

FY2023-24 Inside Safe-Interim Housing Program Scope of Required Services

The Scope of Required Services (SRS) for the Inside Safe-Interim Housing Program contains a written summary of, and links to, detailed information regarding the services that may be provided to Program participants based on available need and available resources. This SRS and the documents that are linked hereto, in combination with the Practice Standards, Program Standards, Exit and Termination Standards, and Key Performance Indicators, together, comprise the entire Statement of Work for the Inside Safe Program. Los Angeles Homeless Service Authority (LAHSA) reserves the right to make any necessary changes related to prioritization, matching, and other aspects of the implementation of the complete Coordinated Entry System. Inside Safe-IH service providers (Operators) will be notified of any such changes through policies, interim guidance, and other forms of guidance when deemed necessary.

A. PROJECT DESCRIPTION

The "Inside Safe Program" is a housing-focused solution to combating homelessness focused on serving individuals currently residing in encampment locations in the City of Los Angeles. Through collaboration between LA Mayor's Office and City Departments, LAHSA, LA County Departments, and service providers, all outreach engagement efforts will be coupled with immediate interim housing solutions and linkages to permanent housing resources. The goals of the program are to: (1) reduce unsheltered homelessness using a person-centered, equitable, evidence-based approach to encampment resolution conducted in partnership with local jurisdictions, providers, other municipal agencies, and people experiencing unsheltered homelessness; and (2) support all participants engaged in encampment resolution efforts to ensure they are on a viable pathway to permanent housing stability.

This Scope of Required Services is specific to interim housing services within the Inside Safe effort and will be referenced as Inside Safe-Interim Housing Program (Inside Safe-IH). The services provided to Inside Safe-IH participants will be voluntary, low-barrier, trauma-informed, and data-informed. Services must remain flexible to support the needs of individuals receiving services, as well as to accommodate the limits of what the local funding permits.

B. DEFINITIONS

- 1. Homeless Management Information System (HMIS): HMIS is a U.S. Department of Housing and Urban Development (HUD) mandated information technology system that is designed to capture participant-level information over time, on the characteristics and service needs of homeless persons. Participant data is maintained on a central server, which will contain all participant information in an encrypted state. HMIS integrates data from all homeless service providers and organizations in the community and captures basic descriptive information on every person/household served. Participation in the Los Angeles Continuum of Care (LA CoC) HMIS allows organizations to share information with other participating organizations to create a more coordinated and effective delivery system.
- 2. Two Adult Household: Interim Housing Providers must accept two adult households into the site at the time of the Inside Safe Operations. Two adult households can consist of, but are not limited to, the following household compositions:
 - Two adults who identify as a single household (e.g., individuals who identify as married, partners, and/or a couple).

- 2.2 Adult-only Families: e.g., adult child and parent, adult siblings, or another familial relation.
- 3. Inside Safe operates with a Housing First, Harm Reduction, Low Barrier, and Trauma-Informed Care approach. Please see LAHSA Program Standards for more detailed definition of these terms.

C. ELIGIBILITY FOR SERVICES

- 1. <u>Eligible Population</u>: Detailed eligibility for the Inside Safe-IH Program, as well as Contractor responsibilities to verify eligibility, may be found in Appendix I.
 - 1.1. Homeless Status. Participants must be determined to be homeless (Category 1) per HUD's Final Rule on "defining Homeless" (24 CFR parts 91, 576 and 578) or (Category 4) per The McKinney-Vento Homeless Assistance Act (42 U.S.C. 11301 et seq.).
 - 1.1.1. Contractor will be responsible for documenting the determination of the participant's homeless status utilizing LAHSA Approved Homeless Certification Forms. Contractor must upload the LA CoC Homeless Certification Form utilized into HMIS:
 - 1.1.1.1. LA COC Homeless Verification (Form 6053)
 - 1.1.2. All documentation is required to be placed inside the participant's master file and uploaded into the participant's profile in the Homeless Management Information System (HMIS).
 - 1.1.3. In the case where homelessness is being documented with an HMIS Participant Summary Report, the provider must enter a case note in HMIS indicating the HMIS Participant Summary Report shows the participant was homeless within 7 days of program entry. If hard copy files are maintained, the documentation must be placed inside the participant's master file. This includes the HMIS Participant Summary. Please see the following video on how to upload documents to HMIS: https://www.wevideo.com/view/1324198999.
 - 1.2. Eligible participants include Adults, Transition Age Youth, and Family Households.
 - 1.2.1. Unaccompanied Minors are not eligible for enrollment or services: an exemption exists for unaccompanied minors who are legally emancipated.
 - 1.3. If participants are unable to manage Activities of Daily Living (i.e., ability to transfer in and out of a bed, bathe, dress, and address hygiene needs independently), participants may need to be provided reasonable accommodations on a case-by-case basis.
 - 1.3.1. Participants in need of hospitalization or skilled nursing care must be referred to and served by a hospital or specialized programs equipped to offer appropriate levels of care.
- 2. Operator must enroll participants from approved Inside Safe Outreach efforts via Inside Safe-participating outreach teams. Outreach teams will refer individuals from select encampment locations that have been approved by the Los Angeles City Mayor's Office. Enrollments are restricted to participants referred through Inside Safe Outreach efforts.

D. COMMITMENT TO PROVIDING LOW BARRIER SERVICES

 Operator shall not deny entry to the program based on suspicion of substance abuse, insobriety, mental disorder, or criminal background, unless Operator determines that a participant poses an imminent threat to themselves, staff, or other participants. This must be documented through the incident reporting process. Further, the Operator is prohibited from conducting drug or alcohol testing, criminal background checks or making inquiries to verify that a participant is clean and sober (free from alcohol or drug use.)

- 2. Operators must **NOT** screen out participants or deny referrals based on any of the following criteria:
 - 2.1. Past program participation or previous stay at Operator facilities;
 - 2.2. Lack of tuberculosis test (TB) result;
 - 2.3. Lack of Service and/or Emotional Support Animal documentation;
 - 2.4. Lack of sobriety;
 - 2.5. Lack of income or employment status;
 - 2.6. Lack of identification documentation;
 - 2.7. The presence or perceived presence of mental health issues, disabilities, or other psychosocial challenges;
 - 2.8. History of evictions;
 - 2.9. Lack of a commitment to participate in treatment;
 - 2.10. Justice system involvement, including prior arrests and/or incarcerations;
 - 2.11. Any other criteria thought to predict challenges/barriers to long-term housing stability.
- 3. All program staff must be trained in Harm Reduction practices. This includes but is not limited to application of Harm Reduction practices to substance usage, including training on how to administer emergency Narcan to participants experiencing an opioid overdose emergency and maintaining an inventory of Narcan on-site.
- 4. <u>Communicable Disease Prevention and Response Practices</u>: Contractor is required to abide by all screening, prevention, and response practices designated by the LA County Department of Public Health (DPH). Contractor will ensure that staff and participants adhere to any Orders issued by the State or County's Health Officer when in effect. Please see LAHSA Program Standards for additional guidance.

E. CASE MANAGEMENT, SUPPORTIVE SERVICES AND ACTIVITIES

- 1. <u>Intake Process</u>: Intake should occur on the day of the encampment resolution or within 24 hours of arrival into the Interim Site. Inside Safe-IH Operators will engage in a person-centered intake process that includes an overview of services available to the participant while enrolled in the program, review of any program or motel guidelines that apply to program participants, and information on how to connect with the housing navigation and other permanent housing resources available through the Inside Safe Program.
 - 1.1. Inside Safe-IH Operators are required to utilize the approved Inside Safe-Interim Housing Participant Agreement Form as part of the intake process. Operator must review the form with the participant upon program enrollment. The form includes a participant consent section to be signed and dated by the participant with a witness signature and dated to be signed by the Operator. Upon signature or receipt of the Program Participation Guideline Agreement, the participant is consenting to enroll in the program and is certifying that they have read (or have been read) the program guidelines, and that their program participation is contingent upon complying with the expectations outlined in the Inside Safe-Interim Housing Participant Agreement Form.

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- 2. **Problem Solving:** The first problem solving conversation is expected to occur between service providers and participants on the day of entrance into the IH site to assist the person to quickly self-resolve their housing and/or make reasonable efforts to re-connect with supportive family and/or friends who could temporarily or permanently house the participant. Initial Problem Solving is to be documented in HMIS, as well as subsequent problem-solving conversations.
 - 2.1 If, through the Problem-Solving efforts, it is identified that assistance funds are needed to resolve the participant's housing crisis and successfully divert entry into Interim Housing program, the Operator must either: make a referral to a CES Prevention program if participant is determined to meet Category 2 or 4 Homeless Status criteria or submit a referral for Problem Solving Assistance Funds if participant is determined to meet Category 1 or 4 Homeless Status criteria.
 - 2.2. If Problem Solving is not initially successful at program entry, Operator should continue to have Problem Solving conversations while the participant is enrolled in the Program.
- 3. <u>Direct Support Services</u>: Operators providing Interim Housing are funded for, and must provide, the following services directly to participants in the program.
 - 3.1. Intake process
 - 3.2. Problem Solving
 - 3.3. 24-Hour bed availability
 - 3.4. Residential supervision (monitoring and oversight, crisis intervention, conflict resolution)
 - 3.5. Case management
 - 3.6. Supportive Services (includes document collection of documents needed for permanent housing program referrals/enrollments)
 - 3.7. Connection to LA County's Mainstream Benefits/Services.
 - 3.8. Inside Safe-IH Care Coordination with housing resource and other service providers
 - 3.9. Meals
 - 3.10. Harm Reduction-based services and/or resource connections
- 4. <u>Monitoring and Oversight</u>: Operator is required to oversee and promote safety for Program participants' staff and the surrounding community members. The Operator must take a trauma-informed approach to providing oversight at motels and have standard operating procedures to ensure safety of all residents and community members surrounding motels as necessary per individual hotel/motel site and provider arrangement with the hotel/motel. Monitoring and Oversight may look different to ensure safety dependent upon the number of rooms per one motel that an Operator may use, and/or the needs of individual clients. Operators are expected to:
 - 4.1 Provide on-site participant monitoring/security 24-hours a day, 7 days per week.
 - 4.2 Conduct and document two (2) daily wellness checks by completing regularly scheduled rounds to ensure participants safety and wellbeing. Participants should be informed of the purpose of daily wellness checks.
 - 4.3 As needed or as requested by motel personnel, Operator staff will escort motel housekeeping staff when knocking on participant's doors. As needed or as requested by motel personnel, if participants are present in the unit, Operator staff will accompany housekeeping staff as cleaning is completed.
 - 4.4 Facilitate maintenance request communication for participants and elevate to the Mayor's Office of Housing & Homelessness Solutions (MOHHS) when necessary.

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- 4.5 Report all exits within 24 hours of confirmed exit to the motel owner/manager, LAHSA, and MOHHS, including details regarding the exit destination, circumstance of the exit, and other pertinent details. The MOHHS will designate a point of contact.
- 4.6 Abide by all Incident Reporting expectations of the LAHSA Program Standards, including timely notification and submission of Incident Reports to LAHSA.
 - 4.6.1 For the Inside Safe-Interim Housing Program, utilize the Inside Safe-Interim Housing Incident Report Form.
 - 4.6.2 For critical incidents of participant death on-site, law enforcement response on-site, or extensive property damage, inform LAHSA as soon as possible, no later than 12 hours of the incident.
- 5. <u>Case Management</u>: In addition to the practices outline above, Operators must ensure case managers (CM) are available to perform the following duties:
 - 5.1. Be on-site during posted regular business hours and available to meet participants' needs and record services in HMIS within 48 hours.
 - 5.2. Develop a Housing Services Plan with each participant, in coordination with Housing Navigation and/or other supportive service providers, within the first 14 days of program intake. Housing Services Plans should outline the strengths, needs, goals, and strategies the participant and provider agree to leverage to achieve housing stability for the participant. The Housing Services Plan should include activities that will help participants secure alternate housing within a 90-day goal timeline. A housing assessment is the basis of a Housing Services Plan.
 - 5.3. Upkeep and maintain awareness of progress of Housing Services Plans and provide status updates to LAHSA and MOHHS.
 - 5.4. Coordinate with Housing Navigation Staff to ensure ensuring linkages to housing navigation and other permanent housing resources are performed in a timely manner with viewings are documented in HMIS.
 - 5.5. Incorporate basic skills development for participants focused on skills that promote successful independent living (e.g., money management, effective communication with landlords or roommates, lease or housing agreement terms, etc.).
- 6. <u>Supportive Services</u>: General intake, assessment, and supportive services may be one way to facilitate movement into available resources. Supportive Services are provided by staff to assist participants in moving forward to access permanent housing. The primary objective of Support Services for Programs is to support participants with obtaining an ID and other documents needed for permanent housing and/or resource linkages. Additionally, supportive services shall also include an organized approach to tracking and managing participant progress, including referrals and connections to housing navigation and permanent housing programs. LAHSA recommends the following provisions for Inside Safe-IH provider:
 - 6.1. Operator must provide Case Management that is offered in accordance with Housing First and trauma-informed care principles to assist participants to self-resolve their housing crisis and/or be connected to a permanent housing provider as well as provide linkages to health/behavioral health services.
 - 6.1. To maintain the momentum of participants' progress towards obtaining permanent housing, the Operator must offer case management services to each participant at least two (2) times per month. The frequency of how often case management services is offered to each participant can be increased depending on need and availability.

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- 6.2. Operators must ensure that participants have documents prepared for permanent housing placements included but not limited to: Identification and Driver's license cards, Social Security verification, universal housing application, employment verification, and other necessary documents to move swiftly into permanent housing.
- 6.3. Operator must develop an organized approach to tracking participant status and progress towards obtaining Identification in addition to tracking the progress of referrals to housing navigation and permanent housing programs.
- 6.4. All efforts on behalf of the Operator to engage a participant in case management services (document readiness, unit viewings, completion of universal housing application, linkages to health/behavioral health services) should be documented in HMIS as well as the response from the participant.
- 6.5. Case notes in HMIS should be documented in a manner that is succinct, objective, and factual.
- 6.6. Operator must document the content and outcome of case management meetings with participants as case notes under the designated program in HMIS.
- 7. <u>Case Management Ratio</u>: Operators are recommended to maintain a ratio of approximately one (1) staff to every twenty-five (25) participants for optimal service delivery.
 - 7.1 The specific ratio of staff members to participants for case management services should be determined through consultation with Supervising or Managing level staff, taking into consideration the frequency of services needed for participants based on individual need.
- 8. <u>Mainstream Benefits</u>: Operator must establish procedures for referring eligible and interested participants to mainstream benefit services (e.g., services available through Department of Public Social Services, Department of Health Services, Department of Mental Health, Department of Public Health, Military and Veterans Affairs (MVA), Department of Aging and Disabilities (AD), and Office of Immigrant Affairs). In addition, Operator must coordinate with LA City and County Departments and other service partners to facilitate service-connection site visits, including efforts such as appointment scheduling coordination and day-of logistics support for County Mainstream Services connection events.

In coordination with or via LA City and County Department services, facilitate connections to health and behavioral health care connections for participants, beginning with identification of if participants have health insurance benefits and prior provider linkages and if they currently need health or behavioral health services. County Departments or other appropriately trained personnel can conduct 5x5 assessments to inform this effort.

- 9. <u>Inside Safe-IH Operator Care Coordination Responsibilities</u>: Across Components (Outreach, Interim Housing, and Permanent Housing), the Inside Safe Program works to ensure that individual encampment members are supported from initial engagement through to permanent housing. Inside Safe-IH Operators must work with Housing Navigators and Time Limited Subsidy providers to ensure that available slots are utilized, and participants are linked to available permanent housing resources (including Permanent Supportive Housing, Section 8, VASH, etc.). In addition, Operator will participate in care coordination meetings facilitated by the City, County, and/or LAHSA pertaining to this project. Care coordination meetings will include strategy development to address identified participant needs and progress toward permanent housing exits.
 - 9.1 The City of Los Angeles, HACLA and LAHSA will work collaboratively to make any necessary changes related to prioritization, matching, and other aspects of the implementation of

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- the complete Coordinated Entry System. Operators will be notified of any such changes through policies, interim guidance, and other forms of guidance when deemed necessary.
- 10. Meals: Operators are required to ensure that any participant placed in a hotel or motel location will receive 3 meal services per day via meal delivery or meal vouchers. Meals can be provided through the distribution of hot or cold meals or meal gift cards for the first 72 hours. Upon thereafter, operators would be required to transition to only hot or cold meals unless any dietary or health restrictions would be best served by offering a meal gift card or if operators do not have the necessary infrastructure needed to handle refrigerated and heated meals Operators may use meal gift cards as directed by LAHSA. All meals need to be documented three times a day by the operator and entered into a manual log available for view upon request.

G. LENGTH OF ENROLLMENT

1. Operator must strive to assist participants in moving out of Interim Housing and into permanent housing as quickly as possible. The goal of the Inside Safe Program is to identify housing for each participant within ninety (90) days of enrollment in the program with a maximum length of six (6) months in the Program. Extensions of Program participation beyond 6 months may be accommodated via a waiver if an extension is deemed to assist the participant in quickly obtaining permanent housing.

H. EXITS AND TERMINATIONS

- 1. Operator must abide by **LAHSA's Interim Housing Exit and Termination Standards** and develop and document clear program termination policies and related procedures that align with these expectations.
- 2. Operator shall be solely responsible for any necessary removal and/or termination of a participant pursuant to Civil Code section 1954 et. seq. including but not limited to initiating and conducting any legal process required for the removal and/or termination of a program participant. LAHSA shall have no responsibility for the removal and/or termination of participants.

I. PARTICIPANT FILE

- Operator must maintain a hard case file for each participant in addition to maintaining HMIS records for the participant.
- Collection of identification and income verification documents is recommended, but <u>not</u> required for enrollment into the program. If participant does not have these documents at the time of program entry, Operator must assist participant with obtaining them. Once obtained, copies of these documents must be kept in the participant's file.
- 4. Core documents include the following, but are not limited to:

Document	Guidance
Participant Identification	Required - See Appendix I for details.
Inside Safe-Interim Housing Participant Agreement Form	Required - Must be dated and signed by the participant and Operator and uploaded into HMIS.

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Grievance Procedure	Agency created form. Must be dated and signed by the participant and		
Acknowledgement	Operator.		
CES Initial Assessment	Complete in alignment with procedures developed by LAHSA.		
Housing Services Plan	Required- Upload into/document in HMIS		
HMIS Consent Form	Required		
Verification of Homelessness	Required – See Appendix I for details on eligible documentation.		
Monthly Update Form	Use LAHSA-approved form or document using HMIS case notes.		
Budget Tool	Optional, use as needed		
Case Notes	Required- Enter into HMIS		
Exit Summary Form	Required- Use the LAHSA-approved forms, including Reunification Certification Form and Transportation Assistance Request Form if applicable. Exit from Inside Safe Program required in HMIS and documenting exit destination.		

J. HMIS DATA COLLECTION AND PARTICIPATION REQUIREMENTS

- 1. Operators must utilize HMIS as their primary participant tracking and document storage system, unless prohibited by law, to track all participants served and the services provided.
- Operator will ensure that all participants sign the <u>Consent to Share Protected Personal Information</u> form granting consent for Operator to enter information into the HMIS database. The Operator may obtain verbal consent if warranted due to health, safety or other concerns that prohibit the Operator from getting the document signed. The receipt of verbal consent must be documented in a <u>Program Level Case Note</u> along with the reason why verbal consent was obtained. If consent is not provided, services are still entitled to the participant.
- 3. Operator must adopt and implement the best practices for data entry as follows:
 - 3.1. Operator will search the Clarity HMIS database for an existing profile. If none is found, the Operator will collect and record the participant's consented information into the database and create a participant record.
 - 3.2. In completing the participant's records, referred to as Profile, the Operator will fully complete fields based upon participant's responses. When previously undisclosed information is collected, the Operator will update the participant's profile.
 - 3.3. To enroll a participant in a program, the Operator must complete a Program Enrollment. The Operator must complete the Program Enrollment (program entry/intake) questions in the HMIS database with as much information as the participant can provide. For missing information, mark the appropriate field "Participant Doesn't Know" or "Participant Refused"; if/when a participant/household discloses any missing information, the Operator must update the participant's intake in HMIS within 3 days or complete a Status Update Assessment.

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- 3.4. Operator must enter the unit service daily to reflect a participant's use of that unit that night.
 - 3.4.1. This information will be utilized for verifying motel occupancy. Providers are expected to report this daily occupancy data to the City of Los Angeles City Administrative Office in addition to LAHSA.
- 3.5. Operator must enter each meal service (breakfast, lunch, dinner) to reflect the participant's use on a manual log available for review upon request.
- 3.6. With all participants, the Operator must record the program exit or termination within three (3) business days. Operator shall enter the Exit Date as the date the a) last service was provided (meal service, case management, etc.), or b) the last unit service was provided.

K. MOTEL UTILIZATION

- 1. In instances where Inside Safe programs operate out of motels leased/rented by the City of Los Angeles, the Operator is expected to:
 - 1.1. Before check-out, the Operator is expected to inspect, video/photograph, and document the condition of the guest room previously occupied by the Inside Safe Participant in addition to the common area in the vicinity of such guest room.
 - 1.2. Provide requested property- and use-related reporting to LAHSA and the City including but not limited to verification of enrollment/room occupancy numbers and submission of property damage reports.
 - 1.3. Serve as the City Agent for verification to motel owner that a participant is checking out from a motel room and that the room is vacant. Before check-out, the Operator is expected to inspect, video/photograph, and document the condition of the guest room previously occupied by the Inside Safe Participant in addition to the common area in the vicinity of such guest room.

L. PERSONNEL

- 1. Contractor must assign staff with background experience and expertise to provide the services required in the Scope of Required Services (SRS).
- Contractor must comply with the list of required staff trainings outlined in the LAHSA Program Standards.
 - 2.1. In addition to the trainings outlined in the LAHSA Program Standards, Contractor is required to ensure all support services staff complete a training on administering Naloxone (NARCAN) to a participant in the event of an opioid overdose.
 - 2.2. Direct-service staff are to be offered and required to participate in ongoing training on topics such as trauma-informed care, harm reduction, housing-first, and low barrier access topics.
 - 2.3. Contractor must comply with any additional required trainings as directed by LAHSA.

M. COSTS

- 1. The following are allowable operating costs:
 - 1.1. Administration
 - 1.2. Service Coordination
 - 1.3. Case Management, Supportive Service, and Activity Provision

- 1.4. Meals/food
- 1.5. Personal hygiene products & toiletry products
- 1.6. Transportation
- 1.7. Training
- 1.8. Laundry
- 1.9. Storage of participants' personal property
 - 1.9.1. Providers operating at smaller motels (at or below 25 rooms) may require additional financial support as directed by LAHSA.

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APPENDIX I: PROGRAM ELIGIBILITY GUIDANCE

Eligibility	Guidance						
	 Participants are required to have a form of identification on file. Copies are acceptable. However, if a participant does not have an identification card at the time of the program screening, Operator must not deny the participant entry, but rather assist the participant in obtaining an identification card. Category [A] are acceptable forms of government issued photo identification cards. If the participant does not have any of the acceptable identification cards listed in Category [A] they may provide one acceptable form of alternative photo identification in Category [B] along with one acceptable non-photo form of identification in Category [C] to meet the government issue identification requirement. A copy of a social security card is NOT required for the program. 						
	Government issued photo Identification Card (ID)		Alternative Forms of acceptable photo Identification Card (ID)		Alternative Forms of acceptable non-photo identification		
Participant Identification	 State-issued DMV ID State-issued DMV Driver's license Passport/ Passport Card US Military ID Immigration Services (USCIS) ID Visa issued by department of state Government issued ID 	OR	Student ID Shelter ID Employment ID Bank/ Debit/ Credit Card Transportation Card (METRO) Library Card Gym Membership Card Warehouse Membership Card	AND	Birth certificate Utility Bill Lease/ rental contract School Records Medical / Dental insurance card Debit/ bank card Credit card Legal records/ court documentation Tax Identification Number/ Paperwork (TIN) Social Security card American Automobile Association (AAA) card American Association of Retired Persons (AARP)		

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APPENDIX I: PROGRAM ELIGIBILITY GUIDANCE (continued)

Eligibility	Guidance
	Participant must be determined to be experiencing Category 1 and/or Category 4 homelessness.
Homeless Status	 Category 1: Literal Homeless- An individual who lacks a fixed, regular, and adequate nighttime residence, which includes one of the following: Has primary nighttime residence that is a public or private place not meant for human habitation. Examples include street, park, vehicle, abandoned building, bus/train station, airport, camping ground); Is living in a publicly or privately-operated shelter designated to provide temporary living arrangements (i.e. Emergency shelter and transitional housing)
	iii. Identified as experiencing homelessness upon exiting from an institution Examples of Institutions include a medical hospital, psychiatric hospital, jail, prison, substance abuse treatment facility, and dependent care facility.
	Category 4: Individuals/families experiencing trauma or a lack of safety related to, or fleeing or attempting to flee, domestic violence, dating violence, sexual assault, stalking, human trafficking, or other dangerous, traumatic, or life-threatening conditions related to the violence against the individual or a family member in the individual's or family's current housing situation, including where the health and safety of children are jeopardized; and includes all of the following:
	i. Have no identified residence, resources or support networks; ANDii. Lack the resources and support networks needed to obtain other permanent housing.
Income	No Income Requirement for entry, and income is not a requirement for program services. Once enrolled, programs should work with the participant to access sources of income. The provider must upload available income documents to HMIS.
Length of Enrollment	The goal of interim housing is to assist individuals in gaining and moving into permanent housing as quickly as possible. The goal of the Inside Safe Program is to identify housing for each participant within ninety (90) days of enrollment in the program with a maximum length of six (6) months in the Program. Extensions of Program participation may be accommodated via a waiver if an extension is deemed to assist the participant in quickly obtaining permanent housing.