

State Planning Advisory Committee Best Practices for Iowa's Homelessness System

March 11, 2014, 10:00 a.m. – 3:00 p.m.
West Des Moines Learning Resource Center
West Des Moines, IA

Meeting Summary

Committee Members Present

Julie Bockenstedt, Humility of Mary Housing, Inc. & Shelter, Davenport
Michelle Brown, Opening Doors, Dubuque
Crissy Canganelli, Shelter House, Iowa City; Policy & Planning Committee Co-Chair, Iowa Council on Homelessness
Ronelle Clark, YWCA Domestic Violence Sexual Assault Resource Center and Transitional Housing Program, Clinton
Carrie Dunnwald, Cedar Valley Friends of the Family, Waverly
Jeannie Kingery, Northern Lights Shelter for Men & Trinity House of Hope Shelter for Women, Mason City
Nicole Rethman, Domestic/Sexual Assault Outreach Center, Fort Dodge
Jan Rutledge, Iowa Legal Aid, Iowa City (substitute for Michelle Hoyt-Swanstrom)
Mark Sertterh, Shelter House, Iowa City
Tony Timm, Central Iowa Shelter and Services, Des Moines; Policy & Planning Committee Co-Chair, Iowa Council on Homelessness

Members Not Present:

Jim Cain, Family Promise of Greater Des Moines, Des Moines
Heather Harney, HACAP, Hiawatha
Michelle Hoyt-Swanstrom, Iowa Legal Aid, Ottumwa

Iowa Finance Authority Staff

Carolann Jensen
Amber Lewis

SPPG Staff

Stacie Bendixen
Indira Blazevic
Arlinda McKeen

Welcome

Arlinda McKeen, SPPG facilitator, welcomed group members. Members introduced themselves. Jan Rutledge of Iowa Legal Aid in Iowa City is substituting at this meeting for Michelle Hoyt-Swanstrom. Amber Lewis, Iowa Finance Authority, announced that IFA and the Council on Homelessness determined that committee members can be reimbursed for travel to committee meetings at the rate of \$0.39 per mile; a form was provided. McKeen reviewed the committee's charge.

Updates and Feedback from January Meeting and Other Discussions

McKeen asked members what feedback they had received from other providers in their regions. Julie Bockenstedt has collected suggestions for subjects of standards from other providers in her area. Ronelle Clark reported that at their bi-county coalition meeting, reactions to updates about this committee's work were positive. Michelle Brown reported that staff at her organization's two facilitates are excited about the development of standards. Tony Timm expressed that multiple groups are addressing different issues with different funding streams but not coordinating; there is a perception that different groups are trying to solve homelessness on their own and may be focusing on one area at the expense of others. Mark Setterh reported talking with clients at his agency who were excited about the possibility of every shelter using the same standards; these were people who have experienced multiple shelters and found varying quality. Timm has found there are not a lot of stand-alone nonprofits addressing homelessness; many are tied to larger, often faith-based organizations that have a certain agenda. It is difficult to get funding as a private organization.

Standards Discussion

The committee began discussions to draft standards for services, operations, and performance. McKeen laid out an approach that will develop standards that many organizations are already doing. "Standard" will be defined as an element of a homelessness program's performance, service, or operations that is necessary for a quality program and meets, at minimum, funder requirements. Examples of standards were given for illustration purposes:

- The length of time people are homeless is reduced. (Performance)
- Each program has written eligibility criteria. (Service)
- The agency has an approved policy on privacy and confidentiality. (Operations)

McKeen outlined the process that will be followed to develop recommended standards. A template will be used as a tool to guide committee discussions. The approach will be incremental, identifying the subject of a standard first, the type of program(s) it applies to, and identifying standards for each type of program, seeking commonality as much as possible. After this meeting, feedback will be sought from others around the state, likely through an electronic survey that asks providers if they already do what a standard calls for or what they think of it. This will give an idea of the current status of services related to draft standards, and the level of enthusiasm. The recommended standards will be finalized at the April 17 meeting.

McKeen distributed and explained the worksheet to guide discussions. The worksheet includes topics identified (at the last meeting and through feedback between meetings) for standards under operations, services, and performance.

Operations

The first several topics under Operations were identified as requirements for agencies receiving public funding. There was discussion about whether these should also be recommended as standards for other agencies.

Standards all begin with: **An organization providing services to those experiencing or at risk of homelessness should...**

Notes from discussions about each identified topic follow, ending with the draft standard agreed upon in bold.

Articles of incorporation and bylaws –

- There is agreement that every agency needs to have these.
- Faith-based partners, if they are affiliated with a larger organization, will have those as part of their overall structure.
- There are some less formal entities with less structure that do outreach that do not have these.
- Our shelter only allows people offering to evangelize with clients to come in and work with clients if they are with some kind of parent organization.
- Our organization has volunteer training and background check requirements for anyone working with our clients. For example, church groups will want to come in and work with our clients; they have less structure. We are trying to engage them through the continuum of care.
- A standard that calls for articles of incorporation and bylaws would encourage entities like that to get more organized and gain credibility.
- Who will hold such organizations accountable? Will there be some kind of licensing?
- I see it as up to the local continuum; the continuum can have bylaws and require entities receiving continuum support to follow continuum bylaws.
- We struggle with entities that refuse to participate in SharePoint because they are opposed to any bureaucratic processes.
- We cannot change programs that do not want to participate. Creating standards will raise the bar and encourage all to rise to the level of quality.
- Leadership of organizations always changes, and perhaps the next leader will be more receptive.
- These standards could be incorporated in ESG, for example, as bonus points.
- There are concerns about some of the requirements that certain faith-based groups place on those they assist, such as performing exorcisms, requiring participants to attend church three times a day, requiring participants to turn in their assistance money. Another example is entities that will not serve people not of Christian faith or will not serve LGBT individuals.
- **...should have articles of incorporation and bylaws.**
- Do you refer clients to entities you know do not provide services of the quality you would like? Yes, when it is the only option, and we explain our concerns to clients.
 - Having standards will provide a more objective way to provide information about other entities a client might go to.
 - Having standards can provide a list of questions for clients to ask an entity when choosing where to seek services. This would be a useful resource for someone like Legal Aid to develop.

Board policy and structure

- How is this different from articles and bylaws? Board policy and structure lay out how the organization carries out the articles and bylaws.
- Written board policy and structure spell out the board's role. Some organizations cover this in their bylaws, but not all. And some organizations do not regularly review or follow their bylaws.
- Board structure describes the organization's required makeup of their board (e.g. representing certain populations and elements like gender balance), as well as board members' roles.
- **...should have current documentation of board structure and activity.**

Employer Identification Number (EIN)

- **...should have an Employer Identification Number.**

Biennial Report

- **...should have records of filing biennial reports to the Iowa Secretary of State.**

DUNS number

- **...should have a DUNS number.**

Enrollment in sam.gov

- This is not applicable to all providers, so will not be included as a standard.

Financial practices

- Same as financial policies and procedures.

Financial policies and procedures

- These are required for audits, but not all organizations do audits.
- They should be written and available for justification. They will be of increased quality if documented.
- **...should have written financial policies and procedures.**

Grant management policy and practice

- What does this involve?
- Every grant is run differently.
- Is the focus on ensuring compliance? Written policies which ensure retention of records and compliance with grant requirements?
- This could be a sub-point under financial policies and procedures – grant management is an element that should be included in financial policies.
- This could involve maintaining a system for tracking grant information, so if the person at an agency who knows all the information about grants the agency has is no longer there, there is continuity.
- Have written policies that ensure program and financial compliance with grant requirements?
- That should be part of your grant agreement with a grantor. My agency has a separate policy and procedure for each particular grant, based on that grant's requirements.
- It should address an entity's system for tracking all its grants, not just complying with individual grants
- What would it look like if an organization met this standard? How could you tell? If you look at an organization's system for keeping track of all its grants, and it should make sense to outsiders.
- **...should have written policies to track and manage grants?**
- Maybe the standard is that an organization can demonstrate compliance with its grants.
- **...should demonstrate compliance with grant requirements.**

Tracking match and leveraged funds

- Sub-category of financial policies and procedures, and grant management.

Budget and reporting

- Organizations are expected to have a budget.
- A budget should be approved by the board.
- **...should have a budget approved by the Board of Directors.**

Annual 990 report (nonprofit IRS filing)

- There are differences based on an organization's finances.
- Sub-categories: compliance with tax requirements, etc.
- **...should complete annual federal and state tax reporting, such as an annual 990 report.**

Audit

- Require an audit by an outside entity.
- Many grants require an audit. Some do not – some require an independent “review of financial statements,” which is not at the level of an audit. An audit is expensive, and some organizations cannot afford it.
- Make a standard for an audit if an organization is over a certain threshold? Do we want to get that specific?
- **...should have an audit or independent review of financial statements by a CPA.**

Personnel policy – employee manual

- **...should have a written employee manual or personnel policy.**

Workers compensation, unemployment insurance

- **...should comply with Worker's Compensation and Unemployment Insurance requirements.**

Insurance category

- Types of insurance organizations should have:
 - Workers Compensation
 - Unemployment Insurance
 - Directors and Officers
 - Liability (umbrella, general)
 - Property or renters insurance
 - Vehicle (organization-owned)
 - Staff-owned vehicles (driven on employer time)
 - Food-related – for example, a large shelter has a separate insurance policy because it operates a kitchen. It would cover, for example, recovering losses if a large amount of food goes bad due to a power outage food, or liability for food-caused illness. This is too specific – make a general statement about having insurance to cover what your agency does.
- **...have insurance coverage commensurate with the services the organization provides.**

Background checks

- Employees and volunteers
- At what level? Local, state, federal?
- And what do you do with the information? What will you allow someone to have on their record and still hire them or allow them volunteer?
- This applies to employees and volunteers – they fall into the same category if volunteers are providing direct services to clients.
- Staff providing direct or indirect services must have a background check. Volunteers providing direct services must have a background check.

- Should the level of background check be specified? Having standard for which level helps me justify to my board at what level we have to do a background check.
- There is significant cost and time involved. Federal checks can take up to two months.
- It's impossible to check the backgrounds of foreign exchange students who want to volunteer. But you can document appropriately why there was no background check.
- If a person has a professional license that includes a background check, you can verify their license status.
- This presents a dilemma for a provider that believes in second chances: We knowingly hire people with criminal records.
 - Then you just need to document consistent policies.
- Various kinds of checks: criminal, sex offender (various categories), child abuse.
- Different kinds of checks would be necessary for different kinds of services, such as whether an organization serves families where children would be around.
- Volunteer turnover is high; they may volunteer once or a few times and not come back. It costs a lot to do background checks on many volunteers who do not stay long, especially if you mandate national checks.
- A minimum should be looking at Iowa Courts Online and the sex offender registry.
- For staff: require background checks (criminal, child abuse, and sex offender).
- An issue with child abuse checks: People can be put on it if there is evidence but they have not gone to trial.
- We are not saying what the hiring practices should be, just that agencies should do checks. It is up to agencies what their decisions based on that information are.
- Bring up hiring practices later when talking about non-discrimination standards.
- Does anyone share their background check information with other agencies? No.
 - We do not even do that within areas of our organization, such as a multi-faceted provider sharing between housing and child care programs if an employee wanted to change areas (the other area has to run their own check).
- The state's SING system costs about \$15 for employee checks and about \$5 for volunteers. Names go to DCI and DHS.
- **...should complete background checks for employees and staff, as well as volunteers who provide direct services, including criminal, abuse, and sex offender checks, and have a written policy for application of the information.**

Staffing ratios

- Have written, determined staffing ratios?
- That is something we are dealing with. The number of staff needed depends on the issues of the clients there at the time. People with severe mental health or behavioral issues take more staff resources to serve.
- Every organization is different in size and budget, and types of clients served. We seem to be worrying about things that some organizations will not be able to meet. When I think about organizations being evaluated based on standards, if an organization does not meet a few they can still be overall mostly in compliance.
- A qualified, trained person (staff or volunteer) must be present.
- Clients can put other clients at risk by what they do (such as coming in under the influence) or who they bring into the shelter. The main concern is that all clients are safe.
- One large shelter requires at least three people in the building at all times.
- Staffing requirements are what we want.

- I do not think it is too much to ask to have a standard that calls for having at least one person in the facility at all times, for shelters. That would not be true for transitional housing, etc.
- Need to differentiate based on programs.
- For now, subject to further consideration and revision: **...have written, determined minimum staffing requirements that are appropriate for the type of program and ensure a safe environment. At minimum, one qualified person should be on staff during hours of operation.**

Staff and volunteer training (all are for staff; 'v' means it also applies to volunteers)

- Self-care (v) – emotional, healthy boundaries
- Safety (v) – staying safe in the work environment
- CPR, first aid
- Blood-borne pathogens
- AED (if applicable – if the facility has one)
- Mandatory reporting
 - Domestic violence agencies will have issues with this.
- Code of Ethics
- Mental health first aid, de-escalation, crisis intervention, suicide prevention, trauma-informed care
- Substance abuse training (recognizing drugs and drug use)
- Required OSHA training (e.g. chemicals, hazardous materials – may be “as applicable” depending on accreditation)
- **...should provide training, at minimum, for all staff and volunteers in the following topics:**
 - **Safety**
 - **Self-care**
 - **Mandatory Reporting**
 - **Ethics**
 - **Healthy boundaries**
 - **Confidentiality**
 - **De-escalation**
 - **Mental Health First Aid (includes suicide)**
 - **Trauma Informed Care**
 - **Substance Abuse**
 - **First Aid (Includes blood-borne pathogens)**
 - **CPR**
 - **AED training, if applicable**
 - **Required OSHA trainings**

Code of Ethics

- **...should have a code of ethics for staff and volunteers.**
- Same as Code of Conduct?
- Code of Conduct things would be in employee manual and policies. Work rules. Might include things like rules on accepting gifts, Internet use.
- Not sure that all agencies have a code of conduct.
- A code of ethics talks about rules for conduct that reflects on the organization.

HR postings

- **...should have current human resources postings (federal and other mandatory postings).**

Conflict of Interest policy

- Staff, volunteers and board
- For all staff? At some level, people don't make decisions for the organization.
- Yes, it applies to everyone.
- Does this go under Policies and Procedures earlier? Yes.
- Under standard regarding written employee manual or personnel policy and procedure manual – it should include: **A conflict of interest policy that applies to Board of Directors, staff, and volunteers.**

Confidentiality and Informed Consent policy and procedure

- Signed by board members, staff, volunteers, and clients. The one for clients is different.
- We have different confidentiality policies for volunteers providing direct and indirect services.
- We have visitor confidentiality at our safe shelter, requiring that visitors not disclose the location.
- **...should have a written and signed confidentiality and informed consent policy for board members, staff, volunteers, and clients.**

Notice of use of ServicePoint

- This involves making sure that clients know we are collecting some of their information to use in aggregate for grant reporting purposes (not individually identifiable). Make sure agencies let clients know this somehow.
- It is a requirement for ServicePoint that a notice is posted.
- Can the standard be that ServicePoint is used?
- It has to be "or an equivalent." DV programs cannot enter data into that system. DV programs cannot use Internet-based data systems. The issue with mandating SharePoint is that using it is not allowed for VAWA-funded agencies.
- Faith-based organizations cannot afford or do not have the manpower to use it.
- It was discussed last time that a central intake system would make it possible for smaller organizations/programs to participate.
- **... use ServicePoint or a similar reporting system, such as a central intake system.**
- **... notify clients in writing that their information will be aggregated and used for reporting purposes.**
 - **Notice of the use of ServicePoint should be posted.**

Reading level, language access

- We have everyone sign a release for ServicePoint. But we checked the reading level of our release and it was too high, so we revised it to be more accessible. Should we have a standard about reading level of materials?
 - We read documents to clients if we have to. We make sure they understand what they are signing.
 - We were doing that too, and that's why we decided to change it to make documents more understandable.
 - Clients are under stress.
- **To the extent possible, a reading (reading level) standard should be implemented for materials provided to clients. Copies should be provided to clients.**

- Different languages? Accessibility for people with disabilities?
- Language interpretation needs depend what you aim to learn from a client. For asking them some questions about their need for shelter, you need less exactness than for purposes like what Legal Aid might be asking.
- There are translation services that you only pay for if you use. A standard could be that you have a plan for communicating with people in other languages when needed – a language access plan.
- It is already a requirement if you receive federal funds to have a language access plan. Availability of interpreters in rural areas is very low.
- It's a great idea. Not sure if it's a standard that should be met by all quality programs.
- The language access plan does not have to be intensive, but there should be a plan, even if it's just to call the language line or use pictures when necessary.
- Is the standard recognizing the diversity of culture and language and planning how to address needs? It could be as soft as that initially. Those who have those requirements in their federal grants know what that means.
- This at least raises awareness of the need to think about this.
- **...should recognize diversity of culture, language, and reading level, and have a plan should the need arise.**

Accessibility

- We have a policy that states if a person has a disability that prevents them from accessing our facility, we will find a place for them elsewhere.
- At our shelter we cannot ask someone if they have a disability. We ask if there are accommodations they need.
- **...should comply with requirements of the Americans with Disabilities Act.**

Safety codes, inspections, etc.

- **...should comply with federal, state, and local rules and regulations regarding building codes and various inspections.**
- Including smoke detectors, sprinklers, fire inspections, city building department inspections, VA requirements, etc.

Safety drills

- Fire, tornado, disaster
- Our staff does monthly disaster drills or discussions – we have them discuss what we would do in given situations.
- Should do at least monthly fire drills with clients.
- Having disaster plans
- It is very difficult to have a fire drill that gets everyone involved to make it meaningful.
- We have a written diagram on each floor on what to do during a disaster.
- VA requires us to have an evacuation drill each month, rotated among the three shifts.
- Emergency preparedness plan
- Check fire extinguishers – probably part of building requirements.
- **...should have documented disaster/emergency plans and evacuation routes, and periodic scheduled training for staff.**

Financial document retention – goes under financial policies.

- ESG standard is five years.

- **...should have written procedures in place for document retention based on best practices for types of documents.**

Client files and records

- Can fall under grant management. Federal funders have requirements for client files – that they must be secured, the length of time they must be retained, what needs to be in them.
- What if the organization closes – what should happen to the client files?
- We were instructed that it has to be publicized that clients can choose to come get their files, have them transferred, or have them destroyed.
- **...should have written policy and procedure for client file and record confidentiality, retention, and destruction.**

Drug-free workplace

- Do most require drug testing at hiring?
- Part of personnel policy?
- My concern is what happens after people are hired. It makes no sense to only check at hiring.
- At one place, staff were tested if they were suspected to be under the influence.
- Board members get nervous about trying to adopt a drug policy because you're vulnerable to litigation if it's not done just right.
- Does it apply to clients? Is that a different policy? Different policy for clients.
- We have a zero-tolerance policy for clients.
- We used to, then realized that relapse is part of recovery.
- Client policy is more on services end.
- Promoting a drug-free workplace? Would you keep a staff member on if they used?
- Proving it can be a lot different.
- Can't say "ensure" a drug-free workplace – how do you ensure?
- **...should have a written policy promoting a drug-free workplace (for all staff and all volunteers).**

Equal opportunity, non-discrimination employer (for staff)

- More than postings.
- Add to personnel policy.

Whistleblower

- There are federal requirements for those who get federal funding.
- **...should have a written whistleblower policy.**

Clients' rights posting

- Postings could include grievance procedure, right to informed consent, right to be treated with dignity, etc.
- Some organizations are required to post clients' rights; others provide a document at intake and it's available to clients.
- Julie Bockenstedt can provide examples.
- This is new to many group members.
- Some like the idea of posting; others would rather it be available and have clients sign it.
- There is some concern about posting grievance policies because it may encourage clients to file formal grievances about routine issues.

- **...should make written notices of client rights available and signed.**

Client file contents

- Should the standard specify minimal content?
- Minimal content may include: Identification information, release of information, emergency contact, anything the client has signed, ServicePoint forms if applicable, copies of identification, documentation of wages, emergency medical information and dietary needs.
- It would be different for different programs.
- In domestic violence organizations, there would be things excluded from files that are included at other types of agencies..
- I would like to see these items be examples.
- We're identifying things you should ask; the client doesn't have to answer. You're following the standard if you ask for it.
- There is concern that providers will take such a list of examples literally and think they have to do all of it. It could hurt services for people we're trying to help. Any list of examples would need to include an obvious caveat that programs should do what they can and not deny services if they can't get this information.
- **...should have client files that contain, at minimum, emergency contact information, release of information, and signed acknowledgement of policies.**
Other information in a client file may include, but is not limited to:
 - **ServicePoint forms**
 - **Medical or dietary special needs**
 - **Allergies**

It was suggested that examples of the written policies called for by these standards be provided when the standards are released, to assist organizations in developing new policies and documents.

A committee member heard from providers in her area that it would be helpful to provide information on standard wages for staff with various education levels, in order to see how their agencies compare with others. Others noted that agencies' salaries all depend on budgets. It was suggested that providers could submit this information to IFA through an anonymous wage and benefits survey. Iowa Workforce Development provides data wage data, but it is difficult to tell which occupation categories are the best match with the roles of homelessness agency staff to know what salary information is applicable. A wage and benefits survey could be conducted and information compared regionally. The purpose would be to provide information on what is common, not to mandate a minimum. Michelle Brown offered to distribute a wages and benefits survey for committee members to complete anonymously so members can see how their agency compares to others.

There was discussion about whether bringing HMIS (the Homelessness Management Information System) into these discussions would be productive. The group decided that it would not, because discussing HMIS is not part of this committee's mission, and not all providers on the committee are part of the system that uses HMIS.

Services

The committee next discussed draft standards related to services. Standards all begin with: **An organization providing services to those experiencing or at risk of homelessness...** Notes

from discussions about each identified topic follow, ending with the draft standard agreed upon in bold.

Services hours of availability

- Every provider should have established hours of operation.
- Not everyone can operate 24 hours a day. The hours just need to be posted or published so people know what to expect.
- And the provider needs to actually be open during those published hours.
- Rural services have more irregular hours or a phone number to call.
- This is probably a category where it differs by program.
- We have office hours from 8 to 4:30, but there is someone there all other hours and a person can call and someone will help them.
- For services in rural areas, it may be important to include contact information for assistance outside regular hours.
- **...should have regular, published, and consistent hours of operation and/or reliable point of contact.**

Scope of service components/composition offered by agency

- Outline what the agency is going to do.
- This is important to have in your marketing materials, and an up-to-date website.
- Something like identifying that you will provide transitional housing, for example. So other organizations know what you offer. Publicize what you do.
- In broad terms – funding streams change.
- That's why this standard is needed.
- Should the standard call for printed materials stating what services are provided?
- Outreach service providers like food pantries who serve homeless people are not going to have pamphlets on their services.
- A provider should clearly identify the services they provide, to whom – so someone knows if that agency serves people like them.
- Populations to be served? Gets into eligibility criteria.
- The underlying need is communicating what an agency does to other agencies. Clear identification to support the development of a stronger system.
- Keep 211 updated?
- If there is coordinated intake, it's very important to keep the scope of services updated.
- Coordinated intake is under development, and has to be in place and functioning by August, according to HUD.
 - Include a standard regarding coordinated intake? HUD will like to see that.
- **...should clearly identify the services they provide and the populations served.**

Eligibility criteria

- Some agencies have residency requirements (how long you have to have lived in a certain area to receive services). Those that do have residency requirements put pressure on others that don't.
- Eligibility requirements may include...
- Criteria to be spelled out may include: Do you accept people who are intoxicated? Who have a criminal record?
- Non-discrimination

- Our shelter allows people to come in under the influence if they're safe, but people in our grant per diem program (VA) have to stay sober. So – eligibility criteria differ by program even within an organization.
- Keep it general; don't specify actual eligibility criteria in the standard.
- It seems like a missed opportunity if we don't address specific criteria at all. Is it enough just to say that agencies just need to have written criteria? Then they might have criteria that do not meet expectations for quality services, but would still be meeting the standard.
- I came into this most interested in learning what other organizations' eligibility criteria are.
- What are some of the criteria of concern? Issues that would be a missed opportunity not to clarify?
- Having a consistent understanding of residency requirements – what “residency” means. The Council on Homelessness had set a definition of “residency” (physical presence with intention to stay) that has been drifted away from, and turned into a race issue.
- Sobriety. Being a “wet” shelter, allowing people under the influence, affects the organization's performance (positive outcomes are more difficult to achieve); but not allowing them “creams” the population you serve.
- Residency issues especially come up for organizations on state borders and on interstates.
- Criminal background. If they have a felony, it's hard to get housing or a job.
 - Most agencies don't take in registered sex offenders.
 - Nowhere does it say in HUD regulations that you can't serve sex offenders.
 - Many agencies don't because the agencies take kids or are located near facilities where children are.
- Transparency is gained if we are clearer about criteria. A benefit of having everyone spell out their criteria is that gaps in available services become apparent.
- Is it fair to say that agencies should not determine eligibility based on what makes positive outcomes more likely (“creaming”)?
 - This type of standard doesn't really cover residency.
 - Residency considerations are different for emergency shelters than permanent housing.
- Would restrictions on eligibility be acceptable if they are based on increasing safety and reducing risk?
 - That's so subjective.
- A baseline would be for everyone to publish their eligibility and priority criteria, so we know what is currently going on.
- **...should have written eligibility criteria for each program offered.**
 - **Eligibility is not restricted by race, creed, religion, sexual orientation, etc. (usual civil rights categories).**

Prioritization of assistance

- An example of prioritization of assistance is that a domestic violence emergency shelter would take a homeless person who needed shelter if there was not a DV person who needed it at that time.
- We would do that differently for our rapid rehousing program. We take the application with the greatest need and highest barriers.
- Should the way an organization prioritizes be publicized? How much do you want people to know? It might bring in people who otherwise would be able to get other assistance.
- Some shelters perform due diligence checks that a person is homeless. Others do not.

- **...should have written, publicly available policy on how assistance is prioritized within the program.**

Coordination between service providers

- Coordination doesn't happen without a release.
- Since I'm the lone housing provider in my area, I need to make sure I coordinate, or network, with other service providers to make sure the client has their needs met.
- Have knowledge of when to refer clients to other providers, for what.
- Warm hand-offs.
- Provide community resources at your agency.
- Providers make available to all other providers information about what they do that could help others' clients.
- In my area, only 3-4 agencies participate in quarterly inter-agency coordination meetings, and it's always the same ones, so many providers are not at the table.
- An agency could provide a written instrument to other providers to identify needs that you can provide, and have them referred to you.
- **...should participate in the coordinated assessment approved by their local continuum of care.**

Client shares of cost related to long-term housing

- Something about having a written policy about how client shares of cost are determined.

Landlord agreements (for ESG)

- Our agency has a form that we use with landlords where we and they spell out what each will do, and if the landlord later feels an eviction is necessary the agreement is referred to.
- HEARTH and ESG requirements spell out eviction requirements.
- Some sort of landlord agreement would be beneficial for multiple types of housing programs, so you can advocate for your client.
- We always go over the landlord agreement with the client, so they understand and know what to do if something doesn't go right.
- **...should ensure landlord agreements are consistent with requirements of funding sources.**

Determining the type, amount, and duration of assistance

- Varies according to program.
- Have written policies on the above, and share with clients.

Appeal process for denial, removal, or termination of services.

- Agencies should spell out criteria for when that happens.
- Make clients aware of those criteria.

Discharge

- Have a written protocol on client discharge from the program.

Next Steps

Based on these discussions, SPPG will polish the worksheet with draft standards. McKeen asked for a few volunteers to work together to determine which programs each draft standard

applies to and put check boxes in table on the worksheet corresponding with the applicable programs. Carrie Dunnwald, Julie Bockenstedt, and Mark Sertterh volunteered.

Performance standards will be drafted at the next meeting on April 2, which will be held at the Iowa Finance Authority office.