



Dos Rios Continuum of Care Operating Manual

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CA-523-GOVERNANCE CHARTER

ARTICLE I: COC GOVERNANCE OVERVIEW

The Homeless Emergency Assistance and Rapid Transition to Housing Act of 2009 (HEARTH Act), enacted into law on May 20, 2009, consolidated the homeless assistance programs administered by HUD under the McKinney-Vento Homeless Assistance Act into a single grant program, and revises the Emergency Shelter Grants program and renames it the Emergency Solutions Grants program. The HEARTH Act also codifies into law the Continuum of Care (CoC) planning process, a longstanding part of HUD’s application process to assist homeless persons by providing greater community-wide coordination, decision-making, and leadership.

The Continuum of Care (CoC) Board is the group organized to carry out the responsibilities prescribed in the CoC Program Interim Rule. CoC governance responsibilities include:

- Planning for the CoC, Operating the CoC, and ensuring compliance with HUD requirements and regulations
- Coordinating the implementation of a housing and service system that meets the needs of the individuals and families who experience homelessness, including prevention and diversion strategies, outreach and engagement, coordinated assessment/entry, and exit, crisis shelter, emergency shelter, temporary housing, permanent housing, and supportive services
- Designing and implementing the process associated with applying for HUD CoC Program funds

The Governance Charter outlines the roles and responsibilities of the Dos Rios Continuum of Care Board, Continuum of Care Committee(s), the Lead Agency/Collaborative Applicant and the Homeless Management Information System (HMIS) Lead. This Governance Charter was developed by the Continuum of Care and HMIS lead agency in consultation with homeless housing and service providers in the CoC geography and other CoC governance body members through a committee and feedback process.

SECTION A: NAME

The name of the Organization shall be the Dos Rios Continuum of Care (CoC).

SECTION B: GEOGRAPHIC AREA

The Dos Rios Continuum of Care carries out its activities throughout the Counties of Colusa, Glenn and Trinity.

ARTICLE II: MISSION, VISION AND PURPOSE

SECTION A: MISSION

The Dos Rios Continuum of Care promotes equal access to, and effective use of, mainstream resources and funding to optimize the capacity of individuals and families experiencing homelessness to reach self-sufficiency.

SECTION B: VISION

The Dos Rios Continuum of Care envisions communities where every person is appropriately and safely housed with supportive services that will alleviate homelessness through increased outreach and prevention efforts and assistance towards improved health outcomes.

SECTION C: PURPOSE

The Continuum of Care is a community plan to organize and deliver housing and services to meet the specific needs of people who are homeless as they move to stable housing and maximum self-sufficiency. It includes action steps to end homelessness and prevent a return to homelessness. The CoC should:

1. Convene a network of providers and organizations that share ideas, concerns and resources applicable to homelessness issues; and
2. Fosters collaboration and coordination in addressing the needs of the homeless or at-risk of homelessness; and
3. Promotes equal access to effective utilization of mainstream programs and resources; and
4. Increases community awareness and advocates for homeless issues; and
5. Serves as the educator on the root causes of homelessness and the possible ways to improve the health outcomes for persons experiencing homelessness.

ARTICLE III. DOS RIOS CONTINUUM OF CARE BOARD

SECTION A: MEMBERSHIP

The Dos Rios CoC is required to establish a Governing Board to act on its behalf. Membership on the CoC Board ensures community wide commitment to preventing and ending homelessness and must represent a diverse body of stakeholders throughout the entire geographic area of the Dos Rios CoC. The intent is that the CoC be as inclusive as possible, to include the opinions and insights of various parties. The Dos Rios CoC Board is comprised of 11-21 members that represent the following categories and sub-populations in its membership:

- Non-Profit Homeless Assistance Providers [HUD required]
- DV Survivor Service Providers [HUD required]
- Faith-Based Organizations [HUD required]
- Government Entities [HUD required]
- Businesses [HUD required]
- Advocates [HUD required]
- Public Housing Agencies [HUD required]
- Department of Health and Human Services
- Mental Health Agencies [HUD required]

- Disability Services
- Family and Youth Services
- Hospitals and Health Care providers
- School Districts/McKinney Vento Liaisons [HUD required]
- Social Service and Community Action Providers [HUD required]
- Affordable Housing Developers [HUD required]
- Home ownership programs
- Law Enforcement [HUD required]
- Department of Corrections
- Legal Aid services
- Veteran Service Organizations [HUD required]
- Persons who are/have experienced homelessness [HUD required]
- Substance Abuse Providers
- Other relevant and interested parties [Members at Large]

CoC Board Membership

The Dos Rios Continuum of Care invites new members to join at any time of the year. The invitation is made public through written notice and other appropriate media, which may include emails and website announcements distributed by a wide range of stakeholders and members.

The General Membership is made up of representatives from non-profit, grassroots, community or faith-based organizations, public agencies, city government, service providers and citizens concerned with homelessness issues in the three-county region. Meetings are open to the public and occur once per quarter, at a minimum.

In order to become a member of the Dos Rios Continuum of Care Board, an individual/agency must take the following steps:

- Attendance at quarterly meetings making membership interest known
- Complete an Application Form (See Appendix A), and send to the CoC Coordinator or CoC Board Chair
- Subscribe to the purpose and basic policies of the Dos Rios CoC and whose admission will contribute to the purpose and basic policies of the CoC and whose admission will contribute to the CoC's ability to carry out its purposes

Levels of Membership

The following levels of membership exist:

- Non-Voting Members/General Membership
 - Non-voting members may be members of sub-committees
 - Non-voting members are attendees at CoC Board meetings that have not completed a Board Membership application or persons that don't necessarily represent a categorical membership seat
- Voting Members
 - Members who have completed a CoC Board Membership application that has been approved by the CoC Board has voting rights
 - No more than one staff person of a single organization may be a voting member of the Dos Rios CoC Governing Body Meetings

The Dos Rios Continuum of Care Board conducts no less than 11 meetings annually. Meetings and meeting minutes will be made public by email distribution and are open to public attendance. The CoC will open a time for public comment during each meeting. The CoC Board reserves the ability to hold executive or closed sessions.

Quorum

A majority of 51% of the voting members present at any CoC meeting will constitute a quorum at all meetings of the Dos Rios CoC Governing Body.

SECTION B: DECISION-MAKING

Robert's Rules of Order will be followed, and a simple majority of the voting membership is necessary for any resolution or vote to pass. For purposes of time-sensitive and/or critical votes an email vote may be used. On the direction of the CoC Board, e-votes may be initiated by the CoC Coordinator or Lead Agency. More than 51% of the voting membership must respond to the e-vote for the vote to be accepted.

Code of Conduct / Conflict of Interest / Recusal Process

In accordance with HUD regulations, no member may participate in or influence discussions or resulting decisions concerning the award of a grant or other financial benefits to the organization that the member represents. Therefore, any individual participating in or influencing decision making must identify actual or perceived conflicts of interest as they arise and comply with the letter and spirit of this policy. Individuals with a conflict of interest should abstain from discussion and voting on any issue in which they may have a conflict. An individual with a conflict of interest, who is the committee chair, shall yield that position during discussion and abstain from voting on the item.

Annual written conflict of interest disclosure statements (Appendix B) will be provided by each member at the annual meeting held in October. This form must be updated on a yearly basis. All members will not be permitted to participate in a discussion or if a voting member, not be able to vote, until the statement is on file. All voting members shall have the right to recuse themselves from voting on a matter without providing excuse.

SECTION C: RESPONSIBILITIES

The Dos Rios CoC Board has specific responsibilities as outlined by HUD in the Continuum of Care Interim Rule. The responsibilities required by the Continuum of Care by HUD in the Interim Rule and assigned to the CoC Board are outlined below, some in collaboration with other CoC entities.

Responsibility Category	Responsibility	Responsible Party
Establishing CoC	Define membership of The Continuum of Care	Continuum of Care Board
Establishing CoC	Invite new members annually	Continuum of Care/Lead Agency
Operating CoC	Hold meetings of full membership, with published agenda, at least quarterly	Continuum of Care Board/Lead Agency
CoC Governance and Management	Establish a Continuum of Care Board and designate its responsibilities	Continuum of Care Board
CoC Governance and Management	Reviewing the Written Selection Process for the Board	Continuum of Care Board
CoC Governance and Management	Develop the CoC Governance Charter	Continuum of Care Board
CoC Governance and Management	Review Governance Charter Annually	Continuum of Care Board
Coordinated Assessment	Develop a policy and procedure for	Continuum of Care Board/General

Responsibility Category	Responsibility	Responsible Party
System	Coordinated Assessment and Entry that will address the housing and service system for all populations and subpopulations	CoC Membership
Designate an HMIS	Ensure consistent participation of recipients and sub-recipients in HMIS	HMIS Lead Agency
Plan for the CoC	Participate in the Consolidated Plan	Lead Agency
Plan for the CoC	Consult with ESG Recipients	Continuum of Care Board/Lead Agency
Plan for the CoC	Approve annual application to HUD for Continuum of Care Program funding	Continuum of Care Board/Lead Agency

Responsibilities of the CoC Board may include:

- Receive community and public policy updates relevant to homelessness issues
- Receive updates on the Plan to Prevent and End Homelessness
- Provide input on strategic priorities for the Continuum of Care and Community Action Partnership
- Review and act on the annual funding allocations
- Review and act on additional HUD required activities
- Review and act on any proposed funding reallocations, as required
- Create an appeal process for providers
- Review and make final determination on provider appeals as recommended by the CoC Board

Additional responsibilities required of the CoC Board include:

- Set protocols and priorities for the rating and ranking process for the CoC funding competition, considering Dos Rios CoC system needs, system gaps, system and project performance, strategic goals, HUD threshold requirements and regulations, and HUD and local policy priorities
- Work with Lead Agency to set all CoC meeting agendas
- Work with Lead Agency on by-laws for the CoC, if appropriate for the agency structure
- Lead full CoC Board membership meetings
- Receive input from the full CoC Board membership and the strategic planning committee on priorities and goals for the CoC, and set those priorities on an annual basis
- Act as the official liaison for the consolidated-planning process and coordination with ESG jurisdictions
- Act as the appeals body for the CoC
- Serve as members of the CoC Project Rating and Ranking Committee, when needed
- Designate HMIS Lead, CoC Lead, and Collaborative Applicant for Dos Rios CoC, roles to be reviewed every 5 years
- Hold CoC committees accountable for fulfilling their responsibilities, and review the work of the committees

SECTION D: OFFICERS

Election of Officers

The Officers shall be elected by the Board at the annual Board meeting and shall serve for a term of one year, and each shall serve at the discretion of the Board until his or her successor shall be elected, or his or her earlier resignation or removal. Officers may be elected for an unlimited number of consecutive terms.

Removal of Officers

Subject to the rights, if any, of an Officer under any contract of employment, any Officer may be removed, with or without cause, (a) by the Board, at any regular or special meeting of the Board, or (b) by an Officer on whom such power of removal may be conferred by the Board.

Resignation of Officers

Any Officer may resign at any time by giving written notice to the Board or to the Lead Agency. Any resignation shall take effect at the date of the receipt of that notice or at any later time specified in that notice; and, unless otherwise specified in that notice, the acceptance of the resignation shall not be necessary to make it effective. Any resignation is without prejudice to the rights, if any of the CoC Board under any contract to which the Officer is a party.

Vacancies in Offices

A vacancy in any office because of death, resignation, removal, disqualification, or any other cause shall be filled in the manner prescribed in this Operating Policy for regular appointments to that office, provided that such vacancies shall be filled as they occur and not on an annual basis. In the event of a vacancy in any office other than the Chair such vacancy shall be filled temporarily by appointment by the Chair and the appointee shall remain in office for 60 days, or until the next regular meeting of the Board, whichever comes first. Thereafter, the position can be filled only by action of the Board.

SECTION E: RESPONSIBILITIES OF OFFICERS

Chair

The Chair shall preside at meetings of the Board and exercise and perform such other powers and duties as may from time to time be assigned to the position by the Board or prescribed by these Operating Policies.

Vice Chair

The Vice Chair shall, in the absence or disability of the Chair, perform all the duties of the Chair and, when so acting, have all the powers of and be subject to all the restrictions upon, the Chair. The Vice Chair shall have such other powers and perform such other duties as may be prescribed by the Board.

Secretary

The CoC Coordinator shall serve as Secretary. The Secretary shall attend to the following:

Operating Policies: The Secretary shall certify and keep or cause to be kept at the principal office of the Board the original or a copy of these Bylaws as amended to date.

Minute Book: The Secretary shall keep or cause to be kept a minute book for all Board and Committee meetings held.

Notice: The Secretary shall give, or cause to be given, notice of all meetings of the Board in accordance with these Operating Policies.

ARTICLE IV. DOS RIOS COC COMMITTEES

The Dos Rios CoC Board may establish Committees, Subcommittees, or Work Groups that are made up of the CoC members to act on behalf of the Dos Rios CoC on an ad-hoc basis. There will be six standing Dos Rios CoC Committees:

1. Point-in-Time Committee

Description: The Point in Time Committee consists of lead persons/entities in Colusa, Glenn and Trinity Counties that will take point on organizing events, volunteers, donations, meals, and staffing to conduct the annual point in time count. The CoC Coordinator will serve as single point of contact for the point in time count, in its entirety, but major assistance shall be provided from the Point in Time Committees in their respective areas of the continuum. These committees meet on a regular basis to plan, prepare and conduct the annual point in time count that occurs at the end of January.

2. HMIS/Coordinated Entry Process Committee

Description: The HMIS/Coordinated Entry Committee coordinates and develops the vulnerability assessment tool, coordinates the by name list through HMIS, develops and implements policies and procedures regarding the Coordinated Entry Process (CEP), implements HUD standards regarding the CES and trains continuum partners on the No Wrong Door Approach and how to use the assessment tools.

3. Ad-Hoc Workgroups

Description: Workgroups are developed on an as-needed basis. These workgroups are mission-specific committees created at the discretion of the Executive Committee and are meant to identify and resolve an identified task that is non-routine or special in nature.

4. CoC Project Rating and Ranking Committee

Description: The CoC Project Rating and Ranking Committee reviews grant applications and prioritizes/ranks them for inclusion in the CoC collaborative application annually to HUD. This committee also reviews sub-recipient grant applications for the competitive and non-competitive components of the Balance of State Funding allocation for Emergency Solutions Grant (ESG) funding.

Specific responsibilities are listed below:

- **Point in Time Committee**

- In collaboration with the CoC Lead agency, organize and implement the annual Point in Time Count
- Must include representation from HMIS Lead Agency
- Should include a person who is homeless or formerly homeless

- **HMIS/Coordinated Entry Committee**

- Provide macro-level CoC oversight of the Coordinated Entry System/By Name List
- In coordination with the Coordinated Assessment and Entry System administering agency, troubleshoot any issues
- Make recommendations to the CoC Board and the CoC membership on any macro-level changes for system improvement
- Must include representation from the CoC Lead Agency
- Should include a person who is homeless or formerly homeless

- **Ad Hoc Workgroups**

- Set annual priorities, goals and objectives for improving the Dos Rios CoC to prevent and end homelessness in the continuum
- Make strategic planning recommendations to the CoC Board
- Must include representation from the CoC Lead Agency

- **Project Rating and Ranking Committee**
 - Score and rank projects and provide the ranking recommendation to the CoC Board
 - Homeless Services agencies that are requesting CoC funding are prohibited from participating on this committee
 - Members are selected from the CoC Board so that housing experience and CoC priorities/funding are understood

SECTION A: RESPONSIBILITIES

The Dos Rios CoC Board gives authority to the CoC Committees for specific responsibilities. The responsibilities required by the CoC Interim Rule, and designated to each committee, are outlined below:

Responsibility Category	Responsibility	Responsible Party
Overall and Project-Level Performance	Establish performance targets in consultation with recipients/sub-recipients	Executive Committee
Overall and Project-Level Performance	Monitor recipient/sub-recipient performance	Executive Committee
Overall and Project-Level Performance	Evaluate outcomes for ESG and CoC Projects and report to HUD	Executive Committee
Overall and Project-Level Performance	Measure system performance	Executive Committee
Coordinated Assessment System	Ensure operation of a Coordinated Assessment System in consultation with ESG	Coordinated Assessment Committee
Coordinated Assessment System	Develop a policy for how Coordinated System and Housing and Service Systems will address needs of Domestic Violence	Continuum of Care Board/ Coordinated Assessment Committee
Plan for the CoC	Plan and Conduct a Point-in-Time Study	Point in Time Committees
Plan for the CoC	Conduct an annual gaps analysis of homeless needs and services	Executive Committee/Continuum of Care Board

SECTION B: COMMITTEE MEMBERSHIP

Outside of the Rating and Ranking Committee in which membership is selected from the CoC Board, Committee/Sub-committee membership will be on a volunteer basis. Efforts will be made by the CoC Board to recruit participation from individual or agencies with particular knowledge and/or skill sets to assist with committee tasks as deemed helpful and/or necessary. Volunteers for the Committee/Sub-committees will be accepted at quarterly CoC Board meetings when the need for such committee presents itself; requests for rating/ranking committee membership may also be done via electronic means if the need arises between CoC meetings. The CoC Board will designate any required staff, either from the Lead Agency or from an outside source, to participate in Committees/Sub-committees.

Each Committee will elect a chair person to lead the Committee/Sub-committee through the assigned tasks for the year

SECTION C: MEETINGS

Committees meetings may be open to the public, and agendas can be made public, if requested. However, non-committee members may be excluded from participating in certain committee-level decisions or discussions at the will of the committee chair person.

Committees will determine how often they will meet as a group to achieve their assigned tasks.

Code of Conduct / Conflict of Interest / Recusal Process

In accordance with HUD regulations, no member may participate in or influence discussions or resulting decisions concerning the award of a grant or other financial benefits to the organization that the member represents. Therefore, any individual participating in or influencing decision making must identify actual or perceived conflicts of interest as they arise and comply with the letter and spirit of this policy. Disclosure should occur at the earliest possible time and if possible, prior to the discussion of any such issue. Individuals with a conflict of interest should recuse themselves from discussion on any issue in which they may have a conflict.

Annual written disclosure statements will be provided by each member by at the annual meeting. Members will not be permitted to participate in any discussion until the statement is on file (Reference Appendix B).

ARTICLE V. REVIEWING AND UPDATING THE COC GOVERNANCE CHARTER AND THE OPERATING MANUAL

SECTION A: PROCESS FOR UPDATING GOVERNING DOCUMENTS

Once every year the Dos Rios CoC Board must review this CoC Governance Charter and Operating Manual. Members of the CoC Board, Collaborative Applicant, Lead Agency, or HMIS Lead may make suggestions for updating. It is the Lead Agency's responsibility to review HUD rules, regulations, and guidance and to suggest updates to the Governance Charter as required by HUD. The updates must be presented to the CoC Board prior to the Annual Meeting. Updates to the Governance Charter and Operating Manual require two meetings: the first to review changes, and the second to vote. A simple majority is required by the CoC Board at the Annual Meeting.

ARTICLE VI. COC PROGRAM GRANT

Regulatory Citation: CFR 578.7, 578.7(a) (9) (iii) and (iv), 578.37(a) (1) (ii)

HUD Guidance Documents and Resources:

Continuum of Care Program Roadmap <https://www.hudexchange.info/resources/documents/CoC-Program-Roadmap-Prezi-Slides.pdf>

SECTION A: CONTINUUM OF CARE LEAD AGENCY

The Dos Rios Continuum of Care Board must appoint a Lead Agency that will provide meeting support for the Dos Rios CoC Board, CoC Board and all other committees. The Lead Agency is responsible for

scheduling meetings, developing agendas, issuing meeting materials and posting all relevant documents to the Dos Rios Continuum of Care website.

The designation of the Lead Agency is valid for a maximum of five (5) years before the designation must be reviewed and renewed by the Dos Rios Continuum of Care Board. No requirement for a Request for Proposal (RFP) will be made if no other agencies are interested and this step is unnecessary. In response to negligence or poor performance of the CoC Lead Agency, the CoC reserves the right to open an RFP process prior to the five-year mark and designate a new CoC Lead Agency.

The designated Lead Agency is the Colusa, Glenn, Trinity Community Action Partnership.

SECTION B. COLLABORATIVE APPLICANT

The Continuum of Care must designate a legal entity who is also a Continuum of Care Program eligible applicant to serve as the Collaborative Applicant. The Collaborative Applicant is responsible for collecting and combining the required application information from all Continuum of Care Program funded projects within the geographic area. The Collaborative Applicant is also responsible for submitting the annual application to HUD for Continuum of Care Program funding and to apply for Continuum of Care Planning dollars. The designation of the Collaborative Applicant is valid for a maximum of five (5) years before the designation must be reviewed and renewed by the Dos Rios Continuum of Care Board. In response to negligence, poor performance, or loss of eligibility, the CoC Board reserves the right to open an RFP process prior to the five-year mark and designate a new Collaborative Applicant.

Before the submission of the annual application to HUD for Continuum of Care Program funding, the Collaborative Applicant must submit a final draft of the application to the Dos Rios CoC Board for approval. Depending on the timing of the submission to HUD, the Collaborative Applicant will create a timeline for submission to the Dos Rios Continuum of Care.

The designated Collaborative Applicant is the Colusa, Glenn, Trinity Community Action Partnership.

SECTION C: HMIS LEAD

The Continuum of Care must designate a legal entity who is also a Continuum of Care Program eligible applicant to serve as the Homeless Management Information System (HMIS) Lead. The HMIS Lead will maintain the community's HMIS in compliance with HUD standards and coordinate all related activities including training, maintenance, and the provision of technical assistance to contributing organizations. Responsibilities required by the Continuum of Care Interim Rule are outlined in Section IX of this Operating Manual.

The designation of the HMIS Lead is valid for a maximum of five years before the designation must be reviewed and renewed by the Dos Rios Continuum of Care Board. No requirement for a Request for Proposals (RFP) will be made if no other agencies are interested and this step is unnecessary. In response to negligence or poor performance of the HMIS Lead, the CoC reserves the right to open an RFP process prior to the five-year mark and designate a new HMIS Lead.

The designated HMIS Lead is the NorCal Continuum of Care, linked to the CA-516 CoC, with the Shasta County Housing Authority and Community Action Agency serving as lead.

SECTION D: GRANT INVENTORY WORKSHEET

In consultation with each of the CoC's Program project applicants and the local HUD Housing and Community Development field office, the Collaborative Applicant is responsible to assure the timely submission and accuracy of the Grant Inventory Worksheet (GIW). The GIW is used to calculate the CoC's Annual Renewal Demand for funding to be considered for the annual CoC Program Grant Competition (as of July 2018 CA-523 does not receive CoC funding and does not have a GIW to verify annually).

SECTION E. PROJECT EVALUATION, MONITORING AND PERFORMANCE REPORTING

The Collaborative Applicant will utilize its Continuum of Care Planning Grant to provide program monitoring, evaluation and reporting of CoC activities and programs funded by the CoC Program Grant.

The Collaborative Applicant will maintain and review HMIS, Annual Performance Reports and other documentation as necessary to measure the Continuum of Care's progress in meeting HUD CoC Program Grant goals and objectives.

The Continuum of Care Board of Directors may establish additional performance measurement requirements as necessary to report progress on local goals and objectives. Collaborative Applicant consultant staff will communicate with CoC Program Recipient Agencies throughout each program year to ensure that they are aware of expected performance measures required by HUD and the Continuum of Care Board of Directors.

All CoC Program Grant Recipients and Sub-recipients (if any) are required to provide the following documents to the Collaborative Applicant:

- Final eSNAPS Project Application
- Leverage Documentation
- Match Documentation, if required by funding source
- Quarterly report on LOCCS drawdowns of CoC Program funds

SECTION F: COC SYSTEM PERFORMANCE MEASURES

1. The length of time people REMAIN homeless;
2. The extent to which people RETURN to homelessness;
3. The total NUMBER of homeless people in your community;
4. INCOME GROWTH for homeless people;

5. The number of people who become homeless for the FIRST time;
6. Extent of returns to homelessness plus successful housing placements for people who are Category 3;
and
7. Successful HOUSING PLACEMENTS from homeless projects.

SECTION G: MID-TERM PROGRAM EVALUATION POLICY

The Collaborative Applicant will provide mid-term project evaluations of CoC Program projects to measure individual Recipient Agency progress in achieving project goals established in the CoC Program Application and the Recipient Agency Project. This evaluation assistance will be performed after six months of a program year for all program grants including one-year renewals or multi-year projects.

- i. Collaborative Applicant will contact service provider/agency at the midpoint of their operating term.
- ii. The Collaborative Applicant will ensure that the HMIS Administrator reviews an Annual Performance Report from the HMIS system inclusive of program data from the operation start date to the midpoint review date. The HMIS Administrator will generate a monthly project progress report that will include: progress in achieving project goals; contributions to meeting CoC level performance goals; and areas of concern for improvements. Examples of areas of concern include missing data elements within the HMIS, data not consistent with agency targets as outlined in the program's original agency application, or significant shortfalls in performance targets.
- iii. The HMIS Administrator will submit the progress report to the Board Chair, the CoC Coordinator and the designee of the Recipient Agency. Technical assistance will be provided upon request of the agency or as determined needful by the Collaborative Applicant. Technical assistance may include:
 - a) Review of client roles for accurate enrollment and exit documentation
 - b) Supplemental HMIS training
 - c) Review of agency records related to mainstream benefits enrollments, approvals and denials for the prior quarter
- iv. The Collaborative Applicant will provide documentation of all program monitoring, evaluation and technical assistance for recipients and sub-recipients and maintain copies of all reports and correspondence in the official CoC project files.

SECTION H: ANNUAL PERFORMANCE REPORTS (APR)

Annual Performance Reports are used in the development of annual project performance score cards and for the aggregate CoC-wide achievements in meeting HUD Goals and Objectives reported in the CoC Program Grant.

The Collaborative Applicant will work with each CoC Recipient in the preparation of their Annual Performance Report. Final APRs will be reviewed and approved by the Collaborative Applicant prior to submission in the HUD electronic reporting system "eSNAPS" in order to confirm that data being reported

to HUD is consistent with data reported in the local HMIS system.

SECTION I: APR APPROVAL PROCEDURES

- i. The Collaborative Applicant's CoC Coordinator will contact the CoC Program Recipient Agency within one week of the expiration of each program year to initiate an APR data review and confirm APR due date.
- ii. At initial APR data review, the Collaborative Applicant's HMIS Administrator will provide a first draft APR to agency staff through the HMIS System and will include a report of any findings to be adjusted by agency staff. Examples of findings include missing data or data not consistent with agency targets as outlined in the program's original agency Continuum of Care Program application.
- iii. The Collaborative Applicant's CoC Coordinator will consult with Recipient Agency to determine a planned submission date of the APR to eSNAPS that will be set prior to the HUD submission deadline. This planned submission date will take into consideration time allotted for any corrections that need to be made to HMIS data prior to submission in eSNAPS.
- iv. The Collaborative Applicant's Board will conduct a final data review no later than the second week of the month of the HUD submission deadline to ensure that any necessary findings were corrected in HMIS and will send a final HMIS APR version to recipient agency staff to be used for eSNAPS data entry.
- v. The Recipient Agency will send a copy of their eSNAPS APR to the Collaborative Applicant for verification prior to submitting to HUD.
- vi. The Recipient Agency will use the Collaborative Applicant approved APR to complete their APR in eSNAPS and will send a final version of the eSNAPS generated APR to the Collaborative Applicant for the official CoC Planning files.

SECTION J: ANNUAL PERFORMANCE SCORECARDS FOR COC PROGRAM GRANT COMPETITION (WHEN FUNDS ARE AVAILABLE)

When eligible, the Collaborative Applicant, through its HMIS Administrator, will draft an annual CoC Program Grant Project Scorecard template to be used as a tool for prioritization and funding in the CoC Program Grant local competition. The Draft Scorecard will be approved by the CoC Board of Directors prior to the CoC Program Grant local competition. Scorecard elements will reflect performance measures for both HUD and local CoC priorities, goals and objectives.

- i. CoC Program Projects Scorecard Procedures:
 - a) The Collaborative Applicant will populate the individual Preliminary Project Scorecards for review by the recipient agency. Agencies will review for data accuracy and final performance measures will be confirmed from APR and other HMIS and Collaborative Applicant records.
 - b) Agencies will have the opportunity to provide a narrative response to any performance measure as part of the final Project Scorecard.
 - c) The complete scorecard with comments will be included in the local CoC Program competition application.

ii. Actions against Poor Performance

CoC Program recipients who do not meet local and/or HUD performance targets and/or do not meet expectations and compliance of program and grant management of their CoC programs, as documented in either (or both) the CoC Score Card or monitoring and evaluation reports, may be subject to having their projects reduced in whole, or in part, and reallocated to other projects during the local competition for Continuum of Care Project Funding; this renewal process is guided by the Grant Review Committee and is directed by the HUD Notice of Funding Availability. (Emergency Solutions Grant recipient's actions against poor performance are detailed in the ESG section of the policies and procedures.)

The CoC will work with each program recipient on the root causes of poor performance and target actions that will improve program outcomes and performance targets.

SECTION K: APPLICATION FOR COC PROGRAM GRANT FUNDS (WHEN FUNDS ARE AVAILABLE TO THIS COC)

Upon HUD issuance of the CoC Grant Notice of Funding Availability (NOFA), the Collaborative Applicant will prepare a master timeline of the CoC Program Grant process, and will conduct the following steps to assure a well communicated process for organizations to develop project applications for CoC Program Funds to include, but not limited to:

- i. Establish all application, review and announcement deadlines sufficient to achieve reasonable public participation in the grant process and allow for timely submission to HUD
- ii. Issue the local letters of intent and request for proposals for CoC Program Funds
- iii. Publicize the request for proposals announcement through the Collaborative Applicant website, list-serve, and email broadcasts
- iv. Conduct a briefing on the CoC Program Grant Application process in advance of deadlines
- v. Prepare applications for prioritization and rating and ranking; use APR data to demonstrate applicant effectiveness and program outcomes (performance standards)
- vi. Assist project applicants in the submission of application into eSNAPS

SECTION L: COC PROJECT RANKING, RATING AND FUNDING DECISION PROCESS (WHEN FUNDS ARE AVAILABLE TO THIS COC)

The Continuum of Care Board of Directors shall appoint a Grant Review Committee whose primary purpose will be to conduct the project rating and ranking, inclusive of funding decisions for the Continuum of Care Program local competition. The Committee may also serve in other prioritization and funding allocation capacities as determined by the CoC Board of Directors.

The CoC Board will appoint the Chair of the Grant Review Committee and make an annual call for volunteer members. The CoC Board will appoint up to five (5) Grant Review Committee Members.

ARTICLE VII.COC PLANNING

SECTION A: COC STRATEGIC PLAN

The Collaborative Applicant shall draft and maintain a ten-year Continuum of Care Strategic Plan to be reviewed and approved by the CoC Board. The plan will contain at minimum:

- a. HUD Goals
- b. Continuum of Care Goals
- c. HUD Objectives
- d. Continuum of Care Local Objectives
- e. Action Items that identify who and what steps will be taken to address the objectives and achieve the goals
- f. Performance Measures

SECTION B: SYSTEM-WIDE PERFORMANCE MEASUREMENTS

The Collaborative Applicant is charged with collecting and reporting Continuum of Care System Performance Measures. These measures will include at a minimum:

- a. Length of time persons remain homeless;
- b. The extent to which persons who exit homelessness to permanent housing destinations return to homelessness;
- c. Number of homeless persons;
- d. Jobs and income growth for homeless persons in CoC Program-funded projects;
- e. Number of persons who become homeless for the first time;
- f. Homelessness prevention and housing placement of persons defined by Category 3 of HUD's homeless definition in CoC Program-funded projects;
- g. Successful housing placement;

The purpose of these measures is to provide a more complete picture of how successful our community is preventing and ending homelessness. The number of homeless persons measured directly assesses the CoC's progress toward eliminating homelessness by counting the number of people experiencing homelessness both at a point in time and over the course of a year. The six other measures help the CoC to understand how well they are reducing the number of people who become homeless and helping people become quickly and stably housed.

Reductions in the number of people becoming homeless are assessed by measuring the number of persons who experience homelessness for the first time (#5), the number who experience subsequent episodes of

homelessness (#2), and homelessness prevention and housing placement for people who are unstably housed (Category 3 of HUD's homelessness definition) (#6). Achievement of quick and stable housing is assessed by measuring length of time homeless (#1), employment and income growth (#4), and placement when people exit the homelessness system (#7).

The performance measures are interrelated and, when analyzed relative to each other, provide a more complete picture of system performance. Data Quality and Standards are addressed in the HMIS policies and procedures.

SECTION C: NEEDS AND GAPS ANALYSIS

The Collaborative Applicant is responsible for conducting and reporting to the CoC Board an annual gap and needs analysis of housing and services in the homeless system of care. The Collaborative Applicant may use HMIS data, performance data, and point in time surveys, agency surveys for data collection.

SECTION D: POINT IN TIME COUNT

Regulatory Citation: **HUD Guidance Documents and Resources:** Notice CPD-16-060: 2017 HIC and PIT of Homeless Persons Data Collection Guidance

<https://www.hudexchange.info/resources/documents/Notice-CPD-16-060-2017-HIC-PIT-Data-Collection-Notice.pdf>

The Continuum of Care Collaborative Applicant will lead the Continuum of Care in conducting and annual point in time count of the homeless in compliance with HUD standards. The count date will be scheduled in consultation with all service providers to coordinate the count CoC-wide.

The sheltered count will be conducted using the HMIS system and its equivalent for non-contributing HMIS organizations. The unsheltered count will be conducted using a comprehensive geographical blitz strategy.

The CoC will conduct only a basic (sheltered) point in time count during even numbered year and an enhanced (sheltered and unsheltered) point in time count and homeless needs survey during odd numbered years.

The Collaborative Applicant will report the results of the point in time count at public meetings and forums during the second quarter of the year known as the HIC/PIT Summary.

The Collaborative Applicant is responsible for reporting the point in time findings to HUD accurately and on time through the Homeless Data Exchange system (HDX). The Collaborative Applicant is the recognized administrator and manager of the CoC's HDX account.

SECTION E: HOUSING INVENTORY CHART (HIC)

Regulatory Citation. HUD Guidance Documents and Resources: Notice CPD-17-080: 2018 HIC and PIT of Homeless Persons Data Collection Guidance

<https://www.hudexchange.info/resources/documents/Notice-CPD-17-08-2018-HIC-PIT-Data-Collection-Notice.pdf>

In consultation with each of the CoC's Program project applicants the Collaborative Applicant is responsible to assure the timely submission and accuracy of the Housing Inventory Chart (HIC) The HIC represents the official inventory of housing available within the CoC for emergency shelter, safe haven, transitional, permanent supportive, permanent, and other permanent housing exclusively for persons experiencing homelessness. The HIC is used to calculate the CoC's unmet need for housing, as well as for calculating beds dedicated and prioritized for the chronically homeless.

ARTICLE VIII. COC COORDINATED ENTRY/ASSESSMENT PROCESS

SECTION A: PURPOSE

Provisions at 24 CFR 578.7(a) (8) requires that the CoC establish a coordinated entry/assessment process. The Coordinated Entry/Assessment (CEP) Process must incorporate and defer to any funding requirements established under the CoC Program interim rule, ESG Program interim rule, or a Notice of Funding Availability under which a project is awarded.

The CoC is responsible for coordinating and implementing a system to meet the needs of individuals and families experiencing homelessness within the CoC. Both the ESG Rules and Regulations and the Homeless Emergency Assistance and Rapid Transition to Housing (HEARTH) CoC Program Interim Rules state that the CoC, in consultation with recipients of Emergency Solutions Grants program funds within the geographic area must:

- Establish and consistently follow written standards for providing Continuum of Care assistance;
- Establish performance targets appropriate for population and program type; and
- Monitor recipient and sub recipient performance.

These written standards are in accordance with the interim rule for the ESG Program released by the U.S. Department of Housing and Urban Development (HUD) on December 4, 2011, the final rule for the definition of homelessness also released by the HUD on December 4, 2011; and the CoC Program Interim Rule released by HUD on July 31, 2012. There are some additional standards outlined in this document that have been established by the CoC to assist programs in meeting and exceeding performance outcomes that will help the CoC's reach the goal of ending homelessness.

These written standards have been developed in conjunction with CoC and ESG recipients and with service providers to allow for input on the procedure of Coordinated Entry/Assessment process, standards, performance measures and the process for full implementation of the standards throughout the CoC from the perspective of those organizations that are directly providing homeless housing and

services, Emergency Shelter (ES), Transitional Housing (TH), Permanent Supportive Housing (PSH), Rapid Re-housing (RRH) and Supportive Services Only (SSO).

The Coordinated Entry Written Standards:

- Assist with the coordination of service delivery across the geographic area (specific to each county), and are the foundation of the coordinated entry system;
- Consistently assist in assessing individuals and families to determine program eligibility;
- Assist in administering programs fairly and methodically;
- Establish common performance measurements for all CoC components; and
- Provide the basis for the monitoring of all CoC and ESG funded projects.

The written standards have been established to ensure that persons experiencing homelessness who enter programs throughout the CoC will be given similar information and support to access and maintain permanent housing. All programs that receive ESG or CoC funding are required to abide by the written standards adopted by the CoC. Agency program procedures should reflect the policy and procedures described in this document. The CoC strongly encourages programs that do not receive either of these sources of funds to accept and utilize these written standards.

Beginning in 2016, ESG and CoC funded recipients will be required to have signed grant agreements stating that they agree to participate in the Coordinated Entry System for their respective county. The written standards will be reviewed and revised, as needed, and no less than once per year. Agreement to abide by the written standards is a condition of being approved for CoC and/or ESG funding.

CA-523's Coordinated Entry Process is designed to identify, engage, and assist homeless individuals and families that will ensure those who request or need assistance are connected to proper housing and services.

SECTION B: WRITTEN STANDARDS

The Coordinated Entry Policies and Procedures will govern the implementation, governance, and evaluation of the Coordinated Entry/Assessment Process (CEP) in CA-523. It is expected that the standards will adjust as programs evolve, members gain more experience, and HMIS data from programs and services is analyzed. These written standards serve as the guiding principles for funding ESG and CoC programs. These policies may only be changed by the approval of the CoC Board based on recommendations from CE participating agencies. These policies will be reviewed annually in accordance with the CoC Board Governance Charter and By-Laws, when applicable.

SECTION C: OVERVIEW OF COORDINATED ENTRY/ASSESSMENT

Coordinated Entry/Assessment is considered one of the many interventions in a community's united effort to end and prevent homelessness. The process works best and provides the greatest value if it is driven by "What does the client need" rather than by provider eligibility. Coordinated entry/assessment

refers to the process used to assess and assist in meeting the housing needs of people at-risk of homelessness and people experiencing homelessness. Key elements of coordinated assessment include:

- A designated set of coordinated assessment locations and staff members;
- The use of standardized assessment tools to assess consumer needs;
- Referrals, based on the results of the assessment tools, to homelessness assistance programs (and other related programs when appropriate);
- Capturing and managing data related to assessment and referrals in a Homeless Management Information System (HMIS); and
- Prioritization of consumers with the most barriers to returning to housing for the most cost- and service-intensive interventions.

The implementation of coordinated assessment is considered a national best practice. When implemented effectively, coordinated assessment can:

- Reduce the amount of research and the number of phone calls people experiencing homelessness must make before finding crisis housing or services;
- Reduce new entries into homelessness through coordinated system wide diversion and prevention efforts;
- Prevent people experiencing homelessness from entering and exiting multiple programs before getting their needs met;
- Reduce or erase entirely the need for individual provider wait lists for services;
- Foster increased collaboration between homelessness assistance providers; and
- Improve a community's ability to perform well on Homeless Emergency Assistance and Rapid Transition to Housing (HEARTH) Act outcomes and make progress on ending homelessness.

SECTION C: RESPONSIBILITIES OF THE CONTINUUM OF CARE

The CoC program includes emergency shelter, transitional housing, permanent supportive housing, rapid re-housing, permanent housing, supportive services, and the Homeless Management Information System. A CoC is a geographically based group of representatives that conducts the planning responsibilities of the CoC program, as set for the in 24 CFR part 578. These representatives come from organizations that provide services to the homeless or represent the interests of the homeless or formerly homeless. The three major duties of a CoC are to (1) operate the CoC; (2) designate a HMIS for the CoC; and (3) develop a plan for the CoC. The Coordinated Entry/Assessment System must incorporate and defer to any funding requirements established under the CoC Program interim rule, ESG Program interim rule, or a Notice of Funding Availability (NOFA) under which a project is awarded.

The CoC Interim Rule defines several responsibilities of the Continuum of Care (578.7 (a) (8)). One of these responsibilities is to establish and operate either a centralized or coordinated assessment system, in consultation with recipients of ESG program funds within the geographic area. This coordinated entry/assessment system provides an initial, comprehensive assessment of the needs of individuals and families for housing and services.

The Continuum must develop a specific policy to guide the operation of the centralized or coordinated assessment system on how its system will address the needs of individuals and families who are fleeing, or attempting to flee, domestic violence, dating violence, sexual assault, or stalking, but who are seeking shelter or services from non-victim service providers. This system must comply with any requirements established by HUD by Notice.

A coordinated entry/assessment system is defined to mean a coordinated process designed to coordinate program participant intake, assessment, and provision of referrals. A coordinated entry/assessment system covers the geographic area by county, is easily accessed by individuals and families seeking housing or services, is well advertised, and includes a comprehensive and standardized assessment tool. This definition establishes basic minimum requirements for the Continuum's coordinated entry process.

Another responsibility of the Continuum, in consultation with recipients of ESG program funds within the geographic area, is to establish and consistently follow written standards for providing CoC assistance. At a minimum, these written standards must include:

- Policies and procedures for evaluating individuals' and families' eligibility for referrals and assistance;
- Policies and procedures for determining and prioritizing which eligible individuals and families will receive transitional housing assistance;
- Policies and procedures for determining and prioritizing which eligible individuals and families will receive rapid re-housing assistance;
- Standards for determining what percentage or amount of rent each program participant must pay while receiving rapid re-housing assistance;
- Policies and procedures for determining and prioritizing which eligible individuals and families will receive permanent supportive housing assistance.

CEP is important in ensuring the success of homeless assistance and homeless prevention programs in communities. In particular, such assessment systems help communities systematically assess the needs of program participants and effectively match each individual or family with the most appropriate resources available to address that individual or family's particular needs.

The coordinated entry process for CA-523 covers the entire geographic region of the continuum; however, the CoC uses two separate coordinated entry processes that each cover a portion of the CoC-by county. Because of funding received into the CoC through its ESG and CoC funded service providers from city and county public governments, it is impractical for the CoC to assess an individual in one part of the CoC and access assistance in other parts of the CoC. The CE process in Glenn County utilizes the lead provider as the coordinated entry point for both Glenn and Colusa Counties; however, Trinity County uses a lead provider as the coordinated entry point.

SECTION D: TARGET POPULATION

This process is intended to serve people experiencing homelessness and those who believe they are at imminent risk of homelessness who reside in Colusa, Glenn or Trinity Counties. Homelessness will be defined in accordance with the official HUD definition of homelessness. People at imminent risk of homelessness are people who believe they will become homeless, per the HUD definition within the next 72 hours. People who think they have a longer period of time before they will become homeless should be referred to other prevention-oriented resources available in the community.

SECTION E: GOALS OF COORDINATED ENTRY/ASSESSMENT

Most communities lack the resources needed to meet all the needs of people experiencing homelessness. This combined with the lack of well-developed coordinated entry processes has resulted in severe hardships for people experiencing homelessness. They often endure long waiting periods to receive assistance or are screened out of needed assistance.

The CEP is intended to increase and streamline access to housing and services for households experiencing homelessness, match appropriate levels of housing and services based on their needs, and prioritize persons with severe service needs for the most intensive interventions. CEP helps communities prioritize assistance based upon vulnerability and severity of service needs to ensure that people who need assistance the most can receive it in a timely manner. The CEP also provides information about service needs and gaps to help communities plan their assistance and identify needed resources.

HUD's primary goals for coordinated entry processes are:

- Assistance will be allocated as effectively as possible
- Assistance is easily accessible no matter where or how people present

The CoC Coordinated Entry Team members identified the following common goals for the Coordinated entry/Assessment Process:

- The process will not be burdensome on the client, and will provide quick and seamless entry into homelessness services
- Individuals and families will be referred to the most appropriate resource(s) for their individual situation
- The process will prevent duplication of services
- The process will reduce length of homelessness
- The process will improve communication among agencies

SECTION F: GUIDING PRINCIPLES

The goal of CA-523's coordinated assessment process is to provide each consumer with adequate services and supports to meet their housing needs, with a focus on returning them to housing as quickly as possible. All potential program participants and referrals to the program will follow the CoC's Coordinated Entry system protocols established herein; including, pre-screening, and screening for program eligibility and prioritization. Below are the guiding principles that will help CA-523 meet these goals.

- **Adopt statewide standards and** allow flexibility for local customization beyond baseline standards.
- **Prioritization.** Consumers with the greatest needs receive priority for any type of housing and homeless assistance, including interventions, available in the CoC. Limited resources should be directed first to persons and families who are most vulnerable*. Less vulnerable persons and families will be assisted as resources allow. *Vulnerability will be defined locally-i.e. in each county.
- **Low Barrier.** Consumers who may have perceived barriers (drug or alcohol use, a criminal record, lack of employment, etc.) to housing or services are not screened out of assistance.
- **Person-Centered.** Consumers will be given information about the programs available to them and have some degree of choice about which programs they want to participate in. Choice can include location and type of housing level of services, and other options about which households can participate in decisions. Consumers will also be engaged as key and valued partners in the implementation and evaluation of coordinated assessment through forums, surveys, and other methods designed to obtain their thoughts on the effectiveness of the coordinated assessment process.
- **Fair and Equal Access.** All persons in the CoC's geographic region have fair and equal access to the CE process, regardless of how or where they present for services. Consumers can easily access the CE process in person, by phone or other method and the process for accessing help is marketed/advertised. Consumers should be treated with dignity, offered at least minimal assistance, and participate in their own housing plan. Ongoing opportunities for consumer's participation in the development, oversight, and evaluation of coordinated assessment is provided. Consumers should be offered choice whenever possible.
- **Referrals/Collaboration.** Because coordinated assessment is being implemented system wide, it requires a great deal of collaboration between the CoC's providers, mainstream assistance agencies (e.g., Department of Health and Human Services, hospitals, and jails), funders, and other key partners. This spirit of collaboration will be fostered through open communication, transparent work by a strong governing board of directors, consistently scheduled meetings between partners, and consistent reporting on the performance of the coordinated assessment/entry process.
- **Standardized Access and Assessment.** All CE locations and methods offer the same assessment approach and referrals are made using uniform decision-making processes.
- **Emergency Services.** Consumers are not delayed access to emergency shelter or services. Consumers can access emergency services at all hours, to the extent that shelter is available, and then receive an assessment the following day. Consumers are provided access to emergency shelter without barriers or preconditions, including, but not limited to: sobriety, ability to pay program fees, evictions, etc.
- **Informing Local Planning.** Information gathered thorough the CE process is used to guide homeless assistance planning and system change efforts in each community.
- **Leverage Local Attributes and Capacity.** The physical and political geography, including the capacity of partners in each community, and the opportunities unique to the community's context, inform local CE efforts.
- **HMIS/Comparable Database.** Data collection on people experiencing homelessness is a key component of the coordinated assessment process. Data from the assessment process that reveals what resources consumers need the most will be used to assist with reallocation of funds and other

funding decisions. To capture this data accurately, all assessment staff and providers must enter data into HMIS (except for some special populations and other cases, outlined later in this document) in a timely fashion. Consumers' rights concerning data will always be made explicit to them, and no consumer will be denied services for refusing to share their data.

- **Performance-Driven Decision Making.** Decisions about and modifications to the CE process will consumers are offered a wide range of supportive services that focus primarily on helping them maintain their housing.

SECTION G: KEY ELEMENTS OF CA-523'S CE SYSTEM

Definitions

A list of definitions of terms used in this document are described in Section IX.

Requirements:

CA-523 has adopted HUD's Notice CPD 14-012 on the Prioritizing Person's Experiencing Chronic Homelessness and other Vulnerable Homeless Persons in Permanent Supported Housing and Record Keeping Requirements for Documenting Chronic Homeless Status, which are summarized in Appendices C, D and E.

SECTION H: PRE-SCREENING

All potential consumers will be pre-screened and asked several questions to determine if they are homeless or at risk of imminent homelessness. If they are screened and it is determined that they meet the criteria, they will be offered a more thorough assessment to identify their specific needs. Guiding principles for this process include:

- The pre-screening tool will be the same regardless of access point;
- If the program that is triaging is also a service provider, the pre-screening tool can be combined with a deeper intake assessment;
- The pre-screen is meant to shelter or divert an individual or family experiencing, or at risk of homelessness;
- The pre-screen may be different by service hub (i.e. phone, no wrong door); and
- The tool will ask about 6 questions, but the person asking can ask additional clarifying questions

SECTION I: SCREENING, REFERRAL AND ASSESSMENT

All referrals to housing programs, including screening for eligibility and prioritization occur according to the CoC's Coordinated Entry Process. Consumers may present at any CoC/ESG funded service provider agency for access to the Coordinated Entry Process, where they will be screened, assessed and referred to services; this is known as the No Wrong Door approach (Section L below).

Upon contact with any funded service provider, the consumer will be asked questions utilizing the pre-screening assessment tool administered by the agency where the consumer presented. From the pre-

screen, consumers will receive appropriate referrals to service providers who will conduct a full intake assessment for entry into the housing programs funded by HUD's ESG and CoC programs for the Homeless Assistance System. Screening and assessment collects information to guide housing referrals based on program eligibility and services offered for Homeless Prevention Programs, Emergency Shelter, Rapid Re-Housing, Transitional Housing and Permanent Supportive Housing.

Program participants will be referred to other forms of homeless assistance according to the Coordinated Entry Process Policies & Procedures.

SECTION J: PRIORITIZATION STANDARDS

CA-523 has adopted the provisions and requirements set out in the HUD Notice CPD-14-012 for the Prioritizing Person's Experiencing Chronic Homeless and Other Vulnerable Homeless Persons in Permanent Supportive Housing (PSH) and Recordkeeping requirements for Documenting Chronic Homeless Status as the baseline written standards for operations of CA-523's CE Process. The CoC Board has adopted additional written standards for establishing eligibility and prioritization of clients for assistance. These standards are specific and detailed, address any unique eligibility requirements for assistance (e.g. disability or subpopulation), reflect the homeless population and subpopulations within the CoC as reported on the Housing Inventory Chart, and reflect the housing and services within the CoC, and reflect the national and targeting priorities. Prioritization Standards for PSH are described in Appendices F, G and H.

The matching process and eventual referral linkage process will consider a set of prioritization criteria for each project type. The order of client priority on the prioritization list will under no circumstances be based on disability type or diagnosis. CA-523 has established priorities for each project type based on the severity of the needs, length of time homeless, or subpopulation characteristics, depending on the specific CoC component type.

SECTION K: LOW-BARRIER POLICY

CoC providers will make enrollment determinations based on limiting barriers to enrollment in services and housing. No consumer may be turned away from crisis response services or homeless designated housing due to lack of income, lack of employment, disability status, or substance use unless the project's primary funder requires the exclusion, or a previously existing and documented neighborhood covenant/good neighbor agreement has explicitly limited enrollment to clients with a specific set of attributes or characteristics. Funders restricting access to projects based on specific client attributes or characteristics will need to provide documentation to the CoC providing a justification for their enrollment policy.

SECTION L: NO WRONG DOOR APPROACH

Because of the diversity and size of the three counties in CA-523, access to the CE system follows a "No Wrong Door" approach. The principles of this approach are:

- A consumer can seek housing assistance through any of the participating homeless services

providers and will receive integrated services; and

- Consumers should have equal access to information and advice about the housing assistance for which they are eligible to assist them in making informed choices about available services that best meet their needs; and
- Participating providers have a responsibility to respond to the range of consumer needs and act as the primary contact for consumer who apply for assistance through their service unless or until another provider assumes that role; and
- Participating providers will provide a proactive service that facilitates the consumer applying for assistance or accessing services from another provider regardless of whether the original provider delivers the specific housing services required by a presenting consumer; and
- Participating housing providers will work collaboratively to achieve responsive and streamlined access services and cooperate to use available resources to achieve the best possible housing outcomes for consumer, particularly for those with high, complex or urgent needs.

SECTION M: VULNERABILITY ASSESSMENT TOOL

The CA-523 has developed a universal vulnerability assessment tool for use in managing the client intake, assessment, and referral process. The standardized tool may be customized by each individual CoC project with additional program-specific assessment questions and response categories necessary to address the unique aspects and needs of individual programs. All assessment tools utilize a scoring paradigm to assist with documenting clients' needs and prioritizing services.

SECTION N: ASSESSMENT PROCESS

CA-523 employs a progressive assessment approach. Progressive assessment stages the asking and sequencing of assessment questions such that prospective program participants are asked only those questions directly related to service enrollment and prioritization decisions necessary to progress the participant to the next stage of assessment or determine a referral to a service strategy. The assessment process focuses on barriers to obtaining or maintain housing (e.g.-past rental history, convictions, legal issues, income history, etc.). Through the assessment process, persons requesting shelter are screened for other safe and appropriate housing options (temporary or permanent) and to resources which will help them obtain or maintain their housing. Persons who have appropriate housing options and resources should be diverted from emergency shelter and should be offered wrap around or supportive services that would provide the immediate connection to services that would allow for problem solving and linkage, if the client so desires.

In addition to housing options, all persons are screened for potentially critical health and safety needs to determine those with the most severe needs and provide an appropriate response (Core Practice).

SECTION O: DATA SHARING

All CoC providers will follow the Data Sharing policies developed by the HMIS Committee in conjunction with the Release of Client Information documentation.

SECTION P: EMERGENCY SERVICES

Defined access points must provide directly or make arrangements through other means to ensure universal access to crisis response services for clients seeking emergency assistance at all hours of the day and all days of the year. The CoC must document their planned after-hours emergency services approach. After hours' crisis response access, may include telephone crisis hotline access, coordination with policy, emergency medical care.

SECTION Q: FAIR AND EQUAL ACCESS

All CoC providers will ensure fair and equal access to the CE Process programs and services for all clients regardless of actual or perceived race, color, religion, national origin, age, gender identity, pregnancy, citizenship, familial status, household composition, disability, veteran's status, or sexual orientation. If an individual's self-identified gender or household composition creates challenging dynamics among residents within a facility, the host program should make every effort to accommodate the individual or assist in locating alternative accommodation that is appropriate and responsive to the individual's needs.

SECTION R: FULL COVERAGE

The full geography of the CoC is covered by CE services including assessment of clients and referral options; funding is constrained so not all program services are offered throughout the continuum.

SECTION S: JOINING THE CE PROCESS

All programs that receive CoC or ESG funding are required to participate in the CE system. Other programs are encouraged and welcome to join the CE system.

SECTION T: MAINSTREAM RESOURCES

CA-523 has a screening protocol to assess each client's potential eligibility for the following mainstream resources or services:

Housing (temporary, transitional or permanent)

Medical and safety benefits

Nutrition assistance

Income supports

Health Insurance

Mental Health

Substance Use Disorders

SECTION U: MONITORING AND REPORTING OF THE CE PROCESS

CA-523 has a defined monitoring and reporting plan for the CE system that focuses on performance objectives related to CE utilization, efficiency and effectiveness.

SECTION V: PRIVACY PROTECTIONS

CE operations and staff must abide by the HMIS privacy protections as defined by the HMIS Committee. Consumer consent protocols, data use agreements, data disclosure policies, and any other privacy protections offered to program participants as a result of each consumer's participation in HMIS will be the same as the CE system.

SECTION W: REFERRAL CRITERIA

The CE Committee has defined referral criteria for all projects within the CoC's geographic area, by County. Referral criteria identifies the eligibility and exclusionary criteria used by program staff to make enrollment determinations for referred persons or households. The guidelines describe acceptable time frames for reviewing and communicating referral decisions (i.e. whether the potential program participant is either accepted or denied enrollment). If a potential client is not offered enrollment, the reason for rejection must be clearly communicated and documented in HMIS. The referral criteria are published at least annually and supports the identification of, and connection to, appropriate housing and services for all assessed clients.

SECTION X: REFERRAL REJECTION POLICY

Both CoC providers and program participants may deny or reject referrals, although service denials are infrequent and are documented in HMIS (or other comparable system) with specific justification as prescribed by the CoC. The CoC has identified and established the specific allowable criteria for denying a referral, must be shared with each project and consumer, and be reviewed and updated annually. All participating projects must provide the reason for service denial.

At a minimum, project's referral rejection/denial reasons must include the following:

- Consumer /household refused further participation (or client moved out of County)
- Consumer/household does not meet required criteria for program eligibility
- Consumer/household unresponsive to multiple communication attempts
- Consumer resolved crisis without assistance
- Consumer /household safety concerns. The client's/household's health or well-being or the safety of current program participants would be negatively impacted due to staffing, location, or other programmatic issues
- Consumer /household needs cannot be addressed by the program. The program does not offer the services and/or housing supports necessary to successfully serve the household.
- Program at bed/unit/service capacity at time of referral
- Property management denial (include specific reason cited by property manager)
- Conflict of interest
- Lack of funding to support the program

SECTION Y: SAFETY PLANNING

In conjunction with the appropriate service providers, the CoC has developed safety and security protections for persons fleeing or attempting to flee family violence, stalking, dating violence, or other domestic violence situations.

SECTION Z: STANDARDIZED ACCESS AND ASSESSMENT

All CoC/ESG funded providers must administer the CA-523 Coordinated Entry and Assessment Process as defined by the CoC Board of Directors. The assessment process is standardized throughout each participating CoC County, with uniform decision-making by all assessment locations and staff. If access points or assessment processes are conducted or managed by providers who do not receive HUD funding those providers are not required to abide by assessment standards and protocols defined by the CoC. The CEP will operate using a client-centered approach, allowing clients to freely refuse to answer assessment questions and/or refuse referrals.

SECTION AA: STAKEHOLDER INCLUSION

CA-523 supports the implementation, expansion, and ongoing operation and evaluation of Coordinated Entry Processes by regularly convening stakeholder input and feedback opportunities. The CoC has developed a plan to collect stakeholder feedback at least annually, and will engage participants from all CoC component types, referral sources, residents and participants of homeless services and programs, funders of homeless response systems, and mainstream system providers.

SECTION BB: PROCESS OUTREACH

The CA-523 CEP contacts private and public agencies including those in the CoC, VA, social service agencies and state and/or local government agencies to educate and provide information for available programs. Outreach activities are completed annually in conjunction with the Point in Time Count, and at which times that funding is available to support it. The CEP coordinates with existing street outreach programs, as well as private and public agencies, social service organizations, etc. for referrals, so that people sleeping on the streets are prioritized for assistance in the same manner as any other person assessed through the Coordinated Entry Process.

SECTION CC: ADVERTISEMENT

Advertisement is to include a minimum of flyers posted at those places stated above (as allowed). Other forms of advertisement can include newspaper ads, radio, websites, etc. to generate referrals and applications. Advertising is to focus on people experiencing literal homelessness and clearly state eligibility requirements to reach the target population as opposed to those who do not meet the criteria. Information about the Coordinated Entry Process will also be available on the Colusa, Glenn, Trinity Community Action Partnership website.

SECTION DD: SYSTEM EVALUATION

The CEP is evaluated on a regular basis to ensure that it is operating at maximum efficiency. Evaluation will be carried out primarily through the Coordinated Entry Committee and any consultants or third parties they engage to help them. Evaluation mechanisms will include the following:

- An annual review of metrics from the coordinated entry process
- An annual forum with people experiencing homelessness who have been through the coordinated entry process
- A report issued that details the homeless assistance system to the community annually with a section devoted to coordinated entry and homelessness assistance system outcomes. This report will include trends from the quarterly analysis of coordinated assessment data, as well as the total number of assessments and referrals made, successes to be shared, and a note from the Coordinated Entry Committee on the process's progress. Major findings from this report are presented to the CoC Board the month it is released by a member of the Coordinated Entry Committee.

SECTION EE: TRAINING

The Collaborative Applicant is responsible for training the service providers in the CoC on the CEP. Each County has flexibility for how this training is conducted. The training can be either in-person, over the phone or via webinar. Ideally this training will take place prior to the roll-out of the fully implemented CEP, but at a minimum should occur within two months of the Coordinated Entry start date. Once the CEP is fully implemented, training will occur for new service providers joining the process and for organizations that have had a high turnover in staff and/or volunteers.

ARTICLE IX. EMERGENCY SOLUTIONS GRANTS

Regulatory Citations: 24 CFR 578.7(a) (9); 578.37(a) (1) (ii), 24 CFR 576, and 24 CFR §576.400(e), 24 C.F.R.

§576.402; 24 CFR Parts 91, 582 and 583; 25 CCR Section 8404 (a) (2); 25 CCR Section 8409;

HUD Guidance Documents and Resources:

Coordinated Assessment - Philosophy under the CoC and ESG Programs

<https://www.onecpd.info/resource/3106/coordinated-assessment-philosophy-under-the-coc-and-esg-programs/>

Notice CPD-13-06: Guidance for Submitting the Portions of the CAPER Related to Homelessness and the ESG Program <https://www.onecpd.info/resources/documents/Notice-CPD-13-06-Guidance-For-Submitting-Portions-of-CAPER-Related-to-Homelessness-and-ESG-Program.pdf>

<https://www.hudexchange.info/resources/documents/HMIS-Programming-Specifications.pdf>

ESG Program Components Reference Guide <https://www.hudexchange.info/resource/3081/esg-program-components-quick-reference/>

Rapid Rehousing: ESG vs. CoC Guide

https://www.hudexchange.info/resources/documents/Rapid_Re-Housing_ESG_vs_CoC.pdf

ESG CAPER Reporting: HMIS Programming Requirements

<https://www.onecpd.info/resources/documents/ESGCAPERHMISProgrammingInstructions.pdf>

Policy Requirement: The CoC must consult with State and local government Emergency Solutions Grants (ESG) program recipients within the CoC’s geographic area on the plan for allocating ESG program funds and reporting on and evaluating the performance of ESG program recipients and sub-recipients.

CoC CA-523 geographic area is Colusa, Glenn and Trinity Counties, California.

SECTION A: CONSULTATION WITH ESG RECIPEINTS

The Collaborative Applicant (CoC), as soon as it is known, will submit to ESG recipients an annual ESG program calendar to include critical dates, deadlines, and public participation opportunities for:

- ESG Allocation Process (competitive and non-competitive)
- Consolidated Action Plan
- CAPER

The CoC Collaborative Applicant will submit to CoC members, local ESG recipients, and community members a description of the ESG Grant Allocation Process in order to receive input on priorities and performance measurements and consistency with the CoC and HUD funding priorities and targeted populations for assistance.

SECTION B: ESTABLISHING PRIORITIES

Funding priorities and targeted populations for assistance are established annually within the first quarter of the calendar year. These priorities will be established with input from HUD, the Collaborative Applicant, ESG recipients, and consumers.

Local ESG recipients will be asked to attend the annual Continuum of Care Public Forum; State of the Homeless Address; Homeless Roundtables and other such related informational meetings.

The Collaborative Applicant will provide an annual written Summary of the Homeless Report in response to the point in time count to local governments, ESG Recipients, and the public by May 15th to include information on: point in time count, housing inventory, and needs and gaps analysis. The report will include information that includes the whole CoC area and a breakdown by County, if possible.

The Collaborative Applicant will be the primary contact to provide consultation on the State ESG program.

SECTION C: PROCESS FOR MONITORING ESG RECIPIENTS

ESG recipients will provide the CoC with a copy of all ESG executed contracts within 10 business days of execution to maintain an accurate inventory of assistance available for the Coordinated Entry Process and set up of ESG program and reporting tools in the HMIS system.

The Collaborative Applicant will provide the ESG recipients with an annual monitoring schedule. The Collaborative Applicant and the HMIS Administrator, will cooperate with ESG recipients in providing needed performance or client HMIS information.

The CoC Collaborative Applicant will conduct at least a biannual monitoring of ESG recipients to review timely expenditure of funds.

SECTION D: REPORTING PERFORMANCE

The CoC Collaborative Applicant, through its HMIS Administrator, will produce quarterly and end of program year ESG recipient and sub-recipient reports generated by the HMIS system. CoC – wide standard ESG performance metrics will be established in the first quarter of the calendar year through consultation with ESG recipients and approved by the Continuum of Care Board of Directors.

Report Due Date	ESG Report Performance Coverage
February 15	November – January
May 15	February – April
August 15	May – July
November 15	August – October

The CoC Collaborative applicant will provide ESG Recipients with required Consolidated Action Plan and CAPER data no later than 45 days prior to the final HUD submission deadline.

SECTION E: STANDARDS FOR THE PROVISION OF ESG FUNDS

The Continuum of Care Board has appointed each Project Applicant as the designated representatives to enter into contracts with the California Department of Housing and Community Development to administer the ESG program funds designated to Dos Rios-CA-523. Standards for access to assistance funded by this program are as follows:

SECTION F: ELIGIBLE ORGANIZATIONS THAT MAY APPLY FOR ESG FUNDING THROUGH THE BALANCE OF STATE ALLOCATION POOL

The applicant must be a private, non-profit organization, as defined in 24 CFR 576.2 as an organization that: 1) is a secular or religious organization described in Section 501 (c) of the Internal Revenue Code of 1986 and which is exempted from taxation under subtitle A of the Codes; 2) has an accounting system; 3) has a voluntary board; 4) practices nondiscrimination in the provision of assistance; and 5) does not include a governmental organization, such as a public housing agency or housing finance committee.

OR

The applicant is a unit of general purpose local government as defined in 24 CFR 576.2, and is any city, county, town or township or other general purpose political subdivision of a state. Units of general purpose local government applying for ESG funding for emergency shelter and/or street outreach activities must not replace funds the local government provided for these activities during the immediate preceding 12-month period, except in situations of severe financial deficit as determined by HUD.

Proposed use of ESG funds should address the Continuum of Care Strategic Plan, identified gaps and needs, and meet other identified needs of the CoC. Further, ESG recipients must meet the following criteria to become eligible for assistance under one or multiple activities:

i. Street Outreach (24 CFR 576.101)

A smaller portion of ESG funds may be used for Street Outreach activities which include the costs of providing essential services necessary to reach out to unsheltered homeless people, connecting them to emergency shelter, housing or critical services, and providing urgent, non-facility-based care to unsheltered homeless people who are unwilling or unable to access emergency shelter, housing or an appropriate health facility.

Eligible activities include: engagement, case management, emergency health and mental health services, transportation and services for special populations as defined in federal regulations.

Street Outreach cannot be a stand-alone activity, but it may be offered in conjunction with rapid re-housing or emergency shelter activities. The intention of including Street Outreach with these activities is to reach and prioritize persons experiencing homelessness that are unsheltered and living in places not designed for human habitation.

ii. Emergency Shelter (24 CFR 576.102; 25 CCR 8408)

Any facility with the primary purpose to provide a temporary shelter for the homeless in general or for specific populations of the homeless and which does not require occupants to sign leases or occupancy agreements. Hotel or motel vouchers may only be used if there is no other appropriate emergency shelter available for a homeless individual or family. Any project funded as an emergency shelter may provide the following:

a) Essential Services

Include case management, child care, education services, employment assistance and job training, outpatient health services, legal services, life skills training, mental health services, substance abuse treatment services, transportation, and services for special populations.

b) Shelter Operations

Includes maintenance, rent, minor repairs, security, fuel, equipment, insurance, utilities, food, furnishings, and supplies necessary for the operation of the emergency shelter. Where no appropriate emergency shelter is available for a homeless family or individual, eligible costs may also include a hotel or motel voucher for that family or individual.

iii. Homeless Prevention (24 CFR 576.103)

Homeless Prevention activities are not eligible as a stand-alone activity but may be provided in conjunction with emergency shelter or rapid re-housing activities to facilitate preventing homelessness of a previously assisted individual or household who is experience instability after rapid re-housing assistance has ended.

Housing relocation and stabilization services and short-and/or medium-term rental assistance as necessary to prevent the individual or family from moving to an emergency shelter, a place not meant for human habitation, or another place described in paragraph (1) of the homeless definition.

- a) The costs of homelessness prevention are only eligible to the extent that the assistance is necessary to help the program participant regain stability in their current housing or move into other permanent housing and achieve stability in that housing. Eligible costs include:
 - i.) Rental Assistance: rental assistance and rental arrears
 - ii.) Financial Assistance: rental application fees, security and utility deposits, utility payments, last month's rent, moving costs
 - iii.) Services: housing search and placement, housing stability case management, landlord-tenant mediation, tenant legal services, credit repair

iv. Rapid Re-Housing (24 CFR 576.104)

Housing relocation and stabilization services and/or short-and/or medium-term rental assistance as necessary to help individuals or families move as quickly as possible into permanent housing and achieve stability in that housing. Rapid Re-Housing activities must meet all of the HUD requirements specified at 24 CFR 576.104 including requirements for:

- a) Eligible program participants;
- b) Maximum amounts and periods of assistance;
- c) Use with other subsidies;
- d) Limitations on maximum rent levels;
- e) Eligible costs include financial assistance costs and services costs:

- i.) Rental Assistance: rental assistance and rental arrears
- ii.) Financial assistance: rental application fees, security and utility deposits, utility payments, last month's rent, moving costs
- iii.) Services: housing search and placement, housing stability case management, landlord-tenant mediation, tenant legal services, credit repair

In addition to the federal requirements, no subpopulation targeting will be permitted with Rapid Re-Housing activities unless documentation of the following is provided to HCD prior to the award of funds:

- a) Evidence of an unmet need for these activities for the subpopulation proposed for targeting; and
 - b) Evidence of existing funding in the CoC Service Area for programs that address the needs of all of the excluded populations.
- v. Data Collection (24 CFR 576.107; 25 CCR 8408)
- a) ESG funds may be used to pay for HMIS activities associated with contributing data associated with rapid rehousing, emergency shelter, street outreach and homeless prevention activities. In no case, can costs exceed ten (10) percent of the total amount requested for program funding. HMIS activities must comply with HUD's standards on participation, data collection and reporting.

SECTION G: INELIGIBLE ORGANIZATIONS

An organization will not be eligible to apply for ESG funds if it meets one or more of the following conditions:

- i. Outstanding audit or monitoring finding with any existing ESG or CoC Program Recipient, unless appropriately addressed by a corrective action plan
- ii. Current appearance on the List of Suspended and Debarred Contractors (SAM.gov)
- iii. Terms and conditions of any existing ESG or CoC Program Recipient that are not in full compliance
- iv. History of non-performance with contracts with any ESG or CoC Program Recipient

ARTICLE X. STANDARDS FOR THE PROVISION OF ESG ASSISTANCE ADMINISTERED

These standard policies and procedures shall be followed for evaluating individuals' and family's eligibility for assistance under ESG. These standards are consistent with the definition of homeless and at-risk of homelessness as stated in federal ESG regulations at: 24 CFR 576.2 and 576.500 (b-e).

Per 24 CFR 576.401 ESG recipients must conduct an initial evaluation to determine each individual or family's eligibility for ESG assistance and the amount and types of assistance the individual or family needs to regain stability in permanent housing.

ESG recipients must reevaluate the program participant's eligibility and the types and amounts of assistance the participant needs; not less than once every 3 months for participants who are receiving homelessness prevention assistance and rapid re-housing assistance. Evidence of reevaluation will be documented in the HMIS (or its equivalent).

At the recipient's discretion, reevaluations may be conducted more frequently than required by 24 CFR 576.401 and may also be incorporated into the case management process which must occur monthly for homelessness prevention and rapid re-housing participants – See 24 CFR 576.401 (e) (i). Regardless of which timeframe is used, reevaluations, must at minimum, establish that:

The program participant does not have an annual income that exceeds 30 percent of median family income for the area, as determined by HUD; and the program participant lacks sufficient resources and support networks necessary to retain housing without ESG assistance. To determine if an individual or family is income eligible, the sub-recipient must examine an individual or family's annual income to ensure that it does not exceed the most current area income limits as posted on:

<http://www.huduser.org/datasets/il.html>

When the program participant's income or other circumstances change (e.g. changes in household composition) that affects the program participant's need for assistance under ESG, the sub-recipient must reevaluate the program participant's eligibility and the amount and types of assistance the program participant needs.

Terminating ESG Assistance - 24 C.F.R. §576.402

ESG recipients must provide a copy of their agency termination policy to the Collaborative Applicant. The policy must include the following provisions:

- i. *In general*, if a program participant violates program requirements, the recipient or sub-recipient may terminate the assistance in accordance with a formal process established by the recipient or sub-recipient that recognizes the rights of individuals affected. The recipient or sub-recipient must exercise judgment and examine all extenuating circumstances in determining when violations warrant termination so that a program participant's assistance is terminated only in the most severe cases.
- ii. *Program participants receiving rental assistance or housing relocation and stabilization services*. To terminate rental assistance or housing relocation and stabilization services to a program participant, the required formal process, at a minimum, must consist of:
 - a) Written notice to the program participant containing a clear statement of the reasons for termination;
 - b) A review of the decision, in which the program participant is given the opportunity to

present written or oral objections before a person other than the person (or a subordinate of that person) who made or approved the termination decision; and

c) Prompt written notice of the final decision to the program participant.

iii. *Ability to provide further assistance.* Termination under this section does not bar the recipient or sub-recipient from providing further assistance at a later date to the same family or individual.

When the resulting termination of participation results in the risk of homelessness, the recipient should convey the circumstances and refer the client to the Coordinated Entry Process.

SECTION A: CORE PRACTICES FOR THE PROVISION OF ESG FUNDS

I. Coordinated Entry

All CoC and ESG-funded homelessness assistance providers in the NorCal CoC's service area are required to participate in the community-wide Coordinated Entry Process (CEP). The intent of the CEP is to assess and prioritize individuals and families experiencing homelessness by level of vulnerability, to maintain a centralized list of those interested in receiving housing assistance and to ensure that participants can be quickly referred to the provider and program most appropriate providing them with housing services.

A. Prioritization through CEP: Access to program assistance shall be prioritized for people with the most urgent and severe needs, including, but not limited to, victims of domestic violence. Programs shall seek to prioritize people who:

- 1) Are unsheltered and living in places not designed for human habitation, such as cars, parks, bus stations, and abandoned buildings;
- 2) Have experienced the longest amount of time homeless;
- 3) Have multiple and severe service needs that inhibit their ability to quickly identify and secure housing on their own; and

B. For Homelessness prevention activities, people who are at greatest risk of becoming literally homeless without an intervention and are at greatest risk of experiencing a longer time in shelter or on the street should they become homeless.

2. Housing First

All ESG assisted programs shall operate in a manner consistent with housing first practices as reflected in the Continuum of Care written standards and progressive engagement and assistance practices, including the following:

- 1) Ensuring low-barrier, easily accessible assistance to all persons, including but not limited to people with no income or no income history and persons with active substance abuse or mental health issues

- 2) Helping clients quickly identify and resolve barriers to obtaining and maintaining housing.
- 3) Seeking to quickly resolve the clients housing crisis before focusing on other non-housing related services.
- 4) Allowing clients to choose the services and housing that meets their needs, within practical and funding limitations.
- 5) Connecting clients to appropriate supports and services available in the community that foster long-term stability.
- 6) Offering financial assistance and supportive services in a manner which offers a minimum amount of assistance initially adding more assistance over time if needed to quickly resolve the housing crisis by either ending homelessness or avoiding an immediate return to literal homelessness or the imminent risk of literal homelessness. The type, duration, and amount of assistance offered shall be based on an individual assessment of the household, and the availability of other resources or support systems to resolve their housing crisis and stabilize them in housing (same as 7.3 below).
- 7) Notwithstanding subdivision (6) above, Rapid Rehousing and Homelessness Prevention activities funded within the CoC shall follow the same program requirements for type, duration and amount of assistance provided, unless sufficient written justification is provided by the CoC and approved by HCD.
- 8) Any other practices promoted or required by HUD.

3. Progressive Engagement

Offering financial assistance and supportive services in a manner that offers a minimum amount of assistance initially, adding more assistance over time if needed to quickly resolve the client's housing crisis by either ending the homelessness, avoiding an immediate return to becoming literally homeless, or avoiding the imminent risk of becoming literally homeless. The type, duration, and amount of assistance offered shall be based on an individual assessment of the household, and the availability of other resources or support systems to resolve their housing crisis and stabilize them in housing.

4. Cultural Competency

All grantees receiving CA ESG funds shall take actions to create an effective, welcoming and affirming environment for all clients and employees, including to but not limited to persons of different races, ethnicities, religions, sexual orientations, gender identities, and gender expressions (CA ESG Guidelines Section 109(b)).

5. Program Requirements for all Programs

- A. All referrals to programs, including screening for program eligibility and prioritization, occur according to the CoC's Coordinated Entry Process protocols;
- B. Programs must coordinate with mainstream resources in the CoC including housing, social services, employment, education and youth programs for which participants may be eligible;
- C. Programs must have written policies and procedures and must consistently apply them to all participants;
- D. A staff person must be designated as the educational liaison that will ensure that children

- are enrolled in school, connected to appropriate services in the community, including early childhood program such as Head Start and the McKinney Vento education services;
- E. The age and gender of a child under age 18 must not be used as a basis for denying any family’s admission to a project that provides shelter for families with children;
 - F. Programs receiving ESG and CoC funding must participate in Homeless Management Information System (HMIS) and the community-wide Coordinated Entry Process;
 - G. Programs receiving ESG and CoC funding must allocate the maximum allowable portion of the total funds requested from either source to be used for HMIS expenses, including expenses related to implementing HMIS in individual programs and within the community-wide system;
 - H. Programs must meet minimum HMIS data quality standards and participate in on-going HMIS user trainings as determined appropriate by HMIS Lead Agency;
 - I. Program rules and regulations should be designed in the spirit of inclusion rather than as grounds for denial or termination. Programs are required to remove unnecessary barriers to program entry;
 - J. Programs must have a formal procedure for terminating assistance to a participant that recognizes the rights of the participant(s) involved;
 - K. Programs must use judgment and examine all extenuating circumstances in determining that a violation should result in termination;
 - L. Every effort should be made to allow the participant to remain in the program; termination should only be exercised in the most severe cases;
 - M. Termination does not necessarily preclude assistance at a future date;
 - N. Programs must make known that use of the facilities and services are available to all on a nondiscriminatory basis;
 - O. Programs may not engage in inherently religious activities such as worship, religious instruction or proselytization as part of the programs or services funded under the CoC or ESG. These activities can be conducted but must be separate and voluntary for program participants; and
 - P. Participation in services unrelated to obtaining permanent housing is voluntary.

SECTION B: GENERAL STANDARDS FOR STREET OUTREACH

ESG funding may be used for costs of providing essential services necessary to reach out to unsheltered homeless people; connect them with emergency shelter, housing, or critical services; and provide urgent, non-facility-based care to unsheltered homeless people who are unwilling or unable to access emergency shelter, housing, or an appropriate health facility. For the purposes of this section, the term “unsheltered homeless people” means individuals and families who qualify as homeless under paragraph (1) (i) of the “homeless” definition under 24 CFR Part 576.2. As outlined in 24 CFR Part 576.101, essential services consist of:

- i. Engagement;
- ii. Case management;
- iii. Emergency health services – only when other appropriate health services are inaccessible or unavailable within the area;

- iv. Emergency mental health services – only when other appropriate mental health services are inaccessible or unavailable within the area;
- v. Transportation; and
- vi. Services for special populations.

ESG recipients must determine an individual's or family's vulnerability, using the established Vulnerability Assessment tool, and unwillingness or inability to access emergency shelter, housing, or an appropriate health facility, prior to providing essential services under this component to ensure that ESG funding is used to assist those with the greatest need for street outreach assistance.

SECTION C: GENERAL GUIDANCE FOR EMERGENCY SHELTER ADMISSION, DIVERSION AND REFERRAL

i. Emergency Shelter Definition

The term Emergency Shelter was revised by 24 CFR Part 576.2 to mean “any facility, the primary purpose of which is to provide a temporary shelter for the homeless in general or for specific populations of the homeless and which does not require occupants to sign leases or occupancy agreements”. This definition excludes transitional housing.

ii. Emergency Shelter Assistance Practices

- a) Participants and staff understand the goals of emergency shelter are to: provide temporary accommodation that is safe, respectful and responsive to individual needs, and to re-house participants in permanent housing as quickly as possible, regardless of other personal issues or concerns.
- b) Participants must agree to actively work on re-housing plans and to participate and engage in supportive services/assistance to overcome immediate and direct barriers to securing housing. Participants will be assisted with creating or update their re-housing plans to stabilize their placement rapidly.
- c) Participant Assessment focuses on: immediate health and safety needs associated with temporary housing accommodations; information relevant to securing housing, i.e.-convictions, evictions, lease violations, etc.
- d) Participants are connected to housing location and placement assistance to achieve their housing plan goals. Assistance is provided for all participants who cannot otherwise exit on their own; without additional preconditions and with the understanding that housing may cost greater than 30% of participant income.
- e) Participation in services unrelated to obtaining Permanent Housing is voluntary.
- f) Participants only move to other shelters or transitional housing facilities when they choose to, when the housing is more appropriate for their needs or when there is no permanent housing solution available that is similar to, or a better match for, their preferences and needs.

iii. Admission, Diversion, Referral and Discharge

Shelter stays should be avoided, if possible, and when not possible, limited to the shortest time necessary to help participants regain permanent housing. Consistent with Section (a) of this document, ESG recipients must conduct an initial assessment consistent with the CoC Coordinated Entry Process to determine if they should be admitted to an emergency shelter, diverted to a provider of other ESG-funded or CoC Program- funded components, such as rapid re-housing or homeless prevention assistance, or referred for other mainstream resources.

iv. ESG recipients must determine that individuals and families meet category (1), (2), (3), or (4) of the Homeless Definitions listed below and use the CoC Coordinated Entry Process' assessment tools to evaluate an individual's or family's homeless risk to ensure that only those individuals or families that have the greatest need for emergency shelter assistance receive ESG funded assistance.

- a) Category 1 – Literally Homeless
- b) Category 2 – Imminent Risk of Homeless
- c) Category 3 – Homeless under Other Federal Statutes
- d) Category 4 – Fleeing/Attempting to Flee Domestic Violence

iv. Safety and Shelter Needs of Special Populations

- a) ESG funding may be used to provide services for homeless youth, victim services, and services for people living with HIV/AIDS, so long as the costs of providing these services are eligible under the regulations for the emergency shelter component found at 24 CFR Part 576.102.
- b) Consistent with ESG recordkeeping and reporting requirements found at 24 CFR Part 576.500 (b-e), ESG sub-recipients must develop and apply written policies to ensure the safety of program participants through the following actions:
 - i.) All grantees will take appropriate measures to provide for client confidentiality. Grantees will develop and implement procedures to guarantee the confidentiality of records concerning program participants. All records containing personally identifying information (as defined in HUD's standards for participation, data collection, and reporting in a local HMIS) of any individual or family who applies for, and receives ESG assistance, will be kept secure and confidential.
 - ii.) The address or location of any domestic violence, dating violence, sexual assault, or stalking shelter project assisted under the ESG will

not be made public, except with written authorization of the person responsible for the operation of the shelter, and

- iii.) The address or location of any housing of a program participant, including youth, individuals living with HIV/AIDS, victims of domestic violence, dating violence, sexual assault, and stalking; and individuals and families who have the highest barriers to housing will not be made public, except as provided under a preexisting privacy policy of the sub-recipient and consistent with state and local laws regarding privacy and obligations of confidentiality
- c) In addition, ESG recipients must adhere to the following ESG shelter and housing standards found at 24 CFR Part 576.403 to ensure that shelter and housing facilities are safe, sanitary, and adequately maintained:
- i.) Lead-Based Paint Requirements. The Lead-Based Paint Poisoning Prevention Act applies to all shelters assisted under ESG program and all housing occupied by program participants. All ESG recipients are required to conduct a Lead-Based Paint inspection on all units receiving assistance under the rapid re-housing AND homelessness prevention components if the unit was built before 1978 and a child under age of six or a pregnant woman resides in the unit.
 - ii.) Structure and Materials. The shelter building should be structurally sound to protect residents from the elements and not pose any threat to health and safety of the residents.
 - iii.) Access. The shelter must be accessible, and there should be a second means of exiting the facility in the case of emergency or fire.
 - iv.) Space and Security. Each resident should have adequate space and security for themselves and their belongings. Each resident must have an acceptable place to sleep.
 - v.) Interior Air Quality. Each room or space within the shelter/facility must have a natural or mechanical means of ventilation. The interior air should be free of pollutants at a level that might threaten or harm the health of residents.
 - vi.) Water Supply. The shelter's water supply should be free of contamination.
 - vii.) Sanitary Facilities. Each resident should have access to sanitary facilities that are in proper operating condition. These facilities should be able to be used in privacy and be adequate for personal cleanliness and the disposal of human waste.
 - viii.) Thermal Environment. The shelter/facility must have any necessary heating/cooling facilities in proper operating condition.
 - ix.) Illumination and Electricity. The shelter/facility should have adequate

natural or artificial illumination to permit normal indoor activities and support health and safety. There should be sufficient electrical sources to permit the safe use of electrical appliances in the shelter.

- x.) Food Preparation. Food preparation areas, if any, should contain suitable space and equipment to store, prepare and serve food in a safe and sanitary manner.
- xi.) Sanitary Conditions. The shelter should be maintained in a sanitary condition.
- xii.) Fire Safety-Sleeping Areas. There should be at least one working smoke detector in each occupied unit of the shelter facility. In addition, smoke detectors should be located near sleeping areas when possible. The fire alarm system should be designed for a hearing-impaired resident.
- xiii.) Fire Safety-Common Areas

- g) ESG Provider Staff must:
 - a) Be knowledgeable about public and private housing options to help a participant achieve their housing plan goals.
 - b) Be aware of and know how to access community resources that may provide assistance to participants to achieve their housing placement and stabilization goals.
 - c) Avoid existing participants to other homeless situations even when program rules are violated. Exiting persons to a more appropriate situation or assistance level is a preferred practice.

SECTION D: GENERAL STANDARDS FOR HOMELESS PREVENTION AND RAPID REHOUSING

ESG funded programs will adhere to the CoC Coordinated Entry Process policies and procedures for documentation of homelessness, assessment of service needs and prioritization for ESG and CoC Funded assistance.

i. Rapid Re-Housing Definition

Rapid re-housing is an intervention, informed by a Housing First approach that is a critical part of a community's effective homeless crisis response system. Rapid re-housing rapidly connects families and individuals experiencing homelessness to permanent housing through a tailored package of assistance that may include the use of time-limited financial assistance and targeted supportive services.

ii. Rapid Re-Housing Assistance Practices

- a) Participants and staff understand that the goals of rapid re-housing are to end homelessness and move participants to permanent housing as quickly as possible, regardless of other personal issues or concerns.

- b) Participants must agree to actively work on re-housing plans and to participate and engage in supportive services/assistance to overcome immediate and direct barriers to securing housing. Participants will be assisted with creating or update their re-housing plans to stabilize their placement rapidly.
 - c) Participant Assessment focuses on: barriers to obtaining and/or maintain housing (e.g.-evictions, convictions, legal issues, etc.).
 - d) Participants are provided assistance to locate and obtain permanent housing financial assistance for move-in and stabilization costs and housing case management in order to achieve their Housing Plan goals. This includes assistance to address tenancy problems that may jeopardize housing. Assistance is provided without additional preconditions and with the understanding that housing may cost greater than 30% of participant income.
 - e) Participation in services unrelated to obtaining permanent housing is voluntary.
- iii. Rapid Re-Housing Provider Staff must:
- a) Be knowledgeable about public and private housing options to help a participant achieve their housing plan goals.
 - b) Be aware of and know how to access community resources that may provide assistance to participants to achieve their housing placement and stabilization goals.
 - c) Avoid existing participants to homeless situations even when program rules are violated. Exiting persons to a more appropriate situation or assistance level is a preferred practice

All ESG homelessness prevention and rapid re-housing assistance is available to individuals and families below 30% of Area Median Income (AMI), and are homeless or at risk of becoming homeless.

- i. ESG funds can be used to prevent an individual or family from becoming homeless and regain stability in current housing or other permanent housing. Rapid re-housing funds can be used to assist individuals and families who are literally homeless progress toward permanent housing and achieve housing stability.
- a) Homeless Prevention Households will be **re-certified for continued eligibility no less than every 3 months.**
 - b) Rapid Re-Housing Households will be **re-certified for continued eligibility no less than every 3 months.**

ii. Rent and utility costs

Standards for both homelessness prevention and rapid re-housing for determining the share of rent and utilities costs that each program participant must pay, if any, will be based on the following:

- a) Rental assistance cannot be provided for a unit unless the rent for that unit is at or below the current Fair Market Rent limit, established by HUD.
- b) The rent charged for a unit must be reasonable in relation to rents currently

being charged for comparable units in the private unassisted market and must not be in excess of rents currently being charged by the owner for comparable unassisted units. See 24 CFR 574.320.

- c) The rental unit must meet minimum habitability standards found at 24 CFR 576.403.
- d) There must be a rental assistance agreement and lease between the property manager and tenant, as well as the owner of the property and the ESG recipient.
 - 1. No rental assistance may be made to an individual or family that is receiving rental assistance from another public source for the same time period; and
 - 2. Rental assistance may not be provided to a participant who is currently receiving replacement housing payments under Uniform Relocation Assistance.

Per 24 CFR 576.106 (e), ESG recipients may make rental assistance payments only to an owner with whom the sub-recipient has entered into a rental assistance agreement. The rental assistance agreement must set forth the terms under which rental assistance will be provided, including the requirements that apply under this section. The rental assistance agreement must provide that, during the term of the agreement, the owner must give the sub-recipient a copy of any notice to the program participant to vacate the housing unit, or any complaint used under state or local law to commence an eviction action against the program participant.

SECTION E: LENGTH OF ASSISTANCE

Subject to the general conditions under 24 CFR 576.103 and 24 CFR Part 576.104, ESG recipients may provide a program participant with up to 24 months of rental assistance during any 3-year period. This assistance may be short-term rental assistance, medium-term rental assistance, payment of rental arrears, or any combination of this assistance.

- a) Short-term rental assistance is assistance for up to 6 months of rent.
- b) Medium-term rental assistance is assistance for more than 6 months but not more than 10 months of rent.
- c) Payment of rental arrears may consist of a one-time payment for up to 3 months of rent in arrears, including any late fees on those arrears.

The maximum amount of rental assistance provided, and an individual or household's level of responsibility for rent payments, over time, shall be determined by the ESG recipient and shall be reflective of the individual or family's need for rental assistance and the level of financial resources available to the ESG recipient.

Rental assistance will end if, and when, another subsidy begins, such as Section 8 Housing Choice Voucher, public housing, project based rental subsidy, or other PSH subsidy of when the ESG recipient is financially able to sustain housing.

SECTION F: STANDARDS FOR HOUSING RELOCATION AND STABILIZATION SERVICES

Subject to the general conditions under 24 CFR 576.103 and 24 CFR Part 576.104, recipients may use ESG funding to pay housing owners, utility companies, and other third parties for some or all the following costs, as allowed under 24 CFR 576.105:

- a) Rental application fees
- b) Security deposits
- c) Last month's rent
- d) Utility deposits
- e) Utility payments
- f) Moving costs, and
- g) Some limited services costs

Consistent with 24 CFR 576.105 (c), ESG recipients determine the type, maximum amount and duration of housing stabilization and relocation services for individuals and families who need homeless prevention or rapid re-housing assistance through the initial evaluation, re-certification and ongoing case management processes.

Consistent with 24 CFR 576.105(d), financial assistance for housing stabilization and relocation services cannot be provided to a program participant who is receiving the same type of assistance through other public sources or to a program participant who has been provided with replacement housing payments under the Uniform Relocation Act (URA) during the period covered by the URA payments.

SECTION G: ESG RECIPIENT REPORTING REQUIREMENTS TO THE COC

i. Performance

Bi-annual performance reports shall be submitted, in a format prescribed by the Collaborative Applicant, by the 10th day of the month after the 2nd and 4th quarter end, which identify the activities accomplished under the ESG recipient grant agreement with HCD. Performance reports must be generated from the HMIS system (unless a recognized domestic violence provider agency).

All ESG recipients must use the HMIS (or the CoC approved equivalent) to report on clients served by the ESG program.

ii. Matching Funds

Each ESG recipient is required to meet the dollar-for-dollar ESG match requirement with eligible match sources on a quarterly basis. The amount will be reported on the recipient's quarterly performance report. The dollar-for-dollar match by recipients can be in cash expended for allowable costs identified by OMB Circular A-87 and A-122. Additionally, program income for the ESG program can also be used as match funds. Further, the value of any real property, equipment, goods, or services can also be used as dollar-for-dollar match.

iii. Monitoring/ On-Site Visit

The three basic goals for oversight and monitoring of the progress and performance of ESG sub-recipients include:

- Ensure that ESG funds are used effectively to assist homeless individuals and families and that the basic ESG program goals are met;
- Ensure compliance with CoC Policies and Procedures and ESG regulations and program requirements in the usage of funds and in carrying out program activities; and
- Enhance and develop the management capacity of grantees or recipients

Monitoring of recipients will be conducted once a month for the first three months of the program year. Subsequent visits after the first three months will depend on sub-recipient performance and risk analysis. Monitoring can take a number of forms and can include review of reimbursement requests, monthly reports, performance measures, on-site assessments or a review of HMIS program data. If the Collaborative Applicant representatives have a concern or finding the following will take place;

a) Concern

1. A concern is a deficiency in program performance not based on statutory, regulatory, or other program requirement (sanctions or corrective actions are not authorized for concerns).
2. The Collaborative Applicant will bring the concern to the attention of the sub-recipient via formal letter sent certified mail and by email and recommend actions to address concerns and/or provide technical assistance.
3. Concerns do not require a formal written response to the Collaborative Applicant.

b) The recipient must respond to the Collaborative Applicant within ten (10)

business days of notification by;

1. Concurring and undertaking suggested corrective actions
2. Concurring and suggesting alternate corrective actions
3. Providing additional information to address the finding

Failure to provide written response to a finding may lead to a de-obligation of funds. However, upon receipt of the Notice of De-obligation, the recipient has thirty (30) days to submit a formal letter of appeal. The agency must:

1. Submit the appeal on a formal letterhead, addressed to HCD with a copy to the Collaborative Applicant's Board Chair.
2. The letter of appeal must present a high level of detail and explanation and must include an attached budget of proposed spending and any other documentation addressing the corrective action that has been found delinquent.

iv. Recordkeeping Requirements

Financial records, supporting documents, statistical records, and all other records pertinent to an award shall be retained for a period of three years from the date of submission of the final expenditure.

v. Recording Services in HMIS

All ESG recipients must be contributing HMIS organizations (CHO) utilizing the single HMIS system designated by the Continuum of Care Board of Directors for the collection of client level data of participants and recipients of ESG assistance.

The CoC Collaborative Applicant will establish an HMIS dashboard for each ESG recipient to monitor sub-recipient ESG program activity.

ESG recipients that represent domestic violence organizations, are prohibited from entering data in the HMIS. The Collaborative Applicant will provide written documentation of compliance of the collection of required data collection through review and periodic examination of the alternate data source.

SECTION A: PURPOSE

The Dos Rios CoC participates in a Homeless Management Information System (HMIS) to record and store client-level information about the numbers, characteristics, and needs of persons who use homeless housing and supportive services and for persons who receive assistance for persons at risk of homelessness.

HMIS is used to aggregate data about the extent and nature of homelessness over time; produce an unduplicated count of homeless persons; understand patterns of service use; and measure the effectiveness of homeless assistance projects and programs. Data produced is used for reporting, planning, and education.

SECTION B: LEAD AGENCY RESPONSIBILITIES

The Shasta County Housing Authority and Community Action Agency serves as the Lead Agency for HMIS and is responsible for:

- Designating a single information system as the official HMIS software for the geographic area
- Designating an HMIS Lead to operate the HMIS
- Providing for governance of the HMIS Lead, including:
 - The requirement that the HMIS Lead enter into written HMIS Participation Agreements with each Contributing HMIS Organization (CHO) requiring the CHO to comply with federal regulations regarding HMIS and imposing sanctions for failure to comply; and
 - The participation fee, if any, charged by the HMIS
- Maintaining documentation evidencing compliance with this part and with the governance charter
- Reviewing, revising and approving the policies and plans required by federal regulation

SECTION C: DESIGNATIONS

a) HMIS System

The Dos Rios CoC has designated the ServicePoint HMIS System as the official HMIS Software for the Continuum of Care.

b) HMIS Lead

The Colusa, Glenn, Trinity Community Action Partnership has been designated as the HMIS Lead Agency.

SECTION D: RESPONSIBILITIES OF THE HMIS LEAD

The HMIS Lead is responsible for:

- Ensuring the operation of and consistent participation by recipients of CoC and Emergency Solutions Grants (ESG) Program funds, including oversight of the HMIS and any necessary corrective action to ensure that the HMIS is compliant with federal requirements.
- Executing a written HMIS Participation Agreement with each CHO, which includes the obligations and authority of the HMIS Lead and CHO, the requirements of the security plan and privacy policy

with which the CHO must abide, sanctions for violating the HMIS Participation Agreement, and an agreement that the HMIS Lead and the CHO will process Protected Identifying Information consistent with the agreement.

- Serving as the applicant to the US Department of Housing and Urban Development (HUD) for CoC grant funds to be used for HMIS activities for the CoC's geographic area, as directed by the Colusa, Glenn, Trinity Community Action Partnership, and entering into grant agreements with HUD to carry out the HUD-approved HMIS activities.
- Monitoring and enforcing compliance by all CHOs with HUD requirements and reporting on compliance to the CoC and HUD.
- Monitoring data quality and taking necessary actions to maintain input of high-quality data from all CHOs.
- The HMIS Lead must submit a security plan, an updated data quality plan, and a privacy policy to the CoC for approval within six months after the effective date of the HUD final rule establishing the requirements of these plans, and within six months after the date that any change is made to the local HMIS. The HMIS Lead must review and update the plans and policy at least annually. During this process, the HMIS Lead must seek and incorporate feedback from the CoC and CHOs. The HMIS Lead must implement the plans and policy within six months of the date of approval by the Colusa, Glenn, Trinity Community Action Partnership Board.

SECTION E: DUTIES OF THE HMIS LEAD

a) Unduplicated Count

The HMIS Lead must, at least once annually, or upon request from HUD, submit to the Colusa, Glenn, Trinity Community Action Partnership an unduplicated count of clients served and an analysis of unduplicated counts, when requested by HUD.

b) Reporting

The HMIS Lead shall submit reports to HUD as required.

c) Privacy

The HMIS Lead must develop a privacy policy. At a minimum, the privacy policy must include data collection limitations; purpose and use limitations; allowable uses and disclosures; openness description; access and correction standards; accountability standards; protections for victims of domestic violence, dating violence, sexual assault, and stalking; and such additional information and standards as may be established by HUD in notice. Every organization with access to Protected Identifying Information (PII) must implement procedures to ensure and monitor its compliance with applicable agreements and the requirements of this part, including enforcement of sanctions for noncompliance.

d) HMIS Standards

The HMIS Lead, in contracting an HMIS vendor, must require the HMIS vendor and the software to comply with HMIS standards issued by HUD as part of its contract.

e) Participation Fee

The HMIS Lead shall charge a participation fee for CHOs. Each CHO will be provided two ServicePoint user licenses. Additional Bell Data user licenses or Advanced Reporting Tool (ART) licenses may

be purchased at an additional cost to the CHO.

SECTION F: RESPONSIBILITIES OF THE HMIS COMMITTEE

The HMIS Committee will work with the HMIS Lead to:

- Developing written HMIS policies and procedures in accordance with §580.31 for all CHOs.
- Develop, annually review, and, as necessary, revise for Board approval a privacy plan, security plan, and data quality plan for the HMIS, as well as any other HMIS policies and procedures required by HUD.
- Develop for Board approval and implement a plan for monitoring the HMIS to ensure that:
 - Recipients and sub-recipients consistently participate in HMIS;
 - HMIS is satisfying the requirements of all regulations and notices issued by HUD;
 - The HMIS Lead is fulfilling the obligations outlined in its HMIS Governance Charter and Memorandum of Understanding (MOU) with the Colusa, Glenn, Trinity Community Action Partnership, including the obligation to enter into written participation agreements with each contributing HMIS organization.
- Oversee and monitor HMIS data collection and production of the following reports:
 - Sheltered point-in-time count
 - Housing Inventory Chart
 - Annual Homeless Assessment Report (AHAR)
 - Annual Performance Reports (APRs)

SECTION G: HMIS POLICIES AND PROCEDURES

The HMIS Committee must develop written policies and procedures for the operation of the HMIS that apply to the HMIS Lead, its CHOs, and the Continuum of Care. These policies and procedures must comply with all applicable Federal law and regulations, and applicable state or local governmental requirements. The HMIS Committee may not establish local standards for any CHO that contradicts, undermines, or interferes with the implementation of the HMIS standards as prescribed in this part. Once these policies and procedures are developed, they must be approved by the Colusa, Glenn, Trinity Community Action Partnership Board.

SECTION H: RESPONSIBILITIES OF THE CONTRIBUTING HOUSING ORGANIZATION (CHO)

A CHO must comply with federal regulations regarding HMIS.

A CHO must comply with Federal, state, and local laws that require additional privacy or confidentiality protections. When a privacy or security standard conflicts with other Federal, state, and local laws to which the CHO must adhere, the CHO must contact the HMIS Lead and collaboratively update the applicable policies for the CHO to accurately reflect the additional protections.

SECTION I: JOINT HMIS LEAD-CHO RESPONSIBILITY FOR PRIVACY

The HMIS Lead and the CHO using the HMIS are jointly responsible for ensuring that HMIS processing capabilities remain consistent with the privacy obligations of the CHO.

ARTICLE X. DEFINITIONS

1. CoC Board: The primary decision-making group for the Dos Rios Continuum of Care, voted into their positions by the Dos Rios Continuum of Care members. The group is open to the public and has two levels of membership, voting members and non-voting members.
2. CoC Committees: Groups of volunteers who work throughout the year to accomplish specified tasks for the Dos Rios Continuum of Care. There are four standing committees, and the CoC Board can create ad-hoc committees as needed to support the Dos Rios CoC.
3. CoC Lead Agency: Agency that is designated to carry out the activities of the CoC including fiscal and compliance activities and CoC administrative duties.
4. Collaborative Applicant: Agency or organization designated by the CoC Board to be the entity that submits the CoC funding application to HUD; the Lead Agency is also the Collaborative Applicant.
5. Continuum of Care (CoC): A collaborative and strategic funding source from HUD that helps communities make progress towards preventing and ending homelessness in their communities. HUD also refers to the group of community stakeholders involved in homelessness as the "Continuum of Care."
6. Continuum of Care Interim Rule: Published by HUD in 2012, the CoC Interim Rule focuses on regulatory implementation of the Continuum of Care (CoC) Program, including the Continuum of Care planning process.
7. Coordinated Entry: A coordinated process designed to coordinate program participant intake, assessment, and provision of referrals. A centralized or coordinated assessment system covers the geographic area, is easily accessed by individuals and families seeking housing or services, is well advertised, and includes a comprehensive and standardized assessment tool. This definition establishes basic minimum HUD requirements for the Continuum's centralized or coordinated assessment system.
8. Operating Manual: A document that outlines the roles and responsibilities of the Dos Rios Continuum of Care Board, Continuum of Care Committee(s), the Lead Agency, the Collaborative Applicant and the Homeless Management Information System (HMIS) Lead with the intent to creating an inclusive, transparent process by which Dos Rios makes strategic decisions in order to meet the goals of preventing and ending homelessness.
9. HMIS: A computerized data collection application designed to capture client-level information over time on the characteristics of service needs of men, women, and children experiencing homelessness, while also protecting client confidentiality. It is designed to aggregate client-level data to generate an unduplicated count of clients served within a community's system of homeless services.
10. HMIS Lead Agency: Agency, organization or government department designated by CoC to administer and manage the HMIS; the HMIS Lead is also the Collaborative Applicant and Lead Agency.
11. HUD: Acronym used to refer to the federal Department of Housing and Urban Development that administers the Continuum of Care funding and program.
12. Point in Time (PIT): Annual count of homeless persons and households in a Continuum of Care geography; in this case the State of Dos Rios. The Point in Time count is an essential tool for planning and decision-making about homelessness and is required by HUD.

Continuum of Care Board of Director's Application Packet

The Colusa, Glenn, Trinity Community Action Partnership serves as the lead entity in the Dos Rios Continuum of Care. The Continuum of Care (CoC) is governed by a Board of Directors. The Continuum of Care Board is comprised of a group of community leaders, decision makers and experts in the provision of services to the homeless that will provide the vision, strategies and guidance to end homelessness in Colusa, Glenn and Trinity Counties.

The Colusa, Glenn, Trinity Community Action Partnership has served as the U.S. Department of Housing and Urban Development's (HUD) recognized decision making and planning board for the Counties of Colusa, Glenn and Trinity since 2014.

The Homeless Emergency Assistance and Rapid Transition to Housing Act of 2009 (HEARTH Act) amended the McKinney-Vento Homeless Assistance Act and this legislation consolidated the three separate McKinney-Vento homeless assistance programs into a single grant program known as the Continuum of Care. Additionally, the HEARTH Act expanded and codified into law the existing community-wide planning and application efforts of the CoC. The interim rule of the HEARTH Act went into effect on August 30, 2012.

The CoC is designed to promote community-wide commitment to the goal of ending homelessness; provide funding for efforts by non-profit service providers, states and local governments to re-house homeless individuals and families rapidly while minimizing the trauma and dislocation caused to homeless individuals, families and communities as a consequence of homelessness; promote access to and effect use of mainstream programs by homeless individuals and families; and optimize self-sufficiency among individuals and families experiencing homelessness.

The CoC Program includes both Continuum of Care program funds and Emergency Solutions Grant (ESG) funds.

The CoC Board is comprised of decision makers, homeless service providers, community leaders and formerly homeless persons who serve as the backbone of the community's response to homelessness.

If you have an interest in addressing the challenges of homeless in our communities, we encourage you to submit the following materials to Bill Wathen, CoC Administrator via email at bwathen@countyofglenn.net. The CoC board will review all applications and provide a prompt response back to every applicant.

- Letter of Interest and Experience (up to 300 words)
- CoC Board of Director's Application Form

Name:

Employer:

Position/Title:

Address:

Email:

Cell Phone:

Work Phone:

Fax:

Board Composition:

What service area, jurisdiction or special population do you represent? (Check all that apply)

- | | |
|---|--|
| <input type="checkbox"/> Homeless/Formerly Homeless | <input type="checkbox"/> Businesses |
| <input type="checkbox"/> Persons with substance use disorders | <input type="checkbox"/> Public Housing Agencies |
| <input type="checkbox"/> Persons with HIV/AIDS | <input type="checkbox"/> School Districts |
| <input type="checkbox"/> Veterans | <input type="checkbox"/> Mental Health Care Providers |
| <input type="checkbox"/> Persons who are chronically homeless | <input type="checkbox"/> Health Care Providers |
| <input type="checkbox"/> Families with children | <input type="checkbox"/> University/Academia |
| <input type="checkbox"/> Unaccompanied youth | <input type="checkbox"/> Affordable Housing Developers |
| <input type="checkbox"/> Persons who are seriously mentally ill | <input type="checkbox"/> Foundations |
| <input type="checkbox"/> Faith-Based Organization | <input type="checkbox"/> Law Enforcement |
| <input type="checkbox"/> Other: _____ | |

Statement of Commitment:

By my signature below, if nominated and elected to the Continuum of Care Board, I understand that I will attend, with frequency, the CoC Board Meetings held on the second Wednesday of every other month, unless rescheduled due to a holiday. I will collaboratively participate at each meeting and will share knowledge and information freely.

Signature: _____ Date: _____

Dos Rios Continuum of Care

Conflict of Interest Policy

Information for Reviewers of Grant Applications and for Individuals Responsible for Funding Decisions

The Dos Rios Continuum of Care Grant Review system relies on the professionalism of each reviewer to identify any conflict of interest (COI) or apparent COI that may affect or appear to affect the integrity of any grant review or funding decision process.

The Dos Rios COI rules for peer review for grant applications and funding decisions is as follows. In order to participate in the review meeting, you must:

- Review the appropriate set of rules below and screen the applications or proposals for real or apparent COI for yourself.
- Notify the Dos Rios Board Chair *immediately*:
 - If you have a COI that prevents you from serving on that review committee (see below), or
 - If you are assigned to an application or proposal with which you have a COI.
- Certify:
 - On the pre-meeting Conflict of Interest Certification at the bottom of this notice that you have identified any application or proposal with which you have a COI or appearance of a COI.

Reviews of Applications for Grants

You **may not be** on the grant review committee if:

- You are named on an application in a major professional role (Program Director/, Senior/Key Personnel, Other Significant Contributor, Project/Site/Core Director collaborator, sponsor, mentor, or conference organizer).
- You have a direct financial interest: you or your close family member would receive a direct financial benefit if an application is funded.
- You have a Major Professional Role in an application submitted to a Request for Applications (RFA) and the grant review committee will evaluate applications submitted in response to that RFA.

You **may be** on the grant review committee, but may not review certain applications, and **must leave the room** when:

- The Executive Director or anyone else on the application with a **major professional role** is from your agency, department or institution.
- You are planning a collaboration with anyone with a **major professional role** on the application.
- Within the past three years, you have published with, have collaborated with, or have been in a mentoring relationship with any person on the application who has a **major professional role**.
- The application includes a letter of support or reference letter from you.

- You serve as a member of the Advisory or Governing Board for the project under review or for a grant held by anyone playing a **major professional role** on the application.

Grant and Contract Reviews

You **may be** on the grant review committee and **may review** specific applications/proposals if (not considered a COI):

- An application originates from an agency where you have collaborators, but your collaborators are not listed on the application.
- You have an indirect financial interest of less than \$10,000.
- You, as well as a person with a major role on the proposed project, contribute data and information to the same repository or database.
- You are a member of a homeless network that involves a person with a major role on the proposed project.

Check only one:

I have read the Dos Rios Conflict of Interest Rules: Information for Reviewers of Grant Applications and for Individuals Responsible for Funding Decisions, and I hereby certify that, based on the information provided:

- I do not have a conflict of interest and do not present the appearance of conflict of interest with any of the applications/proposals for _____ funding to be reviewed.
- I have a conflict of interest or present the appearance of a conflict of interest with the specific applications/proposals for _____ funding and hereby recuse myself from their review.

Signature: _____

APPENDIX C-PROGRAM REQUIREMENTS FOR ALL PROGRAMS

Program Requirements for all Programs

- Programs must coordinate with other homeless services within the CoC
- Programs must coordinate with mainstream resources in the CoC including housing, social services, employment, education and youth programs for which participants may be eligible.
- Programs must have written policies and procedures and must consistently apply them to all participants
- Programs that serve households with children:
 - A staff person must be designated as the educational liaison that will ensure that children are enrolled in school, connected to appropriate services in the community, including early childhood program such as Head Start, Part C of the Individuals with Disabilities Education Act, and the McKinney Vento education services
 - The age and gender of a child under age 18 must not be used as a basis for denying any family 's admission to a project that provides shelter for families with children
- Programs receiving ESG and CoC funding must participate in HMIS (Homeless Management Information System), unless otherwise stated by federal regulations. However, all homeless programs are strongly encouraged to participate in HMIS
- Programs must meet minimum HMIS data quality standards
- Programs providing Domestic Violence or Legal Services may opt out of HMIS participation but must utilize a comparable database to collect HUD required data elements
- Programs must participate in Coordinated Entry Process and use the prioritization criteria established in the CEP documents
- Programs must conduct an initial evaluation to determine the amount and type of assistance needed to regain stability in permanent housing
- Program rules and regulations should be designed in the spirit of inclusion rather than as grounds for denial or termination. Programs should exercise judgment and examine all extenuating circumstances in determining when violations are serious enough to warrant termination so that a program participants' assistance is terminated only in the most severe cases
- Programs must have a formal procedure for terminating assistance to a participant that recognizes the rights of the participant(s) involved
 - Programs must use judgment and examine all extenuating circumstances in determining that a violation should result in termination
 - Every effort should be made to allow the participant to remain in the program; termination should only be exercised in the most severe cases
 - Termination does not necessarily preclude assistance at a future date
- Programs must make known that use of the facilities and services are available to all on a nondiscriminatory basis
- Programs may not engage in inherently religious activities such as worship, religious instruction or proselytization as part of the programs or services funded under the CoC or ESG. These activities can be conducted but must be separate and voluntary for program participants

APPENDIX D-RECORD KEEPING REQUIREMENTS FOR ALL PROGRAMS

Record Keeping Requirements for all Programs

Participant Recordkeeping Requirements include:

- All records containing personally identifying information must be kept secure and confidential
- Programs must have written confidentiality/privacy notice a copy of which should be made available to participants if requested
- Privacy notices must be posted at all intake locations specifically explaining HMIS use
- Documentation of homelessness (following HUDs guidelines)
- A record of services and assistance provided to each participant
- Documentation of any applicable requirements for providing services/assistance
- Documentation of use of coordinated entry process
- Documentation of use of HMIS/Release of Information signed annually
- Records must be retained for seven years as prescribed by HUD

Financial Recordkeeping Requirements include:

- Documentation for all costs charged to the grant
- Documentation that funds were spent on allowable costs
- Documentation of compliance with expenditure limits and deadlines
- Retain copies of all procurement contracts as applicable
- Documentation of amount, source and use of resources for each match contribution

APPENDIX E-OCCUPANCY STANDARDS FOR ALL PROGRAMS

Occupancy Standards for all Programs

All housing units, including scattered site programs owned and managed by private landlords, must meet applicable state or local government health and safety codes and have current certificate of occupancy for the current use and meet or exceed the following minimum standards: (For more detail refer to ESG regulations 576.403 (b) Minimum Standards):

- Buildings must be structurally sound to protect from the elements and not pose any threat to health and safety of the residents
- Must be accessible in accordance with Section 504 of the Rehabilitation Act, the Fair Housing Act and the Americans with Disabilities Act where applicable
- Must provide an acceptable place to sleep and adequate space and security for themselves and their belongings
- Each room must have a natural or mechanical means of ventilation
- Must provide access to sanitary facilities that are in operating condition, private and clean.
- Water supply must be free of contamination
- Heating/cooling equipment must be in working condition
- Must have adequate natural or artificial illumination and adequate electrical resources to permit safe use of electrical appliances
- Food preparation areas must have suitable space and equipment to store, prepare and serve food in safe and sanitary manner
- Building must be maintained in a sanitary condition
- Must be at least one smoke detector in each occupied unit of the program, and where possible near sleeping areas. The fire alarm system must be designed for hearing- impaired participants. There must be a second means of exiting the building in case of fire or other emergency

The Program, Record Keeping and Occupancy Standards as represented above apply to all programs regardless of the type of services/housing that they provide.

Order of Priority in CoC Program-Funded Permanent Supportive Housing

Recipients of CoC Program-funded PSH are required to follow the order of priority when selecting participants for housing in accordance with the CoC’s written standards while also considering the goals and any identified target populations served by the project, and in a manner consistent with their current grant agreement.

Due diligence should be exercised when conducting outreach and assessment to ensure that persons are served in the order of priority as adopted by the Dos Rios CoC. HUD and the CoC’s recognize that some persons—particularly those living on the streets or in places not meant for human habitation, might require significant engagement and contacts prior to their entering housing and recipients are not required to keep units vacant where there are persons who meet a higher priority within the CoC and who have not yet accepted the PSH opportunities offered to them. Street outreach providers should continue to make attempts with those persons using a Housing First approach to place as few conditions on a person’s housing as possible.

Order of Priority in CoC Program-Funded Permanent Supportive Housing Beds Dedicated to Persons Experiencing Chronic Homelessness and Permanent Supportive Housing Prioritized for Occupancy by Persons Experiencing Chronic Homelessness

1st Priority:

Chronically Homeless Individuals and Families with the Longest History of Homelessness and with the Most Severe Service Needs.

A chronically homeless individual or head of household as defined in 24 CFR 578.3 for whom **both** of the following are true:

The chronically homeless individual or head of household of a family has been homeless and living in a place not meant for human habitation, a safe haven, or in an emergency shelter for at least 12 months either continuously or on at least four separate occasions in the last 3 years, where the cumulative total length of the four occasions equals at least 12 months; **and**

The CoC Program has identified the chronically homeless individual or head of household as having severe service needs.

2nd Priority:

Chronically Homeless Individuals and Families with the Longest History of Homelessness.

A chronically homeless individual or head of household, as defined in 24 CFR 578.3, for whom both of the following are true:

1. The chronically homeless individual or head of household of a family has been homeless and living in a place not meant for human habitation, a safe haven, or in an emergency shelter for at least 12 months either continuously or on at least four separate occasions in the last 3 years, where the cumulative total length of the four occasions equals at least 12 months; **and**
2. The CoC or CoC program recipient has not identified the chronically homeless individual or the head of household, who meets all of the criteria in paragraph (1) of the definition for chronically homeless, of the family as having severe service needs.

3rd Priority:

Chronically Homeless Individuals and Families with the Most Severe Service Needs.

A chronically homeless individual or head of household as defined in 24 CFR 578.3 for whom both of the following are true:

1. The chronically homeless individual or head of household of a family has been homeless and living or residing in a place not meant for human habitation, a safe haven, or in an emergency shelter on at least four separate occasions in the last 3 years, where the total length of those separate occasions equals less than one year; **and**
2. The CoC or CoC program recipient has identified the chronically homeless individual or the head of household, who meets all of the criteria in paragraph (1) of the definition for chronically homeless, of the family as having severe service needs.

4th Priority:

All Other Chronically Homeless Individuals and Families.

A chronically homeless individual or head of household as defined in 24 CFR 578.3 for whom both of the following are true:

1. The chronically homeless individual or head of household of a family has been homeless and living in a place not meant for human habitation, a safe haven, or in an emergency shelter for at least 12 months either continuously or on at least four separate occasions in the last 3 years, where the cumulative total length the four occasions is less than 12 months; **and**
2. The CoC or CoC program recipient has not identified the chronically homeless individual or the head of household, who meets all of the criteria in paragraph (1) of the definition for chronically homeless, of the family as having severe service needs.

Where a CoC or a recipient of CoC Program-funded PSH beds that are dedicated or prioritized is not able to identify chronically homeless individuals and families as defined in 24 CFR 578.3 within the CoC, the order of priority in the next section may be followed.

Order of Priority in Permanent Supportive Housing Beds Not Dedicated or Prioritized for Persons Experiencing Chronic Homelessness

CoC Program-funded *non-dedicated and non-prioritized* PSH should offer housing to chronically homeless individuals and families first, but minimally are required to place otherwise eligible households in an order that prioritizes, in a nondiscriminatory manner, those who would benefit the most from this type of housing, beginning with those most at risk of becoming chronically homeless.

1st Priority:

Homeless Individuals and Families with a Disability with the Most Severe Service Needs

An individual or family that is eligible for CoC Program-funded PSH who has been living or residing in a place not meant for human habitation, a safe haven, or in an emergency shelter for any period of time, including persons exiting an institution where they have resided for 90 days or less but were living or residing in a place not meant for human habitation, a safe haven, or in an emergency shelter immediately prior to entering the institution and has been identified as having the most severe service needs.

2nd Priority:

Homeless Individuals and Families with a Disability Coming from Transitional Housing

An individual or family that is eligible for CoC Program-funded PSH who is coming from transitional housing, where prior to residing in the transitional housing lived on streets or in an emergency shelter, or safe haven. This priority also includes homeless individuals and homeless households with children with a qualifying disability who were fleeing or attempting to flee domestic violence, dating violence, sexual assault, or stalking and are living in transitional housing, all are eligible for PSH even if they did not live on the streets, emergency shelters, or in a safe haven.