



THE EDWARD DAVIS COMPANY

# MASSACHUSETTS EMERGENCY ASSISTANCE SHELTER SECURITY ASSESSMENT

Security and Safety-Related Security  
Protocol Assessment

Prepared for: Governor Maura Healey  
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2/27/25



Governor Maura Healey  
Massachusetts State House  
24 Beacon St.  
Boston, MA 02133

Dear Governor Healey,

On behalf of the Edward Davis Company (EDC), I commend your administration's leadership in addressing the complex and evolving safety and security challenges of the Emergency Assistance (EA) Shelter system in Massachusetts. Ensuring the safety and security of these shelters is a matter of vital importance, requiring a strategic and thorough approach to safeguard the residents who depend on these facilities, the staff who work diligently to support them, and the communities where these facilities are based.

EDC has conducted an in-depth assessment of the security and safety conditions across a representative sample of the EA Shelter System through a comprehensive review. As a local firm with deep expertise in public safety, risk mitigation, and operational security, we bring a unique combination of law enforcement experience, strategic policy analysis, and operational insight to this effort. Our extensive background in safety and security assessments positions us to identify vulnerabilities, evaluate current protocols, and offer data-driven recommendations that will enhance the system's overall effectiveness.

This report seeks to provide a detailed and objective analysis of the current security landscape within the EA system, outlining key risks, policy considerations, and actionable recommendations to the Commonwealth that, we hope, will contribute to a stronger, more resilient framework.

We appreciate the administration's commitment to finding sustainable solutions, and we are confident that the insights provided in this report will support those efforts.

In the following report, we present our findings through a structured analysis that examines the scope of security concerns, historical context, overall assessments, and detailed recommendations aimed at fortifying the system. By leveraging best practices in security management and crisis response, this report seeks to contribute meaningfully to the ongoing efforts to protect those who rely on EA Shelters.

We look forward to discussing our findings with you and working collaboratively with your team toward solutions that enhance safety, efficiency, and the long-term viability of the shelter system. Thank you for your commitment to addressing these pressing issues, and for your continued leadership.

Sincerely,

Edward F. Davis  
Chief Executive Officer  
The Edward Davis Company

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## EXECUTIVE SUMMARY

### Assessment Scope

In January 2025, The Edward Davis Company (EDC) was engaged by Governor Maura Healey to conduct a comprehensive 30-day assessment of the security and security-related safety protocols within the Massachusetts Emergency Assistance (EA) Shelter System. In response to challenges surrounding a capacity strained shelter system and in light of recent high-profile security incidents at EA shelter sites, the Healey Administration demonstrated its commitment to safeguarding vulnerable shelter residents and the broader community by commissioning EDC to conduct a top-to-bottom review of the EA Shelter System to assess existing security and safety-related security protocols to determine what additional protocols could be implemented to better protect our communities. The focus of EDC's review was:

1. Physical Assessments of a sample of all shelter types to review the physical security and onsite policy and protocols. The EA Shelter System at the start time of this assessment consisted of 55 hotels, 102 congregate sites, approximately 1,600 apartments, 1 “clinical and safety risk” (CSR) site, and 3 Temporary Respite Center sites<sup>1</sup>
2. Review of serious incident reports data and the incident review and appeal process
3. Interviews with members of the EA Shelter Incident Command Team (IC), Executive Office of Housing and Livable Communities (EOHLC) intake, placement and non-compliance teams, shelter providers, onsite security personnel and residents where applicable
4. Gap Analysis of existing security-related policy and protocol

EDC was given 30 days to complete this review and submit this written report detailing the work performed, the observations made and corresponding recommendations. From these recommendations, there are opportunities to strengthen security protocols enforcement and make policy adjustments to ensure the overall safety of the entire shelter community. Throughout this process, EDC has received full cooperation from the Governor's team and the Incident Command team, with access to all relevant policies, statutory and regulatory frameworks, and publicly available historical incident reports spanning from 2022 to 2024. Of note is that during the timeframe of this assessment, state and federal executive orders and legislation have been enacted or are in development that could have significant impact on the EA Shelter System. This report is written with the information that was available at the time of the assessments.

### Background and History of the EA Shelter System in Massachusetts

Established in 1983 under Massachusetts General Laws, Chapter 23B, Section 30, Massachusetts is the only state in the country with a codified Right to Shelter law, ensuring shelter access for

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<sup>1</sup> Appendix A

eligible homeless families and pregnant women.<sup>2</sup> Over the past four decades, the state's Emergency Assistance (EA) shelter system has undergone significant policy reforms and legal challenges due to rising demand, litigation, and evolving government priorities, however it remains the case that due to its Right-to-Shelter and associated case laws, The Commonwealth is still required to provide shelter to thousands of Massachusetts families.

In 2012, in response to increasing pressures on the system, the EOHLC implemented reforms requiring that all EA shelter applicants verify Massachusetts residency before placement in shelters.<sup>3</sup> By 2014, the EA shelter caseload peaked at the time, with a high of 4,600 families, with 1,500 families housed in temporary hotel and motel units. To address this demand, in 2011, Massachusetts introduced the HomeBASE program, which provides financial assistance and case management for families seeking permanent housing as an alternative to the EA Shelter System.<sup>4</sup>

With the *Garcia v. DHCD* 2016 lawsuit, began legal scrutiny of Massachusetts' shelter policies, where plaintiffs in a class action lawsuit argued that EA shelter policies discriminated against families with disabilities, violating the Americans with Disabilities Act (ADA).<sup>5</sup> This litigation led to a February 17, 2023 partial settlement between Greater Boston Legal Services and the Department of Housing and Community Development (DHCD), which simplified the EA application process aligning more closely with the Department of Housing and Urban Developments (HUD) recommendation to maintain a low barrier to entry<sup>6</sup> by allowing immediate shelter placement, even if an application was incomplete.<sup>7</sup>

In 2024, lead plaintiff Rosanna Garcia continued the initial lawsuit over the non-settled issues in, *Garcia v. EOHLC*, challenging the requirement for third-party verification of identity, familial relationships, and Massachusetts residency at the time of application. The Massachusetts Supreme Judicial Court ruled in November 2024, that EA applicants must be granted immediate shelter without upfront proof of eligibility, reinforcing the state's obligation to provide housing based on an applicant's statements and existing information, with verification allowed at a later stage.<sup>8</sup> This decision unwound the ID verification and residency requirements that had been put in place in 2012. *As was emphasized during our interviews with the EOHLC intake and placement teams,*

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<sup>2</sup><https://malegislature.gov/Laws/GeneralLaws/PartI/TitleII/Chapter23b/Section30#:~:text=Section%2030%2Cwoman%20with%20no%20other%20children.>

<sup>3</sup> <https://www.masslegalservices.org/content/11-can-you-get-ea-if-you-are-not-united-states-citizen-or-not-massachusetts-resident?>

<sup>4</sup> <https://www.mass.gov/doc/report-of-the-special-commission-on-emergency-housing-assistance-programs-draft-111224/download>

<sup>5</sup> <https://law.justia.com/cases/massachusetts/supreme-court/2018/sjc-12507>

<sup>6</sup> <https://files.hudexchange.info/resources/documents/Emerging-Practices-to-Enhance-Safety-at-Congregate-Shelters-Part-1-Operational-and-Administrative-Rules.pdf>

<sup>7</sup> <https://www.mass.gov/doc/garcia-v-dhcd-settlement-notification/download>

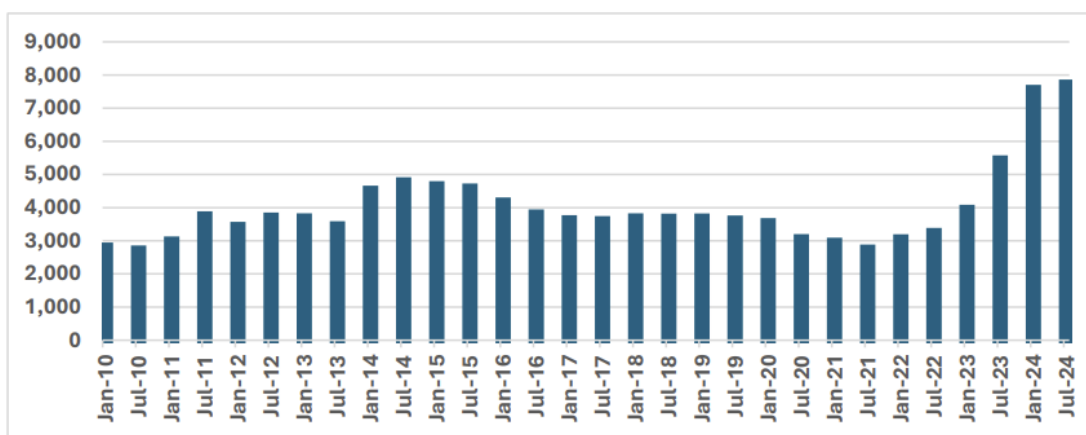
<sup>8</sup> <https://law.justia.com/cases/massachusetts/supreme-court/2024>

*this ruling had immediate consequences for shelter eligibility and led to the possibility of presumptive placements or placements for up to 30 days without verification.*

### *Recent System Strains and Policy Responses*

Since 2014, the EA Shelter System has served an annual monthly average of approximately 4,000 families with an average length of stay exceeding one year. However, beginning in 2022 these numbers began steadily increasing eventually reaching max capacity of 7,500 families. The number of families in the EA shelter system consistently stayed at approximately 7,500 through the summer of 2024.<sup>9</sup>

### **Historical EA Shelter Caseload 2010 – 2024**



The increase in population served has placed numerous strains on the EA Shelter System, including those related to overall security as evidenced by a 788% increase of serious incident reports filed in 2022 to 2024.<sup>10</sup>

The EA Shelter System has had to adapt to the growing and evolving needs of the shelter population amid a constrained housing market. The number of families eligible for and requesting emergency assistance shelter in Massachusetts began to grow in 2022 due to federal policies on immigration and work authorization. This was compounded by a shortage of affordable housing related to the reduced production of homes over the last decade in Massachusetts, and the end to the COVID-era food and housing programs. Between July 1, 2023, and July 1, 2024, Massachusetts experienced its largest population increase in 60 years—69,603 new residents—primarily driven by net immigration, further straining the shelter system. By August 2023, Governor Maura Healey declared a state of emergency, as the EA Shelter System—designed for

<sup>9</sup>

<https://www.mass.gov/doc/report-of-the-special-commission-on-emergency-housing-assistance-programs-draft-111224/download>

<sup>10</sup> Appendix B



4,100 families—was operating well above full capacity, serving 7,500 families.<sup>11</sup> To respond to this state of emergency, in the fall of 2023, emergency overflow sites were established with locations including 10 Park Plaza and the Cass Center, funded through a \$50m budgetary grant from the Legislature.<sup>12</sup> While at first these overflow sites had limited restrictions as far as length of stay was concerned, in the spring 2024 a re-certification process to stay more than 20 days in the overflow sites was established. In August of 2024, the administration established Temporary Respite Centers (TRCs) in Chelsea, Lexington, Cambridge, and Norfolk to accommodate families not prioritized for EA placement. Initially, TRC stays were limited to 5 days, later extended to 30 days, with exceptions for late-term pregnancies and individuals with developmental disabilities.<sup>13</sup>

In April 2024, Massachusetts enacted a nine-month limit on EA shelter stays, with the possibility of two 90-day extensions. In November 2024, Governor Healey proposed further reducing the stay limit to six months.<sup>14</sup>

### *Proposed Reforms to the Right to Shelter Law (2025)*

In 2025, Governor Healey proposed significant amendments to Massachusetts' Right to Shelter Law, aiming to tighten eligibility criteria and redefine the intake process in response to recent changes made due to the 2024 *Garcia v. EOHLC* ruling. The proposed changes include:

- Mandatory disclosure of criminal convictions in Massachusetts or other states
- Statutory requirements for residency and intent to remain in Massachusetts
- Elimination of presumptive eligibility for shelter placement
- Revisions to eviction criteria within the EA system
- Phasing out hotel shelters by end of 2025
- Requirement that all family members have lawful immigration status, with limited exceptions<sup>15</sup>

These proposed reforms would significantly alter Massachusetts' emergency shelter policies, reflecting an evolving approach to balancing demand, system sustainability, and legal mandates.

## **EDC Assessment Methodology**

EDC employed a structured, multi-phased methodology to conduct a top-to-bottom security and security related safety protocol review of the EA Shelter System.

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<sup>11</sup> Emergency Housing Assistance | Mass.gov

<sup>12</sup> <https://www.wgbh.org/news/politics/2023-11-30/beacon-hill-agreement-allocates-50m-to-launch-overflow-shelter>

<sup>13</sup> <https://www.mass.gov/news/healey-driscoll-administration-announces-changes-to-emergency-assistance-prioritization-safety-net-sites?>

<sup>14</sup> <https://www.mass.gov/info-details/bridge-shelter-track-emergency-assistance-ea-family-shelter-length-of-stay-policy>

<sup>15</sup> <https://www.mass.gov/news/governor-healey-proposes-significant-changes-to-right-to-shelter-law>

1. **Site Assessments:** Given the 30-day review period, a representative sample of shelter facilities was selected to consider based on geographic distribution, provider diversity, and population size. The review sample included six (6) hotels, eleven (11) congregate sites, ten (10) apartment buildings, one (1) Clinical and Safety Risk (CSR) site, and one (1) Temporary Respite Center (TRC).<sup>16</sup> Three teams of senior security specialists conducted in-person assessments. To ensure consistent and systematic data collection, the EDC team created a site assessment checklist based on HUD’s *Emerging Practices to Enhance Congregate Shelters* guidelines.<sup>17</sup> The checklist was expanded to include evaluations of security plans, emergency coordination, infrastructure, and staff training.<sup>18</sup>
2. **Incident and Policy Review:** EDC received publicly available provider-submitted incident reports from 2022 to 2024, each compiled into a single PDF per year. Due to file size and format limitations, documents were not categorized into searchable text upon delivery, requiring a manual review of the reports. As such, EDC’s investigative team analyzed these batches to identify large-scale trends and security-related themes.
3. **Stakeholder Interviews:** Semi-structured interviews were conducted with key stakeholders, including EA Shelter Incident Command Team members, EOHLC intake, placement teams and non-compliance review shelter providers, representatives from the Office of Refugees and Immigrants, security personnel, and residents. A multilingual specialist facilitated engagement with non-English-speaking residents to ensure inclusive data collection.
4. **Gap Analysis:** Security-related policies, including intake procedures, shelter regulations, program plans, and provider contracts, were systematically reviewed against national and state best practices to identify deficiencies and areas for improvement.

This evidence-based assessment provided a comprehensive evaluation of security measures within the EA Shelter System, forming the basis for actionable recommendations.

## Report Highlights

EDC’s comprehensive investigation into shelter security, based on a review of policies, operational assessments, and EA system personnel interviews, has led to key insights and findings. Our analysis evaluated the effectiveness of existing security measures, identified vulnerabilities, and assessed compliance with safety and security protocols. The findings highlight critical trends, challenges, and opportunities for improvement in physical security, staff training, emergency preparedness, and resident safety. These summarized findings provide an initial overview for the Commonwealth and will be expanded upon in more detail throughout the report.

- **Personnel:** We observed a high level of dedication and commitment from staff, providers, and key EA shelter personnel across all aspects of the EA Shelter System. Their efforts in maintaining shelter operations, ensuring resident safety, and navigating complex

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<sup>16</sup> Appendix C

<sup>17</sup> <https://www.hudexchange.info/news/emerging-practices-to-enhance-safety-at-congregate-shelter/>

<sup>18</sup> Appendix D



regulatory and security challenges reflect a deep commitment to serving vulnerable populations under often difficult conditions.

- **Inconsistent Security Policies and Enforcement:** Security and safety policies vary across shelter and housing sites due to a combination of state regulations and organization-specific protocols. This inconsistency results in disparities in emergency preparedness, security measures, and law enforcement coordination.
- **CORI Check Policy:** On January 9<sup>th</sup>, 2025, the Governor ordered CORI checks on all EA residents and applicants for placement. This policy went into practice for all new incoming applicants the week of January 13<sup>th</sup>. In order to complete the now required commissioner level CORI check (which requires applicants have valid identification verified), the EOHLC released guidance on the CORI check process, as well as how to address applicants with serious crime-related CORI results on January 27<sup>th</sup>.<sup>19</sup> However continued training and communication on how this recent policy will work in practice is still needed with the EOHLC intake and placement team to ensure the policy is implemented as it is intended. Additionally, despite the *Garcia* decision ensuring that lack of identification does not affect shelter eligibility, a formal policy from EOHLC is needed to clarify how unverified identification should be considered in placement decisions and broader risk assessment.
- **Lack of Access Control Measures:** Many shelter sites lack uniform visitor protocols, sign-in procedures, or security protocols for visitor access. By regulating who can enter the shelter and under what conditions, access control measures reduce the risk of theft, violence, and other security vulnerabilities at each site.
- **Need for Improved Communication and Information Sharing:** Greater transparency and coordination are required between EOHLC divisions and onsite providers to ensure that critical information regarding resident background and security incidents are effectively shared, rather than remaining siloed within individual divisions or organizations.
- **Inconsistent Private Security Deployment:** Security presence varies significantly across shelter sites. While approximately half of hotel sites have private security, scattered sites have little to no security presence. These inconsistencies raise concerns about the effectiveness and standardization of security measures and uniform security training across providers.

## Summary of Recommendations

EDC's expertise lies in decades of local and national law enforcement and security experience, informed by state regulatory policy and broader legal frameworks. We approach our recommendations from a perspective strictly focused on enhancing the overall security of the EA Shelter System. The following is a summary of the key actions we propose to improve safety, consistency, and operational effectiveness. For a full list of recommendations please see the Recommendations section of the report, starting on page 49.

1. **Improve Shelter Staff Training and Support:** Provide mandatory training on handling high-risk situations and ensure completion of training is tied to employment eligibility, including mental health crises, domestic violence, weapons detection, and contraband

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<sup>19</sup> <https://www.mass.gov/doc/eohlc-ea-cori-policy/download>

management. Expand access to human trafficking awareness courses and equip providers to address the evolving challenges presented by recent immigrant populations.

2. **Enhance Intake and Placement Procedures:** Strengthen uniform verification processes and protocols to prevent ineligible individuals from accessing shelters. Implement robust tracking for presumptive placements, comprehensive identification verification training for staff, and clear policies on applying CORI and Sex Offender Registry (SORI) results to placement decisions while prioritizing resident and staff safety. Establish screening questions and non-invasive belonging search for weapons at intake.
3. **Strengthen Onsite Shelter Security Measures:** Align security procedures and access control with facilities like the Pine Street Inn, where security screenings are a condition of entry.<sup>20</sup> Open and maintain frequent and transparent communication lines with local law enforcement. Improve coordination between EOHLC and shelter providers to share critical safety information. Establish a standardized resident identification system, such as ID cards, to enhance security and prevent trespassing.
4. **Review and Enhance EOHLC Policies:** Reevaluate uniform shelter rules, particularly room search policies, to improve enforcement effectiveness. Expand access to CORI and SORI information for onsite provider leadership to enhance risk management. Standardize compliance procedures to ensure consistency in enforcement across shelters.
5. **Improve Data Collection and Tracking:** The EOHLC team collects various pieces of data throughout a resident's time in the shelter system. In order to enhance overall visibility from data collected, including but not limited to intake information, incident reports, placement details and non-compliance issues, should be captured in a standardized database to allow for timely flagging, easy access and long-term trend tracking and analysis.
6. **Establish Consistent Shelter Security Standards:** Implement uniform security protocols, including a standardized security plan template, structured emergency evacuation procedures, and reliable communication channels for residents. Ensure all shelters—especially hotels housing both residents and guests—maintain a 24/7 provider presence for oversight and accountability.

These recommendations are designed to enhance security, streamline coordination, and improve the overall safety and effectiveness of the EA Shelter System for both residents and staff.

The key takeaways outlined above provide a high-level overview of our findings, highlighting the most critical insights and implications. While these points summarize our core observations and recommendations, a deeper examination of the supporting data, methodology, corresponding policies and underlying factors is essential to fully understand the full scope of our assessment.

In the following sections, we will explore the assessment, observations and recommendations in greater detail.

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<sup>20</sup> <https://www.cominghomedirectory.org/coming-home-post/pine-street-inn/>

## COMPREHENSIVE SECURITY AND SAFETY ASSESSMENT

### Assessment Process and Methodology

EDC conducted a comprehensive security assessment of the EA Shelter System to evaluate security and safety-related security protocols. The assessment was structured into four key phases.

First, EDC performed physical site assessments of a purposeful sample of shelter facilities. At the time of the assessment, the EA Shelter System was comprised of 55 hotels, 102 congregate sites, approximately 1,600 apartments, one Clinical and Safety Risk (CSR) site, and three Temporary Respite Centers (TRCs). A representative sample was selected, and the number was agreed to by the State, consisting of six hotels, 11 congregate sites, 10 apartment buildings, one CSR site, and one TRC site. Site selection was based on a thorough review of the state-provided shelter list, ensuring diversity in provider representation, geographic distribution, and population size to create as representative a sample as possible. The Governor’s team remained uninformed of and uninvolved in site selection to maintain the integrity of the process.

To standardize evaluations, EDC developed a uniform assessment checklist informed in part by the U.S. Department of Housing and Urban Development’s (HUD) *Emerging Practices to Enhance Safety at Congregate Shelters*.<sup>21</sup> The HUD *Emerging Practices* material, “highlights procedural enhancements, practice improvements, and structural recommendations that work to enhance safety for organizations providing shelter. The guide combines practices from shelters across the country that have successfully supported safer operational environments.”<sup>22</sup> Using this material EDC’s checklist examined key areas such as provider security plans, resident safety protocols, emergency coordination measures, physical security infrastructure, and staff training. Site assessments were conducted through in-person walkthroughs led by senior security specialists and documented by dedicated note-takers.

Second, EDC received all publicly available provider-submitted incident reports from 2022 to 2024, with each year’s reports compiled into a single PDF file. Due to the reports’ delivery mechanism, there was not a structured categorization system by incident type or shelter classification in place. The EDC analytics team initially attempted to employ Optical Character Recognition (OCR) technology to convert the reports into a searchable format. However, given the file size and format constraints, OCR processing was not feasible for the 2023 and 2024 datasets. Consequently, EDC’s investigative team conducted a manual review of the annual report batches to identify overarching trends and security-related themes. This approach ensured a systematic assessment of large-scale patterns despite the technical limitations in data extraction.

Third, interviews were conducted with key stakeholders, including members of the EA Shelter Incident Command Team (IC), members of the EOHLC intake, placement and non-compliance teams, representatives from the Office of Refugee and Immigration, shelter providers, on-site security personnel, and residents where applicable. To ensure effective communication, a

<sup>21</sup> <https://www.hudexchange.info/news/emerging-practices-to-enhance-safety-at-congregate-shelter/>

<sup>22</sup> <https://www.hudexchange.info/news/emerging-practices-to-enhance-safety-at-congregate-shelter/>

multilingual specialist accompanied the team to selected sites, facilitating engagement with non-English-speaking residents.

Finally, EDC performed a gap analysis of existing security-related policies and protocols. The State provided EA Shelter intake forms, placement guidelines, EA Uniform Shelter Rules, TRC and CSR rules and regulations, program plans, and provider contracts. These documents were reviewed and compared against national and statewide best practices, including HUD's *Emerging Practices to Enhance Safety at Congregate Shelters*, to identify gaps and areas for improvement.

This comprehensive, multi-phase approach ensured a thorough evaluation of the security landscape within the EA Shelter System, providing a robust foundation for informed recommendations and enhancements.

## Summary of Assessments by Shelter Type

In this section, each shelter type is evaluated based on a security matrix. The matrix was formed using eleven (11) of the previously detailed survey checklist questions that EDC finds most pertinent to the security function for each site. For each site type (Hotel, Congregate, Scattered, TRC, or CSR), the finding regarding the below categories will be aggregated and divided by the total number of sites of that type that were assessed by our team.

- **Green** indicated boxes = 67-100% of sites in that shelter type visited could answer yes to the survey question
- **Yellow** indicated boxes = 34-66% of sites in that shelter type visited could answer yes to the survey question
- **Red** indicated boxes = 0-33% of sites in that shelter type visited could answer yes to the survey question

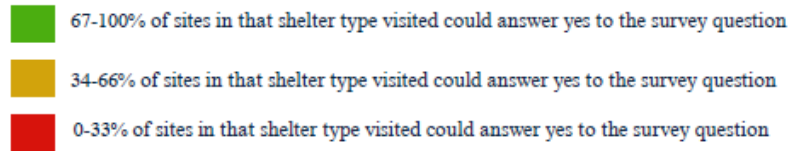
*.EXAMPLE: If EDC assessed 9 "Hotel" sites and 5 of the 9 or 56% of those sites visited were found to have a local, written security plan, then the "Finding" for that category would be **yellow**.*

### Hotels Security and Safety Summary:

EDC conducted an assessment of the hotel shelters in alignment with the methodology described. EDC selected six (6) sites with priority of assembling a sample representing different areas of Massachusetts. Matrix 1: (Hotel Shelter Site Assessments) describes security infrastructure in place at different hotel sites, but there was notable variability. Site specific security plans were in place at 4 out of the 6 sites visited. All sites had on-call or online translation services available. Although processes vary, each site visited has a reporting process in place as well as regular weekly room inspections. Half of the sites visited utilize private security. Security signage was observed at all sites, but the extent of the signage varied. ID badges were not utilized at any of the hotel sites visited. Visitor policies varied by sites, some not allowing visitors at all while some allowing visitors in the lobby. CCTV cameras were installed at all sites but coverage varied and all but one site had door alarms. For more details regarding our onsite assessment of the hotel shelters please see below.

## Hotel Shelter Site Assessments

### Hotel Sites Answered YES



#### Question Topics

Q1  
Site has a local, written security plan.

Q2  
MA Uniform Shelter Program Rules are posted on site or distributed to all residents.

Q3  
Translation services are available on site.

Q4  
Reporting procedures are available at the site.

Q5  
Room inspections are conducted regularly at the site.

Q6  
Private security provider is employed at the site.

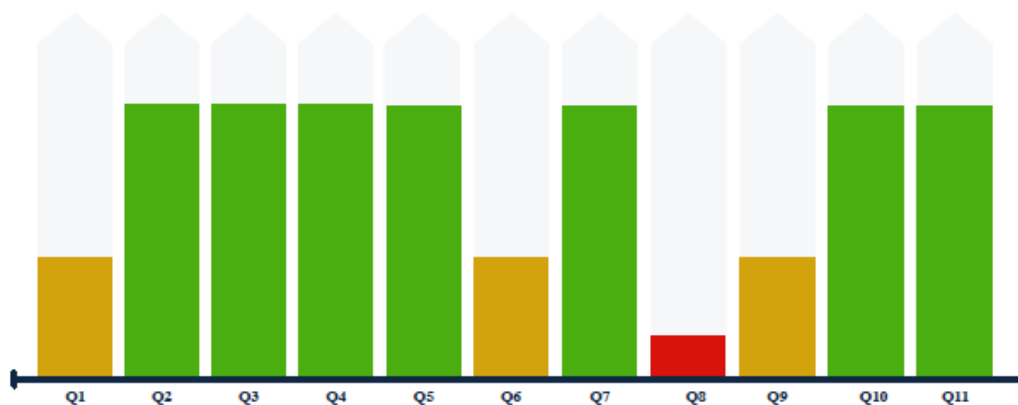
Q7  
Security signage is in place on site.

Q8  
Resident identification badges are in use on site.

Q9  
Visitor policy is secure and clearly in place.

Q10  
CCTV is in place to secure the site.

Q11  
Door alarms are in use on site.



MATRIX 1: HOTEL ASSESSMENTS





FIGURE 1 – BOSTON AREA HOTEL SHELTER LOCATION

### *Overview of Onsite Observations:*

#### **Local Security Plan/Massachusetts Uniform Shelter Program Rules (MUSPR) Distribution:**

Comprehensive, site-specific security plans were in place in four (4) of the (6) sites assessed. These plans outlined protocols specific to each hotel. The protocols included safety procedures, emergency response, and access control measures. All six sites assessed rely on the rules and regulations written in the MUSPR. When residents arrive at the Hotels, they are either provided with the MUSPR or the Rules are posted and visible on site. These rules are also provided to applicants during the intake process. Most hotels choose to provide the MUSPR to the residents, as only one site visibly posts the Rules on site.

**Translation Services:** To accommodate residents of different linguistic backgrounds, on-call translation services or online services via “TransPerfect” are available at all the sites assessed. These services ensure clear communication of security protocols and emergency procedures. Additionally, all sites had a majority of staff who were proficiently bilingual or multilingual to communicate with shelter residents.



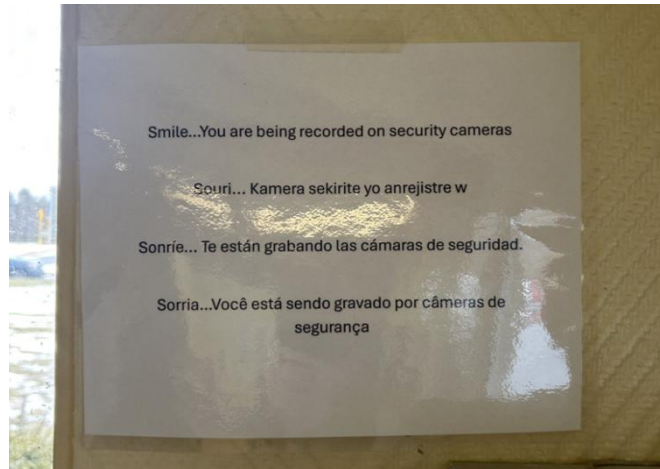


FIGURE 2 - MULTILINGUAL SIGNAGE (CONCORD)

**Reporting Procedures:** There is a variation in the reporting processes for staff and residents reporting safety concerns across different locations. While some sites have established written protocols and provide staff training on how to handle specific concerns, others rely only on verbal guidelines regarding the appropriate personnel to report issues to. All sites seem to follow an “up the ladder” approach, where concerns are escalated based on their frequency or severity. This process typically starts with on-site staff notification, then moves to the shelter provider, and may ultimately reach the State of Massachusetts shelter oversight employees or the police, depending on the nature of the concern. Additionally, all sites acknowledge that case managers are a valid point of contact for reporting safety or security concerns, but residents are free to speak with any member of the staff as the need arises. No anonymous reporting system has been identified at any of the sites assessed.

**Room Inspections:** Regular, weekly room inspections are carried out by trained staff to maintain safety and compliance with site regulations. Since the inspections are conducted weekly, residents have notice of the inspection. Some sites go as far as identifying the exact hours during which the inspection will be conducted each week.

**Private Security:** Private security personnel are utilized at half of the sites. Generally, private security onsite is responsible for monitoring entry points, patrolling premises, and responding to security incidents.

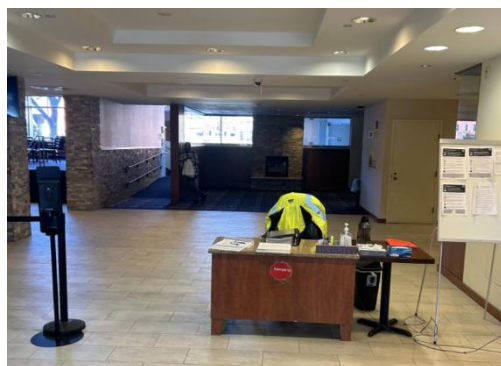


FIGURE 3 - PRIVATE SECURITY STATION (LOWELL)

**Security Signage:** Security signage is observable throughout all of the sites, however, the extent of signage varied. The different security signage observed included general informational signs, security information signs, evacuation signs, trespassing signs, “do not prop” signs, and no weapons/contraband signs.



FIGURE 4 - SIGNAGE (BURLINGTON)

**ID Badges:** Residents were not required to display any sort of badging either in the building or while entering the building in any of the hotel shelter sites.

**Visitors:** At three of the sites assessed, residents are not allowed to have visitors, or those visitors are limited to the lobby area. They are restricted from entering other parts of the shelter and must remain in clear view of hotel staff. At one site, hotel staff scan the physical ID of the visitors to record their entry. One site is also an operating hotel and limits the times of day that visitors are allowed in the building without being admitted by the front desk, but once in the building, the visitor has full site access. At one site, staff stated visitors are allowed in the building, but they could be watched on CCTV to make sure they did not go into restricted areas.

**CCTV:** CCTV cameras are installed to monitor both internal and external areas at all of the sites assessed, but the extent of coverage and other factors varied. For instance, some sites do have remote access to the cameras, while some sites do not have a sufficient number of cameras to effectively monitor the entire shelter. At some locations, cameras do not work in low light, and some sites do not have sufficient monitor screens or capabilities. Additionally, none of the sites had cameras that were coordinated via an integrated security system, none immediately pulled up footage of areas where alarms were set off, and no sites gave immediate, remote access to first responders.



FIGURE 5 - EXTERNAL CAMERA (LOWELL)



FIGURE 6 - CAMERA MONITOR (WORCESTER)

**Door Alarms:** While all sites except for one had door alarms in some capacity, results varied in terms of whether the sites had door-held open alarms, secure door alarms, local/auditory alarms, or all of the above.



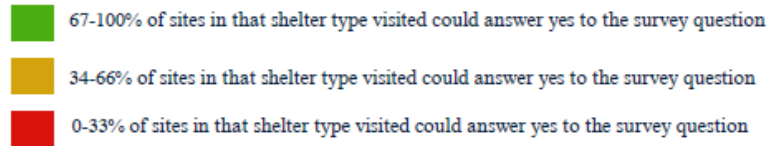
FIGURE 5 - DOOR ALARM (WEST SPRINGFIELD)

## Congregate Shelter Security and Safety Summary

EDC conducted an assessment of the congregate shelters in alignment with the methodology described. EDC selected eleven (11) sites with priority of assembling a sample representing different areas of Massachusetts. Matrix 2: (Congregate Shelter Site Assessments) describes security infrastructure in place at the different congregate sites, but there was notable variability. Several of the locations did have a site-specific security plan although some lacked formalized written plans. Translation services are available at all sites to assist non-English speaking residents. Most congregate shelters visited had reporting mechanisms in place. Scheduled consistent room inspections were in place at all sites visited. Utilization of private security varied at the congregate sites visited. Signage and ID badge utilization presence varied by congregate shelter. Visitors sign-in policies were required at some shelters while some allowed visitors into common areas. CCTV was installed at many congregate shelters, but the effectiveness varies. Door alarms were not in use at any of the shelter sites. For more details regarding our onsite assessment of the congregate shelters please see below.

## Congregate Shelter Site Assessments

### Congregate Sites Answered YES



#### Question Topics

Q1  
Site has a local, written security plan.

Q2  
MA Uniform Shelter Program Rules are posted on site or distributed to all residents.

Q3  
Translation services are available on site.

Q4  
Reporting procedures are available at the site.

Q5  
Room inspections are conducted regularly at the site.

Q6  
Private security provider is employed at the site.

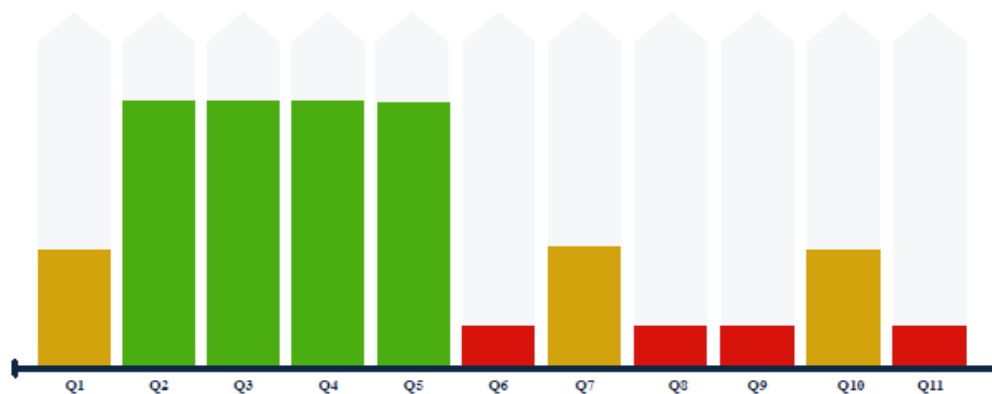
Q7  
Security signage is in place on site.

Q8  
Resident identification badges are in use on site.

Q9  
Visitor policy is secure and clearly in place.

Q10  
CCTV is in place to secure the site.

Q11  
Door alarms are in use on site.



MATRIX 2: CONGREGATE ASSESSMENTS





FIGURE 7: MAIN ENTRANCE  
(WESTBOROUGH)

### *Overview of Onsite Observations*

**Local Security Plan/MUSPR Distribution:** A formal, localized security plan is in place at several locations, outlining emergency protocols, staff responsibilities, and access control measures. However, some shelters lacked a written plan, relying on informal staff responses to security incidents. Facilities that maintained structured security policies demonstrated clearer staff responsibilities, enhanced coordination with emergency services, and improved incident management. In contrast, sites without formalized security plans experienced inconsistencies in emergency response and lacked a standardized approach to handling security threats.

**Translation Services:** Translation services are available at all sites to assist non-English-speaking residents in reporting safety concerns. However, no standardized method for emergency communication has been identified across locations.



FIGURE 8: COMMUNITY BOARD WITH COMMUNITY EVENTS, GUIDELINES, RESOURCES ETC. IN MULTIPLE LANGUAGES.

**Reporting Procedures:** Resident reporting mechanisms were in place at most shelters, allowing individuals to express security concerns through structured grievance processes, direct case manager meetings, or reporting to frontline staff. While some shelters provided an anonymous reporting option, others required direct reporting. Facilities with clearly defined reporting channels and routine resident check-ins exhibited a proactive approach to addressing safety issues, fostering trust and engagement within the shelter environment.



FIGURE 9: ANNONYMOUS REPORTING FOR RESIDENTS TO SUBMIT ANY GRIEVANCES (WORCESTER)



**Room Inspections:** Consistent and scheduled room inspections were in place at all sites.

**Private Security:** The presence of security personnel varied across shelters. Some locations employed private security staff, particularly for overnight shifts, ensuring continuous monitoring of entry points, patrolling the premises, and responding to security incidents. In shelters where security was integrated into general staff responsibilities, employees often balanced safety duties with programmatic functions, potentially reducing their ability to respond effectively to threats. In these cases, law enforcement is relied upon for intervention, with some shelters maintaining direct relationships with local police departments, while others had limited engagement with external security agencies.

**Signage:** Some shelters had well-documented evacuation plans with clear signage and multilingual instructions, ensuring that residents understood safety procedures in the event of an emergency.



FIGURE 10: NO TRESPASSING SIGNAGE  
(FALL RIVER)



FIGURE 11: SURVEILLANCE IN USE  
SIGNAGE (FALL RIVER)



FIGURE 12: SURVEILLANCE SIGNAGE  
(BOURNE)

**ID Badges:** Identification procedures also varied between shelters. While staff at most facilities were required to wear ID badges for easy identification, residents were not issued any form of identification, making it difficult to track authorized individuals.

**Visitors:** Some shelters implemented visitor sign-in policies, requiring identification from guests, while others allowed visitors to enter common areas with minimal oversight. The absence of consistent access control procedures increased the potential for security breaches and unauthorized entry.

**CCTV:** CCTV surveillance systems were installed at many shelters, but their effectiveness varied significantly. Some sites maintained extensive camera coverage of both interior and exterior areas, with clear monitoring policies and integration with security protocols. Other shelters had limited surveillance, particularly in outdoor spaces and blind spots, reducing the ability to track unauthorized access or review incidents. Certain shelters lacked integrated security systems, meaning CCTV footage is not actively monitored, coordinated with alarm systems, or retained for long-term review. At locations with minimal camera coverage, security personnel or staff relied on direct observation and reactive responses rather than leveraging technology for proactive threat detection.



FIGURE 13: FRONT DOORBELL WITH CAMERA (WESTBOROUGH)



FIGURE 14: OVERT CAMERA INSIDE (HOLYOKE)

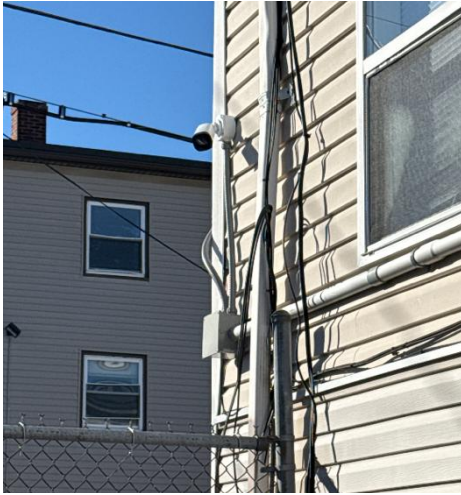


FIGURE 15: EXTERIOR CAMERA (FALL RIVER)

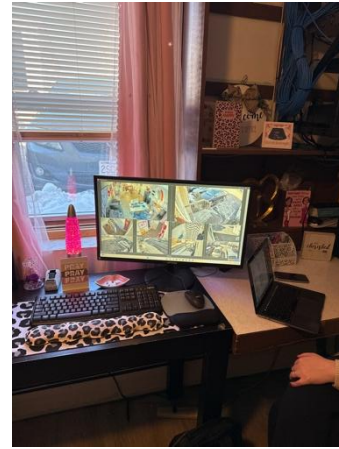


FIGURE 16: CCTV MONITOR (FALL RIVER)

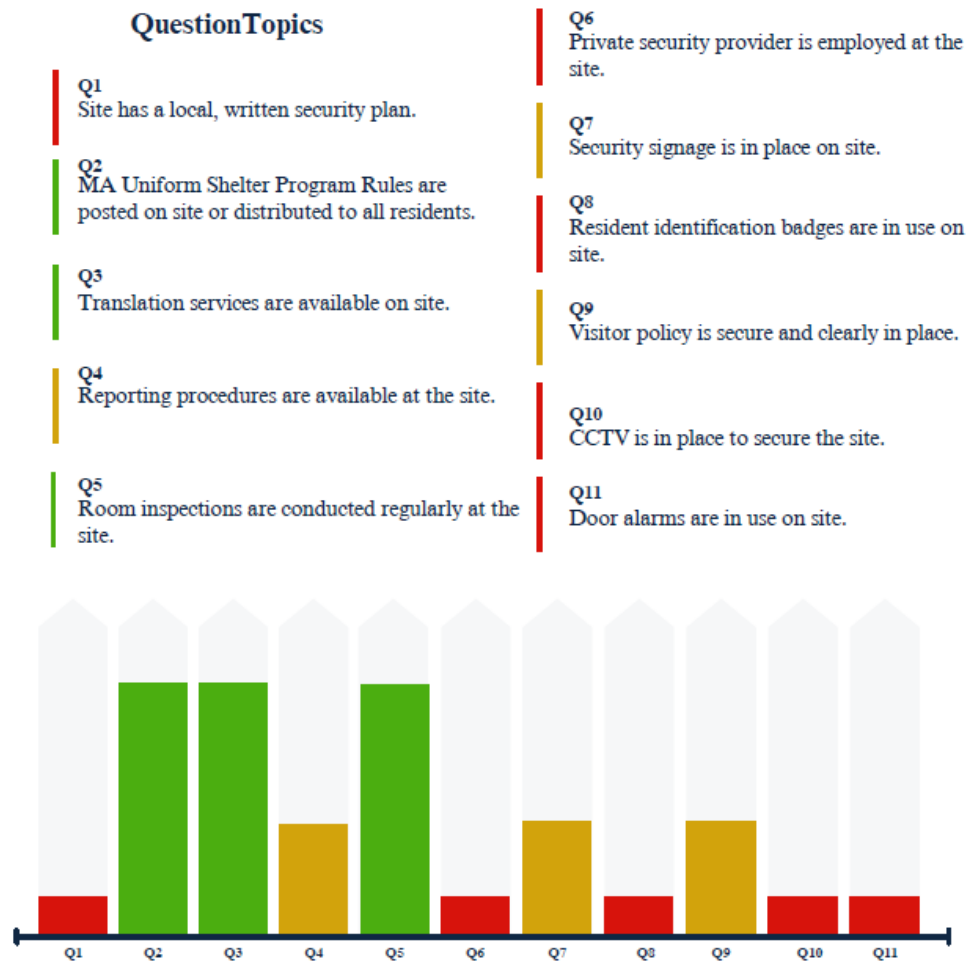
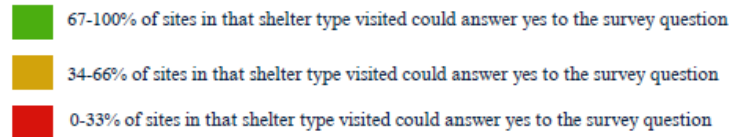
**Door Alarms:** Door alarms were not in use at any of the sites.

### *Scattered Sites Security and Safety Summary*

EDC conducted an assessment of the scattered shelters in alignment with the methodology described. EDC selected ten (10) sites with priority of assembling a sample representing different areas of Massachusetts. Matrix 3: (Scattered Shelter Site Assessments) describes security infrastructure in place at the different scattered sites, but there was notable variability. Security at scattered sites is largely unstructured and inconsistent, with no dedicated security plans for individual locations. Translation services are available at most sites. Incident reporting mechanisms do exist, but they are often informal. Of the scattered sites we visited there is not a standard practice for monitoring prohibited items through searches.ost scattered sites lacked private security personnel. Signage at scattered sites was limited and ID badges were not utilized in any of the scattered sies visited. None of the scattered sites visited had a formal visitor policy in place. CCTV and alarms were present in the common areas. For more details regarding our onsite assessment of the scattered shelters please see below.

## Scattered Shelter Sites Assessments

### Scattered Sites Answered YES



MATRIX 3: SCATTERED SITE ASSESSMENTS



FIGURE 17: ENTRANCE (NEW BEDFORD)

### *Overview of Onsite Observations*

**Local Security Plan/MUSPR Distribution:** Security at scattered sites is largely unstructured and inconsistent, with no dedicated security plans for individual locations. In many cases, security policies are housed at a central administrative office, rather than at a specific scattered site location. Some providers reported having written security plans, but these documents were not actively carried out at the site level. Staff confirmed that residents are provided with general safety guidelines upon intake, but ongoing engagement in safety discussions or enforcement is limited.

**Translation Services:** Translation services are available at most sites to assist non-English-speaking residents in reporting safety concerns. However, no standardized method for emergency communication was identified across locations.

**Reporting Procedures:** Incident reporting mechanisms exist but are often informal, “word of mouth”. Residents typically report concerns to case managers during scheduled check-ins, though no anonymous reporting system has been identified at any of the sites assessed.

**Room Inspections:** While some sites conduct regular unit inspections, there is no standardized practice for monitoring security risks such as prohibited items, unauthorized visitors, or signs of criminal activity. The lack of on-site staff means that security issues often go undetected until reported by residents, which can lead to delays in intervention and response.



**Private Security:** A lack of professional security personnel is a recurring issue across most sites. Instead of dedicated security staff, general shelter employees, case managers, or administrative personnel are tasked with managing safety concerns. However, these individuals are not trained security professionals, and their roles primarily focus on social services rather than physical security. Some staff members receive annual training on de-escalation techniques, mental health crisis intervention, and emergency response, but there is no standardized security training specific to scattered sites.

**Security Signage:** Some sites had security signage regarding “No Trespassing” or “CCTV”. Other sites had no signage, and EDC was not informed that they were in the process of being installed.



FIGURE 18: SURVEILLANCE SIGNAGE  
(CHICOPEE)

**ID Badges:** Resident ID Badges were not in place at any site.

**Visitors:** There are no formal visitor screening processes, and it is up to the residents to ensure they follow the visitor policies at their locations. This increases the risk of unauthorized access, particularly in multi-unit buildings where external individuals can enter without verification.

**CCTV/Alarms:** The absence of CCTV cameras and alarm systems is another common vulnerability. Many sites do not have surveillance in place, and where cameras are present, they are often minimal, outdated, or non-functional. In some cases, staff reported that cameras are installed only on the exterior of buildings, with no interior monitoring to oversee hallways, stairwells, or common areas. Blind spots and unmonitored entry points were observed, increasing the risk of unauthorized access, security breaches, or criminal activity without the ability to review footage after an incident.





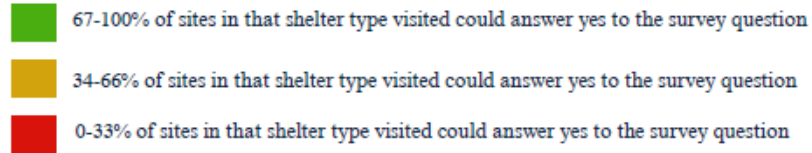
FIGURE 19: INTERNAL OVERT CAMERA  
(CHICOPEE)

### ***Temporary Respite Center (“TRC”) Security and Safety Summary:***

EDC conducted an assessment of a temporary respite center shelter in alignment with the methodology described. EDC selected one (1) site. Matrix 4: (Temporary Respite Center (TRC) Assessment) describes security infrastructure in place at the TRC. At the site visited comprehensive, site-specific security plan is in place and outlines emergency protocols, safety procedures, and access control measures. Translation services are available on-call. A structured reporting process is in place for staff and residents to report safety concerns. The TRC is an open concept floor plan and so there are not individual rooms for room searches. Residents are informed of prohibited items upon arrival. Private security is stationed on-site. Clearly visible security signage is placed throughout the site. ID badges are not used at the TRC site we visited but visitors are not permitted inside the facility. CCTV cameras are installed to monitor both internal and external areas and there are door alarms in use throughout the site. For more details regarding our onsite assessment of the TRC please see below.

## Temporary Respite Center (TRC) Assessment

### Temporary Respite Center (TRC) Answered YES



#### Question Topics

Q1  
Site has a local, written security plan.

Q2  
MA Uniform Shelter Program Rules are posted on site or distributed to all residents.

Q3  
Translation services are available on site.

Q4  
Reporting procedures are available at the site.

Q5  
Room inspections are conducted regularly at the site.

Q6  
Private security provider is employed at the site.

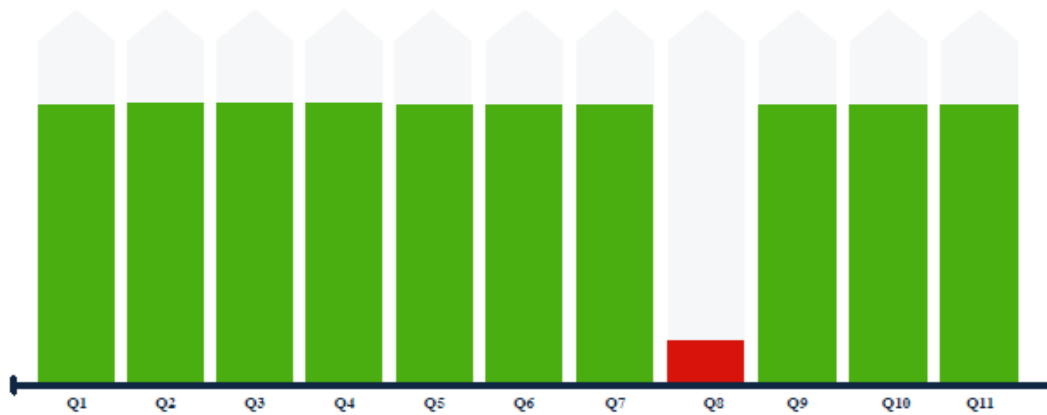
Q7  
Security signage is in place on site.

Q8  
Resident identification badges are in use on site.

Q9  
Visitor policy is secure and clearly in place.

Q10  
CCTV is in place to secure the site.

Q11  
Door alarms are in use on site.



MATRIX 4: TRC ASSESSMENT



FIGURE 20: - CHELSEA TRC

### *Overview of Onsite Observations:*

**Local Security Plan/MUSPR Distribution:** A comprehensive, site-specific security plan is in place and outlines emergency protocols, safety procedures, and access control measures. The provider at this location, “La Colaborativa” maintains program guidelines and procedures that cover multiple circumstances including conduct, access control, and evacuation. The procedures are well written and are contained in the file: “La Casita Safety & Security Operations”.<sup>23</sup> The MUSPR were also distributed to residents.

**Translation Services:** To accommodate residents of different linguistic backgrounds, on-call translation services are available, ensuring clear communication of security protocols and emergency procedures. All staff are also at least bilingual, with some fluent in multiple languages.

**Reporting Procedures:** A structured reporting process is in place for staff and residents to report safety concerns. Critical incidents are reported in alignment with state requirements. For reporting safety concerns, residents meet regularly with a case manager (2x per week), who they can report their concerns to. The front desk personnel, police detective on site, and program director are also potential avenues for reporting. There is no anonymous reporting protocol. Staff on site reported that they are also mandated reporters.

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<sup>23</sup> See Appendix E

**Room Inspections:** The TRC housing format does not include rooms, and the shelter is an “open floor plan” or “dormitory” setting. The wings of this shelter are regularly toured by staff and residents keep all of their belongings in transparent bins. Upon arrival, residents are informed of prohibited items so that they are aware of items that will be flagged during inspection.



FIGURE 21: - OPEN FLOOR PLAN

**Private Security:** Private security personnel are stationed on-site and responsible for monitoring entry points, patrolling premises, and responding to security incidents. These personnel are all employees of La Colaborativa. At least two (2) private security personnel are staffed at all times, as one is posted at the entry door and the other is roving. La Colaborativa provides safety and Security Operating procedures, which are titled “La Casita Safety & Security Operations Guide.” A detective from the local police is also onsite at the La Colaborativa TRC.

**Security Signage:** Clearly visible security signage is placed throughout the site, including warnings about surveillance (internal and external), security information, evacuation, and no trespassing. There is not presently any signage regarding “no weapons”.

**ID Badges:** Resident identification wristbands or ID badges are not used at the TRC site, which means the strategy to keep only authorized individuals in the shelter is insufficient.

**Visitors:** The TRC does not permit visitors inside the facility in any capacity.



FIGURE 22 - SURVEILLANCE SIGNAGE

**CCTV:** CCTV cameras are installed to monitor both internal and external areas, with surveillance footage used to enhance security response and deter unauthorized activities. There is a monitor displaying all camera views internal to the site at the security desk, but they are not actively monitored. The CCTV does not record all exterior doors and is not considered sufficient for night operation. Additionally, CCTV is not integrated with the greater security system, and exterior CCTV was reported as “minimal”. The Executive Office of Veterans Services is the agency in charge of operating the camera system and storing footage. External footage may be viewed off-site, but internal cameras are for internal monitoring only.

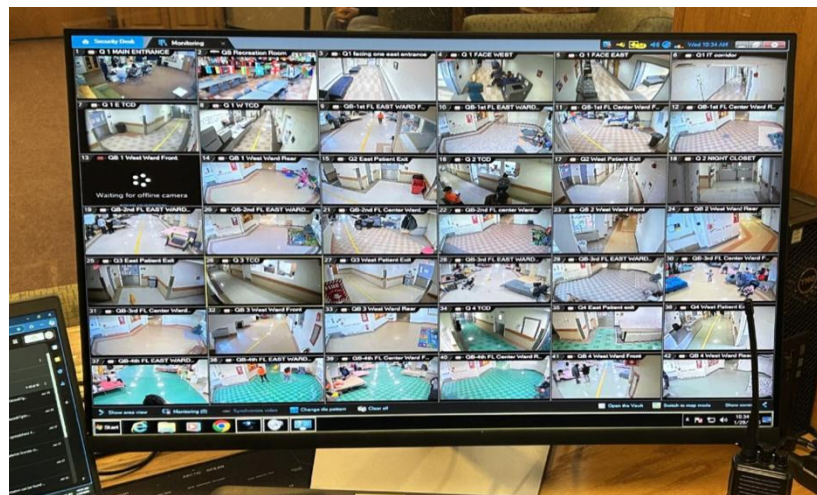


FIGURE 23 - CCTV MONITOR

**Door Alarms:** There are door alarms in use throughout the site, including door held-open alarms and secure door alarms. Alarms that activate the CCTV to immediately record the breached area are not in place.

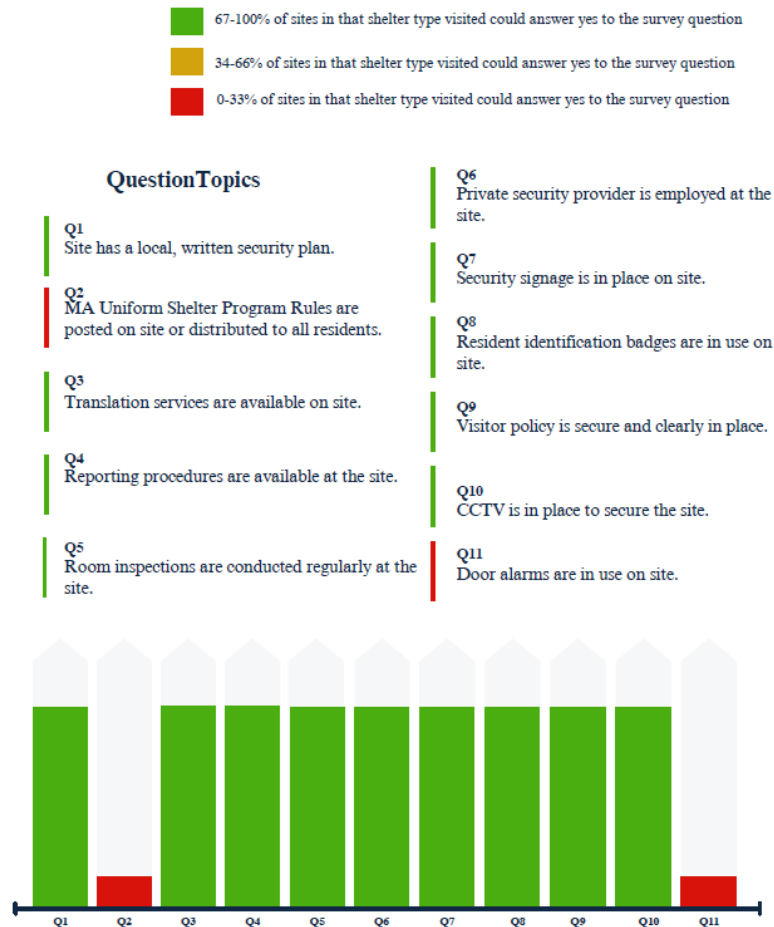


## Clinical and Safety Risk Shelter (“CSR”) Security and Safety Summary:

EDC conducted an assessment of the clinical and safety risk shelters in alignment with the methodology described. There is only (1) CSR shelter in the state. Matrix 5: (Clinical and Safety Risk Shelter Assessment) describes security infrastructure in place at the CSR. A comprehensive, site-specific security plan is in place, outlining emergency protocols, safety procedures, and access control measures. Onsite translation services are available. A structured reporting process is in place for staff and residents to report safety concerns. Regular, weekly room inspections are carried out by trained staff to maintain safety and compliance with site regulations. Private security personnel (“New England Security”) are stationed on-site. Clearly visible security signage is placed throughout the site and residents are issued wristbands for identification. The CSR permits visitors to be on site, but these visitors are expressly limited to the common area. CCTV cameras are installed to monitor both internal and external areas, however there are no door alarms present onsite. For more details regarding our onsite assessment of the CSR please see below.

## Clinical and Safety Risk Shelter Site Assessment

### Clinical and Safety Risk Shelter: (CSR) Answered YES



MATRIX 5: CSR ASSESSMENTS





FIGURE 24 - REVERE CSR

**Local Security Plan/MUSPR Distribution:** A comprehensive, site-specific security plan is in place, outlining emergency protocols, safety procedures, and access control measures. In the CSR, the Massachusetts Uniform Shelter Program Rules (MUSPR) are not posted, but this is because the CSR site has adopted their own version of the MUSPR which contains many of the same provisions. This version adopted by the CSR is titled “CSR rules-EN\_2024.0”<sup>24</sup> and is signed by all residents. These rules cover safety and security topics, including visitors, cleanliness, illegal activity, threats, fire safety, and allowing access for searches.

**Translation Services:** To accommodate residents of different linguistic backgrounds, on-site translation services were available, ensuring clear communication of security protocols and emergency procedures.

**Reporting Procedures:** A structured reporting process is in place for staff and residents to report safety concerns; however, if residents have a safety or security concern, “word of mouth” reporting to staff, case managers, or security can be used. Serious incidents that affect the health and safety of the residents are reported through the staff or security personnel to the Site Director. Post orders for private security identify reporting requirements. Additionally, staff receive domestic violence training and reporting of these instances goes through the Site Director (Staff are mandatory reporters). When received, reports are escalated through the site manager and higher if need is determined.

**Room Inspections:** Regular, weekly room inspections are carried out by trained staff to maintain safety and compliance with site regulations. Since the inspections are conducted weekly, residents have notice of the inspection. EDC identified through interviews that the most common violations are not security related but are more health and safety focused such as cooking food in the room.

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<sup>24</sup> See Appendix E

**Private Security:** Private security personnel (“New England Security”) are stationed on-site and are responsible for monitoring entry points, patrolling premises, and responding to security incidents. More detailed and comprehensive post orders for private security were provided (“Eliot - Revere Standard Operating Procedure (SOP) for Security”).<sup>25</sup>

**Security Signage:** Clearly visible security signage is placed throughout the site, including warnings about surveillance, security information, no weapons, and no trespassing.



FIGURE 25 - SECURITY SIGNAGE

**ID Badges:** Shelter resident identification wristbands are issued to authorized individuals to enhance access control and allow for quick identification of authorized persons. This identification method is differentiated from the ID worn by staff personnel.

**Visitors:** The CSR permits visitors to be on site, but these visitors are expressly limited to the common area (lobby). Visitors are overseen by security or staff in the lobby area and are prohibited from entering the shelter rooms.

**CCTV:** CCTV cameras are installed to monitor both internal and external areas, with surveillance footage used to enhance security response and deter unauthorized activities. There is a monitor displaying all camera views internal to the site, but they are not actively monitored. The CCTV, however, does not record all exterior doors, is insufficient for night operation, and cannot be monitored live by security personnel. Additionally, CCTV is not coordinated with the greater security system in any way. Below is an image of the CCTV display.

<sup>25</sup> See Appendix E

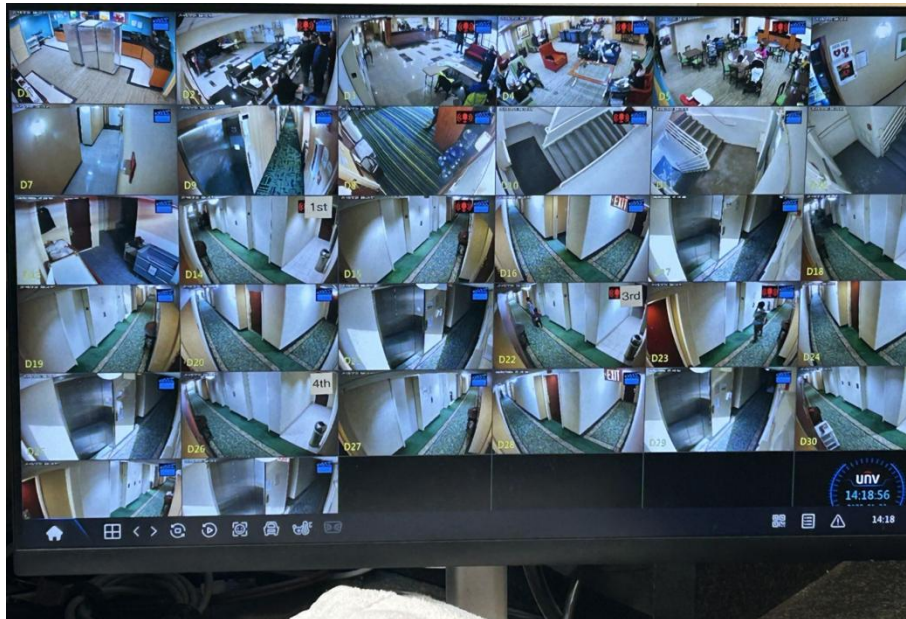


FIGURE 26 - CCTV MONITOR

**Door Alarms:** There are no door alarms present on the site, including door-held open alarms, secure door alarms, CCTV-activated alarms, or local/audible alarms. In practice, this means that security and CSR staff are not entirely aware of residents exiting out unmonitored doors, or unauthorized persons making entry through propped or opened doors.

## Summary of Interviews

As part of the security assessment of the EA Shelter System, EDC's investigative team conducted in-depth stakeholder interviews to gather qualitative insights from those directly involved in shelter operations, security enforcement, and resident experiences. These interviews provided a critical perspective on existing security protocols, incident response, and areas for improvement. Stakeholders included representatives from the EOHLC, Office of Refugees and Immigration, shelter providers, on-site security personnel, and residents, ensuring a comprehensive understanding of the system's security landscape. A multilingual specialist supported the engagement process at selected sites to facilitate inclusive communication with residents. A summary of each interview conducted follows. While these summaries highlight certain discrepancies with current policies, they are intended to accurately reflect the interviews themselves rather than serve as a representation of official policies.

- **EOHLC Intake Team**

Summary: The EOHLC Intake Team oversees the placement of individuals and families into the EA Shelter System, ensuring compliance with intake protocols and prioritization based on need. Their responsibilities include conducting preliminary screenings, SORI (Sex Offender Registry Information) checks for individuals over 10, and categorizing

applicants into priority levels (P1–P4) based on medical necessity, displacement due to natural disasters, and other qualifying factors. CORI screenings were added to the EOHLC intake team’s responsibility the week of January 13<sup>th</sup> to implement a formalized standard process, which was previously inconsistently done by shelter providers at their discretion. Additionally, the team manages shelter placements for individuals without requiring proper identification as under the *Garcia v. EOHLC* ruling (November 2024), presumptively placed temporary shelter entry with a 30-day follow-up period for documentation is mandated. Before the November 2024 *Garcia v. EOHLC* ruling, a resident would be turned away without documentation. At the time of our interview CORI results did not influence placement decisions, though a new restrictive placement policy was in development by the Governor’s office. This new restrictive policy was enacted on January 27<sup>th</sup>, 2025.<sup>26</sup>

*Discussion Highlights:*

- Before January 2025, shelter providers conducted CORI checks at their discretion, leading to inconsistent screening practices and undocumented results. These CORI results were not shared with or documented by EOHLC.
- The EOHLC team has consistently done SORI checks upon intake since 2019, of a new shelter resident.
- Shelter providers do not receive CORI/SORI details for flagged individuals from EOHLC; they only receive a general restrictive status for an incoming resident.
- Since the new CORI policy took effect in January of 2025, at the time of the interview, no one with a positive CORI has been placed, as EOHLC is still finalizing its restrictive placement guidelines for those with positive CORI and SORI results however once the CORI placement policy was finalized on January 27<sup>th</sup> 2025 placements have resumed.
- Since the November 2024 *Garcia v. EOHLC* decision, the EA Shelter System has had 126 residents presumptively placed due to lack of identification.

- **EOHLC Non-Compliance Review Team**

Summary: The EOHLC Non-Compliance Review Team is responsible for ensuring accountability within the EA Shelter System by enforcing shelter rules, managing resident compliance, and overseeing the termination processes. They monitor adherence to shelter codes of conduct, enforce the three-strike policy for general infractions, and immediately terminate residents for serious violations involving criminal activity or safety threats. The overall appeals process can take several months as a resident has up to 21 days to initially file an appeal. If a resident files their appeal to a termination decision within 10 days of receiving their termination notice, they can remain in shelter during the appeals process under Aid Pending Shelter provisions. In cases of domestic violence or safety threats, ensuring that aggressive individuals are removed immediately without an appeal option is

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<sup>26</sup> At the time of this interview the new EOHLC CORI policy regarding placement of applicants with serious crime related CORI results was not in place however it was released by the EOHLC on January 27<sup>th</sup>, 2025. <https://www.mass.gov/doc/eohlc-ea-cori-policy/download>

handled by a separate team. Additionally, the review team requires shelter providers to submit formal, documented complaints before non-compliance actions are taken.

*Discussion Highlights:*

- Non-compliance enforcement relies heavily on provider documentation, and without written complaints, infractions may not be recorded.
- The appeals process for any termination of shelter rights can take up to two months, delaying final resolution.
- Once terminated, a shelter resident must wait 12 months to reapply to the EA Shelter System.
- However, a presumptive placement (placement of a resident for up to 30 days without ID verification) can reset the 12-month reentry ban, allowing previously terminated residents to reenter the system by claiming they lack identification at intake.

- **EOHLC Placement Team**

Summary: The placement team follows a structured approach by reviewing the incoming resident list, checking the internal databases including the new Housing Hub System to review any restrictions on placement for medical, ADA or domestic violence considerations and places shelter residents based on the predefined categories P1-P4. A new policy, effective the week of January 13, 2025, requires CORI and SORI checks before placement decisions. Prior to the week of January 13<sup>th</sup>, CORI checks were not run by the EOHLC team and were not considered for placement. SORI checks are considered, and although every measure is taken to try not to place anyone with a type 2 or 3 positive SORI into a shelter with children, there are times where placement is made in hotels until other placement is available. It was acknowledged that individuals with a positive SORI placed in a scattered site can be in buildings with children outside of the shelter system. Notifications are sent to providers if an incoming resident has a positive SORI.

The team is also developing policies for handling cases where residents lack identification and for those with positive CORIs. Until those policies are in place, no one without an identification or a positive CORI has been or will be placed.<sup>27</sup> This has been the case since the week of January 13, 2025. Various considerations, such as family size, medical needs, ADA compliance, and domestic violence restrictions, play a role in placement decisions.

*Discussion Highlights:*

- EOHLC CORI checks began the week of January 13, 2025; prior to this date, CORI information was not taken into account for placement.

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<sup>27</sup> After EOHLC's January 27<sup>th</sup>, 2025, policy regarding placement of applicants with positive serious crime-related CORI results, residents that had been on hold for placement have begun to be placed.



- There are times when a person with a positive SORI could be placed in a family hotel shelter, although that is a last resort option.
- It was acknowledged that individuals with a positive SORI can be placed in scattered sites in buildings with children outside of the shelter system.
- Restrictions exist for those without identification and those with positive CORI results until official policies are in place.
- Shelter rules are communicated to residents upon placement by the EOHLC homeless coordinator and included in placement documents.
- Notifications are sent to providers if an incoming resident has a positive SORI.
- **Massachusetts Office of Refugees and Immigrants**

Representatives from ORI were interviewed regarding the organization's role in stabilizing refugees and immigrants in Massachusetts. ORI focuses on identifying and supporting culturally competent service providers to assist the growing migrant population. While the organization has historically worked with long-established providers, the recent surge in migrants has led to the inclusion of new service providers who require guidance. ORI collaborates closely with the EOHLC to address challenges in the current migrant crisis. The organization distinguishes between federally funded refugee programs and the state-administered EA Shelter Program, which has strict eligibility criteria.

*Discussion Highlights:*

- ORI prioritizes culturally aware providers to support refugee and immigrant stabilization.
- Long-established service providers have been key partners, but the influx of migrants has necessitated new provider involvement.
- ORI collaborates with EOHLC to support inexperienced providers in navigating migrant issues.
- The arrival of large groups of migrants by bus and plane began three years ago, increasing demand for ORI support.
- Long-term federally funded providers, primarily supported by the US Government Office of Refugee Resettlement (ORR), serve specific refugee populations based on federal immigration status. This status is determined at the point of entry at the Federal level.
- The EA Shelter Program has distinct eligibility requirements that do not align with ORI-supported refugees. Immigrants entering the Emergency Assistance (EA) Shelter Program are not in the same category as those supported through ORI.
- **Shelter Providers**

Summary: Shelter providers expressed to us that the EA Shelter System under the EOHLC is overseen by dedicated individuals dedicated to understanding and assisting those individuals and families in need. Part of that oversight is also to ensure the safety and security of shelter residents and the staff who serve and assist them. Shelter providers are committed to working with EOHLC to ensure the overall wellbeing of staff and residents in the shelter environment.

### *Discussion Highlights:*

- The rules of the inspection process require 24-hour notice and set inspection schedules, which allow for advanced notice to those involved in risk-related behavior, giving them time to hide or remove dangerous articles or contraband.
- The non-compliance process lists various infractions; however, certain infractions, such as insufficient trash collection, are so minor that removing a family from a shelter would not be justified. In those cases, the paperwork involved for the infraction is not worth the time to complete.
- There is no clear tracking system for infractions and noncompliance. In some instances, a household may have multiple infractions, but since the infractions are all different, no action is taken. Providers believe tracking is specific to the type of incident rather than the household.
- The EOHLC is extremely responsive in matters related to domestic violence, child welfare, or exploitation. In such instances, in the past, the offender was removed immediately.
- Currently the EA Shelter Program falls under Massachusetts Right-to-Shelter. As such, the same Housing Laws apply to the shelter program. The Housing Laws are not designed with safety and security of providers and occupants in mind, and providers believe the Housing Laws deal more with the protection of individual rights of residents in the shelters. Providers pointed to such organizations as the Pine Street Inn as an example of an organization implementing positive measures to ensure safety and security.
- Providers are not always made aware of safety issues regarding residents placed at their locations. One resident was observed wearing a court-ordered ankle bracelet, and it was subsequently learned that he had been charged with possession of a dangerous weapon (firearm).
- There is concern that the EOHLC is unwilling to uphold the rules and the code of conduct. A provider confronted two residents in their room because they had alcohol, and the staff member attempted to remove the alcohol. One resident stood in the staff member's path and the other physically restrained the staff member. The incident report was submitted to EOHLC but only the resident who physically touched the staff member was removed from the shelter.
- EOHLC appears to have a broad interpretation of the ADA, often approving requests such as those for service animals and emotional support animals. While there are clear guidelines for each, it seems EOHLC may not always distinguish between them.
- Providers believe more focus on child welfare and associated illegal activity around human trafficking or child exploitation is needed. An online course on human trafficking should be mandated to every provider.
- Relationships with local police have been described as positive. Levels of engagement ranged from police officers assigned and housed within the provider site to regular visits or drive-bys.

- **Shelter Residents**

Summary: The EDC site assessment team interviewed residents at eight hotel-style shelters at random. Shelter providers were not informed prior to the team's arrival that these interviews would occur. Eighteen residents or resident couples were interviewed.

### *Discussion Highlights:*

- Residents said they felt safe within the shelter. At least one shelter resident stated they were a previous victim of domestic violence, and the shelter took an active role helping to ensure their safety by obtaining a photo of their offender and posting the photo at the front desk with the security team.
- In speaking with residents, all shelters except one—a hotel with both shelter residents and unaffiliated hotel guests—observed the EOHLC Uniform Shelter Program Rules regarding curfew checks and visitors.
- All residents complimented the staff at their site as being good people and fair in their approach to residents. Security is good and several residents said they have never seen anyone in the shelter who did not belong.
- **Local Police Chiefs**

Interviews with local police chiefs highlighted challenges in collaboration and communication between law enforcement, shelter providers, and the State. While cooperation exists, there is an opportunity to strengthen relationships and establish a more proactive approach rather than only engaging when issues arise. The Chelsea La Colaborativa site, where a detective has an office within the shelter, serves as a strong example of effective collaboration. In general, local law enforcement remains the primary responder when shelter-related security incidents occur.

### *Discussion Highlights:*

- Communication between police, shelter providers, and the state is inconsistent and sometimes challenging.
- Strengthening relationships with local law enforcement could lead to more proactive engagement.
- The Chelsea La Colaborativa shelter model, which includes an onsite police presence, is a successful example of collaboration.
- Law enforcement is the primary contact when shelter-related security issues arise.

## **Summary of Policy Review and GAP Analysis**

EDC strongly believes a robust policy framework is crucial for the safety and security of any organization. Regarding the EA Shelter System, effective shelter security relies on both physical measures and clear, enforceable policies governing intake, operations, emergency response, and facility accountability. This section of the assessment reviews existing security-related policies at the sites visited by EDC, as well as standardized policies provided by the Commonwealth, to identify gaps and areas for improvement.

## Summary of On-site Shelter Policies

This section compares several EA Shelter System security and safety-related policies with national and state best practices. By analyzing intake procedures, shelter regulations, program plans, and provider contracts, we identified areas for alignment with industry standards and thus propose enhancements to mitigate security risks and strengthen operational resilience. The matrix below, and recommendations will guide policy adjustments to improve enforcement, clarify responsibilities, and ensure a safer environment for residents and staff.

For this analysis, EDC performed an in-depth review of the policies that relate to the safety and security of the EA Shelters<sup>28</sup>. These policies included the following:

- Health & Safety Plan
- Norfolk TRC - Heading Home
- Chelsea TRC - La Colaborativa
- Revere CSR - Eliot
- EA Scope of Service
- AMI OEOS Policies
- CSRA Sites- General Rules
- La Casita
- Norfolk TRC
- TRC CSR Site Information
- EEOHS Uniform Shelter Rules
- Department of Housing and Community Development (DHCD) Division of Housing Stabilization (DHS) Emergency Assistance (EA) Program Uniform Shelter Program Rules

EDC reviewed the above policies to compare to industry best practice as seen in organizations such as the American Society of Industrial Security, International Association of Chiefs of Police, U.S. Department of Homeland Security, or U.S. Department of Housing and Urban Development (HUD). These policy areas include:

- Emergency Crisis Plan
- Incident Command System Policy
- Site Security Plan
- Access Control Policy
- Active Shooter Policy
- Dangerous Weapons Policy
- Trespass Policy
- Threats Policy
- Sexual Assault Policy
- Resident Assault Policy
- Child Neglect/Abuse Policy
- On-Site Security Staff Roles and Responsibility Policy

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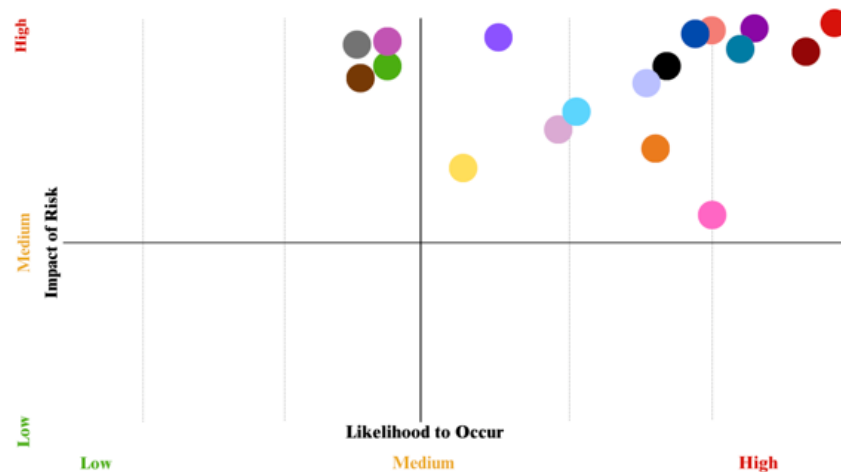
<sup>28</sup> See Appendix E

- Emergency Communication Plan
- Resident Code of Conduct
- Law Enforcement Coordination / Communication Plan
- Resident Background Check Policy
- Security Training Policy / Protocols
- Visitor Policy

## POLICY RISK MATRIX

The following risk matrix provides a visual representation of key security risks faced by emergency shelters in Massachusetts, categorizing them based on their likelihood of occurrence and potential impact. Policies related to site security and access control are positioned in the high-likelihood and high-impact quadrant, reflecting frequent unauthorized access attempts and the need for strict security measures. Resident-related risks, such as threats, assaults, and conduct violations, also appear as high-impact concerns due to the stress and unpredictability of shelter environments. Emergency response coordination and staff training policies are distributed across the matrix, emphasizing the critical role of preparedness in mitigating crises. This matrix serves as a strategic tool to prioritize security measures and policy enhancements to ensure the safety and stability of shelter operations.

### Risk Matrix



### Key

- |                                       |   |
|---------------------------------------|---|
| 25 Access Control Policy              | 17 Law Enforcement Coordination / Communication Plan        |
| 24.5 Resident Assault Policy          | 17 Dangerous Weapons Policy                                 |
| 24 Threats Policy                     | 17 Visitor Policy   |
| 24 Security Training Policy/Protocols | 14.5 Site Security Plan                                     |
| 23 Emergency Crisis Plan              | 15 Emergency Communication Plan                             |
| 23 Active Shooter Policy              | 14.5 On-Site Security Staff Roles and Responsibility Policy |
| 20 Child Neglect/Abuse Policy         | 13 Resident Code of Conduct                                 |
| 18 Sexual Assault Policy              | 12.5 Resident Background Check Policy                       |
| 16 Incident Command System Policy     | 12.5 Trespass Policy  |



Security and safety policies across various shelter and housing sites reflect a mix of standardized state guidance and organization-specific protocols. While the state provides overarching safety expectations, different types of facilities, such as congregate shelters, scattered-site apartments, and private hotel shelters, adopt varying standards based on their operational structures and risk levels. The following summary analysis of the multiple policies across different organizations highlights key disparities in emergency preparedness, security measures, and law enforcement coordination.

Emergency crisis plans are well-defined in about half of the policies, demonstrating awareness of crisis management, but many lack structured Incident Command System (ICS)<sup>29</sup> policies, limiting formalized incident response. Security measures, including site security and emergency plans, are broadly covered, yet access control and visitor policies appear inconsistent, leading to gaps in process around unauthorized and unknown visitors.

While the MUPSR and most individual facilities' rules explicitly prohibit dangerous weapons, signage addressing this prohibition is minimal. Policies are comprehensive in addressing threats to residents or staff or resident assault, however, distinct emergency management and active shooter policies are rarely included. Resident conduct policies vary, with some addressing behavioral expectations at a high level, leaving many activities open to interpretation.

Background check policies are typically focused on staff rather than residents. Security operations also differ, with some organizations utilizing professional security companies and defining on-site security staff roles, while others rely on in-house staff with little or no standardized security-related training to perform security functions.

A review of the MUSPR policies, considered the statewide baseline standards for each facility, shows inconsistencies related to how violations are addressed. Minor rule violations often require multiple infractions (3) before a formal noncompliance violation is issued, whereas more immediate reports of noncompliance, especially those that pose a threat to the safety and security of residents or shelter staff, can be filed promptly. The MUSPR establishes a multi-step review and appeals process that must be followed before any enforcement action is taken.<sup>30</sup>

According to the MUSPR, a resident's right to shelter may only be terminated after receiving three noncompliance issuances or a single instance of criminal activity that endangers the health, safety, or security of themselves, other residents, or staff. However, even in cases involving criminal activity, termination remains subject to a multi-step review and appeals process, requiring the Department to provide sufficient evidence of the alleged misconduct.<sup>31</sup>

This multi-step approach often results in a significant delay, potentially spanning several months between the initial incident and the issuance of a formal Noncompliance Notice. During this time, the resident is typically allowed to remain in the shelter pending appeal, provided the appeal is

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<sup>29</sup> <https://training.fema.gov/emiweb/is/icsresource/assets/ics%20review%20document.pdf>

<sup>30</sup> <https://www.mass.gov/files/documents/2016/07/xk/s-ea-forms-ea-uniform-shelter-program-rules-january-2015-english.pdf>

<sup>31</sup> <https://www.mass.gov/doc/760-cmr-67-eligibility-for-emergency-assistance-ea/download>

submitted within the designated timeframe.<sup>32</sup> This delay may create security risks for the shelter, as individuals posing potential threats may continue to reside within the facility.

The noncompliance review and appeals processes apply uniformly across all EA shelters, including hotels, congregate shelters, and scattered sites, with the exception of Temporary Respite Center (TRC) shelters, which operate under a distinct set of rules and appeals procedures. Aligning the Rules and Regulations across all shelter types and streamlining the appeals process, particularly by reducing the duration of review steps, could help mitigate security-related gaps and improve overall shelter safety.

Two areas that were identified as having significant deficiencies are access control and threats policies. Below we will review these policies in greater detail.

#### *a. Access Control Policies*

Access Control rules and regulations varied significantly from shelter to shelter. In the Uniform Shelter Rules and Regulations, which has been the uniform set of rules for the EA Shelter System since 2015, the regulations state that in a congregate or scattered shelter site, the onsite provider will determine the visiting hours and rules, and hotel shelter outside guests are never allowed in a hotel room. It states that only another hotel family can visit a resident's room, although children must be accompanied by their parents and there cannot be more than six (6) guests in a room at one time. Common areas in hotels have their own access control rules and regulations, and visitors must follow all shelter rules, as it is the responsibility of the shelter residents to enforce the rules for their visitors. Although these are the written and posted directives at all facilities, EDC onsite visits revealed that access control measures varied significantly between shelter types. Hotels, congregate and scatter sites required minimal resident identification requirements (no badges or wristbands) for access control, or to confirm identification while in the shelter. In turn, it is not possible to discern between residents and visitors.

The TRC and CSR sites also operate under their own rules in addition to the MUSPR. Both the TRC and CSR rules state that visitors and guests are never allowed in a shelter room unless approved by staff. No visitors are allowed in the TRC. The CSR allows visitors in common areas, and residents are identified by wristbands; however, EDC noted that wristbands are not conspicuous, so differentiating between residents and visitors can be difficult.

#### *a. Threats Policies*

Incident reports are written up by the provider of any event that occurs at a shelter that threatens the health, safety or wellbeing of families, regardless of who is at fault. There is no statutory requirement for incident reports but rather, they were initiated as best practice. The use of incident reports is a contractual obligation of each provider, although the level of detail filled out in each report varies greatly. The types of incidents range from minor inter-resident disputes over communal kitchen items to serious assault events, domestic violence, and deaths. Some incidents require outside involvement with local police, fire, EMS, and DCFS, but not all do. To triage the

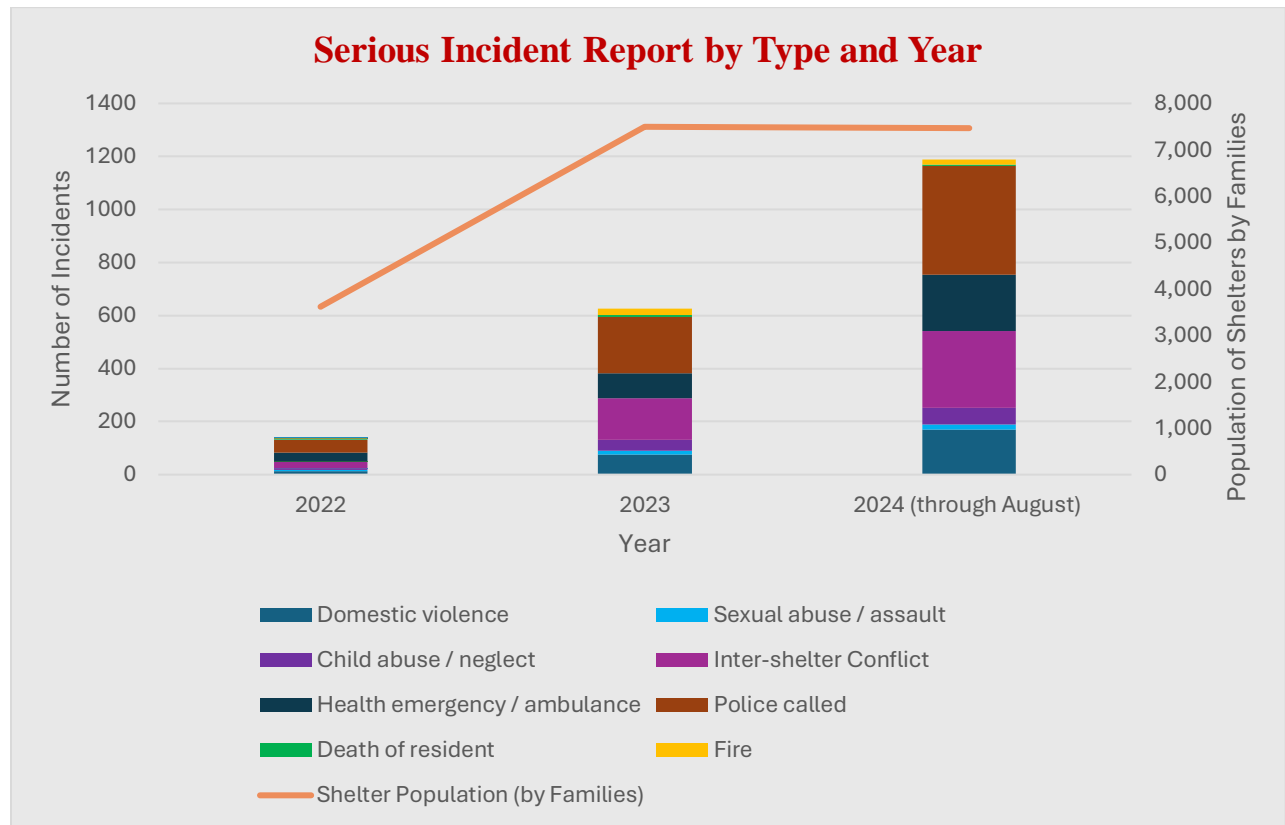
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<sup>32</sup> <https://www.mass.gov/doc/106-cmr-343-dta-fair-hearing-rules/download>

incident reports, EOHLC has recently started categorizing incident reports in levels to triage the seriousness of the incident and to take the according next steps.<sup>33</sup>

As described in the methodology section, the publicly available incident reports EDC received were not stored or delivered in a way that allowed for searching incident reports by type of serious incident, date, shelter type, or location. This is because until recently incident reports had been sent through email to the EOHLC. Once filled out, they were stored locally as PDFs, not stored in a database. This practice has been recently changed due to the launch of the provider portal where incident reports can be filled out in an online form and sent back to EOHLC and stored in a database where long-term trend searches and tracking is now possible.<sup>34</sup>

As is detailed by the chart below, the most apparent finding when reviewing these publicly available incident reports was the increase in overall serious incidents from 2022 – 2024. Although this is surely due to an increase in the overall shelter population including new providers and new shelters being onboarded and utilizing the incident report system, the increased number of incidents also underscores the need for clear safety and security protocols at shelters.



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<sup>33</sup> <https://www.mass.gov/doc/provider-ir-job-aid/download>

<sup>34</sup> <https://www.mass.gov/doc/provider-ir-job-aid/download>

<sup>35</sup> Appendix F

Overall, while many policies cover fundamental security and safety topics, there are notable gaps in emergency preparedness, law enforcement coordination, and security technology policies. Strengthening these areas would enhance overall security management and operations.

## Summary of Intake Process Policies

The intake process for individuals seeking shelter in Massachusetts follows a structured approach for centralized intake and placement. The following section highlights the key intake process policy areas that are implemented, as well as the adjustments made to these processes in response to the *Garcia* ruling in November 2024, which includes identification verification and criminal background checks.

Upon arrival at one of (13) intake facilities, individuals must sign in at the front desk before undergoing a preliminary intake assessment conducted by a provider to gather essential information. Next, if deemed necessary, the incoming resident reports to the Department of Public Health (DPH) to conduct a health screening to assess medical needs. Following this screening, the EOHLC Homeless Coordinator reviews the intake form and performs additional screening, including criminal background checks (instituted after January 17<sup>th</sup>, 2025), to determine appropriate placement. This process ensures all individuals receive the necessary support while maintaining safety and compliance with state regulations. In most cases, this process takes less than a day to complete.

As mentioned previously, the Criminal Offender Record Information (CORI) and Sex Offender Registry Information (SORI) screening processes for shelter intake in Massachusetts has evolved significantly, particularly following the *Garcia* ruling implementation in November 2024. Prior to this ruling, individuals without valid identification were denied placement and required to return with proper documentation. Post-*Garcia* ruling, individuals can now be placed without identification, with the Homeless Coordinator notifying the EOHLC Legal Department of the missing documentation and requiring individuals to provide it within 30 days. The EOHLC Homeless Coordinator or member of the EOHLC intake and eligibility team is responsible for following up with the residents missing documents to ensure eligibility compliance.<sup>36</sup>

SORI checks are conducted for all individuals 10 years of age or older and have been in place even before EOHLC assumed responsibility for CORI screenings. If an individual's identity cannot be verified, a status determination request is sent to EOHLC Legal Department for further review. Before the week of January 13<sup>th</sup>, 2025, CORI checks were performed at the discretion of the shelter provider without a formal policy in place mandating the checks and results were rarely shared with EOHLC. When shelter providers did conduct a CORI check and found a positive result, there was no structured process for documenting or communicating eligibility decisions with EOHLC.

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<sup>36</sup> Although the *Garcia* ruling allows a resident to be presumptively placed without identification, after the Governors January 2025 proposed changes to the EA Shelter System regulations no presumptive placements have occurred. Since January 2025, residents without identification are currently on a waiting list until a refined policy for presumptive placements has been established.

On January 27<sup>th</sup>, EOHLC instituted a policy regarding placement of individuals with a serious crime-related CORI result. If a current resident or applicant does have a serious crime-related CORI result, this result will have implications on the residents placement or recommended diversion unless the individual provides a written assessment from a qualified mental health professional or a statement from a criminal justice official confirming they do not pose an unacceptable risk to others in the EA Family Shelter Program.<sup>37</sup> If an applicant has a positive level 2 or 3 SORI result every action will be taken to not place them in a congregate setting however they could be placed in hotel or scattered site shelters.<sup>38</sup> Shelter providers are not informed of the specifics of a positive CORI or SORI; instead, they receive a general restrictive placement flag without details on severity. Since the implementation of the new CORI policy on January 27, 2025, EOHLC has begun placing individuals with a positive CORI. EOHLC is working through the backlog of placements that were held while the CORI placement policy was being developed. The 2019 policy regarding placement of type 2 and type 3 SORI residents remains in effect.

### **Summary of Provider Contracts**

The Commonwealth and TRC shelter providers are contractually bound when providing services through the Overflow Emergency Overnight Shelter (OEOS) Contract.<sup>39</sup> The OEOS contract establishes an agreement for the management, staffing, and operation of temporary shelter sites to accommodate families and pregnant individuals experiencing homelessness. In response to rising demand and limited capacity in the existing EA system, the OEOS State contract regarding TRC shelters outlines the provider's responsibilities in securing and maintaining shelter facilities. These responsibilities include site management, staffing, security, and essential services such as food, hygiene, and case management. The contract ensures compliance with legal and ethical standards, including data security and privacy regulations, while requiring regular reporting on occupancy, service delivery, and resident recertification. The contracting agency maintains full oversight of the shelter program, managing funding allocations and ensuring compliance through corrective measures or contract termination when necessary. The agreement is designed to promote operational efficiency while fostering collaboration with service providers and prioritizing the well-being of shelter residents. The contract also reinforces strict adherence to state and federal regulations, creating a structured and accountable framework to maintain a safe, effective, and sustainable emergency shelter system.

The following table has been developed to summarize and highlight the purpose and responsibilities outlined in the standard OEOS Contract signed by all shelter providers.

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<sup>37</sup> <https://www.mass.gov/doc/eohlc-ea-cori-policy/download>

<sup>38</sup> Appendix G

<sup>39</sup> <https://www.commbuys.com/bsa/external/bidDetail.sdo?docId=BD-24-1039-EHS01-ASHWA-96820&external=true&parentUrl=close>



## Overflow Emergency Overnight Shelter (OEOS) Contract Summary Table

Key Areas	Contract Summary
Purpose and Scope	<ul style="list-style-type: none"> <li>• The contract is established to provide emergency overnight shelter services to families and pregnant individuals experiencing homelessness.</li> <li>• It is a response to the growing demand for shelter and the inability of the Emergency Assistance (EA) system to meet this demand.</li> <li>• The provider is responsible for managing shelter sites, staffing, and related support services.</li> </ul>
Contractor Responsibilities	<ul style="list-style-type: none"> <li>• The provider must establish, operate, and manage shelter locations as designated by the contracting agency.</li> <li>• Services include bedding, furniture, sanitation, security, meal provision, and transportation.</li> <li>• The contractor must hire and maintain qualified staff, including a Program Director, Operations Manager, and Supervisors, while ensuring compliance with background checks and training.</li> <li>• The provider is responsible for emergency medical response, hygiene provisions, and isolation spaces for contagious illnesses.</li> <li>• Limited legal support is to be provided for eligible residents concerning immigration status and work authorizations.</li> <li>• Residents must engage in case management programs and periodic recertification assessments to maintain eligibility.</li> </ul>
Contracting Agency Responsibilities	<ul style="list-style-type: none"> <li>• The agency will review and approve all program plans, policies, and financial budgets.</li> <li>• The provider is compensated per an approved budget, with payments in adherence to contract terms.</li> <li>• The agency has the authority to enforce corrective actions, impose penalties for non-compliance, and terminate the contract if necessary.</li> </ul>
Reporting and Compliance	<ul style="list-style-type: none"> <li>• The provider must submit data on shelter occupancy, services provided, compliance with recertification policies, and operational challenges.</li> <li>• All personal and medical data must be handled per applicable privacy laws and security standards.</li> <li>• The provider must adhere to federal and state laws, including HIPAA, anti-fraud statutes, and consumer protection regulations.</li> </ul>

### Summary of Standard Operating Procedures

In addition to contractual agreements and state-wide policies, EDC reviewed several locations' on-site or third-party standard operating procedures to assess protocols related to on-site safety and security. While the EDC team observed strong security policies across various locations, there were notable inconsistencies that could impact overall security effectiveness.

Several locations have structured protocols for responding to severe weather events, shelter emergencies, and clearly outline staff responsibilities, procedures for contacting emergency services, and steps for maintaining security during emergencies. Additionally, many facilities identify supervisory roles that define security hierarchies with clear responsibilities assigned to staff and security personnel. Some locations further enhance security by requiring structured patrols, including guidelines for patrol frequency and reporting.

However, other locations are inconsistent in communication and documentation and lack comprehensive response protocols, leaving a significant gap in preparedness. Certain emergency procedures, such as fire or medical emergencies, are only briefly referenced with emergency contact information and do not provide clear implementation steps. This lack of clear direction may lead to confusion in high-risk situations.

An additional gap in policies is the absence of a unified training strategy. Many SOPs do not explicitly outline staff training requirements for areas such as managing aggressive behavior, domestic violence, suicide prevention, emergency response, security monitoring, or access control. Without consistent training, even well-documented policies may not be effectively implemented.

Overall, there is a lack of standardization of formalized safety and operating procedures across facilities. This variation in policy depth and clarity results in inconsistent levels of preparedness across EA site locations and increased safety vulnerabilities during times of emergencies.

## CONCLUSION & RECOMMENDATIONS

Below are our recommendations derived from our policy and on-site reviews of the EA Shelter System in Massachusetts. As a right-to-shelter state, Massachusetts operates under a unique legal framework that mandates shelter access for eligible families, distinguishing it from most other states. Massachusetts' Right-to Shelter law influences policies related to shelter entry, background checks, and placement requirements. While comparisons to policies in other states were reviewed for consideration, they are only advisory. Massachusetts' legal obligations may necessitate tailored solutions.

During our assessment we witnessed exceptionally hardworking personnel throughout all levels of the shelter system maintaining a functioning system during extraordinarily demanding times. The recent population increase in the state, driven mainly by net immigration, stretched the shelter system to its maximum capacity and as such, displayed security-related gaps. The goal of the following recommendations is to enhance the efficiency, compliance, and effectiveness of EA shelter operations. These recommendations are made from a security standpoint. We are aware of ongoing legal considerations, as well as upcoming state and federal legislative policy proposals, however, for the purpose of this assessment, these recommendations are made from the viewpoint of current policy and EDC's background and expertise in security and risk management.

1. Require identity verification for all shelter residents upon intake and remove the ability to be presumptively placed.
2. If presumptive placement continues, implement centralized enhanced tracking mechanisms to monitor the 30-day follow-up process when a resident is presumptively placed without identification and consider restrictive placement for those without identification.
3. Implement regular, comprehensive training for EOHLC employees in identifying and verifying legitimate forms of identification during intake, including international documents.
4. Develop and clearly communicate a standardized policy and procedure to process information from CORI and SORI checks to guide EOHLC resident placement decisions. Consider restrictive placement for residents with a positive violent CORI background or level 2 or 3 SORI.<sup>40</sup>
5. Make resident CORI and SORI background information available to the onsite provider leadership team.
6. Implement a notification procedure upon placement to remind residents with applicable SORI notification requirements to contact the appropriate law enforcement agency in the jurisdiction where they are being sheltered.
7. Establish and implement at intake, a strict policy for resident disclosure of any and all contraband or weapons to enhance overall safety within shelter facilities by reducing risk at point of intake.

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<sup>40</sup> Review the restrictive SORI placement policy the State of Connecticut has in place, as they restrict placing level 2 or 3 sex offenders in shelters that house families and children  
[https://eregulations.ct.gov/eRegsPortal/Browse/RCSA/Title\\_17bSubtitle\\_17b-800Section\\_17b-800-4/](https://eregulations.ct.gov/eRegsPortal/Browse/RCSA/Title_17bSubtitle_17b-800Section_17b-800-4/)

8. Implement specialized training for intake personnel to identify and handle weapons or contraband.
9. Ensure standardized training is provided to shelter staff related to human trafficking, inter-resident incidents, weapons, contraband, and dangerous material.
10. Develop standardized plans and training across all shelters for continuing service in the event a shelter needs to be evacuated. Identifying and establishing a secondary location is needed to ensure the care and safety of shelter residents.
11. Ensure that emergency protocol plans for each resident placement facility are clearly communicated to residents upon intake, promoting awareness and preparedness in emergency situations.
12. Adopt procedures upon entry at shelters similar to facilities like the Pine Street Inn, where the implementation of security protocols (e.g. searches) is a function of the right to be allowed in the shelter.
13. Increase communication lines and transparency between the EOHLC, providers, and local law enforcement. Communication will help local law enforcement proactively address security concerns as opposed to only being called when there is an issue.
14. Standardize resident safety and security reporting procedures across all sites, including an anonymous reporting option to encourage residents to report concerns.
15. Develop clear and transparent communication between shelter providers and EOHLC to identify individuals who pose a safety risk.

16. Instruct providers to adopt and implement a reliable and consistent means of communication with residents through regular shelter group meetings, a mobile phone application or group text.
17. Record incident report data in a centralized database to facilitate analysis and enable real-time flagging of security concerns. Review of this data could act as an early warning system for security-related incidents and should trigger timely review and analysis, as well as enable immediate follow up with providers to close any open feedback loops. Centralized storage ensures incident reports follow residents throughout the shelter system and supports long-term trend tracking and analysis by the EOHLC.
18. Direct providers to review CCTV coverage placement to eliminate blind spots and ensure adequate coverage of the facility.
19. Implement standard visitor management policies across all sites, such as ID scanning, controlled access areas, and resident identification badges.
20. Direct providers to install door alarms and access control systems at all sites to prevent unauthorized entry or exit.
21. Direct providers to enhance lighting, especially in scattered-site shelters, to improve safety and deter criminal activity.
22. Establish a 24/7 shelter provider presence at hotels.
23. Change MUSPR regarding room searches and implement unscheduled room checks at shelter facilities incorporating non-invasive detection such as metal detectors or wands.
24. Develop a standard security plan template for all providers to ensure consistency and a comprehensive approach to security across all sites.



25. Differentiate between non-Massachusetts residents and Massachusetts residents entering the EA Shelter System to allow more targeted policies to be put in place for those who are homeless due to immigration and address their specific needs accordingly.<sup>41</sup>
26. Reduce the multiple steps and prolonged timeframe required for safety and security-related noncompliance issue, appeals and terminations.
27. Re-evaluate aid pending shelter policy allowing individuals under appeal for safety and security-related noncompliance issues to stay in shelter program during appeal.

The Edward Davis Company's (EDC) comprehensive assessment of the EA Shelter System has revealed both strengths and critical areas for improvement in security protocols, operational efficiency, and policy enforcement. The recommendations put forth by EDC are aimed at enhancing security by strengthening identity verification, implementing standardized training for shelter staff, improving communication channels, and developing clearer policies regarding background checks, SORI results and resident placement. Additionally, revising uniform shelter rules to allow for unannounced inspections, ensuring provider presence at all shelter sites, and establishing separate accommodations for immigrant populations are among the proposed measures to bolster the overall safety and efficiency of the EA Shelter System.

EDC commends the Governor and Legislature for the recent proposed changes, many of which align with the recommendations we have put forth. By implementing these recommendations, The Commonwealth has the opportunity to create a more secure, transparent, and effective shelter system that balances the needs of its residents with the overarching goal of public safety. The success of these reforms will require continued collaboration between state agencies, shelter providers, and policymakers to ensure that security measures align with both legal mandates and humanitarian considerations. The findings of this assessment serve as a foundation for meaningful improvements that will ultimately strengthen the shelter system and enhance the well-being of all those it serves.

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<sup>41</sup> Denver for example has limited shelter stay for those seeking shelter from due to recent immigration to the state to 72 hours <https://www.westword.com/news/denver-mayor-marks-first-year-of-fight-to-end-homelessness-21231950>