



Michigan Balance of State Continuum of Care Program Standards for Emergency Shelter, Street Outreach and Prevention Services

Emergency Shelter

The Michigan Balance of State Continuum of Care (MIBOSCOC) recognizes emergency shelter as an important component of the homeless crisis response system to keep people safe while they seek permanent housing. Emergency shelters across the MIBOSCOC may operate with Emergency Solutions Grant (ESG) funding through the Michigan State Housing Development Authority, Emergency Shelter Program (ESP) funding from The Salvation Army on behalf of the Michigan Department of Health and Human Services, private funding, or a combination of these. Those operating with ESG and ESP funding have specific requirements of the funding source with which they must comply. These expectations are aligned with MIBOSCOC services standards.

Those operating with funding other than ESG or ESP will not likely have service standards they must follow. The service standards outlined here are to serve as a guide especially for these providers.

Core Tenets of Emergency Shelter:

- Low Barrier
- Equal Access
- Trauma Informed
- Housing Focused

Low Barrier

Shelter providers must seek to balance the safety of all residents in need of shelter. To this end, prohibitions should not focus on a participant's history (except where required by law), but instead focus on present behavior. This includes not conducting background checks, drug or alcohol screenings, or reference checks.

Equal Access

Low barrier shelter practices are additionally important in reducing biases in which households are able to access shelter and which are not. Shelters may not discriminate based on family size or composition, sexual orientation, gender identity or expression, religion, race or ethnicity, or citizenship status. All individuals must be served as the gender they identify as, with no verification or invasive questions related to their gender identity. Shelters must do all that they can to ensure that families are not split in their shelter placements. Families are defined by how they identify, rather than prescriptive relationships.

Trauma Informed

All shelter providers must operate with the understanding that the very act of experiencing homelessness is traumatic. Those entering shelter are coming from an event that causes great upheaval and unbalance not only in a person's daily living, but also in their sense of identity. People react to these unbalancing events in varying and unexpected ways. Providers are expected to view behaviors through a lens of understanding of how trauma may impact a person. Additionally, providers are expected to minimize

recurrent traumatization of those seeking services. All shelter staff and volunteers should have regular training to understand the impacts of trauma and how to offer trauma informed services.

Housing Focused

Shelter is not housing and should not be considered any person's permanent place of residence. Upon entering shelter, participants should be made aware of the process to secure permanent housing and have a plan in place to do so. Shelter rules should not be in place that interfere with a person's ability to seek or maintain employment, education, or seek housing resources. Shelter services should comply with Housing First principles and shelter staff should receive ongoing training in motivational interviewing.

Street Outreach

Michigan Balance of State Continuum of Care (MIBOSCOC) utilizes street outreach and housing advocacy services as a core component of the coordinated entry process. The street outreach component is intended to ensure all persons experiencing homelessness have access to services while the continued housing advocacy activities are intended to keep participants engaged in and moving through the process to secure permanent housing.

Street outreach is intended to engage those persons who might otherwise not seek homeless assistance services otherwise. These might be people with negative views or historical experiences with seeking services, those with disabilities that prevent them from reaching out, and anyone who is otherwise unaware or unable to connect with service access points. Street outreach is intended to make access to housing resources equitable.

These services can continue to support participants once they enter emergency shelter and/or are referred to a permanent housing project. Once this occurs, the activities are classified as "housing advocacy services". For funding purposes, the activities are billed as street outreach only when a person remains unsheltered. Housing advocacy services are similar in action, but if the person is sheltered while receiving them, they are billed under categories such as assessment or case management depending upon the actual activity.

Street outreach programming should be:

- Housing Focused: The goal of working with the household is to speed their connection and entry to permanent housing.
- Person-Centered: The approach to housing for each household should be specific to their needs, desires, and abilities.

Prevention

Prevention assistance within Michigan Balance of State Continuum of Care (MIBOSCOC) is intended for those who are in situations that classify under paragraph II of the homeless definition, at Imminent Risk of Homelessness or paragraph III, At-Risk of Homelessness. Households served with Prevention funding under the At-Risk of Homelessness category should be in an especially vulnerable population such as youth or domestic violence survivors.

Whenever possible, prevention funding should be used to prevent homelessness for households whereby if funding were not provided, the household would enter the homeless system. Housing assistance should be used to pay back rent to retain housing in which the household is currently residing if it is feasible to retain, or to move into a unit the household is better able to maintain long term. Case management supportive services should be provided to help the household improve their income.

Prevention services must align with MSHDA ESG funding requirements or the requirements of any other source supporting prevention efforts.