

Nebraska Reentry Housing Standards

I. Purpose and Scope

Pursuant to Neb. Rev. Stat. § 47-1115 – 1116, these standards establish minimum requirements for reentry housing providers in Nebraska. Reentry housing providers offer housing and other programs to individuals exiting incarceration. Providers who meet these minimum standards will be listed on the Nebraska Department of Correctional Services (NDCS) website as Registered Reentry Housing providers. Registration is a prerequisite, but not a guarantee for contracting with NDCS and/or becoming a registered provider with the Administrative Office of the Courts and Probation (AOCB). The housing provider is to maintain appropriate insurance coverage as required by contract and/or Standards of Practice.

The standards are intended to:

- Protect the health, safety, and welfare of residents and the community
- Establish a baseline level of quality and accountability for housing providers
- Support successful reentry through stable housing, structured support, and coordination with supervision agencies

II. Guiding Principles

Reentry housing providers operate as community-based partners in the reentry process. Housing environments should:

- Promote safety, stability, and dignity
- Support behavioral change and self-sufficiency, including the transition to long-term stable housing
- Reinforce accountability while avoiding unnecessary restriction
- Align with evidence-based practices

III. General policy expectations

Providers will maintain policies and procedures relevant to the population they serve and ensure that the environment is managed appropriately. Policies, at a minimum, shall include:

- Personnel management, including, but not limited to:
 - Hiring/terminating staff
 - Drug-free workplace

- Workplace harassment
- Incident reporting
- Training
- Formalized complaint process
- Behavior management

IV. Standards

1. Health, Safety, and Habitability

Performance Standard:

The housing environment is safe, sanitary, and suitable for community living.

Minimum Requirements:

Reentry Housing providers complies with applicable state and local fire, health, building, and zoning regulations and provide proof of compliance

- 1.1 Living areas are clean, in good repair, and free of hazards
- 1.2 Adequate space is provided for sleeping, personal belongings, food preparation, and daily living activities, including:
 - One bed/mattress for each resident
 - Storage space for personal items for each resident
- 1.3 Residents have access to:
 - Safe drinking water
 - Functional bathroom facilities with hot and cold running water
 - Food storage and preparation areas
- 1.4 Fire safety measures are in place, including:
 - Functional smoke detectors and fire extinguishers
 - Clearly identified emergency exits
 - A documented and visibly displayed evacuation plan
- 1.5 Waste is properly collected and disposed of
- 1.6 Reasonable measures are taken to prevent and address pests, mold, and environmental hazards

Verification Methods:

Inspection, documentation of compliance, observation

2. Supervision and Accountability

Performance Standard:

Residents are appropriately supervised, and systems are in place to ensure accountability to program expectations and supervising authorities.

Minimum Requirements:

- 2.1 The provider maintains a system to account for resident presence and movement, including curfews and required reporting
- 2.2 Staff are available to respond to resident needs and emergent situations at all times
- 2.3 Maintain clearly defined procedures for emergency response, which may include on-call staff, accessible emergency contact systems and appropriate security exterior and/or interior cameras
- 2.4 Clear procedures exist for:
 - Reporting absences or rule violations
 - Responding to critical incidents
- 2.5 Residents receive orientation on rules, expectations, and consequences
- 2.6 Communication regarding monitoring compliance occurs with supervising officers as required by the supervising authority

Verification Methods:

Documentation, logs, incident reports, staff training, staff and client interviews

3. Resident Rights and Expectations

Performance Standard:

Residents are treated fairly, with clear expectations for behavior and accountability.

Minimum Requirements:

- 3.1 Written expectations and house rules are provided to all residents to include but not limited to:
 - Behavioral expectations and consequences for violations
 - Curfew requirements
- 3.2 Residents are informed of any fees, if applicable
 - Fees are not permitted if the entire housing cost is provided by the State
- 3.3 Residents receive services and interactions that are respectful, non-discriminatory, and grounded in trauma-informed practices.
- 3.4 A process in place for residents to raise concerns and/or grievances

Verification Methods:

Resident handbook, signed acknowledgments, staff and client interviews

4. Staffing and Operations

Performance Standard:

The provider maintains adequate staffing levels and operational practices to ensure a safe housing environment that supports stability and self-sufficiency.

Minimum Requirements:

- 4.1 Staffing levels are sufficient to:
 - Meet the existing, emerging and evolving needs of clients
 - Provide appropriate supervision
 - Respond to emergencies
- 4.2 Staff are trained in:
 - CPR and First Aid
 - Verbal de-escalation
 - Trauma-informed practices
- 4.3 Staff interact with residents in a manner that is:
 - Professional
 - Solution-focused
 - Culturally responsive

Verification Methods:

Staffing plans, training records, observation, staff training, staff and client interviews

5. Reentry Support and Programming

Performance Standard:

Residents have timely access to services and support that promote self-sufficiency, pro-social and community engagement.

Minimum Requirements:

- 5.1 Providers facilitate access to services that support self-sufficiency and long-term housing planning, which may include:
 - Employment readiness
 - Education or vocational training
 - Assistance in locating housing and employment
 - Behavioral health and substance use services
 - Life skills development

- 5.2 Residents have an individualized plan with identified goals related to reintegration and community stability
- 5.3 Providers coordinate services either directly or through community partnerships
- 5.4 Changes to available services are communicated to the supervising agency

Verification Methods:

Case records, service documentation, communication logs, staff and client interviews

6. Coordination with Supervision Authorities

Performance Standard:

The provider maintains consistent and effective communication with supervising agencies.

Minimum Requirements:

- 6.1 Regular communication occurs with parole or probation officers regarding resident progress and needs
- 6.2 Providers shall report critical incidents immediately upon discovery, and all rule violations and absences within 48 hours, to the supervising agency
- 6.3 Providers collaborate with the supervising agency to support case planning and problem solving

Verification Methods:

Communication records, incident reports, staff and client interviews

7. Documentation and Records

Performance Standard:

Accurate and secure records are maintained to ensure accountability and continuity of care.

Minimum Requirements:

- 7.1 Resident records are maintained in a secure manner that ensure confidentiality and protection from unauthorized access.
- 7.2 Documentation includes, at a minimum:
 - o Orientation acknowledgment (occurs within 7 days of admission)
 - o House rules acknowledgment (occurs within 7 days of admission)
 - o Progress or case notes (completed at least weekly)
 - o Incident reports (completed and submitted to the supervising agency within 2 business days)

- Discharge summary (submitted to the supervising agency 3 business days upon discharge)

7.3 Records are available for review by authorized entities for a minimum of one year after service provision ends

Verification Methods:

File review, audit documentation

8. Quality Assurance and Oversight

Performance Standard:

Provider maintains ongoing compliance with applicable standards and cooperates with monitoring, audits, and corrective action processes.

Minimum Requirements:

- 8.1 Providers participate in initial and routine audits
- 8.2 Participate in annual audits and unannounced visits from supervising agency
- 8.3 Providers address identified deficiencies within established timeframes
- 8.4 Providers cooperate with evaluation processes, including review of:
 - Housing conditions
 - Service delivery
 - Resident outcomes (as applicable)

Verification Methods: Inspection reports, corrective action plans, staff and client interviews

V. Inspections and Compliance

NDCS and/or AOCP will conduct annual audits to assess compliance with established standards using standardized tools and scoring methodologies. Findings will be used to document deficiencies, support corrective action, and determine continued approval status. Providers may be subject to corrective action, suspension, or removal for failure to meet required standards.

VI. Certification

Housing providers must maintain all applicable licenses, certifications and approvals required by federal, state, and local laws, regulations, and minimal standards as outlined. Documentation of such credentials shall be provided to NDCS upon request and maintained in current status throughout the term of the agreement.

Certification under these standards is contingent upon successful completion of required annual inspections. Providers shall cooperate fully with all monitoring activities and promptly address any identified deficiencies through corrective action plans approved by NDCS.

Failure to maintain required certifications, licenses, accreditations, or compliance with established standards may result in corrective action, suspension of referrals, probationary status, termination of approval, or other actions deemed necessary by NDCS to ensure the safety, security, and well-being of program participants and the community.

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