

HOMELESS SERVICES UNITED

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Homeless Services United's Testimony on the Proposed Rule Change on Low-Barrier Transitional Housing

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My name is Victoria Leahy, and I am the Director of Policy & Planning at Homeless Services United (HSU). HSU is a coalition representing over 55 mission-driven, homeless service providers in New York City. HSU advocates for the expansion of affordable housing and prevention services and for immediate access to safe, decent, emergency and transitional housing, outreach and drop-in services for homeless New Yorkers.

We agree with DHS's main goal of moving individuals experiencing unsheltered homelessness into sites with adequate resources for that client's needs. This prioritizes stability for our clients and leads to better outcomes as individuals are able to take agency over their lives while obtaining much needed resources. While nonprofit providers do note having some criteria or guidelines to better make referrals have been helpful, the new DHS proposed rule creates a rigid framework that limits both providers' input despite their insight and expertise, and client choice.

Formalizing the referral criteria limits a service provider's ability to advocate for their client if they believe that there is a better option for them than the one prescribed by a centralized unit at DHS. This rule chips away at what differentiates Safe Havens from other shelters and takes away the ability of providers to advocate for their clients. Removing this autonomy from the outreach team means that a client's specific needs may not be considered when placing them in some form of low-barrier transitional housing, leading the client to potentially walk away due to a mismatch of services or accommodation. Outreach teams' expertise should be trusted in knowing their clients and where they should be placed as they have the relationship, not DHS. Providers also report that this strict framework slows down their work, yet placement targets keep getting raised. Placement targets must re-examine to reflect this more constrained environment.

Additionally, while we understand the need to reserve beds for JCC team or external referrals, in practice, providers report that sometimes over 5% of their beds at a specific site are on hold. Having to leave so many beds in reserve means that there are available beds that could go to clients but remain empty. Providers also report that many of the beds being reserved are single units – highly preferred beds by clients – rather than shared units.



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This only further weakens and delays providers' ability to move clients into a form of transitional housing. If required to continue to reserve beds for the JCC team or external referrals, we want more information on the total number of beds and types of beds being reserved.

Ultimately, what providers want is discretion and autonomy to work with clients experiencing street homelessness in a collaborative and flexible manner to best address their clients' needs. This moves us further away from that. Having a placement available at the moment a client accepts housing is core to successful outreach.

Thank you for your time and for your commitment to supporting New Yorkers in need of a stable home.