



# **MD-514**

## **Written Standards for Service Delivery**

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**MARYLAND**  
BALANCE OF STATE  
CONTINUUM OF CARE

**VERSION 1.0**

EFFECTIVE DATE: JANUARY X, 2026

# UNIVERSAL STANDARDS

The MD BoS CoC practices a person-centered model that strongly incorporates participant choice and emphasizes inclusion of subpopulations present in the CoC including, but not limited to people experiencing chronic homelessness, veterans, youth ages 18-24, households with children and victims of domestic violence or other life-threatening interpersonal violence.

The following sections describe Federal, State, Local and CoC level laws, policies and rules that pertain to all participating CoC programs.

## ANTI-DISCRIMINATION

### FEDERAL LAW

Under federal law, housing providers may not discriminate and must offer equal opportunity and access to housing without regard to the following characteristics. Even if policies are not intended to be discriminatory, they may violate federal law if they have a discriminatory effect on protected classes.

- Race
- Color
- National origin
- Religion
- Sex
- Familial status, including:
  - a. Children under 18 living with parents or legal custodians
  - b. Pregnant women
  - c. People securing custody of children under 18
- Disability status

### MARYLAND LAW

In addition to the protected classes under federal law, the State of Maryland recognizes additional characteristics that are protected from discrimination in all housing programs. All classes protected under federal law are also protected under Maryland law. Even if policies are not intended to be discriminatory, they may violate the law if they have a discriminatory effect on protected classes.

- Marital status (the state of being single, married, divorced, or widowed)
- Sexual orientation
- Gender identity
- Source of income
- Military status

### WHO MUST FOLLOW ANTI-DISCRIMINATION LAWS?

1. **FUNDED PROGRAMS:** Organizations that are administering federal or state funded activities, including recipients of CoC and ESG grants administering shelter, transitional housing, rapid rehousing, permanent supportive housing, outreach, or any other project type may not discriminate on the basis of any of the above protected classes covered by either federal or state law.
2. **LANDLORDS AND REAL ESTATE COMPANIES:** Additionally, laws may also bind private landlords in the community with whom funded programs may work or lease units. Funded programs must ensure that all of their private partners comply with federal and state anti-discrimination laws and may not knowingly work with private landlords or real estate companies that engage in illegal discrimination. These housing providers may not discriminate on the basis of any of the above protected classes except under the following circumstances: Per Maryland law, private housing providers such as landlords and real estate agents MAY discriminate on the basis of sex, sexual orientation, gender identity, marital status, military status, or source of income if:
  - The dwelling is a single room rental *and* the owner maintains it as their principal residence, or
  - The rental is an apartment building with four or fewer units *and* the owner maintains it as their principal residence.

## EXAMPLES OF HOUSING DISCRIMINATION

- Sexual harassment
- Setting racial quotas for access to housing or shelter
- Discriminatory terms and conditions in lease or shelter participant agreements
- Requesting information about birth control and/or family planning practices
- Refusing to consider all household members' income when seeking to buy or rent
- Use of discriminatory notices or advertisements indicating a preference or discriminatory limitation
- Refusal to reasonably accommodate or adjust rules, policies, services, or practices that hamper access by a person with a physical or mental disability
- Refusing to consider a housing voucher, PSH/RRH offer, or other benefits as valid income for the purposes of leasing or determining rent
- Placing families with children in a specific portion of a housing complex (with exceptions for senior living and emergency shelter)
- Requiring participation in religious services as a condition of a stay at shelter.

## ADOPTION OF ANTI-DISCRIMINATION POLICIES

While federal and state law actively prohibit discrimination, providers must also have non-discrimination policies in place within their organizations affirming their compliance with and aligning their practices with the anti-discrimination protocols in this Written Standards guide. This is required by the Housing and Urban Development's (HUD) final rule, CoCs are required to comply with applicable civil rights laws through the adoption and implementation of the fair housing and equal opportunity policy. The final rule ([24 CFR 578.93](#)), addressing nondiscrimination and equal opportunity requirements, is provided to offer greater direction to recipients and subrecipients on the use of grant funds. It states that the nondiscrimination and equal opportunity requirements set forth in [24 CFR](#)

5.105(a) apply. This includes, but is not limited to, the Fair Housing Act, Title VI of the Civil Rights Act of 1964, Section 504 of the Rehabilitation Act of 1973 (Section 504), and Title II of the Americans with Disabilities Act.

All HUD funded projects in the Continuum of Care are required to adopt and implement an Anti-Discrimination policy that ensures that all housing and services must be available to all eligible persons, regardless of race, color, national origin, religion, sex, age, familial status, disability, sexual orientation, gender identity, gender expression or marital status.

See Appendix C.

### **ADOPTION OF ANTI-HARASSMENT & BULLYING POLICIES**

All programs shall have policies addressing harassment and bullying. These policies must prohibit the harassment and bullying of all program staff and participants, with special consideration for harassment targeting someone's race, color, national origin, religion, sex, age, familial status, disability, sexual orientation, gender identity, gender expression, or marital status.

Bullying and harassment include any repeated conduct which is intentionally harmful or offensive and meant to intimidate, abuse, or diminish the dignity of the target. This includes, but is not limited to, repeated and unwanted use of offensive jokes, slurs, epithets, or name-calling, physical threats, purposefully referring to someone by the wrong name or gender, derogatory comments, intentionally annoying, interfering with someone's participation in a program, repeatedly targeting someone with warrantless complaints or grievances, unwanted sexual advances, and blackmailing.

Anti-harassment and bullying policies should cover the conduct of both staff and clients. All policies should include provisions providing for progressive discipline. Further, these policies should provide individuals with adequate notice and warning that their conduct is harmful or offensive and should not penalize conduct that is unintentional or accidental. Regarding client behaviors, programs should consider any mitigating circumstances before taking adverse action against the client. This includes whether the behavior is a direct manifestation of provocation, disability, trauma, or mental health challenges. Providers should provide supportive services to address these challenges as necessary *before* taking adverse action against the client.

See Appendix D for a policy template.

### **PROTOCOLS FOR ADDRESSING DISCRIMINATION UNIQUE TO PARTICULAR CLASSES**

Discrimination is often straightforward and easy to spot. For example, it is illegal to discriminate against someone in housing on the basis of race, so a policy which racially segregates your facilities would be discriminatory.

However, some forms of unlawful discrimination may not be immediately obvious. For example, if homeless outreach is only conducted in predominantly White areas of town while predominantly Black neighborhoods receive no outreach, this unintentional focus may have discriminatory outcomes even if nothing malicious is intended.

As a system that is designed to provide services to vulnerable populations, it is often not enough to just passively avoid discrimination, it will often require the program to affirmatively take actions to ensure that all clients have the same opportunity to access services, regardless of their background. This section covers several strategies needed to address some of these less-than-obvious forms of discrimination and highlights discrimination that manifests differently for different protected classes.

## **AFFIRMATIVELY FURTHERING FAIR HOUSING**

Additionally, providers shall conduct assertive outreach to people least likely to engage in the homeless system. Organizations receiving CoC, ESG and HSP Program funding shall market housing and supportive services to eligible persons regardless of race, color, national origin, religion, sex, age, familial status, or disability; and shall provide program applicants and participants with information, in writing, on their rights and remedies under applicable federal, state, and local fair housing and civil rights laws.

## **DISCRIMINATION BASED ON HOUSEHOLD COMPOSITION**

Organizations cannot discriminate against a group of persons presenting as a family based on the composition of the family, the age of any member of the family, the disability status of any members of the family, marital status, actual or perceived sexual orientation, or gender identity. The people who present together for assistance, regardless of age or relationship, are considered a household and are eligible for assistance as a household.

Projects that serve families with children must serve all types of families with children (e.g. single fathers with children); if a project targets a specific population, (e.g. homeless veterans), these projects must serve all families with children that are otherwise eligible for assistance, including families with children that are headed by a single adult or consist of multiple adults who reside together.

## **PREVENTING FAMILY SEPARATION**

If a housing program serves families with children, it cannot turn a family away because of a child's age or gender. For example, a family can't be denied housing because they have a 15-year-old son. Programs should do everything they can to keep families together, and only separate them if it's absolutely necessary to protect the safety and well-being of the family.

## **DISCRIMINATION BASED ON ACTUAL OR PERCEIVED GENDER**

The MD BoS CoC requires housing and shelter projects to be made available to individuals and families without regard to actual or perceived sexual orientation, gender identity, or marital status. The rule defines "gender identity" to mean "actual or perceived gender-related characteristics."

Living facilities which accommodate clients should not be segregated based on sex or gender. However, there is a limited exception to this rule: Temporary, emergency shelters and other buildings and facilities that are not covered by the Fair Housing Act—because they provide short-term, temporary accommodations—may offer gender-segregated accommodations, to protect the privacy and security of individuals when the buildings and facilities have physical limitations or configurations that require either:

1. Shared sleeping quarters, OR
2. Shared bathing facilities

For purposes of this rule, shared sleeping quarters or shared bathing facilities are those that are intended for simultaneous accommodation of multiple individuals in the same space. For example, a single-user bathing facility with a lock on the door is not designated for simultaneous occupancy by multiple individuals, so it is not a “shared bathing facility” for purposes of this rule. Organizations should ensure that services do not isolate or segregate victims of domestic violence based upon actual or perceived sexual orientation or gender identity.

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## GUIDANCE FOR PLACEMENT FOR TRANSGENDER PERSONS IN SINGLE-SEX EMERGENCY SHELTERS AND OTHER FACILITIES

Gender-segregated shelters and other facilities receiving funding from the State of Maryland must

place individuals seeking shelter in the facility that best matches their self-described gender. These assignments are not to be influenced by the gender listed on an individual's identification documents, their appearance, the perceptions of intake staff, or a client's disclosure that they identify as transgender. Staff members may not request that a transgender individual disclose information about their anatomy, medical history, or current treatments unless this information is absolutely necessary for unrelated clinical purposes. For example, a shelter with policies around the storage and administration of prescription medication may require a transgender participant to store medication centrally so long as that policy is consistent for storage of all medication.

For example, shelters may not prevent transgender clients who rely on hormone therapy treatments from taking their medication, however, if the shelter has a policy regarding the storage of prescription drugs, it is not discriminatory to apply that policy to a transgender individual's hormones as well—so long as the policy is consistent for all medication.

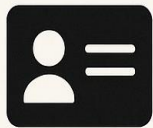
Facilities may not make a determination about services or require a client to relocate based on the complaints of another participant that are solely based on a participant's gender identity or non-conformity with gender stereotypes. This does not prevent programs from

responding to complaints that are based on a client's behavior. For the purpose of assigning a participant to sex-segregated or sex-specific services, it is a requirement that intake staff and emergency housing providers ask transgender participants which service they wish to join. Organizations must take reasonable steps to address safety and privacy concerns; the organization

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Intake staff and emergency housing providers must ask transgender participants which group or service they wish to join. Organizations must take reasonable steps to address safety and privacy concerns; for instance, organizations may install privacy curtains or partitions

should provide privacy in bathrooms and dressing areas. For instance, organizations may install privacy curtains or partitions.

When deciding how to house a transgender victim of domestic violence, an organization that provides sex-segregated housing may consider on a case-by-case basis which particular housing assignment would best ensure the transgender victim's health and safety. This should involve a discussion with the victim about what arrangement, in their own view, would best ensure their personal safety. The organization should ensure that services do not isolate or segregate victims of domestic violence based upon actual or perceived gender identity.

## **PRIORITIZED SUBPOPULATIONS AND FAIR HOUSING IMPLICATIONS**

Organizations shall comply with applicable civil rights laws, including the Fair Housing Act. Within this framework, these standards establish subpopulations to be prioritized for housing and services that align with the identified needs of the local community and the goals of the Federal Strategic Plan to End Homelessness. Subpopulations may be prioritized so long as doing so does not discriminate against any protected class under federal nondiscrimination laws (e.g., the housing may be limited to homeless veterans, victims of domestic violence and their children, or chronically homeless households); subpopulations may also be prioritized according to who needs specialized supportive services offered by the project (e.g., substance use disorder treatment, domestic violence services, or a high intensity package of services designed to meet the needs of hard-to-reach homeless persons).

### **DEDICATED BEDS VERSUS PRIORITIZED BEDS**

Projects and/or beds that are dedicated to a specific subpopulation must continue serving only that subpopulation. (For instance, a Permanent Supportive Housing project that is dedicated to serving households experiencing chronic homelessness must continue serving those households). This means that if two otherwise eligible households are seeking admission into the program—one who falls within the designated prioritized subpopulation and one who does not—the household who is in the designated prioritized subpopulation must be given priority for admission.

If there are no eligible individuals on a waiting list or applying for entrance to the program who fall within the dedicated or first priority subpopulation, organizations should not hold the unit vacant, but instead should serve the next prioritized subpopulation who is eligible and may benefit from the services being provided.

## **FAIR HOUSING IMPLICATIONS**

The CoC Standards establish priority subpopulations by project type (i.e. Permanent Supportive Housing); organizations may not set more restrictive priorities. For instance, while a Permanent Supportive Housing project may prioritize households experiencing chronic homelessness with a qualifying disability under these standards, beds may not be reserved for persons with a specific disability (i.e. physical disability). If an individual, who is otherwise qualified, but who does not have a physical disability, seeks admission and would benefit from the services offered, this person may not be excluded from the project. Organizations may reserve beds for persons with HIV/AIDS if the housing also receives funding from the Housing Opportunities for People with AIDS program (HOPWA).



## SOURCE OF INCOME DISCRIMINATION

Source of income discrimination is often difficult to spot because a discriminatory action may be less than obvious. In Maryland, source of income discrimination occurs when a landlord will not rent to someone because of a type of *legally acquired* income the tenant receives.

### EXAMPLES INCLUDE:

- Housing Vouchers
- PSH or RRH Assistance
- Veterans' Benefits
- Alimony or Child Support
- Public Assistance
- Retirement
- Employment Income

### EXAMPLES OF ILLEGAL SOURCES OF INCOME DISCRIMINATION INCLUDE:

- Informing tenants that they will not accept vouchers
- Advertise "no section 8 accepted"
- Charging higher rent or security deposit for tenants on public assistance
- Restricting recipients of housing assistance to certain floors or units
- Denying access to amenities

### SOURCE OF INCOME DISCRIMINATION AND MINIMUM INCOME REQUIREMENTS

This is one of the most common examples of source-of-income discrimination that clients receiving assistance will encounter. Many landlords will require that an applicant make a minimum of 3 times the monthly rent in order to qualify for the unit. This can tacitly disqualify most public-assistance recipients without ever having to explicitly exclude them. For example, if a unit costs \$1,400 a month to rent, 3 times that would require the tenant to be bringing in \$4,200 a month, well above cut-offs for most types of assistance. Landlords should therefore base minimum income on the tenant's portion of the rent with the subsidy applied, not the *total* rental amount. See example below:

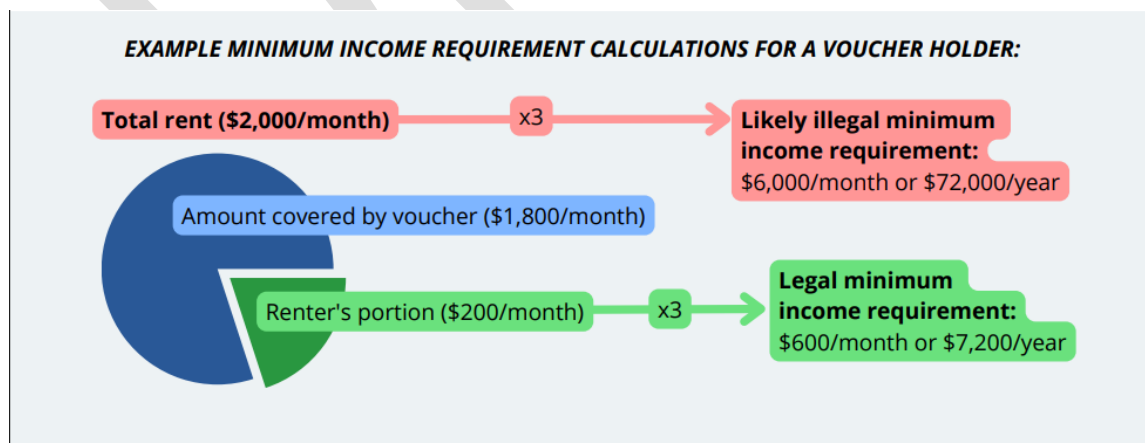


Image from the [Equal Rights Center](#)

## **VIOLENCE AGAINST WOMEN ACT PROTECTIONS (VAWA)**

As required by the Housing and Urban Development's (HUD) final rule, CoCs are required to adopt and implement certain housing protections that are available to all survivors of domestic violence, dating violence, sexual assault and stalking, regardless of sex, gender identity or sexual orientation who are applying for or living in units assisted by HUD programs. This requirement is in response to the [2022 Reauthorization of the Violence Against Women Act \(VAWA\)](#). The VAWA rule applies to all survivors and must be applied consistently with all nondiscrimination and fair housing requirements.

All MD BoS CoC, ESG and HSP funded emergency shelters, transitional housing, rapid rehousing, and permanent supportive housing projects are subject to the VAWA rule.

The MD BoS CoC expects that all applicable projects develop and implement an Emergency Transfer Plan which includes all required core components and is in compliance with 24 CFR 578.99(j)(8) and 24 CFR 5.2005(e).

Projects must submit their plan to the CoC Lead Agency upon request and should expect an evaluation and review of the process. VAWA Housing Protection resources can be found in [Appendix J](#).

## **FAITH-BASED ACTIVITIES**

Service providers and their staff shall not discriminate against any client or prospective client on the basis of religion, religious beliefs, a refusal to hold a religious belief, or a refusal to attend or participate in religious activities.

Money from federal or state homeless services grants cannot be used to directly fund any programming or activity that is exclusively religious in nature. Likewise, funded programs may not require or coerce participants to participate in religious activities as a condition for receiving temporary or permanent housing, or related services such as a meal.

However, organizations with religious missions may offer religious activities to participants provided that participation is voluntary, preferential treatment is not offered to those who choose to participate, and the religious programming is held at a separate time and location from the HUD funded programs.

Programs should make all efforts to reasonably accommodate the religious beliefs and practices of all program participants including providing times and space for daily prayer, providing accommodations for clients attending religious services and holidays, accommodations for religious dress.

## AMERICANS WITH DISABILITIES ACT (ADA) & REASONABLE ACCOMMODATIONS

### AMERICANS WITH DISABILITIES ACT (ADA) OVERVIEW

The Americans with Disabilities Act of 1990 or ADA is a civil rights law that prohibits discrimination based on disability. It ensures equal opportunities for individuals with disabilities in various aspects of public life, including employment, public accommodation, state and local government services.

### INTEGRATION AND ACCESSIBILITY (COMPLIANCE WITH *OLMSTEAD V. L.C.*)

Housing and supportive services must be offered in an integrated manner, such that persons with disabilities may enjoy a meaningful life within the community. Organizations shall offer housing and supportive services to enable individuals with disabilities to interact with nondisabled persons to the fullest extent possible.

Unjustified isolation of persons with disabilities constitutes discrimination on the basis of their disability. Individuals with disabilities should be given every opportunity to integrate into the community to the extent that they are willing and able. Clients should be placed in the most integrated setting provided that:

1. The client's treatment professionals determine that community supports are appropriate
2. The person does not object to living in the community
3. The provision of services in the community would be a reasonable accommodation when balanced with other similarly situated individuals with disabilities

### REASONABLE ACCOMMODATIONS

Under the Americans with Disabilities Act, people with disabilities are entitled to "reasonable accommodation." A reasonable accommodation is a modification to rules, policies, and procedures to help people with various types of disabilities access or use services. These accommodations apply to physical structures, communication methods, paperwork completion and eligibility screening unless it would change the "fundamental nature" of a program. Reasonable accommodation for participants with disabilities must be granted through eligibility verification and completing necessary paperwork, especially as it pertains to requests for time extensions related to medical issues or hospitalizations. It is critical that all programs are aware of laws governing reasonable accommodation and have proactive plans in place for addressing the needs of people with disabilities.

Organizations are required to provide reasonable accommodation and structural modifications for persons with disabilities. For federally funded housing, the recipient is responsible for paying for the modification. Organizations must inform applicants during the intake process of their right to request a reasonable accommodation or modification. A reasonable modification is a physical change, and a reasonable accommodation is a change to rules, policies, or services so that a person with a disability has equal opportunity to use and enjoy a dwelling unit or common space. An example of a reasonable modification is installing a grab bar in the bathroom of a person with a disability, while examples of reasonable accommodations include allowing a person with a disability to have a service animal.

## EXAMPLES OF REASONABLE ACCOMMODATIONS

- Providing and installing grab bars in the resident's dwelling unit to accommodate a resident who has a mobility disability
- Providing space and time for pumping for breastfeeding program participants
- Assigning an accessible parking space for a person with a mobility impairment
- Permitting a tenant to transfer to a ground-floor unit or to another unit that meets a tenant's disability-related needs
- Adjusting a rent payment schedule to accommodate when an individual receives income assistance
- Permitting an applicant to submit a housing application via a different means

## SERVICE ANIMALS

All homeless service projects must provide reasonable accommodations to clients who have service animals. This applies to transitional housing, permanent housing (PSH and RRH), as well as emergency shelters.

- **DEFINITION:** under the Americans with Disabilities Act (ADA), a service animal is defined specifically as a dog (or miniature horse) that has been trained to perform tasks directly related to a person's disability.
- **EXAMPLES OF SERVICE ANIMALS:** Types of service animals include, but are not limited to:
  - a. Guide dogs: serve as a travel tool for persons with severe visual impairments or who are blind.
  - b. Hearing or Signal Dogs: dog that has been trained to alert a person with significant hearing loss or who is deaf when a sound, e.g., knock on the door, occurs.
  - c. Psychiatric Service Dogs: can be trained to perform a variety of tasks that assist individuals with disabilities to detect the onset of psychiatric episodes and lessen their effects.
  - d. Sensory Signal Dogs: a dog trained to assist a person with autism, alerting the handler to distracting repetitive movements (e.g., hand flapping).
  - e. Seizure Response Dog: a dog trained to assist a person with seizure disorder.
- **ACCESS:** Service animals are required by law to be allowed in housing programs, including emergency shelters. Programs cannot deny access to service animals and must accommodate individuals with disabilities who rely on these animals for assistance. Service animals are exempt from all pet deposits or other surcharges for animals.
- **VERIFICATION:** Shelters cannot require documentation or proof of training for a service animal. Rather, they can limit their inquiry to two questions:
  - a. Is the dog a service animal required because of a disability?
  - b. What work or task has the dog been trained to perform? (Note that the client does not need to disclose their specific disabling condition).
- **LICENSING, TRAINING AND HEALTH RECORDS OF SERVICE ANIMALS:** While there are websites available for certifying service animals, a service animal does not need to be registered or certified with any organization in order for its owner to benefit from a reasonable accommodation. A person may not be required to produce proof of vaccinations or training (28 CFR § 36.302(c)(6)).
- **ACCOMMODATING PERSONS WITH ANIMAL ALLERGIES OR FEAR OF ANIMALS:** When providing reasonable accommodations for persons with disabilities who use service animals,

programs may be confronted with the challenges of accommodating those who have allergies to animal dander or have a severe fear of animals. An example of a reasonable accommodation includes moving the affected person to a different bed or unit. Accommodating persons with animal allergies or fear should be done in a manner that does not stigmatize, blame, or otherwise draw unwanted attention to the owner of the service animal.

## EMOTIONAL SUPPORT ANIMALS

Transitional housing and permanent housing programs (PSH or RRH) are required to accept persons with emotional support animals. In Maryland, landlords must provide accommodations for persons with emotional support animals, including an exemption from pet deposits.

Emergency shelters have discretion to establish their own regulations surrounding emotional support animals. However, the Maryland Balance of State strongly encourages that programs make every effort to provide reasonable accommodations when possible. Shelters may set their own policies for accommodating emotional support animals when operating in a congregate setting. Shelters that provide individual units for clients or families are required to accommodate persons with emotional support animals.

### DEFINITION

#### Emotional Support Animals vs. Service Animals

Emotional support animals provide comfort and emotional support but are not trained to perform specific tasks related to disability.

## ANIMAL HANDLING REQUIREMENTS

Shelters may have policies and procedures surrounding the handling of support animals. However, providers should always err on the side of accommodation with an understanding that homelessness is a stressful situation for animals as well as their handlers.

- **LEASHING REQUIREMENTS:** providers may have policies requiring that support animals have a harness, leash, or other tether unless the handler is unable to use one because of their disability or the tether would interfere with the support animal's work.
- **DANGEROUS BEHAVIOR:** a shelter may deny access to a support animal if its behavior is unacceptable or if the person with the disability is not in control of the animal. Uncontrolled barking, jumping on other people, running away from the handler may all be grounds for dangerous behavior. However, programs are strongly encouraged to exercise discretion and only exclude a client with a support animal if there is a direct threat that would endanger the health or safety of another person and the animal was not provoked. Persons with disabilities should be entitled to due process and a chance to appeal when a determination is made about the dangerousness of an animal. Homelessness is stressful for animals as well and expecting perfect behavior from a support animal is unrealistic given the client and their animal's circumstances.
- **FEEDING AND CARE:** clients with support animals are responsible for providing food, managing the healthcare and medication needs, proper waste disposal, and providing for any other of the animal's needs. Clients with support animals, however, may request reasonable accommodations from the shelter if their disabling condition makes care for their animal

difficult (see above for definition of a reasonable accommodation). Clients with service and emotional support animals are responsible for securing the animal if they happen to leave the animal at home. Staff members are not responsible for caring for animals when unattended.

- **HOUSE BROKEN STATUS:** support animals may be denied access to shelter if it is evident that they are not housebroken. Again, service providers should exercise discretion in making a determination about whether or not an animal is housebroken. Isolated accidents should not be necessarily construed to be *per se* proof that the animal is not housebroken.
- **MINIATURE HORSES:** while miniature horses are indeed covered under the Americans with Disabilities Act, all programs are permitted to assess the type, size, weight, and accommodations necessary for the miniature horse before allowing access. Shelters may reasonably deny access to miniature horses.

## BoS CoC REQUIREMENTS AND EXPECTATIONS

### COORDINATED ENTRY SYSTEM

#### BACKGROUND

Coordinated Entry is a powerful tool in the CoC that ensures that people experiencing or are at-risk of homelessness can readily find and navigate crisis intervention assistance. It is designed to ensure that people experiencing a housing crisis are prioritized for and matched with the most appropriate housing intervention and services as quickly as possible. It aims to standardize the access, assessment and referral process across all providers in the CoC.

#### POLICY

Both the CoC Interim Rule and ESG Interim Rule require that projects receiving CoC Program and ESG Program funds must use a Coordinated Entry System (CES) established by the CoC. While HUD mandates that agencies receiving the funding sources listed above participate in CES, homelessness cannot be ended by federally funded homeless service providers alone. Therefore, the MD BoS CoC expects all projects receiving CoC, ESG and HSP Program funding to participate in the CES and highly recommends non-federally funded agencies to participate in order to create a more consistent, transparent, fair and reliable system of care.

#### PROCEDURE

In order to be considered operational and in compliance, the local coordinated entry process must comply with the most current version of the MD BoS Coordinated Entry Policy and Procedures. CoC, ESG and HSP funded projects at a minimum, must participate in the locally established Coordinated Entry System process. Once a community has implemented its CES, permanent housing projects (PSH, RRH) must fill available units with referrals from CES. Households that have gone through Coordinated Entry and have been referred will have completed the CoC Assessment, which includes demographic data, household information, housing needs and barriers, and the Self Sufficiency Matrix.

### HMIS PARTICIPATION

All CoC, ESG and HSP funded projects are required to participate in the CoC Homeless Management Information System (HMIS) Implementation and comply with the MD BoS CoC HMIS Policies and Procedures.



Victim service providers are prohibited from entering participant information into HMIS under federal guidelines and therefore will use a comparable database in order to report data as necessary.

The CoC strongly encourages non-CoC/ESG/HSP funded organizations to participate in HMIS to improve and streamline coordination of services.

## LIVED EXPERTISE PARTICIPATION

Each CoC, ESG and HSP funded project is expected to engage participants in ongoing program evaluation and quality improvement processes. To support this effort, at a minimum, each project is required to survey or interview participants at least annually to obtain feedback on program service quality, the housing and service environment, and opportunities for improvement. Participating organizations are also expected to have participant representation on a governing or decision-making body.

Persons with Lived Expertise who are participating in CoC efforts may be eligible to receive stipends and support necessary to complete the requested tasks. The CoC Lived Experience Stipend Policy can be found in the [MD BoS CoC Governance Charter](#).

## ACCESS TO MAINSTREAM RESOURCES

The MD BoS CoC expects that every organization funded through the CoC, ESG or HSP programs will strive to increase client access to public benefits and assistance. Programs will coordinate with and access mainstream and other targeted homeless resources.

Organizations should assess and assist participants with obtaining any mainstream resource for which they may be eligible for, including: Temporary Assistance for Needy Families (TANF), Veterans Health Care, Supplemental Nutrition Assistance Program (SNAP), Medicaid, Federally Qualified Health Plan (Affordable Care Act), Children's Health Insurance Program (CHIP), Unemployment Insurance (UI), Women, Infants, and Children (WIC), Supplemental Security Income (SSI), Social Security Disability Insurance (SSDI), and Temporary Disability Assistance Program (TDAP).

Where possible, organizations should streamline processes for applying for mainstream benefits, such as the use of a singular form to apply for benefits or collecting necessary information in one step.

Programs should not necessarily limit the offered mainstream resources solely to public benefits and are strongly encouraged to form relationships and manage referrals for other privately funded resources such as mental healthcare, substance use treatment, and employment development resources as necessary to ensure their clients' stabilization.

## EDUCATIONAL STANDARDS

CoC projects that serve households with children or unaccompanied youth, must designate at least one staff member to:

- Ensure that all school-age children are receiving the full rights and benefits of the McKinney-Vento Act, which requires school districts to lower barriers for homeless students and guarantees certain services.
- Provide materials to families with school-age children to ensure they are aware of the [McKinney-Vento Rights](#) at program intake.
- Support families in requesting services from the homeless student liaison located at their school of origin or local school. Ensure that all students are enrolled as quickly as possible and are receiving appropriate transportation, uniform, and educational fee waiver assistance.
- Provide referrals and community resources to families with young children for pre-school, Head Start, or childcare.

## RECORD KEEPING REQUIREMENTS

The CoC Program Interim Rule requires written procedures to ensure the security and confidentiality of all records containing personally identifying information of any individual or family who applies for and/or receives Continuum of Care assistance.

Thus, the MD BoS CoC requires that the documentation necessary for the effective delivery and tracking of services is kept up to date and that the confidentiality of participant households is maintained. Projects must make their data collection and sharing methods transparent so participant households are well-informed about how their information is maintained, stored and used. Participating households should be provided with information in written form before receiving project assistance.

## PROCEDURE

1. The file maintained on each participant household should, at a minimum, include information required by HUD, including but not limited to documentation of homeless status, documentation of disability, participation agreements, service plans, case notes, information on the services provided both directly and through referrals to community agencies and individuals, and any follow-up and evaluation data collected.
2. Participant information must be entered into HMIS in accordance with the data quality standards, timeliness standards, and additional requirements found in the HMIS Policies and Procedures manual. At a minimum, projects must record the date the household enters and exits the project, Universal Data Elements (UDEs) for each household member, and annual assessments for households that remain in a project for a year or more. The participant household's signed Release of Information (ROI) for HMIS should also be included in the file. If a project is required to use a comparable database instead of HMIS, the same data elements must be entered, and the ROI for the comparable database should be kept in the household's file.
3. The project will maintain each participant file in a secure place and shall not disclose information from the file without the written permission of the participant, as appropriate, except to project staff and other agencies as required by law. Participants must give informed consent to release any identifying data to be utilized for research, teaching, and public interpretation.
4. All records pertaining to Continuum of Care funds must be retained for the greater of 5 years or 5 years after the expenditure of all funds from the grant under which the project participant

was served. Copies made by scanning, photocopying, or similar methods may be substituted for the original records. Where Continuum of Care funds are used for the acquisition, new construction, or rehabilitation of a project site, records must be retained until 15 years after the date that the project site is first occupied, or used, by project participants. Records pertaining to other funding sources must adhere to those record retention requirements.

5. All records pertaining to each fiscal year of ESG funds must be retained for the greater of 5 years or the period specified below. Copies made by microfilming, photocopying, or similar methods may be substituted for the original records.
  - a. Documentation of each project participant's qualification as a family or individual at risk of homelessness or as a homeless family or individual and other project participant records must be retained for 5 years after the expenditure of all funds from the grant under which the project participant was served;
  - b. Where ESG funds are used for the renovation of an emergency shelter and the renovations involve costs charged to the ESG grant that exceed 75 percent of the value of the building before renovation, records must be retained until 10 years after the date that ESG funds are first obligated for the renovation; and
    - i. Where ESG funds are used to convert a building into an emergency shelter and the costs charged to the ESG grant for the conversion exceed 75 percent of the value of the building after conversion, records must be retained until 10 years after the date that ESG funds are first obligated for the conversion.

## CASE MANAGEMENT STANDARDS

Each program must craft case management protocols that are appropriate for the project type and target population. For example, case management for a street outreach program would utilize participant engagement strategies and service planning components tailored to the participant's experience of living on the street and focus on stable housing, whereas case management in transitional shelter supports participants who are already in housing and working to address barriers to long-term stability.

Programs that offer a case management program should include the following core elements:

- **ASSESSMENT:** an evaluation detailing the residents' service needs and resources to meet the service needs, current and potential strengths and areas to work on. Assessments should be conducted at intake and regularly throughout client program enrollment.
- **PLANNING:** developing a case plan in collaboration with each resident containing goals and timelines.
- **REFERRALS:** information regarding the process of referring residents to all necessary internal and external services.
- **MONITORING:** the continuous evaluation of the case plan with the resident to monitor progress, reassess goals and priorities, and identify new goals as appropriate.
- **ADVOCACY:** interceding appropriately on behalf of a resident or group of residents to ensure access to needed services or resources.

- **COLLABORATION:** developing partnerships with relevant community-based and/or government agencies to coordinate and provide services to residents. Attend case conferences as appropriate.
- **FOLLOW-UP:** providing support and assistance directly, or through referrals to agencies, to residents who have moved to the community.

Further, case management and front-line staff throughout the CoC are expected to maintain a foundational knowledge of homeless related services, best practices and pertinent regulatory requirements. The CoC may provide resources and technical assistance opportunities to meet these needs. Including training opportunities, knowledge bases and as needed one on one support.

## PROGRAM BANS, TERMINATIONS AND APPEALS

Programs may make decisions that negatively impact client participation, but only in limited situations. These decisions must follow a consistent and fair process that considers the clients' individual circumstances. Clients have the right to request a review by someone who was not involved in the original decision.

This section explains how to handle serious actions like termination, suspension, or banning someone from a program. These actions should only be taken when necessary, like in safety-related situations. Because these decisions can affect a person's access to critical services like housing, programs must be careful and fair. Clients must be told why the action is being taken, given a chance to see any evidence, and allowed to appeal the decision with a neutral third party.

### AGENCY-LEVEL PARTICIPANT TERMINATION

#### AGENCY INITIATED TERMINATION

CoC agencies must have written termination policies that explain the rules, when a termination can happen, and how clients can appeal. Terminations should only occur in the most serious situations, including repeated failure to pay rent, repeated lease violations, threats to safety, or property damage.

#### IMPORTANT NOTE

Terminating a participant from a project may lead to an immediate return to homelessness. All projects in the MD BoS CoC should seek to avoid terminating participants whenever possible. When participants must be terminated from a project, every effort should be made to ensure that the household does not exit into homelessness. Termination from a project does not bar the project from providing further assistance at a later date to the same individual or family.

#### CLIENT INITIATED TERMINATION

Clients may choose to leave a program at any time. When a client shares they are considering leaving, program staff should engage with the client to understand their reasons and offer support. The goal is

to help address issues or barriers, if appropriate, in hopes of preventing the client from exiting unnecessarily.

### **LANDLORD INITIATED TERMINATION**

Participant households must be allowed formal due process. All termination processes must comply with the Md. Code, Real Property § 8-402, meaning that if a project must terminate a lease with a household, the project must follow the eviction process laid out by Maryland Law. “Immediate terminations/evictions” are disallowed in the Md. BoS CoC, as such a policy does not recognize the rights of individuals receiving assistance under the due process of law.

#### **IMPORTANT NOTE**

Project-based permanent housing units have a unique configuration where the client serves as both the landlord and the service provider. In this case, the role of service provider may conflict with the role of property management. For instance, a client may tell their case manager information that they would otherwise not tell their landlord and, if those roles are filled by the same people, may be a conflict of interest.

This gives the project-based program considerably more power over clients than other types of permanent housing providers. It is important that whoever serves in the role of case manager keep information confidential from staff that serve in a property-management capacity. Project based housing providers are still landlords and must comply with all Maryland eviction laws before terminating the client from the program.

### **PERMANENT HOUSING PROJECT INITIATED TERMINATION**

PSH providers serving hard-to-house populations of homeless persons, such as people experiencing chronic homelessness, must exercise judgment and examine all extenuating circumstances when determining if violations are serious enough to warrant termination. Terminations should only occur in the most severe circumstances.

### **PROCEDURE**

The MD BoS CoC allows each project to establish its own termination procedure, provided that such a procedure is in compliance with federal guidelines and the Written Standards.

In terminating assistance to a participant household, the project must provide a formal, written process that gives participants a fair opportunity to understand and respond to the decision.

This process, at a minimum, must consist of:

1. Giving the participant a written copy of the project rules, termination process, and lease/occupancy agreement (if applicable) when they enter the project
2. All reviews, actions, and decisions related to terminations must be documented and kept on file at the program. Programs should be prepared to produce all the documentation related to the termination for review

- a. For the safety of any witnesses or victims, program administrators are not required to disclose the names of witnesses to the client, but nonetheless must retain a record in the event of an appeal.
3. Providing written notice to the participant that clearly states the reasons for termination, including whether the termination includes a temporary ban
4. Providing the participant with the opportunity to present written or oral objections before someone other than the individual (or a subordinate of that person) who made or approved the termination decision
5. Explaining the appeals process so the participant can challenge a termination decision
6. Giving the participant written notice of the final decision quickly after it is made
7. If the termination happens during an emergency situation, written notice is not required—but the participant must still be allowed to appeal and have their case reviewed

#### **DEFINITION: DUE PROCESS**

The right to have an unbiased hearing, the right to be given sufficient notice of termination, the right to be given a reason for termination, the right to review evidence against them and present own evidence, the right to have reason for termination and evidence recorded, the right to have an advocate present at termination hearing; and a final decision based exclusively on the evidence presented.

### **AGENCY-LEVEL PARTICIPANT BANS**

Beyond terminations, bans—which forbid clients from re-entering a program after termination—should only be used as a measure of last resort and when no other alternatives exist. This is especially true for bans from emergency shelters. Emergency sheltering can often be a life-saving intervention that may have life-or-death consequences if a client is unable to gain access. Therefore, all bans from shelter should be made with full consideration that they could lead to extreme consequences for health and safety and thus should only be instituted when absolutely necessary.

Clients should only be banned for conduct that arises from serious safety concerns, including violence, physical assault, credible threats of violence, stalking, or weapons violations. Bans may only be instituted to protect the safety of staff and other clients, not as a means of punishment or discipline. Clients have the right to challenge bans and potentially overturn them if they are no longer necessary.

The process for determining a ban and the length of a ban should take the following factors into consideration:

- The severity and nature of the client’s offense
- Whether the offense resulted in personal injury or property damage
- The number of victims and the severity of the victims’ injuries
- The presence or absence of a weapon
- Whether this client has committed this or similar offense prior to the one which led to this ban
- The likelihood that an offense of this nature and severity will occur again
- Whether the client was provoked



- Any mitigating circumstances such as whether the conduct was a manifestation of the client's trauma, disability, or mental health condition
- The ongoing safety risk to existing clients and staff members
- The possibility that this client's presence will create a hostile environment for other clients and staff members
- Whether police were involved and the offense resulted in an arrest
- Any factual disputes that exist (e.g., two clients have different versions of the same events)

Ban policies are not unlimited and must follow these rules:

- Clients cannot be banned from a program for conduct that occurred at a different program
- Clients must be given notice of the length of the ban
- Clients cannot be banned based only on rumor or hearsay alone. All decisions must be supported by written documentation, and programs must retain this documentation in case it is requested later
- Clients may not receive a lifetime ban, no matter how serious the offense
- If a client is banned from shelter, they must still be given emergency accommodations during extreme weather. This might include an alternate location, like a hotel
- After one year, clients must be allowed to ask for the ban to be reviewed again. Programs should review the request in good faith and consider whether the ban is still necessary

#### **IMPORTANT NOTE**

Local Homeless Coalitions are still responsible for the housing outcomes of clients that have bans from programs, regardless of the length of the ban. Clients who are banned must stay on all Coordinated Entry System and By Name Lists.

## **AGENCY-LEVEL APPEALS AND GRIEVANCES**

### **APPEALS**

Any time an adverse action is taken against a client, the client must have a right to appeal and review the decision to ensure that the client's rights were honored. This includes appeals related to terminations or bans. Clients must be given procedural rights to ensure that they are being treated fairly. All grievances, terminations and bans must be handled with the utmost care and reflect an understanding of the effects of trauma, disability and stress on a client's ability to navigate these procedures.

Appeals processes must include:

- Providing clients with adequate notice of the action and policies at program intake
- The ability to request a review of the action by a program supervisor
- The ability to file a grievance

### **GRIEVANCES**

CoC Program Participants may submit a grievance when there is dissatisfaction with the outcome of the assistance from a provider agency. In this circumstance, a CoC Program Participant is an individual

or household who is currently or previously receiving services, or is attempting to receive services, with a CoC participating organization. Participants who believe that they were treated by staff, volunteers, a partner organization, or other entity in an unjust or improper manner have the right to file a formal grievance form with a designated representative.

All organizations receiving CoC, ESG and HSP funds must have a written grievance procedure, including a formal process for participants to provide feedback. In addition, organizations must make the grievance process available to all participants.

Participant grievances must be addressed at the lowest organizational level before escalation. Grievances should first be addressed with the provider organization, then elevated to the Local Homeless Coalition, and finally to the MD BoS CoC if unresolved.

Agency level policies must include:

- A process that clearly explains how to report concerns
- Clear steps for submitting a grievance, including any required forms or supporting documentation
- Detailed information about the grievance hearing process, including who will review the grievance, how the hearing is conducted, and who can attend
- Established timelines for each step of the process
- Programs must review and respond to all grievances in a timely manner
- All reviews, actions, and decisions related to the grievance must be documented and kept on file

If the participant believes the grievance was resolved unfairly, they must be allowed to appeal to a higher authority within the program—typically the Local Homeless Coalition.

See Appendix xxx for a sample policy template.

## LOCAL HOMELESSNESS COALITION-LEVEL GRIEVANCES

Local Homelessness Coalitions are expected to establish a local grievance policy and process to address concerns that are not resolved at the agency level. Local policies at the LHC level should include:

- A process that clearly explains how to report concerns
- Instructions for submitting a grievance, including any required forms or supporting information
- Detailed information about how grievance hearings are conducted, who reviews the grievance, and who may attend
- Established timelines for each step of the process
- The LHC must review and respond to all reported grievances in a timely manner
- All reviews, actions, and decisions related to the grievance must be documented and kept on file

If the program participant believes their grievance was unfairly resolved at the provider level, they can appeal the decision to the Maryland Balance of State CoC.

The following image provides a general overview of the anticipated CoC grievance process workflow.

## General Order of Operations for Grievances & Appeals

