**BALANCE OF STATE CONTINUUM OF CARE DISCHARGE PLANNING POLICY**

**POLICY**

This policy addresses discharge planning for a variety of populations in the 69 Wisconsin Counties that make up the Balance of State Continuum of Care (excludes Dane, Milwaukee and Racine counties).

**DEFINITION**

**HUD DEFINITION OF HOMELESS** – According to the U.S. Department of Housing and Urban Development (HUD), a person is considered homeless if they are living in places not meant for human habitation, such as cars, parks, sidewalks, abandoned buildings or on the street. In addition, persons are also considered homeless if they reside in Emergency Shelters; reside in Transitional or Supportive Housing for persons who are homeless and originally came from the street or emergency shelters; came from any of the above but are spending a short time (up to 90 consecutive days) in a hospital or other institution; are being evicted within 14 days from a private dwelling unit and no subsequent residence has been identified; are being discharged within a week from an institution, such as a mental health or substance abuse treatment facility or a jail/prison, in which the person has been a resident for more than 90 consecutive days and no subsequent residence has been identified; are fleeing, or are attempting to flee, domestic violence, dating violence, sexual assault, stalking, or other dangerous or life-threatening conditions that relate to violence, and the person has no other residence and lacks the resources or support networks to obtain other permanent housing.

**GUIDING PRINCIPLES** – In order to develop recommendations for this discharge policy, the following guiding principals were developed:

1. Homelessness is unacceptable in Wisconsin.
2. In no instance should a person be discharged from a state or public facility with directions to seek housing or shelter in an emergency shelter. Every effort must be made through careful discharge planning to work with the client and area resources to seek adequate, permanent housing.
3. If “temporary” shelter placement is unavoidable, the reasons for this should be well documented.
4. If after having exhausted all efforts to engage the client in a discharge plan, if the client continues to refuse services, the efforts will be noted and the client will confirm his or her refusal with their signature.
5. If a client receiving out-patient services becomes homeless, the state or public facility should work actively with the client and community resources to locate suitable housing.

The McKinney-Vento Act requires that State and local governments have policies and protocols in place to ensure that persons being discharged from publicly-funded institutions or systems of care **are not** discharged immediately into homelessness.

**HEALTH CARE**

Under 42 CFR 482.43(b) and (6) all hospitals must have in place a discharge planning process that applies to all patients and the discharge planning evaluation must include an evaluation of the likelihood of a patient needing post-hospital services and the availability of those services. The hospital must include the discharge planning evaluation in the patient’s medical record for use in establishing an appropriate discharge plan and the hospital must discuss the results of the evaluation with the patient or the person acting on his or her behalf. Wisconsin Administrative Code HFS 124 defines the requirements for discharge planning.

**FOSTER CARE**

Ch. 48 & 938 WI Stat and DCF 38 & 56 of the Wisconsin Administrative Code govern foster care and compliance with the Federal Program. The WI Dept. of Children and Families (DCF) is responsible for youth in foster care and its policies prohibit discharge into homelessness. Youth aging out of foster care may be eligible for room/board assistance if Wisconsin and Federal eligibility is met and the child welfare agency has funds to assist.

**MENTAL HEALTH**

The WI Dept. of Children and Families has protocol in place, Sec. 51.35(5) Wis. Stats., to not discharge to the streets or to a homeless shelter. Part of the discharge planning process is the development of a plan for placement in the least restrictive setting in the client’s home community. The law states that a hospital director or 51.42 board discharging a person from a psychiatric hospital or unit will ensure that a proper residential living arrangement and necessary transitory services are available and provided for the patient being discharged. The provisions pertain to both voluntary and involuntary patients.

**CORRECTIONS**

The WI Dept. of Corrections has policies and procedures set in place to ensure planning and communication between the correctional institution and community corrections regardless of whether the inmate is being released on discretionary parole, mandatory release or maximum discharge from sentence. These procedures involve advance communication and planning between the inmate, institution staff and the assigned community corrections agent. The planning process, at a minimum addresses housing, employment, treatment and reunification with family. Because the administration of the local jails is based on a county by county system determined by the locally elected sheriff, there is no statewide policy in place to facilitate the placement of persons serving a short term in the county jail.

**Policy:**

Local Continuum of Care within the Balance of State will coordinate resources and services with foster care agencies, health care institutions, mental health facilities and correctional institutions (including county jails) as appropriate, in order to develop a discharge plan for persons exiting from state-operated or county supervised institutions.

**Procedures:**

* Local CoC’s will provide information to the agencies about housing options in order to assist the agency to develop a discharge plan.
* Housing options will include information about Housing Authorities, agencies that provide rental assistance, and as a last resort, Shelter information.
* Educational programs will be offered on “How to be a good Tenant” and provide information on Landlord and Tenant Rights.
* Foster Care agencies, health care and mental health care institutions, County Law Enforcement and Community Corrections will be invited to attend local CoC meetings and be made aware of the WI Balance of State meetings to offer an opportunity to collaborate with other agencies about housing issues and/or lack of housing.
* Assist and/or support agencies when writing for grants specifically targeting funding for housing.

**Local CoC Responsibilities:**

* Contact agencies to do Outreach & Education to make them aware of the resources for housing in the community.
* Invite them to the local CoC meeting
* Provide dates and location of Balance of State meetings
* Contribute information for grant writing or provide a letter of support.