

**GUIDING PRINCIPLES AND PRIORITIES
FOR THE KENTUCKY BALANCE OF STATE CONTINUUM OF CARE
PLAN TO SERVE INDIVIDUALS AND FAMILIES WITH SEVERE SERVICE NEEDS**

In June 2022, the U.S. Department of Housing and Urban Development (HUD) released a first-of-its-kind funding package specifically to address unsheltered and rural homelessness. Through its Continuum of Care Supplemental to Address Unsheltered and Rural Homelessness (“Special NOFO”), Continuums of Care (CoCs) can apply for funding to create new, CoC Program-eligible projects through either an “Unsheltered Set-Aside” or “Rural Set-Aside”. As part of a national competition for this funding, CoCs must develop their own *CoC Plan to Serve Individuals and Families Experiencing Homelessness with Severe Service Needs (“Plan”)*.

The KY BoS CoC’s Plan is currently under development. To assist project applicants in their development of project applications that will align with the Plan, this document outlines the overarching principles and priorities that will be included in the Plan.

Applicants should also carefully review the [KY BoS CoC’s Special NOFO Application Guidelines and Selection Process document](#) as well as the [KY BoS CoC Special NOFO Scoresheet](#) to better understand local policies, priorities, criteria that will be used to score and rank projects in the local competition. **These three documents are meant to support each other and should be considered by potential project applicants in their totality.**

HUD defines severe service needs as follows:

Any combination of the following factors: facing significant challenges or functional impairments, including any physical, mental, developmental or behavioral health disabilities regardless of the type of disability, which require a significant level of support in order to maintain permanent housing (this factor focuses on the level of support needed and is not based on disability type); high utilization of crisis or emergency services to meet basic needs, including but not limited to emergency rooms, jails, and psychiatric facilities; currently living in an unsheltered situation or having a history of living in an unsheltered situation; experiencing a vulnerability to illness or death; having a risk of continued or repeated homelessness; and having a vulnerability to victimization, including physical assault, trafficking or sex work.

Projects created through this Special NOFO are expected to be aligned with the CoC’s Plan. Per the Special NOFO, the Plan must:

...describe the CoC’s current strategies for conducting coordinated and comprehensive outreach, providing access to low-barrier shelter and other temporary accommodations, and providing immediate access to low-barrier permanent housing. Additionally, CoCs must demonstrate how they will leverage both mainstream housing and healthcare resources to assist in their efforts to end unsheltered homelessness and stabilize individuals and their families in housing and increase access to employment opportunities for those experiencing homelessness. Further, CoCs must demonstrate how they will support underserved communities, identify barriers that led to any disparities in communities being served, and support equitable community development by taking steps to address such barriers when using these funds and how they will involve individuals with lived experience in the decision-making process of the CoC. Finally, CoCs must demonstrate how they will ensure resources funded under this Special NOFO will contribute to reducing unsheltered homelessness in their geographic area.

GUIDING PRINCIPLES

Housing First

The KY BoS CoC's homeless response system, including its CoC-funded projects, is grounded in the client-centered Housing First approach with the core principle that homelessness is first and foremost a housing crisis that can be solved through the provision of safe and affordable housing. The KY BoS CoC believes that all people experiencing homelessness are "housing ready" and should be quickly connected to permanent housing without preconditions or barriers to entry such as sobriety, having income, or not having a criminal record. Under a Housing First model, supportive services are voluntary and client-driven, but should be offered persistently as a resource to help program participants achieve and maintain housing stability. All assistance provided should be individualized to the specific needs of the program participant. Program staff should utilize evidenced-based best practices such as harm reduction and motivational interviewing techniques to empower the program participant to direct their own progress towards housing stability, better health outcomes, and overall well-being. Maintaining assistance is not contingent upon service or treatment participation, increasing one's income, or making progress on a service plan. Housing First does not mean "housing only". Rather, Housing First means "housing-focused" – all assistance is provided with the intent of helping people obtain and maintain permanent housing. All projects funded through the Special NOFO must follow the Housing First approach and are expected to have policies, procedures, and staff training in place that reflect this commitment.

Trauma-Informed

Projects funded through this Special NOFO, as well as all projects that are part of the KY BoS CoC homelessness response system, are expected to utilize a trauma-informed approach in the delivery of housing assistance and services and are expected to incorporate trauma-informed principles in its policies, procedures, and staff training. The Substance Abuse and Mental Health Services Administration (SAMSHA) provides the following definition of a trauma-informed approach: "A program, organization, or system that is trauma-informed realizes the widespread impact of trauma and understands potential paths for recovery; recognizes the signs and symptoms of trauma in clients, families, staff, and others involved with the system; and responds by fully integrating knowledge about trauma into policies, procedures, and practices, and seeks to actively resist re-traumatization."

Supported Access to Mainstream Benefits, Employment Programs, and Health Care Services

While homelessness is first and foremost a housing crisis, long-term housing stability is strengthened through program participant connections to supports such as mainstream benefits, employment programs, and health care services. People experiencing homelessness, even when they are able to access subsidized housing, must increase their available income in order to achieve long-term housing stability. Utilizing resources that can reduce their cost burden for food, childcare, and health care, among other essential needs, can help achieve this necessity. The KY BoS CoC expects all projects funded through the Special NOFO to provide regular, intentional, and hands-on assistance to program participants to apply for and retain all mainstream benefits of which they are eligible such as SNAP (i.e., Food Stamps), TANF (i.e., K-TAP), Child Care Assistance, SSI/SSDI, and Medicaid. This includes, but is not limited to, providing transportation either directly or through a partner organization to mainstream benefit appointments, jobs and employment training, and health care services; conducting at least annual follow-ups to ensure mainstream benefits are received and renewed (project staff working with program participants, especially those with severe service needs, should maintain knowledge of participants' benefits status and should provide continual support as frequently as required); providing direct assistance with completing applications, including providing technical assistance for SSI/SSDI applications by SOAR-trained staff.

Cross-Sector Collaboration

Homelessness is a community-wide challenge that requires deliberate cross-sector planning and coordination to successfully overcome fragmentation of services and systems that often require people experiencing homelessness to navigate numerous systems in order to seek the assistance they need, if they are able to do so at all. People experiencing homelessness often have complex health and social needs, which can be further exacerbated by continued housing instability. There is strong evidence that safe, affordable housing, or the lack thereof, is a determinant of health outcomes. Therefore, health care providers and insurers have a keen interest in ensuring housing stability while housing providers share the same goal. This makes it even more essential that people experiencing homelessness have easy and equitable access to the supports they need. Cross-sector collaboration includes, but is in no way limited to, health care providers (e.g., Federally Qualified Health Centers (FQHCs), hospitals, health departments, public and private insurance providers); housing providers such as Public Housing Authorities (PHAs); private landlords; and social service agencies that provide connections to mainstream benefits. Through this Special NOFO, project applicants are strongly encouraged to propose projects that leverage health care resources and housing resources such as non-CoC and non-Emergency Solutions Grant (ESG)-funded subsidies and units to increase the impact the CoC funds can have on people experiencing homelessness. Furthermore, project applicants are expected to build and foster relationships with landlords in order to increase the number of units available to program participants. This includes, developing close relationships with landlords not just during the housing search process, but during the participant's tenancy as well, serving as a liaison and mediator as needed. Often, people experiencing homelessness with the most severe service needs may have poor rental histories and involvement with the criminal justice system, making it even more imperative to develop strong landlord outreach strategies and practices and to provide house-focused case management and supports as frequently as needed to program participants while in housing.

Equal Access and Equity

In most communities, Black and other people of color as well as people who identify as LGBTQ+ and those with disabilities are overrepresented in the homeless population. In many cases, these same people can face significant barriers in accessing services and do not have equitable outcomes compared to others in the homeless population. The KY BoS CoC is committed to providing equal access to all people experiencing homelessness in the provision of shelter, housing, and services. This includes, but is not limited to, providing assistance regardless of one's race, sex, ethnicity, national origin, real or perceived sexual orientation, gender identity and expression, marital status, family composition, or disability. Furthermore, the KY BoS CoC is committed to identifying and addressing the needs of subpopulations who are disproportionately more likely to experience homelessness. This includes, but is not limited to, identifying barriers that led to any disparities that exist and taking steps to remove these barriers. This can be accomplished, in part, by evaluating system-wide and project-level policies and processes to identify where barriers that lead to disparities might exist and how changes can be made to ensure equitable access and outcomes for underserved and marginalized communities. Projects funded through this Special NOFO, as well as all others part of the KY BoS CoC, are expected to incorporate anti-discrimination, equal access, and equity principles into their policies, procedures, and daily practices and ensure all staff are appropriately trained. In addition, projects are expected to provide culturally competent outreach and engagement to populations that have not previously been served by the homeless response system at the same rate they are experiencing homelessness.

Broad and Inclusive Planning and Implementation

As stated by HUD in the Special NOFO, “ending homelessness cannot be achieved by homeless service organizations alone.” A broad array of stakeholders, including but not limited to, housing developers, PHAs, mainstream service providers, youth service providers, education providers, health care providers, the business community, political leaders, state and local government administrators, and most importantly people with lived experience of homelessness must be at the table to develop a community’s plan to address homelessness and to be involved in the on-going evaluation and implementation of the community’s plan. CoC leaders and stakeholders should prioritize hiring people who have experienced homelessness in areas where their expertise is needed such as for peer outreach and support.

PRIORITIES

The purpose of the Special NOFO is to target efforts to reduce unsheltered homelessness, especially in areas with high levels of unsheltered homelessness and in rural areas where access to CoC assistance has been significantly limited or non-existent. Through this Special NOFO, HUD will award funding to communities that implement coordinated approaches to reducing unsheltered homelessness and serving individuals and families experiencing homelessness with severe service needs.

In consideration of the Special NOFO’s purpose of the KY BoS CoC’s guiding principles for its *Plan to Serve Individuals and Families Experiencing Homelessness with Severe Service Needs*, the KY BoS CoC has established the following funding priorities (in no particular order):

- Prioritize projects that are meant to serve people with severe service needs and those experiencing unsheltered homeless (i.e., Permanent Supportive Housing and Supportive Services Only-Street Outreach).
- Prioritize structurally disadvantaged areas where CoC-services have been limited or entirely non-existent.
- Prioritize projects that are able to serve multiple counties in order to ensure broader geographic availability of resources.
- Prioritize supportive services projects that provide hands-on support to connect people experiencing homelessness to mainstream housing resources such as Mainstream Vouchers, Emergency Housing Vouchers, and Sustainability Vouchers provided through PHAs.
- Prioritize projects that will have sufficient staff and supportive services to appropriately serve people with severe service needs.
- Prioritize projects with strong plans to connect program participants, especially those with severe service needs, to mainstream benefits for which they are eligible, health care services, and employment opportunities.
- Prioritize projects with strong plans to assist people, especially those with severe service needs, obtain housing (e.g., housing identification/navigation/landlord outreach) and to maintain housing with client-centered, housing-focused housing stability case management.
- Prioritize projects that are able to leverage non-CoC/ESG housing resources and health care resources through formal partnerships with housing providers and health care providers.
- Prioritize projects that demonstrate a commitment to involving people with lived experience of homelessness in their project planning and implementation.