

Public Notice on Montana's use of ESG CARES Act Funds

President Trump signed the CARES Act on March 27, 2020 to help the Nation respond to the coronavirus outbreak. The CARES Act made available an additional \$4 billion in ESG-CV funds to supplement the Fiscal Year (FY) 2020 ESG funding provided under the Further Consolidated Appropriations Act, 2020 (Public Law 116-94). Montana received \$2,524,355 for the first allocation and \$6,742,481 for the second allocation.

These special ESG-CV funds are to be used to prevent, prepare for, and respond to the coronavirus pandemic (COVID-19) among individuals and families who are homeless or receiving homeless assistance; and to support additional homeless assistance and homelessness prevention activities to mitigate the impacts of COVID-19. Activities include rental assistance, financial assistance for rental application fees, security and utility deposits and payments, case management, housing search and support; referral to mainstream resources; assistance for emergency shelters, non-congregate shelter, and assistance to shelters for victims of domestic and sexual violence, and street outreach activities.

The Montana Department of Public Health and Human Services (DPHHS) subgrants ESG funds to the state's Human Resource Development Councils (HRDCs). Funds are allocated based on the average of the Population and the Poverty Population as determined by the 2014-2018 American Community Survey (ACS) data for the counties served by each agency.

The HRDCs have control of how their allocated funds are spent based on local need. All HRDCs must work with local partners to develop and submit work plans, budgets, and reports outlining which of the allowable activities will be undertaken. Work plans are subject to amendments as local needs may change. A copy of each HRDC's workplan is available upon request.

Even though the state is receiving an influx of additional funds, the amount is still not enough to meet all current needs in Montana. Therefore, the HRDC's must also consider the attached priority guidance document in addition to identified community needs.

ESG Second Allocation Prioritization Guidance

DPHHS IHSB is issuing the following guidance to be used in developing local work plans.

1. Focus on equitably protecting all people experiencing unsheltered and sheltered homelessness from COVID-19 infection and illness.
 - a. Street Outreach
 - i. Increase outreach and create additional hygiene resources (handwashing stations, showers, laundry) for people in unsheltered locations
 - ii. Implement approaches to referring and safely transporting people to appropriate and safe shelter and/or housing options and to access services.
 - b. Shelters
 - i. Helping to keep shelters open that are struggling or need additional resources.
 1. Targeting High risk shelters, shelters with shared living spaces to improve processes
 - ii. Identify shelters that are likely to close because they are seasonal or due to lack of staff, lack of funding, inability to implement proper procedures, etc., and create alternate plans to extend operations and/or to safely relocate all people currently staying in such facilities.
 - iii. Deconcentrate existing shelters by relocating people to non-congregate settings
 - c. Non congregate shelters
 - i. Support non-congregate settings to provide isolation/quarantine units, respite beds, alternate care settings, and temporary shelter options for people
 - ii. FEMA funding will be phased out
 - iii. ESG can be used to help pay for Essential Services and Operating costs of NCS but it can only be used to help people who meet the Cat 1 definition of homelessness. Data from FEMA funded NCS can be found in the appendix
 - iv. Housing focused case management
 - v. Implement protocols to ensure that no one is purposefully exited from a safe sheltering facility into unsafe shelters or unsheltered homelessness
 - d. Create a plan to ensure that sheltered homeless households do not exit to the street or shelter, but rather exits to permanent housing, within efforts to provide equitable access to housing options for everyone.
2. **Rapid Rehousing:** Add a greater focus on effective and equitable use of resources to re-house people experiencing sheltered and unsheltered homelessness.
 - a. Increase diversion efforts and rapidly rehouse those who cannot be diverted.
 - b. Target Frequent users/ FUSE for long term assistance and intensive Housing case management
 - c. Local CoCs will place highest priority on rehousing people with highest vulnerability to COVID-19 as defined by the Centers for Disease Control (CDC) [cdc.gov], waiving current prioritization processes when necessary to house people with the highest COVID-19 vulnerability first. (Coming from CoC)
 - d. Work with PHAs and other housing agencies to access vouchers for households in CARES funded RRH who need long-term assistance.
 - e. Link those exiting to housing with needed services, including employment services and opportunities as appropriate.

3. **Homeless Prevention** – Continue reducing new entries into homelessness through diversion and prevention strategies. Transition program from an eviction-based prevention program to a targeted needs-based prevention program.

Everyone seeking HP must apply for other assistance first, including the Governor’s rental assistance program.

- a. **Targeting**
 - i. People at greatest risk of losing their housing and entering shelter/unsheltered locations
 - ii. People most at risk of COVID
 - b. Increase assistance with landlord engagement activities to help ESG eligible families that do not meet targeting requirements. Refer to HUD resources
4. **Focus on strengthening systems**
 - a. **Progressive engagement** - While each of the previous steps is a distinct program activity, they are also continuous in nature. It is important to make sure a client can flow from one step to the next at any point from which they’ve entered the system. AN individual or household coming in from a SO program, should, over time transition to Shelter, then RRH, to stability. Good HMIS data would track this transition and help agencies monitor a client’s progress regardless on entry or agency assisting.
 - b. Using ESG to assist households for longer a longer period of time.
 - c. Integrate all data into HMIS – This will help track a participant’s progress over time.
 - d. Use data to project need for different interventions and inform equity-based decisions. (continue using and strengthen the ROMA framework)
 - e. Ensure strategies and communications efforts have broad geographic reach, including into rural areas of community and in support of Native American communities.
 - f. Engage people with lived expertise
 - g. Assess whether equitable access is being provided to people of color, especially Black, Latinx, and Indigenous populations most impacted by COVID-19 and by the economic impacts, and examine data to determine if there are other disparities to be addressed, such as by race, age, ethnicity, disability, gender status, family composition, etc.
 - h. Expand housing-focused case management services and housing subsidy resources within shelters to support people to exit to housing.
 - i. Continue to expand and strengthen partnerships between housing providers and other systems and organizations to ensure people in housing are linked to health care and employment services and other appropriate services
 5. **Other items**
 - a. District 1-3 second allocation funds have been set aside for high-need areas
 - b. Always Equip staff and clients with protective supplies