



Tri-County Homeless Interagency Council
Continuum of Care Written Standards
Initially Approved: 2/04/2020
Revision Approved: 8/31/2021
Revised: 4/26/2022
Revision approved: 5/3/2022
Revision approved: 7/26/2022

Contents

Overview	3
Anti-Discrimination, Fair Housing and Faith-based Activities Policy	4
Conflict of Interest Standards	5
Environmental Review Policy	6
Homeless Management Information System (HMIS)	6
Standards for All Projects and Programs	7
Homelessness Prevention (HP)	7
Street Outreach Engagement	8
Emergency Shelter	9
Rapid Re-Housing	10
Permanent Supportive Housing (PSH)	11
Emergency Housing Vouchers - Partnerships with Wilmington Housing Authority	12
Exhibit A Equal Access Anti-Discrimination Policy and Procedures	13
Exhibit B Transgender and Gender Nonconforming Policy and Procedures	16
Exhibit C Grievance, Termination, Appeals and Anti-retaliation Policy	18
Exhibit D Violence Against Women Act (VAWA) and Emergency Transfer Plan	19

Overview

The Tri-County Homeless Interagency Council (Tri-HIC) is the Housing and Urban Development (HUD) designated homeless continuum of care for the City of Wilmington and counties of Brunswick, New Hanover and Pender (NC-506).

The purpose of the Tri -HIC is to assist local governmental jurisdictions, homeless service providers, and community groups in the development of policies, plans, resources, and programs for reducing homelessness and its accompanying conditions.

We are committed to creating the systematic changes necessary to prevent and end homelessness. At the same time, we work to meet the immediate needs of people who are currently experiencing homelessness or who are at risk of becoming homeless.

In March 2015, to better align our Continuum of Care (CoC) with the Homeless Emergency Assistance and Rapid Transition to Housing (HEARTH) Act, members of Tri-HIC voted unanimously to approve the Cape Fear Council of Governments to provide a home for the administrative staff for the CoC and serve as the fiscal agent and collaborative applicant for the ESG and HUD CoC grants.

The CoC has adopted a set of written standards to ensure: a fair and transparent process in vetting projects for funding, efficient and effective delivery of crisis services, the reduction in the number of individuals that enter the shelter system, and reduction in the amount of time that households spend in crisis services before placement into permanent housing. The standards apply to all applications for state and federal funds and may be adopted for use with local funding competitions as well.

Tri-HIC utilizes HUD funding to support the operation of programs for Street Outreach, Emergency Shelter, Homelessness Prevention, Permanent Supportive Housing, and Rapid Re-Housing. Tri-HIC requires applicants seeking funding for emergency shelter (ES), homelessness prevention services (HPS), permanent supportive housing (PSH) and rapid re-housing (RRH) to practice a Housing First model.

Coordinated Entry (CE) is an assessment-based process, required by the federal government that ensures CoC partners prioritize the most vulnerable individuals/families seeking housing and are required to utilize CE (regardless of funding source) for program entry except when it prevents access to emergency services (emergency shelter and street outreach).

All CoC participating organizations must have termination and grievance policies that are made available to all people being served, which clearly state the rights of those individuals. The CoC expects that the CoC's grievance policy will be embedded within the organization's policy [Complaint/Grievance Form](#)

The CoC serves clients in the following ways:

- **Divert** those who are at-risk of becoming homeless by assessing their needs and referring them to appropriate resources to maintain their housing.
- **Coordinate a** referral process for those who are homeless or at risk of homelessness to be screened for the most appropriate resources to address their needs.
- **Prioritize** those who are literally homeless for shelter services and/or permanent housing.

- **Connect** homeless individuals and families to mainstream resources and services as soon as possible.
- **Provide** programs within the CoC to meet the needs of special populations, such as victims of domestic violence, sexual assault, etc.
- **House** individuals and families in the shortest time possible.

Anti-Discrimination, Fair Housing and Faith-based Activities Policy

CoC agencies and staff, volunteers, or contractors are not permitted discriminate against a program participant or prospective participant on the basis of religion or religious belief in providing program assistance. In providing services supported in whole or part with federal financial assistance and in outreach activities related to such services, programs must not discriminate against current or prospective program beneficiaries on the basis of religion, a religious belief, a refusal to hold a religious belief, or a refusal to attend or participate in a religious practice.

The CoC is committed to providing housing and services in an environment in which all individuals are treated with respect and dignity and have equal treatment and opportunity. The CoC's Anti-Discrimination Policies and Procedures ensure all people experiencing homelessness in our service area have equal access to the housing and services necessary to end homelessness.

The CoC's Anti-Discrimination Policies and Procedures apply to partner agencies, CoC Board Members, CoC staff as well as the staff, volunteers, and contractors of all partner agencies, including agencies that receive CoC and ESG funding. We require all partners, regardless of funding source, to adopt these Anti-Discrimination policies or similar policies. The Anti-Discrimination Policies and Procedures adhere to the Department of Housing Urban and Development (HUD) Equal Access Rule. The CoC and all partners in the CoC are committed to complying with all non-discrimination and privacy laws. These policies and procedures aim to ensure safety, dignity, and well-being of all individuals and families served by the CoC. The policies, included in Exhibit A to this document, are as follows:

- Equal Access Policy and Procedures
- Family Separation Policy
- Faith-Based Inclusion Policy
- Grievance and Anti-Retaliation Policy and Procedures

Conflict of Interest Standards

Each Tri-County Homeless Interagency Council (Tri-HIC) active member, chairperson, employee, agent, and consultant is expected to uphold certain standards of performance and good conduct and to avoid real or apparent conflicts of interest.

To prevent a conflict of interest, a Tri-HIC general member, CoC Board Member, employee, agent, or consultant must not:

- Participate in or influence discussions or decisions concerning the selection or award of a grant or other financial benefit to an organization that the Tri-HIC/CoC member, employee, officer, or agent has a financial or other interest in or represents, including immediate family ties, except for the TRI-HIC itself.
- Solicit and/or accept gifts or gratuities on behalf of the Tri-HIC for personal benefit.
- Engage in any behavior demonstrating an actual conflict of interest or giving the appearance of any such conflict.
- Engage in fraud, bribery or any corrupt, or criminal activities including but not limited to misrepresenting/falsifying client, program or agency information or data.
- Engage in unethical business practices.

Individuals with a conflict of interest will inform the Tri-HIC of the conflict and recuse themselves from the meeting or deliberations during such discussions. The TRI-HIC Chair or its administrative designee shall track which TRI-HIC members have conflicts of interest and help to ensure such members do not participate in discussions or decisions in which the members have a conflict.

Each TRI-HIC member, chairperson, employee, agent, or consultant must sign a *Code of Conduct and Conflict of Interest Policy Agreement* to demonstrate that the individual is aware of and agrees to abide by this policy. Signature by the organizational representative binds all representatives of that member organization. Any failure to adhere to the policy may result in disciplinary action. Disciplinary action may include, but is not limited to:

- Written warnings
- Removal from Board or Committee positions
- Designated as ineligible for grant funding
- Dismissal (employees)
- Termination of contracts

In addition to disciplinary action, civil and/or criminal penalties may be sought.

The CoC must keep records showing compliance with code of conduct and conflict of interest requirements, including documentation of a signed policy acknowledgment by all TRI-HIC members. The TRI-HIC will maintain any records supporting exceptions to the conflicts of interest policy as required by 24 CFR part 578.95.

Environmental Review Policy

Activities conducted under CoC or ESG funds are subject to Environmental Review under 24 CFR part 50. HUD-assisted projects are required to comply with the National Environmental Policy Act (NEPA) by conducting an Environmental Review to determine the potential environmental impacts of a project or, if applicable, by documenting its categorical exclusion or exemption from this requirement.

Under § 578.31 of the Interim Rule, CoC funded activities are subject to Environmental Review consistent with 24 CFR part 50. An Environmental Review for each CoC project type must be completed prior to committing or expending CoC Program funds or local funds on any eligible program activity or acquiring, rehabilitating, converting, leasing, repairing, disposing of, demolishing, or constructing property for a CoC funded project. Per 24 CFR 576.407(d), all ESG funded activities must also meet requirements for Environmental Review.

The NC ESG Office or HUD, as applicable, will provide each an Environmental Review form prior to awarding funds. Recipients/subrecipients must complete and return the form to the NC ESG Office/HUD before the contract can be executed and funds can be awarded. This is the only action the Recipient/Subrecipient is required to take to comply with the Environmental Review requirement per the ESG Office. HUD may have other requirements that are program dependent. Records of completed Environmental Reviews must be retained in accordance with 24 CFR 578.103(a).

Homeless Management Information System (HMIS)

The CoC requires the use of a HMIS system to track data on persons experiencing homelessness served throughout the CoC. HMIS is used for system measures in the following ways: gaps analysis, Point-In-Time Count, Housing Inventory Count, and System Performance Measures. The system is also used to measure the performance of individual agencies through various reports including the CAPER and APR.

HMIS provides a central database for managing client engagement, services, and outcomes. The CoC is moving toward requiring all participating agencies to use HMIS for Case Management. CoC Staff and the HMIS Lead agencies provide training on the use of the HMIS system including case management, reporting and basic data entry.

The HMIS system includes financial management modules that can be used by agencies to track spending. The CoC requires funded agencies to provide quarterly reporting on spending by the 15th of the month after the quarter ends or, if the agency chooses to use HMIS, access to pull financial reporting from HMIS.

Agencies using HMIS will use the designated forms within the HMIS system for projects that they are operating. Client information entered should be timely, accurate and complete. Information is protected according to HMIS privacy standards, and clients are given the option of the privacy level pursuant to

their privacy needs. Participating agencies sign an ROI that encourages programs to share relevant client data in order to serve clients effectively.

Standards for All Projects and Programs

CoC partner organizations must make available to clients the following documents upon project entry:

1. HMIS Release of Information form,
2. HMIS Public Notice,
3. Agency client guidelines,
4. Agency policies and procedures for the project, and
5. Agency and CoC grievance policies.

Homelessness Prevention (HP)

Standards for Targeting and Providing Prevention Services:

Homelessness Prevention programs provide funding and person-centered housing case management to individuals and families who are at risk of becoming homeless. This includes those whose income is at or below 30% of Area Median Income (AMI) and who do not have sufficient resources or support systems (e.g. family, friends, etc) available to prevent them from becoming homeless. A person can apply for assistance within 21 days of the date that their occupancy will be terminated, based on written notification (i.e. letter, email, text)

Agencies receiving funds for homelessness prevention must confirm that an individual or family *meets one* of the following criteria:

- Has moved two or more times during the 60 days immediately prior to the application for assistance due to economic reasons
- Is living in the home of another because of economic hardship (including doubled up families and “couch surfing”)
- Lives in a hotel/motel and the cost of the hotel/motel stay is NOT paid by charitable organizations or by Federal, State, or local government programs for low-income individuals
- Lives in a Single Room Occupancy (SRO) or efficiency apartment/unit in which there are more than two persons living OR lives in a larger housing unit in which there are more than 1.5 persons per sleeping room.
- Is exiting a publicly funded institution or system of care
- Lives in [substandard housing](#)
- Is a child/youth who does not qualify as homeless under section 24 CFR § 576.2 but qualifies under one of the following federal definitions: *Runaway and Homeless Youth Act, Head Start Act, Violence Against Women Act of 1994, McKinney-Vento Homeless Assistance Act*, etc. the parent(s)/guardian(s) of that child living with the child also meets criteria.

Prevention programs must show the capacity to provide person-centered, housing stability case management. Housing search assistance may be provided for 30 days prior to a household being housed either directly or through an identified housing location partner. Housing search assistance may be provided for more than 30 days as long as the agency can document the need for ongoing search efforts.

The project must have the capacity to provide Housing Stability Case Management for up to 24 months after they are re-housed or their current housing is stabilized. Continuation of case management and the decision to exit case management should be based on the family's projected ability to remain stably housed.

Providers must engage in the following activities to ensure that Homelessness Prevention funds are effectively utilized:

1. Providers will prioritize families with children and households with disabilities.
2. Providers will use due diligence when verifying that a family meets the criteria for assistance using the document standards below:
 - a. The "at-risk" condition by obtaining documentation relevant to the applicant's statement of their condition. If a lease is expiring and is not being renewed, a notice of nonrenewal of lease termination is required. If a lease is being terminated for cause (i.e. non-payment or violation) a court order resulting from that legal action is required. Self-declarations will not be accepted when the applicant has a legally binding lease. For those without a legally binding lease, an equivalent notice is required.
 - b. Verify resources available to the family using federal standards of verification, starting with 3rd party written or documented verification (preferred form) and including available income and assets of the individual/family.
3. Providers will assist applicants who are ineligible and at risk of homelessness with a referral to other area partners as available or with other funding administered by the provider. This includes referrals to other area partners who have been identified as having funding sources that could potentially provide assistance.

Street Outreach Engagement

Standards for Targeting and Providing Essential Outreach Services:

Street Outreach services target unsheltered, homeless individuals/families in order to build relationships for the purpose of providing immediate support, intervention and connections with homeless assistance programs or other social services and housing programs. Applicants for funding to support street outreach must demonstrate that the program has the specific strategies to reach unsheltered persons in the community, which includes meeting individuals/families in the physical location of their choice. Street Outreach thrives on building relationships with other service providers that will help people move off the streets as quickly as possible.

The CoC expects that Street Outreach providers operate according to the following:

1. Seek out and meet individuals/families experiencing homelessness where they are located in the community. An initial need and eligibility assessment is conducted in the field. Eligible

individuals/families are provided the following as desired: engagement, case management, emergency health services, emergency mental health services, transportation, or other appropriate services specific to special needs populations.

2. Inform and refer individuals/families to Coordinated Entry (CE). Educate individuals/families on the emergency shelter options. Outreach workers develop relationships with individuals/families in order to encourage connections with other service providers that will help people move off the streets as quickly as possible.
3. Develop/maintain relationships with emergency shelters in order to quickly facilitate entry for any person desiring shelter.
4. Use *Housing First* principles.

Emergency Shelter

Standards for Emergency Shelters:

The CoC allows anyone experiencing homelessness to access emergency shelter programs immediately, without being assessed and then referred to the shelter through the Coordinated Entry (CE) process. Shelters funded through federal or state funds and operating within the CoC are expected to work toward the goal of helping individuals/families resolve their housing crisis within 30 days. All funded agencies must attend CE meetings.

1. Shelter residents will be screened using the *NC HMIS Street Outreach and Shelter Intake Form*. This is to ensure that all HMIS required data elements are collected upon entry to the greatest extent possible. Participants will be screened to ensure that they meet the Category 1 or Category 4 definitions of homelessness as per the ESG Interim Rule and by using ESG issued Homeless Verification forms. The CoC has adopted these forms as their standard, regardless of funding source. Funded shelters will follow the process of verification starting with third party verification, staff observation (if a third-party verification cannot be obtained), and lastly, accepting self-certification.
2. Funded emergency shelters may incorporate additional screening questions for entry that meet the organizations mission and population served, as long as the program follows the *Housing First* principles.
3. Funded emergency shelters will provide clients with the following documents upon entry; HMIS release of information form, HMIS Public Notice, client guidelines, program policies & procedures, and grievance policy. Funded emergency shelters will have termination and grievance policies that are provided to all people being served by the shelter. These policies will include the shelter residents' individual rights, as well as the agency's chain of command including points of contact to address grievances.
4. Funded emergency shelters must operate seven (7) days a week and must have written policies and procedures for emergencies and natural disasters.

Rapid Re-Housing

Standards for Rapid Re-Housing (RRH):

RRH is used to quickly move individuals and families from homelessness into housing. This includes: those who are literally homeless, living in shelter, or in a place not meant for human habitation and cannot be diverted through another resource to immediate housing. The long-term goal of the program is housing retention.

RRH programs must show the capacity to provide person-centered, housing stability case management. Housing search assistance may be provided for 30 days prior to a household being housed either directly or through an identified housing partner. Housing search assistance may be provided for more than 30 days as long as the agency can document the need for ongoing search efforts.

RRH programs must use Housing *First* principles to provide financial assistance. There is no minimum income or employment requirement nor is there a requirement for clients to participate in case management, treatment, or education programs. However, these types of support services are beneficial in helping participants to sustain housing. Assistance is available to clients based on need for up to 24 months in order to maintain stable housing. Client participation is voluntary.

Individuals/families who score in the range of 4-7 on the VI-SPDAT will be referred to RRH programs and will be prioritized for RRH assistance. VI-SPDAT scores of 8+ will be considered for RRH assistance if the individual/family is not chronically homeless and/or no PSH openings are available at the time of assessment.

After 12 months, in order to be eligible for continued financial assistance, program participants must have an annual income at or below 30 percent of the area median income (AMI). Person-centered housing stability case management is not income specific and must be available to households for up to 24 months after they are housed.

Termination from the RRH program does not automatically disqualify an individual from receiving assistance at a later date. Clients may be reassessed for additional assistance if the issue requiring program termination has been resolved and the client is within the designated time period for assistance and meets RRH criteria.

If the provider is considering an exit destination to anything other than a leased unit, they must educate the client on their rights as a tenant. In non-leased situations (boarding house, family placement, relocation, etc.) programs must provide case management for at least 90 days following the placement in order to ensure stability, longevity and participants' awareness of their rights.

RRH providers engage in the following activities to ensure that RRH funds are effectively utilized:

1. Referred from Coordinated Entry (CE). Service is based on a combination of need and first come-first served basis.
2. Serve those below 30% of Area Median Income (AMI), which will be documented using verification of income and asset certification forms and supported by corresponding financial statements (pay

stubs, benefits award letter, bank statements, and any other form of income statements). RRH providers will use the guidelines set out in [24 CFR 5.609](#) when calculating income.

3. Conduct a realistic assessment of the household's budget to ensure housing costs (rent, utilities & other resident required costs) for proposed units do not exceed 40% of the gross household income.
4. Ensure that the household budget addresses potential barriers to maintaining housing including possible increases in travel costs for those who work and/or other household costs associated with the location.
5. Take all steps to ensure and document that rental rates are reasonable and that the condition of the unit provides for the safety and well-being of those being placed into housing. Staff will determine rent reasonableness for the unit in the county where the individual/family is being housed using HUD standards for determination of rent reasonableness. Staff will inspect all units using the habitability standards established by HUD. Documentation of habitability is required including the inspection results, lead based paint, and/or other conditions.
6. Provision of sufficient financial assistance to obtain and maintain permanent housing.
7. Re-evaluation of household income at least every six (6) months.

Program participants rent portion will be determined by the following:

- Households are not required to pay a portion of the first month's rent.
- Households with Housing Barrier Matrix Score 4-5 AND VI-SPDAT Score 6 or higher are not required to pay a portion of the rent for two months.
- Households with income will be required to pay no more than 40% of gross household income toward rent for the remaining months that assistance is provided.
- RRH providers will use the Fair Market Rent and Utility Allowances for Tenant-Furnished Utilities from the housing authority with jurisdiction in the county where the unit is located when determining rental assistance.

Permanent Supportive Housing (PSH)

Standards for Permanent Supportive Housing (PSH):

PSH is the recommended housing intervention for individuals who are chronically homeless and have a disabling condition. It provides a combination of affordable housing with case management support to provide housing stability for those that are likely to continue to experience homelessness without ongoing assistance.

Tri-HIC partners provide various types of permanent supportive housing. All PSH funded through the HUD Continuum of Care grant process must utilize the Coordinated Entry (CE) system as a process for receiving new participants. PSH providers should refer to the CE Policies and Procedures for additional standards regarding screening and acceptance of new participants.

If the provider is considering any exit destination other than a leased unit, they must educate the client on their rights as a tenant. In non-leased situations (boarding house, family placement, relocation, etc...) programs must provide case management for at least 90 days following the placement in order to ensure stability, longevity and awareness of their rights.

PSH providers must be Housing First as outlined below and defined by HUD guidance:

- Reduces barriers to housing entry
 - Does not screen out for current or past substance abuse
 - Does not screen out for type of disability (including mental and physical illness)
 - Does not screen out for past legal issues, except those dictated by federal guidelines
 - Does not screen out for little or no income
 - Does not screen out for poor credit or rental history
 - Does not screen out for current or experience as a victim of domestic violence
- Reduces barriers to housing retention
 - Does not evict for non-compliance with a housing plan
 - Does not evict for violation of rules that are not part of a standard lease
 - Does not evict for drug or alcohol use
 - Does not evict for non-compliance with medication or a treatment plan
 - Practices policies to prevent lease violations and evictions
- Offers person-centered services and case management:
 - Case management is separate from property management
 - Offer services based on participants needs and requests
 - Services can be provided by the PSH program or a community provider
 - Additional/outside services are voluntary
 - Offer case management services in settings that meet the residents needs
 - Bring resources on-site
 - Incentivize engagement in services
 - Train staff on best practice approaches to case management
 - Have a process for resident feedback

Tenant Rights under PSH Programs:

- Participants must be informed of and educated of their full rights, responsibilities, and legal protections. PSH participants are protected under the fair housing laws and should be informed of their rights as well as their responsibilities as participants in a legally binding lease.
- The tenant lease functions as the termination policy, which legally ensures that participants receive sufficient notice of termination and have a right to appeal termination to the organizational leadership.

Emergency Housing Vouchers - Partnerships with Wilmington Housing Authority

This section is pending development.

Exhibit A

Equal Access Anti-Discrimination Policy and Procedures

CoC- and ESG-funded providers must not discriminate on the basis of any protected characteristic, including: race, ethnicity, color, national origin, language, ancestry, religion, sex, familial status, age, gender identity, LGBTQ+ (lesbian, gay, bisexual, transgender, queer/questioning, etc.) status, marital status, domestic or sexual violence victim status, or sensory, mental, or physical disability.

This means that the CoC and partner agencies and their staffs, volunteers, and contractors will not:

- Deny any person facilities, services, financial aid, or other benefits.
- Provide services that are different, or are provided in a different form, from that provided to others under the program or activity, unless doing so provides an accommodation based on one of the protected characteristics listed above to preserve the safety, dignity, and well-being of the individual or family being served.
- Subject any person to segregated or separate treatment in any facility or in any matter or process related to receipt of any service or benefit under the program or activity.
- Restrict in any way access to, or the enjoyment of any advantage or privilege enjoyed by others in connection with, facilities, services, financial aid, or other benefits under the program or activity.
- Treat any person differently from others in determining whether the person satisfies any admission, enrollment, eligibility, membership, or other requirement or condition, which individuals must meet to be provided shelter, services, or other benefits provided under the program or activity.
- Deny meaningful access to persons with limited English proficiency, to include translated documents, notice of participant's rights, grievance forms, and other materials vital for program access or fail to work with language services or interpreters to assist persons who speak an alternate primary language other than the staff persons and need assistance communicating.

The CoC partner agencies will make shelter and housing available to all otherwise eligible individuals regardless of actual or perceived sexual orientation, gender identity, or marital status. Agencies will ensure equal access to programs for all individuals and their families; provide housing, services, and/or accommodations in accordance with a clients' gender identity; and determine eligibility without regard to actual or perceived sexual orientation, gender identity, or marital status.

All agencies must manage a responsible and sound operation in accordance with federal and local nondiscrimination and equal opportunity provisions, as codified in the Fair Housing Act, Section 504 of the Rehabilitation Act, Title VI of the Civil Rights Act, Titles II & III of the Americans with Disabilities Act, HUD's Equal Access to Housing Rule and Gender Identity Final Rule, 24 CFR 5.100, 5.105(a)(2) and 5.106(b). This includes establishing an Agency Anti-Discrimination Policy and grievance procedures and sharing all policy and procedures with clients, staff, volunteers, and contractors.

Anti-Discrimination Procedures:

The CoC and its partner agencies along with their staff, volunteers, and contractors must maintain policies and procedures prohibiting discrimination based on race, color, national origin, religion, sex, familial status, age, gender, LGBTQ+ status. The CoC affirms and its partner agencies must affirm their commitment to serving all eligible clients by adhering to these anti-discrimination policies and procedures and incorporating language into their agency policies.

Procedures must: *Training*

- Provide access to facilities, services, financial aid, or other benefits provided under the program or activity for all current and potential individuals and families.
- Provide services to everyone and treat them with dignity and respect.
- Training & Education Provide annual and as needed training to CoC agencies and agency staff, volunteers, and contractors regarding the CoC's Anti-Discrimination policies and procedures, the Equal Access Rule, and related policies and procedures.
- Ensure staff, volunteers, and contractors are trained on Fair Housing, CoC and agency Anti-Discrimination Policies and Procedures.
- Ensure staff, volunteers, and contractors understand that a client may not present the way they identify. Staff should be provided continuing education annually on Anti-Discrimination policies and procedures, with follow up from their supervisor, to ensure they follow CoC and agency policies.
- Participate fully in all trainings and adhere fully to CoC and agency antidiscrimination Policies and Procedures.
- Request assistance from CoC staff and leadership when the need arises to understand how to apply antidiscrimination policies and procedures.

Agencies must: *Language*

- Use appropriate, inclusive language in communications, publications, trainings, personnel handbooks, and other policy documents that affirms the CoC's commitment to serving all eligible clients in adherence with the HUD Equal Access Rule.
- Use appropriate, inclusive language with all communication, including taking reasonable steps to ensure meaningful access to programs and activities by Limited English Proficient (LEP) people.
- Use appropriate language in all communication with people experiencing homelessness served by agency programs.
- Ensure meaningful access to persons with Limited English Proficiency, to include translated documents, notice of participants rights, grievance forms, and other materials vital for program access.
- Work with language services or interpreters to assist persons who speak an alternate primary language other than the staff person and need assistance communicating.

Agencies must: *Privacy Rights*

- Support all clients to understand their privacy rights and the implication of releasing information. Provide clear and transparent information about privacy rights at intake.
- Read privacy rights to each client.
- Read the HMIS privacy notice for HMIS-participating agencies.
- Train staff, volunteers, and contractors on the CoC's and agency's confidentiality and privacy policies and practices on an annual basis.
- Honor the request of an individual for a private space to complete intake and data collection.
- Adhere to any CoC and/or agency confidentiality and privacy policies.
- Client information should never be shared with people outside agency staff without permission and should be shared with agency staff on a 'need to know' basis.

Agencies must: *Equal Access and Grievances*

Develop and maintain a grievance procedure that can be accessed by clients, staff, volunteers, contractors, and partner agencies. Post grievance procedures to the agency's website and/or provide printed copies in a public space. Mediate and resolve conflicts between clients in a way that respects clients and treats them fairly and equally.

Take immediate action to resolve inappropriate behavior, treatment, harassment, or equal access issues by any person (staff, volunteers, contractors, or clients) with appropriate consequences. Inform clients at intake of the Equal Access grievance process. Support clients to proceed through the grievance process. Communicate with administrators if any issues arise. Provide all clients with a copy of the grievance policy at intake and share with all clients with a grievance.

Exhibit B

Transgender and Gender Nonconforming Policy and Procedures

The CoC prohibits all forms of harassment and discrimination of or by clients, employees, visitors, and volunteers, including harassment and discrimination based on actual or perceived gender identity and expression, or based on an individual's association.

The CoC will develop partnerships with organizations that can provide expertise around providing services to transgender and gender nonconforming individuals in a manner consistent with federal, state, and local laws. Agencies, staff, volunteers, and contractors must affirm commitment to providing equal access for all transgender and gender nonconforming individuals in a manner consistent with the equal access rule and provide services to transgender and gender nonconforming individuals in a manner consistent with the equal access rule.

To maintain equal access, agencies and staff should:

- Ensure all staff, volunteers, and contractors maintain the confidentiality of a client's legal name and gender at birth, sex assigned at birth, and understand the potential impact that disclosure can have on a client's progress to self-sufficiency.
- Ensure that construction or property rehabilitation includes and promotes privacy and safety in sleeping areas, bathrooms, and showers.
- Offer individual stalls in congregate bathrooms, urinals/toilets, and shower heads to support client safety whenever possible.
- Offer individual gender-neutral bathrooms and gender-neutral shower rooms, where feasible.
- Not consider a client or potential client ineligible because their appearance or behavior does not conform to gender stereotypes and will serve all individuals eligible for the program.
- Not ask questions or seek information concerning a person's anatomy or and only seek the most necessary elements of information regarding a person's medical history beyond elements necessary for the purpose of providing services.
- Have a preference to move the client with a bias (e.g. move the individual who has concerns towards the person who may identify as another religion that is different from theirs), if a client needs to be moved for harassment and safety concerns.
- Honor the request of an individual for a private space to complete intake and data collection.
- Honor the request of an individual for accommodations based on their personal safety and privacy concerns, whenever feasible. An "accommodation" will not be given as a "requirement." This might include a private sleeping area or access to a single-use bathroom if possible.
- Not require an individual's gender identity or name to match the gender or name listed on an ID or other documents.
- Focus on improving the process of changing gender markers on identification and benefit applications or will ensure subject matter expertise among staff.
- Assist clients without identification documents to understand the resources available to obtain said documents.
- Make available intake materials that allow individuals to indicate their legal name and the name they prefer to be called. All staff and volunteers should use the preferred name if it is different from a legal name, and legal name should be kept private and confidential.
- HMIS participating agencies should enter the client's preferred name.

- Give clients with prescribed hormones and other medications as part of their gender-affirming healthcare regime full access to those medications.
- Use the client's preferred gender and pronoun and support the client's gender identity.
- Correct any misinformation or inaccurate conclusions that transgender clients threaten the health or safety of other clients solely based on their non-conforming gender identity/expression during risk-based conversations.
- Keep client's transgender status confidential unless the client gives permission to share this information.
- Tell only essential staff, identified by administrators, regarding a client's transgender status to ensure equal access and safety.
- Ensure staff treat client gender identity and sex assigned at birth as confidential medical information unable to disclose without specific, time-limited client consent. Similarly, client legal name shall be treated as confidential information.

Family Separation Policy In compliance with CoC Program Interim Rule 24 CFR 578.93(e), involuntary separation is prohibited in projects funded through CoC and ESG dollars.

CoC- and ESG-funded projects may not deny admission to any household on the basis of:

- Age and gender of a child under 18, or
- Gender or marital status of a parent or parents.

The CoC will work with providers to ensure placement efforts are coordinated to avoid involuntary family separation. Any person who believes that they or a family member has experienced involuntary family separation may report the issue to CoC staff and may submit a written grievance for review. The CoC's Oversight Committee will review and respond to the grievance in accordance with the CoC's written policies and procedures.

Exhibit C

Grievance, Termination, Appeals and Anti-retaliation Policy

Grievance:

Anyone participating in the CoC has the right to file a grievance if they have a complaint about the provision of housing and services.

Grievance Procedures:

At intake, orientation or employment, all clients, staff, volunteers, and contractors should be provided the Agency's Anti-Discrimination Policy and should be informed of the program's grievance process.

- Anyone can submit a complaint form initially to program administration.
- Program administration will address the grievance with the provider and the client, staff, volunteer, or contractor. If the grievance is against a program administrator, the agency should have an objective representative body, such as a Board Executive Committee, hear and make decisions about the grievance.
- Each agency is expected to have a written grievance review and escalation policy and to provide their policy to program participants.

If a participant is not satisfied with the outcome or if a participant fears retaliation at the program level, a complaint can be filed with the CoC to be submitted to the Oversight Committee for review. The CoC's grievance form is available on our website, along with contact information for CoC Staff.

Termination:

For all funded projects must have a termination policy that is consistent with the CoC's Housing First approach to service provision. The policy must include, at a minimum:

- Written notice to program participants containing a clear statement of the reason(s) termination may occur,
- Written procedures for a participant to appeal the decision to terminate services,
- A written description of the process for reviewing the decision to terminate services, in which the program participant is given the opportunity to present written or oral objections before a person other than the person, or subordinate of that person, who made or approved the termination decision
- Prompt written notice of the final decision to the program participant

Anti-Retaliation Policy:

The CoC affirms that people who file a grievance have the right to do so without retaliation from the party accused or any associated representative. Retaliation includes, but is not limited to; harassment, intimidation, violence, program dismissal, refusing to provide services, use of profane or derogatory language to or in reference to the complainant, or breach of contract.

Exhibit D

Violence Against Women Act (VAWA) and Emergency Transfer Plan

With the 2016 Reauthorization of the Violence Against Women Act (VAWA) of 2013, several key changes were enacted that effect housing providers. Most prominent is the ability for participants and affiliated household members to request a transfer to another rental unit if they are experiencing domestic violence, dating violence, stalking or sexual assault, and/or feel threatened that it will occur or continue as long as they stay in their current residence.

VAWA requires that applicants, new residents, and current residents of any rental unit receiving assistance through Continuum of Care (CoC), Emergency Solutions Grant (ESG), HOME-Tenant Based Rental Assistance (HOME-TBRA), or Housing Opportunities for Persons With AIDS (HOPWA), receive notification of their right to request a transfer without penalty, that housing providers place a priority on moving the household to a new unit, that the unit location must meet the approval of the tenant(s), that all associated documentation meet strict storage and confidentiality requirements and the outcome of the requests must be tracked and reported.

These changes reaffirm protections for victims and affiliated individuals of domestic violence, dating violence, sexual assault, and stalking. An affiliated individual is defined as a spouse, parent, brother, sister, child, or guardian, or any other lawful occupant living within the household.

Definitions:

Internal Emergency Transfer: refers to an emergency relocation of a tenant to another unit where the tenant would not be categorized as a new applicant; that is, the tenant may reside in the new unit without having to undergo an application process.

External Emergency Transfer: refers to an emergency relocation of a tenant to another unit where the tenant would be categorized as a new applicant; that is the tenant must undergo an application process in order to reside in the new unit.

Safe Unit: refers to a unit that the victim of domestic violence, dating violence, sexual assault, or stalking believes is safe.

Immediately Available: a vacant unit, ready for move-in with a reasonable period of time.

Housing Provider refers to the individual or entity under a housing program that has responsibility for the administration and/or oversight of VAWA protections and includes Public Housing Agencies (PHAs), sponsors, owners, mortgagors, managers, State and local governments or agencies thereof, nonprofit or for-profit organizations or entities. The program-specific regulations for the housing programs identify the individual or entity that carries out the duties and responsibilities of the housing provider; that is, depending upon the VAWA duty or responsibility to be performed by a housing provider, the housing provider may not always be the same individual or entity.

A tenant receiving rental assistance through, or residing in a unit subsidized under, a covered housing program who is a victim of domestic violence, dating violence, and sexual assault or stalking qualifies for an emergency transfer if:

1. The tenant expressly requests the transfer; and
2. The tenant reasonably believes there is a threat of imminent harm from further violence if the tenant remains within the same dwelling unit that the tenant is currently occupying; or
3. In the case of a tenant who is a victim of sexual assault, either the tenant reasonable believes there is a threat of imminent harm from further violence if the tenant remains within the same dwelling unit that the tenant is currently occupying, or the sexual assault occurred on the premises during the 90-calendar-day period preceding the date of the request for transfer.

Federal Regulations:

In accordance with 24 CFR Part 5, subpart L, a housing provider¹ shall:

1. Provide all new tenants and applicants (upon denial of residence) a copy of the “Notice of Occupancy Rights” and a copy of the “Certification Form for Documenting Incidents”. All other tenants that began residence prior to December 16, 2017, must be provided a copy of these documents upon renewal, or if not being renewed before then, by another means.
2. Adopt and keep record of an Emergency Transfer Plan for all affected lease holders. The Emergency Transfer Plan must be available upon request. The plan must:
 - a. Detail the priority given to persons who qualify for an emergency transfer under VAWA Reauthorization of 2013 in relation to others requesting a transfer;
 - i. Tenant Selection Plans (TSPs) should be amended to include any VAWA preferences (this does not require HUD approval)
 - b. Allow tenants who are victimized to make an internal emergency transfer immediately after a safe unit (as determined by the victim) becomes available, ensuring that the transfer receives at a minimum any additional priority already allowed for other types of emergency transfer requests;
 - c. Describe reasonable efforts by the housing provider to assist a victim in making an external emergency transfer (as determined by the victim) if a safe unit is not immediately available. Each housing provider must also assist other victims who are seeking an external transfer from a covered housing provider; and
 - d. Describe remedies available to protect victims that may also include lease bifurcation or providing reasonable time (no less than 90 days) to establish eligibility for assistance at alternative housing. Additionally, if the abuser/perpetrator is removed through bifurcation,

¹ Covered housing provider refers to the individual or entity under a [covered housing program](#) that has responsibility for the administration and/or oversight of [VAWA](#) protections and includes [PHAs](#), sponsors, owners, mortgagors, managers, State and local governments or agencies thereof, nonprofit or for-profit organizations or entities.

and the abuser/perpetrator was the sole tenant to have established eligibility for covered housing program, the victim and other household members must be allowed to remain in the unit for 90 days in order to establish household eligibility under existing program or to find alternative housing.

- i. Nothing may preclude a tenant from seeking an internal emergency transfer and an external emergency transfer concurrently if a safe unit is not immediately available. It is recommended that this policy be clearly stated in the plan.
3. Keep a record of all emergency transfer requests and the outcomes of all requests for at least three (3) years.
 4. Keep all related information in strict confidence; which includes but not limited to, not entering any data related to the emergency transfer request onto a shared database, or disclosing any information to anyone else without written consent with a timed release when required by law.
 5. Emergency Transfer Plan policies may include documenting arrangements, including memoranda of understanding with other covered housing providers to facilitate transfers and the referral process to organizations that assist or provide resources such as counseling and safety planning to victims of domestic violence, dating violence, sexual assault or stalking.
 6. The plan should state that a request does not guarantee continued assistance or an external transfer to other HUD housing.
 7. Where applicable, the plan must describe policies for a tenant who has tenant-based rental assistance (ie: voucher) and who meets the requirements to move quickly with that assistance. Housing providers should coordinate with local providers of the tenant-based assistant (ie: PHA)
 8. The plan may require documentation from a tenant seeking an emergency transfer, provided that:
 - a. The tenants submission of a written request to the housing provider, where the tenant certifies that they meet the eligibility requirements to request a VAWA transfer, shall be sufficient documentation of the requirements necessary to request an emergency transfer;
 - b. The housing provider may, at its discretion, ask an individuals seeking an emergency transfer to document the occurrence of domestic violence, dating violence, sexual assault, or stalking, in accordance with 24 CFR 5.2007, for which the individual is seeking the emergency transfer, if the individuals has not already provided documentation of that occurrence; and
 - c. No other documentation is required to qualify the tenant for an emergency transfer.

Safety and Security:

Pending processing of the transfer and the actual transfer, if it is approved and occurs, the participant is urged to take all reasonable precautions to be safe.

Participants who are or have been victims of domestic violence are encouraged to contact the National Domestic Violence Hotline at 1-800-799-7233, or a local domestic violence shelter, for assistance in creating a safety plan. For persons with hearing impairments, that hotline can be accessed by calling 1-800-787-3224 (TTY).

Participants can find resources on the CoC's website and obtain information from CoC staff. Tenants who have been victims of sexual assault may call the Rape, Abuse & Incest National Network's (RAINN) at 800-656-HOPE (4673) or visit the website at www.rainn.org.

Participants may find a listing of local rape crisis centers at the North Carolina Coalition Against Sexual Assault's website, www.nccasa.org. Participants who are or have been victims of stalking seeking help may visit the National Center for Victims of Crime's Stalking Resource Center at www.victimsofcrime.org.