting to Flee, Domestic Violence, Dating Violence, Sexual Assault, Stalking, or Human Trafficking, as defined by HUD in the Notice
DV services in Washtenaw County do not cover the full range of populations identified in this notice, so a gap exists in specific services for those not served, such as victims of human trafficking. This leads to persons feeling or attempting to flee to seek shelter in the general homeless system. An additional 20-30 beds would likely be needed, with room for overflow. In addition, the lack of affordable housing and low vacancy rates in the county lead to a lack of alternatives outside the safety net system for those attempting to flee.

Other populations requiring services or housing assistance to prevent homelessness and other populations at greatest risk of housing instability as defined by HUD in the Notice
2022 Census estimates suggest that there are 45,804 persons living below the poverty line in Washtenaw County, yet there are only 4,460 designated affordable units. The need is even greater if the households under 30% of the AMI are considered. This data suggests that the county needs several thousand more affordable units to keep this population from becoming at-risk. In addition to more affordable housing, additional community services available to a broad range of the public would benefit this group, including food assistance, health care, mental health, behavioral health, housing navigation, employment assistance and more.

Under Section IV.4.2.ii.G of the HOME-ARP Notice, a PJ may provide additional characteristics associated with instability and increased risk of homelessness in their HOME-ARP allocation plan. These characteristics will further refine the definition of "other

populations" that are "At Greatest Risk of Housing Instability," as established in the HOME-ARP Notice. If including these characteristics, identify them here:

Characteristics identified include:

- A history of homelessness

Identify priority needs for qualifying populations:

Homeless as defined in 24 CFR 91.5

Priority needs for people experiencing literal homelessness include additional affordable housing, increased permanent housing resources (RRH & PSH), increased shelter space for individuals and families, and supportive services for persons experiencing homelessness.

At Risk of Homelessness as defined in 24 CFR 91.5

For households at risk, identified priorities include additional affordable housing; increased prevention funding for rental and utility arrears or move-in costs; and supportive services or employment, or disability support.

Fleeing, or Attempting to Flee, Domestic Violence, Dating Violence, Sexual Assault, Stalking, or Human Trafficking, as defined by HUD in the Notice

Identified priorities include additional affordable housing, additional staffing and beds for DV specific shelters, and supportive services for people fleeing or attempting to flee.

Other populations requiring services or housing assistance to prevent homelessness and other populations at greatest risk of housing instability as defined by HUD in the Notice

Priorities for other populations include additional affordable housing, and supportive services focused on housing and increasing income.

Explain how the PJ determined the level of need and gaps in the PJ's shelter and housing inventory and service delivery systems based on the data presented in the plan:

The PJ used data from the following sources:

- Point-In—Time Counts from 2019-2022
- Housing Inventory Charts from 2019-2022
- Washtenaw County Homeless Management Information System (HMIS)
- Washtenaw County By-Name-List Data, 2018-2022
- 2022 Washtenaw County Gaps Analysis (CSH System Modeling Report)
- Washtenaw County McKinney Vento Data
- Stella P Data (System modelling provided by HUD)

HOME-ARP Activities

Template*:*

Describe the method(s)that will be used for soliciting applications for funding and/or selecting developers, service providers, subrecipients and/or contractors:
OCED, as staff for both the Washtenaw Urban County and the Continuum of Care, will issue competitive Requests for Proposals (RFPs) to solicit funding applications from developers and service providers. In additional to applicants' financial stability, the County will consider the applicants' level of experience and programmatic outcomes from similar programs they have carried out.

Describe whether the PJ will administer eligible activities directly:
The PJ (OCED as lead agency for Washtenaw Urban County) will carry out limited planning and administration activities related to HOME-ARP contracts and regulatory compliance. Other eligible activities, namely affordable housing development and supportive services, will be administered by external partners with expertise in these areas of work.

If any portion of the PJ's HOME-ARP administrative funds are provided to a subrecipient or contractor prior to HUD's acceptance of the HOME-ARP allocation plan because the subrecipient or contractor is responsible for the administration of the PJ's entire HOME-ARP grant, identify the subrecipient or contractor and describe its role and responsibilities in administering all of the PJ's HOME-ARP program:

Not applicable

In accordance with Section V.C.2. of the Notice (page 4), PJs must indicate the amount of HOME-ARP funding that is planned for each eligible HOME-ARP activity type and demonstrate that any planned funding for nonprofit organization operating assistance, nonprofit capacity building, and administrative costs is within HOME-ARP limits.

Template:

Use of HOME-ARP Funding

	Funding Amount	Percent of the Grant	Statutory Limit
Supportive Services	$ 426,762		
Acquisition and Development of Non-Congregate Shelters			
Tenant Based Rental Assistance (TBRA)			
Development of Affordable Rental Housing	$ 3,500,000		
Non-Profit Operating	$ 223,112	5 %	5%
Non-Profit Capacity Building			5%
Administration and Planning	$ 312,356	7 %	15%
Total HOME ARP Allocation	$ 4,462,230		

Describe how the PJ will distribute HOME-ARP funds in accordance with its priority needs identified in its needs assessment and gap analysis:

Washtenaw Urban County will distribute the majority (78.4%) of its HOME-ARP funds toward the development of affordable rental housing, with approximately 9.5% going to supportive services, 5% to Non-Profit Operating, and 7% to Administration and Planning for County staff to support and ensure compliance for HOME-ARP programs over the life of the grant.

As discussed above, under Priority Needs for Qualifying Populations, the common priorities identified across all four of the qualifying populations are additional affordable housing and supportive services. This aligns with the distribution of the County's HOME-ARP funds by concentrating on key resources (increasing the County's affordable housing stock and availability of supportive services) to potentially increase stability for individuals from across all of the qualifying HOME-ARP populations. Provision of Non-Profit Operating funds will help to ensure the non-profit(s) that provides supportive services has adequate resources to serve additional client caseloads.

Describe how the characteristics of the shelter and housing inventory, service delivery system, and the needs identified in the gap analysis provided a rationale for the plan to fund eligible activities:

2022 Census estimates suggest that there are 45,804 persons living below the poverty line in Washtenaw County, yet there are only 4,460 designated affordable units. The need is even greater if the households under 30% of the AMI are considered. Currently, there are only 2,607 units considered affordable to households below 30% AMI (at risk of homelessness), while the at-risk population in the county is over 14,000. The lack of affordability exists as well for those making up to 50% AMI, where there is a 4,805-unit shortfall. Altogether, the county has limited affordable housing, which is typically already occupied.

Looking specifically at the County's current homeless population as compared to existing housing inventory, the County has a permanent housing gap of 266 housing units for families and 150 housing units for individuals.

Additional affordable housing would benefit all of the qualifying populations considered under the HOME-ARP plan.

A 2022 System Model Report prepared by the Corporation for Supportive Housing indicated, among other needs, that the Continuum of Care needed an additional 717 Permanent Supportive Housing units for individuals and 154 units for families. These gaps underscore the need for funding of supportive services to serve all HOME-ARP qualifying populations, within the context of supportive housing as well as in the community.

HOME-ARP Production Housing Goals

Template

Estimate the number of affordable rental housing units for qualifying populations that the PJ will produce or support with its HOME-ARP allocation:
60 units

Describe the specific affordable rental housing production goal that the PJ hopes to achieve and describe how the production goal will address the PJ's priority needs:
HOME-ARP funding will support the development of approximately 60 new affordable rental housing units. At least half of these units will be targeted for supportive housing.

Preferences

A preference provides a priority for the selection of applicants who fall into a specific QP or category (e.g., elderly or persons with disabilities) within a QP (i.e., subpopulation) to receive assistance. A *preference* permits an eligible applicant that qualifies for a PJ-adopted preference to be selected for HOME-ARP assistance before another eligible applicant that does not qualify for a preference. A *method of prioritization* is the process by which a PJ determines how two or more eligible applicants qualifying for the same or different preferences are selected for HOME-ARP assistance. For example, in a project with a preference for chronically homeless, all eligible QP applicants are selected in chronological order for a HOME-ARP rental project except that eligible QP applicants that qualify for the preference of chronically homeless are selected for occupancy based on length of time they have been homeless before eligible QP applicants who do not qualify for the preference of chronically homeless.

Please note that HUD has also described a method of prioritization in other HUD guidance. Section I.C.4 of Notice CPD-17-01 describes Prioritization in CoC CE as follows:

"Prioritization. In the context of the coordinated entry process, HUD uses the term "Prioritization" to refer to the coordinated entry-specific process by which all persons in need of assistance who use coordinated entry are ranked in order of priority. The coordinated entry prioritization policies are established by the CoC with input from all community stakeholders and must ensure that ESG projects are able to serve clients in accordance with written standards that are established under 24 CFR 576.400(e). In addition, the coordinated entry process must, to the maximum extent feasible, ensure that people with more severe service needs and levels of vulnerability are prioritized for housing and homeless assistance before those with less severe service needs and lower levels of vulnerability. Regardless of how prioritization decisions are implemented, the prioritization process must follow the requirements in Section II.B.3. and Section I.D. of this Notice."

If a PJ is using a CE that has a method of prioritization described in CPD-17-01, then a PJ has preferences and a method of prioritizing those preferences. These must be described in the HOME-ARP allocation plan in order to comply with the requirements of Section IV.C.2 (page 10) of the HOME-ARP Notice.

In accordance with Section V.C.4 of the Notice (page 15), the HOME-ARP allocation plan must identify whether the PJ intends to give a preference to one or more qualifying populations or a subpopulation within one or more qualifying populations for any eligible activity or project.

- Preferences cannot violate any applicable fair housing, civil rights, and nondiscrimination requirements, including but not limited to those requirements listed in 24 CFR 5.105(a).
- The PJ must comply with all applicable nondiscrimination and equal opportunity laws and requirements listed in 24 CFR 5.105(a) and any other applicable fair housing and civil rights laws and requirements when establishing preferences or methods of prioritization.

While PJs are not required to describe specific projects in its HOME-ARP allocation plan to which the preferences will apply, the PJ must describe the planned use of any preferences in its HOME-ARP allocation plan. This requirement also applies if the PJ intends to commit HOME-ARP funds to projects that will utilize preferences or limitations to comply with restrictive eligibility requirements of another project funding source**. If a PJ fails to describe preferences or limitations in its plan, it cannot commit HOME-ARP funds to a project that will implement a preference or limitation until the PJ amends its HOME-ARP allocation plan. For HOME-ARP rental housing projects, Section VI.B.20.a.iii of the HOME-ARP Notice (page 36) states that owners may only limit eligibility or give a preference to a particular qualifying population or segment of the qualifying population <u>if the limitation or preference is described in the PJ's HOME-ARP allocation plan</u>.** Adding a preference or limitation not previously described in the plan requires a substantial amendment and a public comment period in accordance with Section V.C.6 of the Notice (page 16).

<u>Template:</u>

Identify whether the PJ intends to give preference to one or more qualifying populations or a subpopulation within one or more qualifying populations for any eligible activity or project:

Washtenaw County does not intend to give preferences to particular qualifying populations or subpopulations for any of the HOME-ARP activities described in this Plan.

If a preference was identified, explain how the use of a preference or method of prioritization will address the unmet need or gap in benefits and services received by individuals and families in the qualifying population or subpopulation of qualifying population, consistent with the PJ's needs assessment and gap analysis:

Not applicable

Limitations in a HOME-ARP rental housing or NCS project

Limiting eligibility for a HOME-ARP rental housing or NCS project is only permitted under certain circumstances.

- PJs must follow all applicable fair housing, civil rights, and nondiscrimination requirements, including but not limited to those requirements listed in 24 CFR 5.105(a). This includes, but is not limited to, the Fair Housing Act, Title VI of the Civil Rights Act, section 504 of Rehabilitation Act, HUD's Equal Access Rule, and the Americans with Disabilities Act, as applicable.
- A PJ may not exclude otherwise eligible qualifying populations from its overall HOME-ARP program.
- Within the qualifying populations, participation in a project or activity may be limited to persons with a specific disability only, if necessary, to provide effective housing, aid, benefit, or services that would be as effective as those provided to others in accordance

with 24 CFR 8.4(b)(1)(iv). A PJ must describe why such a limitation for a project or activity is necessary in its HOME-ARP allocation plan (based on the needs and gap identified by the PJ in its plan) to meet some greater need and to provide a specific benefit that cannot be provided through the provision of a preference.

- For HOME-ARP rental housing, section VI.B.20.a.iii of the Notice (page 36) states that owners may only limit eligibility to a particular qualifying population or segment of the qualifying population <u>if the limitation is described in the PJ's HOME-ARP allocation plan</u>.
- PJs may limit admission to HOME-ARP rental housing or NCS to households who need the specialized supportive services that are provided in such housing or NCS. However, no otherwise eligible individuals with disabilities or families including an individual with a disability who may benefit from the services provided may be excluded on the grounds that they do not have a particular disability.

<u>Template</u>

Describe whether the PJ intends to limit eligibility for a HOME-ARP rental housing or NCS project to a particular qualifying population or specific subpopulation of a qualifying population identified in section IV.A of the Notice:

Washtenaw County does not intend to limit eligibility for HOME-ARP rental housing projects to particular qualifying populations.

If a PJ intends to implement a limitation, explain why the use of a limitation is necessary to address the unmet need or gap in benefits and services received by individuals and families in the qualifying population or subpopulation of qualifying population, consistent with the PJ's needs assessment and gap analysis:

Not applicable

If a limitation was identified, describe how the PJ will address the unmet needs or gaps in benefits and services of the other qualifying populations that are not included in the limitation through the use of HOME-ARP funds (i.e., through another of the PJ's HOME-ARP projects or activities):

Not applicable

HOME-ARP Refinancing Guidelines

If the PJ intends to use HOME-ARP funds to refinance existing debt secured by multifamily rental housing that is being rehabilitated with HOME-ARP funds, the PJ must state its HOME-ARP refinancing guidelines in accordance with 24 CFR 92.206(b). The guidelines must describe the conditions under with the PJ will refinance existing debt for a HOME-ARP rental project, including:

None of the following is applicable as Washtenaw Urban County does not intend to use HOME-ARP funds to refinance existing debt.

- ***Establish a minimum level of rehabilitation per unit or a required ratio between rehabilitation and refinancing to demonstrate that rehabilitation of HOME-ARP rental housing is the primary eligible activity***
  N/A

- ***Require a review of management practices to demonstrate that disinvestment in the property has not occurred; that the long-term needs of the project can be met; and that the feasibility of serving qualified populations for the minimum compliance period can be demonstrated.***

  N/A

- ***State whether the new investment is being made to maintain current affordable units, create additional affordable units, or both.***

  N/A

- ***Specify the required compliance period, whether it is the minimum 15 years or longer.***
  N/A

- ***State that HOME-ARP funds cannot be used to refinance multifamily loans made or insured by any federal program, including CDBG.***

  N/A

- ***Other requirements in the PJ's guidelines, if applicable:***
  N/A

Washtenaw Urban County
2023-2027 Five-Year Consolidated Plan
&
2023-2024 Annual Action Plan

Office of Community and Economic Development

March 2023

1

Citizen Participation in Development of HUD-Required Plans

Public Input Opportunities for 2023-2027 Five Year Consolidated Plan & 2023-24 Annual Action Plan:

Needs Assessment Phase of Planning

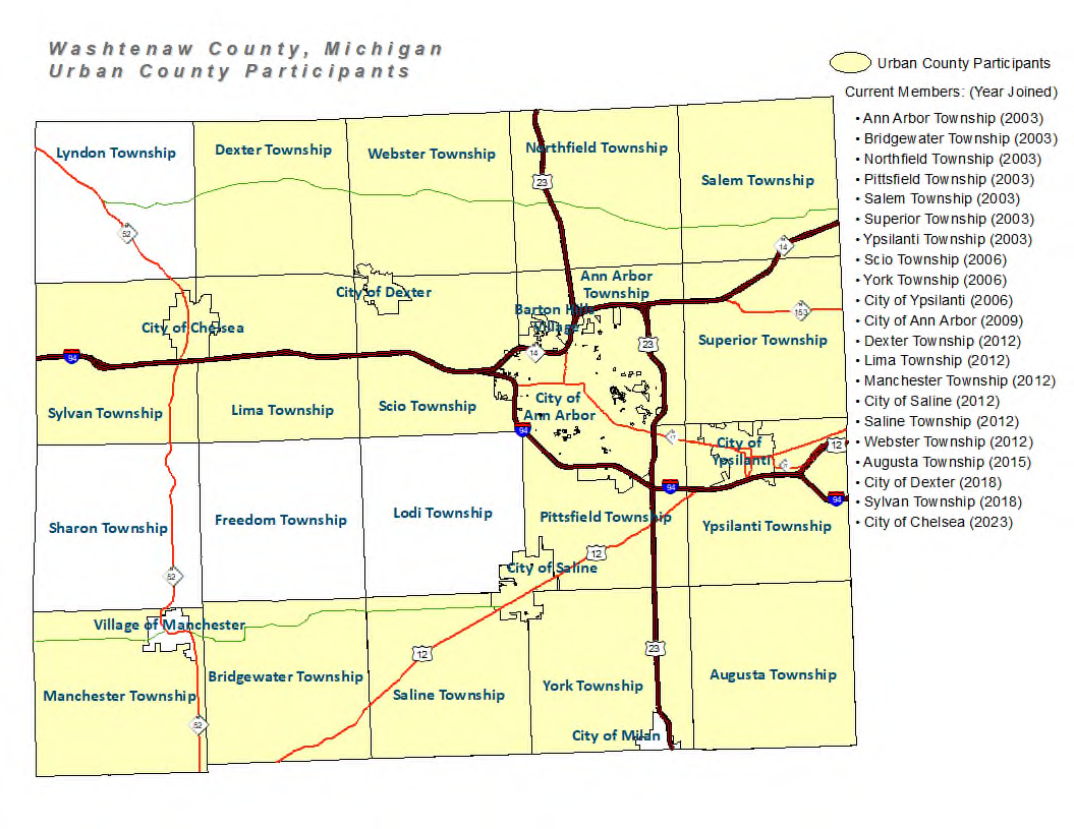
- Virtual Public Hearing was held December 7, 2022 at Urban County Executive Committee meeting.
- Public Comment Period held November 16, 2022 - Jan. 11, 2023
- Housing & Neighborhood Survey – administered for a month (Nov. 23 – Dec. 23).
  - 4 languages (Arabic, English, Somali, Spanish), offered online or paper-based.
  - Received responses from approximately 500 people living in Washtenaw County.

Feedback on Draft Plans

- Public Hearings to provide feedback on draft of Consolidated Plan and Action plan:
  - April 5, 2023 - Urban County Executive Committee (virtual)
  - April 13, 2023 - Housing and Human Services Advisory Board (virtual)
  - April 19, 2023 - Board of Commissioners (hybrid)
- Public Comment Period for Draft Plans: March 31 – April 30, 2023
- Starting March 31, Draft Consolidated Plan w/ 2023 Annual Action Plan will be available to download or print from here: www.Washtenaw.org/urbancounty (click on *Urban County Plans & Reports* from left-hand menu)

2

Washtenaw Urban County: *20 Local Units of Government will increase to 21 in Fiscal Year 2023 (July 1, 2023) with addition of City of Chelsea*



Consolidated Plan, Action Plan & Assessment of Fair Housing Plan

- **2023-2027 Consolidated Plan**
  - 2023 Updated Assessment of Fair Housing Plan will serve as framework for goals
  - Establishes goals and strategies for addressing and prioritizing local needs through HUD funding
  - Will include community input, needs assessment, housing market analysis, using HUD-mandated and local data sources
  - Covers five fiscal years: July 1, 2023 – June 30, 2028

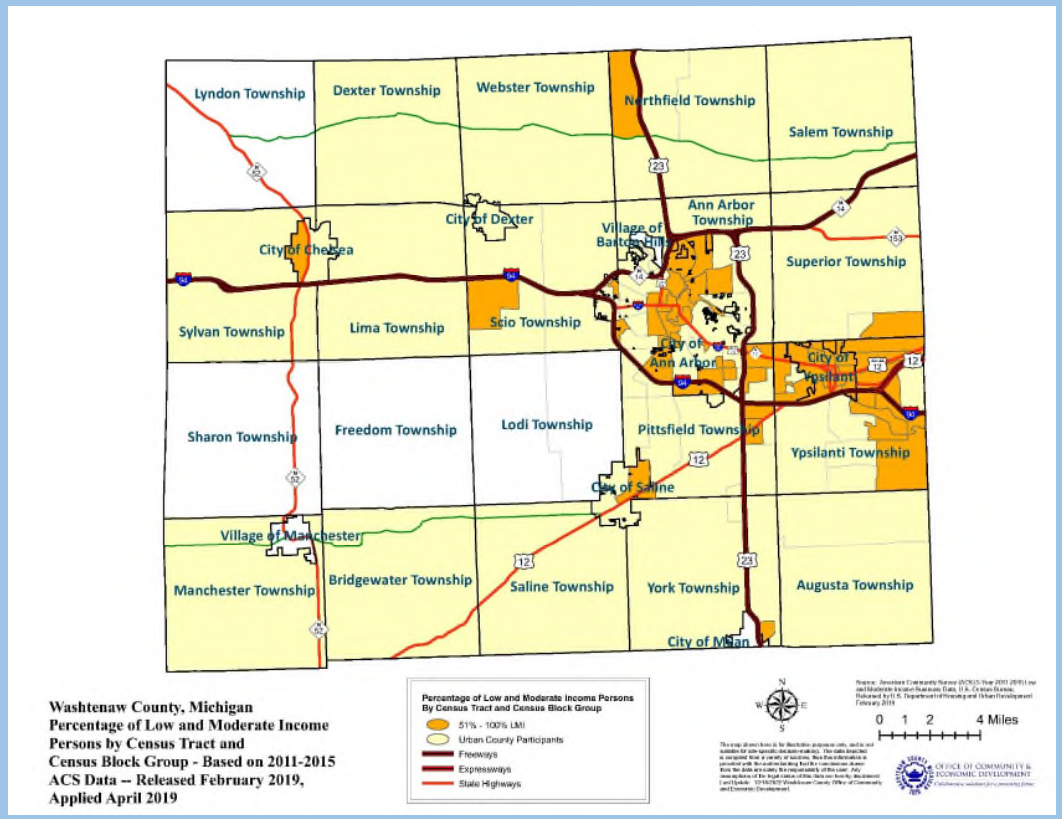
- **2023 Annual Action Plan**
  - Will describe projects and activities to be undertaken to meet Five-year Consolidated Plan goals
  - Details budget for use of federal funds from U.S. Dept. of Housing & Urban Development (HUD)
  - Covers a single fiscal year: July 1, 2023 – June 30, 2024

Annual HUD Grants

As an “Entitlement Grantee” of HUD, the Washtenaw Urban County receives:

1) Community Development Block Grant funds (CDBG)
2) Home Investment Partnership Program funds (HOME)
3) Emergency Solutions Grant (ESG)

Community Development Block Grant (CDBG)



CDBG Eligible Activities - Examples

Parkridge Park Playground
(City of Ypsilanti)

Bryant Community Center Rehab
(City of Ann Arbor)

ADA Sidewalk ramps
(City of Ypsilanti)

Hickory Way I Apartments (South Maple Road, Ann Arbor)
New Construction by Avalon Housing

HOME Investment Partnership Program (HOME)

Objectives & Eligible Projects

8

Emergency Solutions Grant (ESG)

Objectives & Eligible Projects

9

Focus on Non-Housing Priority Needs

Examples from previous years include:

- Fire Stations/equipment
- Parks, recreation, play structures
- Improved public lake access (i.e. canoe launch, fishing pier)
- Community/neighborhood facilities
- All Purpose Recreation Center
- Health Facilities
- Street improvements (including pedestrian crossings)
- Sidewalk and path improvements
- Water/sewer improvements
- Storm water management improvements
- Bicycle or Non-motorized facilities improvements
- Tree Planting
- Local and regional planning
- Bus shelters and benches
- Senior and youth facilities and services
- Childcare centers
- Facilities for People with Disabilities
- Homeless facilities
- Broadband improvements
- Support for Social service provider facilities

10

Timeline & Next Steps

Consolidated Plan & Action Plan Development Timeline:

- CDBG Local Projects – project applications were due by February 28th
- Affordable Housing RFP (HOME funds/Ann Arbor CDBG funds) – Proposals were due Jan. 31; award recommendations brought to UCEC at March 22nd meeting
- Public Hearings to provide feedback on draft of Consolidated Plan and Action plan:
  - April 5, 2023 - Urban County Executive Committee
  - April 13, 2023 - Housing and Human Services Advisory Board
  - April 19, 2023 - Board of Commissioners
- Final Consolidated Plan/Action Plan due to HUD by May 15, 2023

MA-30: Homeless Facilities and Services

Introduction

The community's homeless facilities inventory is made up of various resources, including Public Housing Authorities (PHA), Veterans Affairs Supportive Housing (VASH), Permanent Supportive Housing (PSH), other non-HUD funded units. All units are recorded in Homeless Management Information System (HMIS) through the Housing Inventory Chart (HIC). Currently, there are 195 emergency shelter beds, 41 transitional housing beds, and 589 permanent supportive housing beds in the community. Of the 195 emergency shelter beds, 95 are for households with children, 90 for single adults, 5 for veterans, and 5 for unaccompanied youth. Of the transitional housing beds, 5 are set aside for households with children, 5 for single adults, 21 for veterans and 10 for unaccompanied youth. Of the 930 permanent supportive housing beds, 233 are set aside for households with children, 183 for single adults, 299 for chronically homeless, 157 for veterans, and 11 for unaccompanied youth.

Facilities and Housing Targeted to Homeless Households

	Emergency Shelter Beds		Transitional Housing Beds	Permanent Supportive Housing Beds	
	Year Round Beds (Current & New)	Voucher / Seasonal / Overflow Beds	Current & New	Current & New	Under Development
Households with Adult(s) and Child(ren)	95		5	130	
Households with Only Adults	90	85	5		
Chronically Homeless Households				296	
Veterans	5		21	157	
Unaccompanied Youth	5		10	6	

Describe mainstream services, such as health, mental health, and employment services to the extent those services are use to complement services targeted to homeless persons

The Continuum of Care (CoC) works with a wide variety of partners to assist homeless program participants with mainstream benefits. HUD defines mainstream benefits as "publicly funded programs that provide housing, food, healthcare, transportation, and job training designed to help low-income individuals achieve or retain their economic independence and self-sufficiency." The Washtenaw Health Plan provides training and enrollment assistance for Medicaid and Medicare, while emergency shelter staff assists households in accessing health care. Local food bank Food Gatherers provides the latest Supplemental Nutrition Assistance Program (SNAP, formerly known as Food Stamps) enrollment information. Providers work with the Michigan Department of Health and Human Services (MDHHS) for State-level mainstream benefits. All CoC programs have staff trained in the SSI/SSDI Outreach, Access and Recovery (SOAR) process to assist with Supplemental Security Income (SSI) and Social Security Disability Insurance (SSDI) enrollment. The CoC ensures that providers have the latest information by emailing it through the CoC listserv and ensuring updates are made at committee and community meetings. Relevant partners are asked to provide updates at appropriate meetings as needed.

The primary strategy to increase access to employment is partnering with local One Stop Centers, along with in-house employment counseling/provider-run job training programs. Examples of these programs include: Ozone House's WorkZone for unaccompanied youth; Michigan Ability Partners' various types of vocational services, including the Homeless Veteran's Reintegration Program (HVRP) that serves 100 veterans annually, and; Avalon Housing's Supportive Employment Program for individuals with disabilities.

Cash income is increased through SOAR-trained staff at each agency for SSI/SSDI enrollment assistance and collaboration with MDHHS for Temporary Aid for Needy Families (TANF). Legal services provide appeals assistance for denials of entitlement benefits. Providers receive guidance through Barrier Busters, a network of over 90 local human service providers, accessing expertise from mainstream benefit providers who work with specific populations, such as the local independent living center, Area Agency on Aging, SNAP, and health insurance. Twice-monthly housing prioritization meetings allow providers to case consult on employment strategies. The CoC recently designated a workforce development seat on the CoC Board to help guide their strategy in 2018 and strengthen collaborations.

List and describe services and facilities that meet the needs of homeless persons, particularly chronically homeless individuals and families, families with children, veterans and their families, and unaccompanied youth. If the services and facilities are listed on screen SP-40 Institutional Delivery Structure or screen MA-35 Special Needs Facilities and Services, describe how these facilities and services specifically address the needs of these populations.

Permanent Supportive Housing (PSH) combines non-time-limited rental assistance w/ wraparound supportive services. Services are voluntary, individually tailored, and flexible, and are not a condition of ongoing tenancy. Most PSH providers also provide mental health (MH) services or have a MOU in place w/a mental health provider, such as Community MH. PSH providers work to assist clients w/accessing benefits, while connecting them w/other necessary services (e.g. health care) w/the end goal of maintaining stable housing. PSH programs also partner w/agencies to provide such services onsite. Serving chronically homeless, veterans: **1.** Ann Arbor Housing Commission (AAHC); Serving veteran families/single adults through the VASH program; **2.** Avalon Housing, Inc.-7 sites. **3.** Avalon Housing Inc/AAHC: Miller Manor, scattered sites, VASH. Serving chronically homeless/veterans/single adults: **4.** Michigan Ability Partners: S+C scattered site; **5.** Michigan Ability Partners/AAHC: 3 sites and S+C scattered sites. Serving unaccompanied youth: **6.** Ozone House: SOLO-Avalon-SHP & Young Families Program.

Rapid Re-Housing (RRH) assists w/choosing and obtaining affordable housing, using client strengths to help create plans for short-term/crisis resolution. Providers link clients to any needed and desired ongoing service e.g. legal services, child care, w/focus on housing retention. Staff also monitor housing stability, which may include communication w/landlords, linking to ongoing supports, etc. Programs are: **1.** Ozone House (Youth); **2.** Michigan Ability Partners (Veterans-Supportive Services for Veteran Families); **3.** Avalon Housing (Single adults w/rental assistance,); **4.** SOS Community Services/Interfaith Hospitality Network at Alpha House (Families).

Transitional Housing (TH) provides outreach/case management/assistance in obtaining mainstream benefits. Case management may include connections to health care/daily living/financial planning/legal services. The County's Grant Per Diem (GPD) providers use a Bridge Housing model, which emphasizes short stays (usu. up to 90 days) and rapid connections to permanent housing. GPD providers work closely w/the VA Ann Arbor Healthcare System & coordinated entry partners to ensure veterans are connected to permanent housing and to services that can remove any barriers to staying housed. Programs are: **1.** Catholic Social Services (Individuals exiting corrections system): Offender Success Scattered Site; **2.** Michigan Ability Partners (Veterans/chronically homeless single adults): 2 sites; **3.** The Salvation Army of Washtenaw County (Veterans/ chronically homeless single adults): 2 sites; **4.** Ozone House (Unaccompanied youth); **5.** Peace Neighborhood Center (Families).

Emergency Shelter provides safe, temporary housing & supportive services to those experiencing homelessness. Shelter staff work w/households to identify affordable permanent housing, identify +/or increase sources of income, and connect w/other necessary services. Some shelters, such as the Delonis Center, offer nonresidential case management and have other service providers onsite, such as Michigan Works! & Packard Health Clinic. Programs are: **1.** Interfaith Hospitality Network of Washtenaw County (Chronically homeless/Families): Alpha House; **2.** Ozone House (Unaccompanied youth): Emergency Youth Shelter; **3.** Safe House Center (DV survivors - chronically homeless/single adults/families): SafeHouse; **4.** Shelter Association of Washtenaw County (Chronically

homeless/Single adults/Veterans): Delonis Center; **6.** SOS Community Services (Chronically homeless/Families): Prospect Place**;**

MA-35: Special Needs Facilities and Services

Introduction

Washtenaw County has a strong network of public, private and non-profit organizations offering facilities and services for persons with special needs. The following section identifies specific agencies and services available to assist persons that are elderly or frail elderly, that have disabilities, alcohol or other drug addictions, or HIV/AIDS, as well as victims of domestic violence and sexual assault.

Including the elderly, frail elderly, persons with disabilities (mental, physical, developmental), persons with alcohol or other drug addictions, persons with HIV/AIDS and their families, public housing residents and any other categories the jurisdiction may specify, and describe their supportive housing needs

Elderly: The Housing Bureau for Seniors, Catholic Social Services of Washtenaw County (CSSW), Jewish Family Services, Ann Arbor and Ypsilanti Meals on Wheels, & OCED all provide services for seniors - including: eviction prevention, foreclosure prevention, housing counseling, home maintenance & repair, accessible ramps, elder abuse prevention, resource advocacy, substance abuse education/treatment, transportation to medical appointments, home injury prevention, support groups, MMAP, RSVP, tax assistance, Foster Grandparent Program, congregate & home-delivered meals. Legal Services of South Central MI provide qualifying seniors legal support re: financial exploitation/abuse/ eviction/foreclosure intervention. CSSW also produces an annual Senior Resource Guide w/referrals & resources.

The frail elderly often need housing w/a supportive services component for daily living activities. CSSW provides respite services for families caring for full-time homebound older adults (e.g. Adult Day Services, Volunteer Caregivers).

Persons w/Disabilities: A survey by the Ann Arbor Center for Independent Living (AACIL) identified accessibility to affordable healthcare, affordable housing; unemployment, a lack of employers educated on hiring persons w/disabilities, and; limited transportation options as the greatest issues facing disabled persons in the County. The AACIL, Washtenaw County Community Mental Health (CMH), Community Alliance, Michigan Ability Partners, Avalon Housing, CSSW, Synod Community Services, & the Shelter Association of Washtenaw all provide a wide range of services including: employment access, educational, vocational & financial services, recreational opportunities,

physical adaptations to the home/workplace/vehicle, affordable housing, homeless services, housing & support services, personal care, meals, transportation, prescription management, etc.

Alcohol or Other Drug Addictions: Individuals w/substance use & dependence disorders often experience difficulties maintaining stable housing & employment. CMH works w/organizations such as Dawn Farm & Home of New Vision to provide residential treatment/transitional housing/ rehabilitation/detoxification/integrated treatment options/outpatient therapy/recovery support services to persons w/alcohol & drug addiction. Avalon Housing provides supportive housing services to individuals w/addiction disorders. There is a recognized need in the community for additional detox services & housing programs for this population. The opioid epidemic has impacted Washtenaw; with the County Health Department monthly Opioid Report tracking overdoses, including both ED admissions & deaths, the total number of overdoses in 2017 was 337, a 34% rise from 2016. With growing concern over this spike, several shelter & substance abuse service agencies are trained in administering naltrexone (opioid overdose reversal drug), as is the County Sheriff's Office. CMH also oversees the management and integration of Medicaid mental health services for adults with intellectual/developmental disabilities, serious mental illness, & children w/serious emotional disturbances – in addition to overseeing substance use disorder services. The County has embraced Harm Reduction, a set of practical strategies and ideas aimed at reducing negative consequences associated w/drug use. Harm Reduction is also a movement for social justice built on a belief in, and respect for, the rights of people who use drugs. Harm reduction incorporates a spectrum of strategies from safer use, to managed use to abstinence to meet drug users "where they're at".

Victims of Domestic Violence & Sexual Assault: Emergency shelters like the Safe House Center & Ozone House (for youth) temporarily meet the needs of persons who are unsafe in their living situations. These shelters generally provide other support services like counseling/support groups/legal assistance/case management/safe recreational activities/educational opportunities/referrals to other social service agencies. Created in 2015, the County's Human Trafficking Court has successfully steered people who were arrested for prostitution or related charges, but then identified as trafficking victims, into a diversion program in which they received legal assistance, rehabilitative & treatment services, & an alternative to incarceration.

Persons w/ HIV/AIDS: Unified - HIV Health and Beyond provides assistance w/housing location/eviction prevention/rental assistance/permanent housing placement/housing resources/other services that lend to housing stability (i.e. medication adherence/ transportation to medical appointments, financial management/in-home assistance) for individuals and heads of household living w/HIV. Unified manages the Housing Opportunities for Persons with AIDS (HOPWA) program and has a few S+C vouchers.

Describe programs for ensuring that persons returning from mental and physical health institutions receive appropriate supportive housing

Washtenaw County's Continuum of Care (CoC), in coordination with the University of Michigan Hospital systems and Saint Joseph Mercy Hospital system, approved a Hospital Discharge Planning Protocol designed to determine if a patient has housing options upon leaving the hospital. If the patient has no housing options or resources, she or he will be referred to the hospital social work department for assistance in addressing housing and related follow-up concerns. Both hospital-based social workers and community-based case management staff will collaborate in case-specific problem solving to achieve the best feasible outcome for addressing patient needs.

For persons returning from mental health institutions, CMH has an official discharge planning policy that initiates the discharge planning processes at the earliest feasible point during service delivery, based upon the client's level of functioning. Upon discharge or transfer of clients, CMH case managers and a placement coordinator are responsible for ensuring that the client has a viable housing option available. Project Outreach Team (PORT), a division of CMH, collaborates with the University of Michigan Hospital psychiatric unit to identify housing options for discharged patients. PORT also participates in ongoing work groups to address discharge planning issues.

Additionally, section 330.1209b of the State Mental Health Code, effective March 28, 1996, requires that "the community mental health services program shall produce in writing a plan for community placement and aftercare services that is sufficient to meet the needs of the individual [...]." In addition, R 330.7199(h) of the Administrative Code says that the written plan must minimally identify "strategies for assuring that recipients have access to needed and available supports identified through a review of their needs." Housing, food, clothing, physical healthcare, employment, education, legal services, and transportation are all included in the list of needs that must be appropriately addressed as a function of mental health discharge planning.

Specify the activities that the jurisdiction plans to undertake during the next year to address the housing and supportive services needs identified in accordance with 91.215(e) with respect to persons who are not homeless but have other special needs. Link to one-year goals. 91.315(e)

For the past several years, Emergency Solutions Grant funding has been provided to SafeHouse Center and Ozone House to deliver housing and non-housing related services to special populations. SafeHouse Center provides services to survivors of domestic violence and sexual assault. Ozone House provides services to unaccompanied youth, including LGBTQ+ populations. Moreover, county-wide efforts are underway to increase partnerships,

awareness and services to victims of human trafficking, undocumented immigrants, youth ages 18-24, and those living with HIV/AIDS. Recently, Washtenaw County residents voted to pass a Public Safety and Community Mental Health (CMH) millage that will support CMH services, among other law enforcement and public safety needs. A wide representation of homeless and special needs service providers are being consulted to inform and prioritize how this millage should be used to best meet the CMH needs in the County through the CMH Advisory Committee (CMHAC). The CMHAC will make recommendations to the CMH Board and Washtenaw County Board of Commissioners about how to utilize the CMH portion of funding from the Public Safety and CMH millage, and how to evaluate the utilization of those resources. Washtenaw Housing Alliance (WHA), a close partner of the CoC, acts as the liaison to this group and consults with homelessness and housing partners through the WHA Operations Committee to ensure homelessness/housing input is captured in the recommendations. The millage will increase ways to serve special needs populations.

An effort that will also help address special needs is a current equity initiative intended to provide government leadership and employees with the tools needed to create a just and equitable community for all Washtenaw County residents. "One Community" was created as a joint initiative between the City of Ann Arbor, Washtenaw County, and the Government Alliance on Race and Equity (GARE), which is a national network of governments working to achieve racial equity and advance opportunities for all. One Community will focus on educating government leaders and staff to become aware of where inequity exists and the role government may play in creating or maintaining that inequity. As a result of this initiative, the Racial Equity Office was created in Washtenaw County. Charged with " spearheading the charge of the (racial equity) policy, addressing existing inequities in the county and ultimately making Washtenaw County a more equitable place to live and work", the office seeks to address inequities throughout the county.

NA-40 Homeless Needs Assessment

Introduction:

Washtenaw County Office of Community and Economic Development (OCED) serves as the Continuum of Care (CoC) agency for the county. In partnership with the Washtenaw Housing Alliance (WHA), OCED continues to hold annual Point in Time Counts (PIT). PIT counts are mandated by HUD and include a count of all adults, households with children, and unaccompanied youth who are homeless, both sheltered and unsheltered on the night of the count.

The annual PIT count, HMIS data tracking and the CoC's involvement in Built for Zero, a national effort to functionally end homelessness for veterans and chronically homeless, has resulted in a change in processes that has led the CoC to have more accurate reporting and tracking of individuals and households experiencing homelessness, including the use of a by-name-list to track persons experiencing homelessness and to prioritize limited resources for those with the highest levels of need.

This combined information, as of February 2018, shows that of persons receiving services related to homelessness in Washtenaw County, 62% are African American, 65% are individual adults (without children), and almost all (96%) were from urban areas. The most recent 2018 PIT count identified 256 sheltered and 28 unsheltered persons experiencing homelessness on a given night. Comparing those numbers to our last Consolidated Plan (2013-2018), there has been a 26% reduction in sheltered homelessness and an 83% reduction in unsheltered homelessness.

Homeless Needs Assessment

Population	Estimate the # of persons experiencing homelessness on a given night		Estimate the # experiencing homelessness each year	Estimate the # becoming homeless each year	Estimate the # exiting homelessness each year	Estimate the # of days persons experience homelessness
	Sheltered	Unsheltered				
Persons in Households with Adult(s) and Child(ren)	17	0	850	700	350	116
Persons in Households with Only Children	1	0	10	10	10	154
Persons in Households with Only Adults	148	6	700	450	150	165

Population	Estimate the # of persons experiencing homelessness on a given night		Estimate the # experiencing homelessness each year	Estimate the # becoming homeless each year	Estimate the # exiting homelessness each year	Estimate the # of days persons experience homelessness
	Sheltered	Unsheltered				
Chronically Homeless Individuals	24	0	175	100	50	322
Chronically Homeless Families	1	0	10	10	10	116
Veterans	20	1	90	60	50	99
Unaccompanied Child	1	0	10	10	10	154
Persons with HIV	0	0	5	5	10	165

Indicate if the homeless population is: Partially Rural Homeless

Rural Homeless Needs Assessment

Commented [JW1]: It looks like in the last ConPlan this table was completed for the "Partially Rural Homeless" category.

Population	Estimate the # of persons experiencing homelessness on a given night		Estimate the # experiencing homelessness each year	Estimate the # becoming homeless each year	Estimate the # exiting homelessness each year	Estimate the # of days persons experience homelessness
	Sheltered	Unsheltered				
Persons in Households with Adult(s) and Child(ren)						
Persons in Households with Only Children						
Persons in Households with Only Adults						
Chronically Homeless Individuals						
Chronically Homeless Families						

Population	Estimate the # of persons experiencing homelessness on a given night		Estimate the # experiencing homelessness each year	Estimate the # becoming homeless each year	Estimate the # exiting homelessness each year	Estimate the # of days persons experience homelessness
	Sheltered	Unsheltered				
Veterans						
Unaccompanied Youth						
Persons with HIV						

For persons in rural areas who are homeless or at risk of homelessness, describe the nature and extent of unsheltered and sheltered homelessness with the jurisdiction:

2022 HMIS data for all literally homeless and at-risk clients was used to generate the above estimates. Using zip codes to identify persons in rural areas revealed that less than 4% of persons accessing the homeless assistance system in Washtenaw County were in rural areas when they began receiving services, indicating that rural homelessness is relatively rare in Washtenaw County. Data from the 2022 PIT Count further support this notion, as no unsheltered persons found during canvassing were in a rural area. Due to the very small number of persons experiencing homelessness in rural areas, it is difficult to determine if persons in rural areas have different characteristics than those from urban areas.

Nature and Extent of Homelessness:

Race:	Sheltered:	Unsheltered (optional)
White	86	5
Black or African American	90	1
Asian	1	0
American Indian or Alaska Native	5	0
Pacific Islander	0	0
Ethnicity:	**Sheltered:**	**Unsheltered (optional)**
Hispanic	11	1
Not Hispanic	194	5

Estimate the number and type of families in need of housing assistance for families with children and the families of veterans.

A total of 241 families were assessed as literally homeless in calendar year 2022, with an average of 49 families experiencing homelessness each month. The average family size was 3.5. 76% of households identify as Black or African American, with 26$ identifying as white. 9 out of 10 households are headed by a mother, with a typical family headed by a Black, single mother. 4% of families identify as Hispanic. Early data suggests that there is a significant increase in family homelessness at the end of 2022 into 2023. At the end of February 2023 there were 117 families experiencing literal homelessness.

89 veterans were served over the course of 2022, with an average of 23 veterans each month. A typical veteran is white, male, and older relative to the general homeless population. Veterans are almost exclusively single adult households.

Describe the Nature and Extent of Homelessness by Racial and Ethnic Group.

According to HMIS data for all clients served by Washtenaw County CoC in 2016, 62% of persons experiencing homelessness in Washtenaw County are African American/Black, and another 36% are White, with all other racial groups accounting for less than 1%. Just under 5% of clients served identified ethnically as Hispanic. These numbers are a stark contrast to the general population in Washtenaw County, where according to 2016 U.S. Census estimates, 13% of County residents are African American/Black and 71% are White, with 3% identifying as Hispanic.

A 2022 racial disparity assessment found that 58% of persons experiencing homelessness in Washtenaw County identify as Black or African American, despite

making up only 12% of the overall Washtenaw County population. This remains an enormous disparity, even though this is a decline from 64% in 2017. In comparison, all other races are underrepresented among those experiencing homelessness—white people represent 76% of the overall county but only 38% of people experiencing homelessness, and Asian-Americans make up 9% of the population but only 1% of those experiencing homelessness.

The same assessment found that people identifying as Latino/Hispanic are accessing homelessness assistance at a rate similar to their share of the county population. Latino/Hispanic persons made up 4.7% of Washtenaw County in 2020, and 5.6% of people receiving homelessness assistance. This share of services seems proximate to the general population and is largely stable from year to year.

Describe the Nature and Extent of Unsheltered and Sheltered Homelessness.

Over the past 5 homeless Point-in-Time (PIT) Counts, from 2018 to 2022, the average sheltered population has been 245, while the typical unsheltered population is 16.2. While the amount of unsheltered homelessness is low during late January when the PIT Count is held, the numbers grow during the summer when winter shelter expansion is no longer available. For households that find housing, the average shelter stay is 116 days.

Discussion:

Overall, Washtenaw County saw a general decline in homelessness during the pandemic, including the lowest monthly number recorded: 264 people experiencing homelessness in June of 2022. By February of 2023, that number was up to 620, an all-time high, with the vast majority of the increase is among families in children. This rise has been swift and is unprecedented, making it difficult to predict if this is temporary or a new normal after the pandemic. Either way, the levels of family homelessness are greater than the system capacity. While more resources are needed for all populations experiencing homelessness, it is clear the current system is not able to handle the growing crisis among families.

AP-65 Homeless and Other Special Needs Activities – 91.220(i)

Introduction

Listed below is a series of action steps and goals that Washtenaw County will undertake over FY 2023-24. Additionally, this section of the Annual Action Plan identifies the supportive housing needs of non-homeless populations.

Describe the jurisdictions one-year goals and actions for reducing and ending homelessness including:

Reaching out to homeless persons (especially unsheltered persons) and assessing their individual needs

Street outreach is conducted through Project Outreach Team (PORT), housed within Community Mental Health (CMH). PORT provides homeless outreach services to adult individuals who have mental illness and/or a co-occurring substance use disorder. Outreach services are intended to engage individuals struggling with homelessness, with the goal of building relationships in order to link homeless individuals to housing, treatment services and eligible resources. PORT conducts daily street outreach. The VA conducts regular street outreach and quarterly Point-In-Time Counts to identify unsheltered veterans. The VA and PORT works closely in identifying unsheltered veterans, as well as others who may need to be connected to homeless and mental health services. These efforts ensure the agency staff has detailed information and knowledge of where our unsheltered people congregate, receive meals, and get medical care. Further, local law enforcement alert the PORT team when they find people they believe have not been connected to services. The Washtenaw County community has been a long time adopter of the Housing First philosophy and all outreach efforts are made with this in mind. By coordinating with all of these providers, successful outreach to persons experiencing homelessness is achieved.

Addressing the emergency shelter and transitional housing needs of homeless persons

Housing Access for Washtenaw County provides intake and assessment to all households experiencing a housing crisis, including those needing emergency shelter. HAWC is responsible for administering all eviction prevention services and makes referrals to emergency shelter and permanent housing resources.

If a household is experiencing an unsheltered housing crisis outside of HAWC's operating hours, they can call the United Way 211 line or they may be instructed to call 911 as appropriate for the type of emergency. If the household is experiencing an unsheltered emergency, 211 will connect the household to Salvation Army emergency shelter staff to determine next steps, which may include placement in a shelter or hotel/motel depending on availability and funding. The household will be scheduled for a full assessment with HAWC as soon as possible during normal business hours. Further, 211 staff are trained

to connect households to other emergency services, such as referrals for persons fleeing or attempting to flee domestic violence, sexual assault, or stalking. While HAWC refers unsheltered households to emergency shelters as appropriate during regular business hours, individuals and families can still walk into an emergency shelter to be assessed at any time.

HAWC may access funds in emergency situations to place unsheltered households in a hotel or motel. This resource is limited and intended to be used when a household is moving into a shelter space, RRH, PSH or other permanent housing within 48 hours. The option to utilize hotel or motel stay may only be used after diversion strategies are exhausted, with documentation ensuring shelter space, RRH, PSH and/or permanent housing within 48 hours from a provider representative and/or landlord. Other funding sources may be available for hotel or motel stays throughout the year but is also limited.

The Shelter Association of Washtenaw County (SAWC) operates a 54-bed single-adult shelter. During the cold months of the year (November-March), SAWC operates an overnight warming center that increases their capacity to shelter individuals overnight to meet the need so no one is turned away with up to 175 beds available. Daytime warming centers are available at rotating locations from December through March. SAWC also offers several specialty shelter programs to meet any unique needs of those served including a recuperative care shelter of 7 beds for who are being discharged from the hospital.

Up to 95 shelter beds are available for families with children. A winter hotel program has been established for the first time in 2023 to respond to the rise in family homelessness.

Washtenaw County has embraced federal and national best practice for transitional housing. Grant Per Diem (GPD) programs or transitional housing for veterans, adopt a Housing First focus to provide a broader continuum of resources with the goal of having fewer homeless veterans.

Helping homeless persons (especially chronically homeless individuals and families, families with children, veterans and their families, and unaccompanied youth) make the transition to permanent housing and independent living, including shortening the period of time that individuals and families experience homelessness, facilitating access for homeless individuals and families to affordable housing units, and preventing individuals and families who were recently homeless from becoming homeless again

Since 2015, Washtenaw County CoC has participated in Built for Zero, a rigorous national change effort designed to help a core group of committed US communities end chronic and veteran homelessness. Since participating, the CoC and its partners have undergone significant systems transformation to prioritize resources, implement solutions to identified system barriers, strengthen partnerships and collaborations, and house more households in shorter periods of time. In 2015, the CoC implemented a common assessment tool and began managing a by-name list that tracked all households experiencing homelessness by name. These two changes helped inform providers about the acuity and needs of those experiencing homelessness and how to best prioritize permanent housing resources to serve the most in need. The Community Housing Prioritization (CHP) Committee used this information during twice-monthly meetings to expedite housing/referral processes and maximizing permanent housing resources.

Further, these meetings provide case conferencing opportunities so that barriers to housing can quickly be identified and problem solved. Once a household is referred for housing services, providers discuss housing needs/preferences and help households create a housing plan at initial contact. The primary goal is always to have a Housing First mentality and focus on finding stable, affordable, and permanent housing first.

To best meet the needs of those experiencing homelessness, the Washtenaw County CoC has adopted Housing First principles that align with national best practices. HUD defines Housing First as "[a program that] offers individuals and families experiencing homelessness immediate access to permanent affordable or supportive housing, without clinical prerequisites and with a low-threshold for entry." To ensure consistent practice across the CoC, service providers have a responsibility to implement these principles and are committed to minimizing or overcoming barriers to program entry and retention. This includes an emphasis on housing-focused solutions across all programs. Currently the single-adults emergency shelter, the Delonis Center, has undergone efforts to lower barriers to entry and making the shelter be as welcoming of an environment as possible for all. This has included a shift in culture and a focus on better trained staff (e.g. attending trauma-informed care trainings).

The CoC strives to ensure that all experiencing homelessness have a plan to find permanent housing, regardless of resources available. Nonresidential services are available for those experiencing homelessness who do not have a shelter bed, including assistance in finding housing. Moreover, GPD providers have implemented the Bridge Housing model that emphasizes short lengths of stay (generally up to 90 days) and rapid connections to permanent housing. GPD providers work closely with the VA and coordinated entry partners to ensure veterans are connected to permanent housing and also to services that can remove any barriers to staying housed. Further, Coordinated entry and providers work closely with schools to properly document and refer families, which expedites services, as well as with McKinney-Vento liaisons to properly support families in finding housing.

The CoC and its partners are focusing on increasing diversion efforts, a strategy that prevents homelessness for people seeking shelter by helping them identify immediate alternate housing arrangements and, if necessary, connecting them with services and financial assistance to help them return to permanent housing. In 2021, two diversion positions were funded, focused on families, and single adults. In the first year of the program, more than 180 households were diverted from shelter. Learnings from these early efforts at diversion will inform a comprehensive, community-wide strategy.

CoC-wide trainings (e.g. Housing First and Rapid Re-Housing) help implement best practices and increase rapidity across the system. Trainings were held online during the pandemic and are available online for use by partner agencies. The Washtenaw Housing Alliance, the Washtenaw Health Plan, and the Washtenaw County Health Department organize annual Harm Reduction in Housing & Healthcare Conference for beginning, intermediate, and advanced professionals from the healthcare and housing fields. In 2019, the cross-sector conference had over 200 attendees from Southeast Michigan.

Returns or those at risk are identified by Coordinated Entry in HMIS and reviewed at twice-monthly by-housing prioritization meetings for collective problem-solving aimed to quickly rehouse households. Households are monitored to identify barriers to stability. Case conferencing at prioritization meetings helps reduce barriers and allows for timely action, like moving households to a more appropriate program before a return occurs. Recently updated prioritization policies address returns to homelessness, while improved case conferencing policies will increase capacity and allow providers to be more proactive. CoC partners are currently engaged in creating a workplan to improve diversion and prevention practices, especially for returns. Further, unaccompanied youth provider, Ozone House, has a focus on family reunification whenever safe and possible. This involves parents or guardians engaging in family therapy to move towards better communication and family reunification.

Additionally, HAWC staff work closely with the local court system to ensure tenants in court proceedings have access to homelessness prevention resources where possible. When a landlord files an eviction, he or she is provided with information about HAWC and how it can be helpful to both the landlord and the tenant. The goal of this process is that landlords and tenants will learn to contact HAWC earlier in the process, which will result in less expensive back-rent bill that needs to be resolved. In addition, HAWC staff attend eviction court hearings and conduct intake assessments in real-time where needed. The CoC and HAWC also work closely with Legal Services of South Central Michigan to ensure to the greatest extent possible that clients have free legal representation in eviction proceedings.

Helping low-income individuals and families avoid becoming homeless, especially extremely low-income individuals and families and those who are: being discharged from publicly funded institutions and systems of care (such as health care facilities, mental health facilities, foster care and other youth facilities, and corrections programs and institutions); or, receiving assistance from public or private agencies that address housing, health, social services, employment, education, or youth needs

Housing Access for Washtenaw County (HAWC) is Washtenaw County's coordinated entry point for homelessness intakes and assessments. In partnership with housing and service providers, including United Way's 211 line, all calls for housing resources are routed to the HAWC line. Through telephone screening, followed by a face-to-face assessment, people in need are connected to eviction prevention, rapid re-housing and emergency shelter services. The CoC is committed to assisting those experiencing homelessness in any way possible.

HAWC provides training and information to any agency and publicly funded institutions or systems of care, including, but not limited to, hospitals, schools, community mental health, and jails. Training is continuous to address any turnover that may happen. HAWC's Coordinator and Community Relations Liaison are also available to attend a variety of community meetings to forge close partnerships and remove barriers to housing stability. An example of a community meeting is the Youth in Transition committee of the Department of Health and Human Services that ensures those aging out of Foster Care have a plan for a successful transition.

HAWC staff also provides intake and assessment at other locations on a standing basis as part of outreach efforts. HAWC attends Landlord Tenant Court to provide eviction prevention. Judges rely on HAWC staff to provide information on resources that can be made available before making their judgment. HAWC is also present monthly at the Women's Correctional Center to provide outreach for women who have recently been paroled and don't have housing identified upon exit. HAWC staff provides housing search tools to help the women navigate the various systems involved in finding housing.

Efforts around diverting individuals from entering the criminal justice system, hospital system, and the homelessness system are underway. Community Mental Health (CMH) conducted a Youth Sequential Intercept Mapping to understand how all of these systems intersect and to identify gaps and issues in service delivery. CMH and various law enforcement entities (police departments and the sheriff's office) are working with many other partners to ensure that individuals experiencing mental health issues and/or homelessness are not entering the criminal justice system unwarranted. Special teams, partnerships, and trauma-informed training have helped to bring together cross-sector staff to address issues and divert individuals from these various systems. The FUSE initiative (a 5-year study conducted by New York University researchers) has identified frequent utilizers of systems and worked with them to stabilize their housing, physical health, and mental health in order to stop over-relying on the hospital emergency room as a means to address their non-emergent needs. While this started as an initiative, it is now an ongoing project funded through our CoC and incorporated into our CoC system, including prioritization.

Discharge policies were created as a part of the Blueprint to End Homelessness. The policies and protocols listed below reflect efforts to coordinate with systems of care that may discharge persons into homelessness. It should be noted that currently the CoC is leading a workgroup to update discharge policies for those exiting the criminal justice system and is leveraging the knowledge and expertise of many partners, including community mental health, law enforcement, substance use providers, courts, coordinated entry, and housing providers. The CoC will continue efforts to update all discharge policies in the coming years.

Washtenaw County's CoC, in coordination with the University of Michigan Hospital systems and Saint Joseph Mercy Hospital system, approved a Hospital Discharge Planning Protocol designed to determine if a patient has housing options before leaving the hospital. If the patient has no housing options or resources, she or he will be referred to the hospital social work department for assistance in addressing housing and related follow-up concerns. Once referred to a hospital social worker/case manager, staff will assess whether or not the person is connected to the community-based social services system and manage those connections.

For persons returning from mental health institutions, Community Mental Health (CMH) has an official discharge planning policy that initiates the discharge planning processes at the earliest feasible point during service delivery, based upon the client's level of functioning. Upon discharge or transfer of clients, CMH is responsible for ensuring that the client has a viable housing option available. Project Outreach Team (PORT), a division of CMH, collaborates with the University of Michigan Hospital

psychiatric unit to identify housing options for discharged patients. PORT also participates in ongoing work groups to address discharge planning issues.

The Michigan Department of Health & Human Services (DHHS) has a written policy and protocol to ensure that all youth aging out of foster care are actively supported in their transition to independent living. The Youth-in-Transition meeting, meets monthly and discusses youth aging out of foster care and ensures they have a plan for a successful transition. At the local level, DHHS contracts with the Washtenaw Association for Community Advocacy (WACA) to review cases of foster care youth to ensure that their mental health, medical and educational needs are being properly assessed prior to their exit. WACA has commissioned the Youth Aging Out Coalition (YAOC) to develop and enhance services for foster care youth. YAOC's regular multi-disciplinary case reviews for youth aging out establish a plan to support the youths' transition out of foster care.

On a statewide level, the Michigan Department of Corrections created the Offender Success program to assist with housing placement in private apartments that are willing to rent to individuals with criminal backgrounds. For those exiting the County Jail, the Washtenaw County Sheriff's Office (WCSO) has taken an active role to streamline a process with the Project Outreach Team (PORT) to ensure that no one is released into homelessness. PORT screens individuals at booking to assess each person's needs, which include housing, food, clothing, and employment. Moreover, the WCSO has a program where the same staff complete the intake and the discharge and focuses on working with the individual being released to create an action plan for release and ensure the person has identified a location or person to stay with.

Discussion

Increasing the mainstream benefits, non-employment income, and employment of the CoC/ESG program participants is a CoC objective and is closely monitored by various CoC committees to ensure compliance and to identify agencies that need additional technical assistance and training to achieve required outcomes based on set CoC performance benchmarks. The CoC will continue to provide training on mainstream benefits eligibility and application processes twice per year. Additionally, the CoC partners will connect providers to state-run SSI/SSDI Outreach, Access and Recovery (SOAR) trainings and identify training opportunities on cash benefits like TANF, Social Security and VA Pensions, as well as work with the workforce agency to increase employment opportunities.