



## DEPARTMENT OF COMMUNITY SUPERVISION RPH GUIDELINES

REENTRY SERVICES FORM Version 003 08/05/24

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***Applications are being accepted year-round for providers who are willing and able to serve our high need populations, sex offenders (S0) who are required to register and mental health level III (MH). Potential SO providers must submit documentation from the local Sheriff's Office where the property is located, confirming the property address is compliance and meets proximity.***

***The Department of Community Supervision, together with its collaborative partners, reserves the right to accept or reject any or all proposals and to waive informalities in this process. These Guidelines supersede any previous RPH guidelines, regulations, or portion(s) thereof, in the event that the latter is inconsistent or in conflict with said Guidelines.***

Reentry Partnership Housing (RPH) is a means to provide housing to persons who remain in prison after the Parole Board has authorized their release, due solely to having no valid residence plan. RPH can also assist with housing for those persons already released and under supervision with the Department of Community Supervision. Lastly, the RPH Program serves as an effort to enable certain offenders' participation in accountability courts when housing is an issue. Certified Reentry Housing Partners provide stable housing and food access to these individuals. The goal of the RPH program is to provide short term housing assistance to help stabilize an individual's reentry process and enhance his or her ability to remain crime free.

Grantees will be certified at the discretion of the Reentry Partnership Housing staff of Department of Community Supervision (DCS). While representatives of the Reentry Partnership Housing Program routinely inspect or visit the approved housing units, it is strictly for placement of individuals in the RPH program and not to endorse or reject any facility for any other purpose.

All eligible participating individuals from the Georgia Department of Community Supervision will have a current parole review summary prior to release from incarceration. A Community Supervision Officer is assigned to monitor each eligible participant for compliance with conditions of parole or probation. They will work with the housing provider and other stakeholders to support the person's successful reentry to the community. Approved participating individuals have also had appropriate programs available to them during their incarceration period.

This program involves a unique collaboration by several different agencies, including DCS, Georgia Department of Corrections (GDC), Georgia Department of Community Affairs (DCA), and the Georgia Council of Accountability Court Judges (CACJ).

**For additional information, please contact:**

[housing@dcsc.ga.gov](mailto:housing@dcsc.ga.gov)

## 1. Purpose – Goal of Program

The purpose of this program is to provide short term housing assistance to help stabilize a person's reentry process. The goal of the program is to enhance his or her ability to remain crime free.

## 2. Definitions - The following definitions apply to the terms used herein.

- A. Grantee: the housing provider to whom the contract will be issued if application is approved. The individual responsible for all of the facility's day-to-day operations. Facility Director.
- B. Staff: all paid and volunteer facility staff who have contact with residents.
- C. Supervisee: a person under the supervision of the Department of Community Supervision or in prison (inmate). "Supervisee" should not be used when referring to people under supervision who reside at the facility – the preferred term is "resident."
- D. Community Supervision Officer (CSO): the DCS officer who is responsible for the ongoing supervision of the individual (previously probation/parole officer).

## 3. Applicant/Grantee Qualifications

Grantees considered for funding should be able to demonstrate experience in providing housing and/or related supportive social services to special needs populations. Housing providers must provide documentation indicating that they meet all local housing and zoning codes and may be required to provide documentation that they are in compliance with use and occupancy permits.

- A. **Recovery Residence Qualifications**: Recovery residences provide safe and healthy housing for residents who need a more restrictive environment than outpatient services to establish or maintain abstinence from alcohol or other drugs and criminal behavior. Substance abuse services or substance abuse counseling are a mandated part of the curriculum.
  - a. Effective 8/1/20, Recovery residences require accreditation from a minimum of one of the following agencies: GARR, DCH, CARF, or JCAHO.
    - i. GARR - [Georgia Association of Recovery Residences](http://www.thegarnnetwork.org). General Information - [info@thegarnnetwork.org](mailto:info@thegarnnetwork.org). Becoming a provider - Charmon Talley, [charmon@thegarnnetwork.org](mailto:charmon@thegarnnetwork.org).
    - ii. DCH - [Georgia Department of Community Health](http://www.dch.ga.gov). Choose "licensure forms and applications" and then "Drug Abuse Treatment and Education Program Application Packet".
    - iii. CARF - [Commission on Accreditation of Rehabilitation Facilities](http://www.carf.org).
    - iv. JCAHO - [Joint Commission on Accreditation of Healthcare Organizations](http://www.jcaho.org).

## 4. Staff Qualifications

Persons selected to fill the role of house manager or senior resident should demonstrate a professional, positive demeanor when working with residents and staff. Candidates should be committed to the mission of your program and the success of the residents. He/she should have an appreciation for the challenges that the residents face. The grantee, housing manager, and staff persons shall not be under the influence of alcohol or any other controlled substances while engaged in any activity on behalf of the RPH facility.

House managers are not a requirement of RPH, unless the grantee is providing housing services to sex offenders. (Please refer to section 10.) However, a person in this position could be beneficial in assisting the grantee with the most efficient operation of the program.

All programming and certified/licensed staff requirements at recovery residences will be as determined by the chosen accreditation.

## **5. Background Checks for Grantees and Staff**

Application for inclusion in the RPH program shall list all staff members who perform RPH duties at their facilities. DCS shall then be notified of staff changes as they occur.

Grantees, in addition to all staff designated for RPH purposes (both volunteer status and paid, including house managers), must consent to annual NCIC/GCIC background checks and must successfully pass the background investigation. In addition, copies of driver's license or state identification are required.

In regards to **GRANTEES**, the following standards are set for approval of NCIC/GCIC background checks:

- A. No convictions within the past two (2) years (felonies, drug-related/violent misdemeanors or DUI).
- B. Shall not be under active supervision of any agency (e.g. Department of Community Supervision, Private Probation Agency, or Federal Probation) and must have been free from supervision or incarceration for at least two (2) years.
- C. No convictions for sexual offenses.
- D. No current arrests for felonies and violent misdemeanors without dispositions.

In regards to **ANY OTHER STAFF DESIGNATED FOR RPH PURPOSES (BOTH VOLUNTEER STATUS AND PAID, INCLUDING HOUSE MANAGERS)**, the following standards are set for approval of NCIC/GCIC background checks:

- A. Shall not be under active supervision of any agency (e.g. Department of Community Supervision, Private Probation Agency, or Federal Probation) and must have been free from supervision or incarceration for at least two years.
- B. No convictions for sexual offenses.
- C. No current arrests for felonies and violent misdemeanors without dispositions.

Our agencies have the right to review specific requests on a case by case basis.

## **6. Supervisee Placement**

**\*\*DCS does not guarantee any number of placements to any housing provider.**

Grantees shall only admit and retain persons under supervision for the purposes of RPH based upon written authorization from the Department of Community Supervision. Supervisees will be placed upon known needs. At all times, the health, safety, mental, and physical well-being of the individuals shall be the determining factors. RPH staff will make the final determination as to the appropriateness and rehabilitative capacity of any programmatic component.

Religious studies may comprise a portion of the curriculum. Resident participation in religious activities must be voluntary. Programs cannot discriminate against residents who do not attend

religious activities nor show favoritism to those who choose to participate in an outside religious affiliate.

## **7. Housing Policies**

In-house rules and regulations relative to the health and safety of the residents and staff shall be in written form and prominently displayed. Each resident shall be given (and sign for) a copy upon admission. Termination and re-admission policies shall be included in this policy and explained to each resident at the time of admission. Each readmission must be considered on a case-by-case basis.

- A. This policy must include a written statement of the resident's rights which include but are not limited to the following:
  - a. An explanation of the compensation provided by RPH relative to the cost of room and board;
  - b. Resident responsibility for housing and housing costs beyond the RPH period of 90 days (up to 180 days for MH level 3).
  - c. An explanation of what the RPH funds do and do not cover;
  - d. General human rights, such as the right to receive services, respecting dignity and protecting health and safety, and confidentiality of records;
  - e. Other such generally understood rights should be clearly stated.
- B. Grantees must maintain certain client information for reporting. This includes information on the following:
  - a. Name, last address, DOB, race, emergency contact person info., supervising officer contact info., pertinent medical history, and current medications;
  - b. A copy of the court-ordered sentence;
  - c. Screening, intake/assessment info., and individual recovery plan;
  - d. Program activity attendance documentation;
  - e. Documentation of fees, charges, and payments/credits;
  - f. Progress notes written by staff at least monthly;
  - g. Progress reports sent to CSO if previously requested;
  - h. Documentation of all communications with CSOs.
  - i. Each resident must sign upon admission:
  - j. Copy of the fee schedule;
  - k. Agreement to participate in specified activities;
  - l. Consent form authorizing the facility to release attendance, quality of participation, drug test results, and progress reports (if requested) to the supervising officer;
  - m. Resident's rights;
  - n. Facility Rules/Regulations.
  - o. All signed documents must be kept in the resident's file
  - p. RPH resident entry and exit dates

## 8. Mental Health Placements

Persons under supervision who have a GDC mental health diagnosis of level 3 or lower are eligible for RPH services.

- A. Mental Health Level 1 as described by the GA Dept. of Corrections - No impairment or disorder of adaptive functioning. Requires no scheduled mental health services.
- B. Mental Health Level 2 as described by the GA Dept. of Corrections - Mental health disorder in remission or stable with minimal residual symptoms or mild impairment of adaptive functioning or mild mental retardation, with or without psychotropic medications. MH level 2 RPH placements are placed in the same manner as those persons with no mental health diagnosis.
- C. Mental Health Level 3 as described by the GA Dept. of Corrections: Mental health disorder and/or symptoms that seriously impair adaptive functioning. These inmate require continuous case management and psychological/psychiatric treatment with or without psychotropic medications. Persons with a MH level 3 diagnosis require a more extensive RPH referral process. To become a MH level 3 provider, your program should include the following components:
  - a. Having a SOAR representative (SSI/SSDI Outreach, Access, and Recovery). A SOAR representative increases access to disability income benefit programs administered by the Social Security Administration (SSA) for eligible adults who are experiencing or at risk of homelessness and have a mental illness, medical impairment, and/or a co-occurring substance use disorder.
  - b. Direct access to Community Service Boards or similar organizations for mental health treatment with ACT team intervention from that Community Service Board if possible.
  - c. A crisis intervention plan in place. A written plan to be initiated in the event of a crisis event involving the RPH resident.
    - i. To include the ability to petition the court for an order authorizing a peace officer to take the resident to a CSU (crisis stabilization unit) or nearest emergency receiving facility for the purpose of examination and treatment (GA Code 10-13).
  - d. Transitional Housing Program for the resident after the RPH period.
- D. If approved by the DCS housing unit as a MH level 3 facility, the grantee will be compensated at a higher rate for each MH level 3 placement.
- E. Acceptance of an organization's qualifications to provide housing to MH level 3 persons will be made at the discretion of the Department of Community Supervision and the Department of Community Affairs. Decisions are final and not subject to appeal.

## 9. Accountability Courts of Georgia

Beginning in January 2018, the following types of adult felony Accountability Courts became eligible to access RPH services: *Drug Courts, Mental Health Courts, Veterans Courts and Family Treatment Courts*. Active participants of those courts can be eligible for up to 90 days of housing assistance under RPH when court criteria for homelessness has been met and the participant has been deemed eligible by court coordinators through their financial assessment process.

## 10. Sex Offenders

Providers who are wanting to accommodate the housing needs of the registered sex offender population are required to have the following additional stipulations in place:

- A. Fulfill electronic monitoring (EM, GPS and VR) requirements, which may include furnishing a land-line telephone without any special features, if requested by DCS staff.
- B. Maintain compliance with all sex offender residence restrictions and acknowledge that subsequent changes in the law and/or the opening of a new childcare facility, church, school, or area where minors congregate within the restricted proximity of a housing unit will cause immediate disqualification.
- C. Obtain a written statement from the county sheriff that includes an acknowledgment of proximity law compliance and the number of sex offenders to be housed at each location.
- D. Submit to a criminal history record check by the DCS housing unit on every staff member and volunteer working with sex offender residents, upon hire, annually, and/or upon request.
- E. Report all inappropriate conduct of sex offender residents to the supervising officer of record and DCS housing unit immediately, not to exceed 24 hours.
- F. Have a policy in place to allow the supervising officer of record the ability to maintain contact with the sex offender, at a minimum via telecommunication, in the event of a natural disaster or emergency situation where residents of a facility are displaced.
  - a. Assist the resident with Emergency Plan compliance within 24 hours of an emergency or evacuation/relocation which includes:
    - i. Reporting to the nearest Sheriff's Office and checking in.
    - ii. Contacting the nearest Department of Community Supervision Office and requesting reporting instructions.
    - iii. Immediately informing the shelter director that the resident is a registered sex offender or under active supervision for a sex offense(s), if relocated to a shelter facility.
- G. Provide on-call staff accessible by residents on a 24/7 basis when the total number of sex offenders being housed is 9 or less. When 10 or more sex offenders are being housed, on-site staff must be provided.
- H. Request approval of overnight passes from the **community supervising officer (CSO)** of record **prior** to issuing the pass, utilizing the [DCS pass request form](#).
- I. Restrict resident access to computers as required and/or directed by the supervising officer of record. Computers must be secured by password access to prevent unauthorized access. If a computer is on site, the housing provider must provide a separate login for each resident to assist officers in conducting computer searches and provide individual accountability for internet use.
- J. Ensure no child under the age of 18 is allowed to reside within the RPH location(s).
- K. Allow sex offender home searches that are more frequent and in-depth than with non-sex offender home visits. Any computers to which residents have access and all accessible personal living spaces are subject to being searched.
- L. Resident progress should be provided to the supervising officer upon request. A suggested [progress report template](#) is being provided.
- M. Maintain a visitors log. Visitors will not be allowed in bedrooms. A visitor's policy must be in place which includes provisions for staff monitoring of visitation. The visitors log must be made available to any CSO when requested.
- N. Provide a policy for transitional housing past the RPH period. If the resident is financially able to pay for housing past the RPH period and is allowed to stay by the grantee, a new housing agreement must be provided that covers required fees and eviction policy.

## 11. Resident Placement – Room and Board Amounts Authorized and Payment

Once an applicant organization has been approved for participation in this program, placement of individuals and payment will take place as follows:

- A. Program Specialist reviews person in need of placement;
- B. If incarcerated, inmate is interviewed by his/her prison counselor to determine willingness to participate in RPH. If already under DCS supervision, supervisee is interviewed by his/her community supervision officer to determine willingness to participate in RPH;
- C. Program Specialist initiates placement processing;
- D. Program Specialist notifies grantee of the person's placement approval in writing;
- E. Grantee will submit invoice requests once per month, no later than the 5th of the following invoicing month.
  - a. The RPH Invoicing Google Form will be provided once your RPH contract has been signed and received by DCS. The form will be shared via email with the Facility Director and the RPH Invoicing POC, if those are two separate staff members. The DCS housing staff member handling invoicing duties will have a call with you and any designated staff to go over the invoicing process.
  - b. Upon arrival of any new participant at your facility, please find out the Community Supervision Officer (CSO) for that participant and capture their contact information. Submit an arrival confirmation email to that CSO and [housing@dcs.ga.gov](mailto:housing@dcs.ga.gov) with the **name** of the resident and **date of arrival**.
  - c. After completing and signing your invoice, you will receive a confirmation email. **Please save this confirmation email.** This will serve as your copy of the requests. And if corrections are needed, you will use the Edit Button located in this confirmation email.
  - d. Housing staff will verify the information on your invoice against the "approved RPH release list" and Dept. of Community Supervision case management system (Portal) and inform you, via email, that your requests have been received. Or if any corrections are needed. This email exchange will continue until the document is correct.
- F. In the event that person does not arrive for placement upon release, RPH/HTF will issue compensation to the grantee in the amount of \$75. This No Show should be noted on the next invoice submission;
  - a. Providers will allow three (3) days for a resident to arrive at the program. The three days include the expected arrival date. If the resident does not show on the expected arrival date, the housing provider will immediately notify the [housing@dcs.ga.gov](mailto:housing@dcs.ga.gov) notifying us of the placement No Show status. DCS housing will not open the bed up until two (2) day after the expected arrival date.
- G. Following placement agreement between grantee and Program Specialist, grantee will be paid \$75 in the event that inmate's release is canceled. This Cancellation should be noted on the next invoice submission;
- H. Upon receipt of the invoice requests, Housing staff will evaluate the invoice for accuracy. Housing staff will notify grantee within 5 business days of any necessary corrections via email. After all adjustments are made, Housing staff will submit the invoice to DCA for payment and will notify the provider via email that the invoice has been submitted to DCA for processing.
- I. DCA will make funds available through electronic transfer within 25 business days or less after receipt of invoices from DCS.



If the individual arrives, but is not housed by the grantee, the grantee shall not be compensated. If the grantee submits an invoice for said individual, it will be viewed as a fraudulent submission and at the discretion of the Department of Community Supervision may result in the terminated from the program.

By signing an invoice and returning it to the Program Specialist, the grantee is certifying that the individual is a **current** resident of the grantee's program. Fraudulent attempts to obtain funds will result in removal from RPH and possible criminal charges.

## 12. Housing (Room)

Contract subsidy includes the provision for both room and board. The fee coverage period begins on the date of entry. The resident cannot be charged for room and board costs paid through this program. Program policy on room and board must be disclosed to each resident. Room and board paid through this program must be documented in writing to each individual resident through the *RPH participant disclosure form* or similar document. **If a program is certified as a recovery residence through GARR, CARF, DCH, or JCAHO, fee requirements for the treatment or counseling component must be clearly explained** in the program policy and specifically disclosed to the individual. Furthermore, the individual must agree to the treatment component and associated fees prior to determination of RPH eligibility.

**NOTE:** Offenders will be placed in programs according to need. For example, individuals who are active participants in an Accountability Court are not required to participate in treatment components of an RPH program unless specifically ordered by a judge, as they may be receiving treatment /counseling services through another provider.

## 13. Habitability Standards -

- A. *Structure and materials:* The structures must be structurally sound so as not to pose any threat to the health and safety of the occupants and so as to protect the residents from hazards. All furniture, including mattresses, should be maintained in good condition as determined by DCS inspection, intact, and functional. The facility must make available for each resident an adequate supply of clean linens which includes, at a minimum, sheets, pillowcase, blanket, bedspread, towels and washcloths.
- B. *Access:* The housing must be 24/7 accessible by residents and capable of being utilized without unauthorized use of other private properties. Structures must provide an alternate means of evacuation in case of fire.
- C. *Space and security:* Each resident must be afforded adequate space and security for themselves and their belongings. This could include, but is not limited to, dresser-type storage and a closet or other hanging space for clothing. Each resident must be provided with an acceptable place to sleep, to include personal bed, mattress, and pillow. Roll-a-ways, cots, hide-a-beds and couches are not to be provided by the facility in lieu of standard beds. It is recommended that the mattresses themselves, or their covers, be antifungal, anti-bacterial, fluid-resistant and bed bug resistant. Common areas, which should be available to residents, such as living, dining, activity, laundry or other multi-purpose rooms, or hallways must not be used as sleeping accommodations for residents or staff. It is also recommended that bedrooms contain not less than approximately 60 square feet per resident. There should also be designated smoking areas as policy allows.
- D. *Interior air quality:* Every room or space must be provided with natural or mechanical ventilation. This may include ventilation by a window, air conditioner or other mechanical ventilation. Rooms that are ventilated mainly by windows shall have insert screens that are in good repair. Structures must be free of pollutants in the air at levels that threaten the health of residents.



- E. *Water Supply:* The water supply should be made available in all the following areas that have a bathtub, shower, toilet or sink. The water supply must be free from contamination.
- F. *Sanitary Facilities:* Residents must have access to sufficient sanitary facilities that are in proper operating condition, may be used in privacy, and are adequate for personal cleanliness and the disposal of human waste. Residences should have at least one sink, toilet, and tub/shower per every six occupants of the house. This includes any house manager or staff living in the residence full-time.
- G. *Thermal environment:* The housing must have adequate heating and/or cooling facilities in proper operating condition. It is recommended that residences are maintained at a comfortable temperature, generally 65-78 degrees Fahrenheit depending upon the season of the year.
- H. *Illumination and electricity:* The housing must have adequate natural or artificial illumination to permit normal indoor activities and to support the health and safety of residents. Sufficient electrical sources must be provided to permit the use of essential electrical appliances while assuring safety from fire. The facility must provide necessary light bulbs. All areas of each RPH location, including hallways and stairs, must provide sufficient ambient lighting such that the residents may move about safely and objects may be easily observed by the residents.
- I. *Food preparation and refuse disposal:* All food preparation areas must contain suitable space and equipment to store, prepare, and serve food in a sanitary manner. A policy must be in place to address food access as detailed in the RPH Guidelines, Section 14.
- J. *Sanitary conditions:* The interior and exterior of each RPH location must be kept clean, in good repair, and maintained free of unsanitary or unsafe conditions which might pose a health or safety risk to the residents and staff as determined by a DCS representative. Linens should be changed and laundered in a routine manner as set by the facility.
  - a. Each program must provide a **Facility Exterminator Agreement** or a written plan explaining the location will provide sanitary conditions of your RPH location(s). Verification of plan will be requested during initial application and subsequent site visits.
  - b. An insect, rodent or pest control program must be maintained and conducted in a manner which continually protects the health of residents.
  - c. If DSC is made aware of an insect infestation, providers who maintain their own pest control will be required to provide documentation of professional pest control services. Until the initial service is received and documentation provided, placements will be halted.
- K. *Fire safety:* All conditions below must be met to meet this standard.
  - a. Each RPH location must be protected with sufficient functioning smoke detectors, in proper working condition, on each occupied level of the location. Smoke detectors must be located, to the extent practicable, in a hallway adjacent to a bedroom. Smoke detectors shall be installed, maintained and operated in accordance with applicable state laws and local ordinances. Check with the Office of Insurance and Safety Fire Commissioner if you have questions about what would be a sufficient number of smoke detectors for each location. If the location is occupied by hearing impaired persons, smoke detectors must have an alarm system designed for hearing-impaired persons in each bedroom occupied by a hearing-impaired person. Every RPH location with at least one fuel-burning appliance/heater, attached garage or fireplace must have a carbon monoxide detector.
  - b. Each RPH location must have charged multipurpose class ABC fire extinguishers available for use as required by state or local fire codes, whichever is more stringent. According to the GA Fire Marshal's Office, currently the requirement will be 1 (one) 10 lb fire extinguisher (or 2 (two) 5 lb extinguishers) per 2000 square feet of living space. If the facility consists of multi-levels, one fire

extinguisher must be located on each level. The fire extinguishers must be tagged and checked annually by a licensed fire extinguisher company to assure the extinguishers remain in operable condition. Such annual inspection should be noted on the attached inspection tag.

- L. *Evacuation Plan*: An emergency evacuation map should be posted in clear view in every residential location operated for RPH purposes.
- M. *First Aid Kit*: Each RPH location must have a supply of first-aid materials available for use. This supply must include, at a minimum, gloves, adhesive bandages, tape, gauze, and an antiseptic.
- N. *Narcan*: Each provider will maintain a least one (1) package of Narcan.

#### **14. Food (Board)**

A policy shall be in place to address food access. Examples of food access could include, but is not limited to:

- A. Staff preparing meals for residents in a kitchen. If required by the local county board of health, a residential program shall obtain a valid food service permit from the local county board of health and be subject to all city and county ordinances which would include items pertaining to storage, preparation and service.
- B. Providing access to food/groceries that the residents may cook for themselves.
  - a. If purchased groceries are provided, an itemized list of all food supplied to the residents must be provided to and signed by the resident upon delivery of food. Copies of these receipts must be maintained in the resident's records. A template for receipts may be viewed [HERE](#).
  - b. If residents are expected to cook for themselves, means to prepare food must be provided (e.g. a stovetop and oven, pots and pans, kitchen utensils, dishes, and silverware).
  - c. If the grantee maintains an active Food Bank contract, such documentation can be requested by DCS staff at the time of initial approval and subsequent compliance checks conducted annually.
- C. Residents may receive food stamps while residents of RPH programs if they qualify for such services after making proper application. Grantees may assist with resident application for food stamps, however, grantees shall not require residents to submit their food stamps for use by the entire program. Food stamps must not be assigned to another resident. Food stamps can be assigned only to the facility director or her/his designee when the facility has a USDA permit, has an authorized waiver or is designated as an Authorized Representative on behalf of the supervisee with the Division of Familycommunication and Children Services. In the event of approval as an authorized representative, the grantee may assist and manage the purchase of food for the RPH resident, provided the resident is the main beneficiary of the purchase. In addition, if food is purchased utilizing an RPH resident's SNAP benefits, an itemized list of all food items must be provided to and signed by the resident upon delivery of food. If some residents receive food stamps while others do not, then a provision for food access must be maintained by the grantee for those residents who do not.

#### **15. Standard Curfew Guidelines**

Curfews must be in place at each facility. Curfews are a part of the rules and regulations that bring structure to the events of residents in the facility. The requirement to be at the facility by a certain time helps residents create a schedule that allows them to focus on progressing in their reentry process. When outside employment requirements of residents conflict with standard curfew times, modifications must be considered. Collaboration with the assigned Community Supervision Officer and/or Accountability Court staff regarding established curfew times is

required when the resident is mandated to comply with any form of electronic surveillance. A reverse curfew is not permitted: Residents being forbidden to enter the facility during certain times of the day when they are expected to be applying for jobs, attending classes or doing other productive activities. Residents and DCS staff must have 24/7 access to the facility via a key, access code, or resident manager.

## **16. Property**

### **A. Local Government Certification**

- a. Determine current zoning of the property.
- b. Determine whether or not the use of the property for RPH purposes will be consistent with local zoning requirements.
- c. Obtain verification of this information using the attached [Zoning Compliance Form](#) or by obtaining a letter from your local zoning/planning office on their official letterhead confirming that the property/properties (addresses must be included) are properly zoned for RPH purposes.

The RPH residence shall meet all local requirements promulgated by the State Housing Code; fire and building departments; zoning authorities; city or county ordinances; state departments of public health; welfare and licensure requirements, as applicable; and federal regulations to insure the health and safety of its residents and staff population. The physical structure shall be maintained as much as a homelike atmosphere as possible within the confines of such an understanding.

### **B. Law Enforcement Notification**

- a. Obtain verification that the local law enforcement agency is knowledgeable of the applicant's request to participate in this program and property location (s), using the attached [Law Enforcement Notification](#).

### **C. Organizations must have an up-to-date registration with the Secretary of State's office.**

## **17. Conflicts of Interests**

Directors, owners, employees and others that have a direct or indirect financial interest in RPH provider facilities and other residences shall:

- A. Conduct themselves in such a manner as to not create a conflict of interest or the appearance of such conflict.
- B. Make immediate and full disclosure to DCS, GDC, DCA, and CACJ ("agencies") of all situations involving either actual or potential conflicts of interest, whenever such situations may arise.
- C. Refrain from entering into any particular transaction or establishing any relationship with others if their duty of loyalty and diligence to the RPH provider facility is or may be impaired.

If the agencies determine that a conflict of interest or appearance of such conflict exists, the RPH provider facility will be asked to correct or remedy the situation within a specified time period. If the RPH provider facility fails to disclose a conflict of interest or an appearance of conflict of interest or fails to remedy the conflict of interest within the time period specified, the agencies shall take appropriate disciplinary and corrective action as it deems necessary.

Under no circumstances will the agencies contract with any person that is employed by the State of Georgia, the Accountability Courts of GA, or any member of their immediate family, which includes the employee's parents, spouse or children. Nor will the agencies contract with any privately operated business that has a business relationship with any State employee or any Accountability Court employee, nor any member of their immediate family as defined above.

## **18. Site Control**

Grantees must own or lease property provided for housing, and grantees will be subject to verification of ownership or lease of property. This requirement is checked annually. If property/properties are leased, verification from the owner(s) approving the use of each property for RPH will be required.

## **19. Resident In-House Work-Related Criteria**

Residents may not be required to work as payment for housing during the period that the grantee receives a housing subsidy.

Residents may be required to perform routine chores. This may include assigned daily chores, such as cooking or cleaning. This labor must at no time "improve" the property or enrich the managerial staff. An example of such restricted labor would be major renovations/repairs, building additions or other forms of site construction. General maintenance to maintain current habitability is permitted.

## **20. Electronic Monitoring (Optional Service)**

Provision of electronic monitoring at the RPH location is **not mandatory** to become an active RPH provider. However, many offenders approved for placement under RPH have been ordered to comply with a special release condition of electronic monitoring by the Parole Board. Assignment to electronic monitoring upon release offers a structured environment which will assist the person in making a successful transition to the community. Placement on electronic monitoring requires the resident to schedule his or her daily activities, thus permitting them to work and attend necessary treatment, while requiring them to maintain a curfew. If a grantee chooses to allow electronic monitoring of a resident at their RPH location, the following conditions must be in place:

- A. Residence must have an operational telephone with jack and be willing to keep it activated.
- B. Grantee must agree to cooperate with the electronic monitoring regulations by limiting telephone use and removing or delaying the connection of additional telephone features such as call waiting or call forwarding. Long distance feature is required.
- C. Reports of changes in resident conduct or violations must be reported to the DCS supervision officer immediately.

## **21. Medicine Disbursement/Storage**

### **Disbursement:**

Residents taking medications shall do so through self-administration. Staff may not handle the medication in any way, other than removal of the container/bottle from centralized storage.

“Self-administration” means the resident has an awareness of self that allows the resident to state what the medication is for, when it is to be taken, can describe the physical characteristics of the medication, and alert staff if he or she is experiencing physical symptoms (weak, dizzy, etc.) that might be indicative of an adverse drug reaction. Medications can include prescription medications, vitamins, herbal medications, and all over-the-counter medications.

Uncertified and unlicensed staff may provide assistance with self-administered medications **ONLY TO THOSE RESIDENTS WHO ARE CAPABLE OF SELF-ADMINISTRATION BUT CHOOSE TO HAVE STAFF HANDLE THE MEDICATIONS FOR THEM.** The residents must be able to exercise judgment and choice about taking the medications and be able to articulate any physical reactions to medications. Assistance with self-administration of medications by uncertified and unlicensed staff to residents who are capable of self-administration is limited to the activities listed below, and is subject to personal care home certification:

- A. taking the medication, in its previously dispensed, properly labeled container, from where it is stored, and bringing the medication to the resident;
- B. reading the label, opening the container, removing a prescribed amount of medication from the container, and closing the container, in the presence of the resident;
- C. placing an oral dosage in the resident's hand or placing the dosage in another container where the resident requests assistance;
- D. returning the medication container to proper secured storage;
- E. assisting the resident's use of an EPI pen where the resident has known severe allergies for which an EPI pen has been prescribed on condition that there is an established written protocol detailing how it is to be used and when. The protocol must include immediately calling Emergency Services, 911, after any use of the EPI pen.

The facility must provide and document medication training for the unlicensed staff, who are not certified medication aides, but who are providing assistance with self-administration of medications to capable residents. The medication training must be conducted with an appropriate curriculum for providing medication assistance and include at least the following topics:

- A. the facility's medication policy and procedures, including actions to take if concerns regarding resident's capacity to self-administer medications are identified;
- B. how to read prescription labels, including common abbreviations;
- C. providing the right medication to the right resident at the right time in the right amount and the right way, including how to measure various medications;
- D. actions to take when concerns regarding medications are identified;
- E. infection control procedures relative to providing assistance with medications;
- F. proper medication storage and disposal;
- G. recognition of side effects and adverse reactions for the specific medications.

In all instances where the facility either provides assistance with or centralized storage of self administered medications, staff must maintain a daily Medication Assistance Record (MAR) for each resident. The MAR must include:

- A. the name of the specific resident
- B. any known allergies
- C. the name and telephone number of the resident's health care provider
- D. the name, strength and specific directions including key side effects and adverse reactions for use of each medication

- E. A chart for staff who provide assistance to record initials, time and date when medications are taken, refused, or a medication error is identified (e.g. missed dosage).

The staff providing the assistance must update the MAR each time the medication is offered or taken.

Residents who are not capable of self-administration must, at a minimum, receive their medications from certified medication aides or nurses.

### **Storage:**

The facility is accountable for having an effective system to manage the medications. This includes storing medications under lock and key to prevent unauthorized access, at all times. Medications can be stored in two ways:

- A. kept by a resident
- B. Kept by the facility for the resident, except when required to be kept by a resident on his or her person due to need for frequent or emergency use, as determined by the resident's physician.

Medication kept by a resident may be stored in the resident's bedroom, in a locked cabinet or other locked storage container. Single occupancy bedrooms which are kept locked at all times are acceptable. Duplicate keys for the resident's locked storage container and room must be available to the resident and the grantee or designated staff.

Medication kept by the facility for multiple residents must be stored in a centralized administrative location accessible by staff only. A signed copy of the medication consent form must be included in each resident's file. The Medication Consent Form can be accessed [HERE](#).

## **22. Transportation of Residents (Optional Service)**

Transportation is **not a mandatory service** required of RPH housing providers. However, if the grantee or employees of the housing provider provide transportation to residents in vehicles owned either by the housing provider or by the employee, the housing provider must ensure that the following requirements are met:

- A. All vehicles must be maintained and operated in a safe manner.
- B. All staff providing transportation must possess an appropriate driver's license from the Georgia Department of Driver Services.
- C. All housing provider-owned and staff-owned vehicles for resident transportation must be adequately covered by vehicular liability insurance for personal injury to occupants of the vehicle.
- D. Appropriate safety restraints must be used as required by state and federal law.

## **23. Weapons**

Persons under supervision with DCS will sign the Offender Firearms Acknowledgement during their supervision intake process, which prohibits them from receiving, shipping, possessing, transporting, or attempting to purchase a firearm and ammunition in accordance with federal and state law. Deadly weapons shall be prohibited within all RPH facilities, except where the weapon is under the control of law enforcement or DCS officers. This would not apply to those staff who have an active GA weapons carry license as issued by a GA Probate Court. For those

staff possessing an active GA weapons carry license, a mandatory method of securing weapons shall include, at a minimum, a requirement that the weapon shall be maintained in a secured lock safe or similar lock box that cannot be easily accessed by residents.

## **24. Communications**

- A. All grantees must be willing to allow DCS officers and/or accountability court personnel entry to the residence or other designated facility office and allow persons under supervision to attend required meetings at DCS offices.
- B. All grantees should endeavor to report the resident's progress at least once monthly. Situations that could or are leading to possible termination shall be reported immediately.
- C. All grantees must cooperate with DCS/court personnel in regard to special requests for site visits for evaluation purposes to ensure compliance with DCS /court approved standards.
- D. All grantees must notify DCS / court officers of delinquent behavior by the persons under supervision.
- E. All grantees must notify DCS / court officers if a resident breaks curfew within the next business day.
- F. All grantees must notify DCS / court officers if a resident absconds from the residence or is terminated within the next business day.

## **25. Suspension/Removal**

### **A. Grounds for SUSPENSION from the RPH program as an active provider:**

DCS reserves the right to suspend a site from the RPH program as needed for investigative purposes, guideline infractions, or as deemed necessary by DCS personnel. The suspension period serves as the time DCS deems necessary to address concerns or correct any pending infractions. The grantee is notified immediately of the violations via certified Letter of Suspension and email and that the facility status has changed from Approved to Suspended. The grantee must display a willingness to cooperate with DCS to correct and remediate any concerns or issues raised. RPH Guidelines previously listed as recommendations may become mandates at any point during an investigation of infractions if deemed appropriate by DCS staff. If approval is reinstated at the end of the suspension period, the grantee must demonstrate that the necessary measures have been taken to correct the issue(s) that resulted in suspension from the RPH program. During a period of suspension, housing providers may not accept any new residents who are under DCS supervision. DCS will notify the housing provider as to whether current residents may continue to reside at the site during the suspension period.

### **B. Grounds for REMOVAL from the RPH program as an active provider include, but are not limited to:**

- a. Violation of any of the RPH guidelines.
- b. Violation of zoning codes, use and occupancy permits, licensing laws.
- c. Permitting, aiding, abetting, or concealing the commission of any illegal act.
- d. Failure to cooperate with DCS staff or supervising officers concerning site visits.
- e. Noncompliance with annual compliance checks.
- f. The grantee, housing manager, or staff persons being under the influence of alcohol or any other controlled substances while engaged in any activity on behalf of the RPH facility.
- g. Fraudulent attempts to obtain funds through invoice requests for residents who are not currently active in the grantee's RPH program.



- h. Failure to report the arrest of a staff member within 24 hours or the next business day.
- i. Sexual harassment, activity, and/or relationships between residents and staff.
- j. The grantee, housing manager, or staff persons entering into a transaction with an RPH resident whereby information, goods, or services are exchanged for money, or any other good and valuable consideration.
- k. Conduct or practice deemed by DCS to be detrimental to the welfare of residents being served by the RPH program.
- l. The submission of false information to DCS or any of its staff members.

DCS reserves the right to suspend or remove a grantee from the list of approved RPH housing providers for any infraction deemed by DCS to be an immediate threat to the safety and health of the residents or public. Accountability court personnel may review any and all documentation regarding suspension/removal of providers. When violations are found, sanctions can be applied up to and including immediate and permanent removal from the RPH program.

Upon removal from the program, the housing provider shall work with DCS to relocate current residents to other approved housing facilities. The site may not accept any new residents under DCS supervision while removed from the RPH program. To reapply for admission to the RPH program, the removed housing provider must wait the specified period of time given under these guidelines and the provider must show documentation of the steps that were taken to eradicate the infraction(s) which caused the removal. If DCS becomes aware that the housing provider or any of its staff are representing themselves to others as still being on the approved RPH provider list, the privilege to reapply for admission to the RPH program may be revoked.

If at any point an active provider chooses to be voluntarily removed from the RPH program, a letter from the grantee must be submitted to the DCS Housing Operations Manager with the effective date of separation from the program. The provider may give a reason for separation, if deemed necessary. Upon removal from the program, the housing provider will work with DCS to relocate current residents to other approved housing facilities. The site may not accept any new residents under DCS supervision while removed from the RPH program.

In the event a provider is removed, whether voluntarily or involuntarily from the program, the grantee may correct the infractions and reapply after one full calendar year. All stipulations, infractions, issues, and or concerns specified in the notice given to any provider, who has been removed, must be corrected prior to the time of re-application, including any and all documents required for recertification.

#### **C. Voluntary Removal:**

If at any point a facility chooses to be voluntarily removed as a RPH Provider, written verification from the director must be submitted to the DCS Housing Operations Manager with the effective date of separation from the program. If no infractions are known to DCS or no investigation is pending at the time of the notice of removal by the provider, the decision to relocate current residents under DCS supervision will be at the discretion of the DCS Coordinating Chief for the respective circuit where the site is located.

#### **D. Appeal Process:**

If the grantee wishes to appeal the removal decision, the request must be submitted in writing and received within 15 days of the date the grantee receives the letter containing the agency decision. The written appeal, along with any associated documentation to support the appeal, must be mailed to the following address: **Division Director, Reentry Services, Department of Community Supervision, 2 MLK Jr. Dr. SE, East Tower, Room 866, Atlanta, GA 30334**

After submission of the appeal, the Division Director will make a decision based upon all the information available regarding the case. The grantee will be notified of the decision via certified mail. Decisions are then final and not subject to appeal.

### **26. Contracting With Religious Organizations**

Faith-based and religious organizations may not discriminate against a program beneficiary or prospective program beneficiary on the basis of religion or religious belief. Organizations that are religious or faith-based are eligible on the same basis as any other non-profit organization to participate in the RPH Program. However, these organizations may not engage in inherently religious activities, such as worship, religious instruction or proselytization as a part of programs or services funded under any part of a required program. If an organization conducts such activities, the activities must be offered separately in time or location from other programs or services. **Participation in religious activities must be voluntary for clients.**

Faith-based or religious organizations will retain their independence from Federal, State and local governments, and may carry out their missions, including the definition, practice and expression of religious beliefs, provided that no RPH funds are used to support any inherently religious activities, such as worship, instruction or proselytization. Organizations may use space in their facilities to provide services without removing religious art, icons, scriptures or other religious symbols. Organizations may also retain authority over internal governance, including terms in organization name, selection of board members on a religious basis, and religious references in mission statements and other governing documents.

While all programs, unless they are voluntary, must be provided in a manner that is free from religious influences, it should be noted that the Georgia Constitution allows the State Housing Trust Fund for the Homeless to expend funds "... for programs of purely public charity for the homeless, including programs involving the participation of churches and religious institutions ...".

### **27. Eligible Applicants / Award Factors**

The following legal entities are eligible to apply:

- A. For-profit
- B. Nonprofit
- C. Government
- D. Quasi-Government

According to the State law, "non-profit organization" means any corporation, trust, association, cooperative, or other organization that is operated primarily for scientific, educational, service, charitable, or similar purposes in the public interest; is not organized primarily for-profit; and uses its net proceeds to maintain, improve, or expand its operations. The term "non-profit organization" includes non-profit institutions of higher education and hospitals.

Under State law, DCA must collect and evaluate organizational and financial information from non-profit organizations in order to establish the capacity of the non-profit organization prior to making an award, and to report funding amounts to the State Department of Audits and the Georgia Secretary of State.

Consequently, funding decisions for all agencies shall also be based, in part, upon the following factors:

- A. Organizational development and capacity;
- B. The extent to which the organization operates with qualified and experienced staff;
- C. The extent to which management provides quality oversight through diversification, experience, professionalism and professional management;
- D. The consistency of the organization's identity or its mission to the provision of housing and services to special needs clients;
- E. Sound operating procedures, accounting policy and controls; and,
- F. Organizational and financial policy, stability and capacity.

Initial acceptance of an organization's qualifications to provide housing will be made at the discretion of the Department of Community Supervision and the Department of Community Affairs. Decisions are final and not subject to appeal. If an initial contract is awarded, it must be signed/returned before placements can begin.

**If awarded a RPH contract as an active provider, the organization must be represented, either by the grantee or their designee, at a mandatory provider meeting conducted annually. All grantees are notified in a timely manner of the date and location of the meeting. Failure to be represented at the meeting can result in suspension of placements.**

After initial acceptance, RPH contracts are awarded annually to active providers, normally at the beginning of each state fiscal year, provided annual facility compliance checks are completed successfully and there is no active investigation at the facility. DCS and DCA reserve the right to not offer an annual contract as needed for investigative purposes, guideline infractions, failure to utilize the RPH program during the previous fiscal year, or as deemed necessary by DCS personnel.

## **28. Grantee Waiver of Liability**

- A. Grantee's Indemnification Obligation. The Grantee agrees to indemnify and hold harmless the State, Department of Community Supervision, Department of Corrections, Department of Community Affairs, the Council of Accountability Court Judges, state officers, employees, agents, and volunteers (collectively, "Indemnified Parties") from any and all costs, expenses, losses, claims, damages, liabilities, settlements and judgments, including reasonable value of the time spent by the Attorney General's Office, related to or arising from:
  - a. Any breach of the Guidelines;
  - b. Any negligent, intentional or wrongful act or omission of the Grantee or any employee, agent or subcontractor utilized or employed by the Grantee;
  - c. Any failure of services to comply with applicable specifications, warranties, and certifications under the Guidelines;

- d. The negligence or fault of the Grantee in design, testing, development, manufacture, or otherwise with respect to the Services provided under the Guidelines;
  - e. The Grantee's performance or attempted performance of the Guidelines, including any employee, agent or subcontractor utilized or employed by the Grantee;
  - f. Any failure by the Grantee to comply with the laws, rules, regulations, DCS policies that are applicable to the provision of services;
  - g. Any failure by the Grantee to make all reports, payments and withholdings required by federal and state law with respect to social security, employee income and other taxes, fees or costs required by the Grantee to conduct business in the State of Georgia or the United States;
  - h. Any infringement of any copyright, trademark, patent, trade dress, or other intellectual property right; or
  - i. Any failure by the Grantee to adhere to the confidentiality provisions of the Guidelines.
- B. Duty to Reimburse State Tort Claims Fund. To the extent such damage or loss as covered by this indemnification is covered by the State of Georgia Tort Claims Fund ("the Fund"), the Grantee (and its insurers) agrees to reimburse the Fund. To the full extent permitted by the Constitution and the laws of the State and the terms of the Fund, the Grantee and its insurers waive any right of subrogation against the State, the Indemnified Parties, and the Fund and insurers participating thereunder, to the full extent of this indemnification.

## **29. State Financial Reporting/Audit Requirements for Non-profit Agencies**

On July 1, 1998 Senate Bill 474 became effective as law (OCGA Title 50, Chapter 20) in Georgia. This chapter is entitled Relations with Non-profit Contractors. The law states that "The intent of this chapter is to provide auditing and reporting requirements for non-profit organizations which provide services and facilities to the state, to ensure the financial accountability of nonprofit contractors, and to develop adequate information concerning non-profit contractors. The General Assembly finds that the state has a right and a duty to monitor non-profit organizations which contract with the state to ensure that their activities are in the public interest and to ensure that public funds are used for proper purposes."

According to the State law, "non-profit organization" means any corporation, trust, association, cooperative, or other organization that is operated primarily for scientific, educational, service, charitable, or similar purposes in the public interest; is not organized primarily for-profit; and uses its net proceeds to maintain, improve, or expand its operations. The term non-profit organization includes non-profit institutions of higher education and hospitals. For financial reporting purposes guidelines issued by the American Institute of Certified Public Accountants should be followed in determining non-profit status.

As a result and among other requirements, DCA must obtain minimum organizational and financial information from non-profit organizations in order to establish the viability of the non-profit organization and to report award and funding amounts to the State Department of Audits. In return for funds, and among other requirements, non-profit organizations must make appropriate reports to the state auditor and to each state agency from which it received funds for each fiscal year within 180 days from the close of the non-profit organization's fiscal year. Reporting formats vary based upon the amount of "state funds" received by non-profit organizations during the organization's fiscal year. This law also sets forth responsibilities of the state auditor and covers measures to be taken by state agencies if there are matters of

non-compliance. For further compliance information non-profit applicants are encouraged to first contact their own internal auditors. Additional information may be obtained from the State Office of Audits as follows: Georgia Department of Audits, Non-Profit and Local Government Audits Division, 254 Washington Street, SW, Atlanta, GA 30334-8400. Contacts include Mr. Edward Blaha; phone (404) 651-5399, Email npo@mail.audits.state.ga.us.

### **30. Georgia Open Records Act**

All records created as a result of the submission of an Application to participate in the Reentry Partnership Housing Program are subject to disclosure under the Georgia Open Records Act and the applicant expressly consents to such disclosure. The Applicant agrees to hold harmless the Department of Community Supervision, the Department of Corrections, the Georgia Housing Trust Fund for the Homeless, the Georgia Housing and Finance Authority, the Georgia Department of Community Affairs, and the Council of Accountability Court Judges of Georgia against all losses, costs, damages, expenses, and liability of any nature or kind (including but not limited to attorney's fees, litigation and court costs) directly or indirectly resulting from or arising out of the release of any information pertaining to the Applicant's submission of an Application and implementation of any activities as a result of funding under this program, pursuant to a request under the Georgia Open Records Act.

### **31. Georgia DCA / State HTF Emergency Shelter Grant (ESG) Grantees**

The U. S. Department of Housing and Urban Development (as well as DCA and HTF) definition of "homeless person" does not include "parolees/probationers." If your agency is an existing ESG grantee, you may participate in this program, provided that the beds offered are in addition to the beds included in your ESG application / contract.

### **32. Immigration Forms**

DCA Guidance on OCGA 13-10-91 and 50-36-1 Compliance:

The individual authorized to submit applications and sign contracts on behalf of the applicant must execute two (2) affidavits. The first pertains to his or her legal status and is entitled "HB 2, O.C.G.A. § 50-36-1(e)(2) Affidavit." The second pertains to the organization's use of the E-Verify system and is entitled "Contractor Affidavit under HB 87, O.C.G.A. § 13-10-91(b)(1). A third affidavit is included and is entitled " Subcontractor Affidavit under O.C.G.A. § 13-10-91(b)(3)." This affidavit must be completed by the owner or senior officer of the organization that contracts with the applicant for expenditure of grant funds, if applicable.

#### House Bill (HB) 2, OCGA 50-36-1, Verification of Lawful Presence:

To satisfy compliance measures for HB 2, the person within the applicant's organization who is designated to execute DCA/GHFA contracts must complete and execute a signed and sworn affidavit verifying his or her lawful presence in the United States. The affidavit shall state:

- A. The applicant is a United States citizen or legal permanent resident 18 years of age or older; or
- B. The applicant is a qualified alien or nonimmigrant under the federal Immigration and Nationality Act, Title 8 U.S.C., 18 years of age or older lawfully present in the United States and provide the applicant's alien number issued by the Department of Homeland Security or other federal immigration agency.

House Bill (HB) 87, OCGA 13-10-91, Security and Immigration Compliance:

House Bill (HB) 87 requires DCA and the Georgia Housing and Finance Authority (GHFA) to only contract with entities that are registered with the e-verify program and to obtain an affidavit from the entity certifying participation in the e-verify program. Any subsequent subcontractors (or subcontractors of subcontractors) utilizing DCA or GHFA funds must also participate in the e-verify program and to provide a sworn affidavit with the e-verify I.D. number.

To satisfy compliance measures for HB 87, the person designated to execute DCA contracts must complete and execute a "Contractor Affidavit under O.C.G.A. § 13-10-91(b)(1)." Note that this Affidavit must be executed by the person that will be authorized to execute the DCA grant contract (Program Participation Agreement). It is necessary also that any subcontractors (and subcontractors of subcontractors) utilizing funds under the Agreement provide (to you, and then you to us) the "Subcontractor Affidavit under O.C.G.A. § 13-10-91(b)(3)."

Documents may be downloaded at:

[Department of Community Supervision Housing Programs](#)

**Thank you for expressing your interest to become a DCS Housing Provider. We look forward to working with you in the near future!**