Task force on shelter: draft standards for shelters

About the Task Force on Shelter

In 2021, the Minnesota legislature created a Task Force on Shelter. The legislature asked the group to develop standards for shelters and to explore state oversight of shelters.

The Task Force includes public members who have experienced homelessness, advocacy organization representatives, shelter providers, and city, county, and state representatives. The Task Force can't change state laws, but it will give its recommendations to the legislature later this year.

The Task Force's draft standards

Over the past year, the Task Force has been developing draft standards for shelters. "Standards" means rules and guidelines for how shelters should work. The general idea is that all shelters in Minnesota should have to follow a common list of standards, so everyone using shelter has a good, safe experience.

Members want to know what you think about their ideas. They'll look at everything the public says and decide how to change their standards and oversight recommendations. The Task Force wants its recommendations to work for people and shelters around the state, and members can only make sure that happens if they get feedback from a lot of different people.

Note that earlier versions of this document had a few old pieces of standards language; this version has been updated as of September 2022.

Simple summaries

Each standard has a "simple summary" in blue text at the beginning. These will not be part of the final standards. We added them for stakeholder engagement because some of the standards are long and/or written in more complicated language. We thought it would be helpful to give people a shorter, easier way to understand what we mean. Only the standard headers and text in black are the group's actual standards.

Sharing your thoughts on the draft standards

If you want to share your thoughts on the draft standards, there are different ways to do that, like by email, phone, or online facilitated conversation. Learn about the different opportunities on the <u>Task Force on Shelter</u> website.

The Task Force is taking public feedback through **Friday**, **September 23**, **2022**.

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1. Entering shelter

Simple summary: This standard says shelters can't discriminate against people who want to stay there. For example, shelters can't tell people that they can't stay there because of their race, sexual orientation, disability, or other things listed below. The standard also wants people staying at the shelter to feel welcomed and to get basic information about the shelter right away, like where the bathrooms are.

Standards of entry into shelter

It is the expectation that shelters are **responsive** to those seeking shelter. If a person is not able to provide shelter, the shelter will make a good faith effort to connect the person to another shelter and/or service.

Someone cannot be denied access to shelter based on:

- Criminal history
- Age
- Gender
- Race/ethnicity
- Family status
- Gender identity
- Sexual orientation
- Faith/religious beliefs/practices
- Immigration or refugee status
- Mental or chemical health status
- Employment status
- National origin
- Political affiliation
- Documentation driver's license, social security card, etc.
- Access to technology/methods to communicate with shelter for entry
- Specialized need of the resident
- Language spoken and/or Communication modes
- Release of Information
- Vaccination and health status
- Potential to become stably housed
- Having a service animal as defined by the Americans with Disabilities Act (ADA)*

When a person/people enter shelter, they are:

• **Welcomed.** We recognize that when people come or are seeking shelter, they are in crisis. We also have learned about the power of peer support and the importance of people with lived experienced and expertise as well as people who reflect the people served working at the shelter, welcoming guests.

^{*}It is expected that shelters will inform guests that service pets are welcome (as well as companion or emotional support animals if shelter permits, noting that one cannot deny a service animal or ask for proof/documentation, related to service animal, per the ADA).

- Listened and responded to What do you need?
 - o Immediate medical needs?
 - Accessibility? (Physical accessibility as well as including linguistic, cultural, spiritual, and learning style.)
 - O What makes you feel safe?
- **Provided basic information.** Do not overwhelm with policies and paperwork. People need to be able to sleep, eat, etc. Basic information includes but is not limited to:
 - Sharing upfront that they will not (and cannot) be denied access due to any criminal background/justice involvement.
 - Sharing up front that service pets are welcome (as well as companion or emotional support animals if shelter permits, noting that one cannot deny a service animal or ask for proof/documentation per the ADA).
 - Where the bathrooms are located.
 - Where one can lock up their belongings.
 - Where they can eat, sleep, take a shower, pray, sage, visit, play.
 - Harm reduction what is this and how is it practiced at the shelter.

2. Interpersonal treatment

Simple summary: This standard wants to make sure people staying at a shelter are treated well. Shelter workers should treat residents fairly and respectfully. They should also think about what residents need, like different ways of communicating or different cultural needs. Shelters should make sure their workers know how to deal with people who have experienced trauma.

All people will be treated with dignity and respect in a manner that is transparent, open, consistent, trauma-informed, and non-judgmental with a priority placed on cultural competency, clear communication, and deescalation.

- 1. All residents should be treated with dignity, respect, and fairness: All residents must receive equal treatment regardless of race, color, religion, national origin, language, culture, sex, age, marital status, personal appearance, sexual orientation, gender identity or expression, familial status, family responsibilities, political affiliation, disability, and source of income. All residents should be able to request and receive reasonable accommodation due to need or disability.
- 2. **Transparent, open, and consistent communication:** Staff/navigators are equipped to transparently communicate and efficiently connect relevant networks of community resources to shelter residents or folks seeking shelter.
 - Conversations must be rooted in transparency, trust, and commitment (speak in an honest, open, and direct way).
 - Make every effort to understand community context and needs, and avoid as many assumptions about the individual/families as possible.
 - See individuals and families with worth and dignity relationship-based approach.
 - Effectively communicate with individuals and families by using plain, accessible language-multilingualism, ASL, and languages reflective of the diverse communities we serve.
 - o Be consistent with words, messages, behaviors, feelings, and actions.

- Be clear about each other's roles and transparent with information and details (appropriately trained).
- Shelter residents must be addressed/communicated with in a manner of their choosing. This
 includes names, gender-affirming language, pronouns, and communication methods that they
 identify as helpful.
- Shelter residents will be provided program information/guidelines in a timely manner and be available in several formats – written, verbal, and demonstrated.
- Shelter residents will be included in the design of program guidelines and ongoing efforts to ensure program effectiveness in supporting people experiencing homelessness.
- Shelter residents will have the opportunity to be heard, be consulted, and if staffing allows, work individually with an advocate to build a plan to move to permanent housing that is clientcentered and -driven, and are supported to meet their goals throughout their shelter stay.
- Shelter residents will have advocacy services available to them with an assigned staff person and have the right to request a change of advocate if they choose.
- 3. Trauma-informed and de-escalation: Shelter staff should have lived experience with homelessness, or experience working within trauma-informed programs and training in trauma-informed care. Shelter guidelines should be designed and applied with trauma reduction and the effects of past trauma at their core. Shelter staff should have experience working and training in de-escalation methods. Trauma-informed means that we acknowledge and accountably respond to multiple experiences of trauma (direct and vicarious) and crises at the same time staff/providers must be well-trained to respond and communicate effectively around multiple forms of trauma. Residents or folks seeking shelter should not undergo multiple assessment processes, and re-tell their stories repeatedly to get the resources and help they need (oftentimes this is re-traumatizing).
- 4. Cultural responsiveness: Shelter staff should have lived experience with homelessness, and reflect the community which they serve whenever practicable. Shelter staff should have experience working in the communities they serve and training in cultural responsiveness and identifying implicit biases. Shelters should collaborate with organizers/grassroots/organizations that are already doing the work and/or actually know how to engage with communities and pay them respectfully and equitably (not exploitatively).
- 5. **De-escalation and harm reduction:** Shelter residents should be supported with information and resources and have agency to make housing decisions without judgment. Language and shelter program guidelines should be designed and enacted in a way that seeks to reduce harm and is non-judgmental. Staff should focus on the strengths and positive aspects of the individual/family and leverage these strengths to encourage and support planning and activities that helps the individual/family.

3. Gender identity equity

Simple summary: This standard wants to make sure people of all gender identities feel safe and welcome at shelters.

Policies and publications

• Non-discrimination standards, including those named in this standard, will be documented clearly in personnel handbooks, communicated to shelter guests (along with consequences for harassment,

- whether by staff, volunteers, or guests), and publicly posted in shelter spaces where guests, volunteers, visitors, and staff can easily view them.
- If not already included, policies will add gender identity and gender expression as protected classes. Policies, publications, and signage will be amended to include gender-neutral and trans-inclusive language.

Staff and hiring

- Staff will incorporate training on gender identity, racial equity, and disability etiquette into all areas of training for all staff and volunteers, including administrative, leadership/executive and direct service staff/volunteers.
- Shelters will work to hire and retain staff and board members who are representative of the populations served in terms of race, gender identity, (dis)ability and lived experience of homelessness.

Guest intake

- Phone and in-person intake will avoid gendered greetings.
- Guests will be referred to by name and/or gender-neutral pronouns until pronouns are shared.
- Guests will be asked for a chosen name and pronouns to be able to self-identify gender, both on forms and in conversational intake. Note that pronouns may change for guests. All staff and volunteers will use the guests' chosen name and pronouns in all contexts moving forward while maintaining privacy (e.g., if there is a group intake, guests do not need to verbally share pronouns).
- Additionally, regarding privacy, guests will not be required to report the same gender identity or present
 the same gender expression to difference service providers, in order to avoid "outing" guests in spaces
 that feel unsafe.
- Guests will be informed of gender-segregated spaces and offer accommodations to meet transgender and gender non-conforming guests' needs. Guests will not be required to accept available accommodations.

Shelter services

- Staff and volunteers who observe harassment based on any protected identity trait will act immediately to stop the harassment, speak to supervisors and document as outlined by the shelter policy/procedure.
- Guests cannot be denied access to mixed-gendered spaces based on perceived, self-identified, or
 expressed gender identity. If gender-segregated spaces exist, guests will be assigned to the gendersegregated space which, as identified by them, most closely conforms to their self-identified gender
 identity.
- Accommodations to increase safety will be provided if available and requested (e.g., access to individual bathroom stalls, single-stall showers, availability of beds closer to staff, availability of private rooms).

4. Physical environment

Simple summary: This standard wants to make sure the physical space of the shelter works for everyone. Shelters should be clean, give people a place to put their things, and share important information with residents.

- Shelters must provide adequate and dignified space. This must include:
 - o Space to move walkers or wheelchairs, accessible bathrooms.
 - o Tables, bathroom, and shower stalls reasonable or proportional to number of guests.
 - o Gender neutral bathrooms or single-use bathrooms as space or accommodations allows.
- Shelters must provide clean and healthy facilities. Minimally, this includes and is not limited to:
 - Guests have access to general sanitation products, such as wipes and cleaning materials for cleaning physical environment.
 - Dedicated people/personnel and/or guests for cleaning.
 - Automatic replacement of beds when bed bugs or lice are found in the bed and those in proximity.
 - o Provide clean linens.
 - Replacement when beds have holes that cannot be repaired.
 - Standard maintenance and regular inspection.
- Shelters must work diligently to ensure privacy and the safety of guests and must include a safety plan and compliance with the plan.
- Shelters should provide secure storage. This could include and is not limited to:
 - A storage locker for each bed or a safe that is only accessible to the guest onsite unless there is a health, safety, or contraband concern; or if the storage locker has been abandoned. Lockers should only be accessed by two or more staff under these circumstances.
 - o Shelters should have a policy for accessing storage that protects staff and guests.
- Shelters must have information posted, visible, and/or otherwise accessible to guests including, but not limited to: resources, phone numbers, and state standard on shelters. Phone numbers could include crisis hotlines, legal aid, disability advocacy, etc.
 - o Includes reasonable accommodation for translation and disabilities.

5. Accessibility

Simple summary: This standard wants to make sure shelters are thinking about how they can serve all people, including people from all cultures and races and abilities.

Shelters will evaluate equity through the lens of accessibility and cultural responsiveness (including but not limited to serving the BIPOC and LGBTQIA2S+ community).

Shelters will meet accessibility and equity standards, identify and address areas to meet this standard. Shelters will address and promote accessibility and equity within their spaces and service delivery.

Areas to assess include physical accessibility, cultural responsiveness and sensitivity, safety (e.g., gender neutral bathrooms), environment (e.g., allergies, sensory needs, etc.), sensitivity and accommodations specific for people with mental illness (MI) and/or intellectual/developmental disabilities (ID/DD), and communication modes/methods (e.g., language spoken/written).

6. Length of stay

Simple summary: This standard says that shelters have to tell residents how long they can stay at the shelter.

Shelter is a temporary solution to a crisis. Shelters must have a length of stay policy that prioritizes guest individual's needs and resolution of the housing crisis. The policy shall also reflect their facility, program, and community needs or circumstances. Shelters must clearly communicate maximum length of stay to guests upon arrival and the conditions by which length of stay could change.

7. Social and supportive services

Simple summary: This standard says that shelters have to tell residents about ways they can get more help. For example, shelters should tell residents about different government programs that might be able to help them.

Shelters must, at minimum, provide the list of local referrals to social and supportive resources and provide a warm hand-off when connecting a resident with a case manager and/or navigator to access services residents need. Shelters must seek input from residents in determining the services needed.

Resources for support include, and are not limited to mental health, physical health, substance abuse, government assistance, employment, transportation, and housing. It is expected that social and supportive services include community case management to help residents exit shelter.

Shelters should have a method for ensuring the referral social and supportive services are kept up to date. This may include using a 211 system or DayOne, for example.

8. Financial policies for residents

Simple summary: This standard says shelters can make people pay to stay there, but then the money must be put in a savings account for the person. They can't charge if the person can't pay.

Fees

A shelter may establish a sliding fee scale for admission to the shelter, provided that:

- a) Guests who are currently unemployed or otherwise indicate the inability to pay fees must be provided the shelter services at no cost.
- b) Fees paid by guests must be put into a savings or financial account for the purpose of accumulating funds to be used the transition to permanent housing. A guest may voluntarily contribute additional sums to be placed in the account. However, the account cannot be structured to exceed the asset limits for receipt of any public assistance.

Savings accounts

Shelters that do not charge fees may, and are encouraged to, establish, or assist the guest to establish and contribute to a voluntary savings account to be used the transition to permanent housing. However, the account cannot be structured to exceed the asset limits for receipt of any public assistance.

9. Grievance

Simple summary: This standard says shelters need to make a way for residents to officially complain about a shelter situation. The shelters have to write down how residents can complain, what will happen if they complain, and how they'll protect residents who complain.

A grievance policy is required to be in place. The grievance policy must:

- Be clear, client-centered, and respectful.
- Be shared with shelter guests at entry to the program or the earliest opportunity thereafter.
- Be shared in a manner that is understood by the guest, taking into consideration literacy, first language spoken/written, etc.
- Include the requirement that guests have the right to be heard and able to present their version of the events.
- Guests must have a choice in meeting space and be able to have an advocate of their choosing present.
- Allow for the grievance to be submitted by the person receiving services or person's authorized or legal representative.
- Include a timeline for client grievance to be heard by administration. Grievances should be heard as soon as possible, but must be heard in no more than 14 calendar days upon receipt of the grievance. Grievance policies must include an expectation of timely resolution (no longer than 30 calendar days upon receipt of the grievance), and a process in which appeals can be made.
- Include details on who would be involved in the investigation of a grievance, and that the investigation
 must be conducted by an impartial person not directly involved in the events surrounding the grievance.
 If necessary to ensure an impartial review, or if the grievance involves Executives, Board of Directors,
 etc., a neutral third party must be involved. A plan for this should be included in grievance policies.
- Include the requirement that staff offer the opportunity to submit a grievance when guests raise issues related to their shelter stay and the services they have received. Staff must be protected from retaliation related to supporting clients through the grievance process.
- Include information about how the guest will be protected from retaliation during the process. Guests must have a specific contact whom they can receive updates throughout the grievance process.
- Grievances should be recorded and evaluated on a quarterly basis within the organization. Grievance Policies should be evaluated annually by the organization.
- Grievance metrics, outcomes, and policies must be made available to funders.
- All staff must be trained on the grievance policy during onboarding and annually thereafter, and be prepared to guide guests through the process.
- Grievance processes, resolution, and further appeals must be documented and retained in client files and available to the guest or their designee at their request.

Anonymous grievances should be allowed to be submitted. However, it should be made clear to the
guest that not having information, such as who was involved in the grievance, could limit the ability to
conduct a full investigation.

10. Displacement

Simple summary: This standard makes rules about when and how shelters can make a resident leave because of something the resident did. For example, if a resident hits or sexually harasses another resident, the shelter can make the attacking person leave the shelter right away. If the shelter asks a resident to leave because of other reasons, the shelter has to tell the resident why. The resident can ask the shelter to rethink their decision.

A. Applicability

• To which shelters these apply (Single Adult; Family; Youth; Shelter for Survivors of Violence) remains to be discussed.

B. Grounds for immediate displacement

- o A shelter may displace someone immediately if they do any of the following:
 - Physically attack someone.
 - Create an imminent and serious threat to someone's health or safety.
 - Engage in sexual harassment or unlawful or unwanted sexual behavior.

C. Procedure for other displacements

- 1. A shelter must exercise judgment and examine all extenuating circumstances in determining when a behavior or action warrants displacement. Displacement should be a last resort. *Note:* This is the federal standard for shelters receiving ESG funding.¹
- 2. A shelter displacing a resident for other grounds than immediate:
 - The shelter has to explain the reason for the displacement and, if applicable, provide the resident the opportunity to correct the behavior and remain in the shelter. (A written explanation must be provided upon request.)
 - If there is a dispute about an allegation of an action or behavior warranting displacement, the shelter needs to timely investigate, which includes giving the resident the opportunity to review and refute any evidence, speaking to witnesses, and allowing the resident to present their version of the events.

D. Notice upon displacement

- 1. Except for immediate displacements, a shelter has to give the resident being displaced a written notice that:
 - identifies the reason for and explains the circumstances of the displacement;

¹ The Federal Rules (the Code of Federal Regulations) reads: a shelter "must exercise judgment and examine all extenuating circumstances in determining when violations warrant termination so that a program participant's assistance is terminated only in the most severe cases." 24 CFR 576.402(a).

- lists alternative shelter options;
- lists mental health supports and services;
- provides contact information for the local legal aid office; and
- if applicable, describes appeal rights and procedures.
- 2. A person immediately displaced can go back at a later time and request the written notice.

E. Appeals

- A resident displaced from a shelter receiving funding from the Department of Human Services (DHS) has the right under existing law to appeal a displacement through the DHS administrative hearing process.
- 2. If a shelter receives funding from a state or local government agency, a resident has a right to appeal a displacement to that agency.

F. Right to remain in shelter during appeal

- 1. Other than for immediate displacements, a resident has a right to remain in the shelter during the pendency of an appeal.
- 2. A shelter may transfer the resident appealing a displacement to another shelter or other safe location, including but not limited to a hotel or motel, during the pendency of the appeal.
- 3. If the resident prevails in the appeal and the resident has not remained in the shelter, the resident has the right to return to the shelter if space is available or as soon as space is available or be provided shelter at another location.

G. Special circumstances

- 1. If a shelter displaces a resident in hazardous weather, the shelter must ensure that the resident will not be exposed to life-threatening conditions and work with county, nonprofit, mental health, other shelters, and law enforcement to ensure that the resident can be relocated to a safe location.
- 2. If one parent of a two-parent family with children is displaced, the shelter must allow the children and the other parent to remain in the shelter.
- 3. A shelter must make an accommodation to avoid displacement or lockout for residents who return to the premises after hours due to or resulting from an unusual, inconsistent, or exigent work schedule or employer demand or request.

H. Storage of property

- 1. If a resident is displaced, a shelter must safekeep on shelter premises the personal property left by the resident for at least 48 hours, provided the shelter has space to store the property.
- 2. If the shelter does not have space to store the property, the shelter must make arrangements to have the property moved to a location from which the resident can retrieve the property.
- 3. The shelter is under no obligation to retain the property for more than 28 days.

11. Resident privacy: records privacy

Simple summary: This standard wants to make sure shelters protect residents' personal information. Shelters might write down things about a resident, like their name and birthday and medical information, in a resident record. Shelters have to tell residents how their information will be stored and shared.

The standard also says when and how shelter workers can tell other people at the shelter or outside the shelter about residents. Mostly it says shelters can't share resident records with other people unless the resident says it's ok.

Confidentiality of records

Residents have the right to have personal, financial, health, and medical information kept private, to approve or refuse release of information to any outside party (except as required under applicable federal and state law), and to be advised of the shelter's policies and procedures regarding disclosure of the information. Residents must be notified when personal records are requested by, or released to, any outside party.

The records of a resident may be subject to privacy laws such the Minnesota Government Data Practices Act, and all other applicable law, rules, regulations, and orders relating to data or the privacy, confidentiality or security of data, which may include the Health Insurance Portability and Accountability Act (HIPAA) of 1996 and its implementing regulations.

Policies and procedures to protect and preserve confidentiality

The shelter shall establish and implement policies and procedures for maintaining the confidentiality and privacy of residents, and for complying with confidentiality requirements of applicable federal and state law. Shelters must use HMIS (Homeless Management Information System) to securely store information on its residents.

Shelters shall require that persons employed by, advocating, or volunteering services for the shelter protect the confidentiality and privacy of residents, complete confidentiality training, and sign a written confidentiality agreement.

Collection of personal information

When collecting personal information from a resident, the shelter must inform the resident in writing of the following:

- The purpose and intended use of the information. Examples include:
 - Determination of eligibility to receive services from the shelter
 - Assist in obtaining medical, mental health, financial or social services from outside agencies
 - Make reports, do research, audits and evaluate shelter programs
 - Advocate for additional services as determined by resident's needs
 - Case consultation with other staff and providers for the purpose of offering services
 - o How the information will be shared and with whom

- Whether the resident may refuse or is legally required to provide the requested information
- Any known consequences of supplying or refusing to supply the information
- The process for the resident to give other persons or entities permission to obtain the resident's information
- Residents shall have the right, at a reasonable time and with reasonable prior notice, to view and copy,
 or have an authorized representative view and copy, all records and information that are related to the
 resident and maintained by the shelter, including any relevant personal, social, legal, financial,
 educational, and medical records and information in a manner consistent with confidentiality
 requirements of state and federal law.

Sharing information with third parties (family members, police departments, medical providers, etc.)

Shelter staff may not disclose any personal, financial, or medical information collected in connection with services or reveal individual resident information without the informed, written, time-limited consent, except:

- 1) as may be required by law;
- to employees or contractors of the shelter, another shelter, other health care practitioner or provider, or inpatient facility needing information in order to provide services to the resident, but only such information that is necessary for the provision of services;
- 3) to persons authorized in writing by the resident, including third-party payers; and
- 4) to representatives authorized to survey or investigate shelters under applicable federal or state laws.

A shelter employee may disclose:

- 1. to law enforcement personnel that information necessary to report a crime committed at the shelter; and
- 2. to an employee of another shelter:
 - the fact that a guest committed a violent act or threats of violence within the last 30 days while on shelter premises; and
 - the circumstances of such acts or threats.

If a resident transfers to another shelter, the shelter, upon request of the resident, shall take steps to ensure a coordinated transfer including sending a copy of the resident's record to the new shelter or the resident, as appropriate.

Confidential information release authorization

Residents may authorize the shelter to release information to certain agencies. A Confidential Information Release Authorization form will be used and explained to the resident before signing. The authorization must be in writing, state that it is revocable at any time except where information has already been released. The authorization must also state how long it is effective and when it will expire.

Resident record requirements

Following the resident's discharge or termination of services, a shelter must retain a client's record for at least five years, or as otherwise required by state or federal laws. Arrangements must be made for secure storage and retrieval of client records if the shelter ceases to operate.

12. Resident privacy: personal privacy

Simple summary: This standard wants to make sure shelter residents have as much personal privacy as possible in different settings. For example, it says the shelter should give residents privacy when they're in the bathroom. It also says that workers can't do things like take residents' medication or read mail sent to residents.

Personal privacy includes privacy in accommodations, medical treatment, written and telephone communications, personal care, visits, and meetings of family and resident groups, but this does not require the facility to provide a private room for each resident.

Residents shall have a right to reasonable privacy in caring for personal needs, which includes private areas for changing clothes and curtains, dividers, partitions, private stalls, or other similar devices to afford resident's privacy when using toilets, showers, and tubs.

Medication

The shelter shall seek to afford shelter residents with the greatest possible privacy and autonomy in regard to their medication, while also providing a safe shelter environment, as follows:

- 1. Staff and volunteers shall not dispense medication or require residents to request their medication;
- 2. The shelter will provide every resident with an individual locking box, locker, or locking cabinet ("locked space") for storage of medications and valuables or lock the clients' medication in a safe but accessible location;
- 3. The shelter will not limit or monitor the client's access to the client's medication;
- 4. The shelter will provide refrigerated storage space in the manner that provides the greatest possible privacy and autonomy; and
- 5. The shelter shall have a policy for the disposal of unused or abandoned medication or other substances.

Personal items and belongings of residents

The shelter must have a Resident Agreement which includes provisions regarding personal items and belongings, storage, searches, dangerous items, accessibility when the shelter is closed, and abandonment.

Right to come and go freely

Residents shall have the right to leave and return to the shelter at reasonable hours in accordance with the rules of the shelter. Shelter rules shall allow residents to notify the shelter of the hours that the resident needs to leave and return to the shelter and provide for flexibility in case of unanticipated events such as transportation delays or unexpected work hour increases.

Right to private and unrestricted communications

Residents have the right to communicate privately, either verbally, in writing or electronically, with persons of their choice.

If a shelter is sending or receiving mail on behalf of residents, the shelter must do so without interference.

Resident's responsibilities

Residents will not interfere with the right to privacy enjoyed by other residents or staff. Residents will not take pictures of other residents in the shelter.

Right to meet with attorneys, advocates

A resident shall have the right to meet and communicate privately with attorneys, advocates, clergy, physicians, medical providers, social workers, and other professionals.

The resident rules must not unreasonably restrict access by legal representatives and legal counsel to any areas of the facility. Any requirements as to prior notice, hours of access, or access to private family areas shall be set forth in the resident rules.