



PROVIDER GUIDE TO HOUSING SUPPORT

Isanti County
Health and Human Services
1700 East Rum River Drive S.
Cambridge, MN 55008

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I. Introduction

Thank you for expressing interest in the Isanti County Health and Human Services (ICHHS) Housing Support Program (HSP). Authority for the HSP is provided through Minnesota Statutes, chapter 2561. While Housing Support dollars may be accessed through a variety of supervised living settings, the ICHHS HSP currently provides guidance and standards on the following programs: the Supportive Housing Program, Housing Support Board and Lodge Program (HS-BL) and Other Supervised Living Programs (HS-OSLP).

This manual has been created to provide the information providers will need to know to develop an approved Housing Support program. It should be kept as a resource whenever there is a policy or program clarification needed.

Isanti County's Supportive Housing Program

Isanti County's Supportive Housing Program's mission is to provide safe, person-centered living arrangements and supplemental services to eligible individuals experiencing housing instability and/or long-term homelessness (LTH) in communities of their choice utilizing Housing Support dollars.

The Supportive Housing Program's purpose is to enhance an eligible person's ability to access and maintain rental market housing with the assistance of effective services that meet their needs and preferences. Some people will need intensive, highly professionalized services, while others will want a more supportive approach. Many will have needs and preferences that change significantly over time. To that end, the Supportive Housing Program offers tenant-based rent subsidies (Rate 1) and optional supportive services (Rate 2) to follow individuals over time and across housing choices, providing maximum financial and emotional continuity. This approach minimizes the demands on individuals to form new relationships with different service providers while empowering people to make their own housing choices. This approach is consistent with *Olmstead v. LC*, 119 S Ct. 2176 (1999).

Unlike other types of providers who might access Housing Support for individuals in board and lodges or community residential settings, providers offering Housing Support in supportive settings to eligible individuals are not required to be licensed through the Minnesota Department of Human Services (DHS) and/or the Minnesota Department of Health (MDH). Therefore, Isanti County Health and Human Services requires supportive housing program providers to meet or exceed the standards of service provision as stated in this manual.

What is Housing Support?

Housing Support, formerly known as Group Residential Housing (GRH), is a state-funded income supplement for housing (room and board) and housing supports (supplemental services) for eligible seniors or adults with disabling conditions. To prevent and/or reduce homelessness or institutionalization, this funding provides financial support for rent, utilities, household needs, and food and/or services for eligible individuals.

There are two rates of payment for Housing Support:

- Rate 1: Room and Board
- Rate 2: Supplemental Services Rate

These rates are annually adjusted based on the Federal Benefit Rate of the Supplemental Social Security Income (SSI) program and the SNAP guidelines for an individual.

Counties are responsible for ensuring a Housing Support Agreement is in place with an authorized provider. In Isanti County, the Health and Human Services Division is responsible for evaluating and approving all Supportive Housing - Housing Support Agreements.

Settings that can qualify for a Housing Support Agreement can include adult foster care homes, boarding and lodging facilities, supervised living facilities, non-certified boarding care homes, supportive housing establishments, assisted living facilities, and long-term homeless supportive housing.

The participant, housing unit, and service provider must meet statutory eligibility requirements, before the funds are issued. If approved for a Housing Support Agreement, payment is disbursed to the provider by the Minnesota Department of Human Services (through ICHHS' Financial Assistance Division) to the owner/manager of the housing unit on behalf of the eligible person.

Management of the Supportive Housing Program

Please note that this Manual is not legal advice and should not be construed as such. Providers are strongly encouraged to seek legal counsel and/or accounting services when preparing a business proposal and offering Housing Support services. This Manual is updated annually and as needed, therefore any changes to Minnesota statute supersede that which is referenced herein.

Technical Assistance Available

Becoming a new provider or understanding programmatic requirements can be confusing and difficult. While this Manual should provide many answers to your questions, ICHHS contacts are available to provide technical assistance upon request.

- [Minnesota Health Care Provider Enrollment](#)
 - For Providers interested in pursuing supplemental services
- [Housing Support - DHS Website](#)

A. Housing Support Program Contacts

Name	Title	Contact Information
Mitze Welsh	Licenser, ICHHS	(763) 689-689-1711 Mitze.Welsh@co.isanti.mn.us
Financial Assistance	ICHHS Financial Assistance Unit	(763) 689-1711

Additional Helpful Contacts

Name	Title	Contact Information
EBT Card Services	To request a new EBT card	(888) 997-2227
Disability Hub of MN	Free resource to navigate the system	https://disabilityhubmn.org/
Disability Benefits 101	Free resource to navigate disability benefits	https://mn.db101.org/
MN Benefits	Easily apply for benefits online: SNAP, Emergency Assistance, Housing Support, etc	https://mnbenefits.mn.gov/
Social Security	Sign up for a SS account	Social Security
Coordinated Entry	Lakes and Pines: Rachel Anderson	(320) 679-1800 ext: 160 RachelA@lakesandpines.org
DHS	Programs Available - Adults	https://mn.gov/dhs/people-we-serve/adults/
Lakes and Pines	Local Assistance/Resources	https://www.lakesandpines.org/

County Offices and Contact Information

Site	Location	Phone/Fax
Government Center	555 18 th Ave SW, Cambridge, MN 55008	PH: (763) 689-4071 PH Fax: (763) 689-8293
Oakview- Health and Human Services	1700 East Rum River Dr S., Cambridge, MN 55008	P: (763) 689-1711 F: (763) 689-9877

SECTION II:

Models of Housing Support

II. Models of Housing Support

Client Eligibility – Determined by Isanti County Eligibility Workers

- Must 1) be 18 and older and disabled/have a disabling condition or 2) be 65+
- Must meet a basis of eligibility for General Assistance (GA) or Social Security Insurance (SSI).
- [A Professional Statement of Need \(PSN\)](#) may be used to verify basis of eligibility for clients not receiving Social Security Benefits.
- Countable income: must be less than maximum benefits of \$954 (effective 7/1/2021)
 - Earned income must be reported every 6 months, or as determined by DHS Policy.
- Countable assets: must be within the asset limit for the program. \$10,000 as of 7/2021 except for SSI recipients which are lower (follow SSI rules in those cases).

More information about Housing Support Basis of Eligibility can be found [here](#).

Individuals can apply for Housing Support via the following:

- Apply online via mnbenefits.org
- Fax completed Combined Application Form (CAF) to (763) 689-9877
- Submit a [Change Report Form \(DHS-2402\)](#) if a person is receiving cash assistance

Required verification documents include (but may not be limited to):

- [Shelter Verification Form](#)
- Identification
- Immigration Status for non-citizens
- Gross Income
- Assets
- Basis of Eligibility - [PSN](#), State Medical Review Team (SMRT) certification, SSA disability benefits
- Signed Interim Assistance Agreements if not receiving SSA Benefits
- [Habitability Inspection Form](#)

Provider Requirements

Providers must maintain all licenses and registration respective to their housing setting. Current licenses must be submitted upon request, including as part of initial agreements and renewals.

As required by DHS, providers must submit to Isanti County, initially and as part of their annual renewal, a list of residency requirements that include violations that could result in eviction.

NetStudy 2.0 background checks are required for the following:

- All employees and volunteers who have direct contact (provide face-to-face care, training, supervision, counseling, consultation, or medication assistance) with recipients, or who have unsupervised access to recipients, their personal property, or their private data.
- All Controlling Individuals and Managerial Officials.

Staff qualifications – all staff members who have direct contact with recipients must have skills and knowledge acquired through **at least one** of the following:

1. A course of study in a health or human services related field leading to a Bachelor of Arts, Bachelor of Science, or associate's degree;
2. One year of experience with the target population served;
3. Experience as a certified peer specialist according to Minnesota Statutes section 256.0615; or
4. Meets the requirements for unlicensed personnel under Minnesota Statutes sections 144A.43 to 144A.483.

Staff are required to have a valid driver's license if transporting participants.

Required trainings – Provider and staff are required to complete training on [Vulnerable Adult Mandated Reporting](#) (either developed by provider or one provided by DHS).

DHS is developing additional housing support orientations. Once available, provider staff will be required to attend.

Housing Support Requirements in Various Settings

DHS has two types of Housing Support Agreements: Group and Community

Group Version: Requires that three nutritious meals a day be prepared and served, and the provider must demonstrate a minimum of \$204 per month of the benefit is spent on food costs. Individuals being served under a group agreement are not eligible for SNAP benefits. Housing Support Agreement holders are required to ensure that Room and Board standards are met (i.e. provide directly for all required items). Adult Foster Care, Board and Care, Board and Lodge, and Customized Living all use the group version of the housing agreement.

Community Version: Require that participants have a lease and the option to purchase and prepare their own meals. Clients may be eligible for SNAP benefits. Housing Support agreement holders must demonstrate due diligence to ensure that Housing Support recipients all have the required Room and Board standards (i.e. provide directly OR otherwise assure provision of all required items). Housing with Services – Independent (HWS-I) and Long-Term Homeless (LTH) Housing Support settings all use the community version of the housing agreement.

Funding Process

Before funds are issued, the participant, the housing setting, and provider must meet statutory eligibility requirements.

- Provider eligibility for Housing Support funding is determined by Isanti County Health and Human Services.
- Participant eligibility is determined by Isanti County Eligibility Workers and is based on income, assets, and disability.
- Except for Community-Based Housing Support Programs, Housing Support is available only for eligible participants living in settings licensed or registered by the State of Minnesota through the Department of Human Services (DHS) and/or the Department of Health (MDH). See program model details for what is required in each setting.

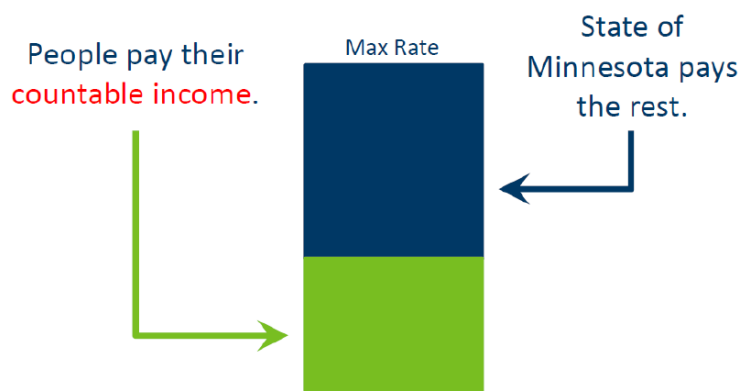
The Housing Support rate is set by the state and is automatically adjusted each year based on changes in the Federal Benefit Rate (FBR) of the SSI Program and changes in the value of food support for an individual. Since Housing Support is an income supplement to pay for room and board, many Housing Support providers also must rely on other sources of funding for the services they provide to participants. These can include the Housing Support Supplemental Service Rate (Rate 2), [Medicaid Housing Stabilization Services](#), Adult Foster Care Difficulty of Care, payment for treatment through Minnesota Health Care Programs, and Medicaid Waivered Services.

Housing Support Agreements are non-transferable.

Agreements can be terminated in writing by Isanti County or the provider, with or without cause, with two calendar months prior notice. Minnesota Department of Human Services has the right to suspend or terminate the Housing Support agreement immediately when it is determined the health or welfare of the housing or service recipients is endangered, or when there is reasonable cause to believe that the provider has breached a material term of the agreement.

For more information visit the Housing Support section of the [DHS Website](#) and the Minnesota Reviser website for the [Housing Support State Statute](#).

The following figure below briefly illustrates how the Housing Support funding flows from the state to the providers for all provider models.



Housing Support 101 from Minnesota Department of Human Services (DHS)

Providers looking for more general overview of Housing Support, including state program requirements, overall program design, and general compliance, can attend a Housing Support 101 with the Department of Human Services. Providers can e-mail dhs.dhs.grh@state.mn.us to find out about upcoming trainings.

Description of Models

A. *Adult Foster Care*

Program Description

Adult Foster Care allows people who need supportive housing services, an opportunity to live and participate in the community in a residential setting with overnight supervision and support. County and state philosophy emphasize that people who need this type of care have choices in their housing and that the services they receive are person-centered. Adult Foster Care providers are responsible for residents' food, lodging, protection, supervision, and household services.

There are two options in adult foster care settings: family or corporate.

Family:

In family homes, the license holder lives in the home and is the primary caregiver. Most adults in family adult foster care in Isanti County qualify for either Housing Support funds or pay with private funds. Some family providers hold an additional license to accept waiver payments.

In Family Adult Foster care, the license applicant opens the home where they reside to an adult with special needs.

If you currently meet any of the following criteria, county licensors can assist you with an application:

- If you have an existing Adult Foster care license in another county and plan to move with your residents to Isanti County.
- If you are taking over the duties of an existing provider who is retiring.
- A child in a child foster care setting needs adult foster care.

Corporate:

Corporate homes are community residential settings where the license holder does not reside in the home. Residents typically receive services from the corporation licensed to operate the home or from another licensed service provider in the home or community. Most Isanti County residents in corporate Adult Foster Care have been pre-qualified for waived services funding to pay for residential support services. Room and Board costs may be paid for through the Housing Support program, if eligible.

Building Eligibility

All homes must be licensed through 245D and Isanti County. The county evaluates prospective homes and recommends licenses for those that meet state standards, monitors providers for compliance, and supports quality foster homes for adults.

The State of Minnesota has a moratorium on new corporate Adult Foster Care facilities and has capped the number of homes allowed. Counties cannot grant licenses for corporate applicants unless those providers plan to serve specific clients who meet certain criteria. The county has no information about when the state will lift the moratorium. It would require new action by the state legislature.

Base Rate Funding Sources and Expectations

While some residents of Adult Foster Care may be private pay, most residents are on a waiver which pays for their services and support. Housing Support will cover base rate-room and board. Including:

- Food preparation and service for three nutritional meals a day on site;
- The vendor must be able to verify, upon request, that at least \$204 per month is spent for the purchase of food for each Housing Support recipient.
- A bed, clothing storage, linen, bedding, laundering, and laundry supplies or service;
- Housekeeping, including cleaning and lavatory supplies or service; and
- Maintenance and operation of the building and grounds, including: heat, water, garbage removal, electricity, telephone for the site, cooling, supplies, and parts and tools to repair and maintain equipment and facilities.

Participant Eligibility and Application

The standard eligibility requirements for all Housing Support clients apply as described in general section of the manual:

Program participants:

- Must be age 65+ or be age 18+ and have a disability or disabling condition
- Must have low income and assets as determined by DHS

Beyond the requirements listed in Guidelines for all Housing Support Programs: Individuals living in an Adult Foster Care setting must have some type of functional impairment that make it difficult for them to live alone. MnChoices Assessments can help determine if participants would qualify for waiver programs and additional services. For additional information about MnChoices assessments, call Isanti County Health and Human Services' intake at (763) 689-1711.

B. *Boarding Care Homes*

Program Description

Boarding care homes are licensed facilities or units used to provide care for aged or infirm persons who require personal or custodial care and related services. Nursing services are not required but can be provided as part of other services. Residents often require a nursing level of care. Examples of personal or custodial care: board, room, laundry, and personal services; supervision over medications which can be safely self-administered; plus, a program of activities and supervision required by persons who are not capable of properly caring for themselves.

There is currently a moratorium on the development of new Boarding Care Homes. No new providers are expected to be approved. Any new programs would first require a variance from the State of Minnesota Department of Health.

You can find more information about Boarding Care Facilities at [MDH Licensing](#).

Building Eligibility

Boarding Care Homes maintain a Boarding Care License which also makes them an eligible setting for Housing Support.

Base Rate Funding Sources and Expectations

Expectations are that providers will comply with:

- Group version of Housing Support agreement
- All rules and expectations of any additional licensure held by the provider

Housing Support will cover base rate/room and board. Including:

- Food preparation and service for three nutritious meals a day, on site;
- The vendor must be able to verify, upon request, that at least \$204 per month is spent for the purchase of food for each Housing Support recipient.
- A bed, clothing storage, linen, bedding, laundering, and laundry supplies or services; Housekeeping, including cleaning and lavatory supplies or service; and

- Maintenance and operation of the building and grounds, including heat, water, garbage removal, electricity, telephone for the site, cooling, supplies, and parts and tools to repair and maintain equipment and facilities.

Service Rate Funding and Expectations

Service rates are not automatically provided in this setting but may be allowable based on conditions or expectations outlined in the general sections.

Participant Eligibility and Application

The standard eligibility requirements for all Housing Support clients apply as described in the general section of the manual:

Program participants:

- Must be age 65+ or be age 18+ and have a disability or disabling condition.
- Must have low income and assets as determined by DHS.

Client eligibility is determined by an Isanti County Eligibility Worker. Boarding Care Homes also have their own eligibility/intake procedures, subject to their separate licensing, and manage their own intakes.

C. *Board and Lodge*

Program Description

Board and Lodging facilities are licensed, congregate settings that offer a room (often shared) and three meals a day to eligible adults and, occasionally, families. Board and Lodges can vary in size, with five or more people living together. Some settings are short-term, time-limited; others may be supportive housing with no specific time limit. Any established time limits are a function of the provider's model of service and not dictated by Housing Support funding. Board and Lodges can require participation in skills training or other programming; others have no service requirements. Each Board and Lodge setting can look very different.

Building Eligibility

Board and Lodge settings are required to be licensed by the city where they are located or Environmental Services for a Lodging Establishment License, and/or a Food and Beverage Establishment License when staff prepare food for participants. Board and Lodge settings with a Service Rate must also have a Special Services Registration with the Minnesota Department of Health (MDH). [MDH Licensing Forms](#)

Base Rate Funding Sources and Expectations

Expectations are that providers will comply with:

- Sign Annual Housing Support Agreement with Isanti County, including supporting documents.
- Group version of Housing Support agreement
- Inform Isanti County about potential closure, change in ownership, or changes in program contact information

- Housing Support Agreements are not transferrable, new owners must apply for an Agreement with Isanti County
- All rules and expectations of any additional licensure held by the provider.

Housing Support will cover base rate/room and board. Including:

- Food preparation and service for three nutritional meals a day on site;
- The vendor must be able to verify upon requires that at least \$204 per month is spent for the purchase of food for each Housing Support recipient.
- A bed, clothing storage, linen, bedding, laundering, and laundry supplies or service;
- Housekeeping, including cleaning and lavatory supplies or service; Maintenance and operation of the building and grounds, including heat, water, garbage removal, electricity, telephone for the site, cooling supplies, and parts and tools to repair and maintain equipment and facilities.

Service Rate Funding and Expectations

Supplemental Service Standards:

- If authorized by the Agency, the vendor shall provide supplemental services to eligible Housing Support recipients including, but not limited to, oversight and up to 24-hour supervision, medication reminders, assistance with transportation, arranging for meetings and appointments, and arranging for medical and social services.
- Additional service requirements may apply if the provider is authorized in Minn. Stat. 2561.04 or 2561.05 to receive a special Housing Support Supplemental Service rate due to serving a special needs population or providing specialized services.
- All vendors providing supplemental services must maintain case notes with date and description of services provided to individual recipients. Best practices for writing a case note based on the Professional Statement of Need can be found [here](#).

Participant Eligibility and Application

The standard eligibility requirements for all Housing Support clients apply as described in the general section of the manual:

Program participants:

- Must be age 65+ or be age 18+ and have a disability or disabling condition
- Must have low income and assets as determined by DHS
- Providers may serve a specialty population if negotiated with the agency and approved to do so (i.e. person with chemical dependency or mental health diagnoses)

Client eligibility is determined by an Isanti County Eligibility Worker.

D. Customized Living

Program Description

Customized/Assisted Living Housing Support programs are site-based settings that are licensed as assisted living facilities. These settings house individuals who need support services. They provide three meals per day and 24-hour supervision. They range from large apartment buildings where individuals have their own apartment to shared homes where individuals only have their own bedroom. Services are individualized and paid for by insurance/private pay or by waived funding such as Community

Access for Disability Inclusion (CADI), Elderly Waiver (EW) or Brain Injury (BI). Housing Support funds may pay for the room and board for qualified individuals.

Building Eligibility

Program uses the Group Setting version of the Housing Support Agreement. All buildings where clients are housed must be licensed by the Minnesota Department of Health (MDH) as an assisted living facility. Each provider must license their own buildings; licenses cannot be shared/transferred among providers. Licenses must then be renewed annually.

DHS does not allow for Housing Support Agreements for Remedial Care only. Providers must enter into an Agreement for Base Rate funding to be eligible to service remedial care only residents.

Providers with a Housing Support Agreement must go through a Request for Application (RFA) process to add units to an existing site or to add a site.

City license may also be required.

Base Rate Funding Sources and Expectations

Housing Support will cover base rate/room and board. Expectations are that providers will comply with:

- Sign Annual Housing Support Agreement with Isanti County, including supporting documents
- Group version of Housing Support Agreement
- Inform Isanti County about potential closure, change in ownership, or changes in program contact information
- Housing Support Agreements are not transferrable, new owners must apply for an Agreement with Isanti County.
- All rules and expectations of any additional licensure held by the provider.

Service Rate Funding and Expectations

Customized Living sites do not offer supplemental services through the Housing Support program. Instead, Customized Living sites offer assisted living services, which are typically paid for through Medicaid waivers – Elderly, Brain Injury, and Community Access for Disability Inclusion. Providers must be enrolled as a Minnesota Health Care Programs provider to provide waived services under the Minnesota Department of Human Services (DHS). Monitoring of waived services is done by DHS.

Participant Eligibility and Application

The standard eligibility requirements for all Housing Support clients apply as described in the general section of the manual:

Program participants:

- Must be age 65+ or be age 18+ and have a disability or disabling condition
- Must have low income and assets, as determined by DHS
- Some sites may restrict their population to the elderly

Client eligibility is determined by an Isanti County Eligibility Worker.

E. *Housing with Services Independent (HWS-I)*

Program Description

The Housing with Services – Independent program (also known as Supportive Housing) creates housing opportunities for income-eligible individuals with disabilities to live independently in the community. Program participants come from group housing, shelters, or other segregated settings and would otherwise lack independent housing choices.

As the result of living in group housing settings or more restricted housing settings, many individuals are able to stabilize their homelessness, address mental and chemical health issues, and otherwise (re)gain the ability to live independently. They may then want to move toward more independent living with fewer rules and greater integration into the community. However, they also often lack the income to pay for that housing, particularly in a tight housing market with rising rents. As the most recently developed model in Isanti County, and one newly allowed by DHS, HWS-I is creating fresh opportunities for these clients. Under this new model, clients who had formerly been eligible for Housing Support only in group housing situations can now use Housing Support to pay for independent housing in the larger community.

Clients work with Housing Support providers on housing search and placement in licensed rental units throughout the community. Providers then administer monthly housing support payments (base rate only) on participants' behalf. Housing Support payments cover rent, utilities, and other eligible costs of independent housing, usually an apartment for which the client holds a lease with a third-party landlord. Rather than being tied to a building or project, Housing Support funding then follows the client over time if they change units. This ability for funding to follow the client provides maximum financial stability and truly enables client choice.

Clients can receive both tenancy supports and broader supportive services, but there is no service funding attached to the Housing Support award. Instead, providers managing Housing with Services – Independent caseloads are expected to either leverage other funding to provide supportive services ([Medicaid Housing Stabilization Services](#), waived services, grant funds, etc.) OR to connect clients to other community partners that can provide needed services.

Building Eligibility

This program uses the Community Setting version of the Housing Support Agreement. All clients must have a lease or sublease and the option to prepare their own meals. Each unit must pass a habitability inspection prior to clients moving in.

Base Rate Funding Sources and Expectations

Housing Support will cover base rate/room and board. Expectations are that providers will comply with:

- Sign Annual Housing Support Agreement with Isanti County, including supporting documents.
- Community version of Housing Support agreement
- Requirements set out in Isanti County monitoring tool unless deemed Not Applicable
- Inform Isanti County about potential closure, change in ownership, or changes in program contact information
- Housing Support Agreements are not transferrable, new owners must apply for an Agreement with Isanti County Health and Human Services.

- All rules are expectations of any additional licensure held by the provider

Service Rate Funding and Expectations

Services vary based on provider model and are outside of Housing Support program/requirements. There are no Housing Support funds for services in this setting. Because Housing Support does not pay for services in this program, clients need to obtain supportive services through Medicaid Housing Stabilization Services, waived programs, grant funded efforts, or other means.

Participant Eligibility and Application

The standard eligibility requirements for all Housing Support clients apply as described in the general section of the manual:

Program participants:

- Must be age 65+ or be age 18+ and have a disability or disabling condition
- Must have low income and assets as determined by DHS.

Client eligibility is determined by an Isanti County Eligibility Worker.

F. *Long Term Homeless (LTH) Housing Support*

Program Description

The Long-Term Homeless program is a community-based housing program that serves clients who have a qualifying disability and have experienced at least 52 weeks of homelessness for 4 episodes in the last 3 years, meeting the Federal definition of long-term homeless. Referrals are taken through Lakes and Pines' Coordinated Entry system. Clients are housed within the community and have their own apartment and lease, unless shared space is desired. Providers who utilize this program also receive Housing Support supplemental service funding to provide case management for clients. Case management services are targets toward maintaining housing and working towards independence. While the program works best for singles, families are also housed within the LTH program.

Building Eligibility

This program uses the Community Setting version of the Housing Support Agreement. All clients must have a lease and the option to prepare their own meals. Each unit must pass a habitability inspection prior to clients moving in.

Base Rate Funding Sources and Expectations

Housing Support will cover base rate/room and board. Expectations are that providers will comply with:

- Sign Annual Housing Support Agreement with Isanti County, including supporting documents
- Community version of Housing Support agreement
- Inform Isanti County about potential closure, change in ownership, or changes in program contact information
- Housing Support Agreements are not transferrable, new owners must apply for an Agreement with Isanti County
- All rules and expectations of any additional licensure held by the provider
- Fidelity Standards implemented by Isanti County Health and Human Services.

Service Rate Funding and Expectations

Supplemental Service Standards:

- If authorized by the Agency, the vendor shall provide supplemental services to eligible Housing Support recipients including, but not limited to, oversight and up to 24-hour supervision, medication reminders, assistance with transportation, arranging for meetings and appointments, and arranging for medical and social services.
- Additional service requirements may apply if the provider is authorized in Minnesota Statute 2561.04 or 2561.05 to receive a special Housing Support Supplemental Service rate due to serving a special needs population or providing specialized services.
- All vendors providing supplemental services must maintain case notes with date and description of services provided to individual receipts. Best practices for writing a case note based on the Professional Statement of Need can be found [here](#).
- Providers are expected to comply with all Fidelity Standards created by Isanti County Health and Human Services.

Participant Eligibility and Application

The standard eligibility requirements for all Housing Support clients apply as described in the general section of the manual:

Program participants:

- Must be age 65+ or be age 18+ and have a disability or disabling condition
- Clients must be referred through Lakes and Pines Coordinated Entry
- Clients must meet the State definition of Long-Term Homelessness
- Must have low income and assets as determined by DHS

Client eligibility is determined by an Isanti County Eligibility Worker.

SECTION III:

Employment and Housing Support

III. Employment and Housing Support

Recent legislation aims to reduce the disincentive to work for Housing Support recipients. This legislation allows clients to keep a greater portion of earnings by providing Earned Income Disregards.

The following figure demonstrates how employment and Housing Support works.

Eligible Person Housing Support and Work			
	Not Working	Working Some	Working More
Monthly Gross Earned Income	\$0.00	\$277.00	\$2181.00
Earned Income Disregard:			
• First \$65	-\$0.00	-\$65.00	-\$65.00
	\$0.00	\$212.00	\$2166.00
• ½ remaining	\$0.00	-\$106.00	-\$1058.00
Countable Earned Income	\$0.00	\$106.00	\$1058.00
Personal Needs Allowance	\$105.00	-\$105.00	-\$105.00
Amount Resident Pays	\$0.00	\$1.00	\$953.00
State Housing Support payment	\$954.00	\$953.00	\$1.00
Resident's Available Cash	\$105.00	\$276.00	\$1228.00

There are other circumstances that could affect a client's obligation, so all final calculations are made by Isanti County's Eligibility Workers. Helpful income calculators can be found [here](#).

Clients are required to report to their Isanti County Eligibility Worker when they start/stop working and are required to submit paystubs to determine what their contribution will be toward their housing costs. Once a client contribution has been determined, their Eligibility Worker will notify them of reporting requirements.

The asset limit for Housing Support clients was raised from \$2,000 to \$10,000 to allow clients to save money while remaining eligible for Housing Support.

Please note: Housing Support eligibility requirements may change. Please consult with Isanti County's Eligibility Workers for the most updated eligibility criteria.

SECTION IV:

Housing Support Agreement

IV. Housing Support Agreements

It is the expectation of all providers participating in the Isanti County Health and Human Services Housing Support Program to operate programs and facilities in a manner which reflect the priorities outlined below and with the highest ethical and professional standards of conduct and performance. Providers are required to avoid any actual and/or perceived conflicts of interest through the execution of their Housing Support Agreement with the Minnesota Department of Human Services and Isanti County Health and Human Services. Providers are required to responsibly manage, and report the usage of, Housing Support dollars. The policies and procedures established within this manual ensure alignment with ICHHS' expectations for professional conduct and performance.

Program Priorities

Isanti County Health and Human Services established the following priorities as a guide when evaluating applications for a new Housing Support Agreement, as well as renewals:

- Individuals live as independently and autonomously as possible in settings that maintain their dignity and quality of life.
- Individuals will choose where and with whom they live in the most integrated setting appropriate to their needs.
- Individuals receiving Housing Support reside in integrated settings throughout Isanti County.
- Individuals must have the right to choose their own service provider.
- Individuals with barriers to housing (ex. No rental history, bad credit, unlawful detainers/evictions, active substance use) have access to housing funded by Housing Support.
- Individuals living in Housing Support settings are provided access to resources and services outside of those paid for by Housing Support (ex. Housing Stabilization Services, Medicaid Waivered Services, etc.).

Tenancy and Landlord Rights

It is the position of Isanti County that for people in Supportive Housing Program settings, an individual lease is required, thus tenant laws apply. All units or dwellings must have a lease which includes the same responsibilities and protections from eviction as all tenants under landlord tenant law of state, county, city or other designated entity. The provider must submit a list of residency requirements that could result in eviction prior to approval of the Housing Support Agreement. This program provides a process to avoid evictions for providers and individuals serviced (see Section IV – Notice to Vacate Premises).

For more information about Landlord/Tenant rights, visit the [MN Attorney General Website](#). Tenant housing advocacy services are also available for both tenants and landlords: [Home Line](#).

Individuals in Supportive Housing Program settings also have the right to request a reasonable accommodation from the landlord to ensure the housing unit is accessible. Supportive Housing Program settings currently available may not be the preferred living situation for many seniors and individuals with disabilities. Supportive Housing Program participants should be offered several [housing options](#) and similar services if they choose to live in their own homes or apartments. [Housing Link](#) can help Supportive Housing Program participants find affordable housing, and offers landlords the ability to list their own rental properties.

A. Establishing a Housing Support Agreement

Providers will need to complete documentation necessary to comply with provider requirements as outlined in this manual.

Providers will then be issued the most current version of the Housing Support Agreement.

Both the provider and Isanti County representatives sign the agreement with each receiving a fully executed agreement. Housing Support agreements are valid until June 30th of each year.

Before payments can be issued, providers must then document that they have an eligible housing setting and clients must meet eligibility requirements as described in Client Eligibility.

As sites are identified (or if already identified), providers will submit proof of appropriate licensure or inspection for each site along with a request for a vendor number.

This entire process can take time – it is not uncommon to take three to six months from the time an application is submitted to when the provider can start housing individuals.

Housing Support Figures:

Figure 1. Housing Support group setting with no income

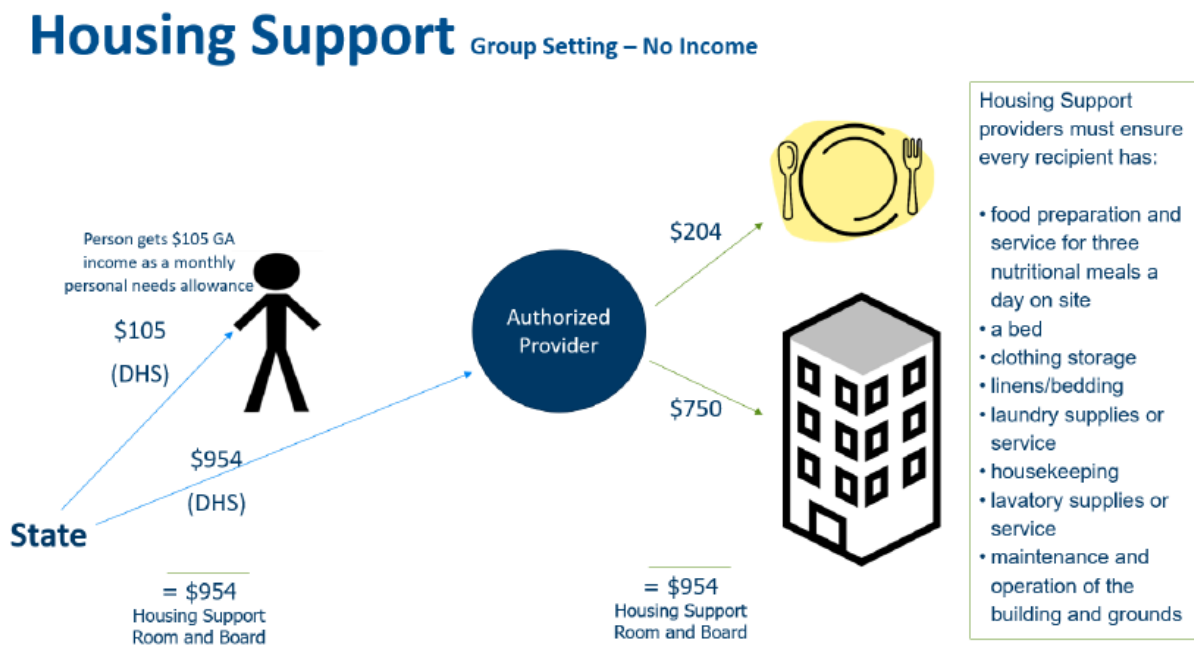


Figure 2. Housing Support group setting with Supplemental Service income (SSI)

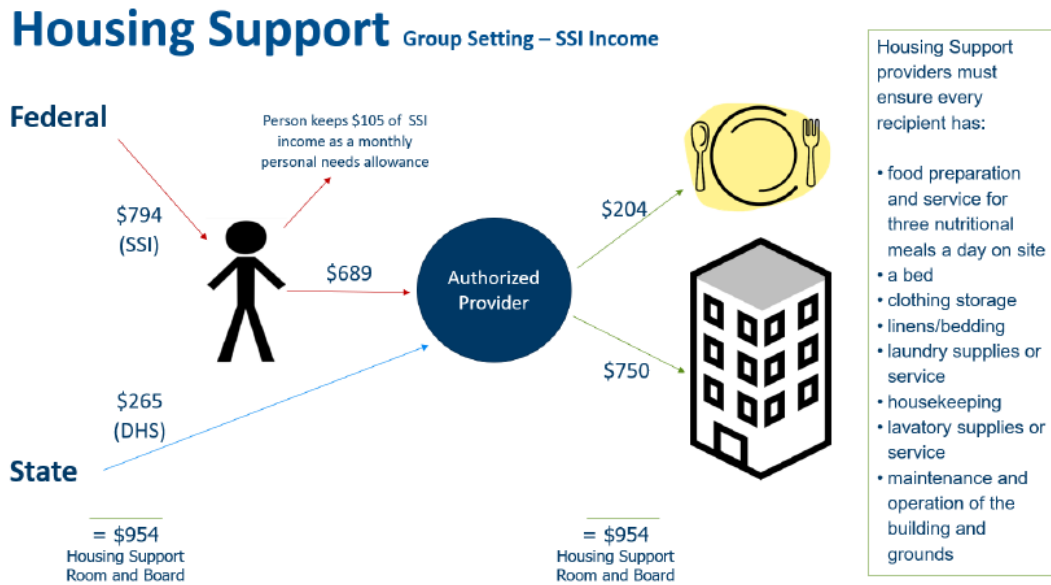


Figure 3. Housing Support community setting with no income

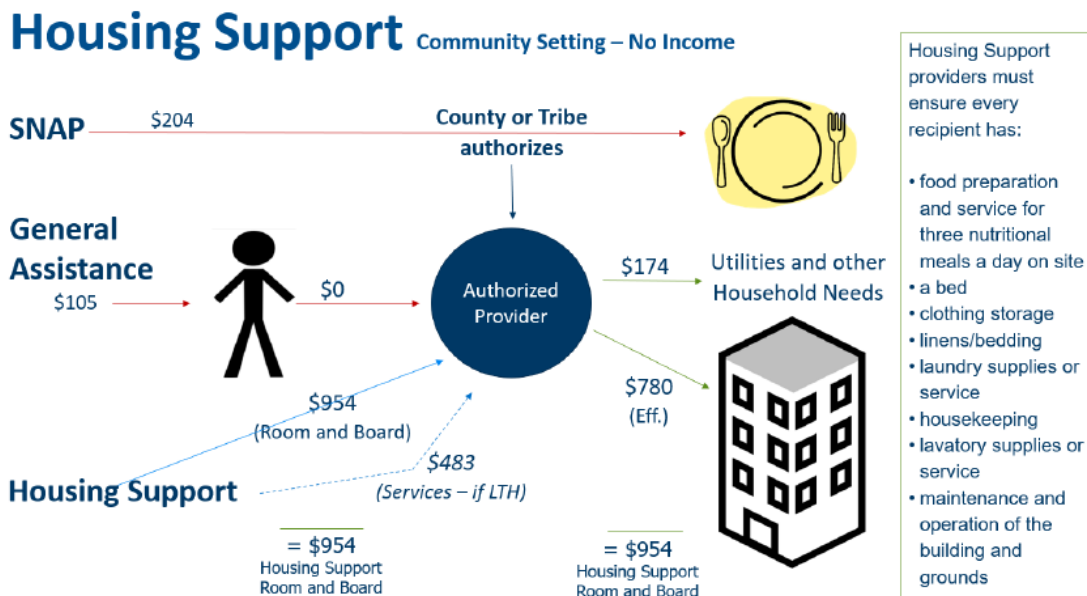


Figure 4. Housing Support community setting with Supplemental Service income (SSI)

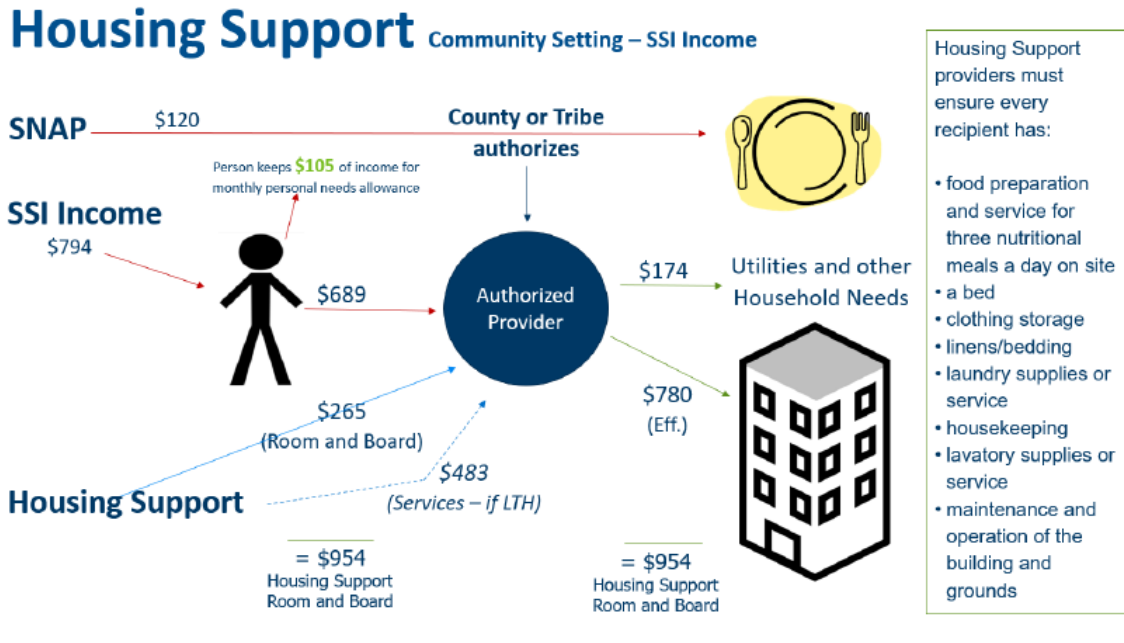


Figure 5. Housing Support Setting Characteristics Chart

Housing Support Setting Characteristics

Housing Support Setting Type (MAJOR VMD2 CODE - DHS or Health Dept License)	Group Setting	Community Setting	DHS License Required	MDH License Required	MDH Registration Required	Lease Required	Meals Provided	SNAP eligible	Habitability Inspection Required	Supplemental Service Rate (SSR) available? *	SSR using "Banked Beds"?
Adult Foster Care (04*)	X		x				X			No	N/A
Boarding Care Home (02**)	X			x			X			Maybe	No
Board and Lodge (04**)	X			x			X			No	N/A
Board and Lodge with Special Services (06**)	X			x	X		X			Maybe	If available
Hotel/Restaurant (05**)	X			x			X			Maybe	If available
Supervised Living Facility (03**)	X			x			X			Maybe	If available
Assisted Living (09**)	X			x			X			Maybe	If available
Supportive Housing - GENERAL (20**)		X				X		X	X	Maybe	If available
Supportive Housing - LTH (20**)		X				X		X	X	Yes	No
Metro Demonstration Project (08**)		X				X		X	X	Yes	No
Tribe Certified Housing - group (07**)	X						X			Maybe	If available
Tribe Certified Housing - independent living (07**)		X				X		X		Maybe	If available

* = DHS License Type on VMD2 panel; ** = MDH License Type on VMD2 panel
 * SSR is available if authorized in MN Statutes Chapter 256L.04 or 256L.05. Contact the Housing Support team at dhs.dhs.grh@state.mn.us with questions about authorization for use of Supplemental Service Rates.

In Isanti County, Housing Support Providers must have a Housing Support Agreement with the county.

Please note that having any of the following does not automatically qualify organizations to be a Housing Support provider in Hennepin County or to receive Housing Support funds

1. Licensure or meeting an approved setting from the state related to the provision of supportive services (PCA, 245D, Comprehensive Homecare, Medicaid Housing Stabilization Services, etc.).
2. A contract with the State of Minnesota to provide Home and Community Based Services/waivered services or with Hennepin County to provide assessment and case management as part of Community Based Services/waivered services.
3. Provision of supportive services to an individual who is eligible for Housing Support.

B. *New Provider Application Process*

The new provider application process consists of two phases, each with a variety of steps:

1. Housing Support Agreement Application
2. Housing and Referrals

A New Provider Checklist is included in Appendix A to help with keeping on track through the application process. Please note the following prior to submitting a new application:

- No payments are issued until there is a housing unit secured and Housing Support Agreement is signed.
- Once a Housing Support Agreement is executed, moving individuals into housing can be a lengthy process. Providers serving in a dual capacity role of both landlord and service provider should have a sustainability plan in place for when the facility is not fully occupied.

Phase 1: Housing Support Agreement Application

The Housing Support Agreement Application must be completed to start the contracting process. Providers must:

1. Obtain appropriate insurance;
 - a. Ensure sufficient Liability and Workers Compensation Insurance is in place meeting at least the levels indicated in the Isanti County Insurance Policy (Appendix C). Documentation proving Workers' Compensation Insurance coverage is required if the provider employs staff to assist in the provision of services.
2. Determine if any licenses or registrations may be required for proposed setting/facility. (i.e. DHS or Minnesota Department of Health);
3. Long Term Homelessness Providers Only: Obtain a Homeless Management Information System (HMIS) license through the [Institute of Community Alliances](#);

- a. Completion of an eight-hour online training is required.
 - b. A site license must be purchased for each user accessing HMIS, so it is best to identify the one person who will conduct the HMIS work for your program and have them do the training. Visit <https://www.hmismn.org/new-to-hmis/>. There is an annual cost per user.
 - c. All providers using HMIS will also need a [Provider Request Form](#), which can be requested from the Institute of Community Alliances.
 - d. Providers must attach proof of HMIS training completion and evidence that the provider has an active license.
 - e. Please note: it can take several days to complete all paperwork and the online HMIS training, so please plan accordingly.
4. Complete two, required online trainings through DHS: Housing Support Orientation and Vulnerable Adult Mandated Reporting.
 - a. Providers must attach certificates of completion/email certifying attendance for both trainings.
 5. Complete background checks through [NetStudy 2.0](#) on all providers, staff, volunteers, or anyone who has direct or unsupervised contact with Housing Support recipients and/or as defined in the Housing Support Agreement.
 - a. Receipts indicating submission of background check requests must be included with the Housing Support Agreement Application.
 - b. Clearance notices are required prior to approval of Housing Support Supportive Housing Unit.
 6. Submit completed Housing Support Agreement Application document with required documents (see table on next page) to Division Operations Supervisor.
 7. Upon approval from the Division Operations Supervisor, provider will sign Housing Support Agreement, Insurance/Indemnity Agreement, and Housing Support Provider Acknowledgment and Agreement of Policy & Procedures.

Required Documents for Housing Support Agreement Submit to Division Operations Supervisor

- List of residency restrictions that may result in eviction (may be in lease)
- HMIS Training Verification (LTH only)
- HMIS Site License (LTH only)
- Certificates of Completion/Attendance for DHS Trainings
- Staff qualifications (if identified already)
- NetStudy 2.0 notice of background check submission for all staff/volunteers with direct or unsupervised contact and/or access to private data on file
- Evidence of Workers' Compensation Coverage (if applicable)
- Insurance Certificate
- Liability Insurance Certificate
- Housing Support Agreement
- Insurance/Indemnity Agreement
- Housing Support Provider Acknowledgment and Agreement of Policies and Procedures

Required Documents for Each New Site Submit to Division Operations Supervisor

- Copy of current or proposed lease
- NetStudy 2.0 background check clearance notices of all relevant facility staff/volunteers
- Copy of submitted Isanti County Premise Form
- Vendor Profile Form
- Housing Support Agreement
- Other documentation as requested

PHASE 2: Housing and Referrals

Once all agreements are signed, the provider must be set up in the applicable payment systems before requesting referrals. Providers must:

1. Locate housing which matches the services/population to be served (as noted in the approved approval);
 - Zoning documentation and/or rental licenses required by the municipality must be sent to the Division Operations Supervisor, as well as any inspection reports.
 - **ICHHS conducts a Site Visit (Appendix B) for congregate and site-based settings prior to setting up new sites in payment systems.**
2. Contact [MN DHS Provider Enrollment](#) to become an Enrolled Provider. This needs to be in place in order to receive Housing Support Supplemental Services payments;
 - As of July 1, 2016, all Support Supplemental service providers are required to enroll with Minnesota Health Care Programs (MHCP). Enrollment is required so MHCP can issue providers a MN-ITS account so providers can bill for supplemental services in the future.
 - MHCP provides a Billing Lab for Housing Support supplemental service providers. We encourage these providers to attend a billing lab to learn:
 - How to navigate through the information on the website;
 - Who and where to call if there are questions;
 - The resources available to providers if they need assistance;
 - To understand and use all features of the MN-ITS account including:
 - Receiving authorization letters;
 - Receiving notifications and communications;
 - Submitting claims; and
 - Receiving remittance advice
 - To understand and read the claim numbers and remittance advice.

The information about the in-person lab or webinar sessions are available on the [MHCP Enrolled Provider Training](#) page. Register for the Billing Lab for Housing Support Supplemental Service providers. If you have any questions about your enrollment application or need assistance registering for a Billing Lab, please contact the Provider Call Center at (651) 431-2700 or (800) 366-5411.

3. Submit the Isanti County Premise Form (Appendix D) to the recipients identified on the form and provide a copy of the submitted documents to the Isanti County Licensor. This notifies law enforcement officials of the nature of your facility.
4. Work with ICA to determine the appropriate project type for HMIS (LTH only).
5. Submit the proposed lease that will be used for all individuals living in the housing unit to the Isanti County Licensor. For providers sub-leasing properties, provide a copy of the lease or the lease associated with the rented unit.
6. Complete the Residential Informational forms and submit to the Isanti County Licensor (this is included in the Application).
7. Upon approval from the Isanti County Licensor, the Licensor will submit all documents to the Division Operations Supervisor; the Division Operations Supervisor will then complete the Vendor Profile Form and will have the provider set up in applicable Housing Support payment systems.

All referrals to LTH Supportive Housing Programs are required to come through Lakes and Pines' Coordinated Entry System (CES). Individuals placed in LTH Supportive Housing settings without first going through CES are not funded by Isanti County Health and Human Services. Non-LTH Supportive Housing Programs are not required to go through the CES and can receive referrals through many different sources. Providers and people eligible for Housing Support both have a variety of steps which must be completed through the referrals process and after the person is housed. Additional steps regarding the referral process are outlined in Section IV – Referral and Transfer Process.

If providers do not comply with the Housing Support Agreement, including the quality control standards established through this Provider Manual, ICHHS can terminate the contract upon two calendar months' notice.

C. Renewing Housing Support Agreements

Each Housing Support provider enters into a Housing Support agreement with Isanti County that expired on June 30th of each year. Prior to the expiration of the current agreement, Isanti County will initiate a renewal process that contains the following documents:

1. Vendor Profiles: Each active vendor number a provider is utilizing has a profiled that contains all information regarding the site, the population served, Housing Support Rate, and Payee information.
2. Housing Support Agreement: Minnesota Department of Human Services requires that each provider sign an agreement with the agency who administers the Housing Support funds (Isanti County).
3. Isanti County Provider Requirements: In accordance with the Housing Support Agreement, Isanti County has created a Provider Manual (this manual) that outlines additional expectations of providers who utilize Housing Support funding.

Renewal packets start with providing vendor profiles for each active vendor number a provider has. After the profiles are reviewed, each provider is sent an electronic version of their Housing Support Agreement and Provider Requirements. Both the provider and Isanti County representatives sign the agreement with each receiving a fully executed copy. Housing Support packets are valid from July 1 through June 30th the following

year. All Housing Support rate changes are executed through legislation and will be announced prior to the renewal process being initiated.

SECTION V:

POLICIES AND PROCEDURES

V. Policies and Procedures

A. *POLICY DEVELOPMENT AND REVIEW*

Isanti County Health and Human Services' Housing Support Program provides a transparent policy development and review process for people participating in the Housing Support Supportive Services Program, providers, and community partners.

Authority: [Minnesota Statute, Chapter 256I](#)

Housing Support Agreement

Definitions:

Provider: an entity that receives the Housing Support payment and is responsible for collecting the participants' obligation toward their Housing Support amount when applicable and making sure the Housing Support funding is paid toward its intended purposes (i.e., rent, utilities, and services). The provider is also the entity that provides supplemental services, if applicable.

State fiscal year: the time period starting July 1 and ending June 30 the following year.

Procedures:

1. Isanti County Health and Human Services may add, delete, and amend policies at any time.
2. Suggestions for policy revision may be submitted to the Isanti County Licensor at any time.
3. Annual revisions of the Supportive Housing Program are initiated by the ICHHS' Housing Support team during the third quarter of the state fiscal year.
 - a. Identified concerns, areas of clarification, and policy recommendations are presented by the Isanti County Licensor to the Advisory Committee.
 - b. The Advisory Committee offers feedback and determines if changes should be made.
 - c. All policies and procedures receive final approval from the Division Operations Supervisor, Isanti County Attorney's Office, The Isanti County Board of Commissioners, and Isanti County Health and Human Services Division Leader.
4. Any new or amended policies are issued during the fourth quarter of the state fiscal year (April-June) and effective on the first day of the next state fiscal year (July 1).
 - a. If there are updates to the Provider Policy Manual, the ICHHS' Housing Support team will equip all current providers with the new manual.
 - b. Current service providers preparing renewal applications for the next state fiscal year are required to ensure applications, supporting documentation, and Housing Support services reflect any policy and procedure changes.
 - c. The Advisory Committee team will provide technical assistance to current and potential providers regarding policies and procedures.

B. INDIVIDUAL ELIGIBILITY AND PARTICIPATION

Isanti County Health and Human Services' (ICHHS) Housing Support Program outlines individual eligibility criteria for the Supportive Housing Program, as well as program participation requirements to access Housing Support funds.

Authority: [Minnesota Statute, Chapter 256I](#)
Housing Support Agreement

Definitions:

Landlord: The individual or property management corporation who is responsible for the housing unit associated with Housing Support payments. In some cases, the landlord may also be the provider.

Long-term Homeless (LTH): Continuously homeless (lacking a fixed, adequate night time residence) for the last year or 4 times in the last 3 years. Any period of institutionalization or incarceration are excluded when determining the length of time the household has been homeless (Minnesota Housing Finance Agency definition).

Provider: An entity that receives the Housing Support payment and is responsible for collecting the participants' obligation toward their Housing Support amount when applicable and making sure the Housing Support funding is paid toward its intended purposes (i.e., rent, utilities, and services). The provider is also the entity that provides supplemental services, if applicable.

Receipt: A document provided by the CES coordinator confirming the referral was made from the CES priority lease.

Supportive Housing: Housing that is not time-limited and provides or coordinates services necessary for a resident to maintain housing stability (Minnesota Statute. 256.03, Subd. 15).

Procedures:

1. Individuals interested in the Supportive Housing Program must meet financial assistance and long-term homeless eligibility requirements to participate in the Supportive Housing Program.
 - a. General individual eligibility for Housing Support is determined by the Isanti County Health and Human Services Financial Assistance Unit and is based on income, assets, and disability. Eligible individuals must:
 - i. Be an adult age 65 or older, or an adult age 18 or older with a certified disability or disabling condition that prevents work to the level of self-support.
 - ii. Meet a basis of eligibility for either General Assistance (GA) or Social Security Insurance (SSI).
 - iii. Countable income must be less than maximum benefit.

- iv. Countable assets must be within the asset limit.
 - v. Complete a [Combined Application Form](#) (CAF) for a cash program.
 - vi. Meet residency requirements to receive financial benefits.
- b. For the Housing Support Long-Term Homeless Program, additional eligibility requirements include:
- i. Meet the Minnesota Housing Finance Agency's definition of long-term homeless.
 - 1. Providers must complete the [Minnesota Housing Long Term Homeless Verification Form](#) with the individual to show proof of eligibility for the Housing Support Long Term Homeless Program.
 - 2. Minnesota Housing Long Term Homeless Verification Forms not completed with a good faith effort are returned to the provider and may result in payment processing delays for individuals currently in Housing Support settings.
 - ii. Have evidence of a disability or disabling condition is established in a [Professional Statement of Need Form \(DHS-7122\)](#) or [Request for Medical Opinion \(DHS-2114\)](#).
 - 1. A qualified professional or county designee completes the [Professional Statement of Need Form](#) to authorize payments for Housing Support supplemental services, and establish an existing disabling condition for a General Assistance/Housing Support basis of eligibility. **Professional Statement of Need forms are required for Supplemental Service Rate authorization.**
 - iii. Have a signed Habitability Inspection (Appendix E) of the unit.
 - 1. A Habitability Inspection is required with all applications for LTH Housing Supports that are set to Isanti County's Eligibility Worker.
 - 2. The provider may complete the Habitability Inspection form. However, if a county inspection takes place and the Habitability Inspection Form was completed incorrectly, a meeting will be scheduled with Isanti County Licensor and provider to discuss corrective action.
2. Once accepted into any Supportive Housing Program, participating individuals must also:
- a. Sign a lease agreement with the landlord that outlines the responsibilities of the tenant and responsibilities of the landlord;
 - b. Participate in the creation of a housing plan (see Section IV – Minimum Supplemental Service Rate Standards); and

- c. Meet with the provider, in person, at least once a month of a housing unit inspection and/or housing plan meeting.
3. Individuals cannot be required by the housing provider to pass a criminal background check.
4. For individuals receiving Housing Support supplemental services, compliance with the housing plan is not required for obtaining or maintaining housing offered through the Supportive Housing Program.
5. Individuals accepted into the Supportive Housing Program may request to transfer to another Supportive Housing Program at any time (see Referrals & Transfer Policy).

C. PROVIDER REQUIREMENTS

Isanti County Health and Human Services' Housing Support-Supportive Housing Program, utilizes "Housing First" and "Harm Reduction" philosophies when determining an individual's eligibility and program participation requirements to access Housing Support funds. The Supportive Housing Program provides expectations for providers to ensure quality programming which complies with state statute, county expectations, and avoids conflicts of interest.

Authority: [Minnesota Statute, Chapter 256I](#)

[Minnesota Statute, Section 245A.02](#)

[Minnesota Statute, Section 245C](#)

Housing Support Agreement

Definitions:

Conflict of Interest: Any situation which causes an individual or organization to experience a real or perceived struggle between diverging interests, points of view, or allegiances, or a situation in which a person is in a position of derive personal benefit from actions or decisions made in their official capacity.

Direct Contact: Providing face-to-face care, training, supervision, counseling, consultation, or medication assistance with individuals, who have unsupervised access to individuals, their personal property, or their private data.

Dual Relationship: A relationship where the professional (including but not limited to: manager, staff member, or volunteer) assumes a second role with a client, such as a friend, employer, business associate, or sexual partner.

Harm Reduction: A set of practical strategies and ideas aimed at reducing negative consequences associated with alcohol or drug use. Harm reduction strategies are individualized, designed to meet people where they are at, and work to minimize – not eliminate – the harmful effects of substance use on the individual and community in which they live.

Housing First: Housing First is an approach to quickly and successfully connect individuals and families experiencing homelessness to permanent housing without preconditions and barriers to entry, such as sobriety, treatment or service participation requirements. Supportive services are offered to maximize housing stability and prevent returns to homelessness as opposed to requiring the individual to complete treatment goals as a condition of housing entry.

Homeless Management Information System (HMIS): A local information technology system used to collect private data and data on the provision of housing and services to homeless individuals and families and persons at risk of homelessness. Each Continuum of Care is responsible for selecting an HMIS software solution that complies with HUD's data collection, management, and reporting standards, which in Isanti County is the Institute for Community Alliances (ICA).

Provider: An entity that receives the Housing Support payment and is responsible for collecting the participants' obligation toward their Housing Support amount when applicable and making sure the Housing Support funding is paid toward its intended purposes (i.e., rent, utilities, and services). The provider is also the entity that provides supplemental services, if applicable.

Receipt: A document provided by the CES coordinator confirming the referral was made from the CES priority list.

Procedures:

1. Providers must meet the following minimum staffing qualifications;

a. All staff who have direct contact with individuals in the Supportive Housing Program and do not also operate under another license, must meet or exceed the following staff qualification requirements, and provide documentation to Isanti County, when requested:

i. Have skills and knowledge acquired through at least one of the following:

1. A course of study in a health or human services-related field leading to a bachelor of arts, bachelor of science, or associate's degree; or
2. One year experience with the target population served (can include being a member of the target population served); or
3. Experience as a Minnesota Department of Human Services certified peer specialist according to Minnesota Statutes section 256B.0615; or
4. Meets requirements of unlicensed personnel under Minnesota Statutes section 144A.43 to 144A.483.

ii. Hold a current driver's license appropriate to the vehicle used if transporting recipients of Housing Support.

iii. Complete a vulnerable adult mandated reporter training as offered by DHS (required before requesting referrals).

iv. Completion of Housing Support Orientation training when offered by DHS (required before requesting referrals).

b. Background checks are required for all service owners, controlling and managerial officials, and employees and volunteers who have direct or unsupervised contact with individuals and/or handle an individual's private data (see Minn. Stat. 245A.02 for definitions).

2. Isanti County requires additional provider eligibility standards above the minimum qualifications set forth in statute, including but not limited to:

- a. Providing proof to the Housing Support Program that the service provider maintains registered sites for all Housing Support projects with at least one active site user in the Homeless Management Information System (HMIS) prior to receiving referrals (LTH only).
- b. The provider must have demonstrated knowledge of homeless outreach, housing navigation, and tenant education/advocacy.
- c. Commitment to excellence as demonstrated by willingness to actively participate in Isanti County Health and Human Services' Housing Support Program's quality control program.

3. Providers receiving funds from the Supportive Housing Program must:

- d. Maintain all necessary licenses through the appropriate licensing authorities. If a provider has licensures issued through state boards for behavioral health services; the provider must be in good standing with the respective licensing board;
- e. Participate in the HMIS, including but not limited to, maintaining annual site license per site, completing all HMIS training requirements, and accurately entering data. Providers must supply the Homeless and Housing Program Specialist with monthly data reports for the previous month's program activity by the 15th of the following month (LTH only) to the Lakes and Pines' Coordinated Entry System;
- f. Participate in, and receive referrals from, the Isanti County Coordinated Entry System (CES) process and retain receipts of referral through the CES in individual files (LTH only);
- g. Participate in the ICHHS protocols, including but not limited to, maintaining annual site license per site, completing all ICHHS training requirements, and accurately entering data;
- h. Ensure clean, safe, and healthy housing units (see Section IV – Safe and Healthy Housing);
- i. Ensure all paperwork required to be completed by the provider is done accurately and completely, while also avoiding an actual or perceived conflict of interest, including but not limited to the following prohibitions for providers serving in a dual role as a landlord:
 - i. Cannot complete Professional Statement of Need (PSN) as to an individual's disabling condition; and
 - ii. Cannot serve as an authorized representative for an individual's financial assistance case if the person supported is capable of managing their financial assistance case.
- j. Provide a list of residency requirements that include violations which could result in eviction (this may be included in the lease, or a separate set of house rules referenced in the lease);

- k. Maintain a signed lease agreement between the individual participating in the Supportive Housing Program and a landlord which outlines the responsibilities of the tenant and the responsibilities of the landlord;
- l. Post the approved complaint resolution process in an area easily accessible to individuals participating in the Supportive Housing Program, and/or provide the compliant resolution process to the individual.
- m. Participate in any/all compliant resolution with the Supportive Housing Program.
- n. Check in with the individual at least monthly and document these meetings in case notes:
 - i. Providers must be available to address emergency issues on a twenty-four hour basis.
 - ii. Providers are responsible for ensuring their contract information is posted in a shared location.
 - iii. Providers are responsible to ensure that individuals have the means to contact them should needs arise between check-ins for issues requiring provider attention.
- o. Create a housing plan with individuals receiving the supplemental service rate addressing service requirements and maintain case notes related to supplemental service delivery (see Section IV – Minimum Supplemental Service Rate Standards).
- p. Maintain a list of agencies through which non-long term homelessness Supportive Housing Program participants are receiving service provision or coordination to maintain their housing stability.
- q. Create and retain accurate, current, and complete documentation of interactions with individuals receiving services along with individual housing plans. All documentation needs to be kept on file in a manner of the provider's choosing and made available for Isanti county staff review upon request.
- r. Provide individuals with a list of their rights regarding their care, program participation, and data privacy. This list must also be posted in a central location at all times (Appendix I).
- s. Inform the Isanti County Licensor of any adverse events involving Supportive Housing recipients, including recipient death or serious injury, within twenty-four hours of being notified of the event (may be via phone or e-mail). Overdoses must be reported as a serious injury.
- t. Report recipient move in, move out, and absence days as requested by Isanti County, as well as providing a Discharge Notice (Appendix F) to the Licensor within 72 hours of the individual vacating the premises.
- u. If an overpayment is identified by the provider or Isanti County, the overpayment but be paid back as requested by Isanti County.

- v. Immediately refer individuals to another Supportive Housing Program setting for continuity of care and assist with transition planning (as requested by the individual) should the provider's Housing Support Agreement be terminated.
- w. Comply with all provisions outlined in the Housing Support Agreement.
- x. Comply with all policies, procedures, interim compliance announcements, as well as service and documentation standards as set forth within the Supportive Housing Program Provider Manual (see Appendix C). If a provider's noncompliance results in suspended Housing Support payments, providers must hold Housing Support recipients harmless.
- y. Notify the Isanti County Licensur when indefinitely closing housing site or facility.
- z. Approach individual participation from a person-centered, Harm Reduction, and Housing first perspective; and
 - i. Criminal background checks cannot be required for entrance into housing and/or the Supportive Housing Program.
 - ii. Providers must develop Supportive Housing Programs which are person-centered and with consideration given to Isanti County Health and Human Services' for Housing Support Programs (Section II).
 - iii. Providers are prohibited from asking an individual in their care to assume a paid or unpaid property or program management role (includes bartering the individual's time/work/effort for anything with monetary value).
- aa. Notify the Isanti County Licensur within 24 hours from being serviced with eviction paperwork if the provider leases the building from a separate entity or if utilities will be shut off due to non-payment. If utility service is disrupted to the extent that Housing Support recipients' safety and welfare may be in jeopardy, notification must be made to Isanti County Health and Human Services within 24 hours of the disruption.
- bb. Develop a code of ethics/conduct for their Supportive Housing program which includes a statement strictly prohibiting dual relationships between staff/volunteers and Housing Support recipients.
 - i. The code may be included in an employee manual for each location served by the Supportive Housing Program provider. All individuals employed by, or volunteering with, the Supportive Housing Program must sign an acknowledgement of Supportive Housing Program's code of ethics/conduct on an annual basis.
 - ii. Exploitation occurring through dual relationships, including sexual relationships between staff/volunteers and Housing Support recipients, must be reported through the Minnesota Adult Abuse Reporting Center (MAARC).

D. REFERRAL AND TRANSFER PROCESS

Isanti County Health and Human Services Housing Support-Supportive Housing Program provides a process to guide referrals to move eligible individuals into housing of their choice.

Authority: [Minnesota Statute, Chapter 256I](#)

Housing Support Agreement

Definitions:

Housing navigator: an individual who assists an individual with completion of paperwork to secure housing.

Provider: An entity that receives the Housing Support payment and is responsible for collecting the participants' obligation toward their Housing Support amount when applicable and making sure the Housing Support funding is paid toward its intended purposes (i.e., rent, utilities, and services). The provider is also the entity that provides supplemental services, if applicable.

Procedures

Non-LTH Supportive Housing Program

1. Individuals may be referred to non-Long term Homeless (LTH) Supportive Housing Programs through a variety of referral mechanisms.

LTH Supportive Housing Program

1. Individuals who are experiencing homelessness, are LTH, or at risk of homelessness contact Lakes and Pines, the entry point for Isanti County's Coordinated Entry System (CES).
 - a. Providers, housing navigators, and outreach specialists may also refer eligible individuals to Lakes and Pines.
 - b. Individuals asking questions about Housing Support or types of facilities accepting Housing Support dollars may be to Lakes and Pines to complete a brief assessment of the individual's needs and risks.
3. Lakes and Pines completes a pre-screen for homelessness to determine if the individual needs a Vulnerability Index-Service Prioritization Decision Assistance Tool (VI-SPDAT) to assess for housing and stability needs.
 - a. If the individual is determined to be homeless through the pre-screen process, Lakes and Pines complete a VI-SPDAT.
 - b. After the VI-SPDAT is completed, a score is generated which communicates the level of barriers the individual has when trying to access housing. Individuals considered most

appropriate for the LTH Supportive Housing Program have CI-SPADT scores between 12 and 8. Higher scores may be considered for scattered-site programs.

- c. If the individual consents, their intake information and VI-SPDAT score are placed on the CES priority list. **Placement on the CES priority list is required for LTH Supportive Housing Program participants.**
3. LTH Supportive Housing Program providers or housing navigators connecting Housing Support eligible individuals to housing may contact the regional CES coordinator to request referrals.
 - a. LTH Supportive Housing Program providers must use the formal process developed by Lakes and Pines Board to request referrals.
 - b. If there are eligible individuals awaiting housing, the regional CES coordinator provides between one and three names for the provider to contact based on LTH Supportive Housing Program criteria and provider-identified preferences.
 1. The provider must contact the first person on the list. Providers must attempt contract three times over a period of 10 days. If after 10 days the first person declined housing or did not respond, the provider may move onto the next person on the list.
 - a. A person’s nonresponse or decision to decline housing offered must be documented.
 - b. Providers are prohibited from “cherry picking” from the referral list provided.
 2. If the individual and provider agree to enter into a housing agreement through the LTH Supportive Housing Program, the provider must notify the regional CES coordinator and obtain a Coordinated Entry receipt.
 - a. The Coordinated Entry Receipt provides verification that the referral came through the CES as required. The receipt should include the individual’s name, VI-SPDAT score, referral date, and provider name.
 - b. Providers are responsible for providing verification of the VI-SPDAT to Isanti County upon request.

All Supportive Housing Programs

1. Once an individual and Housing Support-Supportive Housing Program provider enter into a lease, the individual must complete a Combined Application Form (CAF) (see Appendix J – New Participant Checklist) and may be required to complete an interview with an Isanti County Health and Human Services’ Eligibility Worker.
 - a. A housing navigator may assist the individual with completing the CAF, if requested.

- b. If there is no housing navigator involvement, providers receiving the supplemental service rate (SSR) must assist the individual with paperwork requirements.
- c. Isanti County Health and Human Services has 30 days from the date the county receives the complete application (signed, dated, and all questions answered) to process cash benefits and Housing Support. Delays in providing required or requested verifications or documentation that cause the process to take more than 30 days results in the application's denial and the individual being required to re-start the application process.

2. Eligibility Workers:

- a. Copy the individual's identification documents;
- b. Complete an interview with the individual based on the CAF, where SNAP and other assistance program eligibility is discussed;
- c. Review requirements for medical coverage, which is obtained through a separate application;
- d. Discuss applications and agreements which must be signed if an individual is receiving general assistance (GA) but does not have other maintenance benefits (i.e., SSI, RSDI, VA, or unemployment); and
- e. Discuss any verifications required to process the application.

3. Providers are required to obtain and/or complete the following documents for each new individual entering a housing unit. Copies must be submitted to the assigned Eligibility Worker and maintained in the provider's recordkeeping system.

- a. Habitability Inspection Form;
- b. [Professional Statement of Need Form](#) or [Request for Medical Opinion](#);
- c. Authorization of Release of Information about Residence and Shelter Expense (DHS-2243A);
- d. Any additional verifications requested by Eligibility Workers; and
- e. A record of the individual's service provider or coordinator.

4. When the CAF and Housing Support payments are processed:

- a. General Assistance (GA) is placed on an EBT card. Eligibility Workers assist the individual in securing an EBT card.
- b. Housing Support is paid to the provider (see Section IV – Housing Support Funds Management).

5. Housing Support funds cannot be processed unless the individual is already in the housing unit eligible for housing rate (Rate 1, room and board) payments. If an individual is found to be not eligible for

Housing Support when the application is processed, the individual shall be held harmless by the provider.

6. Eligibility Services requires periodic reviews with the individual regarding their continued eligibility for Housing Support funding.
7. Providers are responsible for ensuring all paperwork required for financial assistance and Housing Support dollars are completed and current at all times, as well as notifying the Eligibility Worker:
 - a. Within 10 days of an individual's residency changes.
 - b. Of any/all changes related to an individual's financial assistance to prevent overpayment or underpayment of benefits; and
 - c. Within 72 hours if an individual discharges from the provider's Housing Support-Supportive Housing Program.
8. If an individual has earned income and contributes toward the rent payment, providers must have a plan with individual to collect this money. Individuals who also work are subject to income reporting requirements every six months, or any time income changes.
9. Once the individual is housed, the provider is responsible to ensure housing rate (room and board) and support services (supplemental services) are provided pursuant to the Housing Support Provider Manual.
10. Once original eligibility requirements are satisfied and an individual is accepted into a Supportive Housing Program, the individual may request to transfer to another Supportive Housing Program.
 - a. An individual is not required to provide a reason for seeking to transfer to another provider but must provide adequate notice as outlined in the lease agreement.
 - b. The existing service provider must assist with coordination of services to a new provider. The potential provider is not required to accept the transfer.
 - c. A release of information must be signed between providers during a transfer. The existing provider must send the potential provider a copy of the original CES receipt, LTH Verification Form, and Professional Statement of Need. The existing provider must also submit a Discharge Notice to Isanti County Health and Human Services (*see Appendix F*), as well as reflect the transfer in HMIS.
 - d. The provider accepting the referral must complete a Shelter Form, a Habitability Inspection, complete the transfer in HMIS, and complete intake paperwork as would be required of any new admission.
 - e. Both providers must complete a case note documenting the referral process.

E. SAFE AND HEALTHY HOUSING

Isanti County Health and Human Services' Housing Support-Supportive Housing Program requires that individuals receiving Housing Support dollars reside in housing units which are physically safe, clean, dignified, and healthy.

Authority: [Minnesota Statute, Chapter 256I](#)

Housing Support Agreement

Definitions:

Congregate: a housing setting wherein more than one person resides in the housing unit and shares living space.

Providers: an entity that receives the Housing Support payment and is responsible for collecting the participants' obligation toward their Housing Support amount, when applicable, and making sure the Housing Support funding is paid towards its intended purposes (i.e., rent, utilities, and services). The provider is also the entity that provides supplemental services, if applicable.

Scattered-site: a housing setting wherein only one household resides in the housing unit.

Site-based: a housing setting wherein individually approved units are located within the same building (may also be referred to as project-based).

Procedures:

1. The Minnesota Department of Human Services establishes a "housing rate" (Rate 1) for room and board July 1 of each year. Room and board covers costs such as:
 - a. Rent, utilities, household needs, and other costs to provide room and board.
 - b. In community settings, payments must only be paid for individuals who have a lease and the option to prepare their own meals;
 - c. A bed, clothing storage, linen, bedding, laundering, and laundry supplies or service;
 - d. Housekeeping, including cleaning and lavatory supplies or service;
 - e. Maintenance and operation of the building and grounds, including heat, water, garbage removal, electricity, telephone for the site, cooling, supplies, and parts and tools to repair and maintain equipment and facilities.
2. Providers complete a Habitability Inspection (*Appendix E*) for each new individual housed and retain a copy of both in the individual's record.

3. The housing rate cannot be used to pay for supplemental services, clothing, or medical costs.
4. The housing rate may be used to cover the cost of replacement keys.
5. Providers must be able to provide an accounting of housing rate services upon request to Isanti County Health and Human Services.
6. Providers must ensure that utilities are operational at all times and communal areas (external/internal) are clean and free from any potential health and safety hazards.
7. Providers operating a congregate site, where more than one person resides in the housing unit (i.e., house or apartment) with shared living space must provide a landline which all individuals served may access at any time.
8. Providers are responsible for snow removal and lawn maintenance. Individuals served may assist with these tasks on a voluntary basis, but it is not the individual's responsibility to ensure snow removal and lawn maintenance occur and any compensation for assisting is prohibited.
9. Providers must ensure that all items provided through the housing rate are free from disrepair, replaced prior to the item's failure, or for consumable items (i.e., toileting and laundry supplies), an adequate supply remains in the housing unit at all times. Individuals receiving Housing Support are not responsible for repairs to the housing unit but are responsible for notifying landlords of needed repairs.
10. Individuals in Housing Support settings are required to have a private bedroom within the housing unit. Couples may share rooms.
11. Providers are required to complete a monthly inspection of the housing unit with the person served.
 - a. Individuals are provided feedback as to the cleanliness of the unit and are expected to follow-up on feedback to ensure units are clean and safe.
 - b. Providers must provide education and assistance if the person is unsure of how to maintain the housing unit or if the person cannot reasonably address cleanliness concerns.
 - c. Providers must follow-up with landlords and/or property managers within 24 hours of the inspection to notify them of any repairs required that may result in safety concerns.
12. Providers must hold a housing unit temporarily unoccupied by a given Supportive Housing individual experiencing a crisis for 18 consecutive days in one month's time (no more than 60 days in one year) to allow for the individual to return to safe and stable housing.
13. Any complaints forwarded to the Isanti County Health and Human Services' Supportive Housing Program from local cities/towns/municipalities regarding housing quality are reviewed by the Isanti County Health and Human Services' team.

14. If an individual has a history of intravenous drug use, or uses injectable medications, providers must discuss harm reduction strategies such as clean needles, biohazard containers, and the provision of naloxone kits/training.
15. Providers operating congregate settings must create an emergency response plan for the physical site. The emergency response plan must be reviewed with all new residents upon intake and annually thereafter. It must also be posted in an area where all residents can view it at any time.

F. *MINIMUM SUPPLEMENTAL SERVICE RATE (SSR) STANDARDS*

Isanti County Health and Human Services' Housing Support-Supportive Housing Program provides minimum service standards for those clients receiving the Supplemental Services Rate (SSR) in eligible programs and settings. All Long-term Homeless Supportive Housing Programs receive the SSR. Non-LTH Supportive Housing Programs may receive the SSR if given authorization to do so from Isanti County Health and Human Services.

Authority: [Minnesota Statute, Chapter 256I](#)

Housing Support Agreement

Definitions:

Providers: An entity that receives the Housing Support payment and is responsible for collecting the participants' obligation toward their Housing Support amount when applicable and making sure the Housing Support funding paid toward its intended purposes (i.e., rent, utilities, and services). The provider is also the entity that provides supplemental services, if applicable.

Procedures:

1. The Department of Human Services requires that the Housing Support Supplemental Service Rate (SSR) includes the following minimum necessary services related to:
 - a. Assistance with transportation;
 - b. Arranging meetings and appointments;
 - c. Arranging medical and social services;
 - d. Medication reminders;
 - e. Up to 24-hour supervision; and
 - f. Provide, or refer individuals to, tenancy services or supports identified in the Professional Statement of Need.
2. Isanti County Health and Human Services requires that for individuals in the Supportive Housing Program, the following non-exhaustive list of services as well, outlined in a housing plan:
 - a. Help to find and apply for housing;
 - b. Tenant advocacy during landlord negotiation;
 - c. Assist individual with understanding of their lease;
 - d. Be available if problems arise with landlords, neighbors, etc.; and
 - e. Help to ensure community integration.
3. Providers receiving Supplemental Service Rate are required to:
 - a. Complete monthly, in-person, one-on-one check-ins with each individual receiving services where:
 - i. The housing plan is reviewed and progress toward goals is discussed;

- ii. Basic need fulfillment is discussed, including but not limited to: transportation, meeting/appointment arrangements, medical and/or social service needs, and if medication is taken as prescribed; and
 - iii. An inspection of the living area occurs to ensure the client is safe and the housing unit healthy.
 - b. Complete and/or attempt bi-weekly check-ins via agreed upon communication methods. The monthly in-person check-in can count as one of the bi-weekly check-ins;
 - c. Mediate concerns/issues/disagreements between individuals receiving services and themselves, and with their neighbors, if necessary;
 - d. Ensure that clients have the means to contact providers should needs arise between check-ins for issues requiring provider attention. Providers must be available to address emergency issues on a 24 hour basis;
 - e. Make appropriate referrals, with client consent, to county agencies and/or community providers to address issues that rise above the expertise of the provider managing the housing plan; and
 - f. Develop and implement an approved transition plan with individuals who are leaving the housing unit where they are currently staying.
4. Individuals receiving the SSR are not required to comply with the housing plan in order to maintain housing.
5. All providers offering supplemental services must maintain case notes with, at a minimum, date and description of services provided to individual recipients (see *Section X – Documentation Requirements and Standards*).
6. Non-LTH Supportive Housing Program providers who assist individuals through the SSR before transitioning to a different service provider must maintain both case notes as required by the SSR, document the date of service change, and keep a record of the active service provider.

G. FOOD QUALITY AND PREPARATION

Isanti County Health and Human Services' Housing Support-Supportive Housing Program (HS-SH) requires that individuals receiving Housing Support dollars receive access to nutritious food options that provide for the individual's well-being.

Authority: [Minnesota Statute, Chapter 256I](#)

Housing Support Agreement

Definitions:

Providers: An entity that receives the Housing Support payment and is responsible for collecting the participants' obligation toward their Housing Support amount when applicable and making sure the Housing Support funding is paid toward its intended purposes (i.e., rent, utilities, and services). The provider is also the entity that provides supplemental services, if applicable.

Procedures:

1. In community settings, Housing Support payment must only be paid for individuals who have a lease and the option to prepare their own meals.
 - a. Providers ensure clients have transportation to and from a grocery store or market to purchase nutritious food.
 - b. Individuals must be able to select foods of their choosing.
 - c. Individuals must be provided with cooking and eating utensils to prepare and consume meals.
 - d. If an individual no longer receives SNAP benefits, or experiences in a delay receiving SNAP benefits for any reason, a portion of the housing rate may be allocated to food purchases.
 - e. If an individual is disqualified from the SNAP program, the Supportive Housing Program provider must continue to ensure the provision of three meals per day. The status of an individual's SNAP eligibility cannot be a determining factor when considering admission to a Supportive Housing program.
2. Providers are responsible for ensuring that a portion of the housing rate is spent each month on food for each individual if the individual does not receive SNAP benefits.
 - a. The amount required to be spent on food may or may not change each year. This amount is based on determinations from the [United States Department of Agriculture's Food and Nutritional Service](#).

- b. Providers may be required to provide documentation upon request from Isanti County Health and Human Services' and/or DHS to prove food purchases made through the housing rate satisfies SNAP requirements.
3. Providers must notify the individual of their ability to apply for SNAP benefits upon discharge and maintain documentation that verifies the individual received this notification.

H. HOUSING SUPPORT FUNDS MANAGEMENT

Isanti County Health and Human Services Housing Support-Supportive Housing Program (HS-SH) requires providers to responsibly manage, and report on, public dollars received through the Housing Support Program.

Authority: [Minnesota Statute, Chapter 256I](#)

Housing Support Agreement

Definitions:

Provider: An entity that receives the Housing Support payment and is responsible for collecting the participants' obligation toward their Housing Support amount, when applicable, and making sure the Housing Support funding is paid toward its intended purposes (i.e., rent, utilities, and services). The provider is also the entity that provides supplemental services, if applicable.

Procedures:

1. As the servicer of an eligible individual's case, Isanti County Health and Human Services pays Housing Support benefits. Payments may be paid in two ways:
 - a. **Pre-payments:** Issued at the beginning of the month for individuals eligible for Housing Support.
 - b. **Post-payments:** Issued at the end of the month for individuals eligible for Housing Support. Post-payments must be issued when an individual's placement in a Housing Support setting is expected to last 30 days or less.
2. Providers authorized to provide supplemental services per the Housing Support Agreement cannot use the supplemental service rate (SSR) to pay for anything listed in the housing rate.
3. Providers are prohibited from limiting or restricting the number of hours a person is employed or excluding a person due to their employment status.
4. Isanti County Health and Human Services may conduct an audit of Housing Support funds at any time.
5. Providers must supply the Licensor **and** the individual's Eligibility Worker with a Discharge Notice (*Appendix F*) within 72 hours of the individual vacating the provider's HS-SH Program.
6. If an overpayment is identified by the provider and/or Isanti County Health and Human Services, the provider agrees to pay back the amount of the overpayment in terms negotiated by Isanti County Health and Human Services' Eligibility Worker.
7. If an overpayment is not satisfied, or billing practices appear questionable, Isanti County Health and Human Services forwards the case to DHS for investigation of fraud and/or the County Attorney for review.

I. RECORDS, DATA PRIVACY, AND CONFIDENTIALITY

Isanti County Health and Human Services' Housing Support-Supportive Housing Program (HS-SH) requires providers and community partners to safeguard the private data of individuals served, as well as takes active measures to protect confidentiality.

Authority: [Minnesota Statute, Chapter 256I](#)

Housing Support Agreement

Definitions:

Private Data: Data on individuals that is not public but accessible to individual subjects of the data.

Provider: An entity that receives the Housing Support payment and is responsible for collecting the participants' obligation toward their Housing Support amount, when applicable, and making sure the Housing Support funding is paid toward its intended purposes (i.e., rent, utilities, and services). The provider is also the entity that provides supplemental services, if applicable.

Public Data: Data accessible by anyone.

Procedures:

1. Providers are required to comply with all state and federal data privacy laws.
2. Providers must develop a data privacy/client confidentiality policy, as well as forms/processes to protect data privacy and manage releases of information.
3. Individuals must be provided with a copy of their data privacy rights at the time of admission into the provider's HS-SH program, and it must be reviewed with the individual.
4. Individuals must sign an acknowledgement that the data privacy policy and rights were received. The signed acknowledgment must remain in the provider's record keeping system.
5. All records regarding Housing Support recipients must be maintained for five years from the date of discharge or termination.
6. Any correction made to a Housing Support recipient record must be completed with a single strikethrough the error, the correction, initials of the person correcting the record, and the date of the correction.

J. COMPLAINT RESOLUTION PROCESS

Isanti County Health and Human Services' Supportive Housing Program establishes a complaint resolution process to ensure the timely resolution of issues between people served by HS-SH program and providers.

Authority: [Minnesota Statute, Chapter 256I](#)

Housing Support Agreement

Definitions:

Complaint: A statement that a situation is unsatisfactory or unacceptable.

Provider: An entity that receives the Housing Support payment and is responsible for collecting the participants' obligation toward their Housing Support amount when applicable and making sure the Housing Support funding is paid toward its intended purposes (i.e., rent, utilities, and services). The provider is also the entity that provides supplemental services, if applicable.

Resolution: The action of solving a problem, dispute, or contentious matter.

Procedures:

1. Individuals must receive information about the complaint resolution process from the provider upon intake into the Supportive Housing Program, as well as sign an acknowledgement of the complaint resolution process.
2. Providers who currently have a complaint resolution or grievance process may request to utilize it instead of, or in conjunction with, the process outlined in Procedures 3 – 6 below.
3. Individuals are encouraged to first bring complaints or areas of concern directly to the provider, as soon as possible. Individuals may also report concerns to the Isanti County Health and Human Services' Housing Support Program via email, telephone, or in-person contact.
 - a. Providers must respond to, or otherwise follow-up on, the complaint or area of concern, within 72 hours. To follow up, providers:
 - i. Meet with the individual with the complaint;
 - ii. Obtain more information regarding the complaint;
 - iii. Discuss possible resolutions with the individual;
 - iv. Agree on a plan for resolving same/similar complaints moving forward; and

- v. Issue a Complaint Resolution Report (*Appendix G*) to the individual, detailing the nature of the complaint, date it was received, date of meeting with the individual, and identified resolution.
 - 1. The individual and provider must sign the written response. If the individual refuses to sign, the provider writes “refused to sign” on the appropriate signature line and initials/dates the line.
 - 2. A copy of the complaint resolution must be retained in the provider’s file keeping system.
 - b. All complaints must have an action plan identified within ten business days from the date the complaint was received.
4. After a Complaint Resolution Report is issued for a specific concern, any subsequent complaints from an individual(s) in the identified Housing Support program must again bring the issue directly to the provider or as agreed upon in the previous Complaint Resolution Report.
- a. If the individual(s) do (does) not feel comfortable bringing the concern to the attention of the provider, they may notify the Isanti County Licensor. The Isanti County Licensor:
 - i. May re-direct the individual back to the provider to resolve the issue at the lowest level and follow Procedure 3.A above.
 - ii. May investigate the complaint and initiate a mediation session with the Provider and individual with the complaint following Procedure 3.A above.
 - b. The Isanti County Licensor authors the Complaint Resolution Report. The individual, provider, Isanti County Licensor and the Division Operations Supervisor sign the report. Copies are issued to the provider and individual. The provider copy is retained in the provider’s record keeping system.
 - c. The Isanti County Licensor may implement a program improvement plan (see *Section XI – Compliance Actions*) for lack of responsivity relating to complaints from people in their care.
5. Individuals with complaints or concerns about their tenancy rights may also contact their regional Legal Aid office for consultation.
6. Providers are prohibited from retaliating against a person served who reports a complaint internally or externally. Providers issuing a notice to vacate within enough proximity to the date of a Housing Support recipient’s complaint that a reasonable person would consider it retaliatory may be subject to a compliance action (see *Section IV – Compliance and Quality Assurance*).

K. NOTICE TO VACATE PROCESS

Isanti County Health and Human Services' Supportive Housing Program establishes a notice to vacate policy for dual-role providers and outlines a process which aims to preserve both tenant and property management rights and previous evictions.

Authority: [Minnesota Statute, Chapter 256I](#)

Housing Support Agreement

Definitions:

Coordinated Entry System (CES) – The system for all households throughout Isanti County experiencing homelessness or risk of homelessness to access housing.

Dual-Role Provider – An entity that is both the lease holder/landlord/property manager and provides supplemental services.

Provider – An entity that receives the Housing Support payment and is responsible for collecting the participants' obligation towards their Housing Support amount when applicable and making sure the Housing Support funding is paid toward its intended purposes (i.e., rent, utilities, and services). The provider is also the entity that provides supplemental services, if applicable.

Rental Period – Full rental period plus one day

Procedures:

1. All individuals receiving Housing Support funds are expected to fully comply with their lease and house rules (if applicable). Failure to comply with the lease and/or house rules may result in eviction.
2. Providers who are not also property managers/lease holders must assist in tenant-landlord mediation should a situation arise which may lead to an eviction.

DUAL-ROLE PROVIDERS ONLY

3. Immediate Notice to Vacate
 - a. Reasons for an immediate notice to vacate may include, but are not limited to:
 - i. illegal substances are on the property and substantiated to be in the possession of a specific resident;
 - ii. physical altercation with another resident and/or staff;
 - iii. behavior which jeopardizes the safety of other residents.

b. The eviction process is:

- i. The individual is asked to leave the property immediately and should be provided with contact information for Legal Aid, as well as the Coordinated Entry System;
- ii. Law enforcement is called as needed to assist to maintain safety of the individual, other residents, and the premises;
- iii. The provider pursues an emergency or expedited eviction through the courts, as needed. Every effort shall be made to avoid a court eviction, but the individual must vacate.

4. 14-Day Notice to Vacate

a. Reasons for a 14-day notice to vacate include, but are not limited to:

- i. Non-payment of rent, which may include:
 1. The individual's portion of the rent (after Housing Supports is applied); and/or
 2. The Housing Support payment from Isanti County due to recipient/resident non-compliance.
- ii. Repeated lease violations (not listed in Procedures 3.A);
- iii. Repeated violation of house rules (if separated from the lease and as noted in Procedure 3.A)
- iv. Repeated late rent payments;
- v. Failure to comply with Housing Support reporting requirements and rules for Isanti County may result in a 14-day notice.

b. The eviction process is:

- i. The individual receives a written notice of the violations and notice to vacate the premises in 14 days;
- ii. The individual is notified of the right to acquire legal representation regarding the notice to vacate;
- iii. The individual is given the opportunity to have a meeting to discuss the violations and remedies. The meeting must be requested in writing to the house manager within seven (7) days of notice, including weekends and holidays;
- iv. The individual's ability to remedy the violation(s) within 14 days shall result in continued residency;

- v. The individual's inability to remedy the violations within 14 days, but ability to show good faith effort may be granted an extension for compliance at the discretion of the dual-role provider;
- vi. Failure to remedy the lease violations results in a court action eviction.

5. Rental Period Notice to Vacate

- a. Reasons for a rental period notice to vacate includes minor lease violations (not listed above).
- b. The eviction process is as follows:
 - i. The individual receives a written notice of the violations and notice to vacate the premises within a rental period;
 - ii. The individual is notified of the right to acquire legal representation regarding the notice to vacate;
 - iii. The individual is given the opportunity to have a meeting to discuss the violations and remedies. The meeting must be requested in writing to the house manager within seven (7) days of notice, including weekends and holidays;
 - iv. The individual's ability to remedy the violation within the rental period shall result in continued residency;
 - v. The individual's inability to remedy the violations within the rental period, but ability to show good faith effort may be granted an extension for compliance at the discretion of the dual-role provider;
 - vi. Failure to remedy the lease violations results in a court action eviction.

SECTION VI:

DOCUMENTATION REQUIREMENTS

VI. Documentation Requirements

DOCUMENTATION STANDARDS

Isanti County Health and Human Services' Supportive Housing Program requires that providers keep accurate, current, and complete documentation for not only the facility attributed to a specific vendor profile form, but also for each individual who resides at the facility. During site visits and audits, Isanti County Health and Human Services may require to review:

Provider – Per Approved Location
Rental License and/or Zoning Permit (if applicable)
Most Recent Municipality Inspection (if applicable)
Site Visit Form (if applicable)
Active HMIS User Agreement (LTH only).
Isanti County Premise Form
Lease and Residency Requirements Resulting in Eviction (may be within lease or house rules)
Templates of Forms Used (i.e., intake forms, housing plans, case notes)
Data Practices Policy
Housing Support Provider Acknowledgement of Policy and Procedures
Tenant Complaint Forms (if received from municipality)
List of All Individuals Served for Quarter with Move In, Move Out, and Absence Dates
List of All Staff and Volunteers with Direct or Unsupervised Contact and NetStudy 2.0 background check clearances (or submission for new staff)
List of All Staff and Volunteers who Transport Clients and Verification of Driver's Licenses
Workers Compensation Coverage and Active Insurance Verification
Corrective Orders and/or Program Improvement Plans
Site Visit Forms and File Audit Forms
Site Training Record
Code of Conduct/Ethics for Program with Signed Acknowledgement by all Employees and Volunteers
Emergency Response Plan for Site (congregate sites only)

Person Served File – Required for Each HS-LTH Program Participant (Rate 1 and/or Rate 2)
Habitability Inspection
Professional Statement of Need or Request for Medical Opinion (if Rate 2 or SSR facility)
Signed Program Agreement (if applicable)
Coordinated Entry Receipt (LTH only)
Long-Term Homeless Verification Form (LTH only)
Signed Lease
Signed Acknowledgement of Tenant and Privacy Rights
Acknowledgement of Complaint Resolution Process
Authorization for Release of Information
Contacts Log (i.e., referrals, etc) (last 12 months)
Housing Plans (if Rate 2 or SSR facility) (last 12 months of plans)

Case Notes (describing services provided and dates) (last 12 months of case notes)
Complaint Resolution Reports
Adverse Events Involving the Client
Discharge Notice
Identified Agency Providing/Coordinating Services to Maintain Housing Stability (non-LTH only)

HOUSING PLAN AND CASE NOTES STANDARDS

For providers offering supplemental services, housing plans and case notes are required. The standards are noted below:

Housing Plan	Case Notes
Should include housing-related goals or tasks which include identifying goals for housing stability (cooking, cleaning, etc.), advocating for the individual during landlord negotiation, helping the individual understand lease terms, availability when issues arise, assistance with community integration, helping find other types of housing should the individual desire another setting.	Clearly state the date of the meeting/service, whether it was attempted or completed, who was present at the meeting/service, what services were provided and/or what was discussed. Most connect to the Housing Plan and/or Professional Statement of Need tenancy support areas.
Housing cannot be contingent based on compliance with the Housing Plan.	Bi-weekly check-ins required (via communication means agreed upon with the resident).
Clients are not required to actively work the plan, but providers must actively attempt a housing plan meeting monthly.	One monthly face-to-face required, at a minimum, to inspect housing unit and review Housing Plan.
Plan must be updated every six months or whenever there is a change in the client's circumstance.	Case notes are required for any individual in HS-SH setting receiving the supplemental service rate, but considered best practice for any service provided or interaction with individuals receiving Housing Support funds.

SECTION VII:

COMPLIANCE AND QUALITY ASSURANCE

VII. Compliance and Quality Assurance

A. *SITE VISITS AND FILE AUDITS*

Isanti County Health and Human Services' Supportive Housing Program may complete a site visits and file audits to ensure that people served by programs are safe, healthy, and adequately housed, as well as verify that programs are operating according to the Provider Manual and any applicable laws.

Authority: [Minnesota Statute, Chapter 256I](#)

Housing Support Agreement

Definitions:

File Audit: An event wherein a representative of an Isanti County Health and Human Services' Supportive Housing Program reviews documentation to ensure compliance with policy and procedure.

Site Visit: An event wherein a representative of Isanti County Health and Human Services' Supportive Housing Program completes an inspection of the physical premises, and may interview individuals residing at the premises, to ensure compliance with policy and procedure.

Procedures:

1. The Isanti County Health and Human Services' Representative may conduct a site visits to housing units and/or provider offices to ensure compliance with all requirements set forth in the Provider Manual.
2. Site visits may be scheduled in advance or occur randomly. The Isanti County Health and Human Services' Representative must be allowed entrance into the housing unit.
3. The Isanti County Health and Human Services' Representative conducts a review of the housing unit, along with a review of Isanti County Health and Human Services' expectations for the housing unit, during site visits. The Site Visit Form (*Appendix B*) must be retained in the provider's record keeping system for the contract year.
4. The Isanti County Health and Human Services' Representative may request to see provider and participant files at any time to ensure all required documentation is accounted for and completed accurately. Requests may be broad or targeted, and providers will be given a reasonable amount of notice prior to a file audit to assure preparation of the documents.
 - a. A File Audit Form (*Appendix H*) is used to ensure compliance with documentation standards. Copies of File Audit Forms must be retained in the provider file for the contract year.

5. Areas of concern identified by the Isanti County Health and Human Services’ representative during the course of the site visit or file audit may be addressed through compliance actions reflective of the severity of the concern (see *Section XI – Compliance Actions*).

B. COMPLIANCE ACTIONS

Isanti County Health and Human Services’ Supportive Housing Program issues compliance actions when Supportive Housing Programs are found in violation of policies, processes, or procedures within the Provider Manual in an effort to assist the Supportive Housing Program to quickly address identified concerns and continue providing services.

Authority: [Minnesota Statute, Chapter 256I](#)

Housing Support Agreement

Definitions:

Adverse Events: An event involving an individual receiving Housing Support dollars that includes serious injury and/or death. Overdoses are considered serious injuries.

Corrective Order: May be issued for first-time or minor violations of Provider Manual/Isanti County Health and Human Services’ expectations or Housing Support Agreement (see *Appendix K*).

Investigation: A formal review of a provider upon receipt of a report or complaint alleging that the safety, health, and well-being of residents is compromised, or if evidence suggests the provider consistently violates policy and procedure.

Overpayments: Overpayment returns for Housing Support dollars may be used as a compliance measure when it is determined that a provider has been found to be out of compliance, or is currently out of compliance, with the Housing Support Agreement and state-specific requirements).

Program Improvement Plan: Issued and implemented when a service provider is found to have accrued more than one corrective order within three months’ time or is found to have egregiously violated HS-SH policy and procedure or the Housing Support Agreement (see *Appendix L*).

Provider: An entity that receives the Housing Support payment and is responsible for collecting the participants’ obligation toward their Housing Support amount when applicable and making sure the Housing Support funding is paid toward its intended purposes (i.e., rent, utilities, and services). Provider is also the entity that provides supplemental services, if applicable.

Termination: Ending services through the Housing Support Agreement.

Procedures:

1. An Isanti County Health and Human Services' Representative may issue a compliance action as a result of a site visit, file audit, or investigation. Compliance actions include corrective orders and program improvement plans (see *Appendices K and L*, respectively, for templates).
 - a. Providers receiving a corrective order must respond to the action, in writing, within 10 business days.
 - i. Corrective orders may contain more than one area requiring remedy or response.
 - b. Providers failing to respond to the corrective order or remedy areas of concern within the stated amount of time:
 - i. If in violation of the Provider Manual and Isanti County Health and Human Services' expectations, and within the first six months of the initial Housing Support Agreement, receives two calendar months' notice of Isanti County Health and Human Services' intent to terminate the Housing Support Agreement.
 - ii. If in violation of the Provider Manual and Isanti County Health and Human Services' expectations, may be placed on a program improvement plan (PIP).
 - iii. If in violation of the Housing Support Agreement, may be referred to the Minnesota Department of Human Services for breach of contract.
 - c. All corrective orders must be retained in the provider's record keeping system.
2. Providers receiving a PIP must comply with the plan for a timeframe, not to exceed three months.
 - a. PIPs may also be implemented on an area of concern if receiving multiple corrective orders during the contract period.
 - b. Providers failing to comply or cooperate with the PIP:
 - i. If in violation of the Provider Manual and Isanti County Health and Human Services' expectations, receives two calendar months' notice of Isanti County's intent to terminate the Housing Support Agreement.
 - ii. If in violation of the Housing Support Agreement, may be referred to the Minnesota Department of Human Services for breach of contract.
 - c. All PIPs must be retained in the provider's record keeping system.
 - d. PIPs may be extended an additional three months at the discretion of Isanti County Health and Human Services, so long as it does not extend beyond the contract year in which the PIP was issued.

3. Providers must report adverse events as follow:
 - a. Any reports of alleged maltreatment of vulnerable adults must be reported to the Minnesota Adult Abuse Reporting Center Immediately.
 - b. Providers must document any adverse events (on or off-site) and notify the Grants and Contract Manager of any adverse events and/or reports of alleged maltreatment within 24 hours.
 - i. Any report of an adverse event may result in a site visit from the Isanti County Health and Human Services' representative, depending upon what other agencies are investigating the event.
 - ii. The Division Operations Supervisor may review adverse events or reports of alleged maltreatment screened out by the Isanti County Health and Human Services Adult Protection Team.
 - iii. Failing to appropriately report an adverse event which has resulted in a corrective order.
 - c. Providers must maintain documentation regarding adverse events reported during the contract year in the provider's record keeping system.
4. Notwithstanding termination determinations, as noted above, Isanti County Health and Human Services or the provider may elect to terminate the Housing Support Agreement by providing the other party within two calendar months' written notice, with or without cause, to terminate services.
 - a. Providers seeking to terminate the Housing Support Agreement must provide written notification to the Isanti County Licensor. Alternatively, the Isanti County Licensor must provide written notification to the provider if Isanti County Health and Human Services' elects to terminate the Housing Support Agreement.
 - b. Providers may elect to indefinitely close a housing site without terminating an active Housing Support Agreement by:
 - i. Providing two calendar months' written notification to the Isanti County Licensor;
 - ii. Following Procedure 4.C to ensure appropriate transfer into another housing option of the HS-SH recipient's choosing.
 - c. Providers are responsible for ensuring people currently residing in their programs receive, at minimum (unless otherwise requested by the person):
 - i. An updated housing plan for the individual to take with him/her upon discharge, including information about SNAP eligibility, agencies to assist with basic needs or housing crises, and other maintenance benefits requirements and case management.
 - d. Providers terminating the Housing Support Agreement with less than two calendar months' notice to the Isanti County Licensor is prohibited from entering into another Housing Support

Agreement for one full fiscal year and must follow the process for new providers (see *Section III – New Provider Application Process*).

5. Overpayments may be requested if the provider violates Housing Support Agreement or if in violation of Section IV – Housing Support Funds Management.
6. If the Housing Support Agreement is terminated for any reason, the provider must give written notice to the Housing Support recipient. The written notice must be posted at a congregate setting in a shared living space or for scattered-sites, hand-delivered to the individual.

SECTION VIII:

APPENDICES

VIII. Appendices

A. NEW PROVIDER APPLICATION CHECKLIST

ALL PROVIDERS MUST:		
<input type="checkbox"/>	Contact Minnesota Health Care Programs (MHCP) Provider Enrollment	Potential providers will need to enroll with MHCP during the Housing Support Agreement Application process. (if seeking supplemental service rate)
<input type="checkbox"/>	Contract the Institute for Community Alliance (ICA) (LTS Supportive Housing Programs only)	ICA is the Isanti County’s Homeless Management Information System (HMIS). Potential providers will need to be enrolled in HMIS as a part of the Housing Support Agreement Application.

HOUSING SUPPORT AGREEMENT APPLICATION

HMIS SITE LICENSE

<input type="checkbox"/>	Obtain a HMIS site license through ICA	Completion of an eight-hour training is required Note: A site license must be purchased by provider. All providers serving LTH individuals are required to participate in HMIS.
<input type="checkbox"/>	Obtain a Provider Request Form (PRF) from ICA	For new agencies and agencies with new projects using HMIS. A new form is completed for each funding source.
Please note: It can take several weeks to complete all paperwork for ICA.		

REQUIRED TRAININGS

<input type="checkbox"/>	Housing Support Orientation Training	Certificates of completion/email certifying attendance for both trainings must be attached to application
<input type="checkbox"/>	Vulnerable Adult Mandated Reporting Training	

INSURANCE & LICENSING REQUIREMENTS

<input type="checkbox"/>	General Liability Insurance	Ensure sufficient Insurances are in place meeting at least the levels indicated in Isanti County Insurance Policies. (This excludes Family Foster Care Providers).
<input type="checkbox"/>	Business Automobile Liability Insurance	
<input type="checkbox"/>	Professional Liability Insurance	
<input type="checkbox"/>	Workers' Compensation Certificate of Compliance (if applicable)	
<input type="checkbox"/>	Determine if any other licenses of registrations may be required for proposed setting/facility	These licenses may be required by MN Department of Human Services or Minnesota Department of Health

PROVIDER / STAFF / VOLUNTEERS

<input type="checkbox"/>	Submit Background Checks for Providers / Staff / Volunteers	Background checks are required for anyone who has direct contact with or unsupervised access to Housing Support Program recipients or has access to their personal property or private data. Receipts indicating submission of background check requests through NetStudy 2.0.
<input type="checkbox"/>	Collect copies of Driver's Licenses for transporting personnel	Attestation that all staff that transport Housing Support Program recipients have a valid driver's license on file is required in the Housing Support Agreement Application and may ask to be verified on site visits.

<input type="checkbox"/>	Submit the Housing Support Agreement Application and all required documents to the Isanti County Licensor
REQUIRED DOCUMENTS CHECKLIST	
<input type="checkbox"/>	Housing Support Agreement application form with all required sections completed
<input type="checkbox"/>	List of residency restrictions that may result in eviction (if not included in the lease)
<input type="checkbox"/>	HMIS Training Verification and Site License
<input type="checkbox"/>	Certificates of completion/attendance for DHS trainings (2)
<input type="checkbox"/>	NetStudy 2.0 notice of background check submission for all staff/volunteers with direct or unsupervised contact or access to private data
<input type="checkbox"/>	Insurance Certificate, if requested
<input type="checkbox"/>	Liability insurance certificate, if requested
ONCE THE HOUSING SUPPORT AGREEMENT APPLICATION HAS BEEN REVIEWED TO ENSURE DOCUMENTS HAVE BEEN COMPLETED ACCURATELY AND COMPLETELY, A HOUSING SUPPORT AGREEMENT AND INDEMNITY AND PROVIDER MANUAL COMPLAINCE AGREEMENT WILL BE SENT TO THE PROVIDER TO BE SIGNED AND RETURNED TO THE ISANTI COUNTY LICENSOR.	

HOUSING AND REFERRALS		
<input type="checkbox"/>	Locate suitable housing unit	Housing must match the services/population to be served
<input type="checkbox"/>	Obtain rental licenses and/or zoning documentation required by the municipality (if applicable)	Must be sent to the Isanti County Licensor along with the most recent inspection report(s), if requested
<input type="checkbox"/>	Complete and submit Premise Form	Notifies law enforcement officials of the nature of your facility – send to both Local Police Department and the Isanti County Sherriff's office. Copy of submitted form must be attached to application.
<input type="checkbox"/>	Prepare a Lease agreement or obtain a copy of the lease to be used	If there is a lease between the Housing Support recipient and a private landlord, the Housing Support provider must maintain a copy of lease in their recordkeeping system.
<input type="checkbox"/>	Become an Enrolled Provider with MHCP	All Supplemental Service Rate (SSR) providers are required to enroll with MHCP as a part of the Housing Support Agreement Application and is needed in order to bill for SSR.
<input type="checkbox"/>	Attend a Billing Lab for Housing Support Supplemental Service Providers	Information about sessions are available on the MHCP enrolled provider training page. For questions about the MHCP enrollment application or Billing Lab registration assistance, contract the Provider Call Center (651) 431-2700 or (800) 366-5411.
<input type="checkbox"/>	Complete Background Checks for Providers/Staff/Volunteers	A background check clearance form is required for all providers and staff of the housing unit.
Upon approval from the Isanti County Licensor; documents will be submitted to the Isanti County Division Operations Supervisor, who will review and complete the Vendor Profile form and will then set the provider up in relevant Housing Support payment systems.		
<input type="checkbox"/>	Document Vendor Number	The Division Operations Supervisor will relay this information to the Isanti County Licensor, whom will relay this to the appropriate provider once they are set up to receive payments.
<input type="checkbox"/>	Request referrals for individuals eligible for Housing Support services from the Coordination Entry System (CED) (<u>LTH Supportive Housing Programs only</u>).	Contact the regional CES Coordinator (Lakes and Pines) to request the referrals for each open bed available. Individuals placed into Housing Support settings without going through CES are not funded by Isanti County Health and Human Services.
<input type="checkbox"/>	Contact individuals referred and assist with completion of steps required during the referral process and once the individual is housed.	Further information on the steps in the referral process can be found in the Provider Manual Section IV-Referral Process.

Appendix B

B. SITE VISIT

Isanti County health and Human Services conducts initial, random, and scheduled site visits of housing units in the Housing Supports Program to ensure that housing units are safe, healthy, clean, and habitable.

Date of Site Visit:	
Provider Name:	
Address/Location:	
Name of Reviewer:	
Scheduled/Random:	

Overall facility

- The facility has clean floors and walls with no visible damage
- Plumbing fixtures are fully functioning
- Cleaning products and tools are provided, including shovels for snow
- Fans or other cooling methods are available for hot periods (over 80°F inside) in summer
- Plan for facility/site maintenance (snow shoveling, lawn mowing)
- Garbage service provided
- Functioning smoke detectors are in each bedroom and in shared living spaces, including the kitchen and at least one on each floor
- Adequate lighting is available for each room
- Fire extinguishers are present and up-to-date (not expired)
- Windows and doors are not blocked, allowing for emergency exit

Bedrooms

- The number of bedrooms matches the capacity indicated in the approved proposal
- Each bedroom has a door that locks to which only the facility owner and the individual have a key
- Each bed is on a bedframe and has sheets, a blanket, and at least one pillow
- Each bedroom will have private storage for individuals – either closet(s) with appropriate shelving or dressers.

Appendix B

Bathrooms

- Toilet paper is available
- Hand soap is available
- Towels and wash cloths are available

Kitchen

- There is easy access for individuals to use: stove, microwave and coffee maker
- Refrigerator with a freezer is provided
- Table and chairs are provided for eating either in kitchen or other common area

Kitchen Supplies that must be available:

- Sets of plates, bowls, cups, coffee cups, and silverware
- Pots, pans, mixing bowls and other food preparation necessities
- Dishwashing liquid and tools including drying rack or another way to dry dishes
- Kitchen towels
- Paper towels or napkins
- Refrigerator/microwavable food storage containers provided for each individual

Living Area

- There is adequate seating for individuals in shared living area

Other

- There is access to either functioning washing machine/dryer or other laundry services
 - Specify laundry services: _____
- There is a house telephone in a common space that is available to all residents who should not have to go outside or enter into another residents' private space to use it.
- Emergency response/evacuation plan posted in an accessible manner (Congregate only)
- Participant Rights Form posted in accessible manner (Congregate Only)

Appendix B

Concerns Expressed by Residents (if any)

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OVERALL ASSESSMENT

	Housing unit meets standards set forth by Isanti County Health and Human Services and Department of Human Services. No additional improvement needed.
	Life safety concerns identified and must be remedied within 72 hours prior to official compliance action issuance (see below).
	Housing unit meets standards set forth by Isanti County Health and Human Services and Department of Human services. However, minor areas of improvement are noted and must be remedied within 10 days prior to official compliance action issuance (see below).
	Housing unit does not meet the standards set forth by Isanti County Health and Human Services and Department of Human Services. Compliance action to be issued.

Noted Areas for Improvement:

--

ICHHS Staff (Printed Name): _____

ICHHS Staff (Signature): _____

Appendix C

ISANTI COUNTY HOUSING SUPPORT PROVIDER

C. INDEMNITY AND PROVIDER MANUAL COMPLIANCE AGREEMENT

THIS AGREEMENT by and between ISANTI COUNTY BOARD OF COMMISSIONS, 1700 East Rum River Dr. S., Cambridge, MN 55008 (hereinafter referred to as "County"), and the HOUSING SUPPORT PROVIDER (hereinafter referred to as "Provider") listed below.

WHEREAS, the County and Provider are entering into a Housing Support Agreement simultaneously herewith; and

WHEREAS, in exchange for the County's execution of the Housing Support Agreement, and for other good and valuable consideration, the receipt and sufficiency of which are hereby acknowledged, Provider agrees to the following:

1. Name and address under which the Provider does business:

Name:

Address:

2. **Indemnity.** Provider shall defend, indemnify, and hold harmless the County, its officials, officers, agents, volunteers, and employees from any liability, claims, causes of action, judgments, damages, losses, costs, or expenses, including reasonable attorneys' fees, resulting directly or indirectly from any act or omission of Provider, its subcontractors, anyone directly or indirectly employed by them, and/or anyone for whose acts and/or omissions they may be liable in the performance of the services required by this Agreement or the Housing Support Agreement, and against all loss by reason of the failure of Provider to perform fully, in any respect, all obligations under this Agreement and the Housing Support Agreement.

3. **Liability Insurance and Workers Compensation**

- a. **Insurance.** Provider agrees to obtain and maintain liability insurance throughout the term of the Housing Support Agreement. Isanti County shall be listed as additional insured on the policy. A current certificate of insurance shall be filed with the County prior to commencement of this Agreement. If for any reason, Provider cancels, modifies, or is terminated from insurance; Provider must, in writing, notify the County within 5 business days and make a good faith effort to obtain or replace the insurance. The minimum liability insurance levels to be maintained by Provider are:

General Liability Insurance.

\$500,000 for claims for wrongful death and each claimant for other claims.

\$1,500,000 each occurrence for claims.

No Less Than \$2,000,000 Aggregate coverage.

Policy shall include at least premises, operations, completed operations, independent contractors and subcontractors and contractual liability and environmental liability.

Business Automobile Liability Insurance.

\$500,000 for claims for wrongful death and each claimant for other claims.

\$1,500,000 each occurrence.

Must cover owned, non-owned and hired vehicles.

- c. **Worker's Compensation.** Provider must also maintain Worker's Compensation insurance per Minnesota statutory requirements.
- d. **Family Foster Home Providers.** Family Foster Home Providers do not need to provide proofs of insurance as they are included under the Statewide Insurance Plan.

4. **Provider Manual Compliance** Housing Support Supportive Housing Provider acknowledges reviewing and understanding of the content, policies, procedures, requirements, and expectations entailed in the Supportive Housing Program Provider Manual. Provider confirms receipt of a copy of said Provider Manual and agrees to abide by all policies and procedures defined therein. Provider agrees that failure to comply with any and all policies and procedures may result in compliance actions, up to and including termination of the Housing Support Agreement.

5. This Indemnity and Provider Manual Compliance Agreement is incorporated into the Housing Support Agreement executed by the parties hereto. The County reserves the right to immediately rescind any contract not in compliance with these requirements and retains all rights thereafter to pursue any legal remedies against Provider.

IN WITNESS WHEREOF, Board and Provider agree that this Agreement is effective on **July 1, ____ through June 30, ____.**

APPROVED AS TO FORM AND EXECUTION

DIVISION LEADER:

ISANTI COUNTY HEALTH AND HUMAN
SERVICES DIVISION

PROVIDER SIGNATURE AND TITLE

By

By

Agency: _____

Dated: _____

Dated: _____

D. Isanti County Premise Form



**ISANTI COUNTY
PREMISE FORM**

Officer: _____
Pin #: _____

Business Name:
Location/Address:
Business Phone:
Business Email:
Building Owner Information: <input type="checkbox"/> Same as above Name: _____ Phone: _____
Manager Information: (if applicable) Name: _____ Phone: _____
Alarm Information: Is the property protected by an alarm <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, list alarm company: _____ Contact Name: _____ Phone: _____
Key Holder Information: (Names and phone number of current key holders in your business who have keys to the property and/or access codes to an alarm, if applicable) 1. _____ Phone: _____ 2. _____ Phone: _____ 3. _____ Phone: _____ 4. _____ Phone: _____
List any potentially hazardous materials on the property (i.e. oxygen tanks or chemicals):
Notes:
Department Use Only
Email to: Isanti County Sheriff's Office: Sheriff Wayne Seiberlich wayne.seiberlich@sheriff.co.isanti.mn.us Isanti County Sheriff's Office: Chief Deputy John Gillquist john.gillquist@sheriff.co.isanti.mn.us

E. Habitability Inspection Form



Minnesota Department of **Human Services**

**Habitability Inspection Form
Group Residential Housing – Supportive Housing Setting**

APPLICANT NAME:	MAXIS CASE NUMBER:	DATE OF BIRTH:
COUNTY:	ELIGIBILITY WORKER:	PHONE/FAX:
ADDRESS OF HOUSING UNIT:		
PROPERTY OWNER NAME:	PROPERTY OWNER ADDRESS:	

Group Residential Housing (GRH) supportive housing settings must have an approved habitability inspection. The habitability inspection will determine whether the housing occupied by the GRH recipients meets the Department of Human Services' habitability standards.

Inspector:

- Check "Approved" or "Deficient" for each standard on the back of this form, and describe any deficiencies in comments section at the bottom of the page.
- Complete the certification statement below.
- Assist GRH applicant as needed in submitting this form to the Eligibility Worker listed above.
- Give a copy of this completed form to the GRH applicant.

Certification Statement:

I certify that I have evaluated the property located at the address above, and to the best of my ability find:

Property meets all of the habitability standards. Unit is approved for GRH funding.

Property does not meet all of the habitability standards. Unit is not approved for GRH funding.

INSPECTOR NAME:	INSPECTOR'S AGENCY:	PHONE NUMBER:
DATE OF INSPECTION:	TYPE OF INSPECTION: <input type="checkbox"/> Initial <input type="checkbox"/> Re-inspection	
INSPECTOR SIGNATURE:		

Will unit be re-inspected? Yes No

Plans and timelines to improve conditions:

Planned re-inspection date:

When this form is completed, please get it to the Eligibility Worker listed above.
GRH benefits cannot be approved until this form is received.

Habitability Inspection Standards

Approved	Deficient	Standard
		1. Structure and materials: The building appears structurally sound, appears to protect the residents from the elements and does not appear to pose any threat to the health and safety of the residents.
		2. Space and security: Each resident is provided adequate space and security for themselves and their belongings. Each resident is provided an acceptable place to sleep.
		3. Interior air quality: Each room or space has a natural or mechanical means of ventilation. The interior air appears to be free of pollutants.
		4. Water Supply: The water supply appears to be clean and safe. All plumbing fixtures and drains appear to be in proper operating condition.
		5. Sanitary Facilities: Residents have access to sufficient sanitary facilities that appear to be in proper operating condition, are private, and are adequate for personal cleanliness and the disposal of human waste.
		6. Thermal environment: The housing has any necessary heating facilities which appear to be in proper operating condition.
		7. Illumination and electricity: The structure has adequate natural or artificial illumination to permit normal indoor activities and support health and safety. There are sufficient electrical sources to permit the safe use of electrical appliances in the structure.
		8. Food preparation: All food preparation areas contain suitable space and equipment to store, prepare, and serve food in a safe and sanitary manner.
		9. Sanitary condition: <i>The housing is maintained and appears to be in sanitary condition.</i>
		10. Fire safety: <ul style="list-style-type: none">a. There is a second means of exiting the building in the event of fire or other emergency.b. The unit includes at least one battery-operated or hard-wired smoke detector, in proper working condition, on each occupied level of the unit. Smoke detectors are located, to the extent practicable, in a hallway adjacent to a bedroom.c. If the unit is occupied by hearing-impaired persons, smoke detectors have an alarm system designed for hearing-impaired persons in each bedroom occupied by a hearing-impaired person.d. The public areas are equipped with a sufficient number, but not less than one for each area, of battery-operated or hard-wired smoke detectors. Public areas include, but are not limited to, laundry rooms, hallways, stairwells, and other common areas.

Comments (Locations and details of deficiencies):



F. Discharge Notice

Appendix F

ISANTI COUNTY
HEALTH AND HUMAN SERVICES

DISCHARGE NOTICE

*This form must be completed in its entirety and submitted to the Isanti County Licensor **within 72 hours** of an individual vacating the provider's HS-SH Program.*

Organization/Program Name:

Organization/Program Director:

Vendor Number:

Facility Address:

Name: _____

Street: _____

City, Zip: _____

Name and Contact Information of Discharged Individual:

Name	
Address	
City, State, Zip	
Phone	
Email	
Discharge Date	
Location Type (if known)	

Submit this form to Eligibility Team:	Please direct any financial questions to:
In person or fax: (763) 689-9877	ICHHS Eligibility Team: (763) 689-1711

Please note: If an individual is not reported as discharged and payments are issued, this will constitute an overpayment which will be required to be paid back by the provider. If individuals continue to discharge from the program without proper report and payments not stopped in a timely manner, ICHHS may forward the case to DHS for investigation of fraud.

G. COMPLAINT RESOLUTION REPORT

Providers must respond to or otherwise follow-up on complaints or areas of concern within **72 hours**. Complaints **must have an action plan within ten business days** from the date the complaint was received.

This form is to be completed by the Provider and issued to the individual bringing forth the complaint in accordance with the Housing Support complaint resolution process.

Complaint:	Organization/Program Name:	Facility Address:
Date complaint reported:	Date of meeting with complainant:	
Description of complaint or area of concern:		
Possible resolutions discussed:		
Plan for resolution of complaint/similar complaints moving forward:		
Provider Name (Printed):	Complainant Name (Printed):	

 Provider Signature

 Date

 Complainant Signature

 Date

APPENDIX H

H. FILE AUDIT

Reviewer:	Program	Participant File Initials (if reviewed)	Review Date:
Available for Review? (Yes/No/NA)	Provider Documentation	Date(s)	Comments
	Rental License and/or Zoning Permit (If applicable)		
	Initial Site Visit (congregate/site-based only)		
	Most Recent Municipality Inspection (congregate or site-based only, if available)		
	Data Practices Policy (not provided by the county, must be created by agency/program in accordance with applicable data privacy laws)		
	HMIS User Agreement(this will come from ICA)		
	Tenant Complaint Forms (if received from licensing municipality)		
	Participant Rosters (quarterly, with move in, move out, and absence dates)		
	Staff and their Qualifications		
	Staff and Volunteer Rosters with Verification of Completed Background Checks		
	Staff and Volunteer Rosters with Verification of Driver's License		
	Workers Compensation Coverage and Insurance Verification		
	Corrective Orders and/or Program Improvement Plans		
	Site Visit Forms		

	File Audit Forms		
	Training Record		
	Isanti County Premise Form		
	Code of Conduct/Ethics with Current Employee and Volunteer Acknowledgments		
	Emergency Response Plan for Site (Congregate)		

Reviewer:	Program	Participant File Initials (if reviewed)	Review Date:
Available for Review? (Yes/No/NA)	Participant Eligibility Documentation	Date(s)	Comments
	Habitability Inspection		
	Professional Statement of Need or Request for Medical Opinion Form (most recent)		
	Coordinated Entry Receipt (LTH Supportive Housing Only)		
	Long-Term Homeless Verification Form (LTH Supportive Housing only)		
Available for Review? (Yes/No/NA)	Additional Participant Documentation	Date(s)	Comments
	Signed Lease (should clearly outline residency requirements resulting in eviction)		
	Signed Acknowledgment(s) of Participant and Privacy Rights (each program or agency uses their own form; these are not county issued forms)		
	Signed Acknowledgment of Complaint Resolution Process (each program or agency uses their own form; these are not county issued forms)		
	Releases of Information (each program or agency uses their own form; these are not county issued forms)		
Available for Review? (Yes/No/NA)	Participant Eligibility Documentation	Date(s)	Comments
	Contact Logs (may also be in case notes; should clearly demonstrate any referrals or contacts made to external agencies for, or on behalf of, a participant)		

	Housing Plans (if receiving supplemental service rate; should have an updated plan every 6 months)		
	Case Notes (if receiving supplemental service rate; must include date and description of services provided)		
	Adverse Events (if applicable, should include date/time/nature of incident and demonstrate actions the provider took to report it:		
	Complaint Resolution Reports (this is a county issued form)		
	Record of current Support Service Provider (non-LTH Supportive Housing Programs only)		
	Discharge Notice (county-issued form)		

Appendix I

I. PARTICIPANT RIGHTS

While participating in the Isanti County Health and Human Services’ Supportive Housing Program, all individuals receiving services have the right to:

- Be treated with dignity and respect at all times
- Be free from bullying, harassment, discrimination, and violence in all of its forms
- Know the contact information of those responsible for your care
- Know the services you should be provided and to ask questions about those services
- Terminate your housing with adequate notice
- Privacy and confidentiality, and to determine who can receive information about you and how that information is shared
- Contact law enforcement if you believe you are the victim of a crime or in the case of an emergency
- Make complaints or voice concerns about your care without fear of losing your housing

The contact information for the landlord and/or property manager is:

BUSINESS NAME:	
CONTACT NAME:	
BUSINESS ADDRESS:	
TELEPHONE:	

The contact information for my service provider is:

BUSINESS NAME:	
CONTACT NAME:	

BUSINESS ADDRESS:	
TELEPHONE:	

Appendix I

Complaint Resolution Process

- **First level:** Discuss your concerns directly with the landlord and/or provider. Take notes!
- **Second level:** Report concerns to the Division Operations Supervisor if you have already tried to resolve the concern with the provider.
- You should receive a Complaint Resolution Report from the provider following the complaint resolution process.

ICHHS' Housing Support Program

- Nichole Helquist, Isanti County Licensor: (763) 689-8160

Tenant Advocate Resources

- **HOME Line (Tenant Hotline):** (612) 728-5767 or (866) 866-3546
- **Minnesota Multi Housing Association** (952) 858-8222
- **The Advocates for Human Rights** (612) 341-9845
- **Minnesota Department of Human Rights Mediation Program:** (651)539-1100
- **Volunteer Lawyers Network:** (612) 752-6677
- **Mid-Minnesota Legal Aid:** (320) 253-0121
- **Office of the Ombudsman for Mental Health and Developmental Disabilities:** (877) 766-5481

Appendix J

J. NEW PROGRAM PARTICIPANT CHECKLIST

Who is responsible/provides assistance?		Document Needed	Process
Triage Eligibility Worker	<input type="checkbox"/>	Combined Application Form (CAF) – DHS 5223	Program participant communicates with Eligibility Worker in the County office for interview. Select SNAP and cash
	<input type="checkbox"/>	Interim Assistance Agreements – DHS 1795/1795A	Completed and signed prior to the end of the processing period
	<input type="checkbox"/>	Signed Personal Statement about Assets – DHS 6054	Completed and signed prior to the end of the processing period
	<input type="checkbox"/>	Authorization to Release Information – DHS 2243A	Completed and signed prior to the end of the processing period
	<input type="checkbox"/>	Proof of application for Social Security	Completed by program participant and turned into County within 30 days of eligibility determination
Qualified County Worker/Respondent	<input type="checkbox"/>	Professional Statement of Need or Request for Medical Opinion	Interview to complete PSN is done and must be signed by a qualified worker; PSN is required for supplemental service rate authorization.
Provider	<input type="checkbox"/>	Habitability Inspection Form	Completed by Provider and maintained in the participant’s file for each address
	<input type="checkbox"/>	Coordinated Entry Receipt (LTH Supportive Housing Programs only)	VI-SPADT completed by assessor prior to individual being placed on CES priority list. Providers must obtain receipt from the regional CES coordinator indicating

			program participant name, VI-SPDAT score, and referral date sent by Coordinated Entry System (CES) Coordinator.
Landlord/Tenant	<input type="checkbox"/>	Shelter Form DHS 2952	Completed by Landlord
	<input type="checkbox"/>	MHFA LTH Verification form (Proof of Long-Term Homelessness) (LTH Supportive Housing Programs only)	Signed by the Housing Support recipient and by a professional completing the form.
	<input type="checkbox"/>	Copy of lease signed by both Landlord and Tenant	Completed by Landlord and Tenant

Appendix K

K. CORRECTIVE ORDER

____ Supportive Housing ____ Assisted Living/Customized Living ____ Adult Foster Care

____ LTH Supportive Housing ____ Board and Lodge

PROVIDER NAME AND ADDRESS: _____

COMPLIANCE OFFICIAL: _____

PHONE: _____

DATE OF ORDER: _____

BASIS FOR CORRECTIVE ORDER: _____

PROVIDER DIRECTIONS: Please submit a notice, in writing, of how these violations have been corrected and the date the corrections were made (must be within 10 business days). Sign and date this form and return to this compliance official **no later than** _____. Your signature certifies that all corrections listed below have been made. Failing to comply with the corrective order may result in the implementation of a program improvement plan pursuant to the Isanti County Supportive Housing Program Provider Manual, Compliance Actions Policy.

Citation/Rule	Violation	Deadline for Correction	Date Corrected	How Corrected

COMPLIANCE OFFICIAL SIGNATURE: _____

DATE ISSUED: _____

PROVIDER SIGNATURE: _____

DATE RETURNED: _____

APPENDIX L



L. *PROGRAM IMPROVEMENT PLAN*

____ Supportive Housing ____ Assisted Living/Customized Living ____ Adult Foster Care

____ LTH Supportive Housing ____ Board and Lodge

PROVIDER NAME AND ADDRESS: _____

COMPLIANCE OFFICIAL: _____ PHONE: _____

DATE OF PLAN: _____

BASIS FOR PLAN IMPLEMENTATION: _____

Correction Number	Remedy Requirement
1.	
2.	
3.	

REVIEW MEETING DATE: _____

COMPLIANCE OFFICIAL SIGNATURE: _____

DATE ISSUED: _____

PROVIDER SIGNATURE: _____

DATE RETURNED: _____