

**Coordinated Entry System Info
for Housing Developers, Owners, and
Property Managers**

2017

This information is from HUD Coordinated Entry Guides and Minnesota Statewide Coordinated Entry System Policies and Procedures.

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Introduction

In 1995, the U.S. Department of Housing and Urban Development (HUD) began requiring communities to submit a single application for McKinney-Vento Homeless Assistance Grants to streamline the funding application process, encourage coordination of housing and service providers on a local level, and promote the development of Continuums of Care (CoCs). By requiring communities to submit a single application, HUD hoped to encourage a more structured and strategic approach to providing housing and services to homeless people.

A CoC is a regional or local planning body that coordinates housing and services funding for homeless families and individuals. CoCs represent all communities, including major cities, suburbs and rural areas. HUD identifies four necessary parts of a CoC.

Outreach, intake and assessment to identify service and housing needs and provide a link to the appropriate level of both

Emergency shelter to provide an immediate and safe alternative to sleeping on the streets, especially for homeless families with children

Transitional housing with supportive services to allow for the development of skills that will be needed once permanently housed

Permanent housing and permanent supportive housing to provide individuals and families with an affordable place to live with services, if needed

CoCs are tasked to track and manage the homeless community in their area, and one of most important activities entrusted to CoCs is the establishment and operation of a Coordinated Entry (CE) process.

CE represents a CoC-wide process for facilitating access to CoC resources, identifying and assessing the needs of persons experiencing a housing crisis, and referring clients to the most appropriate service strategy or housing intervention. The most effective CE systems prioritize available resources based on an intentional strategy for achieving CoC goals while respecting clients' needs and preferences. CE represents a fundamental systems change for many CoCs that involves individual homeless projects no longer making enrollment determinations independent of a CoC-wide strategy for allocating homeless assistance. For many CoCs, this means prioritizing all available homeless and housing assistance to people having the greatest need who have historically experienced difficulty in accessing CoC projects. Regulations in HUD's CoC program and Emergency Solutions Grants (ESG) interim rules require that CoCs establish a Coordinated Entry System (CES), and homeless and housing assistance funders in Minnesota have also adopted the CE requirement for their projects.

Chapter 1 – Minnesota’s Statewide Strategy

1.01 Benefits of Coordinated Entry

Although individual CoCs in Minnesota must design and implement a CE system, CoC stakeholders and state homeless assistance funders recognize great benefit in establishing CE design principles that are consistently adopted and followed by all CoCs across the state. Minnesota published a CE Strategic Plan to document these efforts. While local factors such as client needs, provider capacity, resource availability and geographic characteristics might require some amount of local, community-specific accommodation and customization, the state’s CE Strategic Plan establishes guidelines for CE systems that adhere to a common set of design principles and operating guidelines. This strategy will ensure that clients experience consistency in the manner in which CoC resources are accessed, clients’ needs are documented and referrals are coordinated. In addition, this approach to CE design and implementation enables Minnesota to more consistently and accurately document needs across multiple CoC jurisdictions, allocate scarce resources according to defined needs and evaluate the effectiveness of the state’s crisis response systems.

1.02 Guiding Principles of Coordinated Entry

To maintain consistency throughout Minnesota, the following principles guide the CE process:

Adopt statewide standards. This allows flexibility for local customization beyond baseline standards.

Promote client-centered practices. Every person experiencing homelessness should be treated with dignity, be offered at least minimal assistance and be given the opportunity to participate in his/her housing plan. CoCs provide ongoing opportunities for client participation in the development, oversight and evaluation of coordinated assessment, and participants should be offered choice whenever possible.

Prioritize most vulnerable participants as the primary factor among many considerations. Limited resources should first be directed to people and families who have the most severe service needs and are most vulnerable. People with less severe service needs and lower levels of vulnerability will be assisted as resources allow.

Eliminate barriers to housing placement. Identify system practices and individual project eligibility criteria that may exclude participants from services, and work to eliminate those barriers. Barriers could include conditions such as income or sobriety as eligibility requirements for enrollment.

Be transparent. Make thoughtful decisions and communicate directives openly and clearly.

Exercise continuous quality improvement efforts. Strive for effectiveness and efficiency, and agree to make changes when those objectives are not achieved.

Be collaborative and inclusive. Promote collective planning and decision making practices.

Recognize diversity. Acknowledge and honor tribal sovereignty; respect cultural, regional, programmatic, linguistic and philosophical differences.

Analyze local and statewide housing needs. Use CE data to create diverse housing options.

Chapter 2 – Coordinated Entry System

2.01 Minnesota’s Coordinated Entry System Design

Minnesota CoCs have adopted the HUD CE definition from the CoC Program interim rule:

A centralized or coordinated process designed to coordinate program participant intake assessment and provision of referrals. A CES covers the geographic area, is easily accessed by individuals and families seeking housing or services, is well advertised, and includes a comprehensive and standardized assessment tool.

Minnesota CE planners have not been prescriptive about exactly how CES access and services must be advertised. Generally speaking, CES can be communicated via flyers, websites, posters, announcements at applicable meetings, and it can be referenced in existing promotional materials describing the CoC and available homeless services.

Minnesota’s design of CES, building on the HUD/CoC definition, clarifies that CES refers to a state-adopted and CoC-approved process designed to simplify and coordinate program participant intake, assessment, prioritization and administration of housing referrals. While Minnesota has established baseline requirements for CES design and operations, each independent Minnesota CoC may adopt locally-specific practices as long as those approaches align with the state’s approach. Each CoC must maintain written policies and procedures for the CE process that cover the 12 following requirements.

2.02 Coverage

Each CoC must define the geographic area in which the CES operates. If the geographic area includes negotiated partnerships and/or collaborations with neighboring geographic areas or CoCs for purposes of expanding referral options, improving service coordination, and/or defining data sharing options, the nature of those relationships with other geographic areas/CoCs must be explicitly identified and defined in the written policies and procedures.

2.03 Fair and Equal Access

Each CoC must ensure that all persons experiencing homelessness in the CoC’s CES geographic area have fair and equal access to the coordinated assessment process. To ensure easy access to the assessment by individuals with disabilities, physical and communication accessibility barriers must be addressed. A CES must ensure potential participants have easy access to crisis response services, whether in person, by phone, or some other method. CES locations must also be accessible. If individuals must be present to receive screening and/or assessment services, the location must be easily accessible by public transportation, or there must be another method by which individuals can easily access it.

The CES process must be linked to existing CoC funded outreach efforts, if applicable, so that people served by an outreach worker are prioritized for assistance in the same manner as any other person assessed through coordinated entry.

A CES process must include all subpopulations: persons experiencing chronic homelessness, Veterans, families, single adults, youth, survivors of domestic violence, members of autonomous tribal nations, and LGBT persons. However, CoCs can only have different processes for accessing participants, including different locations, for the following specific populations:

Adults without children
 Adults accompanied by children
 Unaccompanied youth
 Households fleeing domestic violence
 Households being assessed for homelessness prevention assistance

2.04 Standardized Assessment Processes

The assessment process must be standardized, with uniform decision-making across all assessment locations and staff. If access points or assessment processes are conducted or managed by providers who do not receive HUD, state of Minnesota, or local county funds, those providers must still abide by assessment standards and protocols defined by the CoC.

All assessment tools and processes must incorporate the following elements:

The assessment tool and process defined by the CoC must incorporate participant choice, which may be facilitated by questions in the assessment tool or through other methods. Assessments must include the person's housing and service preferences, such as scattered-site or site-based housing, level of desired programming/structure (e.g., meals, activities, groups), neighborhood and location, security preferences, sobriety preferences and accessible housing for persons with disabilities.

CoCs must include basic screening for non-CoC resources such as county-funded services, mainstream housing subsidies and income supplements.

Assessment tools must be implemented consistently across assessment locations and different staff performing assessments.

The CoC must ensure that staff administering assessments are trained in culturally and linguistically competent practices.

All assessment tools and processes must be compliant with the Americans with Disabilities Act (ADA). The legal requirements under the ADA outline communication strategies that staff must employ to ensure effective communication is provided such as plain language, documents in non-English and alternate formats, and a way to verify that participants fully understand the questions being asked.

The CoC must ensure that privacy protections are in place to ensure all of the following:

- Proper informed consent is obtained to administer an assessment and collect personal protected information
- Participants provide written consent to all disclosures of their personal protected information, such as creation of client records in HMIS
- Any sharing of protected personal information among CoC providers and across CoCs is accompanied by an authorized written consent for release of information obtained from the participant

The CoC must ensure that written standards are established for data entry into HMIS to facilitate coordinated assessment management and evaluation.

The CoC must ensure that the CoC-defined CES processes comply with civil rights requirements, including the Fair Housing Act, Title VI of Civil Rights Act of 1964, and Section 504 of the

Rehabilitation Act of 1973, and that program participants are informed of rights and remedies available under applicable federal, state and local fair housing and civil rights laws, in accordance with the requirement at 24 CFR 578.93(c)(3).

CoCs must ensure that people receiving assessments can freely refuse to answer questions without retribution or without limiting their access to assistance.

2.05 Tenant Eligibility Determination Process

Each housing sponsor, manager or owner must establish and publish written documentation describing the eligibility requirements, process for determining eligibility, required eligibility documentation and any associated requirements prospective tenants must follow. Written policies must specifically address any enrollment requirements documented in particular neighborhood agreements or covenants.

NOTE: Refer to the tenant selection process later in this document for a complete description of housing sponsor and property manager responsibilities.

2.06 Supportive Service Offerings and Partners

Provide prospective tenants with written documentation and descriptions of all service partners whose services are integrated into or part of the housing project's standard offerings of tenant amenities. Describe the specific services offered and any responsibilities tenants may have to access and receive these services.

2.07 Safety Planning

Any Permanent Supportive Housing (PSH) projects serving people who are fleeing, attempting to flee and/or are survivors of domestic violence, dating violence, stalking or sex trafficking have safe and confidential access to housing and domestic violence services. Any associated data collection conforms to the Violence Against Women Act (VAWA).

2.08 Participant Autonomy

Written policy and procedures must outline a process whereby necessary information may be obtained when a program participant refuses to answer one or more assessment questions, as well as a participant rejection policy that allows participants to reject service options that are offered.

2.09 Project Waiting Lists

Minnesota Housing projects will not maintain individualized, agency or site-specific project waiting lists. All referrals and enrollments in PSH units specifically designed for persons experiencing homelessness must be drawn from the CoC's centralized prioritization process defined and administered by the local CoC.

Currently, Minnesota Housing funded projects that combine homeless households with non-homeless households and that also have lengthy waiting lists extending beyond three months should work with the access point contact to establish a process for integrating referrals from CES to ensure funding compliance. When the current non-CES waiting list is exhausted, all referrals must come from CES.

2.10 Referrals to Permanent Supportive Housing Projects

PSH projects must follow the referral process as defined and administered by the local CoC. CoC written

policy and procedures must outline a method or methods for documenting the uniform referral process, including criteria and protocol for rejecting a referral.

2.11 Nondiscrimination

PSH projects must continue to comply with the nondiscrimination provisions of federal civil rights laws, including the Fair Housing Act, Section 504 of the Rehabilitation Act, Title VI of the Civil Rights Act and Titles II or III of the Americans with Disabilities Act, as applicable. Note that a recent Executive Order from the Obama administration known as the Equal Access Rule extends federal civil rights protections to lesbian, gay, bisexual, and transgender (LGBT) persons.

2.12 Referral Rejection Protocols

PSH projects will retain the ability to make autonomous decisions concerning the acceptance or denial of prospective tenants from the CoC's centralized prioritization waiting list. However, when a PSH project denies a referral or rejects a prospective tenant after additional, site-specific screening the PSH project may be required to participate in a case review discussion, convened according to the protocols defined by the CoC, to explore alternative housing arrangements for the prospective client who was denied enrollment. If the prospective client meets all eligibility criteria but the PSH project chooses to reject the referral regardless, the PSH project staff must work with the CES access point or referral source and the prospective client to identify alternative accommodations. The CoC's CES policies and procedures must outline a method or methods for documenting specific requirements and processes associated with referral rejections and/or denied enrollments.

2.13 Housing Availability Notification

Upon identification of a possible PSH unit vacancy, the PSH housing provider, operator or manager must notify the CES management entity defined by the CoC. Local CoCs may prescribe a specific notification process, including forms, time frames and use of HMIS to manage CoC inventory.

Chapter 3 – Coordinated Entry System Access Points

Access points refer to the point of entry for persons experiencing a housing crisis and the point at which a CoC representative determines whether the homelessness assistance system is the appropriate intervention to assist the household in crisis. Access points and models throughout Minnesota will vary by the number of access points, services offered at each access point and the type of entity that is responsible for the point of entry and decision-making that occurs there. Any homeless assistance provider agency that serves persons who are homeless but is not a defined access point, will only enroll clients who are referred from defined access points.

3.01 Access Point Providers

Access point providers could include operators of information hotlines and referral telephone hotlines (e.g., 2-1-1), emergency shelter programs, outreach service providers, community action agencies and other county or community social service providers.

3.02 Access Point Responsibilities

Responsibilities of CoC designated CES access points:

Maintain open, fair and equal access to crisis response services. Do not screen participants out for assistance because of perceived barriers to housing or services such as lack of employment, drug or alcohol use, disability status or having a criminal record.

Assess participants as quickly as possible, without preconditions or service participation requirements.

Offer a standardized access process and assessment approach among all designated CES access point providers. A person presenting at a specific CE location is not steered towards any particular program or provider simply because they presented at that location.

Designated access point providers may specialize in serving one particular subpopulation such as domestic violence survivors, youth or Veterans as long as all other subpopulations are provided access to crisis response services elsewhere within the CoC.

Initiate the CES process by conducting, at a minimum, an initial assessment screen to identify participants' needs and preferences. A full and comprehensive participant assessment does not need to be administered by each access point provider for each participant as long as those services are available elsewhere within the CoC and are accessible to persons with disabilities.

If a determination is made that crisis response services will be provided by a CoC provider agency, the access point provider will collect enough participant data to initiate a Homeless Management Information System (HMIS) record for the person or household (actual HMIS data entry may be completed by another, non-access point entity), or other comparable system if access point is a victim service provider.

Chapter 4 – Coordinated Entry System Assessment Process

All Minnesota CoCs must adopt the state-defined approach for coordinated assessment, a phased approach that progressively captures information about participant needs and preferences based on defined stages of engagement and the CoC's ability to respond to participants' needs with available service and housing strategies. A standardized assessment tool with uniform assessment questions and response categories must be deployed in each CoC. CoCs are encouraged to expand and customize the state template to reflect locally relevant client characteristics and resource availability. The CES assessment process in use by each CoC must accommodate four distinct stages or phases of assessment:

- Triage/Diversion
- Shelter (or crisis response services) Intake
- Comprehensive Assessment
- Re-Assessment

Minnesota will not prescribe the specific tools that must be used for each assessment stage or phase, but each CoC must adopt the *Vulnerability Index – Service Prioritization Decision Assistance Tool* (VI-SPDAT) as a component of the Comprehensive Assessment phase of assessment (refer to Chapter 6). CoCs may incorporate the VI-SPDAT into a locally defined process, but they must ensure a publicly available, well-crafted, comprehensive tool that includes all required components identified above. The results must be an explicit score or referral result for all households that complete the Comprehensive Assessment component of the tool.

Chapter 5 – Assessment Tool/Process Design Qualities

The CoC must certify that assessment tools used in the coordinated assessment process have the following qualities:

Document participant’s homelessness history and housing barriers. Gather sufficient information to allow for appropriate referrals and for the creation of an accurate housing and service plan to address a participant’s needs and preferences.

Identify appropriate services. Match participant needs and preferences to the CoC’s resources. Ideally the assessment process will result in a score that aligns with or maps to a prescribed set of intervention options as defined by the CoC.

Document discrepancy between participant needs and preferences and available resources to meet need and preference. The specific resource a participant needs or prefers may not be available at the time of referral. Communities should document if there is a demand for housing or services beyond what is currently available, and make a referral to an alternative or comparable service.

Respect participant preferences. Ask direct questions about needs and preferences of the participant in order to ensure the most accurate assessment and referral. If the participant appears not to understand the questions, rephrase each question in plain and concrete language to secure information needed to assess the person’s individual needs and preferences.

Capture just enough data to meet program needs and funder requirements. Design assessment forms to represent the intake data needs for the full continuum of services that may be offered at the access point.

Obtain written consent for sharing data with providers. Comply with local, state, and federal requirements.

Draft, or at least initiate, a housing plan. Work with participants to begin development of a housing plan that can be transferred to the next stage of service.

Apply standardized practices at every point of entry. This must be done for every participant in order to ensure consistent assessments.

Apply standardized and reliable practices. These practices must be followed in order to produce consistent results across staff and locations.

Respect participant privacy. Do not seek disability information unless it is necessary to determine the need for housing and services and is based on evidence of the risk of becoming or remaining homeless in the event the specific disability is not appropriately managed or addressed. Participants, however, might voluntarily disclose their disability, thus providing an opportunity to ask about reasonable accommodations needed in housing and/or reasonable modifications needed to fully complete the assessment process.

Use easily understandable questions and language. Questions used in assessment tools must be easily understandable for those being assessed. Simple and concrete words and phrases, removing all acronyms and jargon, helps participants respond to questions being asked. If working with a deaf participant, a certified and qualified American Sign Language interpreter might be needed to ensure effective communication.

Prioritize those with the greatest need. To ensure that people experiencing homelessness do not wait on long waiting lists, the CoC must ensure that when there are more people being referred to a program than can be served in a timely manner, the coordinated assessment process has a method for prioritizing people with greater needs.

Chapter 6 – Referral Process

Minnesota CoCs will use the VI-SPDAT to generate acuity or need scores for all referrals to housing and services (i.e., Transitional Housing, Rapid Re-Housing, Permanent Supportive Housing). Each CoC will assign a service strategy or CoC component type to each assessed participant based on the results of the *Comprehensive Assessment* and/or the VI-SPDAT. Exhibit 1, below, illustrates how each subpopulation has a specific range of VI-SPDAT scores that align with different referral strategies.

Exhibit 1: VI-SPDAT Scores for each CoC Component Type

Population	Self-Resolve	RRH and/or TH	PSH
Single Adults (without accompanying children)	0-4	5-7	8 or more
Families (at least one adult and one child)	0-4	5-7	8 or more

The matching process is based on VI-SPDAT score and the eventual referral linkage process will take into account a set of prioritization criteria for each project type as defined by the CoC. The order of participant priority on the prioritization list will under no circumstances be based on disability type or diagnosis. Priority for each project type will be based on the severity of the needs, length of time homeless, or subpopulation characteristics, depending on the specific CoC component type.

All referrals will be documented in HMIS, including the program type to which the participant is being referred, the date of the referral, and a time frame by which the referral must be either accepted or denied by the “referred to” entity and by the participant. The “referred to” entity for housing providers will be either the property owner, property manager, or the service provider who is coordinating the enrollment process on behalf of the property owner.

Program providers operating Rapid Re-Housing (RRH), Transitional Housing (TH) and PSH with beds and/or units designated for persons who are literally homeless, will only accept referrals from the CES process defined by the local CoC.

When offering referral options to clients, the following information must be provided:

- Simple description of the program type the person is eligible for, and of the less intensive program types, using resources such as web pages, CoC inventory information and HB101
- Documentation of the person’s preferences
- Referral Rejection Policy
- Right to choose options less intensive than the CES referral

Chapter 7 – Prioritization Guidance

Implementation of CES establishes a standardized framework for prioritization applied consistently across all homeless assistance projects within each CoC throughout Minnesota. The common framework ensures that all CoC resources are used as strategically and effectively as possible. CoC resources will be targeted to serve persons with the highest needs and greatest barriers to obtaining and maintaining housing on their own. This CES approach establishes a prioritization standard for each housing assistance type: RRH, TH and PSH. Each Minnesota CoC must adopt the state-identified prioritization framework. Additional prioritization standards beyond Minnesota’s baseline requirements may be adopted at the discretion of individual CoCs.

7.01 Permanent Supportive Housing

Individuals and families will be referred to PSH according to specific prioritization protocols as defined by the state of Minnesota and refined by each CoC. Available PSH units (both those dedicated to persons experiencing chronic homelessness and PSH projects not dedicated to persons experiencing chronic homelessness) within a CoC must be filled by homeless individuals or families who score for PSH on the VI-SPDAT (See Exhibit 1). Additional prioritization principles beyond the VI-SPDAT score are listed below in rank order:

1. Chronic homelessness as defined by HUD
2. Long-term homeless (LTH) as defined by the state of Minnesota
3. Longest history of homelessness compared to all other people currently experiencing homeless at the time of referral
4. Most severe service needs as determined by the VI-SPDAT score compared to all other people currently experiencing homeless at the time of referral

Minnesota defines long-term homelessness as individuals, unaccompanied youth, or families with children who lack a permanent place to live continuously for a year or more or at least four times in the past three years. Any period of institutionalization or incarceration is excluded when determining the length of time a household has been homeless. Periods of living doubled-up with family and friends will be considered “homeless” for purposes of the LTH definition. **NOTE:** A person does not need to be disabled to qualify as LTH.

CoCs may enact more rigorous standards than those established by the state. For example, a CoC may determine all available PSH units will be filled using the priority criteria of chronic homelessness **AND** longest length of time experiencing homelessness.

7.02 Transitional Housing

At least 75% of available TH units within a CoC must be filled with participants who score for TH based on the VI-SPDAT (See Exhibit 1) **AND** who meet the criteria of at least one of the priority groups identified below:

Youth. All individuals between the ages of 15-24 who present as a household. This can include unaccompanied youth (household size of one), and multiple youth who are seeking assistance together.

Youth parents. Women and men between the ages of 15-24 who are the custodial parent of at least one dependent child and are seeking assistance with that/those child(ren).

Domestic violence survivors. Individuals and families with at least one person who identifies a domestic violence experience as the primary reason causing their housing crisis.

People being released from correctional facilities. People being released and who were homeless immediately before entering prison/jail.

Pregnant women. Women who are pregnant, regardless of their age or whether they have any additional children.

Persons in the early stages of AOD addiction recovery. Individuals and families with at least one person who recently began receiving services to assist in their recovery from alcohol or other drug addiction. This can include, but is not limited to, people who were recently released from a treatment center or other institution.

Veterans. Choosing Grant and Per Diem - GPD.

7.03 Rapid Re-Housing Priorities

At least 75% of available RRH resources must be filled with individuals or families that score for RRH based on the VI-SPDAT (See Exhibit 1) and as determined by each CoC.

RRH may also be used as a bridge program for persons who score for more intensive interventions or services but for whom those more intensive programs are not available at the time of referral. CoCs and homeless assistance providers will need to pay special attention to potential changes in eligibility for persons or households placed in RRH. In some circumstances a client or household placed in RRH may no longer be eligible for some TH or PSH projects.

Chapter 8 – Continuum of Care Participation Expectations

HUD and VA have recently established guidance that instructs all CoC projects to participate in their CoC's CES. Any project that receives HUD funding (CoC Program, ESG, HOPWA) or VA funding (SSVF, GPD, VASH) must comply with the participation requirements as established by the corresponding CoC jurisdiction. In addition, Minnesota has established minimum statewide requirements for CES participation, which means participation must include the following for all CoCs in Minnesota:

Each CoC will execute a CES partnership agreement with any CoC, tribal nation or other jurisdiction with which CES data will be shared, eligibility criteria and program preferences will be coordinated, cross-jurisdictional referrals will be coordinated, or CES planning and management decisions will be coordinated.

All projects with beds and/or units designated for people experiencing homelessness are expected to participate in CES (i.e., enroll new program participants only from the CES referral process).

Participating projects must publish written standards for client eligibility and enrollment determination (tenant selection plan).

Participating projects must communicate project vacancies (bed and/or unit) to the CES administrative entity established by CoC leadership.

Persons experiencing a housing crisis must access CoC services and housing using CoC defined access points.

Participating projects must enroll only those clients referred according to the CoC's designated referral strategy.

Participating projects must participate in the CoC's CES planning and management activities as established by CoC leadership.

Chapter 9 – Referral Rejection Policy

Property owners, management agents and service providers should meet with CES access point staff prior to the referral process to ensure the tenant selection plan and screening criteria are clearly understood by all parties. The process for how each property addresses denials and appeals of each applicant should also be included in this communication.

Both CoC providers and program participants may deny or reject referrals from the defined CES access point, although service denials should be infrequent and must be documented in HMIS or other comparable system with specific justification as prescribed by the CoC. The specific allowable criteria for denying a referral will be established by the CoC, must be shared with each project and client, and must be reviewed and updated annually. All participating projects and clients must provide the reason for service denial and may be subject to a limit on number of service denials. The CoC must annually report aggregate counts of service denials, categorized by reason for denial.

9.01 Allowable Reasons for Rejection/Denial

Allowable project referral rejection/denial reasons are the following:

- Client/household refused further participation (or client moved out of CoC area)

- Client/household does not meet required criteria for program eligibility

- Client/household unresponsive to multiple communication attempts

- Client resolved crisis without assistance

- The client's/household's health or well-being or the safety of current program participants would be negatively impacted due to staffing, location or other programmatic issues

- Client/household needs cannot be addressed by the program. The program does not offer the services and/or housing supports necessary to successfully serve the household

- Program bed/unit/service at capacity at time of referral

- Property management denial (include specific reason cited by property manager)

- Conflict of interest

9.02 Rejection/Denial Process

In the event of a service denial or participant rejection, include the following steps:

- Any referral provisionally reviewed by participating agencies, after which a preliminary enrollment determination is made, must be communicated back to the CES manager, assessment and referral provider, or client advocate within **three business days** from the date the determination is made.

- All referral requests that result in a denial must be reviewed by the CES manager, assessment and referral provider, or client advocate designated by the CoC.

- If a referral is returned to the housing referral coordinator or designee, the HMIS record must be updated to reflect the reason for the denial.

- The CoC project denying the referral must notify the CES manager, assessment and referral provider, or client advocate within a specified amount of time determined by the CoC. Further

communication must include a detailed written justification of the referral denial provided within **three business days** from the date of the initial referral. The written justification of service denial must also be shared with the client.

A provider who denies three sequential referrals will be required to participate in a case conferencing meeting with the CES manager, assessment and referral provider, or client advocate designated by the CoC.

A client who denies three sequential referrals will be required to participate in a case conferencing meeting with the CES manager, assessment and referral provider, or client advocate designated by the CoC.

Chapter 10 – Minnesota Coordinated Entry Operational Practices

10.01 Housing First Model

All Minnesota housing providers are encouraged to adopt a Housing First program approach. Housing First is an approach that emphasizes stable, permanent housing as a primary strategy for ending homelessness. The approach centers on providing people experiencing homelessness with housing as quickly as possible, and then providing services as needed.

Housing First programs share critical elements:

- A focus on helping individuals and families access and sustain permanent housing as quickly as possible, without time limits

- A variety of services delivered to promote housing stability and individual well-being on an as-needed basis

- A standard lease agreement to housing, as opposed to mandated therapy or services compliance

10.02 Low Barrier Policies

CoC providers will make enrollment determinations on the basis of limiting barriers to enrollment in services and housing. No client may be turned away from crisis response services or homeless designated housing due to lack of income, lack of employment, disability status or substance use unless the project's primary funder or project owner requires the exclusion. Funders restricting access to projects based on specific client attributes or characteristics will need to provide documentation to the CoC providing a justification for their enrollment policy. CoC projects offering prevention and/or short-term, RRH assistance (i.e., 0 – 6 months of financial assistance) may choose to apply income standards for their enrollment determinations.

10.03 Fair and Equal Access

All CoCs will ensure fair and equal access to CES system programs and services for all clients regardless of actual or perceived race, color, religion, national origin, age, gender identity, pregnancy, citizenship, familial status, household composition, disability, Veteran status or sexual orientation. If an individual's self-identified gender or household composition creates challenging dynamics among residents within a facility, the property manager or staff of the host program should make every effort to accommodate the individual or assist in locating an alternative accommodation that is appropriate and responsive to the individual's needs.

10.04 Client Choice

Housing First models promote client-centered practices. Every person experiencing homelessness should be treated with dignity, offered at least minimal assistance and participate in their own housing plan. Clients should be offered choice in housing and service options whenever possible. The shift in perspective is from "what you need to do to stay in the program," to "what you need to sustain your housing." Decisions and goals should be driven by client preferences; while case management should be home based and strengths based that is focused on stabilizing housing and connecting to mainstream community resources. The goal is engagement, respect and effectiveness, presenting options, focusing on what the client wants and assessing barriers and possible resolutions.

10.05 Cultural Competency

People experiencing homelessness come from a wide range of backgrounds. It is important for providers to recognize that each person's diverse experiences, values and beliefs will impact how he or she accesses homeless services. It is equally important to recognize that the cultural values of providers and service delivery systems have an effect on how services are delivered and accessed.

Although many people think that culture refers only to knowledge, attitudes, beliefs and behaviors influenced by race or ethnicity, the concept also includes factors such as age, gender, socioeconomic status, level of education, physical capacity, spirituality and religion, sexual orientation and regional influences. People's beliefs and the demands of their environment influence culture, which is dynamic and continually changing.

In order to ensure that the application process for supportive housing is accessible to persons of all cultural backgrounds, incorporate the following guidelines:

- Write all materials for tenants in plain language, and have staff assist tenants in understanding the content of written materials, when necessary.

- As an option, allow intake/application forms be completed orally to accommodate persons of varying literacy levels, and have written materials available in multiple languages.

- Make available multilingual staff, translated materials and/or interpretation and translation services to tenants, as needed.

- If the process requires that applicants come to a particular location, make the location and the schedule for receiving applications convenient for potential applicants.

Chapter 11 – Property and Housing Management within Coordinated Entry System

11.01 Types of Housing Models

Single-site supportive housing. Single sites are properties that maintain primarily supportive housing in one single site or building location. This is generally an apartment building, townhouse or single property setting that exclusively provides housing to formerly homeless families or individuals

Mixed use supportive housing. Mixed use refers to properties that generally manage some supportive housing units and some non-supportive units together in a mixed setting. Mixed use or integrated supportive housing models generally refer to mainstream affordable or market-rate properties that have a dedicated percentage of units that provide housing to formerly homeless families or individuals.

In both of the supportive housing models, agreements exist between the housing owner, the property manager and the supportive services providers, with the common goal of promoting housing stability for the homeless household. The conditions of the agreement and provision of property management may vary based upon the type of housing model. Service and property management strategies are coordinated to address issues that may threaten housing stability.

11.02 Access to Housing

Moving tenants into housing quickly is beneficial for all stakeholders in a supportive housing project. Tenants gain housing as a stable platform, which they can use for health, recovery and personal growth. Property managers and owners are able to fill units quickly and consistently. Service providers can more effectively work with clients who they can consistently locate and contact. In order to ensure that these benefits and many others can be achieved, all of the following supportive housing responsibilities and processes should be maintained.

11.03 Roles of Property Management and Working with Supportive Housing Services Staff

Receiving and reviewing referrals from CES. This will typically be done first by the service provider, and then if the prospective tenant meets the LTH and other eligibility criteria, the referral information is forwarded to property manager for further eligibility screening and, potentially, background checks. If an LTH provider should decide to reject a referral from the CES, then the policy outlined in the Referral Rejection Policy section must be followed.

Communicating project vacancies. Upon identification of a probable PSH unit vacancy, the PSH housing operator or manager must notify the CES management entity defined by the CoC. Local CoCs may prescribe a specific notification process, including forms, time frames and use of HMIS to manage CoC inventory. Minnesota Housing funded projects that combine homeless households with non-homeless households and that have lengthy waiting lists should work with the CoC access point contact to establish a process for integrating referrals from CES to ensure funding compliance. When the current, non-CES waiting list is exhausted, all referrals must come from CES.

11.04 Tenant Selection Processes

Each property funded through Minnesota Housing should have a tenant selection plan. Below is information that may assist housing providers in creating a plan. Project funding sources and jurisdictions may also impose tenant selection plan requirements. This is not intended to be a complete list or to supersede those requirements. You should consult with an attorney to ensure your tenant selection plan complies with all applicable laws and regulations, program requirements, the Fair Housing Act and the Minnesota Human Rights Act.¹

General Considerations

Written tenant selection plan. Housing providers should have a written tenant selection plan. The plan should be made available to applicants before they apply and/or pay an application fee.

Waiting list. The tenant selection plan should spell out any waiting list process.

Eligibility. The tenant selection plan should provide clear information on eligibility criteria such as income restrictions and any program-specific requirements. It should also clearly state the processes and criteria that will be used to evaluate applications.

Tenant background/credit reports. Many housing providers use consumer reports, such as tenant background or credit reports, as part of the application process. The Federal Trade Commission (FTC) provides guidance for housing providers who use such reports.² The FTC notes that when a housing provider takes an adverse action based on information in a consumer report, the housing provider must provide a notice to the applicant that includes:

- The name, address and telephone number of the Credit Reporting Agency (CRA) that supplied the consumer report, including a toll-free telephone number for CRAs that maintain files nationwide
- A statement that the CRA that supplied the report did not make the decision to take the adverse action and cannot give the specific reasons for it
- A notice of the applicant's right to dispute the accuracy or completeness of any information the CRA furnished, and the applicant's right to a free report from the CRA upon request within 60 days³

Notice of denial. Housing providers should give applicants a prompt written notice of denial that states the criteria the applicant failed to meet.

Appeal process. Any appeal process should be clearly stated in the tenant selection plan, and the notice of denial should inform applicants how to seek an appeal. Some programs require housing providers to offer unsuccessful applicants an appeal. Housing providers may find that an appeal is a useful way to obtain additional, mitigating information.

Domestic violence. A number of federal programs are subject to VAWA, which provides that an applicant "may not be denied admission...on the basis that the applicant...is or has been a victim of domestic violence, dating violence, sexual assault, or stalking, if the applicant or tenant otherwise qualifies for admission."⁴ Those projects that are not subject to VAWA restrictions may consider adopting similar terms.

Applicants with disabilities. Housing providers should provide a reasonable accommodation process and make that information readily available to applicants.⁵ Housing providers should also make sure that tenant selection plans do not raise barriers to individuals with disabilities, such as imposing requirements that applicants be able to "live independently."

Tenant-based rental assistance. As a condition of funding through Minnesota Housing, housing providers are not permitted to refuse to lease a unit to, or discriminate against, a prospective resident solely because the prospective resident has a Housing Choice Voucher or any other form of tenant-based rental assistance.

Criminal Background Screening

HUD issued new guidance in April 2016 regarding the Fair Housing Act and the use of criminal history in tenant screening.⁶ The guidance set out the following considerations, which are relevant to all properties funded by Minnesota Housing.⁷

Arrests. HUD indicates that a policy that rejects applicants because of arrests (without conviction) would not be acceptable.

Convictions. While a conviction is usually evidence of criminal conduct, HUD encourages housing providers to distinguish between convictions for criminal conduct that indicates a demonstrable risk to resident safety and/or property and criminal conduct that does not.⁸ In addition, HUD suggests a tenant screening policy take into account:

- The nature and severity of a conviction; and
- The amount of time that has passed since the criminal conduct occurred.⁹

Mitigating factors. HUD guidance suggests a policy that considers mitigating information (as opposed to a policy with strict time limit exclusions) is less likely to be discriminatory.¹⁰ HUD suggests that housing providers consider the following factors:

- The facts or circumstances surrounding the criminal conduct
- The age of the individual at the time of the conduct
- Evidence that the individual has maintained a good tenant history before and/or after the conviction or conduct
- Evidence of rehabilitation efforts

Consistent application of tenant screening policy. HUD stresses the importance of applying the standards consistently to all applicants.¹¹

Supportive Housing

Minnesota Housing is committed to the goal of providing housing stability for all Minnesotans. Preventing and ending homelessness is crucial to that goal. Households at risk of or experiencing homelessness often encounter barriers to housing beyond just their ability to pay. Property managers and owners are encouraged to recognize that supportive housing programs are intended to house people who often have poor credit, poor rental histories or criminal backgrounds. Supportive housing programs are successful in serving the people for whom they are designed only when these issues do not raise insurmountable barriers to accessing housing.

To the extent permitted by the rules and regulations related to the type of housing, housing providers are encouraged to adopt lenient and flexible criteria regarding these common barriers when creating a tenant selection plan. The development of a tenant selection plan should be a collaborative effort between the management agent, the owner and the supportive service provider. Please note the

following:

Poor rental and credit history may be evidence of financial or personal stress that will be alleviated by living in affordable supportive housing. As a result, an applicant's poor rental or credit history may not be a reliable indication of future behavior. A screening process that allows individuals to demonstrate mitigating circumstances and takes into account factors like a support structure, the potential benefit of available services and an affordable rent level, may help to mitigate unnecessary barriers to housing. For example, requiring a year or more of consecutive housing history or good credit score would likely be an unnecessary barrier for an applicant for supportive housing.

Criminal backgrounds can raise additional hurdles in a population experiencing homelessness.¹² The individualized screening process discussed in the HUD Guidance will help housing providers better distinguish between a criminal background that indicates a demonstrable risk to resident safety and/or property and one that does not.

11.05 Reasonable Accommodations

A reasonable accommodation is a change to a rule, policy, practice or service when necessary to allow persons with disabilities equal access to housing. Sometimes a reasonable accommodation is not a physical modification to housing; the accommodation can be process changes, waivers and other allowances that provide the prospective tenant with equal access to housing options. A reasonable accommodation allows the applicant with a disability to meet essential requirements of tenancy. Applicants and providers are responsible for working together to identify the specific accommodation(s) that each accepts reasonable. What constitutes a "reasonable" accommodation or modification has been the subject of a great deal of litigation and controversy. For more extensive information on this requirement, reference the document, "Reasonable Accommodations in Tenant Selection Process," which can be found at http://www.csh.org/wpcontent/uploads/2013/08/AccommScreening_T.pdf

Chapter 12 – Contract Compliance and Equal Opportunity

12.01 Policy

It is the policy of Minnesota Housing to practice affirmative action to provide equal opportunity in all of our projects, programs, and other endeavors. Minnesota Housing's goal is to achieve a client and recipient mix that is representative of the people who live in our state and our communities so that all employment and contractual benefits that develop as a result of our programs will be shared by all Minnesotans. This policy applies to all Minnesota Housing employees and Minnesota Housing's external partners.

12.02 Purpose

The purpose of this policy is to make Minnesota Housing's commitment to act affirmatively to achieve equal opportunity in all facets of its operation, clear to both internal staff and outside parties with whom we do business.

12.03 Goals

Our goal is to ensure minority and female contractors and subcontractors equal access to business opportunities on Minnesota Housing financed projects and to encourage the presence of minorities and women at all levels, including on the staffs of the program participants having contractual agreements with Minnesota Housing. Minnesota Housing's goal is to ensure that the workforces on the projects and programs we finance reflect demographically the area in which they are located. These goals will apply for the length of the contract or the life of the mortgage. Minnesota Housing, at its discretion, may set numerical or percentage goals dependent on the location and size of a given project. Current goals will be determined by staff based on the location of the project.

12.04 Requirements

Minnesota Housing is required to comply with all applicable local, state, and federal laws. These requirements are passed on to everyone that Minnesota Housing does business with, either by contractual agreement or as a Minnesota Housing policy.

12.05 Sanctions

Minnesota Housing has the contractual authority to demand full payment of any loan or grant, stop proceeding with any project at any stage, and cease to do business with any entity or individual that fails to follow its affirmative action policies or fails to meet its/his/her contractual equal opportunity obligations.

Chapter 13 – Fair Housing Policy

It is the policy of Minnesota Housing to affirmatively further fair housing in all its programs so that individuals of similar income levels have equal access to Minnesota Housing programs, regardless of race, color, creed, religion, national origin, sex, marital status, status with regard to public assistance, disability, familial status, gender identity or sexual orientation.

Minnesota Housing's fair housing policy incorporates the requirements of the Fair Housing Act, Title VIII of the Civil Rights Act of 1968, as amended by the Fair Housing Amendment Act of 1988, as well as the Minnesota Human Rights Act. Housing providers are expected to comply with the applicable statutes, regulations, and related policy guidance. Housing providers should ensure that admissions, occupancy, marketing and operating procedures comply with non-discrimination requirements.

In part, the Fair Housing Act and the Minnesota Human Rights Act make it unlawful to, because of protected class status:

- discriminate in the selection/acceptance of applicants in the rental of housing units;
- discriminate in terms, conditions or privileges of the rental of a dwelling unit or services or facilities;
- engage in any conduct relating to the provision of housing that otherwise make unavailable or denies the rental of a dwelling unit;
- make, print or publish (or cause to make, print or publish) notices, statements or advertisements that indicate preferences or limitations based on protected class status;
- represent a dwelling is not available when it is in fact available;
- deny access to, or membership or participation in, associations or other services organizations or facilities relating to the business of renting a dwelling or discriminate in the terms or conditions of membership or participation; or
- engage in harassment or quid pro quo negotiations related to the rental of a dwelling unit.

Minnesota Housing has a commitment to affirmatively further fair housing for individuals with disabilities by promoting the accessibility requirements set out in the Fair Housing Act, which establish design and construction mandates for covered multifamily dwellings and requires housing providers to make reasonable accommodations and to allow persons with disabilities to make reasonable modifications.

Applicants will be required to submit an Affirmative Fair Housing Marketing Plan at the time of application, to update the plan regularly and to use affirmative fair housing marketing practices in soliciting renters, determining eligibility and concluding all transactions.

As a condition of funding through Minnesota Housing, housing providers are not permitted to refuse to lease a unit to, or discriminate against, a prospective resident solely because the prospective resident has a Housing Choice Voucher or other form of tenant-based rental assistance.

Appendix A – Terms

Term	Acronym/Other Affiliated Name	Definition/Role
CES Assessor	Assessor	The CES staff person responsible for conducting the client assessment; gathering and documenting client needs, preferences and housing barriers
Continuum of Care Program	CoC Program	HUD program designed to promote a communitywide commitment to the goal of ending homelessness and provide funding for projects to quickly rehouse individuals and families
Continuums of Care	CoC	Group of stakeholders who oversee the homeless system and the application process for CoC program funding in a designated geographic area
Coordinated Assessment		A phased approach that progressively captures information about participant needs and preferences based on defined stages of engagement and the CoC's ability to respond to participants' needs with available service and housing strategies. Also known as coordinated process.
Coordinated Entry System	CES	A centralized or coordinated process designed to coordinate program participant intake assessment and provision of referrals
Coordinated Entry System (CES) Access Provider	Access Point	The entity identified by the CoC to manage the entry point or first point of contact for persons who are experiencing a housing crisis and seeking assistance
Coordinated Entry System (CES) Referral Agent	Referral Source	The CES staff person responsible for verifying completeness of the assessment information and sending (via HMIS, fax, hard copy, phone, or otherwise electronically) to a housing and/or service provider the packet of information associated with the household seeking CoC assistance
CoC Project	Project	Any of several types of programs designed to assist persons experiencing a housing crisis to achieve housing stability. CoC projects include outreach, emergency shelter, drop-in centers, transitional housing, rapid rehousing and permanent supportive housing
CoC Provider	Provider	Provider of CoC housing and/or services for persons experiencing a housing crisis. Providers can be HUD funded or receive no

		federal assistance for operating their projects
Emergency Solutions Grants Program	ESG Program	HUD program to assist people to quickly regain stability in permanent housing after experiencing a housing crisis or homelessness
Homeless Emergency Assistance and Rapid Transition to Housing Act	HEARTH Act	Authorizes HUD's homeless assistance grant programs, including the CoC and ESG programs, and amends the McKinney-Vento Homeless Assistance Act, which establishes requirements for CoC operations and projects receiving CoC or ESG program funding
Homeless Management Information System	HMIS	An information technology system that collects data on individuals and families at risk of or experiencing homelessness
HMIS Lead Agency	HMIS Lead	The entity designated by the CoC in accordance with the CoC program interim rule to operate the CoC's HMIS on its behalf
Long-term Homeless (Minnesota)	LTH	Individuals, unaccompanied youth, or families with children who lack a permanent place to live continuously for a year or more or at least four times in the past three years. Any period of institutionalization or incarceration is excluded when determining the length of time a household has been homeless. Periods of living doubled-up with family and friends will be considered "homeless" for purposes of the LTH definition. Note that a person does not need to be disabled to qualify as LTH.
Permanent Supportive Housing	PSH	Affordable housing with supportive services to help people maintain housing. Evidence-based practices to end homelessness for people with disabilities and a long history of homelessness
Program Participant		A person or household who is enrolled in a CoC project operated by a CoC provider
Rapid Re-Housing	RRH	Temporary assistance to rapidly exit homelessness into housing, including help with housing location, limited financial assistance, and case management
"Referred to" Entity		The "referred to" entity for housing providers will be either the property owner, property manager, or the service provider who is coordinating the enrollment process on behalf of the property owner
Transitional Housing	TH	A CoC project that provides temporary housing and services to individuals and/or families experiencing homelessness. Transitional housing projects can either be site-based (i.e. all housing units clustered in a single site

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		setting) or scattered site
U.S. Department of Housing and Urban Development	HUD	Federal agency responsible for administering housing and homeless programs, including the CoC and ESG programs

¹ It is Minnesota Housing’s policy to affirmatively further fair housing in all programs so that individuals of similar income levels have equal access to its programs, regardless of race, color, creed, religion, national origin, sex, marital status, status with regard to public assistance, disability, familial status, or sexual orientation. Property owners and managers are expected to comply with laws and regulations prohibiting housing discrimination when creating and implementing a tenant selection plan.

² Federal Trade Commission, Using Consumer Reports: What Landlords Need to Know, available at <https://www.ftc.gov/tips-advice/business-center/guidance/using-consumer-reports-what-landlords-need-know>

³ If the rejection is based on a credit score, the housing provider must also inform the applicant of the numerical score used as well as information on the basis of the score. For more information, see 15 U.S.C. §§ 1681m(a), 1681g(f).

⁴ 42 USC § 14043e(b)(1); 24 CFR § 5.2001. Housing providers subject to VAWA should review HUD regulations and policies regarding how to fully comply with the requirements.

⁵ See, e.g., Minn. Stat. § 363A.10 (“[D]iscrimination includes . . . a refusal to make reasonable accommodations in rules, policies, practices, or services, when accommodations may be necessary to afford a disabled person equal opportunity to use and enjoy a dwelling.”); 42 U.S.C. § 3604(f)(3)(B); Joint Statement of the Department of Housing and Urban Development and the Department of Justice, Reasonable Accommodation Under the Fair Housing Act (May 17, 2004), available at <http://www.hud.gov/offices/fheo/library/huddojstatement.pdf>.

⁶ U.S. Department of Housing and Urban Development, Office of General Counsel Guidance on Application of Fair Housing Act Standards to the Use of Criminal Reports by Providers of Housing and Real Estate-Related Transactions (Apr. 4, 2016), available at http://portal.hud.gov/hudportal/documents/huddoc?id=HUD_OGCGuidAppFHASandCR.pdf [HUD Guidance].

⁷ Some funding sources incorporate additional criminal screening requirements. Housing providers should consult with an attorney to ensure their plan complies with all program requirements.

⁸ HUD makes clear that the Fair Housing Act does not prohibit housing providers from rejecting applicants with convictions of the illegal manufacture or distribution of the controlled substances listed in section 102 of the Controlled Substances Act, 21 U.S.C. 802. HUD Guidance at 8. HUD stresses that the limitation applies only to convictions for manufacturing or distribution of those substances, and does not apply to arrests (without conviction) for those offenses or to convictions for drug possession. *Id.*

⁹ The HUD Guidance cites research “reporting that after six or seven years without reoffending, the risk of new offenses by persons with a prior criminal history begins to approximate the risk of new offenses among persons with no criminal record.” HUD Guidance at 7 fn 34, citing Megan C. Kurlycheck et al., *Scarlet Letters and Recidivism: Does an Old Criminal Record Predict Future Offending?* 5 CRIMINOLOGY & PUB. POL’Y 483 (2006). That research also refers to studies showing that recidivism decreased significantly if the individual avoided engaging in criminal activity for two years. Kurlycheck at 7.

¹⁰ HUD notes that by “delaying consideration of criminal history until after an individuals financial and other qualifications are verified, a housing provider may be able to minimize any additional costs that such individualized assessment might add to the applicant screening process.” HUD Guidance at 7.

¹¹ HUD Guidance at 9 (“For example, the fact that a housing provider acted upon comparable criminal history information differently for one or more individuals of a different protected class . . . is strong evidence that a housing provider was not considering criminal history information uniformly or did not in fact have a criminal history policy.”).

¹² The HUD Guidance notes the relationship between criminal backgrounds and homelessness, citing research explaining “how the increasing numbers of people leaving carceral institutions faced an increased risk for homelessness and, conversely, how persons experiencing homelessness are vulnerable to incarceration.” HUD Guidance at 1 fn 7 (citation omitted).