



Supportive Housing Information and Resources

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Introduction

This publication provides information for developers, owners, management agents, administrators, and service providers about policies, procedures, and expectations for developments with Supportive Housing (SH) units and rental assistance programs serving people experiencing homelessness and People with Disabilities (PWD).

This publication is intended for informational purposes only and does not supersede the requirements of any applicable statutory requirements, funding source requirements, program guides, request for proposals, loan documents, declaration or related documents.

Contact Minnesota Housing staff at the email address identified on the specific program page on our [website](#) for development and program specific questions. For supportive housing questions, contact supportive housing staff at supportive.housing@state.mn.us. For general questions related to the Multifamily Consolidated RFP, contact mhfa.consolidated.rfp@state.mn.us.

Chapter 1 – Purpose and Background

1.01 Ending Homelessness

In 2004, in response to a dramatic increase in Homelessness, Minnesota’s Business Plan to End Long-Term Homelessness was created to address the housing and service needs for people trapped in the cycle of homelessness. Based on the estimated need at the time, the goal was to create 4,000 Permanent Supportive Housing (PSH) opportunities for people experiencing Long-Term Homelessness (LTH). The Minnesota Housing Finance Agency (Minnesota Housing) surpassed this goal in 2012, but there continues to be a large number of people experiencing homelessness who need Supportive Housing (SH).

The Minnesota Interagency Council on Homelessness (MICH) completed a new state plan to prevent and end homelessness in 2014 and was aligned with federal policy goals and timelines to end veterans, chronic, family, and youth homelessness. The plan is reviewed and updated every two years to address changing needs and resources. Refer to the current [action plan](#), focused on housing, health and racial justice.

1.02 Minnesota Housing Strategic Objectives

In Minnesota, over 7,900 people are homeless each night. While over 6,000 of them find shelter for the night, an estimated 1,770 people sleep outside without shelter, an increase of 110% since 2015 (HUD’s 2019 Point-in-Time count of the homeless population). A person of color or Indigenous individual in Minnesota is at least 13 times more likely to experience homelessness than a person who is white/non-Hispanic (Source: [Minnesota Housing’s 2024 – 2027 Strategic Plan](#) - Minnesota Housing Analysis of data from the U.S. Census Bureau, American Community Survey (1-Year Sample, 2021), and HUD’s 2010-2022 Point-in-Time counts of the homeless population.)

Homelessness is the most severe form of housing instability and encompasses many societal failures – a woefully inadequate supply of housing that is affordable, an unequitable housing system, disparities, trauma, and the intersection of housing, physical and behavioral health, employment, and education. The state has responded, but the severity of the housing crisis remains a significant challenge (Source: [Minnesota Housing’s 2024 – 2027 Strategic Plan](#)).

To meet the goals of the state plan to prevent and end homelessness, Minnesota Housing’s Strategic Plan has several strategic objectives to support people needing services. A primary goal of the plan is to create new affordable and units, especially for populations that have been historically underserved. To this end, Minnesota Housing provides priorities and incentives through funding opportunities for housing developers and organizations to create affordable and Supportive Housing units. These

funding opportunities includes the Multifamily Consolidated Request for Proposals (Consolidated RFP) for capital funding, as well as rental assistance and operating subsidy programs and initiatives.

Equity and Inclusion is a key objective of the Walz-Flanagan Administration’s One Minnesota Plan, and [Minnesota Housing’s strategic plan](#) outlines action steps to create an inclusive and equitable housing system, including:

- Addressing systemic barriers that create housing inequities
- Supporting solutions that increase housing stability and access
- Analyzing outcomes and program processes by race/ethnicity, disability status, and other characteristics that reflect inequity, and
- Acting where populations are not being served equitably

All Supportive Housing should be designed to address equitable housing access for populations that have been historically excluded from housing and overrepresented in the homeless population.

1.03 Why Permanent Supportive Housing

Permanent housing with supportive services is a proven intervention for assisting households with histories of homelessness and barriers to accessing and maintaining housing. Permanent Supportive Housing (also referred to as Supportive Housing) improves housing stability, income, employment, health, and many other quality of life factors. Research demonstrates that individuals in Permanent Supportive Housing (PSH) use fewer emergency services and fewer resources in high-cost systems such as emergency medical treatment, inpatient psychiatric care, detox, jail, and shelter.

Supportive housing is often the most appropriate intervention for people who are experiencing homelessness and have faced systemic barriers to housing. Minnesota Housing offers various capital and rental assistance funding resources and incentives for developers and administrators to create supportive housing units targeting the highest need households experiencing homelessness.

1.04 Permanent Supportive Housing Funding Priority Eligibility – From Long-Term Homelessness to High Priority Homeless

Since 2005, Minnesota Housing’s funding priority for housing developments with Supportive Housing units and rental assistance programs has been to create units for people experiencing Long-Term Homelessness (LTH). The intent has always been to prioritize households with the highest needs for Supportive Housing. With the implementation of Coordinated Entry (CE) across the state, Minnesota Housing transitioned the eligibility priority from LTH to High Priority Homeless (HPH) in 2018.

Change in 2018: High Priority Homeless (HPH)

In recognition of other important indicators besides the length of homelessness and new assessment tools to determine a person’s need and priority for Supportive Housing, and with the implementation of Coordinated Entry providing the ability to be more nimble in response to local needs and establish more timely priorities, funding criteria for Minnesota Housing funded Supportive Housing units is now HPH households. Existing properties with units restricted to serve LTH households have the option to use the HPH eligibility criteria instead of the LTH eligibility criteria, effective January 1, 2019. Owners of these properties were notified of the option to change to HPH eligibility and do not need approval from Minnesota Housing to implement the change. The Housing Trust Fund (HTF) Program Rental Assistance now requires HPH eligibility for households entering the program after October 1, 2019.

All funding sources for housing, operating expenses, and services must be considered to determine the eligibility criteria for households in Supportive Housing units. The most restrictive requirement will apply. For example, if a unit is restricted to HPH and Chronically Homeless, the applicant must meet the Chronically Homeless eligibility criteria. Or if a unit is restricted to HPH but has LTH Housing Support funding, the tenant will still need to meet the LTH eligibility for Housing Support.

Refer to Chapter 2 for the LTH and HPH definitions and a comparison of the LTH and Chronically Homeless definitions.

Refer to Appendix C for common LTH eligibility questions.

Documentation of Homelessness Eligibility: Units designated to serve people who are LTH or HPH must verify applicant eligibility and retain documentation in the tenant file as described later in Chapter 11 – Monitoring and Reporting Requirements for LTH/HPH.

Refer to Chapter 5 for more information on Coordinated Entry.

1.05 Minnesota’s Olmstead Plan

[Minnesota’s Olmstead Plan](#) was approved by the U.S. District Court in September 2015 and is revised each year with public input. The plan is a broad series of measurable goals to help ensure people with disabilities are living, learning, working, and enjoying life in the most integrated setting. The plan is meant to help people with disabilities have the opportunity to:

- Live close to their family and friends
- Live more independently
- Engage in productive employment
- Participate in community life

In Supportive Housing settings, especially where the majority of the units are serving people who are homeless and/or who have disabilities, developers should be mindful of the Olmstead Plan principles –

people should have as much choice and independence as possible. They should have a lease and control of their own unit, have the freedom to come and go as they please, have visitors when they choose, make their own choices for daily activities, and have opportunities to participate fully in community life. And, to the extent possible, people with similar disabilities should not be grouped together at the property, and they should be able to choose their own services and service provider.

Housing settings that provide Medicaid Home and Community Based Services (HCBS) must meet the [DHS Standards for the HCBS Settings Rule](#). HCBS services include waiver programs and Housing Stabilization Services.

1.06 Creating Units for People with Disabilities (PWD)

Minnesota Housing's annual Multifamily Consolidated RFP funding round for capital funding also provide incentives to create units for People with Disabilities.

Refer to Chapter 12 for more information about PWD units.

Chapter 2 – Homeless and Housing Definitions

There are different definitions of Homelessness for federal (primarily the Department of Housing and Urban Development (HUD)) and state resources (primarily Minnesota Housing and the Department of Human Services (DHS)). When a program or project is funded with multiple funding sources, the most restrictive criteria will apply. These definitions are organized by funding source.

2.01 Homeless Definitions

The Department of Housing and Urban Development (HUD) Definitions	
Term	Definition
Chronically Homeless (HUD)	<p>A “Chronically Homeless” individual is defined to mean a Homeless individual with a disability who lives either in a place not meant for human habitation, a safe haven, or in an Emergency Shelter, or in an institutional care facility if the individual has been living in the facility for fewer than 90 days and had been living in a place not meant for human habitation, a safe haven, or in an Emergency Shelter immediately before entering the institutional care facility.</p> <p>In order to meet the “Chronically Homeless” definition, the individual also must have been living as described above continuously for at least 12 months, or on at least four separate occasions in the last 3 years, where the combined occasions total a length of time of at least 12 months. Each period separating the occasions must include at least 7 nights of living in a situation other than a place not meant for human habitation, in an Emergency Shelter, or in a safe haven.</p> <p>Chronically Homeless families are families with adult heads of household who meet the definition of a Chronically Homeless individual. If there is no adult in the family, the family would still be considered Chronically Homeless if a minor head of household meets all the criteria of a Chronically Homeless individual.</p>
Homeless (HUD)	<p>HUD has four categories of Homeless definitions for eligibility for different types of programs. Eligibility for Supportive Housing uses the following two definitions:</p> <ol style="list-style-type: none"> 1. An individual who lacks a fixed, regular, and adequate nighttime residence, meaning: <ol style="list-style-type: none"> a. An individual or family with a primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings, including a car, park, abandoned building, bus or train station, airport, or camping ground; b. An individual or family living in a supervised publicly or privately operated shelter designated to provide

The Department of Housing and Urban Development (HUD) Definitions	
Term	Definition
	<p>temporary living arrangements (including congregate shelters, Transitional Housing, and hotels and motels paid for by charitable organizations or by federal, state, or local government programs for low-income individuals); or</p> <p>c. An individual who is exiting an institution where he or she resided for 90 days or less and who resided in an Emergency Shelter or place not meant for human habitation immediately before entering that institution;</p> <p>2. Any individual or family who:</p> <p>a. Is fleeing, or is attempting to flee, domestic violence, dating violence, sexual assault, stalking, or other dangerous or life-threatening conditions that relate to violence against the individual or a family member, including a child, that has either taken place within the individual's or family's primary nighttime residence or has made the individual or family afraid to return to their primary nighttime residence;</p> <p>b. Has no other residence; and</p> <p>c. Lacks the resources or support networks, e.g., family, friends, and faith based or other social networks, to obtain other permanent housing.</p>
Minnesota Homeless Definitions	
Term	Definition
Homeless (Minnesota programs)	A household lacking a fixed, adequate, nighttime residence (includes doubled up)
Households at Significant Risk of Long-term Homelessness (Minnesota Housing)	Includes (a) households that are Homeless or recently Homeless with members who have been previously Homeless for extended periods of time and are faced with a situation or set of circumstances likely to cause the household to become Homeless in the near future, and (b) persons who were previously Homeless and will be discharged from correctional, medical, mental health or treatment centers who lack sufficient resources to pay for housing and do not have a permanent place to live.
Households at Significant Risk of Long-Term Homelessness (DHS)	Families with minor children, or unaccompanied youth who have had two or more episodes of Homelessness that have resulted in shelter stays. This definition is used for DHS's LTH Supportive Services Grant Program.

The Department of Housing and Urban Development (HUD) Definitions	
Term	Definition
Households Experiencing Long-Term Homelessness (LTH) (Minnesota Housing and the Department of Human Services)	<p>Persons including individuals, unaccompanied youth, or families with children who lack a permanent place to live continuously for a year or more or at least four times in the past three years. Time spent in an institutional care or correctional facility shall be excluded when determining the length of time a household has been Homeless except in the case where an individual was in a facility for fewer than 90 days and was Homeless at entry to the facility.</p> <ol style="list-style-type: none"> 1. Doubled Up/Couch Hopping: Doubled up or couch hopping is considered an episode of Homelessness if a household is doubled up with another household (and duration is less than one year) and couch hops as a temporary way to avoid living on the streets or in an Emergency Shelter. 2. Transitional Housing (TH): Time spent in TH is a neutral event. It is not considered time housed or time Homeless when determining LTH eligibility. 3. Institutions: Time spent in an institutional care (treatment, hospital, foster care, etc.) or a correctional facility (jail or prison) is a neutral event. It is not considered time housed or time Homeless except in the case where an individual was in a facility for fewer than 90 days and was Homeless at entry to the facility. That time can be considered time Homeless. <p>Evaluate the housing history prior to and after TH or an institutional stay to determine if it meets the state’s LTH definition.</p> <p>NOTE: Minnesota's definition does not require that the person have a disabling condition.</p> <p>Refer to Appendix C for frequently asked questions for guidance on determining LTH eligibility.</p>
High Priority Homeless (HPH) (Minnesota Housing)	Households (individuals, families with children or youth) prioritized for Permanent Supportive Housing (PSH) through the Coordinated Entry (CE) system.
Difference between Minnesota Long-Term Homelessness and HUD Chronically Homeless definitions	
<p>For HUD Chronically Homeless, an adult in the family or minor head of household must have a disability and meet the HUD definition of Homelessness the night before program entry. These are not requirements for Minnesota LTH. The household does not have to have a member with a disability or be HUD Homeless the night before program entry. Minnesota’s LTH definition also does not consider the total length of time for the four episodes of Homelessness.</p>	

Homeless Type	Homeless status at time of application acceptance	Disability required?	Length of time Homeless for each episode	Total time Homeless for the 4 episodes
LTH	HUD Homeless, doubled up, institutional stay	No	No set length	No set length
Chronically Homeless	HUD Homeless	Yes	At least 7 days of a living situation between Homeless episodes	The time Homeless for the four episodes must equal 12 months

2.02 Types of Housing and Shelter

Term	Definition
Emergency Shelter (ES)	Temporary, short-term lodging for individuals or families who are Homeless.
Permanent Supportive Housing (PSH)	<p>Permanent rental housing affordable to the population served where support services are available to residents. Permanent Supportive Housing is available to individuals and families with multiple barriers to obtaining and maintaining housing, including those who are Homeless and those with mental illness, substance abuse disorders, and other disabilities.</p> <p>NOTE: HUD requires a disability for Permanent Supportive Housing eligibility for people experiencing Homelessness.</p> <p>The terms Supportive Housing and Permanent Supportive Housing are used interchangeably in the industry and throughout this publication.</p>
Rapid Rehousing (RRH)	Rapid Rehousing is an intervention designed to help individuals and families to quickly exit Homelessness and return to permanent housing. Rapid Rehousing assistance is offered without preconditions (such as employment, income, absence of criminal record or sobriety), and the resources and services provided are typically tailored to the unique needs of the household. The core components include housing identification, move-in and rental assistance and case management and services. The length of assistance can vary between 3 and 24 months.
Supportive Housing (SH)	Supportive Housing, in its broadest definition, is affordable housing linked with social services tailored to the needs of the population being housed. The goal of Supportive Housing is to provide affordable housing with access to an array of services designed to foster housing

Term	Definition
	<p>stability and improve health and quality of life for the population to be served.</p> <p>The terms Supportive Housing and Permanent Supportive Housing are used interchangeably in the industry and throughout this publication.</p>
Transitional Housing (TH)	<p>Temporary housing, with services, that facilitates the movement of Homeless individuals and families to permanent housing within a reasonable amount of time (usually 24 months or less).</p>

Chapter 3 – Planning for Supportive Housing Developments

3.01 Strategic Objectives to Prevent and End Homelessness

As described in Chapter 1, many Minnesota Housing strategic objectives support people needing services, including preventing and ending Homelessness. A key strategy is to create more supportive housing units by providing incentives for housing developers and organizations to create supportive housing units in funding opportunities offered by Minnesota Housing.

These funding opportunities include the annual Multifamily Consolidated RFP, which is a one-stop competitive application process to request federal housing tax credits (HTCs), deferred loans, and first mortgages. Applications for capital financing in the Multifamily Consolidated RFP receive points for including supportive housing units. There are separate opportunities for rental assistance and operating subsidy programs and initiatives.

Refer to Chapter 4 for information on applying for capital financing in the Multifamily Consolidated RFP.

3.02 Type of Supportive Housing: Partially or Primarily Supportive Housing

For the 2024-2025 Multifamily Consolidated RFP on the [Self-Scoring Worksheet](#) (page 11), there are two categories of projects that include units designated for households that qualify as HPH and/or PWD units:

- **Partially Supportive Housing:** Fewer than 50% of the total units will serve HPH, PWD, or *other homeless households.
- **Primarily Supportive Housing:** 50% or more of the total units will serve HPH, PWD, or *other homeless households.

*Other homeless households include (i) individuals leaving institutions that do not have a permanent residence or (ii) other homeless populations not referred by the Coordinated Entry System.

3.03 Planning for Partially Supportive Housing

Applicants with a property that will be Partially Supportive Housing are not required to develop a plan for the units at the time of application. Planning for the HPH and/or PWD units will be done post-selection, in collaboration with Minnesota Housing and community partners. This allows for better planning to focus on the selection projects and address community needs in each community based on market needs and available resources.

3.04 Pre-Development Planning for Primarily Supportive Housing

The development of Primarily Supportive Housing projects can be complex and challenging. Careful planning helps prepare the development to be well positioned to provide successful and sustainable housing opportunities.

First Steps

When an organization decides to create a Primarily Supportive Housing project, the first steps are to identify local needs to determine the population to be served and target market location. The best plan is to create units to respond to an identified need in the area. Consult with the local [Continuum of Care \(CoC\) committee](#) to learn about the current needs for supportive housing in the service area. The CoC manages the priority list for Supportive Housing through the [Coordinated Entry \(CE\) system](#). Refer to Chapter 5 for more information about Continuums of Care and Coordinated Entry.

Development considerations include:

- **Household Types:** Single adults, families with children, youth with children, or unaccompanied youth. Youth are defined as age 24 and under.
- **Tenant Characteristics:** Will the proposed development serve a specific population such as veterans, re-entry populations, individuals with a serious mental illness, substance use disorder, or other disabilities?
- **Location:** Where should the development be located to best meet the needs of the population? Has a particular building or land parcel been identified? If yes, does it offer access to transportation, employment, and services? Is current zoning appropriate for the project?
- **Number of Units and Size of Units:** If the population to be served is households with children, what is the average size of the household? This information will help determine the appropriate bedroom sizes, unit mix, and other amenities. If the household type is single adults or youth, determine if the units will be efficiencies or one bedroom. Families' units must be two or more bedrooms.
- **Systemic Barriers to Housing:** People experiencing homelessness may have experienced systemic barriers that affect their access to housing, including racism, poverty, housing screening practices, and disparities in health, education and the criminal justice system. They may also have experienced trauma, domestic violence or could be struggling with mental illness and/or substance use disorder. It is important to recognize the unique needs and experiences of the population you plan to serve when you develop your service plan and tenant screening criteria.

- **Tenant Selection Plans:** Develop tenant selection plans to allow access to housing for applicants who are typically screened out due to systemic barriers. All tenant selection policies must follow fair housing laws and Minnesota Housing Tenant Selection Plan Guidelines. Refer to Chapter 10 for more information about Tenant Selection Plans.

Once the basic elements of the project design have been determined, you can start focusing on how to address the needs of the population to be served and develop the supportive housing service plan. A single project may plan to serve households with specific characteristics or may plan to serve tenants with a range of different characteristics within the development. Keep fair housing laws and principles of Minnesota's Olmstead Plan in mind when determining priority populations and developing the project design.

Development Partnerships

The relationships that are established during the pre-development phase of a supportive housing project are essential to future success. Developers or organizations that want to develop supportive housing units will need to create partnerships with experienced entities. It is important to have the roles of developer, owner, property manager, and service provider clearly identified early in the process to collaboratively develop the SH model.

Service Plan

The next phase is to create a detailed service plan to meet the needs of the population to be served. It is important to work with the development team and community partners to create a comprehensive service plan. Refer to Chapter 6 for information on service plan development.

Building Community Support

Meeting in advance with stakeholders in the community, especially Continuum of Care (CoC) coordinators, county human services staff, and government officials, is important and strongly recommended. When you are developing a project that is Primarily Supportive Housing, it is also advisable to meet with neighborhood and community groups early in your process to address citizen concerns by providing solid evidence of the benefits of supportive housing. There are numerous examples throughout Minnesota that demonstrate the benefit developments bring to the communities where they are located.

Funding Resources

The most challenging aspect of developing supportive housing is securing the financial resources needed to complete the development. Resources for services are outlined in Chapter 7. Resources for rental assistance and operating support are outlined in Chapter 8. Capital resources are available from

public and private sources. Minnesota Housing offers capital resources in its annual Multifamily Consolidated RFP.

3.05 Technical Assistance

Minnesota Housing staff are available to answer specific questions and provide technical assistance during pre-development planning. Refer to Chapter 14 for contacts. For underwriting technical assistance, complete a [Request for Technical Assistance form](#).

Processing agents and consultants are often used to help plan SH developments and complete funding applications. Minnesota Housing staff can provide a list of processing agents and developers who have previously submitted applications for funding.

The Corporation for Supportive Housing (CSH) offers information and resources for development, management, and program policy for supportive housing.

- [Supportive Housing Facts](#)
- [Dimensions of Quality Supportive Housing](#)

Chapter 4 – Minnesota Housing Annual Multifamily Consolidated Request for Proposals

Minnesota Housing conducts an annual Multifamily Consolidated Request for Proposals (Multifamily Consolidated RFP) for multifamily capital resources. The Multifamily Consolidated RFP is typically published in April, with applications due in July, but this changes each year, so check the [Request for Proposals](#) webpage for current application timelines.

The 2023 and 2024 Multifamily Consolidated RFP's use the two categories of projects, Partially Supportive Housing and Primarily Supportive Housing, as defined in Chapter 3.02.

While every effort is made to ensure the accuracy of the application information in this chapter, it does not modify or override the requirements of Minnesota Housing's Qualified Allocation Plan, the Self-Scoring Worksheet, Multifamily Request for Proposals Standards, Multifamily Underwriting Standards and other documents related to applications for funding. Applicants are advised to review the materials available on the Minnesota Housing website and consult with legal counsel, and if applicable, a knowledgeable tax professional, to ensure compliance with all applicable application, submission, and project requirements.

4.01 Supportive Housing Priorities

High Priority Homelessness Priority (HPH)

The Multifamily Consolidated RFP has a priority for developments that target all or a portion of their units for supportive housing for HPH households. Points are awarded to applicants that will set aside units to rent to HPH households. Refer to the HTC Self-Scoring Worksheet on the [Housing Tax Credits webpage](#) for available points for the year you plan to submit an application.

People with Disabilities (PWD) Tier One

The Multifamily Consolidated RFP has a priority for developments that will set aside a portion of their units for supportive housing to serve people with disabilities (PWD). Points are awarded to applicants that will set aside units to rent to households that include a person with a disability. Refer to the HTC Self-Scoring Worksheet on the [Housing Tax Credits webpage](#) for available points for the year you plan to submit an application.

HUD Section 811 Project-Based Rental Assistance (HUD Section 811 PRA) PWD Tier Two

The Multifamily Consolidated RFP includes an additional option for creating PWD units using HUD Section 811 PRA (based on availability of HUD Section 811 PRA funding). Refer to Chapter 12 for more information.

4.02 Application Components – Partially Supportive Housing

Applications that qualify as **Partially Supportive Housing** have a simplified and streamlined application submission process that removes and replaces many of the documents required in prior Multifamily Consolidated RFPs.

Applicants with a property that will be Partially Supportive Housing electing to take points for HPH and/or PWD Units (Tier One) are not required to develop a plan for the units at the time of application. This includes identifying a specific population to be served, having a designated service provider, or identifying committed resources for services or rental assistance (unless the project has secured project-based rental assistance). Planning for the HPH and/or PWD units will be done post-selection, in collaboration with Minnesota Housing and community partners.

EXCEPTION: Applicants applying for HUD Section 811 PRA units under PWD Tier Two must submit the required pre-application and application materials as shown on the application checklist in the Portal.

The required application submission forms are listed on the application checklist for Partially Supportive Housing, which can be found in the online Multifamily Customer Portal (Portal) and will also be posted on the [Consolidated RFP webpage](#) for reference only.

Partially Supportive Housing Application Requirements for HPH and PWD Tier One Units

Required Application Forms:

- Partially Supportive Housing Certification Form submitted in the Portal
- Notification to the CoC and County or Tribal Human Services Form submitted in the Portal

Optional Application Forms and Submissions:

- Service Provider Qualification Form (submitted using the secured upload process): Applicants may choose to submit this form, if needed, for points under Black, Indigenous, people of color, and Women-Owned Business Enterprises category (page 31-32 of the Self-Scoring Worksheet)
- Housing Support Commitment Form submitted in the Portal: Applicants may choose to submit this form under the Rental Assistance checklist item, if needed for rental assistance points

Follow the underwriting assumptions for Partially Supportive Housing for setting rent levels and Unique Operating Expenses for Supportive Housing (refer below)

Indicate the HPH and PWD units on the Multifamily Workbook Housing Income tab

Underwriting Assumptions for Application Phase

Rents: Applicants are not required to submit a commitment for Housing Support for the HPH or PWD units with the initial application. If project-based rental assistance is not secured for the supportive housing units, applicants should assume that Housing Support can be secured for rent and rents should be set at the Housing Support levels described in Minnesota Housing's [Underwriting Standards](#). Rent

levels may be adjusted during the feasibility review and will be determined post-selection, dependent on unit types and the resources to be used for rental assistance.

Unique Operating Expenses: To help ensure basic tenant service coordination can be provided and not be dependent on other funding sources, applicants must include expenses for basic service coordination in the Multifamily Workbook operating budget on the Unique Operating Expenses line. The expenses should be calculated per supportive housing unit and based on the anticipated types of other funding for services as follows:

- \$100/unit/month if the project will likely have the Housing Support LTH service rate or another reliable funding source (Medicaid billable services, secured grant funding, etc.)
- \$400/unit/month if the project is not likely to have a reliable funding source

The unique operating expenses may be adjusted during Minnesota Housing’s feasibility review and will be determined post-selection in collaboration with the applicant. Adjustments will be dependent on unit types and resources to be used for rental assistance and the available resources for services.

4.03 Application Components – Primarily Supportive Housing

The required application submission forms are listed on the application checklist for Primarily Supportive Housing, which can be found in the online Multifamily Customer Portal (Portal) and will also be posted on the [Consolidated RFP webpage](#) for reference only.

- **Supportive Housing Narrative** signed by the service provider and the county or Tribal human services representative
 - To be considered a competitive applicant for supportive housing, the narrative responses must reflect and demonstrate a joint response by the developer, owner, primary service provider, county/Tribal human services and management agent. The applicant must thoroughly answer all of the questions to give Minnesota Housing a fairly complete picture of the supportive housing plan. Note that the development must have a designated service provider at the time of the application to be considered feasible.
 - **A Service Provider Qualification Form (215A)** completed by the service provider organization (submitted using the secured upload process; is not submitted in the Portal)
- **Continuum of Care (CoC) Confirmation Form**
 - Must be signed by the CoC to confirm that the proposed units meet a need in the service area and to provide feedback on the proposed plan.
 - The CoCs expect all applicants to contact them early in the planning process to discuss supportive housing needs in the community and develop an appropriate plan

to address those needs. They may also require applicants to attend a CoC meeting to present their proposal and may expect the service provider to participate. Most CoCs meet monthly, but some meet less frequently, so applicants need to contact the CoC coordinator early in the Multifamily Consolidated RFP process to make arrangements. Contact information is provided on the Continuum of Care Confirmation Form (available in the [Multifamily Customer Portal](#)).

- **Secured Service Funding Verification** must be submitted with the application
 - The service funding sources must match the sources identified in the Supportive Housing Narrative. Documentation must come from the funding source and may include a commitment letter from a funder, a copy of a grant agreement, the Housing Support Funding Commitment Letter (for the service rate) from the county or Tribe, or a commitment from the developer/owner to use funds from the developer fee, cash flow or organization budget. If service funding will be paid from the development's operating budget, the documentation on the Multifamily Workbook and supportive housing narrative is sufficient. Letters from service providers indicating that they have grant funding is not adequate documentation; it must come from the funding source.
- The HPH and PWD units must be indicated on the Multifamily Workbook on the Housing Income tab

4.04 Application Review Process

Capital funding through the Multifamily Consolidated RFP is extremely competitive. Applications undergo an extensive review process to determine funding eligibility and the overall readiness and feasibility of the development. The capacity of all development partners is also reviewed.

Applications are scored and ranked based on the Self-Scoring Worksheet completed by the applicant and validated by Minnesota Housing. Scoring, in conjunction with geographic distribution and funding availability, are then used to select projects for further feasibility review.

Financial feasibility, operating costs, and physical design standards are evaluated by Minnesota Housing underwriters, asset managers, and architects.

The supportive housing team at Minnesota Housing reviews all relevant elements of the application to determine scoring eligibility and feasibility of the supportive housing units.

For scoring, all required application materials must be complete and submitted in the Portal to be eligible for HPH and/or PWD points. The units must meet the criteria described on the Self-Scoring Worksheet.

For feasibility review of the supportive housing units for applications that are **Primarily Supportive Housing**, Minnesota Housing considers:

- The local market needs for the supportive housing units as proposed (eligibility requirements, intended population, resources for rent assistance and services)
- The HPH and PWD units must be affordable to the population with rental assistance or rents set at underwriting levels for supportive housing as published annually on the [Rent and Income Limits webpage](#)
- The applicant agrees to incorporate the [Supportive Housing Standards](#) into their operations as funding allows.
- The applicant acknowledges that the project's Tenant Selection Plan (TSP) will be designed to serve the intended population and will comply with Minnesota Housing's [TSP Guidelines](#)
- The applicant will have specific practices and policies that will be used by the service provider and property management to address lease infractions and prevent eviction or loss of housing for the supportive housing tenants
- There is adequate service provider capacity and experience working with the population in SH
- Service funding is identified and is likely to be secured. Applicant has submitted verification documentation for secured service funding
- On site presence of property management and service staff Front desk staffing plan and funding

There are additional considerations for final selection of applicants, which are outlined in the relevant year QAP and the [Multifamily Request for Proposal Standards](#). Selection recommendations are reviewed by the Minnesota Housing staff and approved by Minnesota Housing's board members.

During feasibility review, Minnesota Housing will:

- Consult with the local CoC and/or county or Tribal human services department to determine if there is a market need for HPH units based upon several factors, including location, household type, Coordinated Entry priority list and flow for supportive housing, current inventory of HPH units, planned resources, etc.
 - For **Partially Supportive Housing Projects**, if Minnesota Housing determines that there is not a need for additional HPH units within the local market, the proposed HPH units may be converted to units with rent restricted to 30% Multifamily Tax Subsidy Projects (MTSP), with a priority to serve households experiencing homelessness. The applicant does not lose the HPH points.

- For PWD units, if the applicant is proposing to use Housing Support that requires Long-Term Homelessness (LTH), Minnesota Housing will consult with the local CoC and county or Tribal human services department to determine if there is a market need for LTH units.
 - If there is not a market, or the county or Tribal human services department would prefer a different population to be served, the unit will use regular Housing Support without the LTH requirement. Service coordination costs will be added to the unique operating costs line item in the operating budget, as needed.

The Multifamily Workbook may be adjusted to change the rent levels and/or unique operating expenses for tenant service coordination for HPH and/or PWD units.

Chapter 5 – Continuum of Care and Coordinated Entry

5.01 Continuum of Care (CoC)

A CoC is a local planning body that coordinates housing and services planning and funding for families and individuals experiencing homelessness. The CoC tracks and manages the homeless needs and resources in its area. One of most important activities entrusted to the CoC is the annual Point-in-Time Count of the people experiencing homelessness and an annual inventory of services and housing that make up the homelessness response system. These counts provide an overview of the state of Homelessness in a CoC region and offer the information necessary to plan for housing and service resources based on need. The CoC is also responsible for implementing Coordinated Entry.

A CoC plan is required to be eligible for the U. S. Department of Housing and Urban Development (HUD) McKinney Vento Homeless Assistance Act funds. The CoC plan helps organize strategies and priorities to end homelessness and to improve the homeless response system to most effectively deliver the right service at the right time to meet the specific needs of people experiencing homelessness. The CoC plan includes action steps and measures to monitor the CoC’s performance in preventing and ending homelessness.

Continuum of Care Confirmation Form

Multifamily Consolidated RFP applications for projects that are Primarily Supportive Housing that include High Priority Homeless (HPH) units must contact the local CoC committee to request a Continuum of Care Confirmation Form. The committee will review the application materials to confirm that the proposed units address a priority in their plan to end homelessness. Developers and their service provider are expected to attend a CoC meeting to present their proposal, so applicants need to contact the CoC coordinator as soon as possible in the application process to schedule a presentation. Contact information for CoC coordinators is listed on the confirmation form.

Notification to the CoC and County/Tribal Human Services Form

Applications for projects that are Partially Supportive Housing must notify the CoC and county or Tribal human services office that they are applying for funding in the Multifamily Consolidated RFP. Complete and submit the Notification to the CoC and County/Tribal Human Services Form for Partially Supportive Housing projects in the Application Portal.

5.02 Coordinated Entry

All referrals for supportive housing and High Priority Homeless (HPH) units must come from the local CoC Coordinated Entry process.

Coordinated Entry means a centralized or coordinated process for conducting a needs assessment and referrals to housing and services for people seeking housing assistance. A Coordinated Entry system covers the geographic area of the CoC, is easily accessed by individuals and families seeking housing or services, is well advertised and also includes a comprehensive and standardized assessment tool. The goal of Coordinated Entry is to match people to the most appropriate housing services based on the person's needs. A centralized waiting list allows communities to prioritize households with the highest need for Supportive Housing and HPH units. By connecting people to the right services, resources can more effectively be used to help end homelessness in Minnesota.

Local CoCs manage Coordinated Entry for all homeless assistance and housing programs. All Supportive Housing providers are expected to only take referrals for the Supportive Housing and HPH units from the CoC Coordinated Entry process. Property managers must notify the CoC Coordinated Entry contact whenever a Supportive Housing vacancy occurs, and they must agree to accept referrals for eligibility screening for the unit. CoC Coordinated Entry staff will then provide applicant referrals when a unit is listed as available for leasing. The exact process is determined by the local CoC and participating providers. Contact the [local CoC coordinator](#) to learn how the Coordinated Entry process works in your community.

For more information about how Coordinated Entry works for Supportive Housing, refer to the guide for developers, owners and property managers on the Coordinated Entry webpage: [Coordinated Entry Information for Owners and Property Managers](#)

Chapter 6 – Supportive Housing and Service Models

6.01 Core Principles

Choice: An underlying core principle of Minnesota’s Plan to Prevent and End Homelessness is that families, individuals, and youth experiencing homelessness will have a choice of housing and services. The housing setting may vary based on the person’s needs, preferences, and the availability of housing options and the local real estate market. People can choose from a variety of Supportive Housing options, including:

- A unit in the private rental market accessed with a rental subsidy or income supplement (e.g., Housing Support, Minnesota Supplemental Aid (MSA) Housing Assistance) and accompanied with supportive services
- A site-based supportive housing setting with services available on site and through connections in the community; these sites may also have a front desk and additional security measures; all residents have experienced homelessness and may have similar disabilities or service needs
- A mixed income property with a small number of supportive housing units. Some services may be provided on-site and some may be accessed in the community

Appropriate Level of Service: Another core principle of the plan is matching people to the most appropriate level of housing and services based on assessed needs and then prioritizing households with the highest needs for supportive housing. This is accomplished through the Coordinated Entry process.

Equity and Inclusion: As described in Chapter 1, all supportive housing should be designed to address equitable housing access for populations that have been historically underserved and overrepresented in the homeless population.

The Principles of Minnesota’s Olmstead Plan are also integral to ending homelessness and must be considered when designing supportive housing and services to help ensure people with disabilities are living, learning, working, and enjoying life in the most integrated setting. People should have choice for housing and services options to live as independently as they choose.

6.02 Supportive Housing Models

The housing model describes the approach to housing and services and the extent to which the person/household is expected to comply with certain requirements or expectations in order to access and retain housing. There are two basic models for Supportive Housing, with variations within each model:

- Housing First is a successful approach to ending homelessness and centers on providing people experiencing homelessness with housing as quickly as possible, with low-barrier admission practices and without prerequisites like evidence of sobriety or requirements to participate in services. It is a Homeless systems approach as well as a model used in supportive housing. Evidence has demonstrated that using Housing First practices in supportive housing by first providing people experiencing homelessness a place to live, and then providing access to services when they need them, results in high levels of housing stability and lower returns to homelessness.

The Housing First approach can be used in all types of supportive housing settings (site-based, congregate, scattered site, etc.) and is appropriate for all populations (singles, youth, families with children, etc.) experiencing Homelessness.

- Housing First has no requirements for entry (such as a period of sobriety) and no requirements for keeping housing, except those of a normal lease. Individuals, youth, and families are not required to accept services. Service providers are, however, required to make a broad spectrum of services available on an ongoing basis and to continually work to engage people in accessing services. Harm reduction practices are also often followed in Housing First settings.
- **Program Housing** provides housing with supportive services that are intrinsically tied to the housing setting. Program Housing is often based in a community of residents with a common characteristic living at a single location. Unlike Housing First, which has no requirements for entry or stay except for lease compliance, Program Housing may expect or require participation in services as a condition of residency. One example is “sober housing,” which sets forth an expectation that residents will not use alcohol or drugs. The philosophy is that people striving to maintain sobriety will be strengthened by participation in a mutually supportive community and a drug- and alcohol-free environment. Program Housing may be most appropriate for Transitional Housing and when directed toward specific sub-populations, such as youth or people fleeing domestic violence.

Housing First is the preferred model in the supportive housing industry for all populations. The U.S. Department of Housing and Urban Development (HUD) advises limiting Program Housing to Transitional Housing (TH) settings for specific populations in life transitions (such as those who are fleeing domestic violence, leaving incarceration, and youth exiting the foster care system). The United States Interagency Council on Homelessness (USICH) and the National Alliance to End Homelessness (NAEH) also promote Housing First as the preferred model for all housing options for people experiencing homelessness.

Essential and Population Specific Services

Supportive Housing offers services based on individualized needs of all household members, including children. The owner and service provider should consider the types of services and levels of support that will be offered in relationship to the needs of the population to be served. In keeping with the principles underlying choice in housing and services, the following concepts are important:

- Appropriate services will be readily offered and available to people; however, people are generally not required to accept services.
- Service engagement occurs in person and on site, often in the household's home.
- Some supportive services may be available on site or off site and may occur through referrals to community service providers.
- Households have choice in selecting service providers.
- Services are distinct and separate from housing and property management. A tenant will need to sign a release of information form in order for the service provider and property manager to share information when it is relevant and in the best interests of the tenant.

A menu of recommended service sets for supportive can be found in Appendix D. These service sets should be included in the service plan.

Service Delivery

Supportive services may be delivered on site by the primary service provider and community partners, or they may be provided through referrals to community agencies. The level of support provided to households ranges from tenant service coordination to full case management. Some sites also provide front desk security services and other additional specific services (life skills, food service, childcare, community activities, etc.) The level and type of services offered should be appropriate for the needs of the population to be served and based on person-centered planning, which is defined in more detail in Chapter 6.

The minimum standard service level is tenant service coordination for an average of two hours per household per week. Tenant service coordination must have strong connections to community resources in order to demonstrate that sufficient support is available for tenants. The preferred standard of service is comprehensive case management individualized to the needs of the household members using person-centered planning and active engagement strategies.

Case Management

The former Minnesota Interagency Task Force on Homelessness developed the following guidelines to establish a consistent use of the term "case management" when describing the level of support provided to participants served by homelessness assistance programs.

Case management must include, for each household and conducted with the person receiving the case management, the following activities:

- **Assessment:** Work collaboratively with the person to identify strengths, resources, barriers and needs in the context of their local environment.
- **Plan development:** Develop an individualized service plan with specific outcomes based on the assessment.
- **Connection:** Obtain for the person the necessary services, treatments, and supports.
- **Coordination:** Bring together all of the service providers in order to integrate services and help ensure consistency of service plans.
- **Monitoring:** Evaluate with the person their progress and needs, and adjust the plan as needed.
- **Personal advocacy:** Intercede on behalf of the person or group to help ensure access to timely and appropriate services.

The activities listed above are the activities that, taken together, make up case management. These case management activities will vary in several ways. The following variables are related to how case management is provided as opposed to what case management actually is:

- Intensity (frequency of contact; client-staff ratios)
- Duration (from brief to time-limited to open-ended)
- Focus (from narrow and targeted to comprehensive)
- Availability of staff (from scheduled office hours to 24-hour availability)
- Location of services
- Staffing patterns (from individual caseloads to interdisciplinary teams with shared caseloads) depending upon the needs of the client

In addition to the above components of case management, there are other activities often offered that enhance the core case management activities. These six activities can be divided into two broad categories, client specific activities and system activities.

Client Specific Activities

- **Outreach and engagement:** Attempt to connect with people not currently accessing services.
- **Direct service:** Provide services directly to the person (for example, budget counseling, housing search assistance).
- **Crisis intervention:** Assist people in crisis in order to help stabilize them through direct interventions and to mobilize needed supports and/or services.

- Follow-up or post-completion services: Maintain contact with the person/household after completion of services in order to track stability and provide any additional needed services.

System Activities

- System advocacy: Intervene with organizations or larger systems in order to promote more effective, equitable, and accountable services to a client group (to be distinguished from personal advocacy above).
- Resource development: Attempt to create additional services or resources to address the needs of participants.

Tenant Service Coordination

A tenant service coordinator performs tasks associated with fostering housing stability and landlord-related housing support that will assist tenants in maintaining their housing, including:

- Engagement
- Assessment
- Budgeting to pay rent, utilities, food, and other basic necessities
- Tenant counseling to assist individuals to understand leases and tenant responsibilities
- Mediation services related to neighbor/landlord issues
- Community building activities that are generally social and recreational in nature to assist tenants in developing social skills and a sense of community
- Referral source for supportive services and facilitate the tenant's connection to resources and supportive services in the community, particularly behavioral healthcare, primary healthcare, substance use treatment and support, and employment

Roles in Supportive Housing (site-based units)

Close coordination between all of the project partners is essential to a successful supportive housing project. The partners should have a shared commitment to the success of each tenant and the overall success of the property. Regardless of the housing model, a strong partnership between property management staff and the service provider is critical. It is essential that each party understands the separate and distinct roles each performs and communication should occur frequently. Staff should discuss and adopt policies and procedures in line with their distinct roles and responsibilities. The property manager should operate to protect the interests of the owner and the property, while the service provider is an advocate for the tenant with a shared goal of housing access and retention for tenants. These roles should be clearly outlined and described in a memorandum of understanding (MOU) for the development. Refer to Chapter 9 for more information about the MOU.

The service provider and property management staff should hold regularly scheduled meetings to discuss their roles, the coordination of their efforts and any current issues. Gaps in services and operations should be addressed. The property management staff should promptly notify the service provider of any unmet tenant needs or concerns regarding tenancy, including unpaid rent or lease violations. The service provider should promptly notify property management staff of any safety or maintenance concerns. The team should have clear strategies outlined for tenant retention and mitigation plans for lease infractions. Both service provider and property management staff should receive regular training in Supportive Housing to stay current with industry trends and best practices and understand their distinct roles to support tenants in Supportive Housing.

6.03 Supportive Housing Standards

The Supportive Housing Alliance (SHA), formerly known as the Stewardship Council, is an interagency work group of designees from organizations that fund the development and operation of supportive housing throughout the state. SHA's purpose is to directly impact the creation, preservation and stabilization of supportive housing as a key component in Minnesota's work to prevent and end homelessness.

SHA has initiated a funding alignment project aimed at strengthening the supportive housing infrastructure statewide. The goal is to align funding for capital, operating expenses and services for supportive housing and secure additional resources. As a first step in this process, SHA has developed supportive housing standards so that housing providers and funders have a clear understanding of what is needed for quality supportive housing to serve the needs of the intended populations.

To develop the supportive housing standards, SHA contracted with North Star Policy Consulting in 2021 to engage stakeholders to develop recommendations for the standards. In 2022, SHA then used those recommendations to draft the standards and again conducted stakeholder engagement sessions for feedback on the final standards. SHA approved the final draft of the [supportive housing standards](#) in November 2022. SHA recommends that funders of site-based supportive housing adopt these standards for organizations and developments they fund.

The supportive housing standards are considered best practices, and Minnesota Housing encourages owners and project partners to incorporate the standards into their operations, as funding allows.

To learn more about SHA and the supportive housing standards, refer to <http://supportivehousingalliance.org/>.

6.04 Best Practices in Service Delivery

The strategies listed below encompass some of the best practices in providing supports to people who have experienced homelessness. They are not exclusive; rather, they can be used in conjunction with

each other to provide a service package that promotes housing stability and overall well-being. When developing a service model to meet the needs of supportive housing tenants, consider incorporating the best practices of person-centered planning, harm reduction and trauma-informed care. When serving families, providers should incorporate a [Two-generational \(2 – Gen\)](#) approach into their service plan.

Person-Centered Planning

Person-centered planning is used to describe a value-based orientation and methods of organizing discovery and planning for services, treatment and support that are likely to yield more person-driven and balanced results. Effective support and services are identified to help people live, learn, work and participate in their preferred communities and on their own terms. There are many approaches to person-centered planning, but all share a common foundation:

- Person-centered planning involves the individual to be a co-developer of a plan related to his/her community participation and quality of life. It may also include family members, neighbors, employers, community members, friends, and professionals (such as physician/doctors, psychiatrists, nurses, support workers, care managers, therapists, and social workers), as chosen by the individual.
- The person-centered plan focuses on the person’s preferences, strengths, talents and dreams.
- The plan assists people to define and pursue their own desirable lifestyle and future.
- The plan includes actions to make the vision of their lifestyle and future possible.

Person-centered approaches are rooted in values, goals and outcomes that are important to the person, but also take into account other important factors that affect a person’s life.

Refer to the chapter on person-centered planning in [Minnesota’s Olmstead Plan](#) for more information.

Harm Reduction

According to the Harm Reduction Coalition, harm reduction is a set of practical strategies and ideas aimed at reducing negative consequences associated with drug or alcohol use. It incorporates a spectrum of strategies from safer use, to managed use, to abstinence. It strives to meet drug and alcohol users “where they’re at,” by addressing conditions of use along with the use itself. Because harm reduction demands that interventions and policies designed to serve drug users reflect specific individual and community needs, there is no universal definition or formula for implementing harm reduction. However, the following principles are central to harm reduction practices:

- Accepts, for better and or worse, that licit and illicit drug use is part of our world and chooses to work to minimize its harmful effects rather than simply ignore or condemn use

- Understands drug use as a complex, multi-faceted phenomenon that encompasses a continuum of behaviors from severe abuse to total abstinence, and acknowledges that some ways of using drugs are clearly safer than others
- Establishes quality of individual and community life and well-being – not necessarily cessation of all drug use – as the criteria for successful interventions and policies
- Calls for the non-judgmental, non-coercive provision of services and resources to people who use drugs and the communities in which they live in order to assist them in reducing related harm
- Ensures that drug users and those with a history of drug use routinely have a real voice in the creation of programs and policies designed to serve them
- Affirms drugs users themselves as the primary agents of reducing the harms of their drug use, and seeks to empower users to share information and support each other in strategies that meet their actual conditions of use
- Recognizes that the realities of poverty, class, racism, social isolation, past trauma, sex-based discrimination, and other social inequalities affect both people’s vulnerability to and capacity for effectively dealing with drug-related harm
- Does not attempt to minimize or ignore the real and tragic harm and danger associated with licit and illicit drug use

Trauma-Informed Care

Trauma may occur in many ways for people who are experiencing homelessness. Common traumas include exposure to violence, death, and sexual abuse. Experiencing homelessness is itself a traumatic experience. According to the Substance Abuse and Mental Health Services Administration’s (SAMHSA) concept of a trauma-informed approach, “A program, organization, or system that is trauma-informed:

- *Realizes* the widespread impact of trauma and understands potential paths for recovery;
- *Recognizes* the signs and symptoms of trauma in clients, families, staff, and others involved with the system;
- *Responds* by fully integrating knowledge about trauma into policies, procedures, and practices; and
- Seeks to actively resist “*re-traumatization.*”

A trauma-informed approach can be implemented in any type of service setting or organization and is distinct from trauma-specific interventions or treatments (refer to the end of this section) that are designed specifically to address the consequences of trauma and to facilitate healing.

SAMHSA's Six Key Principles of a Trauma-Informed Approach

A trauma-informed approach reflects adherence to six key principles rather than a prescribed set of practices or procedures. These principles may be applied across multiple types of settings:

- Safety
- Trustworthiness and transparency
- Peer support
- Collaboration and mutuality
- Empowerment, voice and choice
- Cultural, historical and gender issues

From SAMHSA's perspective, it is critical to promote the linkage to recovery and resilience for those individuals and families impacted by trauma. Consistent with SAMHSA's definition of recovery, services and supports that are trauma-informed build on the best evidence available and consumer and family engagement, empowerment, and collaboration.

Trauma-specific Interventions

Trauma-specific intervention programs, those that are focused on addressing a specific experience, generally recognize the following:

- The survivor's need to be respected, informed, connected and hopeful regarding their own recovery
- The interrelation between trauma and symptoms of trauma, such as substance abuse, eating disorders, depression and anxiety
- The need to work in a collaborative way with survivors, family and friends of the survivor, and other human services agencies in a manner that will empower survivors and consumers

[Two-Generational \(2-Gen\)](#) or whole-family approaches build family well-being by intentionally and simultaneously working with children and the adults in their lives together. The approach recognizes that families come in all different shapes and sizes and that families define themselves.

There are Six Key Components of the 2-Gen approach: 1) Postsecondary Education and Employment Pathways; 2) K-12; 3) Early Childhood Education and Development; 4) Economic Assets; 5) Health and Well-Being; and 6) Social Capital.

Examples of 2-Gen approaches include:

- The needs and strengths of the entire family are assessed as part of routine assessment processes

- Referrals or connections are made for both parents and their children to appropriate services and programs for which they are eligible
- Project outcomes focus on the impact of the whole family and help inform changes to delivery models, if needed

For more information on the 2-Gen approach refer to <https://ascend.aspeninstitute.org/two-generation/what-is-2gen/>.

6.05 Service Provider Qualifications

Service provider organizations must have demonstrated experience providing services to the population served and the organizational capacity to deliver the services. The organization must be in good standing with the Minnesota Secretary of State. Service providers should demonstrate that all staff members who have direct contact with tenants meet or exceed the following minimum qualifications:

- Have skills and knowledge acquired through at least one of the following:
 - A course of study in a health or human services-related field leading to a Bachelor of Arts, Bachelor of Science, or associate degree
 - One year of experience with the population served (can include being a member of the population served/lived expertise)
 - Experience as a Minnesota Department of Human Services certified peer specialist

All new service staff must receive standardized training in supportive housing best practices (for example, motivational interviewing, person-centered planning, trauma informed care) and existing staff must receive annual refresher training.

The service organization and relevant staff must hold current, valid and unrestricted professional licenses or certifications where care and supervision require specific professional education, training and skills.

The service provider must be knowledgeable of and connected to community and mainstream services available for the population served (for example, benefits assistance, health care, employment, education and training, mental and chemical health services, children’s services, childcare).

Additionally, service providers should be enrolled providers for Medicaid Housing Stabilization Services. Refer to Chapter 7 for more information.

Service providers that do not have demonstrated experience providing supportive housing services may build their capacity by partnering with an experienced provider or through a mentoring relationship and attending training in supportive housing best practices.

Chapter 7 – Service Funding Resources for Supportive Housing

Service funding must be secured to close on the capital financing from Minnesota Housing. There are no dedicated funding resources for services in Supportive Housing, so applicants will need to explore potential appropriate funding resources for services. Following are examples of the types of resources that could potentially be used for service funding. Note that program requirements are subject to change and applicants are advised to consult with the funding source.

7.01 State Grant Programs

Department of Human Services (DHS) Office of Economic Opportunity (OEO) Homeless Youth Act

Funds can be used for operating expenses or services for supportive housing serving youth. Request for proposals (RFP) are issued for the state biennium in the early part of the year (state biennium starts in odd numbered years, such as, 2023). Eligible applicants are nonprofit organizations, local governments, and Tribal Nations.

Department of Human Services – Housing Division – Long-Term Homeless (LTH) Supportive Services Grant

Funds can be used for services in supportive housing and can also pay front desk costs. Eligible applicants are multi-county or Tribal Nation collaboratives. There are currently six regional multi-county collaborative grantees and one Tribal Nation collaborative. Interested applicants should consult with the current local grantee for consideration for future funding.

Department of Human Services Behavioral Health – Housing with Supports for Adults with Serious Mental Illness (HSASMI)

Funds can be used to provide supportive services for people with Serious Mental Illness (SMI) who are homeless, Long-Term Homeless (LTH) or people who are exiting institutions. RFPs are issued for the state biennium. Eligible applicants are counties, Tribal Nations, mental health service providers, and other qualified service agencies.

7.02 Income Supplements

Housing Support Service Rate

For people with a disabling condition who are receiving a Housing Support income supplement to pay housing costs, the Housing Support (HS) provider can bill for services for eligible tenants. All Long-Term Homeless (LTH) Housing Support recipients are eligible for the service rate. A provider may also be able

to get a service rate for Housing Support recipients who are not LTH by using banked beds. Contact the county or the Housing Support staff at DHS to learn about available banked beds.

For more information, refer to the [DHS Housing Support website](#).

7.03 Medicaid Services

There are several types of Medicaid funded services available for people with disabilities or disabling conditions. These services may be provided by the county or Tribal human services agency or by a contracted provider. Contact the local county or Tribal human services agency to learn about the potential resources for the population to be served and possible providers. You can also directly contact a service provider.

- **Mental Health Services:** Adult Rehabilitative Mental Health Services (ARMHS), Assertive Community Treatment (ACT) team, Targeted Case Management (TCM) and Peer Support Specialists
- **Home and Community Based Services (HCBS)** provide a wide array of services, including waiver programs such as:
 - Brain Injury (BI), Community Alternative Care (CAC), Community Access for Disability Inclusion (CADI), Developmental Disabilities (DD), and the Elderly Waiver
 - Housing Stabilization Services: This is a newer Medicaid service benefit to help people with disabilities, including those with mental illness, substance use disorder, and seniors find and keep housing. All supportive housing service providers should become enrolled providers for these services.

Learn more about Housing Stabilization Services on the [DHS Housing Stabilization Services webpage](#).

7.04 Local Government

Talk to the local county or city staff to find out about potential resources.

- Local levy funds: Available directly or through a request for proposals (RFP)
- Community Development Block Grant funds (CDBG): Available only in specific HUD entitlement jurisdictions
- County or Tribal human services: Some providers have been successful working with county or Tribal staff to develop innovative ways to use program funds to help meet program goals for certain programs:
 - Foster Care and Extended Foster Care
 - Child Protection/Child Welfare Involved Families
 - Minnesota Family Investment Program (MFIP) services
 - Mental Health Initiative Funds (managed by county collaboratives)

- Children’s Mental Health Programs: Possible resource for children’s services
- Foster Care Transitions: For youth between 18 and 21 who are transitioning from the foster care system
- Family Home Visiting Program: Services to foster healthy beginnings, improve pregnancy outcomes, promote school readiness, prevent child abuse and neglect, reduce juvenile delinquency, promote positive parenting and resiliency in children, and promote family health and economic self-sufficiency for children and families. Grants are distributed to local public health departments and Tribal governments on a formula basis.

7.05 Developer/Owner

Developers/owners can pay for tenant service coordination from the operating budget if there are adequate revenues to pay expenses. Case management and other services can be paid from the development cash flow or from the developer fee but cannot be paid from the operating budget.

7.06 Philanthropy

Many developers and service providers apply for grant funding from philanthropic organizations whose missions and goals are aligned with supportive housing. Some funders will provide initial start-up funding, while others might provide ongoing support. Examples include The United Way, The St. Paul Foundation, Blandin Foundation, etc. Some helpful resources are the [Minnesota Nonprofits Grants Directory](#) and [Saint Paul and Minnesota Foundation](#).

7.07 Fundraising

Many developers and service providers conduct fundraising campaigns to fund services and operations for supportive housing. They might conduct an initial startup campaign to develop a reserve account to fund services for several years, or they might conduct ongoing or annual fundraising activities.

7.08 Connection to Services Available in the Community

It is critical to utilize community resources for service connections for supportive housing tenants. Employment and training programs, financial and legal services, behavioral health services, primary health care, childcare and many other services are available in the community.

Chapter 8 – Affordability, Rent Levels, and Rental Assistance

8.01 Affordability

Affordability is a key component for supportive housing. People experiencing homelessness have very low incomes, and some may have no income at all. Supportive housing units must have rental assistance or rent levels must be set at levels affordable for the population to be served.

8.02 Supportive Housing Rent Levels

For High Priority Homeless (HPH) or People with Disabilities (PWD) units without any form of rental assistance or subsidy, rents must be set at affordable levels for the population. The current Supportive Housing underwriting standards for rent levels are described in Minnesota Housing’s [Underwriting Standards](#) on Minnesota Housing’s website. The gross rent (contract rent + tenant-paid utilities) should be underwritten at the following levels:

Population to be Served	Monthly Gross Rent Per Unit
SRO and Efficiency/Singles (only)	\$100
1 BR/Singles or Families with Children	\$130
2 BR or larger/Families with Children (only)	\$180

Upon occupancy, for units set aside for HPH or PWD in properties without project-based rental assistance for such units, tenant rents, including an allowance for tenant-paid utilities, cannot exceed the greater of 30% of the household’s monthly income or the most current Supportive Housing standard rental rate for the unit size, as published annually with the [rent and income limits](#) by Minnesota Housing.

Refer to Chapter 10.03 for information about adjusting rents.

8.03 Rental Assistance Resources

There are several different types of resources that can be used for rental assistance:

HUD Project-Based Section 8 Rental Assistance (PBRA)

A rental subsidy that pays the difference between the gross rent and the tenant contribution of 30% of their income. Rents cannot exceed the local payment standard.

- **Administered by** the local public housing authority (PHA, HRA, EDA, etc.).
- **Availability:** Contact the local PHA to find out how they provide PBRA.

Funds potentially available in Minnesota Housing's Multifamily Consolidated RFP

Some PHAs offer PBRA for Supportive Housing units in Minnesota Housing's Multifamily Consolidated RFP. Consult the Minnesota Housing annual [Multifamily Consolidated Request for Proposals](#) webpage for current availability.

HUD Continuum of Care (CoC) Rental Assistance*

A rental subsidy that pays the difference between the contract rent and the tenant contribution of 30% of their income. The amount of rent paid to the owner cannot exceed local rent reasonableness standards. Awards are calculated based on the local Fair Market Rent (FMR).

- **Administered by** the local public housing authority (PHA, HRA, EDA, etc.) or a private nonprofit organization.
- **Availability:** Applications are through the local Continuum of Care (CoC) in the HUD annual Notice of Funding Opportunity (NOFO). Funding availability varies and HUD sets different priorities for each NOFO. Contact the local CoC coordinator for application information.

There are three types of CoC rental assistance:

- **Tenant-Based Rental Assistance (TBRA):** Program participants have the ability to move and retain the rental assistance. Recipients administering TBRA may limit where participants may live if it is necessary to facilitate the coordination of supportive services. Recipients may require program participants to live in a specific area for their entire period of participation or in a specific structure for the first year and in a specific area within their geographic area for the remainder of the period of participation.
- **Sponsor-Based Rental Assistance (SBRA):** A sponsor agency owns units or leases units and then subleases the unit to a program participant. Units that receive SBRA can be owned or leased by the recipient, subrecipient, or a private owner in the community.
- **Project-Based Rental Assistance (PBRA):** Rental assistance is provided through a contract with the owner of a building who agrees to lease the subsidized units to program participants. The program participant does not retain rental assistance if they move. The unit would be rented to another eligible participant.

HUD Continuum of Care (CoC) Leasing*

Funds may be used to lease individual units or all or part of a structure. Rents must be reasonable, and in the case of individual units, the rent paid may not exceed HUD-determined Fair Market Rents (FMR). Leasing funds may not be used for units or structures owned by the recipient, subrecipient, their parent organization(s), any other related organization(s), or organizations that are members of a partnership where the partnership owns the structure without a HUD-authorized exception. When

leasing funds are used to pay rent on units, the lease must be between the recipient or the subrecipient and the owner, with a sublease or occupancy agreement with the program participant.

- **Administered by** the grantee of the funding. Eligible applicants are private nonprofit organizations.
- **Availability:** Applications through the local CoC in HUD's annual NOVO. Funding availability varies and HUD sets different priorities for each NOVO. Contact the local CoC coordinator for application information.

HUD Continuum of Care (CoC) Permanent Supportive Housing (PSH) Operating Assistance*

A grant that can be used to cover a portion of a property's operating costs. Tenants cannot pay more than 30% of their incomes for rent. Operating costs funds may be used to pay the day-to-day operating costs in a single structure or individual housing units, including maintenance (such as scheduled replacement of major systems), repair, building security (when CoC program funds pay for more than 50% of the facility by unit or area), electricity, gas, water, furniture, equipment, property insurance, and taxes. These costs may not be combined with rental assistance costs within the same unit or structure.

- **Administered by** the grantee of the funding. Eligible applicants are private nonprofit organizations.
- **Availability:** Applications through the local CoC in HUD's annual NOFO. Funding availability varies and HUD sets different priorities for each NOFO. Contact the local CoC coordinator for application information.

*Note that use of HUD CoC funding at a property does not work well with Housing Support due to the HUD requirement that tenants pay no more than 30% of their income for rent. Housing providers are advised not to combine the two funding sources at a property.

8.04 Housing Support

The Housing Support program is a state-funded income supplement that pays for room and board for seniors and adults with disabling conditions who have low incomes. In addition to these criteria, adults who are also LTH are eligible for Housing Support assistance for housing as well as supportive services in their tenant-based supportive housing setting.

Rate for Room and Board

The Housing Support monthly payment rate for room and board is adjusted annually. The current rate is shown on the [Housing Support Commitment Form](#) and on the [DHS Housing Support Program webpage](#).

Minnesota Housing has underwriting standards for Supportive Housing units using Housing Support to pay rent. Refer to Minnesota Housing's [Underwriting Standards](#) for more information.

Housing Support Agreements

Service providers, or in some cases the property owner or management agent, contract with the local county human services or Tribal Nation for Housing Support provisions. Participant eligibility is determined by county human services or certain authorized Tribal Nation human services with access to state systems, such as White Earth Nation. Each county has discretion in determining the number of Housing Support units and selecting providers. Many counties, including Hennepin County, do an annual RFP to select new Housing Support properties and providers.

Applicants for capital funding in the Multifamily Consolidated RFP may submit the [Housing Support Commitment Form](#) as documentation for secured rental assistance and service funding (as applicable).

For more information about the Housing Support program, contact your local county or Tribal human services office. Also refer to the [DHS website](#).

8.05 Minnesota Supplemental Aid Housing Assistance

Minnesota Supplemental Aid (MSA) is an income supplement for people who receive Supplemental Security Income (SSI), or would receive SSI except for their income. Some MSA recipients receive additional money to pay for special diets, guardian or conservator fees, home repairs, and household items. Under certain circumstances, MSA recipients can also receive [MSA Housing Assistance](#), which helps pay for high housing costs. Beginning in July 2020, people receiving LTH Housing Support may be eligible to transition to MSA Housing Assistance. The rate has also increased significantly for an additional \$392 per month.

Contact your local county human services office [or DHS](#) for more information. [DHS MSA website](#)

Note that Minnesota Housing does not currently have underwriting standards to determine where to set rents for tenant with MSA Housing Assistance except for tenant transitioning from LTH Housing Support to MSA Housing Assistance, which is described in the Minnesota Housing [Underwriting Standards](#).

8.06 Minnesota Housing Operating Subsidies and Rental Assistance

Minnesota Housing does not have any funding available for new developments. If new resources become available, they will be advertised in the annual Multifamily Consolidated RFP.

8.07 National Housing Trust Fund Operating Subsidy

Minnesota Housing has funds available from the National Housing Trust Fund (NHTF) for capital funding and operating assistance. The funds can be used for Supportive Housing. Minnesota Housing may use up to one-third of the NHTF allocation for operating assistance. This assistance may only be awarded to developments that receive NHTF capital funding. Details are provided in the [Multifamily Request for Proposals Standards](#).

Chapter 9 – Closing Requirements

Applicant selections for capital funding in the Multifamily Consolidated RFP are determined at Minnesota Housing’s board meeting. Selected applicants will receive a project selection letter outlining the basic terms and conditions for funding.

9.01 Project Launch Meeting

After receiving the project selection letter, the housing development officer (HDO) or loan processor (LP) will schedule a project launch meeting with all parties, including the developer, service provider and management agent. A supportive housing officer (SHO) housing Asset Manager, and compliance officer (CO) are assigned to each development that has Supportive Housing (SH), High Priority Homeless (HPH), and/or People with Disabilities (PWD) units and will attend the launch meeting.

At the project launch meeting, Minnesota Housing staff will review the project plan and explain the funding requirements and the critical path for closing, including any selection conditions for funding. Note that the launch process is evolving and subject to change.

To help ensure understanding of Minnesota Housing’s requirements and expectations for Supportive Housing, a subsequent project meeting will be scheduled as needed to review elements of the project, including Supportive Housing and required due diligence. This meeting will be coordinated with the development team and Minnesota Housing staff working on the project.

9.02 Partially Supportive Housing Project Planning

The planning work for the Supportive Housing units in Partially Supportive Housing projects will begin after the project launch meeting. Planning for the units will be a collaborative process between Minnesota Housing, the sponsor/owner and project partners, and community partners, including the local Continuum of Care, county/Tribal human services staff and other partners and may include:

- Determining the population(s) to be served
- Adjusting the unit size type, if needed, to serve the population
- Selecting a service provider partner(s)
- Determining the referral source(s) and process to select eligible households for HPH, PWD, Other Homeless Households and for HPH units that have been converted to 30% MTSP rent units with a priority to serve homeless households
- Determining and securing resources for rental assistance and services
- Adjusting rents and unique operating costs on the Multifamily Workbook as needed

9.03 Due Diligence Review Process

The housing development officer and loan processor are the lead contacts for the developer during the due diligence process. They coordinate project check-in meetings and completion of due diligence for closing on the financing and, if applicable, approval of the tax credit carryover and Internal Revenue Service form 8609. The SHO and Asset Manager coordinate review of the Supportive Housing materials, including asset management documents, and will communicate with the property development team for changes, questions, and clarifications needed.

The developer, along with the service provider and management agent, are responsible to submit the due diligence items required for Supportive Housing on the Due Diligence Closing Checklist in the Multifamily Customer Portal, with guidance from the SHO and Asset Manager. The developer will upload all materials to the Multifamily Customer Portal for review by the SHO and Asset Manager.

Submit all materials in an editable format for review. Do not submit PDF documents until the document has been approved by the SHO and Asset Manager.

The SHO and Asset Manager will work together to review some of the Supportive Housing documents that are important to both parties, primarily the memorandum of understanding (MOU) and tenant selection plan. Minnesota Housing recommends submitting all Supportive Housing documents at the same time to help facilitate the review process.

Minnesota Housing requires Supportive Housing documents to be submitted at least 60 days prior to the anticipated Mortgage Credit Committee approval or the carryover application for HTC only developments. Make sure that you meet this timeline to accommodate any changes that may need to be made to the materials before they are reviewed for approval for closing.

The Supportive Housing Due Diligence document templates can be found on Minnesota Housing's website under [Post Selection Materials/Supportive Housing Service Providers](#).

The Tenant Selection Plan (TSP) Guidelines, Review Checklist and Help Text are posted on the [Tenant Selection Plan webpage](#).

9.04 Required Due Diligence Documents

Following is a description of each document that needs to be submitted for Supportive Housing due diligence for review and approval in order to close on the financing. The assigned SHO and Asset Manager will confirm at the launch meeting what is required for your particular project. All required items will be listed on the Due Diligence Checklist in the Multifamily Customer Portal.

Supportive Housing Memorandum of Understanding (MOU) Template

The MOU is an agreement between the owner/sponsor, the property management company, the primary service provider, and any other interested party, describing how the roles and responsibilities will be coordinated with all parties. The MOU should describe the housing and service model, define terms and eligibility, and outline the tenant referral and selection process. Specific roles and duties of each party, along with funding resources and terms of the agreement, should also be outlined. Use the MOU template link above to draft your MOU.

The MOU is the core document for outlining how all parties will work together for a successful Supportive Housing project. It outlines items that are covered in more detail in the tenant selection plan and service plan, so make sure all documents have the same, correct information. It is expected that the MOU will be revised every few years, as needed, or when there is a change in service provider or management company for the property.

For projects where one entity is serving multiple roles (for example, the owner is also the service provider or property manager), the MOU must include the separate roles and duties for the property even though it is one entity.

Service Plan and Budget

The service plan and budget for the project reflect the plan for providing supportive services to the population served and is prepared by the primary service provider and service partners. The budget section identifies all supportive service and front desk related expenses and the proposed funding sources for the project. Refer to the checklist help text and service plan template in the Multifamily Customer Portal for the most up-to-date requirements.

The budget should outline both the supportive service expenses and funding sources for the project, including front desk costs, if applicable. The budget must show all service costs for the primary service provider, and it must outline all line item costs, including the staffing detail (for example, position type, full-time equivalent [FTE] percentage). The primary service provider will complete the budget and identify the secured and/or proposed sources of funding for the services and unique operating costs for Supportive Housing described in the service plan.

Verification of Service Funding

Provide evidence of all service funding outlined in the service budget. Examples of verification sources include a copy of a grant award letter, grant agreement, commitment letter from a funder or donor, etc. If county or Tribal funding is included, then a letter of confirmation from the county human services or Tribal entity is required. Medicaid funding such as Adult Rehabilitative Mental Health Services (ARMHS) or Targeted Case Management (TCM) can be verified with a letter from the provider

or county stating that they are an enrolled provider for these services. Housing Stabilization Services can be verified with a proof of enrollment letter.

Services Agreement or Contracts to Fund Services

This is a formal agreement between the owner and service provider outlining what services will be provided to the population served and any costs associated with providing those services. This is done at the discretion of the owner and SHO. There is not a template for this agreement.

HMIS Memo and Contact Form for LTH and HPH Units

This form identifies who is responsible for data collection and reporting using HMIS. The form must be completed for developments with Supportive Housing units serving LTH/HPH households. Minnesota Housing may also require the use of HMIS for other identified Homeless units. The SHO will outline the specific requirements for your development at the launch meeting.

Housing Support Funding Commitment Letter

This template form letter must be completed by the county or Tribal human services department for contracted Housing Support providers for developments that will use Housing Support for housing and service costs. This form letter provides Housing Support Agreement details regarding the number of Housing Support units and approved costs.

Tenant Selection Plan and Tenant Selection Plan Checklist

A [tenant selection plan \(TSP\)](#) is the plan and process for selecting residents. The criteria used will establish eligibility requirements necessary to qualify for residency in the development. The plan should detail the following:

- Population(s) to be served
- Definitions
- Homelessness, disability, and other eligibility requirements
- The eligibility verification process
- Number of units for each program requirement
- Rent and income restrictions for each funding source
- Tenant screening criteria
- Appeal process for rejected applicants
- Tenant selection priorities

Tenant selection plans and screening criteria are instrumental and critical to help ensure homeless households have access to the housing. Goals for screening criteria should include balancing the

collective interests of each applicant, the safety of residents and management staff, and the need for the community to provide housing in an equitable manner to all households with low-incomes. In creating and implementing a successful tenant selection plan and screening criteria, the owner, management company, and service provider need to work closely together to help ensure a balanced outcome is achieved to accept the applicants experiencing homelessness and meet funding requirements.

Minnesota Housing's [Tenant Selection Plan \(TSP\) Guidelines](#) describe the requirements for TSPs for properties with applicable program and funding sources. They must be followed, to the extent outlined below, to develop a tenant selection plan for the property. The items in the General Considerations section are a requirement for all properties with applicable funding sources. The items outlined in the Tenant Screening Criteria section are requirements for properties selected for an applicable program or funding source as a result of an application submitted to Minnesota Housing after March 31, 2021, and are considered best practices for properties selected for funding prior to that date, especially for those with Supportive Housing in their projects.

The Tenant Selection Plan Checklist is a tool that owner/agents are required to use to verify that their TSP meets the requirements outlined by either state or federal sources in the property for which Minnesota Housing is responsible for verifying compliance, including Minnesota Housing's TSP Guidelines. The TSP checklist help text provides additional context for the requirements. This help text comprises Minnesota Housing's TSP Guidelines but also TSP requirements outlined by Section 8, HUD Section 811 PRA, Home Investment Partnerships (HOME), and National Housing Trust Fund (NHTF) programs.

[Affirmative Fair Housing Marketing Plan \(AFHMP\) and Addendum](#)

[The Affirmative Fair Housing Marketing Plan \(AFHMP\)](#) and [Addendum](#) are required Minnesota Housing documents that each applicant completes to describe how they will conduct an affirmative marketing program to attract and reach the populations that are least likely to hear about availability of units in the development or apply for a unit. Even if the development has established service provider networks, an AFHMP must be completed and coordinated with the management agent to help ensure that marketing is done affirmatively and that the plan contains acceptable outreach efforts to those groups least likely to apply.

Follow the instructions and toolkit on the [Fair Housing webpage](#) for completing the AFHMP and Addendum.

Management Plan/Marketing Plan

The management plan outlines how the owner/agent will manage the development and includes information such as staffing, training, responsibilities of staff members, policies and procedures related to leases, rent collection practices, emergencies, inventory documentation, inspections, applications, screening, traffic tracking, etc., and how compliance, regulatory and funding requirements will be met.

The marketing plan describes the marketing methods and outreach that will be conducted both for initial rent up (if applicable) as well as for ongoing leasing and should include a timeline for attaining full occupancy. Marketing resources should correlate to the community contacts and connections listed in the AFHMP and tenant selection plan. It is not a standardized form and although it is not the same as the AFHMP, it should indicate how the owner/agent will incorporate outreach to those least likely to apply for the housing opportunity.

Management Agreement

If the development has a Low and Moderate Income Rental (LMIR) first mortgage or other Minnesota Housing funding source requiring a Management and Occupancy Agreement, it must be prepared using Minnesota Housing's format. Additional addenda may be needed depending on the funding sources. If the development is serving HPH households, the MOU is referenced in and attached to the Management and Occupancy Agreement. The assigned Asset Manager will provide the required Management and Occupancy Agreement and addenda forms, along with formatting directions.

Fidelity Bond Insurance

If the development is a first mortgage funded development, the Asset Manager will need to review evidence of the fidelity bond insurance coverage from the management company (a/k/a employee theft or crime coverage). The due diligence checklist provides the required instructions for the acceptable coverage amount.

Marketing Agreement

If the development is a first mortgage funded development, the Asset Manager will provide the required marketing agreement form and formatting directions.

Admission Preferences and Restrictions

Properties may have occupancy preferences or restrictions due to funding requirements. For instance, certain units in Minnesota Housing funded properties must be set aside and rented to HPH households, which is an occupancy restriction. A restricted unit must be rented to the identified population. A preference will affect the order in which the applicant is selected from the waiting list and must

comply with Fair Housing policies and procedures. Owners should consult with the loan agreements and any agreements with Minnesota Housing, HUD, the United States Department of Agriculture (USDA) Rural Development or other funding sources to identify applicable restrictions or preferences. Preferences and restrictions should be set out clearly in a property's tenant selection plan.

Waiting List Management

The waiting list management process should be described in the following documents: marketing plan, tenant selection plan, and MOU. Collaboration between the management agent and service provider(s) on how and who will manage the waiting list for the Supportive Housing units is required.

All properties with Supportive Housing units are expected to work with the CoC Coordinated Entry (CE) process to identify referrals for eligible households. It is a collaborative effort between the property management company, the service provider, and the coordinated entry list manager. Refer to Chapter 5 for more information on coordinated entry.

For properties with existing waiting lists, units can be filled alternating from the existing property waiting list with referrals from CE until the waiting list is exhausted for the Supportive Housing units. A reasonable ratio should be determined and documented in the MOU and the tenant selection plan.

Chapter 10 – Occupancy Guidance and Rents for Long-Term Homeless and High Priority Homeless Units

All developments financed by Minnesota Housing are monitored for compliance with funding requirements and legal agreements. Chapter 11 covers the asset management and compliance requirements for developments with Supportive Housing (SH) units.

10.01 Tenant Selection

Minnesota Housing is committed to creating equitable, affordable and accessible housing for all Minnesotans. Tenant selection plans and tenant screening criteria that reduce barriers to access are critical to these efforts.

Owners and property managers must make sure that Homeless units are leased to eligible households, as defined in the development’s legal documents (for example, the Declaration or LURA). Maintaining a clear understanding of legal documents is extremely important to help ensure full compliance with all funder requirements. The property’s frontline staff should have a copy of the current tenant selection plan outlining eligibility and selection requirements.

Owners and property managers are advised to recognize that Supportive Housing units are intended to house people who often have poor credit, poor rental histories or criminal backgrounds. Supportive Housing units are successful in serving the people for whom they are designed only when these issues do not raise insurmountable barriers to accessing housing.

Minnesota Housing’s [Tenant Selection Plan \(TSP\) Guidelines](#) are a requirement for all projects that are selected for an applicable program and funding source as a result of a funding application submitted to Minnesota Housing after March 31, 2021.

For properties selected for funding prior to March 31, 2021, with applicable program and funding sources, the considerations in the **General Considerations** section are requirements, and the items in the **Tenant Screening Criteria** section are recommended best practices, and especially encouraged for projects that include Supportive Housing units.

Additionally, housing providers must use the [TSP checklist](#) to verify the TSP for the property reflects the state and federal requirements outlined for the programs and funding sources used in the project and follows Minnesota Housing Tenant Selection Plan Guidelines.

Tenant Lease-Up

The lease-up process should be identified in the marketing plan, tenant selection plan, MOU, and/or any like agreement outlining the details of the plan to accomplish leasing. Minnesota Housing reviews these plans for each development and can provide assistance in developing them.

The lease-up schedule should be discussed prior to occupancy and agreed upon by the owner, service provider, and management agent, and consideration should be given to the total number of units at the development compared to the total number of Supportive Housing units.

For example, one approach when leasing the LTH/HPH units is to stagger the lease-up of the LTH/HPH units to help ensure that the dynamics and culture of the development is not abruptly impacted, which in turn will help provide a smooth transition for the new tenants. This approach will depend on the supportive housing model, population served, whether it is a new development or rehab, and other factors.

Properties with project-based Section 8 must follow [HUD guidance for filling vacancies](#): No units may be set-aside or held off-line, but owners can fill vacancies by alternating selections from the existing project waiting lists with referrals from coordinated entry and their partnering organization of eligible applicants who meet the preference criteria.

10.02 High Priority Homeless (HPH) Vacancies

If an HPH vacancy occurs, every effort must be made to lease to an HPH eligible household. The owner/agent should work in partnership with the service provider to help ensure effective outreach efforts are in place with Coordinated Entry (CE) in order to access an adequate pool of qualified eligible households that can be referred to the development. All parties must follow the timelines outlined in the CE process to refer and locate applicants and process applications. All properties with HPH units or any supportive housing units for people experiencing homelessness must participate in CE for all tenant referrals.

If, for a particular HPH unit vacancy, the unit cannot be filled with a high priority household from the supportive housing list in the CE system within a reasonable timeframe from the referral request to CE, and the provider has made every reasonable effort to fill the unit with a referred household, an owner/agent may contact supportivehousing@state.mn.us for additional guidance for alternative procedures to fill vacant units.

Tenant Retention and Housing Stability

The development should have a clear plan for tenant retention, including eviction prevention and mitigation processes and policies to address potential lease infractions. For example, there should be

written procedures outlining how to address late rent payments as well as procedures to address behaviors that violate the terms of the lease. The goal is to help tenants maintain their housing without jeopardizing the property and other tenants. This information is typically outlined in the service plan and the MOU. The roles of property management and supportive services staff should be clearly outlined. Regularly scheduled meetings should occur with the service provider and management agent to discuss any concern regarding lease violations, late rent, or other problems that may impact the household's housing stability.

10.03 Rents for Supportive Housing Units Without a Rental Subsidy

The initial rental rates for supportive housing units without rental assistance are established during the underwriting process and approved on the closing, carryover, or 8609 Multifamily Workbook.

For units set aside for Long-term Homeless (LTH), High Priority Homeless (HPH) or People with Disabilities (PWD) in properties without project-based rental assistance for such units, the rents, including an allowance for tenant-paid utilities, cannot exceed the greater of 30% of the household's monthly income or the most current Supportive Housing Standard rental rate for the unit size, as [published annually](#) by Minnesota Housing.

The owner/agent must establish and implement policies and procedures to specify the calculation method used to determine the appropriate rent amount and periodic income recertification to adjust rents. Units with rental assistance will follow calculation and documentation methods for the applicable rental assistance program.

Adjusting Rents

The owner/agent must establish and implement policies and procedures to specify how and when tenant income is reassessed for the SH units and how rent increases or decreases are implemented.

Note that annual recertification of income may not be required at some properties, so the owner will have to develop policies and procedures for certifying income and adjusting rents for SH units that do not have any form of rental assistance. All rent adjustments must be done in accordance with tenant lease.

Owners must not charge rents beyond what is allowed under the applicable funding agreements. For properties with asset management oversight requiring Minnesota Housing approval for annual budgets, Minnesota Housing staff will review rent structures for the SH units during the budget process and monitoring visits.

Consistency

The owner's policies and procedures must be applied consistently to all SH units without rental subsidies. Minnesota Housing staff may request additional information to assist in verifying implementation of policies and procedures for determining rent levels set for the SH units.

Examples

In the examples below, the owner's policy is to use 30% of gross annual household income, without any deductions or allowances, to determine rent.

Example 1: Tenant's gross annual income is \$4,000:

- $\$4,000/12$ months = \$333 monthly income
- 30% of \$333 = \$100
- Supportive Housing Standard for unit = \$130
- Tax credit restriction for unit = \$490
- Utility allowance = \$20
- Owner may charge the tenant \$110 per month in rent because the current Supportive Housing Standard is greater than 30% of the tenant's income and is below the tax credit restriction. Including the utility allowance of \$20, the total tenant contribution would be \$130, equal to the current Supportive Housing Standard.

Example 2: Tenant's gross annual income is \$8,000:

- $\$8,000/12$ months = \$667 monthly income
- 30% of \$667 = \$200
- Supportive Housing Standard for unit = \$130
- Tax credit restriction for unit = \$490
- Utility allowance = \$20
- Owner may charge the tenant \$180 per month in rent because 30% of tenant income is greater than the Supportive Housing Standard and is below the tax credit restriction. Including the utility allowance of \$20, the total tenant contribution would be \$200, equal to 30% of the tenant's monthly income.

Example 3: Tenant's gross annual income is \$25,000:

- $\$25,000/12$ months = \$2083 monthly income
- 30% of \$2083 = \$625
- Supportive Housing Standard for unit = \$130
- Tax credit gross rent limit for unit = \$490

- Utility allowance = \$20
- Owner may only charge the tenant \$470 per month in rent because 30% of tenant income is greater than the tax credit rent limit. Including the utility allowance of \$20, the total tenant contribution would be \$490, equal to the tax credit gross rent limit.

Chapter 11 – Monitoring and Reporting Requirements for LTH/HPH

11.01 Requirements for Properties with Long-term Homeless/High Priority Homeless Supportive Housing Units

Minnesota Housing requires owners of occupied properties with Supportive Housing (SH) units restricted to serve Long-term Homeless (LTH) or High Priority Homeless (HPH) units to provide specific information beyond the general funding reporting requirements. The following requirements are described in more detail below:

- Enter and report participant information in the Homeless Management Information System (HMIS)
- Report annually to Minnesota Housing on the operations of the property
 - Audited financial statements, annual budget and financial review (only for certain types of funding)
 - SH annual online property survey
- Asset management or compliance site visit, questionnaire, and file reviews

Overall monitoring and reporting requirements will be coordinated by the Asset Manager (formerly, HMO) or compliance officer (CO) assigned to the property and the supportive housing quality officer. The requirements will vary, depending on the sources of funding. HMIS reporting is coordinated by Minnesota Housing's supportive housing team.

Homeless Management Information System (HMIS)

All providers with Supportive Housing Homeless units must enter and report participant information in [Minnesota's HMIS](#), a web-based information technology system used to collect client-level data on the provision of housing and services to individuals and families experiencing Homelessness. HMIS implementation is a critical element of Minnesota's initiative to prevent and end homelessness statewide.

Direction, management, and administration of Minnesota's HMIS is a collaborative effort among CoC regions, state/regional/local governmental bodies, Tribes and community organizations and the system administrator, the Institute for Community Alliances (ICA). Minnesota currently uses ServicePoint software provided by WellSky for its statewide HMIS.

Properties with units designated to serve LTH or HPH households are required to participate in HMIS. Typically, the service provider will collect the information from the household that is required on the HMIS LTH/HPH data collection forms, make sure the data is entered into HMIS in compliance with the system administrator's requirements and submit the required reports to Minnesota Housing. The

supportive housing team will send report reminders and instructions at the end of reporting periods to notify providers of the reports required and of due dates.

Minnesota Housing uses the HMIS data and reports in several ways:

- To monitor LTH/HPH utilization, turnover, and tenant outcomes for each property and rental assistance program; the supportive housing team shares the information with the asset management and compliance teams to help ensure quality and compliance and to identify performance issues
- To track progress in ending homelessness and monitor overall system performance
- To assess whether projects are reaching and serving the target population (based on demographic information) and connecting households to income and benefits, employment and health care
- To monitor equity for households to access and maintain supportive housing
- To track trends and inform future policy and funding direction

[Required data collection forms are available](#) under the Minnesota Housing LTH section and include:

- LTH Entry (single or households)
- LTH Exit (single or households)
- LTH Interim (single or households)

Review the specific instructions about how to enter data into HMIS for the LTH sub-assessment. All HMIS users must attend an initial training and pay an annual license fee. ICA also provides regular user training sessions and a help desk.

Financial Review and Annual Reporting

The monitoring and reporting will be coordinated by the Asset Manager and/or Compliance Officer assigned to the property. Please review the following guidelines for the annual financial and reporting requirements:

- **First Mortgage/First Mortgage Oversight**
 - Owners of properties with LTH/HPH units must comply with the applicable program audit guides and requirements based on the funding program the developments received by Minnesota Housing, as many funding streams necessitate first mortgage oversight requirements (such as Housing Infrastructure Bonds). To identify your funding program, refer to the loan documents and the requirements stated in the [Guidelines Minnesota Housing Audits](#).
 - You are required to submit a copy of the audited financial statement for the most recent fiscal year-end, as stipulated in the Regulatory Agreement or any similar

agreement. Developments with an agency amortizing first mortgage or developments with first mortgage oversight requirements are also required to submit annual budgets, monthly operating reports, and must receive approval from the assigned asset manager on rent increases.

- **Deferred Loans: Year End Reporting**

- The instructions below are for Minnesota Housing funded developments that may or may not have a Minnesota Housing first mortgage or first mortgage oversight. The assigned Compliance Officer will provide instructions to owners when reporting is required.
- Owners of properties with LTH/HPH units must annually submit an Annual Owner Certification and report on the occupancy of the property using Minnesota Housing's **Property Online Reporting Tool (PORT)**. Refer to the [PORT User Guide](#) for reporting instructions. Property owners are required to maintain annual operating (financial) data and submit to Minnesota Housing upon request. Beginning with 2022 monitoring year, annual submission of annual operating data is not required.

- **Other Programs**

- If the property has sources of funding other than what is listed above, you must comply with Minnesota Housing's applicable program guides and requirements for that program, including financial reporting. This will be coordinated by the assigned Asset Manager and/or Compliance Officer. Reference [Minnesota Housing's program guides](#) to view further information on the funding program for the property. Also refer to Chapter 11.03 for Supportive Housing requirements for Housing Infrastructure Bond funded developments.

Contact the assigned Asset Manager or Compliance Officer with any questions about reporting requirements for units funded to serve LTH/HPH households.

Supportive Housing Annual Online Property Survey

Each year, both the property manager and the service provider individually complete an online survey about each property with LTH/HPH units. The survey is typically emailed in December and due in February. Respondents are asked to identify areas of strengths and challenges at the property. Minnesota Housing uses summarized data from the survey to gauge customer satisfaction, identify trends and issues, plan training, and drive future policy and business decisions. Minnesota Housing also looks at individual property responses in order to provide information about operations and service provision. The survey is an important tool used to better understand Minnesota Housing's Supportive Housing portfolio.

Monitoring, Compliance and Quality Site Visits, Questionnaires and File Reviews

The assigned Asset Manager, CO or a supportive housing quality officer (SHQO) will contact the owner to arrange a site visit for asset management, compliance, or quality. The following outlines guidelines and protocol for the timing of site visits. Note that properties with operational problems, such as high turnover, negative exits, or problems filling the LTH/HPH units, may require more frequent visits.

- Properties that have a Minnesota Housing first mortgage will be inspected within the first full year of occupancy, and inspections may occur every year or every other year afterward, at the discretion of Minnesota Housing policies and practices.
- Properties with deferred loan sources will be inspected within the first year of full occupancy, then every three to five years, depending on the type and/or aggregate amount of Minnesota Housing financing, or as needed, at the discretion of Minnesota Housing.
- Supportive Housing quality site visits will be determined by a risk-assessment, data review, and other factors for a Supportive Housing quality review.

Whenever possible, inspections will be coordinated if multiple funding program requirements overlap. Contact the assigned Asset Manager, CO, or SHQO with questions.

When the Asset Manager or CO prepares for a site visit, they will provide links to a Property Manager Questionnaire for Developments with LTH/HPH Units and a Service Provider Questionnaire for Developments with LTH/HPH Units prior to the visit. Instructions will be provided at the time of scheduling. The SHQO may also ask the owner to complete a supportive housing assessment.

The Asset Manager or CO will request to view files for some or all of the LTH/HPH households. The purpose of this review is to determine that LTH/HPH eligibility has been properly documented.

11.02 File Documentation and Forms

Properties receiving funding from Minnesota Housing programs designated to serve people who are LTH/HPH must verify applicant eligibility and retain documentation in the tenant file.

- The [Initial Occupancy Statement by Tenant Form](#) will be required as units become vacant; units must be leased to qualified households who must disclose their income at initial occupancy on an Initial Occupancy Statement by Tenant form. This form will be used to help ensure that renters are income qualified to occupy the assisted unit.
- A [Government Data Practices Act Disclosure Statement](#) **must be signed by household members age 18 and older.** This form must be completed at initial occupancy and maintained in the tenant's file. By signing the form, the tenant is acknowledging their consent to release their data to Minnesota Housing. This form does not replace the release of information that a tenant may sign, giving the management agent and/or housing

provider permission to access third party verification of income or assets. Minnesota Housing has two versions of this form, based on the type of funding received:

- For developments that receive Minnesota Housing capital funding and/or operating subsidies
- For developments that receive Minnesota Housing funded rental assistance grants from programs such as Bridges and Housing Trust Fund
- **[Head of Household Demographic Information Form](#)** – All heads-of-household that have been approved for occupancy in units assisted with a deferred loan but not with Housing Tax Credits (HTC), HOME, NHTF, Section 1602, Tax Credit Assistance Program (TCAP), Housing for Persons with Aids (HOPWA), or Minnesota Families Affordable Rental Investment Fund (MARIF) must complete this form. ***(If you are able to satisfy reporting requirements because the same data is collected on other forms you use, it is not necessary to also complete this form. Submit the other form(s) to satisfy the request for demographic information.)***
- **High Priority Homelessness (HPH)** for Supportive Housing must be documented for each household occupying a designated HPH unit. The **HPH Eligibility Confirmation Form** can be generated directly from HMIS, reflecting the referral is from Coordinated Entry (CE) and the household has been prioritized for Permanent Supportive Housing, per the HPH definition. More information on HPH eligibility and documentation can be found on the [Supportive Housing](#) webpage. Scroll down to the HPH materials section.
- For properties funded prior to October 2018 that are still choosing to use Long-Term Homelessness (LTH) as the unit designation for Homeless units, a [Long-Term Homelessness Eligibility Form](#) is required for each household. The form is completed by the Supportive Housing provider and/or referring entities, including coordinated entry. Those working with youth, individuals, or families experiencing LTH must document and verify the applicant’s housing history to determine program eligibility at the time of initial occupancy. Written documentation of the household’s previous housing history must be maintained in the participant’s file, as well as third party verification of Homeless episodes when possible. The housing provider, administrator, referring agency, or service provider is required to use the Long-Term Homelessness Eligibility form.
 - In order to provide the required evidence that the homeless episodes have been verified, an additional homeless verification form is optional. The [Homeless Episode Verification Form](#) may be used by a third party (e.g. outreach worker, shelter staff, family or friend) to provide verification for one or more episodes of homelessness. This form should be attached to the LTH Eligibility Form and included in the housing history.
 - Not all episodes of homelessness will be verifiable through a third party, such as HMIS records, Emergency Shelter (ES), outreach worker, drop-in center, or friend or

family member. In cases where no such verification is available, the applicant may self-certify (on the LTH Eligibility form) as evidence of the specific homeless episode.

For more information about the LTH definition and eligibility, refer to Chapter 2 – Homeless and Housing Definitions and Appendix C – LTH Eligibility Frequently Asked Questions.

11.03 Housing Infrastructure Bonds (HIB) and Housing Infrastructure Appropriations– Additional Requirements

Supportive Housing properties funded with HIB are required to document and certify that all tenants meet the eligibility requirements for HIB. Depending on the HIB source, tenant must either be Homeless or have behavioral health needs. Eligible populations include:

- Homeless Household:
 - High Priority Homeless (HPH)
 - Other Homeless Households: Households, other than High Priority Homeless households, that include (i) individuals leaving institutions that do not have a permanent residence or (ii) Other Homeless populations not referred by the Coordinated Entry System
- Households with individuals who have the following Behavioral Health needs (only for projects that received specific behavioral health HIB funding):
 - People with Mental Illness
 - People with Substance Use Disorders

The owner is required to document tenant eligibility for HIB and retain documentation in the tenant file. The eligibility documentation forms are located on Minnesota Housing’s website on the Compliance page under Tenant Certification Forms.

11.04 Request for Action

A request for action (RFA) must be completed when changes proposed impact the legal agreements between the property and Minnesota Housing or its official monitoring records. An RFA processing fee may be charged. Refer to the [Request for Action webpage](#) for instructions, forms, and fees. Examples that indicate an RFA is needed include:

- A change in ownership
- A name change to the property
- A change in service provider
- A change in the property management company
- A change to income, rent, or other occupancy restrictions

- A change to population served for LTH/HPH Homeless units
- Other loan servicing requests

If the service provider is changing at a property, Minnesota Housing must be notified in advance to approve the request. First, Minnesota Housing recommends you contact the Asset Manager and SHO staff to discuss your plans. The next step is to complete a new 215A Qualification of Service Provider Form and submit to Minnesota Housing for review. After review of the 215A and approval of the service provider, the owner then submits the [RFA Form](#) and the following documents:

- An updated MOU
- An HMIS contact form
- A service plan and budget
- Minnesota Housing might require one or all of the following be updated: marketing plan, tenant selection plan, management plan, or other documents.



Chapter 12 – Supportive Housing for People with Disabilities (PWD)

12.01 Supportive Housing Strategic Priority in the Request for Proposals

The annual Multifamily Consolidated RFP has a priority for developments that will set aside a portion of their units for supportive housing to serve people with disabilities (PWD). Points are awarded to applicants that will set aside units to rent to households that include a person with a disability.

12.02 Planning Units for People with Disabilities

The PWD units are intended to serve People with Disabilities with low incomes who are not necessarily homeless. Income limits are 30% MTSP. Developers must work with the county or Tribal human services office to determine the housing needs and available resources for people with disabilities in the service area. The county or Tribe will determine the population(s) to be served and the referral process and resources for the PWD units.

County and Tribal human services departments are responsible for providing mainstream services (primarily Medicaid funded services) for people with certain disabilities and extremely low-income and assisting them to live in the most integrated community setting of their choice. They are aware of the housing needs for the people they serve and will be able to provide referrals for eligible households and work with the developer to determine how services and rental assistance will be provided. The county or Tribal human services department may choose to be the service provider for the eligible person or may designate a specific service provider(s), a type of contracted service provider (for example TCM, ARMHS, Waiver, Housing Stabilization), and/or funding source(s) to provide the services for the population.

The planning process for the PWD units depends on the type of supportive housing project proposed as described in Chapter 3. Primarily Supportive Housing projects need to fully develop a plan for the units prior to applying for funding in the Multifamily Consolidated RFP while planning for the units in Partially Supportive Housing occurs after a project is selected for funding.

12.03 Home and Community Based Services Settings

Developments that will include the delivery of Home and Community Based Services (HCBS) Waiver Services to people with disabilities must consider the HCBS setting qualities outlined in the HCBS federal rule and the Minnesota Department of Human Services (DHS) requirements to help ensure the setting does not have the effect of isolating individuals from the broader community. DHS evaluates each HCBS setting to make sure it is HCBS compliant.

The HCBS rule requires that people who receive publicly paid long-term services and supports must receive those supports in the most integrated setting and have full access to the benefits of community

living. The rule has requirements for person-centered planning, service settings and opportunities for involvement in the community.

The rule includes additional standards that apply to residential settings owned or controlled by the provider. These standards relate to qualities such as:

- • Eviction and appeals processes
- • Choice of roommate if sharing a unit or a bedroom
- • Freedom to furnish and decorate
- • Control of daily schedule, including access to food
- • The right to have visitors at any time
- • The setting's physical accessibility
- • Individual autonomy with life choices
- • Privacy protections

For more information, refer to [the DHS Transition Plan for HCBS](#)

Minnesota Housing will consider the HCBS setting qualities when evaluating applications that include units that will serve people with disabilities.

12.04 Minnesota Housing Request for Proposals – Units for People with Disabilities (PWD)

Applicants that will set aside units to rent to People with Disabilities (PWD) can receive points on the Self-Scoring Worksheet based on the number and percent of total units that will be set aside. Refer to the Self-Scoring Worksheet for available points for the year the applicant plans to submit an application, which can be found on the [Multifamily Consolidated RFP webpage](#).

NOTE: Points cannot be claimed for the same units for Supportive Housing for High Priority Homeless (HPH) and People with Disabilities (PWD). The units must be separate and distinct units for each population.

NOTE: Projects with unit(s) that are age restricted cannot claim the People with Disabilities selection criterion

To be eligible under PWD Tier One, the proposal must meet all of the following conditions:

- The property and units are not restricted to persons of a particular age group and in which units are set aside and rented to persons with a disability.
- The applicant must submit the required narrative and any other forms and submittals identified for PWD Tier One units in the [Multifamily Request for Proposals Standards](#), HTC Self-Scoring Worksheet, and the Multifamily Portal Checklist.

- The applicant agrees to pursue and continue renewal of rental assistance, operating subsidy, or service funding contracts for as long as the funding is available.
- Units are restricted to households with incomes at or below 30% MTSP income limits.
- The applicant agrees that if units set aside for People with Disabilities are occupied by households without rental assistance, the gross rents, including an allowance for tenant-paid utilities, cannot exceed the greater of 30% of the household's monthly income or the most current Supportive Housing Standard for the unit size, as published annually by Minnesota Housing in the [Multifamily Underwriting Standards](#) in the Supportive Housing Standards – High Priority Homeless or People with Disabilities section. The owner must establish and implement policies and procedures to specify the calculation method used to determine the appropriate rent amount and periodic income recertification to adjust rents.

12.05 Request for Proposals Application Review

In collaboration with the production and asset management teams, the supportive housing team at Minnesota Housing reviews all relevant elements of the application to determine scoring eligibility and feasibility of the PWD units. Elements that are reviewed include:

- Application is complete and meets the criteria to be eligible for PWD points
- Affordability of the PWD units: Units must have rental assistance or rents set at Supportive Housing rent standards
- Income limits for the PWD units are at 30% MTSP
- For Primarily Supportive Housing applications, the Supportive Housing Narrative identifies a clear target population and describes how outreach, referrals, and services will be provided with the goal of housing stability and retention and identifies the rental assistance resources.
- For Partially Supportive Housing applications, the market feasibility for the PWD units may also be reviewed as described in Chapter 4.06
- The housing is provided in an integrated setting and meets the HCBS setting qualities

12.06 Technical Assistance

Minnesota Housing staff are available to answer specific questions and provide technical assistance during pre-development planning. Processing agents and consultants are often used to help plan Supportive Housing developments and complete funding applications.

12.07 Closing and Compliance

Applicant selections for capital funding in the Multifamily Consolidated RFP are determined by Minnesota Housing's board. Selected applicants will receive a project selection letter outlining the basic terms and conditions for funding.

Project Launch Meeting

After receiving the project selection letter, the housing development officer (HDO) or loan processor (LP) will schedule a project launch meeting with all parties, including the developer and management agent.

At the project launch meeting, Minnesota Housing staff will review the project plan and explain the funding requirements and the required materials (due diligence) that need to be submitted to close on the financing. The critical path for closing, including any selection conditions for funding, will also be addressed.

Closing Due Diligence

- The primary document required for the PWD units for closing is the memorandum of understanding (MOU) between the owner, management agent, the county or Tribal human services office and the service provider(s). Other documents may be requested, including documentation of service or rental assistance funding.
- Income limits and affordability for the PWD units must meet the requirements
- Unit restrictions will be included in the applicable financing documents

Monitoring and Compliance

Owners of properties with PWD units must comply with the applicable program guides and requirements for that program and must annually submit a certification and report on the occupancy and operations of the property using Minnesota Housing's Property Online Reporting Tool (PORT). Refer to the [PORT User Guide](#) for instructions. Minnesota Housing compliance staff annually reviews owner compliance with PWD requirements through PORT.

Documentation of Disability

Tenants will self-certify that they have a disability on the [Self-Certification of Eligibility for PWD Unit](#) at initial occupancy. This form should be retained in the tenant's file. Tenants are not required to provide third party certification of their disability or disclose their specific disability.

12.08 HUD Section 811 Project-Based Rental Assistance Units for People with Disabilities (PWD Tier Two)

The Multifamily Consolidated RFP includes an additional option for creating units for People with Disabilities (PWD) using HUD Section 811 Project-Based Rental Assistance (HUD Section 811 PRA) contingent on available funding. The criteria are outlined on the Self-Scoring Worksheet.

12.09 Requirements for HUD Section 811 PRA PWD Units

Pre-Application

Developers that would like to create HUD Section 811 PRA PWD units must complete a HUD Section 811 PRA Pre-Application so that Minnesota Housing can determine the project's eligibility for HUD Section 811 PRA. The Pre-Application is due prior to the Multifamily Consolidated RFP due date. Applicants are notified of eligibility within three weeks of that date. This will help applicants determine if they will propose to create regular PWD units or HUD Section 811 PRA units and take points on the Self-Scoring Worksheet.

The process and checklist are described in the [Multifamily Request for Proposals Standards](#) and materials. More information can also be found on the [Section 811 PRA webpage](#).

People with Disabilities (PWD) Narrative for HUD Section 811 Project-Based Rental Assistance (PRA) units

Applicants will need to need to work with the Minnesota Department of Human Services (DHS) to complete the narrative and submit by the application due date. Applicants are encouraged to connect with the DHS contact early in the planning process for HUD Section 811 PRA units.

DHS manages the waiting list for HUD Section 811 PRA and coordinates the referral process and services with the referring providers, counties and the property manager. Refer to the [Section 811 PRA webpage](#) for more information about the program.

Unit Restrictions

HUD Section 811 PRA PWD units have the same requirements and restrictions as regular PWD units and will have the additional requirements outlined in the HUD Section 811 PRA program.

In addition, the total number of HUD Section 811 PRA PWD units cannot exceed 11 units and the total number of Supportive Housing units (PWD, HPH and Homeless) cannot exceed 25% of the total units in the development. This is a HUD requirement for Section 811 PRA units to be in an integrated housing setting.

HUD Section 811 PRA Rental Assistance Contract

Selected properties will enter into a Rental Assistance Contract with Minnesota Housing and receive monthly housing assistance payments by submitting payment vouchers in HUD's Tenant Rental Assistance Certification System (TRACS). The term of the Rental Assistance Contract is 20 years.

Monitoring and Compliance

HUD Section 811 PRA PWD units have the same compliance requirements as regular PWD units. Monitoring for the HUD Section 811 PRA program is conducted by Minnesota Housing's HUD Section 811 PRA team and is coordinated with other agency monitoring and compliance reviews.

Chapter 13 – Fair Housing Policy

It is the policy of Minnesota Housing to affirmatively further fair housing in all its programs so that individuals of similar income levels have equal access to Minnesota Housing programs, regardless of race, color, creed, religion, national origin, sex, marital status, status with regard to public assistance, disability, familial status, gender identity or sexual orientation.

Minnesota Housing's fair housing policy incorporates the requirements of the Fair Housing Act, Title VIII of the Civil Rights Act of 1968, as amended by the Fair Housing Amendment Act of 1988, as well as the Minnesota Human Rights Act. Housing providers are expected to comply with the applicable statutes, regulations, and related policy guidance. Housing providers should make sure that admissions, occupancy, marketing and operating procedures comply with non-discrimination requirements.

In part, the Fair Housing Act and the Minnesota Human Rights Act make it unlawful, because of protected class status, to:

- Discriminate in the selection/acceptance of applicants in the rental of housing units;
- Discriminate in terms, conditions or privileges of the rental of a dwelling unit or services or facilities;
- Engage in any conduct relating to the provision of housing that otherwise makes unavailable or denies the rental of a dwelling unit;
- Make, print or publish (or cause to make, print or publish) notices, statements or advertisements that indicate preferences or limitations based on protected class status;
- Represent a dwelling is not available when it is in fact available;
- Deny access to, or membership or participation in, associations or other services, organizations or facilities relating to the business of renting a dwelling or discriminate in the terms or conditions of membership or participation; or
- Engage in harassment or quid pro quo negotiations related to the rental of a dwelling unit.

Minnesota Housing has a commitment to affirmatively further fair housing for individuals with disabilities by promoting the accessibility requirements set out in the Fair Housing Act, which establish design and construction mandates for covered multifamily dwellings and requires housing providers to make reasonable accommodations and to allow persons with disabilities to make reasonable modifications.

Applicants will be required to submit an Affirmative Fair Housing Marketing Plan at the time of application, to update the plan regularly and to use affirmative fair housing marketing practices in soliciting renters, determining eligibility and concluding all transactions.

As a condition of funding through Minnesota Housing, housing providers are not permitted to refuse to lease a unit to, or discriminate against, a prospective resident solely because the prospective resident has a housing choice voucher or other form of tenant-based rental assistance.

Chapter 14 – Supportive Housing Contacts

Supportive Housing Officer (SHO)

SHOs work with owners, property managers and service providers on Supportive Housing (SH) developments, provide technical assistance, conduct application reviews and closing due diligence related to SH, as well as SH quality oversight, performance and outcomes. They also provide guidance on LTH and HPH eligibility and documentation and work with Supportive Housing providers to problem solve occupancy and resource issues.

Contact supportive housing staff at supportive.housing@state.mn.us.

Homeless Management Information System (HMIS)

Reporting requirements for Supportive Housing units, HMIS set up for new projects, report notices, report reviews and compliance.

Report submission and questions: mhfa.lth-hmis@state.mn.us.

Housing Trust Fund (HTF) Program Rental Assistance for Supportive Housing

Contact HTF program rental assistance staff at mhfa.rental-assistance@state.mn.us

Asset Managers

Asset Managers work with property management and owners on SH developments, provide technical assistance, conduct application reviews and closing due diligence related to property management and compliance. Contact the Asset Manager assigned to the property for any questions about asset management. Staff contacts are listed toward the bottom of the [Oversight and Support for Property Managers webpage](#).

Compliance

Contact the compliance officer (CO) assigned to the property for compliance or monitoring questions for Housing Tax Credits, HOME, National Housing Trust Fund (NHTF), or deferred loan programs. Staff contacts are listed [Oversight and Support for Property Managers webpage](#).

Appendix A – Terms

Term	Definition
Homeless Definitions and Eligibility	Refer to Chapter 2

Other Terms

Term	Definition
Multifamily Consolidated Request for Proposals (Consolidated RFP)	Minnesota Housing offers a variety of financing products and deferred loans for rental properties in Minnesota. Financing is available on a year-round basis and/or through the Consolidated RFP. The Consolidated RFP, offered once per year, consolidates and coordinates multiple housing resources into one application process. Applicants can apply for Minnesota Housing funds through the Multifamily Customer Portal .
Coordinated Entry (CE)	A centralized or coordinated process designed to coordinate program participant assessment and provision of referrals to housing and services. A centralized or coordinated entry system covers the geographic area, is easily accessed by individuals and families seeking housing or services, is well advertised and includes a comprehensive and standardized assessment tool.
Homeless Management Information System (HMIS)	<p>A web-based data system that provides standardized and timely information to improve access to housing and services and strengthen efforts to end homelessness. Programs serving people who are Homeless use HMIS to collect household information and record assistance provided. HMIS provides data on homelessness including unduplicated counts, use of services, and the effectiveness of the local Homeless assistance system.</p> <p>HMIS is used to record the characteristics and track the outcomes of persons experiencing homelessness living in Supportive Housing units funded by Minnesota Housing.</p>
Housing Tax Credit(s)	Also referred to as Low-income Housing Tax Credit(s) and HTC.
Housing Tax Credit (HTC) Qualified Allocation Plan (QAP)	Minnesota Housing is the designated HTC allocating agency for the state of Minnesota, with certain other cities and counties also designated as suballocators. Federal law requires that allocating agencies adopt a QAP, and Minnesota Housing’s QAP is developed in accordance with federal law and all applicable federal regulations. The QAP sets forth selection criteria that are appropriate to local conditions and priorities for allocating tax credits to housing projects.

Term	Definition
Low-income Housing Tax Credits (HTC)	The Low Income Housing Tax Credit, also referred to as Housing Tax Credits, is a federal income tax credit awarded to owners and then sold to investors to generate capital for construction, or acquisition with substantial rehabilitation of eligible housing. Minnesota Housing awards tax credits in two rounds of a competitive allocation process held each year. Round 1 is held concurrent with Minnesota Housing’s Multifamily Consolidated RFP, and Round 2 (fewer funds) traditionally is held early in the calendar year. Applicants must meet the priorities of Minnesota Housing’s HTC Qualified Allocation Plan (QAP) .
Minnesota Housing Finance Agency	Also referred to as Minnesota Housing
Minnesota Interagency Council on Homelessness (MICH)	MICH, comprised of commissioners of 11 state agencies, the chair of the Metropolitan Council and the governor’s office, is accountable for leading the state’s efforts to achieve a shared vision: housing stability for every Minnesotan.
Other Homeless Households	Includes (i) individuals leaving institutions that do not have a permanent residence or (ii) other homeless populations not referred by the Coordinated Entry System.
Primarily Supportive Housing	A project with fewer than 50% of the total units that will serve HPH, PWD, or Other Homeless households.
Partially Supportive Housing	A project with 50% or more of the total units will serve HPH, PWD, or Other Homeless households.

Appendix B – Resources

Minnesota Housing’s [website](#) has several pages that provide information about Supportive Housing:

<https://www.mnhousing.gov/rental-housing/supportive-housing.html>

The Supportive Housing Annual Report summarizes outcomes and performance information for supportive housing units funded by Minnesota Housing. The annual report is posted on the [Supportive Housing webpage](#) in the reports section.

The Supportive Housing Evaluation

Minnesota Housing worked with the Technical Assistance Collaborative (TAC) and Human Services Research Institute (HSRI) to conduct an extensive evaluation of Minnesota Housing’s Supportive Housing portfolio and to examine best practices for supportive housing at several housing finance agencies around the country.

The [evaluation](#) and [best practices](#) reports were completed in 2020 and are rich with information. They deliver the evaluation results and include recommendations for Minnesota Housing to further strengthen its portfolio and practices. Minnesota Housing staff have used these recommendations to develop an [action plan](#) for Supportive Housing developments, including oversight and monitoring.

Supportive Housing Standards

The Supportive Housing Alliance (SHA), formerly known as the Stewardship Council, is an interagency work group of designees from organizations that fund the development and operation of supportive housing throughout the state. SHA’s purpose is to directly impact the creation, preservation and stabilization of supportive housing as a key component in Minnesota’s work to prevent and end homelessness.

SHA has initiated a funding alignment project aimed at strengthening the supportive housing infrastructure statewide. The goal is to align funding for capital, operating expenses and services for supportive housing and secure additional resources. As a first step in this process, SHA has developed supportive housing standards so that housing providers and funders have a clear understanding of what is needed for quality supportive housing to serve the needs of the intended populations.

To develop the supportive housing standards, SHA contracted with North Star Policy Consulting in 2021 to engage stakeholders to develop recommendations for the standards. In 2022, SHA then used those recommendations to draft the standards and again conducted stakeholder engagement sessions for feedback on the final standards. SHA approved the final draft of the [supportive housing standards](#) in

November 2022. SHA recommends that funders of site-based supportive housing adopt these standards for organizations and developments they fund.

The supportive housing standards are considered best practices, and Minnesota Housing encourages owners and project partners to incorporate the standards into their operations, as funding allows.

To learn more about SHA and the supportive housing standards, refer to <http://supportivehousingalliance.org/>

There are also other governmental and non-governmental organizations that provide useful tools and research related to supportive housing, homelessness, and services. The resources listed below are organizations with a nationwide focus and are based in the United States. Several of these organizations also have local Minnesota chapters or partners.

- [Corporation for Supportive Housing](#)
- [National Alliance to End Homelessness](#)
- [National Alliance on Mental Illness](#)
- [Substance Abuse and Mental Health Services Administration](#)
- [United States Interagency Council on Homelessness](#)
- [Housing and Urban Development Exchange](#)
- [Housing First - National Alliance to End Homelessness](#)

Appendix C – LTH Eligibility Frequently Asked Questions (LTH FAQs)

Housing providers often have questions about determining LTH eligibility for specific households and unique situations. Below are some common LTH eligibility questions and answers. Please consult Minnesota Housing Supportive Housing staff with other questions.

1. What is an episode of Homelessness?

- a. A stay in an Emergency Shelter (could be one night or two months)
- b. Sleeping in a place not meant for habitation (e.g., street, camping, abandoned buildings, car, condemned housing)
- c. Fleeing domestic violence
- d. Couch hopping or doubled-up (Minnesota definition only)
- e. An episode of Homelessness might include multiple instances of any of these situations. Multiple consecutive stays in any of these situations is only one episode of Homelessness. The episode ends when the household obtains their own housing.
- f. An institutional stay can also break a Homelessness episode (refer to questions 9 and 10).

2. How long does a household need to stay in a shelter before it's considered an episode of Homelessness?

- a. One night; however, it would be extremely unusual for a household to be Homeless for only one night. They are likely to be alternating shelter stays with doubling up, camping, etc. Note also that the LTH definition does not require someone to be in shelter before entry into housing.

3. How long does each episode of couch hopping need to last before it's considered an episode of Homelessness?

- a. There is not a specific minimum time, but it is generally more than just a few days (could be multiple locations). Overall, for a couch hopping or doubled-up event to be considered an episode of Homelessness, it should not last longer than 12 consecutive months in the same housing situation. Carefully consider the relationship of the Homeless household to the person(s) with whom they are staying. Could they continue staying there without jeopardizing the occupant's lease? Is it safe? Do they have their own bedroom or private place to sleep? The housing history is important information used to determine whether there is a pattern or history of unstable housing.

4. What about board and lodge, group homes, halfway houses?

- a. They are generally considered neutral events if utilized as a temporary transition from an institution or a previous episode of Homelessness. If the board and lodge, group home or halfway house were used as permanent housing options for the household, then the event may not be considered neutral.

5. What about foster care?

- a. Placement in foster care is considered a neutral event. Housing history prior to or after foster care placement (including time spent Homeless as an accompanied minor) should be evaluated to determine if it meets Minnesota’s LTH definition. Youth aging out of foster care can be considered at high risk of LTH.

6. What about motel vouchers instead of a shelter?

- a. Some parts of the state utilize motel vouchers as a form of Emergency Shelter or individuals/households themselves utilize hotels to avoid shelters. Stays in motels with an emergency voucher are considered an episode of Homelessness.

7. What about refugees?

- a. Long-term Homeless would apply to persons who have been living in this country for at least one year and have been Homeless for that period. Time spent Homeless outside of the country is a neutral event. Permanent Supportive Housing for LTH is meant to serve people who need affordable housing and services to maintain the housing and who often have serious mental illness, chemical dependency, or a dual diagnosis, in addition to other barriers.

8. How long should an LTH household remain eligible for Permanent Supportive Housing (PSH) for LTH?

- a. If the household meets the LTH definition, that household will remain eligible for PSH for LTH as long as the household continues to need supportive services to effectively maintain their housing. Households that continue to need supportive services can choose to move from one PSH or LTH unit, development, or program to another.

9. What types of facilities are included in neutral time and how do you deal with it when shelter stays are on either side of it but the time was for longer than a year?

- a. Hospital stays, in-patient treatment, Intensive Residential Treatment Services (IRTS), jail, prison, foster care, and board and lodge that is considered temporary or transitional are considered “facilities/institutions.” They are not considered as housing or Homelessness situations, so they are treated as neutral situations; however, if an individual was in a facility/institution for fewer than 90 days and was Homeless at entry to the facility, that time can be considered time Homeless.
- b. Transitional Housing (TH) is a neutral situation. It is not considered as housing or Homelessness.
- c. If there are shelter stays/Homeless episodes before and after the neutral event, you can consider the Homelessness as one continuous episode OR as two separate episodes.

10. Is it two episodes if an individual is Homeless and then is in Transitional Housing, the hospital, jail, etc. and then homeless again after discharge? Does institution time make an episode?

- a. An institutional or Transitional Housing stay is neutral, so you can consider the time Homelessness before and after the institutional stay as one continuous episode OR as

two separate episodes (depending on if you are trying to come up with 12 consecutive months or four episodes over three years). For example, if a household was Homeless eight months prior to entering a facility and four months after exiting the facility, the household would meet the LTH definition for a continuous 12 months. It could also be counted as two Homeless episodes.

b. Also refer to question 9 about an institutional stay that is fewer than 90 days.

11. One of my participants was selected back in the fall. She met with me and we verified her LTH status: she was Homeless about three years. Before we housed her, she entered a treatment facility for 90 days and is about to be placed in an IRTS facility for another 90 days, both positives for her health and well-being. I am assuming she still qualifies as LTH. That treatment and IRTS are "disregarded" and that we can work to house her during the next 90 days so that she can spend only a minimum time in shelter. Does she qualify?

a. Yes, she qualifies as LTH because the time spent in treatment and IRTS is considered neutral.

12. Chemically dependent and Serious and Persistent Mental Illness (SPMI) clients tend to have long, costly periods of institutionalization. I've seen clients with five plus years of institutionalization that do not meet the definition. Perhaps they were functioning and barely hanging on to housing prior to those five years. Is there any way the LTH definition can accommodate for populations with long periods of institutionalization?

a. The household may be eligible if the household needs supportive services to successfully maintain housing and has been in and out of institutions for the majority of their housing history. Please contact Minnesota Housing staff to discuss cases on an individual basis.

13. When someone goes into Transitional Housing (TH) and then they become Homeless again, does the three years you're counting back include the time they are in TH, or can you go back and look at their Homeless history three years back from their admission date into TH? Is there a time limit on what is considered a TH program (six months, a year, two years, more)?

a. Yes, you can go back and review the housing history prior to entering TH. You can count the time before and after the TH to determine LTH. TH is temporary housing for up to 24 months.

14. If someone does not have 12 consecutive months of Homelessness due to going into treatment for two months in that last 12-month period, can we go back two more months to get consecutive 12 months?

a. Yes, treatment is considered neutral time. There is not a time limit on the "look back" time to determine whether the household meets the LTH definition. You can also consider time in treatment that is fewer than 90 days as time Homeless.

15. Should I talk with Minnesota Housing to request a waiver if someone is close to meeting the LTH definition and in great need of supportive services?

- a. We consider a waiver if:
 - i. The person/household has been assessed through Coordinated Entry (CE) and determined to need Permanent Supportive Housing
 - ii. The person/household has a history of unstable housing
 - iii. The person/household needs supportive services to maintain housing and could benefit from the services
 - iv. There are no other eligible households waiting for the housing

16. How much leeway are we given to determine the “spirit of LTH”?

- a. Please continue to refer questions to your program contact at Minnesota Housing or DHS (for Housing Support and the LTH Supportive Service grant) when you are unsure as to whether a household meets the definition. If a waiver is approved, your file should contain documentation of the waiver. This is also helpful in keeping Minnesota Housing informed about circumstances affecting your program and community.
- b. **Housing Support LTH eligibility:** Contact DHS Housing Support staff for questions about LTH eligibility.

Appendix D – Supportive Housing Service Sets

The services below are listed within “service sets,” starting with the basic service set for all households followed by additional service sets to address a specific sub-population or need (for example: children, people with mental illness). It is a menu of services and not a flow chart or an indication of who provides each service or how the service is provided.

The following tables list the services that should be available in Supportive Housing (SH). Services can be provided by the primary service provider or through a connection to community resources. Refer to Chapter 6 for more information about service models and best practices.

<p>Basic Service Set The set of services that is recommended to be available for all households in Supportive Housing.</p>
<p>Connection</p> <ul style="list-style-type: none"> • Access • In-reach • Outreach • Engagement
<p>Case management</p> <ul style="list-style-type: none"> • Assessment, plan development, connection, coordination, monitoring and personal advocacy
<p>Family Specific Services</p> <ul style="list-style-type: none"> • Family reunification services • Parenting • Two-generation (2 Gen) approach to serve the whole family
<p>Housing Supports</p> <ul style="list-style-type: none"> • Finding housing • Applying for housing and advocating with landlord to take someone who may be screened out of housing • Rental subsidies • Securing household supplies and furniture and other necessities • New tenant orientation and move-in assistance • Tenancy supports • Support for children and youth • Eviction prevention • Front desk services
<p>Independent Living Skills</p>
<p>Transportation</p>

<p>Basic Service Set The set of services that is recommended to be available for all households in Supportive Housing.</p>
<p>Education/Employment</p> <ul style="list-style-type: none"> • School connections • Access to social support • Truancy intervention • Access to academic support • Opportunities and access to GED, two year or four-year degree programs • Supported employment • Childcare resources
<p>Safety</p> <ul style="list-style-type: none"> • Domestic abuse services • Crisis planning and intervention • Child protection assessment and appropriate follow-through • Legal advocacy
<p>Harm Reduction Strategies</p>
<p>Financial Management</p> <ul style="list-style-type: none"> • Budgeting • Benefit assistance • Financial education services • Legal advocacy
<p>Self-determination/Life Satisfaction</p> <ul style="list-style-type: none"> • Recreation • Social support • Community involvement/integration • Parenting • Support groups
<p>Health</p> <ul style="list-style-type: none"> • Benefit assistance • Health related services • Medication set up • Healthcare coordination • HIV/AIDS/STD education and support • Immunization and prevention • End of life planning
<ul style="list-style-type: none"> • Veterans Benefits and Services

Service Set for Children

Additional recommended services if a program serves children.

Case management

- Advocacy
- Academic programs
- Computer labs
- Recreational programming
- Mental health
- Chemical health
- Mentoring
- Employment training
- Post-secondary
- Physical health
- Transportation

Assessment and Planning Services

- Developmental assessment and plan
- School readiness plan
- Educational services including Individual Education Plan (IEP)
- Post-secondary plan

Mental Health Service Set

Services in addition to Basic Service Set recommended for people with mental health issues; some of these services are considered evidence-based practice.

Crisis Planning and Intervention

- Adult crisis services
- Children's Mental Health Crisis Response Team
- Adult protective services
- Vulnerable adult assessment
- Diagnostic assessment
- Employment/vocational services for persons with mental illness
- Supported employment
- Individual Education Plan (IEP)
- Individual Community Support Plan
- Individual Service Plans (ISP)

<p>Mental Health Service Set</p> <p>Services in addition to Basic Service Set recommended for people with mental health issues; some of these services are considered evidence-based practice.</p>
<p>Community-Based Mental Health Services</p> <ul style="list-style-type: none"> • Mental health medication management • Neuropsychological services • Psychotherapy • Psychological testing • Mental Health Targeted Case Management (TCM) • Community Support Program/psycho-social rehab/drop-in
<p>Rehabilitative Mental Health Services</p> <ul style="list-style-type: none"> • Assertive Community Treatment (ACT) • Adult Rehabilitative Mental Health Services (ARMHS) • Partial Hospitalization Program (PHP) • Children’s Therapeutic Services and Supports (CTSS) • Day treatment (adult, adolescent, children)
<p>Physician Mental Health Services</p> <ul style="list-style-type: none"> • Health and behavior assessment/intervention • Inpatient visits • Psychiatric consultation to primary care providers • Physician consultation, evaluation and management
<p>Treatments</p> <ul style="list-style-type: none"> • Harm reduction strategies • Family psycho-education • Trauma recovery and empowerment model • Illness management and recovery • Medications

<p>Brain Injury (BI) Service Set</p> <p>Services in addition to the basic service set recommended for people with traumatic brain injury.</p>
<p>Employment/Vocational Services for Persons with Brain Injury</p> <ul style="list-style-type: none"> ○ Supported employment • Individual Education Plan (IEP) • Medical Assistance (MA) home and community based waivers (e.g. BI, CADI, CAC, DD and EW) • BI specific services

Brain Injury (BI) Service Set

Services in addition to the basic service set recommended for people with traumatic brain injury.

- Neurologist and neuropsychological evaluation
- Medication management
- Psychologist/psychiatrist familiar with brain injury
- Cognitive rehabilitation
- Independent living skills instruction for Traumatic Brain Injury (TBI)
- Specialized chemical dependency treatment for persons with cognitive impairments
- Behavioral programming
- Advocacy for benefits, rights, individual needs
- Brain injury support group

Substance Use Disorder Service Set

Services in addition to the basic service set recommended for people with substance use disorders.

- Consolidated Chemical Dependency Treatment Fund, providing treatment and extended rehabilitation. Can include the following services:
 - Recovery readiness services
 - Relapse prevention and recovery planning
 - Individual and group counseling for substance abuse
 - Methadone maintenance
 - Harm reduction strategies
 - Detoxification service
 - Inpatient rehabilitation
 - Self-help groups such as AA or NA
 - Sober recreational activities

Physical Disability Service Set

Services in addition to the basic service set recommended for people with physical disabilities.

- Accessible housing, transportation and services
- Employment/vocational services specific for people with physical disabilities
 - Supported employment
- Individual Education Plans (IEP)
- Medical Assistance Home and Community Based Services (HCBS) waivers (e.g. CADI, CAC, BI, EW)

Co-occurring Disorders (Mental Illness/Substance Use Disorder) Service Set

Services in addition to the basic service set recommended for people with co-occurring disorders.

- Harm reduction strategies: Incorporating strategies from both the mental illness and substance use disorder fields
- Assertive Community Treatment (ACT)
- Integrated Dual Disorder Treatment (IDDT)
- Medications
- Modified therapeutic communities