

Emergency and Transitional Housing Program

Program Guidelines and Application



Spring 2020 Application-**Revised 04/16/20**

The Emergency and Transitional Housing Program (ETH) provides short-term housing to formerly incarcerated persons (FIPs) who are at risk for homelessness upon leaving incarcerated custody, participating in state specialty court pre-release program, or currently under the supervision of Probation and Parole/Adult. The Division of Probation and Parole (P&P) works with individuals entering their custody to ensure they have a housing plan prior to release. In the event this is not feasible or the FIPs situation changes upon release, the P&P Officer would refer the individual to an ETH Provider for a safe place to stay until longer term housing can be found. The ultimate goal of the program is to improve FIPs' chances of having a successful reentry experience through improved access to transitional and permanent housing opportunities.

The Department of Public Safety and Corrections (DPS&C) are seeking housing providers to provide stable short-term housing and food access on a per diem basis to participants. *At this time, the priority is to recruit housing providers in the following parishes: Orleans, Jefferson, East Baton Rouge, Caddo, St. Tammany, Bossier, Ouachita, Rapides, Lafayette, Calcasieu, Lafourche and Terrebonne; however, all parishes are eligible to apply.*

In support the goals of the Justice Reinvestment (JRI) Legislation of 2017, funding for this program is provided by the portion of the savings allocated to DPS&C for reinvestment for priorities that support reducing prison admissions and recidivism.

1 Goal of Program

The purpose the ETH program is to provide limited-time funds for short-term housing for individuals under the supervision of the Division of Probation and Parole. The goal of this program is to provide emergency and/or transitional housing in an effort to stabilize the reentry process until longer term housing can be found, which will improve their chances of having a successful reentry experience. Ultimately, it shall be the responsibility of the participant to secure long term housing.

The application window for prospective housing providers will occur twice yearly, in the Spring and the Fall. Approved housing providers shall be placed on a "Housing Provider Referral List" for one (1) year. Providers interested in continuing with the ETH program must reapply on an annual basis.

Note: Current housing providers on the housing referral list do not need to reapply; as the inaugural list will be merged with the Spring 2020 referral list.

2 Housing Provider Eligibility and Qualifications

2.1 Applicant Eligibility

Eligible housing providers are limited to: nonprofits, governmental entities and community-based organizations that have a documented history of working with either formerly incarcerated persons and/or an emergency /transitional housing provider.

The Applicant must:

- Be in good standing with the Louisiana Secretary of State office and have been so for the last two (2) years (if operational for less than two (2) years, must be in good standing since inception).
- A registered vendor on LaGov (See Appendix B)
- La. Dept of Revenue Account Number (See Appendix B)
- A completed Vendor Profile Form with application (See Appendix B)
- Signed IRS Form W-9
- Must be currently operational as an emergency and/or transitional housing facility; properly zoned as such or similar designation.

3 ETH Program Description

3.1 Scope of Services

Emergency Housing

Overnight Shelter (Homeless Shelter) - provides emergency sleeping accommodations for a period not to exceed twelve (12) hours. Length of stay per participant not to exceed fourteen (14) days within a six (6) month period. Access to food services for at least one (1) meal per day is required.

Transitional Housing

Transitional housing is not an extended shelter stay; but is a temporary residence until a participant can find a long-term housing solution. The length of stay shall be based on the needs of the participants but shall not exceed six (6) months. The facility shall provide residents access to food services for at least one (1) meal per day. Supportive and counseling services are optional, but are not covered under the ETH program.

- At the discretion of DPS&C, length of stay exceptions may be approved pending approved justification provided by the housing provider and the participant. Any request shall be submitted prior to the end of the sixth month.
- The purpose of the ETH program is to provide short-term housing for FIPs at risk of homelessness who might not be able to afford other housing opportunities. Therefore, we strongly encourage all ETH providers to waive any deposits or fees for ETH participants.
- At the discretion of the housing provider, the participant may take over per diem payments once the maximum length of stay is reached.

3.2 Deliverables

Housing providers shall provide services as outlined in Section 3.1 Scope of Services (Emergency and/or Transitional Housing) to participants and submit a monthly invoice detailing the name of participant, length of stay to date, and per diem amount per day or week.

3.3 Housing Provider Referral List

Approved housing providers shall be placed on a “Housing Provider Referral List” for one (1) year. Providers interested in continuing with the ETH program must reapply on an annual basis.

Placement on the referral list does not guarantee any number of participant referrals to any housing provider.

4 Housing and Meal Accommodations

4.1 Housing Accommodations

At the minimum, the ETH program requires the following housing standards and food availability based on providing either emergency or transitional housing services as defined in Section 3.1- Scope of Services. Facilities will be inspected by DPS&C staff prior to approval of application and staff will conduct annual site visits to ensure adequate housing.

4.1.1 *Housing Standards* (adapted from [ESG Minimum Standards](#))

- A. **Structure and Materials**: The facility must be structurally sound to protect the residents from the elements and not pose a threat to the health and safety of the residents.
- B. **Access**: Residents shall have 24/7 access to the facility and have alternate means of evacuation in case of a fire or other emergency.
- C. **Space and Security**: The facility must provide each program participant in the shelter with an acceptable place to sleep and adequate space and security for themselves and their belongings.
- D. **Interior Air Quality**: Each room or space within the shelter has a natural or mechanical means of ventilation.
- E. **Water Supply**: Water supply is free of contamination.
- F. **Sanitary Facilities**: Residents must have access to sanitary facilities that are in proper operating condition, private, and adequate for personal cleanliness and the disposal of human waste.
- G. **Thermal Environment**: Facility has any necessary heating/cooling facilities in proper operating condition.
- H. **Illumination and electricity**: Facility has adequate natural or artificial illumination to permit normal indoor activities and support health and safety. The facility has sufficient electrical sources to permit the safe use of electrical appliances in the facility.
- I. **Food Preparation**: Food preparation areas shall contain suitable space and equipment to store, prepare, and serve food in a safe and sanitary manner.
- J. **Sanitary Conditions**: The facility shall be maintained in a sanitary condition.
- K. **Fire Safety**: The facility must have a sufficient number of functioning smoke detectors, in proper working condition, on each occupied level of the facility. Where possible, smoke detectors must be located near sleeping areas. The facility shall have a second means of exiting the building in the event of a fire or other emergency.

4.2 Food Availability

The facility shall provide at least one (1) meal or access to food. This may include, but is not limited to:

- A. Staff preparing meals in a kitchen. The facility shall have proper permits in place in accordance with state and local laws regarding food preparation, storage and handling.
- B. Provide access to a place for participants can cook/prepare meals for themselves. This would include, but not limited to: stovetop/oven, microwave, kitchen ware and utensils, etc). Preferably, providers should also ensure that the resident has either 1) access to a food bank, 2) have SNAP (food stamp) benefits, or 3) a means to purchase their own food.

5 Participant Placement

5.1 Eligible Participants

Eligible participants for this program includes the following:

Formerly incarcerated persons (FIPs) who are at an immediate risk for homelessness and are:

- Leaving the incarcerated custody of DPS&C; or
- Participating in a state specialty court; and/or
- Are currently under the supervision of Probation and Parole¹.

5.2 Participant Referrals

There are two (2) methods for participant referrals:

1. **Probation & Parole Direct Referral:** If an individual is in need of housing services, their Probation & Parole Officer will refer them to a specific housing service on the ETH Housing Provider Referral List. The P&P Officer will select the housing service based on the individual's characteristics (i.e. sex, parish, sex offender status) and the individual's needs (e.g. proximity to employment, proximity to family, etc.).
2. **Indirect Referral:** If your organization identifies eligible participants through other sources (e.g. faith based outreach, word of mouth, etc.), you may receive the per diem for the participant with prior approval from the participant's P&P Officer. It is your responsibility to request written approval from the P&P officer and the P&P Reentry Program Manager. You will need written approval from the P&P officer and the P&P Reentry Program Manager before accepting the participant. In order for Indirect referrals to be recognized on the invoice, you will need to send the copies of the written confirmation from P&P.

Important note regarding sex offenders: Housing providers shall be in compliance with local and state laws as it relates to the housing of sex offenders. **It is incumbent upon the housing provider to determine eligible housing opportunities and availability; as this shall be verified at the time of submission and prior to the placement of participant.**

Referrals to housing providers will be based on the participants needs including and not limited to: proximity to employment, doctor appointments, transportation, etc.

¹ All under adult felony supervision by the Department of Public Safety and Corrections

6 Application Submission Process

6.1 Application Submission and Deadline

Completed applications for this program may be submitted to jriprograms@doc.la.gov with the subject line “NOFA-ETH Program-Organization Name” or one copy may be mailed or hand delivered to the following address:

Dept. of Public Safety and Corrections
Attn: Nicole George, JRI Coordinator
504 Mayflower Street
Baton Rouge, LA 70802

Deadline for applications for the Spring housing provider referral list is April 30th at 4:30 pm (CT).

The following constitutes a complete application:

- Emergency & Transitional Housing Application (Appendix A)
- Proof of non-profit status (i.e. 501(c)3)
- Copy of a signed IRS Form W-9
- Completed Vendor Profile Form (LaGov Vendor Portal)
- Proof of Vendor’s public published price (Website, brochure or other official organization document clearly identifying the service provide and cost related to. If this is not available, a notarized price list on the organization’s letterhead)

Questions regarding the ETH Program, may be submitted to jriprograms@doc.la.gov.

6.2 Application Review

Applications received prior to the established deadline will be reviewed in the order they were received. DPS&C will be in contact with the person listed on the application for any clarifying information or if additional information is needed in order to make the appropriate determination. DPS&C and/or P&P staff will conduct a housing facility site visit to ensure they are structurally sound and safe for living.

Applicants will be contacted in writing upon approval of application, or if denied, a reason will be given and the applicant would be eligible to reapply in the next application period.

Applications will be approved or denied at the sole discretion of DPS&C and Division of P&P staff. Decisions are final and not subject to appeal.

6.3 Housing Provider Referral List

Applicants will receive written notification of acceptance into housing program referral program. The letter will also include the per diem amount authorized and the effective date of accepting participants.

Approved housing providers will be placed on a “Housing Provider Referral List” for one (1) year.

Placement on the referral list does not guarantee any number of participant referrals to any housing provider.

6.4 Payment Information

Compensation for this program shall be limited to the following per diem rates (per participant) by housing provider type:

| Housing Provider Type | Allowable Cost (Per Participant) |
|---|---|
| Emergency (Homeless) Shelter | Up to \$12 per day or \$84 per week |
| Transitional Housing (Short-term Housing) | Up to \$19.57 per day or \$137 per week |

The per diem amount shall not be higher than the applicant’s public published price. **Maximum compensation allowed per housing provider is \$5,000 per month.** A provider cannot invoice DPS&C for more than \$5,000.00 in any given month, regardless of the number of locations or facilities a provider has.

The Housing Provider may submit an itemized invoices, not more frequently than monthly. Payments to providers for costs related to deliverables by the vendor, will be based on a correct and itemized invoice showing number of beds utilized, including the name of the participant, the per diem per participant, and amount owed. Additionally, DPS&C will only cover a per diem rate for the participant’s daily housing expenses. DPS&C will not cover any upfront deposits or additional fees administered by the ETH provider. The authorized contact person must sign, date and certify the invoice for correctness.

Upon receipt of each invoice, DPS&C shall check the invoice for correctness and return if required. Upon acceptance and approval of a signed itemized invoice for services performed, DPS&C will make every reasonable effort to make payments within thirty (30) calendar days of the approval of invoice.

DPS&C reinvestment funding may not be used for housing a participant otherwise being funding under another funding source (federal, state, local, philanthropic funding, etc.). For example, a housing provider cannot invoice for a participant in the ETH program and list the same participant and receive payment for under a federal grant. By submitting the signed itemized invoice, the housing provider is certifying that they are not being compensation by another funding source.

Emergency & Transitional Housing Application Checklist

Submit all the following documents to jriprograms@doc.la.gov with the subject line "NOFA-ETH Program-[Organization Name]" **by April 30th, 2020 at 4:30 pm (CT)**.

- Emergency & Transitional Housing Application (Appendix A)
- Proof of non-profit status (i.e. 501(c)3)
- Copy of a signed IRS Form W-9
- Completed Vendor Profile Form (LaGov Vendor Portal)
- Proof of Vendor's public published price (Website, brochure or other official organization document clearly identifying the service provide and cost related to. If this is not available, a notarized price list on the organization's letterhead)

Appendix A: Emergency & Transitional Housing Application

Organization Contact Information

Organization Name: _____ Office Number: _____

Legal Name (if different): _____ Non- Profit Status: YES NO

Federal Tax ID: _____ LDR Number: _____

Address: _____ Vendor Supplier #: _____

City: _____ State: _____ Zip: _____

Authorized Contact Person (person who can sign on behalf of the organization):

Name: _____ Email Address: _____

Title: _____ Phone Number: _____

Housing Contact Person (person to be listed on referral list, if application is approved):

Name: _____ Email Address: _____

Title: _____ Phone Number: _____

Note: Non-profits must include a copy of IRS designation

Type of Housing Program

Emergency Housing

Transitional Housing

Total # of beds at facility. _____

Minimum number of beds allotted to the program per month? _____

Will meals be provided to participants? If so, how many per day? _____

Will sex offenders be accepted under this program? _____

If yes, does your housing meet the minimum qualifications as stated in Louisiana RS 15:538.D (i.e. at least a 1,000 away from a school, church or park, etc)? _____

Any additional fees/deposits required of the resident prior to intake? _____

If yes, indicate the type of fee/deposit and the amount. _____

Can the fee/deposit be waived for the resident, if the resident is unable to pay? _____

Eligible Participants

Please select one or more of the options below regarding participants your organization is willing to assist:

- 1- Formerly incarcerated women releasing into or currently in the custody of Probation and Parole or a State Judicial District Court specialty court (i.e. Drug or Reentry court)
- 2- Formerly incarcerated men releasing into or currently in the custody of Community Supervision or a State Judicial District Court specialty court (i.e. Drug or Reentry court)
- 3- Formerly incarcerated woman and/or man who is considered a sex offender.

Per Diem Requested:

| | Emergency (Homeless Shelter) | Transitional Housing |
|----------------------|-------------------------------------|---|
| | <input type="checkbox"/> | <input type="checkbox"/> |
| Cost Per Week | Up to \$12 per day or \$84 per week | Up to \$19.57 per day or \$137 per week |

The per diem amount shall not be higher than the Vendor's public published price.

Please describe in detail your organization and how participants will benefit from services provided.

What are the procedures and/or restrictions for participants to receive housing services?

Explain the process of reserving a bed (For P&P referral purposes).

Housing Facility Information

Address of Property #1: _____

Parish: _____

Contact Name: _____
Email: _____
Phone Number: _____

Address of Property #2: _____

Parish: _____

Contact Name: _____
Email: _____
Phone Number: _____

Address of Property #3: _____

Parish: _____

Contact Name: _____
Email: _____
Phone Number: _____

Address of Property #4: _____

Parish: _____

Contact Name: _____
Email: _____
Phone Number: _____

*If additional space is needed, attach a separate sheet to this application.

I certify that the information provided above is accurate and complete. I further understand that if this application is approved and placed on the preferred housing provider list, it does not guarantee a minimum number of participants each month, if any.

By signing below, the Housing Provider (hereafter "Vendor") agrees to protect, defend, indemnify, save and hold harmless the State of Louisiana, all State Departments, Agencies, Boards and Commissions, its officers, agents, servants and employees, including volunteers, from and against any and all claims, demands, expense and liability arising out of injury or death to any person or the damage, loss or destruction of any property which may occur or in any way grow out of any act or omission of the Vendor, its agents, servants and employees and any and all costs, expense and/or attorney fees incurred by the Vendor as a result of any claim, demands, and/or causes of action except for those claims, demands and/or causes of action arising out of the negligence of the Department, its agents, representatives and/or employees. Vendor agrees to investigate, handle, respond to, provide defense for and defend any such claims, demands or suit at its sole expense and agrees to bear all other costs and expenses related thereto, even if it (claim, etc.) is groundless, false or fraudulent.

Authorized Signature

Date

Appendix B: State Vendor Information

New Vendor Registration

In order to be an authorized vendor with the State of Louisiana, the organization must register on-line in LaGov.

Vendors can go to the LaPAC Vendor Registration Menu

<https://wwwcfprd.doa.louisiana.gov/osp/lapac/Vendor/VndPubMain.cfm?tab=2>

Current Vendors can update their information here:

<https://lagoverpvendor.doa.louisiana.gov/irj/portal>

Fax IRS Form W-9 to the Office of Statewide Reporting and Accounting Policy (OSRAP) at 225-342-0960.

Vendor Profile Form

Once registered, complete or update the Vendor Profile Form:

1. Log into the LaGov Vendor Portal (<https://lagoverpvendor.doa.louisiana.gov/irj/portal>)
2. Once logged in, click Vendor Profile Data at the bottom of the left column
3. You will now be able to review, edit and print Vendor information
4. Click Save to update your form
5. The “Last Review” date must be later than May 1, 2019.
6. Print and scan or save as a pdf for submission with the application.

La. Department of Revenue (LDR) Number

- A Vendor may call the number below with their social security number to obtain an LDR.
 - Dial Phone: 855-307-3893, select option #2, select option #2 again.
 - The vendor must also ask if there are any issues that must be cleared up prior to entering into a contract with the State.
- If the customer service says there is no LDR, they will have to register at the following website:
 - <https://revenue.louisiana.gov/Forms/ForBusinesses>
 - Scroll down to Registration Forms and select form R-16019- Application for Louisiana Tax Number (CR-1)
 - For those who are instructed to register a new business to obtain an LDR account number, they must select the following type of account: Sales Tax (Casual)
 - Questions about registration they can contact Central Registration at 225-219-2955 or by email at centralreg@la.gov.