1. Household eligibility; maximum days of eligibility; application, notice, and appeals processes; participant requirements; and annual reporting requirements;

Eligibility Criteria:

Criteria shall include a household that has a member of the family who:

- Is 60 years of age or older; or
- Is pregnant; or
- Is homeless due to fleeing domestic or sexual violence; is the survivor of human trafficking, stalking, or dating/interpersonal violence; or
- Has a child aged 19yr or younger; or
- Is a youth exiting foster care, aged 19-24yrs; or
- Has a disability, defined by ADA, and documentable by a healthcare provider (variance form) and/or SSI/SSDI income;
- Is homeless due to natural disaster; or
- Is homeless due to death of a child or partner; or
- Is homeless due to constructive eviction; or
- Is homeless as a result of hospital, rehabilitation, or completion of substance use treatment facility stay.

The Task for recommends elimination of resource test (savings will not be considered when determining eligibility).

AHS Field Services Directors will have some level of discretion with regard to eligibility for households that do not meet above categorical eligibility and funding pool shall exist for this purpose.

Additional recommendation discussed at previous meetings: The current budget has already identified the most vulnerable people experiencing homelessness. It is critical to utilize the ADA's definition of disability as that is the federal standard on identifying disability and is the HUD definition as well. The decision on if the disability or medical condition warrant a need to be sheltered should be between the medical providers and the individuals. They are certainly the most qualified to make that determination.

We recommend increasing access to youth. In addition to minor adjustments on budget language as discussed in the 9/17/2024 and we will send in detail following this meeting.

There should be no income contribution due to the majority of people who are in the program having significantly low incomes. The income contribution is difficult to manage and prevents available resources for housing. If there is an income contribution, it should follow a standard similar or identical to the Section 8 calculation of any income contribution and that contribution should go toward savings to access to housing needs, like furniture, kitchen supplies, basic needs or returned to household after exit. We will provide the HUD Section 8 model for calculating income contribution following this meeting.

Program Requirements:

Households deemed eligible under the above criteria must meet the following requirements:

- Engagement with Coordinated Entry and/or approved housing case management
- Monthly income certification with ESD
- 30% Income contribution
 - 50% of income contribution will defray the cost of motel stay
 - 50% of income contribution will be placed in savings escrow, to be returned to the household upon exit from the EHP
- Must accept shelter placement that meets household needs in the community when offered/available
- Must accept housing placement that meets household needs and is affordable and supportive (when necessary)

Additional recommendation discussed at previous meetings: There should be no income contribution due to the majority of people who are in the program having significantly low incomes. The income contribution is difficult to manage and prevents available resources for housing. If there is an income contribution, it should follow a standard similar or identical to the Section 8 calculation of any income contribution and that contribution should go toward savings to access to housing needs, like furniture, kitchen supplies, basic needs or returned to household after exit. We will provide the HUD Section 8 model for calculating income contribution following this meeting.

There should be no resource test for emergency housing. A resource test prevents people with limited resources from having what they need to access permanent housing. There is significant data that shows that resource tests are prohibitive to breaking the cycle of poverty.

We recommend using language similar to the budget language on case management which allowed for non traditional/ non categorical case management alternatives. However, instead of ESD tasking individuals with items that may not be appropriate for their case, it is addressed in the care team, with a client centered and client buy in approach so that people are given the right supports. A necessary addition of allowed case management us disability centered programs as an alternative to state funded housing partners.

Length of Stay/Days Eligible:

Households will be eligible for GA-EHP motel stay until:

- Homelessness is resolved; or

- Household has refused adequate affordable and supportive housing; or
- Household has refused to engage in Coordinated Entry and/or adequate housing case management; or
- Household becomes ineligible, based on above criteria

Additional recommendation discussed at previous meetings: Those who meet eligibility requirements qualify for up to 6 months. After 6 months, there is a standardized review process if the person remains in need of GA Emergency Housing, with an appointed committee alongside their care team. The purpose of the review process is not to exit people from the program, but rather to review what has been done and identify what changes need to be made or what additional supports could be helpful in order to address barriers that have prevented the household from being housed. Understanding that on some occasions the only barrier will be lack of appropriate housing stock, in which case, households will continue with their current plan. This would prevent unsheltered homelessness and increase support to permanent housing while reducing reliance on GA Emergency Housing.

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Notice, Application, and Appeals:

The Task Force has determined notice, application, and appeals process must be clearly defined, minimizing the level of discretion of AHS currently has to develop Rules for program execution and implementation, and provided in writing to any household. Households will be entitled to continued motel stay until resolution of the appeal process. A letters from ESD must include clear instructions for appeal, contact information for legal services, and participant rights related to Reasonable Accommodation.

Households may apply either in-person or over the phone. A mechanism for virtual application, income reporting, etc. will be developed by ESD (via app, portal, etc.).

Protections must be in place, and developed by the Vermont Network, to ensure households that experience domestic violence (etc.) during motel stay to ensure continued eligibility.

Additional recommendation discussed at previous meetings:

• Benefit Award Letter: Households will receive a benefit letter and will be notified writing at each recertification of their benefit, time remain, recertification date and any additional requirements that they need to complete. All households will be given adequate time while remaining sheltered to meet any documentation requirements. ESD or AHS Field Services

Coordinators will provide to the local lead agency notifications for everyone's 6 month review.

- Programmatic Changes: Any changes to the program itself or benefit will be noticed with no less than thirty days notice so that households have the chance to both prepare and appeal decisions related to emergency housing.
- Denial Letters: Denial letters will be issued at each denial and should a denial letter not be issued, there will be a 10 day grace period of shelter, to allow notice of the denial to the household
- All appeals should include remaining sheltered until the appeals process is complete. In all other benefits, benefits can be given retroactively, however, in this benefit people completely lose shelter while awaiting an appeal with no cure possible. At the time of denial applicants should be given a denial letter utilizing the denial notification process outlined in our previous recommendation. Applicants should be informed of their right to appeal and informed that they do not have to decide at the time of denial if they so choose. Households should receive information on how to contact all organizations that take new applicants or referrals specific to representing or supporting applicants through fair hearings. All such organizations should also be named with contact information on the denial letter so that households can access any available support for their fair hearings process.

Reporting Requirements:

AHS will provide monthly reports detailing the following, statewide and by-district:

- Households served; population break-down
- Households eligible but not able to serve due to room capacity
- Number of motel rooms
- Number of households exited for reasons in the following categories:
 - Ineligible, based on criteria
 - o Behavior-based
 - Obtained permanent housing
 - o Obtained community-based shelter bed

In all instances above, data should not be provided publicly in cases where number is below 12 to protect confidentiality, however local data may be shared with CE Lead Agency, when households are enrolled in CE. ESD will designated a representative in each district to serve a point-of-contact for Lead Agencies. ESD point-of-contact will attend local case conferencing circles (when CE ROI is in-place).

2. The process to establish a single, statewide, unified coordinated entry system with participation from the Department;

There is agreement that a single, statewide, unified coordinated entry system exists and the system must be improved with benchmarks and tied to funding. In partnership with CCHA and BoS, OEO will determine benchmarks, requirements, and outcomes which include the following:

- Expanded standards for service provision:

- Field-based services, opposed to office-based services
- Scope of service related to engagement, role of case management, performance indicators
- Training and professional development for case management staff
- Adequate funding to reduce wait-times for connection to case management services
- Adequate funding to reduce wait-times for CE assessment and enrollment

There is agreement that AHS (and its contractors) must engage with and participate within the coordinated entry system to include:

- Adequately funding and training for AHS contractors to provide housing-related case management
- Investing in workforce development for direct service workers, including providing professional development
- There is acknowledgement that the needs of households have shifted in acuity and require intervention that is, at times, clinical in nature, and therefore, AHS (ESD, DAIL, FSD, DMH, VDH, DCF, etc.) and AHS contractors (including but not limited to AAAs, MH and SUD designated agencies, VDH, DMH, CDD/Parent-Child Centers) must engage in and provide coordinated entry assessment and housing navigation services; training in housing navigation must be provided to AHS staff and contractors; housing navigation must be part of the role of staff and contractors
- Utilization of the Homeless Management Information System (HMIS) across AHS staff and contractors
- Each AHS departments must identify point-of-contact to participate in local case conferencing activities

3. The current organization of roles and responsibilities within the Department for Children and Families' Office of Economic Opportunity and the Division of Economic Services

There is agreement that AHS must shift to a role of "shelter provider" with regard to the GA-EHP and hold accountability for the participants within this program, providing data and reports statewide and regionally, as outlined above.

There is agreement that AHS (and its contractors) must participate in the statewide coordinated entry system, including utilization of HMIS, as outlined above.

AHS will develop contracts with motel/hotel owners indicating agreements around participant conduct, habitability standards, and owner responsibilities. AHS will consider purchase of motel/hotel in instances when available to operate site as shelter, with consideration of transition to permanent housing (and/or in partnership with non-profit housing provider).

AHS will designate staff to be assigned and on-site at each motel/hotel, or multiple motels/hotels (numbers-dependent) to coordinate services and serve as liaison between owner, case managers, and households.

Additional recommendation discussed at previous meetings:

- The department should have regular accurate counts for who is in and out of the GA Program including numbers of people in each household. Where possible information on why people left. This may be represented in a recent change to documentation, if so, that should continue.
- If the state opens a CHINS case for a particular household, they should not exit that household from emergency shelter. That child is now considered in the custody or household in observation of the state. That means that exiting these families is putting children under the states custody in unsafe and unsheltered situations. This also better leans toward the goal of DCF in an open CHINS case, keeping children with their parents or kinship caregivers where possible. This commitment to our children must include shelter.
- Required community stakeholder input. Currently this input is inauthentic and works in less of a participatory model. What is needed is authentic, participatory, community stakeholder perspectives to inform system and care delivery improvements prior to decisions being made about these improvements.
- Additionally we recommend creating a lived experience advisory committee to the DCF Commissioner as was recommended in House Human Services bill H. 879 from the 2024 legislative session
- 4. The number and types of emergency shelter spaces needed and currently available for each geographic region in the State, with a preference for non-congregate shelter spaces

HHAV will provide a full report detailing scale and type of emergency shelter required to meet the need (HHAV, BoS, and CCHA held statewide convening of shelter providers to develop report/assessment, June 2024)

5. The identification of a consistent lead agency for each geographic region;

Each region currently has a lead agency for administration of the coordinated entry system. AHS (OEO) must ensure adequate funding for each lead agency. Lead agencies will be required to determine benchmarks and procedure related to:

- Identify CE System Lead (staff member(s)
- Define role of the CE System Lead to include:
 - Wait-time for assessment
 - Interim service provision until household can be assigned to case management
 - Timely data entry for HMIS

- Complete assessment data entered into HMIS (include all areas of CE assessment)
- Contingency-planning when there is a wait-time to conduct assessment and/or connection to case management
- Process for communication and work-flow when case manager is not connected to the CE system

6. The identification of role and responsibility assigned to the lead agency

See above, 5

7. Potential adjustments to emergency housing policy during cold weather months

AWC must include relaxed eligibility requirements to avoid exposure death, to align with closure of VT State Parks for the season: October 15 – April 15. There is agreement that adequate funding and support for seasonal low-barrier shelter must be provided.

8. A process to enable participating households to place a percentage of the household's gross income into savings, which shall be returned to the household for permanent housing expenses when the household exits the General Assistance Emergency Housing;

See above, 1

Additional recommendation discussed at previous meetings: This amendment represents further research into the Section 8 process and after meeting with Section 8 case managers to ask their ideas and preferences.

There should be no income contribution due to the majority of people who are in the program having significantly low incomes. The income contribution is difficult to manage and prevents available resources for housing. The income contribution additionally disincentivizes income. It is managed in a complicated way and significant in proportion to the households income.

Instead we recommend an income savings contribution that will be matched when the household has found transitional or permanent housing. Households have the option to set up their own savings or escrow account with the navigational support of providers when needed. Households will show that they are adding up to 30% of their income to said account by providing documentation at each renewal as they do currently with their proof of income. The amount saved will be documented in their case notes. The amount saved, up to 30% of their income will be matched at the time of moving in to permanent or transitional housing. This will incentivize savings without creating a requirement that can have catastrophic outcomes. It

encourages individual participation in their next steps in an empowering way that also lessons the burden when they are suddenly in the position of having to pay a lot of upfront costs of new household items, internet, phone and more.

We want to stress that income contribution is not the preferred model and we have heard from several housing case managers that the hotel income contributions are significantly disruptive to the process of achieving and being successful in permanent housing.

If the legislature chooses to use an income contribution, we recommend: If there is a required income contribution it should still follow the above model of savings rather than being paid in to hotel and motel owners. Rather than using the HUD calculation for contribution which we understand may be too complicated for this program, it should create some standardized deductions and standardized income calculations keeping in the spirit of the HUD model:

a. In a new job, individuals will show their income after 30 days, 60 days and 90 days to create an average. After such time, unless income changes, that calculation shall be used to determine income contribution.

b. In an ongoing job, the 12 month average will be used, again at any time a household or individual can report and decrease in income and an increase of more than 10% will be reported.

- c. There should be standard adjustment as follows:
- Aa. Disability of any kind: \$480/year
- Bb. Experience of homelessness: \$1200/year
- Cc. On Medicaid or Medicare: \$500/year
- Dd. Transportation: \$1200/year

e. At no time shall participants be required to renew for purposes of proof of income more often than participants without income are required. Accommodations should be made to ensure that renewals do not disrupt participants job.

9. A mechanism for addressing potential conduct challenges posed by a member of a participating household served in a motel, hotel, or shelter;

Additional recommendation discussed at previous meetings: Periods of ineligibility should be removed as condemning people to the outdoors is not a humane or data driven strategy to address complex needs and challenges. Often this outcome relies on only the word of a hotel staff or owner, there is no true due process. Challenges related to either conduct or more often a person's disability should instead be addressed using the same principles as a Housing First Model, individuals should be met where they are at to work with them on addressing these

challenges, when necessary working with clients to move households to an environment that has a better chance at success, understanding that this may take multiple tries to meet the same strategy. This does not prohibit a hotel from getting a no trespass, addressing challenges through the criminal legal system, or choosing not to renew a household. It only prevents the practice of Periods of Ineligibility that most often impact people with significant disabilities.

- 10. The identification of any State rules and local regulations and ordinances that are impeding the timely development of safe, decent, affordable housing in Vermont communities in order to:
 - a) identify areas in which flexibility or discretion are available; and
 - b) advise whether the temporary suspension of relevant State rules and local regulations and ordinances, or the adoption or amendment of State rules, would facilitate faster and less costly revitalization of existing housing and construction of new housing units;
- 11. A mechanism to ensure that eligible households are sheltered until transitional or permanent housing is available

12. Strategies to reduce reliance on hotels and motels for emergency housing

- a) The Task force will solicit feedback from provider to determine impediments to development of emergency shelter
 - Lack of funding for agency infrastructure (HR, accounting, etc.)
 - Lack of clinical expertise due to acuity of need (MH, SUD, medical challenges, etc.)
 - Lack of physical space; buildings, etc. to adequately provide congregate, semicongregate, and non-congregate shelter options

Additional recommendation discussed at previous meetings: Service providers need significant additional funding to carry out increased engagement with households and provide robust wrap around services. There needs to be increased investment in the service sector so that providers can recruit and retain support staff.

Additionally, each households care team should be able to identify that they are meeting regularly to address hurdles and barriers to housing and service support. Regularly this care team should identify when it is necessary to bring additional providers or state agencies on board to trouble shoot barriers to access.

A housing first model should be implemented to ensure that services are robustly available, but not required in order to create a client centered and client directed model of care. When necessary non traditional case management should be implemented to address barriers.

At any point of emergency, or significant loss of emergency shelter, area agencies should have an emergency plan in place with the purpose of trouble shooting high risk households.