



Statewide Rapid Rehousing Requirements & Operations Guide

Purpose

This guide establishes policies and procedures for Connecticut Rapid Rehousing projects funded by the Department of Housing and the CT Balance of State and Opening Doors Fairfield County Continuums of Care. The guide provides a standard model, definitions, policies and procedures in accordance with federal, state and local Continuum of Care requirements.

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CHANGE HISTORY

- Original version released March 2022
- May 2022 significant changes:
 - Distinguished requirements related to utility reimbursements for CoC vs. ESG RRH projects.
 - Added ACT utility allowance payment procedures
- May 2022 corrections to eliminate inconsistencies in time frames:
 - Case management assistance, if necessary, may continue for up to **60 days** beyond the termination of rental assistance.
 - **Within 15 days** of the occurrence that is being grieved, the participant is responsible for providing the liaison with the completed Concern Form or with the necessary information to enable completion of the form, with assistance from the liaison.
- Other May 2022 clarifications:
 - This guide is also not intended to address U.S. Department Veterans Affairs requirements for RRH projects funded through their Supportive Services for Veteran Families program.
- April 2023 significant changes:
 - Updated Category 4 HUD definition of Homelessness to reflect changes enacted in the 2022 Reauthorization of the Violence Against Women Act (VAWA 2022)
 - Adjusted examples demonstrating estimation of monthly income
- January 2025 significant changes:
 - YHDP RRH projects may select which of the approved rent calculation methodologies they will consistently use (i.e., the standard methodology or the YHDP specific methodology).
 - HUD approved YHDP Special Activities are eligible expenses.
 - Removed section on the now expired ESG-CV program.

SECTION 1: INTRODUCTION

What is Rapid Rehousing?

Rapid Rehousing (RRH) provides time-limited rental assistance in connection with services for individuals and families experiencing homelessness to help them to secure permanent housing as quickly as possible. The model described in this Guide includes three core components: **1) housing location, 2) financial assistance, and 3) case management.** RRH is a low-barrier intervention with no preconditions to enrollment other than [documentation of homeless status](#). See [Core Components](#) and [Case Management](#) sections for more information.

Role of Rapid Rehousing within the Homeless Services System

RRH plays several important roles, including:

- *reducing the amount of time that households experience homelessness;*
- *increasing the number of households exiting from homelessness; and*
- *ensuring that long-term interventions are reserved for households with the greatest service needs who would otherwise be unable to maintain stable housing.*

Purpose of the CT DOH Rapid Rehousing Requirements & Operations Guide

The purpose of the [Connecticut Department of Housing \(DOH\) Rapid Rehousing Requirements & Operations Guide](#) (herein referred to as the “Guide”) is to establish a standard model, definitions, policies and procedures for all DOH and CoC funded RRH projects across the state. The Guide ensures that the principle federal, state, and local Continuum of Care (CoC) requirements governing the DOH and CoC RRH projects are described in a single document and that there is a common understanding of program requirements. The Guide is also intended to support efficient and consistent administration of projects across the state. DOH has, to the extent feasible, standardized requirements across funding streams, to simplify program administration and avoid funding conflicts and stakeholder confusion. Where requirements differ across funding streams, the Guide delineates those differences. This guide is not intended to address U.S. Department Veterans Affairs requirements for RRH projects funded through their Supportive Services for Veteran Families program.

All RRH projects funded by DOH, the Connecticut Balance of State Continuum of Care (CT BOS) and the Opening Doors Fairfield County Continuum of Care (ODFC) are required to adhere to the model, definitions, policies and procedures contained in this Guide. RRH projects operating in Connecticut and funded through other sources are strongly encouraged to adhere to the

described model when allowable under the terms of their specific funding source. The Guide replaces the July 2019 *Connecticut Rapid Rehousing Model Guidelines* and the February 2019 *RRH in CT CoC and ESG Policies and Procedures*. The Guide provides basic information on federal and state fiscal requirements for project operations and supportive services staff. It is not intended to provide an exhaustive resource on fiscal matters.

When the Guide does not otherwise address an issue, DOH follows the appropriate provisions of the McKinney-Vento Homeless Assistance Act, as amended by the [HEARTH Act](#), and the [Code of Federal Regulations](#). This Guide is subject to change based on changes in DOH contracts with providers, changes in federal laws and regulations, or new policies adopted by the local CoCs. Providers will be notified by DOH of such changes and such changes will be posted to [Connecticut's RRH Program Resources](#) maintained by the [Connecticut Balance of State Continuum of Care](#). DOH will periodically update this guide to reflect changes.

The Guide was compiled by Housing Innovations on behalf of DOH. It defines a unified RRH model and promotes a common understanding of the core elements and expectations of RRH programs operating in Connecticut. This model was co-created by DOH, the Connecticut Department of Mental Health and Addiction Services ([DMHAS](#)), [CT BOS](#), [ODFC](#) and Connecticut Coalition to End Homelessness ([CCEH](#)) and was informed by:

- CCEH's [RRH provider Learning Collaborative](#);
- Local [Coordinated Access Network](#) meetings;
- Local pilot RRH projects and evaluations;
- System-wide analysis (SWAP) and [recommendations](#) provided by [Focus Strategies](#); and
- National best practices and promising practices as defined by the [Department of Housing and Urban Development \(HUD\)](#), the [National Alliance to End Homelessness](#), and the [United States Interagency Council on Homelessness](#).

As Connecticut's homeless response system continues to evolve and strengthen its ability to make homelessness rare, brief, and non-recurring, there is an increased need for system-wide alignment around common goals and outcomes, program models and activities, and performance standards. Fidelity to the model described in the Guide will help ensure that all participants enrolled in RRH have similar experiences and opportunities to attain housing regardless of which service provider works with them. Fidelity to this model will also facilitate more meaningful system-wide evaluation and comparisons across programs.

SECTION 2: RRH FUNDING STREAMS

DOH RRH Funding Streams, Authorizing Legislation and Federal Program Regulations

The table below shows the primary sources of funding used to support DOH RRH projects and the authorizing legislation and applicable regulations for each funding source.

CT DOH RRH Principal Funding Streams			
Funding Source	Types of RRH Assistance	Authorizing Legislation	Federal Regulations
U.S. Department of Housing and Urban Development (HUD) Continuum of Care (CoC) Program	CoC RRH	Homeless Emergency Assistance and Rapid Transition to Housing Act of 2009 (HEARTH Act)	CoC Program Interim Rule 2 CFR Part 200
	Domestic Violence Bonus (DV Bonus)		
	Youth Homelessness Demonstration Project (YHDP)		
HUD Emergency Solutions Grant (ESG)	ESG RRH¹	Homeless Emergency Assistance and Rapid Transition to Housing (HEARTH) Act of 2009	ESG Program Interim Rule 2 CFR Part 200

Other CT RRH Funding Streams

In addition to funding the DOH RRH program, the HUD ESG Program also awards ESG funds directly to the following municipalities: Bridgeport, Hartford, New Haven and Waterbury. Privately funded resources also may exist in one or more Coordinated Access Networks throughout the state. Though DOH strongly encourages all municipally or privately funded RRH projects operating in Connecticut to adhere to the model described in this Guide, these projects are not required to adhere to the Guide.

¹ HUD may issue temporary funding via the ESG Program in response to emergencies. This occurred, for example, in 2020 in response to the coronavirus pandemic (i.e., ESG-CV). Such temporary funding streams are not addressed in this Guide.

Target Populations by Type of RRH Assistance

Type of RRH Assistance	Target Population ²
CoC RRH	Dedicated to serve people experiencing homelessness under HUD homeless categories 1 and 4 ³ ; including families and individuals living in transitional housing.
Domestic Violence Bonus (DV Bonus)	Dedicated to serve people experiencing homelessness per HUD homeless category 4, which includes persons fleeing domestic violence, dating violence, sexual assault, stalking or human trafficking, and other dangerous or life-threatening conditions (24 CFR 578.3)
Youth Homelessness Demonstration Project (YHDP)	Dedicated to serve youth under age 25 who are experiencing homelessness under HUD homeless categories 1 and 4
ESG RRH	Dedicated to serve people experiencing homelessness under HUD homeless category 1, including families and individuals living in transitional housing. Households that <i>only</i> meet the category 4 definition and not the category 1 definition as well are not eligible. (24 CFR 576.104);

² For more information on HUD homelessness definition categories, see “Homeless” in the [definitions](#) section of this Guide.

³ Category 1 is literal homelessness and includes, for example, people living in shelters and unsheltered locations. Category 4 is people fleeing or attempting to flee domestic violence and other dangerous locations. See details in the [definitions](#) section.

Funding Mechanism by Type of RRH Assistance	
Type of RRH Assistance	Funding Mechanism⁴
CoC RRH	HUD releases a CoC Program Notice of Funding Opportunity annually (NOFO). Non-profit agencies submit applications annually for new and/or renewal funding to the applicable CoC (i.e., CT BOS or ODFC). The CoC reviews, selects, and submits applications to HUD. HUD determines which projects will be awarded funds. DOH enters into a grant agreement with HUD and serves as the recipient of grant funds. DOH contracts with non-profit agencies to provide housing location and case management services. DOH contracts with AIDS Connecticut (ACT) as the fiduciary to manage rental assistance payments to landlords. ACT and the non-profits providing housing location and case management services serve as subrecipients of the HUD funds.
Domestic Violence Bonus (DV Bonus)	HUD releases a CoC Program Notice of Funding Opportunity annually (NOFO). Non-profit agencies submit applications annually for new and/or renewal funding to the applicable CoC (i.e., CT BOS or ODFC). The CoC reviews, selects, and submits applications to HUD. HUD determines which projects will be awarded funds from the DV Bonus funding . DOH enters into a grant agreement with HUD and serves as the recipient of grant funds. DOH contracts with the CT Coalition Against Domestic Violence (CCADV) to provide housing location and case management services and to act as the fiduciary to manage rental assistance payments to landlords. CCADV serves as the subrecipient of the HUD funds. CCADV contracts with other non-profit organizations across the state to directly provide housing location and case management services.
Youth Homelessness Demonstration Project (YHDP)	HUD releases a YHDP Program Notice of Funding Availability periodically (NOFA). Non-profit agencies submit applications annually for new and/or renewal funding to the applicable CoC (i.e., CT BOS or ODFC). The CoC reviews, selects, and submits applications to HUD. HUD determines which projects will be awarded funds. In CT BOS, DOH enters into a grant

⁴ See Definitions Section for more information about terms used here.

Funding Mechanism by Type of RRH Assistance	
Type of RRH Assistance	Funding Mechanism⁴
	agreement with HUD and serves as the recipient of grant funds. DOH contracts with non-profit agencies to provide housing location and case management services. DOH contracts with ACT as the fiduciary to manage rental assistance payments to landlords. ACT and the non-profits providing housing location and case management services serve as subrecipients of the HUD funds.
ESG RRH	The cities of Bridgeport, Hartford, New Haven, and Waterbury are established by HUD as entitlement jurisdictions and are eligible to receive their own ESG allocation directly from HUD. DOH receives ESG funds from HUD for the remaining non-entitlement areas of the state. DOH and the aforementioned cities apply for funds through HUD’s Consolidated Planning process, which includes setting 3-5 year strategies and establishing annual action plans. The process requires citizen participation and consultation with the applicable Continuums of Care. HUD awards ESG funds to DOH and the entitlement jurisdictions, which serve as the recipients of the HUD ESG funds. DOH contracts with non-profit agencies to provide housing location and case management services. DOH contracts with ACT to administer rental assistance. ACT and the non-profits providing housing location and case management services serve as subrecipients of the DOH ESG award. Bridgeport, Hartford, New Haven, and Waterbury each have their own processes.

Additional Information About Population-Specific RRH

Both CT BOS and ODFC receive HUD Continuum of Care funds to serve youth under 25 and survivors of domestic violence, dating violence, sexual assault, stalking or human trafficking who are experiencing homelessness. There are some variations in the requirements for these two types of RRH assistance. Those variations are delineated throughout this Guide.

Youth Homelessness Demonstration Project Rapid Re-Housing (YHDP)

Through YHDP, HUD is seeking to learn how communities can successfully prevent and end youth homelessness by building comprehensive systems of care for young people rather than implementing individual or unconnected projects that serve this population.

YHDP is a HUD initiative, providing technical assistance and funding for planning and homeless assistance projects targeting young people under age 25. In 2016, the Reaching Home for Youth and Young Adult Homelessness Workgroup, a multi-stakeholder group coordinating the statewide effort to end youth homelessness in Connecticut, partnered with CT BOS to apply for YHDP funds.

In January 2017, HUD awarded CT BOS \$6,552,903 under the YHDP initiative. In August 2019, HUD awarded ODFC \$3,001,000 under the YHDP initiative. A YHDP Grant Management Team led by DOH, with administrative support from the [Partnership for Strong Communities](#), managed the process of developing, updating and implementing Connecticut's coordinated community plan and executing other YHDP requirements. After the conclusion of the successful two-year YHDP demonstration period, this Grant Management Team disbanded as all the CT BOS YHDP projects were fully incorporated into the CoC policies and procedures. The coordinated community plan was most recently [updated in June 2020](#) to reflect the award of YHDP funds in ODFC. The [Youth Action Hub \(YAH\)](#) serves as a CT YHDP partner and CT BOS Youth Advisory Board. Youth to Lead Change, an initiative of [The Housing Collective](#), serves as the ODFC Youth Advisory Board.

After an extensive planning process in collaboration with the Youth Action Hub, regional Coordinated Access Networks (CANs), and Youth Engagement Team Initiatives (YETIs), the YHDP Grant Management Team determined that allocating CT BOS YHDP project funding toward a youth shelter diversion/rapid exit fund, youth navigators, rapid rehousing, and crisis housing would most effectively assist with achieving an end to youth homelessness in CT BOS. Subsequently they allocated ODFC YHDP project funding toward a Youth Employment Manager, CAN manager for minors, youth navigators, rapid rehousing, and housing coordination.

The CT BOS and ODFC YHDP RRH projects are part of a coordinated housing continuum that ensures youth experiencing homelessness receive the assistance needed to rapidly obtain permanent housing. DOH is the YHDP RRH grantee for CT BOS, contracting with subrecipients to provide housing placement and stabilization services as well as contracting separately with ACT as the fiduciary to manage the rental assistance funding and payments to the landlords. In addition to adhering to the policies and procedures contained within this Guide, YHDP RRH providers must incorporate [Positive Youth Development](#) approaches to serving youth, building

on a young people's strengths and resiliency through individualized case management and connection to services and community supports. YHDP RRH programs are also required to collaborate with youth to identify opportunities for ongoing programmatic improvements, including offering every youth leaving their program the opportunity to complete the YHDP Participant Satisfaction Survey.

CT Domestic Violence & Human Trafficking Rapid Re-Housing Program (CT DV/HT RRH)

The Connecticut Domestic Violence & Human Trafficking Rapid Re-Housing Program (CT DV/HT RRH) is designed to meet the specific needs of domestic violence, dating violence, sexual assault, stalking and human trafficking survivors. The project is led by the [Connecticut Coalition Against Domestic Violence](#) and operates in both the CT BOS and ODFC Continuums of Care. The project is a collaboration among DOH, CCADV and non-profit agencies specializing in domestic violence, human trafficking and housing services. The project enhances survivor access to housing resources and provides [trauma-informed](#), [strengths-based](#) support services necessary for survivors to achieve financial and housing stability. CT DV/HT RRH is an intervention designed to help survivors quickly exit homelessness and return to housing in the community.

The project is funded through HUD CoC DV Bonus funds, and DOH is the recipient of those funds. DOH provides oversight and administration of the CT DV/HT RRH program and subcontracts to CCADV. CCADV serves as the subrecipient of the HUD CoC funds and acts as the fiduciary to manage rental assistance payments to landlords. CCADV contracts with non-profit domestic violence, human trafficking, and housing provider service organizations across the state to directly provide housing location, case management and other services. CCADV's Director of Housing Advocacy oversees day-to-day project operations. The collaborative model leverages the expertise of homeless providers to quickly identify and secure safe, appropriate housing, while ensuring that survivors have the skilled support and case management that will most effectively address their unique needs.

To ensure that the CT DV/HT RRH program operates in a manner that is consistent with the unique needs of survivors, CCADV has developed and maintains separate policies and procedures for that program. They also make adjustments to certain required forms to conform with VAWA confidentiality requirements. CT DV/HT RRH policies, procedures, and forms are consistent with this Guide except as authorized by DOH. CCADV is responsible for ensuring consistency with this Guide, proposing recommended changes to DOH as they deem necessary, and documenting DOH approval for such changes. A current copy of the CT DV/HT RRH Policies, Procedures, and Forms can be obtained by contacting [CCADV](#).

SECTION 3: CORE COMPONENTS OF RRH

Rapid re-housing is an intervention designed to help people experiencing homelessness to quickly return to housing in the community and not become homeless again. The core components of RRH and goals of each are described below.

Housing Location	Financial Assistance	Case Management
<p>Goal: Quickly locate and move to an affordable permanent housing option</p>	<p>Goal: Provide time-limited financial support to enable quick movement to permanent housing that can later be sustained without assistance</p>	<p>Goal: Provide time-limited services to support housing location, move-in, stabilization in housing, and ongoing connections to community and mainstream services and supports, if needed.</p>

Typically, participants receive housing location, financial assistance, and case management services; however, participants may receive housing location or case management services to help them find and stabilize in housing without receiving financial assistance. Participants may also locate housing independently without receipt of housing location services. All participants must receive case management services (see [Contact Requirements](#) section).

Housing Location

Housing location is a core component of RRH. These services may be provided by the same agency that provides case management services or a different agency. Housing location services include the following activities to enable participants to quickly locate an affordable apartment, apartment share, room or other suitable housing unit:

Landlord Recruitment and Support

- Recruiting landlords to lease housing to RRH participants. Landlords may include owners or managers of multi-unit housing, boarding homes, or single family homes.
- Negotiating with landlords to facilitate access for program participants, including those with rental barriers;

- Responding to landlord concerns to preserve and develop partnerships for current and future housing placements; and
- Administering landlord incentives and helping with recuperation of losses.

Housing Search and Support

- Assessing participant needs and barriers to housing placement;
- Helping participants to establish preferences and expectations for the type of housing they will lease (e.g., location, size, cost, amenities);
- Supporting participants to create shared housing arrangements as appropriate;
- Assisting participants to conduct a targeted housing search informed by their preferences and expectations and by unit affordability when assistance ends;
- Supporting participants to complete rental applications;
- Providing tenant counseling, including guidance on discussions with landlords and rental applications, leases, and tenant rights and obligations; and
- Supporting participants to set up utilities and make moving arrangements.

Financial Assistance

Financial assistance is a core component of RRH. Financial assistance is time-limited and enables participants to quickly move to permanent housing. [Case Management Providers](#) are responsible for helping RRH participants to access financial assistance from all sources that may be available to them. This may include, for example:

- DOH’s ESG and CoC RRH funds accessed via the applicable [Fiduciary Provider](#);
- Municipal ESG funds in Bridgeport, Hartford, New Haven and Waterbury; and
- Private sources accessed via [CCEH](#) and/or other community partners.

Financial assistance may cover any of the following costs:

- ✓ Application fees
- ✓ Security deposits
- ✓ Moving expenses
- ✓ Rental arrears
- ✓ Monthly rent
- ✓ Utility arrears & deposits
- ✓ Monthly utility allowances
- ✓ Property damages (CoC only)

[Allowable costs](#) vary based on the specific funding stream.

Financial assistance is provided only when necessary to assist participants to secure and stabilize in housing. Participants may receive housing location and/or case management services only. Financial assistance is based on the [progressive engagement](#) model - offering the minimum amount of assistance necessary for households to move out of homelessness and stabilize in permanent housing. RRH projects start with the assumption that most participants, even those with zero income and other housing barriers, will succeed with short-term financial assistance and case management supports. The role of the [case manager](#) is to prepare participants for the

end of the financial assistance by helping them to secure an affordable housing option, increase household income, and, in some circumstances, access a permanent housing subsidy.

For more information about the administration of financial assistance, including the maximum amount and length of assistance, see [Section 6](#).

Case Management

DOH RRH projects provide case management services to all project participants. Services are housing-focused, person-centered, and provided at varying levels of intensity depending on participant needs. Program participants are required to meet with case managers at least once a month. Case management staff assess and build on the strengths and resources of each participant. Services are designed to help participants quickly obtain and stabilize in housing and to build an effective network of support that they can draw upon after RRH assistance ends.

Furthermore, services are designed to help tenants gain control of their own lives, define their personal values, preferences, and visions for the future, establish meaningful individual short- and long-term goals, and build hope that the things they want out of life are attainable. Services are focused on helping participants to obtain and stabilize in housing and achieve the things that are important to them. These housing-focused goals are driven by client rather than staff priorities and are individualized rather than selected from a pre-determined menu of options.

The core components of RRH case management are described below:

- **Assist with housing search.** Case Management or [Housing Location](#) staff assist the household to locate a housing unit as quickly as possible. This includes assisting participants to determine an affordable and realistic housing solution.
- **Move-in support.** Case management or Housing Location staff assist participants with move-in activities such as obtaining moving services, furniture, and household supplies, turning on utilities, enrolling children in school, getting oriented to the neighborhood, and establishing connections to new service providers.
- **Needs assessment.** At least every 90 days, case management staff [re-determine participant income](#) and [calculate the amount of rental assistance](#) to be provided. If a participant household's income decreases by at least \$40 before the next assessment, then recalculate the rent. Case managers are also responsible for regularly assessing participants' supportive service needs and adjusting services accordingly. This includes identifying any barriers to achieving housing stability goals and any services needed to achieve housing stability. See [Interim Income Re-assessment, 90-Day Re-Certification, and Annual Income Review](#) for more information about what is required at each interval, including required documentation.

- Housing stabilization services.** Case management staff directly provide and link participants to services to help them stabilize in housing. Case managers are required to work with each household to develop an individualized housing stability plan that is housing-focused and participant-driven. Housing stability plans are individualized based on housing needs, as identified by each participant, and are used to facilitate housing-focused case management with the goal of obtaining and maintaining housing stability. Case managers are required to review the Housing Stability Plan with each participant at a minimum of once per month to assess progress and to update the plans at a minimum every 90 days in accordance with participant preferences. In addition, case managers are required to educate participants regarding the rights and obligations of tenancy, support lease compliance, and help prevent or correct lease violations. Case managers also help participants to avoid or resolve disputes with landlords, neighbors, and service providers, with a focus on assisting participants to develop and test skills they will use once they are no longer in the program. For information on how to work with participants who are reluctant to take the action steps indicated in their housing stability plan, see [Motivation Building](#).
- Eviction prevention** Case managers provide services and link to supports to help maintain housing and prevent eviction. Services are designed to identify and reduce risks to stable tenancy, including intervening quickly and offering services to remedy any lease violations.
- Support network development.** Case managers help participants to identify what supports and services they need, understand what options exist in their community, and navigate often complex and fragmented systems of care. The objective is to help participants to evaluate their existing support network and build an effective network that will remain in place once RRH assistance ends. Case managers assist participants to identify and access supports, including family and friend networks and to make linkages to resources in the community to support ongoing housing stability (e.g., mainstream rental assistance and benefit programs; employment, education, financial literacy, health, mental health, addiction, food assistance, childcare, legal services, etc.). To accomplish this, case managers work collaboratively with

Housing Stability Plans

Required components:

- ✓ Measurable goals pertaining to housing, such as moving into housing, maintaining housing, and increasing income;
- ✓ Action steps for the participant;
- ✓ Action steps for the case manager;
- ✓ Timelines for each step;
- ✓ Monthly progress review;
- ✓ Updates at least every 90 days; and
- ✓ Sign-off by participant, case manager and supervisor.

See *Sample Form #7 – [Housing Stabilization Plan \(sample\)](#)* available at [Connecticut RRH Program Resources](#). Agencies may use a different format provided that all components listed above are

participants to assess which providers and relationships are and are not working for them, mediate conflicts to make existing supports more effective and introduce and evaluate new supports. Case managers seek to help participants to build the skills they need to continue to evaluate and adjust support networks beyond their participation in RRH. Services are often initially intensive and decrease in intensity over time as case managers assist participants to build a reliable support network. DOH encourages case managers to accompany participants to their initial appointments with new service providers to support establishment of an effective working relationship. This is commonly referred to as a “warm hand-off.”

- **Increase participant income.** Increasing income is crucial to participants’ ability to stabilize in housing. As such, case managers are responsible for assisting participants to secure employment, increase employment hours, advance to higher paying jobs, or access and retain all public benefits and other income sources for which they are eligible (e.g., TANF, SSI/SSDI, SAGA, unemployment, tax credits, SNAP benefits, Medicaid, alimony, child support, etc.). Connection(s) to job search assistance/employment services and job training programs, as applicable to the participant's goals, should be made as early as possible. This includes pursuing educational opportunities that will enhance earning potential. RRH participants are required to provide [documentation of income](#) monthly. Case managers provide support to participants to take steps towards increasing income as indicated in their housing stability plan. When participants are reluctant to take such steps, case management providers are responsible for documenting [assertive engagement](#) and [motivation building](#).
- **Discharge Planning and Aftercare.** Case managers assess participant needs for ongoing support after exiting the RRH program and provide warm handoffs to service providers that will continue to provide supports into the future. Case managers may also remain temporarily engaged for up to 60 days after rental assistance ends to help ease adjustment, orient them to their new environment, continue to assess ongoing service needs, build independent living skills, combat isolation and support housing stability.

Case Notes and Other Service Documentation

Case Management and Housing Location Providers are responsible for maintaining participant case files for all households enrolled in the DOH RRH program. All documentation related to program participant services shall be maintained in case files as described in this Guide and in accordance with [confidentiality](#) and [record retention](#) requirements. Whenever feasible, Case Management and Housing Location Providers and Fiduciary Agencies should scan and upload documents to HMIS. DOH or CoCs may require such uploads to HMIS for [monitoring](#) purposes.

DOH acknowledges that to ensure participant confidentiality and reduce the risks of court ordered disclosures that could jeopardize participant safety, the CT DV/HT program uses documentation

standards that are different than those described below. [CCADV](#), in consultation with DOH, is responsible for establishing documentation standards for the CT DV/HT program.

Documentation is essential to effective case management services in the following ways:

- Ensures services are provided regularly and in a manner consistent with participant needs;
- Establishes an agreement between staff and the participant about what they are working on together and what will get done by whom and when;
- Keeps track of that agreement and makes sure tasks are completed promptly;
- Enables other people to contact participants and to know something about their situation and what they are working on, in case the current case manager cannot continue to provide services; and
- Enables periodic review of case management practices for supervision, [monitoring](#), quality assurance and quality improvement purposes.

Case managers are responsible for documenting each engagement and engagement attempt with the participant or collateral contacts. This includes the following:

- Documenting office or community-based face-to-face contacts;
- Documenting phone calls, texts, and video chats;
- Maintaining copies of correspondence, including emails, in the participant's chart; and
- Documenting referrals/linkages made, including date of and reason for the referral as well as outcome of the referral.

At a minimum, case notes must include:

- Date, location, and purpose of the activity;
- Monthly progress on housing goals;
- Documentation of monthly contact with the participant;
- Indication of all required [interim re-assessments, 90-day and annual assessments](#); and
- Discharge summary when applicable, including date of program exit, reason for exit, brief assessment of participant's ability to sustain housing, and evidence that the participant was connected to appropriate ongoing services in advance of discharge (see additional [termination requirements](#))

See *Sample Form #1 – [CT RRH file checklist REVISED](#)*, available at [Connecticut RRH Program Resources](#).

Helping case managers to prioritize documentation often requires ongoing support, supervision, and problem-solving. Case management supervisors are responsible for helping case managers understand the benefits of documentation and ensuring that case notes and other documentation are consistently maintained. CT DV/HT programs should follow guidance

provided by CCADV to ensure that documentation is consistent with the safety needs of survivors. DOH strongly encourages supervisors and other Case Management, Housing Location, and Fiduciary Agency management staff to conduct periodic chart reviews to ensure that documentation is maintained in accordance with the requirements in this Guide and to inform continuous quality improvement efforts.

Case Management Requirements

Case management providers are required to ensure that their programs include the core components described above. They are also responsible for ensuring that case management services use [Harm Reduction](#), [Housing First](#), [Progressive Engagement](#), [Assertive Engagement](#), [Motivation Building](#), [Trauma-Informed Care](#) and [Strengths-based](#) models of service delivery. In certain circumstances, DOH also requires use of [Positive Youth Development](#) and [Safety Planning](#). DOH also encourages use of the [Critical Time Intervention](#) model. These models are briefly described below.

Lease Enforcement in RRH

Landlords (not case management or housing location staff) are responsible for collecting rent and enforcing the lease.

Case management and housing location staff are responsible for helping participants understand and comply with lease terms.

Harm Reduction

Harm reduction is a service approach built on a belief in and respect for the rights and dignity of participants. It acknowledges that negotiating risk is an unavoidable part of life. Harm reduction incorporates a variety of strategies to meet people where they are and help them understand risks and reduce harm to themselves and others caused by risky behavior. Harm reduction techniques can be applied to most situations where behavior presents a risk and alternatives to choose from are available. Harm Reduction includes, for example, practical strategies to reduce negative consequences of drug use, incorporating a spectrum of approaches from safer use to abstinence. DOH requires use of the harm reduction approach for all RRH projects, such that housing location, financial assistance and case management services continue to be provided to program participants regardless of risky behaviors in which participants may engage. See [Section 7 – Termination From DOH RRH](#) for information on allowable reasons to terminate assistance.

Housing First

The DOH RRH program provides participants with housing quickly, and it provides services as needed, using a low-barrier approach that emphasizes community integration, stable tenancy, recovery and individual choice. Participants are expected to comply with a standard lease agreement and are provided with services and supports to help maintain housing and prevent eviction. Services are designed to identify and reduce risks to stable tenancy. Retention in housing is contingent on lease compliance, not on abstinence from substances or compliance

with services, or treatment. Projects must comply with Housing First requirements as specified by the relevant CoC (See [CT BOS Policies](#) and [ODFC Operating Guidelines](#)).

Critical Time Intervention (CTI)

[CTI](#) is a time-limited, evidence-based practice that promotes housing stabilization during periods of transition by strengthening a participant's long-term ties to community services and social supports. The approach is housing-focused and connected to the participant's life goals. CTI facilitates community integration and continuity of care by ensuring that a person has enduring ties to their community and support systems. CTI typically lasts for six months in RRH, and services are divided into three phases of two-months each. DOH encourages use of this approach for RRH projects, particularly those serving participants with intensive service needs. The CTI manual was under revision at the time this guide was published. Check www.criticaltime.org for the updated CTI manual.

Progressive Engagement

[Progressive Engagement](#) is a service strategy that starts with the least amount of assistance necessary to help resolve homelessness and then adds more assistance, only as necessary, if the less intensive intervention is unsuccessful. In the absence of reliable models that can effectively predict who will be unable to resolve their homelessness without assistance, or with varying levels of assistance, progressive engagement is a practical strategy to conserve resources and direct the costliest interventions to those who have not been able to resolve their homelessness through less intensive interventions. The need for additional support is determined by an assessment of the participant's experience and the impact of the initial intervention. Progressive engagement fundamentals include the following:

- Flexible participation by the participant receiving services;
- Critical thinking and problem-solving responsibilities shared between the participant and provider;
- Connections made to community resources;
- Building on participants' resiliency and strengths; and
- Focus on the goal of quickly resolving the immediate crisis of homelessness.

Assertive Engagement

Case managers make regular attempts to engage participants and must maintain a **minimum of monthly contact** with each participant. When participants decline services or otherwise demonstrate reluctance to take part, case managers are required to use a variety of contact methods to creatively engage and be persistent in their efforts to build rapport. The experience of being homeless can make it difficult for participants to trust staff. People with lived experience of homelessness have commonly faced trauma, victimization, loss of power and role, and

disabilities – all of which may impact interpersonal connections. Frequently, participants have also faced ineffective and inaccessible human service programs. Consequently, they may have little hope for a future that looks different than their current reality, and they may not believe that case management services will benefit them. Case management staff are responsible for finding ways to help participants to build trust and hope through repeated, person-centered, predictable patterns of interaction, which address participants’ most pressing concerns and help them to feel safe, respected, and in control. It is the responsibility of case management staff to engage all participants.

Motivation Building

Homelessness and other life challenges faced by participants can cause a loss of hope and drain motivation to make changes. Telling participants what actions they need to take to resolve their homelessness is typically an ineffective approach. Rather, use of motivation building techniques that focus on creating a partnership with the participant and eliciting and amplifying the person’s own reasons to change is usually a more successful approach. For example, it is important for case managers to:

- Help participants to identify and resolve any ambivalence they may feel about obtaining and maintaining stable housing, increasing income or achieving other goals;
- Use reflective listening techniques to confirm that they understand what the participant is saying;
- Help participants to gain control of their lives; define personal values, preferences, and visions for the future; and establish meaningful individual short and long-term goals;
- Help participants to develop an understanding of the discrepancy between their personal goals or values and their current behavior; and
- Adjust to any participant reluctance to make changes rather than opposing it directly.

Trauma-Informed Care

Homelessness is a traumatic experience that is often stressful, dehumanizing, and dangerous. Individuals experiencing homelessness are likely to have faced previous trauma, and homelessness itself increases the risk of further trauma. Trauma can interfere with a person’s sense of safety, ability to self-regulate, perception of control and self-efficacy, and interpersonal relationships. DOH requires all RRH case management and housing location providers to integrate trauma-informed practices into their RRH projects. This means, for example, helping staff to understand how trauma impacts participants, including how participants might react to triggering situations and helping staff to develop more effective responses to those reactions. This also includes emphasizing safety, ensuring that services are predictable, ensuring that staff roles and boundaries are clear, and ensuring that staff are reliable. In addition, staff need to be aware of potential triggers to avoid re-traumatization. Creating opportunities to rebuild

participants' sense of control, emphasizing participant choice, supporting participant led decision-making, avoiding giving directions or orders, and assisting participants to continuously identify their strengths and build new skills are also critical practices.

Strengths-Based Approach

People who have experienced homelessness and survived trauma demonstrate a high degree of resiliency and adaptability. Even when behavior appears risky or problematic, it has often developed to support survival. For example, someone may have learned that yelling or threats lead to getting others to pay attention to their needs. RRH programs focus on strengths within individuals and their family and support networks, rather than on pathology or deficits. Case Management Providers are required to help participants identify what strengths have allowed them to survive through trauma and homelessness and rediscover strengths and accomplishments that may have been long forgotten. A strengths-based approach requires staff to have confidence in participants' abilities and to provide repeated opportunities to learn, grow, change, build new skills, and progress towards personal goal achievement. Case management staff help participants to leverage setbacks as opportunities to learn and adjust plans. Case management staff also promote, support, acknowledge and reward incremental progress and use person-centered language, for instance, using the term "person experiencing homelessness," rather than the term "homeless person."

Positive Youth Development (PYD)

PYD is a nationally recognized approach that engages youth within their communities, schools, organizations, peer groups, and families in a manner that is productive and constructive. It recognizes, utilizes, and enhances youths' strengths and promotes positive outcomes for young people by providing opportunities, fostering positive relationships, and furnishing the support needed to build on their leadership skills. The model engages youth in activities they find personally meaningful and relevant and supports them to actively design, implement and evaluate the services they receive. It also provides ongoing and intentional opportunities for young people to develop competence, confidence, connection, character, and compassion, and it establishes high expectations for what young people can achieve. HUD requires YHDP RRH projects to use the PYD approach. For information about specific evidence-based models that use a PYD approach, see the [SAMHSA's Evidence-based Practices Resources Center](#).

Safety Planning

Safety planning is a technique used to help survivors of domestic violence, dating violence, sexual assault, stalking or human trafficking to keep themselves, their children, pets, and other family members safe. A safety plan can incorporate strategies to escape during incidences of violence, reduce risks when leaving an abuser, ensure that their new location remains confidential, or seek

protection through the court system. Safety planning acknowledges survivors as the best experts on their own lives and helps them to plan ahead for unsafe situations that may occur. Safety plans are customized to the unique needs of each survivor. DOH requires CT DV/HT RRH programs to offer safety planning services to survivors. DOH also requires other RRH projects to refer survivors to organizations in their community with expertise in safety planning services.

SECTION 4: KEY PARTNERS

Ending homelessness across the State of Connecticut requires close coordination among multiple partner organizations and prioritization of resources so that assistance is allocated as effectively as possible and is easily accessible no matter where or how people experiencing homelessness present. The success of DOH RRH projects relies on commitment and collaboration of many organizations and individuals.

This section provides an overview of the roles and responsibilities of each party involved in either operating or overseeing RRH projects across the state. Partners appear in this section in alphabetical order. Additional details regarding these responsibilities are contained throughout this Guide. DOH acknowledges that ending homelessness in Connecticut is a complex endeavor that requires cross-sector coordination and participation by many public and private organizations and individuals. Though not detailed below, DOH deeply values the contributions of each of the many partners who are working together across Connecticut and beyond to end homelessness.

*Effectively prioritizing and mobilizing RRH resources requires **close coordination** among:*

- *Participants receiving RRH services*
- *DOH*
- *Coordinated Access Networks*
- *CT BOS and ODFC Continuums of Care*
- *Non-profit agencies providing housing location, financial assistance, case management, and fiduciary services.*

Case Management Provider Responsibilities

The roles and responsibilities of the agency primarily responsible for providing case management services at each DOH RRH project—including both subrecipients on CoC or ESG grants and non-CoC or ESG funded service agencies—are defined in contracts with DOH and include those listed below. In most cases, the same agency provides both [housing location](#) and [case management services](#) to all participants in a RRH project. In the CT DV/HT RRH Program, separate agencies are responsible for providing case management and housing location services.

DOH RRH forms referenced below are available at [Connecticut RRH Program Resources](#).

Case Management Providers are responsible for the following:

- **Comply with DOH, HUD, and CoC requirements.** Case Management Providers are responsible for compliance with the requirements described in this Guide, relevant HUD regulations, and relevant CoC written standards.
- **Comply with DOH contract(s).** Case Management Providers comply with the terms of their DOH RRH project contracts.
- **Document Expenditures.** Case Management Providers document, in accordance with State and HUD requirements, expenditures on [eligible costs](#) for each CoC or ESG RRH project on each budget line item. Case Management Providers document, in accordance with HUD requirements, receipt and expenditure of any cash [match](#) amount as indicated in their DOH contract(s).
- **Make referrals.** Case Management Providers refer to [211](#) all households identified to be in need of housing assistance.
- **Report vacancies.** Case Management Providers are required to report RRH project vacancies to the relevant CAN as soon as possible, with a goal of reporting actual vacancies within 1 business day of the slot becoming available, and impending vacancies within 3 business days of becoming aware of the upcoming availability.
- **Help participants navigate local CAN processes.** Case Management Providers maintain familiarity with and actively participate in the local CAN process.
- **Make final determination of participant eligibility.** Case Management Providers are responsible for verifying eligibility and maintaining eligibility documentation in client files and HMIS records. Providers review all participant eligibility documentation received from the CAN for completeness and ensure [eligibility is adequately documented](#) up to the date of project entry. Service Providers notify the participant and CAN of missing or inadequate documentation and assist, as necessary, to obtain additional documentation.
- **Verify participant income & calculate participant rent.** Case Management Providers verify participant income and [calculate participant rent](#) (For YHDP RRH, see [YHDP RRH Rent](#)

Federal and local CoC requirements are defined here:

- [CoC Program Interim Rule](#)
- [ESG Program Interim Rule](#)
- [Uniform Administrative Requirements, Cost Principles and Audit Requirements for Federal Awards: 2 CFR part 200](#)

Applicable CoC Written Standards:

- [CT BOS CoC Policies](#)
- [Opening Doors Fairfield County Operating Guidelines](#)
- [CT Coordinated Access System Policies and Procedures](#)

[Calculation Tool](#)) and issue payment letters to program participants (See Form 17 - [payment letter](#) & Form 17A – [YHDP Sample Financial Assistance Letter](#)).

- **[Request payment](#)**. Case Management Providers make payment requests to ensure on-time subsidy payment to landlords (See [Form 19](#) - Rapid Rehousing fund request form-ESG/CoC/ODFC).
- **Provide comprehensive [case management services](#)**. Case Management Providers deliver and document case management services to all project participants. Services are voluntary, housing-focused, person-centered, trauma-informed and are provided at the level needed by each household. Services build on the strengths and resources of each household.

RRH case management services include:

 - *Housing location*
 - *Move-in support*
 - *Assertive engagement*
 - *Needs assessment*
 - *Housing stabilization services*
 - *Assistance to increase income*
 - *Discharge Planning*
- **Use evidence-based and best practices**. The specific models required and encouraged by DOH are described in [Section 3](#).
- **Coordinate with housing location service providers**. In many cases, the same agency provides both case management and housing location services to participants in a RRH project. Sometimes those services are provided by separate members of an agency’s staff. In some cases, [housing location services](#) are provided by a separate agency. In all situations, case management staff are responsible for coordinating closely with housing location staff, supporting efforts to assist the participant to rapidly attain permanent housing, and helping participants to identify and overcome barriers to securing housing.
- **Maintain participant files**. Case managers must maintain a complete file record for each household enrolled in and discharged from RRH. Files must be maintained in accordance with [record retention](#) requirements. See [Case Files & Case Notes Requirements](#) for more information.

- **Maintain financial records.** Maintain financial records in accordance with State and Federal requirements demonstrating appropriate use of CoC and ESG Programs and matching funds. See [Section 11](#) for more information.
- **Enter HMIS data.** Enter accurate HMIS data in a timely manner in accordance with all requirements established by HUD, DOH, the relevant CoC, and the HMIS lead agency. See [HMIS requirements](#) for more information.
- **Submit information to the CoC.** Complete in a timely manner all relevant submissions as required by the relevant CoC. This includes but is not limited to [annual renewal evaluation materials](#), annual CoC competition application materials, and annual HIC/PIT materials.
- **Ensure appropriate project expenditures.** Case Management Providers regularly review data on expenditure of RRH funds during monthly spending calls with DOH and ACT. They coordinate with the Housing Location Provider and DOH to ensure [full expenditure](#) and prevent over expenditure of project funds.
- **See also [Housing Location Provider Responsibilities](#).** Except for CT DV/HT RRH Programs, the Case Management provider is also responsible for the items listed under Housing Location Provider Responsibilities.

Case Management Provider Contact Information:

A range of non-profit homeless service provider agencies provide case management services for RRH Participants across the state. To determine which agency provides case management services for a particular RRH Project, contact:

- Non-population specific DOH RRH Program: Kara.zichichi@ct.gov or Leigh.shieldschurch@ct.gov
- CT YHDP RRH: Kathleen.durand@ct.gov
- CT DV/HT RRH: jvitarelli@ctcadv.org

Information specific to particular participants is confidential and will only be released in accordance with confidentiality protocols.

Connecticut Coalition Against Domestic Violence (CCADV) Responsibilities

CCADV oversees the day-to-day operations of the CT DV/HT RRH program. CCADV contracts and oversees non-profit domestic violence, human trafficking, and housing provider organizations across the state to directly provide housing location, case management and other services. CCADV responsibilities include the following:

CCADV Contact Information

- www.ctcadv.org
- Joanne Vitarelli: jvitarelli@ctcadv.org

- **Provides technical assistance for CT DV/HT RRH providers.** CCADV provides technical assistance and other supports to CT DV/HT RRH providers to ensure quick connections to

safe, appropriate housing and skilled case management to effectively address survivors' unique needs.

- **Provides fiduciary services for CT DV/HT RRH.** See [Fiduciary Agency responsibilities](#).
- **Provides Coordinated Access for CT DV/HT RRH.** CCADV also serves as the centralized access point for survivors to receive RRH assistance through CT DV/HT RRH. See [CAN responsibilities](#).
- **Maintains policies, procedures and forms for CT DV/HT RRH.** To ensure that the CT DV/HT RRH program operates in a manner that is consistent with the unique needs of survivors, CCADV develops and maintains separate policies and procedures for that program. They also make adjustments to certain required forms. A current copy of the CT DV/HT RRH Policies, Procedures, and Forms can be obtained by contacting [CCADV](#).
- **Recommends policy and procedure adjustments to better serve survivors.** CCADV makes recommendations to DOH, CT BOS, and ODFC for adjustments to RRH and CAN policies and procedures to ensure that CT DV/HT RRH and non-survivor specific RRH projects are working effectively to meet the needs of survivors.

Connecticut Department of Housing (Individual and Family Support Programs) Responsibilities

- **Oversees CANs.** See [CAN responsibilities](#).
- **Ensures uniformity.** Establishes statewide requirements and ensures uniformity of practice for DOH and CoC funded RRH projects.
- **Issues contracts.** Issues and periodically updates contracts defining the responsibilities of Housing Location, Case Management, and Fiduciary Providers. Issues contract addenda delineating the amounts of CoC program funds being received for each DOH RRH project on each budget line item and any cash match amount that the service provider is responsible for securing and documenting.
- **Ensures compliance.** Conducts or contracts with a vendor to conduct on-site or remote monitoring of Housing and Case Management Providers' compliance with federal, state, and local CoC requirements.
- **Provides training and technical assistance.** Regularly convenes Housing Providers and Case Management Providers and disseminates ongoing, up-to-date guidance. Identifies technical assistance and training needs and provides or contracts with a vendor to provide technical assistance and training to support compliance with requirements and advance best practices in the provision of RRH services.

DOH, Individual and Family Support Programs Contact Information:

<https://portal.ct.gov/doh>

Steve Dilella:

steve.dilella@ct.gov

- **Coordinates with key partners.** Coordinates with CT BOS and ODFC CoCs, CANs, and other partners to ensure effective collaboration, strategic use of resources, and appropriate governance of RRH processes.
- **Oversees project performance.** Regularly reviews each DOH RRH project's performance based on standards adopted and analysis conducted by CT BOS and ODFC CoCs. Takes action as necessary to ensure improvement when performance is determined to be substandard.
- **Oversees project expenditures.** Regularly compiles and reports data on expenditure of funds for DOH RRH projects to support full expenditure and prevent over expenditure. Periodically monitors expenditures and provides oversight, guidance, and technical assistance to providers as necessary.

Continuum of Care Responsibilities

- **CT BOS manages document repository.** CT BOS manages a [repository of documents](#) provided by DOH and used for implementation of CT's RRH program.
- **Manage planning efforts to end homelessness.** CT BOS and ODFC CoCs each manage a year-round planning effort that includes establishing policies and plans toward ending homelessness in

Continuum of Care Contact Information

- CT Balance of State Continuum of Care – www.ctbos.org; ctboscoc@gmail.com
- Opening Doors Fairfield County - www.openingdoorsfc.org; openingdoorsoffairfieldcounty@gmail.com

- their respective regions, analyzing information to determine needs of people experiencing homelessness in the regions, establishing priorities for how to use funding made available by HUD, and coordinating with other systems and programs serving homeless people.
- **Evaluate project performance.** The CoCs set performance standards and evaluate projects funded through their CoCs against those standards. CoCs take action, as necessary, to strengthen project performance and address substandard performance.
- **Monitoring project compliance.** The CoCs monitor compliance with HUD, state, and CoC requirements and take action, as necessary, to strengthen compliance and address compliance issues.
- **Provide training and technical assistance.** The CoCs provide training, technical assistance, and other resources to support agencies' efforts to provide the highest quality services.
- **Designate a [Homeless Management Information System \(HMIS\)](#).** The CoCs designate an HMIS for their geography and an [HMIS lead agency](#) that is responsible for ensuring that the HMIS is administered in compliance with HUD requirements.
- **Prepare an application for CoC funds.** The CoCs establish priorities that align with local and federal policies and strategic objectives. Based on those priorities, they recommend projects

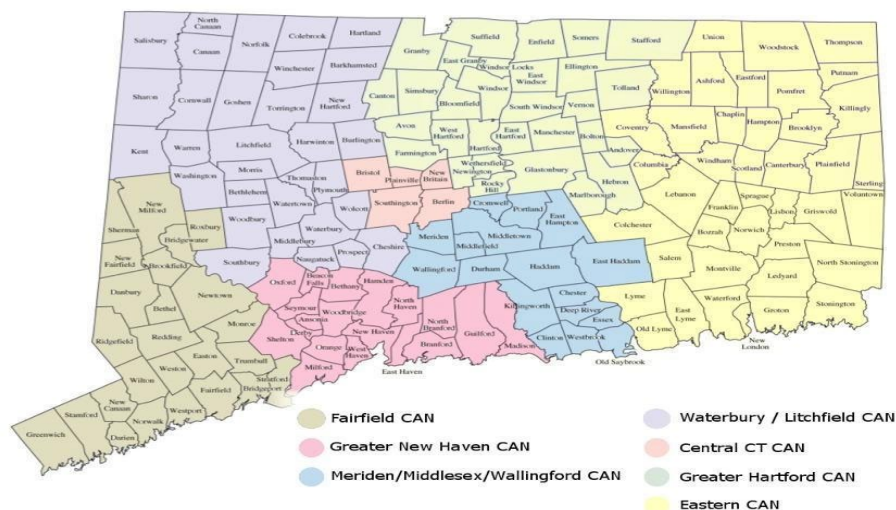
for HUD CoC Grant funding. The CoCs also designate an eligible collaborative applicant to collect and combine the required application information from all applicants. In addition, the CoCs design, operate, and follow a collaborative process for the development of a CoC application to HUD and approve the final submission of that application in response to the CoC Notice of Funding Opportunity (NOFO).

- **Establish written standards.** HUD requires that each CoC establish written standards for administering CoC assistance. These standards are adopted by the governance bodies of each CoC: CT BOS Steering Committee and ODFC Executive Committee. CoC RRH projects are required to comply with these written standards. This Guide serves as the CT BOS and ODFC written standards for RRH projects. Substantive changes to this Guide must be adopted by the governance bodies of each CoC.

Coordinated Access Networks (CANs) and 211 Responsibilities

HUD has determined that a process to coordinate access to homeless assistance programs is a critical component of efforts to end homelessness and has required that all CoCs develop Coordinated Entry Systems (24 CFR 578.7) and that all ESG-funded projects within the CoC’s geographic area use that system (24 CFR 576.400(d)). Throughout the State of Connecticut, regional CANs have been established to serve that function. Below is a map showing the coverage area of each CAN:

CAN Contact Information:
<https://www.ctbos.org/wp-content/uploads/CAN->



CAN responsibilities include:

- **Ensure access to homeless services.** The United Way’s 211 service ensures that service entry points are easily accessible throughout the state and are well-advertised. 211 serves as the statewide entry point for all CT CANs. People in need of assistance dial 211 from anywhere in

the state to start the process. 211 refers anyone experiencing a housing crisis to the CAN that covers the caller's community.

- **Assess needs.** CANs gather information about applicants' service needs, housing barriers, vulnerabilities, and strengths.
- **Determine eligibility.** Each CAN establishes a system for helping applicants to gather eligibility documentation, and CANs make preliminary determinations regarding which applicants are eligible for which resources.
- **Prioritize assistance.** Because communities do not have adequate resources to meet the full range of needs of all people experiencing homelessness, CoCs rely on the CANs to prioritize assistance based on factors defined in [CT CAN Policies and Procedures Manual](#).
- **Make referrals.** CANs coordinate referrals for eligible individuals to appropriate and available housing and service interventions. This includes ensuring that each participant is linked to a Housing Location and Case Management Provider. In many cases, the same non-profit agency serves both as the Case Management and Housing Location Provider.
- **Establish Coordinated Entry policies.** DOH oversees the implementation of CANs, coordinates CAN policy and procedure development, ensures policies are compliant with HUD requirements, and recommends policies for adoption by the CT BOS Steering Committee and the ODFC Executive Committee. These policies are compiled in the [CT CAN Policies and Procedures Manual](#).

Fiduciary Agency Responsibilities

Manage RRH rental assistance funds. Fiduciary agencies receive RRH rental assistance funds from DOH and manage distribution of those funds to landlords in accordance with federal and state requirements per grant and region.

Fiduciary Agency Contact Information

[CCADV](#) serves as the fiduciary agency for the CT DV/HT RRH program.; Joanne Vitarelli - jvitarelli@ctcadv.org

[The Housing Collective](#) serves as the fiduciary agency for ODFC YHDP RRH; Lauren Zimmermann - lauren@thehousingcollective.org

[ACT](#) serves as the fiduciary agency for the other DOH RRH programs – funds@act-ct.org

Housing Location Provider Responsibilities

In most cases, the same agency provides both Housing Location and Case Management services to all participants in a RRH project. In the CT DV/HT RRH Program, separate agencies are responsible for providing case management and housing location services. The ODFC Rapid Rehousing Project has a centralized Housing Coordinator set-aside for that program. Housing Location Provider responsibilities follow:

- **Comply with DOH, HUD, and CoC requirements.** Housing Location Providers are responsible for compliance with the requirements described in this Guide, relevant HUD regulations, and the relevant CoC’s written standards. For a list of requirements see [Section 2](#).
- **Help participants navigate local CAN process.** Housing Location Providers maintain familiarity with and actively participate in the local CAN process and assist participants to document eligibility and access housing assistance through the CAN.
- **Assist with housing search.** Housing Location Providers assist the household to locate a housing unit as quickly as possible. The goal is to secure a housing unit within 30 days from the date the participant is matched by the CAN or CCADV to the RRH project. Housing location providers assist participants to determine an affordable and realistic housing solution.
- **Resolve or mitigate barriers.** Housing Location Providers assist participants to resolve or mitigate housing barriers like rental and utility arrears, multiple evictions, and criminal justice system involvement. They also assist participants to obtain necessary identification, if needed.
- **Conduct landlord outreach.** Housing Location Providers encourage landlords offering decent, safe, and affordable housing to lease units to RRH participants and to publicize their available units.

Housing Location Provider Contact Information:

A range of non-profit homeless service provider agencies provide housing location services for RRH Participants across the state. To determine which agency provides housing location services for a particular RRH Project, contact:

Non-population specific DOH RRH Program: Kara.zichichi@ct.gov or Leigh.shieldschurch@ct.gov

CT YHDP RRH: Kathleen.durand@ct.gov

CT DV/HT RRH: jvitarelli@ctcadv.org

Information specific to particular participants is confidential and will only be released in accordance with confidentiality protocols.

- **Determine unit viability.** Housing Location Providers determine if a selected housing unit complies with RRH program requirements and can be supported through RRH financial assistance. See [Unit Approval](#) for more information.
- **Coordinate lease execution.** Housing Location Providers coordinate with participants and landlords to ensure prompt execution of the RRH rental assistance agreement (See Form 16 – RRH Rental Assistance Agreement) and lease. They also review lease terms with the participant. See [Lease and Rental Assistance Agreement Execution for more information](#).
- **Coordinate with responsible parties.** Housing Location Providers coordinate with project participants, Case Management Providers, landlords, CANs, CCADV and DOH, as needed, on a range of issues, including project capacity, participant eligibility, unit availability and suitability, grievances, and compliance with federal, state, and CoC requirements.

Landlord Responsibilities

- **Maintain contractual and legal obligations.** Landlords must comply with provisions contained in leases and RRH Rental Assistance Agreements, and all applicable state, federal, and local statutes, regulations, and ordinances, including those related to fair housing, non-discrimination, and housing quality. Housing code enforcement is a function of local government. Resources are available on-line to enable the public to access local housing codes (see for example the [Municode Library](#) or the [General Code Library](#)). For questions or concerns about ordinances in a specific community, contact the local Code Enforcement Officer. Landlords may not discriminate against households on the grounds of race, color, creed, religion, gender, gender identity/expression, sexual orientation, national origin, ancestry, disability, age, family or marital status, or legal source of income (see Sections on [Non-discrimination and Accessibility, Fair Housing, and Equal Access](#)). Landlords must comply with the applicable provisions of the [Violence Against Women Act \(VAWA\)](#). Landlords must perform regular maintenance and perform all management and rental functions as required by [Connecticut landlord-tenant laws](#). Landlords must also comply with local

Landlord Contact Information:

A range of non-profit and private agencies and individuals rent units to RRH Participants across the state. To obtain a list of landlords participating in the statewide program contact:

Non-population specific CT RRH Program - Kara.capobianco@ct.gov or Leigh.shieldschurch@ct.gov

CT YHDP RRH - Kathleen.durand@ct.gov

CT DV/HT RRH - jvitarelli@ctcadv.org

Information specific to particular participants is confidential and will only be released in accordance with confidentiality protocols.

Close coordination between landlords and Case Management Providers is critical to supporting stable tenancy. DOH strongly encourages Case Management Providers to build effective relationships with participating landlords and implement the following best practices:

- **Report tenant issues.** Landlords are strongly encouraged to notify the Case Management Provider of any disputes between the landlord and project participant. Landlords may request a meeting with the involved parties to attempt resolution.
- **Report vacancies in RRH units.** Landlords are strongly encouraged to notify the Case Management Provider, as soon as possible, when it becomes known to them that a participant has vacated a rental unit with or without notice.
- **Supply vacancy information.** Landlords are strongly encouraged to keep the Housing Location Provider informed of vacancies in their other units that may be available to house additional participants.
- **Evictions.** If a landlord evicts a household, the eviction must be handled legally under the provisions of [Connecticut landlord-tenant laws](#), just as for any other tenant. Landlords are strongly encouraged to give the Case Management Provider written notice of eviction at the same time the household is notified.

Project Participant Responsibilities

- **Utilize case management services.** To assist participants to secure permanent housing and maintain housing stability, the DOH RRH program includes case management services. Participants agree to participate in case management services at a minimum monthly, to make best efforts to explore all referral resources suggested by program staff to ensure housing stability. This includes enrolling in the local American Job Center or other employment services program if able to work and having difficulty obtaining or retaining a job. Participants also agree to the best of their ability, to keep all appointments with Connecticut Rapid Rehousing Program staff. If unable to keep an appointment, participants agree, whenever possible, to call and reschedule the appointment at least 24 hours before the appointment.
- **Provide required information.** Participants are responsible for providing the CAN, Housing Location Provider, and Case Management Provider with accurate information that certifies their [initial](#) and [continuing eligibility](#) for RRH assistance and establishes what [share of the rent they will pay](#). Participants must accurately disclose all household income upon admission, at each [monthly rent re-assessment and each 90-day and annual re-certification](#). In addition, participants must accurately disclose all household assets upon admission and at each 90-day re-certification. As needed, CANs, Housing Location Providers, and Case Management Providers will assist participants to obtain this information.

- **Take action steps as defined in the [housing stability plan](#).** Case managers work with each participant to develop an individualized housing stability plan that is housing-focused and participant-driven. Housing stability plans are individualized based on housing needs and preferences. Case managers review the Housing Stability Plan with each participant at a minimum of once per month to assess progress and update the plans at a minimum every 90 days in accordance with participant preferences. Participants agree to take all necessary steps to accomplish the goals outlined their housing plan.
- **Find and maintain a qualified unit.** Participants must select a unit within the rent limitations determined by the Housing Location Provider to be [reasonable](#). The unit must be located within the applicable project’s covered geographic area. The unit must pass a [Housing Quality Standards \(HQS\)](#) inspection prior to initial lease execution. Participants must consider their budget (income/anticipated income and expenses, rental and credit history and shared housing when selecting an apartment that they can reasonably expect to afford after RRH assistance ends. Even though RRH assistance is usually short-term, if applicable, the participant must allow the Case Management or Housing Location provider to re-inspect the unit prior to annual recertification. The participant is also responsible for maintaining unit cleanliness and utilities in a manner that complies with HQS.
- **Comply with lease.** Households must comply with all the terms of their lease, including but not limited to, paying rent on time, maintaining utilities for the unit, not damaging the unit, not allowing unauthorized occupants to live in the unit, and not disrupting the peaceful enjoyment of the premises by other residents (See [Rights and Responsibilities of Landlords and Tenants](#) in CT for more information).
- **Provide other information requested by program staff.** This might include, for example, notifying the Case Management Provider of any communications they receive from landlords that may affect their continued tenancy, such as lease violation and eviction notices.
- **Maintain unit as primary residence.** The unit must be used as the participant household’s primary residence. Absences from the unit greater than 90 consecutive days due to incarceration, hospitalization, residential treatment or for any other reason, for example, will result in termination of RRH assistance.

Responsibilities of project participants are also outlined in Form 2 – [RRH Program Agreement](#) at [Connecticut RRH Program Resources](#).

SECTION 5: ACCESSING DOH RRH RENTAL ASSISTANCE

Tenant-Based Rental Assistance (TRA)

DOH RRH provides Tenant-Based Rental Assistance. Program participants identify housing of their choice in the community. The unit identified must meet certain requirements, such as meeting standards of [appropriate size](#), [Housing Quality Standards or Habitability Standards](#), and [rent reasonableness requirements](#). Program participants who have complied with lease terms may maintain their residence in their unit beyond the expiration of RRH rental assistance.

Housing First

The DOH RRH Program uses the Housing First model and offers individuals and families experiencing homelessness immediate access to housing without unnecessary prerequisites. For example:

- Admission/tenant screening and selection practices do not require abstinence from substances, completion of or compliance with substance use or mental health treatment, or participation in services.
- Applicants are not rejected on the basis of poor or lack of credit or income, poor or lack of rental history, criminal convictions, or other factors that might indicate a lack of “housing readiness.”
- Blanket exclusionary criteria based on more serious criminal convictions are not applied, though programs may consider such convictions on a case-by-case basis as necessary to ensure the safety of other residents and staff.
- Application of additional criteria beyond the eligibility criteria described in this Guide should be rare and applied only as necessary to ensure the safety of other residents and staff.

For more information on [Housing First](#), see the [Case Management Requirements](#) Section.

Non-discrimination and Accessibility

DOH complies with all federal, state and local non-discrimination requirements. Below are Federal civil rights laws as specified at 24 C.F.R. 5.105(a), applying variously to specific RRH program partners, including but not limited to CoCs, CANs, Case Management Providers, Housing Location Providers and Landlords:

- **Fair Housing Act:** prohibits discriminatory housing practices based on race, color, religion, sex, national origin, disability, or familial status;

- **Section 504 of the Rehabilitation Act:** prohibits discrimination on the basis of disability under any program or activity receiving Federal financial assistance;
- **Title VI of the Civil Rights Act:** prohibits discrimination on the basis of race, color or national origin under any program or activity receiving Federal financial assistance;
- **Title II of the Americans with Disabilities Act:** prohibits public entities, which includes state and local governments, and special purpose districts, from discriminating against individuals with disabilities in all their services, programs, and activities, which include housing, and housing-related services such as housing search and referral assistance; and
- **Title III of the Americans with Disabilities Act:** prohibits private entities that own, lease, and operate places of public accommodation, which include shelters, social service establishments, and other public accommodations providing housing, from discriminating on the basis of disability.

In addition, HUD's Equal Access Rule at 24 CFR 5.105(a)(2) prohibits discriminatory eligibility determinations in HUD-assisted or HUD-insured housing programs based on actual or perceived sexual orientation, gender identity, or marital status, including any projects funded by the CoC and ESG Programs. See [Equal Access](#) section for more information.

For more information about these requirements see also [CT CAN Policies and Procedures Manual](#).

Fair Housing

DOH and RRH program partners comply fully with all Federal and state statutes and regulations governing fair housing and equal opportunity in housing and employment. No family or individual shall be denied the opportunity to apply for or receive assistance under the DOH RRH Program on the basis of race, color, sex, religion, creed, national or ethnic origin, age, family or marital status, disability, gender identity/expression or sexual orientation ([24 CFR 578.93](#); [24 CFR 576.407\(a\) and \(b\)](#); [CGA Sec. 46a-64c](#)).

The DOH RRH program affirmatively furthers Fair Housing, which means (24 CFR 578.93(c)):

- (1) Affirmatively marketing housing subsidies and supportive services to eligible persons who are least likely to apply in the absence of special outreach, regardless of race, color, national origin, religion, sex, age, familial status, or handicap; and maintaining records of those marketing activities;
- (2) Where a Case Management or Housing Location Provider or Fiduciary Agency encounters a condition or action that impedes fair housing choice for current or prospective program participants, they must provide such information to DOH; and

(3) Providing program participants with information on rights and remedies available under applicable federal, state and local fair housing and civil rights laws. This information is included in the [CT BOS Participant Bill of Rights](#).

Both the CAN and the RRH program partners have a responsibility to document compliance with these requirements, including ensuring a written strategy to affirmatively further fair housing exists and to maintain copies of marketing, outreach, and other materials used to affirmatively market the available projects within their assigned geographic area.

Equal Access

DOH and its RRH program partners comply fully with [HUD Equal Access requirements](#). These rules ensure that DOH RRH projects are open to all eligible individuals and families regardless of sexual orientation, gender identity, or marital status. As such, eligibility determinations for the DOH RRH program must be made without regard to actual or perceived sexual orientation, gender identity, or marital status. Furthermore, DOH RRH programs are prohibited from making inquiries regarding sexual orientation or gender identity for the purpose of determining eligibility or otherwise making housing available, and inquiries related to an applicant or occupant's gender are allowed only for the limited purpose of determining the number of bedrooms to which a household may be entitled. The prohibition on inquiries is not intended to prohibit mechanisms that allow for voluntary and anonymous reporting of sexual orientation or gender identity solely for compliance with federal, state or local data collection requirements.

In addition, HUD Equal Access Rules require that any group of people that present together for assistance and identify themselves as a family, regardless of age or relationship or other factors, are considered a family and served together as such. Furthermore, a DOH RRH project cannot discriminate against a group of people presenting as a family based on the composition of the family (e.g., adults and children or just adults), the age of any member's family, the disability status of any members of the family, marital status, actual or perceived sexual orientation, or gender identity. As such, the age and gender of a child under age 18 must not be used as a basis for denying any family's admission to a project that receives DOH RRH funds (24 CFR 578.93(e)). For information about permissible age-related restrictions for YHDP projects see [Section 5](#).

CANs are responsible, within their geographic areas, for prioritizing households in need of services, monitoring vacancies in DOH RRH projects and matching households with available vacancies in a manner that is most likely to meet the household's needs. CANs make every effort to use the available resources strategically, for example, by referring families with children to projects that have services designed to meet the unique needs of families. However, this may not always be possible. Projects must serve eligible households prioritized and referred by their

CAN without regard to household configuration (e.g., singles, couples, multiple adult families, families with children); however, physical layout of the unit may be a consideration to the [extent permitted by HUD](#). Under no circumstances may projects serving families limit assistance to only women with children. For families with minor children, all families must be served, no matter the family composition or the ages, or genders of the family members. For example, projects must serve any of the following family types: single male head of household with minor child(ren); single female head of household with minor child(ren); household made up of 2 or more adults presenting with minor child(ren), regardless of the adults' or children's sexual orientation, the adults' marital status, or the adults' or children's gender identity.

To demonstrate compliance with Fair Housing and Equal Access requirements, records of CAN referral rejections and the reason for rejection should be maintained in CT HMIS by projects receiving CAN referrals.

Discrimination Related Complaints

Project Participants who believe they have been discriminated against have access to multiple avenues for submitting a complaint:

- Participants who have a dispute or complaint about the administration of the DOH RRH Program may use the process described in [Section 8](#) of this Guide.
- Complaints can also be submitted to the relevant CoC (i.e., CT BOS at ctboscoc@gmail.com or Opening Doors Fairfield County at openingdoorsoffairfieldcounty@gmail.com).
- Participants may also contact the HUD Hartford Field Office at (860) 240-4800.
- Participants who believe they have been discriminated against based on race, color, national origin, religion, sex, disability, or familial status, can file a fair housing complaint with HUD by telephone (800-669-9777) or via the Internet by following this link to fill out a fair housing complaint form [online](#).
- Connecticut's anti-discrimination laws also protect people who are gay, lesbian, bi-sexual, and transgender. Participants may file a complaint in person or in writing at the [Connecticut Commission on Human Rights and Opportunities \(CHRO\)](#). The main office of the CHRO is at 21 Grand St., Hartford, CT 06106. Persons filing complaints should call in order to file the case in the appropriate regional office. CHRO's number to file a complaint is (860) 541-3403.

Outreach

Within each CAN, outreach efforts are conducted to identify and engage persons experiencing homelessness, including those who are living in emergency shelters and places not intended for human habitation. In each CAN, DMHAS funds outreach through the Projects for Assistance in the Transition from Homelessness (PATH) program. DOH has also awarded time-limited ESG funding for an outreach project in each CAN. There may also be other types of outreach projects within a CAN, including DMHAS funded Homeless Outreach Teams (HOT). Each CAN in partnership with the outreach providers operating in the CAN's geographic area is responsible for ensuring that available outreach resources in its assigned area are effectively mobilized to identify and engage sheltered and unsheltered persons who have been homeless the longest and have the most severe service needs. DMHAS requires that each PATH funded project submit a written outreach plan covering their CAN's geographic area and coordinating efforts among outreach projects. PATH projects are required to update those plans monthly, and DMHAS reviews and approves those plans semi-annually.

Each DOH and DMHAS funded outreach project is responsible for working in a coordinated and collaborative manner within their CAN to:

- Quickly connect unsheltered homeless individuals and families to safe available housing, income, health/behavioral healthcare and other supports;
- Identify people living in unsheltered locations and help them to reduce the associated risks;
- Minimize service gaps and duplication; and
- Use available resources strategically to end unsheltered homelessness for as many people as possible, prioritizing those who are most vulnerable and/or have been homeless the longest.

RRH is one intervention among many that is available to achieve these objectives, and RRH is used as determined via the CAN process to enable people experiencing unsheltered homelessness to move directly from unsheltered locations to permanent housing.

Assessment & Prioritization

Households in need of housing assistance are assessed and prioritized by the applicable CAN in accordance with policies established in the [Connecticut Coordinated Access Network Policies and Procedures Manual \(CAN Manual\)](#) and adopted by the CT BOS and ODFC CoCs. CCADV serves as the centralized access point for survivors to receive RRH assistance through CT DV/HT RRH and is responsible for fulfilling [CAN responsibilities](#) described in this Guide for these projects. The statewide By-Name-List (BNL) is a centralized and prioritized list of individuals, families, and youth experiencing homelessness. Households are added to the BNL as they are identified as having housing and service needs through the standard assessment process. The statewide BNL

provides CANs with a uniform process used for matching individuals and families to appropriate interventions and prioritizing placement into housing. All DOH RRH projects are required to accept referrals and fill vacancies only from the BNL in accordance with CAN policies.

Referral Process

The referral process is described in detail in the [CAN Manual](#). It is briefly summarized here. Note that the CT DV/HT RRH program uses a distinct referral process which is managed by CCADV and is described in [Appendix – Attachment D](#). When a DOH RRH program has available capacity to admit a new participant, the Case Management Provider will notify the applicable CAN. Upon receipt of such notification, the applicable CAN will refer one or more applicants to the RRH project.

Eligibility Review and Documentation

Upon receipt of a vacancy notification, it is the responsibility of the CAN to manage the presumptive eligibility determination process up to the point of referral, in accordance with the [CAN Manual](#). This includes identifying the documents necessary to establish eligibility, ensuring a staff person is assigned to assist the applicant, as needed, gathering the necessary eligibility documents, and ensuring the assigned staff person is well informed regarding what information and documents are required and is actively working to secure the necessary information and documents.

Documents to Obtain Prior to RRH Project Entry

- ✓ Update the [homelessness verification form](#) and supporting documentation to ensure homelessness at project entry
- ✓ [Age Documentation](#) (YHDP Only)

To be eligible for DOH RRH, applicants must meet eligibility criteria as defined in the [HEARTH Act: Defining HEARTH “Homeless” Final Rule](#) (See Section III. Definitions). The table below summarizes eligibility requirements for each type of DOH RRH. See [Section 13](#) for more information about the categories listed below.

Type of RRH	Eligible HUD Categories	Other Eligibility Requirements
YHDP RRH	Category 1 (including people living in TH); AND Category 4	No member of the household can be older than 24 at project entry; AND Gross annual income must be below 50% of AMI at the time of annual review
DV/HT RRH (DV Bonus)	Category 4	Gross annual income must be below 50% of AMI at the time of annual review
All Other RRH	Category 1 (excluding people living in TH); AND Category 4 (For ESG Cat 4 must also qualify as Cat 1)	At the time of annual review, gross annual income must be below 50% of AMI for CoC funded projects or below 30% of AMI for ESG funded projects

Income limits, as described in the table above, are applicable only at annual review and available [here](#). There are no minimum income requirements. Applicants with zero income are eligible to receive DOH RRH program assistance.

In addition, DOH RRH rental assistance cannot be provided to a program participant who is already receiving rental assistance or living in a housing unit receiving rental assistance or operating assistance through other federal, state, or local sources.

The CAN is responsible for conducting initial applicant screening to determine eligibility for DOH RRH assistance. The CAN is also responsible for providing the applicant written notification regarding eligibility decisions, in accordance with the [CAN Manual](#). In addition, the CAN is responsible for ensuring that only eligible applicants are referred to the DOH RRH program and that eligibility is adequately documented in accordance with HUD requirements. The CAN is required to document the following using the [CoC Program Homeless Verification Form](#) or [CT YHDP Homeless Verification Form](#), which is consistent with HUDs recordkeeping requirements:

- Eligibility screening for ALL persons seeking assistance;
- Evidence relied upon to establish and verify homeless status and disability status, if applicable; and
- Due diligence in attempting to obtain third-party documentation of homelessness, if applicable.

The CAN is required to use the following order of priority for obtaining evidence:

1. **Third-party documentation**, such as:

- ✓ Letter from a shelter
- ✓ Letter from an outreach team
- ✓ Letter from another service provider (e.g., doctor, therapist, counselor, clergy member, etc.)
- ✓ HMIS record

Letters must:

- ✓ Be on agency letterhead
- ✓ Be signed and dated
- ✓ Include name and title of the person signing

If the above pieces of evidence are not available, oral verification from a relevant third party is allowable. Such verification must be provided directly to intake staff, who must record the oral statement in writing, certify that the recorded statement is true and complete, and sign and date the statement. CANs shall not rely on letters or oral statements from an applicant as third-party documentation.

2. **Intake worker observation** of the conditions where the individual was living. Intake worker must document steps taken to obtain third-party documentation.

3. **Self-certification**, including:

- ✓ A dated letter signed by the applicant attesting to the qualified locations where the applicant lived and the approximate dates living in each location;
AND

Intake worker must document both of the following in the participant file:

- ✓ The living situation and circumstances that necessitate reliance on self-certified evidence (e.g., participant was camping in a remote area and did not have contact with any service providers or emergency shelter where participant resided was unresponsive to multiple attempts to obtain third party documentation); **AND**
- ✓ Steps taken to obtain third-party documentation, including documenting attempts to locate HMIS records and attempts to obtain letters from an emergency shelter or other service provider knowledgeable of the applicant's homelessness.

YHDP Age Documentation

Per HUD requirements, YHDP eligibility is limited to unaccompanied youth experiencing homelessness, including pregnant or parenting youth and couples, who are not accompanied by their parent or guardian during their episode of homelessness and where no member of the household is older than 24 at project entry. Age of adult participants must be verified when determining program eligibility.

The following documents are considered to be reliable for age verification: birth certificate, driver's license, passport, immigration card, military identification, school-age record, social security record, or any other state, local, national or international documentation, provided it contains current information about the age or birth of the possessor. Proof of age should not serve as a barrier to program enrollment. In the absence of these forms of documentation at program entry, a client may self-certify their date of birth while the provider continues to assist with obtaining vital documents. This self-certification does not need to be notarized. See [YHDP Additional Household Member Guidance](#) for more information on the YHDP age restriction.

The Case Management Provider is responsible for verifying that sufficient documentation of eligibility, in accordance with HUD standards, is present prior to admitting the participant to a DOH RRH Project and that sufficient documentation of eligibility is maintained in each participant's chart (24 CFR 578.103(a); 24 CFR 576.500(b)). This includes ensuring that eligibility is documented at the time of project entry, i.e., the date on which the project offers, and the participant accepts entry into the project. The project entry date typically precedes the date in which the participant is housed and follows the last date on which the CAN documents presumptive eligibility. For example, a CAN might review for and document an applicant's eligibility on 5/1/21. The RRH project may not be able to immediately accommodate the applicant, so the CAN may not refer the participant to the DOH RRH project until 5/15/21. The project may admit the person on and record a project entry date in HMIS of 5/17/21. The participant may not sign a lease and obtain housing until 6/15/21. In this example, the Case Management Provider must document that the participant meets the relevant homeless criteria as of the **5/17/21** project entry date.

The Case Management Provider is also responsible for maintaining documentation of each program participant's eligibility for 5 years after the expenditure of all funds from the last grant under which the program participant was served (24 CFR 578.103(c); 24 CFR 576.500(y)).

If the individual either does not meet all eligibility requirements or the required documentation of eligibility has not been obtained, the Case Management Provider will notify the CAN and refer the household back to the CAN. The Case Management Provider will also provide the applicant and CAN with written notification regarding the eligibility decision, including specific information

about the reason for the decision, and detailed instructions regarding what additional documents are required, who the applicant can contact to obtain assistance, and how to appeal the decision (see [Grievance Section](#)).

More information about RRH eligibility requirements and tools and resources available to assist in documenting homelessness are available on the [CT BOS Resources](#) page.

RRH Project Entry

Upon determining that the referred applicant meets RRH project eligibility criteria, the Case Management Provider will admit the applicant, obtain an HMIS release of information and enter the project entry date and all required information into HMIS. The Provider is also responsible for ensuring that all forms listed in the box to the right are obtained and that copies are provided as applicable to the participant. Copies of all listed documents must be maintained in the participant paper and/or digital chart.

Documents to Obtain/Provide at RRH Project Entry

- ✓ [RRH Program Agreement](#) (Form #2)
- ✓ [CT HMIS Release of Information](#) (Form #0)
- ✓ [CT HMIS Rapid Rehousing Intake Form - Individual.v1](#)
or
- ✓ [CT HMIS Rapid Rehousing Intake Form - Family.v1](#)
- ✓ Provider Agency Release of Information to Enable Collateral Contacts (Form varies by Agency)
- ✓ Reasons Participation in RRH May Be Terminated
- ✓ [RRH Grievance Policy](#) (Form #24)
- ✓ [CT BOS Participant Bill of Rights](#) (Only CT BOS RRH projects; Form #3)
- ✓ [VAWA Notice of Occupancy Rights](#) (Form #5A)
- ✓ [VAWA Incident Certification](#) (Form #5)
- ✓ Information for Participants on Educational Rights:
[Information for Parents – In English – PDF](#)
[Information for Parents – En Español – PDF](#)
[Information for School-Age Youth – In English – PDF](#)
[Information for School-Aged Youth – En Español – PDF](#)
- ✓ [Housing Stabilization Plan](#) (Form #7)

All forms are available at:
[DOH RRH Documents](#).

Participant Income Determination

Once the participant has been admitted into the RRH program, the Case Management Provider must promptly determine the participant’s income. This occurs prior to housing search and signing a lease to ensure that the housing search is informed by the household’s anticipated ability to pay rent independently within 12 months. The information below on income determination applies both to the initial determination of income and to each subsequent [re-certification](#).

YHDP RRH projects are required to use the [YHDP Rent Calculation Tool to](#) determine participant income. All other RRH projects are required to use the [CT RRH Rent Calculation Tool](#) to determine participant income. The relevant income calculation and subsidy calculation tabs must be printed and maintained in the participant’s case file and/or scanned and maintained in the participant’s electronic case file.

Documents to Obtain or Complete at Income Determination

- ✓ Third-party documentation of income
- ✓ Bank statements documenting any assets
- ✓ Zero Income Affidavit (if applicable)
- ✓ [YHDP Rent Calculation Tool](#) (YHDP RRH only)
- ✓ [RRH Rent/Utility Calculation Tool](#) (Form #25A)

Included Income

Income calculations must include applicable income of all members of the household as specified in the lease. The most common kinds of income that must be included in the calculation of household income are:

- Employment income of all adults, including wages, salaries, overtime, tips, commissions, and bonuses
 - ✓ YHDP RRH uses gross employment income (i.e., the total amount prior to tax deductions and garnishments).
 - ✓ All other RRH uses net employment income (i.e., the amount remaining after tax deductions and garnishments; often referred to as “take-home pay”).
 - ✓ Employment income for minors is excluded unless the minor is the emancipated head of household.
- Social Security and Veteran’s Benefits
- Welfare Assistance
- Net income from a business (i.e., income after allowable business expenses)
- Payments in lieu of earnings, such as unemployment, disability compensation, worker's compensation, and severance
- Alimony and child support payments

- Regular contributions or gifts received from organizations or from persons not residing in the dwelling

In some cases, participants may have other sources of income that must also be included in the calculation of household income, for example:

- Interest, dividends, and other net income of any kind from real or personal property. Expenditures for amortization of capital indebtedness shall not be used as deductions in determining net income. An allowance for depreciation is sometimes permitted (see Chapter 5 in [HUD Handbook 4350.3.](#)). Any withdrawal of cash or assets from an investment will be included in income, except to the extent the withdrawal is reimbursement of cash or assets invested by the family. Where the family has net family assets in excess of \$5,000, annual income shall include the greater of the actual income derived from all net family assets or a percentage of the value of such assets based on the [current passbook savings rate](#), as determined by HUD;
- The full sum of periodic amounts received from social security, annuities, insurance policies, retirement funds, pensions, disability or death benefits, and other similar types of periodic receipts, including a lump-sum amount or prospective monthly amounts for the delayed start of a periodic amount (e.g., Black Lung Sick benefits, Veterans Disability, Dependent Indemnity Compensation, payments to the widow of a serviceman killed in action), except as otherwise excluded by HUD (see Chapter 5 in [HUD Handbook 4350.3.](#)).
- All regular pay, special pay, and allowances of a member of the Armed Forces, except as otherwise excluded by HUD (see Chapter 5 in [HUD Handbook 4350.3.](#)).

Excluded Income and Income Deductions

The most common kinds of income that must be excluded in the calculation of household income are:

- Coronavirus Relief (i.e., Economic Impact Payments, Recovery Rebate Credits, Child Tax Credits, Earned Income Credits, Federal Pandemic Unemployment Compensation)
- Employment income for children under 18 (unless emancipated head of household);
- Temporary, non-recurring or sporadic income/gifts;
- Earned income tax credits
- Payments for the care of foster children or foster adults (usually persons with disabilities unrelated to the tenant family, who are unable to live alone);
- Lump sum additions to assets such as inheritances, insurance payments (including payments under health and accident insurance and worker's compensation), capital gains, lottery, and settlement for personal or property losses;
- Amounts received by the family that are specifically for, or in reimbursement of, the cost of medical expenses for any family member;

- Income of a live-in aide, as defined in 24 CFR 5.403;
- The full amount of student financial assistance paid directly to the student or to the educational institution; and
- Resident service stipends. A resident service stipend is a modest amount (not to exceed \$200 per month) received by a resident for performing a service for the owner, on a part-time basis, that enhances the quality of life in the project. Such services may include, but are not limited to, fire patrol, hall monitoring, lawn maintenance, and resident initiative coordination. No resident may receive more than one such stipend during the same period of time.

In some cases, participants may have other sources of income that must also be excluded. For comprehensive guidance on less common forms of income to include and exclude when determining DOH RRH program income see Chapter 5 in [HUD Handbook 4350.3](#).

The standard income adjustments required in other types of CoC projects (i.e., the dependent deduction, disability deduction, childcare deduction, and medical expense deduction) are not applicable to the DOH RRH program. These deductions may not be applied when determining RRH participant income.

Gathering Income Documentation

The head of the participant household is responsible for providing the required income documentation at initial project intake, at each 90-day recertification, and at annual recertification. The Case Management Provider is responsible for determining whether a participant is unable to provide the necessary documentation and providing the required level of assistance, as needed. In some cases, if a participant has a disability, a reasonable accommodation may be necessary to adjust the process by which the documentation is obtained; however, the documentation must be obtained for all participants regardless of disability or other barriers. Participants must provide the required documents as detailed below, and rental assistance cannot be initiated without these documents.

Income from benefits or assistance can be documented by a form or letter issued by the agency providing the benefits, such as the Social Security Administration or CT Department of Social Services. On-the-books employment income must be documented by paycheck stubs or similar documentation. The amount of employment time documented depends on the frequency of the pay period:

- Weekly pay period (52 pay periods/year): obtain pay stubs covering at least four weeks of pay

- Bi-weekly pay period (26 pay periods/year): obtain pay stubs covering at least four weeks of pay
- Monthly pay period (12 pay periods/year): obtain pay stubs covering at least 1 month of pay

If household members have recent employment without the minimum number of pay stubs, or income is anticipated to fluctuate, the Provider can calculate probable income using the information available. See examples of how to estimate income on the following page.

Examples – Estimating Monthly Income

Amounts in all examples are rounded to the nearest whole number.

Mr. Ryder has a part-time job but was recently out due to an injury. They only have two weekly pay stubs available. Stub #1 shows weekly income at \$430. Stub #2 shows weekly income at \$390. They have returned to work and anticipate approximately the same schedule. Estimate weekly income as follows:

$$430+390=820$$

$$820*2=1640$$

Use \$1640 as estimated weekly income.

Ms. Chen recently started a new part-time job and has only one weekly pay stub available. The first week she was required to do paid training and clocked 30 hours. She anticipates only working 20 hours/week until she can arrange reliable childcare.

Stub #1 shows weekly income at \$300

Estimate weekly income as follows:

$$20/30=.6666$$

$$300*.6666=200$$

Use \$200 as estimated monthly income.

Mx. Lopez recently started a new part-time job. They started in the middle of a pay period and have only one bi-weekly pay stub available. During that period, they only worked 7 days, but they anticipate working 11 days per pay period. Stub #1 shows biweekly income at \$430.

Estimate bi-weekly income as follows:

$$430/7=61$$

$$61*11=671$$

Use \$671 as estimated bi-weekly income.

Mrs. Thorton occasionally gets paid overtime during her employer's peak season, which recently ended. She has four pay stubs, and the first two include overtime. The second two do not. She does not anticipate getting additional overtime this year. Stubs #3 and #4 show income at her usual weekly amount of \$360. Disregard the stubs that include overtime. Use \$360 as estimated weekly income.

Off-the-books employment income must also be reported and documented by the relevant third-party, or to the extent third-party documentation is not available, by written certification by the program participant (see additional details below).

The Case Management Provider is responsible for ensuring that current documentation of income, including countable assets and all applied income deductions, is maintained in participant files in accordance with HUD requirements (24 CFR 578.103; 24 CFR 576.500). Accepted forms of income verification are detailed in [Form #14](#). For each program participant who receives DOH RRH assistance, the Case Management Provider must keep the following documentation of income for each initial income determination and recertification in the participant's case file:

- Required rent calculation worksheet (i.e., either [YHDP rent calculation worksheet](#) or [CT RRH rent calculation tool](#))
- Third-party income source documents (e.g., most recent wage statement, unemployment compensation statement, public benefits statement) showing tax deductions and garnishments, if applicable; and
- Bank statement(s) for any assets held by adult household members.

To the extent that third-party source documents are unobtainable, the Case Management Provider must keep a written statement by the relevant third-party (e.g., employer, government benefits administrator) or the written certification by the Case Management Provider of oral verification by the relevant third-party of the income the program participant received.

To the extent that source documents and third-party verification are unobtainable, the Case Management Provider must obtain written certification by the program participant of the amount of income that the program participant is reasonably expected to receive.

Households Reporting Zero Income

In some cases, participants may report zero household income. At each initial certification and re-certification Case Management Providers must require each adult household member reporting zero income to complete a Zero Income Affidavit ([Form #15](#)).

While Case Management Providers are not required to investigate such claims, staff should be aware of any obvious signs of fraud. If readily available information raises doubts about the validity of the claim, the Case Management Provider should suspend processing of financial assistance and contact the relevant DOH contract manager for guidance.

Housing Location

Upon project entry, the participant will begin the process of locating an apartment with assistance provided as necessary by the Case Management Provider or Housing Location Provider. For more information about these services, see [Housing Location Provider Responsibilities](#). Participants' housing choices are not limited to particular buildings or landlords, and the assigned provider will inform the applicant of their right to choose the location and type of unit in which they wish to live, with restrictions only as allowable under the HUD requirements for [tenant-based rental assistance](#).

The assigned provider will assist the participant to identify a suitable housing unit in the most rapid manner possible. The goal is to secure a housing unit within 30 days from the date the participant is matched by the CAN or CCADV to the RRH project. The housing search must consider the participant household's current and anticipated future income and seek to locate an affordable unit. The participant should have the ability to pay rent independently by the time of discharge. Factors to consider during the housing search include current income, income history, options to increase income, ability to live with family/friends/roommates, and other low-cost housing options. Case Management or Housing Location Providers are responsible for ensuring that every effort is made to lease units with utilities included in the rent when participants have zero or very limited income. For more information on housing location, see [Section 3](#).

Unit Approval

The following are required prior to a unit being approved for rental assistance via the DOH RRH program:

Rent Reasonableness Determinations

The DOH RRH program will only provide rental assistance for a unit if the rent is determined by the Case Management or Housing Location Provider to be reasonable based on HUD requirements. The provider must determine whether the rent charged for the unit assisted with DOH RRH is reasonable in relation to rents being charged for comparable unassisted units, taking into account the location, size, type, quality, amenities, facilities, and

Documents to Complete Prior to Lease Signing

- ✓ [Rent Reasonableness Determination \(Form #8\)](#)
 - ✓ [HQS Inspection \(Form #9\)](#); Failed Inspection Letter (if applicable, Form #12)
 - ✓ [CBRS Map](#) (if applicable)
- Rent reasonableness and HQS are required at a minimum annually.

Forms are available at [DOH Rapid Rehousing Documents Resources](#).

management and maintenance of each unit. Reasonable rent must not exceed rents currently being charged by the same owner for comparable units not being assisted through DOH RRH.

Rent reasonableness assessments must be based on a minimum of 3 comparable unassisted units. All 3 comparable units used for the rent reasonableness determination must have equal or more expensive rent than the DOH RRH assisted unit. Comparable units must also be approximately the same size with similar amenities as the assisted unit and located in the same, whenever possible, or a similar neighborhood, as necessary. The provider should seek to identify comparable units that offer the same utility arrangement as the assisted unit (e.g., comparable and assisted units have utilities included in the rent). In some cases, particularly where the provider has negotiated a special arrangement in a housing market in which utilities included units are not typically available, that may not be possible.

When using comparable units with a different utility arrangement than the assisted unit, the provider must document adjustments based on the utility allowance (see rent calculation section for more information on utility allowances). For example, if the assisted unit has utilities included and no comparable utilities included units exist in the local housing market, the Housing Provider must document on the rent reasonableness determination that the rent for the assisted unit, as adjusted for the applicable utility allowance, does not exceed the rent for the comparable units. For participants receiving RRH financial assistance for longer than 12 months, documentation of rent reasonableness determinations is required at a minimum annually. See [Rental Assistance Beyond 12 Months](#). See sample *Rent Reasonableness Checklist and Certification* ([Form #8](#)).

[ESG funded RRH requires adherence to Fair Market Rent \(FMR\) as well as rent reasonableness standards. For more information, see HUD's brief.](#)

Housing Quality Standards (HQS) Inspection

Prior to approving a unit for rental assistance or authorizing a lease execution or renewal, the Case Management or Housing Location Provider must physically inspect the unit to determine if it meets HUD HQS – See [Form #9](#). The provider must schedule the HQS inspection as quickly as possible upon identification of the unit. Except when the owner does not make the unit available for inspection or unusual, extenuating circumstances exist, the inspection must be completed within 10 business days of unit identification.

The Case Management or Housing Location Provider must complete all applicable fields on the form and indicate any fields that are not applicable given the configuration of the unit. All persons performing HQS inspections must take [HUD's Lead-Based Paint Visual Assessment Training](#) and maintain a certificate of course completion in the project files. Though there is no additional

training or certification required for HQS inspectors, staff inspecting units should be familiar with the [guidance embedded directly on the HQS form](#) and with the [acceptability criteria](#).

The provider completing the inspection must notify the landlord, project participant and, if applicable, Case Management Provider of the inspection results. The provider must supply the Landlord with detailed information for all failed and inconclusive inspection items, so that he or she is fully aware of the work necessary to pass the HQS inspection – see [Form #12 Failed Inspection Letter](#). The unit must pass the HQS inspection before the execution of the assisted lease and the initiation of DOH RRH payments.

It is the responsibility of the provider to ensure that:

- An HQS inspection is completed at least annually for all units assisted through the DOH RRH program; and
- Documentation of compliance with these requirements, including inspection reports, is maintained (24 CFR 578.103; 24 CFR 576.500) in the participant chart.

Unit Size

For CoC funded projects, HUD requires that the unit have at least one bedroom or living/sleeping room for each two persons. Children of the opposite sex, other than very young children, may not be required to occupy the same bedroom or living/sleeping room. [24 CFR 578.75(c)(1); 24 CFR 578.103(a)(8)]

Lead Based Paint Visual Inspection

A lead-based paint visual assessment must be completed prior to providing rent assistance for all units constructed prior to 1978 in which a pregnant woman or child under the age of six is or will be living in the unit. This visual assessment must be documented on the HQS. Staff conducting the assessment must complete the [HUD web-based visual inspection training](#) and maintain documentation of training completion in project files.

Environmental Review

DOH RRH is subject to HUD's environmental review requirements (24 CFR part 50). DOH is responsible for maintaining the required Environmental Review documentation for each project and for making that documentation available for review upon request by HUD or the relevant CoC. If the project is serving households within a coastal community (see list on [Form #19](#)), the Case Management or Housing Location Provider is responsible for checking unit addresses against the [US Fish and Wildlife Service's Coastal Barrier Resource System Mapper](#) to ensure that no units are rented in Coastal Barrier Resource Units. If a unit is located within a coastal community, the provider should retain a copy of the Coastal Barrier Resource System (CBRS) map

documenting that the unit is not within a Coastal Barrier Resource Unit. Rental assistance cannot be provided to units within the Coastal Barrier Resources System.

SECTION 6: ADMINISTERING DOH RRH

Lease and RRH Rental Assistance Agreement Execution

If the unit meets all approval criteria outlined in [Section 5](#), the Case Management or Housing Location Provider is responsible for working with the participant and landlord to promptly arrange lease execution. Except when the owner or participants are unable to do so, the lease should be executed within 5 business days of unit approval. See unit approval requirements outlined above.

The Case Management or Housing Location Provider must ensure that a participant enters into a lease for a term of at least one year that is renewable and is terminable only for cause. The lease must be renewable for terms that are a minimum of one-month long. All participants and their respective landlords must also execute the VAWA lease addendum. (See [Form #16A – VAWA Lease Addendum](#)). In addition, the landlord and an authorized representative of the Provider Agency must execute [Form #16 - Rapid Re-Housing Rental Assistance Agreement](#). The effective date of the lease and Rental Assistance Agreement must be identical.

Proof on ownership can be demonstrated by a copy of the warranty deed, or print out of the property card, for example. These records are typically available online via the municipality’s assessor website or at the [CT Assessor’s Online Database](#).

Documents to Obtain/Provide at Lease Signing

- ✓ Executed Lease
- ✓ Executed [VAWA Lease Addendum](#) (Form #16A)
- ✓ Executed [RRH Rental Assistance Agreement](#) (Form #16)
- ✓ Rental Form [Lead Disclosure](#) – requires provision of “Protect Your Family from Lead in Your Home” pamphlet. (Form #11)
- ✓ Landlord [W-9](#) (Form #18)
- ✓ Proof of Property Ownership
- ✓ [Payment Letter](#) (Forms #17 or [17A](#))
- ✓ [Fund Request form](#) (Form #19A)
- ✓ Account documentation from utility company (if applicable)
- ✓ Utility arrears need and outstanding balance documentation – ESG only (if applicable)
- ✓ Documentation of moving cost need and amount (if applicable)
- ✓ DOH has compiled Form #6 for use to document that Participants Received all [required RRH Documents](#).

Numbered forms are available at [DOH Rapid Rehousing Documents](#).

The Provider is responsible for ensuring that all forms listed above are obtained and copies are provided to the participant and maintained in the participant chart.

Security Deposit

For an initial lease, a one-time security deposit of up to two months of the contracted rent may be paid to the landlord for individuals under 62 years of age. As specified in CT state law, for individuals 62 years of age or older, a one-time security deposit of up to one month of contracted rent may be paid to the landlord. For more information, see the [CT Judicial Branch page on rental security deposits](#).

The Case Management or Housing Location Provider is responsible for thoroughly documenting the condition of the unit at or prior to move-in (e.g., via photos maintained in the participant's chart). This is intended to help ensure that the landlord does not make improper charges against the security deposit for conditions that existed prior to move-in.

Calculating Participant Rent Share and Financial Assistance Amount

Case Management Providers shall use the applicable rental assistance calculation described below to determine the rent subsidy amount for each household depending on the type of RRH project in which they are enrolled.

CoC and ESG funded RRH – Includes CT DV/HT RRH

- **Month 1:** RRH rental assistance covers security deposit, first month's rent and any applicable utility allowance at 100% (see explanation below for how to apply the utility allowance)
- **Months 2-6:** Tenants pay 30% of net income towards rent and any applicable utility allowance; RRH rental assistance covers the remaining rent and utility allowance
- **Months 7 to program exit:** Tenant pays 60% of net income towards rent and any applicable utility allowance; RRH rental assistance covers the remaining rent and utility allowance;
- If tenant has been approved for PSH or other housing voucher (EHV, Mainstream, HCV, RAP) and is pending transition, tenant's portion of rent and any applicable utility allowance will be calculated at 30% of net income until they are transitioned to the permanent subsidy. Duration of rental assistance may not exceed 24 months.

Once 60% of the **household's net income** is equal to gross rent the subsidy ends; gross rent is equal to rent plus any applicable utility allowance. Except as noted above for transitions to a permanent housing subsidy, once the household reaches 12 months of rental assistance, the

subsidy ends. In rare instances, a provider can request an exception to extend rental assistance up to a maximum of 24 months. These exceptions need to be discussed by the Coordinated Access Network. Final approval is granted by the Department of Housing (See [Form #21 – RRH Exemption Form](#)). Such exceptions are not required for tenants approved for PSH or other type of permanent housing subsidy.

See [Section 5](#) for more information on determining participants' net income. Case Management Providers are required to use the [CT RRH Rent Calculation Tool](#) to determine participant income and rent.

The provider should give written notice of the amount of rental assistance a participant will receive to the participant. To help landlords understand the program and to set expectations, providers should send a letter or document to the landlord outlining the details of the program (See *Sample Letters that can be adapted.* [Forms # 17, 17A, 17B](#))

YHDP Providers Only:

Each YHDP RRH project may select which of the approved rent [calculation](#) methodologies they will use. They may select from the methodology described above under “CoC and ESG funded RRH” or the YHDP specific methodology described below. This selection and the start date of any change in methodologies must be documented in the project’s written policies and procedures. The project must use the selected methodology consistently for all participants. The project may not apply different rent calculation methodologies for different participants, except as necessary to transition from one methodology to the other. For example, a project electing to change from the YHDP specific method to the standard method effective 3/1/25 may elect to maintain the YHDP specific methodology for participants who entered the project prior to 3/1/25, while using the standard methodology for those who enter the project beginning on 3/1/25. Where there are multiple YHDP RRH projects operating within a single CAN, projects are encouraged to coordinate with their CAN to determine whether using a consistent methodology for rent calculation among all such projects would be advantageous.

In projects electing to use the YHDP specific methodology for rent calculations, Rental assistance is provided for the shortest amount of time necessary to prevent a return to homelessness and as a decreasing percentage of rent as follows:

- **Months 1 to 3:** 80% of rent
- **Months 4 to 6:** 60% of rent
- **Months 7 to 9:** 40% of rent
- **Months 10 to 12:** 20% of rent

The subsidy amount is adjusted as necessary to cap combined tenant rent and utility allowance contribution at 65% of **gross** household income.

YHDP Case Management Providers are required to use the relevant rent calculation tool to determine participant income and rent (i.e., either the [YHDP Rent Calculation Tool](#) or the [CT RRH Rent Calculation Tool](#)). See [Section 5](#) for more information on determining participants' income.

Projects must document income and re-calculate at a minimum every 90 days for all participants using the 65% cap, including documenting any change in income. Until such time as further guidance becomes available, determinations regarding whether income is sufficient to pay full rent can be made by a project supervisor. A participant is eligible for a utility allowance in accordance with the YHDP rental calculation tool if utilities are not included in the rent charge and utility company account documentation is provided.

If continued assistance is authorized beyond 12 months, the subsidy will continue to be set at 20% of rent with adjustments to the subsidy amount as necessary to cap combined tenant rent and utility allowance contribution at 65% of gross household income. Under no circumstances can rental assistance and/or case management continue beyond 24 months.

Utility Deposits, rental application fees, eligible participant transportation costs and other expenses may be accessible through YHDP support service funding. Providers should consult their agency's fiscal staff to confirm eligible costs within their DOH-approved budget. Expenditures must be documented in the participant's file.

Utility Allowances:

As required by HUD, RRH projects must include any applicable utility allowance when calculating rent contributions for program participants who are responsible for paying their own utilities. As noted below, the HUD requirements differ somewhat for the ESG and CoC programs. For the purpose of calculating participant rent contributions, "utilities" exclude telephone but include gas, oil, electric, sewage, water, and for CoC participants only trash removal. The Case Management Provider must obtain a utility allowance schedule from the State of CT Department of Housing. Utility allowances are updated and must be obtained annually.

Utility allowances must be entered into the [YHDP Rent Calculation Tool](#) or the [CT RRH Rent Calculation Tool](#). The Provider must enter the applicable allowance amounts into the Rent Calculation Tool, applying an allowance for each type of utility that the participant is responsible for paying in accordance with the lease. The Provider must not apply an allowance for any type of utility that is included in the rent/paid by the landlord. The Provider is responsible for ensuring that application of utility allowance amounts in the Rent Calculation Tool is aligned with the types

of utilities specified in the most current lease as the responsibility of the participant. Participants receiving ESG RRH assistance are responsible for providing the Provider with documentation of all applicable utility accounts that they are responsible for paying (e.g., a gas bill, an electric bill, a water bill, etc.).

In some cases, where the sum of all applicable utility allowances exceeds the participant's required contribution, the Fiduciary Agency will make a utility reimbursement payment to the utility company or directly to the client. Per HUD requirements, all such payments made using ESG RRH funds shall be made directly to the utility company. Also per HUD requirements, for CoC RRH, utility reimbursements shall to be paid in one of the following ways:

- A. Fiduciary Agency pays the program participant directly .
- B. Fiduciary Agency pays the utility company on behalf of the program participant. The Provider must document that they have the participant's permission to make payment to the utility company (Form #13) and must notify the participant in writing of the amount paid (Forms #17 and 17A). If the participant declines to provide such permission, the Fiduciary Agency shall make the payment using option A.

Samples Demonstrating How to Apply the Utility Allowance

Initial RRH Financial Assistance

Ms. Reid's lease indicates that she is responsible for paying heat and electric and rent for her unit is \$1000 per month. The utility allowances per month are: electric \$50 and heat \$50 (total: \$100 per month. Security is equal to two months' (i.e., \$2000).

- Security @ 2months = \$2000 +
- Rent @ 1 month = \$1000 +
- Utility allowance at 1 month= \$100
- Total initial RRH financial assistance payment = \$3100
 - ✓ \$3000 in RRH funds is paid to the landlord
 - ✓ \$100 in RRH funds is paid to utility companies

Month 2 RRH Financial Assistance

Ms. Reid's monthly net income is \$100.

- Rent @ 1 month = \$1000
- Utility allowance at 1 month= \$100
- Ms. Reid's share in month 2 is $\$100 \times .3 = \30
 - ✓ Ms. Reid pays \$30 to the utility company. (Remaining \$70 of the utility allowance is paid by RRH financial assistance)
 - ✓ Ms. Reid pays \$0 to the landlord
- Total month 2 RRH financial assistance payment = \$1070
 - ✓ \$1000 in RRH funds is paid to the landlord
 - ✓ \$70 in RRH funds is paid to utility companies
- Any remaining amount owed to utility companies is paid by Ms. Reid

Month 7 RRH Financial Assistance

Ms. Reid's monthly net income is \$800.

ACT Utility Allowance Payment Procedures for CoC RRH Projects

1. **For clients with a rental portion:** Subsidy payments will be deducted from the tenant's rental portion based on calculations on the rental calculation sheet. Regular initial/ongoing application procedures apply
2. **For households who do not have a rental portion, or whose subsidy exceeds the amount of rent** the tenant is responsible to pay, the following options are available:
 - a. **Direct Payment to Utility Company (Preferred)**
 - i. Tenant must authorize ACT to make payment to the utility company in writing ([Form #13](#))
 - ii. Requires copy of utility bill in the tenant's name or the name of someone in the household. If a utility bill is not available, a print out from the utility company detailing the account holder, utility service address, and account number are acceptable.
 - iii. W-9 is required for utility companies that are LLC's (most often oil or propane)
 - iv. Payments are reported to the IRS
 - v. The company receiving payment will be issued a 1099 in accordance with tax rules
 - b. **Direct Payments to Tenants (Uncommon)**
 - i. Requires client to provide a W-9 in their name with social security
 - ii. Payments will be reported to the IRS and counted as client income (this may affect client eligibility for entitlement programs such as SNAP and Medicaid)
 - iii. Client will be issued a 1099 for tax purposes
 - c. **Applications for assistance should be submitted using the ACT Ticketing system.**
 - i. Details on how to submit requests can be found on ACT's website here: <https://act-ct.org/rrh.html>
 - ii. For direct utility payments only:
 1. Email address community_assistance@act-ct.org
 2. Subject Line: **HMIS ID + Utility Subsidy + Month of Assistance**

Contact CCADV for utility allowance payment procedures for CT DV/HT RRH projects.

RRH Utility Subsidy Payments for ESG projects

1. **For clients with a rental portion:** Subsidy payments will be deducted from the tenant's rental portion based on calculations on the rental calculation sheet. Regular initial/ongoing application procedures apply
2. **For households who do not have a rental portion, or whose subsidy exceeds the amount of rent** the tenant is responsible to pay, please refer to the following guidance:
 - a. **Direct Payment to Utility Company (Required)**
 - i. Requires copy of utility bill in the tenant's name or the name of someone in the household. If a utility bill is not available, a print out from the utility company detailing the account holder, utility service address, and account number are acceptable. Other forms of proof of responsibility to make utility payments may be considered on a case by case basis.
 - ii. W-9 is required for utility companies **that are LLC's** (most often oil or propane)
 - iii. The company receiving payment will be issued a 1099 in accordance with tax rules
 - b. **Direct Payments to Tenants**
 - i. Direct payments to tenants are **not eligible** under ESG funding regulations
 - c. **Applications for assistance should be submitted using the ACT Ticketing system.**
 - i. Details on how to submit requests can be found on ACT's website here: <https://act-ct.org/rrh.html>
 - ii. For direct utility payments only:
 1. Email address community_assistance@act-ct.org
 2. Subject Line: **HMIS ID + Utility Subsidy + Month of Assistance**

Helping Participants to Understand Rent and Utility Calculations

The Case Management Provider is responsible for reviewing the rent calculation with all participants, helping them to understand how their rent obligation was calculated and addressing any participant questions regarding the calculation. Promptly upon determining income and calculating or re-calculating the participant's rent obligation and utility reimbursement, the Provider is also required to provide the participant with the Approval and Payment letter ([Forms #17 and 17A](#)), which specifies total contract rent for the unit, the participant's monthly rent contribution amount, utility reimbursement amount, and the requirement to report changes to

income and/or household composition. The template for that letter is available at [DOH Rapid Rehousing Documents](#).

RRH Fast Track

To facilitate rapid housing placement and reduce administrative burdens the following documents are not required for participants who are only receiving a security deposit and/or first month's rent and who are not anticipated to receive additional RRH financial assistance:

- [RRH Rent Calculation Tool](#)
- [Rental Assistance Agreement](#) (Form #16)
- [RRH Program Agreement](#) (Form #2)

All other forms and protocols, as described in this Guide are required. If a participant who entered a RRH project under these fast track protocols, requires additional financial assistance, prior to initiating that additional assistance, it is the responsibility of the Case Management Provider to complete the three forms listed above. The fast track protocol described here applies across all types of RRH projects.

Arrearages and Overpayments

Participants are required to pay their share of the rent as described above (see [Calculating Participant Rent Share and Financial Assistance Amount](#)). If a participant does not pay any or all of their rent share, they are not eligible to receive RRH financial assistance to cover the arrears. If a participant fails to provide current income information or submits incorrect or falsified information and, as a result, is charged a rent less than the amount required under the policies contained in this Guide, the participant must reimburse DOH for the difference between the rent the participant should have paid and the rent he/she/they paid. The participant is not required to reimburse DOH for undercharges caused by an error or omission of the Case Management Provider or the Fiduciary Agency. A participant shall have the right to a reasonable repayment agreement. Typically, such a repayment agreement will entail a reduction in rental assistance until the overpayment has been fully reimbursed or the participant is no longer enrolled in RRH. Such a repayment agreement may be resumed in the future, should the participant re-enroll in RRH. It is the responsibility of the Case Management Provider to notify the Fiduciary Agency of any overpayment of which they are aware. It is the responsibility of the Case Management Provider to work with the Fiduciary Agency and the participant to determine a reasonable repayment schedule.

Similarly, landlords must reimburse DOH for all overpayments. The Fiduciary Agency may permit the landlord to repay such overpayments in one lump sum or over a period of time through a reduction of normal rental assistance payments.

It is the responsibility of the Fiduciary Agency to track repayments and to discontinue the adjustment upon full repayment of the owed amount.

Processing Payments for Financial Assistance

To request financial assistance on behalf of a participant for the landlord, a provider must complete a Fund Request Form (See [Form #19](#)). The form includes a list of supporting documents that must also be submitted. The form also specifies the type of financial assistance requested and the amount. For information on eligible types of financial assistance see [Section 3](#).

For CT DV/HT RRH projects, the Case Management Provider submits the Fund Request and supporting documents in accordance with instructions provided by [CCADV](#). For ODFC YHDP RRH projects, the Case Management Provider submits the Fund Request and supporting documents in accordance with instructions provided by [The Housing Collective](#).

For all other DOH RRH projects, the Case Management Provider uploads the Fund Request Form along with the specified supporting documents to the participant's HMIS record and alerts [ACT](#) via email or fax. Specific instructions for those alerts are included on [Form #19](#). The Provider must also submit a Financial Service Request Form within [HMIS](#).

The [Fiduciary Agency](#) is responsible for promptly:

- Making the financial assistance payment and sending a copy of the payment to the Case Management Provider for filing in the participant chart; rent payment is issued between the first and fifth day of the month following receipt of a complete and accurate Fund Request Form by the 25th of the previous month; payments are generally issued within five business days of receipt of the fund request form; or
- Contacting the requesting Case Management Provider to notify them if additional information is necessary to process the payment; or
- Denying the request; and
- Updating HMIS.

For more information see Completing Financial Service Requests (FSR's) in [HMIS Requirements](#).

Specific procedures for how to submit a RRH payment request for the applicable RRH projects are detailed on the [ACT RRH](#) page. All projects are required to follow the payment processes established by the relevant fiduciary agency.

Move-In

Case Management Providers assist participants to move-in to units as promptly as possible. This includes accessing all available resources to assist with moving personal belongings, furnishing the apartment, and obtaining basic household goods and personal care items, such as cleaning supplies, linens, cooking equipment, and toiletries. Providers are responsible for ensuring due diligence in providing assistance to secure such items in advance of or promptly upon move-in. DOH acknowledges that the availability of such resources varies based on locality, and, in some cases, it may not be possible to obtain all items promptly. When that is the case, the Provider will work with the participant to obtain these items as quickly as possible. Providers are responsible for ensuring that participants do not move-in to entirely empty units and that each household member has a place to sleep, including, at a minimum, a mattress and bedding. Air mattresses are acceptable as necessary.

Interim Income Re-assessment, 90-Day Re-certification, and Annual Income Eligibility Review

Each household's needs must be re-assessed regularly to establish continued eligibility for and amount of continued financial assistance. Case Management Providers are responsible for **re-determining income and calculating the amount of rental assistance to be provided at a minimum every 90 days**. In addition, for any household reporting a monthly net income decrease of \$40 or more, Case Management Providers are responsible for promptly re-determining income and re-calculating rental assistance. It may also be helpful for Case Management Providers to re-determine income and re-calculate rent when a smaller decrease in net income would yield a rent reduction that would be meaningful to the participant. Case Management Providers are responsible for ensuring timely completion of 90-day re-certification and annual income eligibility reviews. See Re-Certification Requirements on the following page for more detail.

RE-CERTIFICATION REQUIREMENTS

Interim Income Re-determination

When a household reports a monthly net income decrease of \$40 or more, each interim re-determination must include:

- ✓ [Determination of household income](#) based on current [household composition](#); and
- ✓ Calculation of the amount of RRH rental assistance to be provided ([RRH](#) or [YHDP Rental/Utility Calculation Tool](#) (Forms #25A and #25B))
- ✓ [Fund Request Form](#) (Form #19)

90-Day Re-Certification

Each 90-day re-certification - calculated from the program participant's move-in date - must include:

- ✓ [Determination of household income](#) based on current [household composition](#);
- ✓ Calculation of the amount of RRH rental assistance to be provided; ([RRH](#) or [YHDP Rental/Utility Calculation Tool](#) (Forms #25A and #25B))
- ✓ [Fund Request Form](#) (Form #19)
- ✓ Assessment of progress on housing stability and income goals ([form #7](#));
- ✓ Assessment of any recent changes in circumstance that will impact income; and
- ✓ Assessment of any gaps in resources or support networks inhibiting the household's ability to increase income and achieve housing stability without financial assistance.
- ✓ Re-certification that the participant remains eligible for RRH assistance - to remain eligible, the program participant must continue to lack sufficient resources and support networks to retain housing without rental assistance;
- ✓ Documentation of an update to the housing stability plan;
- ✓ Assessment of eligibility for public benefits;
- ✓ Completion of the Recertification Form ([Form #20](#))

Annual Re-Certification

Annual re-certification is conducted at month twelve of initiation of RRH financial assistance and must include:

- ✓ All 90-day recertification items listed above;
- ✓ Determination of income eligibility - gross annual income must be below 50% of Area Median Income (AMI) for CoC funded projects and below 30% of AMI for ESG funded projects. Income limits are available [here](#).

See also:

- [Unit Approval](#)
- [Lease and RRH Rental Assistance Agreement Execution](#)
- [Rental Assistance Beyond 12 Months](#)

Household Composition Changes

Participants are required to report to the Case Management Provider changes to their household composition at the next [90-day redetermination](#) after the change occurs. This includes both additions and removals of members of the household. Upon receiving such a notification, the provider is required to re-determine income and adjust the participant rent calculation accordingly. If the household composition change results in a decrease in net monthly income of \$40 or more, the Case Management Provider is required to conduct an interim [income re-assessment](#). See [Unit Size](#) requirements for related restrictions.

Allowable Length of Assistance

Participants can receive up to twelve months of financial assistance without DOH approval. In rare cases, for a household that has returned to a housing crisis during their time in RRH, an exception can be requested (see [below](#)). Case managers should be exit planning (working with participants on housing stability goals) at least monthly and partnering with participants to adjust those plans accordingly if the household continues to struggle to maintain/afford the housing. In such situations, case managers may investigate the following questions with participants: Can the household reconnect with friends/family to stay with, can they find a more affordable unit, maybe they need to reconsider sharing a rental unit, etc.

RRH participants may receive case management assistance regardless of whether they are receiving financial assistance. Case management assistance, if necessary, may continue for up to 60 days beyond the termination of rental assistance. However, under no circumstances can the combined length of financial assistance and case management continue beyond 24 months from RRH project entry.

Rental Assistance Beyond 12 Months or In Excess of Determined Level

When a participant requires rental assistance exceeding 12 months or at an amount in excess of the amount specified in the section on [Calculating Participant Rent Share and Financial Assistance Amount](#), the Case Management Provider is responsible for submitting an exceptions form ([Form #21](#)) to the Fiduciary Agency. For financial assistance beyond 12 months in regular CoC/ESG and YHDP RRH, the Case Management Provider must also initiate a discussion of the household's circumstances and receive approval from the applicable Coordinated Access Network. Final

approval is granted by the Department of Housing. Steps for requesting rental assistance beyond 12 months are outlined below.

Requesting RRH Rental Assistance Beyond 12 Months

1. Case Management Provider presents the rationale for additional assistance during a CAN Case Conference, and CAN approves or declines the exception.
2. If approved, Case Management Provider prepares an Exceptions Form (See [Form #21](#)) and attaches or uploads [Recertification Form](#) in HMIS and CAN Coordinator/Housing Solutions Facilitator signs the Exceptions Form.
3. Case Management Provider submits the Exceptions Form to the applicable DOH CAN Manager. If approved, the DOH CAN Manager signs the Exceptions Form.
4. Case Management Provider submits the Exceptions Form to the applicable fiduciary agency and uploads the form to HMIS (or the comparable database).
5. The fiduciary processes the rental assistance.

Other requirements also apply. See [Unit Approval](#), [Lease Execution](#), [Annual Income Review](#) and [Moving to a Different Unit](#).

Moving to a Different RRH Unit

Participants are obligated to abide by the terms of their lease, which includes maintaining residence in their rental unit until lease expiration. At the end of the lease term, participants may move, if desired or needed with the following limitations:

- The new unit must meet [unit approval](#) requirements;
- The new unit must be located within the CoC through which the funding originates (except as noted below);
- Households must provide written notice to the Case Management Provider of their intention to move at least 60 days prior to the lease termination date;
- Households must provide written notice to the Property Owner/Manager/Landlord of their intention to move in accordance with any applicable provisions contained in their lease.

As required under the Violence Against Women Act (VAWA), each CoC must have an emergency transfer plan, which allows participants who are victims of domestic violence, dating violence, sexual assault, stalking or human trafficking to request an emergency transfer from the tenant's current unit to another unit. Housing Providers, Service Providers, and Owners must comply with the CoC [Emergency Transfer Plan for CT BOS](#) and for Opening Doors Fairfield County.

In situations that do not qualify under the relevant VAWA Emergency Transfer Plan, if a participant wants to move before the end of any lease term, permission may be granted by the

Case Management Provider, at their discretion, with a written statement from the Landlord releasing the household from the lease. Such moves may be an important way for participants to lower their housing costs.

To facilitate moves, there is no restriction on accessing a new security deposit, regardless of whether the move occurs at the end of a 12 month lease or during the same 12 month period as the initial lease. For information on security deposit refunds see [Exit Inspection, Property Damage and Security Deposit Refunds](#). For information on vacancy and damage payments see [Vacancies and Damages](#).

SECTION 7: TERMINATION FROM DOH RRH

Facilitating Transfers from Rapid Re-Housing to Permanent Supportive Housing

It is the responsibility of Case Management Providers to determine when a DOH RRH participant might need Permanent Supportive Housing (PSH) to maintain long-term housing stability. When a participant is identified as potentially needing to transition from RRH to PSH, it is the responsibility of the Case Management Provider to notify the CAN. The CAN will coordinate the following steps:

1. Determining whether the participant meets PSH eligibility requirements and documenting PSH eligibility;
2. Convening a Case Conference to discuss participant needs and housing options; and
3. Placing the participant on the By-Name List (BNL) for PSH as determined via the Case Conference or making recommendations to the Case Management provider for other housing alternatives.

This process is designed to ensure that PSH is targeted to people who have been homeless the longest and who have the most intensive service needs and to ensure that the recommendation to transition to PSH is not solely due to housing affordability.

For households placed on the BNL, it is the responsibility of the Case Management Provider to keep the CAN informed of the anticipated expiration of RRH assistance and other factors that might impact prioritization. For households matched to PSH, it is the responsibility of Case Management providers to coordinate with the PSH provider to assist the participant to locate another unit, connect to alternative service providers, and provide temporary supports during the transition. Whenever feasible, the Case Management Provider should arrange for a “warm hand-off” (i.e., meet together with the participant and the new PSH Case Manager to facilitate engagement and provide helpful information). Such supports may continue for up to 60 days after RRH financial assistance ends.

Facilitating Transfers from Rapid Re-Housing to Other Types of Subsidized Housing

It is the responsibility of Case Management Providers to determine when a household might need a longer-term housing subsidy other than PSH to maintain housing stability. For example, participants may need a subsidy to address affordability issues, though they do not need the services provided in PSH, or they may be ineligible or not prioritized for PSH.

When a household is identified as potentially needing a longer-term subsidy, it is the responsibility of the Case Management Provider to help the participant to:

- Explore and understand available options;
- Apply for affordable housing opportunities;
- Locate another unit;
- Connect to alternative service providers; and
- Provide temporary supports during the transition.

Whenever feasible, the Case Management Provider should arrange for a “warm hand-off” (i.e., meet together with the Participant and any new service providers to facilitate engagement and provide helpful information). Such supports may continue for up to 60 days after RRH financial assistance ends.

Preventing Termination and Returns to Homelessness

DOH is committed to making every effort to help participants to retain their DOH RRH assistance and remain stably housed. Case Management Providers are responsible for working with households who are experiencing problems that threaten to disrupt their housing stability to correct the problem(s) and comply with the terms of their lease. This includes helping participants to understand their tenancy responsibilities and to access services that can assist them in maintaining their housing.

Participants are expected to abide by the terms of their lease and with the requirements of the DOH RRH Program as described in this Guide. When they are unable or unwilling to do so, the Case Management Provider is responsible for ensuring a collaborative approach to problem solving that fully leverages all available resources. The provider will work with all parties, exercise judgment and examine all extenuating circumstances in determining when circumstances warrant termination from the DOH RRH Program (see [Allowable Reasons to Discontinue RRH Financial Assistance](#)). As described below, eviction does not result automatically in termination of the participant from the DOH RRH project.

DOH acknowledges that in some instances a return to shelter may be the safest option available particularly for participants who are fleeing domestic violence, dating violence, sexual assault, stalking, human trafficking or other dangerous conditions.

Eviction

A landlord may evict a household from a subsidized unit only through a court action, as detailed in [Connecticut landlord-tenant laws](#). The landlord must notify the Case Management Provider in writing of the commencement of any procedures for termination of tenancy.

Eviction does not result automatically in termination of the participant from the DOH RRH project.

Contact Requirements and No Contact Procedures

Case managers must meet with participants at least once per month during their enrollment in the DOH RRH program to assist them with ensuring housing stability. It is always the responsibility of the case manager to make contact with the household. All possible ways or methods of contacting the household must be explored. A final attempt to contact must be in writing, allowing five days for the participant to respond.

If there is no contact after 30 days of multiple documented attempts to reach the household, the case manager should exit the household from the program after taking all steps described [below](#). If the household calls after exit and is still experiencing homelessness, the case manager may help them to reconnect with the Coordinated Access Network by calling 211.

Service Providers are required to use a person-centered, low-barrier approach to case management focusing on strengths, drawing upon successes and prioritizing the things that are most important to the participant. If the case manager has not been able to have a robust check-in with the participant for more than 30 days, but has had contact with the participant, and the participant is still in need of services, the case manager should continue [assertive engagement](#) attempts. If a participant still needs services but has missed appointments or maintained irregular communication, the case manager should explore how to adjust services to make them more attractive to the participant. Case Managers should make every effort to creatively engage with the household on areas prioritized by the participant. Meetings should occur at locations and times chosen by the participant. Case Managers should be persistent in their efforts to understand what matters most to the participant and to build rapport. The goal is to minimize or eliminate any exits for “non-compliance” or “lack of participation,” especially if homelessness remains unresolved or a return to homelessness is an imminent risk. For more information about Case Management approaches, see [Section 3](#).

If the Case Manager is unable to use the strategies described in [Section 3](#) to engage a participant in monthly case management meetings, then the Case Manager should initiate and document a [re-set discussion](#).

CAN Case Conference

If a participant is at risk of returning to homelessness, the Case Management Provider is required to notify the local CAN at the earliest possible point in the process. The CAN will convene a case conference to evaluate the situation, determine intervention(s) that might help to preserve housing or secure an alternative placement, plan for the best possible outcome and try to prevent a return to homelessness. CT DV/HT RRH Case Management Providers should alert CCADV of such situations in lieu of the CAN.

Discontinuing Financial Assistance

Case Management Providers may authorize the discontinuation of financial assistance for the reasons indicated in the box below.

Allowable Reasons to Discontinue RRH Financial Assistance

- ✓ Participant indicates that they are no longer in need of or interested in receiving RRH assistance;
- ✓ Participant income exceeds one or more of these caps:
 - At the time of annual review, gross annual income must be below 50% of AMI for CoC funded projects and below 30% of AMI for ESG funded projects; Income limits are available [here](#).
 - household income is equal to or greater than the share of total combined monthly rent and utility allowance for which the participant is responsible (does not apply to YHDP);
 - For YHDP: a project supervisor has determined that participant income is sufficient to pay full rent;
- ✓ There is no communication for at least 30 days from the participant after multiple, documented provider attempts to contact (see [No Contact Procedures](#));
- ✓ The household is not providing required [income documentation](#);
- ✓ The household repeatedly declines to provide access to the unit to conduct a required [HQS inspection](#);
- ✓ The unit is vacant for 90 days or more due to incarceration, hospitalization, residential treatment or for any other reason; or
- ✓ The participant has engaged in or made serious, credible threats of violent behavior toward Case Management Provider, Housing Location Provider, or Fiduciary Agency staff; or
- ✓ The participant has reached 24-month maximum allowable term for rental assistance.

If the inability to meet program expectations is related to a participant's disability and a reasonable accommodation can ameliorate the issue, then the Case Management Provider is responsible for notifying the participant of the right to request a reasonable accommodation and for providing related assistance. If the participant opts to request a reasonable accommodation, the Case Management Provider should refrain from terminating the assistance until that request has been fully processed.

Prior to discontinuing financial assistance, under certain circumstances the Case Management Provider is responsible for taking the steps outlined in the box below.

Required Steps Prior to Discontinuation of RRH Financial Assistance

Steps applicable to discontinuation based on [no contact](#):

- ✓ Explore how to adjust services to make them more attractive to the participant; and
- ✓ Document multiple assertive engagement attempts, including a final written attempt.

Steps applicable to discontinuation based on no contact, not providing [required income documentation](#), or not making the unit accessible for an [HQS inspection](#):

- ✓ Engage participant in a re-set discussion to review the structure of the RRH program, the expectations around monthly case management, 90-day re-certification, annual re-certification, the housing stability plan, and next steps; and
- ✓ Send a letter to the participant documenting that discussion and next steps

Steps applicable to any participant who is at risk of return to homelessness

- ✓ [Notify the CAN](#) so that they can convene a case conference. CT DV/HT programs to notify CCADV.

The steps and responsibilities described in the box below apply regardless of the reason for discontinuing RRH Financial Assistance. These steps apply even when the participant requests the discontinuation or when the discontinuation is due to the participant exceeding the applicable income cap. Case management services may continue for up to 60 days after financial assistance ends.

Steps to Discontinue RRH Financial Assistance

1. The Case Management Provider is responsible for promptly notifying the participant in writing and providing the participant with their grievance policy. The reason for the discontinuation and the effective date of the discontinuation must be stated in the written notification (See Termination Letter - [Form 23A](#) and Discharge Letter [Form 23B](#))
2. The participant has the right to [appeal](#) the termination decision within 30 days.
3. The Case Management Provider is responsible for promptly sending a stop payment letter, which includes the effective date, to the landlord with a copy to the participant and to the Fiduciary Agency. (See [Form #22 – Stop Payment Letter](#)).
4. The Fiduciary Agency is responsible for promptly discontinuing financial assistance or contacting the requesting Case Management Provider to notify them if additional information is necessary to process the discontinuation.

For participants who are being exited from the RRH program see [Exiting Participants from RRH](#).

Numbered forms are available at [DOH Rapid Rehousing Documents](#).

Re-set Discussion

When there is no communication for at least 30 days from the participant, after multiple, documented provider attempts (see [No Contact Procedures](#)), the household is not providing [required income documentation](#), or not making the unit accessible for an [HQS inspection](#), it is the responsibility of the Case Management Provider to make and document at least two attempts to engage the participant in a discussion to:

- Review the structure of the RRH program, including expectations for monthly case management and 90-Day re-determination
- Review the housing stability plan;
- Determine if RRH can meet the needs and preferences of the household;
- Agree upon any adjustments to the housing stability plan; and
- Agree on next steps that the case manager and participant will take to enable continued enrollment in the RRH program and when each step will occur.

Following that discussion, the Case Management Provider is responsible for providing the participant with a letter documenting:

- What was discussed;
- The agreed upon next steps, who is responsible for each, and the timeline for each step; and
- The risk of termination of RRH assistance if the agreed upon next steps are not fulfilled by the dates indicated.

Exit Inspection, Property Damage and Security Deposit Refunds

If a participant is vacating the unit at the time rental assistance is discontinued, then the Case Management Provider is responsible for conducting an exit inspection. This inspection is intended to assess any damage to the unit caused by the Program Participant and determine if the full security deposit return is warranted. This inspection should be documented via a case note and photos maintained in the participant's chart.

The security deposit is not to be recouped by the fiduciary agency. The landlord will return the funds directly to the tenant, retaining funds to cover any damages or arrears as allowable under CT state law. Returned security deposits must include interest. For more information see the [CT Judicial Branch page on rental security deposits](#).

If the landlord returns funds in full or in part to an entity other than the tenant, that payment must be made by check payable to the [Fiduciary Agency](#). If a Case Management or Housing

Location Provider receives such a check, they are responsible for mailing it to the Fiduciary Agency.

The Fiduciary Agency is responsible for managing returned security deposits in a manner that is consistent with HUD [Program Income](#) requirements.

Vacancies and Damages

The following options for CoC funded RRH projects should be used judiciously only as necessary to keep landlords engaged in the RRH program (24 CFR 578.51). These options are not an [eligible expense](#) for ESG RRH projects.

- In some cases, grant funds in an amount not to exceed one month's rent may be used to pay for any damage to housing due to the action of a program participant. This shall be a one-time cost per participant, incurred at the time a participant exits a housing unit. Fund requests for damage payments must be initiated prior to exiting a participant from the RRH project.
- If an assisted unit is vacated before the expiration of the lease, the assistance for the unit may continue for a maximum of 30 days from the end of the month in which the unit was vacated, unless occupied by another eligible person.

Retention of Assistance

Surviving members of any household who were living in a unit assisted with CoC RRH funds at the time of the qualifying member's death, long-term incarceration, or long-term institutionalization, have the right to rental assistance until the expiration of the lease in effect at the time of the qualifying member's death, long-term incarceration, or long-term institutionalization (24 CFR 578.75).

Exiting the Participant from the RRH Project

The steps described below apply whenever a participant is exited from a RRH Project, regardless of whether the participant is receiving financial assistance and/or case management services.

1. The Case Management Provider is responsible for promptly providing the participant with the Termination Letter (See [Form #23 A](#) and [Form #23B](#)) and providing the participant with their agency's Grievance Policy (See *Sample RRH Grievance Policy - Form #24*). The reason for the termination and the effective date of the termination (see #3 below) must be stated in the written notification.
2. The participant has the right to [appeal](#) the termination decision within 30 days.

3. The effective date of the termination must be at least 30 days from the date of the termination letter.
4. Enter the exit date and all data from the HMIS RRH Discharge Form in HMIS

If the participant is receiving financial assistance:

5. The Case Management Provider is responsible for promptly sending a stop payment letter, which includes the effective date, to the landlord with a copy to the participant and to the Fiduciary Agency. (See [Form #22 – Stop Payment Letter](#)).
6. The Fiduciary Agency is responsible for promptly discontinuing financial assistance or contacting the requesting Case Management Provider to notify them if additional information is necessary to process the discontinuation.

SECTION 8: GRIEVANCE PROCESS

All Case Management Providers, Housing Location Providers, and Fiduciary Agencies are required to have written Grievance/Appeal Procedures.

Participant Right to Grievance

When a participant has a dispute, grievance, or complaint about the administration of the DOH RRH Program he/she/they may use the grievance process described below. This includes but is not limited to concerns regarding eligibility and termination decisions, prioritization, rent calculation, mistreatment by staff, and provision of services.

The grievance procedure outlined below is intended only to address issues specific to the DOH RRH Program. The procedure is not intended to address complaints about other programs nor to address complaints lodged by a participant about another participant. When a participant has a concern that is not covered under this procedure, the Case Management Provider is responsible for helping participants to determine the best avenue for resolution, including but not limited to helping them to understand and use the grievance procedure of the applicable agency.

It is the responsibility of the Case Management provider to:

- Have a written grievance policy and provide a copy of that policy to the program participant at RRH project entry and exit (See *sample RRH Grievance Policy* - [Form #24](#));
- Inform participants of their right to receive assistance from or be accompanied by an advocate (e.g., friend, family member, co-worker, attorney, etc.) at each step of the grievance process;
- Inform participants of their right to withdraw a grievance at any time; and

Grievance Procedure

This standardized grievance procedure is intended to address only issues specific to the DOH RRH program.

It is the responsibility of the Case Management Provider to designate a liaison for participant grievances. The name and contact information of the designated liaison must be included on the agency's grievance policy prior to provision of that form to any participant. The liaison will typically, but not always, be the person designated as the Participant Rights Officer in the Case Management Provider's grievance policy. The liaison will work with the participant to ensure that each step of this procedure is completed and documented appropriately. The liaison is responsible for shepherding the grievance through each successive level of review, ensuring that participants understand all grievance processes available to them and helping participants to effectively use the available grievance processes. Case management staff and supervisors with oversight of case management may not serve as liaisons.

Step 1

The participant requests to file a grievance and completes a Participant Concern Form

Immediately upon expression of a concern or complaint, the participant will be directed to the Case Management Provider's liaison to obtain assistance filing a grievance (see sample Participant Concern Form - [Form #24](#)). The **liaison is responsible for:**

- Documenting the concern or complaint in the participant's file;
- Explaining each step of the grievance procedure to the participant, including but not limited to the 15-day timeliness requirement described below; and
- Assisting with completion of the form, as necessary, to ensure that the description is brief, clear and provides all pertinent information.

This form is deliberately formatted to limit the length of the complaint and to encourage the participant to succinctly describe the issue of concern. Attachments are not acceptable.

Within 15 days of the occurrence that is being grieved, the **participant is responsible for** providing the liaison with the completed Concern Form or with the necessary information to enable completion of the form, with assistance from the liaison.

The liaison is also responsible for:

- Reviewing the form for completeness and timeliness within 3 business days of receipt of a completed form from the participant or completing the form within 3 business days of receipt of the necessary information from the participant - **the process will then proceed to Step 2;** or
- Documenting in the participant's file if the participant does not provide a completed form or the necessary information within the required 15-day window; **no further action is necessary.**

Step 2

The liaison directs the Concern Form to the case manager or other responsible staff person.

Immediately upon completion of the form, the liaison will forward it to the responsible staff person for resolution. Typically, but not always, this will be the participant's identified RRH case manager. The case manager or other responsible staff person will review the Concern Form and meet with the participant and liaison to resolve the matter. The liaison is responsible for scheduling this meeting within **five (5) working days** of forwarding the Concern Form. All reasonable efforts to meet face-to-face and resolve the concern to the participant's satisfaction should be made. Within one business day of the meeting, the liaison is responsible for documenting the proposed resolution on the Concern Form and providing a copy to all attendees.

If the matter is resolved, the liaison will obtain the participant's signature on the Concern Form, indicating satisfaction with the proposed resolution. The liaison will then place the signed Concern Form in the participant's confidential chart. **No further action is necessary.**

If the participant is dissatisfied with the outcome of the meeting, the liaison will obtain the participant's signature indicating dissatisfaction with the proposed resolution and will direct the Concern Form within **two (2) business days** of the meeting to the relevant agency in accordance with that agency's grievance policy. The relevant agency will typically, but not always, be the Case Management Provider. **The process will then proceed to Step 3.**

Step 3

The liaison directs the Concern Form to the relevant agency and the agency processes the Grievance in accordance with their grievance policy.

The relevant agency to which the Concern Form was directed will process the grievance in accordance with their grievance policy.

The liaison is responsible for:

- Obtaining a copy of the relevant agency's grievance policy;
- Helping the participant to understand and effectively use the relevant agency's grievance process;
- Coordinating with the relevant agency to ensure that the grievance is processed in accordance with the policy;
- Advocating with the relevant agency for resolution of the matter within **fifteen (15) business days of receipt by the relevant agency of the Concern Form**;
- Participating in any meetings relevant to the grievance, unless the participant objects to such participation; and
- Ensuring that the participant has received and understands the outcome of the agency's grievance process.

These liaison responsibilities are identical regardless of whether the relevant agency is the agency by which the liaison is employed.

If the matter is resolved via the relevant agency's grievance process, the liaison will obtain the participant's signature on the Concern Form, indicating satisfaction with the resolution. The liaison will then place the signed Concern Form in the participant's chart. **No further action is necessary.**

If the participant is dissatisfied with the outcome, the liaison will obtain the participant's signature indicating dissatisfaction with the proposed resolution, place the signed Concern Form in the participant's chart, and direct the Concern Form within **two (2) business days** of the meeting to the relevant CoC in accordance with that CoC's grievance policy. **The process will then proceed to Step 4.**

Step 4

The liaison directs the Concern Form to the relevant CoC in accordance with that CoC's grievance policy. The relevant CoC will process the grievance in accordance with their grievance policy.

The liaison is responsible for:

- Obtaining a copy of the relevant CoC's grievance policy;
- Helping the participant to understand and effectively use the relevant CoC's grievance process;
- Coordinating with the relevant CoC to ensure that the grievance is processed in accordance with the policy;
- Advocating with the relevant CoC for resolution of the matter within **fifteen (15) business days of receipt by the relevant CoC of the Concern Form**;
- Participating in any meetings relevant to the grievance, unless the participant objects to such participation; and
- Ensuring that the participant has received and understands the outcome of the CoC grievance process.

If the matter is resolved, the liaison will obtain the participant's signature on the Concern Form, indicating satisfaction with the resolution. The liaison will then place the signed Concern Form in the participant's confidential chart. **No further action is necessary.**

If the participant is dissatisfied with the outcome, the liaison will assist the participant to pursue the grievance through any final step available via the CoC's grievance policy. If the participant remains dissatisfied, the liaison will document that on the Concern Form and place the final Concern Form in the participant's chart. **The decision rendered via the final step in the relevant CoC's grievance process is final and no further action is necessary.**

For purposes of continuity and efficiency, the DOH RRH program will not process the same complaint by the same participant more than one time.

SECTION 9: PERFORMANCE STANDARDS PROJECT EVALUATION AND MONITORING

DOH Performance Standards

DOH works with the CoCs to adopt and periodically update performance standards. These standards are subject to change. See your DOH contract for specific standards required by DOH. See [Project Evaluation](#) for more information on CoC evaluation criteria. Criteria commonly used include but are not limited to utilization rate, fund expenditure, and increase in participant income.

DOH Performance Targets:

DOH has adopted the following performance targets for RRH projects:

Project Type	Core Outcomes			Entries from By Name List
	Exit Rate to Permanent Housing	Length of Stay from Project Entry	Return Rate to Homelessness	
Rapid Re-Housing	90%	Less than 180 days (less than 270 days for YHDP only)	Less than 10%	100%

In addition, DOH expects Case Management and Housing Location Providers to:

- Make every effort to secure housing for participants within 30 days of project entry; and
- Implement an ongoing quality improvement process that includes regular review of performance data, ongoing assessment of opportunities to strengthen projects outcomes, programmatic adjustments to improve project effectiveness, and input from participant households and staff.

RRH returns to homelessness data at the statewide, CAN, and project levels is available at the [CT HMIS Website](#).

Project Evaluation

Each CoC is responsible for evaluating projects it funds annually. This includes establishing evaluation criteria and performance benchmarks, collecting data necessary to perform the evaluation, analyzing that data, and producing evaluation reports describing the results of the

evaluation. This may also include establishing a corrective action process, through which projects that do not meet minimum standards, as defined by the CoC, are required to submit an improvement plan. CoCs may also establish certain limitations for Service Providers with projects in corrective action, such as ineligibility to apply for new CoC project funds.

Case Management Providers are required to provide all data and respond to all CoC and DOH requests for information related to project evaluation in accordance with the timelines established by the CoC or DOH. If projects do not meet the established minimum performance standards or fail to provide the information necessary, funding may be discontinued, or Case Management Providers may be replaced at the discretion of DOH or the CoC. For more information, including current renewal evaluation criteria, see [CT BOS Renewal Evaluation](#) and [ODFC News and Events](#).

CoCs also work with DOH to evaluate ESG funded RRH projects. This might include, for example, periodic review of ESG funded projects' [CAPER](#) data.

Fully Spending Grant Funds

To ensure that limited federal resources are used to their fullest extent toward ending homelessness, it is critical that projects come as close as possible to fully spending all available funds. Each CoC may conduct an analysis of spending data through their renewal evaluation process or at other times at their discretion.

Case Management Providers are responsible for working with DOH and the Fiduciary Agency to:

- Closely monitor expenditures on all budget line items for all DOH RRH grants;
- Review reports provided by DOH, the Fiduciary Agency or the CoC, ensuring data accuracy, and supplementing the information with more current data whenever such data is available;
- Promptly determine the reason for any under-spending and whether the under-spending is anticipated to continue in a manner that will result in funds not being fully spent at the end of the grant term;
- Track spending over time to identify patterns that may indicate that the project is regularly unable to fully spend allocated funds;
- Work with DOH to seek a HUD grant agreement amendment to shift funds among budget line items;
- Take prompt action to correct any under-spending, including identifying any amount that the project is regularly unable to spend and that should be returned to the CoC to fund new projects;
- Ensure that the grant does not expend more funds than allocated in its budget; and

- Promptly provide any information requested by DOH, the Fiduciary Agency or the CoC related to spending.

If projects are not fully spending, DOH and the CoC both reserve the right to reduce project budgets permanently at their discretion.

Project Monitoring

HUD requires CoCs to monitor funded projects, and it requires recipients of CoC funds to monitor subrecipients. CoCs may also monitor projects at their discretion, and typically monitor a subset of projects annually. DOH also monitors its CoC and ESG subrecipients annually. Monitoring is intended to:

- Ensure projects are prepared for HUD monitoring visits;
- Reduce the risk of funding being recaptured by HUD;
- Support compliance with HUD requirements, DOH requirements as described in this Guide, and local CoC requirements as established in written standards; and
- Identify areas of need for training and technical assistance.

Projects are selected for monitoring by DOH or the CoC based on a variety of factors, which may include, for example, renewal evaluation scores, project size, project location, and previous monitoring reports. Monitoring protocols are established by each CoC and by DOH at their discretion. Monitoring typically entails:

- Review of rental assistance administration records;
- Review of eligibility documentation;
- Review of participant service charts maintained by the Case Management or Housing Location Provider;
- Review of subrecipient agency fiscal records;
- Review of subrecipient agency policies; and
- Interviews with project staff and consumers.

Case Management and Housing Location Providers are required to accommodate all CoC and DOH requests for and access to information related to monitoring, in accordance with the timelines established by the CoC or DOH. If monitoring reveals significant non-compliance or projects fail to provide the information or access necessary, funding may be discontinued, or providers may be replaced at the discretion of DOH or the CoC.

For more information, see [CT BOS Project Monitoring](#).

Assessing and Advancing Equity

People of color and people who identify as LGBTQIA+ are more likely to experience homelessness. Systematic discrimination is prevalent against people who identify as Black, Indigenous, and People of Color (BIPOC), Latinx and/or LGBTQIA+. When BIPOC, Latinx, and LGBTQIA+ people seek assistance to exit homelessness and obtain stable housing, they often face racism, discrimination, and stigma. Access to culturally responsive and equitable services is essential to ending their homelessness. Partnerships between service providers and people with lived experience of homelessness is one key to ensuring access to such services, when coupled with service providers taking other proactive steps to ensure that they are providing culturally responsive services.

DOH and CoCs may consider equity indicators through project evaluation and monitoring. DOH strongly encourages Case Management Providers to take action to ensure that their services are advancing an equity agenda. This might include, for example:

- A. Recruiting, retaining and/or promoting people with lived experience of homelessness in staff and Board positions;
- B. Strengthening opportunities for people with lived experience of homelessness to shape homeless services programs;
- C. Recruiting, retaining and/or promoting people who identify as BIPOC, Latinx and LGBTQIA+ in staff and Board positions;
- D. Requiring training for CoC Program staff on topics such as the history of race, homophobia and transphobia and housing discrimination and their impact on housing stability for marginalized populations; the impact of discrimination, racism, homophobia, and transphobia on people who experience homelessness and on housing policies, programs, services and outcomes; interrupting and re-directing microaggressions; and creating intentional space for conversations and actions to address racism, homophobia, and transphobia;
- E. Incorporating [restorative justice practices](#) into homeless programs;
- F. Developing partnerships with local organizations that focus on work with marginalized populations;
- G. Analyzing who gets access to the agency's homeless services programs and analyzing program outcomes by race, ethnicity, sexual orientation, and gender identity to determine if access and/or outcomes are disparate; and
- H. Planning and implementation of steps to address any disparate access or outcomes.

SECTION 10: OTHER PROGRAMMATIC AND OPERATIONAL REQUIREMENTS

Violence Against Women Act

The Violence Against Women Act (VAWA) provides protections for survivors of domestic violence, dating violence, sexual assault, stalking and human trafficking. VAWA protections are not only available to women; they are available equally to all individuals regardless of sex, gender identity, or sexual orientation. Though VAWA grant funded programs are regularly reauthorized by Congress, VAWA contains no sunset provision and does not expire. The requirements described in this section apply regardless of Congressional reauthorization of the grant funded programs.

The DOH RRH program conforms to the provisions of VAWA as follows:

Protections for Applicants for Assistance

Applicants who otherwise qualify for assistance under the DOH RRH program cannot be denied admission or denied assistance because they are or have been a survivor of domestic violence, dating violence, sexual assault, stalking or human trafficking or as a result of adverse factors resulting from the abuse (e.g., poor credit or criminal history).

Protections for Participants

Participants receiving assistance through the DOH RRH program may not be denied assistance, terminated from participation, or evicted from their rental housing because they are or have been a survivor of domestic violence, dating violence, sexual assault, stalking, or human trafficking or as a result of adverse factors resulting from the abuse. If participants, applicants, or any affiliated individual⁵ is or has been the survivor of domestic violence, dating violence, sexual assault, stalking by a member of your household or any guest, or human trafficking, they may not be denied rental assistance or occupancy rights solely on the basis of criminal activity directly relating to that domestic violence, dating violence, sexual assault, stalking or human trafficking. If an abuser is an unauthorized occupant and the survivor, because of the abuse, did not have choice in allowing the abuser to occupy the unit, unauthorized occupancy cannot be sole grounds for eviction.

Removing the Abuser or Perpetrator from the Household

⁵ Affiliated individual means: (1) A spouse, parent, brother, sister, or child of that individual, or a person to whom that individual stands in the place of a parent or guardian (for example, the affiliated individual is a person in the care, custody, or control of that individual); or (2) Any individual, tenant, or lawful occupant living in the household of that individual.

The landlord may divide (bifurcate) a lease in order to evict or terminate assistance to the individual who has engaged in criminal activity (the abuser or perpetrator) directly relating to domestic violence, dating violence, sexual assault, stalking or human trafficking. If the landlord chooses to remove the abuser or perpetrator, the landlord may not take away the rights of other eligible tenants in the unit or otherwise punish the remaining tenants. If the evicted abuser or perpetrator was the sole tenant to have established eligibility for assistance under the program, the landlord must allow other household members who are or have been survivors to remain in the unit for a period of time, in order to establish eligibility under the program or under another HUD housing program covered by VAWA, or, find alternative housing.

In removing the abuser or perpetrator from the household, the landlord must follow federal, state, and local eviction procedures. In order to divide a lease, the landlord may, but is not required to, ask the participant for documentation or certification of the incidences of domestic violence, dating violence, sexual assault, stalking or human trafficking. See section on certifying below.

Moving to Another Unit

The DOH RRH program allows survivors of domestic violence, dating violence, sexual assault, stalking or human trafficking to move to another subsidized unit to protect their safety and maintain affordable housing. All projects are required to comply with the relevant CoC's emergency transfer plan (see [CT BOS Emergency Transfer Plan](#); contact [ODFC](#) to obtain a copy of their plan). Providers must retain records for all emergency transfer requests and outcomes. Participants living in CoC assisted units who qualify for emergency transfers but cannot make an immediate internal emergency transfer (i.e., within the inventory of the agency currently assisting them) must be provided with priority over all other applicants for a new unit elsewhere. This means that the person qualified for the emergency transfer would be prioritized for the next available unit rather than following the usual By-name List protocol.

Certifying You Are or Have Been a Survivor of Domestic Violence, Dating Violence, Sexual Assault, Stalking or Human Trafficking

The landlord can, but is not required, to ask a participant to certify that they are or have been a survivor of domestic violence, dating violence, sexual assault, stalking or human trafficking. Under most circumstances, survivors need only self-certify. See HUD Form 5382 - [VAWA Incident Certification Form](#) and HUD Form 5383 - [Emergency Transfer Request Form](#).

Lack of documentation should not cause a barrier to receiving protections needed to keep survivors safe. Landlords, Housing Location Providers, and Case Management Providers may take participants at their word or can ask for self-certification through the VAWA Incident Certification

or Emergency Transfer Request forms. Only when there is conflicting evidence (e.g., regarding who is the abuser and who is the survivor) can landlords and providers ask for third-party documentation. Such documentation must be in writing, and the requestor must give the participant at least 14 business days to provide the documentation. Any of the following must be allowed as third-party documentation: police, court or administrative records, statements from a third-party (e.g., victim service provider, medical or mental health professional, or attorney), or any other statement or evidence that the Housing Provider has agreed to accept. It is the participant's choice which of the above to submit.

Confidentiality

The Housing Location Provider, Case Management Provider and Landlord must keep confidential any information provided by a participant related to exercising their rights under VAWA, including the fact that they are exercising their rights under VAWA. The provider and landlord must not allow any individual administering assistance or other services on behalf of the DOH RRH program (for example, employees and contractors) to have access to confidential information except for reasons that specifically call for these individuals to have access to this information under applicable federal, state, or local law. The Housing Location and Case Management Provider must not enter confidential information into any shared database or disclose confidential information to any other entity or individual. Disclosure is permitted only in the following circumstances:

- The participant gives written permission to release the information on a time-limited basis;
- The landlord needs to use the information in an eviction or termination proceeding, such as to evict the abuser or perpetrator or terminate the abuser or perpetrator from assistance under this program; or
- A law requires release of the information.

VAWA does not alter the Case Management Provider, Housing Location Provider, or Landlord duty to honor court orders about access to or control of the property. This includes orders issued to protect a survivor and orders dividing property among household members in cases where a family breaks up.

Reasons a Participant Eligible for Occupancy Rights under VAWA May Be Evicted or Assistance May Be Terminated

A participant can be evicted and assistance can be terminated for serious or repeated lease violations that are not related to domestic violence, dating violence, sexual assault, stalking or human trafficking committed against the participant. However, landlords may not hold tenants

who have been survivors of domestic violence, dating violence, sexual assault, stalking or human trafficking to a more demanding set of rules than it applies to tenants who have not been victims.

The protections described herein might not apply, and a participant could be evicted and RRH assistance terminated, if the landlord or Case Management Provider can demonstrate that not evicting or terminating assistance would present a real physical danger that: 1) would occur within an immediate time frame, and 2) could result in death or serious bodily harm to other tenants or those who work on the property.

If the Case Management Provider can demonstrate the above, they may only terminate assistance if there are no other actions that could be taken to reduce or eliminate the threat.

Notification of VAWA Rights

The CAN or Case Management Provider is required to provide the [Notice of Occupancy Rights](#) and/or [VAWA Incident Certification Form](#) to each adult participant and applicant as described below.

The Notice of Occupancy Rights must be provided by the CAN when applicants are applying for DOH RRH assistance.

The Notice of Occupancy Rights & Incident Certification Form must also be provided at each of the following times:

- (A) When an applicant is denied DOH RRH Assistance (provided by the CAN if the CAN makes the determination or by the Case Management Provider if the project makes the determination);
- (B) When a participant is admitted to the DOH RRH program (provided by the Case Management Provider);
- (C) When a participant is re-certified annually for the DOH RRH program (provided by the Case Management Provider); and
- (D) When a participant is notified of termination of assistance provided by the Case Management Provider).

In addition, the landlord is required to provide to each adult participant the Notice of Occupancy Rights & Incident Certification Form when a program participant receives notification of eviction.

Non-Compliance with VAWA Requirements

If a participant believes that their VAWA rights have been violated and needs additional assistance, the participant may contact or file a complaint with the HUD field office. Contact information is below:

Hartford Field Office

One Corporate Center
20 Church Street, 10th Floor
Hartford, CT 06103-3220
Phone: (860) 240-4800
Email: ct_webmanager@hud.gov
Fax: (860) 240-4850
[TTY: \(800\) 877-8339](tel:(800)877-8339)

Every Student Succeeds Act

Federal law ensures educational rights and protections for children and young adults 18-24 experiencing homelessness. Protections apply to children and youth who are living with a parent or guardian and those who are not. Every school district and public charter school in CT is required to designate a homeless liaison who is responsible for ensuring the identification, school enrollment and stability, attendance and opportunities for academic success of students in homeless situations.

Case Management Providers are responsible for providing information about educational rights to each family with children and young adult 18-24 at intake into the DOH RRH Program and as needed during the course of their participation in the program. This information can be found here:

- [Information for Parents – In English – PDF](#)
- [Information for Parents – En Español – PDF](#)
- [Information for School-Age Youth – In English – PDF](#)
- [Information for School-Aged Youth – En Español – PDF](#)

Information is also available at the [National Center for Homeless Education](#).

Case Management Providers serving families with children or young adults 18-24 are responsible for meeting the requirements below and are required to adopt similar policies to those outlined below.

The purpose of the policy described below is:

- To ensure that participants are helped to understand their educational rights established under Subtitle VII-B of the McKinney-Vento Homeless Assistance Act and most recently reauthorized by the Every Student Succeeds Act;
- To ensure that children and young adults are immediately enrolled in school, as required by federal and state law; and
- To ensure that children and young adults are connected to transportation and educational services to help them succeed in school.

DOH requires that:

1. All DOH RRH housing shall be located in neighborhoods that are accessible to community resources and services, including schools, libraries, and other educational services;
2. The Case Management Provider is responsible for designating at a minimum 1 staff member who is responsible for:
 - a. Ensuring that all families with children and young adults participating in the DOH RRH project are informed about their educational rights and their eligibility for educational services at intake and as necessary thereafter;
 - b. Ensuring that no matter where they live, how long they have lived there, or how long they plan to stay, all children and young adults participating in the project are enrolled in school immediately, even if they lack the paperwork normally required (e.g., school records, records of immunization, and other required health records, proof of residency, guardianship, and other documents), are unable to pay fines or fees, or have missed application or enrollment deadlines. Students have the right to enroll in school and attend classes while the school gathers needed documents. Enrollment shall occur as quickly as possible and within no more than 48 hours of project entry. Children and young adults who are not required by state law to enroll in school shall be encouraged and assisted, but not required, to enroll. Families shall be encouraged and assisted to enroll children in early childhood education programs. Enrollment includes attending classes and participating fully in school activities and also applies to youth without a parent or guardian;
 - c. Assisting unaccompanied youth to choose and enroll in a school, giving priority to their wishes and assisting to exercise their right to appeal;
 - d. Advocating as necessary to ensure that homeless students are able to continue to attend their school of origin (i.e., where they went before becoming homeless or the school in which they were last enrolled) the entire time they are homeless and until the end of the academic year during which they find permanent housing. This includes pre-schools and the designated receiving school at the next grade level when a student completes the final grade level served by the school of origin. Remaining in the school

- of origin should be presumed to be in the best interest of the student unless contrary to the request of the parent, guardian or unaccompanied youth;
- e. Assisting, as necessary, to ensure that the parent, guardian, or unaccompanied youth is provided with the required written explanation of decisions made by school districts/charter schools and how to appeal them, and to ensure that they are referred to the local school district's homeless liaison who must carry out the dispute resolution process as expeditiously as possible;
 - f. Assisting, as necessary, to appeal any decision by the local school district or charter school that it is not in the student's best interest to attend the school of origin or the school where they currently live if requested by the parent, guardian or unaccompanied youth;
 - g. Advocating, as necessary, to ensure that if a dispute arises over eligibility, school selection, or enrollment, the student is immediately enrolled in the school in which enrollment is sought, pending resolution of all available appeals;
 - h. Advocating, as necessary, to secure the transportation services to which students are entitled (i.e., to and from the school or preschool of origin, including until the end of the year when the student obtains permanent housing);
 - i. Assisting, as necessary, to secure temporary transportation services through other means, if possible, when school districts/charter schools are unable to immediately provide such required services;
 - j. Advocating on behalf of homeless students, as necessary, to ensure that they receive the services for which they are eligible, according to their needs and comparable to those provided to other students, including assistance from the local school district's homeless liaison, Early Intervention Program for Infants and Toddlers with Disabilities, Head Start, other preschool programs, services for disabled students, free school meals, services for English language learners, gifted and talented services, before and after school care, career and technical education, summer learning, online learning, and referrals to health, mental health, dental and other services;
 - k. Advocating, as necessary, to ensure that homeless students who meet the relevant eligibility criteria do not face barriers to accessing academic and extracurricular activities, including magnet and charter schools, summer school, career and technical education, advanced placement, online learning, and athletic programs;
 - l. Advocating, as necessary, to ensure that students receive appropriate full or partial credit for coursework, including consulting with the prior school about partial coursework completed, evaluating students' mastery of partly completed courses, and offering credit recovery;
 - m. Advocating, as necessary, to ensure that all homeless youth receive information and individualized counseling regarding college readiness, college selection, the application

- process, financial aid, and the availability of on-campus supports, and that unaccompanied homeless youths are informed of their status as independent students for the purposes of federal financial aid for postsecondary education and assisted in receiving verification of such status;
- n. Advocating, as necessary, to ensure that records, including information about a student's living situation, are kept private;
 - o. Helping, as necessary, homeless students to succeed in school and to get help from the local homeless education liaison;
 - p. Developing relationships, as necessary, with colleges to access higher education services specifically for homeless young adults;
 - q. Dedicating at least one staff person who is responsible for:
 - Helping participants to understand their educational rights;
 - Ensuring that children and young adults are enrolled in school and early childhood education;
 - Ensuring that students get access to all services, programs, and extracurricular activities for which they are eligible; and
 - Ensuring that children and young adults receive the transportation services to which they are entitled.
 - These need not be the only responsibilities of the designated staff person.
 - r. Ensuring that the designated staff person is involved in the development of participants' service plans where there are extensive or significant unmet educational needs; and
 - s. Ensuring that no policies, procedures, or practices that are inconsistent or interfere with the educational rights established under federal law are adopted by the project.

Reasonable Accommodations

All partners involved in the DOH RRH Program are required to make reasonable accommodations in rules, policies, practices and services, when such an accommodation may be necessary to afford persons with disabilities equal opportunity to use and enjoy a RRH unit, case management, housing location services or other program activity. Providers must refrain from refusing residency or services to persons with disabilities or placing conditions on their residency or services because the persons may require reasonable accommodations.

Participants or applicants can make a reasonable accommodation request orally or in writing. They should explain what type of accommodation they are requesting and, if the need for the accommodation is not readily apparent or known to the provider, explain the relationship between the requested accommodation and their disability.

An applicant or resident is not entitled to receive a reasonable accommodation unless they request one. However, the Fair Housing Act does not require that a request be made in a particular manner or at a particular time. A person with a disability need not personally make the reasonable accommodation request; the request can be made by a family member or someone else who is acting on the person's behalf.

Although a reasonable accommodation request can be made orally or in writing, it is usually helpful for both the resident and the housing provider if the request is made in writing. This will help prevent misunderstandings regarding what is being requested and when it was requested, and it provides evidence that the request was made. A provider has an obligation to provide prompt responses to reasonable accommodation requests.

A request for a reasonable accommodation may be denied if providing the accommodation is not reasonable (i.e., if it would impose an undue financial and administrative burden or would fundamentally alter the nature of the provider's operations). Documentation of all requests for reasonable accommodations as well as actions taken in response to such requests must be maintained in participant charts. DOH strongly encourages Fiduciary Agencies and Housing Location and Case Management Providers to consult with DOH Individual Family and Support Programs staff prior to denying any request for a reasonable accommodation.

For more information, see the [Joint Statement of HUD and DOJ – Reasonable Accommodations Under the Fair Housing Act](#).

Record Retention

As per the CoC Program Interim Rule (578.103) and ESG Program Interim Rule (576.500), all records pertaining to CoC and ESG funds must be retained for the greater of 5 years or the period specified below. Participant eligibility documentation must be maintained for 5 years after the expenditure of all funds from the grant under which the participant was served by ESG or CoC grant funds.

Confidentiality

Case Management and Housing Location Providers are required to abide by all applicable federal and state confidentiality requirements. This may include, for example:

- Federal [VAWA](#) confidentiality provisions.
- Federal [HIPAA requirements](#) if the provider is a “covered entity”; more information is also available from HHS [here](#).
- Federal [HMIS requirements](#);

- CT State laws and DOH Policies and Directives;

Collateral contacts must be authorized by the participant via a signed release of information maintained in the case file indicating consent for exchange of information.

Case Management and Housing Location Providers must develop and implement written procedures that comply with all applicable federal and state confidentiality requirements as set forth in executed DOH contracts this includes but is not limited to procedures to ensure (24 CFR 578.103 and 576.500):

- All records containing protected identifying information of any individual or family who applies for and/or receives Continuum of Care assistance will be kept secure and confidential; this includes ensuring that all confidential material is double locked when not actively in use (e.g., paper charts are maintained in a locked file cabinet located in a locked office).
- The address or location of any family violence project assisted with Continuum of Care funds or any domestic violence, dating violence, sexual assault, stalking or human trafficking shelter project assisted with ESG funds will not be made public, except with written authorization of the person responsible for the operation of the project;
- The address or location of any housing of a program participant will not be made public, except as provided under a preexisting privacy policy of DOH or subrecipient of CoC grant funds and consistent with state laws regarding privacy and obligations of confidentiality; and
- Any Confidential information Breach that occurs within DOH RRH projects will be reported to DOH and the Connecticut Office of the Attorney General as soon as practical but no later than 24 hours after the project becomes aware of or suspects a breach; and
 - Within 3 business days after notification, the DOH RRH project must present a credit monitoring and protection plan to the Commissioner of Administrative Services, DOH, and the Connecticut Office of the Attorney General, for review and approval; and this credit monitoring and protection plan shall:
 - Include but not be limited to reimbursement for the cost of placing and lifting 1 security freeze per credit file ([C.G.S. 36a-701a](#)) at the expense of the DOH RRH project;
 - Be made available to all individuals affected by the Confidential Information Breach;
 - Be approved by the State and cover a length of time commensurate with the circumstances of the Confidential Information Breach; and

- Have all associated costs and expenses borne by the DOH RRH project and not be recoverable from DOH, or any State of Connecticut entity or affected individuals.

Lead agencies are responsible for maintaining a copy of any subcontractor's confidentiality policies on file.

Number of Assisted Households

Each DOH RRH Project must serve at least as many program participants as shown in its grant agreement with HUD or contract with DOH. That number is established for CoC funded projects through the project application submitted to HUD annually through the CoC Program Competition and may be amended through the technical submission and/or grant amendment processes (for more information see Significant Changes and Definitions sections). That number is established for ESG funded projects through the corresponding DOH contract.

DOH encourages projects to serve more than the required number of program participants whenever feasible. For example, if the amount in a grant reserved for rental assistance over the grant period exceeds the amount that will be needed to pay the actual costs of rental assistance, due to such factors as program participants being able to pay a portion of the rent or contract rents being lower than FMRs, Case Management Providers may use the excess funds to serve a greater number of program participants (See [Fully Spending Grant Funds](#) for more information).

Ensuring that the project serves at least the minimum required number of participants typically necessitates close coordination between Case Management Providers, the Fiduciary Agency and DOH. These partners are responsible for working together to ensure that projects remain fully occupied and serve the greatest number of participants possible given available resources. DOH and the CoCs reserve the right to take appropriate action when projects fail to consistently maintain full occupancy. Such actions may include, for example, placing the project in corrective action status, changing the Case Management or Housing Location Provider, or discontinuing project funding (for more information, see the [Project Evaluation and Monitoring](#) section).

Significant and Minor Changes to HUD Grant Agreements and DOH Contracts

For CoC projects, the HUD Grant Agreement defines expectations such as the number of households and target populations to be served, the types of services to be provided, and the eligible activities on which CoC funds will be expended. Any significant changes to a project require HUD approval, evidenced by a grant amendment signed by HUD and DOH. What constitutes a significant change is defined by HUD and includes a change of recipient, additions

or deletions in the types of eligible activities approved for a project, a shift of more than ten percent from one approved budget line item to another, a reduction in the number of units, or a change in the subpopulation served (24 CFR 578.105). Case Management Providers wishing to make a significant project change are required to contact DOH prior to reaching out to the HUD Field Office.

For minor changes to CoC projects (i.e., those not specified above), HUD requires fully documenting the change in project records (e.g., via a Memo to File) and, if applicable, alerting the Field Office of the change to enable drawdown of funds in LOCCS. Case Management Providers wishing to make a minor project change are required to contact DOH prior to implementing the change or reaching out to the HUD Field Office. Any DOH contract amendments must be made in writing and signed by both DOH and the DOH RRH project.

CoCs may also have requirements related to minor or significant changes. Case Management Providers must also follow any CoC specific requirements.

Access to records

Federal Government rights - Notwithstanding the confidentiality procedures established under the HEARTH Interim Final Rule, HUD, the HUD Office of the Inspector General, and the Comptroller General of the United States, or any of their authorized representatives, must have the right of access to all books, documents, papers, or other records of DOH, and subrecipients that are pertinent to the Continuum of Care grant, in order to make audits, examinations, excerpts, and transcripts. These rights of access are not limited to the required retention period, but last as long as the records are retained.

Public rights. DOH must provide citizens, public agencies, and other interested parties with reasonable access to records regarding any uses of Continuum of Care or Emergency Solutions Grant funds that DOH or its subrecipients received during the preceding 5 years, consistent with State and local laws regarding privacy and obligations of confidentiality and confidentiality requirements in this part (24 CFR 576.500(z)(2); 24 CFR 578.103(d)(2)).

Participation of Homeless Individuals

DOH and each subrecipient of CoC and ESG funds must provide for the participation of not less than one homeless individual or formerly homeless individual on the board of directors or other equivalent policymaking entity of the recipient or subrecipient agency. This requirement can be waived if DOH or the subrecipient is unable to meet such requirement and obtains HUD approval

for a plan to otherwise consult with homeless or formerly homeless persons when considering and making policies and decisions. (24 CFR 578.75; 24 CFR 576.405)

DOH and subrecipients of CoC funds must also, to the maximum extent practicable, involve homeless individuals and families through employment; volunteer services; or otherwise in constructing, rehabilitating, maintaining, and operating the project, and in providing supportive services for the project. (24 CFR 578.75; 24 CFR 576.405)

DOH strongly encourages projects to involve participants in the design, evaluation and delivery of project operations. This may include, for example, employing participants or seeking participant input into project services. CoCs may also establish certain participant involvement requirements, such as conducting consumer satisfaction surveys at least annually.

Whenever feasible, DOH strongly encourages Case Management Providers to offer participants stipends to encourage and support their involvement. Such stipends are eligible under the CoC Project Administration budget line item if participants are supporting project monitoring and evaluation activities.

Homeless Management Information System (HMIS) Requirements

Overview of HMIS Requirements

All DOH RRH projects must comply with HMIS requirements, as defined by HUD, the applicable CoC and the CoC [HMIS Lead](#). For each project, the Case Management Provider must enter participant data into the CT HMIS. Victim service providers, as defined by HUD (See [Definitions](#) Section), are prohibited from entering participant level data in HMIS and must, instead, enter data into a comparable database that complies with HUD's HMIS requirements. More information is available here: [When to Use a Comparable Database](#).

Case management providers are responsible for:

- Entering all HUD required data elements for each participant enrolled in RRH;
- Entering the HMIS Intake within 1 to 3 days of project entry;
- Entering the Move-In Date within 2 days;

Key information to record in HMIS

- ✓ HMIS RRH Intake
- ✓ Initial and Monthly Financial Service Request (FSR)
- ✓ Case notes completed at a minimum of once per month (may be recorded in another system)
- ✓ HMIS RRH Discharge
- ✓ For those who are enrolled for more than 12 months, a completed annual assessment

- For participants who are enrolled at least 12 months, entering an annual assessment in HMIS no more than 30 days after the participant’s anniversary date;
- Developing policies and procedures for staff that articulate how the HMIS should be used; and
- Identifying an HMIS Data Coordinator who must attend at least 75% of scheduled HMIS Data Coordinator meetings convened by the HMIS Lead Agency.

For more details please refer to [Appendix Attachment B - HMIS Data Element Definitions](#) and the [RRH HMIS Quick Guide](#)

Data Quality

The Case Management Provider is responsible for HMIS data collection and entry. Data collection and entry must be done in an ongoing, timely, and accurate manner. DOH requires Case Management Providers to employ a system for periodically reviewing and ensuring HMIS data accuracy. DOH also requires that projects keep all data current, with data quality and completeness at 95% or more; “don’t know” or “refused responses at 5% or less; “unknown” responses at 15% or less of annual discharges; and returns to homelessness at 15% or below annually.

This review of HMIS data should include, for example, running the Annual Progress Report (APR) for CoC projects and the Consolidated Annual Performance and Evaluation Report (CAPER) for ESG projects on a monthly basis to help ensure data quality and data preparedness to submit an actual APR or CAPER (for more information see [APR](#) and [CAPER](#) sections below). Prompt and accurate data collection is essential to meeting funder requirements, determining which services and programs that participants are utilizing, evaluating the impact of RRH services, and making system improvements.

Completing Financial Service Requests (FSR’s) in HMIS

The statewide RRH fiduciary will process landlord payments based on the data entered into the HMIS Financial Service Request. Please see [Appendix Attachment C](#) for allowable expenses based on funding source and associated HMIS category. Checks will be processed according to the information on the FSR. Only individuals who have a W-9 Tax ID Number (TIN) that satisfactorily matches IRS records will receive payment, including address. In the case where a landlord wants payment mailed to an address other than that on the W-9, a letter must be uploaded into the client's HMIS or comparable database record. The letter must be signed by the property owner, authorizing the payment be sent to another physical address.

HMIS Helpdesk and Steering Committee

Providers should direct any questions about entering data in HMIS to Nutmeg IT by submitting a help ticket here: Help@nutmegit.com.

DOH strongly encourages Case Management Providers to refer to the [HMIS Lead](#), for consideration by the HMIS Steering Committee, any suggestions for ensuring that HMIS data collection and entry is efficient, and that data collected are available and useful to inform service delivery.

For more information, please visit the [CT HMIS website](#).

Annual Progress Report (APR) Requirements

All Case Management Providers in projects receiving DOH RRH funds through the CoC program must collect and report data on use of CoC funds in an APR, as well as in any additional reports, as and when required by HUD or DOH. APRs must be submitted separately for each CoC grant or where a single CoC grant has been divided into multiple subgrants in HMIS, for each subgrant. APRs must be submitted to DOH no later than 60 days from the end date of the project's grant term. APRs will then be submitted to HUD by DOH no later than 90 days from the end date of the project's grant term. It is the expectation of DOH that the Housing Providers and Service Providers will run APRs and begin data quality verification and corrections immediately upon termination of the grant period. This is imperative to ensure that APR data are accurate and available for timely submission to HUD.

Consolidated Annual Performance Evaluation Report (CAPER) Requirements

All Case Management Providers in projects receiving ESG RRH funds from DOH must collect and report data on use of ESG RRH funds in a CAPER, as well as in any additional reports, as and when required by HUD and/or DOH. Case Management Providers must submit a separate report for each project for which they receive ESG funding; projects may not be combined into a single CAPER. CAPERs must be submitted to DOH no later than 60 days from the end date of the project's grant term. CAPERs must be submitted to HUD no later than 90 days from the end date of the project's grant term. It is the expectation of DOH that the Case Management Provider will run CAPERs and begin data quality verification and corrections immediately upon termination of the grant period. This is imperative to ensure that CAPER data are accurate and available for timely submission to HUD.

Ongoing Training and Learning Opportunities

Housing Innovations, in partnership with DOH, offers monthly RRH Community of Practice meetings to support on-going learning and improvement for adult, youth, and domestic violence RRH providers. These meetings are an opportunity for RRH staff to come together to problem-solve, share best practices, learn from peers, and connect with funders or evaluators. Additional resources on how other communities are using RRH services can be found on the [National Alliance to End Homelessness page](#).

YHDP Rapid Rehousing programs should refer to the [CT BOS youth page](#) for additional training materials on HUD YHDP compliance, such as project administration and recordkeeping requirements.

For promising practices, skill building, and Communities of Practice ideas, contact the Department of Housing Coordinated Access Network Managers, Kara Zichichi (Kara.Zichichi@ct.gov) or (Leigh.Shields-Church@ct.gov). If you have questions regarding the YHDP Rapid Rehousing program, please contact Katie Durand at Kathleen.durand@ct.gov. If you have specific questions regarding allowable expenses or procedures under your contracts, contact your funder.

CT DV / HT RRH Providers Only:

The CT DV/HT RRH Director of Housing Advocacy will work with DOH to ensure that learning opportunities are available to RRH advocates.

SECTION 11: ALLOWABLE PROGRAM EXPENSES AND FISCAL REQUIREMENTS

Federal Fiscal Requirements

Case Management Providers who are subrecipients of CoC (including YHDP) and ESG funds may only expend CoC and ESG funds on expenses defined as allowable by HUD. What constitutes an allowable expense is defined by:

- [CoC Program Interim Rule](#)
- [ESG Program Interim Rule](#)
- Uniform Administrative Requirements, Cost Principles and Audit Requirements for Federal Awards: [2 CFR part 200](#)

This section of the guide is intended only as an overview of fiscal requirements. The intent of the section is to provide basic information on federal fiscal requirements for project operations and supportive services staff. It is not intended to provide an exhaustive review. It is imperative that fiscal staff at subrecipient agencies be knowledgeable regarding all requirements outlined in the documents linked above.

Cost Eligibility

To be allowable, CoC and ESG expenses must be eligible. Costs are only eligible if they are:

- Included as an eligible expense in the CoC or ESG Program Interim Rule, as applicable – costs not specified in the rule as allowable are not eligible;
- Associated with an eligible participant;
- Delineated in the approved project budget; and
- Appropriately documented.

All expenditures of CoC and ESG Program funds must be:

- Reasonable (i.e., a person having sound judgment would find the expense to be fair and sensible and any procurement occurs in accordance with federal requirements);
- Allowable (i.e., defined as eligible in the CoC or ESG Program Interim Rule, as applicable, and delineated in the approved project budget); and
- Allocable (i.e., the activity is directly related to the CoC or ESG grant from which funds are expended).

Matching funds committed in the project budget must also be expended only on eligible costs, though such costs need not be delineated in the approved project budget (see Matching section for more information).

Risks Associated with Ineligible Expenditures

In the event that CoC or ESG Program or matching funds are expended on ineligible costs, DOH and subrecipients of CoC and ESG funds face certain risks, including:

- Recapture of funds by HUD;
- Monitoring findings (see [Project Evaluation and Monitoring](#) section for more information); and
- Termination of project funding by HUD, DOH, or the CoC.

CoC Program Budget Line Items and Eligible Expenses

Each CoC funded DOH RRH project has a project budget that has been approved by HUD. Those budgets include one or more of the following budget line items: Rental Assistance, Supportive Services, and Project Administration.

CoC Rental Assistance

The following are the eligible costs on the rental assistance budget line item:

- Up to 100% of the rent (see [Income Determination](#) and [Rent Calculation](#) sections for more information);
- Up to 100% of the utility allowance for any utilities not included in the rent (see [Rent Calculation](#) section for more information);
- Up to two months' rent for a security deposit – Connecticut State law prohibits charging tenants who are 62 years of age or older a security deposit in excess of one month's rent;
- Up to one month's rent for property damages caused by the participant – may be paid one time per participant and only upon exit from the unit;
- If an assisted unit is vacated before the expiration of the lease, the assistance for the unit may continue for a maximum of 30 days from the end of the month in which the unit was vacated, unless occupied by another eligible person.
- Administering Rental Assistance (i.e., HQS inspections, rent reasonableness determinations, issuing rent payments, and rent calculation).

CoC Supportive Services

Grant funds may be used to pay the eligible costs of supportive services that address the special needs of the program participants. Supportive services must be necessary to assist program participants obtain and maintain housing. Any cost that is not described as an eligible cost below is not an eligible cost of providing supportive services using CoC Program or matching funds. Staff training and the costs of obtaining professional licenses or certifications needed to provide supportive services are not eligible costs.

The following are the eligible costs on the supportive services budget line item:

- (1) **Annual assessment of service needs.** The costs of the assessment required by § 578.53(a)(2) are eligible costs.
- (2) **Assistance with moving costs.** Reasonable 1-time moving costs are eligible and include truck rental and hiring a moving company. Must document both amount and why costs are necessary.

(3) **Case management.** The costs of assessing, arranging, coordinating, and monitoring the delivery of individualized services to meet the needs of the program participant(s) are eligible costs. Component services and activities consist of:

- Counseling;
- Developing, securing, and coordinating services;
- Using the centralized or coordinated assessment system as required under § 578.23(c)(9);
- Obtaining federal, state, and local benefits;
- Monitoring and evaluating program participant progress;
- Providing information and referrals to other providers;
- Providing ongoing risk assessment and safety planning with survivors of domestic violence, dating violence, sexual assault, stalking and human trafficking; and
- Developing an individualized housing and service plan, including planning a path to permanent housing stability.

(4) **Child care.** The costs of establishing and operating child care, and providing child care vouchers, for children from families experiencing homelessness, including providing meals and snacks, and comprehensive and coordinated developmental activities, are eligible, provided the following requirements are met:

- The children must be under the age of 13, unless they are disabled children;
- Disabled children must be under the age of 18; and
- The child care center must be licensed by the jurisdiction in which it operates in order for its costs to be eligible.

(5) **Education services.** The costs of improving knowledge and basic educational skills are eligible.

- Services include instruction or training in consumer education, health education, substance abuse prevention, literacy, English as a Second Language, and General Educational Development (GED).
- Component services or activities include screening, assessment and testing; individual or group instruction; tutoring; provision of books, supplies, and instructional material; counseling; and referral to community resources.

(6) **Employment assistance and job training.** The costs of establishing and operating employment assistance and job training programs are eligible, including classroom, online and/or computer instruction, on-the-job instruction, services that assist individuals in securing employment, acquiring learning skills, and/or increasing earning potential. The cost of providing reasonable stipends to program participants in employment assistance and job training programs is also an eligible cost.

- Learning skills include those skills that can be used to secure and retain a job, including the acquisition of vocational licenses and/or certificates.
- Services that assist individuals in securing employment consist of:
 - Employment screening, assessment, or testing;
 - Structured job skills and job-seeking skills;
 - Special training and tutoring, including literacy training and pre-vocational training;
 - Books and instructional material;
 - Counseling or job coaching; and
 - Referral to community resources.

(7) **Food.** The cost of providing meals or groceries to program participants is eligible.

(8) **Housing search and counseling services.** Costs of assisting eligible program participants to locate, obtain, and retain suitable housing are eligible.

- Component services or activities include tenant counseling; assisting individuals and families to understand leases; securing utilities; and making moving arrangements.
- Other eligible costs are:
 - Mediation with property owners and landlords on behalf of eligible program participants;
 - Credit counseling, accessing a free personal credit report, and resolving personal credit issues; and
 - The payment of rental application fees.

(9) **Legal services.** Eligible costs are the fees charged by licensed attorneys and by person(s) under the supervision of licensed attorneys, for advice and representation in matters that interfere with the homeless individual or family's ability to obtain and retain housing.

- Eligible subject matters are child support; guardianship; paternity; emancipation; legal separation; orders of protection and other civil remedies for victims of domestic violence, dating violence, sexual assault, stalking and human trafficking; appeal of veterans and public benefit claim denials; landlord tenant disputes; and the resolution of outstanding criminal warrants.
- Component services or activities may include receiving and preparing cases for trial, provision of legal advice, representation at hearings, and counseling.
- Fees based on the actual service performed (i.e., fee for service) are also eligible, but only if the cost would be less than the cost of hourly fees. Filing fees and other necessary court costs are also eligible. If the subrecipient is a legal services provider and performs the services itself, the eligible costs are the subrecipient's employees' salaries and other costs necessary to perform the services.

- Legal services for immigration and citizenship matters and issues related to mortgages and homeownership are ineligible. Retainer fee arrangements and contingency fee arrangements are ineligible.

(10) **Life skills training.** The costs of teaching critical life management skills that may never have been learned or have been lost during the course of physical or mental illness, domestic violence, substance abuse, and homelessness are eligible. These services must be necessary to assist the program participant to function independently in the community. Component life skills training are the budgeting of resources and money management, household management, conflict management, shopping for food and other needed items, nutrition, the use of public transportation, and parent training.

(11) **Mental health services.** Eligible costs are the direct outpatient treatment of mental health conditions that are provided by licensed professionals. Component services are crisis interventions; counseling; individual, family, or group therapy sessions; the prescription of psychotropic medications or explanations about the use and management of medications; and combinations of therapeutic approaches to address multiple problems.

(12) **Outpatient health services.** Eligible costs are the direct outpatient treatment of medical conditions when provided by licensed medical professionals including:

- Providing an analysis or assessment of an individual's health problems and the development of a treatment plan;
- Assisting individuals to understand their health needs;
- Providing directly or assisting individuals to obtain and utilize appropriate medical treatment;
- Preventive medical care and health maintenance services, including in-home health services and emergency medical services;
- Provision of appropriate medication;
- Providing follow-up services; and
- Preventive and non-cosmetic dental care.

(13) **Outreach services.** The costs of activities to engage persons for the purpose of providing immediate support and intervention, as well as identifying potential program participants, are eligible.

- Eligible costs include the outreach worker's transportation costs and a cell phone to be used by the individual performing the outreach.
- Component activities and services consist of: initial assessment; crisis counseling; addressing urgent physical needs, such as providing meals, blankets, clothes, or toiletries; actively connecting and providing people with information and referrals to homeless and mainstream

programs; and publicizing the availability of the housing and/or services provided within the geographic area covered by the Continuum of Care.

(14) **Substance abuse treatment services.** The costs of program participant intake and assessment, outpatient treatment, group and individual counseling, and drug testing are eligible. Inpatient detoxification and other inpatient drug or alcohol treatment are ineligible.

(15) **Transportation.** Eligible costs are:

- The costs of program participant’s travel on public transportation or in a vehicle provided by the recipient or subrecipient to and from medical care, employment, childcare, or other services eligible under this section.
- Mileage allowance for service workers to visit program participants and to carry out housing quality inspections;
- The cost of purchasing or leasing a vehicle in which staff transports program participants and/or staff serves program participants;
- The cost of gas, insurance, taxes, and maintenance for the vehicle;
- The costs of recipient or subrecipient staff to accompany or assist program participants to utilize public transportation; and
- If public transportation options are not sufficient within the area, the recipient may make a 1-time payment on behalf of a program participant needing car repairs or maintenance required to operate a personal vehicle, subject to the following:
 - Payments for car repairs or maintenance on behalf of the program participant may not exceed 10 percent of the Blue Book value of the vehicle (Blue Book refers to the guidebook that compiles and quotes prices for new and used automobiles and other vehicles of all makes, models, and types);
 - Payments for car repairs or maintenance must be paid by the recipient or subrecipient directly to the third party that repairs or maintains the car; and
 - The recipients or subrecipients may require program participants to share in the cost of car repairs or maintenance as a condition of receiving assistance with car repairs or maintenance.

(16) **Utility deposits.** This form of assistance consists of paying for utility deposits. Utility deposits must be a one-time fee, paid to utility companies.

(17) **Direct provision of services.** If a service described in (1) through (16) of this section is being directly delivered by the recipient or subrecipient, eligible costs for those services also include:

- The costs of labor or supplies, and materials incurred by the recipient or subrecipient in directly providing supportive services to program participants; and

- The salary and benefit packages of the recipient and subrecipient staff who directly deliver the services.

If the supportive services are provided in a supportive service facility not contained in a housing structure, the costs of day-to-day operation of the supportive service facility, including maintenance, repair, building security, furniture, utilities, and equipment are eligible as a supportive service.

CoC Project Administration

Project Administration costs must be allocated only to these eligible activities as defined in the CoC Program Interim Rule:

- General management oversight and coordination
- Salaries, wages, and related costs of recipient staff, subrecipient staff, or other staff engaged in program administration including:
 - Preparing program budgets and schedules and amendments to those budgets and schedules;
 - Developing systems for assuring compliance with program requirements;
 - Monitoring program activities for progress and compliance with program requirements;
 - Preparing reports and other documents directly related to the program for submission to HUD;
 - Coordinating the resolution of audit and monitoring findings;
 - Evaluating program results against stated objectives; and
 - Managing or supervising persons whose primary responsibilities with regard to the program include such assignments.
- Travel costs incurred for monitoring of subrecipients;
- Administrative services performed under third-party contracts or agreements, including general legal services, accounting services, and audit services;
- Other costs for goods and services required for administration of the program, including rental or purchase of equipment, insurance, utilities, office supplies, and rental and maintenance (but not purchase) of office space;
- Costs of providing training on CoC requirements and attending HUD-sponsored CoC trainings; and
- Costs of carrying out the HUD required environmental review responsibilities.

Though project administration costs are budgeted as a percentage of the total amount requested for the other CoC project budget line items, they cannot be billed that way. They must be billed as direct costs based on actual expenses incurred, and they must be supported by backup documentation for staff hours/fringe and reimbursable expenses.

Project Administration costs do not include staff time and overhead directly related to carrying out CoC Program eligible activities, because those costs are eligible on the relevant budget line item (BLI), not on the project administration line. For example, the cost of conducting Housing Quality Standards (HQS) inspections and determining rent reasonableness are eligible on the rental assistance line NOT the project administration line. The costs of office supplies and supervision for case managers are eligible on the supportive service line NOT the project administration line.

HUD caps the project administration BLI at 10% of the grant. CT BOS caps the project administration BLI at 7% of the grant.

YHDP Special Activities

Through the CoC Notice of Funding Opportunity (NOFO) HUD may authorize additional eligible expenses for YHDP projects (i.e. “YHDP Special Activities”). YHDP project applicants may request these Special Activities in their project applications. Costs associated with these Special Activities are eligible expenses only to the extent that they are approved by HUD. YHDP projects should review their grant agreement and/or consult with DOH to determine the extent to which any YHDP Special Activities have been authorized by HUD.

ESG Program Eligible Expenses

ESG Rental Assistance

The following are eligible rental assistance costs (24 CFR 576.106):

- Up to 100% of the rent (see Income Determination and Rent Calculation section for more information);
- Up to 6 months of rent in arrears, including any late fees on those arrears; and
- Administering Rental Assistance (i.e., HUD Habitability Standard inspections, rent reasonableness determinations, issuing rent payments, and rent calculation).

ESG Financial Assistance

ESG RRH funds may be used to pay housing owners, utility companies and other third parties for any of the activities below. The following are eligible financial assistance costs (24 CFR 576.105):

- Up to 100% of rental application fees charged by the owner to all applicants;

- Up to 2 months' rent for a security deposit – Connecticut State law prohibits charging tenants who are 62 years of age or older a security deposit in excess of 1 month's rent. DOH requires that projects limit the security deposit to 1 month whenever feasible, and only pay a second month when necessary to secure a unit for a participant with significant barriers to housing;
- Last month's rent, not to exceed the cost of one month's rent;
- Up to 100% of utility deposits required by the utility company for all customers. Eligible utility services are gas, electric, water, and sewage;
- Up to 100% of utility costs not included in the rent, including up to 6 months of utility payments in arrears, per service (see Utility Allowance section for more information). Eligible utility services include gas, electric, water and sewage;
- Up to 100% of moving costs, including truck rental, hiring a moving company, and payment of temporary storage fees for up to 3 months. Payment of temporary storage fees in arrears is not eligible; and
- Up to 100% of costs owed for breaking a lease when the program participant meets the conditions for an emergency transfer (per VAWA protections found at 24 CFR 5.2005(e)). These costs are separate from the 24 month limit on rental assistance in 24 CFR 576.106.

See Vacancies and Retention of Assistance section for more information on eligible rental assistance costs during temporary institutional stays and following unit vacancies.

ESG Service Costs

ESG RRH eligible services are limited to housing relocation and stabilization services. The following are the eligible service costs (24 CFR part 576.105):

Housing search and placement. The costs of assisting participants in locating, obtaining, and retaining suitable permanent housing are eligible.

Component services or activities include housing search; tenant counseling; assisting individuals and families to understand leases; assisting with submitting rental applications; arranging for utilities; and making moving arrangements.

Other eligible costs are:

- Assessment of housing barriers, needs, and preferences;
- Development of an action plan for locating housing;
- Outreach to and negotiation with owners; and
- Assessment of housing for compliance with ESG requirements for habitability, lead-based paint, and rent reasonableness.

Housing stability case management. The costs of assessing, arranging, coordinating, and monitoring the delivery of individualized services to facilitate housing stability for a program participant who resides in permanent housing or to assist a program participant in overcoming immediate barriers to obtaining housing are eligible costs. Component services and activities consist of:

- Conducting the initial evaluation (required by 24 CFR 576.401(a)), including verifying and documenting eligibility;
- Using the centralized or coordinated assessment system;
- Counseling;
- Developing, securing, and coordinating services;
- Obtaining Federal, State, and local benefits;
- Monitoring and evaluating program participant progress;
- Providing information and referrals to other providers;
- Developing an individualized housing and service plan, including planning a path to permanent housing stability; and
- Conducting re-evaluations (required by 24 CFR 576.401(b)).

Mediation. Eligible costs are the fees associated with assisting program participants with mediation between the program participant and the owner or person(s) with whom the participant is living.

Legal services. Eligible costs are the fees charged by licensed attorneys and by person(s) under the supervision of licensed attorneys, for resolving a legal problem that prohibits a program participant from obtaining or retaining permanent housing.

Eligible subject matters are landlord/tenant matters; child support; guardianship; paternity; emancipation; legal separation; orders of protection and other civil remedies for victims of domestic violence, dating violence, sexual assault, stalking and human trafficking; appeal of veterans and public benefit claim denials; and the resolution of outstanding criminal warrants. Component services or activities include participant intake, preparation of cases for trial, provision of legal advice, representation at hearings, and counseling.

Costs may be based on hourly fees or fees based on the actual services performed (i.e., fee for service), but only if the cost would be less than the cost of hourly fees. Filing fees and other court costs are also eligible. If the subrecipient is a legal services provider and performs the services itself, the eligible costs are the subrecipient's employees' salaries and other costs necessary to perform the services.

Legal services for immigration and citizenship matters and issues related to mortgages are ineligible. Retainer fee arrangements and contingency fee arrangements are ineligible.

Credit repair. Eligible costs are those associated with assisting program participants with credit repair, including credit counseling, accessing a free personal credit report, resolving personal credit problems, and other services needed to assist with critical skills related to household budgeting and money management. Payment or modification of a debt is ineligible.

CoC and ESG Indirect Costs

Indirect costs are those that cannot be relatively easily, and with a high degree of accuracy, directly assigned to an eligible CoC or ESG activity, such as project administration, rental assistance, or supportive services. Rather, indirect costs are incurred for common or joint purposes benefitting multiple projects and cannot be readily associated with a particular CoC or ESG project. Salaries for Information Technology (IT) staff who maintain the agency's network, or costs associated with payroll management are examples of common indirect costs. There is no separate budget line item for indirect costs in a CoC or ESG project budget. Indirect costs are budgeted on other budget line items (e.g., supportive services).

In order to charge indirect costs to a HUD CoC grant, the grant applicant must indicate that as part of the annual application/renewal process. This must be further confirmed in the technical submission phase of the grant. Only those grantees who have indicated the intent to charge indirect costs in the CoC application process may charge these costs to the grant.

There are also 2 types of indirect rates: Negotiated Indirect Cost Rate Agreement (NICRA) and the 10% de minimis rate. Agencies that have a NICRA must use that rate. Agencies that have never had a NICRA may elect to charge the de minimis 10% of Modified Total Direct Costs or MTDC. See the [slide presentation on Indirect Cost Rate](#) for information on calculating MTDC. If an agency elects to charge the 10% de minimis rate, they must consistently apply this to all federal grants and contracts.

If HUD conditionally awards a CoC the grant, agencies with a NICRA will be required to submit the documentation supporting the NICRA in E-Snaps during the post-award process. DOH and subrecipients can include both project administration and indirect costs in their project budgets; however, costs must be established by DOH or the subrecipient as either direct or indirect, and the same expense cannot be charged to both indirect and any direct budget line item.

For more information about indirect costs see [HUD's Indirect Cost Toolkit](#).

Documenting Staff Time - Personnel Activity Logs – CoC

Housing Providers and Service Providers are responsible for ensuring sufficient documentation of staff time billed to a CoC grant. Timesheets suffice to document staff time billed for employees who work in a single indirect cost activity (e.g., accounting). Timesheets, with periodic certifications (see Sample Certification), suffice for employees who work on a single federal award category (e.g., supportive services). Staff working on more than one project or budget line item need to document the actual time spent on each project and eligible activity. One way to ensure appropriate backup documentation for all staff-related direct costs, such as Project Administration, Rental Assistance, and Supportive Services, is to ensure that staff working on more than one project or budget line item complete a personnel activity log (See [Sample Personnel Activity Log](#)).

Program Income

Program income is income received by DOH or a subrecipient that is directly generated by a CoC or ESG grant-supported activity. This includes, for example, returned security deposits.

Program income must be used for eligible expenses during the operating year in which it is received. Program income is an eligible source of cash match for both ESG and CoC Programs (see Matching Section for more information).

Program fees

Neither DOH nor subrecipients may charge participants any program fees. This includes any fee other than the participants' rent obligation calculated in accordance with HUD requirements (for more information see the [Income Determination](#) and [Rent Calculation](#) sections). Examples of impermissible program fees include:

- Case management fees
- Lost key fees
- Legal fees
- Security deposits
- Mandatory savings

This prohibition does not apply to landlords and does not prevent them from charging allowable fees in accordance with the lease and applicable local and state laws.

CoC Matching Requirements

Matching funds are committed by DOH or a subrecipient in the project application and must be expended on eligible CoC Program costs, not limited to approved budget line items. HUD requires a minimum match equal to twenty-five percent of the total CoC funds awarded. The matching requirement can be met through cash or in-kind resources. Match resources may be from public or private sources.

Because documentation requirements for in-kind match are significantly more onerous, use of cash match whenever feasible is strongly encouraged. Match is only in-kind if it is a donation of services, goods, materials, or equipment. Donations are typically from a third party. In-kind match from a third-party requires an MOU with the entity providing the match. Subrecipient agencies providing the required match using volunteer time should indicate this as in-kind match. Subrecipient agencies providing the match using paid staff time should indicate this as cash match and list the source of the funds used to pay for those staff salaries. For example, an agency that will provide assistance identifying potential project participants and helping them to document eligibility using Projects for the Assistance in Transition for Homelessness (PATH) funded outreach staff would identify this as cash match, with Substance Abuse and Mental Health Services Administration (SAMHSA) PATH as the source.

Match, whether cash or in-kind, can only be used on eligible CoC Program costs, i.e., any cost that is defined as eligible in the CoC Program Interim Rule, not limited to approved budget line items for the particular project. For example, case management is an eligible CoC Program cost. A subrecipient may use DMHAS funds that support case management services for project participants as cash match for a project, regardless of whether or not the project has requested CoC funds for supportive services. Similarly, ESG match can only be used on eligible ESG Program costs, i.e., any cost that is defined as eligible in the ESG Program Interim Rule.

Below are some examples of cash and in-kind match:

- CASH MATCH: Subrecipient agency provides housing location services funded through a DOH shelter contract.
- CASH MATCH: Mental health services are provided to participants by a subrecipient and funded through SAMSHA.
- In-Kind: Subrecipient agency Board member provides pro bono legal services.
- In-Kind: FQHC operated by a community partner provides outpatient health services to participants.
- In-kind: Food bank operated by a community organization donates food to project participants.

DOH or a subrecipient may use the value of any real property, equipment, goods, or services contributed to the project as match, provided that, if they had to pay for them with grant funds,

the costs would have been eligible. Any such value previously used as match, may not be used again (i.e., the value cannot be claimed as match by more than one project or by the same project in another year).

When the match source is cash, DOH or subrecipients must provide HUD with match documentation prior to grant agreement execution. To avoid delays in grant execution, DOH, typically, submits match documentation with their project applications in E-snaps. If match documentation is not available at application submission and HUD conditionally awards the project, submission of the documentation will be a condition for grant execution.

Written documentation of cash match must:

- Be provided on the source agency's letterhead, (e.g., if a subrecipient is using case management services funded by DOH as cash match, the letter must come from DOH and be on their letterhead);
- Be signed and dated by an authorized representative of the source agency; and
- At a minimum, include the following: amount of cash to be provided for the project, specific date the cash will be made available, the project name and fiscal year to which the cash match will be contributed, the time period during which funding will be available, and allowable activities to be funded by the cash match (e.g., case management or rental assistance for project participants).

If awarded the grant by HUD, to document cash match, agencies must show that the funds were recorded on the agency's books and expended on eligible expenses during the grant operating year.

If using in-kind match for a CoC funded project, the applicant should submit with the project application in E-snaps an MOU with the donor entity. If the MOU is not available at application submission and HUD conditionally awards the project, submission of the MOU will be a condition for grant execution. If awarded the grant by HUD, to document in-kind match of donated services DOH and/or a subrecipient must keep and make available, for inspection by HUD and/or the CoC, records documenting that the service hours were actually provided. They must also keep the MOU with the donor entity on file.

Requirements for the MOU, include:

- Establish the unconditional commitment of the services being donated;
- Provide the name of the project and operating year to which the match is being contributed;
- Describe the specific service to be provided (must be a CoC program eligible activity);

- Indicate total point-in-time number of participants receiving the service and total participants receiving the service over the grant term;
- State profession and qualifications of the persons providing the service;
- State hourly cost of the service to be provided; and
- Indicate that the services are valued at rates consistent with those ordinarily paid for comparable services in that locality.

If awarded the grant by HUD, to document in-kind match of donated goods, property or equipment, DOH and/or a subrecipient must keep and make available for inspection by HUD and/or the CoC:

- Documentation that the in-kind donation was actually received, including value of the donation (must be documented on source agency letterhead, signed & dated); which
 - Must indicate that the value is consistent with the cost ordinarily paid for similar goods in the local market; and
 - Must indicate the date on which the in-kind donation was provided, the project and operating year to which the match was contributed, and the CoC Program allowable activities provided by the donation (e.g., donation of food for meals for project participants, or donation of tenant rights and responsibilities booklets to provide tenant counseling services).

More information about CoC Program match requirements is available [here](#).

Grant Terms

Grant start and end dates are defined in the grant agreement with HUD and can only be changed through a grant agreement amendment (see Significant Changes section for more information). DOH enters into contracts with case management providers and fiduciary agencies.

CoC funds are drawn down by DOH. Funds can be drawn down for 90 days following the grant end date to cover expenses incurred during the operating year. Grant funds may not be used to cover expenses incurred outside of the operating year. CoC and ESG RRH Case Management Providers are responsible for submitting quarterly invoices to DOH and fiduciary agencies are responsible for submitting monthly invoices to DOH.

Case management and fiduciary agencies should consult their DOH contracts for specific terms including the reporting schedule.

Procurement Requirements

Subrecipients of CoC and ESG funds must have written procurement policies that are consistent with federal procurement requirements found at 2 CFR 200.317 and 200.318. Subrecipients must also document that any procurement follows those policies. There are four allowable methods for procurement: small purchase, sealed bid, request for proposals, and non-competitive. DOH RRH projects typically only use the small purchase method, which is allowable for any purchase below \$150,000. This method requires:

- Obtaining 3 to 5 competitive quotes
- Selecting the most reasonable offer
- Using purchase orders or petty cash to make the purchase

SECTION 12: LINKS TO ADDITIONAL RESOURCES

This list of resources is intended to help DOH RRH projects to maintain compliance with HUD and DOH requirements. It was current at the time of publication of this Guide. An updated list of links to resources is posted periodically on the [CT BOS Resources page](#).

CT DOH Required Forms

All forms that DOH requires RRH projects to use are available at [DOH Rapid Rehousing Documents](#).

ACT Resources

The following materials and more are available on the [ACT RRH Page](#) page:

- Submitting a RRH Request
- Information about the RRH Ticketing System

HUD Resources

- [CoC Program Interim Rule](#)
- [ESG Program Interim Rule](#)
- [HEARTH Homeless Definition Final Rule](#)
- [COC Program Frequently Asked Questions](#)
- [Ask a CoC or ESG Program Question](#)
- [CoC Program Toolkit](#)
- [Monitoring Resources including Exhibits](#)
- [Uniform Administrative Requirements, Cost Principles and Audit Requirements for Federal](#)

[Awards: 2 CFR part 200](#)

- [HMIS Requirements, Data Standards & Tools](#)
- [HUD Notice: Establishing Additional Requirements for a CoC Coordinated Entry System](#)
- [HUD Equal Access Final Rule](#)
- [HUD Equal Access in Accordance with Gender Identity Final Rule](#)
- [HUD Final Rule Implementing VAWA Reauthorization Act of – Final Rule and Notice of Occupancy Rights Under VAWA](#)
 - VAWA 2022: Foundations for CoC & ESG [Webinar](#) Series
- [HUD FMRs](#)
- [HUD Lead Based Paint Visual Assessment Training](#)
- [HUD Housing First Assessment Tool](#)

CT BOS Resources

The following materials and more are available on the [CT BOS Policies](#) page:

- CT Balance of State Policies
- CT BOS Governance Charter
- CT Coordinated Access Network Policies and Procedures
- CT BOS Grievance Policy
- CT BOS Emergency Transfer Plan for DV
- CT BOS Reallocation Process

The following materials and more are available on the [CT BOS Resources](#) page:

- Participant Chart Requirements by Project Type
- CoC Homeless Verification Form
- Sample Letters Documenting Dedicated Plus
- Chronic Homeless Verification Forms Checklist
- Resources for Provider Questions
- Sample Third Party Letters Documenting Chronic Homelessness
- Monitoring Guide
- DOH Rapid Rehousing Documents

The following materials and more are available on the [CT BOS Youth](#) page:

- CTYHDP Homelessness Verification Form

- CT YHDP Determining Homeless Status of Youth Guide
- Additional CT YDP Homelessness Verification Guidance
- CT BOS YHDP RRH Rent Calculation Tool

Information about upcoming and past trainings, including slide decks and recordings are available on the [CT BOS Training Page](#).

Resources and trainings related to COVID-19 are available [here](#).

ODFC Resources

- Policies are available on the [ODFC Working Documents Page](#)
- Information about upcoming and past trainings, including slide decks and recordings are available on the [ODFC Training Page](#).

Other Resources

- [Rights and Responsibilities of Landlords and Tenants in CT](#)
- CT Department of Children and Families: [Reporting Child Abuse and Neglect](#)
- [Corporation for Supportive Housing Quality Toolkit](#)
- State of CT Department of Banking – [Booklet on Rental Security Deposits](#)

SECTION 13: DEFINITIONS

211 is a program of [United Way of Connecticut](#). 211's specialized housing unit is funded by DOH and is the single point of entry to all housing and homeless services in CT. Households in need of services should contact 211 to get connected to a CAN and to access RRH and other housing and community resources.

Applicant is a person or household in need of housing assistance who is receiving assistance from a Coordinated Access Network (CAN) and/or the Connecticut Coalition Against Domestic Violence (CCADV).

Case Management focuses on immediate efforts to attain housing, using the minimum assistance needed to address each household's immediate housing crisis. Staff works with each household to identify and refer households to other resources in the community (e.g., mainstream services,

benefit services, food assistance programs, childcare resources, etc.) to support ongoing housing stability. Services are voluntary, housing-focused, person-centered, trauma-informed and are provided at the level needed by each household.

Case Management Provider is a non-profit agency that directly provides case management for households participating in one or more RRH projects. In many cases, the same non-profit agency serves both as the Case Management and the Housing Location Provider for the entire RRH project or for one or more particular participants.

Connecticut Coalition to End Domestic Violence (CCADV) is a membership organization representing Connecticut's 18 domestic violence service agencies. CCADV serves as the subrecipient of Continuum of Care Domestic Violence Bonus (DV Bonus) funds and administers those funds under the Connecticut Domestic Violence & Human Trafficking Rapid Re-Housing Program (CT DV/HT RRH) on behalf of DOH. CCADV also serves as the centralized access point for survivors to receive RRH assistance through CT DV/HT RRH (i.e., DV Bonus projects).

Connecticut Domestic Violence & Human Trafficking Rapid Re-Housing Program (CT DV/HT RRH) is designed to meet the specific needs of domestic violence, dating violence, sexual assault, stalking and human trafficking survivors. The program designed to help survivors quickly exit homelessness, return to housing in the community, and not become homeless again. The program is administered by CCADV and overseen by DOH.

Continuum of Care (CoC): To receive homeless assistance funding through the U.S. Department of Housing and Urban Development (HUD) communities are required to establish and maintain a CoC. CoCs are responsible for determining funding priorities, establishing policies, and coordinating strategies toward ending homelessness in their region. DOH Rapid Rehousing projects are located in both of the existing CoCs within the state (i.e., the [CT Balance of State CoC](#) and [Opening Doors Fairfield County](#)).

Coordinated Access Networks (CANs) are regional entities staffed by the CT Department of Housing (DOH) and located across the state that ensure a consistent and uniform access, assessment, prioritization, and referral processes to determine the most appropriate response to each presenting individual's and family's immediate housing needs.

Critical Time Intervention (CTI) is a time-limited, evidence-based practice that promotes housing stabilization during periods of transition by strengthening a Participant's long-term ties to community services and social supports. The approach is housing-focused and connected to the participant's life goals. CTI facilitates community integration and continuity of care by ensuring

that a person has enduring ties to their community and support systems during periods of transition. CTI typically lasts for nine months, and services are divided into three, three-month phases.⁶ DOH encourages use of this approach for RRH projects, particularly those serving participants with intensive service needs.

Domestic Violence Bonus (DV Bonus) have been made available by the U.S. Department of Housing and Urban Development (HUD) through its annual Continuum of Care (CoC) competition. DV Bonus projects must be dedicated to serve survivors of domestic violence, dating violence, sexual assault, stalking or human trafficking. CoCs can apply to receive DV Bonus funds and DOH has received such awards in both CT CoCs. CCADV serves as the subrecipient of DV Bonus funds and administers those funds under the Connecticut Domestic Violence & Human Trafficking Rapid Re-Housing Program (CT DV/HT RRH) on behalf of DOH.

Entries from Homelessness measures the degree to which programs are serving people who are literally homeless, including a place not meant for human habitation, or in an emergency shelter. The measure is calculated in HMIS based on responses to ‘immediate prior living situation.’

Exits to Permanent Housing measures the percentage of households who exit the program into a form of permanent housing (including supportive housing, stable/long term rental housing, subsidized housing, or market rate housing). The exit destination reflects whether a household is stably housed after leaving the RRH program; self-resolving will still be considered an exit to permanent housing.

E-snaps is HUD’s web-based application system used by CoCs and project applicants to submit applications and technical submissions during the annual CoC competition.

Family: Under the DOH RRH Program the definition of family includes, but is not limited to, regardless of marital status, actual or perceived sexual orientation, or gender identity, any group of persons presenting for assistance together with or without children and irrespective of age, relationship, or whether or not a member of the household has a disability. A child who is temporarily away from the home because of placement in foster care is considered a member of the family.⁷

Fiduciary Providers receive RRH rental assistance funds from DOH and manage the distribution of those funds to landlords in accordance with federal and state requirements.

⁶ <https://www.criticaltime.org/cti-model/>

⁷ CoC FAQ ID: 1529; Date Published: July 2014. Available at: <https://www.hudexchange.info/faqs/1529/how-is-the-definition-of-family-that-was-included/>

Financial Assistance is short-term monetary support provided by RRH projects to participant households so they can quickly obtain housing. Allowable financial assistance includes, for example, paying for security deposits, moving expenses, rent, and utilities.

Grant Agreement is the legal document executed by DOH and HUD for each CoC project that defines the grant term, award amount, approved budget and other terms. The terms of the grant agreement may only be changed through a grant agreement amendment executed by DOH and HUD.

Harm Reduction incorporates a variety of strategies to meet people where they are and help them to understand risks and reduce harm caused to themselves and others by risky behavior. Harm Reduction includes, for example, practical strategies to reduce negative consequences of drug use incorporating a spectrum of approaches from safer use to abstinence. DOH requires use of the harm reduction approach for all RRH projects, so that health care, support and housing continue to be provided to program participants, regardless of any risky behaviors in which Participants may choose to engage.

HMIS Lead is the entity designated by a CoC, in accordance with the CoC Program Interim Rule to manage the CoC's HMIS on the CoC's behalf.

Housing Location Services include engaging with and recruiting landlords, property management companies, and housing developers to increase access to permanent housing for homeless and other vulnerable individuals and families. This may include incentives and supports made available to participating landlords and property managers who agree to reduce screening criteria for households with barriers to permanent housing. This also includes ensuring that assisted units meet all program requirements.

Housing Location Provider is a private, non-profit agency that assists Project Participants to locate, safe, affordable permanent housing that meets the RRH program requirements. In many cases, the same non-profit agency serves both as the Case Management and the Housing Location Provider for the entire RRH project or for one or more particular participants.

Housing First is an approach to quickly and successfully connect individuals and families experiencing homelessness to permanent housing without preconditions and barriers to entry,

such as sobriety, treatment or service participation requirements.⁸ DOH requires use of this approach for all RRH projects.

Landlord is an owner and/or manager of a housing property in which one or more units are rented to RRH program participants. The term landlords is used in this guide to refer to owners/managers of multi-unit housing, single family homes, and boarding homes.

Length of Stay measure the number of days from program enrollment to program exit. For RRH programs, this is defined as the time from initial intake to the end of all RRH services (i.e., both financial subsidy and case management).

Homeless: For the purposes of its RRH program, DOH uses the HUD CoC definition of homelessness (i.e., [HEARTH Act: Defining “Homeless” Final Rule](#), which includes 2 applicable subcategories:

- **Category 1 - literally homeless:** The individual or head of household is living in a place not meant for human habitation, in an emergency shelter, transitional housing, a safe haven or hotel/motel paid by government or charity; applicants residing in an institution for less than 90 days who were homeless and living in a place not meant for human habitation or in an emergency shelter immediately prior to entry into the institutional care facility retain their literal homeless status.
- **Category 4– Fleeing/Attempting to Flee DV, dating violence, sexual assault, stalking, or other dangerous conditions:** Any individual or family who (i) is experiencing trauma or lack of safety related to, or fleeing, or attempting to flee, domestic violence, dating violence, sexual assault, stalking, or other dangerous, traumatic, or life-threatening conditions related to the violence against the individual or a family member in the individual’s or family’s current housing situation, including where the health and safety of children are jeopardized; and (ii) Has no other safe residence; and (iii) Lacks the resources to obtain other safe permanent housing. For YHDP projects HUD has clarified that this includes trading sex for housing, trafficking, physical abuse and violence or perceived threat of violence because of the youth’s sexual orientation; and has no other residence; and lacks the resources or support networks to obtain other permanent housing.

Matching funds apply to CoC funded RRH and are committed by DOH and/or a subrecipient in the project application and must be expended on eligible CoC Program costs, not limited to

⁸ <https://endhomelessness.org/resource/housing-first/>

approved budget line items. HUD requires a minimum match equal to 25 percent of the total CoC funds awarded.

Positive Youth Development (PYD) is a nationally recognized approach that engages youth within their communities, schools, organizations, peer groups, and families in a manner that is productive and constructive. It recognizes, utilizes, and enhances youths' strengths and promotes positive outcomes for young people by providing opportunities, fostering positive relationships, and furnishing the support needed to build on their leadership skills. The model engages youth in activities they find personally meaningful and relevant and supports them to actively design, implement and evaluate the services they receive. It also provides ongoing and intentional opportunities for young people to develop competence, confidence, connection, character, and compassion and establishes high expectations for what young people can achieve.⁹ HUD requires YHDP RRH projects to use the PYD approach.

Progressive Engagement is a strategy that starts with the least amount of assistance necessary to help resolve homelessness and then adds more assistance, only as necessary, if the less intensive intervention is unsuccessful. It is a practical strategy to conserve resources and direct the costliest interventions to those who have not been able to resolve their homelessness through less intensive interventions. The need for additional support is determined by an assessment of the Participant's experience and the impact of the initial intervention.

Project Applicant is a private nonprofit organization, state or local government, or instrumentality of a state or local government that applies for CoC Program funds by submitting a project application to HUD. DOH serves as the project applicant for all DOH CoC RRH projects.

Project Application is the request for renewal or new project funding submitted to HUD during the annual CoC Program competition via their web-based application system known as E-snaps. HUD uses information provided in the project application to determine whether the project will receive/continue to receive funding. HUD also uses this information to establish the terms of the project's grant agreement.

Project Participant is an individual person or household comprised of multiple people who receives assistance through a CoC RRH project. Throughout this guide, the terms "participant" and "project participant" and "program participant" are used interchangeably.

⁹For information about specific evidence-based models that use a Positive Youth Development approach see the [SAMHSA's Evidence-based Practices Resources Center](#)

Project Participant Chart is a consolidated paper or electronic record maintained by Housing Providers and Service Providers and containing all required documents as defined by HUD, DOH, and the relevant CoC. Guidance on documents required by HUD and the CT BOS CoC for all CoC funded project participants is available at: <http://www.ctbos.org/resources/>. A checklist of documents required by DOH for DOH RRH participants is available on the above linked page under DOH Rapid Rehousing Documents.

Recipient is a private nonprofit organization, state or local government, or instrumentality of a state or local government that signs a DOH RRH grant agreement with HUD. DOH serves as the recipient for all DOH RRH projects.

Records shall mean all working papers and such other information and materials as may have been accumulated and/or produced by the Contractor in performing the Contract, including but not limited to, documents, data, plans, books, computations, drawings, specifications, notes, reports, records, estimates, summaries, correspondence, and program and individual service records and other evidence of its accounting and billing procedures and practices which sufficiently and properly reflect all direct and indirect costs of any nature incurred in the performance of this Contract, kept or stored in any form.

Return to Homelessness measures the percentage of households who have exited the program to a permanent housing situation and are subsequently served by another homeless intervention (i.e., emergency shelter, transitional housing, or rapid re-housing) in HMIS.

Subrecipient is a private nonprofit organization, that receives a sub-grant from DOH to carry out a CoC RRH project (24 CFR 578.3).

Technical Submission is the E-snaps process HUD uses to enable CoC project applicants to provide any additional information, resolve any issues and conditions and/or make any allowable changes to the project application post submission of the application as determined necessary by HUD and/or the project applicant.

Trauma Informed Care (TIC) is an approach that recognizes the widespread impact of trauma and understands potential paths for recovery, recognizes the signs and symptoms of trauma in participants, families, staff, and others involved with the system, responds by fully integrating knowledge about trauma into policies, procedures, and practices and seeks to actively resist re-traumatization. TIC models generally include a focus on the following: Safety; Trustworthiness and Transparency; Peer Support; Collaboration and Mutuality; Empowerment; Voice and Choice; and Cultural, Historical, and Gender Issues. DOH requires the use of TIC in all RRH projects.

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

Youth Homelessness Demonstration Project (YHDP) is a HUD initiative that provides technical assistance and funding for planning and homeless assistance projects to learn how communities can successfully prevent and end youth homelessness by building comprehensive systems of care for young people rather than implementing individual or unconnected projects that serve this population. YHDP projects must be dedicated to serve youth under age 25. CoCs can apply to receive YHDP funds and DOH has received such awards in both CT CoCs.

SECTION 14: APPENDIX

Attachment A: Funding Guidelines

		CT-ESG	HUD CoC* / YHDP**** / DV-HT RRH
Eligibility for assistance****	Income Eligibility At Enrollment	No income eligibility upon entry into the program	
	Income Eligibility at Annual Recertification (12 months)	The gross household income must not exceed 30% of Area Median Income (AMI) as determined by HUD	The gross household income must not exceed 50% of Area Median Income (AMI) as determined by HUD
	Homeless (HUD Definition)	Literally homeless, fleeing domestic violence, dating violence, sexual assault, stalking or human trafficking, not in transitional housing unless YHDP program	
	Identification Requirements (photo ID, etc.)	Not required upon entry into the program except for YHDP where Proof of Date of Birth must be attached in the file for all members of the household who are aged 18 or older and who will be included on the subsidized lease.	
	Legal Status	No status requirements	

		CT-ESG	HUD CoC* / YHDP**** / DV-HT RRH
Program Costs***	Monthly Rental assistance	Up to 100%. Maximum term of rental assistance is 24 months.	
	Security Deposits	100% up to 2X monthly rent	100% up to 2X monthly rent
	Utility deposits & payments	Up to 100%	One time utility deposit paid to the utility company is an eligible supportive service expense. Monthly utility payments up to the applicable utility allowance are an eligible rental assistance expense.
	Moving cost assistance	Up to 100%, including up to 3 months of temporary storage	Reasonable one-time moving costs including truck rental and hiring a moving company are eligible supportive service expenses
	ID, birth certificates, etc.	Not allowable	Allowable as a supportive services expense if it is a necessary part of conducting other eligible activities (e.g., housing search, obtaining benefits)
	Utility arrears	Up to 6 months of arrearages per utility service.	Not allowable
	Rental application fees	Allowable	Allowable supportive services expense.
	Rental arrears	One-time payment of up to 6 months including late fees.	Not allowable
	Property Damage Payment	Not Allowable	Up to 1 month of additional rent if damages exceed security deposit. Allowable only when exiting unit.

Additional Requirements		CT-ESG	HUD CoC* / YHDP**** / DV-HT RRH
	Habitability Standard inspection	HQS Checklist	
	Lead Based Paint Inspection	Visual assessment**	
	Rent Amount Ceiling	Rent may not exceed FMR; AND Rent reasonable form and certification	Rent reasonable form and certification
	Other non CoC/ESG Subsidized Housing	Can pay rental arrears only	Can pay security deposits, not ongoing rent
	Lease Requirements	Between tenant and landlord	Between tenant and landlord - Must be a 12 mo. lease

*HUD CoC (Continuum of Care) – May change depending on the given year award restrictions.

Please verify any specific requirements, limits, or exclusions based on a given fund source with your funder.

** Visual assessment must be completed prior to providing rent assistance for all units constructed prior to 1978 in which a child under the age of six is or will be living in the unit. Visual assessments must be conducted by a HUD-Certified Visual Assessor, and must be documented on the HQS or HSS and maintained in the participant file.

*** Additional support services expenditures are allowable under the YHDP program, including eligible transportation costs. Providers should consult their agency’s fiscal staff to confirm what is eligible costs are within their DOH-approved budget. Expenditures must be documented in the participant’s file.

**** Under YHDP, all members of the household must be under the age of 25 at program entry unless it is a shared housing situation where the subsidy is apportioned out. This includes unaccompanied and parenting young adults, aged 18-24 at program entry, or emancipated minors.

Attachment B: HMIS Data Element Definitions

Data Element	Definition
Program Entry Date	This is the date the case manager and household first meet and complete an intake.
Date of Move-In	This is the date the household moves into housing and begins receiving rent assistance. This date should fall after the Program Entry Date.* In Clarity, click the box “In Permanent Housing” on the entry or exit screen to enter the Date of Move-In.**
Program Exit Date	This is the date the household stopped receiving financial and case management services. This date should fall after the Date of Move-In (or on the Date of Move-In if the household is only receiving move-in assistance and no ongoing rental assistance). **
Exit Destination	This should reflect where the household is staying immediately after they finish participating in the program. So if the participant is staying in the unit with no other subsidy, exit destination should be “Rental by participant, no ongoing subsidy.”
Transaction Date	When completing a Financial Service Request (in HMIS), the transaction date refers to the month to which the payment applies. For example, if you are paying April rental assistance, enter 4/1/2019. If the tenant is moving into a new apartment mid-month, please use the start date of the lease (i.e. 4/15/2019). If you are requesting assistance for security deposit, please enter the start date of the lease.
Reference Date	When completing a Financial Service Request (in HMIS), the reference date is the date on which you are entering the Financial Service Request (FSR) into HMIS.

* If the household self-resolves their homeless situation or moves into housing without receiving assistance through RRH, do NOT enter a Date of Move-In. The Date of Move-In should only be used for participants who find and move into a unit and receive assistance (financial and/or case management) through the RRH program.

** If circumstances arise that require further case management or financial assistance, providers may keep a household enrolled for up to 60 days after their last financial assistance payment. Providers may keep the household enrolled and, if the household does not contact the provider for 60 days after the last payment, may back-date the Exit Date to the date of the last payment or case management meeting. Refer to [Section II.C.](#) for instructions on when to close the case.

Attachment C: Allowable expenses by funding source and HMIS category

Program Type	HMIS Name	Allowable Cost	Transaction Date
ESG, CoC, YHDP, CT DV/HT	Rental/Security Deposit	Security Deposit	Enter the start date of the lease
ESG, CoC, YHDP, CT DV/HT	Rental Assistance	Rental Assistance	Enter the beginning date of the month to which payment is applied – either the 1 st of the month OR if a new lease, start date of the lease.
ESG and YHDP only	Utility Assistance	Utility Payments (ESG & YHDP) or Utility Arrears Payment (ESG Only)	Enter the beginning date of the month to which payment is applied
ESG only	Application Fees	Rental Application Fees	Date of the payment
ESG only	Moving Costs	Moving Costs	Date of the payment
ESG only	Utility Deposit	Utility Deposit	Date of the payment
CoC, CT DV/HT	Home Repair	Property Damage	Date of the payment

Attachment D - CCADV/CCEH CT DV/HT RRH Referral Protocol

Data Entry Field	Description of Field
Referral Date	Date the participant’s unidentified information was sent to CCADV / CIRI
CAN which participant seeks placement	Please enter the CAN name in which the participant is seeking housing. This may not necessarily be the CAN in your catchment area.
VI-SPDAT Score	The score the participant receives from the VI-SPDAT that was conducted by CCADV provider / CIRI in house.
Household Type	The number of bedrooms the participant will need given their family size.
Chronically Homeless	Is the participant chronically homeless by HUD’s definition? Please visit CCEH or HUD’s website for the complete definition.
High Risk	Is the participant identified as high risk due to their LAP screen, danger assessment, SRI or through safety planning?
Point of Contact at CCADV/CIRI	Please allow the person processing your participant to CCEH to fill this section out along with their email and phone number.
Unique Participant ID#	This number will be assigned by the CCADV / CIRI point of contact and sent back to you on the PDF fillable form.

The protocol requires that a domestic violence (DV) or human trafficking (HT) survivor complete the VI-SPDAT with the domestic violence or human trafficking advocate. The DV/HT advocate will also work with the survivor to determine whether they should be marked on the appropriate CAN housing registry as a “high risk priority.” Domestic violence providers may obtain risk detail and interpret lethality using one or multiple factors, including risk assessment, arrest history, the presence of a restraining order and safety plan. If a survivor is marked as a high risk priority, that survivor moves to the top of the list for the appropriate housing resource, and will be the next served when that resource is available. Drawing from this information, the DV/HT advocate fills out a de-identified HMIS referral form which includes the following data entry fields:

Once this referral form is complete, it is emailed by the DV/HT advocate to an established point of contact at CCADV/CIRI. The point of contact then codes the survivor depending on which DV/HT provider the survivor is being referred from. The referral form is then emailed to the point of contact at CCEH who then enters the information into HMIS and provides the CAN with the HMIS code.

The point of contact at CCADV/CIRI also sends the coded HMIS referral form back to the DV/HT provider for their records, so the DV/HT provider can advocate appropriately for the survivor at the CAN meetings in their region. For organizational purposes, a live excel document (which does not include participant identifying information) is kept between the two points of contact

to ensure a referral is not missed. Below is an example of the live excel document. It is the responsibility of the point of contact to fill in all fields except the CCEH acceptance Date, which is filled in by the point of contact at CCEH once the referral is entered into HMIS.

Participant Unique ID#	CCEH Submission Date	CCEH Acceptance Date	Coordinated Access Network	Notes
CCADV1	12/21/2016	12/21/16	New London	Score: 7 Household type:2 High Risk
CCADV2	01/03/2017	1/5/17	Torrington, Winstead	Score: 10 Household Type:2 or 3 High Risk
CCADV3	01/03/2017	1/5/17	Waterbury	