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# **SSSG Program Manual**

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State of Wisconsin  
Department of  
Administration  
Division of Energy,  
Housing and  
Community  
Resources

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Program Rules and Guidance  
for the State Shelter Subsidy  
Grant (SSSG) Program

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Last Revised: April 2025

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# Chapter 1: General Information

## Introduction

The Wisconsin Department of Administration's (DOA) Division of Energy, Housing and Community Resources (DEHCR) developed this handbook as a resource for the State Shelter Subsidy Grant (SSSG) program. SSSG grantees are required to follow all requirements, policies, and procedures in this guide. Grantees may only operate the types of programs that have been included in the written contract with the state. In the event of conflict between the language specified in the contract and this handbook or other supporting documents, the provisions in the contract shall take precedence.

## Program Overview

The SSSG program is a state-administered program that distributes operation funds to eligible applicant agencies that provide emergency shelter and supportive services to individuals and households experiencing homelessness. Emergency shelter programs applying for funding must have a need for additional funding due to the renovation/expansion of an existing shelter facility, the development of an existing building into a shelter facility, the expansion (or development) of shelter services, and/or the inability of a shelter program to obtain adequate funding to continue to provide their existing level of service. Grant awards are limited to no more than fifty percent (50%) of the emergency shelter program's total operating budget.

There are two types of emergency shelter programs that can qualify for a grant:

- A shelter facility which provides free shelter to persons experiencing homelessness at a facility operated by a local Wisconsin agency.
- A voucher program which purchases emergency shelter for persons experiencing homelessness from a local motel, hotel, YWCA, or other facility which charges for lodging.

Emergency shelter programs should be designed to make shelter easily accessible to persons who are experiencing homelessness by avoiding unreasonable program barriers. Also, shelter programs should provide access to other essential services such as case management, referrals to mainstream resources, and other community supports.

# Chapter 2: Application Process

## Eligible Applicant Agencies

Eligible applicant agencies must have current, direct experience in delivering services to persons experiencing homelessness.

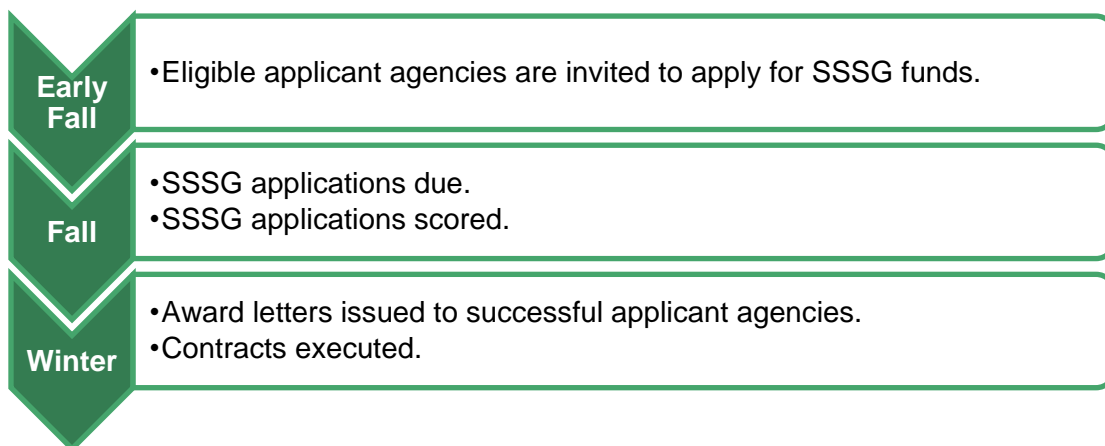
The following agencies that operate an emergency shelter or voucher program may apply:

- A county or municipal governing body or governmental agency.
- A federally recognized American Indian tribe, band, or tribal agency.
- A community action agency, as defined in s. [49.265\(2\)\(a\)](#), Stats.
- A private nonprofit organization, as defined under s. [108.02\(19\)](#), Stats.
- A nonstock corporation that is organized under ch. [181](#) and that is a nonprofit corporation, as defined in s. [181.0103\(17\)](#), Stats.
- A housing and community development authority.
- An organization operated for profit.

Applicant agencies must be registered with the Federal System for Award Management (SAM) and may not be listed on SAM's list of debarred contractors. Applicant agencies listed on the debarred list are not eligible to receive and administer the SSSG program.

## Application Timeline

The SSSG application timeline is as follows:



## Program Eligibility Requirements

All shelter programs applying for SSSG funding must provide the following required core services to persons experiencing homelessness:

- Temporary lodging must be provided without charge to the client.
- Intake must be provided for new shelter clients to gather basic information and to assess additional service needs. Intake should be provided in a manner that is sensitive to potentially creating a barrier for persons who may be fearful of personal intrusion.

- Information and referrals must be available to provide clients with information on mainstream resources.

If an applicant agency is a county, tribal, or municipal governing body or agency that administers general relief under s. [49.02](#), Stats., the applicant agency shall meet the following additional requirements to be eligible for funds under this chapter:

- A. The cost of providing shelter that is funded by general relief shall be excluded from the applicant agency's proposed operating budget.
- B. The applicant agency's estimated shelter nights may not include shelter nights paid for by general relief.
- C. A shelter facility or voucher program operated by the applicant agency shall be available to serve all homeless persons whether or not they are eligible for general relief.
- D. The applicant agency shall ensure that funds received under this chapter are not expended to supplant or reduce shelter benefits that the governing body is obligated to provide under s. [49.02](#), Stats.

If the applicant agency runs an emergency shelter facility, the following additional requirements apply:

- A. The shelter facility has been inspected to ensure that it complies with chs. [SPS 361](#) to [366](#).
- B. The shelter facility is inspected twice a year under s. [101.14](#), Stats., to ensure that it is compliant with all applicable fire safety codes.
- C. The shelter facility has a written safety plan which includes fire safety procedures, building evacuation procedures in an event of an emergency, and staff responsibilities regarding medical and mental health emergencies.
- D. The shelter facility ensures that staff are in the facility whenever homeless persons are present in the facility.
  - i. If the emergency shelter is a scattered site arrangement, designated staff must be on-call 24/7 in case of emergency.

The applicant agency shall provide evidence that it is coordinating its services with those of other shelter programs, the local sheriff or police department, the county social services, or human services department established under s. [46.034](#), [46.21](#), [46.215](#), [46.22](#) or [46.23](#), Stats., and county departments established under ss. [51.42](#) and [51.437](#), Stats. Coordination shall include interagency referral procedures and orientation of staff regarding services provided by these agencies.

The applicant agency must ensure that shelter services are fully accessible to individuals and households experiencing homelessness and that:

- A. Each applicant agency included in the application will provide emergency shelter intake, including an interview with the homeless individual or family to determine the extent of the individual's or family's needs, and information and referral.
- B. Funds received under this grant program will be used to provide services to make temporary shelter fully accessible to homeless individuals and households. If shelter is

provided to only households or only individuals, procedures are in place to help all homeless persons obtain shelter. Information about shelter beneficiaries and applications will be kept confidential.

- C. Persons receiving shelter will not be required to be a resident of the state or locality, pay for shelter, or participate in religious activities. Individuals or groups of individuals regardless of age, gender identification, sexual orientation, or marital status must be served. Households identifying as a family at a family shelter must be served as a family, without inquiry or documentation requirement related to family status, gender identification, or sexual orientation.
- D. Shelter and other services will be made available to persons with physical disabilities, or procedures are in place to help persons with physical disabilities obtain shelter.
- E. The applicant will meet state equal employment opportunity requirements under [subch. II of ch. 111](#), Stats.
- F. If the applicant agency operates a shelter facility, staff (paid or volunteer) are onsite whenever shelter residents are present.
- G. Shelter facilities have been inspected to ensure compliance with chs. [SPS 361](#) to [366](#), Wisconsin Stats. Shelter facilities have been inspected twice a year under s. [101.14](#), Stats., to ensure compliance with applicable fire safety codes. Shelter facilities have a written safety plan to include fire safety procedures, building evacuation procedures in the event of an emergency, and staff responsibilities regarding medical and mental health emergencies.
- H. The applicant agency assures that it has sufficient fiscal control and funding accountability to adequately safeguard disbursement and accountability for funds awarded.

The amount of SSSG funding requested cannot exceed fifty percent (50%) of an applicant agency's current or proposed operating budget. The required applicant agency's share can be cash, other resources, and in-kind services.

## Selection of Lead Agency

For Dane and Milwaukee counties, one local shelter or service provider must be designated as the lead agency. The lead agency is responsible for collecting and submitting applications on behalf of all participating shelter programs in the county, who then work together to develop a plan for distributing funds. The grant awarded to the lead agency may not exceed fifty percent (50%) of the participating shelters' programs combined total operating budgets.

Shelter programs that reside within the Balance of State's service areas may apply directly to DEHCR for a grant or collaborate with other agencies and designate a lead agency.

## Application Attachments

During each SSSG application cycle, documentation beyond the application itself is required. Required attachments include:

- SAM.gov Registration and Debarment Status



- SSSG Submittal Authorization
- SSSG Program Assurances

### **SAM.gov Registration and Debarment Status**

All lead agencies and its Subrecipients must provide documentation from [SAM.gov](https://sam.gov) (System for Award Management) showing an active registration and non-debarment/no active exclusions. Instructions on how to obtain that documentation can be found on [DEHCR's website](#).

### **SSSG Submittal Authorization**

All lead agencies and its Subrecipients must complete and sign the submittal authorization to attest that all information contained in the application is accurate and complete as stated.

### **SSSG Program Assurances**

All lead agencies and its Subrecipients must complete and sign the program assurances stating that they will adhere to them for the 12-month duration of the agreement.

## **Award Process**

SSSG funding operates on a one-year, competitive grant cycle. One hundred percent (100%) of funds allocated to emergency shelter programs in the state of Wisconsin, outside of Dane and Milwaukee counties, shall be distributed based on the following process:

1. New applicant agencies that do not currently utilize HMIS must submit a projection of the number of shelter nights to be provided during the future calendar year and provide evidence to support their estimate. The Department will apply each eligible applicant agency's projected proportion of shelter nights as a component in calculating the distribution of SSSG funds. For current grantees and new applicant agencies that already utilize HMIS, their shelter nights will be collected from HMIS for the period of September 1<sup>st</sup> through August 31<sup>st</sup>.
2. The Department may omit or discount days in which it appears the applicant agency simply did not exit a client or is housing clients for an unusually long period of time.
3. The second main component in calculating the distribution of SSSG funds is based on the answers given in the 'Eligibility Criteria Questions' portion of the application. These questions cover the additional criteria that must be considered when awarding SSSG funding, as specified in the [2019 Wisconsin Act 76](#). These program requirements include:
  - a. Whether the community in which an eligible applicant agency provides services has a coordinated system of services for homeless individuals and families.
  - b. The number of shelter nights the eligible applicant agency intends to provide during the year for which the grant application is submitted.
  - c. The eligible applicant agency's history of successfully transitioning homeless individuals or families to permanent housing.
  - d. Whether the eligible applicant agency provides intensive case management services.
  - e. Whether the eligible applicant agency provides trauma-informed care.
  - f. Whether the eligible applicant agency provides opportunities for shelter residents to obtain employment, increase their income, or increase their hours worked.

- g. The utilization rate of each unit at each shelter facility operated by the eligible applicant agency.
  - h. The average length of stay of shelter residents at each shelter facility operated by the eligible applicant agency.
  - i. The percentage of shelter residents served by the eligible applicant agency that are chronically homeless.
4. Applicant agencies that score below fifty percent (50%) on the SSSG application and/or does not include all required attachments in their application submission **will not** be eligible to receive SSSG funding.

Emergency shelter programs in Milwaukee County are eligible for a minimum award of \$400,000; emergency shelter programs in Dane County are eligible for a minimum award of \$66,500; and shelters in the remainder of the state are collectively eligible for a minimum award of \$100,000.

Eligible applicant agencies will be awarded grants based on the number of shelter nights provided, their responses to the questions in the SSSG application, how their scores are ranked against the other applicant agencies, and the availability of funding. Individual applicant agencies that are awarded grants shall receive a standard baseline of funding.

# Chapter 3: Policies, Procedures, and Requirements

## General Policies

### **Accessibility Practices/Resources**

The Grantee and its Subrecipients should have resources and practices in place to communicate with all potential beneficiaries including those with limited or no English. Further, facilities and programming should be accessible to people with disabilities including, but not limited to, people with vision loss, hearing loss, physical/mobility concerns, and learning disabilities.

### **Amendment**

The Department will not entertain a request for an amendment within 30 days of the end of the agreement.

### **Anti-Lobbying**

The Grantee and its Subrecipients shall comply with Section 319 of Public Law 101-102 and 24 CFR Part 87. Each Grantee/Subrecipient is required to have a policy in place to ensure compliance with anti-lobbying requirements. Grantees and its Subrecipients shall not use state or federally appropriated funds to pay, by or on behalf of it, any person for influencing or attempting to influence any governmental or affiliated governmental officer or employee. If any funds other than state or federally appropriated funds are used to influence or attempt to influence as aforementioned, the Grantee and/or its Subrecipient must both complete and submit Standard Form-LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions and in all subaward documents disclose to Subrecipients the lobbying activity accordingly.

### **Confidential, Proprietary, and Personally Identifiable Information**

The Grantee and its Subrecipients must develop written procedures to implement Article 36 of the agreement as well as any other applicable regulations as mentioned in the program manual. Procedures must also ensure the following:

- A. The address or location of any shelter resident assisted under the agreement will not be made public except with written authorization of the person responsible for the operation of the shelter.
- B. The confidentiality of records pertaining to any shelter resident assisted under the agreement, including protection against the release of the address or location of any services except with the written authorization of the person responsible for the operation of that shelter.
- C. No party may use or disclose any information concerning any individual who applies for or receives services except with the informed, written consent of the individual or the individual's legal guardian.

## **Conflict of Interest**

The Grantee and its Subrecipients must have and comply with organizational, individual, and procurement conflict of interest policies.

### **A. Organizational Conflict of Interest**

The Grantee and its Subrecipients must not condition assistance on a client's acceptance of housing or another good or service owned by the Grantee or a department or division of the Grantee or any subrecipients or subcontractors of the Grantee.

### **B. Individual Conflict of Interest**

The individual conflict of interest regulations prohibits financial gain for self, family, or those with business ties. No person who exercises responsibility over the program or who is in a position to participate in a decision-making process or gain inside information with regard to the program may:

- i. Obtain a financial interest or benefit from an assisted activity.
- ii. Have a financial interest in any contract, subcontract, or agreement with respect to an assisted activity.
- iii. Benefit from an assisted activity, either for themselves or for those with whom they have family or business ties, during their tenure or during the one-year period following their tenure.

### **C. Procurement Conflict of Interest**

The Grantee and its Subrecipients must maintain written standards governing the performance of their employees engaged in awarding and administering contracts related to the agreement. At a minimum, these standards must:

- i. Require that no employee, officer, agent of the Grantee/Subrecipient shall participate in the selection, award, or administration of a contract supported by grant funds if their participation would create a real or apparent conflict of interest.
- ii. Require that Grantee/Subrecipient employees, officers and agents not accept gratuities, favors, or anything of monetary value from contractors, potential contractors, or parties to sub agreements.
- iii. Stipulate provisions for penalties, sanctions, or other disciplinary actions for violations of standards.

The existence of a potential conflict of interest does not automatically prohibit a person from receiving services if they meet eligibility requirements. If a possible conflict of interest exists, the Grantee/Subrecipient must gain approval from the Department prior to the provision of services.

Any Grantee who violates the above will be required to repay funds disbursed for which there is an identified conflict of interest unless an exception is granted by the Department.

## **Debarred or Suspended Subrecipients**

The Grantee and its Subrecipients shall not use agreement funds to directly or indirectly employ, award contracts to, or otherwise engage the services of any contractor or Subrecipient during any period of debarment, suspension, or placement of ineligibility status.

## **Drug Free Workplace Policy**

The Grantee and its Subrecipients must provide a drug-free workplace by complying with the implementation of rules around drug prohibition, notification to employees of the rules, and disclosure of violations in accordance with the rule. The policy must include that the contracting or granting agency will be notified within 10 days after the Grantee/Subrecipient receives notice that a covered employee (an employee supported with grant funds) has been convicted of a criminal drug violation in the workplace.

## **Equity Advancement and Culturally Responsive Practices**

The Grantee and its Subrecipients are encouraged to identify differences between the population of BIPOC (Black, Indigenous, People of Color) in its service territory compared to its clients. If inequities are identified, strategies should be defined to help close the gap and to be more culturally responsive to the populations identified in the analysis.

## **Fair Housing**

The Grantee and its Subrecipients shall comply with Title VIII of the Federal Civil Rights Act of 1968 (as amended), and s. 106.50, Wis. Stats., and any subsequent relevant laws or amendments.

## **Faith Based Activities**

The Grantee and its Subrecipients shall ensure that all eligible activities under the agreement are administered in a manner which is free from religious influences and in accordance with the following principles:

- A. Grantees/Subrecipients must not discriminate against any employee or applicant for employment and must not limit employment or give preference in employment to persons based on religion.
- B. Grantees/Subrecipients must not discriminate against any person applying for shelter or services and must not limit shelter or services or give preference to persons based on religion.
- C. Grantees/Subrecipients must provide no religious instruction or counseling, conduct no religious worship or services, engage in no religious proselytizing, and exert no other religious influence in the provision of programs or services.
  - i. If a Grantee/Subrecipient conducts these activities, the activities must be offered separately in time or location from the programs or services funded by the agreement, and participation must be voluntary for program participants.

## **Financial Management**

The Grantee and its Subrecipients must ensure compliance with regulations and requirements pertaining to the following key areas of financial management: allowable costs, source documentation, internal controls, budget controls, cost allocation plans, cash management, accounting records, procurement, property asset controls, and audits. Furthermore, the Grantee and its Subrecipients must use program funds only for eligible activities and in accordance with the budget. Program funds may not be used for activities other than those authorized in the regulations and approved by the Department. All expenditures must be in accordance with conditions such as funding ceilings and other limitations on eligible costs.

## **Identification**

The Grantee and its Subrecipients cannot require third party documentation such as birth certificates or photo identification as a condition of immediately admitting an individual or family into emergency shelter or as a condition of receiving program services.

## **Involuntary Family Separation**

The Grantee and its Subrecipients must have and implement an Involuntary Family Separation Policy, which includes the following:

- A. All individuals or groups of individuals regardless of age, gender identification, sexual orientation, and marriage status identifying as a family must be served as a family by any project which serves families.
- B. There can be no documentation requirement or need for “proof” of family, gender identification, and/or sexual orientation. Examples of prohibited inquiry and documentation include but are not limited to parentage, birth certificates, and marriage certificates. The prohibition on inquiries or documentation does not prohibit inquiries related to an individual’s gender for the limited purpose of determining placement in temporary, singles-only emergency shelters which are limited to one gender because they have shared bedrooms or bathrooms, or for determining the number of bedrooms to which a household may be entitled.
- C. Families with children under age 18 must not be denied services based on the age of any child under age 18. For example, a family could not be denied assistance because there is a 16-year-old in the family.

## **Monitoring**

The Grantee and its Subrecipients shall comply with monitoring visits and/or desk monitoring from the Department and/or the Legislative Audit Bureau for program compliance.

## **Non-Discrimination and Equal Access Policy for Clients**

The Grantee and its Subrecipients must have a policy expressing discrimination against clients/potential clients based on race, color, religion, sex (including pregnancy, sexual orientation, or gender identity), national origin, physical condition, disability, age (40 or older) or genetic information (including family medical history) is illegal and will not be tolerated. The policy should outline a way for clients/potential clients to report discrimination, and potential repercussions for those who engage in discrimination.

The Grantees and its Subrecipients must have policies and practices to ensure clients have equal access to services regardless of sexual orientation, gender identity, family composition or marital status.

## **Non-Discrimination and Equal Opportunity Policy for Employees**

Pursuant to Wis. Stats. § 16.765(2), in connection with the performance of work under the agreement, the Grantee and its Subrecipients must not discriminate against any employee or applicant for employment because of age, race, religion, color, handicap, sex, physical condition, developmental disability as defined in s. 51.01 (5), sexual orientation or national origin. This provision shall include, but not be limited to, the following: employment, upgrading,

demotion or transfer; recruitment or recruitment advertising; layoff or termination; rates of pay or other forms of compensation; and selection for training, including apprenticeship. Except with respect to sexual orientation, the Grantee and its Subrecipients must agree to take affirmative action to ensure equal employment opportunities. The Grantee and its Subrecipients must agree to post in conspicuous places, available for employees and applicants for employment, notices to be provided by the contracting officer setting forth the provisions of the non-discrimination clause.

## **Record Keeping and Retention**

In general, the Grantee and its Subrecipients must have policies and procedures in place to ensure all recordkeeping requirements are met. The policies and procedures must be established in writing and implemented by the Grantee/Subrecipient to ensure funds are used in accordance with these requirements. In addition, sufficient records must be established and maintained to enable the Department to determine whether program requirements are being met. The Grantee and its Subrecipients, if not providing all services directly, must maintain a copy of any executed contract with any Subrecipients which relates to project activities funded under this contract. The program records for the Grantee and its Subrecipients must be maintained for a minimum of five (5) years after the final expenditure under this contract.

Representatives of the State of Wisconsin, the Comptroller General of the United States, or of other authorized governmental agencies have the right of access to any pertinent records of the Grantee and any Subrecipient to make audits, examinations, excerpts, and transcripts. (24 CFR 85.10 (e) and 84.53 (e)). Often the turnaround for file requests is short; therefore, files must be readily accessible so they can be provided quickly.

## **Residency**

In general, the Grantee and its Subrecipients shall not require individuals or households experiencing homelessness to be residents of the state or locality to receive shelter and support services, nor shall the Grantee/Subrecipient set differing allowed lengths of stay based on whether an individual or household experiencing homelessness are residents of the state or locality.

## **Trauma-Informed Care Practices**

Recognizing that most clients have experienced different types of traumas, the Grantee and its Subrecipients are required to have trauma-informed care practices in place. Trauma-informed care practices are defined as an approach to intervention and providing services that focus on how trauma may affect an individual's life and their response to receiving services in various systems. The Grantee and its Subrecipients are expected to provide training for their staff on trauma-informed care practices.

## **Program Policies**

### **Client Eligibility**

The Grantee and its Subrecipients must have a process in place to screen clients to ensure eligibility. Any individual or household experiencing homelessness may be provided with



assistance under the agreement. Documentation demonstrating the individual's or household's eligibility must be collected and kept in their file.

### **Client Termination**

To terminate assistance to a client, the Grantee and its Subrecipients must establish and follow a formal process that recognizes individual rights and meets all statutory requirements. The Grantee and its Subrecipients may terminate emergency shelter services if a participant violates the rules of the program. Program termination is only allowed in the most severe cases.

The termination procedure must include the following requirements:

- Written notice to the program participant with a clear statement of the reasons for the termination.
- Review of the decision to terminate with an opportunity for the program participant to present written or oral objections to a third-party.
- Prompt written notice to the program participant of the final decision.

A program participant who has been terminated from the emergency shelter program may receive further assistance at a later date.

### **Commercial Building Code Inspection**

If a Grantee and its Subrecipients administer their emergency shelter program within a shelter facility, it must be inspected to ensure that it complies with the commercial building codes listed under [Wis. Adm. Code Chs. SPS 361-366](#).

### **Fire Department Inspections**

If a Grantee and its Subrecipients administer their emergency shelter program within a shelter facility, it must be inspected twice a year by their local fire department under [Wis. Stats. § 101.14](#) to ensure that it complies with all applicable fire safety codes.

### **Funding Tracking**

The Grantee and its Subrecipients shall identify SSSG funds as a Wisconsin state government grant in the Grantee's chart of accounts and shall not refer to SSSG funds as a donation or other type of funding source.

If the Grantee allocates agreement funds for staff salaries, then staff members paid with SSSG funds must track time worked by the funding source.

### **Homeless Participation Involvement**

The Grantee and its Subrecipients must, to the best of their ability, have representation of a person who is experiencing homelessness or was formerly homeless on their Board of Directors or an equivalent policymaking entity directly responsible for writing and overseeing policy for the project(s) for which funding is being provided under the agreement.



## **Participation in HUD-Recognized Continuums of Care**

The Grantee and its Subrecipients shall participate in the HUD-recognized Continuums of Care that operate within their service area. This includes representation in the local homeless coalitions and participation in the Point in Time counts, to the maximum extent practicable.

## **Prevention of Spreading Contagious Diseases**

The Grantee and its Subrecipients must have policies and procedures in place to prevent the spread of contagious diseases. These policies and procedures should include the steps staff adhere to when a shelter resident presents with a contagious illness/disease and the protocols shelter residents must follow to prevent the spread of disease.

## **Shelter Access**

The Grantee and its Subrecipients must have policies and procedures in place to assist individuals and households who cannot be served by the emergency shelter program. These policies and procedures must include entry on the coordinated entry list, referral to other emergency shelters, and referral to mainstream resources.

## **Subrecipient Monitoring**

The Grantee must perform annual monitoring for SSSG compliance within twelve (12) months of the start date of any contracts between the Grantee and its Subrecipients under the agreement. The Subrecipient monitoring must include the review of the following components: agency policies, SSSG program policies, fiscal policies and procedures, SSSG financial expenditures, and SSSG client files. If a Grantee has a new Subrecipient that has never received SSSG funds before, the Grantee must perform compliance monitoring within six (6) months of the Subrecipient first incurring expenses related to the agreement.

## **Written Safety Plans**

If a Grantee and its Subrecipients administer their emergency shelter program within a shelter facility, they must have safety plans in place that include fire safety procedures, building evacuation procedures in the event of an emergency, and staff's responsibilities when a shelter resident experiences a medical and/or mental health emergency.

## **Written Standards**

The Grantee and its Subrecipients must adhere to their respective Continuum of Care's emergency shelter written standards for service delivery.

# Chapter 4: Monitoring and Reporting

## Monitoring

### Monitoring of Grantees and Lead Agencies by DEHCR

#### A. Monitoring Notification

DEHCR will monitor the performance of each SSSG grantee (i.e. Grantees and/or lead agencies contracted with DEHCR) at least biennially. In conducting performance reviews, information will be obtained from records and reports from onsite or desk monitoring, audit reports, and information from HMIS. Monitoring reviews to determine compliance with specific program requirements will be conducted as necessary.

#### B. Monitoring Components

During DEHCR's annual monitoring of Grantees and/or lead agencies, several different components may be reviewed, including:

- i. Personnel policies and procedures
- ii. Fiscal policies and procedures
- iii. Program policies and procedures
- iv. Funding-specific requirements
- v. Client files
- vi. Financial backup documentation supporting reimbursement requests
- vii. Participation and performance in HMIS or an HMIS-comparable database
- viii. Involvement in the applicable HUD COC and/or local homeless coalition
- ix. Compliance with coordinated entry and COC written standards
- x. Performance as a lead agency
- xi. Subrecipient monitoring process and procedures

#### C. Client Files

Client files reviewed during a monitoring will be selected by DEHCR. The files must be submitted in a secure manner. Unredacted client files must never be provided through unsecure means.

### Monitoring of Subrecipients by Lead Agencies

Lead agencies are required to perform an annual monitoring with each Subrecipient within 12 months of the contract start date. For new Subrecipients, lead agencies must perform a monitoring within six months of the Subrecipient first incurring expenses. The annual monitoring must ensure each Subrecipient meets obligations specified in the contract as well as minimum fiscal standards. Lead agencies must also review documentation supporting reimbursement requests, such as invoices and timesheets, to ensure proper payment requests are being made.

In summary, the monitoring should include a review of agency policies, program policies, fiscal policies, financial documentation, and client files. A summary of each Subrecipient monitoring must be made available to DEHCR for review during its monitoring of the lead agency as well as upon request.

## Reporting

### **Homeless Management Information System (HMIS)**

All Grantees and its Subrecipients must participate in HMIS and comply with participation requirements.

All HMIS participating agencies must comply with the State of Wisconsin HMIS Governance Charter, Policies & Procedures, and the HUD-recognized Continuum of Care Governance Charter. All agencies must adhere to the current HUD Data Standards Manual.

# Chapter 5: Emergency Shelter

Emergency shelter is defined as any appropriate facility that has the primary use of providing temporary or transitional shelter for the homeless in general or for specific populations of the homeless and the use of which does not require occupants to sign leases or occupancy agreements. SSSG funds may be used toward operational costs to renovate/expand an existing shelter facility, develop an existing building into a shelter facility, expand/develop shelter services, and/or maintain an existing level of shelter services.

## Eligible Services

The Grantee and its Subrecipients agree to utilize SSSG funds for the following eligible costs during the performance period to provide emergency shelter for individuals and households experiencing homelessness:

### General Emergency Shelter Expenses

- A. Audit/Bookkeeping Services
- B. Contractual Services
- C. Equipment
- D. HMIS: The cost of equipment, software, training, overhead, staffing, and/or participation fees to comply with participation standards, data collection, and reporting under HMIS.
- E. Insurance
- F. Office Supplies
- G. Staff Salaries & Benefits
- H. Training
- I. Travel

### Emergency Shelter Facility Expenses

- A. Equipment
- B. Janitorial Services
- C. Maintenance, including minor or routine repairs
- D. Meals
- E. Rent
- F. Security
- G. Supplies
- H. Utilities

### Supportive Services

- A. Case Management: The cost of assessing, arranging, coordinating, and monitoring the delivery of individualized services to meet the needs of the program participant.
- B. Childcare: The cost of the care of children by a day-care center, babysitter, or other provider while parents are working. The child-care center must be licensed by the jurisdiction in which it operates.
- C. Education Services: When necessary for program participants to obtain and maintain housing, the costs of improving knowledge and basic educational skills are eligible.

- D. Employment Assistance and Job Training: The costs of employment assistance and job training programs are eligible.
- E. Outpatient Health Services: Costs for direct outpatient treatment of medical conditions provided by licensed medical professionals. Funds may be used for these services only to the extent that other appropriate health services are unavailable within a community.
- F. Legal Services: Costs for services necessary to resolve a legal problem which prohibits the program participant from obtaining permanent housing.
- G. Life Skills Training: Costs of teaching critical life management skills that may never have been learned or have been lost during the course of physical or mental illness, substance abuse, and homelessness are eligible costs. These services must be necessary to assist the program participant to function independently in the community.
- H. Mental Health Services: Costs include direct outpatient treatment provided by licensed professionals of mental health conditions. Funds may only be used for these services to the extent that other appropriate mental health services are unavailable or inaccessible within the community.
- I. Substance Abuse Treatment Services: Eligible substance abuse treatment services are designed to prevent, reduce, eliminate, or deter relapse of substance abuse or addictive behaviors and are provided by licensed or certified professionals. Funds may only be used for these services to the extent that other appropriate substance abuse treatment services are unavailable or inaccessible within a community. Note: Inpatient detoxification and other inpatient drug or alcohol treatments are ineligible.
- J. Transportation: Costs consist of the transportation costs of a program participant's travel to and from medical care, employment, childcare, or other eligible essential services facilities.

### **Motel Vouchers**

- A. Where no appropriate emergency shelter is available for a homeless individual or household, eligible costs may include a hotel or motel voucher.

### **Renovation/Expansion/Conversion**

- A. Eligible costs include labor, materials, tools, and other costs for renovation including major expansion of an emergency shelter or conversion of a building into an emergency shelter.
- B. For costs of renovation, expansion, or conversion to be eligible for payment with SSSG funds, the building must be used for an emergency shelter for homeless individuals and households.
- C. A government entity or private non-profit organization must own the emergency shelter building before and after the renovation/expansion/conversion has been completed.
- D. An agency may not renovate, expand, or convert a shelter or prospective shelter until an environmental review has been completed and the agency has received approval to continue.

## Ineligible Services

**Any services not explicitly listed in the Eligible Services section of this manual are ineligible, unless otherwise approved by DEHCR.**

DEHCR would also like to clarify that SSSG funds may not be spent on:

- Providing security deposits or rent for permanent housing
- Providing shelter in a private home
- Constructing a new shelter facility
- Operating a shelter care facility licensed under ch. [48](#), Stats.
- Operating a shelter facility or private home providing shelter for victims of domestic abuse
- Operating a community-based residential facility licensed under ch. [DHS 83](#)
- Operating an agency that provides only shelter information and referral or housing relocation services

# Chapter 6: Client File Requirements

## Client Eligibility

Each client file must contain documentation that the individual and/or household provided with assistance meets the eligibility requirements for the emergency shelter program. Self-certification of homelessness is sufficient for emergency shelter services.

### Additional Requirements

- Funds cannot be targeted to clients from a specific agency; agencies must follow the applicable coordinated entry procedures.
- Assistance is limited to clients who meet the appropriate part of the homeless definition **at program entry** and where there is documentation of their homelessness.
- In the absence of source documentation or third-party documentation, the agency must certify that efforts were made to obtain the documentation.

<b>Homeless Definitions</b>	
<b>Category 1: Literally Homeless</b>	Individual or family who lacks a fixed, regular, and adequate nighttime residence, meaning: 1) Has a primary nighttime residence that is a public or private place not meant for human habitation; OR 2) Is living in a shelter designated to provide temporary living arrangements (including transitional housing and hotels/motels paid for by charitable or government organizations); OR 3) Is exiting an institution where (s)he has 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.
<b>Category 2: Imminent Risk of Homelessness</b>	Individual or family who will imminently lose their primary nighttime residence, provided that: 1) Primary residence will be lost within 14 days of the date of application for assistance; 2) No subsequent residence has been identified; AND 3) Household lacks the resources or support networks needed to obtain other permanent housing.

<p><b>Category 3: Homeless under other Federal Statutes</b></p>	<p>Unaccompanied youth under 25 years of age, or families with children and youth, who do not otherwise qualify as homeless under this definition, but who:</p> <ol style="list-style-type: none"> <li>1) Are defined as homeless under one of the following: <ol style="list-style-type: none"> <li>a) Section 387 of the Runaway and Homeless Youth Act;</li> <li>b) Section 637 of the Head Start Act;</li> <li>c) Section 41403 of the Violence Against Women Act of 1994;</li> <li>d) Section 330(h) of the Public Health Service Act;</li> <li>e) Section 3 of the Food and Nutrition Act of 2008;</li> <li>f) Section 17(b) of the Child Nutrition Act of 1966;</li> <li>g) Section 725 of the McKinney-Vento Homeless Assistance Act;</li> </ol> </li> <li>2) Have not had a lease, ownership interest, or occupancy agreement in permanent housing during the 60 days prior to the assistance application;</li> <li>3) Have experienced persistent instability as measured by two moves or more during in the preceding 60 days; AND</li> <li>4) Can be expected to continue in such status for an extended period of time due to special needs or barriers</li> </ol>
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<b>At-Risk of Homelessness Definition</b>	
<p><b>Category 1: Individuals and Families</b></p>	<p>An individual or family who:</p> <ol style="list-style-type: none"> <li>1) Has an annual income below 30% of median family income for the area; AND</li> <li>2) Does not have sufficient resources or support networks immediately available to prevent them from becoming homeless; AND</li> <li>3) Meets one of the following conditions: <ol style="list-style-type: none"> <li>a) Has moved due to economic reasons 2 or more times during the 60 days immediately preceding the application for assistance;</li> <li>b) Is living in the home of another because of economic hardship;</li> <li>c) Has been notified that their right to occupy their current housing or living situation will be terminated within 21 days after the date of application for assistance;</li> <li>d) Lives in a hotel or motel and the cost is not paid for by charitable organizations or by Federal, State, or local government programs for low-income individuals;</li> <li>e) Lives in an SRO or efficiency apartment unit in which there reside more than 2 persons or lives in a larger housing unit in which there reside more than one and a half persons per room; OR</li> <li>f) Is exiting a publicly funded institution or system of care (such as a health-care facility, foster care, or correction institution).</li> </ol> </li> </ol>



<p><b>Category 2: Unaccompanied Children and Youth</b></p>	<p>A child or youth who does not qualify as homeless under the homeless definition, but qualifies as homeless under another Federal statute, such as:</p> <ol style="list-style-type: none"> <li>1) Section 387(3) of the Runaway and Homeless Youth Act</li> <li>2) Section 637(11) of the Head Start Act</li> <li>3) Section 41403(6) of the Violence Against Women Act of 1994</li> <li>4) Section 330(h)(5)(A) of the Public Health Service Act</li> <li>5) Section 3(m) of the Food and Nutrition Act of 2008</li> <li>6) Section 17(b)(15) of the Child Nutrition Act of 1966</li> </ol>
<p><b>Category 3: Families with Children and Youth</b></p>	<p>A child or youth who does not qualify as homeless under the homeless definition but qualifies as homeless under the McKinney-Vento Homeless Assistance Act, and the parent(s) or guardian(s) living with them.</p> <ol style="list-style-type: none"> <li>1) Sharing the housing of other persons due to loss of housing, economic hardship, or a similar reason;</li> <li>2) Living in motels, hotels, trailer parks, or camping grounds due to the lack of alternative adequate accommodations;</li> <li>3) Living in an emergency or transitional shelter;</li> <li>4) Having 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; OR</li> <li>5) Living in cars, parks, public spaces, abandoned buildings, substandard housing, bus or train stations, or similar settings.</li> </ol>

<p align="center"><b>Homelessness Documentation Requirements</b></p>	
<p><b>Category 1: Literally Homeless</b></p>	<ul style="list-style-type: none"> <li>• Written observation by outreach worker or written referral by another service provider; <u>OR</u></li> <li>• Self-certification by individual or head of household seeking assistance; <u>OR</u></li> <li>• For individuals exiting an institution – one of the above <u>AND</u>: <ul style="list-style-type: none"> <li>○ Discharge paperwork <u>or</u> written/oral referral <u>OR</u></li> <li>○ Written record of intake worker’s due diligence to obtain above evidence <u>and</u> certification by individual that they exited institution.</li> </ul> </li> </ul>
<p><b>Category 2: Imminent Risk of Homelessness</b></p>	<ul style="list-style-type: none"> <li>• A court order resulting from an eviction notice notifying the individual or family that they must leave; <u>OR</u></li> <li>• For individuals and families leaving a hotel/motel – evidence they lack the financial resources to stay; <u>OR</u></li> <li>• A documented and verified oral statement. <u>AND</u></li> <li>• Certification that no subsequent residence has been identified and self-certification that the individual lacks the financial resources and support necessary to obtain permanent housing</li> </ul>
<p><b>Category 3:</b></p>	<ul style="list-style-type: none"> <li>• Certification by a nonprofit or state/local government that the individual or head of household seeking assistance met the criteria of homelessness under another federal statute <u>AND</u></li> <li>• Certification of no permanent housing in the last 60 days <u>AND</u></li> </ul>

<p><b>Homeless under other Federal Statutes</b></p>	<ul style="list-style-type: none"> <li>• Certification by the individual or head of household and any available supporting documentation that (s)he has moved two or more times in the past 60 days <u>AND</u></li> <li>• Documentation of special needs <u>or</u> 2+ barriers</li> </ul>
<p><b>At-Risk of Homelessness</b></p>	<ul style="list-style-type: none"> <li>• Self-certification or other written documentation that the individual lacks the financial resources and support necessary to obtain permanent housing <u>AND</u></li> <li>• Documentation of one of the eligibility conditions <u>OR</u></li> <li>• Certification by a nonprofit or state/local government that the individual or head of household seeking assistance met the criteria of homelessness under another federal statute</li> </ul>

## Coordination with Homeless Services and Mainstream Resources

The Grantee and its Subrecipients must assist homeless individuals and households in obtaining permanent housing, appropriate supportive services, and other Federal, state, local, and private assistance available for such persons. Documentation of referrals to services provided while enrolled in the emergency shelter program must be retained in the client files.

## Government Issued Identification

The Grantee and its Subrecipients administering the emergency shelter program cannot retain unredacted copies of government issued identification in SSSG client files. Examples include social security cards, birth certificates, and driver’s licenses. Such documentation is not required for SSSG programs and presents a high security risk. As such, this documentation cannot be kept in any SSSG client file, either hardcopy or electronic, unless fully redacted.

## Habitability Standards

Emergency shelters which receive SSSG funds for renovation or shelter operations must meet state or local government safety, sanitation, and privacy standards and habitability requirements. Shelters should be structurally sound to protect residents from the elements and not pose any threats to the health and safety of the residents.

The shelter must be accessible in accordance with Section 504 of the Rehabilitation Act, the Fair Housing Act, and Title II of the Americans with Disabilities Act, where applicable.

Shelters must comply with the Lead-Based Paint Poisoning Prevention Act (42 U.S.C. 4821-4946), the Residential Lead-Based Paint Hazard Reduction Act of 1992 (42 U.S.C. 4821-4956), and implementing regulations.

## Termination of Services

To terminate emergency shelter services from a program participant, the Grantee and its Subrecipients must establish and follow a formal process that recognizes individual rights and meets all statutory requirements. The Grantee and its Subrecipients may terminate emergency shelter services if a participant violates the rules of the program. Program termination is only allowed in the most severe cases.

The termination procedure must include the following requirements:

- A. Written notice to the program participant with a clear statement of the reasons for the termination.
- B. Review of the decision to terminate with an opportunity for the program participant to present written or oral objections to a third-party representative.
- C. Prompt written notice to the program participant of the final decision.

A program participant who has been terminated from the emergency shelter program may receive further assistance at a later date.

## Documentation Requirements

The Grantee and its Subrecipients will be responsible for demonstrating how each requirement for documentation is met, maintained, and monitored. Regardless of how the documentation is maintained, it must be consistent for each client within the emergency shelter program:

- A. **Demonstration of intake**, basic assessment of needs, and program eligibility.
- B. Documentation of **homelessness** or **at-risk-of-homelessness status** which demonstrates program eligibility.
- C. Records of **services provided** refers to the type of assistance provided to that program participant, including, as applicable, case management, childcare, and shelter stay made on behalf of the program participant.
- D. **Termination procedure** documentation that demonstrates the program participant has been informed of their rights and of the procedure, as well as any correspondence related to a termination proceeding, if applicable.
- E. Documentation of **enrollment into HMIS** that demonstrates that the program participant has acknowledged and enrolled in the coordination of services, resources, and support available within the community.
- F. Documentation of **referrals and connections** to homeless and mainstream services made during enrollment in the emergency shelter program.
- G. **Motel stay** documentation that demonstrates the program participant received emergency shelter lodging including the dates stayed and payments made, if applicable.

# Chapter 7: Financial Management

## Financial Management

The Grantee and its Subrecipients must ensure compliance with regulations and requirements pertaining to the following key areas of financial management: allowable costs, source documentation, internal controls, budget controls, cost allocation plans, cash management, accounting records, procurement, property asset controls, and audits.

The Grantee and its Subrecipients must use SSSG program funds only for eligible activities and in accordance with the Department approved program budget. SSSG funds may not be used for activities other than those authorized and approved by the Department.

Grantees should establish policies and procedures for keeping backup documentation on expenditures as Grantees are required to provide access to financial statements, charts of accounts, and expenditure records upon request by representatives of the Department and the Legislative Audit Bureau.

## Tracking Funds

All funding sources from the Department must be tracked separately. Each expenditure billed to the SSSG contract must have backup documentation that can be produced upon request. Timesheets must show actual hours spent on SSSG eligible activities vs. other non-SSSG activities. Payroll expenses must include documentation from timesheet to paycheck and show allocation of hours worked by funding sources.

## Indirect Cost Allocation

Indirect costs billed to the SSSG contract should follow standard accounting practices. Backup documentation supporting these costs should be produced upon request.

## Audit

The Grantee shall have a certified annual audit performed utilizing generally accepted accounting principles and generally accepted auditing standards. Any Grantee that expends \$100,000 or more of state funding during a fiscal year must have a single or program-specific audit conducted for that year. The SSSG contract alone may not trigger this requirement; however, when combined with other state-funded contracts, it may trigger this requirement if all state funding is equal to or greater than \$100,000.

Governmental and non-profit Grantees, or their assignees, which receive state funds during their fiscal year, shall comply with the requirements set forth in the State Single Audit Guidelines issued by the Department. Audit reports are due to the Department within the earlier of thirty (30) calendar days after receipt of the auditor's report(s), or nine (9) months after the end of the audit period.

For information on the submission of the audit reporting package, please see the [Department of Administration's Single Audit Compliance Supplement](#) for details.

# Chapter 8: Method of Payment

## Home Energy Plus System

The Home Energy Plus (HE+) System is a DEHCR financial system that the SSSG program utilizes for the electronic submission of SSSG payment requests. To submit a payment request within the system, each Grantee must have at least one staff member designated as the invoice creator and at least one, different staff member as the invoice approver. HE+ system users must log into the system every 60 days in order to maintain their active status.

Each agency must also designate one HE+ system user as the Profile Management Administrator (PMA). The PMA HE+ system user should be someone in a management position or has the authority to make decisions on behalf of the agency. Please refer to the [PMA Responsibilities and Instructions](#) for additional information.

All SSSG PMA system users will be reviewed at the start of the performance period and as part of the SSSG monitoring process.

## SSSG Payment Request

Grantees may draw on Department funds as reimbursement of actual reported expenditures. To initiate the reimbursement process, Grantees must complete and submit a monthly SSSG payment request of their expenses on or before the fifteenth (15<sup>th</sup>) of each month following the end of the previous month in the HE+ System. If the 15<sup>th</sup> day of the month falls on a Saturday, Sunday, or holiday, then the payment request is due on the first business day after the 15<sup>th</sup> of the month. Before submission, Grantees should review the payment request to ensure that the budget is not overdrawn. If any errors are identified, please contact the SSSG Program Manager.

If corrections need to be made to expenses reported in past months, the HE+ System does not have the capability to make those adjustments within the system. Past omissions in reimbursable expenses can be added to the current month's payment request. If previously reported expenses were reported incorrectly, those funds should be subtracted from any requested funds in the current month. If lead agencies identify unallowable costs that have been previously reimbursed, then they must notify the SSSG Program Manager to determine whether the funds must be returned to DEHCR Fiscal or can be replaced with other eligible expenses.

### Category Minimum

Each payment request must abide by a \$100 minimum threshold. If there is less than \$100 of expenses in a month, those expenses should be held and reported on a later payment request when the combined expenses total at least \$100.

Submitting a final payment request is the only exception to the \$100 minimum threshold.

## **Submission**

The Grantee shall submit no more than one (1) payment request every month during the performance period of the agreement.

Each payment request must be submitted through the HE+ System. If the Grantee is experiencing issues, please contact the SSSG Program Manager.

## **Reallocation**

DEHCR will review funding balances throughout each performance period and reserves the right to reallocate it as needed amongst SSSG grantees. SSSG lead agencies have the right to reallocate funding as needed amongst their Subrecipients.

## **Final Payment Request**

Grantees must submit a final payment request no later than sixty (60) days after the end date of the performance period of the agreement.

## Chapter 9: Resources

Information on the following topics can be found at the resources listed below:

- Affirmative Action:  
<https://doa.wi.gov/Documents/DEO/WIAffirmativeActionRequirements.pdf>
- At-Risk of Homelessness Criteria:  
<https://www.hudexchange.info/resource/1975/criteria-for-definition-of-at-risk-of-homelessness/>
- Balance of State Local Homeless Coalitions:  
<https://www.wiboscoc.org/find-services.html>
- Continuum of Care Contact Information:  
<https://www.hud.gov/states/wisconsin/working/cpd/cocontacts>
- DEHCR Website:  
<https://energyandhousing.wi.gov/Pages/AgencyResources/sssqa.aspx>
- Homelessness Criteria & Documentation Requirements:  
<https://www.hudexchange.info/resource/1974/criteria-and-recordkeeping-requirements-for-definition-of-homeless/>
- HUD's Equal Access Agency Assessment Tool:  
<https://www.hudexchange.info/resources/equal-access-assessment-tool/>
- SAM.gov:  
<https://sam.gov/content/home>
- State Single Audit Guidelines:  
[https://doa.wi.gov/Pages/State-Single-Audit-Guidelines-\(SSAG\).aspx](https://doa.wi.gov/Pages/State-Single-Audit-Guidelines-(SSAG).aspx)