

Washtenaw Human Services Community Collaborative

555 Towner, P.O. Box 915, Ypsilanti, MI 48197-0915
Phone (734) 544-6856
Fax (734) 544-6705

Barrier Busters Emergency Unmet Needs Fund Participation and Services Agreement

Purpose: To provide emergency assistance to Washtenaw County residents to prevent eviction, promote sustainable housing and to resolve other crisis situations.

Barrier Buster will:

- Identify agency resources that may be available to consumers and commit to work with participating agencies to make those resources known to other participating Barrier Buster Agencies.
- Work collaboratively with participating agencies to ensure that emergency services are provided to consumers efficiently and effectively.
- Work with the consumer to access all available resources from participating Barrier Buster Agencies and other non-participating agencies as necessary.
- Commit to attend monthly Barrier Buster Network Action Group meetings.
- Follow the guidelines and requirements as set forth by the Barrier Buster Network Action Group.
- Commit to align with the principles and vision of Washtenaw County's Blueprint to End Homelessness.

Functions:

- Agency Barrier Buster will submit all agency requests via the Encompass online application system.
- Commit to the accuracy of all information submitted on behalf of the agency.
- Commit to obtain a signed release of information from the consumer prior to submitting a request.
- Ensure that each of the requests for emergency funds are appropriate based on the guidelines as set forth by the Barrier Buster Network Action Group.
- Commit to retain records for up to two years to support an audit request by one or more of the funding agencies.
- Commit to review individual requests at the monthly Barrier Buster Network Action Group meeting as necessary.
- Work in collaboration with the action group to ensure that issues that arise between agencies are addressed appropriately, respectfully and in a timely fashion.
- Commit to take responsibility for all requests submitted by their agency and to ensure that consumers are not referred to other agencies without prior consent.

Staffing Requirements:

- The Agency may request that one senior level staff or case manager be assigned to manage their access to the Barrier Buster Emergency Unmet Needs Fund.
- The Agency is a member of the Barrier Buster Network Action Group and agrees to the requirements as per the membership agreement.
- The Barrier Buster Network Action group is intended to work on broader community issues as well as resolution of specific individual emergency situations as such the Agency and the Agency Barrier Buster are expected to participate in both aspects of the Action group.

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I have reviewed the Barrier Busters Program Description and agree to participate as a Barrier Buster

Signed: _____ Date: _____

Print Name: _____

Title: _____

Agency: _____

Address: _____

Phone: _____

Fax: _____

Designee: _____ Date: _____

Unique name: _____ (will serve as the login to encompass)

Title: _____

Agency: _____

Address: _____

Phone: _____

Fax: _____