Accelerating the Pace:
Moving your clients into housing

June 2016
Presentation Agenda

1. Introductions
2. Overview
3. The HUD Definition of Chronic Homelessness
4. Completing the Documentation for CH
5. Housing Matching
6. Using the BNL to keep track
7. Case examples
Presenters

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Overview

*Kara Capobianco, CT Dept. of Housing*
Outreach plays the critical role of ensuring those outdoors or unlikely to use the 211 process are put on the By-Name List.

Conduct VI-SPDAT when/if appropriate, which adds client to By-Name List.

By-Name List

Mainstream

Self-resolved

Diverted

Stayin in ES/TH

Self-resolved

Waiting list for ES/TH

Self-resolved

Diverted

Rapid Re-Housing

Permanent Supportive Housing

Begin identifying clients who are Chronically Homeless

Housing Placement Meetings
A printable, one-sheet reference for whether and when to conduct the VI-SPDAT assessment.

80% of clients on the By-Name List have never entered shelter.

Appropriate administration of the VI-SPDAT keeps the By-Name List manageable, and speeds up the housing matching and placement process for providers and for the clients in need.
VI-SPDAT Decision Chart

Organized by client’s current living situation, and color coded

If the client’s current living situation – the place where the client slept last night – is the following...

- **A place not meant for habitation**, including a car, sleeping outside, in a tent, at a train station/bus station/airport, garage, porch, hallway, unfinished basement/attic, rooftop, abandoned building, or 24 hour business.
  - 1. Conduct VI-SPDAT immediately, ASAP
  - 2. Refer to Outreach/PATH

- **In a Hospital, Rehab or other institution**
  - Homeless prior to entry and < 90 day stay
  - Not homeless prior to entry or ≥ 90 day stay
  - **DO NOT CONDUCT VI-SPDAT**

- **In a Hotel/Motel**
  - Self-paid
  - Paid for by an agency or government
  - 1. Conduct VI-SPDAT
  - 2. Attempt diversion with relocation

- **In a Warming Center and has no place else to stay**
  - 1. Conduct VI-SPDAT
  - 2. Refer to Outreach/PATH if appropriate

**GREEN**
means go ahead and conduct the VI-SPDAT
VI-SPDAT Decision Chart

Organized by client’s current living situation, and color coded

If the client’s current living situation – the place where the client slept last night – is the following...

- **In an emergency shelter, for the first time**
  
  1. **WAIT up to 2 weeks**
  2. Conduct at Case Mgmt. meeting, not Shelter Intake.

- **With family and/or friends in a place meant for habitation**
  
  **DO NOT CONDUCT VI-SPDAT**

- **In a sober house or rooming house**
  
  **DO NOT CONDUCT VI-SPDAT**

- **Being evicted or facing foreclosure, but is not literally homeless today**
  
  **DO NOT CONDUCT VI-SPDAT**

**YELLOW**

means wait before you conduct the VI-SPDAT

**RED**

means you should not conduct the VI-SPDAT
Key considerations

- Those working with the unsheltered CAN and SHOULD put people on the BNL in the field
  - They DO NOT HAVE to go to a 2-1-1 CAN Appointment to access housing. Consider yourself a mobile CAN staff.

- Ensuring that ONLY those who are literally homeless go on the BNL keep the process manageable

- These two changes should speed up the overall process significantly
We have the resources to end Chronic Homelessness in 2016.

**Chronically Homeless Individuals to House**

529

Based on the individuals marked as Chronic (Verified) and Potentially Chronic on the HMIS BNL as of 5/15/2016, with a multiplier that estimates the expected inflow through December 2016.

**Housing Resources Available**

531 +

Based on the Zero:2016 Housing Resources Snapshot as of 5/26/2016, which includes all resources statewide that are currently allocated to CANs. *Includes new resources coming online in July 2016.*
How Are We Going To Do It?

By speeding up the process!

90 PERCENT MATCHED in 90 DAYS
July 5, 2016
Launch of 90 in 90 (90% of chronic verified and matched in 90 days)

90 in 90 Challenge
Work on 90 in 90 continues through July, August, and September:
• Verify CH status of individuals on the BNL and match them to housing
• Use Rapid Response Team to overcome obstacles

October 1, 2016
All verified as CH are document ready and matched to housing subsidy

November 1, 2016
Everyone matched through 90 in 90 is housed

December 31, 2016 (or sooner!)
Connecticut reaches Functional Zero for Chronic Homelessness

Maintain functional zero

To reach our Zero:2016 goal, we must have a system in place to quickly identify, verify, and house chronically homeless
The HUD CH Definition

Leigh Shields-Church, CT Dept. of Housing
Main Components of HUD CH Definition

New definition effective as of January 15, 2016

**Must be Literally Homeless**
currently living in a place not meant for human habitation or an emergency shelter

**Must have a qualifying disability**
clients need to have a disability that is or can be documented

**Must meet Homeless History criteria**
clients need to meet the length of time homeless criteria (detailed later)

All three components must be satisfied for a client to be verified as Chronically Homeless.
HUD Chronic Homelessness Definition

New definition effective as of January 15, 2016

1) Live in a place not meant for human habitation, or an emergency shelter, or a safe haven (People in TH are not CH);

AND

2) Homeless (as defined above) for at least one year continuously or on 4 separate occasions in the last 3 years (totaling 12 months);

AND

3) Disabled as defined by HUD
People residing in an institution <90 days AND who were CH immediately before entering also qualify (stays in institutional care for fewer than 90 days included in the 12-month total, not counted as a break).

Families with an adult or minor HoH who meet all criteria above also qualify.

RRH & GPD participants retain their CH status.

Occasion is demarcated by a break of 7 or more consecutive nights not residing in a place not meant for human habitation, in shelter, or in a safe haven.

Continuous means without a break of 7 or more consecutive nights.
Definition of Disability

- Physical, mental or emotional impairment – includes impairment caused by alcohol or drug abuse, post-traumatic stress disorder, or brain injury
  - Is expected to be long-continuing or of indefinite duration
  - Substantially impedes the person’s ability to live independently
  - Could be improved by more suitable housing

- Developmental Disability
- HIV/AIDS

**The program eligibility for CAN projects may be smaller in scope**
Summary of Major Changes

- Four occasions must total 12 months

- Replaced “disabling condition” with “homeless individual with a disability”

- Occasion is defined by a break of at least seven nights not residing in an emergency shelter, safe haven, or residing in a place meant for human habitation (e.g., staying with a friend, in a hotel/motel paid for by program participant)

- Stays in institution of fewer than 90 days do not constitute as a break and count toward total time homeless

- New Recordkeeping Requirements under CoC Program

Source: Dept. of Housing and Urban Development, Community Planning & Development, *Homeless Emergency Assistance and Rapid Transition to Housing: Defining “Chronically Homeless”* Final Rule
What does this mean, really?

✓ A community must execute due diligence to identify and engage all persons experiencing chronic homelessness

✓ Some people that were previously considered chronically homeless will no longer meet definition while some that did not previously meet definition will now meet it

✓ Clarification on chronically homeless status in transitional housing and rapid re-housing

Source: Dept. of Housing and Urban Development, Community Planning & Development, *Homeless Emergency Assistance and Rapid Transition to Housing: Defining “Chronically Homeless” Final Rule*
Completing the Documentation

Alice Minervino, CT Dept. of Mental Health & Addiction Services
Leigh Shields-Church, CT Dept. of Housing
What counts as evidence of disability

1. Written verification from professional
   - Licensed by CT to diagnose and treat the disability
   - Certification that the disability meets the HUD definition

2. Written verification from the Social Security Administration

3. The receipt of a disability check (e.g., SSI/SSDI check or Veteran Disability Compensation);

4. Intake staff-recorded observation of disability that, no later than 45 days from the application for assistance, is confirmed and accompanied by evidence described under bullets 1, 2, or 3 above

5. Other documentation approved by HUD
Disability Verification: Option 1 vs. Option 2

**Part 3: DISABILITY CERTIFICATION**

**Option #1: Social Security (SSI/DI) or Veteran’s Disability**

Evidence must include one of the following (Check One):

- [ ] A) Written verification from the Social Security Administration; OR
- [ ] B) Copies of a disability check (e.g., SSI, SSDI or Veterans Disability Compensation)

**ATTACH EVIDENCE OF EITHER A OR B TO THIS FORM**

- [ ] Check here to indicate that evidence has been attached.

**Option #2: Verification by a Qualified Licensed Professional**

(Certifying professional must be licensed by the State to diagnose and treat the qualifying condition.)

I, hereby certify that _________ (Insert Participant Name) has been diagnosed with at least one of the following:

- A physical, mental, or emotional impairment, including an impairment caused by alcohol or drug abuse, post-traumatic stress disorder, or brain injury that is expected to be long-continuing or of indefinite duration; and substantially impedes the individual's ability to live independently; and could be improved by the provision of more suitable housing conditions; OR
- A developmental disability, as defined in section 102 of the Developmental Disabilities Assistance and Bill of Rights Act of 2000 (42 U.S.C. 15002); OR
- The disease of acquired immunodeficiency syndrome (AIDS) or any condition arising from the etiologic agency for acquired immunodeficiency syndrome (HIV).
Disability Verification: Option 1 vs. Option 2

- All new BOS Resources (2014 & 2015 awards) require a MH and/or SA and/or HIV diagnosis.

- Housing someone with just Option #1 (SSI/SSDI verification) should be the exception rather than the rule. The case manager/outreach/housing navigator/etc. should be working to get the documentation of MH/SA/HIV diagnosis while the client is looking for the apartment.

- Program eligibility is determined by funding source. It is essential that you check with your CAN to determine program eligibility requirements.

- The funding eligibility for CAN programs may be smaller in scope than the HUD definition of a disability.
Homeless History Example from Verification Form

### Homeless History - EXAMPLE

Starting with the most recent occasion of homelessness, provide the names, dates and types of locations and length of each stay, where the participant resided during the last three years. Occasions can include more than one location and must be separated by at least a 7 night break when the individual did not meet the homeless definition. Unless there is evidence of a break in homelessness of 7 or more nights, documentation of an encounter with a service provider on a single day within 1 month, counts for the entire month. Each month can be counted only once. To qualify a participant as chronically homeless, you must document at least 12 consecutive months or at least 4 separate occasions within the last three years of living unsheltered, in ES, or in another qualified location provided that the total time homeless during those occasions equals at least twelve months.

**Required Documentation Must Be Attached** - For more details, including institutional stays & doc requirements, see Part 4.

<table>
<thead>
<tr>
<th>Program Name or Location</th>
<th>Program/Location Type</th>
<th>Start Date</th>
<th>End Date</th>
<th>Length of Stay</th>
<th>Occasion #</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gateway Park</td>
<td>Unsheltered</td>
<td>Aug 2014</td>
<td>12/23/14</td>
<td>Aug-Dec: 5 months</td>
<td>Occasion #1</td>
</tr>
<tr>
<td>Sister’s House</td>
<td>Housed</td>
<td>12/24/14</td>
<td>1/2/15</td>
<td>10 days = break Not Homeless</td>
<td></td>
</tr>
<tr>
<td>Project Home</td>
<td>Emergency Shelter</td>
<td>1/3/15</td>
<td>1/10/15</td>
<td>January: 1 month</td>
<td></td>
</tr>
<tr>
<td>Gateway Park</td>
<td>Unsheltered</td>
<td>1/11/15</td>
<td>2/2/15</td>
<td>February: 1 month</td>
<td></td>
</tr>
<tr>
<td>Valley Hospital</td>
<td>Institutional Stay &lt; 90 days</td>
<td>2/3/15</td>
<td>4/15/15</td>
<td>March-April: 2 months</td>
<td></td>
</tr>
<tr>
<td>Hope House</td>
<td>Residential Rehab &gt; 90 days</td>
<td>4/16/15</td>
<td>8/30/15</td>
<td>4+months=break Not Homeless</td>
<td></td>
</tr>
<tr>
<td>Project Home</td>
<td>Emergency Shelter</td>
<td>8/31/15</td>
<td>11/5/15</td>
<td>Aug-Nov: 4 months Occasion #3</td>
<td></td>
</tr>
<tr>
<td>Friends/Family</td>
<td>Housed</td>
<td>11/6/15</td>
<td>End of Jan</td>
<td>2+months=break Not Homeless</td>
<td></td>
</tr>
<tr>
<td>Bus Station</td>
<td>Unsheltered</td>
<td>End of Jan</td>
<td>2/5/16</td>
<td>Jan-Feb: 2 months Occasion #4</td>
<td></td>
</tr>
</tbody>
</table>

**TOTAL # Occasions** (red lengths do not count towards total): 15 months 4 Occasions

**SAMPLE PARTICIPANT QUALIFIES AS CHRONICALLY HOMELESS.**

Documenting Homeless History

✔ Single encounter in a month is sufficient to consider household homeless for entire month unless evidence of a break
   Example: HMIS/Outreach is able to document a person was homeless on May 5th. This documentation can be applied to the entire month of May (May 1st to May 31st) unless there is evidence that there has been at least 7 consecutive nights not living in a place not meant for habitation or emergency shelter during the month.

✔ Once individuals/families receive a PSH certificate, they are able to stay temporarily with a friend/family, a transitional program or in a hotel. They maintain eligibility for PSH.
The client face sheet in HMIS includes a summary of key information, including program enrollment history and can be used to certify time homeless.

1. Log in to HMIS and access the client record *(Tip: Use the HMIS ID# from the By-Name List)*
2. Click on (a)“Client Management” in the left-hand navigation, and then click on (b) “Complete Referral/Enrollment”
HMIS Process: Accessing the Client Face Sheet (2 of 2)

(Continued from previous slide)

3. Click on the gear next to the client’s CAN Enrollment.
4. Click on the “Face Sheet (Report)” option.

5. The Face Sheet will open in a new window. To download a PDF of the Face Sheet, (a) click on the Save icon and then (b) select the PDF option from the drop-down menu.

Note: The saved PDF can be uploaded to the client’s HMIS record to be used as a verification document.
Statewide Project History Data

A Homelessness Verification Letter from CCEH that includes all client project history in HMIS statewide for the past three years

**EXAMPLE 1**

<table>
<thead>
<tr>
<th>Entry Date</th>
<th>Exit Date</th>
<th>Shelter Name</th>
<th>Days in Shelter</th>
</tr>
</thead>
<tbody>
<tr>
<td>1/2/2013</td>
<td>4/1/2013</td>
<td>Immacare - No-Freeze (ES)(IND)(SM)-UnknownFunder</td>
<td>89</td>
</tr>
<tr>
<td>4/2/2013</td>
<td>7/2/2013</td>
<td>CRT - McKinney Shelter (ES)(IND)(SM)</td>
<td>91</td>
</tr>
<tr>
<td>7/2/2013</td>
<td>7/22/2013</td>
<td>Open Hearth Association - Emergency Shelter (ES)(IND)</td>
<td>20</td>
</tr>
<tr>
<td>7/19/2013</td>
<td>7/20/2013</td>
<td>CRT - McKinney Shelter (ES)(IND)(SM)</td>
<td>1</td>
</tr>
<tr>
<td>8/1/2013</td>
<td>11/28/2013</td>
<td>Salvation Army - New Britain Corps Community Center (ES)(IN)</td>
<td>119</td>
</tr>
<tr>
<td>11/30/2013</td>
<td>12/3/2013</td>
<td>Immacare - No-Freeze (ES)(IND)(SM)-UnknownFunder</td>
<td>3</td>
</tr>
<tr>
<td>12/2/2013</td>
<td>10/22/2014</td>
<td>ImmaCare (ES)(IND)(SM)</td>
<td>324</td>
</tr>
<tr>
<td>10/1/2014</td>
<td>3/4/2016</td>
<td>Immacare Long Term Shelter beds - Interns (ES)</td>
<td>520</td>
</tr>
</tbody>
</table>

Shelter history for this person appears to meet length of homelessness requirements for HUD CH definition.

**EXAMPLE 2**

<table>
<thead>
<tr>
<th>Entry Date</th>
<th>Exit Date</th>
<th>Shelter Name</th>
<th>Days in Shelter</th>
</tr>
</thead>
<tbody>
<tr>
<td>12/7/2015</td>
<td>12/18/2015</td>
<td>South Park Inn - Emergency Shelter (ES)(IND)(SMF)</td>
<td>11</td>
</tr>
</tbody>
</table>

Shelter history for this person does not meet length of homelessness requirements for HUD CH definition.
CCEH provides these to the CAN quarterly – ask your CAN Contact!

- **What it is:** Process by which we compare your by name list to a data extract from CT HMIS to provide a HUD compliant homeless history documentation. This process accounts for duplicate records in the database and provides all ID numbers for the household. This DOES NOT verify Chronic Homeless Status; it is a tool that can be used as PART of the verification.

- **Why we did it this way:** Not all records are visible to all users in CT HMIS, this allows CANs to have a full history of individuals removing the barrier of multiple HMIS IDs and hidden records.

- **Date Range:** The last three years of CT HMIS data.

- **Where do we get this information from:** Quarterly, there is a data extract taken from CT HMIS that gives each individual a unique ID. This information is compared to each communities by name list to provide a more comprehensive history of homelessness that CANs can use to inform their processes.

- **How do I get this:** The report is by individual, and can be several thousand pages long. The full report is in a searchable PDF format, and will be provided to each CAN through the TrueCrypt process. If you do not know what that is, or have questions about how to access it, please contact CCEH.
Self Certification

• Disability cannot be self-certified.
• For all clients, up to 3 months of homelessness can be documented through self-certification.
• Self-certification of the full 12 months:
  • Limited to rare and extreme cases
  • May not be used for more than 25% of households served by a project during an operating year
• Documentation of breaks in homelessness between occasions can be based entirely on self-report.
Third-Party Documentation – What Counts?

These are sufficient forms of third-party verification:

- HMIS record (face sheet or CCEH letter)
- Letter from shelter staff or outreach worker
- Letter from a clergy person
- Letter from a doctor
- Letter from a counselor or therapist

Letters must meet the following criteria:

- Must be on agency/organization letterhead
- Must be signed and dated
- Must include the name and title of the person signing the letter
Keep in mind…

When working with a person with a homeless history or disability that is particularly difficult to document, be sure that you are discussing this person in your CAN housing placement meetings.

Sometimes during the verification process, we learn that people we believe to be Chronically Homeless do not actually meet the HUD definition.
Housing Matching

Kara Capobianco, CT Dept. of Housing
Alice Minervino, CT Dept. of Mental Health & Addiction Services
How the process works

Phase 1
- Eligibility Screening & Acuity Confirmation
- Informed Consent & Desire to Participate
- Document Readiness

Phase 2
- Housing Search
- Lease Up
- Move In

Phase 3
- Progressive Engagement
- Coaching
- Greater Independence

Source: Iain De Jong http://www.orgcode.com/2016/05/16/3-phases-to-operationalize-homelessness-to-housing/
Documentation requirements by program

- Rental Assistance (formerly Shelter Plus Care)
  
  ONLY TWO DOCUMENTS NEEDED TO BE CONSIDERED
  
  "DOCUMENT READY"
  
  Completed Homeless Verification Form
  
  Completed Disability Verification

  When a person is ready to be housed
  
  Verify that person has a DMHAS qualifying disorder i.e.: SMI, CSA, Dual Diagnosis, HIV/AIDS

  Proof of Income or signed No Income Statement
## Minimum Documentation Requirements

A summary of the program documentation requirements

### Documentation Requirements by Program

<table>
<thead>
<tr>
<th>Requirement</th>
<th>CoC</th>
<th>Rental Assistance (Shelter Plus Care)</th>
<th>RAP</th>
<th>Section 8</th>
</tr>
</thead>
<tbody>
<tr>
<td>Disability Verification</td>
<td>✔</td>
<td>✔</td>
<td>✔</td>
<td>✔</td>
</tr>
<tr>
<td>Homelessness Verification</td>
<td>✔</td>
<td>✔</td>
<td>✔</td>
<td>✔</td>
</tr>
<tr>
<td>Proof of Income (or No Income Statement)</td>
<td>✔</td>
<td>✔</td>
<td>✔</td>
<td>✔</td>
</tr>
<tr>
<td>Proof of Identification and U.S. Citizenship for all household members</td>
<td>❌</td>
<td>❌</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

1. SS Card Required
2. Birth Cert. OR other ID w/Name and DOB

See Housing Authority for minimum ID requirements
What about those with just physical disability?

✓ If your CAN is identifying a problem housing individuals with only a physical disability:

1. Identify the estimated # of people in your CAN within the next 30 days. What is the need?

2. Contact your CAN DOH Manager to discuss potential resources

✓ Mainstream Housing Resources

• Section 8
• Elderly/Disabled Housing
• Some existing (not Bonus) CoC Projects may be able to serve
Using the BNL to Track Progress

Beau Anderson, CT Dept. of Housing
HMIS Process for Documenting and Matching

1. Upload Disability Verification and Homeless Verification documents into HMIS (*details on next slide*)

2. Notify CAN contact to review documentation

3. CAN contact will update client’s status on the By-Name List from “Potentially Chronic” to “Chronic (Verified)”

4. Match “Chronic (Verified)” clients to housing resources
Disability and Homeless verification documents should be uploaded to the client’s record in HMIS as described below.

1. Log in to HMIS and access the client record *(Tip: Use the HMIS ID# from the By-Name List)*

2. Click on (a)“Client Management” in the left-hand navigation, and then click on (b) “Files & Documents” *(Tip: you may need to scroll down in the menu to see this option)*

3. Click on the “Documents” button that will appear on the screen
4. Click the “Add New” button in the top-right corner of the screen

5. Set the options for these required questions:
   a) Verification Method -> Scanned
   b) Expiration Date -> 2 years from date of upload
   c) Storage Location -> Electronic file
   d) Document Type -> Disability Verification –or– Homeless Verification
   e) Restriction -> Shared

6. Click the “Browse” button, locate the file you want to upload.
7. Click the “Save” button at the bottom to upload the document. Repeat for all documents.
After documents are uploaded, follow your CAN process for notifying the person(s) who can verify the documentation.

CH status must be manually changed in HMIS from "Potentially Chronic" to "Chronic (Verified)".
90 in 90 – Percent Verified Chronic and Matched

- **July 2016**: 25%
- **August 2016**: 45%
- **September 2016**: 65%
- **October 2016**: 90%
Case Examples

Leigh Shields-Church, CT Dept. of Housing
Case Example: Am I Chronically Homeless?

- Dan is seriously mentally ill.
- He lived in a shelter from August 2014 to February 2015.
- He was hospitalized for 100 days from February 2015 to May 2015.
- He returned to shelter for the rest of May 2015.
- He lived with his sister for 2 weeks in June 2015.
- He went back to shelter from June to August 2015.
- Then spent 3 nights in jail and returned to shelter until September 2015.
- He stayed with friends for 3 weeks, then was back in shelter from October 2015 to March 2016.

Is Dan eligible to enter a CT BOS PSH project in May 2016?
## Case Example: Am I Chronically Homeless?

Starting with the most recent occasion of homelessness, provide the names, dates and types of locations and length of each stay, where the participant resided during the last three years. Occasions can include more than one location and must be separated by at least a 7 night break when the individual did not meet the homeless definition. Unless there is evidence of a break in homelessness of 7 or more nights, documentation of an encounter with a service provider on a single day within 1 month, counts for the entire month. Each month can be counted only once. To qualify a participant as chronically homeless, you must document at least 12 consecutive months or at least 4 separate occasions within the last three years of living unsheltered, in ES, or in another qualified location provided that the total time homeless during those occasions equals at least 12 months.

**Required Documentation Must Be Attached** - For more details, including institutional stays & doc requirements, see Part 4.

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<thead>
<tr>
<th>Program Name or Location</th>
<th>Program/Location Type</th>
<th>Start Date</th>
<th>End Date</th>
<th>Length of Stay</th>
<th>Occasion #</th>
</tr>
</thead>
<tbody>
<tr>
<td>McKinney Shelter</td>
<td>Emergency Shelter</td>
<td>10/2015</td>
<td>3/2016</td>
<td>6 months = 1 episode</td>
<td>#4</td>
</tr>
<tr>
<td>Living with friends</td>
<td></td>
<td>8/9/2015</td>
<td>9/30/2015</td>
<td>21 days = break</td>
<td></td>
</tr>
<tr>
<td>South Park Inn</td>
<td>Emergency Shelter</td>
<td>8/5/2015</td>
<td>9/8/2015</td>
<td>4 months = 1 episode</td>
<td>#3</td>
</tr>
<tr>
<td>Jail</td>
<td></td>
<td>8/2/2015</td>
<td>8/4/2015</td>
<td></td>
<td></td>
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<tr>
<td>Shelter NOW</td>
<td>Emergency Shelter</td>
<td>6/15/2015</td>
<td>8/1/2015</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Living with Family</td>
<td></td>
<td>6/1/2015</td>
<td>6/14/2015</td>
<td>14 days = break</td>
<td></td>
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<tr>
<td>Eddy Shelter</td>
<td>Emergency Shelter</td>
<td>5/2015</td>
<td>5/2015</td>
<td>1 month = 1 episode</td>
<td>#2</td>
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<tr>
<td>Yale New Haven Hospital</td>
<td>Hospital</td>
<td>2/2015</td>
<td>5/2015</td>
<td>100 days = break</td>
<td></td>
</tr>
<tr>
<td>Columbus House</td>
<td>Emergency Shelter</td>
<td>8/2014</td>
<td>2/2015</td>
<td>7 months</td>
<td>#1</td>
</tr>
</tbody>
</table>

**YES**

Dan is eligible
Case Example: Am I Chronically Homeless?

- Lisa has a substance use disorder.
- She lived in a shelter from October 2014 to March 2015.
- She lived in a campground from April to August 2015.
- She lived in transitional housing from August to December 2015.
- She has been hospitalized since December 2015.

Is Lisa eligible to enter a CT BOS PSH project on January 20, 2016?
Case Example: Am I Chronically Homeless?

No. Lisa was living in TH prior to hospitalization and does not meet the HUD definition of CH.

<table>
<thead>
<tr>
<th>Program Name or Location</th>
<th>Program/Location Type</th>
<th>Start Date</th>
<th>End Date</th>
<th>Length of Stay</th>
<th>Occasion #</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yale New Haven Hospital</td>
<td>Hospital</td>
<td>12/2015</td>
<td>1/19/2016</td>
<td>6 months = break</td>
<td></td>
</tr>
<tr>
<td>Chrysalis</td>
<td>Transitional Housing</td>
<td>8/2015</td>
<td>12/2015</td>
<td></td>
<td></td>
</tr>
<tr>
<td>State Park</td>
<td>Campground</td>
<td>4/2015</td>
<td>8/2015</td>
<td>10 months = 1 episode</td>
<td>#1</td>
</tr>
<tr>
<td>Shelter NOW</td>
<td>Emergency Shelter</td>
<td>10/2014</td>
<td>3/2015</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Case Example: Am I Chronically Homeless?

- Drew is not disabled, but his son is HIV+.
- They have been living in a shelter since February 2015.
- They have occasionally left shelter for a few days to stay with friends or family.
- Are they eligible to enter a CT BOS PSH project on March 15, 2016?
Case Example: Am I Chronically Homeless?

<table>
<thead>
<tr>
<th>Program Name or Location</th>
<th>Program/Location Type</th>
<th>Start Date</th>
<th>End Date</th>
<th>Length of Stay</th>
<th>Occasion #</th>
</tr>
</thead>
<tbody>
<tr>
<td>St. Vincent de Paul</td>
<td>Emergency Shelter</td>
<td>12/27/2015</td>
<td>3/14/2016</td>
<td>12 consecutive months = 1 episode</td>
<td>#1</td>
</tr>
<tr>
<td></td>
<td>Living with Family (Christmas)</td>
<td>12/25/2015</td>
<td>12/26/2015</td>
<td></td>
<td></td>
</tr>
<tr>
<td>St. Vincent de Paul</td>
<td>Emergency Shelter</td>
<td>11/30/2015</td>
<td>12/22/2015</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Living with Family (Thanksgiving)</td>
<td>11/25/2015</td>
<td>11/29/2015</td>
<td></td>
<td></td>
</tr>
<tr>
<td>St. Vincent de Paul</td>
<td>Emergency Shelter</td>
<td>7/7/2015</td>
<td>11/24/2015</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Living with Family (Independence Day)</td>
<td>7/2/2015</td>
<td>7/6/2015</td>
<td></td>
<td></td>
</tr>
<tr>
<td>St. Vincent de Paul</td>
<td>Emergency Shelter</td>
<td>2/4/2015</td>
<td>7/1/2015</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

No. Drew (age 12) is not disabled. A head of household must be disabled for a family to qualify as CH.
Case Example: Am I Chronically Homeless?

- Ellen is disabled by multiple chronic health issues.
- She lived in a shelter from April 2015 until February 2016.
- She was hospitalized in February 2016.
- Is Ellen eligible to enter a CT BOS PSH project directly from the hospital on March 4, 2016?
Yes. Ellen was in shelter prior to being hospitalized and spent fewer than 90 days in the hospital. Her time in the hospital counts toward the 12 month total.